# Disability Etiquette



# *Tips for Interacting with Individuals with Disabilities*

## A publication of St. Mary's County Commission for People with Disabilities



**Commissioners of St. Mary's County** James R. Guy, President, Michael L. Hewitt, Tom Jarboe, Todd B. Morgan, John E. O'Connor **ST. MARY'S COUNTY GOVERNMENT** COMMISSION FOR PEOPLE WITH DISABILITIES



#### **COMMISSIONERS OF ST. MARY'S COUNTY**

James R. Guy, President Michael L. Hewitt, Commissioner Tom Jarboe, Commissioner Todd B. Morgan, Commissioner John E. O'Connor, Commissioner

Dear Reader,

This Disability Etiquette Handbook has been prepared by the St. Mary's County Commission for People with Disabilities (COPD). The Commission provides the Commissioners of St. Mary's County advice and assistance in the content and administration of compliance measures with regard to the Americans with Disabilities Act, and increases acceptance, awareness and full participation in all aspects of county life as well as the quality of life for persons with disabilities.

The responsibilities of the Commission include:

- Assuring local government compliance with the Americans with Disabilities Act and all other federal and state laws and regulations.
- Developing a program of public education to improve attitudes toward persons with disabilities.
- Serving as an official advocate for the disabled to expand educational and employment opportunities; to address housing and transportation needs; to expand participation in recreational, social, religious and cultural activities; and to eliminate barriers at public buildings.

The Commission has developed this handbook to offer basic knowledge of proper and acceptable etiquette when interacting with individuals with disabilities. Our hope is to remove communication barriers and promote understanding and acceptance of individuals with disabilities throughout our community.

Anyone interested in obtaining more information on the Commission, becoming a member, attending a meeting or submitting an award nomination should visit <a href="http://www.stmarysmd.com/voluntr/CommissionforPeoplewithDisabilities.asp">http://www.stmarysmd.com/voluntr/CommissionforPeoplewithDisabilities.asp</a>

#### Duplication of the materials contained within this handbook is encouraged with proper acknowledgement given to the St. Mary's County Commission for People with Disabilities.

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## Introduction

One in five Americans has a disability. There is a good chance that you interact everyday, perhaps without even knowing it, with somebody who has a disability. Sometimes people are uncomfortable around people with disabilities because they don't know how to act or what to say. Fear of the unknown and lack of knowledge about how to act can lead to uneasiness when meeting a person who has a disability. This booklet is for anyone—with or without a disability—who wants to interact more effectively with people with disabilities. It is a straightforward orientation to the basic rules of etiquette and language that can lay the foundation for respectful and courteous interaction with people with disabilities.

The Americans with Disabilities Act (ADA) of 1990 was conceived with the goal of integrating people with disabilities into all aspects of American life, particularly the workplace and the marketplace. Sensitivity toward people with disabilities is not only in the spirit of the ADA, it makes good community and business sense.

Practicing disability etiquette is an easy way to make people with disabilities feel welcome. You don't have to feel awkward when dealing with a person who has a disability. This booklet provides some basic tips for you to follow. And if you are ever unsure about what to do or say with a person who has a disability, just ask!

In United States:	In Maryland:	In St Mary's County:
12.4% (over 38.6 million)	10.5% (610,989)	10.5% (11,186)
have a disability	have a disability	have a disability
4.1% (3 million)	3.7% (50,420)	3.2% (870)
are under the age of 18	are under the age of 18	are under the age of 18
10.3% (19.9 million)	8.4% (312,042)	9.5% (6,431)
are between the ages of 16-64	are between the ages of 16-64	are between the ages of 16-64
36% (15.6 million)	32.4% (248,527)	32.6% (3,885)
are 65 and over.	are 65 and over.	are 65 and over.

## DID YOU KNOW ?

ata based on the 2015 American Community Survey a division of the US Censu http://www.census.gov/acs/www/

## **General Information**

## **Attitude and Approach**

As you meet people with various physical disabilities, you may be apprehensive about how you should behave towards that individual. Every person is different and some will find it easy to work and socialize with such individuals, whereas others will find it difficult adjusting. Always remember that a person with a disability is a person. He or she is like anyone else, except for the special limitations of their disability. People with disabilities prefer that you focus on their **abilities** not their disabilities. Appreciate the person first. Attitudes and behaviors are the most difficult barriers for people with disabilities to overcome.

## Honesty

If you do not understand someone because they have difficulty with their speech, or they use some form of communication aid, please do not assume that they do not understand. If you have difficulty understanding them, then admit it, and try to get someone to translate for you. People in such situations will not get upset if you are honest, and in time, you will learn to understand what they are saying.

## **Hidden Disabilities**

Not all disabilities are apparent. A person may have trouble following a conversation, may not respond when you call or wave, or may say or do something that seems inappropriate. The person may have a hidden disability, such as low vision, a seizure disorder, hearing loss, a learning disability, a head injury, mental illness, or a health condition. These are just a few of the many different types of hidden disabilities. Don't make assumptions about the person or the disability. Be open-minded.

## How to Help

- Introduce yourself and offer assistance.
- Don't be offended if your help is not needed.
- Ask how you can help and listen for instructions.



- Be courteous, but NOT condescending.
- Assist individuals with disabilities when necessary or requested, but do not discourage their active participation.
- Allow a person DIGNITY to do what he or she wants to do for him or herself.

## **Be Yourself**

Treat people with disabilities with the same respect and consideration that you have for everyone else. Treat the person as an individual, not as a disability. Don't assume that "disability" is all that person can talk about or is interested in. Find a topic of small talk the way you would with anyone. Use a normal voice when extending a verbal welcome. Do not raise your voice unless requested. As in any new situation, everyone will be more comfortable if you relax.

## **Terminology Tips**

People with disabilities are not conditions or diseases. They are individual human beings. For example, a person is not an epileptic but rather a person who has epilepsy.

First and foremost, they are people. Only secondarily do they have one or more disabling conditions. Hence, they prefer to be referred to in print or broadcast media as **People with Disabilities.** 

Make reference to the person first, then the disability, i.e., "a person with a disability" rather than a "disabled person." However, the latter is acceptable in the interest of conserving print space or saving announcing time. Use an adjective as a description, not a category or priority, i.e., "the architect in the wheelchair" rather than "the wheelchair architect."

In any story, article, announcement or advertisement, "people with disabilities" should be used either exclusively or, at a minimum, as the initial reference. Subsequent references can use the terms "person with a disability" or "individuals with disabilities" for grammatical or narrative reasons. In conclusion, the appropriate and preferred initial reference is "people with disabilities."

## Things to Remember



- Treat people as you would like to be treated yourself.
- Do not show pity for a person in a wheelchair. It makes them feel demoralized.
- People with disabilities are NOT alike and have a wide variety of skills and personalities. We are all individuals.
- Most people with disabilities are not sick, incompetent, dependent, unintelligent or contagious.
- Emphasize the person, not the disability
- Treat adults as adults. Don't patronize or *talk down to* people with disabilities.
- Be patient and give your undivided attention, especially with someone who speaks slowly or with great effort.
- People are not conditions so don't label them with the name of the condition or as part of a disability group. We don't say "the cancerous," nor should we say "the blind."
- Remember, most people with disabilities do want to serve as well as be served and enjoy assisting others.
- Be considerate of the extra time it may take a person with a disability to get some things done.
- Be aware that there are many people with hidden disabilities that are not apparent. Just because you cannot see a disability does not mean it doesn't exist.

## Barriers to community inclusion for individuals with disabilities

Action: Think on these – how might you see them in yourself and society around you, and what can you do to help overcome them?



<u>Attitudinal</u>- barriers have been defined as a way of thinking or feeling resulting in behavior that limits the potential of people with disabilities. Often it is not the disability, but rather the attitudes of the general public and those providing recreation services (public or private) that limit activities of people with disabilities.

#### What are Attitudinal Barriers?

\* Avoidance \* Fear \*Stereotyping \*Discrimination \*Insensitivity \* Discomfort

<u>Programmatic</u> accessibility can be achieved by a number of methods. Providing communication aides such as assistive listening devices, TTY's, and sign language interpreters, support staff, adapted equipment, and making registration available by phone, or providing services at an alternative accessible site are all methods of programmatic access.

## What are Programmatic Barriers?

\*Communication barriers \*Programs in inaccessible buildings \*Registration not available by phone \*Visiting field trip sites that are inaccessible \* Activities that fail to utilize all senses \*Information not available in different formats

<u>Architectural-</u> Physical accessibility is a critical issue in providing services/programs for individuals with disabilities, especially those with mobility impairments (i.e. uses of wheelchairs, walkers, canes, etc.) In offering a physical program/service, be aware of physical barriers that may create a barrier to participation in a program.



## What are Architectural Barriers?

\*Curbs \*Stairs \*Narrow Doorways \*Heavy Doors \*Parking \*Counters, shelves, water fountains, and telephones that are too high

## Person First Language

The following words have strong negative connotations: Do Not Use:	The following words are more affirmative attitude: <u>Words with Dig</u>	
<ul> <li>handicap</li> <li>the handicapped</li> <li>crippled with</li> <li>victim</li> <li>spastic</li> <li>patient (except in hospital)</li> <li>invalid</li> <li>paralytic</li> <li>stricken with</li> <li>Retard/Retarded</li> </ul>	<ul> <li>physically disabled</li> <li>person with a disability</li> <li>person who has multiple sclerosis</li> <li>person who has muscular dystrophy</li> <li>paraplegic (person with limited or no use of lower limbs)</li> <li>quadriplegic (person with limited or no use of all four limbs</li> <li>person who has cerebral palsy</li> </ul>	<ul> <li>person who had polio</li> <li>person with mental disability</li> <li>person who is blind</li> <li>person who has a speech impairment</li> <li>person with a learning disability</li> <li>person with special needs</li> <li>person with an intellectual disability</li> </ul>
<ul> <li>birth defect</li> <li>inflicted</li> <li>afflicted/afflicted by</li> <li>deformed/deformed by</li> <li>incapacitated</li> <li>poor</li> <li>unfortunate</li> </ul> Do Not Use: <ul> <li>deaf and dumb</li> <li>deaf mute</li> </ul>	<ul> <li>caused by ""</li> <li>disabled since birth</li> <li>born with ""</li> </ul> <u>Words with Dignity:</u> <ul> <li>deaf person</li> <li>pre-lingually (deaf at birth) deaf</li> <li>post-lingually (deaf after birth) deaf</li> </ul>	People First Language - It's all about respect and dignity, not political correctness!

	<ul> <li>deaf/profoundly deaf (no hearing capability)</li> <li>hearing-impaired (some hearing capability)</li> </ul>
<ul> <li>confined to a wheelchair</li> <li>restricted to a wheelchair</li> <li>wheelchair bound</li> </ul>	<ul> <li>person in a wheelchair</li> <li>person who uses a wheelchair</li> <li>person who walks with crutches</li> <li>Explanation: Crutches, walkers, and wheelchairs are mobility aids. Without the use of these mobility aids, the person is restricted from participation in their community.</li> </ul>
normal (accontable only for quoting	Non-disabled (referring to non-disabled persons as normal insiguates that
normal (acceptable only for quoting statistics)	Non-disabled (referring to non-disabled persons as normal insinuates that disabled persons are abnormal)

## Some general rules that work in most situations:

Use possessive language to refer to disabilities. Use the word has instead of the word is. Jenny has autism, rather than Jenny is autistic. Phrasing the sentence using "has" makes autism just one thing -- among many -- that Jenny has. Jenny also has brown eyes and curly hair. She also has a Powerpuff girls backpack. Oh -- and, she has autism.

Use possessive language to refer to assistive technology. Use the word has or uses rather that is confined to. Matt uses a wheelchair to get around, rather than Matt is confined to a wheelchair. Matt uses augmentative communication to speak, rather than Matt can't talk. In both cases, the pieces of equipment are viewed respectfully as something Matt uses to accomplish everyday tasks.

*Things cannot be "handicapped."* Parking spaces, restrooms, etc., are designed to be *accessible* for persons who have disabilities. They are not "handicapped" in and of themselves. Refer to them as accessible parking spaces, or accessible restrooms. They could also be parking spaces reserved for persons with disabilities.

Above all, *put yourself in the place of the person about whom you are speaking*. If your main challenge in life is that you are tone-deaf, would you want *everyone* to refer to you as "the singing-impaired person, who is very nice in lots of ways"?

Adapted from Disability is Natural http://www.disabilityisnatural.com/

Attitudes are the <u>Real</u> Disability

## **Top Ten Rules for Communicating with People with Disabilities**

- 1. When talking with a person with a disability, speak directly to that person rather than through a companion or sign language interpreter.
- 2. When introduced to a person with a disability, it is appropriate to offer to shake hands. People with limited hand use or who wear an artificial limb can usually shake hands. For those who cannot shake hands, touch the person on the shoulder or arm to welcome and acknowledge their presence.
- 3. When meeting a person with a visual impairment, always identify yourself and others who may be with you.
- 4. If you offer assistance, wait until the offer is accepted. Then listen to or ask for instructions.
- 5. Treat adults as adults. Address people who have disabilities by their first names only when extending that same familiarity to all others present.
- 6. Leaning or hanging on a person's wheelchair is similar to leaning or hanging on a person and is generally considered annoying.
- Listen attentively when you're talking with a person who has difficulty speaking. Be patient and wait for the person to finish, rather than correcting or speaking for the person.
- 8. When speaking with a person in a wheelchair, place yourself at eye level in front of the person to facilitate the conversation.
- 9. To get the attention of a person who is hearing impaired, tap the person on the shoulder or wave your hand. Look directly at the person and speak clearly, slowly and expressively to establish if the person can read your lips.
- 10. Relax. Don't be embarrassed if you happen to use accepted, common expressions, such as, "See you later," or "Did you hear about this" that seem to relate to the person's disability. Anyone can make mistakes. Offer an apology if you forget some courtesy. Keep a sense of humor and a willingness to communicate.

## General Rules of Etiquette for Communicating with Persons with Specific Disabilities

#### **Hearing Impairments**



- Let the person take the lead in establishing the communication mode, such as lipreading, sign language, or writing notes.
- Face the person when you are speaking.
- Don't chew gum, smoke, bite a pencil, or cover your mouth while talking it makes speech difficult to understand!
- Rephrase sentences or substitute words rather than repeat yourself again and again.
- Speak clearly and at a normal voice level.
- Communicate in writing, if necessary.
- Move away from noisy areas or the source of noise loud air conditioning, loud music, TV and radio.
- Don't stand with bright light (window, sun) behind you glare makes it difficult to see your face.
- Get the hearing-impaired person's attention and face in full view before talking.
- Remember although some deaf people can express themselves (speak) very well; they still cannot hear (receive) what you are saying.
- American Sign Language (ASL) is the first language of many, but not all deaf people. There are other forms used in America and many other countries have their own form.
- Tip for using interpreters... the deaf must be able to comfortably see the interpreters' hands and face, any visual aids as well as the speaker, and speaker pauses for note taking is very helpful.

## Visual Impairments

- When greeting the person, identify yourself and introduce others who may be present.
- Be descriptive. You may have to help orient people with visual impairments and let them know what's coming up. If they are walking, tell them if they have to step up or step down, let them know if the door is to their right or left, and warn them of possible hazards.
- You don't have to speak loudly to people with visual impairments. Most of them can hear just fine.
- Offer to read written information for a person with a visual impairment, when appropriate.
- If you are asked to guide a person with a visual impairment, offer your arm instead of grabbing hers.
- Don't leave the person without excusing yourself first.
- Don't pet or distract a guide dog. The dog is responsible for its owner's safety and is always working. It is not a pet.



## **Speech Impairments**

- Listen patiently. Don't complete sentences for the person unless he looks to you for help.
- Don't pretend you understand what a person with a speech disability says just to be polite.
- Ask the person to write down a word if you're not sure what she is saying.
- Be prepared for various devices or techniques used to enhance or augment speech.
   Don't be afraid to communicate with someone who uses an alphabet board or a computer with synthesized speech.

## **Mobility Impairments**



- Try sitting or crouching down to the approximate height of people in wheelchairs or scooters when you talk to them.
- Don't lean on a person's wheelchair unless you have his permission - it's his personal space.
- Be aware of what is accessible and not accessible to people in wheelchairs.
- Give a push only when asked.

## **Cognitive Disability**

- Use very clear, specific language.
- Be patient. Allow the person time to tell or show you what he or she wants.
- Condense lengthy directions into steps.
- Use short, concise instructions.
- Present verbal information at a relatively slow pace, with appropriate pauses for processing time and with repetition if necessary.
- Provide cues to help with transitions (e.g. "In five minutes we<sup>1</sup>II be going to lunch.")
- Reinforce information with pictures or other visual images.
- Use modeling, rehearsing, and role-playing.
- Use concrete rather than abstract language.
- Limit the use of sarcasm or subtle humor.
- If you are not sure what to do or say, just ask the person what he/she needs.

Becoming aware of our own perceptions, stereotypes and discomforts around particular disabilities is the first step towards addressing subtle biases that could possibly be projected onto individuals with disabilities. Our own beliefs and comfort level around disability has a major impact on how we view, interact and provide service and programs to individuals with disabilities.



## Wheelchair Etiquette

As written by Disability Awareness, The Rehabilitation Center Ottawa Ontario - (613)739-5324

- Always ask the person using the wheelchair if he or she would like assistance BEFORE you help. It may not be needed or wanted.
- Don't hang or lean on a person's wheelchair because it is part of that person's personal body space.
- Speak directly to the person in the wheelchair, not to someone nearby as if the person in the wheelchair did not exist.
- If conversation lasts more than a few minutes, consider sitting down or kneeling to get yourself on the same level.
- Don't demand or patronize the person by patting them on the head.
- Give clear directions, including distance, weather conditions and physical obstacles that may hinder the person's travel.
- Don't classify persons who use wheelchairs as sick. Wheelchairs are used for a variety of non-contagious disabilities.
- When a person using a wheelchair "transfers" out of the wheelchair to a chair, toilet, car or bed, do not move the wheelchair out of reaching distance.
- Be aware of the person's capabilities. Some users can walk with aid and use wheelchairs to save energy and move quickly.
- It is okay to use terms like "running along" when speaking to a person who uses a wheelchair. The person is likely to express things the same way.
- Don't discourage children from asking questions about the wheelchair.
- Don't assume that using a wheelchair is in itself a tragedy. It is a means of freedom that allows the person to move about independently.

## Adaptive/Assistive Technologies

There have been some remarkable strides over the past years in adaptive technology for people with disabilities, such as cell phones and tablets that can be used for diabetes maintenance or for monitoring pace makers and seizures. Remember that these are important tools to the person, not toys to grab or intentional distractions.

## A person with disabilities has a wide variety of tools available to them to help them live their life.

Some examples are:

- People with physical disabilities that affect movement can use mobility aids, such as wheelchairs, scooters, walkers, canes, crutches, prosthetic devices, and orthotic devices, to enhance their mobility.
- Cognitive assistance, including computer or electrical assistive devices, can help people function following brain injury.
- Computer software and hardware, such as voice recognition programs, screen readers, and screen enlargement applications, help people with mobility and sensory impairments use computer technology.
- In the classroom and elsewhere, assistive devices, such as automatic page-turners, book holders, and adapted pencil grips, allow learners with disabilities to participate in educational activities.
- Closed captioning allows people with hearing impairments to enjoy movies and television programs.
- Adaptive switches make it possible for a child with limited motor skills to play with toys and games.
- Many types of devices help people with disabilities perform such tasks as cooking, dressing, and grooming. Kitchen implements are available with large, cushioned grips to help people with weakness or arthritis in their hands. Medication dispensers with alarms can help people remember to take their medicine on time.

https://www.nichd.nih.gov/health/topics/rehabtech/conditioninfo/Pages/device.aspx

## **Service Animals**



## Background

Over 12,000 people with disabilities use the aid of service animals. Although the most familiar types of service animals are guide dogs used by people who are blind, service animals are assisting persons who have other disabilities as well. Many disabling conditions are invisible. Therefore, every person who is accompanied by a service animal may or may not "look" disabled. A service animal is NOT required to have any special certification.

#### What is a Service Animal?

A service animal is **NOT** a pet!

Do **NOT** ask to pet a service animal!

## From the 2010 Revised Americans with Disabilities Act Guidelines

The rule defines "service animal" as a dog that has been individually trained to do work or perform tasks for the benefit of an individual with a disability. The rule states that other animals, whether wild or domestic, do not qualify as service animals. Dogs that are not trained to perform tasks that mitigate the effects of a disability, including dogs that are used purely for emotional support, are not service animals. The final rule also clarifies that individuals with mental disabilities who use service animals that are trained to perform a specific task are protected by the ADA. The rule permits the use of trained miniature horses as alternatives to dogs, subject to certain limitations. To allow flexibility in situations where using a horse would not be appropriate, the final rule does not include miniature horses in the definition of "service animal."

## Service Dog Etiquette

- Do not touch the Service Animal, or the person it assists, without permission. It is better to not ask to pet a service animal.
- Do not make noises at the Service Animal, it may distract the animal from doing its job.
- Do not feed the Service Animal, it may disrupt his/her schedule.
- Do not be offended if the person does not feel like discussing his/her disability or the assistance the Service Animal provides. Not everyone wants to be a walking-talking "show and tell" exhibit.

## **PTSD**

In the past, Post-Traumatic Stress Disorder (PTSD) was often undiagnosed and misunderstood. In today's world, there is a much greater understanding and more effective treatment strategies for PTSD. While it is commonly associated with Soldiers returning from war, it is now understood that anyone who has undergone a traumatic event can suffer from PTSD, including women and children. This can include a natural disaster, a car accident, or sexual assault.

According to the National Center for PTSD under the US Department of Veterans Affairs, four of the main symptoms of PTSD are:

- 1. Reliving the event (also called re-experiencing symptoms). You may have bad memories or nightmares. You even may feel like you're going through the event again. This is called a flashback.
- 2. Avoiding situations that remind you of the event. You may try to avoid situations or people that trigger memories of the traumatic event. You may even avoid talking or thinking about the event.
- 3. Having more negative beliefs and feelings. The way you think about yourself and others may change because of the trauma. You may feel guilt or shame. Or, you may not be interested in activities you used to enjoy. You may feel that the world is dangerous and you can't trust anyone. You might be numb, or find it hard to feel happy.
- 4. Feeling keyed up (also called hyperarousal). You may be jittery, or always alert and on the lookout for danger. Or, you may have trouble concentrating or sleeping. You might suddenly get angry or irritable, startle easily, or act in unhealthy ways (like smoking, using drugs and alcohol, or driving recklessly.

http://www.ptsd.va.gov/public/ptsd-overview/basics/what-is-ptsd.asp

## Tips for Communicating with People with Traumatic Brain Injury (TBI)

(Note: Many people who have TBI don't need any assistance.)

- Some people with TBI may have trouble concentrating or organizing their thoughts. If you are in a public area with many distractions, consider moving to a quiet or private location, and try focusing on short-term goals.
- Be prepared to repeat what you say, orally or in writing. Some people with TBI may have short-term memory deficits.
- If you are not sure whether the person understands you, offer assistance completing forms or understanding written instructions and provide extra time for decision-making. Wait for the individual to accept the offer of assistance; do not "over-assist" or be patronizing.
- Be patient, flexible and supportive. Take time to understand the individual, make sure the individual understands you and avoid interrupting the person.

## Tips for Communicating with People with PTSD

- Stress can sometimes affect a person's behavior or work performance. Do your best to minimize high pressure situations.
- People experience trauma differently and will have their own various coping and healing mechanisms, so treat each person as an individual. Ask what will make him or her most comfortable and respect his or her needs.
- Be tolerant if the person repeats his or her stories and experiences, and avoid interrupting the person.
- In a crisis, remain calm, be supportive and remember that the effects of PTSD are normal reactions to an abnormal situation. Ask how you can help the person, and find out if there is a support person you can contact (such as a family member or your company's Employee Assistance Program). If appropriate, you might ask if the person has medication that he or she needs to take.

http://www.brainlinemilitary.org/content/2012/05/tips-for-communicating-with-people-with-traumatic-brain-injury-and-post-traumatic-stress-disorder-.html

## The Five Rules of Etiquette when talking with a Wounded Veteran

- 1. **Don't show pity.** Do treat us like everyone else.
- 2. **Don't bring up PTSD.** Do ask us about our day.
- 3. Don't make grandiose promises. Do make friends.
- 4. Don't assume we're helpless. Do let us help you.
- 5. Don't ignore our caregivers. Do involve them in the conversation.

http://www.gaffneyledger.com/news/2015-07-

31/National News/The five rules of etiquette when talking with a wo.html

#### PLEASE DON'T:

Don't pity them. Don't fear or avoid them. Don't try to "fix" them. Don't judge. Don't assume you know what they are going through. Do NOT say: Aren't you over it yet? You are crazy. Just get over it. It's all in your head. Just be stronger. I have a total cure for you. At least you weren't wounded. I had that but I got over it. What you really need to do is \_\_\_\_\_ You're on your own now. Pull yourself together. It's all in the past. Suck it up. Move on.

#### PLEASE DO:

Treat them with kindness and respect. Acknowledge the depth and reality of their struggle. Encourage and support them. Try to imagine a day and night in their shoes. Accept that you will never fully understand. Invite them to explore resources together if they want. Respect their need for space. Offer to go with them to a local Vet Center, VA, doctor, or counselor. Be supportive of the loved ones. Pray for them. Listen to them. Love them. Realize that with PTSD every day is a victory.

This information is intended to provide a brief summary. Do not use it to diagnose or treat any condition. Please consult a qualified health or mental health care provider.

## For more information, resources and support visit: LOVEOURVETS www.LoveOurVets.org

## **REFERENCES & RESOURCES**

## St. Mary's County Government ADA Policy

It is the policy of the Commissioners of St. Mary's County, Maryland (CSMC) to ensure that, when viewed in their entirety, St. Mary's County Government services, programs, facilities, and communications are readily accessible and usable by qualified individuals with disabilities to the maximum extent possible. St. Mary's County Government is an equal opportunity employer, and no qualified individual with a disability shall, on the basis of disability, be subjected to discrimination in the employment, recruitment, or hiring practices of St. Mary's County Government.

In compliance with the Americans with Disabilities Act of 1990 (ADA), no qualified individual with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of St. Mary's County Government, or be subjected to discrimination in the provision of such services.

The CSMC have an ADA Coordinator to ensure the coordination of St. Mary's County's compliance with the ADA, including the investigation of any complaint alleging disabilitybased discrimination or lack of equal accessibility to county services, programs, or facilities.



http://www.stmarysmd.com/americandisabilities/resources.asp

## DEFINITIONS

The following are commonly used terms when discussing disabilities.

**Disability**: General term for a limitation; physical, mental or sensory. A disability is not necessarily a handicap which limits normal life activity.

**Non-disabled**: Person without disabilities. Don't use "normal," "able-bodied," or "healthy." People with disabilities can also be "normal," "able-bodied," or "healthy."

**Blind**: Loss of vision.

Visually Impaired: A generic term referring to all degrees of vision loss.

**Congenital or Birth Disability**: A disability which has existed since birth, but is not necessarily hereditary. Do not use "birth defect."

**Deaf**: A profound hearing loss.

Hearing Impaired: A generic term referring to any degree of hearing loss.

**Developmental Disability**: A significant mental or physical impairment which onsets before age 22 and usually requires lifelong services.

**Learning Disability**: A permanent condition which affects the way a person with average or above average intelligence learns and processes information.

**Intellectual Disability:** A condition characterized by significant limitations in both intellectual functioning and in adaptive behavior, which covers many everyday social and practical skills

**Mental Illness**: A condition caused by a neurobiological disruption in the brain. It affects mood, thoughts and appetites.

**Mental Disability**: All forms of mental illness, severe emotional disorder or mental retardation.

**Seizure**: An involuntary muscular contraction, a brief impairment or loss of consciousness as the result of a neurological condition. A **convulsion** is a seizure involving contraction of the entire body.

Small Stature: Correct term for very small people.

**Spastic**: Describes a muscle with sudden abnormal and involuntary spasms. Muscles are spastic, not people.

**Speech Disorder**: A condition where a person has limited ability to communicate through speech. **Without speech** describes someone with no verbal speech capacity. Do not use "mute."

**Spinal Cord Injury**: Permanent damage to the spinal cord. **Quadriplegia** describes substantial or total loss of function in all four limbs. **Paraplegia** refers to substantial or total loss of function in the lower part of the body.



## Common disability acronyms to know

ABA -- Applied Behavior Analysis

ADA -- Americans with Disabilities Act

<u>ADAAG</u> -- Americans with Disabilities Act Accessibility Guidelines

<u>ADHD</u> -- Attention Deficit Hyperactivity Disorder

ASD -- Autism Spectrum Disorder

ASL -- American Sign Language

AT -- Assistive Technology

**BD** -- Behavior Disorder

CP -- Cerebral Palsy

**<u>DBTAC</u>** -- Disability and Business Technical Assistance Center

DD -- Developmental Disability

**DDA** -- Developmental Disabilities Administration

**DORS** -- Division of Rehabilitation Services

ESY -- Extended School Year

ID -- Intellectual Disability

**IDEA** -- Individuals with Disabilities Education Act

**IEP** -- Individualized Education Plan

ID – Intellectual Disability

IP – Individualized Plan

**LAP** - Learning Adjustment Program

LD -- Learning Disability

**LRE** -- Least Restrictive Environment

MD -- Muscular Dystrophy

MS -- Multiple Sclerosis

<u>NAMI</u> -- National Alliance on Mental Illness

OCD -- Obsessive-Compulsive Disorder

<u>ODD</u> -- Oppositional Defiant Disorder

**<u>OT</u>** -- Occupational Therapy

PBS -- Positive Behavior Support

PT -- Physical Therapy

**<u>SAIL</u>** -- Supporting Academics and Independent Living

<u>SLP</u> -- Speech Language Pathologist

**SPED** -- Special Education

<u>SSDI</u> -- Supplemental Security Disability Insurance

TBI -- Traumatic Brain Injury

**TDD** -- Telecommunication Device for the Deaf

TT -- Text Telephone

**TTY** -- Teletypewriter

504 Plan -- Section 504 of the

Rehabilitation Act of 1973

## **COMMISSION FOR PEOPLE WITH DISABILITIES**

**AWARDS PROGRAM** The function of the awards program is to promote awareness and the outstanding efforts of individuals and organizations that improve the quality of life for persons with disabilities in St. Mary's County. Six awards will be issued annually, in July in celebration of the Signing of the Americans with Disabilities Act.

The deadline is June 1st each calendar year for submission of candidates. Any person, business or organization within St. Mary's County is eligible and may be submitted by any party. In the event no candidate is nominated, an award will not be issued. Winners of an award may be resubmitted in successive years' consideration of an award. The awards will be presented, which may consist of a certificate and proclamation at a regular Tuesday meeting of the Board of County Commissioners.

#### AWARD CATEGORIES

**Volunteer** -Candidate should demonstrate exceptional efforts on the behalf of the disabled community through volunteering time and energy.

**Notable Employer** -Candidate should demonstrate exceptional effort in advancing employment opportunities to persons with disabilities.

**Care Partner Award** -Candidate must be a direct care provider, either paid or volunteer, that advocates for and empowers individuals with disabilities, allowing for increased self-esteem and community inclusion.

**Innovative Program** -Candidate should exhibit innovative plan and its execution for inclusion of persons with disabilities in an area of community life.

**Outstanding Person with Disability Award (Student and Adult)** -Candidate must be a person with a disability that enjoys all aspects of life and participates in advancement of barrier free access for all.

Individuals interested in obtaining a nomination form can download and print one from: <u>http://www.stmarysmd.com//voluntr/DisabilityAwardsProgram.asp</u> or contact the

Department of Recreation and Parks; Attn: Christina Bishop 23150 Leonard Hall Dr. P.O. Box 653 Leonardtown, MD 20650 301-475-4200 ext. \*1802 Christina.bishop@stmarysmd.com

## AMERICANS WITH DISABILITIES ACT OF 1990 (ADA)



**TYPE/PURPOSE**--A civil rights law to prohibited discrimination solely on the basis of disability in employment, public services, and accommodations.

**WHO IS PROTECTED**?--Any individual with a disability who: (1) has a physical or mental impairment that substantially limits one or more life activities; or (2) has a record of such an impairment; or (3) is regarded as having or (3) is regarded as having such an impairment. Further, the person must be qualified must be qualified for the program, service, or job.

The ADA has the following five titles:

1. **Employment (Title I)** Business must provide reasonable accommodations to protect the rights of individuals with disabilities in all aspects of employment. Possible changes may include restructuring jobs, altering the layout of workstations, or modifying equipment. Employment aspects may include the application process, hiring, wages, benefits, and all other aspects of employment. Medical examinations are highly regulated.

2. **Public Services (Title II)** Public services, which include state and local government instrumentalities, the National Railroad Passenger Corporation, and other commuter authorities, cannot deny services to people with disabilities, participation in programs or activities which are available to people without disabilities. In addition, public transportation systems, such as public transit buses, must be accessible to individuals with disabilities.

3. Public Accommodations (Title III) All new construction and modifications must be accessible to individuals with disabilities. For existing facilities, barriers to services must be removed if readily achievable. Public accommodations include facilities such as restaurants, hotels, grocery stores, retail stores, etc., as well as privately owned transportation systems.

4. **Telecommunications (Title IV)** Telecommunications companies offering telephone service to the general public must have telephone relay service to individuals who use telecommunication devices for the deaf (TTYs) or similar devices.

5. **Miscellaneous (Title V)** Includes a provision prohibiting either (a) coercing or threatening or (b) retaliating against the disabled or those attempting to aid people with disabilities in asserting their rights under the ADA.

While the employment provisions of the ADA apply to employers of fifteen employees or more, its public accommodations provisions apply to all sizes of business, regardless of number of employees. State and local governments are covered regardless of size.

## **ADA AMENDMENTS ACT 2008**

The ADA Amendments Act (ADAAA) was signed into law on Thursday, September 25, 2008. The bill enjoyed bipartisan support and was passed unanimously by the US Senate and very strongly by the US House of Representatives. The law went into effect on January 1, 2009.

**Purpose-** The purpose of the ADAAA is to restore the intent and protections of the Americans with Disabilities Act of 1990.

#### What it Changes or Clarifies

"Mitigating Measures" -The law rejects the Supreme Court's ruling in *Sutton v. United Airlines, Inc.,* which held that the determination of whether an individual's limitation was substantial should take into consideration any mitigating measures used by the individual (medications, assistive technologies, compensating behaviors, etc.).

Substantial limitation will now be determined without considering such mitigating measures. An exception is made for "ordinary eyeglasses or contact lenses," which may be taken into account.

"Substantially Limits" and "Major Life Activities" -The ADAAA also rejects the Supreme Court's reasoning in the case of *Toyota Motor Manufacturing, Kentucky, Inc. v. Williams*, where the court stated that the ADA should be "interpreted strictly" and that meeting the definition of disability should be "demanding."

The courts are now instructed to give a broader interpretation to the definition of disability.

**Major Life Activities** -Major life activities include, but are not limited to, caring for oneself, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

A major life activity also includes the operation of a **major bodily function**. Major bodily functions include, but are not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine and reproductive functions.

The law also clarifies that an individual should not be excluded from protection because of the ability to do many things so long as **one** major life activity is substantially limited.

**Conditions that are Episodic or in Remission-**The law clarifies that an impairment which is episodic or in remission is still a disability if it is substantially limiting when active.

**Focus of "Regarded As" Prong Changed -** The "regarded as" prong of the definition of disability now focuses on how a person is *treated* by a covered entity.

Individuals are protected if they can establish that they were discriminated against in a way prohibited by the ADA because of either an actual or a perceived impairment, *regardless of whether the impairment is substantially limiting*.

There is an exception for impairments which are both minor and transitory (lasting or expected to last six months or less). Impairments that are transitory and minor might include the common cold, a sprained joint, or a broken bone that is expected to heal completely in a few weeks.

**No Accommodations for "Regarded As" -** While the "regarded as" prong now protects anyone who can establish discrimination, it will NOT allow that person to get accommodations or modifications of policies, practices, or procedures.

#### What it does NOT change

There remain three prongs in the definition of disability:

- 1) has a disability,
- 2) has a history or record of a disability,
- 3) is regarded as having a disability.

**Physical or Mental Impairment** -The requirement that a disability be based on a physical or mental impairment has not been changed.

**Substantially Limits** - This law maintains a severity test for protection under the first and second prongs of the definition of disability. An individual must either *currently* have an impairment that substantially limits at least one major life activity, or must have a record of an impairment that *in the past* substantially limited at least one major life activity.

**Covered Entities-** The requirements for who must comply with the ADA (employers with 15 or more employees, state and local governments, public accommodations, telecommunications providers, transportation providers) remain the same.

**Complaint Process**-The processes for filing complaints under any of the five titles have not been altered.

**Enforcement Agencies** -The enforcement agencies continue to be: Equal Employment Opportunity Commission (EEOC), Department of Justice (DOJ), Department of Transportation (DOT), Federal Communications Commission (FCC).

## AMERICANS WITH DISABILITIES ACT 2010 UPDATE

Adopted from the Department of Justice http://www.ada.gov/regs2010/ADAregs2010.htm#rev\_titleII\_2010

The Department of Justice (the Department) has amended its regulation implementing title II of the Americans with Disabilities Act (ADA), which applies to public entities and title III which applies to public accommodations (private businesses that fall within one of twelve categories established by the statute) and commercial facilities.

#### SUMMARY OF CHANGES:

Adoption of the 2010 ADA Standards for Accessible Design. The Department has adopted revised ADA design standards that include the relevant chapters of the Access Board's 2004 ADA/ABA Accessibility Guidelines as modified by specific provisions of this rule. To minimize compliance burdens on entities subject to more than one legal standard, these design standards have been harmonized with the Federal standards implementing the Architectural Barriers Act and with the private sector model codes that are adopted by most States.

**Element by Element Safe Harbor.** The rule includes a general "safe harbor" under which elements in covered facilities that were built or altered in compliance with the 1991 Standards (or the UFAS- title II only) would not be required to be brought into compliance with the 2010 Standards until the elements were subject to a planned alteration. Similar safe harbors were adopted for elements associated with the "path of travel" to an altered area.

**Ticketing**. The rule provides guidance on the sale of tickets for accessible seating, the sale of season tickets, the hold and release of accessible seating to persons other that those who need accessible seating, ticket pricing, prevention of the fraudulent purchase of accessible seating, and the ability to purchase multiple tickets when buying accessible seating. It requires a venue operator to accommodate an individual with a disability who acquired inaccessible seating on the secondary ticket market only when there is unsold accessible seating for that event.

**Service Animals.** The rule defines "service animal" as a dog that has been individually trained to do work or perform tasks for the benefit of an individual with a disability. The rule states that other animals, whether wild or domestic, do not qualify as service animals. Dogs that are not trained to perform tasks that mitigate the effects of a disability, including dogs that are used purely for emotional support, are not service animals. The final rule also clarifies that individuals with mental disabilities who use service animals that are trained to perform a specific task are protected by the ADA. The rule permits the use of trained miniature horses as alternatives to dogs, subject to certain limitations. To allow flexibility in situations where using a horse would not be appropriate, the final rule does not include miniature horses in the definition of "service animal."

Wheelchairs and Other Power-Driven Mobility Devices. The rule adopts a twotiered approach to mobility devices, drawing distinctions between wheelchairs and "other power-driven mobility devices." "Other power-driven mobility devices" include a range of devices not designed for individuals with mobility impairments, such as the Segway® PT, but which are often used by individuals with disabilities as their mobility device of choice. Wheelchairs (and other devices designed for use by people with mobility impairments) must be permitted in all areas open to pedestrian use. "Other power-driven mobility devices" must be permitted to be used unless the covered entity can demonstrate that such use would fundamentally alter its programs, services, or activities, create a direct threat, or create a safety hazard. The rule also lists factors to consider in making this determination. This approach accommodates both the legitimate business interests in the safe operation of a facility and the growing use of the Segway® PT as a mobility device by returning veterans and others who are using the Segway® PT as their mobility aid of choice.

<u>Effective Communication</u>. The rule includes video remote interpreting (VRI) services as a kind of auxiliary aid that may be used to provide effective communication. VRI is an interpreting service that uses video conference technology over dedicated lines or wireless technology offering a high-speed, wide-bandwidth video connection that delivers high-quality video images. To ensure that VRI is effective, the Department has established performance standards for VRI and requires training for users of the technology and other involved individuals so that they may quickly and efficiently set up and operate the VRI system.

**Residential Housing Offered for Sale to Individual Owners.** Residential housing programs provided by title II entities are covered by the ADA. For the first time, however, the final rule establishes design requirements for residential dwelling units built by or on behalf of public entities with the intent that the finished units will be sold to individual owners. These design requirements are set forth in the 2010 Standards.

**Reservations Made by Places of Lodging**. The rule establishes requirements for reservations made by places of lodging, including procedures that will allow individuals with disabilities to make reservations for accessible guest rooms during the same hours and in the same manner as other guests, and requirements that will require places of lodging to identify and describe accessible features of a guest room, to hold back the accessible guest rooms for people with disabilities until all other guest rooms of that type have been rented, and to ensure that a reserved accessible guest room is removed from all reservations systems so that it is not inadvertently released to someone other than the person who reserved the accessible room. The final rule limits the obligations of third-party reservation operators that do not themselves own and operate places of lodging. In addition, to allow the hospitality industry appropriate time to change reservation systems, the final rule gives places of lodging 18 months from the publication date, September 15, 2010, to come into compliance with these requirements.

**Detention and Correctional Facilities.** The final rule clarifies the requirements that apply to correctional facilities. It requires three percent of newly constructed or altered cells to be accessible.

Timeshares, Condominium Hotels, and Other Places of Lodging. The rule provides that timeshare and condominium properties that operate like hotels are subject to title III, providing guidance about the factors that must be present for a facility that is not an inn, motel, or hotel to qualify as a place of lodging. The final rule limits obligations for units that are not owned or substantially controlled by the public accommodation that operates the place of lodging. Such units are not subject to reservation requirements relating to the "holding back" of accessible units. They are also not subject to barrier removal and alterations requirements if the physical features of the guest room interiors are controlled by their individual owners rather than by a third-party operator.



## Americans with Disabilities Act (ADA) Accessibility Guidelines, Maryland Accessibility Code, and Fair Housing Accessibility Resources

The following resources are provided to assist citizens, builders, business owners, and contractors in complying with the Federal ADA Accessibility Guidelines, Maryland Accessibility Code, and Fair Housing Accessibility. The Department of Land Use & Growth Management has no authority to grant waivers on Federal Laws or Maryland Code pertaining to the ADA and accessibility requirements.

The Department of Justice revised its regulations for accessibility standards called the 2010 ADA Standards for Accessible Design and beginning March 15, 2012, compliance with the 2010 Standards was required for new construction and alterations under Titles II and III. The link is provided to the US Department of Justice 2010 ADA Standards for Accessible Design <a href="https://www.ada.gov/2010ADAstandards\_index.htm">https://www.ada.gov/2010ADAstandards\_index.htm</a>.

The State of Maryland has adopted the Fair Housing Amendments Accessibility Guidelines as well as some additional accessibility requirements unique to Maryland. The 2010 Standards for Accessible Design is part of the Maryland Accessibility Code and became effective January 1, 2012. The link is provided to the Maryland Accessibility Code as well as information on their waiver requirements http://dhcd.maryland.gov/Codes/Pages/AccessibilityCode.aspx.

The United States Access Board is a federal agency that promotes equality for people with disabilities through leadership in accessible design and the development of accessibility guidelines and standards for the built environment, transportation, communication, medical diagnostic equipment, and information technology. The Access Board can provide technical assistance regarding accessibility guidelines Monday, Tuesday, Thursday, and Friday 10:00-5:30 ET by calling (800) 872-2253 (voice), (800) 993-2822 (TTY) emailing info@access-board.gov, or visiting <a href="https://www.access-board.gov">https://www.access-board.gov</a>.

The Department of Justice provides a toll-free ADA Information Line to provide information and materials to the public about the requirements of the ADA. ADA Specialists are available Monday, Tuesday, Wednesday, and Friday from 9:30 a.m. until 5:30 p.m. ET and on Thursdays from 12:30 p.m. until 5:30 p.m. ET by calling (800) 514-0301 (voice) or (800) 514-0383 (TTY) for more information visit <u>www.ada.gov</u>.

The U.S. Department of Housing and Urban Development adopted Fair Housing Accessibility Guidelines which became effective March 6, 1991. The guidance provided assists builders and developers with technical guidance on how to comply with the specific accessibility requirements of the Fair Housing Amendments Act of 1988. The link to the Department of Housing and Urban Development provides information on the final guidelines and requirements on accessibility https://portal.hud.gov/hudportal/HUD?src=/program offices/fair housing equal opp/dis abilities/fhefhag.

## **MARYLAND STATE RESOURCES**

Maryland Department of Disabilities

410.767.3660 voice/tty 1.800.637.4113 voice/tty

#### Maryland Developmental Disabilities Administration Telephone: (410)767-5600

Toll Free: 1-877-4MD-DHMH TDD Line: 1-800-735-2258

Maryland Department of Education Division of Rehabilitation Services Telephone: 301-475-9612 Leonardtown.dors@maryland.gov http://dors.maryland.gov/Pages/default.aspx

#### Maryland Developmental Disabilities Council Tel: [410]-767-3670 [800]-305-6441 (within MD) Fax: [410]-333-3686

#### DBTAC - Mid-Atlantic ADA Center (301) 217-0124 (V/TTY) (301) 217-0754 (Fax) adainfo@transcen.org www.adainfo.org

## **FEDERAL RESOURCES**

Department of Justice ADA Homepage 800-514-0301 (voice) 800-514-0383 (TTY)

## Equal Employment Opportunity

<u>Commission (EEOC)</u> Phone: 1-800-669-4000 TTY: (202) 663-4494 Email: <u>info@ask.eeoc.gov</u>

## Federal Transit Administration

Office of Communications and Congressional Affairs (202) 366-4043 FTA.ADAAssistance@dot.gov.

TTY: 800-877-8339 Voice/Hearing: 866-377-8642 Speech to Speech: 866-377-8642

## United States Access Board

(202) 272-0080 (v) (202) 272-0082 (TTY) (202) 272-0081 (fax)

## United States Department of Education

1-800-USA-LEARN (1-800-872-5327) TTY 1-800-437-0833

#### US Department of Health and Human Services Office for Civil Rights

(800) 368-1019 Office for Civil Rights Dept. of Health and Human Services For the hearing impaired, please contact TDD line: (800) 537-7697

#### US Department of Labor, Civil Rights Center

1-866-4-USA-DOL TTY: 1-877-889-5627

## US Dept. of Housing and Urban

<u>Development</u> (202) 708-1112 TTY: (202) 708-1455

## Federal Communications Commission

TTY: 1-888-835-5322 Phone: 1-888-225-5322 Fax: 1-866-418-0232 Email: <u>fccinfo@fcc.gov</u>

## Office of the Deaf and Hard of Hearing

410-767-7756 TTY 410-767-6290 Voice 1-800-735-2258 (Maryland Relay)



## Welcome to Holland



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I am often asked to describe the experience of raising a child with a disability to try to help people who have not shared that unique experience to understand it, to imagine how it would feel. It's like this... When you're going to have a baby, it's like planning a fabulous vacation trip - to Italy. You buy a bunch of guide books and make your wonderful plans. The Coliseum. The Michelangelo David. The Gondolas in Venice. You may learn some handy phrases in Italian. It's all very exciting. After months of eager anticipation, the day finally arrives. You pack your bags and off you go. Several hours later, the plane lands. The stewardess comes in and says: "Welcome to Holland" HOLLAND??? you say. What do you mean, Holland? I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy. But there's been a change in the flight plan. They've landed in Holland, and there you must stay. The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine and disease. It's just a different place. So you must go out and buy new guidebooks. And you must learn a whole new language. And you will meet a whole new group of people you would never have met. It's just a different place. It's slower paced than Italy, less flashy than Italy. But after you've been there for awhile, and you catch your breath, you look around... and you begin to notice that Holland has windmills... and Holland has tulips, Holland even has Rembrandts. But everyone you know is busy coming and going from Italy...and they are bragging about what a wonderful time they had there. And for the rest of your life, you will say, 'Yes, that's where I was supposed to go. That's what I had planned.' And the pain of that will never, ever, ever go away, because the loss of that dream is a very significant loss. But... if you spend your life mourning the fact that you didn't go to Italy, you may never be free to enjoy the very special, the very lovely things... about Holland.