

# Improve Your Ability to Serve Those with Disabilities

MALA May 19, 2016

NCKLS Directors Meeting June 9, 2016

## First Step

Understand at least a little  
of what it is you are  
dealing with!

# Mental Health

- ▶ One in four U. S. Adults will experience symptoms of a mental illness in a given year. That's 45.9 million adults age 18 and over.
- ▶ One in ten Adults in Kansas has a serious mental illness.
- ▶ 40% of individuals with major depression, schizophrenia, bipolar disorder and anxiety disorders are generally untreated.
- ▶ In Kansas untreated serious mental illness is associated with 128 suicides, 21,000 incarcerations, and 29,000 unemployed adults.
- ▶ Overall, the annual cost burden of untreated serious mental illness in Kansas is estimated to be \$1.17 billion.

# Mental Health

▶ Anxiety Disorder	19.1%
▶ Major Depressive Disorder	6.8%
▶ Substance Abuse Disorder	8.0%
▶ Bipolar Disorder	2.8%
▶ Eating Disorders	2.1%
▶ Schizophrenia	0.45%
▶ Any Mental Disorder	19.6%

The numbers above do not add up to 19.6%. The reason for the discrepancy is that many times, people suffer from multiple disorders.

# Anxiety

An anxiety disorder differs from normal stress and anxiety.

An anxiety disorder is more severe, lasts longer and interferes with work and relationships.

## U. S. ADULTS WITH ANXIETY DISORDERS IN ANY ONE YEAR

▶ Specific Phobia	9.1%
▶ Social Phobia	7.1%
▶ Post Traumatic Stress Disorder	3.6%
▶ Generalized Anxiety Disorder	2.7%
▶ Panic Disorder (typically lasts 10 minutes)	2.7%
▶ Obsessive Compulsive Disorder	1.2%
▶ Any Anxiety Disorder	19.1%

# If you call for law enforcement assistance with a mental health problem

- ▶ Ask for an officer who is Critical Incident Trained (CIT) or a co-responder. They will be specifically trained in how to deal with an individual with a mental disorder. Even if you do not have a CIT Officer, they will at least know what they are in for.
- ▶ We should contact a mental health facility for additional information and training on specific ways we can help and successfully interact with patrons exhibiting these disorders.

# The Whole Person

The Whole Person assists people with disabilities to live independently and encourages change within the community to expand opportunities for independent living.  
[thewholeperson.org](http://thewholeperson.org)

3710 Main Street

Kansas City, MO 64111

(816) 561-0304

- ▶ Centers for Independent Living are an excellent resource. Each county or cluster of counties should have a center.
- ▶ 1 in 5 Americans have disabilities, that's 56 Million Americans

# Types of Disabilities

- ▶ Sensory (hearing and vision)
- ▶ Developmental (Downs Syndrome)
- ▶ Psychiatric
- ▶ Cognitive (learning Disabilities)
- ▶ Mobility (moving wheelchair, cane, crutch or limp)
- ▶ Sensitivity
  - ▶ Light and smells can trigger migraines
  - ▶ Strobe lights can trigger Epileptic seizures
  - ▶ Loud noises excessive stimulus for those with Autism Spectrum Disorder
- ▶ Seizure Disorders (many varieties, shapes and sizes)



# Common Stereotypes & Misconceptions

- ▶ “Special”
- ▶ A threat
- ▶ Has multiple Disabilities
- ▶ A victim or object of pity
- ▶ Horrible or grotesque
- ▶ Helpless
- ▶ A burden
- ▶ Childlike

Don't make those disabled feel less valued. Treat them like you would treat everybody else, no worse, but no better either. Delete the word “inspired” from your vocabulary.

# Basic Etiquette Tips

- ▶ Don't be afraid to make a mistake.
- ▶ Treat disabled adults like adults.
- ▶ Don't make any assumptions about abilities.
- ▶ Ask before giving assistance, or wait until you are asked for help.
- ▶ Respect assistive devices and service animals (don't lean on chairs, ask for permission to pet or interact with service animals. These animals are on the job.
- ▶ Address the person with the disability and not the interpreter or attendant.
- ▶ Expect diversity of preferences and opinions. View each person with a disability is a learning opportunity.

# Welcoming a physical impairment

- ▶ Personal space includes wheelchair, cane, crutches or other aids.
- ▶ Don't lean on wheelchair or push it without asking first.
- ▶ Try to get eye level if speaking to a person in a wheelchair for more than a few minutes.
- ▶ Don't assume the person has a cognitive or other disability as well.

# Welcoming a deaf or hearing impairment

- ▶ Ask how he/she prefers to communicate. Consider writing a note or using a text device.
- ▶ If you are speaking through an interpreter, pause occasionally to give them an opportunity to catch up with the conversation.
- ▶ Talk directly to the deaf person and not to the interpreter unless it is a direct conversation between you and the interpreter.
- ▶ Speak in a clear, expressive manner. Do not over enunciate or raise your voice
- ▶ The goal is communication; do not pretend to understand. Ask a person to repeat or write it down.

# Welcoming a blind impairment

- ▶ Never push, pull or grab a blind person.
- ▶ Use normal voice level when speaking with a blind person, being blind doesn't automatically mean you are hard of hearing!
- ▶ Introduce or identify yourself when approaching or leaving. Not everyone will recognize or remember your voice.
- ▶ Don't hesitate to use words like "see" or "look."
- ▶ Ask if you can provide guidance or assistance.

# Welcoming a Autism Spectrum impairment

- ▶ Sometimes the person doesn't respond to a verbal question right away. Assume they understand but may not be able to speak and/or need additional time to process your words.
- ▶ If possible, offer other means of communication.
- ▶ Many have auditory processing difficulties, straight forward, clear remarks are best. Be prepared to restate / reword if necessary.
- ▶ Some individuals are sensitive to touch, and some may react with intensity when touched.
- ▶ Do not discourage "stimming" behavior (rocking, clapping, etc.) unless it presents a danger or significant interruption.

# Welcoming a cognitive or learning impairment

- ▶ Adjustments in pace, content activities and choice of language.
- ▶ Allow extra time in transitions of activity or location.
- ▶ Keeping group sizes small (usually around 10).
- ▶ Modify light and sound levels.
- ▶ Avoid perceptual or sensory overloads.

# Accommodations & Accessibility

- ▶ We need to make accessibility options prominent on our web sites. (usually a link in the upper right corner)
- ▶ List:
  - ▶ Parking, Entrances, and restrooms.
  - ▶ Braille and large print materials
  - ▶ Assistive technologies.
  - ▶ Assistive devices. (Grabbing arm for books on top shelves available)
    - ▶ (Can't have a better excuse for having weeding, shelves can't be overstuffed)
- ▶ ADA vs. Universal Design Standards
- ▶ Jaws added to our websites. Add an app will translate pictures into talking text for those visually impaired.
- ▶ Tables that rise and lower heights restroom handrails that rise and lower.

# People First Language

- ▶ Emphasizes the person, not the disability. Disability is not the primary, defining characteristic of an individual, but one of several facets of the whole person.
- ▶ As always, each person will have different opinions and preferences for word usage.

# Basics:

- ▶ Speak of the person first then the disability
  - ▶ A child with intellectual developmental disorder
- ▶ Emphasize abilities
  - ▶ A painter who uses a wheelchair
- ▶ Don't define groups solely by disabilities
  - ▶ Students who are blind rather than blind kids
- ▶ Avoid Patronizing Phrases
  - ▶ Not a “special” person who has “overcome” a disability.
- ▶ Develop a relationship before talking about sensitive issues.
  - ▶ “Hi! I know this is the first time we have met, so tell me how you ended up the way you are . . .” HIPPA needs to be respected. The disability is none of your business!



## Also:

- ▶ Familiarize yourself with accommodations and accessibility features and resources provided by your library
- ▶ Speak clearly and directly - give simple directions.
- ▶ Respect assistive devices.
- ▶ Always ask before assisting.
- ▶ Don't make assumptions.

# Homelessness

- ▶ Homelessness is starting to become generational.
- ▶ Developing a relationship with homeless people, learning their name and treating them like human beings will often make it easier dealing with sensitive topics in library etiquette.
- ▶ When/If library behaviors become unacceptable the stronger your relationship is, the less offensive your comments / concerns will be received.
- ▶ One library experienced a homeless person who was using the public restroom to bathe in. When the staff began engaging the homeless man, he started cleaning up his saving mess on his own, without being asked to.

# Homelessness Cont.

- ▶ All the other libraries were not aware of the Supreme Court decision which prohibits denying access to public libraries to homeless people. There was lively discussion about a homeless person who came in with feces on their clothing and the library put them out because of the bio-hazard risks to other patrons.

# Easy Things For NCKLS to consider

- ▶ Updating websites to include handicap accommodations including maps of our libraries showing handicap parking locations, handicap accessible doors, restrooms with types of handrails and the other accommodations that are available. Make the maps able to be translated into verbal descriptions or text.
- ▶ It should be our policy; when making library renovations, we use Universal Design Standards when possible and not settle for ADA requirements. Every renovation project should move closer to complete accessibility.
- ▶ Develop information packets dealing with local Mental Health resources, Homeless resources and Handicap resources.
- ▶ Encourage local law enforcement to get training to be CIT officers.
- ▶ Train all employees to recognize that individuals with handicaps are still patrons too and we need to serve them with the same level of service we serve everybody else

# Things For NCKLS to consider (Cont.)

- ▶ We should consider adding to our training opportunities with groups like The Whole Person, or local facilities / experts who deal with these issues.

## Web sites offering us assistance

- ▶ <http://www.ala.org/ascla/asclaprotocols/thinkaccessible/internetwebguidelines>
- ▶ <http://www.Washington.edu/accessibility/web/>