

## **TIPS FOR COMMUNICATING WITH PEOPLE WITH DISABILITIES**

### **Communicating in general:**

- Talk to people with disabilities in the same way and tone of voice as you would anyone else.
- Talk to people with disabilities directly, as adults, rather than to an accompanying person.
- Ask the person with a disability if assistance is needed; do not assume.
- Use “people-first language”. Say: “a person with a disability” rather than “the disabled person”.
- Sit or stand at eye level with the patient and make eye contact.

### **Communicating with Patients with Mobility Limitations**

- Respect the personal space including the person’s wheelchair, scooter, crutches, walker, cane, etc.
- When giving directions to people with mobility limitations, consider distance, weather conditions, and physical obstacles such as stairs, curbs, and steep hills.

### **Communicating with Patients with Vision Loss**

- Identify yourself when you approach a person who has low vision or blindness. Introduce anyone with you.
- Include the person’s name when you speak so that they know to whom you are speaking.
- Face the person and speak directly to them.
- Avoid being self-conscious about your words, example: “Do you see what I mean?”
- Explain when you are leaving the environment.
- When you assist, allow the person to take your arm.
- Never pet or otherwise distract a service animal unless the owner has given you permission to do so.

### **Communicating with Patients with Hearing Loss**

- Ask the person how they prefer to communicate.
- When using a sign language interpreter, pause occasionally to allow the interpreter time to translate completely.
- Talk directly to the person who is assisted by a sign interpreter, not to the interpreter.
- Before you start to speak, get the attention of the person you are addressing.
- Speak without exaggerating your words. Speak in a normal tone without shouting.
- If the person lip reads, face the person and keep your hands and other objects away from your mouth.

- Consider that written English may not be the primary language for some people with disabilities and make appropriate accommodations in communicating with them.
- Ask the person for feedback or to repeat what you have said to assess understanding.

### **Communicating with Patients with Speech Disabilities or Speech Difficulties**

- Be patient because it may take the person extra time to communicate.
- Do not speak for the person or complete the person's sentences.
- Give the person your undivided attention and eliminate background noise and distractions.
- Develop a specific communication strategy that is consistent with the person's abilities: nod of the head or blink to indicate agreement or disagreement with what you have asked or said.
- To obtain information quickly, ask short questions that require brief answers or a head nod.

### **Communicating with Patients with Intellectual, Cognitive or Developmental Disabilities**

- Treat adults with intellectual, cognitive or developmental disabilities as adults.
- Use simple, direct sentences and visual forms of communication, such as diagrams, or demonstrations.
- When possible, use words that relate to things you both can see.
- Be prepared to repeat the same information more than once in different ways.
- When asking questions, phrase them without suggesting desired or preferred responses as some people with intellectual, cognitive or developmental disabilities may tell you what they think you want to hear.
- Do not assume that the person will be able to read well; some may not read at all.

### **Communicating with Patients with Psychiatric/Mental Health Disabilities**

- Approach the person as you would anyone else; speak directly to the person, using clear, simple communication.
- Treat persons who are adults as adults. Do not condescend when communicating with the person.
- Do not make decisions for the person or assume that you know the person's preferences.
- Offer to shake hands when introduced.
- Make eye contact.
- Listen attentively, and wait for the person to finish speaking. If needed, clarify what the person has said.
- Recognize that a person with mental health disabilities has the same wants, needs, dreams, as anyone else.