Scope Disability Engagement Program

Workshop notes

Scope is a leading provider of disability services and supports your organisation’s commitment to engage more effectively with people with a disability.

Scope’s mission is to enable each person we support to live as an empowered and equal citizen.

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What is Disability?

Disability is part of human diversity. One in five Australians has one or multiple disabilities and this proportion is increasing with the ageing of the population.

Disability can result from accident, illness, congenital or genetic disorders. There are many different kinds of disability - physical, sensory, intellectual or mental health related.

A disability may be visible or hidden, may be permanent or temporary and may have a minimal or substantial impact on a person’s abilities. A disability may affect mobility, ability to learn, or ability to communicate easily.

The definition of “disability” in the Disability Discrimination Act 1992 (D.A.A.) includes:

- Physical
- Intellectual
- Psychiatric
- Sensory
- Neurological, and
- Learning disabilities, as well as
- Physical disfigurement, and
- The presence in the body of disease-causing organisms.

This broad definition is meant to ensure that everyone with a disability is protected. The 2012 Survey of Disability, Ageing and Carers (SDAC) estimated that 4.2 million Australians, or 18.5% of the population, had a disability. SDAC defines disability as any limitation, restriction or impairment which restricts everyday activities and has lasted, or is likely to last, for at least six months. For those people with disability, 3.7 million (88%) had a specific limitation or restriction that meant they were limited in the core activities of self care, mobility or communication, or restricted in schooling or employment.

Categories of Disability

There are five categories of disability. Some people may have several disabilities:

- Physical Disability
- Sensory Disability
- Intellectual Disability
- Mental Health Issues
- Learning Disability
People with a Physical Disability

There are many types of physical disabilities. Most people with a physical disability develop skills to adjust. Physical difference can sometimes be confronting, but it is really important to acknowledge the person first. Two common types of physical disability are as follows:

Cerebral Palsy:

Cerebral Palsy (CP) is a disability that affects about 2 in every 1000 Victorians. CP is caused by lack of oxygen or an injury to the brain. This may be the result of an illness such as Rubella (German Measles) during pregnancy, which has affected the unborn baby, or it may be the consequence of a birth trauma. CP may also occur if a young child contracts Meningitis or if a child receives head injuries.

No two people with CP will have exactly the same disability. It depends on the location and the extent of the damage to the brain. Generally people with CP will have more than one of the following conditions:

- Muscles become stiff and tense when the person tries to move (called “spasticity”).
- The person cannot control his/her movements.
- The person cannot keep his/her balance and his/her movements may not be coordinated.

Note: If a person has CP it does not always mean that he/she also has an Intellectual Disability.

Communicating with someone who may have limited speech or is non-verbal:

- Don’t panic. Act naturally, relax and be yourself.
- Always direct your conversation to the person with the disability, not their support worker.
- Listen carefully and wait for the person to finish before responding.
- Never pretend to understand. Instead repeat what you have understood and await confirmation. Alternatively, admit that you do not understand and ask them to repeat themselves.
- When speaking with a person who has difficulty communicating, be patient. Ask short questions, requiring short answers, or a nod or shake of the head.
- Check back with the person when you think you have the message. Confirm that you understand by paraphrasing what they have been saying.
Disability Engagement

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- Ask the person how they say, "yes", and, "no". Watch carefully when they answer. Some people use eye movements, others use hand gestures.
- Ask if they use a communication aid. If the answer is, "yes", ask them if they need assistance with this. Read any instructions that might be available about how to use this communication aid.

For further information on Cerebral Palsy visit:
www.scopevic.org.au
www.cerebralpalsy.org.au/
www.scope.org.uk

**Multiple Sclerosis:**

Multiple Sclerosis (MS) is one of the most common diseases of the central nervous system (brain and spinal cord). It affects generally people between 20-40 years, and more women than men. MS is an “inflammatory demyelinating” condition. “Myelin” is a fatty material that insulates nerves, acting much like the covering of an electric wire and allowing the nerve to transmit its impulses rapidly. In MS, the loss of “Myelin” disrupts the ability of the nerves to transmit impulses to the brain and this produces various symptoms. Symptoms include - weakness, fatigue, problems with vision, speech and mobility.

For further information on Multiple Sclerosis (MS) visit:
www.mssociety.com.au
People with an Acquired Brain Injury:

The term Acquired Brain Injury (ABI) is used to describe all types of brain injury that occurs after birth. The brain may be injured as a result of an accident or head injury, a stroke, alcohol or drug abuse, poisoning, near drowning and a number of infections or diseases.

A traumatic brain injury causes damage to the brain in several ways - through the force of the impact, the swelling of the injured brain, and the collection of increased amounts of blood in confined spaces. The greater the interference with circulation of blood, the greater the brain damage. Depending on the extent and location of the brain injury, people's responses vary. Impairment generally involves physical, psychological and cognitive difficulties. It is a myth that a person with memory impairment lacks intelligence. A brain injury is often termed an invisible disability because there is no outward manifestation of injury.

Communicating with someone who has an ABI:

- Reduce noise and distractions that may impede the person's thought processes.
- Allow the person to write information down and then sort it into a logical order due to sequencing difficulties.
- Allow the person to tape the conversation or take notes for better recall.
- Be patient as the person may present information in a roundabout manner.
- Be aware of conceptual or language difficulties, particularly those surrounding time or distances. Ask about what the person may have been doing before the incident occurred to gauge time factors.
- Make sure that you establish the time and place of further appointments and that the person writes this information down, because he or she may have initiation and recall difficulties.
- Build on pre-injury strengths or passions to build rapport and create confidence.
- Never assume a person's skill level will remain the same.

For further information on Acquired Brain Injury (ABI) visit:
www.headwayvictoria.org.au
People with a Sensory Disability

Sensory disability includes hearing impairment or loss as well as vision impairment.

Hearing Impairment:
Some people are born with a hearing impairment, whereas other people may develop a hearing loss because of illness or an accident. A 'severe' hearing impairment, means that someone who can hear loud noises like car horns and aeroplanes, will only hear some speech if the speaker is 10cm away. A 'profound' hearing impairment, means that someone may hear only very loud noises when they are very close, or they may hear nothing at all.

People with a severe or profound hearing impairment may use hearing aids, lip-reading and sign language to help them communicate with others.

Communicating with someone who has a Hearing Impairment:

- Secure a sign language interpreter.
- Install a TTY/TDD telephone to make yourself more accessible if appropriate.
- Speak directly to the person with a hearing impairment and not the interpreter, who should sit next to you for ease of conversation.
- Do not cover your mouth with your hand or chew food while speaking.
- Speak slowly and distinctly but naturally. If the person has difficulty comprehending, rephrase rather than repeat the question.
- Avoid having bright light or glaring light behind you when addressing a speech reader, because the shadows render your lips invisible.
- Reduce background noises and do not shout.
- If you are having difficulties communicating, use notes.
- Avoid the term, "deaf and dumb". The ability to speak and/or communicate effectively is unrelated to an individual's ability to hear.
- Make sure that interpreters or assistive listening devices are in place for this and future appointments.

For further information on Hearing impairment visit:
www.vicdeaf.com.au
Vision Impairment:
Vision impairment may be a partial or total loss of vision (blindness) and may be acquired during life or be present at birth (congenital).

Many people who have vision impairment can tell light from dark and some are able to distinguish shapes and movement. A person is considered, ‘legally blind’ if they can only see something that is six metres away, whereas a person with ‘normal’ vision can see the same item when it is 60 metres away.

A person who is visually impaired may need the assistance of a guide dog, a cane, a magnifying glass, or a sighted escort.

There are five common types of vision impairment:

- Tunnel Vision or loss of Peripheral vision (the main central object is clear but not the features around them).
- Loss of Central vision (the central object is unclear).
- Blurred vision (objects are blurred).
- Light perception (only light, but little visual clarity).
- Total blindness (only darkness).

Communicating with someone who has a Vision Impairment:

- If possible, speak to the person with a visual impairment in familiar surroundings to reduce stress.
- Ensure that the person receives Braille, large print copies or tapes of transcripts or statements.
- Find out if the person has adaptive computer technology, such as a Braille computer display, speech synthesiser, or enlarged-text software that enable them to read.
- Immediately indicate your presence, both verbally through speech and by approaching the person as he or she enters your environment. Do not stop speaking because he or she relies on the sound of your voice for direction.
- Use a normal tone of voice when speaking, it is not necessary to speak louder.
- Remember to introduce other people that may be present.
- Never speak to an assistant or escort rather than the person.
- Never interact with a guide dog when it is working.
- Offer your arm to guide the person who is unfamiliar with his or her surroundings. Allow the person to hold your arm not vice versa.

For further information on vision impairment visit:
www.visionaustralia.org.au
People with an Intellectual Disability

Developmental disabilities (often termed intellectual disabilities) occur early in life and can have a lifelong effect on development, adaptive behaviour, and learning. They include Down's Syndrome, learning disabilities, Autism Spectrum Disorder and other neurological conditions.

There are many reasons for a person to be born with an intellectual disability. Difficulties may occur when the mother is pregnant. For example, trauma, poisons and infection may affect the growth and development of the foetus, or there may be difficulties before, during or after the birth.

Sometimes there is a genetic problem, such as Down Syndrome that is easily recognised when the child is born. Intellectual disability may also be the result of an illness like Meningitis, or can occur as a result of a serious accident.

An intellectual disability means that the person may be a little or a lot slower at learning and may require assistance or repetition to understand certain concepts.

Communicating with someone who has a Intellectual Disability:

- Understand that the term developmental disability and intellectual disability are often interchangeable.
- Make sure that someone the person knows and trusts is present.
- Try to communicate with the person in familiar surroundings to reduce stress.
- Be patient: give the person time to respond.
- Avoid rapid or intense questioning and misleading statements.
- Talk slowly and calmly in short, simple rather than complex sentences.
- Use concise, concrete terms.
- If possible, work with a third party to interpret gestures or any idiosyncrasies specific to that person.
- Check understanding by asking the person to paraphrase what you have just explained.

For further information on vision impairment visit:
www.nswcid.org.au
People with an Autism Spectrum Disorder

Autism Spectrum Disorder (ASD) is a developmental condition which affects individuals in two main areas:

- Individuals have impaired communication and social interaction
- Individuals have restricted, repetitive patterns of behaviour, interests or activities

Autism affects the way that individuals are able to interact with others and they often find the world to be a confusing place. Some people with ASDs have other conditions as well, such as speech and language difficulties, intellectual disabilities, sleep problems, attention problems, epilepsy, anxiety and depression and difficulties with fine and gross motor skills. There are also other conditions that are associated with ASDs, including Fragile X Syndrome, Tuberous Sclerosis and other genetic disorders. Many have difficulties interpreting sensory information and may display over - or under - sensitivity. Being over-sensitive to sound, touch, taste, smell and vision can be very distressing to individuals with an ASD and can result in very strong reactions.

Communicating with someone who has an ASD:

- Avoid using literal language: ‘ball park figure’, ‘blow your own trumpet’, ‘cast your mind back’
- Avoid long strings of verbal instructions. People with autism may have problems remembering the sequence.
- Avoid hypothetical questions: ‘where do you see yourself in 10 years?’
- Avoid open ended questions, a person with autism may find it difficult to understand the concept of selling themselves and will simply tell the truth or facts rather than elaborating on their good points.
- Avoid sarcasm: Sarcasm can be very confusing for a person with autism as your facial expression and tone may not correspond to what you are saying verbally.

For further information on Autism Spectrum Disorders visit: www.amaze.org.au
People with a Mental Health Issue

Mental Health issues can be caused by psychological factors (loss of a parent, physical/sexual abuse or neglect), biological factors (genetics, brain injury or prenatal damage) or environmental factors (war, substance abuse or cultural expectations). Some of these disabilities include: Schizophrenia, Bi-Polar Disorder, Obsessive Compulsive Disorder and Depression.

Mental Health issues can be a temporary or a lifelong condition. A person with a mental illness, such as schizophrenia or bipolar disorder, may present with an exacerbation of inappropriate/unconventional behaviour. It is important not to judge the individual but try to establish a sense of trust. The person will easily pick up on your anxiety so keep calm.

Communicating with someone who has a history of Mental Illness:

- Make sure that a community advocate, relative, or someone that the person trusts are present for the interview.
- Avoid noise, observers and distractions that might increase the person’s anxiety.
- Be calm, patient, firm but reassuring.
- Talk slowly and confidently. Avoid rapid, pressured speech or long sentences due to distractibility.
- Remember the person may be feeling vulnerable.
- Treat the person with dignity and respect.
- Reflective listening – “is there anything I can do”?
- Make sure you have a relaxed posture.
- Good eye contact.
- Ask the person, “if you feel upset, who can support you”?

For further information on mental illness visit:
www.mifellowship.org
www.sane.org

People with a Learning Disability

People with learning disabilities do not have an intellectual impairment, but may experience difficulty with specific concepts such as reading, writing or spelling. Dyslexia and Attention Deficit and Hyperactivity Disorder (ADHD) are forms of learning disability. Learning disabilities can affect a person’s ability to read, write, spell or understand numbers. People with learning disabilities may also experience difficulty with memory and attention to tasks. They may also have difficulty in organising tasks or planning.
Inclusive Language

What we say affects how we think.
What we say affects how people feel about themselves.

By using language that is person-centred, we avoid many of the barriers to communication.

The most common mistakes are:

Labelling people: “he’s disabled”
Using Victim Language: “she suffers from” or “he is confined to a wheelchair”
Objectivising: “load her into the car”
Ownership Language: “our guys” or “my clients”

The following table gives some examples of what is appropriate versus what is now out of date and demeaning.

<table>
<thead>
<tr>
<th>Language to use</th>
<th>Language to avoid</th>
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<tbody>
<tr>
<td>Person with a disability</td>
<td>Disabled person, the disabled, special needs</td>
</tr>
<tr>
<td>Person with [specific disability], for example:</td>
<td>Suffers from..., victim of ..., afflicted by ...</td>
</tr>
<tr>
<td>• Person with autism</td>
<td>Down’s person, Autistic person</td>
</tr>
<tr>
<td>• Jane has cerebral palsy</td>
<td></td>
</tr>
<tr>
<td>• John has Down syndrome</td>
<td></td>
</tr>
<tr>
<td>Person with a physical disability</td>
<td>Handicapped, crippled, physically challenged</td>
</tr>
<tr>
<td>Person with an intellectual disability</td>
<td>Retarded, mentally handicapped, mental disability</td>
</tr>
<tr>
<td>Person with a mental illness</td>
<td>Insane</td>
</tr>
<tr>
<td></td>
<td>Mentally disabled</td>
</tr>
<tr>
<td>Person who uses a wheelchair</td>
<td>Wheelchair bound, confined to a wheelchair</td>
</tr>
<tr>
<td>Person without a disability</td>
<td>Normal, non-disabled</td>
</tr>
<tr>
<td>Person who is deaf</td>
<td>The deaf, the blind, blind people</td>
</tr>
<tr>
<td>Person who is blind</td>
<td></td>
</tr>
<tr>
<td>Accessible toilet, accessible parking space,</td>
<td>Disabled toilet, disabled parking, disabled entry</td>
</tr>
<tr>
<td>accessible entry</td>
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Disability Legislation

There are several laws that protect the rights of people with a disability. These include State, Federal and International Legislation. They are:

- 1992 Disability Discrimination Act
- 2006 The Victorian Charter of Human Rights and Responsibilities (Disability Act)
- 2006 The Disability Act
- 2008 Rights of PWD (UN)
- 2010 Equal Opportunities Act

**What is Disability Discrimination?**

Discrimination is treating or proposing to treat, someone unfavourably because of a personal characteristic protected by the law. This includes bullying someone because of a protected characteristic.

Equal opportunity laws protect people from discrimination, sexual harassment, victimisation and racial and religious vilification.

In Victoria, it is against the law to discriminate against someone because of their disability.

Disability includes physical, mental or intellectual conditions and may be short term, long term or permanent. The law protects people who have had a disability in the past and those who may have a disability in the future.

Around 1 in 5 people in Victoria has a disability and most people will experience some kind of disability at some times in their lives. Disability discrimination can prevent people from participating in community life and enjoying other human rights.

**Where discrimination can happen**

Victoria's Equal Opportunity Act makes discrimination against the law when it happens in:

- Accommodation
- Clubs
- Education
- Employment
- Goods and Services
- Land and Sale Transfers
- Local Government
- Sport

In some cases there may be exemptions. Contact the Victoria Equal Opportunity and Human Rights Commission for more information.
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Reasonable Adjustment

Under the Equal Opportunity Act 2010 employers, educational authorities and providers of goods and services are required to make reasonable adjustments for people with disability.

The Equal Opportunity Act 2010 clarifies the obligations on employers, education providers and providers of goods and services to make reasonable adjustments for people with disability.

For example, the new reasonable adjustments provisions in employment require an employer to make reasonable adjustments for a person with disability who:

- is offered employment, or is an employee; and
- requires the adjustments in order to perform the genuine and reasonable requirements of the employment.

These new obligations provide better guidance on when adjustments have to be made and how to determine whether adjustments are reasonable. This means that duty holders will have greater certainty and understanding about how to make adjustments for people with disabilities in the areas of employment, education and goods and services.

Making reasonable adjustments requires an employer, educational authority or service provider to balance the need for change with the expense or effort involved in making this change. If an adjustment requires a disproportionately high expenditure or disruption it is not likely to be reasonable.

There are limited exceptions to the duties to make reasonable adjustments, which allow employers, educational authorities and providers of goods and services to discriminate on the basis of disability if:

- the adjustments are not reasonable; or
- the person with the disability could not perform the genuine and reasonable requirements of the employment, or participate in education, or access services even if the adjustments were made; or
- the activities comply with or are exempted from a relevant disability standard made under the Disability Discrimination Act 1992 (Cth).

The reasonable adjustments obligations directly address systemic discrimination experienced by people with disabilities in the workplace, in education, and when they use goods and services.

Examples of reasonable adjustments

- An organisation creates an Easy English version of a vehicle mileage reimbursement form for an employee who has an acquired brain injury and associated reading difficulties.
- A school makes a voice recognition software package for computers available to assist students with learning or physical disabilities.
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- A factory provides widened doorways and ramp access to all common areas for employees with disabilities.
- A train service provides alternative transport options (coordination and payment of taxis) when accessible train carriages are unavailable for people who use mobility aids.

For more information on the legislation that affects people with a disability visit:
www.humanrightscommission.vic.gov.au
10 Essential Tips for Successful Communication

1. **Treat adults as adults.** Address people with a disability by their first names only when extending that same familiarity to all others. Never patronize people in wheelchairs by patting them on the head or shoulder.

2. **Offer to shake hands when introduced.** People with limited hand use or an artificial limb can usually shake hands and offering the left hand is an acceptable greeting.

3. **Ask first, wait until the offer of assistance is accepted.** Then listen or ask for instructions.

4. **Do not lean against or hang on someone’s wheelchair.** People with disabilities treat their chairs as extensions of their bodies. And so do people with guide dogs and help dogs. Never distract a work animal from their job without the owner’s permission.

5. **Place yourself at eye level when speaking with someone in a wheelchair or on crutches.**

6. **Always identify yourself and others who may be with you when meeting someone with a visual disability.** When conversing in a group, remember to identify the person to whom you are speaking.

7. **Speak directly to the person rather than through a support worker or interpreter.**

8. **Listen attentively to people who have difficulty speaking and wait for them to finish.** If necessary, ask short questions that require short answers. Don’t pretend to understand; instead repeat what you have understood and allow the person to respond.

9. **It’s ok to tap a person with a hearing disability on the shoulder or wave your hand to get attention.** Look directly at the person and speak clearly and normally. Establish if the person can read your lips. Keep hands, cigarettes and food away from your mouth when speaking. If a person is wearing a hearing aid, don’t assume that they can discriminate your speaking voice. Never shout to a person.

10. **Relax.** Don’t be embarrassed if you happen to use common expressions such as “See you later” or “Did you hear about this?” that seems to relate to a person’s disability.