NewsWatch

Covering the Disability Community

COVER PHOTO: SUZANNE C. LEVINE

Editor's Note

By Dara Tom

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This article originally appeared in **Azizah magazine**.

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This article originally appeared in **Azizah magazine**.

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Study offers insights into improving reporting on disability community

By Bill Breisky

A dozen years ago, when I was chairing the Disabilities Committee of the American Society of Newspaper Editors and compiling an ASNE brochure titled "Reporting on People with Disabilities," I spent several evenings on our living room sofa interviewing my most reliable source on the subject -- my daughter Karen.

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Editor's Note

I am non-disabled -- for now.

As I continue to drive my car, participate in outdoor activities, and simply grow older, chances are good that I will acquire a disability in my lifetime.

But at this point in time, I am non-disabled. And consequently, a few people have asked why I didn't find a guest editor who has a disability for this edition of the News Watch journal, "Covering the Disability Community."

If we journalists need to improve our reporting skills when it comes to doing stories that include people with disabilities, I figured it could start with me.

In researching this journal, I spoke with people within the disability community and read numerous articles about the coverage of people with disabilities in the U.S. mainstream news media.

No matter the topic -- Christopher Reeve, access to health care, the Olmstead Act, MiCASSA, the ADA -- the issue often came back around to this: in too many mainstream news stories, people with disabilities are placed in one of two categories: hero or victim.

In too many of our news stories about the Americans with Disabilities Acts, the issue is about someone in a wheelchair, yet most ADA cases ending up in court aren't about curb cuts or accessible buildings.

In too many of our stories, people with disabilities are sources only asked to comment about their disability.

Maybe journalists' collective disability is our inability to remember that as we seek diverse voices in our stories, that includes people with disabilities.

Bill Stothers, deputy director of the Center for An Accessible Society, points out that many of our routine stories have a disability angle but we often don't recognize it. Stories about education (how will it affect special education classes?), affordable housing (will there be accessible units?), parking (are their designated spots?), budget cuts (how will it affect funding for services for the disability community?), can all have a disability angle seamlessly woven into the piece.

Another important task for journalists is to include people with disabilities in our everyday stories in which the disability is incidental.

You can:
- cover Halloween by taking a photo of a person with a disability in a costume;
- interview someone with a disability about holiday shopping plans in this year's recession;
- ask someone with a disability about the war in the Middle East or the economy or politics.

We can and should do these things in order to live up to one of journalism's highest standards: to accurately and fairly reflect the community in which we live. And in our (national) community, there are 49.7 million people, or about one in five, with a disability.

How accurately and fairly are we representing that community in our stories?

In this edition of the News Watch journal, journalists who have disabilities or work closely within the disability community offer their insights. Some articles give constructive criticism, other show us where we have done well, and one guest columnist helps us figure out why we haven't done well and how we can improve.

Check out the How To section for etiquette tips when interviewing people with disabilities, and the Resource Guide

can help get you on your way.

Dara Tom
Director, News Watch

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Study Offers Insights Into Improving Reporting on Disability Community

By **Bill Breisky**

A dozen years ago, when I was chairing the Disabilities Committee of the American Society of Newspaper Editors and compiling an ASNE brochure titled "Reporting on People with Disabilities," I spent several evenings on our living room sofa interviewing my most reliable source on the subject -- my daughter Karen.

Our mission: to hash out a set of proposed guidelines for newspaper writers and editors. ("How do you interview a person with a disability? Treat him or her as a person who has many qualities in addition to a disability. Try not to be amazed at his or her accomplishments.")

Karen has had more than her share of first-hand experience with disabilities issues. Speechless, immobile and cerebrally blind after a severe brain injury at the age of 2, she went on to compete on her high school speech team and to win a state prize for a speech titled, "All of Us Are Disabled." She now lives independently and wheels herself into the Cambridge (Mass.) Learning Center to teach English as a Second Language. So when News Watch asked me to comment on Beth Haller's scholarly report, "News Coverage of Disability Issues," with footnotes citing 91 sources, I shared the report with my No. 1 source on the subject, and we discussed it recently over Saturday morning pancakes.

Haller's thorough study, we agreed, offers a treasure trove of valuable insights that should be distilled for all those who have a role in helping their readers and viewers understand the issues that matter to people with disabilities, and for disability activists who are frustrated in their efforts to get their stories told.

We agreed with Haller's study that it's important for media writers and editors to find good sources who have disabilities, rather than relying on government sources. Yes, it can be patronizing to refer to people with disabilities as "inspirational." Yes, disabilities organizations should be more aggressive in pitching serious story ideas -- especially to those who produce evening-news shows on TV. And yes, the National Institute on Disability and Rehabilitation Research should launch a journal modeled on the Journal of the American Medical Association, as a means of inspiring more thoughtful coverage of disability issues in the mainstream media.

"With so much media negativism, she says, it's no wonder that many people become turned off by disability issues."

We went on to contemplate what Karen would recommend to the president of a television network or the chairman of a publishing empire if such a person solicited her advice on covering issues that matter to the tens of millions of Americans who live with a disability.

Karen said she would encourage the production of more television shows similar to "Life Goes On," which realistically portrayed the family life of a young man with Down syndrome. She would encourage the media to make a greater effort to satisfy young children's natural curiosity about disabilities. And it would be nice, she said, if more media organizations considered disability issues important enough to assign a qualified and respected staffer to cover them consistently and thoroughly. (Why, she wonders, hasn't the Massachusetts media done a better job of reporting the impact of recent state budget cuts on people with disabilities who are in danger of losing their independence?)

She wishes folks in the media would keep a few words in mind when considering stories on this subject: respect, indifference, stereotypes.

And she wishes (while she's in a wishing mode) that our journalism schools would recruit more students with disabilities, and that media companies would recruit such students when

they graduate.

It also would be nice, she says, to see more stories about those who are doing things to make life less frustrating for people with disabilities, rather than focusing endlessly on things that go wrong, and on whether or not Casey Martin should be permitted to use a golf cart on the pro circuit. With so much media negativism, she says, it's no wonder that many people become turned off by disability issues.

And (now that we're in a positive mode), we should take a moment, she says, to acknowledge some of the real progress that has been made in making our world more accessible -- such as descriptive TV and AOL's new text-to-speech program for those who are visually impaired, Dragon Dictate computer programs for those who are unable to use a keyboard, and good reserved seating for wheelchair users in our new cinema complexes.

And of course, Karen said, we should remind the media of the motto of the late Harold Russell, who won two Academy Awards for his realistic portrayal in "Best Years of Our Lives" of a veteran who had both his hands blown off -- and who went on to serve for many years as chairman of the President's Committee on Employment of People with Disabilities:

"It's the guy that matters," Harold always insisted, "not the disability."

A newspaper and magazine writer and editor, Bill Breisky was, for the 17 years prior to his retirement, the editor of the Cape Cod Times, and a member of the President's Committee for the Employment of People With Disabilities. He now does job coaching for people with disabilities. His book, titled "I Think I Can," is about his daughter Karen, who worked with him on this essay. Bill Breisky can be reached at billb@cape.com. Karen Breisky can be reached at kbreisky@yahoo.com.

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On the Job

Rewards, commitment to public service keep reporter in the business

By **Yomi S. Wronge**

Whenever I'm asked to describe the challenges of being a reporter with a disability, I tell about the time I was sent to cover a child's murder while working for The Californian in Salinas.

My job was to talk to the mother, a difficult task under any circumstance made virtually impossible by one innocent factor: The natural occurrence of March rain in the Salinas Valley.

The quiet, rural street where 11-year-old Nicole Carnahan was killed by her next-door neighbor was a circus of activity. Concerned people from around the community and reporters hungry for an exclusive were perched outside the modest home. The mother had taken refuge with a neighbor and every once in a while I'd see my competitors tread across the muddy driveway to call on her (with no luck).

I, on the other hand, saw no clear way of making it from the street, across the slushy drive and up to the front door in my motorized wheelchair. I could have left; my editor was the rare kind who didn't expect miracles. But I decided to wait it out until the mother stepped out, the rain stopped or my electric chair shorted out, whichever came first.

Two hours later, hope arrived; a neighbor, who was also the janitor at the school the girl attended, remembered me from a different story and offered to do my bidding.

The mother agreed to an interview and because it was more accessible, we met in her home, which was the scene of the crime. Once inside, she stared at me for a long, long time.

"Qualified reporters with disabilities can travel, handle high-profile beats, respond to breaking news, work long hours, lead in the newsroom. Period."

"I saw you out in the rain," she said, incredulously. But before I could explain myself she fell to her knees, put her head in my lap and started to cry. I spent several hours with her that day and ended up with an exclusive.

This tale sums up my career in journalism: at times difficult, uncomfortable, frustrating, bordering on impossible but ultimately, blessedly, wonderfully rewarding. The personal rewards and my commitment to public service are the reasons I haven't left the business, despite the constant fight to break down barriers both inside and outside of the newsroom.

Of the five newsrooms I've worked in -- four newspapers, one broadcast -- only two have been truly accessible. Those that weren't accessible were made so, somewhat, usually because a lone editor cared about making the work environment a good one for me.

At the best places, I could get through the front door unaided, work in the newsroom, use the same restroom as my colleagues and eat in the common areas. There are media companies where some or all of this is impossible.

Yet, even when the digs have been wanting, I've stayed. I worked down in the circulation department for a year and then rode a crummy freight elevator (read: not meant for human cargo) up to the newsroom for the next two years at one paper because it was run by a brilliant editor and talented staff. I loved working there; the conditions were horrible.

Even as they strive for more diversity among the ranks, far too many media companies still do not accommodate all employees.

Beyond the physical challenge of getting around newsrooms and communities, I've felt the internal pressure to disprove

misconceptions about people with disabilities.

Qualified reporters with disabilities can travel, handle high-profile beats, respond to breaking news, work long hours, lead in the newsroom. Period. But the intrinsic value of breaking down access barriers for all journalists is sadly lost on some managers who can't see past the daily deadline.

Still, this work is too important and too enriching for me to give it up in frustration. I'm encouraged whenever I meet or hear about a talented, respected reporter or editor who has a disability. My hope is that, as they consider careers that will be both fulfilling and challenging, more college students with disabilities will consider careers in journalism. This industry has a tremendous opportunity for growth that we can help facilitate.

Yomi Wronge is a staff writer for the San Jose Mercury News. A native New Yorker, she grew up on both coasts and now lives in (and loves) Oakland, Calif. She was born with Osteogenesis Imperfecta, or brittle bone disease, and has always used a wheelchair for mobility. She can be reached at ywronge@sjmercury.com or (510) 790-7315.

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The Best and Worst

Some journalists get it, others miss the point

By **Mary Johnson**

"On Reeve's journey, everything seems possible." "Christopher Reeve labors to beat the odds." "Christopher Reeve: a medical Superman?" Media observers would likely put these stories -- the first from USA Today, the second from The Bergen Record, the third from The Palm Beach Post. -- into the "good" category if asked to decide good, bad and ugly stories about disability that appeared in U.S. news media outlets this last year.

They're not good, though, says Cyndi Jones of the Center for An Accessible Society, an organization that works with journalists covering disability stories. Most disability rights activists agree with Jones. Coverage of former Superman star Christopher Reeve since his 1995 paralyzing injury has been a particular thorn in their sides. It points to, they say, an overarching flaw in the way disability news is reported -- or not reported.

"When people listen to what Christopher Reeve is saying, instead of getting on with their lives, they wait for something that may never happen," Denver disability activist Carolyn Linnell told Rocky Mountain News reporter Bill Scanlon. Medical experts pretty much insist that while Reeve regained some movement it does not signal much more than increased fitness; it's not a prelude to walking. In any case, the therapy equipment Reeve gets -- much of it free to the celebrity -- is far beyond the budgets of most people with spinal cord injuries. Insurance usually won't pay for motorized wheelchairs, much less the $15,000 electrical stimulators or therapy sessions Reeve's regimen requires.

But only the most dedicated newshound would come away with

this picture from the nearly 1,000 stories that ran in the weeks around Reeve's 50th birthday. Scanlon's was one of only a handful of stories to put the Reeve hype into context, to discuss what it meant for the nation's 200,000 people with spinal cord injuries (what it meant was "almost nothing"). He was one of an even fewer to interview disabled people working in the disability rights movement for context.

Media critics within the disability rights movement say Reeve's views are reported as if they represent the thinking of the mainstream disability movement (and to be fair, Reeve has done little to discourage reporters). It points to a deeper problem, too, which has little to do with Reeve.

Reporters don't seem to know there are national disability rights groups to turn to for perspective in stories about disability issues. Print journalists "are much more likely to use people with disabilities as examples in their news stories than as sources," says Beth Haller, an associate professor of journalism at Towson University.

Among the most significant findings of Haller's study for the Center for An Accessible Society was that, in story after story, "national disability organizations were largely missing," and those interviewed were often healthcare providers or government officials. The impression, says Haller, is that people with disabilities can't speak for themselves.

The past year has seen excellent reporting on a number of issues relating to the lives of Americans who have disabilities. In "The New Math of Old Age," U.S. News and World Report's Christopher H. Schmitt reported Sept. 30 on the financially healthy nursing home industry's poor-mouth demands for more Medicare and Medicaid dollars even as they give increasingly sub-standard care.

The St. Louis Post-Dispatch, in a stunning series that began Oct. 13, reported that thousands die in the nation's nursing homes from neglect and are "rarely detected by government inspectors, investigated by law enforcement, appraised by medical examiners or prosecuted by anyone."

In a series in April, Clifford Levy of the New York Times reported on New York's treatment of mentally ill residents in group homes; Levy has continued to cover the issue.

These issues are top concerns for the national disability rights movement, which has been working to shift national policy and money from nursing homes to in-home services -- services that keep recipients in charge of their own care.

There has been scant coverage of a 1999 Supreme Court decision, the Olmstead decision, which said states must give people a choice of staying home and getting help rather than going into a nursing home -- and that many states are quietly moving to do that. There has also been little coverage about the bill in Congress, the Medicaid Attendant Services and Support Act, or MiCASSA, that would force changes in national policy to keep people out of nursing homes.

The problem is that reporters and editors don't know about these stories. They don't seek out national disability movement perspective. They don't seek out disability spokespersons on local and regional stories, either.

"When Missouri. Gov. Mel Carnahan died, the newspaper planned a series of stories about his contingency groups," said the St. Louis Post-Dispatch's Jennifer LaFleur. "It took a lot to convince editors that disabled people made up a true contingency group. If we treated another minority group the same way, our newsroom would be up in arms."

In the past three years, the U.S. Supreme Court has ruled on a number of employment cases brought under the landmark 1990 Americans with Disabilities Act, which outlaws disability-based discrimination. The court has consistently ruled for employers and against plaintiffs seeking workplace accommodations for their disabilities. But no story has yet looked at these rulings in light of larger disability rights movement, nor the implications for the average American.

Repetitive-motion injuries accounted for more than a third of the 1.7 million workplace injuries reported in 2000, yet Toyota worker Ella Williams was told by the court that RSI wasn't a "disability" so she had no standing to sue under the law. It said

the same thing to Robert Barnett, who has high blood pressure. Workers who now face discrimination on the job because of these kinds of "nontraditional" disabilities can't seek redress.

"If Americans knew what they had lost, they would weep," Jones said. Local media do report on lawsuits filed by disability rights groups and individuals against inaccessible grocery chains, theaters, drugstores and restaurants. Yet national coverage of such access lawsuits has almost uniformly taken the perspective of business and trade associations, who condemn the suits as costly and unnecessary, the product only of disgruntled malcontents.

ROASTED NUTS

General-alarm fire at Trenton Psychiatric

Budget only casualty of fire

And as for the "ugly" two headlines stand out: "Execution of Retards to Be Reviewed," appeared on the Associated Press Online in February. "Roasted Nuts" read another -- this one in the July 10 Trentonian for a story about a fire at Trenton Psychiatric Hospital. Both news outlets were reprimanded and apologized.

The question is: how could they have been published in the first place? The disability rights perspective hasn't penetrated very far into newsrooms, and definitions of "diversity" from professional journalism groups still fail to include disability. It is still routine to find a story of a disabled person cheerfully overcoming obstacles with a smile and a heartful of courage plastered over the front of the Sunday feature section. A tale a wheelchair user tells a reporter about being denied job after job ends up not as a piece on the issue of job discrimination but a feature on the pluckiness of the disabled jobseeker.

Reporters and editors associate disability with tragedy or adversity, says Haller; they feel that "disabled people are different from us more than they are like us, that their disabilities somehow set them apart from the rest of us," she wrote in The Baltimore Sun.

Journalism award-winners still focus on "coping" and on "illness or disability." They're "awash in inspiration," says Haller, who

studied stories that had won the Pulitzer Prize and other major journalism awards to see how disability was treated. A woman whose story had been given the inspirational gloss told Haller: "No matter who you are, what you do, how you feel, to some people you'll always be a tragic figure."

Mary Johnson is editor of Ragged Edge magazine, which serves the disability community. Her latest book, "Make Them Go Away: Clint Eastwood, Christopher Reeve and The Case Against Disability Rights," is being published by The Advocado Press.

Links:

Ragged Edge magazine covers the disability experience in the United States, including medical rationing, genetic discrimination, assisted suicide, long-term care, attendant services and legislation affecting the disability community. www.raggededgemagazine.com

"Reeve TV Show Brings Dispute To Surface," Rocky Mountain News, Sept. 23, 2002. (PDF)

"News Coverage of Disability Issues: Final Report for The Center for an Accessible Society," Beth A. Haller, Ph.D., associate professor of journalism, Towson University, July 1999. www.accessiblesociety.org/topics/coverage/0799reportoverview.htm

New York Times, April 28-30, 2002, series on the care for mentally ill in nursing homes. Mainbar stories only. Does not include photos or charts. (PDF)

U.S. Department of Health and Human Services provides information about the Olmstead decision.
www.hhs.gov/ocr/mis.htm

Medicaid Attendant Services and Support Act (MiCASSA). The nonprofit, advocacy group Tash has information about the pending legislation.
www.tash.org/govaffairs/micassa.htm
Government action on MiCASSA:
http://thomas.loc.gov/cgi-bin/bdquery/z?d107:s.01298:

"Roasted Nuts," Trentonian, July 10, 2002. (PHOTO). Read the apology.

"Confusing disability and tragedy," Beth A. Haller, Ph.D., associate professor of journalism, Towson University, The Baltimore Sun, April 29, 2001. (PDF)

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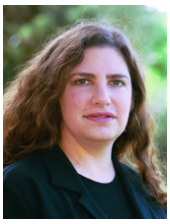
Understanding and Reporting on Disability



By **Suzanne C. Levine**

Opportunities for good, accurate reporting on disability are being missed. The most frequent stories are, for example, features about a child who gets to go to camp, coverage of a fund raising event or the super athlete in a wheelchair who climbs the mountain. These stories are typically "inspirational" or evoke feelings of pity. The missed stories can be hard-hitting, difference-making journalism, the kinds of stories that keep government accountable and people honest. These stories are being missed because society's assumptions about disability aren't considered when disability becomes a news item.

Missed Stories

Why are stories about disability issues being missed? The answer, according to some mainstream news media reporters, is that there is no easy answer. Bob Egelko, a San Francisco Chronicle reporter who covers the courts and legal issues does not have specific disability experience. Yet he reports on disability when it comes through the courts. Through years of reporting Egelko says that with disability it is "impossible to find a monolithic voice because they are complex issues."

According to Buffalo News assistant managing editor for features Sue LoTempio, who uses a wheelchair, the news media is lazy when it comes to the disability issues. "We like to do easy stories and Jerry Lewis' story is a really easy story to cover or to write. And I think they have a kind of mindset that 'OK, we've covered the telethon, that's all we have to do.' … It's very difficult to get anybody to look at the breadth of the stories that are important."

But even when reporters try to get a disability-related story in the news, it can be frustrating. Jennifer LaFleur, a former computer-assisted reporting editor at the Post Dispatch in St. Louis who is currently a McCormick Tribune Journalism Fellow at the Reporters Committee for Freedom of the Press, says she has met resistance when it comes to reporting on hard-hitting disability issues. "I think most newsrooms see disability reporting as having no underlying issues, that there's no politics involved, no public policy issues that need to be looked at. Nothing!"

Dateline NBC correspondent, John Hockenberry, who uses a wheelchair, gets to the point by saying: "Disability is viewed as on the fringe of society and on the fringe of journalism."

Cultural Context

Why is disability viewed on the fringe and how does this affect coverage? The first step is to begin to understand how society views disability, because like other diversity issues, society shapes our personal assumptions.

In general, disability is viewed with fear, discomfort and loss. It is stigmatized and the emphasis is on correcting and curing disability.

"On the deepest level, disability brings up visions of our mortality. So, there's some baseline fear. There's a

fear of disability that reminds people of the corruption of the body. The disabled body is decomposing before your eyes. There's a real underlining fear of death -- death and corruption," says medical anthropologist Devva Kasnitz, who has a disability and is a faculty member for Disability Studies at the University of California, Berkeley.

Liz England-Kennedy, a medical anthropologist at who recently completed her dissertation at the University of Arizona, specializes in chronic illness and disability. Stereotypes about people with disabilities often come from the fact that American culture emphasizes what and how much a person can produce, England-Kennedy says. As a result, non-disabled people have a variety of assumptions about people with disabilities.

"They see the disability first and don't really necessarily look beyond it, to the person," says England-Kennedy who has a close family member with a disability. "There's an emphasis on medicalization, an emphasis on correcting situations, on curing, on what you can do to normalize. There's also a tendency in this culture to assume that a person doesn't know how to help themselves if they have a difficulty."

Fear coupled with the assumption that disability is only something to get rid of, leads to stereotypes that England-Kennedy and others identify as, the "cripple;" the charity case; the victim; the demon; the "supercrip;" the person with a disability and the concomitant gift; and the survivor.

These assumptions about disability can work their way into reporting. "Usually the problem is the reporter is imposing their own attitudes," says Joseph Shapiro, a National Public Radio correspondent in health, disability, aging, family and other social issues. A source with a disability may tell a reporter "'I'm trying to do what I want to do. … I'm trying to live my life, I'm not trying to be an inspiration.' And then the next line, the reporter comments 'nevertheless … so-and-so is an inspiration,'" Shapiro says. "It's not listening well. (The problem is) going in with too much of a preconceived notion."

"It's not like, go out and do a story about the disabled and their employment problems. It's when you do a story on unemployment don't forget that segment of the population."
-- Sue LoTempio, AME for Features
Buffalo News

As writers of the first draft of history, it is incumbent upon journalists to recognize their own cultural assumptions, and then go get the better story, the more accurate story using good old-fashioned journalistic tools.

Finding Missed Stories

LoTempio of the Buffalo News says the problem needs to be addressed on two fronts: staffing and a broadening of ideas about what makes the story.

"We have to get more people with differing disabilities into the newsroom. We create a climate that those of us with disabilities who do work in the business don't feel that we can't push for it," she says.

Journalists can also look for disability issues in all stories that they do. She points to stories about unemployment, which often cite that the highest unemployment rate is among African Americans.

"The group that's higher -- are disabled people. So they need to know that when they're reporting their regular stories, that there's a segment of the population that has to be included," LoTempio says. "It's not like, go out and do a story about the disabled and their employment problems. It's when you do a story on unemployment don't forget that segment of the population. … So it's kind of an integration of sources."

"Don't say 'wheelchair-bound,' don't use the terminology of pity."
-- Joseph Shapiro
National Public Radio correspondent

The Chronicle's Egelko says, "Beyond the obvious -- learn as much as you can."

LaFleur, who does not have a disability, says getting to know advocates from different disability groups helps keep reporters up to date on key issues.

"I think when we do cover disability issues, we tend to focus on mobility impaired. So get involved in the deaf community and the blind community. (People who are) blind have totally different issues when it comes to transportation problems," she says.

Shapiro, who does not have a disability, suggests making use of what already exists. "Go to more resources. And stylebooks have changed, too. Don't say 'wheelchair-bound,' don't use the terminology of pity."

Accurate, fair and diverse reporting on disability can take place. The first step is to be aware of how society, and ultimately how you view disability. Listen to what sources say and avoid self-censoring. Know there is more than one point of view and find it.

The payoff can be satisfying and lead to groundbreaking stories.

After moving to the Post Dispatch, LaFleur broke her leg and experienced the city's inaccessibility. This spurred her to begin talking with local disability activists to find out what the most pressing disability issues were in the area. "They said transportation was really a big issue here and that's what we should look at. We did," she says.

Her story prompted a federal investigation into the local transit agency. "The story ended with good results and things happening from the journalism side."

Suzanne C. Levine is executive director of the National Center on Disability and Journalism. She founded NCDJ in 1998 based on a gap between what she experienced in photographing within the disability communities and what she saw represented in the mainstream news media. Levine is also a freelance photographer and has a disability. She earned her master's degree in anthropology from San Francisco State University.

Suggested Reading

• "The Disabled, the Media, and the Information Age," edited by Jack A. Nelson, Greenwood Press.
• "No Pity," by Joseph P. Shapiro, Random House, Inc.

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NewsWatch
Covering the Disability Community

How Inclusive of the Disabled is the Muslim Community?

By **Azizah staff writers and Basimah Legander-Mourcy**

This article originally appeared in Azizah magazine.

"Accessibility equals dignity," asserts Marquetta Johnson. Eleven years ago, on her way to a neighborhood thrift store, Marquetta inadvertently came between a drive-by shooter and his target. As she began to run, a bullet pierced her spinal cord, leaving her without the use of her legs. Although she went through a painful period of emotional and physical adjustment to her disability, Marquetta now sees herself as a survivor, rather than as a victim. "Accommodations make it easier to accept the fact that you have to ask for help. I don't know if it is just the woman in me, but accessibility makes me feel more graceful."

At the Atlanta Masjid of Islam, where she worships, Marquetta feels welcomed by parking spaces reserved for the disabled, a wheelchair ramp with a manageable trajectory and hallways free of architectural barriers. In the absence of automatic door openers, Marquetta is grateful, too, for those who graciously open the heavy doors for her. "Courtesy is part of accessibility," she says.

When such simple courtesies are missing, those with disabilities find participating in Muslim community life challenging at best -- and at worst, impossible. Whether a disability is a temporary one such as pregnancy or a broken ankle, or whether it is permanent due to congenital defect, illness or accident, accessibility issues should not prevent any Muslim from taking part in the activities of the Muslim community. Nor should a disability prevent anyone from learning about Islam. Still, it is rare to find a mosque or other Muslim facility fully equipped with such accommodations as

curb cuts, widened doorways, sign language interpreters, Braille Qur'ans or other Islamic books, or even such basic accommodations as the parking spaces and wheelchair ramp that Marquetta appreciates at the Atlanta Masjid.

Mohammed Kazi, who lives in California, has a son who has used a wheelchair all his life. In his attempts to gain accessibility for his son to a mosque and to Islamic classes, Mohammed has encountered nothing but difficulty. "First we had to fight for a spot to be designated in the parking lot," he recalls. "Then we had to carry him up and down the stairs because the classroom was upstairs. We requested that an elevator be installed, and so that money wouldn't be an excuse, I offered to pay for it. That was years ago. I think the committee is still meeting to discuss it," he jokes. His son is now too heavy to be carried upstairs, and so is excluded from the teenagers' classes, which are held on the upper floor of the mosque.

Rosina Abdulshakur, who has used wheelchair for 20 years due to the effects of multiple sclerosis, struggles with accessibility, too. It is through sheer determination that she stays involved in community life. Rosina comments, "Whenever I want to attend an Islamic event, I always call ahead to make sure that I can get in. Sometimes I have to go through the kitchen, or find some alternate route, but I always call first."

Accessibility can also become an issue for senior members of the Muslim community. For Fatima Zarrouki, the four flights of stairs she needed to climb to get to the women's section of a Seattle mosque might as well have been the Himalayas or the Hindu Kush mountains of her homeland. Disabled by a fall that crippled her hip and left her unable to climb stairs, the 67 year-old was excluded from the congregational prayers. Her daughter, Khairia, comments, "She loved to pray at the masjid, especially taraweeh during Ramadan. It broke her heart that she could not join the prayers, and she would sit at the bottom of the steps and cry. I wanted to put her on my back and carry her up those stairs! I would make prayer with her in the basement, but it was hard to hear the salah, and sometimes we wouldn't know whether to get up or bow down. It was terrible."

"Many times, I am referred to as 'the sister in the wheelchair,' and I correct them and say, 'my name is Rosina.'"
-- Rosina Abdulshakur.

Ashia Ahmad, a trained American Sign Language (ASL) interpreter in New Jersey points out that deaf people have very limited accessibility in Muslim settings because of the lack of Muslim interpreters, as well as because of ignorance about the need for interpretation. A teacher of ASL as well, Ashia comments, "Once I was asked why I dress the way I do. I explained that I am Muslim. A man in the class said that when they want religious teaching, deaf people are often limited to going to the churches because that's where they can find interpreters. Even if someone asks about Islam, it is really only a Muslim interpreter who could answer their questions from an Islamic perspective. A Christian or non-believer might give inaccurate information or give it from a slanted perspective." Lack of sign language interpretation makes lectures and khutbahs inaccessible to deaf Muslims, as well.

Mosques are only one of the places in Muslim communities where accessibility might be an issue. Islamic schools, halal grocery stores and other places of Muslim employment or business often pose problems, as well. "After seven years of pleading with the owner of the local halal meat store, there is finally a ramp," comments Helen Robinson. "Seven years! [Before installation of the ramp] I would have to sit outside and point to what I wanted."

At the Islamic school her son attends, Betty Hasan Amin, who also uses a wheelchair, has access to only the lower floors. When parent-teacher meetings, board meetings or academic awards ceremonies are held upstairs, she is excluded. "When my son is receiving an award," she says, "I have to send someone as a representative. Sometimes they take pictures, so I can have a memento. I have been blessed, though, to be able to support him in his sports activities since they are held in places that are accessible." Betty adds that the Islamic school is currently in the process of building a new, accessible gymnasium and looks forward to attending future awards

ceremonies and meetings there.

Why do Islamic schools, Islamic community centers, mosques, and other Muslim gathering places lag so far behind other places in accommodation and accessibility for the disabled? While some of the problem is financial, unfortunately, much of the difficulty comes from the attitudes found within the Muslim community itself. "Sometimes I feel invisible in my wheelchair," comments Majeeda Harris, a paraplegic Muslimah who lives in New York City. "I get looks in the mosque that say, 'Why are you here? What are you doing here?' Well, why shouldn't I be there?" she asks. "Muslims have a long way to go in gaining awareness of the needs of the disabled. I am sometimes shocked by their insensitivities."

Rosina Abdulshakur remarks, "Allah includes all. Human beings, though, say they believe in inclusion, but they practice exclusion." She believes this comes from lack of awareness, rather than from maliciousness.

Mohammed Kazi, who is originally from Pakistan, comments, "Some people in foreign countries think that this is God's curse. They don't want disabled people around." A similar perspective led many Americans to institutionalize people with physical challenges until only a few decades ago. Today, however, North America is among the world leaders in accommodation for the needs and rights of handicapped persons. Laws regarding accessibility have been enacted at the local, state and federal levels. The most wide-ranging and well-known of them is the Americans with Disabilities Act (ADA).

The ADA passed into law a decade ago. This legislation has two primary objectives: to enact accessibility in public accommodations; and, to ensure that qualified applicants with disabilities do not face job discrimination. Accessibility, in this sense, includes not only removing architectural barriers for the benefit of the walking impaired, but accommodations for the hearing impaired or the visually impaired, as well. While this law has served to heighten the level of awareness around the issues of disabled access, attitudes of acceptance and inclusivity are still not universal. Rosina Abdulshakur notices that not only Muslims, but people in general tend to have "a mentality toward the disabled that says, 'I'd better not get too close or say anything.'"

Aminah Rasullah, an amputee since the age of 7 who walks with the aid of crutches, mentions the marginalizing effects of society's stereotyping. "It's like -- you're an African American, a woman and disabled! It is as if I have three strikes against me," she exclaims. Many times disability is mistakenly coupled in people's thinking with illness and total dependency. A person with a visible disability may be unfairly thought of as inept, unproductive, unintelligent and asexual. Muslims in North America tend to exist outside the dominant culture already in the practice of our beliefs, religious observations and traditions. Those with disabilities may suffer a sense of double alienation, from both the dominant culture, and from fellow Muslims, as well.

Ashia Ahmad has taught brothers in her community to sign the adhan, so that when they stand in front of the mosque and sign as they call the believers to prayer they may catch the eye of a passing deaf person.

Amina would like to see Muslims become world leaders in the area of understanding the needs of the disabled and including them in community life. "We should open our minds and be more at the forefront of awareness," she observes. The doctrine of inclusivity demonstrated by Surah 'Abasa played a large part in Aminah's decision to accept Islam. "The fact that Allah revealed a surah regarding this incident made me look at a lot of different things. The man that the Prophet was being admonished for ignoring was a person with a disability -- he was blind."

A good first step toward including disabled Muslims in our communities is the opening up of dialog on the subject. Rosina Abdulshakur observes, "Adults could take a lesson from children. Children follow their natural inclination and ask about my disability. The say, 'How come you can't walk?' Their parents try to hush them up and don't say anything. For the adults, disability is a subject they are not comfortable with."

"Education is the key to undoing this," says Wahid Mansour of

Chicago, who is visually impaired. "When people are exposed to someone with disabilities, they learn about us as humans. The less exposure they have, the less consciousness they have."

Rosina agrees. "Many times," she says, "I am referred to as 'the sister in the wheelchair,' and I correct them and say, 'My name is Rosina." Once dialog becomes established and familiarity begins to occur, disability becomes just another variation of human quality, such as eye color or height, and loses its undeserved stigma.

Already changes are taking place. Approached by hearing-impaired Muslims, the Muslim American Society Shura has provided sign language interpretation for their main lecture at their national convention for the past two years. Imam Plemon El-Amin, Executive Representative of the Muslim American Society Shura, says that he expects more services to be added as awareness of the need for them increases. "We must do more," he says, admitting that the positive changes made in his community resulted from requests made from outside the administrative body. "We cannot take credit, but we are always amenable to suggestions." He adds, "Allah has blessed us with the concept that a masjid is a structure that hugs the ground. It is a place of sajdah, and the building itself should be close to the ground, so most of our facilities are on the first level." Imam Plemon also notes that the community includes a number of blind Muslims, and that the Muslim American Society Shura is readily able to obtain Braille copies of the Qur'an when they receive a request for one. Although a wide variety of Islamic materials in Braille may be difficult to obtain, or too costly for smaller communities, having audio recordings of the Qur'an, school lessons or lectures available would help to fulfill the needs of the visually impaired. Large-print materials, when available, would also be helpful to many.

Like the efforts of Imam Plemon's community to include their blind members, some Muslim communities that include populations of deaf Muslims have taken steps to meet the needs of the hearing impaired. Ashia Ahmad has taught brothers in her community to sign the adhan, so that when they stand in front of the mosque and sign as they call the believers to prayer they may catch they eye of a passing deaf person. "Perhaps they might think, 'Come to prayer, come to success?

What does that mean? Let me check this out.' Who knows what benefit it could have," she says. For those communities still learning, Ashia applauds efforts to bring in ASL interpreters at lectures and Friday prayers. She reminds mosque administrators and event planners to make sure to seat the hearing impaired near the front of the group, in a place where they have a clear view of the signer. She adds that it is important for event planners to know that they will need to bring in two or more interpreters. According to the guidelines of the Registry of Interpreters for the Deaf, ASL interpreters should be relieved after each 20 minutes of signing in order to avoid sloppy or inaccurate interpretation due to fatigue.

Although obtaining sign language interpreters may not be economical for smaller mosques, taking notes of the khutbah or lecture and making them available, or providing written materials is considered adequate compliance with the ADA. Imam Tajiddein Muwwakil of Atlanta's Masjid Al-Mu'minum suggests compiling an ASL video library of Friday prayer sermons and other lectures. Although nothing came of a proposal to set up an ASL program in his mosque, perhaps because the community presently includes no hearing impaired persons, Imam Tajiddein says that the administration there welcomes suggestions. Currently, effort is under way at the mosque to accommodate individuals in wheelchairs as well as those with visual impairments.

Accommodations for the disabled can be made at the individual level, too. Farah Ali, a hearing impaired Muslimah who works in a Muslim-run office in Texas, says, "My employer took a sign language class, and I was given a vibrating pager. It was wonderful seeing him make the extra effort to include me and make me feel comfortable."

Aminah Rasullah advises planning ahead. She points out, "When people are planning things, they should think about the physically challenged. It should be on the consideration list -- don't just think about it afterwards." Betty Hasan Amin suggests including disabled people on boards and decision-making committees so that issues of accessibility will be certain to be addressed in an informed manner. At one of the three different Islamic schools at which she has taught, this process of awareness brought about positive change. A government agency that assists disabled employees helped school officials

to have doorways widened, sinks lowered, toilets modified, grab bars positioned and an elevator installed.

A further option for including the disabled is to be sure to hold events that take place outside the mosque in locations that are ADA compliant. This way, comments Imam Plemon, "We reap the benefits of the American laws of accessibility."

Already, great strides are being made as Muslim communities make efforts to bring their disabled members firmly into the fold of community life. As attitudes continue to change, accessibility will continue to improve. Inclusion benefits not only the disabled themselves, but all of us, as our ummah is strengthened by diversity. And, it is essential to remember, we are more alike than we are different. As Rosina points out, "Just being Muslim guarantees you have something to talk about. We can always talk about Islam."

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NewsWatch
Covering the Disability Community

Hajj in a Wheelchair

By **Betty Hasan Amin**

This article originally appeared in Azizah magazine.

Locking my electric wheelchair into place behind the steering wheel of my specially-equipped van, I took a deep breath. I was beginning the journey of a lifetime -- hajj! I knew that hajj would be a life-altering event. I also knew that, while hajj can be a struggle for an able-bodied person, it would be even more of a challenge for me, a paraplegic in a wheelchair with complex medical needs.

Paralyzed by a fall as a 17-year-old high school senior, through determination I managed to earn two college degrees during a time when curb cuts were unheard of and schools and colleges were fraught with architectural barriers. Now a divorced single mother, I was raising two sons, teaching at an Islamic school and feeling blessed with the Islamic faith that gave me the strength to strive toward realizing my human potential to its fullest.

Driven by love of Allah and a burning desire to fulfill the fifth pillar of Islam, I placed my trust in Allah. I also tied my camel! I made numerous and careful preparations for my journey. I attended hajj classes at the mosque, where I heard reports from numerous hajjis. I spoke at length to a brother who had recently performed hajj in a wheelchair himself. I secured the services of a sister and of a married couple who would accompany me on my trip; Sister Rasheedah Id-Deen, with years of nursing experience behind her, would assist me with personal care and medical needs, along with Sister Binta Kareem. Sister Binta's husband Ocei Kareem would take charge of the logistics of transporting me. Although I would be gone only four weeks, I painstakingly packed enough medical supplies, herbal remedies and energy foods to last me three

months. Wary of the availability of an electrical supply on the plains of Mina and 'Arafat, I opted for a manual wheelchair. As I euphorically drove off with three other sisters that May morning in 1992 to join a group of 40 other Muslims bound for Makkah, I felt amply prepared.

Hand-carried by Brother Ocei and another brother on and off the Dulles Airport bus, I experienced humbling feelings of dependence that I had not felt in years. Fortunately, Saudi Airlines had been apprised of my situation, and had a small chair ready for me that was especially designed to maneuver through the narrow airplane aisles. I was lifted onto the chair, and braced myself for the ride and transfer to my seat at the rear of the plane filled with Muslim pilgrims. Before I could get there, however, a non-Muslim couple who anticipated my difficulty stopped me. Out of the graciousness of their hearts, they offered me their seats at the front of the plane. Their kindness helped to calm me, and with the pilot's recitation of Surah Al-Fatihah, we took off on our flight to Jeddah.

When we landed 11 hours later, I was loaded onto an elevette lift and lowered onto the tarmac by airport workers. I felt apprehensive during this procedure, wondering about the workers' abilities to deal with the disabled. I reminded myself to be patient, though, realizing that things would be different here in Saudi Arabia; there would be many cultural distinctions.

As we worked our way through customs, we waited while our tour group's leaders went to the aid of a stranded sister from Wisconsin. This woman, Sister Zainab, was being refused entry into the country because she was a single woman, traveling alone. The brothers from our group assured the officials that she could join our group. Although I did not realize it at the time, Allah had sent me another helper. Sister Zainab was a registered operating room nurse, and days later, she began to assist Rasheedah with my medical care, exhibiting great skill and concern.

Here I was, a woman in a wheelchair, receiving the least possible compassion in Makkah, the place where I had expected the most sensitivity.

At the crowded airport, the sisters helped me to don my ihram. Then we moved onto a shuttle that took us to the staging area where we waited for a bus to take us to Makkah. The wait was long and hot, but certainly not dull! I watched, astonished and fascinated, the flow of arrivals of different groups of people from all over the world. When our bus finally arrived, though, I was greatly disappointed and saddened at its appearance -- it was terribly old, without a wheelchair lift and with doors so narrow the brothers had to turn me sideways to lift me onto the bus.

My wheelchair, medical supplies, baggage and specially designed wheelchair cushion were packed on top of the bus with the rest of the luggage. As the bus took off, so did my cushion; I spent the remainder of the trip sitting on make-shift pillows, diligently trying to avoid dangerous pressure sores.

Upon our arrival at our apartment, I saw that it was at the top of three flights of stairs. For the duration of our stay, I would have to be carried up and down those stairs sometimes two and three times a day as we went back and forth from prayers. The part of Makkah in which we stayed had a large African population, and the neighboring men often willingly came to the assistance of the group's brothers to carry me. As at the beginning of this journey, I again felt humbled by my dependence.

When our group finally made our way to Masjid Al-Haram for umrah, reverence and awe overwhelmed all of us. Tears flowed. A small voice inside me, however, told me to dry those tears, and soon I realized why -- I would need all my strength and clarity. As I approached the masjid door in my wheelchair, a custodian jumped up and blocked my way. He shouted a torrent of angry words in Arabic, and then gestured brusquely. A look of great disdain on his face, he began to make shooing motions and sounds. Hurtfully, I saw that I was being shooed away from the Haram door the way a fly would be shooed away

from a banquet!

The brothers in our group stepped forward and attempted to explain the particulars of my situation, but to no avail. We were being refused entry because I was in a wheelchair! I could not believe this was happening. I thought to myself, "He's kidding! I didn't travel thousands of miles to be prevented from performing my rites." But he was not kidding, and adamantly continued to refuse us entry.

I was shocked and angry. Here I was, a woman in a wheelchair, receiving the least possible compassion in Makkah, the place where I had expected the most sensitivity. I summoned the strength and determination that I had learned during my 26 years of life as a disabled person, and decided to try another door.

The buses were parked so close together that the brothers could not carry me between them. I sat there on the bus all day, and made my prayers and my dua'aa in my seat.

The guard at the next door refused us in a similar fashion. Undaunted and unbowed, we tried a third door. Again, our entry was barred. We tried a fourth and a fifth door, but were shooed away again. After being turned away from seven doors, and now a great distance from where we had begun, I began to feel disheartened. My inner voice, however, told me to hold on, pray and trust in Allah.

We decided to try one more time, this time at the doors of Safaa and Marwah. At this door sat a quiet elderly man, who looked like he was 80 years old. Not only did he allow us in, but he wrote a note in Arabic and told us, surprisingly in English, to show this note if we should have any more problems. Alhamdulillah, that note was a great blessing, and did make things much easier. (Years later, I had it translated and learned that it said that the bearer was affiliated with the Atlanta Masjid, and should she expire while making hajj, to please contact the American Embassy.)

Once admitted, the brothers with me went off to make their umrah, and I remained in the care of two hired Nigerian men. They lifted me into a large basket, hoisted me onto their heads, and trotted toward the Kaa'ba for tawaf. My exhilaration at finally performing my rites was tempered by a great fear of toppling out of this unsteady device and being trampled by the swirling crowd below! There I sat, so far away from home, and completely dependent on people I did not know, whose language I could not speak nor understand, in an unfamiliar land. At that point, I realized the interdependence of humanity. During sa'ee, relieved to be on the ground in my familiar wheelchair, I repeated my dua'aa in a stronger voice.

During the next few days, the sweltering heat caused moisture to constantly build up on my skin, which meant that my ilo-conduit pouch had to be changed twice a day instead of the usual once every seven days. I was grateful that I had brought such a large stash of medical supplies. I did, however, begin to feel the effects of my lost wheelchair cushion -- the pillows I sat on provided only an inadequate substitute. Sitting in our huge tent in Mina, I poured ice water over myself trying to stay comfortable, and rested on an air mattress blown up by sisters in our group. I prayed for dhuhr, when I knew the scorching sun would begin its decline.

When I was lifted onto a bus headed for 'Arafat, I sat in great anticipation with my two attendants and two older sisters from our group. Unfortunately, as we sat in a three-hour traffic jam, fumes from the other buses exacerbated my respiratory problems, and my seat became increasingly uncomfortable. Then, when we finally reached 'Arafat, I could not get off the bus. The buses were parked so close together that the brothers could not carry me between them. I sat there on the bus all day, and made my prayers and my dua'aa in my seat. At first I felt annoyed, thinking that I should be making a greater sacrifice, enduring the Saudi desert heat, but eventually I realized that being allowed to remain on the air-conditioned bus was a mercy from Allah.

As we prepared to depart from 'Arafat, my attendant and his wife left for a quick trip to the bathroom. Meanwhile, the bus driver decided it was time to leave! I was nearly in a frenzy as I begged him not to go just yet, and tried to explain that I could not walk and was waiting on my attendants to come back.

Neither the bus driver nor any of the other passengers could understand me, and off we drove. All I could do was whisper desperately, "Lord, I am at Your mercy, here in the dark, driving somewhere I don't know, with people who can't understand me and don't know me. The only two people on this bus I know can't lift me. Please help me, Allah."

At Muzdalifah, everyone got off the bus. The driver shouted and gestured to me to get off, too. I tried to make him understand that I could not walk, and would need to be carried. He could not understand, and kept shouting. I knew that the two elderly sisters with me had neither the strength nor the expertise to lift me, so the sisters did the best they could and volunteered to pick up my pebbles for me. The bus driver finally gave up and left, and I slept on the bus alone.

We arrived back in Mina the next morning. When the bus had emptied, the driver again shouted and motioned for me to exit the bus. After some time an African man seemed to understand the problem, and lifted me out of the bus and into my chair. We did not know where we were, and this man kindly pushed me around and around for some time with the two elderly sisters wandering along with us. I began to despair, feeling that we would never find our camp. I told myself, "Allah knows every grain of sand, every leaf that falls. Out of all these millions of people, I know Allah sees me." I felt a great surge of faith, a great spiritual assurance. I mentioned to our helper that we were Americans. He turned in another direction and pushed me along for some time more, but now with direction. Finally, we rounded a corner and I saw our tent!

I realized how difficult it is for disabled people who live in countries without legislation in favor of the disabled in areas of education, employment or housing.

What an emotional reunion that was! The sisters cried and hugged us. The brothers hugged and thanked the African brother who had brought us back. Brother Ocei had been completely distraught, and was overwhelmed at my reappearance. Alhamdulillah, Allah is most great.

The next three days were wonderful. My stoning was performed by proxy for me by the brothers. We met many other pilgrims, and shared ethnic foods. During those times, my disability was a non-issue.

Back in Makkah, however, I began to suffer severe chills. Sitting on the hard bus seat for hours without medical attention had taken its toll. Someone suggested that I go to a nearby medical trailer set up for pilgrims, but when we got there, it was completely inaccessible. We decided to go to the hospital, but were greeted, again, by non-negotiable steps. The brothers decided to carry me into the hospital. There, I was examined by a congenial doctor who was thrilled to meet an American Muslim. He told me that I had a large, advanced necrosis decubitus, and that they could not treat it there as it required surgery. My condition was serious.

Our group still had four more days before we were to return home. Leaving the group and arranging a flight out was an impossibility. I realized that I would have to exert mind over matter -- I could not die. I had two small sons to whom I must return to raise as Muslims. Sister Rasheedah and Sister Zainab cleaned and packed the decubitus with gauze. I prayed to Allah and begged Him to spare my life and to return me safely home.

Sheer faith and determination kept me going. I accompanied the group to Madinah, endured the long bus ride, and felt elated to feel the warm peacefulness of the Prophet's city. We prayed in the Prophet's Mosque with a great sense of tranquility. But when we left, I made the terrible discovery that the bag containing all of my medical supplies was missing! All of the bags had been left on a security dolly outside the mosque. My bag was the only one missing. Everyone in the group searched high and low for that bag, on other dollies, inside other bags, even in the trash. There was no sign of it; it was gone!

I returned to Makkah ill, having chills and without any medical supplies, but still filled with determination to complete my remaining rituals of hajj. This time, I learned that I could circumambulate on the top floor of the Haram. The brothers took turns pushing me, and I managed to complete my farewell tawaf.

On the shuttle to the Jeddah Airport, I endured one last difficulty. When the bus attendant placed me in a space beside the door, I quietly wheeled myself to a safer spot. The attendant came back to roughly and rudely fling me back to where he thought I should be. That area by the door was unsafe for even an able-bodied person, and certainly no place for a person in a wheelchair! With defiance born of my human dignity, I moved back into the safer place, locked my chair into position and stared the bus attendant straight in the eye. There I stayed.

Alhamdulillah, I made it safely back to Atlanta where I underwent two surgeries and remained in the hospital for eight weeks. My trip to Makkah had increased my gratitude to Allah for His loving kindness and mercy. I realized how difficult it is for disabled people who live in countries without legislation in favor of the disabled in areas of education, employment or housing. With a new appreciation for American technology and medical advances, too, I sense an obligation to share our knowledge with the rest of humanity. Insha'Allah, I pray that I might be instrumental in helping the Muslim community, both inside and outside of America, to be inclusive of everyone in the Islamic community.

Betty Hasan-Amin is a teacher and a board member of the Interfaith Disabilities Network in Atlanta.

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NewsWatch
Covering the Disability Community

Some tips for interviewing people with disabilities

The Most Important Tip: Ask the person you are interviewing about how best to provide their accommodation.

• Before the Interview

Ask the interviewee if he/she requires specific accommodation such as wheelchair access, a quiet place, an interpreter, etc. If so, ask the person how to best provide the accommodation.

Allow plenty of time for the interview. Some accommodations require additional time, such as interpreters and speech boards.

• Setting up the Interview

Don't look down on the interviewee. Place yourself and the camera (if applicable) at interviewee's eye level. In this photo, reporter David Louie of KGO-TV in San Francisco and cameraman Bo Keller create a respectful and comfortable setting by interviewing an Accesslife.com spokeswoman at eye level.

• During the interview

When interviewing a person with disability, speak directly to that person and maintain eye contact rather than interacting with an interpreter or companion.

Use the same interviewing techniques and manner as you usually do. Speak in relaxed, everyday tones.

When talking with a person with a hearing loss, be sure to face the person and do not cover your mouth when you speak. Face a light source to avoid being backlit. Make sure you talk when the person is looking at you.

If the person has a visual impairment, identify yourself and others with you. When conversing in a group, remember to identify the person to whom you are speaking.

Listen attentively and be patient. Wait for the person to finish. Don't correct or speak for the person by finishing his/her sentences.

Never pretend to know what the person is talking about. If you are having difficulty understanding, repeat what you have understood and ask for clarification.

When covering an event where a sign or oral interpreter is present, be aware of the communication between an interpreter or real time captioner and the person using their services. Avoid walking between them or blocking their communication while taking a

photograph. People who use interpreters are often located near the front in a designated section. Blocking this communication is akin to pulling the plug on the public address system.

• Other etiquette reminders

Focus on the person you are interviewing, not the disability.

Shake hands when greeting a person with a disability. People with prosthetics or limited hand motion usually shake hands.

If you offer assistance, wait until the offer is accepted. Then listen or ask for instructions.

A wheelchair or other assistive device is part of the person's personal body space. Do not lean or hang on a person's wheelchair.

Service animals and guide dogs are working. Do not make eye contact, praise, talk or pet the animal. It is distracting for the animal and owner.

Courtesy of the National Center on Disability and Journalism.

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NewsWatch
Covering the Disability Community

Resource Guide

Some resources for covering the disability community

ADVOCACY
DOMESTIC VIOLENCE
EDUCATION
LEGAL
NEWS MEDIA

ADVOCACY [TOP]

Accessibility Compliance Team / USA (Act)
Dedicated to improving community awareness and accessibility for Americans who are protected by the provisions of the Americans With Disabilities Act (ADA) and their family members and friends nationwide.
Voice/Fax: (702) 558-322
act-usa.freeyellow.com

Advocating Change Together (ACT)
Operated by and for persons with developmental and other disabilities to help organize persons with disabilities around common issues of concern because of a commitment to the premise that it is not the individual who must change to fit society, but rather, society and systems that must change to accommodate all people.
Voice: (651) 641-0297, (800) 641-0059 (Tools for Change)
Fax: (651) 641-4053
act@selfadvocacy.com
www.selfadvocacy.com

Allsup Inc.
A national organization that helps people through the Social Security disability process. Has helped more than 35,000

people receive their SSDI benefits.
Voice: (800) 854-1418
Fax: (618) 236-5778
info@allsupinc.com
www.allsupinc.com/index.html

American Association of People with Disabilities
Works in coalition with other disability organizations for the full implementation and enforcement of disability nondiscrimination laws, particularly the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973.
Voice/TTY: (202) 457-0046
Toll Free Phone/TTY: (800) 840-8844
aapd@aol.com
www.aapd.com

American Disabled for Attendant Programs Today (ADAPT)
A national organization that focuses on promoting services in the community instead of housing people with disabilities in institutions and nursing homes.
Voice: (303) 733-9324
national@adapt.org
www.adapt.org

American Disability Association
A national organization focused on connecting the broader disability community by meeting the informational needs of Americans with diverse disabilities, and promotes awareness by building bridges of understanding among all people.
Voice: (205) 328-9090
Fax: (205) 251-7417
adanet@adanet.org
www.adanet.org

Center on Human Policy
A policy, research, and advocacy organization working toward ensuring the rights of people with disabilities. Syracuse University
Voice: 1-800-894-0826; (315) 443-3851
TTY: (315) 443-4355
Fax: (315) 443-4338
thechp@sued.syr.edu
soeweb.syr.edu/thechp/

Consortium for Citizens with Disabilities
A coalition of approximately 100 national disability organizations that advocates for national public policy that ensures the self determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.
Voice: (202) 785-3388
Fax: (202) 467-4179
Info@c-c-d.org
www.c-c-d.org

Council for Disability Rights
Promotes public policy and legislation, public awareness through education, and provides information and referral services.
Voice: (312) 444-9484
TDD: (312) 444-1967
Fax: (312) 444-1977
answerwoman@disabilityrights.org
www.disabilityrights.org

Council of Parent Attorneys and Advocates
A nonprofit organization of attorneys, advocates and parents established to improve the quality and quantity of legal assistance for parents of children with disabilities.
Voice: (202) 544-2210
copaa@copaa.net
www.copaa.net

Depression and Bipolar Support Alliance (DBSA)
Formerly the National Depressive and Manic-Depressive Association, focuses on improving the lives of those with mood disorders.
Voice: (800) 826-3632, (312) 642-0049
Fax: (312) 642-7243
www.ndmda.org

Disability Advocacy Council
A non-governmental privately owned firm that assists the injured and disabled in applying for and receiving disability benefits.
Voice: (800) 274-3906

advocacy2@mailexcite.com
http://firms.findlaw.com/DAU

Disability Rights Advocates
A nonprofit legal center dedicated to protecting the civil and human rights of people with disabilities worldwide through research, education, and legal advocacy.
Voice: (510) 451-8644
TTY: (510) 451-8716
Fax: (510) 451-8511
General@Dralegal.org
www.dralegal.org

Disability Rights Education and Defense Fund (DREDF)
National law and policy center dedicated to protecting and advancing the civil rights of people with disabilities through legislation, litigation, advocacy, technical assistance, and education and training of attorneys, advocates, persons with disabilities, and parents of children with disabilities.
Voice/TTY: (510) 644-2555
Fax: (510) 841-8645
dredf@dredf.org
www.dredf.org

Families USA
A national nonprofit, non-partisan organization dedicated to achieving high-quality, affordable health and long-term care for all Americans. Among its efforts are managing a network of grassroots advocacy organizations; acting as a watchdog over government actions affecting health care; working with other organizations to achieve high-quality and affordable health care; and providing training and assistance to community-based organizations.
Voice: (202) 628-3030
Fax: (202) 347-2417
info@familiesusa.org
www.familiesusa.org

National Alliance for the Mentally Ill (NAMI)
Dedicated to eradicating mental illnesses and improving the quality of life people who are affected by these diseases. A nonprofit self-help, support and advocacy organization of consumers, families, and friends of people with severe mental

illnesses, such as schizophrenia, major depression, bipolar disorder, obsessive-compulsive disorder, and anxiety disorders.
NAMI Help Line: 1-800-950-NAMI (6264)
Voice: (703) 524-7600
TDD: (703) 516-7227
Fax: (703) 524-9094
www.nami.org

National Association of Protection and Advocacy Systems, Inc.
A voluntary national membership association providing legally based advocacy services for its members.
Voice: (202) 408-9514
Fax: (202) 408-9520
info@napas.org
www.protectionandadvocacy.com

The National Coalition of Mental Health Professionals and Consumers
A national organization of professionals, consumers, and consumer advocates who promote a mentally healthy nation. The coalition seeks to address how managed care negatively impacts on patients and professionals in mental health care.
Voice: 1-866-8-COALITION; (631) 424-5232
Fax: (631) 549-3942
NCMHPC@aol.com
www.nomanagedcare.org

National Council on Disability
An independent federal agency making recommendations to the president and Congress on issues affecting Americans with disabilities. NCD's purpose is to promote policies, programs, practices, and procedures that guarantee equal opportunity for all individuals with disabilities, regardless of the nature or severity of the disability; and to empower individuals with disabilities to achieve economic self-sufficiency, independent living, and inclusion and integration into all aspects of society.
Voice: (202) 272-2004
TTY: (202) 272-2074
Fax: (202) 272-2022
mquigley@ncd.gov

www.ncd.gov

National Patient Advocate Foundation
Seeks to create access to insurance funding for evolving therapies, therapeutic devices and agents through legislative and policy reform.
Voice: (757) 873-0438
Fax: (757) 873-1082
action@npaf.org
www.npaf.org

World Association of Persons with disAbilities
A worldwide organization that seeks to inform, assist and empower the physically and/or mentally disabled, and break down the cultural, social and economic barriers for the disabled community.
Voice: (405) 672-4440
Fax: (405) 672-4441
www.wapd.org

DOMESTIC VIOLENCE

[TOP]

Domestic Violence Initiative for Women with Disabilities
Provides comprehensive domestic violence advocacy, education, empowerment and accessibility for women with disabilities.
Voice/TDD: (303) 839-5510
Fax: (303) 839-1181
dvidenver@aol.com

Minnesota Center Against Violence & Abuse (MINCAVA)
Provides articles, facts, Web links and other resources about violence against people with disabilities.
University of Minnesota, School of Social Work
Voice: (612) 624-0721
Fax: (612) 625-4288
www.mincava.umn.edu/vdisab.asp

EDUCATION

[TOP]

The Association on Higher Education and Disability
An international, multicultural organization of professionals committed to full participation in higher education for persons with disabilities. Promotes excellence through education, communication and training. University of Massachusetts, Boston
Voice: (617) 287-3880
TTY: (617) 287-3882
Fax: (617) 287-3881
AHEAD@umb.edu
www.ahead.org

Association of University Centers on Disabilities
A nonprofit organization that promotes and supports the national network of university centers on disabilities, which includes University Centers for Excellence in Developmental Disabilities Education, Research, and Service (UCEDD), Leadership Education in Neurodevelopmental and Related Disabilities (LEND), Programs and Developmental Disabilities Research Centers (DDRC).
Voice: (301) 588-8252
Fax: (301) 588-2842
www.aucd.org

Center for Community Inclusion
A partnership of people who bring together the resources of the community and the university to enhance the lives of individuals with disabilities and their families through interdisciplinary education, community services, applied research and evaluation, and dissemination of information which reflect culturally competent attitudes and practices. University of Maine
Voice: (207) 581-1084
TTY: 800-203-6957
Fax: (207) 581-1231
ccimail@umit.maine.edu
www.ume.maine.edu/~cci/index.htm

Center on Disability
Provides services to students with disabilities, and disseminates information through training programs, conferences, workshops, seminars, and electronic media, and also conducts applications-oriented research as a means of

improving the lives of persons with disabilities and the professional skills of those who work with them.
California State University, Northridge
Voice/TTY/Message: (818) 677-2684
Fax: (818) 677-4932
sdr@csun.edu
www.csun.edu/cod

Disability Research Institute
A partnership between the Social Security Administration, Office of Policy, Disability Programs, and the College of Applied Life Studies at the University of Illinois, Urbana-Champaign (UIUC), with the participation of other campus units as well as units or researchers at six other affiliated institutions. The DRI emphasizes support of unbiased, quality research and evaluation; educational program development; and training and dissemination of information. The information helps the SSA understand the reality and impact of its income programs on the lives of SSI and SSDI applicants and participants.
University of Illinois, Champaign
Voice: (217) 265-0279
TTY: (217) 244-6274
Fax: (217) 265-0358
dri@uiuc.edu
www.als.uiuc.edu/dri

Disability Studies in Education
A group that works to encourage Disability Studies in education; to provide an organizational vehicle for networking among Disability Studies researchers in education; and to increase the visibility and influence of Disability Studies among all educational researchers.
University of Michigan, Ann Arbor, School of Education
Voice: (734) 615-1266
Fax: (734) 763-6318
ww2.nekesc.org/dse

DO-IT (Disabilities, Opportunities, Internetworking and Technology)
Helps people with disabilities successfully pursue college and careers by promoting the use electronic and information technology to maximize the independence, productivity and

participation of people with disabilities. DO-IT also provides resources for K-12 educators, post-secondary faculty and administrators, librarians, employers, and parents and mentors.
University of Washington
Voice/TTY: (206) 685-DOIT (3648)
Voice/TTY, from Washington only, outside Seattle:
(888) 972-DOIT (3648)
Voice/TTY, Spokane office: (509) 328-9331
Fax: (202) 221-4171
doit@u.washington.edu
www.washington.edu/doit

Gallaudet University
A comprehensive, multipurpose institution of higher education for deaf and hard of hearing people. The university extends its activities to a worldwide audience through a network of regional centers, international agreements, and public service and advocacy efforts. It is the only liberal arts university in the world designed exclusively for deaf and hard of hearing students.
Voice/TTY: (202) 651-5000
www.gallaudet.edu

Indiana Institute on Disability and Community
Provides leadership that enables communities to include, support, and empower people with disabilities and family members. Promotes innovative practices and policies that facilitate community membership.
Indiana University, Bloomington
Voice: (812) 855-6508
TTY: (812) 855-9396
Fax: (812) 855-9630
www.isdd.indiana.edu

The Institute on Disability
Promotes the full inclusion of people with disabilities in their communities by running a wide variety of programs and activities, including: training students, families, persons with disabilities; providing technical assistance to organizations and individuals to improve their capacity to include all citizens; and disseminating information to families, consumers, community members, and professionals. Affiliated with the Center of

Genetics and Child Development at Dartmouth-Hitchcock Medical Center; and the University Center of Excellence (UCE) in developmental disabilities.
University of New Hampshire
Voice: (603) 862-4320
Fax: (603) 862-0555
http://iod.unh.edu

Project on Disability Politics
A multidisciplinary research and service project at the University of Arkansas that studies the politics of disability, broadly defined. Develops and implements research projects that are relevant to the disability community and the improvement of democratic governance.
kays@comp.uark.edu
www.uark.edu/misc/kays

Life Span Institute
Finds research-based solutions for the challenges of human and community development, disabilities and aging through four core activities: research; training; direct services, consultation and technical assistance; leadership. The institute has 13 centers in Kansas and other states ranging from basic research to community-based clinics.
Voice: (785) 864-4295
Fax: (785) 864-5323
kahenry@ku.edu
www.lsi.ku.edu

National Center for Learning Disabilities
Provides national leadership in support of children and adults with learning disabilities by offering information, resources and referral services; developing and supporting innovative educational programs; promoting public awareness; and advocating for more effective policies and legislation to help individuals with learning disabilities.
Voice: (212) 545-7510
Fax: (212) 545-9665
Toll-free: (888) 575-7373
www.ncld.org

The National Clearinghouse of Rehabilitation Training Materials (NCRTM)

Collects, archives, and distributes rehabilitation training materials developed by rehabilitation service administration grantees, rehabilitation practitioners, rehabilitation educators, continuing education trainers, and other specialties.
Oklahoma State University
seefelj@okstate.edu
www.nchrtm.okstate.edu

National Institute on Disability and Rehabilitation Research
Generates, disseminates and promotes new knowledge to improve the options available to disabled persons. Conducts research and related activities to maximize the full inclusion, social integration, employment and independent living of individuals of all ages with disabilities. Focus includes research in areas such as employment; health and function; technology for access and function; independent living and community integration; and other associated disability research areas.
Voice: (202) 205-8134
TTY: (202) 205-4475
www.ed.gov/offices/OSERS/NIDRR

Office of Special Education and Rehabilitative Services
Provides leadership to achieve full integration and participation in society of people with disabilities by ensuring equal opportunity and access to, and excellence in, education, employment and community living. Supports programs that help educate children and youth with disabilities, provides for the rehabilitation of youth and adults with disabilities and supports research to improve the lives of individuals with disabilities.
U.S. Department of Education
Voice: (202) 205-5465
www.ed.gov/offices/OSERS

Prosthetics Research Laboratory and Rehabilitation
Research that is dedicated to the improvement of prostheses and orthoses, to the improved fitting and manufacturing processes for prosthesis/orthosis systems, and to the improved basic understanding of human interactions with these systems.
Northwestern University
www.repoc.northwestern.edu

International Center for Disability Information
A national center conducting research and training to assist persons with disabilities into employment, the community, and independence through information technology.
West Virginia University
Voice/TDD: (304) 293-5314
Walls@rtc1.icdi.wvu.edu
www.icdi.wvu.edu

Center for International Rehabilitation Research Information and Exchange (CIRRIE)
Facilitates the sharing of information and expertise in rehabilitation research between the United States and other countries. Primary goal is to develop an international rehabilitation research database, assist rehabilitation research conference organizers in the United States, and establish an international component within domestic conferences by involving eminent colleagues from other countries.
State University of New York, Buffalo
Voice: (716) 829-3141 ext.149
Fax: (716) 829-3217
ub-cirrie@buffalo.edu
http://cirrie.buffalo.edu

Crotched Mountain School
School for students with multiple disabilities. The mission is to assist people ages 6-22 years old with disabilities achieve optimal growth and independence. Most students reside at the center.
Voice: (603) 547-3311
Admissions: (800) 966-2672
Fax: (603) 547-3232
www.cmf.org/CMSchool/SchoolHomePage.htm

National Center for the Study of Postsecondary Educational Supports
Works toward creating a new system of educational supports for people with disabilities that foster high expectations, build self-confidence, and develop an understanding of strengths and weaknesses of all students.
University of Hawai'i, Manoa
www.rrtc.hawaii.edu

Society for Disability Studies
Promote interdisciplinary research on humanistic and social scientific aspects of disability and chronic illness. Membership includes social scientists, scholars in the humanities and disability rights advocates concerned with the problems of disabled people in society. The society brings together people from diverse backgrounds and substantive concerns.
University of Illinois at Chicago
Voice/TTY: (312) 996-4664
Fax: (312) 996-7743
cg16@uic.edu

Trace Center
Works to prevent the barriers and capitalize on the opportunities presented by information and telecommunication technologies, in order to create a world that is as accessible and usable for as many people as possible.
University of Wisconsin-Madison
Voice: (608) 262-6966
TTY: (608) 263-5408
Fax: (608) 262-8848
info@trace.wisc.edu
http://trace.wisc.edu

LEGAL [TOP]

Americans With Disabilities Act
Federal government's Web site that provides information and technical assistance regarding the 1990 Americans With Disabilities Act. The Department of Justice's Civil Rights Division operates site.
Voice: (800) 514-0301
TTY: (800) 514-0383
Fax: (202) 307-1198
www.usdoj.gov/crt/ada/adahom1.htm

Commission on Mental and Physical Disability Law
Promotes the American Bar Association's commitment to justice and the rule of law for persons with mental, physical, and sensory disabilities and to promote their full and equal participation in the legal profession. The commission's 15 members are appointed by the ABA president and meet twice a year at its headquarters in Washington, D.C.

Voice: (202) 662-1570
TTY: (202) 662-1012
Fax: (202) 662-1032
cmpdl@abanet.org
www.abanet.org/disability/home.html

The Law, Health Policy & Disability Center
Concentrates on public policy and its impact on persons with disabilities, with an emphasis on employment, self-determination and self-sufficiency.
University of Iowa College of Law
Voice: (319) 335-8469
Fax: (319) 335-9764
www.its.uiowa.edu/law

Los Angeles Commission On Assaults Against Women (LACAAW)
A non-profit, volunteer organization that works to eliminate violence against women, youth, children and people with disabilities through education, prevention and intervention.
Voice: (213) 955-9090
TDD: (213) 955-9095
Self-Defense: (213) 955-9098
Fax: (213) 955-9093
info@lacaaw.org
www.lacaaw.org/statdisabled.html

National Center for Injury Prevention and Control
A program of the Centers for Disease Control and Prevention that examines ways to reduce injury, disability, death, and costs associated with injuries outside the workplace. Includes section on sexual violence against people with disabilities.
Voice: (770) 488-1506
Fax: (770) 488-1667
OHCINFO@cdc.gov
www.cdc.gov/ncipc/factsheets/disabvi.ht

NEWS MEDIA [TOP]

Center for An Accessible Society
A national organization that focuses public attention on disability issues by disseminating research that promotes independent living. Research is funded by National Institute on Disability and Rehabilitation Research.
Voice: (619) 232-2727
TTY: (619) 234-3130
Fax: (619) 234-3155
info@accessiblesociety.org
www.accessiblesociety.org

Disability News Outlets
Associate journalism professor Dr. Beth Haller of Towson University lists several disability news media outlets.
bhaller@towson.edu
www.towson.edu/%7Ebhalle/dis-news.html

National Center on Disability and Journalism
An independent journalism organization dedicated to educating journalists and educators about disability reporting issues in order to produce more accurate, fair and diverse news reporting.
Voice: (415) 291-0868
Fax: (415) 291-0869
ncdj@ncdj.org
www.ncdj.org

Journalists Toolbox
A Web-site operated by a former reporter and copy editor at the Los Angeles Times and Chicago Tribune. Lists a wide array of sources for journalists and others doing research, including links to sites about the disability community.
mikereilley@hotmail.com
www.journaliststoolbox.com

The Resource Guide was compiled by the News Watch staff. If you have any additions, or feedback regarding the guide, contact News Watch at newsproj@mindspring.com

NewsWatch
Covering the Disability Community

STYLE GUIDE

The following is a list of terms or phrases you may come across when covering the disability community. Refer to this style guide to ensure that your coverage is accurate and fair. These terms were adapted from the National Center on Disability and Journalism. For the complete News Watch Diversity Style guide, go to http://ciij.org/newswatch?id=162.

able-bodied	Also known as "AB." Refers to a person who does not have a disability. "Non-disabled" is preferred. Able-bodied comes from a physical ability perspective, excluding the majority of people with disabilities. It also infers that people with disabilities do not have "able" bodies.
afflicted with (stricken with, suffers from, victim of)	Avoid. Use neutral language when describing a person who has a disability. Not every person with a disability suffers, is victim of, or is stricken. Instead use: "He has muscular dystrophy" or "she acquired a spinal cord injury."
alcoholic	Avoid. Use "recovering" not "reformed" when referring to those with alcoholism.
ASL	American Sign Language.
Americans with Disabilities Act (ADA)	This is federal civil rights legislation created in 1990 to address discrimination on the basis of disability in employment, public accommodations, transportation, telecommunications as well as state and local government services. ADA is acceptable on second reference.

assistance animal (guide dog, Seeing Eye dog, service animal)	There is no uniform terminology. Animals, mostly dogs, provide services to a person with a disability, including but not limited to people who use wheelchairs, are blind, deaf, or those who have seizures.
birth defect	Avoid the term "defect" or "defective" when describing a disability. Instead use "congenital disability," "born with a disability," or "disability since birth."
blind	Use as an adjective, not as a noun. Describes a person with complete loss of sight. For others, use terms such as "visually impaired," "person with low vision" or "partially sighted."
cerebral palsy (CP)	Do not refer to a person as "cerebral palsy victim," "cerebral palsied," "spastic" or as "a CP." CP can be used to describe the disability but not a person who has the disability.

cognitive disability	An umbrella term with different meanings to different groups depending upon the context and perspective. Naming the specific disability is preferred. Some people with mental retardation prefer cognitive disability.
confined to a wheelchair	Avoid. People use wheelchairs for independent mobility. Use "person who uses a wheelchair" or "wheelchair-user." Avoid "wheelchair-bound," "wheelchair-rider" and "vertically challenged." See also "wheelchair."
congenital disability	A person who has a congenital disability has a disability since birth. Avoid using "defect" or "defective" when describing a disability.
cripple, crippled, crippled with	Avoid. Derogatory term used to describe a person with a disability.

deaf	Capitalize when a person identifies as culturally 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. Others prefer "hard of hearing," "partial hearing loss" or "partially deaf." Hard of hearing refers to a mild to moderate hearing loss that may or may not be corrected with amplification. Best to ask individual preference. Avoid using "deaf and dumb" and "deaf-mute."
deaf-dumb, deaf-mute	Avoid. The preferred term is an individual who does not hear and speak/voice. A person who is mute may be able to hear.
defect, defective	Avoid using term to describe a disability. Best to name the disability. Offensive example: "She suffers from a birth defect." Instead use "she has a congenital disability."
deformed	Avoid. Best to name the disability.

developmental disabilities	The term generally is used to refer to individuals whose disabilities affect development, acquired at birth or childhood. The term tends to be generalized to mean more than the federal and/or state legal definitions. The legal definition can vary from state to state. Check with your respective state.
disability, disabled	General term used for functional limitations that hinder one or more of the major life activities such as walking, lifting, learning, breathing, etc. Different laws might define disability differently. When describing an individual do not include disability unless pertinent to the story. Preferred to refer to "the writer, who has a disability" rather than "the disabled writer." Disability and the people who have disabilities are not monolithic. Use "disability community," "disability activist," etc.
Down syndrome	Not Down's. It is a genetic, chromosomal disorder first reported in 1866 by Dr. J. Langdon Down. Preferred term is "person with Down syndrome." Do not use "Down syndrome child." A syndrome is not a disease or illness. Avoid using Mongoloid.

dumb	Avoid. Derogatory term referring to a person who does not voice or speak, or has a perceived low intellectual ability.
dwarf	Avoid. A medical term applied to people who are short stature. Do not use medical model terms when describing the experience of living with a disability. Preferred term is "person of short stature" or "little people." See also "little people," "midget," and "short stature."
English as a Second Language (ESL)	Unlike immersion, ESL includes some instruction in a student's native language. Usually, classes are comprised of students who speak many different languages but are not fluent in English. They may attend classes for only a portion of the day to work on English skills.
English immersion	In this program, students who are not fluent in English are taught entirely in English. Teachers give lessons in simplified English so students learn English and academic subjects.
fit	Avoid. Refers to a seizure or a person having a seizure.

guide dog (assistance animal, Seeing Eye dog, service animal)	There is no uniform terminology. Animals, mostly dogs, provide services to a person with a disability, including but not limited to those who use wheelchairs, are blind, deaf, or those who have seizures.
handicap, handicapped	Avoid when describing a disability. Can be used when citing laws and situations.
infantile paralysis	Avoid. Preferred term is "polio."
injury, injuries	An injury is "sustained" or "received," not suffered.
invalid	Avoid. Derogatory term referring to a person with a disability.
lame	Avoid. Offensive term when referring to a person. Some people with and without disabilities are offended when the term is used in colloquial English, such as "lame excuse."

little people	Refers to people of short stature. A person who is short stature founded Little People of America. The organization has critics with in and outside of the organization for using that name. The name was a move away from the medical terminology of dwarf. See also "dwarf" and "midget."
loony	Avoid. Offensive term used to describe people with psychiatric disabilities.
midget	Avoid. Derogatory term for people of short stature. See also "dwarf" and "little people."
moron	Avoid. Derogatory term referring to a person.
mute	Describes a person who physically cannot speak.
nuts	Avoid. Derogatory term referring to someone with a psychiatric disability.
paraplegic	Some people with paraplegia refer to themselves as a "para." If so, use in quote. Otherwise, spell out.

quadriplegia	Some people with quadriplegia refer to themselves as "quads." If so, use in quotes. Otherwise, spell out.
Seeing Eye dog (assistance animal, guide dog, service animal)	There is no uniform terminology. Animals, mostly dogs, provide services to a person with a disability, including but not limited to those who use wheelchairs, are blind, deaf, or those who have seizures. Note upper case. A trademark for a guide dog trained by Seeing Eye Inc. of Morristown, NJ.
seizure	Preferred term. Do not use "fit" to describe a seizure.
service animal (assistance animal, guide dog, Seeing Eye dog)	There is no uniform terminology. Animals, mostly dogs, provide services to a person with a disability, including but not limited to those who use wheelchairs, are blind, deaf, or those who have seizures.

short stature	Preferred term when describing person who has what medical terminology would describe as dwarfism. Do not use medical model terms when describing the experience of living with a disability. Some people prefer "short stature" to "little people." Best to ask individual preference. See also "dwarf," "little people," and "midget."
spastic	Avoid when describing a person with cerebral palsy or other disabilities. Muscles, not people, are spastic.
special	Avoid when describing a person with a disability or programs designed to serve them, with the exception of government references.
stricken with (afflicted with, suffers from, victim of)	Avoid. Use neutral language when describing a person who has a disability. Not every person with a disability suffers, is victim of, or is stricken. Instead use "he has muscular dystrophy" or "she acquired a spinal cord injury."
stutter	Use "person who stutters," not "stutterer." Use as an adjective, not a noun.

suffers from (afflicted with, stricken with, victim of)	Avoid. Use neutral language when describing a person who has a disability. Not every person with a disability suffers, is victim of, or is stricken. Instead use "he has muscular dystrophy" or "she acquired a spinal cord injury."
temporarily able-bodied (TAB)	Refers to the notion that sooner or later everyone will acquire some kind of disability. This is not a uniformly accepted term.
uses a wheelchair	People use wheelchairs for independent mobility. Do not use "confined to a wheelchair," "wheelchair-bound," "wheelchair-rider" and "vertically challenged." Use "person who uses a wheelchair" or "wheelchair-user." See also "wheelchair."
vegetable, vegetative state	Avoid when referring to people.
victim, victim of (afflicted with, stricken with, suffers from)	Avoid. Use neutral language when describing a person who has a disability. Not every person with a disability suffers, is victim of, or is stricken. Instead use: "He has muscular dystrophy" or "she acquired a spinal cord injury."

wheelchair	Unless mentioning the wheelchair is essential to the story, leave it out. Do not use "confined to a wheelchair," "wheelchair-bound," "wheelchair-rider" or "vertically challenged." Use "person who uses a wheelchair" or "wheelchair-user." People use wheelchairs for independent mobility. The definition of confined is relative, and for someone who needs to use a wheelchair, it can be a source of freedom and independence.
wheelchair-bound	Avoid. A person is not bound to a wheelchair; a wheelchair enables a person to be mobile. Use "wheelchair-user" or "uses a wheelchair." See also "wheelchair."

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