#### **Independent Living Research Utilization**



We create opportunities for independence for people with disabilities through research, education, and consultation



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# Creating Cognitive Access and Inclusion in the Independent Living Movement

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## **Evaluation Survey & Contact Information**

Your feedback on this webinar is important to us. At the end of the presentation you will be asked to complete an evaluation. Please click on the link provided at that time and fill out the brief survey.

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#### What You Will Learn...

- Common access barriers for people with cognitive disabilities
- Common areas of overlap between the access needs of people with cognitive disabilities and other disability communities
- Ideas for expanding access in CILs for people with cognitive disabilities, identifying specific ways CILs can become more inclusive of this community
- Strategies that create cognitive accessibility that can improve communication and participation
- Opportunities for outreach to people with cognitive disabilities



## **Background**

- What is a cognitive disability?
- Where is the disconnect?
- What can we do about it?



## What is a cognitive disability?

- A cognitive disability includes...
  - -Autism
  - -Intellectual disabilities
  - -The "DD" community
  - -Mental health
  - Learning disabilities
  - -Some aspects of aging
  - -Etc.
  - Neurodiversity: valuing neurological diversity



#### Where is the disconnect?

- Different preferences
  - –Person-first vs Identity-first
- Different histories
- Different systems
- Different access needs
- Cognitive ableism & intra-community hierarchies



#### What can we do about it?

- Talk about it
- Share information
- Expand the definition of accessibility
- Engage with the whole community



# **Questions & Answers**



#### Access

- Common barriers
- Areas of overlap
- Expanding access



## **Access: sensory**

- Barriers:
  - -Flashes
  - -Noise level
  - -Side conversations
  - –Mic feedback
  - -Crowds
  - -Scents
  - –Lighting
  - Overlap:
    - -CFS
    - -Hearing disabilities

#### Solutions:

- –Fragrance-free
- –No flash policies
- -Warn for noise
- –Sensory-free/respite spaces
- -Encourage movement
- -Adjust expectations
- -Avoid fluorescent lights
- -Provide a schedule
- -Follow the schedule



## **Access: social communication**

- Barriers:
  - -Initiation
  - -Turn-taking
  - –Name/facial recognition
  - -Pronouns
  - -Sarcasm
  - -Body language
  - -Social capacity
- Overlap:

- •Solutions:
  - Color communication badges
  - -Talking objects
  - –Nametags, introductions
  - -Explaining/avoiding sarcasm
  - -Direct communication
  - Careful scheduling
  - -Following the schedule



## Access: augmentative communication

#### •Barriers:

- –AAC users can be part time or full time
- –AAC can take longer and be more cumbersome or harder to understand

## Overlap:

-Lots of PWD use AAC

#### •Solutions:

- –Multiple modes of communication
- -Good facilitation
- -Give time
- -Mic AAC devices
- -Interpretation



## **Access: telecommunications**

- •Barriers:
  - Auditory processing
  - -Reliance on verbal speech
  - -Conversational flow
- Overlap:
  - -Hearing disabilities

- •Solutions:
  - -CART
  - -Text-based chat
  - -In-person
  - -Visual supports
  - -Teaming



## Access: accessible presentations/meetings

- Barriers:
  - -Attention
  - –Processing
  - –Understanding
  - -Social communication
- Overlap:

- •Solutions:
  - –Provide & follow the schedule
  - -Small groups
  - -Multiple learning styles
  - -Timing/length
  - –Give permission for movement
  - –Use accessible language/provide accessible information



## **Access: attitudinal barriers**

- •Barriers:
  - –Cognitive disabilities aren't "real"
  - -"Our minds are fine"
  - -"Don't talk to me like I'm..."
  - -"What does IDD mean anyway?"
  - Not recognizing social communication disabilities

- •Overlap:
  - -Invisible disabilities
  - -Chronic illness

- •Solutions:
  - -Be mindful



## **Access:** power

- •Barriers:
  - –Taking advantage of someone's disability
  - -Steamrolling
  - -Special ed treatment
  - Inaccessible language or information
  - -Overall inaccessibility
- Overlap:
  - -Privilege

- •Solutions:
  - -Be mindful
  - –Work directly with selfadvocacy groups on this
  - -Prioritize overall access



## Access: conflicting access needs

- Conflicting access needs are very real
- They present an opportunity for problem-solving and community building



# **Questions & Answers**



## **Outreach**

- Cognitive accessibility
- Outreach



## Cognitive accessibility

- Cognitive accessibility looks at:
  - Language complexity
  - –Presentation of information
  - -Intended audience

It comes down to whether or not you value the participation of people with cognitive disabilities, as well as many other groups.



## Accessible vs inaccessible language

- Avoid jargon
- Avoid acronyms
- 8th grade reading level or lower
- Concrete language
- Clear sentence structure
- Similarity to readability standards



#### Accessible vs inaccessible information

- NOT a question of watering down!
- Get to the core point, make it concrete
- Presentation & structure: scaffolding
- Multiple modes, alternate formats
- Again, best practice generally



#### **Outreach**

- Prioritize inclusiveness and access
- Break down attitudinal barriers
- Incorporate into existing outreach
- Youth outreach



## **Outreach**

- Local self-advocacy groups
- DD network
  - -P&A
  - **-UCEDD**
  - -DD Council
  - Movement-building



#### More resources

http://www.gmsavt.org/get-on-board-and-make-a-difference/

http://www.gmsavt.org/getting-your-message-across-communicating-with-people-with-intellectual-disabilities/

http://www.odi.govt.nz/resources/guides-andtoolkits/disability-perspective/resources/plainlanguage.html

http://www.aucd.org/docs/add/sa\_summits/ASAN.pdf



#### **Final Questions & Answers and Evaluation**

Any final questions?

Please click the link below to complete the evaluation survey:

http://www.surveygizmo.com/s3/2525274/CIL-NET-Webinar-April-14-2016



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