Disability Equity Training

This content is from Appendix G, “Training Program Resources,” in *ACRP Research Report 201.* This file provides the material in Word format to facilitate use by practitioners.

Organizations are encouraged to partner with local experts and advocacy groups to help further customize training to fit the unique needs of the area.

**Disability Equity Training (DET) Empathy Exercises**

Ideally, one or more individuals with one or more disabilities or access and functional needs would facilitate or co-facilitate all discussion and training activities. In preparation for the activity, the facilitator can print and cut out the cards on the following pages. Cut around the dotted lines, and then fold on the solid line. There are three types of cards:

* **Function** cards (for TONE, EYE CONTACT, BODY LANGUAGE, and SERVICE ANIMAL)
* **Question** cards (e.g., “Would you like help?” and “Do you need assistance?”)
* **HELP** cards

***What Is a Disability?***

**Discussion prompt (read aloud by facilitator or participant):**

“As a society, we have mistakenly adopted a mindset that divides us into two groups: ‘able-bodied’ people and ‘disabled’ people. In **fact, we all will be part of the disability community at some time in our lives.** If we recognize that all of us will need accommodations at some point in our lives, we will learn to be more compassionate and understanding of individuals with disabilities, people with access and functional needs, and people with limited English proficiency.”

(5 minutes)

**Facilitator:** Ask participants to provide their own definitions of *disability*. Remind volunteers that there is no perfect answer. Encourage and model respectful, creative candor.

(2–3 minutes)

**Facilitator:** “If we think of *disability* as a conditional state of any duration that can make it difficult for a person to do activities or perform functions that keep him or her safe and healthy, how does that change your definition?”

(3–5 minutes)

**Facilitator:** (1) Ask participants to share a time or situation when they were or would have been considered “disabled” according to the definition. Remind volunteers that states of disability may be invisible or visible and highly situational. (2) After participants have shared, write or place the written definition of *disability* on the top center of a whiteboard, chalkboard, or wall, and read it aloud: “Disability: a conditional state of any duration that can make it difficult for a person to do activities or perform functions that keep them safe and healthy.” Draw a continuum from “Visible” to “Invisible” just below the definition, or mark columns with sticky notes.

(5 minutes)

**Facilitator:** Have participants brainstorm types of disabilities using sticky notes (one per note). If participants have difficulty with brainstorming, share a few prompts from the following list:

*Prompts (as needed):*

* Infant or child without verbal communication or literacy
* Individual with visible mobility aids and hearing aids
* Individual with service animals
* Visible markers of surgery, injury, and/or illness
* Any person without verbal communication or literacy in a particular language
* Invisible effects of surgery, injury, and/or illness
* Differences in cognition (e.g., differences related to depression, grief, or neurodivergence, such as people with autism, schizoaffective disorder, bipolar disorder, or attention deficit hyperactivity disorder)

(1 minute)

**Facilitator:** Have participants place their notes along the continuum. Variation: decide on the placement of each note as a group.

**Facilitator (reads aloud):**

“Identifying groups or individuals with specific needs who require assistance (for example, unaccompanied and separated children and adults with mobility disabilities) is not a simple or straightforward task. While there may be cues or clues that signal a person in need of assistance (such as unfocused or “dazed” eye movements, a visible injury, or not heeding warning sounds or signals), the majority of disabilities are not immediately visible.”

***Role-Play: Communicating with People with Disabilities and Others with Access and Functional Needs***

**Set-Up:** Two chairs side by side in front of the room, with a table or third chair available from which participants will pick up cards during the activity.

**Facilitator:** (1) Divide the group into pairs. Within each pair, ask the participants to determine who will be Player A and who will be Player B. (2) Place the **Function** playing cards (i.e., TONE, EYE CONTACT, BODY LANGUAGE, SERVICE ANIMAL) with the colored side up in a single pile on a table or chair where players will be able to pick them up as they come to the front of the room. Place the **Question** playing cards in a separate pile. Hold the **HELP** playing cards for distribution to participants in the audience after the role-play has begun.

**Facilitator:** Select a participant to read aloud.

**Participant (reads aloud):**

“Diagnoses and labels are not relevant when helping someone in an emergency. What is important is performing the functions necessary to maintain safety and security (with or without assistance).”

**Facilitator (reads aloud):**

“You can’t tell a person’s needs just by looking at them. If a particular access and functional need is identified, it does not mean that the person doesn’t have additional needs. Just because you have worked with someone with an access and functional need does not mean that every person with that need will want, request, or require the same accommodations.”

**Facilitator (shares the following instructions):**

1. Each pair will have a chance to participate in the role-play.
2. Player A will choose a **Question** card (either “Would you like any help?” or “Do you need assistance?”), and Player B will pick a **Function** card.
3. Player A and Player B may consult with each other briefly before moving to the front of the room to enact the role-play.
4. During the role-play, Player A will approach Player B, ask the question on the **Question** card, and perform the action according to the **Function** card. The players may interact however they like with the chairs. Differing approaches are encouraged.
5. After each role-play, I will ask for feedback from the audience. The audience will try to guess the type of function or action being modeled, describe what “worked,” or share ideas for how the speaker or helper could improve.

**Facilitator:** Ask if participants have any questions. When all participants understand the process, ask for the first volunteer pair to begin the role-play activity. Once players get the hang of the activity (after two or three rounds), introduce the **HELP** cards. Explain that you will hand a **HELP** card to any audience participant who raises their hand, and encourage audience members to request a **HELP** card as needed to help performers. Remind participants that their goals are to guess the type of function or action being modeled and identify both what “worked” or how the speaker/helper can improve. Continue the role-play until all participant pairs have had a turn and received feedback.

**Facilitator (reads aloud):**

“There are a growing number of people with multiple access and functional needs. Every person and every disability is unique—respect his or her independence to the greatest extent possible. Don’t make assumptions about the person’s abilities. Ask if he or she would like help or needs assistance. Always ask if and how you can help before attempting any assistance. The person may not agree with the type of help you wish to offer; remember, it is their choice how they wish to use or accept assistance.”











