

Interacting with Persons who have a Disability

Tips on interacting with people in a manner that best accommodates their disability

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These fact sheets are intended to be used by lawyers who have clients with disabilities, but contain information that may be useful to other professionals and members of the public.

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Interacting With Persons Who Have A Mobility Disability

What is a Mobility Disability?

There are many reasons why people use mobility aids. A mobility disability may be congenital (present at birth) or may be acquired as a result of an injury, accident, the onset of disease or illness. Often aging can necessitate an individual's use of a mobility aid.

Each person's need for assistive devices and support services is unique. A person who uses a wheelchair may have some mobility and may be able to transfer in and out of the chair depending on the situation.

Assisting a Person with a Mobility Disability

Never assume that a person with a disability requires assistance. Instead, ask whether the person wants your help.

There are many types of mobility aids, such as wheelchairs, scooters, crutches, leg braces, canes and walkers. A person's mobility aid should not be moved without first requesting permission to do so. Having a mobility aid within reach facilitates the person's capacity to move independently.

If assisting a person with their mobility aid, ask the person how you should handle the device. For example, a wheelchair has brakes and the brakes should be on before assisting the person in and out of the chair. A scooter may need to be parked a certain way in order to access an electrical outlet. Ask the person where and how they would like their mobility aid to be stored. Some equipment may be folded or temporarily detached.

Some persons view their mobility aids as extensions of themselves. Never lean on or rest your foot on a mobility device and do not handle a mobility device inappropriately.

Communicating and Meeting with a Person with a Mobility Disability

Make sure that you are communicating with the person and not focusing on their mobility aid or the person accompanying them.

When speaking to someone who uses a wheelchair, remember to give the person a comfortable viewing angle of yourself. Having to look straight up is not a comfortable viewing angle. Sit, squat or kneel in order to make eye contact with the person and to ensure that each of you can hear and speak directly to the other.

When walking with a person using a mobility aid, let him or her set the pace.

Before making an appointment ensure your meeting place and the route the person will be taking are accessible. Ask the person how they will be traveling. Remember to consider distance, accessibility of route, weather conditions and accessibility of destination premises. Avoid physical obstacles, such as steep inclines, stairs, unpaved road, lengthy routes and small elevators. Be clear about the route and distance when giving directions.

Remember to consider sufficient lead time for pick up and drop off for accessible transit, which can be considerable, as well as sufficient location space for boarding and disembarking from accessible transit. Ensure that there is accessible parking at the destination premises.

Remember that it may take the person with a mobility disability a longer time to perform a task or get to a destination.

For More Information

This information is general and does not apply to all situations. Each person's disability and need for support are unique. ARCH Disability Law Centre's website contains links to organizations that can offer more information on interacting with persons with mobility disabilities. Please see www.archdisabilitylaw.ca and click on Useful Links.

Interacting With Persons With Vision Loss

What is Vision Loss?

Vision loss and blindness can result from a variety of causes, including congenital (present at birth) conditions, injury, brain trauma, or as the result of other illnesses such as diabetes and multiple sclerosis.

Not all people with vision impairments are blind. A person with vision loss may have some degree of sight, such as an ability to see shapes or a blur, like looking through tissue or frosted glass. Some people have partial or low vision, such as central vision or side vision. Persons who are blind may have limited or no vision. If you need to know how much vision a person has, politely ask him or her.

Making Written Materials Accessible

Some, but not all, persons with vision loss read braille. There are a variety of assistive technologies that persons with vision loss use to make information more accessible.

In addition to braille, persons with vision loss use consumer products and assistive technologies such as screen readers, voice-activated software, talking watches, audiotapes and braille displays to read. Ensure that your written communication is provided in an accessible format, such as electronic text format for conversion by computer accessibility software. When corresponding with a person with vision loss, ask the person what type of correspondence they prefer.

Some people with low or partial vision read using special glasses, magnification or adapted computer screens. Ensure printed materials are in large, bold, square print without serifs. Written materials should use an accessible font like Arial and be 18 point or larger size type. The type should be in a colour that contrasts with the paper or screen.

Communicating and Meeting with a Person with Vision Loss

Do not surprise or grab someone who is blind. Announce your presence by identifying yourself and indicating where you are in the room. When in a group setting, address a person with vision loss by name so that they know you are speaking to them.

Be careful not to rely on your own body language, pointing and gestures to communicate unspoken cues or implicit messages.

Assist the person's orientation by describing the layout of the room and using clock direction. Give the person verbal information that is visually obvious to those who can see.

Do not move items (furniture, personal belongings) after a person with vision loss has adjusted to the positioning of the item.

De-clutter the walking path. Make sure doors are fully open or closed.

When giving directions to a person with vision loss, describe the route, slopes, obstacles, distance by number of steps, and the need to veer left and right.

When walking with a person who has vision loss, offer them your arm or elbow and lead the way. Lead only after they have accepted your offer to do so. Allow them to hold your arm, rather than you holding them. Service animal users may choose to hold your arm or follow you or your voice. Do not pull or forcibly lead. If you are helping a person sit down, guide their hand to the back of the chair.

Speak clearly in a normal speed and tone of voice – there is no need to raise your voice or slow down.

Some people with vision loss use a cane or a service animal. Do not attempt to touch a person's cane. When a guide dog is wearing its harness, it is on duty and should not be petted or distracted. Do not touch or give the animal food or treats without the permission of the owner.

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Interacting With Persons Who are Deaf, Culturally Deaf, Oral Deaf, Deafened or Hard of Hearing

What do Deaf, Culturally Deaf, Oral Deaf, Deafened and Hard of Hearing mean?

A hearing impairment may be congenital (present at birth), age-related, hereditary, or as a result of an injury, accident or the onset of disease or illness (e.g. spinal meningitis and rubella/German measles).

Being deaf, deafened or hard of hearing does not mean that the person has an intellectual disability, nor does it necessarily mean the person is unable to speak.

Not all people with hearing impairments are deaf or use the same forms of communication. The term deaf is generally used to describe persons who have a profound hearing loss. Some people who are deaf use sign language to communicate and others use speech.

Persons who are culturally Deaf identify with and participate in the language, culture and community of Deaf people and use visual languages such as American Sign Language (ASL) or Langue des signes québécoise (LSQ) to communicate.

Persons who are oral deaf used spoken language during their childhood/ teenage years and may use sign language in later life.

Persons who are deafened experienced a profound hearing loss later in life. Late-deafened adults may not understand speech without visual clues such as computerized notetaking, speechreading, lipreading or sign language.

Persons who are hard of hearing have some residual hearing, which may be boosted by amplification through assistive technology. Assistive Listening Systems (ALS) or Assistive Listening Devices (ALD) are amplifiers that bring sound directly into the ear. These include hearing aids and cochlear implants. Often, persons who are hard of hearing use spoken language as their primary means of communication and may supplement their residual hearing with speechreading, hearing aids and technical devices.

Communicating and Meeting with a Person who is Deaf, Deafened or Hard of Hearing

When communicating in person with someone who is hard of hearing, eliminate environmental and background noise as much as possible by closing doors and windows when appropriate. Avoid rooms with poor acoustics. If the person is using hearing aids, avoid conversations in large, open and noisy surroundings.

Politely ask a person who is deaf, deafened or hard of hearing if they can hear you and if they need you to speak up or repeat anything.

Face the person and be aware that tinted glasses, beards and moustaches may make it more difficult for the person to understand what you are saying.

When communicating in person with someone who is deaf, deafened or hard of hearing, speak appropriately, not too fast or too slow. Avoid over-enunciation. Increased volume does not help. Yelling distorts the face and makes lipreading difficult.

Be careful not to rely on auditory clues, such as coughs or pauses, to communicate unspoken or implicit messages.

When approaching someone who is deaf, get the person's attention with a gentle tap on the shoulder or by a wave of the hand.

It may be appropriate to use the services of a qualified sign language interpreter. When doing so look at and speak to the person who is deaf, deafened or hard of hearing, not the interpreter.

Consider using text technology such as written notes, computers, email and TTY (teletypewriter or text telephone) as different means to communicate. Ask the person what means of communication they prefer.

Bell Canada offers the Bell Canada Relay Service, in which an operator will relay messages between persons using regular telephones and persons using TTY machines. Ask the person if they wish to communicate through this service.

Have a pen and paper or computer available during face to face discussions. Writing or typing key points may facilitate communication and ensure that the important information is conveyed.

Many persons who are deaf, deafened or hard of hearing need the services of notetakers or real-time captioning. A notetaker is useful for persons who need to watch the presentation for lipreading or the sign language interpreter and so cannot take notes. A notetaker summarizes what is spoken.

Real-time captioning is similar to court stenography in that the spoken words are simultaneously processed by the captionist into a typed document projected onto a screen. Real-time captioning is a verbatim print representation of the spoken material.

For More Information

This information is general and does not apply to all situations. Each person's disability and need for support are unique. ARCH Disability Law Centre's website contains links to organizations that can offer more information on interacting with persons who are deaf, deafened or hard of hearing. Please see www.archdisabilitylaw.ca and click on Useful Links.

Interacting With Persons Who Have A Speech Disability

What is a Speech Disability?

A speech disability may be congenital (present at birth), age-related, acquired as a result of a brain injury or accident, the onset of disease or illness, hearing loss, intellectual disability, physical disability or neurological disorders. A speech disability does not mean the person has an intellectual disability or a hearing impairment.

Communicating and Meeting with a Person with a Speech Disability

Persons with speech disabilities that limit their ability to communicate verbally often use augmentative communication devices or systems. Augmentative communication systems involve objects, pictures, graphic symbols (such as those depicted on communication boards), manual signs, finger spelling, or artificial voice outputs.

Blissymbolics is a graphic language often printed and presented on the surface of a tray, sometimes in books and increasingly frequently on personal computers. The person will point to the letters, words or pictures to indicate their message. When communicating with a person using Blissymbolics, say the letters, words or pictures out loud so the person knows that you understood the correct point. If you are not sure what the person means, wait until they are finished and politely ask them.

Persons who have speech or language disabilities may rely on gestures, facial expressions and body movements.

Make sure that you are communicating with the individual and not focusing on their communication device or the person accompanying them.

Be patient. People who have speech disabilities may communicate at a slower speed. Do not interrupt, attempt to answer for the person with the speech disability, or “finish their thoughts.” Convey clearly that the message is understood, but do not try to hurry up the discussion by filling in gaps. Persons who spell out words using augmentative communication devices may use short forms, such as B4 meaning before, to speed up their communication.

When meeting with a person with a speech disability, it may be necessary to allow for extra time.

Speak to the person with a speech disability as you would to everyone else. Do not speak louder or slower than you usually would.

It may be necessary to ask some questions that require only a short answer or a “yes or no” answer to simplify and clarify the conversation. However, do not limit the conversation to “yes or no” communication as this can restrict and close the discussion.

Do not pretend to comprehend when you did not understand what was said. It is acceptable to indicate that you did not understand. Politely ask the person to repeat what they said.

When in doubt about what the person said, tell them you are seeking confirmation, recap what they said in point form and ask them if you understood correctly.

You can use gestures and objects to help facilitate communication, such as pictures, demonstrations and body language.

Use concrete language and avoid figures of speech and metaphors, which can be confusing.

You can support a person who uses an augmentative communication system by ensuring that you know how they communicate and how you can facilitate their communication. Most augmentative communication system users have written instructions that tell you how they communicate and what you can do when communicating with them. These instructions are often attached to the communication display or wheelchair tray.

If the person with the speech disability does not have an augmentative communication system, ask them if they would like to use paper and pen or computer to highlight key points to ensure that the important information is conveyed.

For More Information

This information is general and does not apply to all situations. Each person's disability and need for support are unique. ARCH Disability Law Centre's website contains links to organizations that can offer more information on interacting with persons who have a speech disability. Please see www.archdisabilitylaw.ca and click on Useful Links.

Interacting With Persons Who Have An Intellectual Disability

What is an Intellectual Disability?

Intellectual disabilities may be congenital (present at birth), acquired through an accident, or related to a physical disability or a neurological disorder.

An intellectual disability may affect learning, memory, problem solving, planning and other cognitive tasks. Individuals with intellectual disabilities vary widely in their abilities, and definitions of intellectual disability also differ.

Communicating with a Person with an Intellectual Disability

When communicating with a person with an intellectual disability, it is not necessary to change the inflection of your voice or to use language that is meant for children. An adult with an intellectual disability is not a child. They have many years of life experience and it is demeaning to treat them like a child.

Maintain the eye contact and body language you would typically use during any other conversation.

While it may be necessary to simplify your language or shorten your sentences, persons with an intellectual disability should be treated with dignity and respect and a fulsome and comprehensive discussion should occur.

Communication may be facilitated by using diagrams, demonstrations or hands-on modeling.

The most important thing to focus on during a conversation with a person with an intellectual disability is the overall goal of the conversation.

Try to recognize the capabilities and potential of each person and adapt to them.

If there is some doubt in your mind whether you were understood, politely ask for confirmation. If necessary, rephrase your statement to ensure that the person understands what you are saying.

Listen carefully and be prepared to explain things in different ways.

If you are in a public area with many distractions, ask the person if they would like to move to a quiet or private location.

Be aware that medication may slow the individual's speech or reactions. A lack of response or slow response does not mean the person is being rude.

A person with an intellectual disability may take more time to absorb information so ensure that you have sufficient time to meet and review things. You may need to repeat your ideas on more than one occasion.

Ways to help a person with an intellectual disability to absorb information may include providing a written schedule for a meeting in advance, providing a written summary of meeting minutes, sending reminders of meetings, or providing a written list of tasks to be completed.

Capacity

An intellectual disability does not automatically mean the person lacks capacity to make decisions. Merely having a particular diagnosis that may affect capacity, such as an intellectual disability, does not affect an individual's capacity to instruct counsel unless there is a causal connection between the mental impairment and the consequent incapacity to instruct counsel.

When considering whether your client can instruct you, remember that there is a presumption that an adult client has capacity to give you instructions, and that this presumption applies whether or not your client has a disability. More information on capacity issues can be found on ARCH Disability Law Centre's website at www.archdisabilitylaw.ca/publications/.

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Interacting With Persons Who Have A Mental Health or Psychiatric Disability

What is a Mental Health or Psychiatric Disability?

Mental health disabilities have no single cause. They can be biological, psychological, and social.

There are a broad range of mental health or psychiatric disabilities, including schizophrenia, depression, manic depression/ bipolar disorder, anxiety disorders such as obsessive compulsive disorders, panic disorders, phobias and others.

A person with a mental health disability may exhibit no symptoms for long periods of time as mental health problems are often episodic. The type, intensity and duration of symptoms vary from person to person, making it difficult to predict symptoms and functioning.

Communicating with a Person with a Mental Health or Psychiatric Disability

When interacting with a person with a mental health or psychiatric disability, find out how the person prefers to identify themselves with respect to their disability. For example, a person may prefer to be called a “psychiatric patient,” a “client,” a “consumer,” a “consumer/survivor,” a “survivor” or a “user”. The identifier used by an individual is illustrative of how they think about themselves in relation to the larger mental health system. By adopting the language they prefer, you will indicate that you are sensitive to mental health issues, which may ease the person’s comfort level and facilitate communication.

It is important to be respectful, patient, flexible and positive when interacting with persons with mental health or psychiatric disabilities.

The actions of a person with a mental health or psychiatric disability may seem hostile, antagonistic or bizarre. Do not be overly concerned by a sudden change in mood, speech pattern or volume, a burst of energy or anger, or an indecipherable communication. All of these may be aspects of the disability or side-effects of medication.

Resist the tendency to focus on the person’s behaviour and instead focus on the overall goal of the conversation.

Be aware that medication may slow the individual’s speech or reactions and a lack of response or slow response does not mean the person is being rude.

The person may have medication induced lethargy, memory loss, mumbling or slurring. Certain medication can trigger involuntary muscle movements, such as restlessness, pacing, shuffling and facial grimaces.

Meeting with a Person with a Mental Health or Psychiatric Disability

People with mental health or psychiatric disabilities may occasionally have difficulty concentrating. If this is the case, consider breaking down tasks into manageable steps and arranging shorter meeting periods. Written instructions, reminders and clear communication can facilitate interactions and address memory loss and concentration concerns.

If you are in a public area with many distractions, ask the person if they would prefer moving to a quiet or private location.

A person with a mental health or psychiatric disability may benefit from the support of a person whom they know and trust in stressful or public situations.

Capacity

It is important to keep in mind that merely having a particular diagnosis that may affect capacity, such as a schizophrenia or dementia, does not affect an individual's capacity to instruct counsel unless there is a causal connection between the mental impairment and the consequent incapacity to instruct counsel.

When considering whether your client can instruct you, remember that there is a presumption that an adult client has capacity to give you instructions, and that this presumption applies whether or not your client has a disability. More information on issues of capacity can be found on ARCH Disability Law Centre's website at www.archdisabilitylaw.ca/publications/.

For More Information

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Interacting With Persons Who Have A Learning Disability

What is a Learning Disability?

A learning disability usually affects one or more processes related to learning, which includes the manner in which a person takes in, comprehends, retains or expresses information. A learning disability can affect a person's ability to pay attention and focus, collect and coordinate information, remember, reason, communicate, read, write, spell or calculate.

Learning disabilities are not due to hearing or vision impairments, intellectual disabilities, socio-economic factors, cultural or linguistic differences, lack of motivation or ineffective teaching. However, any or all of these factors may further complicate the challenges faced by persons with learning disabilities.

Communicating with a Person who has a Learning Disability

When interacting with a person with a learning disability, politely ask the person to provide you with guidance as to how they best learn and understand information. Be attentive to how you can build upon learning opportunities and relay information.

Be aware that what appears to be a simple and logical way to carry out a task for you may not be the most logical way for a person with a learning disability. Conversely, what might appear to be a complicated way of doing something may be the easiest way for the person with a learning disability to complete the task.

Remember that persons with learning disabilities may have nonlinear thought processes, which may seem confusing to persons without learning disabilities.

Be flexible with your approach. There are a variety of different ways to learn. For example, some people prefer lists and notes as the best means to learn, some people learn better from visual diagrams, and for others practice and repetition ensure success.

Accept that some tasks may take longer to perform or complete. Have realistic expectations with respect to deadlines.

Communicate with the person with a learning disability in a setting with minimal distractions.

Be aware that "symptoms" of learning disabilities may be more apparent or aggravated at the end of the day or when the individual is fatigued.

Don't assume that a person with a learning disability has understood, or conversely, failed to understand you. Politely ask whether or not you provided sufficient information. Clarify what you have said by summarizing the information. Be brief and to the point.

When a new or altered routine is necessary, notify the individual, provide explanation of what can be anticipated and reduce surprises and confusion.

Be aware that as situations change, so may the person's ability to process information and communicate. Just because a person's learning disability affects them in a particular way in one setting, does not mean that it will affect them the same way in another setting. Do not be rigid or expect that the strategies and accommodations used in one setting will apply in a different setting.

Persons with learning disabilities may use assistive technologies, such as interactive videos, voice output/ text to speech systems, variable speech control tape recorders, or assistive software programs. Ask the person with the learning disability whether they use assistive technologies and how you can incorporate these technologies into your communication.

For More Information

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