

Do you know how to help people who are blind, deafblind or partially sighted?

Patients and clients who are blind, deafblind or partially sighted have different needs.

The Halifax Chapter of the Alliance for Equality of Blind Canadians offers some suggestions in this pamphlet.

Do you know how to help people who are blind, deafblind or partially sighted?

A few facts:

- Legal blindness means worse than or equal to 20/200 with best correction in the better eye or a visual field extent of less than 20 degrees in diameter. Everyone will have different needs.
- Blind, deafblind and partially sighted people are from all cultures and backgrounds. They have different levels of mobility and independence.
- Some people who are blind, deafblind or partially sighted may have other disabilities that affect the level of help they need.
- There are several types of aids used by people who are blind, deafblind or partially sighted. These include:
 - › Long white cane
 - › Shorter white ID cane
 - › White support cane
 - › Walker
 - › Wheelchair
 - › Guide dog

- A deafblind person will usually attend appointments with an “intervener” to facilitate communication. If a person who is deafblind becomes separated from his or her intervener in an emergency, you can try to alert him or her by drawing a big ‘X’ with your finger on his or her back. The deafblind person will then let you take him or her to safety. If the person does not understand, he or she may be carrying identification that might have a phone number for the intervener’s agency.

How do I help?

Ask. When you see a person who is blind, deafblind or partially sighted, identify yourself as an employee, doctor or volunteer. Offer help. The person may or may not need it.

If the person wants help:

- Ask **HOW** you can help. The person will tell you how you can best help. He or she might ask you to act as a sighted guide and will tell you which of your arms he or she prefers to take (or you can ask). The person may only need directions. If he or she has a guide dog, they might instruct the dog to “follow” you to where they need to go.

- Be specific when giving directions. For example, “The elevator is down this hall on the left. Go straight for 10 metres. Do you want me to go with you?”
- Do not touch guide dogs. These dogs are working and need to concentrate. Do not talk to the dog or attract its attention by calling, waving or offering food. Avoid eye contact with the dog. Speak to the handler. Never touch the harness. If the handler wants help, he or she will follow you or take your arm and hold the dog’s leash. Please alert the person if there is another service dog nearby.
- If the blind, deafblind or partially sighted person has a sighted companion, be sure to address the blind person directly.

Appropriate actions and words

- Introduce yourself to the blind, deafblind or partially sighted person and explain your role. Please keep in mind that the person may not recognize your voice after the first meeting. Re-introduce yourself.
- If you are a health care provider and are about to perform a procedure or examination with a blind, deafblind or partially sighted patient, explain what you are going to do before you touch him or her.

- If you are a health care provider, support staff member or volunteer, you should alert a blind, deafblind or partially sighted patient when you enter the room. If you are leaving, make sure you tell the person before you walk away.
- Use a normal tone of voice when speaking to someone who is blind, deafblind or partially sighted. There is no need to speak loudly or slowly.
- It is helpful to tap a seat and say, “Here’s the chair.” Similarly, you can tap to indicate counters, tables, beds, etc.
- People who are blind or partially sighted can get disoriented in a new setting, particularly if the area is crowded or noisy. This is unpleasant and confusing. Help the person to find a seat or a wall that can be a reference point.
- It is likely that the person can’t see the writing on the paper you hand him or her. Offer to read it. Think of how he or she will know it is their turn at the booking desk or how to provide the appointment information in an accessible format.

About the Alliance for Equality of Blind Canadians (AEBC)

The Alliance for Equality of Blind Canadians (AEBC) Halifax Chapter is a local grassroots peer support organization made up of Nova Scotians who are blind, deafblind or partially sighted, and our supporters from the public at large.

We provide opportunities for camaraderie, support and action on local issues. We work to ensure we have a voice on all matters affecting our participation in mainstream society. We are committed to changing public perceptions about who we are, which have historically led to low expectations of our capabilities and have resulted in unacceptably high levels of unemployment.

Our mission is to increase awareness of rights and responsibilities so blind, deafblind and partially sighted Nova Scotians can have equal access to the benefits and opportunities of society.

Our chapter is engaged in the delivery of public awareness and education initiatives, including consultation with government and businesses on topics such as education, employment, transportation, accessible banking, elections, communication and digital technologies.

These efforts help ensure that the needs of blind, deafblind and partially sighted Nova Scotians are included when new programs, policies and technologies are being developed.

- AEBC provides:
 - › **Training program** - trains members on accessible devices and technologies such as computers and iDevices
 - › **Scholarship program** - awards annual scholarships to outstanding blind, deafblind or partially sighted students
 - › **www.blindcanadians.ca** - fully accessible website with blogs, information on AEBC programs and more
 - › **Email listserv** - connects and informs members
 - › **Information and referral** - call 1-800-561-4774 or email halifax@blindcanadians.ca
 - › **AEBC publications** - available in Braille, large print, audio, cassette, email or CD format

Diversity and inclusion at NSHA

- Diversity is all the ways that we are different, such as:
 - › age
 - › ability
 - › culture
 - › ethnicity
 - › gender
 - › geographic location
 - › language
 - › physical characteristics
 - › race
 - › religion
 - › sexual orientation
 - › socio-economic status
 - › spirituality
 - › values
 - › and more

- Nova Scotia Health Authority (NSHA) is working towards a culture of belonging, where diversity is embraced and celebrated. Our goals include:
 - › Quality patient care through the development of cultural competence skills
 - › A culturally competent system and partnerships built through trust and collaboration
 - › Culturally specific research to inform decision-making at all levels

To learn more about diversity and inclusion at NSHA, please contact our Diversity and Inclusion Program Coordinator, Mohamed Yaffa, at 902-473-1326 or mohamed.yaffa@nshealth.ca.

This brochure has been produced collaboratively by the AEBC Halifax Chapter and Nova Scotia Health Authority.

To arrange an AEBC presentation for your group or department, please contact us:

AEBC Halifax Chapter

Phone: 1-800-561-4774

Email: halifax@blindcanadians.ca

Looking for more health information?

Find this pamphlet and all our patient resources here: <http://library.nshealth.ca/PatientGuides>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.

Please do not use perfumed products. Thank you!

Nova Scotia Health Authority

www.nshealth.ca

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The information in this brochure is for informational and educational purposes only.

The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider.

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The information in this pamphlet is to be updated every 3 years or as needed.