



COMMUNITY



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VERMONT

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# ADA and 4-H

## **\*Our Mission**

*The mission of the Office of Affirmative Action Equal Opportunity (AAEO) is to help create a diverse, nondiscriminatory learning and working environment for the University of Vermont community by promoting inclusion, respect and equity*

Please review and use the information and resources provided. If you have any questions, please call your County Educator.

The following information was written and compiled by Kristen Wright, AA/EO Compliance Specialist, Jude Ward, Grievance Officer June 30, 2003 (both are no longer with the University of Vermont) and reformatted January 2010 by Wendy Sorrell, State 4-H Livestock Educator.

\*From the web site: <http://www.uvm.edu/~aaeo/>



# ADA and 4-H

## Resources

Office of Affirmative Action/Equal Opportunity, 428 Waterman, (802) 656-3368, [www.uvm.edu/~aaeo](http://www.uvm.edu/~aaeo);  
Diane Gaboriault, Assistant Director, Diversity & Equity Unit (802) 656-2089

ACCESS (Accommodation, Consultation, Counseling & Educational Support Services) A-170 Living/Learning Center, (802) 656-7753, [www.uvm.edu/~access](http://www.uvm.edu/~access) ; Laurel Cameron, Assistant Director ACCESS/ASP (Learning Disabilities)

Consultant for Extension; Doug Lantagne 656-2990

ADA Liaison (Employee Relations), 218 Waterman, (802) 656-4467, [www.uvm.edu/~uvmhr](http://www.uvm.edu/~uvmhr); Leslie Parr, ADA Liaison/Employee Relations Specialist

Alcohol and Drug Services of the Center for Health and Well Being; 41 S. Prospect Street, Nicholson House, (802) 656-0784

The Counseling Center of the Center for Health and Well Being, 146 S. Williams Street, (802) 656-3340, [wee.uvm.edu/~counscen](http://wee.uvm.edu/~counscen)

Department of Transportation and Parking Services, 622 Main Street, (802) 656-8686, [www.uvm.edu/~tpswww](http://www.uvm.edu/~tpswww)

E.M. Luse Center for Communication Disorders, Pomeroy House, (802) 656-3861, [www.uvm.edu/~cmsi](http://www.uvm.edu/~cmsi)

Employee Assistance Program, 466 Prospect Street, (802) 656-2100, [www.uvm.edu/~eap](http://www.uvm.edu/~eap)

The Learning Cooperative, 244 Commons Living/Learning, (802) 656-4075, [www.uvm.edu/~learnco](http://www.uvm.edu/~learnco)

The Office of Architectural Barrier Compliance, 109 S. Prospect Street, (802) 656-3208, [www.uvm.edu/~plan](http://www.uvm.edu/~plan)

The Student Health Center of the Center for Health and Well Being, 425 Pearl Street, (802) 656-3350, [www.uvm.edu/~dosa/chw](http://www.uvm.edu/~dosa/chw)

Vermont Telecommunications Relay Service from on-campus, Dial (9) 711 from any UVM phone – 711 anywhere else in the state



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## Marketing

Advertise that auxiliary aids are available upon request  
 Include language stating “if you require an accommodation, please contact \_\_\_\_\_”  
 May request literature in alternate format - Braille

### Accessibility Examples for Projects including Field Days, Farm Tours, and 4-H youth development

Provide temporary signage directing people to accessible parking, restrooms, etc.  
 Rent an accessible portable restroom for an event  
 Provide accessible group transportation  
 Allow those with mobility impairments to follow the group in their own transportation, if *they so choose*  
 Provide hard-surfaced area for speaking engagements  
 Provide adequate sound system  
 Arrange for sign-language interpreters  
 Have videos captioned  
 Widen aisles in livestock buildings  
 Identify and reserve accessible seating at show arenas  
 Provide accessible picnic area  
 Bring services to an individual’s home

### Possible accommodations for people with specific impairments

#### Mobility

Provide facilities free of architectural barriers  
 Use adaptive equipment such as lower workbenches or modified foot controls  
 Raise the bed of a garden  
 Allow for rest periods  
 Adapt game rules to allow for extra time  
 Use lighter equipment  
 Lower a playing net

#### Visual

Give clear, specific directions using left, right, up, down, etc.  
 Keep room arrangements consistent  
 Maximize the involvement of other senses for an activity



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## Hearing

- Provide ASL interpreters
- Use visual aids
- Reserve seating in the front of the room/area

## Developmental

- Utilize the IEP (Individual Education Plan)
- Allow extra time
- Alternate between action and quiet activities to avoid over stimulation
- Use repetition
- Use demonstration
- Speak clearly and use gestures

## Learning

- Give directions one step at a time
- Break activities down into small planned steps
- Use a multi-sensory approach
- Stress strengths not weaknesses

### **We would not provide an accommodation if it:**

1. Was a **direct threat** to the health or safety of the individual or others  
Direct threat is a substantial risk of serious harm
  - Individualized inquiry/assessment required
  - Cannot rely upon stereotypes
  - Must look at
    - the duration of the risk
    - nature, severity, and magnitude
    - likelihood the harm will occur
2. Means making a substantial change/alteration to an essential element of the program or the manner in which the program is provided.
3. Poses an undue financial or administrative burden



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## Frequently Asked Questions

**Q:** How do I decide whether a child with a disability belongs in my program?

**A:** A 4-H Educator/Volunteer cannot just assume that a child's disabilities are too severe for a child to be integrated successfully into the program. The volunteer must make an *individual assessment* about whether it can meet the particular needs of the child without fundamentally altering its program. In making this assessment, the volunteer must not react to unfounded preconceptions or stereotypes about what children with disabilities can or cannot do, or how much assistance they require. Instead, the volunteer should talk to the parents or guardians and any other professions (such as educators or health care professionals) who work with the child in other contexts. You may be surprised at how simple it is to include children with disabilities into the programs.

**Q:** Do we have to include children whose presence is dangerous to others?

**A:** No. Children who pose a *direct threat* – a substantial risk of serious harm to the health and safety of others that cannot be reduced or eliminated by a reasonable accommodation – do not have to be admitted into a program. However, the determination that a child poses a direct threat may not be based on generalizations or stereotypes about the effects of a particular disability. The determination must be based on an *individualized assessment* that considers the particular activity and the actual abilities and disabilities of the child.

**Q:** One of the children in my program hits and bites other children. Hers/his parents are now saying that I cannot ask her/him to leave the program because her/his bad behavior is due to a disability. What can I do?

**A:** The first thing the volunteer should do is to work with the parents to see if there are reasonable ways of curbing the child's bad behavior such as naps, "time out," or changes in her/his diet or medication. If reasonable efforts have been made and the child continues to bit and hit children or staff, she/he may be asked to leave the program even if he has a disability. The ADA does not require action that would pose a *direct threat* – a substantial risk of serious harm – to the health or safety of others. However, please do not make assumptions about how a child with a disability is likely to behave based on their past experiences with other children with disabilities. Each situation must be considered individually.

**Q:** One of the children in my center has parents who are deaf. I need to have a long discussion with them about their child. Do I have to provide a sign language interpreter for the meeting?

**A:** It depends. 4-H programs must provide effective communication to the customers they serve, including parents and guardians with disabilities, unless doing so poses an undue burden. The person with a disability should be consulted about what types of auxiliary aids and services will be necessary in a particular context, given the complexity, duration, and nature of the communication, as well as the person's communication skills and history.

**Q:** We have a "no pets" policy. Do I have to allow a child with a disability to bring a service animal, such as a Seeing Eye dog?



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- A: Yes. A service animal is **not** a pet. The ADA requires you to modify your “no pets” policy to allow the use of a service animal by a person with a disability. This does not mean that you must abandon your “no pets” policy altogether, but simply that you must make an exception to your general rule for service animals.
- Q: If an older child has delayed speech or developmental disabilities, can we place that child in a program for a younger age group?
- A: Generally, no. Under most circumstances, children with disabilities must be placed in their age-appropriate classroom, unless the parents or guardians agree otherwise.

## Examples of People First Language

### Labels Not to Use

The handicapped or disabled  
 The mentally retarded

My son is autistic  
 She's a Downs kid  
 He's learning disabled  
 I'm a paraplegic  
 She's crippled  
 He's wheelchair bound or confined to a wheelchair  
 He's in special ed  
 Birth defect  
 Handicapped parking, bathrooms, etc.  
 She has a problem with...

### People First Language

People *with* disabilities  
 People *with* a developmental disability/cognitive impairment  
 My son *has* autism  
 She *has* Down Syndrome  
 He *has* a learning disability  
 I *have* paraplegia  
 She *has* a physical disability  
 He *uses* a wheelchair  
 He *receives* special ed services  
 Congenital disability  
 Accessible parking, bathrooms, etc.  
 She *has* a need for...

People First Language by Kathie Snow, 250 Sunnywood Lane, Woodland Park, CO 80863-9434 (Rev. 1/98).  
 This document may be copied in its entirety



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# ADA and 4-H

## **Basic Etiquette: People with Disabilities**

Any and all adaptive/assistive devices (canes, wheelchairs, crutches, communication boards, etc.) should always be respected as personal property. Unless given specific and explicit permission, do not move, play with, lean on, or use them.

Always direct your communication to the individual with a disability.

Do not focus on the disability, but on the individual and the issue at hand.

If you are uncertain about what to do, ask. However, do not ask people how they acquired their disability, how they feel about it, or other personal questions unless it is clear that someone may want to discuss it. It is not their job to educate you.

As with all other etiquette issues, when mistakes are made, apologize, correct the problem, learn from the mistake, and move on.

## **Basic Etiquette: People with Hearing Impairments**

Always look directly at a person with hearing loss.

Do not obscure your face and mouth with your hands, facial hair, or other obstructions.

There is a wide range of hearing losses and communication methods. If you do not know the individual's preferred method, ask.

To get the attention of a person with a hearing loss call his/her name. If there is no response, you can lightly touch him/her on the arm or shoulder.

Always speak clearly and evenly – do not exaggerate your speech.

Use a normal speaking tone and style. If someone needs you to speak in a louder voice, s/he will ask you to do so.

If you are experiencing extreme difficulty communication orally, ask if you can write. Never say, "Oh, forget it, it is not important".

Be aware of the environment. Large and crowded rooms and hallways can be very difficult for hearing impaired persons. Bright sunlight or shadows can also present barriers if the person is trying to read lips.



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## **Basic Etiquette: People with Mobility Impairments**

Remember that a wheelchair is part of an individual's "personal space". Do not lean on it, push it, or rest your feet on it without explicit permission.

Always ask if you can offer assistance before you provide assistance.

If your offer of assistance is accepted, ask for instructions and follow the instructions given to you. If it is denied, do not take it personally.

When given permission to push a wheelchair, push slowly at first. Wheelchairs can pick up momentum quickly.

Do not pat an individual who uses a wheelchair on the back or on the head.

If possible, when talking with someone who uses a wheelchair, sit down so that you are at eye level.

## **Basic Etiquette: People with Speech Impairments**

Do not ignore a person with speech impairments because you are concerned you might not understand them.

Do not interrupt a person with a speech impairment. Speak only when you are certain that he or she has finished speaking.

Do not attempt to rush a conversation. Plan that a conversation with a person with a speech impairment may take longer.

Face the individual and maintain eye contact. Give the conversation your full attention.

If the individual is accompanied by another individual, do not address questions, comments, or concerns to the companion.

Do not pretend you understand what is being said if you do not.

Do not assume that a person with a speech impairment is incapable of understanding you.

Do not play with or try to use someone's communication device. Such communication aids are considered an extension of an individual's "personal space" and should be respected as such.





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## **Basic Etiquette: People with Visual Impairments**

Offer the use of your arm/elbow. Do not clutch the person's arm or steer the individual. Walk as you normally would.

Give a person with visual impairment a brief description of the surroundings. For example: "There is a table in the middle of the room, about six feet in front of you" or "There is a coffee table on the left side of the door as you enter".

Use descriptive phrases that relate to sound, smell, and distance when guiding a visually impaired person.

Guide dogs are working animals and should not be treated as pets. Do not give the dog instructions, play with, or touch it.

Do not grab or try to steer the cane of a person with visual impairments.

Always determine in what format a person with visual impairments wants information: Braille, large print, or audiotope. Do not assume what format an individual uses or prefers.

Direct your comments, questions, or concerns to the person with a visual impairment, not to his or her companion.

If you are reading for a person with visual impairment, first describe the information to be read. Use a normal speaking voice. Do not skip information unless requested to do so.

Always identify yourself by name.

## **Basic Etiquette: People with Developmental Disabilities**

Use clear language that is concise and to the point.

Do not "talk down" to a person with a developmental disability.

Demonstrate the steps of a task or project. Let an individual perform each part of the task after you explain it.

Assume that an adult with a developmental disability has had the same experiences as any other adult. If engaging in a conversation, bring up the same topics of conversation as you would with anyone else such as weekend activities, vacation plans, the weather, or recent events.

Direct your comments, questions, and concerns regarding a person with a developmental disability to that individual.

Remember that persons with developmental disabilities are legally competent. They can sign documents, vote, and give consent to medical care.



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## **Basic Etiquette: People with Psychiatric Disabilities**

Treat people with psychiatric disabilities individually. Do not make assumptions based on experiences with other people with the same or similar psychiatric disability.

Do not assume that people with psychiatric disabilities are more likely to be violent than people without psychiatric disabilities; this is a myth.

Do not assume that all people with psychiatric disabilities take medication or should take medication.

Do not assume that people with psychiatric disabilities are incapable of working, signing contracts, or giving consent for medical treatment.

Do not assume that people with psychiatric disabilities also have cognitive disabilities, are less intelligent than the general population, do not know what is best for them, have poor judgment, or are unable to cope with stress.