



Business Services
Organisation

Providing Support to Health and Social Care

DISABILITY INFORMATION PACK

FOR FRONTLINE STAFF

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1 Introduction

Meeting the needs of people with a disability requires specific competencies. Not knowing how to behave when meeting disabled people can sometimes make you feel awkward or nervous. At the same time, certain behaviour or language can sometimes unintentionally offend people with a disability. This information pack aims to provide you with a basic understanding of disability issues, particularly in terms of communication, and highlights general etiquette that should be followed when you meet people with a disability in order to provide a service that meets their needs.

Don't be daunted by rights and wrongs; instead always bear in mind that people with a disability, like everyone else, wish to be treated with respect and courtesy and in a friendly manner.

2 Mind Your Language

The words we use to describe one another can have a huge impact on the perceptions we and others have, how we treat one another, and how welcome we make people feel.

The following table presents some guidelines on language to use and more importantly language to avoid!

Outdated or Offensive	Reason(s)	Words to use instead
<i>The anything:</i> The blind The autistic The disabled	Groups people into one undifferentiated category; Views people only in terms of their disability; Does not reflect individuality, equality, or dignity of disabled people.	People with disabilities; Disabled people; People who are blind or partially sighted; People with autism.
Handicapped	Implies 'cap in hand', connotes that people with disabilities need	People with disabilities; disabled people.

	charity.	
Normal, healthy, whole (when speaking about people without disabilities as compared to people with disabilities)	People with disabilities may also be normal, healthy and whole. Implies that a person with a disability isn't 'normal'.	Non-disabled; Person without a disability.
Deaf and dumb, Deaf mute	Deaf people have the ability to use their voice but may prefer not to speak because of the quality of their speech. The word 'dumb' implies someone has low intelligence.	Deaf; person who is deaf; person who is hard-of-hearing, deafened, profoundly/ partially deaf, sign-language user.
Suffers from/afflicted by/ a victim of	Negative terminology	A person who has/ a person with
Confined to a wheelchair; Wheelchair bound	Wheelchairs don't confine – they make people mobile!	Wheelchair user; Person who uses a wheelchair.
Cripple; Crippled	From old English, meaning 'to creep'; Outdated and offensive.	Has a physical/mobility disability.
Invalid	Infers 'not valid' – offensive.	Has a disability.
Crazy, Insane, Psycho, Maniac, Nut case	Terminology used in derogatory manner – considered offensive	Behavioural disorder; Emotional disability; Person with mental illness;

		Person with mental health needs.
Retarded, Slow, Simple, Moron, Idiot	Stigmatising; implies that a person cannot learn.	Learning disability; Developmental disability.

Words reflect our attitudes and beliefs so using the right words matters. This is not about ‘political correctness’ but using terminology and language that does not offend disabled people.¹

3 Meeting Disabled People

A disability is defined in the Disability Discrimination Act as:

“a physical or mental impairment which has substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities.”

However many disabilities are ‘hidden’, e.g. learning disabilities, epilepsy, multiple sclerosis and mental health issues; never presume that someone doesn’t have a disability just because it is not readily apparent.

3.1 General Guidelines

- Most importantly treat disabled people with the same respect and consideration that you do with others.
- Ask a person with a disability if he/she needs help before helping.
- Talk directly to the person with a disability, not through a third party.
- Refer to a person's disability only if it is relevant to the conversation.
- Avoid negative descriptions of a person's disability. Use the terminology outlined in the table in Section 2.

¹ Whilst we have consulted with disability groups on this booklet, ‘appropriate’ terminology can evolve, and this document may need to be updated from time to time; as such we would welcome any comments you may have - please forward to the Equality Unit, CSA.

3.2 Deaf and Hard of Hearing People

Nine million people in the UK have some degree of hearing loss. People with a hearing loss may be able to hear in a quiet place if only one person is speaking but not in a noisy environment. They may use hearing aids, induction loops, lip reading or sign language or any combination of these.

The following guidance can help make communication clearer:

- Make sure that the person is looking at you before you start speaking; you can get their attention either by a slight wave or a gentle touch on the arm or shoulder.
- Check how they want you to communicate with them; they may want you to speak clearly, change position, provide an interpreter or to write things down.
- If they are using a communication support worker (e.g. interpreter, lip speaker), address the deaf person not their worker and allow time for what you have said to be interpreted. Don't stare at the interpreter while you are waiting. It distracts them and insults the deaf person, who is the person you are communicating with, not the interpreter.
- Keep to the point and make sure the context is clear; indicate clearly if you are changing the subject.
- If the person is lip reading, speak clearly in normal speech rhythm and a little more slowly.
- Keep the background noise as low as possible and ensure you are clearly visible, with no people, furniture, plants, artefacts etc. in between you and the deaf person.
- Don't stand in front of a bright light or window as it may make it difficult to be seen clearly.
- Avoid obscuring your face as you speak.
- Do not shout or use exaggerated gestures.

- Remain patient, check that the person has followed you and repeat in a different way if necessary. Say, “Did you follow me?” or, “Do we agree on that?” (It is better to use the word ‘follow’ than ‘understand’, which implies you expect them to have an intellectual problem with what you have said.)
- Some deaf people, whose first or preferred language is British (or Irish) Sign Language (BSL/ISL), consider themselves part of ‘the deaf community’, and describe themselves as Deaf with a capital D, to emphasise their deaf identity.
- If sign language is the first/preferred language, the written word can create a barrier, so if you are asked to write things down, don’t use long and complex sentences. For example, rather than write “I wondered whether you might like a cup of tea?” write “Cup of tea?”

3.3 Blind and Partially Sighted People

There are many different eye conditions with different effects on vision, with very few resulting in complete loss of sight. Blind people who use guide dogs, use white canes, wear dark glasses or read Braille are a minority. Remember the following when communicating with them:

- Introduce yourself so the person knows who is speaking to them.
- Ensure the person knows where you are as you speak to them and say if you are moving away so they are not talking to empty space, e.g. “I’m just going into the other room”.
- When offering to shake hands, say “Shall we shake hands?”
- If other people are also speaking, or they join the group and start listening, tell the person who and where they are; e.g. “My supervisor has just joined us.”
- If the person appears to need help, ask first and take your cue from them, offering your arm to hold rather than

taking theirs if guiding is required. Ask “Would you like to take my arm?” or “How can I help?” Do ask them if they wish to be warned about steps, doors and other obstacles.

- If offering a seat, explain you are doing so and guide their hand to the back, arm or sitting area of the seat, saying “Here is the back of your chair.”
- Avoid placing obstacles in areas through which people walk.
- Remember that a blind or partially sighted person may miss out on gesture or facial expression and so appear to respond inappropriately – it may seem that they do not get a joke, for example, when in fact it is not properly communicated to them.

3.4 Deafblind People

A person may be regarded as deafblind if they have a combination of hearing and sight loss resulting in problems with communication, information and mobility. Sixty-five per cent of deafblind people are elderly. Bear the following advice in mind:

- Most deafblind people do have some sight and/or hearing, so the advice in the two previous sections will also apply, but using touch methods for communication and access to information are more likely.
- Approach the person from the front and let them know you are there with a light touch on the hand or arm.
- If offering to guide, move their hand gently to your elbow; some deafblind people also have poor balance, take your cue on how to guide from them.
- You may be able to communicate by writing clear capital letters on their palm, using the whole palm.
- If the person asks for written information, use a thick black pen and write large letters – check the size is right for the person with one word before continuing.

3.5 Speech Difficulties

There is no link whatsoever between speech difficulties and intellectual capabilities. If you are trying to communicate with a person with speech difficulties be aware that with patience and concentration it is usually possible to follow what is being said:

- Pay close attention to the person, stay patient, don't correct them and don't get embarrassed. Resist the temptation to finish off their sentences.
- Don't pretend to follow what has been said if you have not. It is better to ask someone to repeat than to guess wrong.
- To get the information you need, ask about one point at a time and tell them what you have understood so far.
- Work equally with them to ensure that you understand one another and don't make it their problem or claim that it is yours because you are being 'thick'.

3.6 Learning Difficulties

Many people who have been born with learning difficulties or who are in the early stages of a condition affecting the brain, or who have had a brain injury, live full and independent lives in the community, making their own choices, with varying levels of support. When you first meet the person:

- Assume that they will follow and understand what you are saying.
- Be ready to explain in different ways more than once, and stay patient.
- Break down complex information into single issues.
- Keep distractions in the environment to a minimum.
- Offer to write down relevant details with your name and phone number included so the person has a record of it to refer to later.

3.7 Facial or Other Disfigurements

- When you meet someone with a disfigurement relax, treat the person with respect, make eye contact (but avoid staring) and keep calm, be approachable and friendly.
- If you are surprised by someone's appearance or feel uncomfortable, don't make this obvious.
- Pay close attention to what is being said and do not allow their appearance to distract you.
- Sometimes a facial disfigurement can affect speech. If you don't understand what someone says to you, be honest about it and don't just assume because someone looks different they are any less intelligent.
- Ask open questions that allow people to talk as much or as little as they want.
- Don't judge people on their appearance or make assumptions about them, more often than not you'll get it wrong.
- Restrain your curiosity and do not ask about the disfigurement. Put yourself in their shoes – how would you feel if you were constantly being asked.

3.8 Mental Health Needs

There are many forms of mental health needs affecting a substantial number of people. This may include stress, depression, or anxiety disorders; or more severe disorders such as schizophrenia. Do not assume that people with mental health difficulties have learning difficulties.

Some mental health needs – but by far not all – may result in people behaving in a way that we may experience as unusual. In these situations, we need to be better equipped in ensuring that we communicate with people effectively.

- Don't be afraid of a person with mental health needs. Avoidance and rejection are among the most commonly upsetting things to people who have mental health needs.
- Stay calm if the person seems over anxious or confused.

- Do take time to listen to someone who is mentally ill – and don't assume that he/she has no knowledge or opinions of value.
- Ask what support, if any, is needed, and pay attention to the answer.
- Be patient and calm and give your undivided attention, especially with someone who speaks slowly or with great effort.
- Don't be quick to judge.
- Keep your communication straightforward and clear. Rephrase comments or questions for better clarity.
- Stay focused on the person as he/she responds to you.
- Allow the person time to tell or show you what he/she wants.

3.9 Wheelchair Users

- Try and establish a comfortable eye contact especially when speaking to a wheelchair user. Where possible sit, perch or kneel in front of the person so that they do not have to crane their neck to look up at you.
- Wheelchairs offer people freedom and independence and are considered part of their personal space. Therefore, do not 'invade' this space by leaning over them, by using the wheelchair as an arm-rest or handbag/briefcase hook! Never grab and move someone's wheelchair without first asking their permission – as it is part of their body space. Do not push, lean on, or hold onto a person's wheelchair unless the person asks you to.
- If necessary, rearrange furniture or objects to accommodate a wheelchair before the person arrives.
- Offer to tell where accessible toilets are located.
- Don't feel embarrassed to use words like 'run', 'walk', 'jump' or 'dance' in front of a person who uses a wheelchair – use your everyday language.
- If you need to use touch to attract someone's attention, do it gently on the hand, arm or shoulder.

3.10 Mobility/ Physical Impairment

The term physical impairment refers to anyone who has difficulty in moving or using all or part of their body. A person with a mobility impairment may not necessarily be dependent on a wheelchair, but might find walking difficult. Mobility impairment can be caused by anything from arthritis to amputation to spinal chord injury. It can create problems with stamina, co-ordination, endurance and movement. Impairments include:

- *Cerebral Palsy* is a result of injury to the largest part of the brain, the cerebrum. It is characterised by impaired muscular function.
 - *Muscular Dystrophy* is a group of inherited disorders characterised by the deterioration and wasting of muscle fibres.
 - *Multiple Sclerosis* is a progressive disease of the central nervous system characterised by decreased nerve function.
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- If you see a person with a mobility impairment your first reaction may well be to try and help. But the first rule of thumb is: when in doubt ask. Don't just take over, or assume that the person needs help. On the other hand, don't be too shy to offer assistance – it may be welcome.
 - People who walk using sticks or crutches may appreciate help with carrying belongings or opening doors – their hands are otherwise engaged.
 - Likewise if you ask a person using sticks or crutches to sign their name or fill in a form they will need free hands, so offer them a seat! Alternatively offer to complete the form for them.
 - When walking with a person who uses crutches or a wheelchair adjust your pace to match theirs.

3.11 Autistic Spectrum Disorders

Autistic spectrum disorders (ASD) are a range of social and communication disorders including autism and Aspergers Syndrome, which is a mild form of autism. People with these disorders have difficulty in communicating and interacting with other people, and have limited social skills, including conversation, eye contact and interpreting body language. They are likely to use language literally, and may misinterpret what is being said due to

difficulties recognising facial expressions, tone of voice and intonation.

- Use clear and unambiguous language. Avoid using figures of speech, sarcasm or metaphors. A person with Aspergers Syndrome may not recognise facial expressions, hidden meanings, jokes or irony.
- Some people with ASD may avoid eye contact, and many therefore appear aloof or uninterested. Try not to take offence.
- The person may not respect your personal space and social boundaries. Correct them politely if you are uncomfortable.
- The person may be very uncomfortable with physical contact, ask before you shake hands.
- Do not rush the person.
- They may not instantly understand something that is obvious to you – explain things simply and clearly
- Unusual behaviour is generally not deliberate.
- They may become angry or agitated – ask them to calm down.
- Their behaviour may create difficulties for other service users – explain this to them as tactfully as possible and suggest a better course of action.

3.12 People with Dyslexia or Dyspraxia

Dyslexia is more than just difficulty with reading and writing, which are symptoms of underlying problems of short-term memory, processing information and perceptual, spatial and motor skills. Associated literacy and numeracy problems may be obvious, or they may show as slowness rather than inaccuracy.

Dyspraxia impairs the organisation of movement and is associated with problems of language, perception and thought. It overlaps with dyslexia and the two conditions can co-exist in the same person, as can Asperger Syndrome (see above). Symptoms include poor short-term memory and concentration, literacy and organisational problems and problems with co-ordination, dexterity and social skills.

- Forms can be difficult to fill in. Ask if support is required, as the person may feel embarrassed or awkward to ask you for assistance.

4 Support Workers and Personal Assistants

People with a disability may be accompanied by personal assistants or support workers. Personal assistants are paid workers who provide practical and personal support, e.g. washing, dressing, driving. Support workers include:

- Sign language interpreters, using British or Irish sign language to convey speech to people who are deaf or hard of hearing
- Academic supporters, note taking or book fetching etc.
- Communication supporters, interpreting unclear speech
- Advocates for people with learning difficulties

Treat support workers with courtesy and respect but remember that they are present as an assistant, and your communication should be directed to the person with the disability.

5 Conclusion

There are many ways to meet the needs of people with a disability. This booklet should instil confidence when interacting with disabled people through the information it provides: simple and practical guidelines on things to consider when meeting people with particular disabilities. By following these guidelines you can improve the whole experience of disabled people when using our services – and develop your competencies in customer care at the same time.

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