



# Torch Run Language Guide

Words matter. Words can open doors to cultivate the understanding and respect that enable people with disabilities to lead fuller, more independent lives. Words also can create barriers or stereotypes that are not only demeaning to people with disabilities, but also rob them of their individuality.

The following language guidelines have been developed by experts for use by anyone writing or speaking about people with intellectual disabilities to ensure that all people are portrayed with individuality and dignity.

## Appropriate Terminology

Why is language and specific terminology important? Special Olympics prefers to focus on people and their gifts and accomplishments, and to dispel negative attitudes and stereotypes. In an ideal world, labels would not exist, but unfortunately they do and language choices can have a powerful impact on impressions and attitudes. As language has evolved, Special Olympics has updated its official terminology to use more widely accepted terminology that is more acceptable to our athletes.

- Special Olympics uses the term “intellectual disabilities.” Other terms are used around the world.
- Refer to participants in Special Olympics as “**Special Olympics athletes**” rather than “Special Olympians” or “Special Olympic athletes.”
- Use “people-first language.” Refer to individuals, persons or people with intellectual disabilities, rather than “intellectually disabled people” or “the intellectually disabled.”
- People have intellectual disabilities, rather than are “suffering from,” “afflicted with” or “a victim of” intellectual disabilities.
- Distinguish between adults and children with intellectual disabilities. Use adults or children, or older or younger athletes.
- A person “uses” a wheelchair, rather than is “confined” or “restricted to” a wheelchair.
- “Down syndrome” has replaced “Down’s Syndrome” and “mongoloid.”
- When writing, refer to participants in Special Olympics as athletes. In no case should the word athletes appear in quotation marks.
- When writing, refer to persons with a disability in the same style as persons without a disability: full name on first reference and last name on subsequent references. Do not refer to an individual with an intellectual disability as “Bill” rather than the journalistically correct “Bill Smith” or “Smith.”
- A person is physically challenged or disabled rather than crippled.
- Use the words “Special Olympics” when referring to the worldwide Special Olympics movement.



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## Terminology to Avoid

- Do not use the label “kids” when referring to Special Olympics athletes. Adult athletes are an integral part of the Movement.
- Do not preface Special Olympics with the word “the.” This implies that Special Olympics is a one-time, singular event rather than a year-round, ongoing program of sports training and competition.
- Do not use the adjective “unfortunate” when talking about people with intellectual disabilities. Disabling conditions do not have to be life-defining in a negative way.
- Do not sensationalize the accomplishments of persons with disabilities. While these accomplishments should be recognized and applauded, people in the disability rights movement have tried to make the public aware of the negative impact of referring to the achievements of people with physical or intellectual disabilities with excessive hyperbole.
- Use the word “special” with extreme care when talking about persons with intellectual disabilities. The term, if used excessively in references to Special Olympics athletes and activities, can become a cliché.

## What is an intellectual disability?

- An intellectual disability is not something you have, like blue eyes, or a bad heart. Nor is it something you are, like short, or thin.
- It is not a medical disorder, nor a mental disorder.
- An intellectual disability is a particular state of functioning that begins in childhood and is characterized by limitation in both intelligence and adaptive skills.
- An intellectual disability reflects the “fit” between the capabilities of individuals and the structure and expectations of their environment.

## Frequently Asked Questions about Intellectual Disabilities

### What is a disability?

A disability refers to personal limitations that represent a substantial disadvantage when attempting to function in society. A disability should be considered within the context of the environment, personal factors, and the need for individualized supports.



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## What is intelligence?

Intelligence refers to a general mental capability. It involves the ability to reason, plan, solve problems, think abstractly, comprehend complex ideas, learn quickly, and learn from experience. Although not perfect, intelligence is represented by Intelligent Quotient (IQ) scores obtained from standardized tests given by a trained professional. In regard to the intellectual criterion for the diagnosis of mental retardation, mental retardation is generally thought to be present if an individual has an IQ test score of approximately 70 or below. An obtained IQ score must always be considered in light of its standard error of measurement, appropriateness, and consistency with administration guidelines. Since the standard error of measurement for most IQ tests is approximately 5, the ceiling may go up to 75. This represents a score approximately 2 standard deviations below the mean, considering the standard error of measurement. It is important to remember, however, that an IQ score is only one aspect in determining if a person has mental retardation. Significant limitations in adaptive behavior skills and evidence that the disability was present before age 18 are two additional elements that are critical in determining if a person has mental retardation.

## What are the causes of intellectual disabilities?

The causes of intellectual disabilities can be divided into biomedical, social, behavioral, and educational risk factors that interact during the life of an individual and/or across generations from parent to child. Biomedical factors are related to biologic processes, such as genetic disorders or nutrition. Social factors are related to social and family interaction, such as child stimulation and adult responsiveness. Behavioral factors are related to harmful behaviors, such as maternal substance abuse. And educational factors are related to the availability of family and educational supports that promote mental development and increases in adaptive skills. Also, factors present during one generation can influence the outcomes of the next generation. By understanding inter-generational causes, appropriate supports can be used to prevent and reverse the effects of risk factors.