



People with Speech Disabilities Have Accessibility Requirements, Too

Businesses should consider how to make their stores hospitable to speech-disabled patrons

There are 56.7 million people with disabilities in the United States, reflecting nearly 20 percent of the population, according to the 2010 Census.

At least 77 million people in the U.S. 18 years and older have difficulty with at least one basic action or have a complex activity limitation as reported by the Centers for Disease Control.

More than 85 percent of people who have disabilities were born able-bodied.

Disability is the one minority group anyone can join.

Recently, a notification bill, HR 620, was passed in the United States House of Representatives. It is now in the U.S. Senate. If passed, HR 620 would eviscerate enforcement of the part of the Americans with Disabilities Act (ADA) that prohibits discrimination against people with disabilities in places of public accommodations. The result is that there would be no penalty to the business for non-compliance as long as it claimed it was making substantial progress toward removing the barrier, even if it never removed the barrier.

So movie theaters, gas stations, and bowling alleys would no longer have to comply with this part of the ADA. Neither would medical facilities, or restaurants. People who have been discriminated against on the basis of disability—if, for instance, a doorway is too narrow for wheelchair users to enter a building's entrance or its restroom—would have to jump through onerous hoops before being able to enforce their rights. Rights that have been on the books for nearly 30 years.

No other civil rights law has this requirement.

For perspective, had the Civil Rights Act been law in 1955 and had it included a notification requirement, Rosa Parks would have had to write a letter to the bus company before enforcing her rights.

HR 620 would change the law regarding architectural barriers, so the ramifications to the speech recognition industry would be attenuated. But what if we could use this as an opportunity to improve accessibility for people with communication impairments, even absent government mandate?

There would be two avenues for opportunity:

1. Augmentative and alternative communication (AAC) in places of public accommodations; and
2. AAC apps on phones

When we're thinking about how to interact with someone who has a communication impairment, we need to be mindful of the following:

- Speech—Utterances; how an individual forms/says words. Communication or expression of thoughts in spoken language.
- Cognition—Mental processes that involve conscious intellectual activity, such as thinking, reasoning, or remembering.

- Language—The words, their pronunciation, and the methods of combining them, as used and understood by the community.

Shifting the Paradigm of Disability

One of the problems endemic to the disability conversation is the pictures in peoples' heads of what disability looks like. Close your eyes. What images come to mind? Wheelchairs? People who are blind? People who use ventilators to breathe? Who require the care of an attendant? People perceived as trying to game the system?

Disability includes all of those people. But that's not the whole picture.

It includes people who "look fine." People with chronic pain, nerve damage, medical conditions like arthritis or heart or lung disease, or people dealing with the effects of chemotherapy. It includes our veterans, who are coming home missing limbs with traumatic brain injury or PTSD; more than 4 million people with disabilities are veterans with service-connected disabilities.

For our purposes, let's explore issues that individuals on the autism spectrum or with brain injury might encounter. These individuals often have sensory disabilities. Noise, light, and movement can be overwhelming, even debilitating.

Imagine someone who is high-functioning but has a traumatic or acquired brain injury and may have some difficulty speaking or word-finding, but is still able to communicate effectively on her own. However, when faced with cognitive overload, let's say from overstimulation in a retail store—the lights are bright, the music is loud, the elevators are beeping, the air-conditioning is whirring, people are talking as they rustle by—she may be unable to speak or communicate effectively.

If there was a basic assistive technology device at the store that employees knew how to use, perhaps people with traumatic or acquired brain injuries could use the device to communicate and conduct their business. The device would have to be basic enough that it would not increase cognitive load and that the employee could easily describe it to and use with the individual. Realistically, a picture board might be most effective.

It's a scenario Barry Romich, board chair at Prentke Romich Company, has never encountered, but he can imagine the possibilities. And the numbers are compelling.

I'll tell you about them in my next column. ☒

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