

Accessibility Laws

This page covers US federal accessibility laws, US state accessibility laws, and international accessibility laws.

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US Federal Accessibility Laws

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Americans with Disabilities Act (ADA)

[Learn more about ADA accessibility & closed captioning requirements](#)

The ADA is a broad, anti-discrimination law for people with disabilities. Titles II and III of the ADA affect web accessibility and closed captioning.

Title II prohibits disability discrimination by all public entities at the local and state level. Governmental organizations must ensure “effective communication” with citizens, including providing assistive technology or services as needed.

Title III prohibits disability discrimination by “places of public accommodation.” A place of public accommodation covers shared or public entities like libraries, universities, hotels, museums, theaters, transportation services, etc., that are privately owned. Video displayed within or distributed by such places must be captioned.

Both Title II and Title III offer a disclaimer about instances where such accommodation would create an “undue hardship” for the organization. This is often the crux of arguments in ADA lawsuits about whether or not an organization must provide closed captioning. Another point of contention is whether or not a purely online business can be considered a “place of public accommodation.”

Whom this law applies to:

Municipal and state offices and facilities; museums; libraries; schools, colleges & universities; theaters & cinemas; convention centers & arenas; train stations & airports; hotels; parks; hospitals and clinics; pharmacies; restaurants; retail stores & malls; day care facilities; potentially, online services or products that are made publicly available.

[Download the Free Ebook: How the ADA Impacts Online Video Accessibility](#)

Sunday (12/14) Session 4B: American Civil Liberties Union (ACLU) of NV: Accountability through Allyship

Presenter:

Kaylah Maese, Policy Manager

Q & A:

None

Saturday (12/13) Session 1B: How to Achieve Legislative Gains

Presenters:

Kerry Durmick, State Director
Chanel Cassanello, Campaign Manager
All Voting is Local Action

Core Values:

Non-partisan
Partnership with marginalized communities
Empowerment of partners
Partnership with state and local officials
Unfair and discriminatory practices

Start:

Connect with legislator and explain idea
Build working group and/or team
Find other nonprofits
Talk now, not until after the election
Think about \$

Driving Forward:

Register as nonprofit lobbyist
Develop lobbying strategy
Work with other nonprofits
Travel to Carson City
Attend Lobby Days
No enemies and no friends

Manage Expectations:

Process not easy
Move after one session vs. multiple
External factors
Focus on can control

Language Access:

2022:

Developed language access legislation

2023:

SOS hotline with 200+ languages and ASL
Translate materials in seven most common languages (5,000+ per language)
Original 2,000 - compromise is key

Passed both Houses
Vetoed

Clark = Mandarin
SOS = general practice

2024:

Removed county language mandate
New sponsor

2025:

AB 367:

SOS = codify telephonic, including ASL, Website in minimum of seven most common languages
Authorize use of cell phones and related AT inside polling places
Mandate SOS communications in both English and Spanish
Fund Language Access Coordinator in SOS

Personal Practice:

Passion:

700 Hour Program - unfavorable data since 2017 mandate

Similar Passion:

DD Council killed previous version of bill (poorly written by Legal; completely missed Legislative intent)

Who's My Legislator?:

Majority Leader Cannizzaro
Assemblywoman Backus

SPPT Dondero Loop
Assemblywoman Miller

Stakeholders:

VR (makes referrals)
State HR (certifies candidates as eligible)
Existing VR candidates for work
Non-present VR registrants (of age 14+)
Non-VR and State HR State Agency management
Governor

Helpers:

ACLU
Department of Admin. ADA Project
NCED Family Navigation Network

Others' Practice:

Passion:

CCSD DHH kiddos - 348

Tiered system of activity - NSU
Recognition of ASL - UNLV
Personal interpreter relationship vs. legal compliance - cost of doing business

Passions:

Accreditation - high school and college
ASL - primary language from birth

Passion:

Ballot differences jurisdictionally (urban vs. rural)

Tips and Tricks:

Meet with Legislators early
Reach out for help
Create community
Host travel fundraiser
Use experience to advantage
Always next Session

Title: Requiring that closed captioning be enabled on television and television receivers in public areas of place of. Public accommodation.

Introduction:

WHEREAS, Title II of the ADA requires state/local governments to give people with disabilities an equal opportunity to benefit from all of their programs, services, and activities.

WHEREAS, Title III of the ADA prohibits discrimination on the basis of disability in the activities of places of public accommodations.

WHEREAS, in the interest of eliminating isolation and segregation and encouraging the gathering and participation of all individuals, it is sound public policy to promote full and equal communication access to all; and

WHEREAS, televisions are increasingly used in venues open to the general public, such as hospital waiting rooms, restaurants, small businesses, health clubs, social recreation facilities, airport lounges, and more; and

WHEREAS, hearing loss is a part of life for many individuals in Nevada; and

WHEREAS, a 2011 study by Johns Hopkins researchers estimated that approximately one in five Americans who are 12 years of age or older have some type of hearing loss in one or both ears that affects their ability to communicate and receive information; and

WHEREAS, In 1993, the Federal Communications Commission ("FCC") adopted regulations requiring all analog television receivers manufactured and sold in the United States with screens larger than 13 inches contain built-in decoder circuitry to display closed captioning.

WHEREAS, hearing loss is one of the most common disabilities in Nevada; and

WHEREAS, closed captioning displays the audio portion of a television program as text on the television screen, providing access to news, entertainment, and information for individuals who are deaf or hard of hearing; and

WHEREAS, the Federal Communications Commission requires video programming shown on television and over the internet, after being shown on television, to be closed captioned; and³. Closed captioning consists of a transcript of the audio portions of television programming displayed on the television receiver screen when the user activates the caption feature. **As outlined in NRS 651(I need exact wordings for it, I couldn't find it)**

WHEREAS, In 1996, Congress amended the Communications Act to require that all video program distributors (including broadcasters, cable operators, etc.) add closed captioning to certain video programming and authorized the Federal Communications Commission (the FCC) to establish a transition schedule for complying with this requirement.

WHEREAS, Following Congress's legislative directive, the FCC adopted administrative rules to ensure that video programming be accessible by closed captioning to the maximum extent possible. 47 CFR Part 79 sets forth the FCC's standards for accessibility of video programming.

WHEREAS, In 2002, the FCC adopted closed captioning requirements for digital television receivers.

WHEREAS, Under the FCC's rules, video program distributors are required to add closed captioning to all new English language programming. Starting in 2010, a similar requirement has applied to Spanish language programming. The FCC also requires video program distributors to add closed captioning to a certain percentage of previously broadcast programs.

WHEREAS, Enacted in 1973, Rehabilitation Act is a national law that protects individuals from discrimination based on their disability. Sections 504 and 508 bring online video content under the act.

Section 504 makes accessibility for disabled individuals a civil law. It requires providing individuals with disabilities an equal opportunity to participate in their programs and benefit from their services, including providing information to employees and members of the public. Failure to comply with this amendment can result in a discrimination lawsuit.

Section 508 mandates the accessibility of electronic media or IT in federal programs. It requires Federal agencies to ensure that persons with disabilities have equal access to electronic information technology. It also involves compliance with WCAG 2.0, mandating captions and audio descriptions for pre-recorded videos and captions for live videos.

WHEREAS, In 2010, Congress enacted the Communications and Video Accessibility Act ("CVAA"), extending the scope of closed captioning requirements to all devices that can play back video. Since September 30, 2012, new TV programming shown online is required to have closed captioning rendered as well.

WHEREAS, in addition to benefitting members of the public who are deaf or hard of hearing, closed captioning also benefits people with learning disabilities, sensory disabilities, attention deficits, and autism, as well as the elderly and persons learning English as a second language; and

WHEREAS, closed captioning can help the general public with learning names and terminology, comprehension of dialogue, and better understanding in sound sensitive environments; Better comprehension for viewers who know or are learning English as a second language.

- (1) Improved comprehension of on-screen dialogue that is spoken very quickly or has accents, mumbling, or background noise.
- (2) Enhanced learning environment for children or adults who are learning to read.
- (3) Better clarity of full names, brand names, or technical terminology.
- (4) Improved access to the television in noisy environments, such as restaurants and bars.

WHEREAS: The lack of communication access to the audio content on TVs in public places has always existed as a barrier for individuals with certain disabilities; and

WHEREAS: During the COVID-19 pandemic TV programming played a critical role in conveying information from public health experts and government officials to the public during the state of emergency; and

WHEREAS: This new necessity of watching/listening to TV during the COVID-19 pandemic to receive critical public health information and guidance highlighted the striking inequity that exists in communication access for

those in the disability community and beyond who have no access to audible TV content when they are in public places; and
TVs audible content has not been accessible to persons with these types of disabilities: Deaf/deaf, Hard of Hearing, hearing loss due to age or illness, developmental disabilities, sensory disabilities, non-native English speakers, and others; and

WHEREAS: When businesses enable the “open captions” function on their TVs, a live transcript of the program’s audio content is shown scrolling across the bottom of the screen; and

WHEREAS: Visible captions would eliminate a significant communication barrier for people with hearing loss and other disabilities by providing access to the information being given by speakers on TV programming in all of Boston’s public places; and (1)Visible captions would also increase access to information for the general public, because TVs are often located in crowded and noisy commercial spaces where everybody may have difficulty hearing;

WHEREAS Television receivers in these locations enable members of the general public to obtain the latest news reports in an emergency, watch local sports teams, or simply pass the time while waiting for an appointment or service to be completed. People with hearing disabilities should not be excluded from being able to meaningfully participate in these activities while in public areas.

THEREFORE,

a. **Purpose.** The purpose of this ordinance is to expand accessible communication in places of public accommodation.

b. **Definitions:**

When used in this section, unless the context otherwise requires, the following terms shall have the following meanings:

1. “Closed captioning” means a transcript or dialog of the audio portion of a television program that is displayed on the bottom portion of a television receiver screen when the user activates the feature.
2. “Closed captioning television receiver” means a receiver of television programming that has the ability to display closed captioning, including but not limited to a television, digital set top box, and other technology capable of displaying closed captioning for television programming.

3. "Person" means one or more individuals, partnerships, organizations, trade or professional associations, corporations, legal representatives, trustees, trustees in bankruptcy and receivers. It includes any owner, lessee, proprietor, manager, agent, or employee, whether one or more natural persons, and any political or civil subdivision or agency or instrumentality of the City.

4. "Place of public accommodation" means any place, licensed or unlicensed, where the public gathers, congregates, or assembles for amusement, recreation or public purposes, or any place, store, or other establishment that supplies goods or services with or without charge to the general public. "Public area" means any part of a public facility that is open to the general public. "Public entertainment venue" means a place that is open to the public for mass gathering

"Place of public accommodation" includes, but is not limited to, the following types of services or facilities: Businesses cannot refuse to turn on closed caption upon request.

(1) hotels, inn, motel or other establishments which provide lodging to transient guests.

(2) restaurants, cafeterias, lunchrooms, lunch counters, soda fountains or other facilities principally engaged in selling or offering for sale food for consumption upon or off the premises.

(3) public restrooms;

(4) public elevators;

(5) for entertainment, regardless of whether or not a ticket or payment of any type is required for admission. The term includes, but is not limited to, cinemas, theaters, concert halls, sports centers, stadiums, and festivals.

(6) bowling alleys, pool halls, arcades, and amusement parks;

(7) retail establishments;

(8) transportation carriers; terminal, depot, bus stations, airport lounges,

(9) barber shops and beauty shops;

(10) bars or taverns or other facilities engaged in selling or offering for sale alcoholic beverages for consumption upon the premises;

(11) public burial facilities

(12) hospital waiting rooms

(13) health clubs, gymnasium, health spa, bowling alley, golf course, or other place of exercise or recreation

(14) bakery, grocery store, clothing store, hardware store, shopping center, appliance stores, department store, laundromat, dry-cleaner, bank, barber

shop, beauty shop, travel service, shoe repair store, gas station, office of an accountant or lawyer, Pharmacy, insurance office, professional office of a health care provider, hospital, or any other retail, sales or rental establishment

(15) an auditorium, convention center, lecture hall, or other place of public gathering

(16) museum, library, gallery, or other place of public display or collection

(17) park, zoo, amusement park, or other place of recreation

(18) nursery, elementary, secondary, undergraduate, or postgraduate, private school or other place of education

(19) day care center, senior citizen center, homeless shelter, food bank, adoption agency, or other social service center establishment;

“Regular hours” means the hours of any day in which a place of public accommodation is generally open to members of the general public.

Activating Closed Captioning

1. Any person owning or managing a public facility in the State of Nevada must activate closed captioning on closed captioned television receivers in use in any public area during regular hours.

2. In the event that two television in the public area of the place of public accommodation have the same channel being broadcast, at least of 50% of television shall be subject to this

3. An owner or operator of a public accommodation that has multiple television receivers on display for sale is required to activate closed captioning on at least one television receiver per group of five television receivers.

4. Upon request, a place of public accommodation shall not fail to keep closed captioning activated on any closed-captioning television that is in use during regular hours in any public area.

5. Any electronic device and informative technology must be accessible.

Enforcement

“Respondent” means any person who is alleged or found to have committed a violation of regulations established in this act.

Penalties.

Each violation will be a civil infraction punishable by a minimum of \$500, with an increment of \$500 for each violation. Where a Responsible Person is not immediately apparent, there shall be a rebuttable presumption of responsibility on the part of the owner of the Place of Public Accommodation. If after 90 days from July 25, 2025, a person that owns or manages a place of public accommodation fails to comply with the requirements of this section, that person shall be subject to a civil fine of up to \$500 for each violation. Written notice of the violation must be provided to the person and must state that the fine will be assessed. The notice must also state that the person has an opportunity to cure the violation by complying with the requirement within 30 days after delivery of the notice. If the person demonstrates compliance within the 30-day period, the fine will not be assessed, and the violation must be dismissed. Any subsequent violation shall result in a civil fine of up to \$500. The fines will be collected by Nevada Equal Right Commission and Nevada Commission for Deaf and Hard of Hearing Persons and the NERC are to set an agency to allocate the funds for Deaf/ Hard of Hearing non profit organization serving Deaf/Hard of Hearing population.

Effective date.

This law shall take effect on January 1, 2026.

Resources: Nevada Equality Rights Commission must prepare an educational pamphlet advising employers and employees of their duty and liability under this section. The pamphlet should be made available online, Employers must provide employees with training on this section using the pamphlet.

GUIDANCE ON SETTING UP CLOSED CAPTIONING

Depending on the program you are broadcasting in your business, you will enable closed captioning either (1) in the streaming app , e.g. Netflix, Hulu, YouTube; (2) through your cable settings, e.g. Xfinity, DirecTV, etc.; or (3) on in your television's settings. You only have to do it one time. Once captions are enabled, they will remain enabled unless you go in to turn them off. Below are a few links that may be able to help you with the exact steps required for your use. The exact menu depends on the manufacturer. Many have a closed captioning ("CC") button on the remote for easy access. If it doesn't, you may need to navigate to your device's menu or settings. Try the "gear icon" and look for "Accessibility" settings, or check out the following support articles. If this does not work, you may need to enable captions through the programming provider, aka Cable or Streaming.

Sorenson has compiled directions with screenshots for enabling captions from the following cable and streaming services: Xfinity, Spectrum, Cox, DirecTV, DISH, Hulu, Netflix, Amazon Prime, Disney, YouTube, Roku, Apple TV , and Samsung TV Plus.

Saturday (12/13) Session 2B: Using Data for Legislative and Community Change

Presenters:

Dr. Liann Osborne, CSD Works Director
Laura Fussell, CSD Works Program Manager
Dr. Genelle Sanders, CSD Learns Director

Learning Becomes Systems Change:

Every learner deserves high-quality, accessible education
ASL & EI - in-person and virtual
Courses accessible, culturally relevant, built from lived experience
Track outcomes so individual learning becomes collective proof
Data drives policy, funding, and legislative change

One learner. One course. One data point @ a time - we change the system.

Why Data Matters:

Visibility
Credibility
Accountability
Advocacy
Narratives

Data is a Building Block for Change

Data Use:

Facts inform, but people transform
Interpretation holds key
Framing, sharing, and applying

Facts Inform, But People Transform:

Data gives facts, but transformation happens when facts connect to human stories
People act when they feel the data, not just when they see it

Example:

Report shows that only 40% of Deaf job seekers secure employment w/in six months
Hearing from one Deaf job seekers who was denied multiple interviews

Interpretation Holds the Key:

Can be misread, misused, or misunderstood if interpreted outside the community
Lack of participation = lack of access

Example:

State data might say Deaf clients declined services, when those clients weren't offered communication access

Framing, Shaming, and Applying:

Sharing data through visual dashboards, stories, or legislative brief makes it actionable
What outcomes do we see from applying data

Example:

How to Elicit Change:

Individual transformation
Community & organizational action
System & policy change

Individual Transformation:

Self-awareness and data literacy
Storytelling
Modeling

Community & Organizational Action:

System & Policy Change:

Turn community fundings into legislative briefs
Push for data driven legislation
Engage with state and federal agencies

Local Legislative Opportunities:

Problem
Data
Policy action

Identify, Outline, Prepare:

Identify a current pinch point in work
Outline how data can be used to describe it, gain allies, propose solutions
Prepare a one-sentence policy or action statement

Personal Practice:

Identify = Registry capacity
Outline = Registry itself, create national/local alliances (e.g., NAD, ACLU, etc.),
utilize out-of-state travel costs for interpreters and registry/exam policies to
identify barriers to in-state retention, regional registry reducing costs, etc.
A \$100K role with ADSD has remained unfilled for a significant period of time; while
such a salary might seem attractive on its face, the question is why it remains
unfilled

Others' Practice:

Open captioning in theaters = better accessibility

Join a census to gain Deaf Blind data

Resource Sharing:

Federal:

Census Bureau
Bureau of Labor & Statistics (BLS)
Rehab Services Admin (RSA) annual reports
NIDLRR data & research

Deaf-Centric:

National Deaf Center (NDC)
Gallaudet Research Institute
American Society for Deaf Children (ASDC)
DeafNation reports & community surveys

Legislative:

LCB
National Conference of State Legislatures (NCSL)
WIOA Sections 188 & 503 compliance data

NV:

BVR
ADSD
OMHE
Medicaid
Office of Labor Market Information (LMI)

Data to Dignity:

Data more than just numbers, it's truth in service of justice
Change happens when data meets compassion & courage
Data has power, use it

Q & A:

Data conversion and transmittal to people that need to see it - direct communication vs. interpretation cost

CSD Works:

Lexi Bullock, Program Manager
Jay Mills, Marketing & Outreach Coordinator, NV Equipment Distribution Program (EDP)

Sunday (12/14) Session 3B: American Civil Liberties Union (ACLU) of NV: Building Rapport with Legislators

Presenter:

Kaylah Maese, Policy Manager

Mission and Values:

Liberty - Constitutional freedoms (First Amendment focus)

Justice - Equal access to remedy

Democracy - Meaningful participation in governance

Equality - Fourteenth Amendment

Legislative Composition/Factors:

Senate - 13/8

Assembly - 27/15

Biannual - TX, MT, and ND

Q & A:

Purpose of bills

Ignorance of ADA

Support Service Provider (SSP)/Co-Navigator (CN) Role & Advocacy W/Hunta Williams

- SSP Vs Co-Navigator SSP is the helper model Co-navigator offers more autonomy for the individual who is deaf blind
- The interpreter can not be the co-navigator and vis versa
- Any time you're working with a deaf blind individual remember it's always a team effort.
- You should never be making the decision for the deaf-blind individual you want and deserve their independence
- It's important to set boundaries and stick to them.
- Important to give them an adequate description of the environment to make the client feel safe
- Performed a Demo with 4 volunteers Two using SSP two using CN, Hunta and Yash then asked the following questions:

Question: What are some differences you notice between SSP and CN?

Answer: SSP felt more time focused in a hurry pulling and tugging whereas the CN felt more relaxed and comfortable

Question: How did you feel about using an SSP?

Answer: Felt confusing

Answer: Felt awful I hated feeling like I was yanking and pulling someone

Question: How did it feel with CN?

Answer: More comfortable felt safer in the environment because they had used mapping beforehand. It also felt reassuring to feel the different textures of the wall, and chairs, and people. It gave a better understanding of the environment, and it feel like I had more autonomy

Question: How was the mapping? Did you feel it was beneficial?

Answer: Yes it was, it felt like I had a better understanding of the distance in the room and where the door was compared to where I was standing.

Audience Questions:

Question: Do you have any experiences being mistreated or experiences with oppression? If you feel comfortable sharing personal stories.

Answer Hunt: Yes I have been the problem is in terms of trying to sue its difficult without consistency its not about the money it's about accessibility. It happens to deaf blind people all the time its about making change encouraging change.

Answer Yash: The problem with the legal system is that the legal system isn't accessible. Having the information of what to do, getting an interpreter specifically one that knows pro tactile.

Hunta: Judges don't understand deaf blind people the culture the importance of the touch contact. Navigating the system is tough the judge is not open to deaf blind or their culture, they are not open to it

Question: Is there any information or technology that you use that we can have available in the future or to be aware of?

Hunta: Honestly its impossible, a lot of standard tactile equipment is not meant for deaf and blind. All caps can be seen as aggressive but that just how I see better. Plus a lot of the equipment is very expensive. The biggest struggles are also mobility, really small text, changing color, that can be incredibly expensive.

Yash: You can have braille equipment but that's about 3,000 dollars and what if it breaks. You have VRI but you that's also not accessible.

Hunta: Deaf blind can use braille or large colored text. Black with yellow txt works best for us but everyone is different so always as what that individual needs. No one size fits all.

Yash: I asked for a new laptop and asked for apple because they set up for zoom and everything. It has a wrist stand because I have nerve problems in my wrist. Screen can fold out to make a larger screen or can zoom in. You can get things that vibrate the floor but people would prefer something you

can carry around. Some people use iPhone with accessibility apps. Some want to amplify the sound.

Hunta: Even preparing for this it wasn't deaf blind friendly. The software is not deaf blind friendly you need to find out what they're preferences are. What's best for me is zoom

Question: Where can I go to learn and train more about Deaf blind and working with Deaf blind?

Hunta: Start with people around you who are DB and asking if they have a CN and see if you can work with them to learn hands on, attend deaf blind socials and events. We don't bite, reach out and come to our events.

Deaf Seniors of America (DSA) Advocacy (12/13/25): "Empowering Deaf Seniors: Advocacy Strategies for Building a Stronger Community in Nevada"
→ Sherri Collins (DSA), President.

- **Brief takeaways from presentation:**

- Goal of this workshop/breakout room: inspire and equip local leaders for state-level impact
- DSA Mission: enhance the quality of life for Deaf older adult citizens
- "Deaf adults tend to be 'invisible' because you don't realize the disability until they speak."
- QR code provided for all Deaf Senior citizens over the age of 50, data is needed:
 - https://docs.google.com/forms/d/e/1FAIpQLSfNK7J-xamzzAMepv10_dmN4uJfuuByLhCKKGSCy0A1SeIJEA/viewform
 - Results will be made public in the summer of 2026
- Deaf Seniors - an organization by Sean Mullholland, was mentioned
 - Regarding advocacy to talk about issues and partner with state departments. Inviting them to come to meetings and learn from them.
 - "Town Hall meetings"
 - "Sean is a strong advocate trying to get more members to help advocate."

- **Q & A/Comments/Concerns:**

- How many 'Aging Centers' do we have in Nevada?
 - "None."
 - "We are the state unit of aging, one of 7 states that does not have AAA (Area Agency on Aging)."
 - "Money from the government comes into the subunit of aging, then it is subawarded to community partners for the 'Older American' services that come into."
- How many 'Deaf or ASL friendly' caregivers do we have in the state of Nevada compared to 'Hearing' caregivers?
 - "One person living in Las Vegas."
 - Showing how the health system standard is really low for the Deaf elderly.
 - Are the caregivers inviting deaf people to encourage them to become caregivers?
 - To get training?
 - Are interpreter services provided for the needed training?
 - No
- **Questions proposed by Sherri for the crowd to think about:**
 - What scares you when you grow older?
 - "Isolation"
 - "Medicare not covering cost of nursing home."
 - "Loss of my independence."
 - "Worst fear is being put into a nursing home and becoming isolated—it's the road to dying."
 - "We would like to have a deaf center or location where Deaf people could lead, where senior citizens could go and live, possibly."
 - Define your quality of life now. What would you say?
 - "I have Medicare, and I am suffering. I am worried about a nursing home, about taking care of my house, my financial plans. I have to look and set up trusts, and then I have to figure out what I'm going to do 5 years after I have the trust, and how do I prevent the government from taking

what's in my bank account or taking my home away, so I can afford to go to the nursing home. I need to find an attorney. I have to figure out how to set a trust fund, set up a 5-year plan in case I have to move to a nursing home, and I'm worried about that."

- Have you seen an attorney? - "Yes."
- "When my mother died, she had \$500,000, and the nursing home took all of it, because she was not protected, so her assets were not protected. The government was able to take away our money."
 - You are learning now because your mother passed away. What'd you learn from your mother? Have you set up things so that your house and finances cannot be touched?
 - "House not to my name."
 - You feel safe and satisfied with the plan you have currently? - "I don't know, I'm not sure, I'm not very trusting. I'm not sure what people are going to do with my money."
 - You hired an attorney and set up protection for your property? - "Yes."
- "My mother is Deaf, and she is declining; my father passed away, and I am the caretaker for my mother. I thought she would do better in a nursing home because she started to forget things. My mother's pension and social security were recorded so that she could get on Medicaid, filled out all the paperwork, but we didn't know what to put down: stocks, pension, and my mother responded saying she thought she had stocks. When she got to the nursing home or wanted to get in, they weren't accepted, and again needed to file for Medicaid, again denied. They had to after her pension, flat rate on a fluctuating scale, and so she filled out all the paperwork and was transferred over to a nursing home, and then changed to Medicaid, which was 100% covered. It was \$8000 a month rent-free, Medicaid or not, so after 3 months, they threw her on the street. I started asking my family member questions, talking about

transitioning assets to other family members' names, and applying for Medicaid."

- "I wonder, if I don't have any family members and I get put in a nursing home, who is going to do all that work for me to get the money?" - How do I protect my assets?
 - Something to consider
 - Goes back to your will and trusts
 - You can ask Fiduciary Oversight: an agency or organization that protects your assets, but you need to look at the law of your state and have your situation explained in your will or trusts. - Legal question, and important that you look into this.
- How many of you know the meaning of SHIP? What does it mean? - Where do you make contact to learn about the Medicaid and medicare programs?
 - "In Nevada, it's called MAP."
 - They don't know what that means. Make notes - this was directed to the government individuals who were present at the conference.
 - "Medicare assistance program."
 - How do people contact the program in general?
 - "The MAP is if you need to contact them and ask questions, you need to go through ADSD."
 - "Has a community partnership: Dignity Health has a number to contact them directly. We recently awarded communications services for the Deaf for some of our MAP funding, and it will be an outreach specifically for events of the Deaf and Hard of Hearing about Medicare and those without medicaid assistance. We have a partnership in the north to have access to the healthcare network."
 - Good information for Medicare (CSD), but how do they get in contact for Medicaid? - "Do not know."
 - "It is going to be an operationalized intake for that process. All that information is on our website, alongside the applications, go through the division of social services (previously

known as the division of welfare and supported services)."

- "We have a booth at the exhibit hall, see us there."
 - Need to apply a CMS - Medicare, which is a SHIP
- Do you know what a POA is? - "Power of attorney."
 - Do you have one in your trust and your will? Do you know there are 2 different kinds?
- Where would you start, here in the state of Nevada? Do you know what step 1 is? Who would be your first point of contact?
 - Maybe CSD?
 - You need to know the list of resources.
- "Do Deaf seniors of America use Deaf clubs?" - No, it is like the NAD.

Contact information:

Sherri Collins, Executive Director

email: execdir@deafseniors.us

website: www.deafseniors.us

ADSD accessible long-term care for Deaf and Hard of Hearing Communities

12/14/25 – Marie Coe

● **Brief takeaways:**

- Marie Coe is an Ombudsman: an advocate who helps consumers voice concerns and address complaints.
- "Honoring the dignity of every Nevadan" - ADSD Motto
- Visit adsd.nv.gov for more information

Contact Information:

Marie Coe

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● **Questions/Comments/Concerns/Interests:**

- "What a great initiative that you have. This is a model right here. You already have the model, so grab this opportunity and work with this group whose huge concern is the facility. When they audit and do communication access. The government always overlooks the care facilities. With the whistleblower about the

gentleman in the wheelchair not getting care, and no communication access. Nothing, zero. He was not given an iPad because he couldn't afford one. His hair was down to his elbows, his glasses were broken, half-blind because he had diabetes. That was a huge case of neglect and care from a provider and facility. Caretaker said everything was fine, but he just nodded his head-

- The reason we need a partnership because they would not be able to communicate
- "What is your timeline for your vision with the initiative and partner with the community?"
 - Now!
- The team is going to reach out to Deaf Seniors of Las Vegas to communicate what is happening and do a collaboration.
 - Sean is pulled into the meeting, and the Deaf seniors are mentioned.
 - "They have a model, and you have a model. It's approved 100%. I want to encourage everyone in the community to ask what's next. To talk to them about that potential partnership."
- "You work for Enrich Nevada under ADSD, a new program, and I work closely with Jen and their team about equipment distribution. We are setting up Deaf services. I wouldn't mind working with you on that."
- "Thinking about the Deaf seniors, about employee training and the placements in the state of Nevada, all the staff nursing and doctors, and learning about how to work with them better. To engage with them better, how do we serve them better? There are many horror stories about neglect. I want to get involved in that in the long-term plan and will reach out to you this week."
 - We need partners and connect with services to integrate technology. Agree that there are a lot of horror stories, and people don't know how to take care of others and communicate.
- Has anyone been to a nursing home or a living assistance facility?
 - "no"
 - "I would be interested in going."

- Will be bringing the group (LVDS) on a tour of those areas to see what the experience is like
- "My mother was Deaf and sent to a nursing home, and found out she was lonely, not a lot of Deaf people there, asked a social worker, can you find some help so she can have a conversation. They said no because of HIPAA," - "How do we solve that?"
 - Have resident councils that say what is beneficial and not, and it is a perfect example of what can be brought up. If you have advocates that new, it helps reduce isolation. HIPAA is not violated. We would look for solutions.
- "For the next two years, what is your vision?"
 - Now is the best time to understand what is offered, seeing Sean's group, Lexi's group with technology, and what they have to improve the quality of life that can be implemented now. Then look at the major changes to improve access to communication in settings. - identify what the needs are
- "Where is the money coming from to do all this?"
 - programs funded by the state and federal government, it is mandatory, but technology (TDDSurge charges).
- "What does your intake process look like? Is access provided there? How does that work?"
 - If someone arrives at a nursing home, we don't know that. They are an advocacy group when there is a complaint. They receive a brochure, not accessible, things we need to recognize. The number is capturing if interpreters are needed, so complaints and concerns can be learned about and solutions/resources. → need to collaborate for more
 - "Do staff go in and visit them or just wait for a complaint?"
 - Go in to build a rapport with the people in the care to check up on them. It is personal engagement that is done with the person in care."
- "Do you have to qualify by income level, be homeless, on Medicare, or need Medicaid?"
 - Services are free for anyone who is in the facilities, no matter age or setting. If there is a care concern, then they can assist and advocate.

Nevada Bureau of Services for the Blind and Visually Impaired: Nevada DeafBlind Resources and Services (12/14/25) - Lora Turner & Richele Pennock, statewide rehabilitation supervisor

- **Brief Takeaways:**

- Deaf Blind Services in Nevada - the main goal is to convey
 - "Here in Nevada, we have a lack of services, and we want to shed light on that."
- VRNevada @DETRNV.com → website

- **Questions/Comments/Concerns/Interests:**

- "I'm curious, what do you recommend for support for Deafblind to build a better community here in Nevada? What-your presentation about?"
 - Misinterpretation/understanding & clarification follows:
 - "In your presentation, you talked about-for Congress. Are you trying to propose legislation for the Deafblind community? If you want to get something passed, how do you go about doing it?"
 - Here to address the state of Nevada services for the DeafBlind, there are gaps in the program, but they are trying to bridge the gaps, not through legislation.
 - Richelle talks about a situation in Colorado, where two of her clients recognized they did not have funding in the state for service support providers; therefore got together and used a grassroots approach and went to the legislature to request funding.
 - "VocRehab doesn't do any legislative work but provides the training, information, and the things needed for DeafBlind individuals to make that request. For those who have low vision/vision loss, sometimes they are missing information to develop that skill, and then lack encouragement to seek the services they need. Those individuals need that support. So if you can clarify what they needed."

- Nevada rehabilitation does have a council, so that is how the VRE works with the public and helps improve policies and programs. That is what drives our state plans on how they make improvements.
- Have had blind individuals sit on the panel, but never had a DeafBlind individual in that counsel. → encourage to make that counsel more diverse
 - We don't refer clients to advocacy agencies only provide services and training so they can self-advocate with the skills they learned.
- "Colorado, the people could get the support and funding needed to support SSP" - clarification occurred on the situation by the CDI
 - The hope was that the story could be mimicked here in Nevada. Do something like that here as well.
- "In order to improve the services for those who are Deaf & low vision clients, in this state, what percentage of clients are DeafBlind or Low-Vision? You really need the stats and number of people who are deafblind."
 - Very small percentage - had about 25 people across all the cases they went through, who were in the older blind program (over age 55) and not seeking employment.
 - "How many clients do the services help statewide?"
 - Not sure about how many clients – about 200 clients? - 11% – about 240 clients
 - "The reason I asked about statistics is that you want to look and see them as individuals, you also recognize that there are younger people who also may be blind and deaf. Seeing that in their youth, they are not identified, and their needs are different from older individuals. There is a gap there; we need to change how we get statistics. something that needs to be discussed here because you have that concern within the blind community. It takes a lot of mental practice to learn how to communicate with a Deafblind individual, and so that gap needs to be shortened so we have the services we need. It's a focus for VR but state-wide as well, not just yours."

- We cover all our cities, regarding youth, Lora is active in the department of education with a strong partnership. VocRehab does get the bulk of all the child count data. They know exactly how many students are identifying as DeafBlind and have low vision. Working with the schools in the state to capture the youth early on. The data has improved through the years.
- “Chad Etcalf, from LA, how often does he come here and provide support to the Deafblind community?”
 - Not sure, usually met through Zoom.
 - Met in person twice, but have not talked in the past 3 years.

PK-12 Students: Access to communication

- Compare and contrast K-12 vs Post secondary
- Just because there is an interpreter does not mean the communication needs are being met

NAIE

- 1) Student Autonomy
- 2) Provide access to language at all times
- 3) Maintain Confidentiality
- 4) Member of the Educational Team
- 5) Participate in continuing education
- 6) Avoid conflict of interest
- 7) Engage in all ethical practices

RID

- 1) Confidentiality
 - 2) Professionalism
 - 3) Conduct
 - 4) Respect the Consumers
 - 5) Respect Colleges
 - 6) Business Practices
 - 7) Professional Development
- What is a “qualified interpreter” That means different things to different people or different organization
 - Ethical service provider has a voice compared to accommodation
 - Interpreters are not language professionals
 - Myth of Neutrality in Interpreting

- We all have biases cultural understanding, educational background, ethical considerations
- Experiences in specialized fields empathy and mentorship style Can you embody the people you're interpreting for to create an accurate representation of the world around them.
- My trauma looks different than yours and how does that show up in the work
- Teaching the child to have autonomy I asked the student can I join then I ask the other students can I join
- As an interpreter your behavior is reflected on the student
- When you have a student and they have a question instead of saying ask the teacher
- Are you asking me? Who are you asking? Maybe ask your neighbor? You need to ask the teacher lets go together? How do you want to communicate? Do you want me to be involved or do you want to talk to the teacher yourself?
- Teacher can also ask the interpreter for clarification
- Respect how your student chooses to communicate
- You're not going to lose your job because students have CO or Hearing Aids Don't take away their right to being bilingual.
- www.NAIEDU.org

Time ran out so there was no Q & A session

Navigating through Nevada Vocational Rehabilitation (VR) Transition Services for Youth with Meg and Mickey

- Transition age 14-22
- Audience Introduction
 - I want to attend this workshop to be able to provide my own experiences and learn more about VR
 - DHHR speaker I want to learn because we have D/HH students
 - General Ed I but I want to transition into teaching the deaf and hard of hearing
 - As a student interpreter I want to become more knowledgeable about the def student I may be working with in the future
 - A student from Gallaudet graduating in 2027
 - Junor at Liberty
 - Senior at Liberty
 - Teacher at Roundy PreK and UNLV for the teaching program

- K-12 interpreter wanting to learn more about NV and their VR services because I'm from Virginia
- Retired Interpreter now working NEIE interpreters working in a k-12 setting and I want to learn more about the connections between interpreters in the k-12 setting connects with VR transitions.
- Works global marketing and life coach wants to learn more about VR policy and how it works in NV and the knowledge to help fight for BIPOC people.
- Clinical Psych I believe VR is the reason I was able to get that degree, so I want to learn how it's been updated
- Meg is a coworker so she's here to support
- Licensed Marriage and family therapist and an addiction counselor. Have private practice, hearing but work with D/HH clients preferably Teens but work with all ages. Supervisor for the clinical professional counselors in NV and supervises the students here.
- Licensed clinical social worker, I'm here because my undergrad was VR in Illinois my supervisor had a PHD in Psychology so I'm curious to see how NV does it.
- Coda working at row elementary school with the deaf and HH I'm working on getting my master's at Gallaudet in clinical mental health
- Role's consultant and I work at the national deaf center that works with 14-24 year olds

Question from Speaker: What do you think VR is what do they do?

Audience Answers:

- Help people get ready to join the workforce.
- Job training and evaluation of skills
- Help with college work evaluations, life plan, provide needs and support
- Help people set up career goals
- Resume building
- Help with interview skills
- To provide role models for the students and resources and referrals
 - What do you mean role model?
 - Exposer to similar disabilities to ensure socialization from peers
- Hear from clients VR can help get clothes for interviews

- VR helps with navigation of the system

End of Answers

- We approach adults very differently than students and how you transition from being the student to being an adult
- WIOA the Workforce Innovation and opportunity Act
- I wanted to clarify WIOA started with Obama. He didn't start it but he signed it in and was a big supporter
- Need to set aside 15% of their federal funds to provide pre-employment transition services
- Generally speaking, I know with the current admin there are certain controversies with majors which are relevant that are becoming not relevant.
- To be honest we don't have an answer we haven't addressed that. There has been no impact yet.
- So right now, we just proceed with process as usual until we get confirmed change
- Developed timeline throughout their high school career
- Goal is the end of HS they are job ready career ready they know what they want to do
 - If interested start application process online we have different languages including ASL
 - After application within a couple days you'll have a pre assessment with different forms to get different information to determine eligibility
 - 60 days the counselor determines the eligibility
 - After developing the plan the services will be provided and it can last from 6 months to 5 years
- Transition age is from 14-24 youth then transitions to adult VR

Audience Question: Did Nv make up this timeline?

Speaker Answer: Recently VR updated the marketing this is more conceptually correct and accurate we received a grant from the Department of Education Nevada trip map for children 10 and up now they navigate their journey to adulthood with VR. Everyone has access to this website. The grant is good for 5 years. This timeline is only a year old and we're very proud of it.

- What is pre-employment services
 - Job Exploration
 - Work-based learning experience
 - Workplace readiness training
 - Self Advocacy training post secondary educational training
- Must have an IEP to apply for VR
- Early services include
 - Career exploration counseling

- Work based learning
- Workplace readiness training
- Self Advocacy instructions
- I am thinking myself 14- I didn't know I wanted to be a psychologist so if student wants to become a vet do you lead them to that career
- If that student is 14 they don't know what they want to do we start the process
- First year of HS apply for VR services, better to start young to get those services
- Sometimes at people who are 18-19 apply and they don't have the documents or drivers license so applying early they will help you
- Provide interpreters at job fairs

Audience Question: Who refers the student to VR, does the school refer the child or the parent?

Speaker Answer: Yes, many referrals come from the school or a psychologist. Most come from the school but anyone can refer you to VR.

Audience Question: Can a person refer themselves?

Speaker Answer: Yes, you can. We collaborate with CCSD, which is who we work with, every HS that has it's own transitional specialist. And special educational services. You can apply yourself but we don't get a lot of self-application.

Audience Question: What about homeschooled student can they apply for VR?

Speaker Answer: Yes absolutely

- Sophomore and Junior year
- VR offers drivers Ed and the interpreter needed, we also have behind the wheel training, they also paid for the service to use they car at the DMV for the test
- Offer information about adult services such as Residential programs, guardian ship, financial etc.
- Have transportation services to people can learn how to use the bus so they can go to jobs or schools
- Drivers ed also teaches self advocacy maybe it's the first time they've used an interpreter outside of the school setting
- Senior Year- 22
- Review IEP transcript to monitor progress and the diploma status
Discuss transfer of rights to the student at 18
- Find and maintain a part time paid or volunteer job within the community
- If the student lives in a group home request collaboration between the school team and group home team

- If college is the next chapter
 - Take college entrance test
 - Apply for financial aid
 - Complete application to colleges

Audience Question: Can they pick a college out of state

Speaker Answer: Yes absolutely, we make exceptions its very individual to the person. Right now we have to Gallaudet students and two RIT students

- 18 Years Old
 - Re apply for SSI and Medicaid Benefits prior to the students 18th birthday
 - Apply to vote
 - Can help provide hearing aid only if they need it for school or work
- Vocational Camps
 - 1 week long for D/HH only
 - Go over self advocacy, role play,
 - VR Services

Audience Question: Do we have camps for adults or only children?

Speaker Answer: No, we have a specific age range the youth transitional students. Classes during the day and social events at night so it's a great opportunity to co habitat and share resource and create connections in the community

PANNEL ACTIVITY

- We offer summer youth internship program. Every July we refer student to different locations, offices, places where students are interested. Some involved with arts, some with the accounting office in VR and many more.
- We emphasize hands on work and experiences. Average 6-12 weeks of internship No limit. It is paid
- VR paid for his glasses

Speaker Question: If you could tell younger kids like you what you wish you could have done what would you tell them?

Pannel Answer: I would share about the permit I wasn't aware of that at the time, I wish I had learned all the services they provided at a younger age like 14

Audience Question: Curious about the drivers ed program do you offer something for adults

Speaker Answer: I'm not sure I don't think there's an age limit we'd have to talk to our vendor

Senate Bill 192 is aimed to enhance maternal care and health insurance coverage. The bill mandates that hospitals and freestanding birthing centers provide qualified sign language interpreters for patients during childbirth, ensuring effective communication for those with hearing disabilities, as it aligns with federal regulations that prohibit requiring disabled individuals to bring their own interpreters.

Section 1 states: A hospital or freestanding birthing center shall: Notify each patient who is deaf or hard of hearing and is in labor or intends to give birth at the hospital or freestanding birthing center that a qualified sign language interpreter is available while the patient is in the hospital or freestanding birthing center; and upon the request of such a patient or his or her representative, provide the patient with a qualified sign language interpreter until the patient is discharged from the hospital or freestanding birthing center, unless providing an interpreter would be impractical under the circumstances or delay necessary care for the patient

Other provisions in SB 192 include

- allow family members and doulas to be present during the birthing process.
- mandates that various health insurance providers (including individual, group, and managed care plans) cover doula services and include doulas in their provider networks, effective January 1, 2026.
- requires health insurance plans to cover testosterone replacement therapy for menopausal women. The legislation also introduces significant provisions prohibiting the use of race-based health formulas and care standards, requiring medical boards to create and maintain a list of authorized race-based medical practices only when no race-neutral alternative exists.
- requires an independent mental health assessment for children in child welfare agency custody who have been diagnosed with mental or behavioral health conditions.
- prohibits health insurers from discriminating against solo practitioners and mandates a comprehensive study of health care disparities by medical boards and medical schools, with a report to be submitted by February 1, 2027.

Recommendations: Separating the communication needs protected by ADA of Deaf and Hard of Hearing patients during labor and delivery from other fiscal notes such as required insurance plans, assessments and reports,

IEP/504 Plans and more- Nevada Hands and Voices (NVHV): Advocacy from a Parents Perspective W/ Beth Jones

- Putting the I in IEP
- Start time 1:39 – End time 2:40
- Her son presented her last year so she will present both her and her sons' perspectives
- Skills that the student can develop at an early age.
- IFSP Individual family service plan, ages birth- three family service plan because it aims to serve the whole family. 3 and older can qualify for an IEP or 504 to allow accommodation
- IEP is formulated by professionals and implements goals
- Self-advocacy is important for all involved
- If referring to "the student" it's in reference to her son
- The impact of having deaf and hard of hearing role models along with help and support from professionals
- Her role as the parent 2/3 are D/HH
- Son started in an oral program 3-5
- 2% his involvement 98% parent involvement
- Had to involve herself in the community because she had no help and in order to learn as much as she could about the community and what the options are, are the choices she's making the right choices
- She wanted to learn from professional and parental experiences
- Volunteered as often as she could to see how he interacted with his peers, teachers, how he treated his hearing aids
- K-3rd grade Self-contained but still mainstreamed himself and his sister were the old deaf students in the school
- 14 < deaf and hard of hearing students must provide student preference for their IEP
- Educational advocate at NVHV 8-hour basic training
- Parents are equal members of the IEP
- 4th- 5th grade
- Entire 4th graded year online during covid
- Google translation during covid on zoom

- Participation started growing, learning to advocate for what works and what didn't
- Started becoming more involved with the community, learning from other deaf peers or deaf adults
- Middle School
- Officially passed the parent in involvement in the IEP
- During COVID the meetings became over zoom and he became more of an advocate for himself what worked and what didn't
- He started to be the one running the meeting
- Sometimes as a parent you don't always agree with what they advocate for. As a parent you can monitor but you can't make decisions for them
- Goals for the future, High School
- Discuss what will happen in the future. Full self-advocacy
- Leads his own IEP meeting. Became a leader in the community and continues to learn from other Parents and Professionals
- As a parent it is crucial to be a cheerleader for your child.
- Wants parent support but doesn't exactly need parent involvement in the meeting
- He now understands his options, knows how the meetings run, knows his wants and don't want
- Skills gained from IEPs at an early age: Confidence, humor, accountability, leadership, communication, trust, and joy
- If he waited until 14 when he's required to be there, he would have missed out on so many beneficial experiences and life skills.
- He was able to create meaningful relationships with teachers starting at a young age.
- All the skills he learned can be skills for all members involved in the meeting.
- This goal is attainable for all students regardless of behavior or language acquisition
- Tips to personalize your child's involvement: Pay attention to their interests not what yourself or others perceive their interests to be, Listen to your child on what their concerns are, Believe in their capabilities,
- Even if the Teacher running the IEP doesn't ask what the student interests are you should still be asking those questions, but don't overstep those boundaries and answer on their behalf.
- Keep your information organized. Knowing this is the 'binder' where I keep all my information about passed IEP meetings. Makes a big difference when you come in prepared and willing to learn versus knowing nothing but assuming you know everything

- Try finding the joy in the journey, take photos of the good and bad so you can remember why its worth. Don't give up on your kid, be there for your child.
- **Do you have presentations or workshops for parents not native or coming from out of the country?**
- We have a NVHV Spanish coordinator as well as the national Latina counsel at NVHV sends out a feedback/informational form twice a year just get in contact with a member of NVHV to be put on the email list for that. We can also always request a Spanish interpreter or more Spanish lead workshops.
- **What about if the parents themselves aren't educated?**
- We believe in education in empowerment we have plenty of workshops like this one today as well as providing one-on-one educational meetings.

Support Service Provider (SSP)/Co-Navigator (CN)

Role & Advocacy

W/Hunta Williams

- SSP Vs Co-Navigator SSP is the helper model Co-navigator offers more autonomy for the individual who is deaf blind
- The interpreter can not be the co-navigator and vis versa
- Any time you're working with a deaf blind individual remember it's always a team effort.
- You should never be making the decision for the deaf-blind individual you want and deserve their independence
- It's important to set boundaries and stick to them.
- Important to give them an adequate description of the environment to make the client feel safe
- Performed a Demo with 4 volunteers Two using SSP two using CN, Hunta and Yash then asked the following questions:

Question: What are some differences you notice between SSP and CN?

Answer: SSP felt more time focused in a hurry pulling and tugging whereas the CN felt more relaxed and comfortable

Question: How did you feel about using an SSP?

Answer: Felt confusing

Answer: Felt awful I hated feeling like I was yanking and pulling someone

Question: How did it feel with CN?

Answer: More comfortable felt safer in the environment because they had used mapping beforehand. It also felt reassuring to feel the different textures of the wall, and chairs, and people. It gave a better understanding of the environment, and it feel like I had more autonomy

Question: How was the mapping? Did you feel it was beneficial?

Answer: Yes it was, it felt like I had a better understanding of the distance in the room and where the door was compared to where I was standing.

Audience Questions:

Question: Do you have any experiences being mistreated or experiences with oppression? If you feel comfortable sharing personal stories.

Answer Hunta: Yes I have been the problem is in terms of trying to sue its difficult without consistency its not about the money it's about accessibility. It happens to deaf blind people all the time its about making change encouraging change.

Answer Yash: The problem with the legal system is that the legal system isn't accessible. Having the information of what to do, getting an interpreter specifically one that knows pro tactile.

Hunta: Judges don't understand deaf blind people the culture the importance of the touch contact. Navigating the system is tough the judge is not open to deaf blind or their culture, they are not open to it

Question: Is there any information or technology that you use that we can have available in the future or to be aware of?

Hunta: Honestly its impossible, a lot of standard tactile equipment is not meant for deaf and blind. All caps can be seen as aggressive but that just how I see better. Plus a lot of the equipment is very expensive. The biggest struggles are also mobility, really small text, changing color, that can be incredibly expensive.

Yash: You can have braille equipment but that's about 3,000 dollars and what if it breaks. You have VRI but you that's also not accessible.

Hunta: Deaf blind can use braille or large colored text. Black with yellow txt works best for us but everyone is different so always as what that individual needs. No one size fits all.

Yash: I asked for a new laptop and asked for apple because they set up for zoom and everything. It has a wrist stand because I have nerve problems in my wrist. Screen can fold out to make a larger screen or can zoom in. You can get things that vibrate the floor but people would prefer something you

can carry around. Some people use iPhone with accessibility apps. Some want to amplify the sound.

Hunta: Even preparing for this it wasn't deaf blind friendly. The software is not deaf blind friendly you need to find out what they're preferences are. What's best for me is zoom

Question: Where can I go to learn and train more about Deaf blind and working with Deaf blind?

Hunta: Start with people around you who are DB and asking if they have a CN and see if you can work with them to learn hands on, attend deaf blind socials and events. We don't bite, reach out and come to our events.