

# NEWS

## ADMH Media Guide

### Journalism with Respect for People with Disabilities

The Alabama Department of Mental Health serves more than 200,000 citizens with mental illnesses, intellectual disabilities and/or substance use disorders. This guide is an educational means to supply suggestions for appropriate language that uphold the dignity of all human beings.

#### Reporting Principle & General Information

According to the Associated Press Stylebook:

“In general, do not describe an individual as disabled unless it is clearly pertinent to a story. Avoid such euphemisms as mentally challenged and descriptions that connote pity, such as afflicted with or suffers from. Rather use, “... has a mental illness.”

- A disability descriptor is simply a medical diagnosis, which may also be used in a service or legal setting. Thus *disability* is a social construct created to identify those who may be entitled to services or legal protections due to characteristics related to a medical condition.
- Quite often, various disability terminologies are inappropriately used as adjectives. For example, “That schizophrenic legislator cannot make up his mind about the issues.”
- Avoid sensationalizing. Portraying persons with disabilities as overly courageous, brave or extraordinary incorrectly implies that it is unusual for people with disabilities to have talents or skills.
- Verify that any reference to a person’s mental illness is accurate and appropriate. It is always a good idea to get the opinions of experts.

#### People First Language

A preferred method to use in referring to specific individuals is to remember that they are PEOPLE first. People First Language puts the person before the disability and describes what a person has, not who a person is. It represents a more respectful and accurate way of communicating.

Important etiquette to keep in mind when writing and/or speaking about and/or to someone with a disability:

- Don’t label people with disabilities as a large group, such as “the disabled” or “the mentally ill.”
- Speak about the person first and then, if necessary, the person’s disability. A disability and/or specific diagnosis only needs to be mentioned in rare cases where it is relevant to the narrative.
- Emphasize a person’s abilities, not disabilities.
- Get to know the whole person, not just the disability.
- Always let people with disabilities speak for themselves. If they are not able to, usually either they or a personal assistant will let you know.

#### Examples of People First Language

*Instead of:*

The handicapped or the disabled  
Jack is crazy (insane, psycho, schizo)  
Brad is retarded  
Brain damaged  
Normal/healthy people  
She’s Down’s; a Down’s person; mongoloid  
Jim is a cripple

*Say:*

People with disabilities  
Jack has a mental illness  
Brad has an intellectual disability  
Brain injury  
People without disabilities  
Kate had Down syndrome  
Jim is a person with a physical disability

## **Different types of mental and/or physical disabilities:**

**Mental illnesses:** According to the Diagnostic and Statistical Manual of Mental Disorders, 4th edition, the concept of mental illness lacks a consistent operational definition that covers all situations. However, among the features of mental illnesses they list are:

1. A clinically significant behavioral or psychological syndrome or pattern that occurs in an individual
2. Must not be merely an expectable and culturally sanctioned response to a particular event, for example, the death of a loved one
3. A manifestation of a behavioral, psychological or biological dysfunction in the individual

**Intellectual disability:** Intellectual disability is characterized by significant limitations both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behavior, which covers a range of everyday social and practical skills. This disability originates before the age of 18. Intellectual disability forms a subset within the larger universe of developmental disabilities, but the boundaries often blur as many individuals fall into both categories to differing degrees and for different reasons.

*\*From the American Association on Intellectual and Developmental Disabilities*

**Developmental disabilities:** Developmental disabilities are defined as severe chronic disabilities that can be cognitive or physical or both. The disabilities appear before the age of 22 and are likely to be lifelong. Intellectual disabilities encompass the “cognitive” part of this definition, that is, those disabilities that are broadly related to thought processes. Because intellectual and other developmental disabilities often co-occur, intellectual disability professionals often work with people who have both types of disabilities. Some developmental disabilities are purely physical, such as congenital deafness or visual impairment. These are not intellectual disabilities. Other developmental disabilities can be caused by cerebral palsy, epilepsy, autism or other disabling conditions. These conditions might or might not include intellectual disabilities.

*\*From the American Association on Intellectual and Developmental Disabilities*

**Brain injuries:** There are a number of causes of brain injuries, including stroke, illness, traumatic brain injury, brain tumors and meningitis, among others. The extent of the injury to the person’s brain determines the outcome of the person’s ability to process information. Brain injuries are one cause of intellectual disabilities.

*\*From Disabled World and the CDC*

**Physical disabilities:** There are various types of physical disabilities including upper limb(s) disability, lower limb(s) disability, manual dexterity, and disability in coordination with different organs of the body. Physical disabilities can be present from birth or acquired with age, and can also be the effect of a disease.

*\*From Disabled World*

## **Resources**

Alabama Department of Mental Health  
[www.mh.alabama.gov](http://www.mh.alabama.gov)

Alabama Governor’s Office on Disability  
[www.good.alabama.gov](http://www.good.alabama.gov)

For definitions of different disabilities  
[www2.ku.edu/~lsl/news/featured/guidelines.shtml](http://www2.ku.edu/~lsl/news/featured/guidelines.shtml)

Diagnostic and Statistical Manual of Mental Disorders  
[www.dsm5.org/Pages/Default.aspx](http://www.dsm5.org/Pages/Default.aspx)

Source for People First Language  
[www.disabilityisnatural.com/explore/language-communication](http://www.disabilityisnatural.com/explore/language-communication)

American Association on Intellectual and Developmental Disabilities  
[www.aamr.org](http://www.aamr.org)

The Arc of the United States  
[www.thearc.org](http://www.thearc.org)

National Institute of Mental Health  
[www.nimh.gov](http://www.nimh.gov)

National Alliance on Mental Illness  
[www.nami.org](http://www.nami.org)

Mental Health America  
[www.nmha.org](http://www.nmha.org)

Substance Abuse and Mental Health Services Administration  
[www.samhsa.gov](http://www.samhsa.gov)

## **ADMH and the Media**

It is department policy that no employees speak with the media on behalf of the department without going through our Office of Public Information & Community Relations. If you need to contact the department for an interview/story/press release, please call 334-242-3417.

Our latest news is available at [www.mh.alabama.gov](http://www.mh.alabama.gov) and [www.media.alabama.gov](http://www.media.alabama.gov). Additionally, we distribute press releases and statements via email and fax. If you would like to receive these media blasts, please call 334-242-3417 to add or update your contact information.