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ABSTRACT

Designed to increase the awareness and understanding of disabilities by Virginia park personnel, this guide provides information about the characteristics and needs of park visitors who have disabilities. Four different categories of disabilities are addressed: (1) mobility impairments; (2) visual impairments; (3) hearing impairments; and (4) mental impairments (includes information on mental retardation, learning disabilities, and emotional disorders). Each disability section describes characteristics of the impairments and environmental concerns that might apply, followed by suggestions for assisting and interacting with persons with these types of disabilities. An appendix includes a list of outdated and inappropriate terms or expressions for referring to disabilities and examples of preferred terms. (CR)

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Disability Awareness Training Manual For Park Personnel

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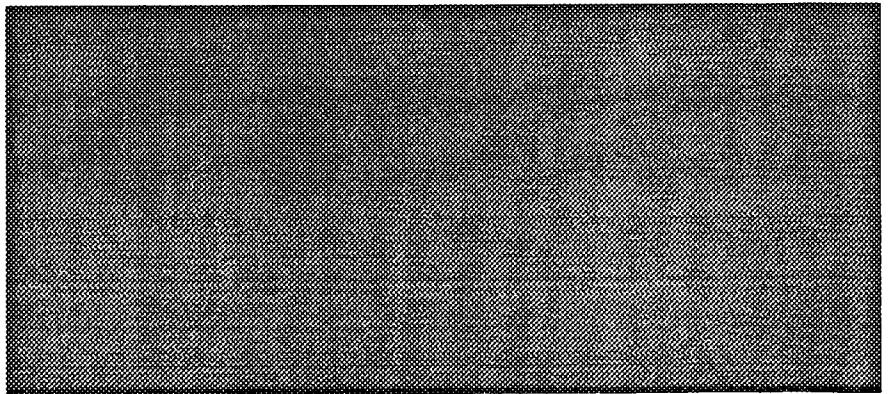
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TO THE EDUCATIONAL RESOURCES
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Overview

Each year many people visit Virginia's parks to enjoy and participate in a variety of outdoor recreational activities. These visitors bring with them a variety of personalities, experiences, capabilities, and expectations.

Some of the visiting public will include individuals with disabilities. As park staff, you may have contact with visitors with disabilities that require special considerations. They may have physical, mental, or sensory impairments that may or may not be obvious. This training program focuses on addressing some of the specific needs these visitors may have.

The leisure interests of park visitors with disabilities are as varied as those of the general population. Though some of these visitors may have disabilities which may limit or modify their participation in some leisure activities, they visit your parks to enjoy the same benefits from participating in outdoor recreational experiences as any other park visitor. This includes the satisfaction of participating in leisure activities integrated with their families, friends, and other non-disabled park visitors, not in separate, segregated, or "special" activities or facilities designated exclusively for individuals with disabilities. Certainly far more important than these persons' disabilities are their individual abilities and desire to participate in the leisure opportunities available to others. It is important to remember that people with disabilities are just people.

As park staff, you play a key role in conveying a positive attitude and creating a welcome atmosphere for all visitors. This is especially important in the case of visitors with disabilities since they often encounter attitudinal barriers which may limit or discourage their participation in the leisure opportunities most people take for granted.

One of the things that can contribute towards projecting a "closed" attitude towards individuals with disabilities is the various terminology used to refer to them. Some of the terms used are outdated and continue to foster negative images. Other terminology tends to create stereotypes and to label persons with disabilities into general groups. These terms often project the assumption that all people who are disabled are alike and, therefore, different from people without disabilities. When referring to persons with disabilities, remember that each person is uniquely individual and use terminology that reflects sensitivity to this. If it is necessary to mention they have a disability, chose words that refer to these individuals as people first and mention their disability second (i.e., persons with disabilities, individual with a disability). Also, try not to underestimate an individual's abilities or interests, and don't let your expectations or apprehensions limit the opportunities you provide or encourage.

The same public contact and communication skills that are used in assisting and interacting with other park visitors should be used for visitors with disabilities. In addition, there are other specific points to remember which may help you to feel more comfortable relating to and assisting park visitors with various disabilities. These guidelines should help improve park facilities, programs, and services for all visitors.

For illustration purposes, this information has been condensed and categorized into four different disability areas. These include mobility impairments, visual impairments, hearing impairments, and mental impairments. A few brief characteristics of these impairments are outlined, followed by some suggestions for assisting and interacting with persons with each of these. Some persons also may have multiple impairments.

There is such a wide range of causes, definitions, and degrees of severity in considering these various impairments. You may want to examine more detailed information on these at your public library or have references available in your park office. This information can be especially helpful when you know in advance that an individual or group with special needs will be a part of your visitor population. What is always most important is to consider the unique strengths and abilities of each individual and the level at which they are capable of functioning. Keep in mind that individuals with the same conditions will differ in their choice of leisure interests and in the degree to which they can accomplish the skills associated with an activity. When you have specific questions or concerns about when or how to offer assistance to a park visitor, generally it is best to ask the visitor if they need assistance and ask specifically how you can assist them.

Mobility Impairments

Individuals with mobility impairments are those with physical conditions that involve significant difficulty in walking. They generally require the use of a mobility aid such as leg braces, artificial limbs, crutches, canes, wheelchairs, three-wheeled vehicles (Amigo), walkers or even holding onto another person's arm. They may also lack coordination or not have full use of their arms or hands. Individuals with mobility impairments can also include those with cardiac or respiratory problems or arthritis. Their ability to walk may be significantly impaired but they may not normally utilize a mobility aid. Mobility impairments may be present at birth or have resulted from an illness or accident. They may also result from the normal process of aging. Some examples of the latter are arthritis, impaired eyesight, or hearing loss. They can all leave parts of our bodies in different stages of weakness, paralysis, limitation, or loss.

Some environmental elements of concern to people with walking difficulties include steps or steep slopes, uneven surfaces, walks interrupted with raised or uneven expansion joints, slippery surfaces such as highly polished floors or wet shower rooms, walks filled with debris, areas that collect standing water, sand, and/or ice, etc. Having to stand or walk for extended periods of time also presents a problem for many people. Reduced agility, speed of movement, difficulty in balance, reduced endurance, or even a combination of these may contribute to impaired mobility. Often energy reserves are used faster than average, as a person who walks with difficulty may be required to spend extra energy in trying to keep their balance or otherwise meet challenges of the environment as they confront their limitations.

Some environmental concerns of persons using wheelchairs or three-wheeled vehicles (Amigo) include: the presence of steps or curbs, maneuvering through narrow spaces, going up and down steep paths, moving over unsmooth or slippery surfaces, making use of conventional restrooms and water facilities, and reaching and viewing things placed at conventional heights.

Although you may not be directly involved with developing or modifying facilities for universal design ("handicapped accessibility"), it is important that you be aware of these concerns. You may be involved with the safety and maintenance of facilities, with programming, and/or with addressing the questions and informational needs of park visitors with disabilities.

Persons with upper limb impairments or limited use of their arms or hands may have difficulty opening heavy doors and using certain styles of knobs, buttons, dispensary devices and handles to operate doors, drinking fountains, coin operated machines, telephones, and elevator controls. Persons with upper limb impairments may also have some difficulty with balance, especially when climbing stairs or walking up inclines.

Some persons with impaired mobility also lack the ability to control their body temperature to meet external demands. For example, in hot weather, these persons may not be able to perspire freely, and thus may suffer heat stroke at a relatively low temperature. In some conditions, pain and/or muscle and joint flexibility may be affected by cold weather temperatures and dampness. Also, some persons with physical impairments must significantly increase their daily intake of liquid, making accessible water facilities and restrooms a critical need.

Many persons have multiple health problems which may include cardiovascular and cardiopulmonary diseases, hypertension, and degenerative conditions of aging. These persons may also have less than average agility, stamina, and slower reaction time.

There are some basic suggestions that you as front-line park staff should remember in relating to a person with a mobility impairment. Many of these tips also apply to persons with the other impairments which will be discussed.

- Remember that a person who has a disability is a person - like anyone else.
- Relax! If you don't know what to do or say, allow the person who has a disability to put you at ease.
- Speak directly to a person who has a disability. Don't direct the conversation to a companion.
- Don't be sensitive about using words like "walking" or "running". These are common expressions in our language and people with disabilities use the same words.
- Treat a person with a disability as a healthy person. Because the person has a functional limitation, does not mean they are sick.
- If the conversation is lengthy, sit down, kneel or squat if convenient. It is uncomfortable for a seated person to look straight up for a long period of time.
- Accept the fact that a disability exists, but do not ask personal questions.
- If you wish to offer assistance, do so, but wait until your offer is accepted before you

help. Ask the person with the disability to instruct you in exactly how to help them.

●Do not lean on a person's wheelchair. It is part of the person's body space and should be respected as such.

●Do recognize that persons aren't "confined to wheelchairs." Some persons who use a wheelchair can walk with the aid of a cane, braces, walker or crutches. Using a wheelchair may be a means of energy conservation.

●A person who uses a wheelchair may also transfer out of their wheelchair to a car, seat, toilet, etc., but do not move the wheelchair out of their reach. Likewise, do not move a person's cane, crutches, or walker out of their reach. The individual will feel more independent and secure if they can reach them.

●When giving directions to visitors with mobility impairments, consider the distance to the destination, along with the weather and architectural barriers such as steps, steep hills, inclines, curbs, heavy or narrow doors, high counters or displays, and bathrooms not equipped for universal design ("handicapped access").

●Some persons with physical disabilities may have problems with speech. Give them your whole, unhurried attention. It may be necessary to ask them to repeat a word or phrase, but don't talk for them. Try to keep your manner encouraging rather than correcting. When necessary, ask questions that require short answers or a nod or shake of the head. Do not assume that they have a mental impairment because they have difficulty with speech.

●Be considerate of the extra time it may take for a person with a disability to get things said or done. Let the person set the pace for walking or talking.

●When park visitors are expected to be seated for a presentation/activity/program, accessible seating or wheelchair space should be available to those who need it. Seating should be integrated with the rest of the audience, not in a separate area, so that individuals with disabilities may sit with their families, friends, and other visitors.

Visual Impairments

Persons with visual impairments include those who are totally blind and the larger number of persons with seriously limited vision. Most persons who are visually impaired do have some vision even if they are "legally blind." Someone who is legally blind is defined as having measured vision of 20/200 in their better eye with correction. This means that they are able to see at 20 feet what a normally sighted person is able to see at 200 feet. The term "totally blind" refers to the total absence of vision and light perception.

There are many kinds of visual impairments, each with a wide range of disability and

limitation. A person described as legally blind may be able to read large print and walk without a mobility aid in many or all situations. They may also be able to perceive lightness and darkness and perhaps even some colors. On the other hand, someone else who is legally blind may not have any of these skills. There are also some conditions in which the individual's vision may be better one day over another, depending on fatigue and other factors.

It is impossible to generalize visual impairments into one problem with one solution. People who have lost their sight later in life may have retained some visual memory or concepts of space, color, etc. However, persons born with visual impairments may have a different frame of reference for these same elements. Similarly, persons born with visual impairments may have skills in reading braille and using tactile aids which may be more useful to them than to persons who have later lost their sight.

The process of aging also affects visual perception. Both visual acuity and opacity are affected. Visual acuity influences how we perceive objects at a distance, and opacity of the lens determines the way light is transmitted, affecting perception of colors and textures. Colors often blend together and closely related textures cannot be discerned.

Glare is a major problem for many persons, particularly senior adults. Do not confuse the term "glare" with low "light level." Low light levels cast heavy shadows, making it difficult for many persons with low vision to perceive hazards such as stairs, changes in floor surface, etc. Glare usually results when too much light bounces off light colored walls and floors, making it difficult and uncomfortable to navigate.

Some environmental elements of concern to persons with visual impairments include: maneuvering past obstacles placed in the path of travel, going up or down steps, reading signs or printed materials, understanding information/exhibits that require visual perception, etc.

It is important to remember that many persons who are blind or visually impaired do not read braille. In fact, less than 10 percent of the people who are blind or who have severe visual impairments are able to use this system. Many persons prefer to receive information by audio cassette, large print, or through oral presentation. This is not to say braille should not be provided. People who use braille appreciate its availability. However, this should not be the only method available to present information to visitors who are blind or visually impaired.

It isn't always easy to identify someone as having a visual impairment. Some of the more obvious ways to better identify them can include seeing a person using a white cane with a red tip or using a guide dog for a mobility aid and/or wearing dark sunglasses. When you do have park visitors with visual impairments, there are some basic suggestions you should remember when relating to, or assisting them:

- When approaching an individual with a visual impairment, introduce yourself and identify yourself as a park employee. Speak directly to them. This helps them to locate you. Speak with a normal speed and tone of voice unless you know there is a hearing loss.
- Offer assistance if it seems necessary, but don't insist if your offer is declined. If your

offer is accepted, ask the person to explain how you should help.

●It may be appropriate to lightly touch the arm of a person who is blind after you speak so that person knows you are addressing them.

●When guiding someone who is blind, offer them your arm. Grabbing a person's arm to lead them when they are blind is dangerous as well as frightening. The person who is blind will walk about a half step behind you, following your motions. Be sure to identify steps, curbs, or obstacles which may be encountered. In narrow places, bring your arm back behind you and let the person follow you.

●When guiding a person who is blind to a chair, simply guide their hand to the back of the chair and tell them if the chair has arms.

●When you are leaving a person who is blind, let them know. No one wants to be left alone talking to themselves. If you get someone else to help them, introduce the helper.

●Don't avoid using words like "blind," "look," or "see." People with visual impairments use the same words.

●To orient the person with a visual impairment to new environments, describe the site, shapes, distances, boundaries, and any obstacles or potential hazards.

●When giving directions to a person who is blind or visually impaired, be as clear and specific as possible. Mention things that may be passed which may serve as orientation cues. Colors, textures, movements, and directional indicators in a description can make it more vivid for someone with a visual impairment. Be sure to also mention obstacles in the direct path of travel.

●Many individuals who are blind use guide dogs as a mobility aid. It is tempting to pet or attempt to play with a working guide dog. However, distracting a guide dog from its work can put its owner in danger. Under no circumstances should you pet or otherwise distract the dog without the owner's permission. However, the owner may appreciate the offer of water for the dog, but this also should only be done with the owner's permission.

●Guide dogs for persons with visual impairments are legally permitted to accompany the user anywhere they want to go (i.e., restaurants, stores, park areas.)

●Most people who are blind have no trouble with ordinary table skills, but they do need help ordering from most menus. Offer to read the menu to them including the price of each item. As each item is placed on the table, call their attention to it as in "here's your water."

●In an interpretation, if anything is touchable, say so. Touching will enhance understanding of your interpretation for the person who is blind.

●Ninety percent of people who are legally blind have some vision and can see a great deal if you help them locate the object you are discussing. They may need help with color, lines, and details.

●If you are making change for someone in bills of more than one denomination, hand the person who is blind the bills separately and identify each denomination as you hand it to them. This is not necessary with coins; they usually know them by touch.

●During activities, orient the person with a visual impairment to the placement of objects around them that they will be using. The analogy of a clock face to explain positions is often used by people with severe visual impairments.

Hearing Impairments

Hearing impairment is the most common disability among Americans. Persons with hearing impairments include those who are totally deaf and the larger numbers of persons with seriously limited hearing. People with seriously limited hearing have difficulty hearing sounds or other people's speech but can often understand it with some sort of amplification technique or device. People who are deaf cannot hear sounds or speech well enough to understand it, even with amplification.

A person who is deaf may also have impaired speech since they may not be able to hear well enough to correct phonetic errors in their own speech. Most people with severe hearing impairments have a voice; they may choose not to use it if other communication techniques will be clearer.

The major handicap to a person with a hearing impairment is communication. This person is cut off from the usual way of acquiring and transmitting information and therefore, communication can be severely affected.

The time at which hearing loss occurs in a person's life has an effect on the development of communication, personal, social, and educational skills. Impairments present at birth are often caused by certain contagious diseases such as rubella, mumps, or influenza during the mother's pregnancy or hereditary factors. A person who is born deaf does not learn language in the usual manner and, therefore, does not have the language frame of reference when learning to speak, write, or read. They tend to think in pictures versus words. As a result, reading comprehension and writing may be at a lower level than indicated by their intelligence level. Other hearing impairments may develop at anytime during life as a result of childhood diseases, injuries, or audio deterioration resulting from old age. Persons who have an acquired hearing loss usually have a relatively strong language base.

A wide variety of communication methods are used by persons with hearing impairments including the use of sign language, reading and writing, mime and gesture, lip reading, or a combination of these methods. The two most commonly used methods to communicate are

writing and the use of sign language.

Writing is the only means of communication for some people with hearing and speech impairments. Some people also have keyboard devices called TTYs or TDDs, which enable them to communicate over the telephone.

Signing is often used as a communication technique by people with speech as well as hearing impairments. Signing involves using the position and movement of the hands, as well as other body language, to create pre-defined symbols for words. Various sign languages are used to communicate. One sign language, the American Sign Language, has its own syntax. Spoken English signing follows the syntax of standard speech. Fingerspelling, a more specific kind of signing, involves using the position and movement of the hands to create a pre-defined symbol for each letter in a word. It is usually used in conjunction with word signing to cover words or names for which there is no pre-defined sign.

Lip-reading is a technique learned by some people with hearing loss which assists them in understanding others' speech when they can't hear it well or at all. Lip-readers watch a speaker's mouth and identify words by the shape and position of the lips and tongue. This is a difficult skill to master since less than 35% of English words are recognizable solely by mouth positions and movements. This is less commonly used as the basic means of communication and most people who use lip-reading will have limited skills with those people that they haven't talked with before. Context and non-verbal communications are essential components to this skill. Lip-reading should not be relied on as a viable means of communication with most persons with hearing impairments.

Since deafness is an invisible disability, you may not be aware a park visitor has a hearing impairment until communication is required. The major barriers to persons who are deaf or have a hearing impairment include understanding audio presentations, interpretive programs, or information that is communicated only through speech or sound.

There are some specific suggestions you should follow as park staff while relating to park visitors with a hearing impairment:

- Get the person's attention before you start talking. You may have to touch the person lightly, wave, or use another visual sign to attract their attention. Face them directly while speaking. Stand close enough to them and so that they have an unobstructed view of your face to allow them to see your lips. Maintain eye contact. Even a slight turn of the head may make the person think the conversation is finished.
- If a person who is deaf is accompanied by a companion or an interpreter, speak directly to the person who is deaf. If you know some sign language, use it. Your attempts will usually be well received.
- Persons who are deaf can not hear subtle changes in your tone of voice and they rely on the use of facial expressions, hand gestures, and body movements to aid in understanding you.

- Avoid background noises and prevent distractions and confusion as much as possible while communicating.
- Speak calmly and clearly. Speak in a natural way and at a moderate pace unless you are requested to slow down. Speak at a normal volume. Shouting often results in distortion of speech, especially for persons wearing hearing aides. It also displays a negative visual sign to your listener. Don't drop your voice at the end of a sentence.
- If you are aware that the person who has difficulty hearing has a better ear, stand or sit on that side.
- If the person with a hearing impairment doesn't seem to understand what you said, rephrase it or write notes. Clear communication is what's important, not how it's accomplished. Try to stay positive, relaxed, and be patient.
- Try to avoid eating, smoking, or chewing while you talk. It makes your speech harder to understand.
- Be sure the light, whether natural or artificial, falls on your face. (Don't stand with the sun to your back or in front of a window. Even at night, room lights will reflect into the pane, causing glare for the person who reads lips). Avoid shadows on your face like those cast by broad-rimmed hats or sunglasses.
- When changing the subject, make sure the person with a hearing impairment understood what was said before moving to the next point. Indicate the new subject with a phrase or perhaps gesture to it if the subject is within range of sight.
- Use visual aids such as diagrams, written instructions, pictures, maps, or other media in addition to verbal instructions to assist the person in comprehending directions and instructions.
- Speak in simple sentences and avoid abstract concepts.
- Programs can often be made more accessible by providing written information prior to the program which will convey the general content of the program.
- The Law requires any agency that receives federal or state funding to provide and pay for a sign language interpreter for recipients of their programs and services when one is requested in advance and available.
- Invest in a TDD so that persons with hearing impairments may communicate with your agency by phone.
- The use of captioning can help make slide presentations and video programs more accessible to persons with hearing impairments. This technique conveys the verbal information presented in a written form through a caption on the screen.

●For programs/presentations when seating is provided, persons with hearing impairments should have seating available to them with an unobstructed view of the presentation/program and speaker(s). In low lighting situations, adequate lighting should be positioned on the speaker's face to facilitate lip-reading.

Mental Impairments

Individuals with mental impairments include those with mental retardation, learning disabilities, and emotional disorders. While common behavioral characteristics may sometimes be found among members of these groups, each disability is marked by distinctive features and should be considered separately from the others. People who have mental disabilities have a wider range of abilities and limitations than any other disability group, both because of distinctions between mental retardation, learning disability, and emotional disturbance, and because of the wide range of abilities within each group.

Some of the most severe barriers a person with a mental, learning, or emotional disability faces are attitudinal barriers because these impairments are generally least understood by the general public. This often results in apprehensiveness and the general avoidance of persons with this type of disability. Consequently, the person with a mental, learning, or emotional disability will frequently keep their often "invisible" disability to themselves.

Mental Retardation:

In people described as having mental retardation, learning develops slower than average. Reasoning and judgment capabilities may also develop at a slower pace. For most people with mental retardation, it is not the ability to learn that is missing, but the speed and ease at which things are learned is slower.

Just as there are different levels of "normal" intelligence, there are different levels or categories of mental retardation. Keep in mind that a specific category of mental retardation may give you a general idea about the intellectual level and adaptive behavior of a person, but does not mean that all people within that category share the same characteristics or abilities.

The general categories used are mild, moderate, severe, and profound. The range between mild and profound retardation is extremely broad and the gap between abilities and age may appear greater for persons with more severe mental retardation.

Some people with mental retardation may have problems with communication. Some may have a limited vocabulary, while others may be non-verbal and rely on sign language or some form of a "communication board" for expression. However, most people with mental retardation can generally communicate without modification.

People with mental retardation may also have accompanying physical disabilities and may as a result require some assistance.

People with mental retardation are often overprotected and discouraged from exploring

the world or interacting with others. Often they are limited to participating in programs that are designed "especially for their needs," and allowed to socialize only with "other persons with mental retardation." After finishing a specialized education program as a child or young adult, many may spend their adult years in inactivity. Fortunately, the practice of segregating or institutionalizing persons with mental retardation is changing. With more appropriate training and education, many people learn to become independent citizens, manage their own homes, money, and successfully compete in the job market. Others may live in small group homes, supervised by live-in counselors, and work in sheltered workshops or semi-skilled jobs.

Learning Disabilities:

Persons with learning disabilities are defined as persons exhibiting a disorder in one or more of the basic psychological processes involved in understanding or in using spoken or written language. These may be manifested in disorders of listening, thinking, talking, reading, writing, spelling, or arithmetic.

Obviously this definition covers a wide spectrum of potential obstacles a person with a learning disability may encounter when attempting to receive or process information. For purposes of understanding persons with this disability as distinct from persons with mental retardation, it is important to keep in mind that a learning disability is generally confined to one aspect of learning. While both learning disabilities and mental retardation interfere with a person's ability to learn, learning disabilities are more specific and occur in people with average or above average intelligence.

A person with a learning disability can experience poor spatial orientation or have a poor sense of direction, or have severe difficulty in reading. The severity of the disability frequently determines if a disability is identified at all. Many adults today who dropped out of school because "they just didn't do well" may have mild learning disabilities.

Persons with learning disabilities are even less identifiable than persons who have mental retardation. There are many different combinations of learning disabilities which may have an impact on programming. Someone may have problems with reading information, while others may have difficulty distinguishing left from right. Subsequently, a non-reader may be especially attuned to spoken information. Someone having difficulty with a string of verbal instructions may need simple, direct statements aided by a diagram. Because there are no reliable clues to indicate a person may have a learning disability, any assistance or programmatic adjustments for these visitors will be largely dependent on sensitive and alert staff who can adjust communication, programs, or presentations to meet individual needs.

Emotional Disorders:

The number of people experiencing emotional disorders is very high. Estimates vary according to the nature, severity, and duration of the disability considered.

Persons with emotional disturbance may include persons with disabilities ranging from relatively short-lived depression to severe psychosis that may last for years. Clinical diagnoses include such widely different variations as anxious-neurotic, manic-depressive, passive-

aggressive, and personality disorders, as well as numerous others.

Like other mental disabilities, emotional disturbance is not easily defined. It may be said that, in general, persons with emotional disabilities may display an inability to concentrate, an inability to build or maintain satisfactory interpersonal relationships, inappropriate behavior or feelings under normal conditions and, frequently, a general, pervasive mood of unhappiness.

The practice of institutionalizing persons with emotional disorders has declined dramatically in the past 25 years. Therefore, these persons are predominantly living in the community and are possible park visitors. In addition, various institutional settings use park facilities and programs to complement their recreational offerings to clients.

The ability of the person with emotional disturbance to benefit from recreational programming is affected by his emotional state and rarely by his innate intelligence. It is a mistake to confuse the two, especially since persons with emotional disturbance are frequently highly intelligent and, therefore, would be greatly offended if considered mentally retarded.

Developing guidelines for working with visitors with mental disabilities is difficult when one considers the varying abilities of persons with various disabilities. It is even more difficult when considering persons with mental or learning impairments because the categories of Mental Retardation, Emotional Disorders, and Learning Disability are unique within themselves. Recognizing this dilemma, the following tips are provided to assist with interacting or providing park programs to persons with mental impairments:

- Again, don't underestimate an individual's abilities or interests and don't let your expectations and fears limit the opportunities you provide or encourage.
- Treat adults with mental retardation as adults, not children. Don't "talk down" to an individual or group, but keep your conversation or talk on an understandable level. Programs and activities should be "age appropriate."
- You may notice that some persons may seem to be standing too close to you or staring at you as you talk. This is not an uncommon action for some persons with mental impairments as they attempt to block out competing noises or activities and concentrate on what you are saying. If possible, try to eliminate background noises or distractions.
- A person's ability to understand speech is often more developed than their own vocabulary. So, don't talk about that person in front of them.
- Speak directly to the person with the mental impairment rather than to a companion, regardless of the severity of the impairment.
- Break directions down into simple, concrete steps or basic concepts. Repeat and rephrase them as necessary to reinforce points.

- Written information, instructions, and directions, in particular, may present problems for some individuals. Therefore, alternative methods of conveying messages should be considered. For example, signs with pictures or well known symbols can often more effectively convey messages than written words (i.e., pictures for women's and men's restrooms).
- When possible, use demonstrations, visual aids, or "hands-on" learning techniques involving as many senses as possible.
- A person with mental retardation may have a short attention span. In programming, be sensitive to interest or lack of it. Be creative and flexible enough to modify programs accordingly.
- Be aware that some persons with mental retardation may not have good safety judgement in assessing dangerous situations.
- If you think a person needs help, offer to assist, but wait until your offer of assistance is accepted. The person may prefer to do the activity by themselves, even if it is not at the level you would do it.
- Be aware that persons with mental retardation may have problems with fine motor skills, balance, agility, strength, or stamina.
- Be supportive, friendly, and sincere in giving positive feedback and reinforcing strengths and abilities.
- Remember that people with emotional impairments may be very sensitive to stress and new environments and may become frustrated easily.
- When institutional settings or agencies inquire about visiting your park with their clients, stress their responsibility for providing adequate staff supervision for their participants.

Conclusion

A large portion of the public is affected by the issue of accessibility. Current estimates indicate that approximately 12% of the population have disabilities which significantly impact their daily lives, including their leisure lifestyle. The total number of persons impacted increases significantly when you add family members and friends who recreate with them to this figure. In addition, many senior adults have developed some of the disabilities which often accompany the aging process.

Agencies that receive federal funds are legally mandated to make facilities and programs accessible to persons with disabilities (i.e. Architectural Barriers Act of 1968/facilities and U.S.

Rehabilitation Act of 1973, Section 504/programs). Agencies that receive state funds are required to make their programs accessible under regulations effective October 1, 1990 titled "Non-Discrimination Under State Grants and programs". Also, the Americans with Disabilities Act (ADA) requires that public accommodations be accessible. Whether legally mandated or not, everyone has the right to enjoy Virginia's recreational resources, and agencies should be committed to ensuring accessibility to all.

One of the first steps towards increasing accessibility in your parks is to ensure that staff have the necessary training. This manual was developed to help increase staff's awareness and understanding of various disabilities, as well as implications these disabilities may have concerning facilities and programs. If your level of comfort with the subject of disabilities has increased after reading this document, then this manual has met its purpose.

Attitudinal barriers are perhaps most limiting to persons with disabilities. Positive attitudes can be contagious. Take the information you have acquired through this manual and apply it to your job position and life. Be an advocate for persons with disabilities. Help to educate others about this subject. The changes or contributions you make in this area will have a significant impact on the lives of others.

Remember, persons with disabilities are persons first!

Appendix- Terminology

Examples of Outdated and Inappropriate Terms or Expressions:

- | | |
|---------------------------|---------------------|
| -the retarded | -defective |
| -the handicapped | -deformed |
| -the disabled | -deaf and dumb |
| -crippled | -deaf mute |
| -confined to a wheelchair | -invalid |
| -wheelchair bound | -epileptic |
| -cerebral-palsied | -arthritic |
| -spastic | -poor unfortunate |
| -gimp | -idiot |
| -crazy | -moron |
| -insane | -lame |
| -afflicted with... | -maimed |
| -stricken with... | -mentally deficient |
| -burdened with... | -victim of... |

Examples of Preferred Terms or Expressions:

Individual or person with...

- ...a disability
- ...a visual impairment
- ...a hearing impairment
- ...a mobility impairment
- ...mental retardation
- ...a development disability

Individual or person who...

- ...uses a wheelchair
- ...is blind
- ...is deaf



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