

Disability in the workplace

Everyone's responsibility



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Diversity and inclusion at Telefónica

At Telefónica we are convinced that the diversity of our teams, combined with an inclusive leadership style, helps us to achieve better business results. We are based on the idea that only if we guarantee work environments in which equal opportunities are a reality, will we foster an attractive work environment that is conducive to the growth of all people, regardless of their gender, nationality, ethnic origin, skin colour, family responsibility, religion, age, social status, sexual orientation and identity or disability, among other personal characteristics.

Our company is immersed in a profound internal transformation to respond to the challenges posed by the digital revolution. In this context, we need to have the best talent available in the market. Therefore, we are firmly committed to developing an organizational culture and identity of equity, plurality and inclusion, in which the unique skills, abilities and ways of thinking of our employees help us to make the best decisions.

For this commitment to be successful, it is important to have diverse teams, but only if this diversity is enhanced through inclusive talent management. We do not want to reinforce the categorization of people in closed groups, but rather seek what unites us and ensure work environments in which each employee can contribute the best of themselves. We are convinced that only by managing diversity from a cross-cutting perspective of inclusion and integration will we succeed in breaking down the inequalities associated with labels.



2. Telefónica accessible

At Telefónica we are convinced that the digital revolution must generate new opportunities for everyone. Digital technologies have burst onto the scene, opening up new opportunities to dramatically improve the quality of life of people with disabilities, offering greater autonomy and breaking down traditional physical barriers.

For this reason, we have launched the "Telefónica Accesible" project, through which we are moving forward to make accessibility a cross-cutting element of the business. To achieve this, this strategy is articulated in four main dimensions: people, facilities, processes and products and services,

We do this first and foremost because our commitment to accessibility is a matter of social justice. We are aware of our dual responsibility as a telecommunications provider and employer. Incorporating accessibility criteria in our processes allows us to promote the development of professionals with disabilities and, therefore, to take advantage of the potential of their abilities, skills and experiences. We are convinced that work teams with diverse capabilities and an inclusive leadership style achieve better results. At the same time, we believe that having professionals with disabilities helps companies to better empathize with their customer base and to get closer to the market of people with disabilities, which, according to the study 'The potential market of people with disabilities in Spain', represents more than eleven million potential consumers and customers in Spain.

Our commitment is for the Group to become a fully accessible Company that actively contributes to full equality of opportunity through new technologies.



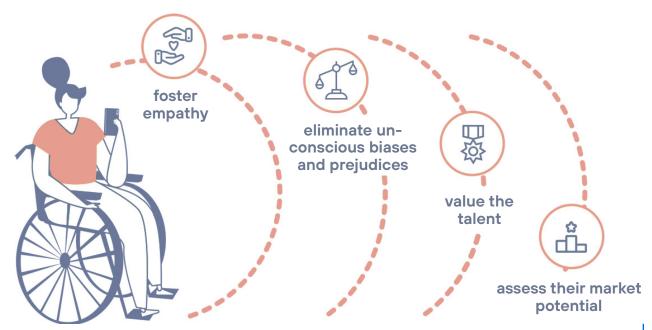
3. Why this guide

To achieve true integration we need to know in depth the multiple realities and needs of people with disabilities, put ourselves in their shoes and understand the barriers they face on a daily basis. We believe in the value and importance of training and awareness to promote empathy, eliminate unconscious biases and prejudices and, ultimately, to value the opportunity that their talent and market potential represents.

For this reason, and as part of the Telefónica Accesible project, we have developed this guide, which presents basic guidelines to help employees improve and facilitate interaction with colleagues with disabilities. The guide responds to the most common concerns that arise among employees who are not used to working with people with disabilities: "Should I help a blind person to walk by grabbing their arm?", "Is it offensive if I exaggerate my gestures to make myself understood in front of a deaf colleague?", "Is there a minimum distance I should maintain to avoid making a colleague with autism spectrum disorder uncomfortable?

Through this guide, Telefónica seeks to promote awareness of the diversity that exists within disability and, ultimately, to normalise interaction between employees. It is a further step towards ensuring inclusive work environments, in which all employees feel comfortable and give the best of themselves, regardless of their abilities.

Although this document is especially aimed at the company's employees, to whom it has been distributed through internal channels, it is also aimed at society as a whole, for which purpose it has been made public. We believe that the information contained in this guide, which is intended for a non-expert audience, is useful for other organizations or individuals and, therefore, we make it available for consultation by any agent.



4. Basic concepts

Disability (definition of the Royal Academy of the Spanish Language): "Situation of impairment or lack of any physical, sensory or mental capacity of the person, which limits or prevents their full and equal participation in society or the effective exercise of their rights".

Person with Disabilities (definition according to the UN Convention on the Rights of Persons with Disabilities): "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others".

The approach of this guide takes as a reference the UNE 170.001-1:2007 Standard on Universal Accessibility, according to the DALCO (Deambulation, Apprehension, Location, Communication) criteria:



Wandering

Refers to a person's ability to carry out activities associated with moving from one place to another.



Location

It refers to difficulties in orientation, identification and location of places and objects.



Apprehension

Refers to the dexterity and skill of body movements, including manipulative skills.



Communication

It refers to the person's ability to generate, emit, receive and understand messages.

5. Basic keys to interacting with people with disabilities

Ask before you help

Just because someone has a disability, we should not assume that they need help. If the **environment** is **accessible**, people with disabilities can usually function independently.

Adults with a disability prefer to be treated as independent persons. Therefore, it is interesting to consider that we should **offer our help only if the person really needs it.** In general, people with disabilities will let us know when they need support.

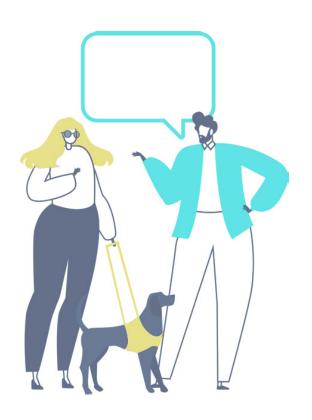
If they finally require us to help them, it is important to ask beforehand **how we can be of service to them.**

Be respectful

When initiating a conversation, **always speak directly to the person**, not to the person's companion, assistant or sign language interpreter. Speak to them as you would to anyone else, with respect, but above all, naturally.

Don't make assumptions

People with disabilities are aware of what they can and cannot do. **Do not make decisions for them** and do not question whether or not they can participate in an activity. We should **always emphasize people's abilities** and not their perceived limitations.



Attend to your requirements

When a person with a disability reports a situation that could limit his or her freedoms and/or rights (mobility, participation, care, etc.), in general, we should not understand it only as a complaint.

In reality, an **opportunity to improve** in all those aspects that make anyone feel comfortable enough to participate on an equal footing is becoming apparent.

Arrange the spaces

Chaotic or spontaneous environments tend to accumulate uncontrolled obstacles that will make it difficult to access and navigate the environment.

Oncrete and simplify

We will try to communicate in a simple and precise way, **avoiding metaphors** and jargon and eliminating unnecessary information.

Respect the difference

We must understand what is different as diverse and, therefore, enriching.



Use inlcusive language

The use of inclusive language is a fundamental part of establishing a conversation based on respect between interlocutors. It is preferable to **use terms that ensure a dignified treatment** towards any person, to the detriment of other harmful concepts, in disuse and that limit our individual identity.

In any case, don't be afraid if you are not sure what words you should use, it's very simple, just **ask the person.**

Regarding the use of inclusive language, it is interesting to mention that many people with disabilities have their own preferences. In fact, some are not in favour of promoting the use of euphemistic terms such as "person with different abilities", "person with functional diversity", etc.

In this sense, at present, according to our current regulations and in accordance with the UN Convention on the Rights of Persons with Disabilities (2006), the correct term in use is "**person with disability**".

As a general rule, it is important that we always try to address people by their NAME, leaving aside any label or stereotype associated with their possible condition. We can be tall, short, blond, dark, ..., have a disability or not, but above all we are people.

We can express ourselves in an appropriate way by always using the concept "**person**" in front of the attribute we want to highlight, avoiding other obsolete terms such as "disabled", "invalids", etc.

It is preferable to say "person with reduced mobility", or "person who uses a wheelchair", rather than "person confined to a wheelchair" or "person confined to a wheelchair". The wheelchair is an **assistive product** that enables the person to move and participate in society: it is liberating, not limiting.

Expressions such as "person with physical disability", "person with cerebral palsy", "person with schizophrenia", etc., are commonly accepted within the group of people with disabilities.



Important

Having a disability does not make me a "handicapped" person ≠ any less valid.

If there is an architectural barrier in a building, for example, stairs in front of the main door, which prevents a person from accessing the building with his or her wheelchair, in reality, the **limitation** should be considered to be **imposed by the building**, since it is really the factor that conditions the person's ability to move.

When talking to "blind people", or "people with visual impairment" (low vision), using expressions such as "did you see the movie yesterday", or "see you later", are completely valid, in fact, they themselves use these expressions all the time and naturally.

Within the group of deaf people, many choose to communicate through Sign Language, others use oral language, and others both. In any case, all exercise their **right to communicate** with other individuals.

Therefore, we must bear in mind that the term "deaf and dumb" is totally out of use and inappropriate. As an example, it would be correct to say "John is Deaf".

In short, we should avoid using words that have a negative and discouraging connotation, and not fall into commiseration and/or condescension towards the people we relate to. **We should simply treat others as we would like to be treated**, with naturalness and respect, that is the key.

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Remember

- Ask the person how you can best help.
- Always try to use inclusive language, with respect and dignity for the person.
- Be respectful and adaptable to different situations and needs.
- Recognize that it may take more time to support a person with a disability to ensure that his
 or her needs are adequately met.
- Listen to the person and make them feel comfortable.
- Deal with different situations in a calm and positive way.

6. Care guidelines according to the different disability profiles

6.1. Blind or Visually Impaired Persons (Low Vision)

Difficulties that people with Visual Impairment may face

There are varying degrees of blindness. Not all people with vision loss are completely blind.

More specifically, blind people are those who see nothing at all or have only a slight perception of light (they may be able to distinguish between light and dark, but not the shape of objects).

On the other hand, visually impaired people are those who, with the best possible correction, could see or distinguish, albeit with great difficulty, some objects at a very short distance. In the best of conditions, some of them can read print when it is of sufficient size and clarity, but generally more slowly, with considerable effort and using specific support products.

In this case, it could be considered as an **invisible disability** for the rest of society, since these people with low vision can perform most actions without difficulty depending on the circumstances, and may not even use a white cane or need the support of a guide dog. However, it is necessary to take into account that this visual deficit may restrict the person's ability to read signs or any kind of written information, locate landmarks or anticipate dangerous situations.

Given that, to a large extent, the built environment, including public roads, buildings, means of transport, etc., as well as the majority of products and services offered by society, have been designed with people with a visual capacity within the normal range in mind, blind or visually impaired people can have serious difficulties in finding their way around unfamiliar environments.

Guidelines for the Care of People with Visual Impairment

Each person is unique, therefore, their visual impairment should be considered as just another characteristic or condition of that person.

In addition, individual differences in degree of visual impairment, personal aptitudes, level of autonomy, etc., mean that each person has different levels of autonomy.

- Always ask if help is needed; never assume that a person who is blind or visually impaired needs help. If you ask for support, ask how best to help.
- Speak directly to the person and **identify yourself** by name.
- Speak in a normal tone, slowly and clearly. Do not shout or raise your voice; visually impaired people can usually hear perfectly well.
- In noisy environments, it may be necessary to repeat information. When doing so, ask for confirmation that the person has heard and understood you.
- Do not replace verbal language with gestures, as these, in many cases, will not be perceived by the other person.
- Be specific and precise in conveying your message, so as not to confuse or overload with unnecessary information.
- Do not use vague words such as "here", "there", "this", "that", etc., as they are usually accompanied by gestures that are not likely to be interpreted by the person. In these situations, it is preferable to use more orientative terms such as "to the left of the table", "to your right", "in front of the door", "behind you".
- Sometimes it can also be helpful to lead the person's hand to an object and tell them what it is.
- Use the words "see", "look", etc. normally. You should not consider them as taboo terms, as people with blindness and/or visual impairment themselves normally use them in their conversations.
- Be **clear and precise when giving instructions**; inform the person of any circumstances that need to be taken into account, for example, the number of stairs going up or down.
- Pause when approaching an obstacle, such as stairs or doors, so that the person is aware of the location and characteristics of these items.

- When we want to warn of danger, we should avoid the use of exclamations that can provoke anxiety, such as "ouch!", or "watch out!" (e.g., an open door, an obstacle in the road, etc.). It is preferable to use a more concrete and explicit exclamation, such as "stop!", or "stop!", in order to prevent him from moving forward and then verbally explain the dangerous situation and help him to avoid it.
- **If you must be absent,** tell the person. This avoids the stress associated with not receiving ongoing assistance and not knowing when you will resume.
- Indicate if other people are present.
- When assisting a person with a guide dog, do not interact or talk to the dog; never pet, feed, or give instructions, the dog is working and should not be distracted.
- If you are being **offered a seat,** gently place your hand on the back or armrest of the chair; this will help you locate and use the seat.

When you are handling money, tell them in detail when you count the money you have given or are giving back to them.

Ask if he/she needs help reading and/or completing documents, forms, etc. For example, it is considered good practice to guide the person's hand to the space for signing a document.

In addition to the above, to prevent possible accidents such as, for example, hitting objects that, due to their unusual location or situation, or because they are unexpected, can become dangerous obstacles, it is advisable to follow the following recommendations:

- Doors and windows must be fully open or fully closed.
- Chairs should be placed under the tables or against the wall.
- Cabinet doors should also be closed, as should drawers.

Using the Seer Guidance Technique

The guide technique is a code of body signals, supported by verbal indications, which allows the blind or visually impaired person to move safely and efficiently, accompanied by a sighted person, in different environments and under different conditions.

Position of the person guiding

The person acting as a guide should have a relaxed posture while walking. Always stand in front of the visually impaired person, approximately half a step, to allow them to hold on to our arm; the indication for the person to hold on can be verbal or non-verbal, we will simply have to touch their arm with the back of our hand.

Arm position

Both the guide and the visually impaired person should bring the arm close to the body to transmit and receive the information properly.

Hold on to the guide

The visually impaired person will grasp the guide's arm just above the elbow, placing the thumb on the inner side of the guide's arm while the other four fingers are closed on the outer side. **The grip should be firm enough to maintain contact, but should not be uncomfortable for the guide.**

Some visually impaired people prefer to walk without holding on to the guide, in any case, we must go ahead, as our movements will serve as a reference to identify the characteristics of the environment.

To be avoided and corrected if necessary

- Incorrect hand position
- The wrist of the visually impaired person should not be turned with respect to the arm.
- Excessive stretching of the arm
- Separate the arm from the body

Walking in guide technique

The guide should normally stand on the opposite side of the visually impaired person if using a white cane.

Under no circumstances should the white cane or clothing be used to guide the person, nor should it be pushed from behind.

When walking while guiding a visually impaired person, he/she will be half a step behind the guide in order to be able to react appropriately to the information transmitted to him/her.

The person guiding should adapt their pace to the characteristics of the person being guided and the environment in which they are moving, so that they walk comfortably and safely.

While walking, the guide can comment on the singularities of the environment through which they are moving, trying not to saturate them with an excess of information.

Variations of the guiding technique with certain persons

If the person we are accompanying is taller than us, he/she will probably prefer to **lean on our shoul-der.** In this case, we will verbally indicate the passage through doors or narrow areas. If the person is **shorter** than us, it may be more comfortable for them to hold **on to our wrist.** In the case of visually impaired children, it is preferable to hold their hand.

People with balance problems, or elderly people, will often feel more secure if they lean on our arm. In this case, our arm should be bent at an angle of approximately 90°) to allow them a better grip.

If a person **is accompanied by a guide dog**, we must first ask him if he wants to hold on to us or if he prefers to give the order to the dog to follow us. If they want to hold on to us, we must take into account that we must offer them our left arm, as the dog usually goes to their left.

Passage through narrow places or doorways

The person guiding should place the person's arm behind them, approximately in the middle of their back, to indicate in a non-verbal way that we are going to pass through a narrow place such as a doorway.

The visually impaired person should extend the arm holding the guide to stand directly behind him/her.

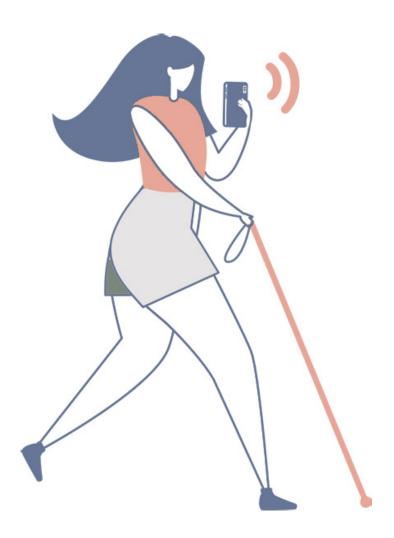
Once past the door or narrowing, the guide will return his or her arm to the normal position, indicating to the visually impaired person that he or she can now return to the normal position to continue walking.

If the visually impaired person is not familiar with this procedure, it may be necessary to verbally instruct them to stand behind us.

Going up and down stairs or steps

- The guide must always approach the edge of the stairs or steps in a perpendicular direction.
- It will stop briefly before starting the ascent or descent.
- It will start the ascent or descent and will always go one step ahead of the visually impaired person.
- Once the ascent or descent has been completed, it will pause briefly before resuming normal walking, indicating that the steps have been completed. The pause will take place once we have ensured that the person has also completed the ascent or descent of the stairs.

- In general, it is not necessary to warn if the staircase is going up or down, as the person will perceive it by our movement.
- If we have to stop without having completed the entire staircase, we will verbally explain this situation to the person in order to prevent them from misinterpreting our stop as the end of the staircase.
- In the case of escalators, it is preferable that, once at the top of the stairs, we place the person's hand on the handrail, allowing him/her to go up/down the stairs. The guide should be in front if the staircase is going down, and behind if it is going up.
- In some cases, if the person has difficulty keeping their balance, or shows fear or insecurity about going up or down the stairs, we will place the person next to the handrail so that they can hold on and make them feel safer.



6.2. People who have difficulty communicating

A person who has a speech or language disability has some difficulties in communicating (e.g., a person with cerebral palsy, a person who stutters, etc.), which may be reflected in articulation, pronunciation, or fluency and delivery of the voice.

A person with a language disability may have difficulty choosing words, combining words to form sentences, or understanding their meaning.

Some people cannot speak, but have the ability to communicate by pointing to a picture or letters on a board, or by writing their message on a specific device (communication boards).



Important

Many people who have speech or language impairments do **not have a hearing loss, nor do they have an intellectual disability.**



Guidelines for the Care of People with Communication Difficulties

- Give the person time to speak without interrupting. Resist the temptation to finish their sentences for them.
- Observe and listen to how the person may use body language, the way they speak, or the use of a
 device that allows them to communicate.
- If the person has difficulty expressing their needs, give a partial summary of what they have understood and ask for confirmation of their understanding. In this way, the person can complete his or her thinking rather than having to repeat everything.
- Don't pretend to understand and don't hesitate to ask the person to repeat the message. Stay
 away from noisy areas, including those where others are talking.
- Don't shout, it doesn't help.
- Consider using pen and paper, a computer, cell phone, etc., to assist in communication if you are having difficulty understanding the person.
- If the above strategies don't help, ask questions that require only brief responses, for example, with a nod of the head. Try to offer a variety of answers to your question to elicit a "yes" or "no" response. Yes" and "no" can also be expressed by pointing to these words on a piece of paper or by pointing your thumb up or down.

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6.3. Deaf and Hard of Hearing People

Deafness refers to the loss or abnormality of an anatomical and/or physiological function of the auditory system, and has its immediate consequence in a **hearing impairment**, which implies a deficit in the access to oral language.

Depending on multiple factors, and especially on the **degree of hearing loss**, deafness can be mild or profound and directly affect the communicative and linguistic development of the person, conditioning the ability to improve more easily and more naturally all their cognitive, communicative and linguistic abilities and skills.

The main difficulties affecting this group of people are:

- Difficulty in identifying sound signals, whether warning, emergency, etc.
- Difficulties in communicating with people who do not know Sign Language, or do not know other techniques of care for the hearing impaired.
- Greater difficulties in accessing audiovisual content, conferences, sound exhibitions, etc.
- Difficulties in reading texts that use technical or difficult to understand language.

The difficulties encountered by a deaf person to cope in their daily life can be overcome by the implementation of accessible communication measures, which facilitate spatial orientation and use of the resources offered by the environment: specific products to support hearing (hearing aid, magnetic loop, etc.), personalized attention through specific services, improved signage, etc.

Guidelines for the Care of Deaf and Hard of Hearing People

Get the person's attention before you speak. A gentle tap on the shoulder is appropriate if you are close, or you can wave your hand if you are far away.

Ask what their preferred method of communication is, as not all deaf people communicate using Sign Language. In certain situations, it may be helpful to use different communication resources:







tablet



mobile phone

- **Do not shout**. Speak with a normal tone and rhythm, vocalizing, but without exaggerating our facial expression.
- Even if you are accompanied by a sign language interpreter, still speak directly to the deaf person, not to the person accompanying you.
- Maintain eye contact with the person to encourage proper lip reading.
- Eliminate visual distractions (e.g., eating, chewing, smoking, etc.).
- Rephrase what you have communicated or offer to explain things in writing if you think it will make the message easier to understand.
- Body language helps project the meaning of what you are saying, so use facial expressions and gestures when appropriate.

6.4. People who have difficulties in seeing and hearing (deafblind people)

Some deafblind people are totally deaf and blind, while others have residual auditory and/or visual perception.

In any case, the feeling of lack of communication and disconnection with the world produced by the combination of the loss of both senses, sight and hearing, is such that the deafblind person has serious difficulties in accessing information, education, professional training, work, social life and cultural activities.

In order to establish a communication process, it is of special importance the use of **TOUCH**, which becomes the most important resource in the life of a deafblind person; it is their way of substituting their eyes and ears.

When interacting with a person who is deafblind, begin by determining the best way to communicate with them. Depending on multiple factors, people who are deafblind can communicate by:



- Lip reading
- Hand spelling (alphabet spelling) or drawing letters on the palm of the hand
- Sign Language
- Supported Sign Language (hand-over-hand signing, in which the deafblind person's hands are
 placed on top of the speaker's hands to feel and read through their hands).
- Electronic devices such as mobile phones, etc.
- Other communication systems

Deafblind people, especially those with severe or complete hearing and vision loss, are **usually accompanied by another person** (family member, support person, etc.) **when carrying out daily activities**. It will be this support person who will be able to communicate and interpret our conversation with the deafblind person using the communication method that best suits them.

It is interesting to note that a person who is deafblind, but has residual vision, may choose to communicate using pencil and paper; if so, respond in the same way using simple, concise language.

Guidelines for the Care of People with Vision and Hearing Impairments

Get the person's attention before you speak. A gentle tap on the shoulder is appropriate if you are close, or you can wave your hand if you are far away.

Ask what their preferred method of communication is, as not all deaf people communicate using Sign Language. In certain situations, it may be helpful to use different communication resources:

- Get the person's attention before you start a conversation; for example, gently tap the person on the shoulder or arm.
- The next step will be to identify ourselves. Saying who we are, spelling our name or making the sign that represents our name and by which he knows us, taking his hands to do it if we are sure he is not seeing us. Vocalizing and making ourselves understood if he can hear us (try to talk to him in places that are not noisy) or making it easier for him to see us if he can see us (do not leave his field of vision and try to make him focus his gaze on our face and that there is good lighting that makes it easier for him to see us at the same time as we make our sign). Even if he knows us, we must communicate who we are to avoid confusion.
- Do not assume what the person can or cannot do. Some people who are deafblind may have residual vision and/or hearing, talk directly to the person, not to their companion.

- Ask him/her if the information he/she has given you is clear. At the beginning you may encounter some difficulties in the development of the communication process. Patience is necessary for both of us. Effectiveness in communication will increase with practice as we become more familiar with the chosen system.
- We must never forget to say goodbye. If we have to leave for a moment, we will tell him and leave him in the meantime in a comfortable and safe place. It is not advisable to leave him alone in an unfamiliar place and in any case, always making it easier for him to have tactile references of the place where he is, taking his hand to them.
- When walking with him, the correct way to carry him, is to let him take our arm; in general, he will do
 it above the elbow. This way he will be able to follow our movement better. We should never try to
 carry him in front of us. We will transmit the agreed signs to indicate to him to go up or down stairs,
 cross a door or a street, and so on.
- While we go with him, it is convenient to explain to him where we are and what is going on around
 us. If we see something that seems interesting and that he can touch, we should not hesitate to
 show it to him.
- Offer assistance if the person seems to have difficulty locating a particular place (e.g., a meeting room, location of toilets, etc.).
- In EMERGENCY situations, in order to warn a Deafblind person in this situation, a sign has been agreed upon where you draw with your index and middle fingers together a large X on your back (this is the universal emergency sign), and move the person away from the dangerous situation.



Important

Many people who have speech or language impairments do not have a hearing loss, nor do they have an intellectual disability.

6.5. People who have a specific disability and who may need circumstantial support

Some disabilities are characterized by causing functional limitations at specific times and situations, for example, people who have multiple sclerosis, people with fibromyalgia, people who have seizure disorders (epilepsy), etc., which can lead to situations that fluctuate temporarily.

Because of this, some people with these disability profiles may not always need support, or at least not always the same level of assistance in all circumstances.

Care Guidelines

- Eliminate prejudices.
- Do not make assumptions about the nature or severity of functional limitations the person may experience based on past experiences.
- Make an individual assessment of their needs.
 Not all people with the same disability experience the same type or severity of functional limitations.
- Ask the person what specific help he or she needs in order to provide the most appropriate assistance.



6.6. People who have a Mental Health Disorder

A mental health disorder is an alteration of cognitive and affective (emotional) processes considered normal with respect to the social reference group from which the individual comes.

A mental health disorder is an alteration of cognitive and affective (emotional) processes considered normal with respect to the social reference group from which the individual comes.

This alteration manifests itself in disorders of reasoning, behaviour, the ability to recognise reality and to adapt to certain conditions of life.

A person is considered to have a disability associated with a mental health disorder when it becomes permanent.

People who have a disability associated with a mental health disorder often face **stigma**, **discrimination and lack of understanding of their disability**.



Although there are many different forms of disability associated with mental health, with different characteristics and symptomatology, the vast majority are invisible and will not be evident unless the person discloses it.

Disability associated with mental health is often episodic; therefore, needs may vary from day to day, from individual to individual, and specific support may well be needed to prevent and/or manage triggers for episodes.

Guidelines for the Care of Persons with a Disability Associated with a Mental Health Disorder

- Eliminate prejudices and unfounded fears.
- Avoid situations of stress and temporary urgency (arguments, criticism, etc.).
- Adopt an understanding and patient attitude.
- Use a normal volume and tone of voice.
- During the communication process, apply positive verbal reinforcement.
- Be aware of the person's possible limitations in maintaining orderly reasoning.
- If communication is not smooth, use simple and concise language.
- If you give instructions, make them concrete. If necessary, repeat them without showing displeasure, at a slow pace.
- Ask if he or she prefers to communicate in writing: it helps structure thinking and serves as a reminder of important information.
- Eliminate an excess of perceptual stimuli (mixture of sounds, signals, smells, etc.). When communicating, it is recommended to choose a location in areas where the possibilities of distraction are limited without isolating the person.
- It is important to know that some people who have a disability associated with a mental health
 condition may be accompanied by a person or an animal (e.g., an assistance dog, or an emotional
 support animal) who provides assistance related to their disability. In any case, as a matter of respect, we will always address the person and not the person's companion.

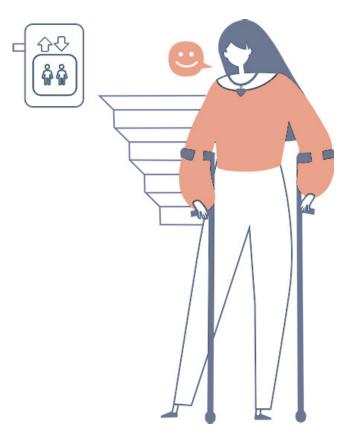
6.7. People with mobility difficulties

Within the profile of physical disability, there are people who manifest difficulties associated with lack of mobility, even presenting difficulties in the use, limited or none, of their upper limbs.

Specifically, people with disabilities whose mobility is affected, occasionally or permanently, use different walking aids such as canes, crutches, walkers or other walking aids.

The main difficulties affecting this group of people are:

- Risk of falling due to the characteristics of the environment
- Difficulties overcoming unevenness and/or stairs.
- Difficulty completing long journeys without a break
- Difficulty in getting through narrow spaces
- Difficulty in operating mechanisms that require the use of both hands at the same time.



Other people, temporarily or permanently, need a wheelchair (manual or electric) to carry out their daily activities.

The main difficulties affecting this group of people are:

- Inability to negotiate stairs and steep slopes
- Rollover hazard on uneven terrain
- Impossibility or great difficulty to overcome sections with significant slopes, whether longitudinal or transverse.
- Difficulties caused by the lack of sufficient space, which does not allow turning manoeuvres, opening and closing doors, moving around in narrow places, etc.

Guidelines for the Care of People with Mobility Difficulties

Wheelchair users, or people who have limited mobility and use other mobility aids, have different capacities and abilities depending on multiple factors: some can use their hands and arms to a greater or lesser extent; others can get up from their own wheelchair with greater or lesser autonomy, and even walk short distances, etc.

As a general consideration, we must once again stress **that we must treat each person and their needs individually,** trying not to build a prejudice based solely on the stereotype of disability and the assumption of what these people will or will not be able to do on their own.

Specifically, the following guidelines are recommended:

- When starting the conversation, we should adopt a sufficient distance, of at least one metre, so
 that the wheelchair user can maintain a relaxed and comfortable visual position, without having to
 force an excessive and continuous inclination of the head; if the conversation is going to last for a
 long time, it is advisable to take a seat and position ourselves at the same level as the wheelchair
 user.
- Do not push or touch the wheelchair, as it is part of your **personal space**; it is preferable to ask before doing so. For example, if you are about to help a wheelchair user down a curb without waiting for instructions, you may pull them out of the chair.
- Some wheelchairs can be folded, folding handles, sides and even footrests, however, it is always best to ask the user before making the manipulation of any of these elements.
- Always keep doorways, doorways and walking spaces clear of obstacles. Any poorly placed element could become a barrier that will reduce the person's autonomy.
- Be aware of the limits of the person's reach. In order to facilitate this, place as many items as possible within reach. As far as possible, access to and use of existing furniture (shelves, displays, vending machines, etc.) should be ensured.
- If the furniture does not meet the conditions for proper use (for example, a counter that is too high
 and prevents a wheelchair user from being able to see his or her interlocutor comfortably), it is
 advisable to adapt the situation to provide better service, even leaving the counter so that there is
 no interference in communication.

- Adapt the existing signage in the environment, indicating which are the accessible ways to access
 or wander in it. In addition, it has to inform about the points of interest that should be taken into
 account by users, also contemplating the needs of people who use canes or crutches; in this sense, it is important to highlight that the signage has to be shown in accessible formats and facilitate
 the location of the existing vertical communication elements: stairs, lifts, elevator platforms, stair
 lift chairs, etc.
- People who use canes or crutches need their arms for balance, and for this reason, it is preferable that we do not grab them. Emphasize again the idea that we should always ask before offering our help.
- If we want to offer a seat to a person with reduced mobility, we recommend the use of chairs with armrests, a backrest and a higher seat (preferably adjustable in height).
- In order to avoid the risk of falls, it is important to place visible warning signs when the floor is wet, scrubbed, or when the days are very rainy. It is also recommended to place fitted mats, which help to keep the surface dry and prevent tripping.
- Some people who do not have a visible disability may also have mobility needs. For example, a
 person with a respiratory or heart condition may have trouble walking long distances or at
 a high pace. In this regard, it is important to implement signposted rest areas (benches, chairs,
 etc.) so that these people can sit down and rest when they need to.
- Some people have limited use of their arms, hands or wrists, in which case we must be prepared to offer our support to reach, grasp or move objects, open doors, manipulate vending machines and other equipment, etc.

6.8. People who have an intellectual disability

Intellectual disability implies a series of limitations in the skills that the person learns to function in daily life and that allow him/her to respond to different situations and places.

Intellectual disability is expressed in the relationship with the environment. Therefore, it depends as much on the person himself as on the barriers or obstacles around him. If we achieve an easier and more accessible environment, people with intellectual disabilities will have fewer difficulties, and therefore, their disability will seem less.

People who have an intellectual disability often rely on routine and familiarity to manage their tasks at work and in daily life.

A change in the environment, or in a routine, may require some attention and a period of adjustment.

It is important to note that:

- Intellectual disability is not a mental illness.
- Like any other person expressing his or her individual identity, a person who has an intellectual disability will have unique and particular abilities, likes, dreams and needs.



 A person with an intellectual disability will have a chance to make progress if we provide the right supports.

Guidelines for the Care of Persons with a Disability Associated with a Mental Health Disorder

- Speak directly to the person and respect their preferences, choices or decisions.
- **Do not infantilize.** Always treat an adult as an adult.
- When initiating a conversation, if you are in a place where there is a lot of noise and/or distractions, it is recommended that you move to a quieter or more private place.
- Be aware of the need to speak using clear and concrete language, with short sentences that are easier to understand. Speak clearly, at a slow pace and vocalize appropriately.
 - Repeat the information and, if necessary, ask questions to confirm your understanding. Questions
- should be asked in a neutral manner to obtain accurate information.
 - Communicate concrete messages, you can use visual aids or signs to facilitate the understanding
- of the message.
 - It can be very helpful to offer our assistance in completing forms or communicating written ins-
- tructions, always providing additional time for decision making.

- Wait for the person to accept our offer of help; don't be "overly supportive" or condescending.
- **Be patient, flexible and understanding**. Take the time to understand the person and make sure the person understands you.





Disability in the workplace

Everyone's responsibility

