Basic Guidelines for Interacting With People With Disabilities

- **“Person First” Language Should Always Be Used** - generally speaking, when you are describing a person with a disability, we should use words that emphasize the person-hood, wholeness, and abilities of the person.
  
  Examples:
  - “person with a disability” not “the disabled”
  - “person who is blind” not “a blind person”

- “Disability” is the most generally accepted term; many disability advocates discourage the use of “handicap”

### Golden Rules of Etiquette

- Rule 1: Talk Directly To The Person
- Rule 2: When in Doubt, ASK

### Offering Assistance

1. It is okay to offer assistance
2. Ask before providing assistance
3. Clarify what type of assistance is desired
4. Be the assistant, NOT THE DIRECTOR

### PEOPLE WITH MOBILITY DISABILITIES

1. **My Chair, My Body** - People who use a wheelchair, walker, or cane often consider this technology as an extension of their body. Wheelchairs are NOT footstools, stepladders, or fire hazards. They are an important part of a person and should be treated with dignity and respect. Do not push a person’s wheelchair or grab the arm of someone walking with difficulty, without first asking if you can be of assistance. Never move someone’s crutches, walker, cane or other mobility aid without permission.

2. Talk face to face

3. Position yourself at the same eye contact level.

4. **Do not make assumptions about what a person can and cannot do.** A person with a physical disability is the best judge of his or her own capabilities.
PEOPLE WITH COMMUNICATION DISABILITIES

1. **Take time, relax, and listen** - With a little time and patience, you can converse comfortably with a person with a communication disability. Don’t try to rush the conversation or second guess what a person will say. Do not finish the person’s sentences.

2. It’s okay to say, “I don’t understand”.

3. **Solicit and provide feedback** - If necessary, repeat your understanding of the message in order to clarify and/or confirm what was said.

4. **Talk to people with speech difficulties as you would talk to anyone else.** Be friendly; start up a conversation. Speak in your regular tone of voice.

5. **Ask the person for help in communicating with him or her.** If the person uses a communication device such as a manual or communication board, ask the person how best to use it.

PEOPLE WITH HEARING DISABILITIES

1. “**Hearing disability,**” “**hard of hearing,**” and “**deaf**” mean different things. “Hearing disability” refers to persons who are hard of hearing & persons who are deaf. “Deaf people” often seek to utilize their vision skills for communicating while hard of hearing persons often seek to retain their listening/speaking skills.”

2. It’s okay to use “the deaf” or “deaf person,” which are an exception to the “person-first language” rule.

3. **Using a TTY** (Tele-type; many hearing people refer to this as a TDD) - Make your communication clear, simple and concise. Abbreviations typically used:
   - **GA** - “Go ahead” means the person has finished their statement and the other person can start typing.
   - **Q** - Use instead of a question mark
   - **SK** - Means you want to conclude your conversation; when you read “SK”, type “SKSK” if you are completely finished talking.

4. **Using an interpreter** - Always address your comments, questions and concerns directly to the person to whom you are talking, never to the interpreter. Always face the individual, and not the interpreter. Remember that the interpreter may lag a few words behind – especially if there are names or technical terms to be finger-spelled – so pause occasionally to allow him or her time to translate completely and accurately.

5. **Ask the person how he or she prefers to communicate.** If you are writing back and forth, don’t talk, because the person cannot read your lips and note at the same time. If you do not understand something that is being said, ask the person to write it down. The goal is communication; do not pretend that you understand if you do not.

6. **Before you start to speak, make sure you have the attention of the person you are addressing.** A wave, a light tap on the shoulder, or other visual/tactile signals are appropriate to get someone’s attention.

7. **When talking, face the person.** A quiet, well-lit room is most conducive to effective communication. If you are in front of the light source—such as a window—with your back to it, the glare may obscure your face and make it difficult for the person who is hard of hearing to speech read. Avoid chewing gum, smoking or obscuring your mouth with your hand while speaking.
PEOPLE WITH VISION DISABILITIES

1. **Blind doesn’t mean blind** - having a vision disability does NOT mean a person lives in total darkness.

2. **Introduce yourself** - Tell the person your name and your role if it’s appropriate, such as security guard, case worker, or receptionist. Be sure to introduce the person to others in a group, so that they are not excluded.

3. **Hello & Goodbye**: Don’t assume that people with vision disabilities remember your voice. It is considered rude to go to a person with a visual disability and ask, “Do you remember my voice?” Identify yourself when you approach a person with a vision disability & tell them when you are leaving the conversation or area.

4. **Communication** - Face the person and use a normal tone of voice (for some reason, people with vision disabilities are often shouted at). It is okay to use vision references such as “see” or “look”.

5. **Orientation** - It is considered polite to indicate your position verbally or if needed, with a light tap on the shoulder / hand. However, keep physical contact reserved. If you are offering directions, be as specific as possible, and point out obstacles in the path of travel. Use clock cues (“The door is at 2 o’clock”)

6. **Assistance** - For mobility assistance, the best practice is to offer your elbow and allow the person with the vision disability to direct you when assisting him/her with their mobility. Don’t grab, don’t propel, or attempt to lead them. Offer to hold or carry packages in a welcoming manner.

7. **Service Animals** - A guide dog should never be petted or talked to without the permission of its owner. The dog is working and needs to concentrate.

8. **Avoid Clichés** like: “the blind leading the blind”; “What are you, blind?”; “I’m not “blind you know”

PEOPLE WITH MENTAL (PSYCHIATRIC) DISABILITIES

1. The terms mental illness & psychiatric disability are essentially interchangeable. Some groups and individuals prefer one term to the other, but in general both terms are considered acceptable. It is also okay to say “someone who has mental health issues”.

2. **Medications**: People with psychiatric disabilities do not necessarily need to take.

3. **Intelligence**: People with psychiatric disabilities have average to above average intelligence in comparison to the general population. Though People with mental illness DO NOT have mental retardation, there are some people with mental retardation who have some mental health issues.

4. **Do not assume that people with psychiatric disabilities are violent**; this is a myth, and the reality is that people with psychiatric disabilities are more likely to be the victim rather than the perpetrators of violence.
   * Do not assume that a person with a psychiatric disability is unable to cope with stress.
   * As in the general population, people with psychiatric disabilities exhibit a wide range of behaviors.
   * If someone with a psychiatric disability seems stressed, ask calmly, if there is anything you can do to help, then respect his or her wishes.

5. People with psychiatric disabilities often know what is best for them and can demonstrate good judgment.
PEOPLE WITH EPILEPSY

1. Medication & Frequency - Most (about 65%) seizure disorders are controlled with medication, and most have infrequent seizures while on medication.

2. A person cannot swallow his/her tongue during a seizure. DO NOT place anything in her or her mouth.

3. People who have epilepsy are not violent against themselves or others during seizures. Certain safety precautions should be taken so nobody is hurt accidentally. During a seizure, move sharp objects, and place a pillow under the person’s head.

4. Discuss with the person with a seizure disorder what his/her particular needs are.

MULTIPLE CHEMICAL SENSITIVITY AND RESPIRATORY DISABILITIES

1. People with multiple chemical sensitivity and respiratory disabilities such as asthma or emphysema react to toxins in the air. Stale air, fumes from cleaning products, perfume, carpeting, air freshener or even the fumes from magic markers can trigger a severe reaction.

2. Avoid spray-cleaning tables, windows or other surfaces while people are in your place of business. If you must use a spray product, spray or pour it closely into the cloth, not into the air. Use less-toxic products when possible.

3. Request that staff who have contact with the public go easy on fragranced body-care products like cologne, hair spray, hand lotion, and after-shave.

PEOPLE WITH DEVELOPMENTAL / COGNITIVE DISABILITIES (FORMERLY MENTAL RETARDATION)

1. Avoid the term mental retardation: People with this disability prefer the term “developmental disability.” (Mental retardation is one type of developmental disability.)

2. People with developmental disabilities are not “eternal children.” These Adults should be treated and spoken to in the same fashion as other adults.

3. Like everyone else, people with developmental disabilities are extremely diverse in their capabilities and interests. Avoid stereotypes (such as the assumption that all people with developmental disabilities enjoy doing jobs that are repetitive, or want to work in fast food or supermarkets).

4. Many people with developmental disabilities can read and write. Don’t assume that the person does not have academic skills, such as reading, writing, and the ability to do mathematics. While an individual’s disability may significantly impact these areas, many people have at least some level of these academic skills.

5. Even if a person’s academic skills are limited, he/she still has much to share and contribute. A lack of academic skills does not mean that people don’t have ideas and thoughts which are of value. Provide opportunities for people with limited academic skills to contribute verbally, and take what they have to say seriously. Ensure that people who have difficulties reading or writing have equal access to written materials (for example, by taping them, or having someone review the materials with them orally).
6. **Giving instructions** People with developmental disabilities can understand directions if you take your time and are patient in giving instructions. When giving instructions, proceed slowly, and ask the person to summarize the information to ensure that it has been understood. You also may have to repeat yourself when providing instructions, in order for the individual to take in all the information you are giving them.

7. **Don’t defer to the staff person or caregiver** When a person with a developmental disability is accompanied by another person such as a staff person, caregiver, or family member, don’t defer questions and comments to them. Speak directly to the person with the disability, and allow the person to speak for him/herself.

8. **People with developmental disabilities may be anxious to please.** During an interview, the person may tell you what she thinks you want to hear. In certain situations, such as a doctor’s examination, it can have grave consequences if your interview technique is not effective. Questions should be phrased in a neutral way to elicit accurate information. Verify responses by repeating each question in a different way.

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**Note:** Much of this material is adapted from “Interacting with People with Disabilities - An Etiquette Handbook”, published by the Region VI Rehabilitation Continuing Education Program, Hot Springs, AR as well as the United Spinal Association Disability Etiquette: Tips on Interacting with People with Disabilities.