

Two Models of Disability:

A Contrast

Medical Model	Social Model
Disability is a deficiency or abnormality	Disability is a difference from average
Being disabled is negative	Being disabled, in itself, is neutral
Disability is in the individual	Disability derives from the interaction between the individual and society
The remedy for disability-related problems is cure or normalization	The remedy is changing the interaction between the individual and society
The agent of remedy is the professional	The agent of remedy can be: <ul style="list-style-type: none">• the individual• an advocate• anyone who changes the interaction

Be an Ally to Disabled People

Disabled people are everywhere, and yet are mostly invisible to the non-disabled world. Everyone grew up learning stereotypes about disabled people. Some of these stereotypes are negative (“helpless,” “dependent,” “useless”). Others seem positive but are just as limiting (“cheerful,” “inspiring,” “brave”). In order to end disability oppression, nondisabled people need to learn how to be allies to disabled people.

respect

- Recognize that disabled people are inherently worthwhile.
- Listen to disabled people’s stories, experiences, and perspectives.
- Understand that having a disability does not make our lives any more inspirational, pitiful or tragic than yours. Our disabilities are ordinary and familiar parts of who we are.
- Ask before you offer help to a disabled person. What you assume is helpful may not be. Start with a friendly but non-intrusive question: “Can I provide assistance?” or “Can I get that for you?” Be aware that your offer may not be accepted. Disabled people are the experts about our own lives and what we need.
- Don't ask intrusive questions, however well-intentioned. Because of how disabled people are separated from society, many of us deal with daily curiosity about our bodies and lives. This can be irritating, exhausting, and demeaning.
- Challenge your own assumptions. Many people have disabilities that might not be apparent to you. Everyone has a right to request and use the accommodations they need without being criticized or questioned.
- Ignore service dogs while they’re working. Don’t pet, feed, or interact with them.

language

- Don’t use the words “cripple,” “defect,” “spastic,” “lame,” “retard,” and “crazy.” These words have long been used to bully and oppress disabled people. You may hear disabled people calling each other “crip” or “gimp,” This is “insider” language, akin to LGBT people calling each other “queer,” but isn’t appropriate language for non-disabled people to use.
- Use the phrase “disabled people” or “people with disabilities.”
- When you hear other people use ableist language, take the opportunity to challenge and educate.
- Don’t ask, “What’s wrong with you?” Disabled people have many different relationships with our bodies/minds. Don’t assume you know what’s right or wrong.

a community resource—please distribute widely
created by disability rights activists
for more info: eclare@gmavt.net or www.eclare.com

access

- Work to create accessibility in your community, workplace, and place of worship. Ramps and elevators are vital, but access doesn't stop there.
- Access means creating an inclusive and welcoming space for all members of your community:
 - Ensure that people with mobility aids and/or personal attendants can use the bathrooms.
 - Minimize the presence of scented products and other triggers for people with chemical sensitivities with the goal of creating scent-free space.
 - Offer printed materials in alternative formats, such as Braille, large print, and audio.
 - Provide sign language interpreters and real time captioning.
 - Choose locations for community events near public transportation.
 - Offer sliding scales at events that cost money.
 - This is not an exhaustive list, only a starting place.
- Understand that no single accommodation will work for all disabled people. One solution doesn't fit all, but increased access does benefit everyone.
- Take your lead from disabled people. We know what works best for us.
- Be creative. Don't use lack of money as an excuse not to create access.

activism

- Educate yourself. Read about the disability rights movement. Attend disability culture events.
- Recruit members of the disability community to leadership positions within your organizations.
- Confront disability stereotypes and oppression—ableism—wherever you encounter them.
- Integrate disability issues into your understanding of racism, classism, sexism, homophobia, and transphobia. These systems of oppression are all interrelated.

resources

- Fleischer, Doris Zames and Zames, Frieda, *The Disability Rights Movement: From Charity to Confrontation* (Philadelphia: Temple University Press, 2001).
- Linton, Simi, *Claiming Disability: Knowledge and Identity* (New York: New York University Press, 1998).
- *Ragged Edge Magazine Online* (www.raggededgemagazine.com)

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Communicating with People with Disabilities

People who have disabilities will feel most comfortable if you consider these suggestions for effective communication:

- 1. Don't be afraid to make a mistake when meeting and communicating with someone with a disability. Imagine how you would react if you were in similar situations. Keep in mind that a person who has a disability is a person, and, like you, is entitled to the dignity, consideration, respect, and rights you expect for yourself.**
- 2. Treat adults as adults. Address people with disabilities with their first names only when extending the same familiarity to all others present. (Never patronize people by patting them on the head or shoulder.)**
- 3. Relax. If you don't know what to do, ask. The person who has a disability may help put you at ease.**
- 4. If you offer assistance and the person declines, don't insist. If it is accepted, ask how you can best help and follow directions. Don't take over.**
- 5. If someone with a disability is accompanied by another individual, address the person with a disability directly rather than speaking through the other person.**

People First Terminology

- Place the person before the disability. "Person with a disability" is preferred to "disabled person".**
- Avoid referring to people by the disability they have, i.e., "an epileptic", "the quadriplegic over there". People are not conditions. If you need to identify the disability for some reason say, "the person with epilepsy", or "the man who has quadriplegia" or "the man in the wheelchair".**
- People are not "bound" or "confined" to their wheelchairs. They use them to increase mobility and enhance their freedom. It is more accurate to say a "wheelchair user" or "person who uses a wheelchair".**

DISABILITY ETIQUETTE

WHEN MEETING A PERSON WITH A VISUAL IMPAIRMENT -- REMEMBER:

1. There are many kinds of visual impairments, and they range from slight to completely blind.
2. Visually impaired people do not necessarily hear better than you or have an ultra developed sense of touch. They may have trained their other senses to assist them with mobility, direction, etc.
3. Not all visually impaired people read braille; some use large print, audio tapes or other assistive devices.
4. When talking to a visually impaired person, begin by identifying yourself and speak directly to him or her.
5. Do not pet a guide dog unless you have been given permission. These dogs are working. They need to concentrate. It is hard not to pet a guide dog, especially for dog lovers.
6. When walking with a visually impaired person, remember the impairment is visual, not physical. Offer your arm--most people prefer to put a hand on your arm or shoulder for guidance and walk slightly behind you.
7. Don't worry about using casual expressions like, "see what I mean?" or "see you later." Visually impaired people use these expressions too.

WHEN MEETING A PERSON USING A WHEELCHAIR -- REMEMBER:

- Don't make assumptions about what a person can or cannot do. The person with the disability is the best judge of his or her own capabilities.
- To non-disabled people a wheelchair is often an emotionally loaded symbol ill-health or inability; they may think the individual is sick or 'confined' or 'bound' to the chair. To wheelchair users, however, wheelchairs offer increased mobility and freedom.
- Do not lean or rest your foot on someone's wheelchair. The chair is a part of his/her personal space, as intimate as your belt buckle is to you.

- Don't push a person in a chair without asking first. A sudden jerk or movement can upset a person's balance.
- Architectural barriers, such as narrow doorways, stairs, curbs etc., may present problems. Some of these barriers can be overcome. Others may require help.
- Leave a person's wheelchair within his reach if he has transferred into car, chair, tub, barstool, etc. unless you ask first.

RULE OF THUMB: BEFORE TRYING TO HELP, ASK IF THE PERSON WANTS HELP, THEN ASK HOW AND WHAT TO DO.

1. Some people in wheelchairs can walk using crutches, braces, canes and other aids. The wheelchair might be used for speed or to reduce fatigue.
2. Save pats on the head for dogs and small children, not adults.
3. People in chairs have an eye level much lower than yours. If your conversation looks like it will be a long one, sit down. You'll all be more comfortable.

WHEN MEETING A PERSON WHO IS DEAF OR HARD OF HEARING -- REMEMBER:

- Hearing aids do not actually correct a hearing deficit; they amplify sounds, which may be distorted, although some also clarify sound. Not all people use them. Those that do use them with varying degrees of success.
- There are different types and degrees of hearing loss. Hearing loss ranges from mild to complete deafness.
- The age of onset of the deafness will result in different outcomes in the person's ability to speak and use a spoken language.
- A pre-lingually deaf person may choose not to use his/her voice and will rely on visual or manual forms of communication.
- Only about 30% of speech sounds are understood by lipreading. Therefore, much of what is being said may be missed or misunderstood.

- Writing notes or using hand gestures are appropriate aids for effective communication.
- Make sure you face the person and enunciate clearly without exaggerating facial movements. Repeat or rephrase comments if needed.
- Speak in a normal tone of voice. Yelling or exaggerating your words will not help. Make your point clearly without using a lot of extra verbiage.
- People who are deaf or hard of hearing have the same range of intelligence as the general population. Appropriate non-verbal based intelligence tests are used for I.Q. tests.
- The majority of deaf people use American Sign Language (ASL). It is not a universal language. It has its own syntax and grammatical structure.
- Face and speak directly to a person who is deaf, not to an interpreter. The interpreter is there only to voice or sign exactly what is being communicated.
- Facial expression, body movement and gestures are very important in communication.

WHEN MEETING A PERSON WITH A SPEECH IMPAIRMENT -- REMEMBER:

1. A speech impairment is not an indication of lower intelligence. Be careful about making assumptions.
2. Be patient. Take the time to listen, or you will both become frustrated. Allow the person to speak in his/her natural rhythm. Don't speak for him.
3. Be alert to the presence of an alternative form of communication such as a typewriter or a computer.
4. Don't be afraid to ask the person to repeat something you do not understand.
5. Don't simplify your own speech or use baby words.
6. Don't raise your voice. Most speech impaired people can hear and understand to the same degree as anyone else.

WHEN MEETING A PERSON WITH A COGNITIVE DISABILITY-- REMEMBER:

- A cognitive (also called intellectual) disability is often confused with mental illness or cerebral palsy. They are all different types of disabilities.
- 85% of people with cognitive disabilities read, write, work, drive and live independent productive lives.
- Intellectually disabled people are responsible, industrious, and reliable to the same degree as non-disabled people.
- People who have a cognitive disability will not necessarily have children who are disabled.
- Treat an adult with an intellectual disability as you would any other adult, taking into account that re-phrasing your thoughts in slightly simpler language might be helpful. Do ask if you are being understood.



Language *MATTERS!*

Words have the power to shape our thoughts and attitudes. Try to become aware of the images, feelings and attitudes you convey with words. Use accurate, non-emotional, not value-laden language. Discard negative labels. Discard labels period. By doing so you will help dispel the myths surrounding disability.

- Language is the way we communicate our thoughts and feelings
- Look carefully at language that perpetuates negative attitudes
- Dehumanizing and offensive language places limits on how people can participate
- Negative language reinforces common myths about PWDs and is a form of discrimination
- Language needs to put the person first, then the qualifying descriptor (e.g. person with disability, not disabled person)
- Stay away from generic labels (the deaf); emphasize people—people are not their diagnoses
- Avoid words that focus on negative visual descriptions (deformed, crippled, drooling, etc.)
- Emphasize abilities rather than limitations.

Remember: Language *MATTERS*



Language Definitions and Descriptions

Able-bodied – This is what people with disabilities call the non-disabled. This is a neutral term.

Afflicted – This implies pain, suffering or distress, which most people with disabilities do not have. This is a very inappropriate term when applied to disability.

Blind – This is what some people with visual impairments are, but not all.

Cerebral Palsy – This is a condition resulting from central nervous system damage occurring before, during, or shortly after birth. It is not a disease, and is not contagious or progressive.

Chair – This is shorthand among those with disabilities for "wheelchair".

Cognitive Disability – This is an impaired ability to understand or think abstractly. This is also called "Intellectual Disability".

Communicative Disorder – This is an umbrella term for speech impairments.

Confined – This is what people in wheelchairs are not, thanks to their wheelchairs.

Courageous – Disability and courage have nothing to do with one another.

Crippled – This is neither an appropriate noun (as in 'the crippled'), nor a correct adjective, even when applied to persons with disabilities.

Deaf – This is what some hearing-impaired people are, but not all.

Defect – 'Birth defect' is commonly, but incorrectly, used. 'Defect' is not a synonym for 'disability' or 'impairment'.

Deformed – This is an inappropriate term for a disability.

Developmental Disability – The onset of disability occurs before the age of two. (Cerebral Palsy, Down Syndrome).

Diagnosis – This is the medical identifying name of a disease or injury. People are not diagnosed, but diseases and injuries are.

Disease – This is what some disabled people have had and which may have caused or contributed to their disability, but probably do not have now.

Empathy – This is the *understanding*, but not *feeling* pity. This is **not** the same as sympathy.

Guide Dog – This is a dog trained to guide people with visual impairments. These are working animals that are not to be petted unless allowed by the owner.



Handicap – This applies to golf or horseracing, not people. People are handicapped by man-made barriers, either physical or attitudinal.

Hearing Impairment – This is an inappropriate term for hearing loss in general, as it can be from slight to complete deafness.

Hemiplegia – This is full or partial paralysis of one side of the body caused by brain damage due to disease, trauma or stroke.

Impairment – This is a good term, which implies the lessening of a function, but not its total **loss**.

Independent Living Movement – This is the name of a social movement that creates alternatives to custodial care such as nursing homes and fosters civil rights for people with disabilities.

Independent Living – This is the exercising of control over one's life through self-determination and decision-making.

Invalid – This implies null and void. This is not acceptable for a person with a disability, as *every* individual is valid.

Lame – This is an outdated term, which also implies inadequacy.

Midget/Dwarf – This is an offensive term. The preferred term is 'little person' or 'person of short stature'.

Normal – This is what all of us, including people with disabilities, think we are.

Orthotic – This is generally a brace for the arm or leg.

Quadriplegia/Paraplegia – This is the paralysis of the limbs and some body functions resulting from spinal cord injury or damage. (Quad: arms and legs; Para: legs). This may be complete or incomplete.

Prosthetic – This is usually, but not always, an artificial extremity, such as an arm or leg.

Rehabilitation – This is an organized program of medical and clinical treatment designed to maximize residual physical, perceptual, and cognitive abilities following trauma, stroke or disease.

Retard/Retarded – This is inappropriate term for 'intellectual' or 'cognitive disability'.

Section 504 – This is a section of the U.S. Rehabilitation Act of 1973, which protects disabled people from discrimination due to their disabilities.

Shut-in – This implies loss of freedom and liberty. This is an inappropriate term.

Sick – This is what most people with disabilities **are not**.

Special – **Every** human being is special. This is an inappropriate term for disability.



Stricken – This is good for lightning, matches and baseball bats, *not* for people with disabilities. This means something being hit, struck, or pierced sharply.

Suffers from/Suffering – This implies pain or discomfort, which must be removed.

Sympathy – This is something most disabled people would trade instantly for *acceptance* and *appreciation* of their talents and capabilities.

Victim – Someone who has been attacked, *not* a person with a disability.

Wheelie/Wheeler – This is a cute, euphemistic term for a wheelchair user.

Wheelchair Bound – A 'wheelchair' enables mobility. 'Bound' implies tied up or heading for Broadway or California. This is an inappropriate term.

The words **afflicted**, **stricken**, **suffer**, **victim**, among others, are emotion-laden terms that evoke feelings of pity and images of helplessness. **Avoid using them!**

*"What's in a name? That which we call a rose by any other name would smell as sweet."
-Shakespeare*

<u>Outdated Expression</u>	<u>Recommended Alternative</u>
birth defect	has disability since birth, born with, congenital
disability	
cerebral-palsied	has cerebral palsy
confined to a wheelchair.....	uses a wheelchair
cripple.....	walks with the aid of crutches
deaf and dumb, deaf mute	deaf, hard of hearing
defective.....	impaired
deformed.....	has a physical disability
dummy.....	pre-lingually deaf
Elephant Man's disease.....	neurofibromatosis
emotionally disturbed.....	behavior disorder
epileptic.....	has epilepsy
handicapped.....	disabled, disability
handicapped accessible.....	accessible to people with disabilities
hunchbacked.....	curvature of the spine, scoliosis
insane, deranged, deviant.....	psychiatric disability
lame.....	walks with a limp, uses crutches
midget, dwarf.....	short-statured or little person
Mongoloid.....	Down's syndrome
normal.....	non-disabled, abledbodied
paralytic.....	is paralyzed
retarded.....	cognitive disability
spastic.....	has seizures, muscular dystrophy or cerebral palsy
wheelchair-bound or confined to a wheelchair.....	uses a wheelchair

If you have questions about appropriate terminology or interviewing etiquette,
call the Illinois Department of Rehabilitation Services--Division of Media and Public Affairs at
(217) 785-3893

Ten Commandments for Communicating with People with Disabilities

1. Treat your friends who have disabilities just like you would any other friend
2. When you talk for more than a few minutes with a friend in a wheelchair sit down so you are at eye level. This way your friend won't have to lean back to look at you.
3. If your friend has trouble seeing, identify yourself as you would on the phone. When you're in a group, say each person's name when speaking to him or her.
4. If your friend with a hearing loss has his back to you, tap him on the shoulder or wave your hand before you start speaking.
5. For people who lip-read, make it easy. Keep your hands and food away from your mouth when you're speaking.
6. Listen carefully to someone with a speech impairment. Be patient and wait for her to finish before you speak. Don't try to speak for her.

Never pretend to understand what you don't! Instead, repeat what you did hear and wait for your friend to say more. It's ok to ask him to repeat what he said.

7. Leaning or hanging a person's wheelchair is not polite and is an intrusion of her personal space. It's like leaning on his or her body.
8. Before you help someone with a disability, ask if, what and how you can help.
9. It's OK to shake hands with someone with a prosthetic hand or arm. Shaking someone's left hand is OK too.
10. Relax. Don't be embarrassed if you say "See you later" or "Did you hear about this" or "I've got to run" to someone who can't really see or hear or walk. These are common expressions we all use everyday.