



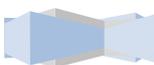
Talking about Disability – A Style Guide

Introduction

1. Many people worry about using the ‘right’ words when talking about disability and it is certainly possible to appear prejudiced and offensive if the wrong terms are used. This guide sets out some simple guidance on the correct terms to be used so that your meaning is clear and no one is inadvertently offended. This is not a guide to how to be ‘politically correct’, but simply how to use language which helps you to communicate effectively and show your commitment to equality.
2. This guide explains ‘social model’ terminology. The social model is the accepted model of disability for all UK government departments, local authorities, the British Paralympic Association and the International Paralympic Committee and underpins the Equality Act 2010 and its predecessors such as the Disability Discrimination Act 1995. By using this guide, therefore, you can be sure that you are using language which the vast majority of people in the UK will understand and support.
3. Buckinghamshire Disability Service (BuDS), who have produced this guide, is an independent user-led disability charity. See www.buds.org.uk for more information.

Brief Language Guidelines

4. The phrase **disabled person** or **disabled people** is a positive one and should be used as a collective noun for people with an impairment, ie people with reduced physical, sensory or cognitive ability.
5. A disabled person has **additional needs** arising from their impairment.
6. Use the inclusive phrase **people who may need additional help and disabled people** in publications for the general public
7. If you are referring specifically to an individual or group’s medical condition or health condition, use the term **impairment**, eg ‘people with a visual impairment’, or ‘Bill has a hearing impairment’, or ‘Sue has some physical impairment’.
8. People with cognitive impairment are also known as **learning disabled people** or people with a **learning difficulty**.
9. People with a **mental health condition** are also known as people with a **mental health impairment**.
10. People who have difficulty moving around have a **mobility impairment** or are **mobility-impaired**. They are disabled by problems in their environment which stop them moving independently, such as steps, kerbs or bad signage.



11. A person who uses a wheelchair is known as a **wheelchair user**. A person who walks using an aid such as a stick or frame is known as an **ambulant disabled person**.
12. Use the term **disabled** or **disability** in the context of barriers to independent living, not a medical condition or health condition. See the section below on the Social Model for more information.
13. Use the term **non-disabled** to refer to people who do not have an impairment.
14. See also the table at the back of this document for other terms to avoid and recommended alternatives.
15. If in doubt, call BuDS on 01494 568 864 or e-mail info@buds.org.uk for advice

Why are these terms important?

16. These terms are important because of the medical and social models of disability. Using medical-model terms and language will cause widespread offence and present you as old-fashioned and prejudiced. Using social-model terms and language will avoid causing offence and present you as up-to-date and committed to equality.
17. The **medical model of disability**, or the 'personal tragedy' model, sees disability as a problem for an individual, such as their inability to see or walk. The individual's problem *is* their 'disability'. Under the medical model, a disabled person is singled out as different and usually inferior because they are not as good as or the same as other people.
18. Terms such as 'handicapped', 'crippled', 'wheelchair-bound' or 'spastic' belong to the medical model because they label a person according to what is 'wrong with them'.
19. Euphemistic terms such as 'special', 'person with disability' or 'differently-abled' belong to the medical model, because they too focus on the loss of physical or sensory ability.
20. Medical model 'solutions' to disability concentrate on trying to make disabled people just like everyone else or by segregating them to 'special' places.
21. Under the medical model, disabled people have 'special needs' or need 'extra help'.
22. The medical model is still quite common in the UK and is still the prevailing model in the United States, and so medical model terminology is often seen. The fact that medical-model terminology is still common does not mean it is acceptable, any more than the fact that some people use racist language makes that acceptable.
23. The **social model of disability** was created by disabled people themselves from the 1970s onward in reaction to the medical model. It is now the accepted model of disability for all UK government departments, local authorities, the British Paralympic Association and the International Paralympic Committee and underpins the Equality Act 2010 and its predecessors such as the Disability Discrimination Act 1995.
24. If a person has reduced physical, sensory or cognitive ability, the social model defines this as their *impairment*, not their 'disability': **people have impairments, not 'disabilities'**.



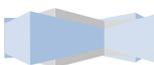
25. The social model says that *disability* is caused by unnecessary barriers which prevent a person with an impairment from living freely and independently. Thus, a person with an impairment is disabled not by their impairment but by the barriers placed in their way.
26. The classic example to illustrate the social model is a person in a wheelchair at the foot of a flight of steps. The medical model says that the person is disabled because they can't walk up the steps. The social model says that the steps are disabling the person, not the impairment which means he or she has to use a wheelchair.
27. Under the social model, the term 'disabled person' means a person with an impairment who is disabled by society. Using the term 'disabled person' is a sign that you follow the social model. Not using this term is a sign that you are using the medical model.
28. The social model calls for satisfactory 'reasonable adjustments' to meet the additional needs of disabled people so as to eliminate the barriers which disable people with impairments. This is also the line taken by equality law.
29. The social model acknowledges that people with an impairment are different to others, but does not condemn those with an impairment for their difference or say that having an impairment is inferior or abnormal.
30. Under the social model, a disabled person has 'additional needs arising from their impairment'.

Service Users & Patients

31. The term 'service user' in its ordinary meaning, ie people that use one or more services offered by an organisation, is perfectly acceptable. Problems arise, however, when the term 'service user' is used to mean *all* disabled people or people with impairments. Social care providers and local authority social care departments often do this. When used in this way, the term 'service user' is plainly a euphemism designed to avoid perceived linguistic problems rather than an accurate or meaningful label. As such, it is often insulting to disabled people. Using this term is also confusing because the majority of disabled people do not use local authority services. In view of this, BuDS' advice is not to use the term except when it relates to actual users of a defined service.
32. The NHS has traditionally called users of its services, 'patients'. However, again, this is a very broad term which encompasses a huge variety of people, many of whom are not disabled people. The term 'patient' should not be used except in a specific NHS context.

People who don't self-identify as disabled

33. Some people with an impairment, sometimes even significant or severe impairments, do not *self-identify* as disabled. This is particularly common among younger people, people with a hearing impairment (who may prefer the term 'deaf') and sports people. These people would not routinely include themselves if reading about, for example,



support for disabled people, and they probably would be offended if described by others as disabled people.

34. For this reason, if trying to reach or identify all disabled people, it is worth using the phrase 'people who may need additional help and disabled people'. This phrase, while not perfect, will catch the vast majority of those whom you want to reach and is unlikely to offend many people.

Definitions of Disability

35. The legal definition of disability is in the Equality Act 2010. A disabled person is defined in the Act as someone with a physical or mental impairment that has a substantial and long-term negative effect on their ability to do normal daily activities. If you meet this definition, you are entitled to the legal protections and entitlements set out in the Act.
36. However, whether a person with an impairment falls within the Equality Act definition has to be continually worked out on a case-by-case basis: there is no central list of people who qualify, as the old 'registered disabled' scheme was abolished in 1995. This means that disabled people have no easy way to 'prove' that they are disabled within the meaning of the Act.
37. Often, receiving a particular state benefit is used to identify disabled people. There is a problem with this approach because about a quarter of disabled people do not claim the benefits to which they are entitled, and many disabled people fail to make a successful claim for benefits owing to problems with the social security system. Generally, using entitlement to a state benefit is a risky way to identify disabled people and BuDS does not recommend it is used as the only means to do so.
38. Another common way to identify disabled people is to look at whether they have a 'Blue Badge' parking permit. This is a very risky way to proceed, because the Blue Badge scheme is very widely abused and many people have a badge who are non-disabled or do not have a significant impairment.
39. If you need to ration or restrict entry to a service for disabled people, please seek advice from BuDS (contact details below).

Comments and Further Information

40. If you would like further information or help, please contact BuDS (details below).
41. BuDS welcomes comments and feedback on this document, which may be sent to the contact details below.
42. This Guide is copyright © BuDS but may be distributed freely in its entirety for non-commercial purposes. Extracts from the Guide must always be attributed.

BuDS is a charity run by disabled people for disabled people
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Terms to Avoid	Preferred Terms
Victim of...	Person who has...
Crippled by...	Person who has...
Suffering from...	Person who has...
Afflicted by...	Person who has...
Wheelchair bound	Wheelchair user
Invalid	Disabled person
Mental	Disabled person
Handicapped	Disabled person
The disabled	Disabled people
The handicapped	Disabled people
Spastic	Person with cerebral palsy
Deaf and dumb	Deaf or hearing impaired person
Cripple or crippled	Disabled person or person with impaired or reduced mobility
The blind	Blind or visually impaired person
The deaf	Deaf people or hearing-impaired people
Mentally handicapped, backward, dull	Person with learning difficulty
Mongol	Person with learning difficulty
Retarded, idiot, imbecile, feeble-minded	Person with a developmental impairment or developmentally-impaired person
Mute, dummy	Speech impaired person or person with speech impairment
Mentally ill, mental patient, insane	Person with mental health impairment
Abnormal	Disabled person
Patient	Person (except in a specific NHS context)
Special needs	Additional needs
Special	Disabled person or person with additional needs
Service User	Disabled person

