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Glossary of Terms and Usage for Projects on Disability

Different terms have been used for people with disabilities in different times and places. The evolution of the perception of disability and status of people with disabilities in the society has greatly evolved and it is reflected in the way we talk about and refer to disability. However, it is sometimes difficult to know which terms to use.

Indeed, many people try to use language they think is disability-friendly, but it may actually be disrespectful to the disability community. People-first (please see the section below), disability-friendly terminology is language that does not promote out-dated, insulting or patronizing views of disability and people with disabilities. Many well-meaning, dedicated people inadvertently hold attitudes that are paternalistic or condescending. Misguided language and many prevailing attitudes promote out-dated beliefs that people with disabilities are sick, disadvantaged, needy, and, in general, not like "us". Some of the nicest people are the most likely to use patronizing language.

In the disability community, it is common to cite a couple of differing philosophies or schools of thought about disability. Most people with disabilities embrace the independent living philosophy which views disability as an inevitable part of life, and which views people with disabilities as a growing population of strong, independent, people with few differences from the rest of the population. The many inconveniences a person with a disability may experience are seen as the only real difference between people with and without disabilities. When it comes to demeaning attitudes or terminology, the disability community recognizes misconceptions in a couple of areas: medical and educational.

Disability or handicap?

Idiot, imbecile, and moron were once used to describe developmentally delayed adult with the mental age comparable to a toddler, pre-school child, and primary school child, respectively. In time, the phrase *mentally retarded* was pressed into service to replace them. This was eventually considered pejorative and became commonly used as an insult. Today, terms such as *with an intellectual disability, learning difficulties* and *special needs* are used to replace the term *retarded*.

A similar progression occurred with the following terms for persons with physical disabilities being adopted by some people:

lame / crippled → *handicapped* → *disabled* → *physically challenged*
→ *differently abled* → *People with disabilities*.

At the present time, *disability* or *impairment* are commonly used, as are more specific terms, such as *blind* (to describe having no vision at all) or *visually impaired* (to describe having limited vision).

Handicap has been disparaged as a result of false folk etymology that says it is a reference to begging. It is actually derived from an old game, Hand-i'-cap, in which two players trade possessions and a third, neutral person judges the difference of value between the possessions. The concept of a neutral person evening up the odds was extended to handicap racing in the mid-18th century. In handicap racing, horses carry different weights based on the umpire's estimation of what would make them run equally. The use of the term to describe a person with a disability—by extension from handicap racing, a person carrying a heavier burden than normal—appeared in the early 20th century.

People-first language

Many people would rather be referred to as a person with a disability instead of handicapped. "Cerebral Palsy: A Guide for Care" at the [University of Delaware](#) offers the following guidelines:

Impairment is the correct term to use to define a deviation from normal, such as not being able to make a muscle move or not being able to control an unwanted movement. **Disability** is the term used to define a restriction in the ability to perform a normal activity of daily living which someone of the same age is able to perform. For

example, a three-year-old child who is not able to walk has a disability because a normal three-year-old can walk independently.

Using Terminology

The American Psychological Association style guide states that, when identifying a person with an impairment, the person's name or pronoun should come first, and descriptions of the impairment/disability should be used so that the impairment is identified, but is not modifying the person. Improper examples are "a borderline", "a blind person", or "an autistic boy"; more acceptable terminology includes "a woman with Down syndrome" or "a man who has schizophrenia". It also states that a person's adaptive equipment should be described functionally as something that assists a person, not as something that limits a person, for example, "a woman who uses a wheelchair" rather than "a woman in/confined to a wheelchair."

A similar kind of "**people-first**" terminology is also used in the UK, but more often in the form "people with impairments" (such as "people with visual impairments"). However, in the UK, the term "disabled people" is generally preferred to "people with disabilities".

Medical model of disability vs social model of disability

It is argued under the **social model of disability** that while someone's impairment (for example, having a spinal cord injury) is an individual property, "disability" is something created by external societal factors such as a lack of wheelchair access to the workplace. This distinction between the individual property of impairment and the social property of disability is central to the social model. The term "disabled people" as a political construction is also widely used by international organisations of disabled people, such as Disabled Peoples' International. Thus the social model of disability says that disability is caused by the way society is organised. The medical model of disability says people are disabled by their impairments or differences.

Under the medical model, these impairments or differences should be 'fixed' or changed by medical and other treatments, even when the impairment or difference does not cause pain or illness.

The medical model looks at what is 'wrong' with the person, not what the person needs. It creates low expectations and leads to people losing independence, choice and control in their own lives.

The UN Convention on the rights of persons with disabilities

According to the UN Convention on the rights of persons with disabilities (adopted in 2006): "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others."

A disability may occur during a person's lifetime or may be present from birth. The complexity of the needs and assistance required to perform every day life's activities vary greatly from one person to another.

Words to Describe Different Disabilities

Here are some ways that people with disabilities are described. This list includes "out-dated language" - terms and phrases that should not be used. This list also includes respectful words that should be used to describe different disabilities. What is "okay" for some people is not "okay" for others. If you don't know what to say, just ask how a person likes to be described.

Disability	Out-Dated Language	Respectful Language
Blind or Visually Impairment	Dumb, Invalid	Blind/Visually Impaired, Person who is blind/visually impaired
Deaf or Hearing Impairment	Invalid, Deaf-and-Dumb, Deaf-Mute	Deaf or Hard-of-hearing, Person who is deaf or hard of hearing
Speech/Communication Disability	Dumb, "One who talks bad"	Person with a speech / communication disability
Learning Disability	Retarded, Slow, Brain-Damaged, "Special ed"	Learning disability, Cognitive disability, Person with a learning or cognitive disability
Mental Health Disability	Hyper-sensitive,	Person with a psychiatric disability, Person with a

	Psycho, Crazy, Insane, Wacko, Nuts Handicapped, Physically Challenged, "Special,"	mental health disability Wheelchair user, Physically
Mobility/Physical Disability	Deformed, Cripple, Gimp, Spastic, Spaz, Wheelchair-bound, Lame	disabled, Person with a mobility or physical disability
Emotional Disability	Emotionally disturbed	Emotionally disabled, Person with an emotional disability
Cognitive Disability	Retard, Mentally retarded, "Special ed"	Cognitively/Developmentally disabled, Person with a cognitive/developmental disability
Short Stature, Little Person	Dwarf, Midget Victim, Someone "stricken with" a	Someone of short stature, Little Person Survivor, Someone "living with" a specific disability
Health Conditions	"someone stricken with cancer" or "an AIDS victim")	(i.e. "someone living with cancer or AIDS")

For some disabilities, some people may choose identify themselves with a disability-as-adjective framing, using disability as a facet of identity; 'Ming is quadriplegic' or 'Francesca is autistic' as opposed to 'Ming has quadriplegia' or 'Francesca has autism.' Not all people identify this way, and not all disabilities can be applied as adjectives in this way. It's better, when possible, to mirror the language someone uses. If you know someone who identifies as 'schizophrenic,' for example, rather than as 'a person with

schizophrenia,' you could say 'my friend is schizophrenic.' Err on the side of caution if you don't know how someone self-identifies: 'my friend has schizophrenia.'

Definitions of Disability

Disability

The International Classification of Functioning, Disability and Health (ICF), produced by the World Health Organization, distinguishes between body functions (physiological or psychological, such as vision) and body structures (anatomical parts, such as the eye and related structures). Impairment in bodily structure or function is defined as involving an anomaly, defect, loss or other significant deviation from certain generally accepted population standards, which may fluctuate over time. Activity is defined as the execution of a task or action. The ICF lists 9 broad domains of functioning which can be affected:

- Learning and applying knowledge
- General tasks and demands
- Communication
- Basic physical mobility, Domestic life, and Self-care (for example, activities of daily living)
- Interpersonal interactions and relationships
- Community, social and civic life, including employment
- Other major life areas

In concert with disability scholars, the introduction to the ICF states that a variety of conceptual models has been proposed to understand and explain disability and functioning, which it seeks to integrate.

Disability is the consequence of an impairment that may be physical, cognitive, mental, sensory, emotional, developmental, or some combination of these. A disability may be present from birth, or occur during a person's lifetime.

Disabilities is an umbrella term, covering impairments, activity limitations, and participation restrictions. An *impairment* is a problem in body function or structure; an *activity limitation* is a

difficulty encountered by an individual in executing a task or action; while a *participation restriction* is a problem experienced by an individual in involvement in life situations. Thus disability is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives.

An individual may also qualify as disabled if he/she has had an impairment in the past or is seen as disabled based on a personal or group standard or norm. Such impairments may include physical, sensory, and cognitive or developmental disabilities. Mental disorders (also known as psychiatric or psychosocial disability) and various types of chronic disease may also qualify as disabilities.

Some advocates object to describing certain conditions (notably deafness and autism) as "disabilities", arguing that it is more appropriate to consider them developmental differences that have been unfairly stigmatized by society.^[2]

Types of disability

The term "disability" broadly describes an impairment in a person's ability to function, caused by changes in various subsystems of the body, or to mental health. The degree of disability may range from mild to moderate, severe, or profound. A person may also have multiple disabilities.

Conditions causing disability are classified by the medical community as:

- inherited (genetically transmitted);
- congenital, meaning caused by a mother's infection or other disease during pregnancy, embryonic or fetal developmental irregularities, or by injury during or soon after birth;
- acquired, such as conditions caused by illness or injury; or
- of unknown origin.

Types of disability may also be categorized in the following way:

Physical disability

Main article: [Physical disability](#)

Any impairment which limits the physical function of limbs, fine bones, or gross motor ability is a physical disability. Other physical disabilities include impairments which limit other facets of daily living, such as severe [sleep apnea](#).

Sensory disability

Sensory disability is impairment of one of the senses. The term is used primarily to refer to vision and hearing impairment, but other senses can be impaired.

Vision impairment

Vision impairment (or incorrectly "visual impairment") is vision loss (of a person) to such a degree as to qualify as an additional support need through a significant limitation of visual capability resulting from either disease, trauma, or congenital or degenerative conditions that cannot be corrected by conventional means, such as refractive correction, medication, or surgery. This functional loss of vision is typically defined to manifest with

1. best corrected visual acuity of less than 20/60, or significant central field defect,
2. significant peripheral field defect including homonymous or heteronymous bilateral visual, field defect or generalized contraction or constriction of field, or
3. reduced peak contrast sensitivity with either of the above conditions.

Hearing impairment

Hearing impairment or hard of hearing or deafness refers to conditions in which individuals are fully or partially unable to detect or perceive at least some frequencies of sound which can typically be heard by most people. Mild hearing loss may sometimes not be considered a disability.

Olfactory and gustatory impairment

Impairment of the sense of smell and taste are commonly associated with aging but can also occur in younger people due to a wide variety of causes.

There are various olfactory disorders:

- Anosmia – inability to smell
- Dysosmia – things smell different than they should
- Hyperosmia – an abnormally acute sense of smell.
- Hyposmia – decreased ability to smell
- Olfactory Reference Syndrome – psychological disorder which causes patients to imagine they have strong body odor
- Parosmia – things smell worse than they should

- Phantosmia – "hallucinated smell", often unpleasant in nature

Complete loss of the sense of taste is known as ageusia, while dysgeusia is persistent abnormal sense of taste,

Somatosensory impairment

Insensitivity to stimuli such as touch, heat, cold, and pain are often an adjunct to a more general physical impairment involving neural pathways and is very commonly associated with paralysis (in which the motor neural circuits are also affected).

Balance disorder

A balance disorder is a disturbance that causes an individual to feel unsteady, for example when standing or walking. It may be accompanied by symptoms of being giddy, woozy, or have a sensation of movement, spinning, or floating. Balance is the result of several body systems working together. The eyes (visual system), ears (vestibular system) and the body's sense of where it is in space (proprioception) need to be intact. The brain, which compiles this information, needs to be functioning effectively.

Intellectual disability

Intellectual disability is a broad concept that ranges from mental retardation to cognitive deficits too mild or too specific (as in specific learning disability) to qualify as mental retardation. Intellectual disabilities may appear at any age. Mental retardation is a subtype of intellectual disability, and the term *intellectual disability* is now preferred by many advocates in most English-speaking countries as a euphemism for mental retardation.

Mental health and emotional disabilities

A mental disorder or mental illness is a psychological or behavioral pattern generally associated with subjective distress or disability that occurs in an individual, and perceived by the majority of society as being outside of normal development or cultural expectations. The recognition and understanding of mental health conditions has changed over time and across cultures, and there are still variations in the definition, assessment, and classification of mental disorders, although standard guideline criteria are widely accepted.

Developmental disability

Developmental disability is any disability that results in problems with growth and development. Although the term is often used as a

synonym or euphemism for intellectual disability, the term also encompasses many congenital medical conditions that have no mental or intellectual components, for example *spina bifida*.

invisible disabilities

Several chronic disorders, such as diabetes, asthma, inflammatory bowel disease or epilepsy, would be counted as nonvisible disabilities, as opposed to disabilities which are clearly visible, such as those requiring the use of a wheelchair.

Glossary

Access: The ability to reasonably and equitably provide services based on need irrespective of geography, social standing, ethnicity age, race, level of income or sex.

Accommodation Bond: (edit fro UK) Accommodation payments - bonds and charges - are a contribution to the cost of accommodation in a residential care facility. If a person's assets exceed a set amount when they enter low level (hostel) care, they may be asked to pay a bond. A person receiving care on an extra service basis may also be asked to pay a bond regardless of whether they need high or low level care. The amount of the bond will be negotiated with the service provider. The provider can keep a certain amount from the bond for the first five years (five years is cumulative for those who might move from one service to another where they are asked to pay a bond). The balance of the bond will be repaid to the resident when they leave.

Accommodation Charge: Edit for UK Accommodation payments - bonds and charges - are a contribution to the cost of accommodation in a residential care facility. If a person's assets exceed a set amount when they enter high level (nursing home) care, they may be asked to pay an accommodation charge (or bond if receiving care on an extra service basis or where they may agree with the provider to rollover an existing bond if they transfer within 28 days from a service where they paid a bond). The charge can't exceed a certain amount.

Accommodation bonds and Accommodation charges: Edit for UK Basic Daily Care Fee. Residents of residential aged care homes will be asked to pay a daily fee for the care they receive. This includes a basic daily care fee for residents and a daily income-tested fee for some residents, depending on their income.

Accreditation: Edit for UK Accreditation is granted to services that comply with the Accreditation Standards, which are defined in the Aged Care Act, 1997. The Standards cover management systems, staffing and organisational development; health and personal care; resident lifestyle and physical environment and safe systems. A team of quality assessors carries out the audit of services. Residential care services must be accredited to receive government funding.

Acquired brain injury (ABI): Damage to the brain acquired after birth

ADHD (also known as ADD): Most experts now view Attention Deficit Hyperactivity Disorder (ADHD) and Attention Deficit Disorder (ADD) as part of a group of behaviour problems where children have difficulty concentrating on what they are doing.

Advocacy: The action of supporting another's needs or rights. ALSO: A combination of individual and social actions designed to gain political commitment, policy support, social acceptance and systems support for a particular health goal or programme. Such action may be taken by and/or on behalf of individuals and groups to create living conditions which are conducive to health and the achievement of healthy lifestyles. Advocacy is one of the three major strategies for health promotion and can take many forms including the use of the mass media and multi-media, direct political lobbying, and community mobilization through, for example, coalitions of interest around defined issues. Health professionals have a major responsibility to act as advocates for health at all levels in society.

Advocacy: Representing the concerns and interests of consumers and carers, speaking on their behalf, and providing training and support to enable them to represent themselves.

Advocacy services: Services specialising in the representation of people with a disability, their views and interests.

Advocate: An advocate is a person who represents and works with a

person or group of people who may need support and encouragement to exercise their rights, in order to ensure that their rights are upheld.

Aetiology: All the factors that contribute to the development of an illness or disorder

Aged Care Assessment Team (ACAT): Aged Care Assessment Teams (ACATs) help older people and their carers work out what kind of care will best meet their needs when they are no longer able to manage at home without assistance. ACATs provide information on suitable care options and can help arrange access or referral to appropriate residential or community care. An ACAT may include a doctor, nurse, social worker, occupational therapist or physiotherapist.

Agreement: An agreement is a legal document which sets out the rights and obligations of care recipients and providers of aged care facilities. The agreement may cover a variety of issues relating to service provision, including care, fees and charges, the rights and responsibilities of the service provider and care recipient, and any extra services.

Aids and equipment: Any devices used by persons with one or more disabilities to assist them with performing tasks, but not help provided by another person or an organisation.

Alzheimer's Disease: A type of dementia classified as a neurological disability

Anxiety: An unpleasant feeling of fear or apprehension accompanied by increased physiological arousal.

Anxiety disorder: A group of mental disorders marked by excessive feelings of apprehension, worry, nervousness and stress.

Apprenticeship: A form of paid employment where an individual works for another for a specific amount of time in return for instruction in a trade, art, or business.

Assessment: Ongoing process beginning with first client contact and continuing throughout the intervention and maintenance phases to termination of contact. The major goals of assessment are (a)

identification of vulnerable or likely cases; (b) diagnosis; (c) choice of optimal treatment; and (d) evaluation of the effectiveness of the treatment.

Asthma: A chronic, inflammatory disease of the lung's air passages that causes widespread narrowing of the passages, obstruction to airflow, episodes of shortness of breath and chest tightness.

Autism: A pervasive developmental disorder involving disturbances in cognition, interpersonal communication, social interactions and behaviours (in particular obsessional, ritualistic, stereotyped and rigid behaviours).

Award wage: The minimum legal rate of pay set in the relevant award for a particular occupation.

Basis of employment: The basis on which a consumer is employed (e.g., full-time, part-time, casual).

Benefits: Monetary payments provided by the Government to a consumer (e.g., Disability Support Pension, Newstart/Youth Allowance).

Brain injury/damage: Injury to the brain which may have been caused by one or more of the following conditions; head trauma, inadequate oxygen supply, or infection.

CALD (Culturally and Linguistically Diverse): Can refer to individual people, communities or populations who are Culturally and Linguistically Diverse.

Carer: A person of any age who provides any informal assistance, in terms of help or supervision, to persons with disabilities or long-term conditions, or older persons (i.e. aged 60 years and over). This assistance has to be ongoing, or likely to be ongoing, for at least six months. Assistance to a person in a different household relates to 'everyday types of activities', without specific information on the activities. Where the care recipient lives in the same household, the assistance is for one or more of the following activities:

- cognition or emotion
- communication

- health care
- housework
- meal preparation
- mobility
- paperwork
- property maintenance
- self care
- transport.

Carer Allowance: The Carer Allowance is a fortnightly allowance paid to a person caring for a relative or friend at home. This allowance is payable to people who care for someone assessed as requiring a high level of care.

Carer relationship: The relationship of the carer and the care receiver.

Casual employment: Paid employment often characterised by irregular hours and higher hourly rates of pay compared to part- and full-time employment. Casual employment can be either temporary or permanent, and employees are not usually entitled to holiday or sick leave.

Cataract: A cloudiness or opacity of the lens of the eye which may cause vision problems. Cataracts are typically associated with ageing but may occur at birth.

Cerebral palsy: A non-progressive movement disorder, resulting from an injury to the immature brain in a foetus or infant.

Certification: There is a specified standard of building and care that facilities must meet to enable them to charge accommodation bonds and be eligible to receive Commonwealth subsidies for concessional and assisted residents. Facilities that apply for certification are assessed independently of the Department through the application of a nationally consistent assessment instrument.

Certified agreement: A specifically negotiated workplace agreement.

Chronic: Of lengthy duration or recurring frequently, often with progression seriousness.

Cognitive Behaviour Therapy (CBT): A short-term goal-oriented

psychological treatment. The two guiding principles are that: how we behave (including how we feel) is learned through experience, and therefore may often be changed or unlearned; and thought processes directly impact on the person. The person is encouraged to examine their negative perceptions and interpretations of their experiences. They are also taught problem-solving techniques.

Communication: Oneself understood by others, and understanding others. Mainly categorised as verbal or non-verbal communication.

Community Aged Care Package: Community Aged Care Packages provide a range of services to meet more complex care needs in the home, including nursing and help with housework, and personal care.

Community Care Packages: The aim of Community Care Packages (CCPs) is to help older Australians to remain independent and live in their homes for as long as they can. They are intended to provide care that is similar to care available in a hostel.

Community Care Services: Community Care Services provide care and support for people who want to stay independent and living at home. They include Home and Community Care (HACC) Services, Community Aged Care Packages and respite care services.

Community development: Refers to the process of facilitating the community's awareness of the factors and forces that affect its health and quality of life, and ultimately helping to empower the community with the skills needed to take control over and improve those conditions. It involves helping communities to identify issues of concern and facilitating their efforts to bring about change in these areas.

Community education: An organised campaign designed to increase awareness of an issue.

Community support: A form of service provided to people with a disability that includes advocacy, information, and print disability.

Co-morbidity: The co-occurrence of two or more disorders, for example a depressive disorder with anxiety disorder, or depressive disorder with anorexia.

Conduct disorder: A repetitive and persistent pattern of aggressive or otherwise antisocial behaviour, usually recognised in childhood or adolescence.

Consumer: A person utilising, or who has utilised, a service.

Continuity of care: Linkage of components of individualised treatment and care across health service agencies according to individual needs.

Core activities: Core activities are communication, mobility and self care.

Cultural diversity: Refers to the wide range of cultural groups that make up the population and Australian communities. It includes groups and individuals who differ according to religion, race, or ethnicity.

Culture: Can be defined as a set of guidelines (both explicit and implicit) which individuals inherit as members of a particular society, and which tells them how to view the world, how to experience it emotionally, and how to behave in it in relation to other people, to supernatural forces or gods and to the natural environment.

Day Therapy Centres: Day Therapy Centres are special centres which offer physiotherapy, occupational and speech therapy, podiatry and other therapy services to older people who can't access these services through their local hospital.

Days of operation: The days of the week that a service usually operates. If days of operation during the collection week (28 June-2 July 2004) are not typical for the service, typical hours should be recorded as well.

Deaf/Blind: Having sensory impairment to both hearing and sight.

Dementia: A general and worsening loss of brain power such as memory, understanding and reasoning. Main types of dementia include Alzheimer's disease, Pick's disease, Huntington's disease and Parkinson's disease.

Department of Veterans Affairs (DVA) edit for UK: Exists to serve members of Australia 's veteran and defence force communities, war widows and widowers, widows and dependants, through

programs of care (including health and mental health), compensation, commemoration and defence support services.

Depression: A common mental disorder marked by persistent sadness, loss of interest or pleasure in activities, and by decreased energy. Often involves suicidal thoughts or self-blame. It is differentiated from normal mood changes by the extent of its severity, the symptoms and the duration of the disorder.

Depressive disorder: A constellation of emotional, cognitive and somatic signs and symptoms including sustained sad mood or lack of pleasure and defined according to standard diagnostic criteria.

Diagnosis: A decision based on the recognition of clinically relevant symptomatology, the consideration of causes that may exclude a diagnosis of another condition, and the application of clinical judgement.

Direct support staff: Staff that have direct contact with consumers in a support role.

Disability: In the context of health experience, the International Classification of Functioning, Disability and Health (ICF) defines disability as an umbrella term for impairments, activity limitations and participation restrictions. It denotes the negative aspects of the interaction between an individual (with a health condition) and that individual's contextual factors (environment and personal factors). In this survey a person has a disability if they report that they have a limitation, restriction or impairment, which has lasted, or is likely to last, for at least six months and restricts everyday activities. This includes:

- loss of sight (not corrected by glasses or contact lenses)
- loss of hearing where communication is restricted, or an aid to assist with, or substitute for, hearing is used
- speech difficulties
- shortness of breath or breathing difficulties causing restriction
- chronic or recurrent pain or discomfort causing restriction
- blackouts, fits, or loss of consciousness
- difficulty learning or understanding

- incomplete use of arms or fingers
- difficulty gripping or holding things
- incomplete use of feet or legs
- nervous or emotional condition causing restriction
- restriction in physical activities or in doing physical work
- disfigurement or deformity
- mental illness or condition requiring help or supervision
- long-term effects of head injury, stroke or other brain damage causing restriction
- receiving treatment or medication for any other long-term conditions or ailments and still restricted

any other long-term conditions resulting in a restriction.

Intellectual disability (ID) or **general learning disability** is a generalized disorder appearing before adulthood, characterized by significantly impaired cognitive functioning and deficits in two or more adaptive behaviors. Intellectual disability was also known as **mental retardation (MR)**, although this older term is being used less frequently in some areas and even being eliminated in others altogether. It was historically defined as an intelligence quotient score under 70. Once focused almost entirely on cognition, the definition now includes both a component relating to mental functioning and one relating to individuals' functional skills in their environment. As a result, a person with an unusually low IQ may not be considered intellectually disabled. Intellectual disability is subdivided into **syndromic intellectual disability**, in which intellectual deficits associated with other medical and behavioral signs and symptoms are present, and **non-syndromic intellectual disability**, in which intellectual deficits appear without other abnormalities.

The terms used for this condition are subject to a process called the euphemism treadmill. This means that whatever term is chosen for this condition, it eventually becomes perceived as an insult. The terms *mental retardation* and *mentally retarded* were invented in the middle of the 20th century to replace the previous set of terms, which were deemed to have become offensive. By the end of the 20th century, these terms themselves have come to be widely seen as disparaging and **politically incorrect** and in need of replacement. The term *intellectual disability* is now preferred by

most advocates and researchers in most English-speaking countries. As of 2013, the term "mental retardation" is still used by the World Health Organization in the ICD-10 codes, which have a section titled "Mental Retardation" (codes F70–F79). In the next revision, the ICD-11 is expected to replace the term "mental retardation" with "intellectual disability," and the DSM-5 has replaced it with "intellectual disability (intellectual developmental disorder)." Because of its specificity and lack of confusion with other conditions, the term "mental retardation" is still sometimes used in professional medical settings around the world, such as formal scientific research and health insurance paperwork.

Developmental disability is a diverse group of severe chronic conditions that are due to mental and/or physical impairments. Developmental disabilities cause individuals living with them many difficulties in certain areas of life. Specifically in "language, mobility, learning, self-help, and independent living." ^[1] Developmental disabilities can be detected early on, and do persist throughout an individual's lifespan.

Most Common Developmental Disabilities:

Fragile X Syndrome-(FXS) is the most common known cause of an inherited developmental disability.

Down Syndrome- Down syndrome is a condition in which a baby is born with an extra chromosome. Normally a baby is born with 46 chromosomes. Babies born with Down syndrome have an extra copy of one of these chromosomes. This extra copy changes the body's and brain's normal development and causes mental and physical problems for the baby.

Pervasive Developmental Disorders(PDD)- are a group of developmental disabilities that can cause significant social, communication and behavioral challenges.

Fetal Alcohol Spectrum Disorders- (FASDs) are a group of conditions that can occur in a person whose mother drank alcohol during pregnancy. FASDs are 100% preventable if a woman does not drink alcohol during pregnancy.

Cerebral Palsy-(CP) is a group of disorders that affect a person's ability to move and maintain balance and posture. CP is the most common motor disability in childhood.

Disability Support Pension (DSP): The Disability Support Pension ensures that people with physical, intellectual or psychiatric disabilities, who as a result of their disability work less than 30 hours per week at award wages, receive an adequate level of income.

Dual diagnosis: A diagnosis that involves both a mental illness and a substance use disorder (see also: 'Co-morbidity').

Duration of employment: The length of time an employment service consumer has been employed during the financial year. This is recorded as the number of months and weeks.

Early interventions: Timely interventions which target people displaying the early signs and symptoms of a mental health problem or a mental disorder. Early intervention also encompasses the early identification of patients suffering from a first episode of disorder.

Effectiveness: Effectiveness studies test the 'real world' impact of interventions that have been shown to be efficacious under controlled conditions. These studies are imperative to determine the generalisability of controlled studies in the real world, because interventions conducted under highly controlled conditions may not translate well into the uncontrolled environment that is the real world.

Employed: Persons who reported that they had worked in a job, business or farm during the reference week (the full week prior to the date of interview); or that they had a job in the reference week but were not at work.

Employee: A person who works for a public or private employer and receives remuneration in wages, salary, a retainer fee by their employer while working on a commission basis, tips, piece-rates or payment-in-kind, or a person who operates his or her own incorporated enterprise with or without hiring employees.

Employer: A person who operates their own unincorporated

economic enterprise or engages independently in a profession or trade, and hires one or more employees.

Epidemiology: The study of the incidence, distribution, and control of disease, and trends in health, as applied to the whole community.

Epilepsy: A tendency to have recurrent seizures (fits) indicating a disorder that arises in the brain or affects it secondarily, through a wide range of causes.

Evaluation: The process used to describe the process of measuring the value or worth of a program or service.

Evidence base: A summary of the research that informs current understanding of possible directions for promotion, prevention and early intervention initiatives.

Exit date: The date on which an outlet stopped providing service/support to a consumer. This is recorded as ddmmyyyy.

FaCS: (Australian Government) Department of Family and Community Services.

FaCS funded respite care: A program funded by FaCS aimed at increasing the provision of immediate and short-term respite to carers of people with severe/profound disabilities.

Financial year: The year dated 1 July to 30 June. The financial year for this report is 1 July 2003 to 30 June 2004.

Formal assistance: Help provided to persons with one or more disabilities by organisations or individuals representing organisations (whether for profit or not for profit, government or private). Other persons (excluding family, friends or neighbours as described in informal assistance) who provide assistance on a regular, paid basis and who are not associated with any organisation.

Full award wage: The income set in the relevant award for a particular occupation.

Glaucoma: An eye condition in which vision is impaired by raised pressure within the eye, resulting in damage to the optic nerve.

Good practice guidelines: Good practice is the benchmark against which programs can be evaluated. Good practice guidelines are statements based on the careful identification and synthesis of the best available evidence in a particular field. They are intended to help people in that field, including both practitioners and consumers, make the best use of available evidence.

Guardian: A person who has been given the legal power to make important personal decisions on behalf of another adult. This might include decisions about where the person should live or what kind of health care and services the person should have.

HACC: See Home and Community Care.

HACC Minimum Data Set (MDS): The HACC MDS is a national community services information collection that holds community services data for use at a national level for analysis, planning and policy development.

Health: A state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity.

Health Concession Cards: Health concession cards entitle the holder to concessions such as cheaper pharmaceuticals. Most also give access to Commonwealth funded free services or products such as hearing aids.

High level care: High level care provides ongoing 24 hour nursing care, as well as meals, laundry, cleaning and personal care.

Holistic approach: A holistic approach to health incorporates a comprehensive approach to service delivery and treatment where coordination of client's needs and total care takes priority.

Home and Community Care (HACC): Home and Community Care provides a program of basic maintenance and support services for frail older people, younger people with disabilities and the carers of these people to prevent premature admission to residential care. Services include home nursing, home help, respite care and assistance with meals and transport.

Hypertension: Long-term high blood pressure, which may damage

the heart, brain or kidneys.

Impairment: In the context of health experience, an impairment is defined by the International Classification of Functioning, Disability and Health (ICF) as a loss or abnormality in body structure or physiological function (including mental functions). Abnormality is used to refer to a significant variation from established statistical norms.

Incidence: In community studies of a particular disorder, the rate at which new cases occur in a given place at a given time.

Income: Any monies given to a consumer by an agency, department, or business, in exchange for labour or services (i.e., work).

Indirect support staff: Staff that have no, or only a minimal, direct supporting role.

Individual workplace agreement: A written agreement between an employer and employee about the terms and conditions of employment.

Individualised funding: Money paid to a disability employment service on the basis of the needs of an individual consumer. Examples of such funding are case based funding and futures for young adults.

Informal assistance: Informal assistance is unpaid help or supervision that is provided to persons with one or more disabilities or persons aged 60 years and over living in households. It includes only assistance that is provided for one or more of the specified tasks comprising an activity because of a person's disability or age. Informal assistance may be provided by family, friends or neighbours.

Information/referral services: Services that provide accessible information to people with disabilities, their carers, families and relevant professionals.

Integration: The process whereby inpatient and community components of a mental health service become coordinated as a single, specialist network and include mechanisms which link intake,

assessment crisis intervention, and acute, extended and on-going treatment using a case management approach to ensure continuity of care.

Intellectual disability: A type of disability that involves a deficit in cognitive ability (i.e., the brain is not working to its full age-appropriate capacity). The severity of an intellectual disability can range from minor to profound, and may be caused by genetic or environmental factors.

Interpersonal interactions and relationships: Forming and maintaining friendships, coping with feelings and behaving within socially accepted boundaries.

Interpreter service: A service that interprets the communication between a consumer and an employment service. Spoken languages other than English and non-spoken communication (e.g., sign language) are interpreted via these services.

Jurisdiction: The area for which a particular government (Commonwealth, State or Territory, local) is responsible.

Language spoken at home: The language spoken by a consumer in their current home.

Learning disability: A disability grouping used to define persons with significant difficulty in the acquisition and use of listening, speaking, reading, writing, and/or mathematical skills.

Living arrangements: Whom the consumer resides with (i.e., alone or with related or unrelated persons).

Low level care: In low level care residents can live independently, but get help with meals and laundry, and personal care like dressing and bathing.

Main language spoken: The language used most often by the consumer to communicate with other residents or visitors in their current home.

Main recipient of care: Where a primary carer is caring for more than one person, the main recipient of care is the one receiving the most help or supervision. A sole recipient is also classed as a main

recipient. The assistance has to be ongoing, or likely to be ongoing, for at least six months and be provided for one or more of the core activities of communication, mobility and self care.

Main source of income: Of all sources of income, this is the source of the greatest amount received from an individual agency, department, or business.

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Mainstream health services: Services provided by health professionals in a wide range of agencies including general hospitals, general practice and community health centres. Mental health services will be delivered and managed as an integral part of mainstream health services so they can be accessed in the same way as other services.

Media: Channel for mass communication of information to general and/or specific audiences (electronic media-radio, television, film; print media-newspapers, magazines).

Mental health: A state of emotional and social wellbeing in which the individual can cope with the normal stresses of life and achieve his or her potential.¹⁸ It includes being able to work productively and contribute to community life. Mental health describes the capacity of individuals and groups to interact, inclusively and equitably, with one another and with their environment in ways that promote subjective wellbeing, and optimise opportunities for development and the use of mental abilities.⁵ Mental health is not simply the absence of mental illness. Its measurement is complex and there is no widely accepted measurement approach to date. The strong historical association between the terms 'mental health' and 'mental illness' has led some to prefer the term emotional and social wellbeing

Mental health service provider: A person who manages and delivers mental health services in a paid or voluntary capacity. Some providers may work with NGOs but usually they have professional qualifications and receive payment for providing services. They include nurses (mental health & general), general practitioners, psychiatrists, occupational therapists, social workers and psychologists.

Method of communication: The most effective and common way by

which the consumer communicates.

Migraine: A recurrent throbbing headache that typically affects one side of the head, often accompanied by nausea, vomiting and other symptoms. It is a condition resulting from spasm and subsequent over dilatation of certain arteries in the brain.

Mobility: Mobility comprises the following tasks:

- getting into or out of a bed or chair
- moving about the usual place of residence
- going to or getting around a place away from the usual residence
- walking 200 metres
- walking up and down stairs without a handrail
- bending and picking up an object from the floor
- using public transport.

The first three tasks contribute to the definitions of profound and severe core-activity limitation.

Mobility: The ability to move around the home or other environment, including the use of public transport and/or driving a vehicle.

Mobility allowance: A form of financial assistance paid by the Australian Government to persons with a significant degree of difficulty with mobility.

Monitoring: The ongoing evaluation of a control or management process. The continuous measurement and observation of the performance of a service or program to see that it is proceeding according to the proposed plans and objectives.

Morbidity: The incidence rate of illness or disorder in a community or population.

Multiculturalism: The term multiculturalism summarises the way Australia address the challenges and opportunities of our cultural diversity. It is a term which recognises and celebrates Australia 's cultural diversity. It accepts and respects the right of all people in Australia to express and share their individual cultural heritage

within an overriding commitment to Australia and the basic structures and values of Australian democracy. It also refers specifically to the strategies, policies and programs that are designed to make our administrative, social and economic infrastructure more responsive to the rights, obligations and needs of our culturally diverse population; promote social harmony among the different cultural groups in our society; and optimise the benefits of our cultural diversity for all people in Australia .

Multidisciplinary clinical team: The identifiable group of health personnel comprising a mix of professionals responsible for the treatment and care of people with an illness.

Multi-purpose facilities: Multipurpose services are designed specifically for rural and regional areas, bringing together a range of health and aged care services (for example - hospitals, community services, family support, and aged care services).

Neurological disability: A disability grouping used to define persons with an impairment of the nervous system occurring after birth. Conditions included under this category are epilepsy, dementia, multiple sclerosis, and Parkinson's Disease.

Newstart/Youth allowance: A form of financial assistance paid by the Australian Government to young Australians who are studying, undertaking training, looking for work or temporarily incapacitated.

Non-government organisations (NGO): Private, not-for-profit, community-managed organisations that provide community support services for people affected by mental illness. Non-government organisations may promote self-help and provide support and advocacy services for consumers and carers or have a psychosocial rehabilitation role.

Non-vocational program: A program that is not designed for vocational training (e.g., study, work experience, work), but rather for recreational purposes (e.g., social outings, sporting activities).

Office of Indigenous Policy Coordination (OIPC): Coordinates a whole of government approach to programs and services of Indigenous Australians.

Osteoporosis: Reduction in bone tissue caused by the loss of calcium from the bones, making them thinner and weaker, and thus more prone to fractures.

Other income: Money received by a consumer by an agency, department, or business in exchange for labour or services (i.e., work) which is in addition to the consumer's main source of income. Examples include superannuation and dividends/interest from investments.

Other pension/benefit: Financial assistance paid by the Australian Government other than the DSP, Newstart/Youth Allowance or Mobility Allowance. Such payments might include monies paid to Veterans and their families through the Department of Veterans' Affairs. Superannuation is not included in this category.

Outcome: A measurable change in the health of an individual, or group of people or population, which is attributable to interventions or services.

Paid employment: Employment for which a consumer receives an income.

Parkinson's disease: A brain disease characterised by hand tremors, rigid limbs, difficulty in starting and stopping movements, and often mental effects.

Partner: A registered married or de facto partner.

Partnership: An association intended to achieve a common aim.

Part-time employment: Employment of less than 35 hours per week.

Peak Body: A peak body is an organisation that is run by the community, not by Government. A peak body speaks for people in the community who share an interest in something because of some factor in their life. One very important job that a peak body has is to pass information between the group of people that the peak body represents and the Government.

Pension/benefit: Financial assistance paid by the Australian Government to persons in certain circumstances. An individual's circumstances will determine which pension/benefit they receive.

Examples include DSP, Newstart/Youth Allowance and Mobility Allowance.

Pensioner: A person will be classed as a pensioner if: They receive a means-tested pension or benefit from Centrelink or the Department of Veteran's Affairs; or They hold a current Pensioner Concession Card (PCC). Disability pensions and war widows/widowers pensions paid by the Department of Veteran's Affairs are not means-tested pensions. A person will need to hold a current Pensioner Concession Card to be regarded as a pensioner for aged care fees.

Performance indicators: Measures of change in the health status of populations and in service delivery and clinical practice, collected in order to monitor and improve clinical, social, vocational, and economic outcomes.

Period of employment: The number of months and/or weeks a consumer worked in the financial year.

Permanent employment: Employment on a continuing basis with leave entitlements.

Personal activities: These include self care, mobility, communication, health care and cognition or emotion tasks.

Physical disability: A type of disability that involves conditions attributable to a physical cause, that impact on one's ability to perform physical activities. It includes the effects of paraplegia, quadraplegia, cerebral palsy, and spina bifida.

Postnatal depression: An episode of major depressive disorder occurring in the first 12 months after childbirth.

Power of Attorney: A power of attorney is a document by which a person appoints someone else, usually a trusted family member or friend, to act as their agent with authority to deal with and manage their property and other financial affairs.

Prevalence: The percentage of the population suffering from a disorder at a given point in time (point prevalence) or during a given period (period prevalence).

Prevention: Refers to 'interventions that occur before the initial onset of a disorder' to prevent the development of disorder. The goal of prevention interventions is to reduce the incidence and prevalence of mental health problems and mental disorders. Prevention interventions may be classified according to their target group, as: universal , provided to whole populations; selective , targeting those population groups at increased risk of developing a disorder; and indicated , targeting people showing minimal signs and symptoms of a disorder.

Primary care: In the health sector generally, 'primary care' services are provided in the community by generalist providers who are not specialists in a particular area of health intervention.

Primary carer: A primary carer is a person who provides the most informal assistance, in terms of help or supervision, to a person with one or more disabilities. The assistance has to be ongoing, or likely to be ongoing, for at least six months and be provided for one or more of the core activities (communication, mobility and self care). In this survey, primary carers only include persons aged 15 years and over for whom a personal interview was conducted. Persons aged 15 to 17 years were only interviewed personally if parental permission was granted.

Primary disability group: The category of disability that causes the most difficulty to the consumer.

Private residence: A home that the consumer lives in. It may be a house, flat, unit, caravan, or mobile home.

Pro rata: A reduced wage based on the proportion of hours worked out of an equivalent full-time working week.

Psychiatric disability: A type of disability involving mental health conditions which have recognisable symptoms and behaviour patterns that impair personal and/or occupational/educational functioning. Examples include schizophrenia, depression and anxiety-related disorders.

Psychosocial rehabilitation: Services with a primary focus on interventions to reduce functional impairments that limit the

independence of people whose independence and physical/psychological functioning has been negatively impacted upon as a result of a mental illness. Psychosocial rehabilitation focuses on disability and the promotion of personal recovery giving people the opportunity to work, live and enjoy a social life in the community. They are also characterised by an expectation of substantial improvement over the short to mid-term. This term is sometimes used interchangeably with the term rehabilitation.

Quality of life: This term embraces a spectrum of uses and meanings. Within this document 'quality of life' is a multidimensional concept that includes subjectively and objectively ascertained levels of physical, social and emotional functioning.

Receipt of assistance: Receipt of assistance is applicable to persons with one or more disabilities, or aged 60 years and over, who reported that they needed help or supervision with at least one of the specified tasks comprising an activity. The source of assistance may be informal or formal, but does not include assistance from the use of aids or equipment.

Recovery: A personal process of changing one's attitudes, values, feelings, goals, skills and/or roles. It is a way of living a satisfying, hopeful and contributing life. Recovery involves the development of new meaning and purpose as the person grows beyond the effects of psychiatric disability.

Referrals: Consumers referred to a service by Centrelink or another source.

Rehabilitation: Intervention to reduce functional impairments that limit the independence of consumers. Rehabilitation services are focused on disability and the promotion of personal recovery. Consumers who access rehabilitation services usually have a relatively stable pattern of clinical symptoms and there is an emphasis on relapse prevention. This term is sometimes used interchangeably with the term psychosocial rehabilitation.

Relapse: Relapse is a subsequent episode of mental illness. It is a recurrence of symptoms of mental illness similar to those that have previously been experienced. The threshold of symptoms required to identify a relapse varies according to the differing perspectives of

the person experiencing the symptoms, their family and carers, and service providers. Relapse is generally agreed to have occurred when the person experiencing the symptoms is not able to cope using their usual supports and requires a greater intensity of intervention. The word 'relapse' is viewed by many as a negative and medicalised term, and the words 'episode' or 'being unwell' may be preferred.

Reliability: The extent to which a test, measurement or classification system produces the same scientific observation each time it is applied.

Residential Care: Residential care is provided to frail older people and people with a disability who cannot live independently at home and who has been assessed by an Aged Care Assessment Team (ACAT) as needing this care.

Residential setting: The type of physical accommodation the consumer usually resides in (usually being 4 or more days per week).

Resilience: Capacities within a person that promote positive outcomes, such as mental health and wellbeing, and provide protection from factors that might otherwise place that person at risk of adverse health outcomes. Factors that contribute to resilience include personal coping skills and strategies for dealing with adversity, such as problem-solving, good communication and social skills, optimistic thinking, and help-seeking.

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Respite: Respite care services help carers take breaks from their caring role. A range of respite care services are available, including respite in the person's home, in a day care centre in the community or in a residential aged care facility. Respite can be provided by family members, friends, neighbours or trained workers.

Risk factors: Factors that increase the likelihood that a disorder will develop, and exacerbate the burden of existing disorder. Risk factors indicate a person's vulnerability, and may include genetic, biological, behavioural, socio-cultural and demographic conditions and characteristics. Most risk (and protective factors) for mental health lie outside the domain of mental health and health services—they derive from conditions in the everyday lives of individuals and communities. Risk and protective factors occur through income and

social status, physical environments, education and educational settings, working conditions, social environments, families, biology and genetics, personal health practices and coping skills, sport and recreation, the availability of opportunities, as well as through access to health services.

Risk-taking behaviour: Risk taking behaviours are behaviours in which there is some risk of immediate or later self-harm. Risk-taking behaviours might include activities such as dangerous driving, train surfing, and self-harming substance use.

Sanctions: Sanctions are penalties or actions against a residential care facility or proprietor for non-compliance with standards under the Aged Care Act 1997.

Schizophrenia: A severe disorder typically beginning in late adolescence or early adulthood. It is characterised by profound disruptions in thinking, affecting language, perception, mood, behaviour, motivation and sense of self. It often includes psychotic experiences such as hearing voices or delusions.

Self care: This activity comprises the following tasks:

- showering or bathing
- dressing
- eating
- toileting
- bladder or
- bowel control.

Sensory disability: A type of disability related to one of the senses (e.g., hearing, sight, and speech).

Service form: The document used to collect information on a particular service.

Sign language: A form of communication involving hand movements and signals. Examples include Auslan and Makaton.

Social and cultural diversity: Refers to the wide range of social and cultural groups that make up the Australian population and Australian communities. It includes groups and individuals who differ according to gender, age, disability and illness, social status,

level of education, religion, race, ethnicity, and sexual orientation.

Social exclusion: A state of exclusion that can result from a combination of social disadvantages such as unemployment, ill health, high crime rates, poor housing, poor education etc.

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Social support: Assistance available to individuals and groups from within communities which can provide a buffer against adverse life events and living conditions, and can provide a positive resource for enhancing the quality of life. Social support may include emotional support, information sharing and the provision of material resources and services. Social support is now widely recognized as an important determinant of health, and an essential element of social capital.

Socioeconomic status: A relative position in the community as determined by occupation, income and amount of education.

Speech disability: A disability group encompassing loss of speech, impairment and/or difficulty in being understood.

Stakeholders: Stakeholders include all individuals and groups who are affected by, or can affect, a given operation. Stakeholders can be individuals, interest groups or organizations.

Standards: Clinical practice standards are defined and agreed clinical procedures and practices for the optimal treatment and care of people with mental illness. Service standards define what is required for a quality mental health service.

Stressor: An event that occasions a stress response in a person.

Stroke: When an artery supplying blood to the brain suddenly becomes blocked or bleeds, often causing paralysis of parts of the body or speech problems.

Substance dependence: The misuse of a drug accompanied by a physiological dependence, made evident by tolerance and withdrawal symptoms.

Suicide: Suicide is a conscious act to end one's life. By conscious act, it is meant that the act undertaken was done in order to end the

person's life.

Support commencement date: The date a consumer received their first episode of support from a service. This is recorded as ddmmyyyy.

Support needs: The degree of a consumer's requirements for help and/or supervision in various areas.

Supported accommodation facility: Accommodation which provides board or lodging for a number of people and which has support services provided by rostered care workers, usually on a 24 hour basis.

Symptom: An observable physiological or psychological manifestation of a disorder or disease, often occurring in a pattern group to constitute a syndrome.

Transcultural services: Transcultural services promote access to mental health services for people from culturally and linguistically diverse populations. Transcultural services work with consumers, carers, health professionals and the community to promote positive attitudes to mental health and to ensure that the needs of people from culturally and linguistically diverse populations (including access, equity and cultural safety and appropriateness) are addressed at policy, planning and service delivery level.

Transport: Transport is a single task activity referring to going to places away from the usual place of residence. Need for assistance and difficulty are defined for this activity as the need to be driven and difficulty going to places without help or supervision.

Unemployed: Unemployed persons are those aged 15 years and over who were not employed during the reference week, and had actively looked for full-time or part-time work at any time in the four weeks up to the end of the reference week and were available for work in the reference week.

Visual disability: A disability grouping that encompasses blindness and vision impairment which is not corrected by prescription glasses or contact lenses.

Vocational program: A program, which prepares a consumer for employment or helps to place them in employment.

Volunteer work: Employment that is unpaid.

Work experience: A consumer who is undertaking paid or unpaid work experience or a work trial.

Worker: A consumer who is undertaking paid employment.

Workplace agreement: A written agreement between an employer and employee about the employee's terms and conditions of employment.

Youth Allowance: A type of benefit paid by the Australian Government to persons meeting the payment criteria.