Disability Inclusion Guide

For CMF Staff, Managers & Disability Focal Points

Contents

- ## ● Basics of disability and inclusion

○ What is disability?

Disability and impairment are often used as if they are the same word. But they are different things:

Impairment is the loss of a function of the body.

> For example, when someone cannot see properly. Impairments are mostly irreversible and lifelong. Sometimes the impairment can be treated, for example in the case of vision by using glasses.

Disability is when the person has an impairment and experiences a barrier to do an activity.

> For example, if someone is blind and therefore cannot read printed materials. If the materials were in braille, there would be no barrier for the person to read.

IMPAIRMENT x BARRIERS = DISABILITY

Thus: the impairment is not a problem in itself, but barriers make it problematic for the person with an impairment to participate in activities like others.

KEY MESSAGES

> Impairment is the loss of a function of the body;
>
> Disability is about barriers in the environment which prevent Persons with Disabilities from doing everyday activities.

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○ Models of defining disability

There are three ways disability has been approached in development. The first two models – medical and charity approaches – focus on barriers to participation being with the disabled individual. The third way – the social or rights based model – focuses on barriers being with society's view of disabled people.

Individual model: Charity Approach

Activities 'help' the person with a disability who is 'helpless' and outside 'normal' society

• disability is a problem in the person;
• they are seen as 'unfortunate', 'dependent' or 'helpless';
• they are regarded as people who need pity and charity;
• assumes people with impairments cannot contribute to society or support themselves;
• provides them largely with money or gifts, such as food or clothing;
• disabled people become long-term recipients of welfare and support;
• aid provided by specialist organisations not mainstream development;
• disabled people viewed and kept as separate group.

Individual model: Medical Approach

Activities 'fix' the person with a disability, who is 'sick', so they can join 'normal' society

• disability is a problem in the person;
• a traditional understanding of disability;
• focuses on a person's impairment as the obstacle;
• seeks to 'cure' or 'improve' individuals to 'fit' them into society;
• defines the disabled person only as a patient with medical needs;
• segregates disabled people from the mainstream;
• offers only medical help, carried out by specialists;
• expensive, tends to benefit relatively few.

Social model: Inclusive Approach

Activities focus on inclusion – person with a disability is part of society

• focuses on society, not disabled people, as the problem;
• regards person with a disability as part of society, rather than separate;
• people are disabled by society denying their rights and opportunities;
• sees disability as the social consequences of impairment;
• the needs and rights of a person with a disability are the same as non-disabled people's – e.g. love, education, employment;
• activities focus on identifying and removing attitudinal, environmental and institutional barriers that block inclusion.

(From Travelling together: How to include disabled people on the main road of development, by Sue Coe and Lorraine Wapling. World Vision, UK 2010)

○ **Different types of impairment**

There are different types of impairments that people can have. Some of these are visible; others are difficult to see. The following list are the impairments internationally recognized:

1. Visual impairment;
2. Hearing impairment, deaf or hard of hearing;
3. Physical impairment;
4. Intellectual impairment
5. Psycho social or mental impairment
6. Speech impairment

Important note:
- In most cases, people with an impairment also are disabled due to the many barriers in society. That is why in the training we will refer to persons with a disability.

○ **What barriers do persons with disabilities face?**

What are barriers?

Barriers **can keep persons with disabilities from doing things just like other people**. Persons with Disabilities may not be able to do the same activities as others, but if the surroundings and people are welcoming to them, it should not be a problem.

Persons with disabilities can experience barriers in work, social life and at home. The **barriers** may differ per person as persons with disabilities have different types of impairments, but also other differences in other characteristics, such as being a woman, or being from an ethnic tribe.

For example, persons with a physical disability may experience limitations in moving around. They experience a problem when community meetings take place in a building where people need to climb stairs. If a ramp would have been there, they would be able to come and participate in the community meeting.

There are four different categories of barriers:

Attitudes	when people think negatively about Persons with Disabilities
	A common view in many communities is that children and adults with a disability are not capable, have no abilities and are seen

	as a burden to the family or deserve our pity. These negative views lead to prejudice, negative assumptions, discrimination and stigma. As a consequence communities do not want to associate themselves with people with disabilities and are thus excluded in society.
Communication	**whether Persons with Disabilities can access information and can share their ideas and feelings** Communications can be disabling especially for those with sensory and intellectual impairments – for people who are deaf if there's no sign language; for those with visual impairments if there is no braille on written documents or digital formats that can be read with speech software. Difficult language is a communication barrier to people with intellectual impairments.
Accessibility	**whether someone is able to access a building or service. For example, if someone with a disability is able to use a toilet.** People with disabilities encounter accessibility barriers in areas such as: • public transport • shops and marketplaces • hospitals and clinics • offices, banks and factories • schools and housing • sport and playgrounds • places of worship
Political/ Institutional	**when Persons with Disabilities are not able to take part because rules and regulations exclude or discriminate them** Examples of such barriers are discriminating legislation, employment laws and electoral systems. In many countries children with disabilities are also excluded by laws that prevent them from accessing school or policies that are not accommodating to support inclusive education. At community level there are examples where micro-credit programmes do not accept people with disabilities in micro-finance groups, believing people with disabilities are not able to refund the credit as they are assumed not able to work or not able to communicate. Not only do the laws and policies exclude, but often also people with disabilities are not consulted or are not represented in decision making bodies.

○   **Principles of inclusion**

- Attitude: respect and dignity
- Communication: inclusive communication
- Accessibility: barrier-free environment
- Participation: active involvement

○   **Respectful Language**

Language is a powerful tool for driving prejudice and discrimination. This is particularly so for disability issues. Historically, persons with disabilities have been labelled or called names to emphasize that they are different and do not conform to the societal norms of abilities and beauty. In some countries individuals with disabilities are even addressed by their impairments rather than by their given names.

By using appropriate language, we can:

- Shape positive attitudes and perceptions
- Avoid keeping up old stereotypes

Disability etiquette

- **Call a person with a disability by his/her name** and refer to a person's disability only when it is related to what you are talking about. For example, don't ask "What's wrong with you?" Don't refer to people in general or generic terms such as "the girl in the wheelchair."
- **Talk directly to the person with a disability** and not to his or her assistant, when you want to talk to the person with a disability.
- **Use person-first language**. Person-first language puts the person before the diagnosis and describes what the person *has* e.g. "a person with diabetes" or "a person with albinism". Don't reduce people to their condition, like "a diabetic" or "an albino". A person is foremost a person and secondly a person with some trait.
- **Ask persons with disabilities** which term they prefer if they have a disability.
- When talking about people without disabilities, it is okay to say "**people without disabilities**." But do not refer to them as "normal" or "healthy." These terms can make persons with disabilities feel as though there is something wrong with them and that they are "abnormal."
- **Avoid the use of Acronyms** like PWD or WWD. It is not nice to reduce people to an acronym.
- **Avoid euphemistic language:** such as people with different abilities.

- Use **respectful language** and avoid disrespectful terminology. (see table below)

Respectful terminology in English

Disability	Negative Language 🙁	Positive language 🙂
General	Handicapped person, invalid, the impaired, the disabled, PWD, CWD, WWD	Person with a disability
Blind or Visual Impairment	Dumb, Invalid	Blind/Visually Impaired; Person who is blind/visually impaired
Deaf or Hearing Impairment	Invalid, Deaf-and-Dumb, Deaf-Mute	Deaf or Hard-of-hearing; Person who is deaf or hard of hearing
Speech/Communication Disability	Dumb, "One who talks bad"	Person with a speech / communication disability
Learning Disability	Retarded, Slow, Brain-Damaged, "Special ed"	Learning disability, Cognitive disability, Person with a learning or cognitive disability
Psychosocial Disability	Hyper-sensitive, Psycho, Crazy, Insane, Wacko, Nuts	Person with a Psychosocial disability Users of Mental Health Services
Mobility/Physical Disability	Handicapped, Physically Challenged, "Special," Deformed, Cripple, Gimp, Spastic, Spaz, Wheelchair-bound, Lame	Wheelchair user, Physically disabled, Person with a mobility or physical disability

Disability	Negative Language 🙁	Positive language 🙂
Emotional Disability	Emotionally disturbed	Emotionally disabled, Person with an emotional disability
Intellectual Disability	Retard, Mentally retarded, "Special ed"	Intellectual disabled/ Person with a cognitive/developmental disability
Short Stature, Little Person	Midget	Someone of short stature
Health Conditions	Victim, Someone "stricken with" a disability (i.e. "someone stricken with cancer" or "an AIDS victim")	Someone "living with" a specific disability (i.e. "someone living with cancer or AIDS")

language examples in Khmer of terms that are common

Type of impairment	Disrespectful	Respectful
Physical impairment	Ah Kabak	Pika Cheung
	Ah Kabot	Pika Day
	Ah Kvin	Pika Cheung
	Ah Dach Cheung	Pika Cheung
	Ah Kangev	Pika Day
	Ah Peach	Pika Cheung
	Ah Kra Ngeanh	Pika Day
	Ah Kve	Pika Cheung
	Ah Kaem	Pika Khnorng

Type of impairment	Disrespectful	Respectful
	Ah Skon Choan	Cerebral Palsy
	Ah Bra kach	Cerebral Palsy or Fit
Visual impairment	Ah Khvak	Pika Phnech
	Ah Ngo Ngit	Pika Khnung kar Meul
	Ah Lev	Pika Phnech
Hearing impairment	Ah Kor (Mute)	Kor Thlong (Deaf)
	Ah Thlong	Pika Khnung Ka Niyeay
	Ah Tamlorng	Pika Khnung Ka Sdab
	Ah Ka Nguor	Pika Khnung Ka Niyeay
	Ah Talan	Pika Khnung Ka Niyeay
Intellectual impairment	Ah Chkuot	Pika Panha
	Ah Lorb	
	Ah Phleu	
	Ah Chkuot Chrouk	
	Ah Ort Krob Teuk	
	Ah Kreas Kralong	
	Ah Brasay Brasat	
	Ah Leukeu	

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○ **Accessibility needs**

Category	Accessibility needs
Persons with a visual impairment	● Good lighting for persons with low vision ● Good tactile markings for identification ● Securely fixed handrails ● Signage in braille, embossed and/or large letters ● Pathways cleared from objects and debris to avoid people to trip over.
People with hearing and / or speech impairment	● Clear and visible signage ● Provision of written reference information. ● Glare free lighting to make lip reading and following sign language easier ● Good acoustics in meeting rooms ● Alternate methods of communication in public places, such as paper and pen.
People with intellectual and/or mental health impairments	● Clear and frequent signage ● Quiet and calm place for asking questions ● Easy-read written material: clear and simple messages supported by pictures.
People with physical impairment (difficulty walking)	● Wide pathways, ramps and doorways to allow a person using a wheelchair to move easily. ● Things reachable from a sitting position ● Accessible toilets and washing facilities. ● Securely fixed handrails ● Available seats and benches so people who have difficulty walking can rest.

Category	Accessibility needs
People with physical impairment (difficulty using arms and hands)	- Using lever handles rather than knobs for door handles, taps. - Extended length of pump handles on water pumps and wells to make pump action easier. - Place handrails so they can be easily grasped or leaned on by a person who has limited use of their hands.

o   **What is Inclusion?**

The following four figures show the difference between inclusion, exclusion, segregation and integration. Inclusion in development projects means full and equal participation in all services. Inclusion does not happen automatically, barriers need to be removed. In the case of segregation it is assumed that other parties organise separate services for people with disabilities. In an integrated approach, people with disabilities get access to services, but only through special programmes focussing on people with disabilities. In the case of exclusion, people with disabilities are completely excluded from the project and not able to participate.
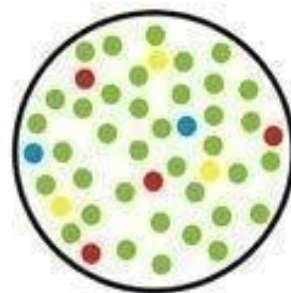
Inclusion
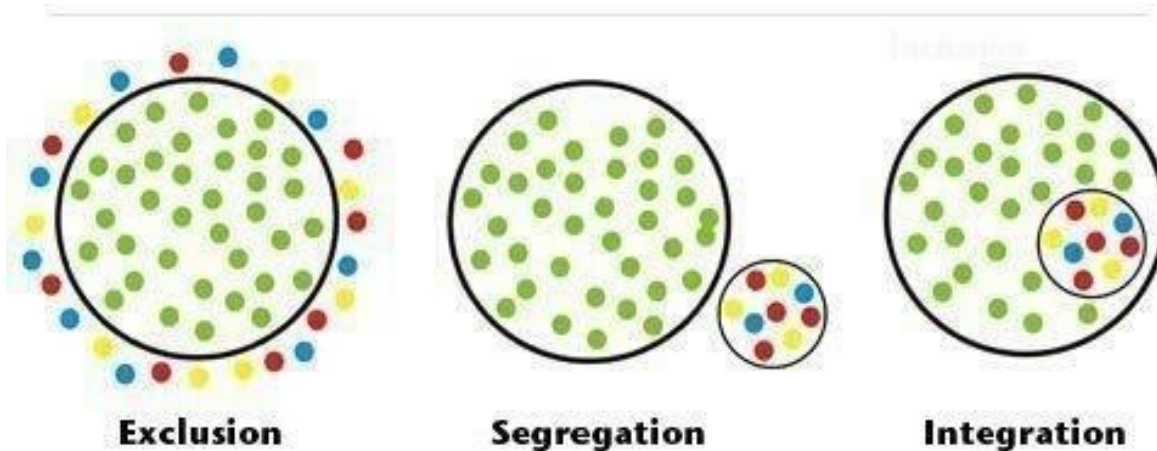
Exclusion   **Segregation**   **Integration**

Does this mean that there is no space for activities that focus on a group of people with a specific impairment? The answer is: **it is important to make all services accessible, and at the same time it may be needed to also organise specific activities for certain groups of people**. For example specific communications for people with a hearing impairment. These two approaches go hand in hand.

We call this: "twin track approach". It is explained in the picture below.
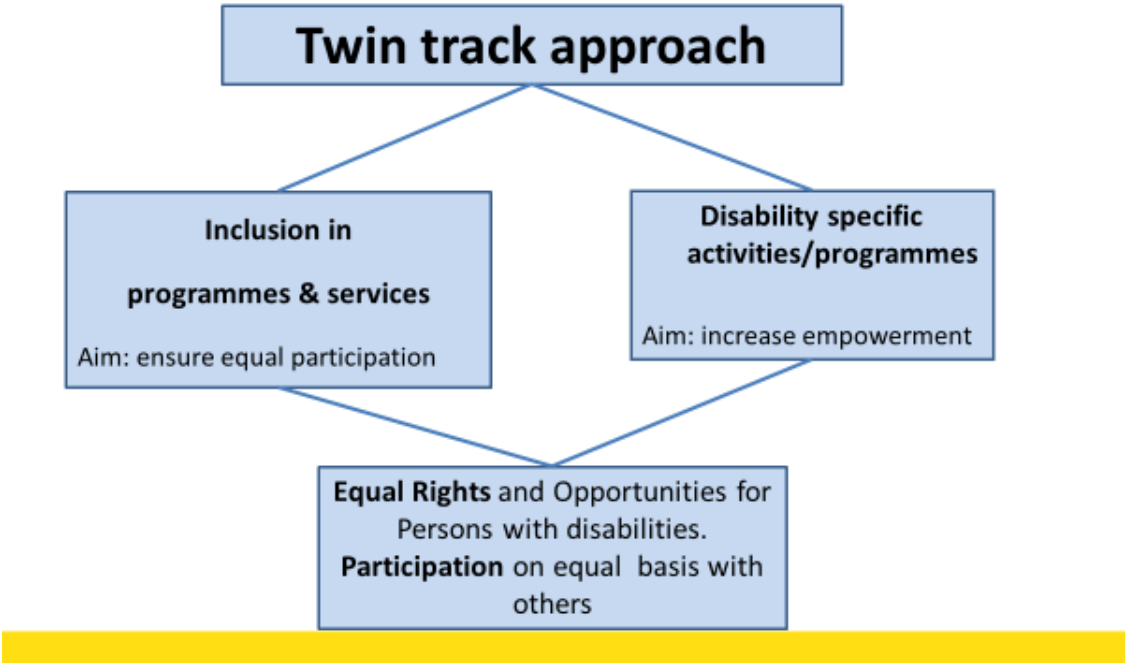
● Background information per impairment type

○ How to relate to people with disabilities

Persons with disabilities are not a homogenous group. Each type of impairments has distinct peculiarities and needs. Even non-disabled persons have their likes and dislikes which you get to know.

Therefore, it is good to be aware about what the particular preferences are for an individual, rather than assume.

Do not assume ...[1]

- ... a person with a disability either wants or requires assistance.
- ... rejection of aid is meant as a personal affront.
- ... upon acceptance of your help, that you know, without being told, what service to perform.
- ... a person who appears to have one kind of disability also has others.
- ... a disabled person is dissatisfied with his/her quality of life, and is thus seeking pity.
- ... a person with a disability is easily offended.
- ... that a person who does not appear disabled, or who uses assistive devices intermittently instead of all of the time, is faking or imagining their disability.
- ... companions accompanying a person with a disability are there strictly to render service.
- ... a person with a disability will be receptive to personal questions, particularly in a public setting.
- ... that when a person with a disability is in a public place, that they are being escorted by a caretaker, instead of traveling alone.

In general:

- Do not stare at persons with disabilities too much. Like everyone, it makes people uncomfortable.
- Avoid pity. Pity is a negative attitude.
- Communicate directly with the person, even when they are accompanied by an assistant.
- Ask before you render assistance. Unsolicited help may threaten the person's dignity and security.
- Avoid 'heroic' praises. It signifies that you have a lower expectation of him or her.
- Only ask questions about the person's disability if you know that person well.

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[1] Wikipedia contributors. (2018, April 10). Disability etiquette. In Wikipedia, The Free Encyclopedia. Retrieved 02:42, October 1, 2018, from
https://en.wikipedia.org/w/index.php?title=Disability_etiquette&oldid=835763782

o **Communication methods and their suitability[2]**

Audio signals
E.g. bells, alarms, sirens, radio, drums, loudspeaker announcements

Ideal for persons with visual impairment. Also useful for other groups

Must be accompanied with training about how to react and support with evacuation

Visual signals
E.g. flags, lights flashing on/off

Ideal for persons with hearing impairment. Also possible for other groups, except persons with visual impairment.

A combination of audio and visual signals is recommended for urgent warnings (e.g. fire alarms).

Signs and gestures
E.g. sign language, body language

Possible as support for other methods of communication, if these prove ineffective.

Assess if recipients with hearing impairment are able to communicate through any type of sign language (universal or local).

Printed materials
E.g. posters, leaflets, pictures

Excludes persons with visual impairment.

Keep messages short and simple, and use illustrations.

If the audience is able to read Braille, consider this as a supplement

o **How to communicate with persons with a visual impairment**

Communicating with someone with a visual impairment

- When meeting for the first time, introduce and describe yourself.
- Identify yourself so the person with the visual impairment knows who you are.
- If you get closer in your relationship, a blind person may want to feel your body features as part of getting to know you better.
- Inform the person if you are moving away. Do not leave without telling him or her that you are leaving.
- Describe the space you are in as well as any things you see to the person.
- Be specific in your descriptions. Say, "the table is in front of you", NOT "the table is here".
- Avoid comments like 'over there' when giving directions. Rather be specific to direct him to his right or left (and not *your* right or left).
- When you are in a group, tell them who is present, or let the group members introduce themselves.

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[2] Adapted from: International Federation of Red Cross and Red Crescent Societies. (2015). All under one roof: disability-inclusive shelters and settlements in emergencies.

- When conversing in a group setting, address persons by their names.
- When you are talking in a group, use the person's name when you are directing the conversation to him or her.
- Always talk directly to the person. Do not use a third person to answer your questions.
- Do not move things, or leave things on the floor where someone can fall over them.
- Speak naturally and clearly. There is no need to shout.
- Avoid noisy places so that he or she can hear you clearly.
- Always ask first if the person wants help. Do not help someone without asking him or her first.
- For people with low vision use clear signs and documents. These can be in large letters or with letters that you can feel.
- For blind people who can read braille, you can give written information in braille.
- When preparing printed information for persons with low vision, ask the person his/her preferred formats for personal documents. General information is usually given in Arial 18 point bold.
- Do not be surprised to hear or scared to use phrases like 'I will see you'. People who cannot see use such phrases, too.
- If you are at a table together for a meal, give a description of the food. If possible, describe where what is on the plate.
- Do not play with or remove the white cane of a person who is blind from where s/he places it. If it is unavoidable for you to place the white cane elsewhere, remember to inform the person. S/he needs the white cane for mobility purposes.
- Do not play with a guide dog without the owner's permission. It is a distraction. The dog is on duty!
- Avoid revolving doors. On stairs or escalators, assist by putting his / her hand on the railing. Let the person know whether the stairs / escalators are going up or down. Allow him / her a choice between stairs, escalators or lifts.

Specific skills

To guide a blind person:

- Walk alongside and slightly ahead of him/her. Do not hold the person's hand. Allow him/her to hold your arm.
    - Bend your arm to your back when passing through a narrow space. S/he will get directly behind you to avoid obstacles.

To seat a blind person:

- Put the person's hand on the back of his/her chair. S/he will be able to sit
- If the chair is backless, put his/her hand on the seat for him/her to be able to sit.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

o **How to communicate with persons with a speech impairment**

- Allow time for the person to speak. He may speak slower than you are used to.
- Avoid the urge to interrupt or complete the sentence for the person.
- Do not take over the conversation.
- If you do not understand what the person said, ask for repetition.
- Do not pretend you have understood if you haven't.
- Ask if there is somebody close by who may be able to interpret.
- If despite all you are unsuccessful, ask if the message is urgent.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

o **How to communicate with people who are deaf or hard of hearing?**
- Get the attention of the deaf person. Position yourself where he can see you. If he or she does not react, gently touch their arm or shoulder, or wave.
- Ask the person how he or she prefers to communicate.
- Face the person. People with hearing disabilities want to see your face so they may read your lips and see your facial expression. Get on the same level as the person (e.g. sit if the person is sitting). Do not put your hand in front of your face.
- Talk slowly to someone who has partial hearing.
- Stand nearby so the person who is hard of hearing may hear you in the best possible way.
- Ask short and clear questions that require short answers.
- Move to a quiet area so there is no or little background noise.
- Position yourself, the person, and (if present) their interpreter in a place where there is adequate lighting.
- Speak clearly and at usual volume. Do not shout.
- Check if the person has understood, for example by asking feedback.
- Reword instead of repeating your sentence if he does not understand you the first time.
- Repeat key messages. E.g. by writing them down.
- Use facial and body expressions to support what you say.
- Face and speak directly to the person. Do not direct your speaking to the family member or interpreter of the deaf person.
- In your building, have clear signs to help deaf and hard of hearing identify where to go.
- Provide information in writing if the person can read and write. Have pen and paper with you just in case you need to communicate in writing.
- Do not call him even he gives you his mobile number. Rather send text messages.
- Feel free to use phrases like "did you hear".

In conference/workshop setting:

- Pay for the Sign Language Interpreter, but let the participant choose his or her own interpreters as much as possible. Always ask what sign language they are using.
- Prepare your workshop well and send programme and other related documents to the Sign Language Interpreter before the session.
- Let the Sign Language Interpreter and the deaf participants decide how they want to be seated in the room

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

○ **How to communicate with someone with a physical impairment**

- Address the person who has a physical impairment, not his or her companion.
- Try to place yourself at eye level with the person (i.e. sitting in a chair or kneeling down). Particularly if you are engaged in a long conversation!
- Don't lean on a wheelchair or other assistive device. Treat the wheelchair as part of his/her body space.
- Do not give your items to a wheelchair-user to carry for you.
- Do not condescend to a person in a wheelchair by treating him or her childishly, such as patting on the head or shoulder.
- Ask if the person would like your assistance pushing the wheelchair.
- If a person is having a problem with opening a door, offer to assist.
- Ensure a clear pathway to intended destinations, and at meetings and restaurants, make a chair-free space at tables for a wheelchair-user to sit.
- When assisting a wheelchair-user up or down a stair, ask if he prefers going forwards or backwards.
- When telephoning a person, let the phone ring long enough to allow time to reach the phone.
- Do not avoid words like 'run' or 'walk': wheelchair users use them too.
- Do not remove people's assistive devices (e.g. crutches, wheelchairs, artificial limbs) from where they have placed them. If you do temporarily, remember to return them to where the person has placed them initially.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

o **How to communicate with persons with intellectual impairments**

- Keep in mind that there are different degrees of intellectual impairments, and some people function at higher levels than others.
- Speak directly to the person and respect their expressed preferences as to choices or decisions.
- Take time and create trust first for the person to feel comfortable with you.
- Speak clearly and use short sentences and easy words.
- Repeat or rephrase what you have said.
- Use pictures or other visuals.
- Do not use a childish voice or exaggerate.
- Use easy-to-read material with simple messages and short sentences.
- Have a quiet and calm place for talking.
- Take your time and don't hurry.
- Use gestures and facial expressions. For example, look sad when you are talking about being unhappy.
- Be patient if the person also has a speech impairment.
- Check with the person if they understand what you are saying. You can ask if she understands what you have just said. If not, repeat yourself or reword your sentence, and check if your language is simple enough.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

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o **How to communicate with people with learning disabilities**

- Some people have difficulties with writing, others with reading, writing or listening. These are specific learning impairments, not intellectual impairments.
- Such persons may be of average or above average intelligence.
- Be aware that learning disabilities are often not visible. So don't judge people on how they react, write or talk. If a person reacts to situations in an unconventional manner, keep in mind that s/he may have limited processing skills which affect their behavior.
- Allow him / her time to respond
- Adjust your communication according to his or her specific needs: such as use of visual information, audio information (instead of written texts) etc.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

How to communicate with people with psychosocial disabilities

- Psychosocial disabilities are often not visible. Most of the time you will not know that someone has a psychosocial disability because it simply doesn't affect their communication or social interaction
- The general advice is to be cautious about interpreting behavior. If social interaction is difficult. Be non-judgmental; allow time for interaction and decision-making.
- If she/he appears unfocussed or speaks slowly – the person may be experiencing side-effects of medications or sleep disturbance.
- If she is displaying an unusual/inappropriate behaviour – be calm and patient.
- Be aware that mental illnesses are not there all the time

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

- *Communicating with persons with Autism[3] - taken from perspective of persons with autism*

1. Please always keep in mind that communication difficulties are common with Autism. We have difficulties in reading social cues and body language. Be patient and understanding.

2. We tend to take things literally and have often trouble reading between the lines. As a result, we may ask a lot of questions to clarify what is meant by something that you say. I have been told that I ask a lot of questions. Don't be offended by this. It is our way of being sure that we understand what you are telling us. We may repeat back to you in our own words to try and get on the same page as you.

3. If we misunderstand something that you say, please be patient and expand on what you said and explain what you meant. Don't assume a negative or hostile intent from us if we misunderstand something that you said. Keep in mind that communication can be difficult for us. Things that come naturally to you take extra effort by us.

4. Please don't get offended by our communication style. We tend to be frank, honest and matter of fact. Some people may interpret this as blunt or rude. We don't intend to offend you by not sugar coating the things that we say. We don't intend to be rude. Please don't get defensive or assume that we are attacking you. Remember that communicating is hard for us. Don't make
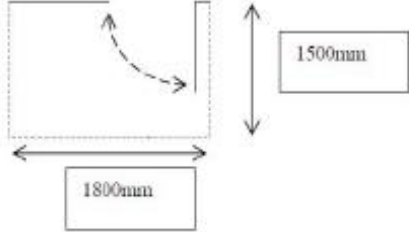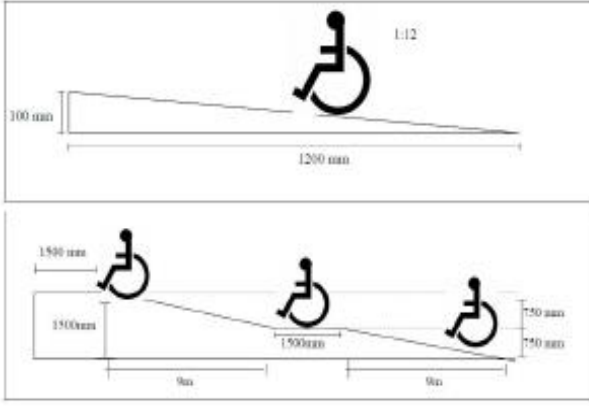
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[3] https://autismum.com/2012/05/07/10-tips-on-how-to-communicate-with-autistic-people
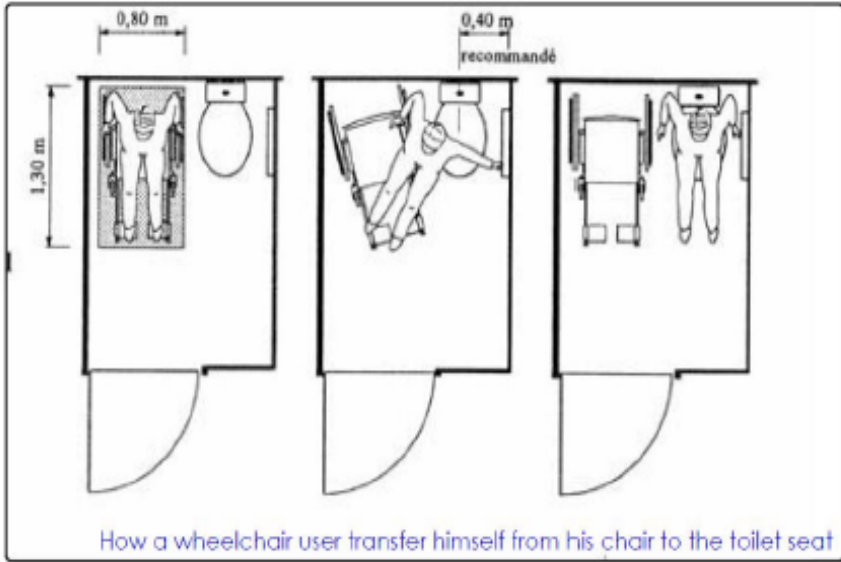
negative assumptions. Too often we get corrected or attacked by someone who fails to give us some slack and the benefit of the doubt.

5. Please don't expect eye contact. We may be able to force eye contact, but it is not comfortable for us. Making eye contact takes a conscious effort. This effort may take away from listening and understanding what you are saying. I tend to look at a person's mouth more often than their eyes. Other autistic people will rarely look at your face. This is ok.

6. Please keep in mind that we most likely have been rejected, excluded, ridiculed or bullied in the past. If we seem anxious or insecure this may be due to living in a world that misunderstands us and is often hostile to us. We have to work hard to reach out to others. Please work at reaching back to us with understanding and kindness. If we feel that you are ignoring us we will feel bad about that. We may persist in asking for feedback from you. Please be reassuring and clearly express your support for us.

7. Please don't speak down to us. Treat us as equals. We may sound flat or have an unusual tone to our voice. We may not speak with our voice at all. We may need to type our words. Please be patient with us. It may take us a while to formulate our answers.

8. Please don't talk too loudly or yell at us. It is very jarring to us. It makes me jump when someone comes up to me and talks too loudly. It is like having someone jump out in the dark yelling "BOO!" at me. It causes an adrenalin dump in my body. I don't like this.

9. Please do NOT touch us without warning. It will make us jump. We don't like unexpected touches.

10. Please don't assume that we lack empathy or emotion. We pick up on negative or judgmental attitudes. We know when people look down on us or are hostile to us. We will shut down if you show us a lack of respect.

11. Please keep in mind that we are all different. These issues will vary from person to person. The above tips are written from my perspective as an autistic person. This is just a guide. Feel free to ask me any questions so that I may expand and clarify any areas that aren't clear to you.

![LIGHT FOR THE WORLD]

- **Accessibility audit (simple format)**

Questions	Finding (Yes/No/NA)
1. Outside	
Are footpaths flat and continuous?	
Are footpaths wide enough (1500 mm)?	
Are footpaths non-slippery and kept free of obstacles?	
Is the building entrance accessible to wheelchair users?	
2. Corridors	
Are the corridors clear of obstructions?	
Is the width for low traffic corridors at least 1500 mm wide for public corridors?	
Is the surface level, smooth and non-slip?	
Is the path of travel easy to identify?	

Questions	Finding (Yes/No/NA)
3. Doors	
Are the door openings at least 800 mm wide?	
Do users have to pass over thresholds higher than 20 mm?	
Are the doors easy to open with one hand?	
Is the doorways space at least 1500mm x 1800 mm to allow wheelchair users to open doors?	
Are the doors easy to identify?	
4. Ramps, stairs and handrails	
Within one floor, is the circulation route free of changes of level or steps and stairs?	
Is the maximum slope of planned/ existing ramps or curb ramps 1:12?	
Are ramps at least 1000 mm wide?	
Are handrails provided at a height between 800 and 900 mm to enhance safety when using ramps and stairs?	
Are stairs and ramps easy to identify?	

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Questions	Finding (Yes/No/NA)
5. Waiting areas and associated facilities	
Are resting facilities provided at an interval of 20 m?	
Do resting facilities provide sufficient space for a wheelchair user?	
Are public seats between 450 mm and 500 mm high and the top of tables between 750 mm and 900 mm high with knee space at least 700 mm high and 600 mm deep?	
6. Toilets / Restrooms	
Are there accessible toilets? How a wheelchair user transfer himself from his chair to the toilet seat	
Is the accessible toilet marked as such?	
7. Signage	
Are accessible areas, features and facilities identified as such?	
Is the location of accessible spaces, features and facilities indicated?	
Are all maps, information panels and wall-mounted signs placed at a convenient height between 900 mm and 1800 mm?	
Is key information on signs supplemented with embossed letters or Braille?	
Are signs clear and easy to read?	
8. Emergency system	
Is the emergency route identifiable as such by people with visual impairments?	
Can an emergency situation be recognised as such by people with hearing impairments?	

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● HOW TO SET UP INCLUSIVE MEETINGS/EVENT

Objective: to organise meetings and events that are accessible to persons with disabilities

Expected result: persons with disabilities can access and participate in meetings and events organised

Guiding principles:

- Outreach and accessibility
- Preparation:
  - preparing the venue
  - how people will get to the event
  - how people will be able to participate in the event

Persons with disabilities are experts in accessibility; a local DPO can help you in the planning of an accessible meeting.

Outreach – How you identify and invite the disability community, and identify possible barriers

Check	Yes	No	Notes
Have people with a disability / organizations for people with a disability been invited just like other people / other organizations?			
Has invitation been provided in different formats (e.g. both on paper and verbally)?			
Has plain and appropriate language been used to provide information?			
Does the invitation provided information on accessibility of the meeting venue?			
Have participants been asked whether they have any accessibility requirements?			

Accessibility – How barriers to participation are removed

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Check	Yes	No	Notes
Have both physical structures as well as communication methods been checked for accessibility?			
Is accessibility for everyone? Also for other groups (e.g. older people; pregnant women; children etc.)			
When developing written materials, has there been a good color contrast between text and background for persons with vision problems?			

Preparing the venue for the meeting

Check	Yes	No	Notes
Has the meeting venue been checked in advance for universal accessibility?			
Is the building physically accessible?			
Are the toilets, corridors and eating areas physically accessible for persons with disabilities?			

How people will get to the event

Check	Yes	No	Notes
Is it possible to get to the event by public transport? If not, is there an alternative (e.g. organize transport with support of a local DPO)?			
Has information been provided to participants on the meeting venue: how to get there, what support they can receive at the meeting, and if there is any reimbursement for extra expenses?			

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Is someone at the entrance of the event, to direct people where they need to go and provide assistance if needed?			

How people will be able to participate in the event

Check	Yes	No	Notes
Do you have information from invitees whether they have any special requirements for accessibility or whether they are bringing a personal assistant?			
Has sign and tactile languages translation for the deaf and deaf-blind respectively been organized and budgeted for if there are people coming who speak sign language or language or tactile sign language?			
Has information in braille, large print or audio been organized and budgeted for if there are people with a visual impairment who are coming?			
Have speakers at the meeting been informed about communication? Ask speakers to speak slowly and clearly, and give any translators who are present time to translate.			
Has the room been arranged so that wheelchairs can pass through? Are there no objects that people can trip over?			
Is the timetable suitable for all participants?			
Are washrooms reasonably accessible to PWDs?			

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LIGHT
FOR THE WORLD

- **Disability Inclusion Score Card (For MFI)[4]**

Name of Financial institution	
Who were present	
Name of facilitator	
Date of assessment - Baseline	
Date of assessment - Progress	
Date of assessment - Final	

Checklist							
	Level 1	Level 2	Level 3	Level 4	Evidence	Baseline Score	Justification Baseline
Domain 1: Strategic focus							
Is financial inclusion of persons with disabilities part of your strategic objectives?	Financial inclusion is not part of our strategic objectives and there is no	Financial inclusion is part of our strategic objectives, but	Financial inclusion of PWD is part of our strategic objectives, but targets are not	Financial inclusion of PWD is part of our strategic objectives, and the targets are followed			

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[4] LFTW resource – Disability Inclusion Score Card

	mention of persons with disabilities	there is no mention of PWD	followed up in staff or board meetings	up in staff and board meetings			

Domain 2: Partnerships							
Does the MFI establish partnerships with disability organizations? (registered CBO/ DPO that represents persons with disabilities)	We have no relationship or partnership with disability organizations	We know where disability organizations are but upto now have not worked together	We know where disability organizations are and see the importance of working together	We cooperate with disability organizations e.g. when we are reaching out to rural areas and our relationship has led to an increment in PWD accessing financial services			
Does the MFI provide financial services to disability organizations?	We do not provide any services to disability organizations	Members of disability organizations can participate in our financial literacy trainings and access our financial products	We actively target disability organizations with our financial services	We provide tailormade financial literacy trainings to disability organizations as well as providing them with financial services			

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Domain 3: Internal systems							
Is the human resource policy disability inclusive?	No human resource diversity policy available in the company. No actions taken to employ persons with a disability.	Diversity policy available in the company, but disability is not mentioned.	Disability is mentioned as part of the human-resource diversity policy.	Disability is mentioned in human resource diversity policy and affirmative actions are taken to employ persons with a disability.			
Is the MIS disability inclusive	No data on disability are captured	Formats capture general disability data; the data are not analyzed to be used to inform management	Formats capture disaggregated disability data but these data are not yet integrated in the MIS used by the institution; data are manually analyzed to inform management	All formats used capture disability data, and the MIS/ software generates disaggregated data on clients with a disability to inform management			
Domain 4: Accessibility							
Are the premises accessible to	Our premises are not accessible to	Most of the service area is	The entire service area is accessible	The entire premise that is			

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persons with disabilities?	persons with disabilities.	accessible to persons with disabilities, apart from the toilets and the loan department which is upstairs.	for persons with disabilities, apart from the toilets	meant to serve clients, including toilets, is accessible to persons with a disability. (Low tills, ramp, talking ATM)			
Is information about our products and financial services accessible to persons with disabilities?	Accesibility of information is not taken into account	Accessibility of information is taken into account by allowing persons with a disability to come with somebody	A selection of information that is used by institutions to inform clients is made accessible to persons with disabilities (big letters, client allowed to come with somebody)	All information that is used by the institutions to inform clients is made accessible to persons with disabilities (big letters, braille, client allowed to come with somebody, sign language on request)			
Are efforts made to bring financial services closer to the client, with	The institution is not planning or implementing activities to bring	The institution plans to bring services closer to the clients	The institution goes to the rural areas to bring services closer to	The institution offers mobile banking facilities, and goes to the			

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special attention for reaching out to PWD?	financial services closer to the clients	but has not implemented this yet	the clients, but does not have special attention for PWD	rural areas to bring the services closer to clients including PWD			
Domain 5: Customer focus							
Are persons with disabilities treated as potential clients?	Persons with disabilities are not treated as potential clients.	Persons with disabilities are considered as potential clients, but no effort is made to seek their views.	Persons with disabilities are considered as potential clients, and branding is targeting persons with disabilities.	Persons with disabilities are actively welcomed and invited to provide feedback.			
Is staff aware of the rights of persons with disabilities?	No staff has participated in a disability awareness training.	Less than 50% of staff has participated in a disability awareness training.	More than 50% of staff has participated in a disability awareness training.	All staff has participated in a disability awareness training.			
Is staff able to communicate with persons with disabilities?	No basic communication skills of staff to interact with deaf, blind and	Some staff have basic communication skills of staff to interact persons with disabilities, acquired on own initiative.		Key front desk staff have basic communication skills to interact			

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	intellectual disabled persons.		persons with disabilities			