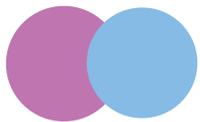


A COOK ROSS INC. PUBLICATION



DISABILITY

Etiquette Guide

2nd Edition

My humanity is bound up in yours, for we can only be human together.

ARCHBISHOP DESMOND MPILO TUTU

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DISABILITY ETIQUETTE GUIDE

INTRODUCTION

How do you shake hands with someone who doesn't have hands? Or has a prosthetic hand? Should a team member with a stutter be discouraged from leading verbal client presentations? Is it acceptable to offer to reach a high elevator button for a person using a wheelchair?

We all want to do “the right thing.” We all struggle to treat everyone with dignity, respect, and courtesy. But when it comes to dealing with people with disabilities, we sometimes allow our apprehension about doing “something wrong” prevent us from authentically and fully engaging with them.



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“Etiquette” indicates a set of written and unwritten rules that articulate what constitutes socially acceptable behavior in a broad array of circumstances. Breaking these rules can sometimes cause personal and professional embarrassment, discomfort, and has the potential to alienate important clients, customers, and colleagues.

Our concern about doing something accidentally inappropriate can sometimes cause us to behave awkwardly, be tentative, make unintentional mistakes, and cause injury or insult.

This *Disability Etiquette Guide* is intended to not only convey critical information, but also to increase your confidence that you are being courteous and not condescending. Always remember that a person with a disability is a person. He or she is like and unlike anyone else.

Top performing businesses and organizations know that the demands of global commerce require mature diversity management skills. Customers and co-workers come from a variety of backgrounds, and their customs, thinking, behavior, values, and communication styles vary accordingly. Our cultural understanding and literacy, along with our assumptions about business etiquette, are being challenged by major demographic shifts that bring us face to face with new people and unfamiliar ideas. Successfully navigating the ever-evolving workforce and marketplace requires effective and respectful communication between people with different linguistic, cultural, and individual backgrounds.

People with disabilities currently represent the largest minority in the world. Nearly 20 percent of people living in the United States (57 million people) are disabled. Disabilities can occur across the whole life span and vary in duration, degree, and location of impact. Because people's experiences with and attitudes toward their disabilities also range widely, communication and interaction sometimes appear particularly complicated.

In recent decades legal, social, cultural, and economic changes have drawn attention to the reality that disability is often less about physical or mental impairments than it is about how society responds to real or perceived physical and mental differences. As disability becomes a more common factor in the workplace, the need for inclusive approaches to communication and interaction increases.

The *Disability Etiquette Guide* identifies key barriers that, when unknown, may compromise inclusion, trust, and cooperation. Too often we make “automatic” or “snap” decisions about the capacities, abilities, and preferences of others. The guide highlights tools and information for fostering interactions that are comfortable, meaningful, and inclusive. We hope, as a result of reading this guide, people will begin to ask more questions, gather more information, and relate to each other in a more honest fashion. We also believe this guide will support all readers in questioning their assumptions and judgments about all people—not just people with disabilities.

It is very important to note that this guide provides information about broad-based disability cultural frameworks and archetypes.

People with disabilities are first and foremost people. These categories are intended to dispel common misconceptions, foster greater understanding, and enhance access between people. Archetypes are deeply imprinted (learned or inherited) unconscious ideas, patterns of thought, beliefs, or behaviors that broadly apply to a large group of people. They are not assumed to apply to each individual group member.

Remember that cultural patterns are *not* universal. We all must be vigilant to avoid generalizations and stereotypes about groups of people. Variation within and among cultures and communities always exists. In addition to these variations, millions of people in our multicultural world identify with multiple identities. It is important to maintain respect for the infinite complexity of each unique human being, which always defies simple categorization.

NOTE: *In establishing the categories for this guide, we have used a combination of those established by the 2011 U.S. Disability Status Report, the World Health Organization, and common U.S. disability terms. We do so for ease of navigation, and acknowledge that these may be controversial to some readers.*

MULTIPLE DEFINITIONS OF DISABILITY

Because there are so many definitions of disability (including those covered by the Americans with Disabilities Act), we want to thoroughly discuss them in the guide’s first section. Proper disability etiquette is not possible without a good understanding of all of the various meanings of disability.

Medical model. In Western biomedicine, disability generally refers to physical and mental impairments that limit the typical ways and range of a person’s ability to perform activities. This often is referred to as a “medical model” of disability.

The medical model is based on a strong notion of what is “normal”; *abnormality* generally is viewed negatively.

The medical model holds that there are identifiable and fixed “norms” for human beings. In this model, all complications related to disability reside *within* the individual.

As a component of biomedicine, this model values cures and rehabilitation as the best response to physical and mental disabilities.

Social-cultural model. Emerging with the disability civil rights movement by the mid-20th century, the “social-cultural model” places disability in a social, political, environmental, and economic context. This model holds that the meaning and experience of disability and normalcy are neither fixed nor strictly biological, but instead are dynamic and socially constructed.

This interpretation of disability rejects the assumption that people with disabilities are inherently “defective,” and it challenges the assumption that rehabilitation and cures represent the only valid response to bodily or mental difference.

According to the social-cultural model, disability is often less about physical or mental impairments than it is about society’s responses to perceived or actual differences from the norm. For example, negative attitudes toward people with disabilities and physical barriers that impede access strongly shape the meaning and experiences of disability.

Disability Identity Model (also known as the Empowered Identity Model). This model recognizes disability as central to a person’s identity, as a category similar to ethnicity, skin color, and gender. Disability is appreciated as a beneficial part of one’s core identity. Many people who claim disability in this way view themselves as part of empowered and vibrant disability cultural communities. This model acknowledges that not all aspects of disability are positive or that societal and material changes will “fix” all disability-related problems. It emphasizes disability as a valuable lived experience for individuals and for society.

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