

APPROPRIATE WORD, PHRASES & TERMINOLGOY PERTAINING TO DOWN SYNDROME

Our dear friends in the Media, on behalf of people with disabilities and Down syndrome in particular, we request for your forbearance in the usage of appropriate terminology when reporting or writing on Down syndrome. Persons with Down syndrome and their families consider some of the words and phrases demeaning and derogatory; and often affecting their self-esteem and thus de-values the person with Down syndrome.

Appropriate terminology is critical in shaping ideas, perceptions and attitudes. Inappropriate usage may reinforce existing prejudices; if used accurately it helps to liberate people from stereotypes, prejudices and misconceptions.

In the context of disability, negative and patronising language produces predictably negative images and attitudes. These are often the most difficult barriers that people with disabilities face. Positive attitudes can be shaped through careful and thoughtful presentation of information about people with disabilities, thus helping to break down barriers.

Thus we suggest some guidelines that can be applied.

1. DO PUT PEOPLE FIRST

People with disabilities prefer you to describe the person, not the disability eg. a person with Down syndrome, and NOT a Down syndrome person NOR a Down's kid!

2. DO NOT OVEREMPHASISE THE DISABILITY

Do not repeatedly refer to the person's disability, usually one reference is enough and it is polite to refer to an individual's disability only if it is relevant.

3. EXHIBIT APPROPRIATE INTERACTION AND ACCEPTABLE ETIQUETTE

There is a growing awareness of the subtleties of acceptable social etiquette and interaction between disabled and non-disabled people. If a disabled person is accompanied by a caregiver, do not be tempted to communicate with the disabled person through the caregiver; unless it is clearly indicated that this is appropriate. Otherwise always address the person with a disability directly.

4. DO NOT DESCRIBE PEOPLE AS VICTIMS OR SUFFERERS

Eg. Miss X suffers from Down syndrome, neither is she 'afflicted' with Down syndrome. She just 'has' Down syndrome. Down syndrome is not a disease or illness, it is a condition.

5. DO NOT USE WORDS SUCH AS ‘RETARDED’, ‘SUB NORMAL’ OR ‘MONGOL’ TO DESCRIBE THEM

All these are now obsolete and considered derogatory. Preferred terms are ‘Intellectually disabled’ or ‘Intellectually challenged’ or in a generic manner ‘A person with special needs’.

6. DOWN SYNDROME

‘Down syndrome’ is acceptable and used by majority of organizations worldwide rather than ‘Down’s syndrome’. Dr Langdon Down was the first to describe this condition, he did not have this condition.

7. AGE APPROPRIATE REFERENCE

Do depict people with disabilities in age appropriate situations and use their full title and name (as you would for others). Do not portray adults with an Intellectual disability (or Down syndrome) as children and certainly not ‘kids’.

8. DO NOT USE STEREOTYPES AND DO NOT GENERALISE

Eg ‘Like most people with disabilities...’ and also do not treat disabilities as if they are all the same.

9. PLEASE DO GET YOUR FACTS RIGHT

Do not base your facts on assumptions. There are many ‘myths’ and misinformation that circulates. Voluntary welfare organizations are always willing to assist and clarify.

10. DO USE POSITIVE ACTIVE LANGUAGE DESCRIBING PEOPLE AS PARTICIPANTS

Eg ‘Mr X who works in an office...’, it certainly helps to focus on their abilities rather than their disability.

11. AVOID USING ‘BIRTH DEFECT’

The term ‘birth defect’ although still used by some medical professionals, is unacceptable by people with disabilities because of the negative connotation of the word ‘defect’. Instead use a neutral term such as ‘congenital condition’ or rephrase the sentence, using words like ‘disabled since birth’ or ‘born with...’.

12. DISABLED

Do not use 'disabled' as a class noun eg 'The disabled are...'. It is appropriate to say 'People who are disabled...' rather than 'Disabled people'. Its antonym is 'non disabled' and not 'able bodied'.

13. USAGE OF 'IMPAIRMENT' 'DISABILITY' AND 'HANDICAP'

Very often these words are used virtually interchangeably and in a wrong context.

Impairment: It is best to avoid it due to its negative connotation. However WHO describes it as 'any loss or abnormality of psychological, physiological or anatomical structure or function'. In the context of Down syndrome, the extra chromosome (Trisomy 21) could be considered as the impairment too, although not accurately.

Disability: Disability is best described as 'the functional limitation with the individual caused by physical, mental or sensory impairment'. ie resulting in a restriction or lack of ability to perform an activity in the manner expected. In the context of Down syndrome, the disability is that the person has different grades of being intellectually challenged or having a learning disability.

Handicap: It is best described as 'the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical or social barriers. If the person with a disability is able to fulfil a role that is 'normal' for that individual – he/she is not handicapped.

14. AVOID USING THE WORD 'NORMAL'

as an alternative to 'non-disable'. Eg 'normal' children. Children with Down syndrome do not consider themselves as 'abnormal' children; neither do they attend 'abnormal school'. Rather than saying 'normal' schools, it is, more appropriate to say 'mainstream' schools. The accepted term for children without a development disability is referred to as 'typically developing children' or just 'non-disabled children'.