DISABILITY ETIQUETTE GUIDE
Tips on Interacting Respectfully with People with Disabilities
The first Disability Etiquette Guide was published shortly after the 1990 passage of the Americans with Disabilities Act by the Eastern Paralyzed Veterans of America, which became United Spinal Association in 2004. It was written by Terence Moakley and James Weisman and, over the years, has introduced countless people worldwide to our broad and diverse disability community.

We updated this edition with 21st-century sensibilities in mind. But the basics, as laid out by Moakley and Weisman, are still the same: People with disabilities are people first. They deserve dignity and respect, as do all people everywhere.

We hope this guide and the tips offered make interacting with members of the disability community more comfortable, leading to increased understanding and improved accessibility for all.

About United Spinal Association

United Spinal Association represents our nation’s 5.5 million wheelchair users. We proudly trace our roots to the paralyzed World War II vets who came home to an inaccessible nation and made it their new mission to create a fully inclusive society. We honor them by using today’s tools to provide top-notch service and resources to our members, chapters, and the broader disability community.

Our Vision: A world where people with SCI/D and all wheelchair users can realize their full potential and live life at its fullest.

Our Mission: Empower and advocate for people with SCI/D and all wheelchair users to achieve their highest quality of life.

Join Us: unitedspinal.org/membership-form/

Support Our Cause: unitedspinal.org/support-our-mission/
# Table of Contents

1. **Meet the Disability Community** ................................................. 4
2. **The Basics** .................................................................................. 6
3. **Terminology Tips** ........................................................................ 7
4. **Disability Categories** .................................................................. 8
5. **Physical Disabilities** ................................................................... 9
6. **Sensory Disabilities** .................................................................... 12
7. **Web and Print Access** ................................................................ 13
8. **Service and Support Animals** .................................................. 14
9. **Neurodivergence** ........................................................................ 16
10. **Scent-Triggered Disabilities** ..................................................... 17
11. **People with Intellectual Disabilities** .......................................... 18
12. **People of Short Stature** ............................................................ 19
13. **A Final Word** ............................................................................ 19
Meet the DISABILITY COMMUNITY

The Americans with Disabilities Act defines a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities, a history or record of such an impairment, or is perceived by others as having such an impairment.
A CLOSER LOOK AT THOSE WHOSE DISABILITY AFFECTS EVERYDAY ACTIVITIES.

The U.S. Centers for Disease Control and Prevention, Disability and Health Data System estimates that up to **27% of Americans live with a disability that impacts their daily life**. Here’s the breakdown:

- **12.1** percent of U.S. adults have a **mobility disability** with serious difficulty walking or climbing stairs.
- **12.8** percent of U.S. adults have a **cognitive disability** with serious difficulty concentrating, remembering, or making decisions.
- **7.2** percent of U.S. adults have an **independent living disability** with difficulty doing errands alone.
- **6.1** percent of U.S. adults are **deaf or have serious difficulty hearing**.
- **4.8** percent of U.S. adults have a **vision disability with blindness** or serious difficulty seeing even when wearing glasses.
- **3.6** percent of U.S. adults have a **self-care disability** with difficulty dressing or bathing.

Thanks to our society’s increased commitment to the values of inclusion and accessibility, more people with disabilities are part of our nation’s labor pool, employed in every field and industry. People with disabilities purchase the same goods and services as nondisabled people. Yet, misunderstanding and even discrimination persist.

We hope this Disability Etiquette Guide will help facilitate the full inclusion of all people with disabilities into all aspects of our society. We believe we all become stronger when we understand and support each other. We become better employers, employees, business owners and customers when we all feel valued and welcomed.
TREAT PEOPLE THE WAY YOU WANT TO BE TREATED

Here are some tips that cover what often goes overlooked in everyday life:

**Ask before you help.** Don’t assume that because a person has a disability, they need help. Usually, they will ask if they need assistance. If you offer and they accept, follow their instructions. They know their capabilities.

**Do not touch, pat or grab.** No one wants to be touched without consent, including people with disabilities. Do not touch, grab, or guide them or their wheelchair, scooter or cane without permission. Remember that people with disabilities consider their equipment part of their personal space.

**Speak directly to the person with a disability.** Also, while striking up a conversation is great, remember that most people, including those with disabilities, would rather not discuss their bodies or medical history with people they just met.

**Avoid making assumptions.** People with disabilities are the best judge of what they can or cannot do. Remember, it could violate the ADA in many situations to exclude people from an activity because of their disability.

**Be open to requests for access or accommodation.** Nurturing an equitable, inclusive society is up to all of us. Ensuring your business is accessible and committing to reasonable accommodations upon request not only complies with anti-discrimination laws but also showcases excellent customer service and dedication to all members of your community.
TERMINOLOGY TIPS

Language constantly evolves, including how people with disabilities prefer to be presented or spoken about. Pre-ADA, it wasn’t uncommon to hear people called “handicapped,” “crippled,” or “retarded” — terms that are frowned upon and, the latter especially, even considered slurs. Phrases such as “differently abled” and “physically challenged” seem harmless but are considered unhelpfully euphemistic by many in our community. It’s best to avoid them.

Here are two respectful models for speaking about people with disabilities:

Identity-First Language: Many advocates assert that being disabled is as natural as any other identity, on par with gender, sexual orientation, religion, ethnicity, or race.

Identity-first language arose from a growing number of Autistics, with a capital A, who view autism as a positive, natural part of who they are. Also, the Deaf community historically refers to itself as Deaf with a capital D.

However, there is not yet consensus among all disability groups to adopt identity-first language.

Person-First Language: As the disability movement came into its own after the passage of the ADA, advocates asserted that individuals with disabilities are people first, equal and deserving of the same rights and treatments as everyone else. “Person-first” language was born from our movement’s early days.

Say “person with a disability” and “people with disabilities.” For specific disabilities, saying “person with a spinal cord injury” or “person with cerebral palsy” is considered respectful.

Similarly, say “wheelchair user” or “person who uses a wheelchair.” People are not bound or confined to their wheelchairs, after all. A wheelchair is a tool that enables the person to get around and participate in society; it’s liberating, not confining.

While it is OK to interchange identity-first and person-first, it is best to take the lead from the disabled person or group you are interacting with. Chances are, you won’t need to choose either speaking style and can simply call them by their names.

Words to avoid: Avoid negative, disempowering words like “victim” or “sufferer.” Never use the word “retard” or “retardation,” ever. It is OK to use idiomatic expressions when talking to people with disabilities. For example, saying, “It was good to see you,” is fine.
In this guide, we will explore the following four disability categories:

**Physical** — these conditions impact a person’s ability to move their body. Examples include spinal cord injury, spina bifida, cerebral palsy, stroke, arthritis, and multiple sclerosis. The same person may use a cane, crutches, a walker or a wheelchair to get around, while others may not be able to move their arms or legs at all. Take care not to generalize or make assumptions about a person’s ability based on whatever tool they use to access their home and community.

**Sensory** — this category primarily refers to conditions that impact a person’s ability to see or hear. Some people may be totally blind, while others may be able to read a little bit or see color. Deaf people have created a vibrant culture with its own literature and language. People who lose all or some of their hearing later in life are typically referred to as being hard of hearing or having a hearing impairment.

**Neurodivergent** — this term arises from the Autistic community and includes all the ways some people’s brains may work differently than those who are neurotypical. Attention-deficit hyperactivity disorder, brain injury, Tourette’s Syndrome, dyslexia and mental health conditions all fall under this broad, relatively new category.

**Intellectual** — intellectual disability can be seen as a subset of neurodivergence but deserves its own category as it may require different accommodations than other disability types. Examples include Downs Syndrome, fragile X and developmental delay. Although disabilities may seem to fit specific categories, people are not easy to sort.
An individual may have one or many types of disabilities. For example, multiple sclerosis is usually categorized as physical, but it also may lead to neurodivergence and often includes visual impairments. Similarly, cerebral palsy may affect a person’s speech, ability to move, and thinking processes. Or it may not.

It’s best to remember that everyone is an individual with unique wants, needs and desires. This includes each person with a disability.

**PHYSICAL DISABILITIES:**

**People Who Use Wheelchairs or Other Mobility Devices**

People who use wheelchairs, walkers, canes, and crutches are individuals, not equipment. Remember to treat them like people, not furniture or coat racks. Some can use their arms and hands. Others can get out of their wheelchairs and even walk for short distances. Try not to make assumptions about a person’s abilities just by looking at them.

Here are nine more helpful tips:

**Clear ramps:** Keep the ramps and wheelchair-accessible doors to your building unlocked and unblocked. To ensure compliance with the ADA, don’t place displays in front of entrances, leave housekeeping carts in the middle of hallways, or put boxes on ramps.

**Eye-level conversations:** When talking to a wheelchair user, grab a chair and sit at their level. If that’s not possible, stand at a slight distance so they aren’t straining their neck to make eye contact with you.

**Remove trip hazards:** Rugs or other floor coverings must be perfectly flush with no bunches of fabric or corners sticking out to trip up cane or crutch users. Also, make sure floors are dry and hazard-free. Choose surfaces that don’t become slick if damp, and use wet floor signs when appropriate.

**Easy-reach items:** Ensure that items are placed within easy reach of a seated person, that aisles are wide enough for a wheelchair user to glide through and that there is a clear path of travel to shelves and display racks.
Seat-level counters: Your service counter should be low enough for a wheelchair user to see over easily. If it is too high, and you cannot comply with the ADA by lowering it, step around it to provide the customer who uses a wheelchair with equal service. Ensure your card reader is within easy reach by a seated person or hold it lower so a wheelchair user can tap their phone or card to make a purchase.

Limited reach: Some people have limited use of their hands, wrists, or arms. They may ask you to assist with reaching, grasping, or lifting objects, opening doors and display cases, and operating vending machines and other equipment.

Accessible routes: If your building has different ways through it, be sure that signs direct people to the accessible paths around the facility. People who use canes or crutches also need to know the easiest way to get around a building but may prefer the shortest route over the most wheelchair accessible. Ensure that security guards and receptionists can answer questions about the most accessible way around the building and grounds, including the location of elevators.

Informed consent: Never touch anyone without their permission, especially people with disabilities. Grabbing a person using a cane or crutches could cause serious injury as they often need their arms to balance themselves. People with limited mobility may lean on a door for support as they open it. Pushing the door from behind or unexpectedly opening it may cause them to fall. Always ask before offering help, and then follow their instructions.

Places to rest: People whose disabilities are not visible may also have trouble walking long distances or quickly. Be sure that your museum, hotel, or department store has ample benches for people to sit and rest on.

Contact our Accessibility Services team for more specific advice on making your business fully inclusive to wheelchair users and others with physical disabilities: www.accessibility-services.com/
SENSORY DISABILITIES:
People who are blind, visually impaired, Deaf, or hard of hearing

People Who are Blind
People who are blind undergo training to learn how to orient themselves and travel unassisted and may use a cane or a guide dog. Do not interfere with them if you observe them out and about doing their business. If they need assistance, they will ask.

Here are eight more ideas:

Identify yourself when you meet a blind person, and introduce them to others in the group they may not see or whose voices they may not recognize. Inform the blind person if you are leaving the area and ask if they need anything before you go.

Offer a tour of your facility to a new customer or employee who is blind or has a visual impairment.

Good lighting is important, but it shouldn’t be too bright. Some bright overhead lighting fixtures can cause pain for people with damaged optic nerves. Additionally, anything that can produce a glare may aggravate an eye condition.

Keep all walkways obstruction-free. Also, notify your customers who are blind or have visual impairments of any changes you have made to your facility, such as rearranging the furniture. And make sure there are no low-hanging barriers or protruding objects as well.

Never grab a blind person to guide them. Instead, ask them if they’d like assistance and offer your elbow for them to hold onto. If they need further help, they will let you know.

Do not pet, touch, or otherwise distract a service dog as it is working. Also, do not touch the person’s cane. If they put their cane down, do not move it.

Offer to read written information such as menus or labels to customers who are blind. Inform them if there is a QR code, which may allow independent access to the material.
WEB AND PRINT ACCESS

Web access for people who are blind or visually impaired is essential for their participation in the digital realm. Screen readers and other assistive technologies allow blind people to navigate websites and read content.

Here are five tips to make your website more accessible:

• Provide alt text for all images and other visual content.

• Use high contrast colors for text and background.

• Make sure that all links are descriptive and easy to find.

• Enable keyboard navigation.

• Offer transcripts for audio and video content.

A person with a visual impairment may request large print written material. A clear font with appropriate spacing is as important as the type size. Use contrasting bold colors when designing labels and signs. Avoid using all uppercase letters so people with low vision can easily distinguish the end of a sentence.

For more information, contact United Spinal Association’s Tech Access Initiative at unitedspinal.org/tech-access-initiative/.

When serving a blind person food, offer to let them know where it is on the plate according to a clock orientation (12 o’clock is furthest from them, 6 o’clock is nearest). Some patrons may ask you to cut their food. You or the cook can do this in the restaurant’s kitchen before serving the meal.
People Who Are Deaf, Hearing Impaired or Hard of Hearing

The Deaf community has its own vibrant culture and language, as most nations’ sign languages have a syntax all their own. People with hearing loss, though, typically understand the language of the dominant culture where they grew up and often rely on watching a person speak to communicate effectively.

Try these nine suggestions:

Hire a qualified sign language interpreter to assist in communicating with a Deaf person who speaks ASL when the exchange of information is complex (e.g., during a job interview or doctor’s visit or when reporting a crime). For a simple interaction, writing back and forth is usually OK.

Speak directly to the Deaf person, not their interpreter, and maintain eye contact to be polite.

Get the attention of the Deaf or hard-of-hearing person before you begin communicating. You may wave your hand or tap them on the shoulder, depending on the situation.

Rephrase, rather than repeat, sentences that the person does not understand.

SERVICE AND SUPPORT ANIMALS

Many people use service or support animals to help mitigate their disabilities. By law, these animals can accompany their handlers anywhere they go. Also, they must be well-behaved and harnessed, leashed, or tethered. If the animal is out of control or loose, you may ask the owner to remove it.
Maintain eye contact and do not cover your face when speaking with a Deaf or hard-of-hearing person. If on a Zoom or other video-based call, turn your camera on and ensure your face is visible.

Speak clearly. Most people who have hearing loss watch people’s lips as they speak to help them understand. Avoid chewing gum, smoking, or obscuring your mouth with your hand while speaking.

Don’t raise your voice. Shouting may distort your words or even cause pain.

Consider using text or chat. You can always write out what you need to say on your phone or with paper and pen if talking does not work.

Accept relay calls. Although most Deaf and hard-of-hearing people use text or chat to communicate, some still use a TTY or a video relay service for phone calls. These services allow the person to make and receive calls through a communications assistant, including sign language interpreters. If you receive a relay call, the operator will identify it as such.

NEURODIVERGENCE:
People Whose Brains Develop or Work Differently

The term “neurodivergent” indicates that some people’s brains work differently than most others. This broad category includes autism, ADHD, brain injury, mental health, Tourette’s syndrome and similar disabilities or conditions.

It’s important to remember that everyone is different, so what works for one person with a neurodivergent brain may not work for another. The most important thing is to be respectful and understanding and to communicate openly and honestly.

Here are 10 ways to be present for people with neurodivergent brains:

Be patient. People with neurodivergent brains may process information differently than you do, so be patient and understanding when communicating with them. They may need more time to process what you’re saying, or they may ask questions that seem obvious to you.
Be open-minded. Don’t assume that someone with a neurodivergent brain understands what you’re saying or that they’re thinking the same thing as you. Ask questions and clarify things if you’re not sure.

Be respectful of their boundaries. People with neurodivergent brains may be sensitive to noise, light, or touch. Respect their boundaries and ask them what they need to feel comfortable.

Be clear and direct. People with neurodivergent brains may not pick up on social cues as easily as neurotypical people. Be clear and direct in your communication and avoid sarcasm or humor.

Be supportive. Some people with neurodivergent brains stim or engage in repetitive movements or behaviors. This can be a way for them to self-regulate and cope with stress. It’s perfectly normal and helpful for them to do so. Be understanding and give them space to stim if they need to.

Be calm. Some with neurodivergent brains can be overwhelmed by too much sensory stimulation. Avoid making loud noises or sudden movements and respect their need for personal space. If planning an event, set aside a quiet, welcoming space for those who need a break.

SCENT-TRIGGERED DISABILITIES
Some people become ill when exposed to strong fragrances or chemicals. This may be due to cancer treatment, multiple chemical sensitivities, or other reasons. Try to provide a fragrance-free space, as you can’t know who may become ill from strongly scented cleaning supplies or perfumes.

If someone self-identifies, ask how they wish to be accommodated. Maybe you can meet in a different room with better ventilation and no discernable odors, for example, or possibly even outdoors.
Be flexible. Let people with dyslexia take their time when reading or writing. Offer them accommodations, such as reading aloud or using a computer with a text-to-speech function.

Be understanding. Act natural and ignore tics if you are talking to someone with Tourette’s Syndrome. They’re involuntary and drawing attention to them is unkind.

Be aware. Brain injuries can affect mood and behavior, so it’s important to be patient and understanding if the person has outbursts or seems emotional.

Be responsible. Do not interfere with a person who seems to be experiencing a mental health crisis unless you are trained to do so. They may be acting in ways that are strange to you but normal to them. Sometimes more harm can be caused by trying to help than by letting them be.

Be mindful of what you say and do and avoid anything that could be hurtful or triggering — which is generally a good rule for dealing with anyone.

**PEOPLE WITH INTELLECTUAL DISABILITIES**

People with intellectual disabilities deserve to be treated with respect. Don’t make assumptions about them or their abilities and avoid using discriminatory language. Especially never use the slur “retarded” or “mentally retarded.”

Here are a few more do’s and don’ts:

**Do be patient.** People with intellectual disabilities may learn and process information slower than others. Be patient with them and give them time to process information.

**Don’t talk down to them or treat them like children.** Instead, assume they have had the same experiences as most other adults and respect them as such.

**Do use clear and concise language.** Avoid using jargon or slang, and be sure to explain any unfamiliar terms.
**Don’t give up too soon.** When giving instructions, proceed slowly and ask the person to summarize the information to ensure it is understood. You may have to repeat yourself several times for the individual to take in all the information.

**Don’t automatically defer to a family member,** staff person or caregiver. Speak directly to the person with the intellectual disability.

**Do present information visually.** Ensure that people with difficulties reading or writing have equal access to written materials, maybe with voice recordings or videos. Use pictures or simple photographs to identify rooms, tasks, or directions.

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**PEOPLE OF SHORT STATURE**

Short people do not wish to be picked up into the air, pushed aside, ignored, teased about their height, talked down to, touched or patted without consent. Also, remember not to put any items up high that can be placed low enough for everyone to reach them.

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**A FINAL WORD:**

People with disabilities are individuals with families, jobs, hobbies, likes and dislikes, and problems and joys. While their disability is integral to their identity, it does not define them. Don’t make them into heroes or victims. Recognize them as individuals.