

EVERYDAY

ACCESSIBILITY

INTRODUCTIONS AND GOALS



KEY POINTS:



1. OPTIONS = ACCESS

2. THERE IS NO ONE PERFECT METHOD

3. PROACTIVITY > REACTIVITY

4. ABLEISM IS A SYSTEM, ACCESSIBILITY IS A
PRACTICE

BASELINES:

FOCUS ON IMPACTS, NOT DISABILITY

EMPATHIZE WITHOUT ROLEPLAYING



**UNDERSTANDING IMPACTS:
"SYMPTOMS" OR WAYS A DISABILITY SHOWS
UP IN SOMEONE'S LIFE**

**EX: MOBILITY, EXECUTIVE
FUNCTIONING, SENSORY STIMULATION,
VISUAL / AUDITORY PROCESSING**

WHEN PRESENTING:

- LIVE CAPTIONS
- MICROPHONES OR FM SYSTEMS

VISUAL AIDS



RELEVANT GRAPHICS W/ ALT TEXT

COLOR (CONTRAST, BLINDNESS, SENSITIVITY)

ALWAYS ASSISTS, DOESN'T SUBSTITUTE OR ADD

WHEN PLANNING:

- ADVERTISE ACCOMMODATIONS & ASK
- USE FIRST FLOOR SPACES W/ MODULAR FURNITURE
- ACCOUNT FOR FOOD ALLERGIES & TRAUMA
- PROVIDE PARTICIPATION OPTIONS

WHEN EXISTING:

- **ROLE MODEL ACCESSIBLE PRACTICES**
- **ADVOCATE EVEN WHEN NO ONE NEEDS IT IMMEDIATELY**
- **BE CONSCIOUS OF LANGUAGE & SOCIAL CONSTRUCTS (E.G., PUNCTUALITY, LAZINESS)**

EXAMPLES:

- USING SANS SERIF FONTS
- ALT TEXT & IMAGE DESCRIPTIONS
- DECOMPRESSION SPACES
- PROVIDING INTERVIEW QUESTIONS
AHEAD OF TIME
- DESCRIBING AN EXPERIENCE IN ADS

EXAMPLES:

- **WHEN SAFE, NOT LYING TO OTHERS ABOUT DISABILITY & IMPACTS**
- **GIVING ALL FOLX A SAFE "OUT" FROM SPACES**
- **ADDRESSING STEREOTYPES & PROBLEMATIC PORTRAYALS**