

Handicap. Not a synonym for disability. Describes a condition or barrier imposed by society, the environment, or by one's own self. Some individuals prefer inaccessible or not accessible to describe social and environmental barriers. Handicap can be used when citing laws and situations but should not be used to describe a disability. Do not refer to people with disabilities as the handicapped or handicapped people. Say the building is not accessible for a wheelchair-user. The stairs are a handicap for her.

HIV/AIDS. Acquired immunodeficiency syndrome is an infectious disease resulting in the loss of the body's immune system to ward off infections. The disease is caused by the human immunodeficiency virus (HIV). A positive test for HIV can occur without symptoms of the illnesses which usually develop up to 10 years later, including tuberculosis, recurring pneumonia, cancer, recurrent vaginal yeast infections, intestinal ailments, chronic weakness and fever and profound weight loss. Preferred: people living with HIV, people with AIDS, or living with AIDS.

Mental disability. The Federal Rehabilitation Act (Section 504) lists four categories under mental disability: psychiatric disability, retardation, learning disability, or cognitive impairment.

Non-disabled. Appropriate term for people without disabilities. Normal, able-bodied, healthy, or whole are inappropriate.

Seizure. Describes an involuntary muscular contraction, a brief impairment or loss of consciousness, etc. resulting from a neurological condition such as epilepsy or from an acquired brain injury. Rather than epileptic, say girl with epilepsy or boy with a seizure disorder. The term convulsion should be used only for seizures involving contraction of the entire body.

Stroke. Caused by interruption of blood to brain. Hemiplegia (paralysis on one side) may result. Stroke survivor is preferred over stroke victim.

The Arc of Tennessee values diversity and does not discriminate based on race, ethnicity, religion, age, geographic location, sexual orientation, gender or level of disability.



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Wants You to Know...



**How to Report
and Write About
People with
Disabilities**

When writing, it's important to be concise, particularly in journalism. However, sometimes the effort to limit wordiness leads to inappropriate references to people with disabilities. The following guidelines explain preferred terminology and reflect input from over 100 national disability organizations. These guidelines have been reviewed and endorsed by media and disability experts throughout the country. Although opinions may differ on some terms, the guidelines represent the current consensus among disability organizations. Portions of the guidelines have been adopted into the "Associated Press Stylebook," a basic reference for professional journalists.

DO NOT FOCUS ON DISABILITY unless it is crucial to a story. Avoid tear-jerking human-interest stories about incurable diseases, congenital impairments, or severe injury. Focus instead on issues that affect the quality of life for those same individuals, such as accessible transportation, housing, affordable health care, employment opportunities, and discrimination.

DO NOT PORTRAY SUCCESSFUL PEOPLE WITH DISABILITIES AS SUPERHUMAN. Many people with disabilities do not want to be "hero-ized." Like many people without disabilities, they simply wish to live lives of full inclusion in our communities and do not want to be judged based on unreasonable expectations.

DO NOT SENSATIONALIZE A DISABILITY by writing "afflicted with," "crippled with," "suffers from," "victim of," and so on. Instead, write "person who has multiple sclerosis" or "man who had polio."

DO NOT USE GENERIC LABELS for disability groups, such as "the retarded," "the deaf." Emphasize people not labels. Say "people with intellectual and developmental disabilities" or "people who are deaf."

PUT PEOPLE FIRST, not their disability. Say "woman with arthritis," "children who are deaf," "people with disabilities." This puts the focus on the individual, not the particular functional limitation. Despite editorial pressures to be succinct, it is never acceptable to use

"crippled," "deformed," "the retarded," "the deaf and dumb," etc.

EMPHASIZE ABILITIES, not limitations. For example:

CORRECT: "uses a wheelchair/braces," or "walks with crutches,"

INCORRECT: "confined to a wheelchair," "wheelchair-bound," or "crippled."

Similarly, do not use emotional descriptors such as "unfortunate," "pitiful," "suffers from," "victim of," and similar phrases. Disability groups also strongly object to using euphemisms to describe disabilities. Terms such as "handi-capable," "mentally different," "physically inconvenienced," and "physically challenged" are considered condescending. They reinforce the idea that disabilities cannot be dealt with directly and candidly.

DO NOT IMPLY DISEASE when discussing disabilities that result from a prior disease episode. People who had polio and experienced after-effects have a post polio disability. They are not currently experiencing the disease. Do not imply disease with people whose disability has resulted from anatomical or physiological damage (e.g., person with spina bifida or cerebral palsy). Reference to disease associated with a disability is acceptable only with chronic diseases, such as arthritis, Parkinson's disease, or multiple sclerosis. People with disabilities should never be referred to as "patients" or "cases" unless their relationship with their doctor is under discussion.

SHOW PEOPLE WITH DISABILITIES AS ACTIVE participants of society. Portraying persons with disabilities interacting with people without disabilities in social and work environments helps break down barriers and open lines of communications.

The following are preferred words that reflect a positive attitude in portraying disabilities:

Brain injury. Describes a condition where there is long-term or temporary disruption in brain function

resulting from injury to the brain. Difficulties with the cognitive, physical, emotional, or social functioning may occur. Use person with a brain injury, woman who has sustained brain injury, or boy with an acquired brain injury.

Cleft lip. Describes a specific congenital disability involving lip and gum. The term harelip is anatomically incorrect and stigmatizing. Use person who has a cleft lip or a cleft palate.

Deaf. Deafness refers to a profound degree of hearing loss that prevents understanding speech through the ear. Hearing impaired and hearing loss are generic terms used by some individuals to indicate any degree of hearing loss—from mild to profound. These terms include people who are hard of hearing and deaf. However, some individuals completely disfavor the term hearing impaired. Others prefer to use deaf or hard of hearing. Hard of hearing refers to a mild to moderate hearing loss that may or may not be corrected with amplification. Use woman who is deaf, boy who is hard of hearing, individuals with hearing losses, people who are deaf or hard of hearing.

Disability. General term used for a functional limitation that interferes with a person's ability for example, to walk, lift, hear, or learn. It may refer to a physical, sensory, or mental condition. Use as a descriptive noun or adjective, such as person living with AIDS, woman who is blind or man with a disability. Impairment refers to loss or abnormality of an organ or body mechanism, which may result in disability.

Disfigurement. Refers to physical changes caused by burn, trauma, disease, or congenital problems.

Down syndrome. Describes a chromosome disorder which usually causes a delay in physical, intellectual, and language development. It usually results in intellectual and developmental disabilities. Mongol or mongoloid are unacceptable.