

# Communication Guide for Victims with Disabilities

## **SERVING WOMEN WITH DISABILITIES: AN ADVOCATE’S GUIDE**

This guide provides general information about how to effectively communicate and support victims who are women with disabilities.

**The National Organization on Disability** reports that more than 54 million Americans have a disability. The recently released Center for Disease Control Disability and Health Chartbook estimated that 19.3% of Alaskans have a disability. This makes disabilities one of the largest minority segments in our population. As the numbers suggest, providers of supports and services must be fluent in accepted ways to communicate with victims with disabilities to assure they receive the critical support they need for successful recovery.

This guide lists accepted ways for effective communication by disability category. These suggestions by no means exhaust all possible communication strategies but are generally accepted by disability advocates as ways to help providers get a good start. This booklet is for anyone—with or without a disability—who wants to interact more effectively with people with disabilities.

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## **Introduction**

Practicing disability etiquette is an easy way to make people with disabilities feel welcome. You don't have to feel awkward when dealing with a person who has a disability. And if you are ever unsure about what to do or say with a person who has a disability, just ask!

This resource has compiled several strategies for communicating with people with a range of disabilities, but we've listed below some basic rules that apply to all communications. As you can see, they are not much different than rules for any communication. People with disabilities are people first and want to be treated like everyone else. Using the rules below, will help your communications be effective and respectful.

### **BASIC RULES FOR COMMUNICATING**

1. Treat everyone the way you would hope to be treated.
2. Offer as much support and compassion as possible.
3. Ask before you help.
4. Be sensitive about physical contact.
5. Think before you speak.
6. Don't make assumptions.
7. Respond graciously to requests.

## DEAF AND HARD OF HEARING

A person who cannot hear well, or at all, has hearing loss. The term “hearing loss” ranges from total deafness to a loss that requires a hearing device. A woman may be born with a hearing loss or may have lost her hearing before or after she learned to speak. Many persons with hearing loss have some hearing even though it might not be enough to allow them to communicate with others. Advocates should understand that even a slight hearing loss can impair a person’s ability to communicate.

- Follow the person’s cues to find out if she prefers sign language, gesturing, writing or speaking. If you are unsure of the cues write it down or ask them.
- The most effective way to communicate with a person who uses sign language is through a qualified sign language interpreter.

Note: 1 An interpreter’s role is strictly as a communication tool, to facilitate communication with persons who have hearing loss. Interpreters should sign everything that is said and say everything that is signed while the woman is present, even side conversations not directed to the woman. Interpreters also typically let the person with the hearing loss know about other environmental sounds, such as distracting events, sirens, etc. Never ask the interpreter not to interpret something.

- When using an interpreter, always talk directly to the woman using first person singular pronouns, not to the interpreter.
  - Communicate as though the interpreter was not present.
  - Position the interpreter so that you are both visible to the person.
  - Talk at a normal pace. The interpreter will ask you to slow down if he/she needs to.
- If you have trouble understanding the speech of the person, let her know.
  - Speak clearly. Most people who are hard of hearing lip-read people’s lips.
  - In a group, have people raise a hand to speak so the woman can identify the speaker.
  - Don’t shout. If the person uses a hearing aid, it will be calibrated to normal voice levels.
  - If the person prefers to write, offer a pad of paper and pencil/pen.

*When you need a qualified interpreter you may call the following agencies:*

Interpreter Referral Line (Anchorage)

Linda Suter

[lsuter@arc-anchorage.org](mailto:lsuter@arc-anchorage.org)

277-3323 voice

277-0735 TTY

279-0341 fax

*Alaska Relay*

Free (866)-338-0035 TTY

(907)-338-0035 TTY

(800)-697-5056 Voice

Note: While the relay service is completely confidential, the U.S. Department of Justice has advised that service providers consider obtaining TDD/TTYs to allow direct communication when the information normally exchanged is considered extremely confidential and/or personal in nature.

*Note: A list of Alaska Resources begins on page 14.*

## **BLIND AND VISION IMPAIRED**

Legally, a person with 20/200 in the better eye, with best correction, or a field loss of 20 degrees or less is blind. Of those who meet the legal definition of blindness, only a small percentage is totally blind. People who are blind or vision impaired know how to orient themselves and are competent to travel unassisted, though they may use a cane or a guide dog. Not all visual impairments are obvious. Be prepared to offer assistance—for example, in reading—but only when asked.

- Identify yourself before making contact with the person - your name and your role.
- Always introduce the person to the others in a group.
- When speaking, use a normal tone, volume and pace; it is not necessary to speak louder.
- Do not stop talking when the woman is approaching you because she relies on the sound of your voice for direction.
- Offer your arm—don't take hers—if she needs to be guided.
- In leading the person to a chair, guide her hand to the back of the chair; do not try to help the person sit down.
- If the person has a guide dog, walk on the side opposite the dog.
- Don't touch the person's cane or guide dog.
- If you are walking, describe the setting, noting any obstacles, such as stairs ("up" or "down"), a big crack in the sidewalk, etc...
- If you are giving directions, give specific, non-visual information.
- If you need to leave the person, inform her first and let her know where the exit is, then leave her near a wall, table, or some other landmark.
- If the person puts the cane down, don't move it.
- Offer to read written information.
- If you serve food to the person, let her know where everything is on the plate according to a clock orientation (twelve o'clock is furthest from them, six o'clock is nearest).
- A person who is visually impaired may need written material in large print.
- Lighting shouldn't be too bright.
- Keep walkways clear of obstructions.

## **MOBILITY CHALLENGES (CEREBRAL PALSY, POLIO, MUSCULAR DYSTROPHY, MULTIPLE SCLEROSIS, LOU GEHRIG'S DISEASE, QUADRIPLEGIA)**

Women who have a limited use of their arms; women who use a wheelchair or crutches; women of extremely short stature; women who cannot perform certain hand movements or have difficulty controlling movement; and women with breathing difficulties or stamina limitations are mobility challenged. As a result of injury to the central nervous system, people with cerebral palsy (CP) have difficulty controlling their muscles.

- Don't lean on a person's wheelchair to shake another person's hand or ask a wheelchair user to hold coats.
- Don't push or touch a person's wheelchair; it's part of her personal space.
- Provide assistance only if your help is requested.
- Keep the ramps and wheelchair-accessible doors to your building unlocked and unblocked.
- Be aware of wheelchair users' reach limits and place as many items as possible within her grasp.
- Make sure that there is a clear path of travel to shelves and display racks.
- When talking to a wheelchair user, sit at her level.
- Know the location of wheelchair ramps, accessible restrooms, and elevators so you can direct the woman to these facilities if necessary. If the nearest public restroom is not accessible or is located on an inaccessible floor, allow the person in a wheelchair to use a private or employees' accessible restroom.
- People who use canes or crutches need their arms for balance, so never grab them.
- If you offer a seat to the person, chairs with arms or higher seats may be easier to use.
- People with a respiratory or heart condition may have trouble walking.
- For people with limited use of their hands, wrists or arms, offer assistance with reaching for, grasping or lifting objects, opening doors and display cases, and operating vending machines and other equipment.

## **COGNITIVE IMPAIRMENTS (INTELLECTUAL DISABILITY, (FORMERLY MENTAL RETARDATION), TRAUMATIC BRAIN INJURY, DEMENTIA, FETAL ALCOHOL SYNDROME, AUTISM)**

An Intellectual Disability is characterized by significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social, and practical adaptive skills. People may know it by its more familiar term, mental retardation. It is a particular state of functioning that begins in childhood and is characterized by limitation in both intelligence and adaptive skills.

A Traumatic Brain Injury is usually caused by an accident, stroke, meningitis, anoxia. And may result in problems with cognition, sensory processing, communication, and behavior or mental health (depression, anxiety, personality changes, aggression, acting out, and social inappropriateness). They may become easily confused or distracted and have problems with concentration and attention.

Fetal Alcohol Spectrum Disorder is caused by prenatal exposure to alcohol and is characterized by brain damage, facial deformities, and growth deficits. Individuals with FASD have difficulties with learning, attention, memory, and problem solving. They may have a tendency to impulsive behavior, inability to reason from cause to effect, a failure to comprehend the concept of time, difficulty telling fantasy from reality, inability to control sexual impulses, and an apparent lack of remorse.

### **Persons with Intellectual Disabilities**

- Be calm. If the person senses you are peaceful and calm, it will help her to relax.
- People with an intellectual disability (sometimes referred to as developmental disability) learn slower than others. They have a hard time using what they have learned and applying it from one setting or situation to another.
- Speak to the person in clear sentences, using simple words and concrete—rather than abstract—concepts. Help her understand a complex idea by breaking it down into smaller parts.
- Don't use baby talk or talk down to people who have an intellectual disability. Gauge the pace, complexity, and vocabulary of your speech

according to hers.

- Remember that the person is an adult and, unless you are informed otherwise, can make her own decisions.
- People with an intellectual disability may be anxious to please. During an interview, the person may tell you what she thinks you want to hear. In certain situations, such as law enforcement or a doctor's examination, it can have grave consequences if your interview technique is not effective. Questions should be phrased in a neutral way to elicit accurate information. Verify responses by repeating each question in a different way.
- Making decisions can be difficult for people with an intellectual disability. Be patient and allow the person to take her time.
- Clear signage with pictograms can help a person who has an intellectual disability to find her way around a facility.
- People with an intellectual disability rely on routine and on the familiar to manage work and daily living. Be aware that a change in the environment or in a routine may require some attention and a period of adjustment.

#### Persons with traumatic brain injury

- Give the victim more time to complete paperwork and answer questions.
- Provide repetition and consistency. Don't be surprised if the victim asks you to start over, or forgets what you have been talking about.
- Give directions one step at a time. For tasks with many steps, it helps to give the victim written directions.
- Realize that the victim may get tired quickly.
- Reduce distractions.
- Be flexible about expectations.

#### Persons with FASD:

- Provide structure and routine.
- Give directions one step at a time.
- Keep the routine as much the same each day as you can.
- If the routine or schedule changes, remind the victim about changes.
- Be patient.

## **BEHAVIORAL HEALTH DISORDERS (SCHIZOPHRENIA, BIPOLAR, TOURETTE'S SYNDROME, DEPRESSION)**

A behavioral health disorder interferes with the way they think, feel, and act. A behavioral health disorder may substantially interfere with a person's ability to meet the ordinary demands of daily living. There are various types of behavioral health disorders resulting in different degrees of impairment.

People with psychiatric disabilities may at times have difficulty coping with the tasks and interactions of daily life. Their disorder may interfere with their ability to feel, think or relate to others. Most people with psychiatric disabilities are not violent. One of the main obstacles they face is the attitudes that people have about them. Because it is a hidden disability, chances are you will not even realize that the person has a mental health condition.

- Maintain a supportive, open-minded attitude. The person will need to feel safe in order to work with you. Due to her mental illness, she may have a history of being ignored or not believed.
- Stress can affect the person's ability to function. Try to keep the pressure of the situation to a minimum.
- Ask what will make her most comfortable and respect her needs to the maximum extent possible.
- Allow the woman to have supportive persons (friends, family, or professionals) with them if it helps them to feel more comfortable.
- Ask how you can help.
- Allow frequent breaks
- Talk with the person in a calm, nonthreatening, and reassuring manner. Help the person feel they are in control of the situation.
- If the person is taking any medications, make sure she has access to water, food, and toilet facilities because side effects of the medications may include thirst, urinary frequency, nausea, constipation, and diarrhea.

## **NEUROLOGICAL IMPAIRMENTS (STROKE, EPILEPSY, CEREBRAL PALSY)**

- Give the person your full attention.
- Don't interrupt or finish the person's sentences.
- If you have trouble understanding, don't nod. Just ask her to repeat. In most cases the person won't mind and will appreciate your effort to hear what she has to say.
- If you are not sure whether you have understood, you can repeat for verification.
- Ask him to write it down or to suggest another way of facilitating communication.
- A quiet environment makes communication easier.
- Don't tease or laugh at a person with a speech disability.
- A person with cerebral palsy may have more difficulty with motor control when they are under stress.

## **PEOPLE WHO LOOK DIFFERENT OR HAVE HIDDEN DISABILITIES**

Not all disabilities are obvious. A person may make a request or act in a way that seems different to you. That request or behavior may be disability-related. You may give what seem to you as simple directions to someone, but if the person has a learning disability, she might ask you to write it down. Or a person who looks healthy may ask to sit, rather than stand, in line. This might be because the person is fatigued from a health condition such as cancer, or from the effects of medication. Even though these disabilities are hidden, they are real. The easiest rule is to respect the person's needs and requests when possible.

## **MULTIPLE CHEMICAL SENSITIVITY (MCS) AND RESPIRATORY DISORDERS**

Multiple Chemical Sensitivity is a "chronic, recurring disease caused by a person's inability to tolerate an environmental chemical or class of foreign chemicals. These chemicals are found in many common products such as pesticides, perfumes, tobacco smoke, new carpets, air "fresheners," new paint and building materials, and many cleaning and laundry products.

- Try to avoid spray-cleaning tables, windows or other surfaces while people are in your place of business.
- If you must use a spray product, spray or pour it closely into the cloth, not into the air. Use less-toxic products when possible.
- Request that staff who have contact with the public go easy on fragranced body-care products like cologne, hair spray, hand lotion, and after-shave.
- Conduct meetings and interviews in a room that is well ventilated.
- Remember to simply ask your client, what works best for her and her particular needs.

## **HIV & AIDS**

*People with human immunodeficiency virus or Autoimmune Deficiency Syndrome (AIDS) have impaired immune systems, so their bodies have trouble fighting off infections. When the immune system is damaged, the body becomes more susceptible to infectious diseases or, HIV positive (HIV+). Once the situation becomes life-threatening as a result of a specific group of what are called “opportunistic infections,” a person is then diagnosed as having AIDS.*

- Persons with HIV or AIDS are at significant risk of picking up any infection.
- You can't catch HIV from casual contact such as shaking hands, so don't be afraid of touching or being touched by a person with AIDS.
- Many people with AIDS feel stigmatized. By simply greeting or shaking the person's hand, you are letting him know that she is accepted.

## **LEARNING DISABILITIES (DYSLEXIA, AUDITORY PROCESSING DISORDER)**

Learning disabilities affects a person's receptive, expressive or processing ability. This means the person has an impairment due to a processing disorder, such as auditory processing or visual processing.

- People with dyslexia or other reading disabilities have trouble reading written information.
- Give them verbal explanations and allow extra time for reading.
- Don't be surprised if you tell someone very simple instructions and he requests that you write them down.
- Because spoken information gets “scrambled” as he listens, a person who has a learning disability such as auditory processing disorder may need information demonstrated or in writing.
- Don't be surprised if you tell someone very simple instructions and he requests that you write them down.
- Minimize distracters in the environment, such as lighting, sounds, people, busy patterns on curtains etc.

## A WORD ON SERVICE ANIMALS

### **What are service animals and what is the law regarding them?**

The ADA defines a service animal as any guide dog, signal dog, or other animal that has been individually trained to provide assistance to a person who has a disability. If the animal meets this definition, it is considered a service animal whether or not it has been licensed or certified by state or local government.

Service animals perform some of the functions and tasks that the person with a disability cannot perform for herself. For instance, a “guide dog” is a service animal that assists persons with visual loss or blindness, to be independently mobile. Other service animals assist persons with other kinds of disabilities in their daily activities, such as: alerting persons with hearing loss to sounds; pulling wheelchairs or carrying, reaching for, and picking up things for persons with mobility challenges; alerting an individual regarding the onset of a seizure and assisting persons with mobility challenges with balance.

A service animal is *not* a pet; do not pet or call them. It is an auxiliary aid for a person who has a disability.

Some service animals will be identified by special clothing or harnesses, and some animals are licensed or certified and have identification papers. But this is not always the case, and a business cannot require documentation before permitting a service animal to accompany the person with a disability onto business premises in businesses that serve the public.

*An extra word:* While reading through the guide above, it may have occurred to you that conflicts may arise between people with disabilities and their conflicting needs. For example, a person who has a hearing loss may not be able to hear well enough when a window is open, but a person with MCS needs fresh air; or, someone’s guide dog may trigger another’s anxiety disorder. These situations call for flexibility, patience, creativity, and open communication—a willingness to listen to and to learn.

# Alaska Resources

## State Agencies and Organizations

### Department of Health and Social Services

#### **Division of Behavioral Health**

3601 C Street, Ste 878  
Anchorage, AK 99503  
Phone: (907) 269-3410  
Fax: (907) 269-3786

<http://www.hss.state.ak.us/dbh/>

*The mission of the Division of Behavioral Health is to manage an integrated and comprehensive behavioral health system based on sound policy, effective practices and partnerships.*

#### **Division of Senior and Disability Services**

Central Office

240 Main Street, Suite 601  
Juneau, Alaska 99801

Phone: (907) 465-3372 • (907) 465-3165 • Toll Free: (866) 465-3165  
Fax: (907) 465-1170

South Central Regional Office

3601 C Street, Suite 310  
Anchorage, AK 99503

Phone: (907) 269-3666 • Toll Free: (800) 478-9996  
Fax: (907) 269-3688

<http://www.hss.state.ak.us/dsds/>

#### **State of Alaska Office of Victims' Rights**

1007 West 3rd Avenue, Suite 205

Anchorage, Alaska 99501-1936

Phone: 907-272-2620

Toll free within Alaska: 866-274-2620

Fax: 907-272-2640

Email: [officeofvictimsrights@legis.state.ak.us](mailto:officeofvictimsrights@legis.state.ak.us)

*An agency of the Alaska Legislature that provides free legal services to victims of crime to help them obtain the rights they are guaranteed under the Alaska constitution and statutes with regard to their contacts with police, prosecutors, judges, and other criminal justice agencies in this state, as well as to advance and protect those victim rights in court when necessary and authorized by law.*

## **Planning and Advisory Boards**

### **Alaska Commission on Aging**

PO Box 110693 (150 Third Street #103)

Juneau, AK 99811-0693

Phone: (907) 465-3250

FAX: (907) 465-1398

[april\\_thomas@health.state.ak.us](mailto:april_thomas@health.state.ak.us)

<http://www.alaskaaging.org/>

*Advocates for state policy, public and private partnerships, state/federal projects and citizen involvement that assists each of us to age successfully in our homes, in our communities or as near as possible to our communities and families. Our work involves planning, advocacy, and interagency collaboration on issues and state and federal services affecting older Alaskans.*

### **The Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse**

PO Box 110608

Juneau, AK 99811-0608

Toll free (888) 464-8920

In Juneau 465-8920

[Lance\\_Brown@health.state.ak.us](mailto:Lance_Brown@health.state.ak.us)

<http://www.hss.state.ak.us/amhb/>

*A state agency charged with planning and coordinating mental health services funded by the State of Alaska. The AMHB is an advocate for Alaskans with mental illnesses.*

### **Governor's Council on Disabilities and Special Education**

**907 269-8990**

*It is a statewide planning and advocacy body for persons with developmental disabilities. The council is comprised of individuals with developmental disabilities or their parents and guardians along with key state officials.*

### **Alaska Mental Health Trust Authority**

3745 Community Park Loop

Suite 200

Anchorage AK 99508

**Tel:** 907-269-7960

**Fax:** 907-269-7966

<http://www.mhtrust.org/>

## Alaska Agencies and Organizations

### **Blind and Visual Impairments**

#### **Alaska Center for the Blind and Visually Impaired**

3903 Taft Drive

Anchorage, AK 99517-3069

Phone: (907) 248-7770

Fax: (907) 248-7517

Toll free: (800) 770-7517

[info@alaskabvi.org](mailto:info@alaskabvi.org)

<http://www.alaskabvi.org/index.html>

### **Behavioral Health**

#### **Alzheimer's Disease Resource Agency of Alaska**

1750 Abbott Road Anchorage, AK 99507

(907) 561-3313

[www.alzaska.org](http://www.alzaska.org)

#### **NAMI Alaska**

144 W 15th

Anchorage, Alaska 99501

Phone: 907-277-1300

Fax: 907-277-1400

Toll free: 1-800-478-4462

[http://www.nami.org/MSTemplate.cfm?Section=About\\_Us45&Site=NAMI\\_Alaska&Template=/ContentManagement/HTMLDisplay.cfm&ContentID=28089](http://www.nami.org/MSTemplate.cfm?Section=About_Us45&Site=NAMI_Alaska&Template=/ContentManagement/HTMLDisplay.cfm&ContentID=28089)

[info@nami-alaska.org](mailto:info@nami-alaska.org)

### **Deaf/Hard of Hearing**

#### **Alaska Relay**

Free (866)-338-0035 TTY

(907)-338-0035 TTY

(800)-697-5056 Voice.

*A free telecommunication network that links deaf, hard of hearing, speech disabled and hearing people via the telephone. The service is available 24 hours a day and is completely confidential.*

<http://www.alaskarelay.com/default.aspx>

#### **Deaf and Hard of Hearing Center**

2211 Arca Drive

Anchorage, AK 99508 Phone: 276-3456

TTY: 258-2232

Toll-free phone/TTY: 1-800-770-3456

<http://www.arc-anchorage.org/dhhc.htm>

## **Interpreter services**

Interpreter Referral Line (Anchorage)

Linda Suter

[lsuter@arc-anchorage.org](mailto:lsuter@arc-anchorage.org)

277-3323 voice

277-0735 TTY

279-0341 fax

R&R interpreting service

Dave Robertson

317-2235

## **Legal**

### **Disability Law Center**

**Voice 1-800-432-4682**

[www.protectionandadvocacy.com](http://www.protectionandadvocacy.com).

*A federally mandated program in each state which provides protection of the rights of persons with disabilities through legally based advocacy. Protection and Advocacy also administers the Client Assistance Program (CAP) which seeks to identify, explain, and resolve problems a consumer might be having with her rehabilitation program.*

## **Physical Disabilities**

### **Access Alaska (Anchorage)**

121 West Fireweed Lane, Suite 105

Anchorage, AK 99503

Phone: (907) 248-4777

Fax: (907) 248-0639

Toll free: (800) 770-4488

[info@accessalaska.org](mailto:info@accessalaska.org)

<http://www.accessalaska.org/>

## **Technical Assistance**

### **Center for Human Development**

2702 Gambell St. Suite 100

Anchorage, AK 99508

Phone: (907) 272-8270 • Toll Free: 1-800-243-2199

TTY: (907) 264-6206 • Fax: (907) 274-4802

[info@alaskachd.org](mailto:info@alaskachd.org)

<http://www.alaskachd.org/>

## **Traumatic Brain Injury**

### **Traumatic Brain Injury Project**

3601 C St. suite 878

Anchorage, AK 99503

Phone (907) 269-3619

Fax: (907) 269-3623

<http://www.hss.state.ak.us/dbh/tbi/default.htm>

[Jennifer\\_Lewis@health.state.ak.us](mailto:Jennifer_Lewis@health.state.ak.us)

## **National Agencies and Organizations**

### **Americans with Disabilities Act Information Line**

**1-800-514-0301 (voice)**

**1-800-514-0383 (TDD/TTY)**

[www.usdoj.gov/crt/ada/](http://www.usdoj.gov/crt/ada/)

Department of Justice's toll free information line, which answers questions and offers free publications about the Americans with Disabilities Act.

### **Telecommunications for the Deaf**

**Voice 301-589-3786**

**TDD/TTY 301-589-3006**

Offers materials to assist managers and operators of "911" and other emergency response centers in being prepared to respond to calls from people who use TDDs.

### **American Council of the Blind**

**1-800-424-8666**

[www.acb.org](http://www.acb.org).

Provides advocacy and information regarding accommodations for people who are blind, deaf-blind, or visually impaired.

### **National Federation of the Blind: National Center for the Blind**

**410-659-9314**

[www.nfb.org](http://www.nfb.org)

Provides public education about blindness; information and referral services; scholarships; literature and publications about blindness; aids and appliances and other adaptive equipment for persons who are blind; advocacy services and protection of civil rights; job opportunities for persons who are blind; development and evaluation of technology; and support for persons who are blind and their families.

### **American Association of the Deaf-Blind (AADB)**

**Voice 1-800-735-4402**

**TTY 301-495-4402**

A national consumer advocacy organization for people who have combined hearing and vision loss. AADB is open to all persons who are deaf-blind and individuals directly concerned with their well being, including spouses, children, friends, and health care professionals.

### **National Alliance for the Mentally Ill**

**Voice 1-800-950-6264**

**TTD/TTY 703-516-7991**

Provides support and advocacy for individuals affected by serious mental illness.

