Guidelines for Non-Handicapping Language in APA Journals

Committee on Disability Issues in Psychology

The use of certain words or phrases can express gender, ethnic, or racial bias, either intentionally or unintentionally. The same is true of language referring to persons with disabilities, which in many instances can express negative and disparaging attitudes.

It is recommended that the word *disability* be used to refer to an attribute of a person, and *handicap* to the *source* of limitations. Sometimes a disability itself may handicap a person, as when a person with one arm is handicapped in playing the violin. However, when the limitation is environmental, as in the case of attitudinal, legal, and architectural barriers, the disability is **not** handicapping—the environmental factor is. This distinction is important because the environment is frequently overlooked as a major source of limitation, even when it is far more limiting than the disability. Thus, prejudice handicaps people by denying access to opportunities; inaccessible buildings surrounded by steps and curbs handicap people who require the use of a ramp.

Use of the terms *non-disabled* or *persons without disabilities* is preferable to the term *normal* when comparing persons with disabilities to others. Usage of *normal* makes the unconscious comparison of *abnormal*, thus stigmatizing those individuals with differences. For example, state "a non-disabled control group," not "a normal control group."

The guiding principle for non handicapping language is to maintain the integrity of individuals as whole human beings by avoiding language that (a) implies that a person as a whole is disabled (e.g., disabled person), (b) equates persons with their condition (e.g., epileptics), (c) has superfluous, negative overtones (e.g., stroke victim), or (d) is regarded as a slur (e.g., cripple).

For decades, persons with disabilities have been identified by their disability first, and as persons, second. Often, persons with disabilities are viewed as being afflicted with, or being victims of, a disability. In focusing on the disability, an individual's strengths, abilities, skills, and resources are often ignored. In many instances, persons with disabilities are viewed neither as having the capacity or right to express their goals and preferences nor as being resourceful and contributing members of society. Many words and phrases commonly used when discussing persons with disabilities reflect these biases.

Listed below are examples of negative, stereotypical, and sometimes offensive words and expressions. Also listed are examples of preferred language, which describes without implying a negative judgement. Even though their connotations may change with time, the rationale behind use of these expressions provides a basis for language reevaluation. The specific recommendations are not intended to be all-inclusive. The basic principles, however, apply in the formulation

1. **Put people first, not their disability**
   Comment: Preferred expressions avoid the implication that the person as a whole is disabled or defective.

PROBLEMATIC	PREFERRED
• disabled person	• person with (who has) a disability
• defective child	• child with a congenital disability
• mentally ill person	• child with a birth impairment
	• person with mental illness or psychiatric disability

2. **Do not label people by their disability**
   Comment: Because the person is not the disability, the two concepts should be separate.

   PROBLEMATIC
   - schizophrenics
   - epileptics
   - amputee
   - paraplegics
   - the disabled
   - the retarded
   - the mentally ill
   - the CMI or SPMI

   PREFERRED
   - people who have schizophrenia
   - individuals with epilepsy
   - person with an amputation
   - individuals with paraplegia
   - people with disabilities
   - children with mental retardation
   - people with a mental illness or psychiatric disability
   - people with long term or serious and persistent mental illness or psychiatric disabilities

3. **Do not label persons with disabilities as patients or invalids**
   Comment: These names imply that a person is sick or under a doctor's care. People with disabilities should not be referred to as patients or invalids unless the illness status (if any) is under discussion or unless they are currently residing in a hospital.

4. **Do not overextend the severity of a disability**
   Comment: Preferred expressions limit the scope of the disability. Even if a person has a particular physical disability, this does not mean that the person is unable to do all physical activities. Similarly, a child with a learning disability does not have difficulty in all areas of learning nor does mental retardation imply retardation in all aspects of development. Chronicity in physical illness often implies a permanent situation, but persons with psychiatric disabilities are able to recover.

   PROBLEMATIC
   - the physically disabled
   - the learning disabled
   - retarded adult
   - chronic mental illness

   PREFERRED
   - individuals with a physical disability
   - children with specific learning disabilities
   - adult with mental retardation
   - long-term or persistent mental illness or psychiatric disability

5. **Use emotionally neutral expressions**
   Comment: Objectionable expressions have excessive, negative overtones and suggest continued helplessness.

   PROBLEMATIC
   - stroke victim
   - afflicted with cerebral palsy
   - suffering from multiple sclerosis

   PREFERRED
   - individual who had a stroke
   - person with cerebral palsy
   - people who have multiple sclerosis

6. **Emphasize abilities, not limitations**
   Comment: The person is not confined to a wheelchair but uses it for mobility, nor is a person homebound who is taught or who works at home.

   PROBLEMATIC
   - confined to a wheelchair
   - homebound

   PREFERRED
   - uses a wheelchair
   - child who is taught at home

7. **Avoid offensive expression**

   PROBLEMATIC
   - cripple
   - deformed
   - mongoloid
   - crazy, paranoid

   PREFERRED
   - person who has a limp
   - person with a shortened arm
   - child with Down Syndrome
   - person with symptoms of mental illness

8. **Focus on the right and capacity of people with disabilities to express their own goals and preferences and to exercise control over their own services and supports**
   Comment: In many instances, persons with disabilities are not given opportunities to participate in decisions regarding the services or supports they will receive as part of a treatment or rehabilitation program. Instead, they are viewed as requiring "management" as patients or cases, rather than as individuals with goals and preferences that should be taken into account.

   PROBLEMATIC
   - placement
   - professional judgment
   - patient management, case management

   PREFERRED
   - discussion of suitable and preferred living arrangements
   - include a consideration of a person's goals and preferences
   - care coordination, supportive services, resource coordination, assistance

9. **Seeing people with disabilities as a resource and as contributing community members, not as a burden or problem.**
   Comment: Discussions regarding the service needs of persons with disabilities and their families often use terms that define the individual as a burden or a problem. Instead, terms which reflect the special needs of these persons are preferable, with a clear recognition of the responsibility of communities for inclusion and support of persons with disabilities.

   PROBLEMATIC
   - family burden
   - problem of mental illness or of the mentally ill
   - community support needs of individuals

   PREFERRED
   - family supports needs
   - challenges which people with psychiatric disabilities face
   - responsibilities of communities for inclusion and support

   [April 1992]