Disability Etiquette

TIPS ON INTERACTING WITH PEOPLE WITH DISABILITIES

By Judy Cohen
ACCESS RESOURCES

Illustrations by Yvette Silver

A PUBLICATION OF THE EASTERN PARALYZED VETERANS ASSOCIATION
ABOUT EPVA

The Eastern Paralyzed Veterans Association is dedicated to enhancing the lives of veterans with a spinal cord injury or disease by ensuring quality health care, promoting research and advocating for civil rights and independence. EPVA is a chapter of the congressionally chartered Paralyzed Veterans of America and has over 2,000 members in New York, New Jersey, and Connecticut.

EPVA is a not-for-profit organization based in Jackson Heights, New York. Since our founding in 1946, EPVA has enabled members, as well as other people with disabilities, to lead full and productive lives. All of our services, from benefits counseling to wheelchair sports, are supported through greeting card and other premium direct mail fund-raising programs.

ACCESS RESOURCES

Training in the Americans with Disabilities Act, Disability Awareness Training, Mediation, Accessible Event Planning.

Judy Cohen Executive Director

351 West 24th Street, Suite 9F
New York, NY 10011
(212) 741-3758 (Voice/TTY)
email: accessrs@ix.netcom.com
# Table of Contents

Introduction ............................................................... 1  
The Basics ................................................................ 2  
Language Tips.......................................................... 5  
People Who Use Wheelchairs or Have Mobility Impairments .......... 7  
People Who Are Blind or Visually Impaired .... 12  
People Who Are Deaf or Hard of Hearing ...... 17  
People With Speech Disabilities ......................... 23  
Persons of Short Stature .................................... 24  
People with Cerebral Palsy ................................. 25  
Tourette Syndrome .............................................. 26  
Multiple Chemical Sensitivity (MCS) ...................... 29  
Epilepsy (Seizure Disorders) ................................. 31  
HIV & AIDS ............................................................ 33  
Psychiatric Disabilities......................................... 34  
Cognitive Disabilities:  
  - Mental Retardation ........................................ 35  
  - Learning Disabilities .................................... 37  
  - Traumatic (or Acquired) Brain Injury ...... 39  
Emergency Evacuation Procedures .................... 41  
A Final Word .......................................................... 44  
Disability Access Resource List .............................. 45  
Publications ........................................................... 48  
Signage ................................................................. 51  

Introduction

The National Organization on Disability reports that more than 49 million Americans have a disability. This booklet is for anyone—with or without a disability—who wants to interact more effectively with people with disabilities.

The Americans with Disabilities Act (ADA) of 1990 was conceived with the goal of integrating people with disabilities into all aspects of American life, particularly the workplace and the marketplace. Sensitivity toward people with disabilities is not only in the spirit of the ADA, it makes good business sense. It can help you expand your practice, better serve your customers or develop your audience. Practicing disability etiquette is an easy way to make people with disabilities feel welcome. When supervisors and co-workers use disability etiquette, employees with disabilities feel more comfortable and work more productively.

You don’t have to feel awkward when dealing with a person who has a disability. This booklet provides some basic tips for you to follow. And if you are ever unsure about what to do or say with a person who has a disability, just ask!
The Basics

ASK BEFORE YOU HELP.
Just because someone has a disability, don’t assume she needs help. If the setting is accessible, people with disabilities can usually get around fine. Adults with disabilities want to be treated as independent people. Offer assistance only if the person appears to need it. And if she does want help, ask how before you act.

BE SENSITIVE ABOUT PHYSICAL CONTACT.
Some people with disabilities depend on their arms for balance. Grabbing them—even if your intention is to assist—could knock them off balance. Avoid patting a person on the head or touching his wheelchair, scooter or cane. People with disabilities consider their equipment part of their personal space.

THINK BEFORE YOU SPEAK.
Always speak directly to the person with a disability, not to his companion, aide or sign-language interpreter. Making small talk with a person who has a disability is great; just talk to him as you would with anyone else. Respect his privacy. If you ask about his disability, he may feel like you are treating him as a disability, not as a human being. (However, many people with disabilities are
Speak directly to the person with a disability, not to his companion or sign-language interpreter.
comfortable with children’s natural curiosity and do not mind if a child asks them questions.)

**RESPOND GRACIOUSLY TO REQUESTS.**

When people who have a disability ask for an accommodation at your business, it is not a complaint. It shows they feel comfortable enough in your establishment to ask for what they need. And if they get a positive response, they will probably come back again and tell their friends about the good service they received.

**DON’T MAKE ASSUMPTIONS.**

People with disabilities are the best judge of what they can or cannot do. Don’t make decisions for them about participating in any activity. Depending on the situation, it could be a violation of the ADA to exclude people because of a presumption about their limitations.
**Language Tips**

**Put the person first.** Say “person with a disability” rather than “disabled person.” Say “people with disabilities” rather than “the disabled.” For specific disabilities, saying “person with Tourette Syndrome” or “person who has cerebral palsy” is usually a safe bet. Still, individuals do have their own preferences. If you are not sure what words to use, ask.

Avoid outdated terms like “handicapped” or “crippled.” Be aware that many people with disabilities dislike jargony, euphemistic terms like “physically challenged” and “differently abled.”

Say “wheelchair user,” rather than “confined to a wheelchair” or “wheelchair bound.” The wheelchair is what enables the person to get around and participate in society; it’s liberating, not confining.

It’s okay to use idiomatic expressions when talking to people with disabilities. For example, saying, “It was good to see you,” and “See you later,” to a person who is blind is completely acceptable; they use these expressions themselves all the time!

Many people who are Deaf communicate with sign language and consider themselves to be members of a cultural and linguistic
minority. They refer to themselves as Deaf with a capital “D,” and may be offended by the term “hearing impaired” to refer to people who have hearing loss but communicate in spoken language.

With any disability, avoid negative, disempowering words like “victim” or “sufferer.” Say “person with AIDS,” instead of “AIDS victim” or “one who suffers from AIDS.”

Note: We want you to think of people who have a disability as individuals—your friends, your co-workers, your neighbors—so rather than use the amorphous group term “they” for people with disabilities, we use the pronouns “he” or “she” throughout this brochure.
People Who Use Wheelchairs or Have Mobility Impairments

People who use wheelchairs have different disabilities and varying abilities. Some can use their arms and hands. Some can get out of their wheelchairs and even walk for short distances.

- Wheelchair users are people, not equipment. Don’t lean over someone in a wheelchair to shake another person’s hand or ask a wheelchair user to hold coats. Setting your drink on the desktop attached to someone’s wheelchair is a definite no-no.

- Don’t push or touch a person’s wheelchair; it’s part of her personal space. If you help someone down a curb without waiting for instructions, you may dump her out of the chair. You may detach the chair’s parts if you lift it by the handles or the foot rest.

- Keep the ramps and wheelchair-accessible doors to your building unlocked and unblocked. Under the ADA, displays should not be in front of entrances, wastebaskets should not be in the middle of aisles and boxes should not be stored on ramps.
Keep accessible paths of travel clear.
Be aware of wheelchair users’ reach limits. Place as many items as possible within their grasp. And make sure that there is a clear path of travel to shelves and display racks.

When talking to a wheelchair user, grab your own chair and sit at her level. If that’s not possible, stand at a slight distance, so that she isn’t straining her neck to make eye contact with you.

If the service counter at your place of business is too high for a wheelchair user to see over, step around it to provide service.

If your building has different routes through it, be sure that signs direct wheelchair users to the most accessible ways around the facility. People who walk with a cane or crutches also need to know the easiest way to get around a place, but stairs may be easier for them than a ramp. Ensure that security guards and receptionists at your business can answer questions about the most accessible way around the building.

If the nearest public restroom is not accessible or is located on an inaccessible floor, allow the person in a wheelchair to use a private or employees’ restroom that is accessible.

People who use canes or crutches need their arms to balance themselves, so never
Don't ask a wheelchair user to hold things for you. Respect her personal space.
grab them. Mobility-impaired people may lean on a door for support as they open it. Pushing them or quickly opening the door may cause them to fall. Even pulling out or pushing in a chair may present a problem. Always ask before offering help.

- If you offer a seat to a mobility-impaired person, keep in mind that chairs with arms are easier for some people to use.

- Falls are a big problem for people with mobility impairments. Be sure to set out adequate warning signs after washing floors. Also put out mats on rainy or snowy days to keep the floors as dry as possible. (Make sure they don’t bunch up and make the floor impassable for wheelchair users.)

- People who are not visibly mobility-impaired may have needs related to their mobility. For example, a person with a respiratory or heart condition may have trouble walking long distances or walking quickly. Be sure that your museum, hotel or department store has ample benches for people to sit and rest on.
People Who Are Blind or Visually Impaired

People who are blind know how to orient themselves and get around on the street. They are competent to travel unassisted, though they may use a cane or a guide dog. A person may have a visual impairment that is not obvious. Be prepared to offer assistance—for example in reading—when asked.

- Identify yourself before you make physical contact with a person who is blind. Tell him your name—and your role if it’s appropriate, such as security guard, usher, case worker, receptionist or fellow student. And be sure to introduce him to others who are in the group, so that he’s not excluded.

- If a new customer is blind or visually impaired, offer him a tour of your business.

- People who are blind need their arms for balance, so offer your arm—don’t take his—if he needs to be guided. (However, it is appropriate to guide a blind person’s hand to a banister or the back of a chair to help direct him to a stairway or a seat.)

- If the person has a guide dog, walk on the side opposite the dog. As you are walking,
If a person who is blind needs to be guided, offer your arm—don't take his.
describe the setting, noting any obstacles, such as stairs (“up” or “down”) or a big crack in the sidewalk. Other hazards include: revolving doors, half-opened filing cabinets or doors, and objects protruding from the wall at head level such as hanging plants or lamps. If you are going to give a warning, be specific. Hollering “Look out!” does not tell the person if he should stop, run, duck or jump.

- If you are giving directions, give specific, nonvisual information. Rather than say, “Go to your right when you reach the office supplies,” which assumes the person knows where the office supplies are, say, “Walk forward to the end of this aisle and make a full right.”

- If you need to leave a person who is blind, let him know. And leave him near a wall, table, or some other landmark. The middle of a room will seem like the middle of nowhere to him.

- Don’t touch the person’s cane or guide dog. The dog is working and needs to concentrate. The cane is part of the individual’s personal space. If the person puts the cane down, don’t move it. Let him know if it’s in the way.

- Offer to read written information—such as the menu, merchandise labels or bank
Be specific when giving directions to people who are blind or visually impaired.
DISABILITY ETIQUETTE

statements— to customers who are blind. Count out change so that they know which bills are which.

■ If you serve food to a person who is blind, let him know where everything is on the plate according to a clock orientation (twelve o’clock is furthest from them, six o’clock is nearest). Some patrons may ask you to cut their food; this can be done in the restaurant’s kitchen before the meal is served.

■ A person who is visually impaired may need written material in large print. Clear print with appropriate spacing is just as important as the type size. Labels and signs should be clearly lettered in contrasting colors. It is easiest for most people with vision impairments to read bold white letters on black background.

■ Good lighting is important, but it shouldn’t be too bright. In fact, very shiny paper or walls can produce a glare which disturbs people’s eyes.

■ If people who are blind or are visually impaired regularly use your facility as customers or employees, inform them about any physical changes, such as rearranged furniture, equipment or other items that have been moved. Keep walkways clear of obstructions.
People Who Are Deaf or Hard of Hearing

American Sign Language (ASL) is an entirely different language from English, with a syntax all its own. Speech reading (lip reading) is difficult for people who are Deaf if their first language is ASL because the majority of sounds in English are formed inside the mouth, and it’s hard to speech read a second language. People who are hard of hearing, however, communicate in English. They use some hearing but may rely on amplification and/or seeing the speaker’s lips to communicate effectively.

When the exchange of information is complex—such as during a job interview or doctor’s visit or when reporting a crime—the most effective way to communicate with a person who is Deaf is through a qualified sign-language interpreter. For a simple interaction—such as ordering in a restaurant or registering for a hotel room—writing back and forth is usually okay.

Follow the person’s cues to find out if she prefers sign language, gesturing, writing or speaking. If you have trouble understanding the speech of a person who is Deaf or hard of hearing, let her know.
When an exchange of information is complex, the most effective way to communicate with a person who is Deaf is through a qualified sign-language interpreter.
When using a sign-language interpreter, look directly at the person who is Deaf, and maintain eye contact to be polite. Talk directly to the person (“What would you like?”), rather than to the interpreter (“Ask her what she’d like.”).

People who are Deaf need to be included in the decision-making process for issues that affect them; don’t decide for them.

Before speaking to a person who is Deaf or hard of hearing, make sure that you get her attention. Depending on the situation, you can wave your hand, tap her on the shoulder or flicker the lights.

Rephrase, rather than repeat, sentences that the person doesn’t understand.

When talking, face the person. A quiet, well-lit room is most conducive to effective communication. If you are in front of the light source—such as a window—with your back to it, the glare may obscure your face and make it difficult for the person who is hard of hearing to speech read.

Speak clearly. Most people who are hard of hearing count on watching people’s lips as they speak to help them understand. Avoid chewing gum, smoking or obscuring your mouth with your hand while speaking.
There is no need to shout at a person who is Deaf or hard of hearing. If the person uses a hearing aid, it will be calibrated to normal voice levels; your shout will just sound distorted.

People who are Deaf (and some who are hard of hearing or have speech disabilities) make and receive telephone calls with the assistance of a device called a TTY (short for teletypewriter; also called a TDD). A TTY is a small device with a keyboard, a paper printer or a visual display screen and acoustic couplers (for the telephone receiver).

When a TTY user calls a business that does not have a TTY, she places the call through her state’s relay service. Likewise, a business that does not have a TTY can reach a customer who is a TTY user through the relay service.

If you receive a relay call, the operator will identify it as such. Please do not hang up; this is the way that people who are Deaf are able to place an order at your pizza parlor, call your store to find out what hours you are open, or make a reservation at your restaurant.
Do not obscure your face when communicating with a person who is hard of hearing.
If you have trouble understanding a person with a speech impairment, ask him to repeat.
People With Speech Disabilities

A person who has had a stroke, is severely hard of hearing or has a stammer or other type of speech disability may be difficult to understand.

- Give the person your full attention. Don’t interrupt or finish the person’s sentences. If you have trouble understanding, don’t nod. Just ask him to repeat. In most cases the person won’t mind and will appreciate your effort to hear what he has to say.

- If, after trying, you still cannot understand the person, ask him to write it down or to suggest another way of facilitating communication.

- A quiet environment makes communication easier.

- Don’t tease or laugh at a person with a speech disability. The ability to communicate effectively and to be taken seriously is important to all of us.
Persons of Short Stature

There are 200 diagnosed types of growth-related disorders that can cause dwarfism and that result in the person being 4 feet 10 inches or less in height. Average-size people often underestimate the abilities of dwarfs. For an adult, being treated as cute and child-like can be a tough obstacle.

- Be aware of having necessary items within the person’s reach to the maximum extent possible.

- Be aware that persons of short stature count on being able to use equipment that is at their height. Be sensitive about not using lower telephones, bank counters and urinals if they are in limited supply.

- As with people who have other disabilities, never pet or kiss a person of short stature on the head.

- Communication can be easier when people are at the same level. Persons of short stature have different preferences. You might kneel to be at the person’s level; stand back so you can make eye contact without the person straining her neck (this can be hard to do in a crowded room); or sit in a chair. Act natural and follow the person’s cues.
As a result of injury to the central nervous system, people with cerebral palsy (CP) have difficulty controlling their muscles.

- Follow the tips above for interacting with persons who have speech disabilities.

- Many people with CP have slurred speech and involuntary body movements. Your impulse may be to discount what they have to say, based on their appearance. Monitor your responses and interact with the person as you would with anyone else.

- A person who may appear to be drunk, sick or have a medical emergency might in fact have CP or another disability. Get the facts before acting on your first impression, whether the situation is business, social or law enforcement.
**Tourette Syndrome**

People with Tourette Syndrome may make vocalizations or gestures such as tics that they cannot control. A small percentage of people with Tourette Syndrome involuntarily say ethnic slurs or obscene words. An employee or other person with Tourette Syndrome will benefit from the understanding and acceptance of co-workers and others.

- If a person with Tourette makes vocalizations during a conversation, simply wait for her to finish, then calmly continue.

- The more the person tries to contain these urges, the more the urges build up. It may be helpful for a person with Tourette to have the option to leave the meeting or conversation temporarily to release the build-up in a private place.
NOTE:

NOT ALL DISABILITIES ARE APPARENT. A person may make a request or act in a way that seems strange to you. That behavior may be disability related.

For example, you may give seemingly simple directions to someone, but the person asks you to write them down. He may have a learning disability that makes written communication easier for him. Or someone may ask you not to use spray-cleaning products on your restaurant tables while she’s sitting there. She may have asthma or multiple chemical sensitivity.

Even though these disabilities are hidden, they are real. Please respect the person’s needs and requests whenever possible.
Try to avoid using sprays or other fumey products when customers are in your store.
Multiple Chemical Sensitivity (MCS)

**People with MCS react to toxins in the air.**
Fumes from cleaning products, perfume, carpeting, air freshener or even the fumes from magic markers can trigger a severe reaction.

- Try to avoid spray-cleaning tables, windows or other surfaces while people are in your store. If you must use a spray product, spray or pour it closely into the cloth, not into the air. Use less-toxic products when possible.

- Request that staff who have contact with the public go easy on fragranced body-care products like cologne, hair spray, hand lotion and after-shave.

- Maintaining good ventilation and overall good indoor air quality will not only benefit your customers who have MCS and respiratory disabilities, it will also help you and all of your employees stay healthier and more alert.

- Second-hand smoke can be harmful to people with MCS or respiratory disabilities such as asthma or emphysema. Follow and enforce no-smoking regulations, including in rest rooms and stairwells. Discourage smok-
ers from congregating at the entrance to your business. If appropriate, designate a separate smoking area where the door is kept closed and the air ventilates to the outside.
Epilepsy (Seizure Disorders)

Epilepsy is a neurological condition characterized by seizures which happen when the electrical system of the brain malfunctions. The seizures may be convulsive, or the person may appear to be in a trance. During complex partial seizures, the person may walk or make other movements while he is, in effect, unconscious.

- If a person has a seizure, you cannot do anything to stop it. If he has fallen, be sure his head is protected and wait for the seizure to end.

- When a seizure has ended, the person may feel disoriented and embarrassed. Try to ensure that he has privacy to collect himself.

- Be aware that beepers and strobe lights can trigger seizures in some people.
Always ask before you help.
HIV & AIDS

**People with human immunodeficiency virus (HIV) or Autoimmune Deficiency Syndrome (AIDS) have impaired immune systems, so their bodies have trouble fighting off infections.**

- You can’t catch HIV from casual contact such as shaking hands, so don’t be afraid of touching or being touched by a person with AIDS.

- A person with HIV or AIDS is at significant risk of picking up an airborne infection. Be conscious of not putting someone else at risk. If you have a respiratory infection or any other easily transmittable illness, be considerate of all your customers and employees and stay home, if possible.

- Many people with AIDS feel stigmatized. Let the person know that he is accepted. It will mean a lot to him.

**A WORD ABOUT CONFIDENTIALITY:**

You may really care or you may just be curious about a person with a disability who is in crisis, suddenly ill, or misses work for unexplained reasons. In spite of your concern, please respect the privacy of a person with a disability. Allow him to discuss his situation if and when he feels comfortable doing so.
Psychiatric Disabilities

People with psychiatric disabilities may at times have difficulty coping with the stresses of daily life. Their disorder may interfere with their ability to feel, think or relate to others. Most people with psychiatric disabilities are not violent. One of the main obstacles they face is the attitudes that people have about them. Because it is a hidden disability, chances are you will not even realize that the person has a psychiatric disability.

- Stress can affect the person’s ability to function. Try to keep the pressure of the situation to a minimum.

- People who have psychiatric disabilities have varying personalities and different ways of coping with their disability. Treat each one as an individual. Ask what will make him most comfortable and respect his needs to the maximum extent possible.

- In a crisis, stay calm and be supportive. Ask how you can help, and find out if there is a support person who can be sent for. If appropriate, you might ask if the person has medication that he needs to take.
Cognitive Disabilities:  
Mental Retardation

People with mental retardation (sometimes referred to as developmental disability) learn slowly. They have a hard time using what they have learned and applying it from one setting or situation to another.

- Speak to the person in clear sentences, using simple words and concrete—rather than abstract—concepts. Help her understand a complex idea by breaking it down into smaller parts.

- Don’t use baby-talk or talk down to people who have mental retardation.

- Remember that the person is an adult and, unless you are informed otherwise, can make her own decisions.

- People with mental retardation may be anxious to please. During an interview, the person may tell you what she thinks you want to hear. This can have grave consequences if your interview technique is not effective in certain situations, such as in a law enforcement situation or a doctor’s examination. Questions should be phrased to elicit accurate information. Verify responses by repeating each question in a different way.
It can be difficult for people with mental retardation to make quick decisions. Be patient and allow the person to take her time.

Clear signage with pictograms can help a person who is mentally retarded to find her way around a facility.
Cognitive Disabilities: Learning Disabilities

Learning disabilities are life-long disorders that interfere with a person’s ability to receive, express or process information. Although they have certain limitations, most people with learning disabilities have average or above-average intelligence. You may not realize that the person has a learning disability because he functions so well. Or you may be confused about why such a high-functioning person has problems in one aspect of his work.

- People with dyslexia or other reading disabilities have trouble reading written information. Give them verbal explanations and allow extra time for reading.

- Don’t be surprised if you tell someone very simple instructions and he requests that you write them down. Because spoken information gets “scrambled” as he listens, a person who has a learning disability such as auditory processing disorder may need information demonstrated or in writing.

- Ask the person how you can best relay information.
- Be direct in your communication. A person with a learning disability may have trouble grasping subtleties.

- It may be easier for the person to function in a quiet environment without distractions, such as a radio playing, people moving around or loudly patterned curtains.
Cognitive Disabilities:  
Traumatic (or Acquired) Brain Injury

**People with traumatic brain injury** have had damage to the brain usually as the result of trauma, such as an accident or stroke.

- Some of the factors that affect persons with learning disabilities also apply to persons with traumatic brain injury.

- People with brain injury may have a loss of muscle control or mobility which is not obvious. For example, a person may not be able to sign her name, even though she can move her hand.

- A person with a brain injury may have poor social skills, such as making inappropriate comments. She may not understand social cues or “get” indications that she has offended someone. In her frustration to understand, or to get her own ideas across, she may seem pushy. All of these behaviors arise as a result of the injury.

- A person with a brain injury may be unable to follow directions due to poor short-term memory or poor directional orientation. She may ask to be accompanied.
■ If you are not sure that the person understands you, ask if she would like you to write down what you were saying.

■ The person may have trouble concentrating or organizing her thoughts, especially in an overstimulating environment, like a crowded movie theater or transportation terminal. Be patient. You might suggest going somewhere with fewer distractions.
Emergency Evacuation Procedures

PEOPLE WITH DISABILITIES must be considered in any facility’s evacuation plan.

- Compile a voluntary list of people with disabilities who are regulars at your facility, such as employees, students or residents. While you are compiling this list, let people know that even though they may not consider themselves to be “disabled,” they should be included if they may need help during an emergency. Keep the list updated to include people who are temporarily disabled, such as a pregnant woman or someone with a broken leg.

- Interview each individual on the list to plan the most effective way to assist them in case of an emergency. For example, as you evacuate a person who uses a wheelchair, be sure to bring the wheelchair along, too. A person with a cognitive disability may get confused and need assistance in following directions.

- A person who is blind, even if he knows his way around the facility, will need to be accompanied during an emergency, especially when large numbers of people are involved.
Also develop a plan for an emergency that may affect people who are not attached to the facility, such as customers, theatergoers, patients or other members of the public.

Practice the evacuation procedures and keep your plans up to date.
Don't make decisions for people with disabilities about what they can or can't do.
**A Final Word**

**People with disabilities** are individuals with families, jobs, hobbies, likes and dislikes, problems and joys. While the disability is an integral part of who they are, it alone does not define them. Don’t make them into disability heroes or victims. Treat them as individuals.
Disability Access Resource List

This list represents some of the national organizations that provide information about some of the disabilities presented in this booklet. There are many disabilities that we did not address specifically and many more organizations. Consult one of the four organizations at the beginning of this list or your local telephone directory for additional information or technical assistance.

- **Disability and Business Technical Assistance Center (DBTAC)** 800-949-4232 (Voice/TTY)  
  information@oapwd.state.ny.us  
  http://www.state.ny.us/disabledAdvocate

- **Job Accommodations Network (JAN)** 800-ADA-WORK (V/TTY)  
  jan@janweb.icdi.wvu.edu  
  http://janweb.icdi.wvu.edu

- **Access Board (Architectural and Transportation Barriers Compliance Board)** 800-USA-ABLE (V/TTY)  info@access-board.gov  
  http://www.access-board.gov

- **U.S. Department of Justice** 202-514-0301 (V) 202-514-0381 (TTY)  
  http://www.usdoj.gov/crt/ada/adahom1.htm

- **Access Resources** 212-741-3758 (V/TTY)  
  accessrs@ix.netcom.com
■ Association for the Mentally Ill
   800-950-NAMI (V)
   frieda@nami.org http://www.nami.org

■ Centers for Disease Control Hot Line
   800-342-2437 (V) 800-243-7889 (TTY)
   netinfo@cdc.gov http://www.cdc.gov

■ Eastern Paralyzed Veterans Association (EPVA)
   718-803-EPVA (V/TTY)
   info@epva.org http://www.epva.org

■ Epilepsy Foundation of America
   800-332-1000 (TTY) 800-332-2070
   postmaster@efa.org http://www.efa.org

■ Learning Disabilities Association of America
   412-341-1515 (V)
   ldnetl@usaor.net http://www.ldanatl.org

■ Little People of America
   888-LPA-2001 (V) lpadatabase@juno.com
   http://www-bfs.ucsd.edu/dwarfism/intro.htm

■ National Association for the Visually Handi-
capped 212-889-3141 (V) staff@navh.org
   On the West Coast: staffca@navh.org
   http://www.navh.org

■ National Association of the Deaf
   301-587-1788 (V) 301-587-1789 (TTY)
   NADHQ@juno.com http://www.nad.org

■ National Committee for Environmental Health Strategies 609-429-5358
   wjrd37A@prodigy.com

■ Self Help for Hard of Hearing People, Inc.
   301-657-2248 (V) 301-657-2249 (TTY)
   national@shhh.org http://www.shhh.org
The ARC  800-433-5255 (V)  
817-277-0553 (TTY)  
thearc@metronet.com  http://www.thearc.org

The Brain Injury Association
800-444-6443 (V)  FamilyHelpline@biausa.org
http://www.biausa.org

The Lighthouse  800-334-5497 (V)  212-821-9713 (TTY)  info@lighthouse.org
http://www.lighthouse.org

Tourette Syndrome Association
800-237-0717 (V/TTY)  tourette@ix.netcom.com
http://tsa.mgh.harvard.edu

United Cerebral Palsy Association
800-USA-5UCP (V)  202-913-7197 (TTY)
ucpnatl@ucpa.org  http://www.ucpa.org

EASTERN PARALYZED VETERANS ASSOCIATION

Executive Office:
75-20 Astoria Boulevard
Jackson Heights, New York 11370-1177
718-803-EPVA (V/TTY)
http://www.epva.org  info@epva.org

Buffalo Regional Offices:
111 West Huron Street
Buffalo, New York 14202
716-856-6582 (V)

Pennsylvania Regional Offices:
P.O. Box 42938
Philadelphia, Pennsylvania 19101-2938
215-381-3037 (V)
Publications

The following publications are available, free of charge, from the Eastern Paralyzed Veterans Association. To order, call our toll-free Publications Hotline 800-444-0120. You may also order EPVA publications on-line from our Web site at http://www.epva.org. For any other inquiries about these items call our Public Affairs program at 718-803-EPVA (voice and TTY).

- Understanding the Americans with Disabilities Act
- The ADA: Help Wanted: Equal Job Opportunities (Title I)
- The ADA: Access State and Local Government (Title II)
- The ADA: Removing Barriers in Places of Public Accommodation (Title III)
- The ADA: Small Business Fact Sheet (English, Spanish, Chinese, Korean, and French versions)
- The ADA: Resource Information Guide
- The ADA: Telephone Information Services Sheet
- The ADA: Managed Care Fact Sheet
- Access the Past: How the ADA Affects Historic Preservation
- Accessible Transit Traveler: Transportation Requirements of the ADA
- Come One, Come All: Accessibility Requirements for Arenas, Convention Centers and Other Places of Public Assembly
- Communication Access: Everyone’s Right
- Living with Spinal Cord Injury
- How to Ride New York City's Wheelchair Accessible Buses
- The Guide to Riding SEPTA Wheelchair-Accessible Buses
- Air Carrier Access
- Accessible Building Design
- The FHAA: Adapt to a Better Design
- Know Your Fair Housing Rights
- Planning for Access: A Guide to Planning and Modifying Your Home
- Wheeling to Fire Safety
- The Programs of EPVA
- EPVA Annual Report
- A $10 Million Commitment
- “60 Seconds Is a Minute Too Long” parking pad
- International Symbol of Accessibility decal
SPANISH PUBLICATIONS

- Explicación de la Ley Protección a los Impedidós
- Guía para el transporte en sillas de ruedas en los autobuses de la ciudad de Nueva York
- Rápidamente sobre ruedas hacia seguridad contra incendios

EPVA's ADA publications are available in alternative formats.

For more information call our Advocacy Program at 718-803-EPVA.
Signage

**NOTE ACCESSIBILITY OF YOUR BUSINESS OR PROGRAM** by using the symbols below in advertising, on fliers, and as signage at the location of the service. Be sure to use the verbal description, along with the symbol. As signage, enlarge the symbol and place it where it will be most visible.

- **WHEELCHAIR ACCESS**
- **ASSISTIVE LISTENING FOR PEOPLE WHO ARE HARD OF HEARING**
- **SIGN-LANGUAGE INTERPRETER**
- **TTY/TDD**