Disability Royal Commission

Our Guide for Media Reporting

1. Overview

This *Disability Royal Commission – Our Guide for Media Reporting* (this **Media Guide**) has been developed by Starting With Julius to encourage responsible and ethical reporting of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (**Disability Royal Commission**).

Responsible and ethical reporting includes ensuring that people with disability are portrayed in a manner that:

- is fair, accurate and authentic;
- is respectful of their human rights and dignity; and
- avoids reinforcing myths, stereotypes, prejudice and discrimination.

This Media Guide is intended as a tool for all people working as editors, journalists, broadcasters, producers, programme makers and presenters. It may also be relevant to people covering the Disability Royal Commission as web editors, content managers of social media platforms, and on interactive multimedia.

We would like to ensure that this Media Guide is the best it can be and welcome feedback on how it may be improved.

2. The Disability Royal Commission and the Media – Backgrounder

The Disability Royal Commission was established on 4 April 2019 to inquire into all forms of violence against, and abuse, neglect and exploitation of, people with disability, whatever the setting or context.

The Disability Royal Commission is intended to run for 3 years with final recommendations to be delivered by 29 April 2022.

It is expected that it will bring stories of many survivors and victims of violence, abuse, neglect and exploitation to light, often for the first time. This is a very important opportunity for which the disability community has fought long and hard.

The media, in bringing these stories to the attention of the broader community, plays a critical role in creating societal awareness and understanding and ultimately in positively influencing societal attitudes towards the rights of people with disability.

However, the way in which the media reports on the Disability Royal Commission and the stories told, can also have a negative influence and undermine the purpose of the Disability Royal Commission – by reinforcing attitudinal barriers through perpetuating stereotypes and affirming societal prejudice towards people with disability.

The views of members of the media, like those of people generally, are influenced by implicit or subconscious bias acquired throughout their life experience, including from:

- exposure to out-dated attitudes of previous generations;
- the cultural legacy of the historic mass-institutionalisation and segregation of people with disability; and
- the still pervasive "medical model of disability" that treats disability as a deficit or burden to be "fixed" or alleviated.

Being aware that one's views may otherwise be subconsciously prejudiced is critical to being able to discharge respectful, authentic and impartial reporting of stories presented to the Disability Royal Commission.

As people with disability know, attitudinal barriers are the most difficult barriers for them to overcome – as they operate mostly invisibly and insidiously to influence other people's decisions and actions that result in the denial of their rights and their exclusion in every area of life – education, employment, community etc.

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) - to which Australia is a signatory – was drafted with very significant input from people with disability. It defines "disability", not as a physical or mental impairment or

deficit in accordance with the "medical model", but rather in terms of being disabled by one's physical and attitudinal environment in accordance with the "social model of disability":

> "The State Parties to the present Convention … 5. Recognizing that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others. … ."

Because of the importance of the media in affecting, both positively and negatively, attitudinal barriers to the enjoyment of human rights by people with disability, the CRPD is the only international convention with a specific provision dealing with the media. Article 8 of the CRPD provides:

> "1.   State Parties undertake to adopt immediate, effective and appropriate measures:
>
> a) To raise awareness throughout society, including at the family level, regarding persons with disabilities, and to foster respect for the rights and dignity of persons with disabilities;
> b) To combat stereotypes, prejudice and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life;
> c) To promote aware of capabilities and contributions of persons with disabilities.
>
> 2.   Measures to this end include:
>
> …
> c)   Encouraging all organs of the media to portray persons with disabilities in a manner consistent with the purpose of the present Convention; …"

Representing people with disability and their stories fairly, accurately, respectfully and authentically in the media can help reshape attitudinal perspectives. However, poor reporting can be just as powerful in entrenching attitudinal prejudice.

3.   Practical Tips

3.1   Use disabled media professionals and sources

Media companies should, whenever and wherever possible, consider using disabled media professionals and sources in their reporting on the Disability Royal Commission. For example, in stories about disability issues, comment from disabled advocates and disability representative and advocacy organisations should be sought and credited.

Disability service providers have an important role in the disability sector but are not recognised as representatives of people with disability.

3.2   Adopt a human rights approach to media reporting

The establishment of the Disability Royal Commission through its Letters Patent reflects a human rights-based approach to disability.

Further, Article 8 of the CRPD specifically calls for "all organs of the media to portray persons with disabilities in a manner consistent with the purpose of the present Convention".

We encourage media reporting on the Disability Royal Commission to adopt a human rights-based approach to its work, including by:

- respecting disability as a legitimate dimension of human diversity;
- acknowledging the "social model to disability" framework in preference to the deficit narrative of the "medical model";
- recognising that people with disability have the same right to the full and equal enjoyment of all human rights and fundamental freedoms, including respect for their inherent dignity and individual autonomy;
- recognising that people with disability are not responsible for the limitations imposed on them by social, physical or systemic environments or the violations of their basic human rights through violence, abuse, neglect and exploitation; and
- recognising that a transformation within society, including attitudes to disability, is needed to ensure equality and justice for people with disability.

3.3   Let people with disability speak for themselves

Many of the stories about people with disability in the media predominantly reflect the perspective of non-disabled people and often misrepresent people with disability and their experiences.

The Disability Royal Commission recognises the importance of ensuring that people with disability have the opportunity to tell their stories. This means that their words and perspectives should be at the centre. This principle should apply regardless of how someone communicates and whether or not they need assistance to do so.

The human rights disability movement coined the phrase, "*Nothing about us, without us*", to emphasise the importance of people with disability being fully involved and in control of their narrative.

However, in some situations, it may be appropriate for stories to be told through or facilitated by others, however the objective of reflecting the perspective of the person with disability at the centre should always be paramount.

Where relevant, it may be appropriate to also include the viewpoints of parents, family members, friends, etc.

At all times, and especially when speaking to survivors of violence, abuse and neglect, approach the subject matter with sensitivity and respect for the person's

boundaries.

3.4 Consider how you frame the story

3.4.1 Portraying people authentically

People with disability are entitled to be portrayed authentically, fairly and respectfully, as the individuals that they are.

The choice of words, images and messages used about people with disability in media can:

- portray people with disability and their experiences authentically as individuals, or *instead* entrench myths and negative stereotypes;
- portray people with disability as individuals and equal citizens, or *instead* patronise or "objectify" them (e.g. by "pitying" portrayal, "inspiration-based" clichés, etc. – see Stella Young's Ted Talk "I'm Not Your Inspiration, Thank You Very Much: https://www.ted.com/talks/stella_young_i_m_not_your_inspiration_thank_you_very_much?language=en);
- recognize the impact of barriers on accessibility and accommodations (whether physical, systemic or attitudinal - arising from the way in which society is organized or common perceptions and attitudes to disability) or *instead* "blame" the individual or their disability for outcomes (e.g. focussing on an individual's attitude in "overcoming" barriers in society, or medical "deficit" aspects by emphasising "treatments" and "cures").

3.4.1 Words Matter

"Person with disability" or "disabled person"?

Most people will have a personal preference about the words that others use when referring to them.

For example, some people prefer "identity-first" language and adopt the phrases "disabled people" or "disabled person" which places their disabled identity first, while others prefer "person-first" language and the terms "people with disability" or "person with disability". There are historical and other reasons for each preference and both are legitimate, but the most important thing is to respect the particular individual's preference.

Where there is no clear or known preference, or it is a more generic piece, either is acceptable.

We note that in this Media Guide we have adopted "person-first language" as it is the language used in the CRPD, and in particular the term "people with disability", as

it is the form used in the Letters Patent establishing the Disability Royal Commission. However, Starting With Julius in its own communications generally uses the terms "person with disability" interchangeably with "disabled person" in recognition of both forms.

Specific disability groups

Similarly, specific groups within the disability community may have particular preferences when it comes to identifying their group or identifying a person as a member of their group.

In some disability communities (but not all) there may be a strong consensus on preferred language (e.g. "person with Down syndrome" is the overwhelming preferred term in the Down syndrome community, whereas the Deaf and Blind communities generally prefer identify-first language egg "deaf person" or "blind person").

Use contemporary terminology

While the language of disability is always evolving, too often words that are outdated or with offensive histories are still be used to describe people with disability and their circumstances.

Many expressions that were once acceptable, including expressions used in the medical or psychiatric context, are now considered to be offensive. These include the words "retard", "moron", "imbecile", "idiot" and "slow" in relation to intellectual disability, "mongoloid" in relation to Down syndrome and "cripple", "spastic" or "lame" in relation to physical disabilities.

Other terms, like "handicapped" and "wheel-chair bound" are now outdated or simply considered inappropriate by people with disability (egg "wheel- chair bound" suggests that the user is "trapped" by their wheel-chair when in reality it is "liberating" in providing mobility and accessibility).

Other terms are also discouraged because they frame disability in a way that encourages common unhelpful perceptions and stereotypes about people with disability. For example, the language of "X suffers from/is afflicted by …" characterises the relevant impairment as a burden to be suffered unless "cured" and reinforces the "medical model" which emphasises disability as a clinical deviation from "normal". On the other hand, the human rights-based "social model" accepts disability as a natural and ordinary part of human diversity. Similarly avoid, categorising people or disability as "severe", "low-functioning" or "high-functioning". These labels are misleading and inappropriate. In some contexts it may be appropriate to note that a person has significant or specific support needs.

It is also important to avoid cliches like "vulnerable", that are frequently used to describe people with disability. This is inaccurate as vulnerability results from prejudice and discrimination, not disability.

Condescending euphemisms should also be avoided. For example, terms such as "special", handicapable and differently-abled further stigmatize disability by reinforcing the idea that people cannot deal honestly with it.

The euphemism "special needs" in particular is frequently used in educational contexts to refer to children with disability and is strongly associated with segregating practices and paternalistic attitudes around "care". Research has also shown that people with disability of all ages are viewed more negatively when they are described as having "special needs" than when they are described as having a disability or having a certain disability (see "'Special needs' is an ineffective euphemism": https://cognitiveresearchjournal.springeropen.com/articles/10.1186/s41235-016-0025-4).

The international social media campaign #SayTheWord encouraged people to use the words "disability" and "disabled".

Appendix 2 of this Media Guide includes a list of words and expressions that should be avoided, and some alternatives.

3.4.2 Pictures Matter

Like words, images can encourage negative perceptions and stereotypes.

When setting up a photo shoot with a person with disability or selecting stock images, it is worth considering:

- is the picture relevant to the substance of the story – as well as textual information being unnecessarily invasive, photographs can also be unduly invasive;

- how is mobility or assistive equipment depicted? Too often wheelchair users are shown in images that clearly focus on the equipment (egg the wheels) and may even crop the person's face;

- when depicting Autistic people, consider avoiding the stereotype of children shown with therapists or doctors — or "puzzle piece" imagery (implying autism is a jig saw or mystery), which many autistic adults find objectionable;

- in education or employment, avoid showing people with disability in segregated or congregated settings (egg special schools or sheltered workshops), unless this is the specific context of the story;

- avoiding fake stock photos – it is common for some stock banks to include photos of non-disabled models posing as people with disability, often depicted using hospital wheelchairs; and

- where possible, show diverse models (different ages, skin colours, disabilities, etc.).

3.4.3   Music Matters

Consider the impact of any music used on portrayal, and void melodramatic, "heroic" or "pity" music. For example, it's very common for sad music to be used when people are talking about the birth of a child with disability or when a person receives a diagnosis or acquires disability, framing these events as "tragic". Similarly, "triumphant" music can be patronising if its role is to encourage people with disability to be seen as "inspirational" stereotypes.

3.5   Common concerns

Pity, "inspiration porn" and other harmful stereotypes

The representation of people with disability in the media is disproportionately low. However, of those few instances, the media often resorts to two "ratings" stereotypes – both of which result in the devaluation of people with disability as individuals in their own right with their own worthwhile stories:

- first, the "pity" or "sympathy" trope - the representation of people with disability as mere objects of pity and beneficiaries of charity, which affirms the "disability burden" narrative so often used by fundraising charities; and
- second, the "inspirational" trope or more controversially, "inspiration porn" – the presentation of people with disability as inspirational heroes for the gratification and entertainment of the non-disabled, which affirms the "disability burden" narrative by communicating that people with disability that are not able to "overcome the odds" are accordingly not inspirational and worth less.

Accordingly, it is equally important to avoid using emotional words of pity and charity (egg "unfortunate") as well as words of heroism and inspiration (egg "brave", "super-determined", "unstoppable" etc. and such as "unfortunate", "pitiful").

Devaluation of victims with disability

The Disability Royal Commission will be presented with many stories of criminal violence, abuse and exploitation of people with disability. In reporting on these stories, the media must be particularly sensitive to the tendency to justify or excuse

the severity of the incident by making assumptions about disability and showing "understanding" for the perpetrator.

Research has shown that often the killing or injury of the victim with disability by a parent, spouse or carer will often be presented or inferred to have been an act of mercy or otherwise excused due to the assumed intolerable burden of the caring role, with the blame impliedly placed on the person with disability.

These devaluing ableist assumptions frequently operate so that, instead of reporting the incident as a murder, serious criminal assault or domestic violence, it is a mere death or common abuse – and the scope of media coverage is accordingly similarly restricted and muted.

Another common instance is for murders and criminal assaults, particularly sexual assaults against people with disability, to be presented as almost inevitable acts of "opportunity" due to the perceived vulnerability of the disabled victim. Again, the reporting response is often to subconsciously devalue and blame the victim by downplaying the crime.

Media reporting of violence against people with disability should not effectively condone it by exculpatory assumptions and victim-blaming.

For more information see "The Ruderman White Paper: Media Coverage of the Murder of People with Disabilities by their Caregivers" a US report: https://rudermanfoundation.org/the-ruderman-white-paper-media-coverage-of-the-murder-of-people-with-disabilities-by-their-caregivers/

Children, privacy and "too much information"

When reporting about children with disability or sharing an image of them or their siblings or peers, it is important to protect each child's best interests and respect their dignity and their right to privacy and confidentiality, especially if they are victims of violence, abuse, neglect or exploitation. This may include changing any children's names and obscure their visual identity.

If a child may be at risk as a result of the reporting, focus instead on the general situation rather than the individual child.

Avoid questions or comments that are insensitive or may stigmatize a child including because of their disability or their experience as a victim. There is a tendency for media to magnify the medical detail of the relevant disability and the child's medical history and sometimes family members in their desire to communicate issues can over-share personal information.

Children should also be given an opportunity to have their opinions heard and to provide consent, including about the information about them that is being disclosed, and those closest to the child and their situation should be consulted as well.

For more information see: UNICEF Media Guidelines for Reporting on Children
https://www.unicef.org/media/media_tools_guidelines.html

Diversity and the intersection of biases and types of discrimination

People with disability as a group are diverse; there are people with physical disabilities, people with sensory, cognitive, intellectual or psychosocial disabilities and people whose experience of disability is multiple and complex. Some people's disability is acquired disability and other people have lived with disability from birth. In many cases, a person's disability may not be visible or apparent.

It is also important to recognise, and report with sensitivity, the way that disability intersects with other dimensions of diversity.

For example, women and girls with disability face discrimination on several fronts, experiencing marginalisation and exclusion because of their gender and their disability. Similarly, Aboriginal and Torres Strait Islander Australians with disability also experience race discrimination. Cultural factors, sexual preference and gender identity can also have an important impact on the individual experience of many people with disability.

Appendix 1 – Language

Avoid	Consider using instead
Aflicted by; suffering from [cerebral palsy, down syndrome, autism[	Person with; or use preferred term for specific disability group
Attacks, spells	Seizure
Birth defect, deformity, abnormality	Born with disability; person with a disability from birth
The visually impaired	Blind person
Wheelchair-bound	Wheelchair user; person who uses a wheelchair
Crazy, insane, mad, demented, psychotic, lunatic, deviant	Person with a mental health disability; person with a psychosocial disability
Dwarf, midget	Person of short stature; person with dwarfism
Invalid	Person with disability; disabled person
Mentally retarded, slow	Person with intellectual disability
Mongoloid; mongolism	Person with Down syndrome
Down syndrome person; a Downs	Person with Down syndrome
Normal person	Non disabled person; abled person
Handicapped seating/parking/toilet	Accessible seating/parking/toilet
Severe; low functioning; high-functioning	It is not appropriate to categorise people based on function; in some contexts it may be appropriate to note that a person has significant or specific support needs

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Appendix 2 – Facts

Here are some links to data in relation to disability:

[Australian Bureau of Statistics - Disability](#)

[Australian Federation of Disability Organisations (AFDO) - Disability statistics and facts](#)

[Australian Government - Department of Social Services - About People with Disability in Australia](#)

[Australian Network on Disability - Disability Statistics](#)