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Reference Guide to Independent
A Guide for People with Disabilities
2018-2019

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Options Center for Independent Living
Partnering with People with Disabilities Who Want to Live Independently And Participate Fully in Society
1989 to 2018

Options CIL is a consumer driven, non-residential, community based, non-profit organization that emulates the independent living philosophy. Independent living is essentially living just like everyone else – having opportunities to make decisions that affect one’s life,
having the ability to pursue activities of one's own choosing – limited only in the same ways that one's non-disabled neighbors are limited.

Options CIL was established in 1989. Our board and our staff are comprised of more than 50% of people with disabilities. We are funded by state and federal grants, private donations, private foundation grants, United Way allocations, memberships and proceeds from fundraisers. Our main office is located in Bourbonnais, Illinois serving Kankakee County. Our satellite office in Watseka, Illinois serves Iroquois County. OCIL serves individuals of all ages, races, faiths, genders, and disabilities.

We provide five core services, which are: advocacy, information and referral, independent living skills, peer mentoring, and transition. Our mission is to partner with persons with disabilities who want to live independently and participate fully in society.

Through peer support and role modeling, Options staff teaches consumers that persons with disabilities have the right and the responsibility to pursue goals of self-determination and self-sufficiency. We serve as a resource and mentor, empowering consumers with the skills to direct their own lives, set their own goals, and plan the necessary steps to achieve those goals.

Options CIL works to bring about positive change in attitudes and accessibility and provides our community with the information and knowledge needed to accept, respect, and accommodate citizens with disabilities.

Options Service Area AND OFFICES
Kankakee County
22 Heritage Drive, Suite 107
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Call Options CIL at 815-936-0100 for more details

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Please contact us for a Membership Application or for more information. www.optionscil.org 815-936-0132 (TTY) or 815-936-0100 (Voice)

Youth, Disclosure, and the Workplace Why, When, What, and How
Every job seeker with a disability is faced with the same decision: “Should I or shouldn’t I disclose my disability?” This decision may be framed differently depending upon whether you have a visible disability or a non-visible disability. Ultimately, the decision of whether to disclose is entirely up to you.

Why Disclose in the Workplace?
When you leave school and enter the workforce, many aspects of your life change. Among the many differences, is the requirement to share information about your disability if you want your employer to provide you with
reasonable accommodations. In school if you had an individualized education program (IEP), as required under the Individuals with Disabilities Education Act (IDEA), information about your disability and the accommodations you needed followed you from grade to grade. When you enter the workforce, the IDEA no longer applies to you. Instead, the Americans with Disabilities Act (ADA) and the Rehabilitation Act protect you from disability-related discrimination and provide for meaningful access. The laws require that qualified applicants and employees with disabilities be provided with reasonable accommodations. Yet, in order to benefit from the ADA and the Rehabilitation Act, you must disclose your disability. An employer is only required to provide work-related accommodations if you disclose your disability to the appropriate individuals.

When to Disclose Your Disability
There is no one “right” time or place to disclose your disability. Select a confidential place in which to disclose, and allow enough time for the person to ask questions. Do not dwell on the limitations of your disability. You should weigh the pros and cons of disclosure at each point of the job search, recruitment, and hiring process and make the decision to discuss your disability when it is appropriate for you. Consider the following stages:
In a letter of application or cover letter;
Before an interview;
At the interview;
In a third-party phone call or reference;
Before any drug testing for illegal drugs;
After you have a job offer;  
During your course of employment; or  
Never.

How to Disclose your Disability  
Preparation is essential for disclosing your disability. Effective disclosure requires that you discuss your needs, and that you provide practical suggestions for reasonable job accommodations, if they are needed. One way to become comfortable with discussing your disability is to find someone you trust and practice the disclosure discussion with that person. The two of you can put together a disclosure script. It should contain relevant disability information and weave in your strengths. Always keep it positive!

What to Disclose About Your Disability  
There is no required information to share about your disability. In fact, it will be different for everyone. For example, if you have an apparent disability it is often beneficial to address how you plan to accomplish tasks required by the job. This can affirm to the employer that you are suited for the position. Additionally, by demonstrating your own ease and comfort with the job requirements, you can relay to employers other traits that are desirable in an applicant. A person with a hidden disability, on the other hand, will first need to decide whether to disclose the disability, and subsequently determine what information to share about the disability. Generally, if you choose to disclose, it is most helpful to share the following:
General information about your disability;
Why you are disclosing your disability;
How your disability affects your ability to perform key job tasks;
Types of accommodations that have worked for you in the past; and
Types of accommodations you anticipate needing in the workplace.

To Whom to Disclose Your Disability
Disclose your disability on a “need-to-know” basis. Provide further details about your disability as it applies to your work-related accommodations to the individual who has the authority to facilitate your accommodation request. Consider disclosing to the supervisor responsible for the hiring, promoting, and/or firing of employees. This person needs to be informed of your disability-related needs to provide the necessary supports and judge your job performance fairly.

Disclosure Protections and Responsibilities
As a person with a disability, you have disclosure protections as well as significant responsibilities to yourself and to your employers.

You are entitled to:
Have information about your disability treated confidentially and respectfully;
Seek information about hiring practices from any organization;
Choose to disclose your disability at any time during the employment process; Receive reasonable accommodations for an interview; Be considered for a position based on your skill and merit; and Have respectful questioning about your disability for the purpose of determining whether you need accommodations and if so, what kind.

You have the responsibility to: Disclose your need for any work-related reasonable accommodations; Bring your skills and merits to the table; and Be truthful, self-determined, and proactive.

From the United States Department of Labor’s website at https://www.dol.gov/odep/pubs/fact/ydw.htm

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Vision Disability: Types, News & Information
The number of different vision conditions that can affect a person’s eyesight are varied in the way they do affect the person’s daily life. Some of these conditions have a minor affect, while others may have a larger affect.

Visual impairment (vision impairment, vision disability) is defined as a decreased ability to see to a degree that causes problems not fixable by usual means, such as glasses or medication. Visual impairment can be due to disease, trauma, or congenital or degenerative conditions. In the United States, the terms “partially sighted”, “low vision”, “legally blind” and “totally blind” are used by schools, colleges, and other educational institutions to describe students with visual impairments.

Various conditions require only eyeglasses or contact lenses in order to correct the person’s vision. Other conditions may require surgery. Additional health concerns can affect a person’s vision as well, such as Diabetes or Glaucoma.

Vision Conditions
There are a number of eye problems and conditions that may make it more difficult for a person to see things clearly, yet do not cause loss of vision. An example of this is, ‘Myopia,’ or, ‘Near-sightedness,’ where a person sees nearby objects clearly, but has difficulty focusing on objects that are more distant.
‘Hyperopia,’ or ‘Far-sightedness,’ is another example of a vision condition; this one involves the ability to see distant objects clearly, with difficulty focusing on nearby objects.

A third example of an eye condition that does not cause loss of vision is, ‘Astigmatism,’ where the person’s vision appears blurred at any distance. These conditions are common and can often be corrected with eyeglasses or contact lenses.

Low Vision
The term, ‘Low Vision,’ sometimes also referred to as, ‘Vision Loss,’ means that even though a person may use eyeglasses, contact lenses, medication, or surgical techniques to improve their vision; they still have difficulty seeing.

Most persons develop low vision due to eye disease or health conditions. There are some common causes of low vision among adults in America.

- ‘Diabetic Retinopathy,’ is a condition in which Diabetes has damaged tiny blood vessels inside the person’s retina, causing low vision.
- ‘Age-Related Macular Degeneration,’ is a condition in which the cells in a person’s retina that allow them to see fine details have died.
- ‘Glaucoma,’ is a condition in which the fluid pressure in a person’s eyes slowly rises, damaging their optic nerve.
- ‘Cataracts,’ are a condition that involves a clouding of the lens in a person’s eye.
Receiving prompt treatment for these conditions may prevent them from getting worse, making regular eye exams crucial.

Cataracts
As many as 10 million people around the world suffer from cataracts.

In Germany alone, more than 600,000 cataract operations are performed each year.

Cataracts can be either congenital or acquired; age-related opacification of the lens is the most common type. The main symptom of cataract is slowly progressive worsening of vision, but glare disability and nearsightedness can also be signs of the disease.

Cataract operations are now usually performed on an outpatient basis. The eye is anesthetized, pretreated with antibiotics, and surgically opened. New approaches permit the operation to be performed through an incision smaller than 2 mm.

In the phacoemulsification technique, the lens is emulsified and aspirated away through a vibrating hollow needle. The surgeon then implants an intraocular artificial lens. Patients without any other diseases of the eye can achieve a visual acuity of 1.0 or even better.
Special optical designs for the artificial lens can further optimize the quality of vision and thereby improve patient satisfaction.

Vision Terms
According to the International Classification of Diseases, there are 4 levels of visual function:

- blindness
- normal vision
- severe visual impairment
- moderate visual impairment

Moderate visual impairment combined with severe visual impairment are grouped under the term low vision: low vision taken together with blindness represents all visual impairment.

There are some different terms used to describe levels of vision disability. These terms include, ‘Partially-Sighted,’ ‘Low-Vision,’ ‘Legally Blind,’ and, ‘Totally Blind.’

Partially-Sighted means the person has some form of visual disability that may require special education.

Low-Vision usually is used to refer to persons who experience a more severe loss of vision that is not necessarily limited to distance vision. Persons with low-vision may be unable to read a newspaper at an average distance with eyeglasses or contacts, and may need large print or Braille.
Persons who are legally blind have less than 20/200 vision in their better eye, or a very limited field of vision, often 20 degrees at its widest point.

Persons who are totally blind are unable to see and often use Braille or other non-visual forms of media.

Eye disorders lead to vision loss; visual impairment is a consequence of a functional loss of vision rather than the eye disorder itself. Retinal degeneration, muscular problems, albinism, corneal disorders, congenital disorders, and infections can also lead to vision impairment.

For more information please go to www.disabled-world.com/disability/types/vision/

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Special assistance is available for persons with disabilities. If you are unable to complete your tax return because of a disability, you may be able to obtain assistance from an IRS office or the Volunteer Income Tax Assistance or Tax Counseling for the Elderly Programs sponsored by IRS.

Disability Tax Benefits
Higher Standard Deduction for Blindness
If you are blind on the last day of the year and you don’t itemize deductions, you are entitled to a higher standard deduction.
Not totally blind. If you aren’t totally blind, you must get a certified statement from an eye doctor (ophthalmologist or optometrist) that:

You can’t see better than 20/200 in the better eye with glasses or contact lenses, or

Your field of vision is 20 degrees or less.

If your eye condition isn’t likely to improve beyond these limits, the statement should include this fact. Keep the statement in your records.

If your vision can be corrected beyond these limits only by contact lenses that you can wear only briefly because of pain, infection, or ulcers, you can take the higher standard deduction for blindness if you otherwise qualify.

Impairment-Related Work Expenses
If you have a physical or mental disability that limits your being employed, or substantially limits one or more of your major life activities, such as performing manual tasks, walking, speaking, breathing, learning, and working, you can deduct your impairment-related work expenses.

Impairment-related work expenses are ordinary and necessary business expenses for attendant care services at your place of work and other expenses in connection with your place of work that are necessary for you to be able to work.
Example: If you are blind and you must use a reader to do your work. You use the reader both during your regular working hours at your place of work and outside your regular working hours away from your place of work. The reader’s services are only for your work. You can deduct your expenses for the reader as impairment-related work expenses.

For more information please go to the IRS website https://www.irs.gov

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Serving People With Disabilities In The Most
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The U.S. Supreme Court’s 1999 landmark decision in
Olmstead v L.C. (Olmstead) found the unjustified segregation of people
with disabilities is a form of unlawful discrimination under
the Americans with Disabilities Act (ADA). The U.S.
Department of Health and Human Services (HHS) Office
for Civil Rights (OCR) plays a pivotal role in supporting the
Olmstead decision and promoting community living
through our vigorous enforcement of the ADA and other key civil rights laws.

OCR investigates complaints alleging a violation of the ADA’s “integration mandate,” which requires that individuals with disabilities receive services in the most integrated setting appropriate to their needs. This principle is central to the Supreme Court’s Olmstead decision. The Court held that states are required to provide community-based services for people with disabilities who would otherwise be entitled to institutional services when: (a) such placement is appropriate; (b) the affected person does not oppose such treatment; and (c) the placement can be reasonably accommodated, taking into account the resources available to the state and the needs of other individuals with disabilities.

OCR’s investigations of Olmstead complaints have had a significant impact in facilitating the community integration of individuals with disabilities. As a result of OCR’s efforts, many individuals have transitioned from an institution to the community, and many individuals have avoided unnecessary institutionalization. For example, OCR’s investigations have led to:
Individuals who had been institutionalized for decades are now receiving services in their community
Individuals who lost their housing and/or community-based supportive services when they were forced to enter institutions due to an acute health care problem have had the needed services provided or restored
Individuals with disabilities are able to access home and community-based services through Medicaid “Waiver” programs. Increased hours of personal care and assistance are being provided to individuals who require additional services to remain in the community. Individuals with disabilities now have greater control over their community-based care and services. Individuals’ needs are met by providing reasonable accommodations in their communities, and not by moving to a more restrictive setting.

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The Ten Commandments Of Communicating With People With Disabilities

1) Speak directly rather than through a companion or sign language interpreter who may be present.
2) Offer to shake hands when introduced. People with limited hand use or an artificial limb can usually shake hands and offering the left hand is acceptable greeting.
3) Always identify yourself and others who may be with you when meeting someone with a visual disability. When conversing in a group, remember to identify the person to whom you are speaking.
   • When dining with a friend, who has a visual disability, ask if you can describe what is on his or her plate.
4) If you offer assistance, wait until the offer is accepted. Then listen or ask for instructions.
5) Treat adults as adults. Address people with disabilities by their first names only when extending the same familiarity to all others. Never patronize people in wheelchairs by patting them on the head or shoulder.
6) Do not lean against or place your hand on someone’s wheelchair. Bear in mind that people with disabilities treat their chairs as extensions of their bodies.
7) Listen attentively when talking with people who have difficulty speaking and wait for them to finish. If necessary, ask short questions that require short answers, or a nod of the head. Never pretend to understand; instead repeat what you have understood and allow the person to respond.
8) Place yourself at eye level when speaking with someone in a wheelchair or on crutches.
9) Tap a person who has a hearing disability on the shoulder or wave your hand to get his or her attention. Look directly at the person and speak clearly, slowly, and expressively to establish if the person can read your lips. If so, try to face the light source and keep hands, and food away from your mouth when speaking.
   • If a person is wearing a hearing aid, don’t assume that they have the ability to discriminate your speaking voice.
   • Never shout at a person. Just speak in a normal tone of voice.
10) Relax. Don’t be embarrassed if you happen to use common expressions such as “See you Later” or “Did you hear about this?” that seem to relate to a person’s disability.

For more information please go to:
http://www.disabilitytraining.com

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Disability Rights In Housing
Definition of Disability: Federal laws define a person with a disability as "Any person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such an impairment."

In general, a physical or mental impairment includes hearing, mobility and visual impairments, chronic alcoholism, chronic mental illness, AIDS, AIDS Related Complex, and mental retardation that substantially limits one or more major life activities. Major life activities include walking, talking, hearing, seeing, breathing, learning, performing manual tasks, and caring for oneself.

Disability Rights in Private and Public Housing: Regardless of whether you live in private or public housing, Federal laws provide the following rights to persons with disabilities:

Prohibits discrimination against persons with disabilities. It is unlawful for a housing provider to refuse to rent or sell to a person simply because of a disability. A housing provider may not impose different application or
qualification criteria or sales terms or conditions than those required of or provided to persons who are not disabled.

Example: A housing provider may not refuse to rent to an otherwise qualified individual with a mental disability because s/he is uncomfortable with the individual’s disability. Such an act would violate the Fair Housing Act because it denies a person housing solely on the basis of their disability.

Requires housing providers to make reasonable accommodations for persons with disabilities. A reasonable accommodation is a change in rules, policies, practices, or services so that a person with a disability will have an equal opportunity to use and enjoy a dwelling unit or common space. A housing provider should do everything s/he can to assist, but s/he is not required to make changes that would fundamentally alter the program or create an undue financial and administrative burden. Reasonable accommodations may be necessary at all stages of the housing process, including application, tenancy, or to prevent eviction.

Example: A housing provider would make a reasonable accommodation for a tenant with mobility impairment by fulfilling the tenant’s request for a reserved parking space in front of the entrance to their unit, even though all parking is unreserved.
Requires housing providers to allow persons with disabilities to make reasonable modifications. A reasonable modification is a structural modification that is made to allow persons with disabilities the full enjoyment of the housing and related facilities.

Examples of a reasonable modification would include allowing a person with a disability to: install a ramp into a building, lower the entry threshold of a unit, or install grab bars in a bathroom.

Reasonable modifications are usually made at the resident’s expense. However, there are resources available for helping fund building modifications. Additionally, if you live in Federally assisted housing the housing provider may be required to pay for the modification if it does not amount to an undue financial and administrative burden.

Requires that new covered multifamily housing be designed and constructed to be accessible. In covered multifamily housing consisting of 4 or more units with an assisted occupancy after March 13, 1991, all elevators built for first occupancy must comply with the following seven design and construction requirements of the Fair Housing Act:

- Accessible Entrance on an Accessible Route
- Accessible Public and Common-Use Areas
- Usable Doors
- Accessible Route Into and Through the Dwelling Unit
Accessible Light Switches, Electrical Outlets, Thermostats, and Environmental Controls
Reinforced Walls in Bathrooms
Usable Kitchens and Bathrooms

In covered multifamily housing without an elevator that consists of 4 or more units built for first occupancy after March 13, 1991, all ground floor units must comply with the Fair Housing Act seven design and construction requirements.

For information on how to comply with the physical accessibility requirements of the Fair Housing Act, visit the Fair Housing Accessibility FIRSTWeb site.

These requirements apply to most public and private housing. However, there are limited exemptions for owner-occupied buildings with no more than four units, single-family housing sold or rented without the use of a broker, and housing operated by organizations and private clubs that limit occupancy to members.

If you live in Federally assisted multifamily housing consisting of 5 or more units, 5 percent of these units (or at least one unit whichever is greater) must meet more stringent physical accessibility requirements. Additionally, 2 percent of units (or at least one unit whichever is greater) must be accessible for persons with visual or hearing disabilities.
People with Disabilities in Federally Assisted Housing:

Federal law makes it illegal for an otherwise qualified individual with a disability to be excluded, solely because of his or her disability, from programs receiving federal financial assistance.

Zoning and Land Use:

It is unlawful for local governments to utilize land use and zoning policies to keep persons with disabilities from locating to their area.

State and Local Laws:

Many states and localities have fair housing laws that are substantially equivalent to the Federal Fair Housing Act. Some of these laws prohibit discrimination on additional bases, such as source of income or marital status. Some of these laws may impose more stringent design and construction standards for new multifamily housing.

The Americans with Disabilities Act:

In most cases, the ADA does not apply to residential housing. Rather, the ADA applies to places of public accommodation such as restaurants, retail stores, libraries, and hospitals as well as warehouses, commercial facilities such as office buildings and factories. However, Title III of the ADA covers public and common use areas at housing developments when these public areas are, by their nature, open to the general public. For example, it covers the rental office since the rental office is open to the general public.
Title II of the ADA applies to all programs, services, and activities provided or made available by public entities. This includes housing when the housing is provided or made available by a public entity. For example, housing covered by Title II of the ADA includes public housing authorities that meet the ADA definition of “public entity,” and housing operated by States or units of local government, such as housing on a State university campus.

For more information on the Americans with Disabilities Act, visit the Department of Justice ADA Home Page Article from the U.S. Department of Housing and Urban Development Website

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Worldwide, CSL employs more than 19,000. The Kankakee site is celebrating its 65th anniversary this year and currently employs more than 1,500 people in the area. As the county’s top manufacturing employer CSL Behring’s Kankakee site provides plasma-based therapies to treat coagulation disorders, primary immune deficiencies, trauma, shock and burns, in addition to filling and packaging of sister company, Seqirus’, seasonal influenza vaccine for distribution in the U.S.

CSL Behring recently announced it is expanding its Kankakee manufacturing facility by 1.8 million square-feet to better serve its patients around the world. This significant investment could turn out to be the single largest investment ever to an existing business in Kankakee County. The expanded campus includes 74 acres adjacent to the current site, expanding the footprint for CSL Behring to 138 acres. The expansion is known as CSL South.

The world-class biotech facility is scheduled for completion after 2030 and is just one of several planned expansion projects at CSL Behring sites around the globe. CSL Behring is proud to support the communities in which we live and work. We are proud of and support the work Options does to help individuals with disabilities remain independent and participate fully in society.
For more than a century, CSL has earned a reputation as a passionate, yet responsible organization driven to care for its patients. We look forward to a bright future for our patients, our stakeholders, and the communities where we live and work.

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If you think you may be eligible for benefits through the Department of Veterans Affairs benefits or through a need-based donation program, please contact Liftware at support@liftware.com for more information. Be sure to note whether you experience hand tremor or limited hand and arm mobility.

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User Manual To Digital Citizenship When You Have A Disability
By Heather Long
We live in a society that relies heavily on the internet. There is virtually no way around using the internet and more importantly, social media. Many school districts, employers and businesses use social media as a platform to connect with their audiences. So essentially, if you avoid social media you can not only miss out on important information but the potential to make friends.

This is the case for students with disabilities. They don’t want to be left out from the social media craze nor do their parents, but it can be a very scary place that can get a young person with a disability in trouble if they do not handle their actions appropriately. In the past, especially with young people who have Autism, ADHD, Social Anxiety or learning disabilities, we worried about bullying and inappropriate behavior, but typically these actions were ones that could be seen by parents, teachers or friends. The behavior could be stopped before it escalated. With young people moving to the digital world for socializing and interacting, the inappropriate behavior and bullying has moved to the digital world as well. In fact the term cyber bullying came about because of bullying online.

It is important to teach all young people proper internet safety and etiquette but even more crucial to teach a young person with a cognitive disability these important lessons. Any young person may inadvertently develop a friendship online if someone is friendly with them. Someone who asks superficial questions of them like their
hobbies, what movies they like, what their house is like, etc. A young person with a cognitive disability might not recognize when a seemingly friendly person asks inappropriate questions like their real name, street address, phone number, etc.

The online world can be a much safer and easier place for them to make friends. It is true that the cyber world can help those who struggle with social interactions learn how to interact and make friends. It gives them the opportunity to try different things in what they perceive is a safe place, but it is important for them to know how to make social media a safe place.

How do we do that?
To answer that question, there are a few things parents and educators can teach their young person about being on the internet.

- First, continuously remind them that the internet is not private and there really is no way to erase something once it has been put online.
- Make a list of concrete questions or actions they should never do or answer if it is from someone they have only met online. Make sure that list is somewhere the young person can see even while they are using the computer.
- Encourage them to use social media sites that you know are being constantly monitored for inappropriate behavior. SpecialFriends.com is a social media site that is specifically for people with disabilities and is monitored around the clock for
inappropriate behavior.

- Lastly, teach them how to appropriately handle any inappropriate behavior they may encounter. Make another list of steps they must take when they encounter bullying. How they should conduct themselves, what not to do (ie threaten the person or use profane language) and who and how they appropriately report the behavior.

The cyber world can be a scary place, and it could be easier to just prohibit a young person with a disability from the internet, but the internet can be such a great place to make friends and gain new information. Instead it is important to stay involved in their daily lives and teach them how to be safe, so they can equally reap the benefits of the online world. (Powering up What Works, 2014; pg 2)

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Seven Of The Best Apps For People With Disabilities
A collection of ground-breaking apps that use modern technology to help people with disabilities around the world

We all have our challenges in life - physical, mental and emotional. Some are bigger, some are smaller, and some need more assistance than others to overcome. These seven apps use modern technology to enrich the lives of
people with disabilities - from creative aids for the blind and deaf to new ways to make life more manageable for people with autism spectrum disorders and speech disabilities.

1. THE APP THAT GIVES A VOICE TO PEOPLE WITH SPEECH DISORDER
THE APP: Talkitt

WHO IT HELPS: People with motor, speech and language disorders including but not limited to Amyotrophic Lateral Sclerosis (ALS), Cerebral Palsy, stroke, brain damage, Sclerosis (ALS), Cerebral Palsy, stroke, autism and Parkinson’s disease.

WHAT IT DOES: The Talkitt app translates unintelligible pronunciation into understandable speech, allowing people to communicate using their own voice. The technology behind the app is brilliant - by recognizing each individual user's vocal patterns, it “speaks” their words in a coherent manner - thus allowing them to communicate clearly and easily. Even more amazing? The program works in every language.

2. THE APP THAT GIVES EYES TO THE BLIND
THE APP: Be My Eyes

WHO IT HELPS: People who are blind or visually impaired.
WHAT IT DOES: Be My Eyes connects blind people who need assistance with sighted volunteers who want to help out via a direct video connection. Currently available for iPhone and coming soon for Android, the app can be used in a variety of situations - for example, a blind person might need help checking the expiration date on a milk carton, or making their way around new surroundings. They enter a request for assistance and the volunteer gets a notification that the blind person could use some help. Arguably the best app for blind people, there are currently over 90,000 sighted volunteers active on Be My Eyes, and some 7,000 blind people using the app.

3. THE APP WITH NO WORDS THAT SPEAKS TO AUTISTIC CHILDREN
THE APP: Avaz

WHO IT HELPS: Children with autism spectrum disorders, Downs Syndrome, Angelman’s Syndrome, Cerebral Palsy, and other speech disabilities.

WHAT IT DOES: This Australian app enables children with autism to “speak” using pictures autism and other disorder variety of situations. For example, the app can be used in day basis to develop language, and to stimulate and improve the intent to communicate. The app uses picture symbols and high verbal users create quality voice synthesis to help non messages and improve language skills. The cherry on top
is a powerful keyboard that helps users transitioning to growing with the child as he or she develops text

4. THE APP THAT PUTS CAPTIONS ON PHONE CALLS
THE APP: RogerVoice

WHO IT HELPS: People who are deaf and hearing impaired

WHAT IT DOES: RogerVoice uses voice recognition to convert voice to text, so deaf people can “hear” phone calls by reading.

5. THE APP THAT IMPROVES EYE CONTACT AND COMMUNICATION
THE APP: LOOK AT ME

WHO IT HELPS: Autistic children

WHAT IT DOES: Designed to improve socialization skills for autistic children, Samsung’s LOOK AT ME app gamifies interactions, helping users learn to read moods, press themselves with facial remember faces, and ex expressions and poses. A test group found that playing week the game for just 15 minutes per day for an eight period can bring about a 60% improvement in making eye definitely one contact and identifying facial expressions the best apps to use modern technology to change of interpersonal communication
6. THE APP THAT AMPLIFIES SOUNDS
THE APP: HearYouNow

WHO IT HELPS: People with hearing difficulties who don’t use a hearing aid.

WHAT IT DOES: Intended for use in public settings such as restaurants, meetings and parties as well as watching TV or listening to radio, the HearYouNow app customizes sound performance depending on the user’s specific needs. By attaching headphones to a digital device, sound is controlled and amplified per ear, with three frequency bands tuned towards speech understanding and the option to optimize foreground or background sounds. Developed by ExSilent, a Dutch manufacturer of hearing aids, the app is intended for people who could use a hearing aid but aren’t quite ready for one - saving them from repeatedly having to ask “what was that?”

7. THE APP THAT SIMPLIFIES DAILY ROUTINES INTO PICTURES
THE APP: Stepping Stones

WHO IT HELPS: Children and adults who benefit from visual support, including those with developmental disabilities such as Autism, attention or auditory processing deficits, learning disabilities, or anxiety.
WHAT IT DOES: This simple app allows users to create visual guides - or ‘paths’ - using their own photos, so as to make sense of daily routines and schedules or stories. These visual supports help to increase the independence and flexibility that people with developmental disabilities can experience in their lives, as well as teaching essential life skills and assisting with sequential processing.

https://www.goodnet.org/articles/7-best-apps-for-people-disabilities-list

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Testing Accommodations
Standardized examinations and other high-stakes tests are gateways to educational and employment opportunities. Whether seeking admission to a high school, college, or graduate program, or attempting to obtain a professional license or certification for a trade, it is difficult to achieve such goals without sitting for some kind of standardized exam or high-stakes test. While many testing entities have made efforts to ensure equal opportunity for individuals with disabilities, the Department continues to receive questions and complaints relating to excessive and burdensome documentation demands,
failures to provide needed testing accommodations, and failures to respond to requests for testing accommodations in a timely manner.

The Americans with Disabilities Act (ADA) ensures that individuals with disabilities have the opportunity to fairly compete for and pursue such opportunities by requiring testing entities to offer exams in a manner accessible to persons with disabilities. When needed testing accommodations are provided, test-takers can demonstrate their true aptitude.

The Department of Justice (Department) published revised final regulations implementing the ADA for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010. These rules clarify and refine issues that have arisen over the past 20 years and contain new and updated requirements.

What Are Testing Accommodations?
Testing accommodations are changes to the regular testing environment and auxiliary aids and services that allow individuals with disabilities to demonstrate their true aptitude or achievement level on standardized exams or other high-stakes tests. Examples of the wide range of testing accommodations that may be required include:

- Braille or large-print exam booklets;
- Screen reading technology;
- Scribes to transfer answers to Scantron bubble sheets or record dictated notes and essays;
- Extended time;
• Wheelchair-accessible testing stations;
• Distraction-free rooms;
• Physical prompts (such as for individuals with hearing impairments); and
• Permission to bring and take medications during the exam (for example, for individuals with diabetes who must monitor their blood sugar and administer insulin).

Who Is Eligible To Receive Testing Accommodations?
Individuals with disabilities are eligible to receive necessary testing accommodations. Under the ADA, an individual with a disability is a person who has a physical or mental impairment that substantially limits a major life activity (such as seeing, hearing, learning, reading, concentrating, or thinking) or a major bodily function (such as the neurological, endocrine, or digestive system). The determination of whether an individual has a disability generally should not demand extensive analysis and must be made without regard to any positive effects of measures such as medication, medical supplies or equipment, low-vision devices (other than ordinary eyeglasses or contact lenses), prosthetics, hearing aids and cochlear implants, or mobility devices. However, negative effects, such as side effects of medication or burdens associated with following a particular treatment regimen, may be considered when determining whether an individual’s impairment substantially limits a major life activity.

A substantial limitation of a major life activity may be based on the extent to which the impairment affects the
condition, manner, or duration in which the individual performs the major life activity. To be “substantially limited” in a major life activity does not require that the person be unable to perform the activity. In determining whether an individual is substantially limited in a major life activity, it may be useful to consider, when compared to most people in the general population, the conditions under which the individual performs the activity or the manner in which the activity is performed. It may also be useful to consider the length of time an individual can perform a major life activity or the length of time it takes an individual to perform a major life activity, as compared to most people in the general population. For example:

- The condition or manner under which an individual who has had a hand amputated performs manual tasks may be more cumbersome, or require more effort or time, than the way most people in the general population would perform the same tasks.
- The condition or manner under which someone with coronary artery disease performs the major life activity of walking would be substantially limited if the individual experiences shortness of breath and fatigue when walking distances that most people could walk without experiencing such effects.
- A person whose back or leg impairment precludes him or her from sitting for more than two hours without significant pain would be substantially limited in sitting, because most people can sit for more than two hours without significant pain.
A person with a history of academic success may still be a person with a disability who is entitled to testing accommodations under the ADA. A history of academic success does not mean that a person does not have a disability that requires testing accommodations. For example, someone with a learning disability may achieve a high level of academic success, but may nevertheless be substantially limited in one or more of the major life activities of reading, writing, speaking, or learning, because of the additional time or effort he or she must spend to read, write, speak, or learn compared to most people in the general population.

For more information please go to the ADA Website at www.ADA.gov

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How To Keep Diabetes From Affecting Your Hearing And Your Health
By Neil Bauman, PH.D.

It is no secret that diabetes causes hearing loss in numbers of people with this condition. In fact, hearing loss among diabetics is more than twice that of those without diabetes. Studies show that one in three people with diabetes will have trouble with their hearing because of damage to their inner ears from elevated blood glucose levels.

This holds true for all severities of hearing loss and for all audible sound frequencies. In a large study of people ages 20-69, researchers found a strong association between diabetes and hearing problems. Hearing loss was found as early as age 30. Therefore, if you have diabetes or pre-diabetes, you have to act fast if you want the best chance of preserving your hearing.
Diabetes can affect your hearing in several ways. Here are two main ones:

1. The blood vessels in your inner ears are tiny. When your blood sugar levels are high, your blood thickens and is more the consistency of syrup. This makes it difficult to get much blood (and oxygen) through the tiny capillaries in your cochlea. This lack of adequate oxygen to the hair cells (and other structures) results in loss of hearing.

2. When your blood sugar rises, there is a breakdown of the nerves in your inner ears. The results in sensorineural (inner ear) hearing loss. Specifically, high blood glucose levels can damage the vessels in the stria vascularis and the nerves that control the inner workings of your cochlea. That’s the bad news.

The good news is that you do not have to let Type 2 diabetes destroy your hearing or your health. You can take control and do something about it. This is because Type 2 diabetes is a nutritional disease. Since you have total control over what you put in your mouth, you can choose to change your diet to one that will get your diabetes under control, and ultimately get rid of your Type 2 diabetes altogether.
To learn what you need to know about your diabetes and how you can take control of it, you won’t do better than reading Dr. Mercola’s introductory article on diabetes at: http://www.mercola.com/diabetes.aspx

Once you have read that article I suggest you read another of his articles at:
https://www.articles.mercola.com/sites/articles/archive/2016/05/16/tips-to-prevent-diabetes.aspx
(or https://tinyurl.com/ybbe2pme if the preceding link is broken)

(Note: there are thousands of other articles on Dr. Mercola’s website that will teach you much more about how to have and maintain good health.)

Once you have read these two articles, you will know the basics of how you can take control of your diabetes, maintain good control of your blood sugar, and in the process, preserve your hearing and your health.

Now comes the hard part - mustering up your will-power to follow through.

My advise: just do it!

The permanent link for this article is on the Center’s website at
http://hearinglosshelp.com/blog/how-to-keep-diabetes-from-affecting-your-hearing-and-your-health/
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**River Valley Metro Mass Transit District**
What is it, and what do they do?

River Valley Metro Mass Transit District is a public service agency that offers three types of bus services for the residents of Kankakee County.

1. Traditional, or “fixed route”, bus service in the urbanized area of Kankakee County. This includes Aroma Park, Kankakee, Bradley, Bourbonnais and Manteno.

2. Commuter shuttle service to Midway Airport and to the Metra train station at University Park.

3. Service for individuals with disabilities who are unable to independently use fixed route service. This is referred to
as Metro Plus service.

Fixed route buses serve more than 350 bus stops from 5:00 am to 9:30 pm Monday through Friday, 7:00 am to 9:30 pm on Saturdays, and 8:00 am to 4:00 pm on Sundays and major holidays. Most stops are served once each hour, but a few are served every half hour. All buses are wheelchair accessible. Fare is $1.00 per trip.

The University Park Metra train station commuter shuttle departs from the Metro Centre in Bourbonnais and makes one stop in Manteno. The morning schedule is coordinated with trains departing from University Park, and the afternoon/evening schedule is coordinated with trains arriving at University Park. Fare is $2.00 each way.

The Midway Airport shuttle also departs from the Metro Centre in Bourbonnais and makes one stop in Manteno. It then runs non-stop to the public transportation hub at Midway Airport. Free parking is available at both the Bourbonnais and the Manteno departure points. Fare is $2.00 each way.

Metro Plus service requires pre-qualification and operates by appointment. Metro Plus buses will pick you up at your home and take you to your destination. This is a shared ride service, meaning that multiple individuals’ trips are grouped together in an effort to meet all trip requests and improve efficiency. Ride time on Metro Plus is comparable to travel time on the fixed route system, including transfers and wait times. Fare is $2.00 each way.
Additional details about each of these services are available at RiverValleyMetro.com or by calling 815-937-4287.

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Service Animals (Including Emotional Support)
Animals)
Under the Air Carrier Access Act (ACAA) a service animal is any animal that is individually trained or able to provide assistance to a person with a disability; or any animal that assists persons with disabilities by providing emotional support. Documentation may be required of passengers needing to travel with an emotional support or psychiatric service animal.

Things to Know
Which service animals are allowed in the cabin?
A wide variety of service animals are permitted in the cabin portion of the aircraft flying to and within the United States; however, most service animals tend to be dogs and cats. Airlines may exclude animals that:
• Are too large or heavy to be accommodated in the cabin;
• Pose a direct threat to the health or safety of others;
• Cause a significant disruption of cabin service; or
• Are prohibited from entering a foreign country.
Note: Airlines are never required to accept snakes, reptiles, ferrets, rodents, sugar gliders, and spiders.

How do airlines determine whether an animal is a service animal?
Airlines can determine whether an animal is a service animal or pet by:
• The credible verbal assurances of an individual with a disability using the animal;
• Looking for physical indicators such as the presence of a harness or tags;
• Requiring documentation for psychiatric support animals and emotional support animals; and
• Observing the behavior of animals.

Emotional Support and Psychiatric Service Animals
Airlines can request specific documentation and/or 48-hours advanced notice for service animals that are emotional support animals and psychiatric service animals.

What kind of documentation can be required of persons travelling with emotional support animals and psychiatric service animals?
Airlines may require documentation that is not older than one year from the date of your scheduled initial flight that states:
• You have a mental or emotional disability that is recognized in the Diagnostic and Statistical Manual of Mental Disorders (DSM);
• You need your emotional support or psychiatric support animal as an accommodation for air travel and/or for activity at your destination;
The individual providing the assessment is a licensed mental health professional and the passenger is under his/her professional care; and

The licensed health care professional’s Date and type of professional license; and Jurisdiction or state in which their license was issued.

Tips for Traveling with a Service Animal
At the airport

• If your animal needs to relieve itself, please ask an airport or airline professional for the location of the nearest service animal relief areas.

Onboard the aircraft

• Your animal must be permitted to accompany you in the space under the seat in front of you.
• Certain small animals may be permitted to sit on your lap, if it can be done so safely.
• Your animal cannot block a space that must remain unobstructed for safety reasons (ex. an aisle or access to an emergency exit).
• An airline is not required to upgrade you to a different class of service to accommodate your animal.
• Airlines cannot refuse to allow your animal onboard because it makes other passengers or flight crew uncomfortable.
• Your animal must behave properly. An animal that engages in disruptive behavior (ex. barking or snarling, running around, and/or jumping onto other passengers, etc. without being provoked) will not be accepted as a service animal.

• For a flight that is scheduled for eight hours or longer, airlines may require documentation stating that your animal will not need to relieve itself, or can do so in a sanitary way.

Traveling outside of the United States?
Here are a few things to keep in mind if you’re planning to fly outside of the United States with your service animal.

• Foreign airlines operating to and from the United States are only required to accept dogs.

• U.S. airlines traveling to foreign countries are subject to the requirements of that foreign country regarding acceptance of service animals; not all countries permit service animals from other foreign countries.

• Check to ensure whether your destination country permits your animal and any other requirements to enter and exit legally.

Encounter A Problem?
If you believe your rights under the Air Carrier Access Act are being or have been violated, ask to speak with a Complaints Resolution Official (CRO). A CRO is the airline’s expert on disability accommodation issues. Airlines are required to make one available to you, at no
cost, in person at the airport or by telephone during the times they are operating.

Updated: Tuesday, March 20, 2018

For more information go to www.transportation.gov

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What Are Anxiety Disorders?
Anxiety is a normal reaction to stress and can be beneficial in some situations. It can alert us to dangers and help us prepare and pay attention. Anxiety disorders differ from normal feelings of nervousness or anxiousness, and involve excessive fear or anxiety. Anxiety disorders are the most common of mental disorders and affect nearly 30 percent of adults at some point in their lives. But anxiety disorders are treatable and a number of effective treatments are available. Treatment helps most people lead normal productive lives.

Anxiety refers to anticipation of a future concern and is more associated with muscle tension and avoidance behavior.

Fear is an emotional response to an immediate threat and is more associated with a fight or flight reaction – either staying to fight or leaving to escape danger.

Anxiety disorders can cause people to try to avoid situations that trigger or worsen their symptoms. Job
performance, school work and personal relationships can be affected.

In general, for a person to be diagnosed with an anxiety disorder, the fear or anxiety must:

- Be out of proportion to the situation or age inappropriate
- Hinder your ability to function normally

There are several types of anxiety disorders, including generalized anxiety disorder, panic disorder, specific phobias, agoraphobia, social anxiety disorder and separation anxiety disorder.

Risk Factors
The causes of anxiety disorders are currently unknown but likely involve a combination of factors including genetic, environmental, psychological and developmental. Anxiety disorders can run in families, suggesting that a combination of genes and environmental stresses can produce the disorders.

Diagnosis and Treatment
The first step is to see your doctor to make sure there is no physical problem causing the symptoms. If an anxiety disorder is diagnosed, a mental health professional can work with you on the best treatment. Unfortunately, many people with anxiety disorders don’t seek help. They don’t realize that they have an illness that has effective treatments.
Although each anxiety disorder has unique characteristics, most respond well to two types of treatment: psychotherapy, or “talk therapy,” and medications. These treatments can be given alone or in combination. Cognitive behavior therapy (CBT), a type of talk therapy, can help a person learn a different way of thinking, reacting and behaving to help feel less anxious. Medications will not cure anxiety disorders, but can give significant relief from symptoms. The most commonly used medications are anti-anxiety medications (generally prescribed only for a short period of time) and antidepressants. Beta-blockers, used for heart conditions, are sometimes used to control physical symptoms of anxiety.

For more information please go to https://www.psychiatry.org/patients-families/anxiety-disorders/

Your Right To Accessible Health Care
People with disabilities have a right to accessible health care under federal, state and local laws. The most important federal laws governing equal access are the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 (Section 504).

Each law applies to a different health care setting:
  • Section 504 applies to medical providers that receive federal financial assistance.
• Title II of the ADA applies to public hospitals, clinics, and medical offices operated by state and local government entities.
• Title III of the ADA applies to private hospitals and medical offices.

Under these laws, you are considered an individual with a disability if you have a physical or mental impairment that substantially limits a major life activity, have a record of such impairment, or are regarded as having such impairment. Major life activities include, but are not limited to: seeing, hearing, walking, working, and major bodily functions.

The ADA and Section 504 require medical providers to ensure that people with disabilities have access to equivalent services as other patients. As a result, to be considered fully accessible and comply with federal law, a health care provider must provide structural access into and throughout a facility, accessible equipment, and be willing to provide reasonable accommodations and auxiliary aids to people with disabilities.

These laws are designed to prohibit discrimination against people with disabilities due to a lack of accessibility. However, they do not require a health care provider to provide services that would be a fundamental alteration to the services they normally provide.

For example, while a doctor’s office must allow a person with a disability to enter with their service animal, the
provider is not obligated to provide a service animal to someone who needs one.

A. STRUCTURAL ACCESS
Structural access refers to the physical accessibility of a medical facility itself. Under federal law, all health care services must be available to individuals with disabilities in an accessible facility. In order for a facility to be considered accessible, it must, at a minimum, meet the following criteria:

- Routes into and throughout facilities are flat and wide enough to provide maneuvering clearance;
- Counters are low enough for individuals to interact with receptionists and other medical personnel;
- Doors are wide enough and light enough to navigate;
- Restrooms are fully accessible with items low enough to be easily accessed, grab bars properly installed, and sufficient floor clearance; and
- Examination rooms are large enough to accommodate service animals, wheelchairs, or other assistive devices.

B. ACCESSIBLE MEDICAL EQUIPMENT
Accessible medical equipment refers to the usability of the equipment itself. Denying service to a patient with a disability because of a lack of appropriate equipment is a form of discrimination. Medical facilities need to provide accessible equipment and have staff trained on how to use the equipment to properly assist patients with
disabilities. Some examples of accessible medical equipment include:
  • Examination tables low enough to facilitate patient transfer;
  • Adequate supports;
  • Weight scales that are flat with a large base;
  • The availability of lifts; and
  • Specialized equipment, such as mammography equipment that is height adjustable.

C. REASONABLE MODIFICATIONS AND THE PROVISION OF AUXILIARY AIDS
Reasonable modifications are changes in a facility’s policies, practices, or procedures that ensure equal access for individuals with disabilities in all aspects of medical care.

Reasonable modifications in the health care setting may include:
  • Allowing a service animal in the facility;
  • Providing extra assistance in filling out forms; and
  • Allowing a patient to bring an assistant or family member into the examination room.

Auxiliary aids are services provided to ensure that a person with a disability is not excluded or otherwise treated differently. They include possession and usage of specialized equipment and are most often needed to facilitate effective communication.
The following are examples of auxiliary aids in the health care setting:

- Providing forms in alternative formats, such as large print materials;
- Assisting with alternatives to verbal communication during an appointment, such as providing an American Sign Language interpreter; and
- Use of a telecommunications relay service for scheduling appointments.

The law does not require modifications or auxiliary aids that would result in an undue burden or in a fundamental alteration in the nature of the goods or services provided by a public accommodation. An undue burden is when a modification or auxiliary aid can only be provided with significant difficulty or expense. A fundamental alteration is a modification that is so substantial that it alters the nature of the goods, services, facilities, privileges, advantages, or accommodations offered. These limitations are derived from existing regulations and case law, and are determined on a case-by-case basis.

Note: Article is from the Accessible Health Care Self Advocacy Toolkit from The Equal Right Center. www.equalrightscenter.org for more information

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For more information, visit riversidehealthcare.org.

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