CCDM seeks to enhance the lives of persons with disabilities.

We provide access to a full range of services for persons with developmental disabilities, including the operation of residential homes. Residents in these facilities receive job training, training in personal care and social skills, and opportunities to develop spiritually.

We seek collaboration and partnerships with individuals, churches, and other organizations to meet the physical and spiritual needs of persons with disabilities.

We enable others—through training, resources, and encouragement — to effectively minister to persons with disabilities.

For information on how you can partner with us in this ministry, please visit www.ccdmonline.org.
CCFH Ministries wants to meet the needs of persons with disabilities and their families. One of the ways we seek to accomplish this is by providing booklets like this one for congregations and individuals to use. However, we ask that you contact us for permission to reproduce any portion of this publication.

Christian Churches Disability Ministry
PO Box 310
Louisville, TN 37777—0310
865.984.5178
www.ccdmonline.org
**How to Assist During a Seizure**

If your friend has seizures, ask him how he knows one is about to happen. If a child in your care is subject to seizures, develop a plan of action with his parents.

- If one occurs while you are together, remain calm.
- Do not try to hold him, but assist him in lying down safely. Move furniture away to prevent injury.
- Do not put anything in his mouth.

If he seems to be having trouble breathing, turn him on his side and loosen any clothing around his neck. (Do this also to keep him from swallowing vomit.)

When the seizure is over, reassure the person and remind him of what was happening when the episode occurred. Give him a minute to rest, if needed. In a classroom, it is useful to have a beanbag chair or cot where a child can rest.

Your goal is for your actions to be natural and spontaneous. Give yourself some time to get used to your friend. Remember that he is learning how to deal with you, too!

Disability etiquette is simply a matter of everyday etiquette; treat the person with respect, as you wish to be treated yourself. All the rest—learning how to communicate with someone who has a speech impediment, learning appropriate types of touch, learning how to assist comfortably—all this will come as you and your friend get to know each other, just as it comes with any friendship.

**Talking About a Disability**

It is kinder to use the word “disability” rather than “handicap” when referring to a friend’s situation. The word “handicap” had its origins in the sixteenth century when persons with disabilities were forced to beg for their livelihood. They stood on the street corners with their “caps in their hands.”

Handicap is the correct word to use when talking about architectural barriers or human attitudes.

For example, “Those steps are a handicap to any person using a wheelchair,” or “He is handicapped by the low expectations of his parents.”

Use “people first” language. Try always to identify the person before the disability: “Jim has cerebral palsy.” “The child has autism.” “This is a class for people with disabilities.” “Ann has a motor skills problem.” That will eliminate referring to “the disabled,” “the retarded,” etc.

The one exception to the “people first” rule is when referring to people who are blind. The National Federation of the Blind discourages such euphemisms as “visually challenged,” “people with blindness,” “people who are blind,” and “sightless.” The membership of that organization voted in July of 1993 to say “blind” when a person cannot see, and to say “visually impaired” to identify those with some sight.
Avoid any word that carries a sense of judgment with it, such as “deaf and dumb,” “slow,” “crazy,” “acts funny.” Other words display insensitivity to the person’s physical condition. Referring to someone as “a cripple” or as “an invalid” puts their condition in front of their humanity. Use words that lead to respect and acceptance, rather than words that lead to pity and sympathy, such as “afflicted with,” “a victim of,” and suffers from.” Say rather, “Betsy is fighting multiple sclerosis,” or “Jacob is dealing with Brittle Bone disease.”

“Mental age” is a good term to know. A person’s mental age is determined by intelligence testing. Instead of saying “He has the mind of a four-year-old,” say, “His mental age is four years.”

When conveying the idea that a person does not have a disability, stay away from the word “normal.” Normal is whatever a person is used to. The terms “typical,” or “a person without a disability” are more accurate and kinder.

Well-intended, but Not Helpful

Avoid such concepts as “Well, we all have a disability of some kind.” The person who is dealing with the loss of one of his five senses or has a physical problem that impedes his mobility and/or requires assistive devices will not find that comforting. Nor is it helpful to relate a person’s loss of limb to your own experience with a broken leg. Your leg healed! Use your past experience to help you understand the physical barriers and limitations that your friend deals with every day of his life.

When the Person Wears a Helmet

The purpose of a protective helmet is to prevent further injury from a fall, a falling object, or horseplay.

If your friend is an adult, and not in danger of getting smacked, ask him if he would like to remove his helmet while seated. Remind him to put his helmet on before standing. With children, it is probably best not to remove the helmet.

Electronic Devices

Technology has made many wonderful devices available to our friends who have disabilities. The “TouchTalker” is a device that allows people with speech impediments to communicate with others. Another wonderful invention is the “head mouse” that sits on top of a computer monitor allowing the user to position the cursor with movements of his head. Then, with a “sip-and-puff” switch (a small tube held in the mouth), the user inhales or exhales to “click” the computer and execute an operation.

A computer system called Eyegaze takes rapid-fire pictures of the user’s eyeball to allow someone with movement in only one eye to operate the computer. Blind users can communicate with computers by a variety of means. The simplest is a Braille keyboard. More amazing are software programs that take dictation and convert it to text stored in the computer.

Invite your friend to demonstrate his devices to you. Ask if you can assist with functions like replacing batteries. Accept the device as his personal property (respect his space) and call no more attention to it than you would to someone else’s handbag or walkman.
**Assisting a Person Who is Blind**

Ask the person if you may help. If he says no, do not be unhappy. If he says yes, offer your elbow. (Do not grab his arm.)

If you come to a narrow passage, such as a doorway, move your elbow back. This signals your friend to step behind you. Stopping before a step, staircase, or curb will let your friend know that a step is ahead. You may also say, “curb,” or, “We have a flight of about six steps here.”

 Warn your friend of any upcoming danger, such as a low ceiling, a center pole in a doorway, rough pavement, or any other obstacle in your path.

If your friend has a guide dog, do not pet it or speak to it. Wait until the dog is not on duty, and then ask permission to pet it.

When greeting a person who is blind, identify yourself and anyone with you. For example, “Hi, Eric. This is Alice Jenkins. George Brown is on my left.”

When you move, inform the person who is blind either by continuing to talk as you move or by saying, “I’m over by the counter now.”

Do not avoid words like “see” and “look.” It is OK to ask your friend, “Did you watch that special on TV last night?” If you or others in the group exclaim over some unusual sight or event taking place, just quietly describe what is happening to your friend.

Nor is it helpful to feel or express excessive levels of sympathy or admiration. Do not speak of your friend as special, overly courageous, exceptionally brave, or super-human. Given the choice, the person with the disability would probably rather not have it, but he has dealt with it because he had to. He deserves the same respect as any human and does not want people fawning over him.

**Talking to a Person With a Disability**

More often than you can imagine, people will shout at a blind person or at someone in a wheelchair. Try to remember that the only disability that involves hearing loss is—hearing loss. Face the person you are addressing, speak clearly at a normal rate and normal tone of voice. (Unless the person has autism and prefers not to be looked at. See more on that subject elsewhere in this brochure.)

Another common mistreatment is talking to the person’s companion, caregiver, or interpreter rather than the person himself. How would you feel if you went to dinner with a friend and the waitress said to your friend, “What does he want?” Be careful that you are never this insensitive.

Do not assume that people with speech, hearing, or physical problems have cognitive problems as well. In other words, do not treat them as if they were less intelligent than you are.

Do not use childish vocabulary or tones when talking to a person with a disability.

Do not apologize for not understanding a person’s speech. Just ask him to repeat what he said.
Do not say that you understand his speech when you do not. Develop a friendly response such as, “My ears aren't working right today—will you please say that again?” Or, “Run that by me again, please.” Sometimes a quizzical look or inclination of the head is all that is necessary to convey to your friend that he needs to repeat what he said.

If the speech is extremely difficult to comprehend, learn to listen for the subject of the conversation. Words like “Mom,” “Dad,” “store,” “school” or “work” will focus your understanding. Then listen for action words like “went,” “bought,” or “saw.”

If things become really difficult, use paper and pencil or gesture widely. A person with this much of a speech impediment probably has some kind of assistive device. Learn to use it. Work to get the message.

As you get to know your friend, the communication problems will diminish. After awhile, your comprehension level will increase, and your friendship will grow.

Offer your hand to the person who is missing a right hand or arm. He will use his left hand, touch your shoulder, or do whatever he does when greeting someone. Try to remember his greeting so that you can use it in the future.

When meeting someone who is paralyzed below the shoulders, ask him how he likes to be greeted. He may ask you to touch his shoulder instead of shaking his hand.

If you know you are going into a situation where you will be meeting people who have prosthetics, be mentally prepared for the feel of an artificial hand during a handshake. You do not want to pull your hand back in surprise or make any kind of negative comment.

People with mental retardation or Down syndrome are generally great huggers. Even if you are not a hugger, be prepared to receive one. On the other hand, do not force yourself on someone who does not wish to be hugged. Do not tousle the hair of someone as if he were a child. (Even some children resent this!) Respect the personal space of a person who has a disability, just as you respect anyone's personal space.

People who have autism are generally opposed to being touched, especially by a stranger. Direct eye contact may also make them uncomfortable. If you offer your hand and it is not received, just drop your hand and go on with the conversation. If a parent or caregiver tells you that a child does not enjoy eye contact, or if you notice that an adult is turning his head away, just look at something else while you talk with him.
Wheelchair Etiquette

The wheelchair is an extension of the person’s personal space. Just as you would not hang on the arm of a person, do not hang onto, lean on, or prop your feet on the chair.

Do not call any more attention to a person’s chair than you would to eyeglasses or a hearing aid. On the other hand, if your friend shows up with a brand-new, hot-off-the-assembly line chair with all the bells and whistles, congratulate him and ask him to show you the features.

Ask your friend if he wants help moving from place to place. If he says yes, make sure the brakes are off and your friend is secure before pushing.

Watch for curbs, sloping sidewalks, and big holes! It takes very little tipping for a wheelchair to tip right over, especially if you are moving with any speed.

When entering an elevator, back the chair in so that the person is not left facing the rear wall.

If your conversation is going to last for more than a few minutes, position yourself on eye level. Do not lean over in a patronizing manner, but sit down. This is not only polite; it’s a great way to prevent a sore neck!

Physical Touch

The general rule is to offer the same social courtesies to the person who has a disability that you would offer to those without disabilities.

Communicating with Those Who are Hearing Impaired

Shouting does not help. If the person is deaf, he is not going to hear you. If he is hearing impaired, his hearing aid is set to a normal tone. If you shout, you are only going to hurt his ears. Face the person and give him a good view of your face. He will be reading your lips.

Learn some finger spelling and some basic signs.

A hearing aid amplifies every sound, not just speech. Make the environment as quiet as possible. This is a key point for worship leaders to remember as the collective congregation grows older. Many people who use hearing aids cannot hear speech over “background” music, and the addition of musical instruments just creates a cacophony of noise. What was intended to be a worship experience just becomes a time of endurance for them.

To get the person’s attention, wave, or tap him on the shoulder. Do not begin speaking to him until you have his attention.

Talking About Assistive Devices

Choose “Sam uses a wheelchair” rather than “Sam is confined to a wheelchair,” “Anna uses sign language,” rather than “Anna talks with her hands,” and “John communicates with an electronic device,” rather than “John uses a machine to talk.” Even better is to know the specific name of the assistive device. If you refer to it with some degree of admiration, your listeners will pick up on the idea that John’s use of it is an accomplishment to be respected.
**Quick Guide for Appropriate Language:**

<table>
<thead>
<tr>
<th>USE</th>
<th>AVOID</th>
</tr>
</thead>
<tbody>
<tr>
<td>person with a disability/(name) has a disability</td>
<td>the disabled/the handicapped invalids</td>
</tr>
<tr>
<td>people with disabilities/have disabilities</td>
<td>patients, crippled, deformed, defective</td>
</tr>
<tr>
<td>disabled person/people (less preferred)</td>
<td></td>
</tr>
<tr>
<td>people without disabilities/typical person</td>
<td>normal, healthy, able-bodied</td>
</tr>
<tr>
<td>non-disabled person (less preferred)</td>
<td></td>
</tr>
<tr>
<td>(name) uses a wheelchair/is a wheelchair user (less preferred)</td>
<td>is wheelchair-bound/confined to a wheelchair</td>
</tr>
<tr>
<td>congenital disability/birth anomaly</td>
<td>birth defect/affliction</td>
</tr>
<tr>
<td>has cerebral palsy, (or name of other condition)</td>
<td>is a victim of . . .</td>
</tr>
<tr>
<td>has had polio/has experienced polio</td>
<td>suffers from polio/is afflicted with polio</td>
</tr>
<tr>
<td>has a disability as a result of polio</td>
<td>post-polios (as a noun referring to people)</td>
</tr>
<tr>
<td>person/people who have mental retardation</td>
<td>the mentally retarded/mentally deficient</td>
</tr>
<tr>
<td>mentally retarded person (less preferred)</td>
<td>a feeble-minded person/a retardate/a retard (NEVER!)</td>
</tr>
<tr>
<td>child with a developmental disability</td>
<td>is slow</td>
</tr>
<tr>
<td>person with a developmental delay</td>
<td></td>
</tr>
<tr>
<td>person with Down syndrome</td>
<td>a Down's person/mongoloid (NEVER!)</td>
</tr>
<tr>
<td>person who has epilepsy</td>
<td>the epileptic</td>
</tr>
<tr>
<td>people with seizure disorders</td>
<td>the epileptics</td>
</tr>
<tr>
<td>seizure/epileptic episode or event</td>
<td>fits/epileptic fits</td>
</tr>
<tr>
<td>people who have mental illness</td>
<td>the mentally ill</td>
</tr>
<tr>
<td>people with a mental or emotional disorder</td>
<td>crazy, psycho, mental case (NEVER!)</td>
</tr>
<tr>
<td>people who are blind/visually impaired</td>
<td>blind as a bat (NEVER!)</td>
</tr>
<tr>
<td>person who is deaf/hearing impaired</td>
<td>the deaf/the hard of hearing/deaf-mute/deaf and dumb (NEVER!)</td>
</tr>
<tr>
<td>speech or communication disability</td>
<td>tongue-tied</td>
</tr>
</tbody>
</table>

Adapted from the Coalition for Tennesseans with Disabilities in Nashville, TN. Used with permission.