FACT SHEET #17
Disability Etiquette – Tips for Interacting with People with Disabilities

This fact sheet is intended to offer guidance to navigators on communicating more effectively with people with disabilities as they are doing ACA enrollment.

As described in NDNRC “Guide to Disability Healthcare Insurance Marketplace Navigators”¹ basic disability etiquette involves treating people with disabilities with respect. For example, speak to the person directly, not to the person accompanying them. Do not make assumptions about what they can or cannot do. The impact of a specific disability can vary widely from person to person, so offer assistance only if it appears to be needed. Acknowledge and respect the individual’s ability to make decisions and judgments on their own behalf.

Always use “people first” language. For example, use the term “people with disabilities.” Do not use terms such as “the disabled” or “the handicapped.” Avoid referring to people by their disability. For example, do not say, “She is an epileptic.” Instead, say, “She has epilepsy.” Do not say “wheelchair-bound” or “confined to a wheelchair.” Most wheelchair users perceive their wheelchair as liberating, not confining. Do say, “She uses a wheelchair.” Do not use negative, demeaning, and outdated terms such as “cripple,” “deaf and dumb,” or “retarded.”

Avoid using terms such as “physically challenged,” or “differently abled.” Also, avoid referring to an individual with a disability as someone who is “suffering from cerebral palsy or Parkinson’s.”

People with All Types of Disabilities:

- Introduce yourself and offer a handshake. People with limited hand use or wear an artificial limb usually can shake hands. The person will often tell you if they are not able to shake hands for some reason.

- Always ask before providing assistance - wait until the offer is accepted.

- Speak directly to the person and not their attendant, interpreter, family member, etc.

- Do not pet service animals without checking with the owner first.

- It is acceptable to ask questions if you are unsure how to proceed or what to do next.

- As a navigator or enrollment specialist, at the beginning of the meeting it is a good idea to identify where the accessible restrooms are located.

¹ http://www.nationaldisabilitynavigator.org/ndnrc-materials/disability-guide/
People with Mobility Disabilities

- Do not push or touch a person’s wheelchair/scooter without their permission – a wheelchair is part of the personal body space of the person.

- Try to insure there is space in your waiting room and your office for someone in a wheelchair or scooter to comfortably wait in their chair.

- If you are speaking with a person who uses a wheelchair or a person who uses a mobility device for more than a few minutes, place yourself at eye level in front of the person to facilitate the conversation.

People who are Blind or Low Vision

- Always introduce yourself and anyone else who is present for the conversation.

- If you are leaving the room or your desk, tell the person you are leaving. If there is an interruption, such as a phone ringing, knock on your door, or someone steps into your office, explain the interruption.

- When conversing in a group, identify the person who is speaking and to whom you are speaking.

- Speak directly to a person who is blind, not through a companion.

- Offer to read information to a person when appropriate.

- If you are asked to offer guidance, offer your arm so the person can grasp your elbow and proceed at a normal pace. Do not take a person’s arm and move them by the elbow.

- Never leave a blind person standing alone in the middle of a room. Escort the person to a seat or place their hand on “a point of reference” such as a wall or table.

- A Guide Dog walks on the left, so you should walk on the right. Do not pet a Guide Dog – the dog is responsible for guiding his/her master who cannot see and should not be distracted from their duty.

- If assisting a person to a chair in your office, place their hand upon the back of the chair; do not try to push the person into a chair.

People who are Deaf or Hard of Hearing

- Make sure you get the person’s attention before you begin to communicate. It is not considered rude to lightly touch people you do not know to get their attention.
• Speak directly to the person in your normal voice and not to their interpreter, if an interpreter is present.

• Let the person establish their preferred method of communication for your conversation, such as lip reading, sign language, note writing. When speaking make eye contact.

• Feel free to use gestures and visual cues, such as holding up items that you are discussing.

• Explain if there is an interruption such as a phone ringing, knock at the door or any activity that is disruptive outside of your office.

People with Speech and Language Disorders

• People with speech and language disorders may take longer to communicate with you – be patient and respectful.

• Be sensitive and do not interrupt or finish the person’s sentence.

• Ask one question at a time, giving the person time to respond before moving on.

• If the person uses any assistive technology devices, make sure the devices are always within the person’s reach.

People with Cognitive or Intellectual Disabilities

• Keep communication simple, using short sentences and completing one topic before moving to the next topic.

• If possible, use pictures or other visual aids.

• Ask if the person has any questions or if there is anything they would like for you to clarify. If you feel it is necessary, repeat what you understand the person to be saying and ask for confirmation if your understanding is correct.

People with Mental Health or Behavioral Health Disabilities

• If a person seems anxious or agitated, speak calmly and offer to repeat information.

• If a person seems nervous or confused, be willing to break things down step-by-step to help them understand the application procedure.
• Respect a person’s choice of language or terminology. For example, if they ask you to refer to something as a “mental health condition” instead of a “mental illness”, listen to their request. If they say they don’t have a mental health condition, but identify mental health treatment as a medical need, don’t disagree. Just help them select a plan with appropriate treatment.

• If a person becomes upset or anxious, they may be confused or overwhelmed. Speak in a normal, calm tone of voice, repeat necessary information and reassure them.

• If a person brings an assistor, be sure to speak directly to the person, not to the assistor.

• Know the local mental health crisis number to contact if needed.