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Author(s) :

David Finnegan

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Label Jars Not People

Abstract :

The context in which people with all kinds of disabilities are portrayed and the language used to describe them has been identified as an area of concern by disabled people's organisations and those working on their behalf. It is felt that if discrimination and disadvantages are to be overcome we must be careful that language, often used unconsciously, does not re-enforce inaccurate and patronising images. Language carries many messages. It categorises, labels and reinforces stereotypes. It is therefore important to define our terms. Writing this paper is an important role in the circulation of images and meanings in society. It is only right that we recognise this concern and attempt to represent people fairly.

For further information contact:

Karen Barton (k.barton@bolton.ac.uk), Bolton Institute, Chadwick Street, Bolton, BL2 1JW, England

***The sloppiness of our
language makes it easier
for us to have foolish
thoughts***



David Finnegan

Label Jars - Not People

About this guide

The context in which people with all kinds of disabilities are portrayed and the language used to describe them has been identified as an area of concern by disabled people's organisations and those working on their behalf. It is felt that if discrimination and disadvantages are to be overcome we must be careful that language, often used unconsciously, does not re-enforce inaccurate and patronising images. Language carries many messages. It categorises, labels and reinforces stereotypes. It is therefore important to define our terms. Writing this paper is an important role in the circulation of images and meanings in society. It is only right that we recognise this concern and attempt to represent people fairly.

It is not the intention of this guide to impose hard and fast rules in the use of language, but to offer an over-view of current opinion. Nor will it be an extensive glossary of terms and definitions. The aim is to inform and offer advice and to help eliminate some of the small but important details of language which cause unnecessary offence in today's climate concerning disabilities.

People First

It is impossible to make sweeping generalisations about how people react to the way writers and the media represent them, but it is clear that few disabled people now welcome being portrayed as helpless, pitiable and dependent on the good work of others.

People with disabilities are now calling for as much control over their own lives as possible, and asking that their dignity, rights and freedom as individuals be recognised. This is evident in the growing independent living movement, community care policies and current demands for legislation to give disabled people a say in their dealings with local government and a voice in the community.

People should no longer be defined by their disability, nor marginalised. They are people first and foremost.

It needs to be noted that not everyone diagnosed with a neurological condition will consider themselves disabled and their views and wishes need to be taken into account.

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The recent report from the Office of Population Census and Surveys have shown that one in ten of the population has a disability of some kind. So people with disabilities represent a large part of the community.

Our policy should therefore avoid stereotypes (disabled = wheelchair – helpless) and recognise that a disability is only one factor that constitutes an individual.

Stereotypes

Today disabled people are striving to take as much control over their own lives as anyone else.

Despite recent developments, outdated stereotypes of disability and disabled people persist in literature and the media. These inaccurate images actively hinder many disabled people from leading full and productive lives and from competing on equal terms.

You may recognise some of the following persistent and damaging stereotypes:

- disabled people as embarrassing and pathetic
- disabled people as eternal children
- disabled people as burdens on society and on individuals
- disabled people as marginal participants in community life.

Promotional literature should make positive efforts to rule out **language and visual imagery** which contributes to sentimental, old-fashioned and negative stereotypes, and develop ways in which more positive images can be used. In particular this means showing disabled people as rounded individuals with many facets to their lives just like everyone else.

There is potential conflict between fund-raising literature aimed at a sympathetic response, and literature aimed at promoting a positive image of disabled people.

Focus on Diversity and Celebrate the Difference

When planning leaflets or literature, ask yourself the following questions:

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- does the literature/leaflet show people with disabilities as contributing productive people, capable of enjoying what everyone enjoys
- will the leaflet/literature startle the reader by showing people with high levels of disability?
- Do the images used convey the abilities and initiative of expectations for people with disabled people, or is the disability the sum total of the person?

Remember

- to seek the advice of disabled people on these issues
- to check that all freelancers and other independent writers see this guide when they are commissioned
- there is no such thing as a neutral image. Be positive and seek to challenge outmoded ideas of what is possible.

Heroes and Victims (good human interest stuff innit?)

There is nothing essentially wrong with recognising outstanding achievements by people who have disabilities. But it has a negative effect if we **ONLY EVER HEAR OR SEE THEM WHEN THEY HAVE RAISED MONEY FOR CHARITY OR CLIMBED MOUNT EVEREST**. Is this to be the only criteria for giving them value and welcoming them into the community? This might be compared with the way in which black people are only given status when they excel in sport and music.

Similarly, the repeated portrayal of disabled people as victims of accident, illness or injustices can reinforce stereotypes of helplessness. Of course, we must report injustice when it occurs, but must take care in how we construct the story.

WOOH AREN'T THEY MARVELLOUS! In a recent letter to the Guardian a man with epilepsy complained of the burden of bravery forced upon him by people all too ready to marvel at his ability to carry on. Whilst not rejecting their admiration, he made a distinction between bravery and resilience. Resilience had helped him **LIVE WITH** rather than **OVERCOME** his disability, but the burden of bravery made it difficult for him to discuss with others the continuing problems his condition caused him. It is all too easy to assume that someone leading an apparently active life has overcome their disability when, in reality, it may be a case of having to live with it day to day.

The Syndrome “Does he take Sugar?”

Production staff on the Radio 4 programme which take this phrase as its title still receive the odd query about its meaning. For the record, it has nothing to do with diabetes. It refers to the tendency of able-bodied people to speak over the heads of those with a disability and assume they are brain-dead. In fact the vast majority of people, no matter what their disability, are perfectly able and willing to speak for themselves. In particular, we should not assume that people with learning difficulties are inarticulate. Judge each person as an individual. So... address people directly and, wherever possible let them speak for themselves.

A gift is anything that you are or have which allows you to interact with at least one other person.

Out of the Ghetto

The terms and parts of speech many people still use cause harm and hurt to people with disabilities, but also cut-off the users of that language from a greater understanding and empathy with disabled people. Ultimately the use of such language cuts off the user from a deeper understanding of themselves and others.

Much official literature, specialist writings, programmes on television and radio will always remain an important part until the concerns of people with disabilities are more fully integrated into main stream life. It is perhaps to be hoped that such specialist writings and programmes have a built-in obsolescence.

On another level, writers and programme makers should attempt to include people in their works where their disability is not an issue. For example, as contestants in quizzes and game shows, and writings for articles in magazines, newspapers and the like.

Literature on disability makes the distinction between *impairment*, *disability* and *handicap* and a useful starting point will be to examine these terms. The United Nation and World Health Organisation define these in the following way.

Some definitions and advice on the most commonly used words and phrases:-

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Impairment/disability/handicap

three terms often used interchangeably but having distinct meanings according to the World Health Organisation.

Impairment

refers to having a limb, organ or mechanism of the body which is missing or does not work properly.

Disability

is the functional limitations experienced by the individual because of an impairments resulting in lack of function.

Handicap

refers to the limitations on day to day activity that result from the disability. Thus, someone may have impaired hearing and be disabled because they cannot hear clearly. The degree of handicap will depend on how effectively our hearing aid compensates for this.

The Medical Model of Disability

The medical model of disability sees the disabled person as the problem. They are to be adapted to fit into a world as it is. If this is not possible, then often they are shut away in some specialised system or isolated at home, where only their most basic needs are met.

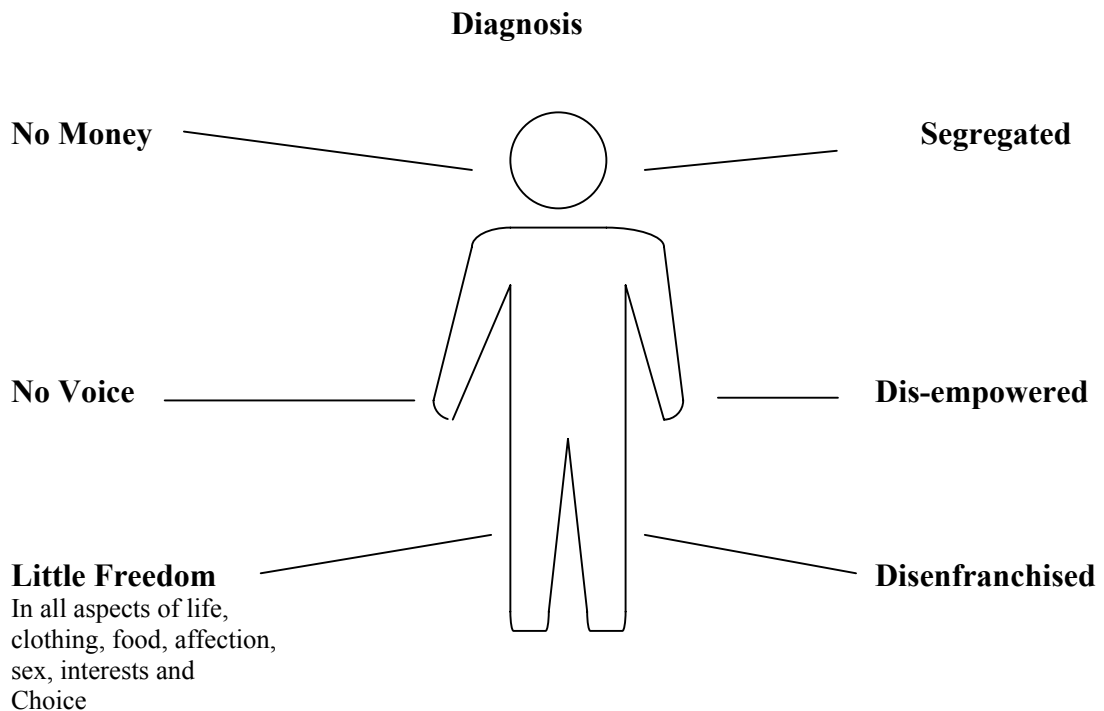
It must be said that it is high time for the medical model of disability, with which so many disabled people have been burdened and oppressed, to pass into history. It has resulted in segregation, enforced dependency, a denial of civil rights and outright discrimination.

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Institutional Model of Disability 1850...

(sometimes referred to as the Medical Model)

Disabled people should be cared for and shut away in institutions
(often placed in groups depending on a medical diagnosis).



Philanthropic

Benevolent

Well-Meaning

Diminishing

Based on “expert knows best” ie doctors, nurses, teachers, care staff.

Old habits die hard. People with power still tend, wittingly or unwittingly, to patronise and make decisions for people with disabilities.

The British Council of Organisations of Disabled Peoples Definition is:-

Disability

the disadvantage or restriction of activity caused by a contemporary social organisation which takes little or not account of people who have physical impairment and thus excludes them from participation in the mainstream of social activities - physical disability is therefore a particular form of social oppression.

Impairment

lacking part or all of a limb, or having a defective limb, organ or mechanism of the body

the disabled people's movement believes 'the cure' to the problem of disability lies in the restructuring of society.

The Social Model of Disability

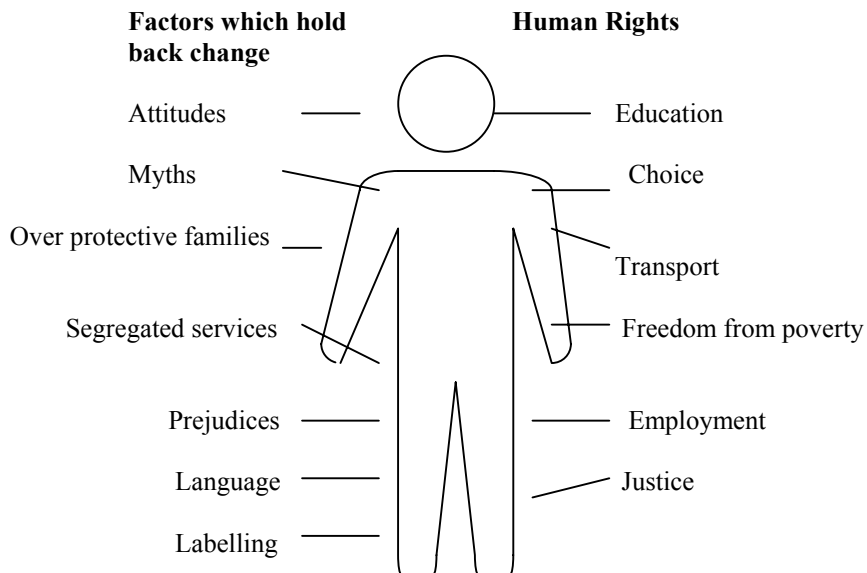
The obsession with finding medically based cures distracts us from looking at causes of either impairment or disablement. The social model emphasises the rights, normality and humanity of disabled people, and argues that the problem disabled people suffer are in the fault of an inhospitable society where the odds are stacked against disabled people in a way that prevents any real integration. Most disablement is created by oppressive social systems.

Social Model of disability 1960-Future

A civilised society is inclusive.

The social model is about access to:

- Environment
- Public buildings
- Information
- Housing
- Telephone kiosks
- Systems – access to Mainstream
 - Transport
 - Education
 - Health
 - Law
 - Employment



The Social Model of disability is based on the construction of Society. *It can be changed.*

Change is dependent on political will. Lack of political will requires:

- Lobbying
- Equal rights legislation
- a collective voice.

A truly civilised community respects and includes every individual

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**Values – Define what's important
(a shifting perspective)**

Empowered	Not empowered
Open to change	Closed to change
Assertive	Aggressive
Pro-active	Reactive
Self accountable	Blame others
Uses feelings	Overwhelm by feelings
Self-directed	Directed by others
Learns by mistakes	Defeated by mistakes
Confronts	Avoids
Lives in present	Lives in past or future

Participation that's Community

Inclusion is and must be Inclusive

The Disabled and the Handicapped

To repeat what already appears in the current guidelines, the phrase ‘the disabled’ is not acceptable. It is dehumanising and too general. Whenever possible say **people with disabilities**. The phrase ‘disabled people’, though generalised is also better than ‘the disabled’.

If anything, **‘the handicapped’** is worse than ‘the disabled’ as a blanket term because handicap can only be assessed in individual cases. It should not be used.

It is worth noting that many people dislike any use of the word ‘handicap’ because of all its allusions to **‘cap in hand’**. Also many feel that their handicap is caused by **society** and not by disability because society often fails to make proper provision for disabled people.

Mental Handicap versus Learning Difficulties

The term mental handicap is now not accepted because it tends to be used as a definition of an enormous range of mental impairment. Importantly people with a mental impairment who are expressing their opinion through the growing self-advocacy movement tend to reject the term in favour of **learning difficulties**. They feel that this is a more open definition by which they might escape stigma and be given a chance to reach their potential. The term is also gaining currency in Social Services Departments and other organisations throughout the Country.

Learning difficulties has in turn been criticised for being imprecise and for being even more open to misinterpretation than mental handicap.

For the moment at least mental handicap remains the most widely used and understood term; the preferred term to use is learning difficulties. Adults with learning difficulties should be respected and treated as adults. Both children and adults have distinct needs. If the extent of someone’s impairment must be described, an alternative might be ‘Joe Bloggs has profound learning difficulties. Again, if the context demands it, we might describe what the person is unable to do ‘Joe Bloggs has learning difficulties and is unable to speak’.

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It is far better though, if the context allows, to describe what the person **can** do rather than what they cannot do.

The built environment and attitudes do much to disABLE people.

Language to be avoided

As can be seen from the previous paragraphs, language has a social meaning and this changes all the time.

What is acceptable in one period is not in another. What largely determines this is the self-activity of the group described.

The last 20 years of the Disability Movement have led to the re-examination of the language. This process is on-going.

However, certain language which is offensive to disabled people or dehumanises or objectifies in anyway should be avoided.

Here Comes Trouble

Often people say “*Here comes trouble*” to wheelchair users, even though they may be 35, 45 or 50 years of age. Similarly we refer to black people as “*boy*”, even though they may be 35, 45 or 50 years of age. It is patronising and maintaining the stereotype of eternal children, adults never growing up.

The language which is used to describe disability has an enormous impact upon the way in which disabled people are perceived. Writers already seek to avoid terminology which is racist or sexist: they should also avoid words and phrases which many disabled people find offensive, and use language which respects the dignity of disabled people and acknowledges their preference.

The following list includes words and phrases which should be avoided when describing, talking to or writing about people with disabilities.

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Avoid	Use
Handicap	not to be used
Severe	not to be used
The disabled	disabled people
Help	Assist
Special	Adapted
Victim of	person who has/ person with/ person who experienced
Arthritic	person with arthritis
Crippled by	person who has/ person with
Mongol	to be avoided
Client	service user
Down's	person who has/ person with down's syndrome
Dwarf	person with restricted growth
Suffering from	person who has/ person with
Afflicted by	person who has/ person with
Wheelchair bound	wheelchair user
Confined to a wheelchair	wheelchair user
Invalid (means not valid)	disabled person
Mental handicap	learning difficulty/ disability
Infirm	unfashionable language avoid
ESN (Educationally sub-normal)	learning difficulty/ disability
Blind as a bat	blind or partially sighted
Blind dog	guide dog
Deaf as a post	deaf or deaf impaired
Deaf aid	hearing aid
Disabled toilet	adapted/ accessible toilet
Disabled ramp	Ramp
Disabled parking	parking for disabled people

Achieving through Unity

Confined to a Wheelchair/ Wheelchair Bound

Wheelchairs liberate rather than confine. They provide mobility. It is unlikely that someone spends twenty-four hours a day in one. Substitute 'wheelchair user' or person who uses a wheelchair'.

'*Joe Bloggs is a polio victim*' promotes helplessness. Simply say '*Joe Bloggs had or contracted polio*'. Emotive words like **stricken**, **afflicted**, **sufferer** should also be avoided.

It is sufficient to say that someone 'has a particular condition' and then describe the resulting disability if and only when necessary.

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Invalid from the same route as 'in valid'. In any case we cannot assume that a disabled person is 'ill'. Exclude this term and do not confuse disability with illness.

Deaf and Dumb *never* use the phrase deaf and dumb
do say he/she is without speech.

Some deaf people can speak in addition to using a sophisticated sign language so they are neither unintelligent nor unable to communicate. Try to be accurate about the extent of an individual's hearing impairment and the methods they use to communicate. For example 'profoundly deaf' means 'no useful hearing'. 'Hard of hearing' or 'hearing impaired' describe those who, with or without a hearing aid, have some useful hearing and use speech-listening and lip reading to communicate.

Blind remember that there are many degrees of blindness, very few blind people have total loss of vision

Spastic at best this word is old fashioned, at worse it is a term of abuse. SCOPE advocates someone who has cerebral palsy.

Epileptic becoming unfashionable – preferred terminology person who has seizures.

Labelling

Label Jars, NOT people!

The inheritance of the past determines current attitudes, policies and practices towards disabled people. This is nowhere more clearly demonstrated and symbolised than in the language used.

Calling someone a ‘Down’s’ or ‘spina bifida’ child makes the child no more than their condition.

To say that someone is arthritic or epileptic defines them only in terms of their disability. It is better to say ‘has arthritis/ epilepsy’. Using *‘the blind’*, *‘the deaf’* or *‘the disabled’* to describe is only to diminish. **Correct terminology to use is blind people, deaf people and disabled people.**

Medical ‘labels’ are undesirable and misleading as no two people are alike. Medical labels say little about people as individuals, and tend to reinforce stereotypes of disabled people as ‘**patients**’ dependent upon the medical profession.

A warning about labels

We can get too hung up on “politically correct language”. Professionally acceptable terms can sometimes just confuse lay people, and evasive euphemisms are not always helpful either. What matters are not so much the words as the spirit in which they are said. What could be more **inclusive** language than that used by a girl at the youth club which just had one disabled (Down’s) member when he had been teasing her – *“You are an idiot, Peter!”*.

Had she consciously thought of him as different, she would not have used the term thus in friendship!

A good rule of thumb is to find out and respect how people themselves want to be addressed.

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Euphemism

Terms such as physically challenged, differently able and **special** crop up occasionally, usually in an attempt to side-step the perceived stigma of disability but such phrases are not widely used nor much liked by disabled people generally. An accurate and unpatronising approach need not compromise plain language. There is little value in using words and phrases which tip-toe around the subject. Simply state facts of someone's social or medical condition. Special in today's language has come to mean anything but and usually means segregated and marginalised services and facilities.

**No longer justifying Integration
but challenging Segregation.**

Leave it out

Terms which are strictly no go:-

mongol, sub-normal, vegetable, cripple, retarded, freak, spastic, defective, deaf/mute, hunchback, paralytic, afflicted, imbecile, dunce, maladjusted, dummy, cretin, moron.

**What to say or not to say
that is the question.**

This may be the answer.