

**Univerzita Karlova**  
**Filozofická fakulta**

# **Bakalářská práce**

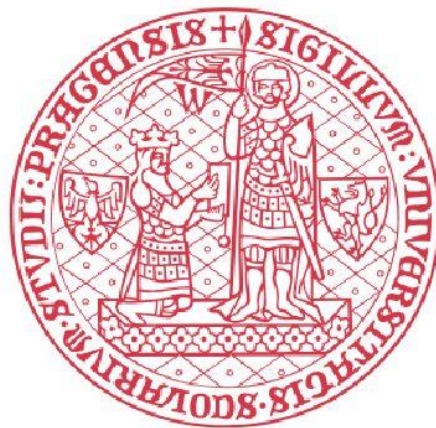


**Univerzita Karlova**

**Filozofická fakulta**

ÚSTAV ANGLICKÉHO JAZYKA A DIDAKTIKY

# **Bakalářská práce**



Kateřina Půlkrabová

## **Terminology of disability: A historical perspective**

Terminologie postižení v průběhu historie

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Vedoucí práce: Eva Maria Luef, M.A., Ph.D.

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**Prohlášení:**

Prohlašuji, že jsem bakalářskou práci vypracovala samostatně, že jsem řádně citovala všechny použité prameny a literaturu a že práce nebyla využita v rámci jiného vysokoškolského studia či k získání jiného nebo stejného titulu.

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Souhlasím se zapůjčením bakalářské práce ke studijním účelům

**Abstract and key words:**

This bachelor thesis aimed to investigate the development of disability terminology, specifically focusing on mental health issues, and its evolving frequency in newspapers from 1990 to 2019. The data was sourced from the COCA corpora, and the list of terms was based on the Disability Style Guide, established by the National Center on Disability and Journalism, with support from the categorization provided by the World Health Organization's ICD-11 browser. The primary focus was on examining the average frequency of 26 terms, primarily in three major newspapers: the New York Times, USA Today, and Washington Post. Additionally, the study observed the developmental patterns of the most frequently used words on the list, along with derogatory terms. The findings indicated an overall inclination towards an increase in average frequency, with noticeable variations in peaks and troughs across all analyzed categories. The derogatory terms demonstrated distinct fluctuations in all three newspapers, suggesting their continuous usage in journalism. The three newspapers exhibited significant differences, sharing only high peaks in the later part of the analyzed period. This area of research remains relatively underexplored, as there are limited studies focusing on the average frequency or individual usage of these words. Although the thesis confirmed the hypothesis of an increase in average frequency, it also highlights the need for more in-depth and repeated research on this topic. A deeper investigation into the variations identified in the results, as well as an examination of data from more recent years, could provide a better understanding of the nuances in mental health terminology uncovered during this analysis.

**Key words:** disability, disability terminology, mental health issues, historic overview, analysis of frequency, newspapers

## **Abstrakt a klíčová slova:**

Tato bakalářská práce měla za cíl zkoumat vývoj terminologie týkající se postižení, konkrétně se zaměřením na duševní zdravotní problémy, a vývoj její frekvence v novinách v období od roku 1990 do roku 2019. Data byla získána z korpusu COCA a seznam termínů byl založen na Disability Style Guide, který vytvořil National Center on Disability and Journalism, s podporou klasifikace poskytnuté ICD-11 prohlížečem Světové zdravotnické organizace. Hlavním zaměřením bylo zkoumat průměrnou frekvenci 26 termínů, především v třech hlavních novinách: New York Times, USA Today a Washington Post. Kromě toho byl studován vývojový vzor nejčastěji používaných slov ze seznamu a také hanlivých termínů. Výsledky naznačily celkový náklon k nárůstu průměrné frekvence s patrnými výkyvy ve všech analyzovaných kategoriích. Hanlivé termíny vykazovaly výrazné fluktuace ve všech třech novinách, což naznačuje jejich kontinuální používání v novinářství. Tři zkoumané noviny projevily významné rozdíly, sdílející pouze vyšší průměrné frekvence v pozdější části analyzovaného období. Toto výzkumné téma zůstává poměrně málo probádáno, jelikož existuje omezený počet studií zaměřených na průměrnou frekvenci nebo individuální použití těchto termínů. I když bakalářská práce potvrdila hypotézu o nárůstu průměrné frekvence, rovněž poukazuje na potřebu hlubšího a opakovaného výzkumu tohoto tématu. Důkladnější zkoumání identifikovaných odchylek ve výsledcích a zkoumání dat z nedávných let by mohlo poskytnout lepší porozumění výkyvům v terminologii duševního zdraví, které byly odhaleny během této analýzy.

**Klíčová slova:** postižení, terminologie postižení, duševní zdravotní potíže, historický přehled, analýza frekvence, novinové články

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## **List of abbreviations**

COCA	Corpus of Contemporary American English
ICF	International Classification of Functioning, Disability and Health
ICD	International Statistical Classification of Diseases and Related Health Problems
NCJD	National Center on Disability and Journalism
WHO	World Health Organisation



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## **1. Introduction**

Disabled individuals form a distinct group facing various limitations that share common characteristics, whether relating to their physical, mental, or societal aspects. According to the World Health Organization (WHO), approximately 16% of the global population has experienced or is currently experiencing some form of disability in their lives (World Health Organization: WHO, 2020). As a group, they share similar values and experiences while being very diverse depending on many factors including culture, gender, ethnicity and others (Shakespeare, 2017, pp. 2-4).

Historically, disabilities were often attributed to sins, divine powers, or supernatural forces when they did not lead to death. In pre-capitalistic societies, disabilities were not regarded as negatively. However, with the advent of capitalism, a division between disabled individuals and those without disabilities emerged, creating barriers and disparities in their treatment and opportunities within society. Eventually, society gradually began to comprehend and categorize different abnormalities experienced by humans and then the concept of disability was created. Advancements in medicine and technology have improved the quality of life for disabled individuals and their standing in society. Presently, efforts are being made to treat disabled individuals inclusively and provide them with equal opportunities. They have gained access to education, family life, employment, and a lifestyle that aligns more closely with societal norms (Albrecht et al., 2001, pp. 11-54; Shakespeare 2017 pp. 25-42).

The concept of disability remains multifaceted and continues to evolve, shaped by intricate histories across different regions and types of disabilities. Extensive research is still needed to gain a comprehensive understanding. Despite medical progress and endeavours to promote equality, discrimination, stigmatization, fear, and prejudice against disabled individuals persist. Language plays a significant role in projecting these limitations, as the way people discuss disabilities can either reinforce stereotypes or foster a more inclusive dialogue (Jensen et al., 2013).

Media, particularly newspapers, serve as a vital source of information about the world for individuals who do not directly experience certain aspects of life (Wahl et al., 2002; Kenez et al., 2015; Whitley & Wang, 2016). They can shed light on the experiences of disabled individuals but may also perpetuate stereotypes and stigmatization (Corrigan et al., 2005; Goulden et al., 2011; Chen & Lawrie, 2017; Anderson et al., 2018). Therefore, investigating how disabilities are portrayed in newspapers is essential to comprehending societal perceptions

of disability (Whitley & Berry, 2013) and see whether are still needed some improvements (Haller et al., 2006, Harpur, 2012).

This thesis aims to analyze the changes in disability-related terminology over the past thirty years, focusing on mental health issues and the frequency of their appearance in American newspapers. It aims to investigate whether disability terminology is discussed more and if the taboo surrounding it is diminishing (Marks, 1997; Choudhry et al., 2016). Additionally, the study seeks to identify any differences in disability-related terms across three prominent newspapers (New York Times, USA Today, and Washington Post) from 1990 to 2019. To achieve this, the research uses a list of terminology based on a guide provided by the National Center on Disability and Journalism created for American journalists. The terms are associated with mental health issues based on the categorization set forth in the ICD-11 by World Health Organisation. Data for the analysis is collected from the Corpus of Contemporary American English.

In addition to this introduction, the thesis includes a Theoretical part, Methodology, Results, General Discussion, Conclusion, References, Résumé, and Appendix. The Theoretical part delves deeper into the concept of disability, discussing the issues surrounding disability terminology, and exploring the historical background of disability and mental health issues. Furthermore, it introduces various models and frameworks employed in discussions about disability, along with insights from previous research on related topics. Lastly, it presents the list of words used for this bachelor thesis. The subsequent chapter outlines the methodology employed in the practical work and analysis of the chosen words. The Results section presents the findings of the analysis, followed by the General Discussion chapter, which compares and concludes all results in relation to the working hypotheses and suggests future research avenues. The Conclusion offers a summary of the results and their potential implications. Finally, the thesis includes a list of references, a résumé in Czech, and an appendix containing the complete list of terms and the data utilized.

## **2. Theoretical background**

### **2.1 Introducing disability**

Disability is a very diverse concept that poses challenges in establishing a universally applicable definition across different cultures. Various studies employ differing definitions. Grönvik (2009) proposes three distinct approaches to defining disability. The first, known as the clinical definition, centers on bodily impairments and limitations, typically identified by medical professionals. This definition is often perceived as a spectrum or continuum. The second is the legal or administrative definition that designates individuals as disabled based on the criteria outlined in the law, which then determines eligibility for benefits. This binary approach seeks to accommodate a large number of people. The third category involves a subjective perspective, where individuals define themselves as disabled. Albrecht et al. (2001, pp. 97-100) acknowledge the complexities of the disability concept, noting the difficulty in crafting a definition that encompasses all variations of disability. The historical diversity of attempts to define disability has contributed to the underresearched and confusing landscape of disability studies, and it also accounts for the common misuse of certain disability terms, often intertwined with the ambiguity surrounding the definition of health.

The Americans with Disabilities Act of 1990 (ADA)<sup>1</sup> provides its definition of disability as "a physical or mental impairment that substantially limits one or more major life activities." The act further clarifies that this impairment can either be recorded or being regarded as having such an impairment. Major life activities encompass functions such as sight, hearing, eating, and sleeping, among others. The impairment must be enduring rather than temporary. Additionally, the impairment must be of a long-term nature, not merely temporary. Furthermore, the ADA recognizes that even if the impairment is alleviated or lessened through assistive devices, it still qualifies as a disability.

For this thesis and subsequent analysis, the focus will center on the definitions proposed by the National Center on Disability and Journalism (NCDJ) and categorizations by the World Health Organization (WHO). According to the NCDJ, disability entails various limitations that can impact people's lives in terms of mobility, learning, or behaviour (Disability Language Style Guide, 2021). Similarly, the WHO characterizes disability as a condition influenced by

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<sup>1</sup> ADA: *Americans With Disabilities Act of 1990*, Pub. L. No. 101-336, §§ 12102, 104 Stat. 328 (1990) <https://www.ada.gov/law-and-regs/ada/>

environmental factors, interpersonal interactions, genetic predispositions, viral infections, or unfortunate life experiences, such as accidents (World Health Organization, 2020).

### **2. 1. 1 Different kinds of disability**

Disability encompasses a wide range of categories, and to specify the variations in health conditions, the World Health Organization and World Bank (2011) explain that “can be visible or invisible, temporary or long-term, static, episodic, or degenerating, and either painful or inconsequential.” Disability is best viewed as a spectrum, as it varies among individuals, and one person may experience multiple types of disabilities (Dondainas, 2021). Certain studies differentiate disabilities based on whether they are acquired at birth, developed during life, or caused by accidents. Conditions can also be episodic or degenerative, and there is a category closely associated with age-related conditions (Shakespeare, 2017, pp. 3-4).

For the purpose of this thesis, the classification established by the World Health Organization (WHO) will be utilized. WHO, as an international organization comprising experts from various countries, has developed two browsers - the International Classification of Functioning, Disability and Health (ICF) and the International Statistical Classification of Diseases and Related Health Problems (ICD) - to facilitate the categorization of disabilities, diagnoses, and related terminologies. The WHO's division in ICD and ICF browsers is based on the interaction of internal and external factors, incorporating a biopsychosocial model that considers biological, individual, and social factors. Disability is measured based on its level of dysfunction in the categories of impairments, participation, restriction, and activity limitations. It is essential to emphasize that ICF and ICD are intended for all individuals and were not designed solely for labelling or isolating disabled people (Üstün et al., 2003; World Health Organisation, 2003). The ICF was introduced in 2001 and gained endorsement from 191 member states as the standard framework for assessing health status and the extent of disability (World Health Organisation, n.d., sec. International Classification of Functioning, Disability and Health (ICF)). Furthermore, the most recent version of the ICD-11, which was exclusively used to categorize terms in the methodology of this thesis, was introduced in 2019 and officially adopted at the beginning of 2021 and it classifies disability terminology and diagnoses into 28 different categories (World Health Organisation, n.d., sec. International Statistical Classification of Diseases and Related Health Problems (ICD)).

### **2. 1. 2 Mental, behavioural or neurodevelopmental disorders**

The practical segment of this thesis is centered on terminology related to mental health issues. In the ICD-11, this category is referred to as "mental, behavioural, or

neurodevelopmental disorders," encompassing terms that describe conditions affecting an individual's psychological state, significantly hindering their functioning, behaviour, cognition, or emotions. Such conditions can impact an individual's interactions with their environment and their relationships with others (World Health Organization, 2022, sec. 06 Mental, behavioural, or neurodevelopmental disorders). The perception of mental health issues varies significantly due to the common "invisibility" of the disability and is shaped by cultural influences. For instance, some individuals still view mental illness as a way in which divine creatures attempt to communicate (Choudhry et al., 2016).

Moreover, Galderisi et al. propose three components of mental health: emotional well-being, encompassing happiness, satisfaction, and interest in life; psychological well-being, comprising positive self-regard, responsibility management, and healthy relationships; and social well-being, involving positive societal functioning, contribution to society, and a sense of belonging (2017). However, the validity of these aspects has been questioned leading to alternative classifications. One such categorization includes three domains: self-realization, a sense of mastery over the environment, and a sense of autonomy, highlighting the significance of individual experiences and common sense in defining mental health disorders (Overton & Medina, 2008).

### **2. 1. 3 History of disability**

To present the concept of disability better here is a brief overview of the history of disability. Disability has been marginalized in virtually all cultures, often eliciting reactions of either revulsion or pity (Sabatello & Schulze, 2014). Shakespeare (2017, pp 25-42) notes that for instance, in Sparta, children with disabilities were left to die, and similar practices were observed in other cultures, as "deformed children" were deemed unable to contribute economically to society or they were believed to be a result of divine wrath. Some traditional practices, such as drowning disabled children in certain tribes, still persist. Conversely, in other cultures during the same era, certain types of disabilities were celebrated and considered sacred.

Disabilities have also been depicted in myths and stories. Historical accounts depict leaders from different empires who exhibited signs of disability. Despite these instances, individuals with disabilities were predominantly viewed negatively by society. For instance, in medieval times, disability was often associated with the devil or demon. Christians abstained from killing children with disabilities but chose not to take responsibility for their care and upbringing.

During pre-modern times, a significant number of disabled individuals did not survive to adulthood due to the absence of effective healthcare and the prevalence of high mortality rates. During the preindustrial, pre-capitalist times, society appeared more inclusive compared to later periods. Learning difficulties were not major concerns, as most individuals engaged in farming and had limited access to education. Certain jobs were performed while sitting, making them accessible to individuals with mobility issues. Nevertheless, with the shift to industrialization and the demand for physically fit workers, disabled individuals were marginalized and excluded from certain jobs and educational opportunities. As a result, the burden on the family members who had previously provided care increased significantly, leading to a situation where disabled individuals were left without adequate support or assistance. Some disabled individuals turned to freak shows as a means of making a living, which, while replaced by contemporary entertainment, still reflects society's fascination with the unusual.

In the absence of proper support, many disabled individuals resorted to begging for survival. In the United States, there were regulations in place to exclude individuals with disabilities from public spaces, as they were deemed potentially repulsive to others. While veterans from the Civil War received recognition and respect, the general disabled population faced dismissal, and it was commonly assumed that they were feigning their disability. Eventually, laws were enacted to provide food for those in need, and institutions were established to care for disabled individuals. These institutions, though organized differently across countries, became prevalent in the 20th century. However, these institutions often treated the disabled as children and segregated them from society. Consequently, many towns lacked accessibility for disabled individuals due to their exclusion during the town planning process.

In the early 20th century, eugenics became prevalent, promoting selective breeding for the "well-born" while discouraging or prohibiting those considered to have unfavourable genetic traits, including learning difficulties or mental health issues. The Nazi regime further propagated the idea of eliminating people with disabilities through forced sterilization and, in extreme cases, euthanasia. Infants were subjected to immediate death after birth, while adults were exposed to harmful substances as a means of "mercy killing", all under the pretext of freeing society from individuals with disabilities. The killing stopped after the war but the eugenics concept persisted a few years after.

Following World War II, Britain faced a significant number of injured veterans, prompting the country to adopt a more structured approach. Despite political attempts to

establish quotas for disabled individuals in the workforce, these regulations were largely disregarded. In the aftermath of the war, England prioritized addressing other pressing issues.

Accessibility improvements began gaining attention in the 1960s and 1970s. Calls for inclusion, rather than segregation, arose in the late 1970s, and in 1981, the Education Act marked the beginning of inclusion for people with disabilities (Albrecht et al., 2001, pp. 11-54; Shakespeare 2017 pp. 25-42). In 1990, The Americans with Disabilities Act (ADA) was enacted to combat discrimination and address the issues of segregation and isolation faced by disabled individuals. It acknowledged that societal barriers were more significant obstacles than impairments and aimed to protect disabled individuals' rights in various areas, including employment, healthcare, housing, and government programs (Pfeiffer, 1994; Scotch, 2009; Blanck, 2019). Digital spaces have played a pivotal role in empowering disabled individuals to advocate for their rights and change societal perceptions. Before the widespread use of digital media, advocacy organizations existed, but their impact was limited. The emergence of digital media significantly expanded the reach of these organizations, granting them greater visibility and amplifying their influence (Scotch, 2009; Sabatello & Schulze, 2013; Trevisan, 2017). Consequently, even individuals with disabilities who were previously marginalized gained a platform to voice their perspectives and advocate for their rights. However, it is essential to acknowledge that this progress is still in its nascent stage. While digital spaces have the potential to empower marginalized groups, there remains a digital divide, where accessibility is constrained by financial constraints and other barriers, preventing universal participation. Currently, digital media primarily serves as a powerful tool to advance the fight for equal rights and improved treatment for individuals with disabilities (Gelfgren et al., 2021).

Regarding mental health issues, individuals were initially considered weak, and mental health was attributed solely to the strength of the mind (Overton & Medina, 2008). In cases of mental illness, explanations often resorted to supernatural forces, given the lack of understanding of unseen phenomena. After the period of people burning anyone publicly suspicious eventually, institutions were established to house individuals with mental health issues if families were unwilling or unable to care for them, with the aim of protecting society (Rössler, 2016). During the Enlightenment period, some doctors argued that improving the environment could cure mental health issues, but institutionalization remained the norm. It was only later that laws prohibited the use of chains and manacles on individuals with mental illnesses (Purtle et al., 2020). Advancements in anti-psychotic drugs in the 1950s led to improved treatment, and de-institutionalization efforts gained momentum. In comparison



between the 1950s and 1990s, fewer people would be scared of people with mental health illnesses and there are more signs of inclusion (Phelan et al., 2000).

The history of disabled people and mental health issues is an ongoing field of research, with many periods lacking concrete evidence. Throughout various historical epochs, beliefs and attitudes towards disability and mental health have evolved and continue to shape societal perceptions today (Albrecht et al., 2001, pp. 11-54; Shakespeare, 2017 pp. 25-42).

## **2. 1. 4 Evolvement of disability terminology**

The history of disability terminology is both rich and relatively unexplored, much like the development of the disability concept itself. The notion of encompassing all types of disabilities under a single term is a relatively recent development. Prior to the 1900s, disabilities were perceived individually and distinctly. Presently, there are many words to describe disability, but no universally accepted list of correct terms. With contemporary knowledge and definitions, it becomes evident that nuances in meanings were not always considered in the past. The mistreatment and marginalization faced by the disabled community influenced the terminology employed by able-bodied individuals. In the digital era, a shift began, challenging derogatory and oversimplified disability terminology, but this process remains ongoing, leading to debates on its correctness ("What Is in a Word? The Evolution of Disability Language," 2005).

The evolution of various words and their meanings can be observed through several examples. For instance, in the 17th century, "lame" described a person with a physical impairment, but over time, it acquired a negative connotation as it came to signify weakness and became an insult. Similarly, "cripple" was once commonly used but now carries a much more negative association. In 1910, "moron" was accepted by the American association to describe people with weaker minds, but later it evolved into an insult applied broadly. "Retarded" originally meant "slow" and was used to describe individuals with lower intelligence in comparison to non-disabled people. "Deaf and dumb" referred to those who could not hear or speak, but nowadays, especially the word "dumb," is linked to people of low intelligence (Cobbinah, 2013). "Handicap," in the context of disability, emerged around 1915 and later became associated with charity, which led to its disfavour among disability activists (Shakespeare, 2017, p. 4).

Th term "disability," currently the most widely used, is still viewed as problematic by some. The prefix "dis" may create a perceived barrier between individuals with and without

abilities, implying that any deviation from the norm is inherently wrong (Linton, 1998). "Differently abled" attempts to emphasize that everyone possesses strengths and weaknesses, but its usage should be cautious and not generalized similarly to terms for other groups, such as racial minorities (Disability Language Style Guide, 2021).

## **2. 2 Portrayal of disability in media**

The depiction of disability exhibits variations influenced by genre, occasion, and cultural context; however, specific common characteristics have been identified within these trends. Conducting research on the portrayal of disabled individuals in media is of utmost importance due to its profound impact on public understanding and perception, as well as its continuous influence on societal perspectives, considering that media content evolves with the changing times (Murphy et al., 2013). People often form their understanding based on media representation and subsequently disseminate these perspectives, thereby perpetuating the shaping of societal attitudes towards disability (Jensen et al., 2013). In certain cases, individuals even rely on television as their primary source of information, assuming its accuracy, despite the fact that characters portrayed on screen may be crafted to emphasize negative characteristics for the sake of storylines and dramatic effect (Overton & Medina, 2008).

The advent of online platforms has not only empowered disabled individuals to express their social needs and advocate for their rights but has also fostered increased dialogues about disability, consequently contributing to a more widespread use of disability-related language (Sabatello & Schulze, 2013). However, despite the progress made in challenging stereotypical portrayals, people with disabilities themselves often assert that media representations of their community still tend to perpetuate negative or offensive stereotypes. For example, newspapers may depict disabled individuals as brave, inadvertently raising expectations that could result in those who do not meet such expectations being unfairly viewed as bitter or ungrateful (Ellis & Goggin, 2015a, p. 63). As such, scrutinizing disability portrayals in media becomes essential for promoting more accurate and inclusive representations.

### **2. 2. 1 Models that were identified in newspapers and other similar media**

Disability advocates and rights activists have developed various theories concerning models of disability. These models provide a comprehensive overview of disability representation in media and help in understanding this concept. The prevailing models commonly employed in the study of disability are the sociological and medical, although it is important to acknowledge that additional models have been recognized. Clogston delineated

five disability models that served as the basis for various investigations, subsequently expanded by Haller to include two further models. These comprehensive frameworks have laid the groundwork for extensive research in the field (Zhang & Haller, 2013; Goethals et al., 2020;).

The first model is the medical model, characterizing disability as an illness, wherein the individual is perceived as dependent on healthcare providers. This model often elicits feelings of tragedy and empathy, reducing the disabled person to a mere patient. It focuses on what is “wrong” with a person in terms of their disability not mentioning anything beyond it. The second model is the social pathology or economic model, portraying people with disabilities as burdens to the economic system or disadvantaged individuals within it. Over time, the social model gained prominence, as it recognized the constraints imposed on the disabled community by their environment. In contemporary discussions, some members of the disabled community view the social model as more influential in shaping their experiences than the condition of their body or mind. The social model emphasizes the disempowering use of language, which allows non-disabled individuals to exert control, dominance, or discrimination. However, it also offers a means of empowerment through self-advocacy and the development of a disabled identity ("What Is in a Word? The Evolution of Disability Language," 2005). The third model is the supercrip model, depicting disabled individuals as superheroes while performing ordinary tasks, often accompanied by being labelled as "special" or "inspirational." Despite appearing positive, this model perpetuates a distinction between disabled and non-disabled individuals. The fourth model is the minority/civil rights model, which views people with disabilities as members of society with legitimate rights, continually striving for political change. The fifth model is the cultural pluralism model, viewing disabled individuals as equal members of society with disability as one aspect of their identity (Nelson, 1994 pp. 47-48). The sixth model, introduced by Haller, is the business model, presenting disabled people as a societal cost. The last model, the consumer model, portrays disabled people and their needs as potential profits for society (Haller, 2010; Zhang & Haller, 2013; Goethals et al., 2020).

In comparison, Retief and Letšosa describe a total of nine models for understanding disability in newspapers and society. The religious model views disability as a blessing, replaced by the medical model in the mid-nineteenth century, which regards disability as a problem and tragedy. The social model emerged around the 1960s, viewing disability as a sociological phenomenon. The identity model, closely related to the social model, considers disability a positive identity. The human rights model acknowledges disability as both a sociological phenomenon and the challenges faced by disabled individuals. The cultural model

takes into account various factors beyond the sociological and medical aspects of disability. The economic model sees disability as a challenge to humanity and economics. The charity model appeals for pity from the able-bodied community. Lastly, the limits model defines disability based on its limitations (2018).

### **2. 2. 2 Stigmatization**

Disability etiquette is an essential aspect of the history of disability terminology aimed at improving language related to disability. Utilizing appropriate language can contribute to reducing the distress experienced by disabled individuals arising from the way they are addressed or spoken to (Shackelford, 2014). Conversely, stigmatization can have adverse effects, acting as a “social process that is characterized by exclusion, rejection, blame and devaluation, resulting from experience or reasonable anticipation of adverse social judgement about a person or group identified with that particular health condition,”(Scambler, 2009).

Stigma can create a barrier between disabled and non-disabled individuals, leading to negative treatment and discrimination (Corrigan et al., 2005; Whitley & Wang, 2016; Lyon & Mortimer-Jones, 2020). It can be categorized into social identity, self-stigma, and structural stigma. Social identity is shaped by societal views and judgments when individuals do not fit well into societal norms, leading to self-doubt and identity questioning. Self-stigma involves self-judgment, wherein individuals may perceive themselves as not conforming to societal expectations. Structural stigma, similar to social identity, delves deeper into cultural aspects and restrictions that affect individuals' experiences rather than focusing solely on individual identity. Stereotypes often arise when there are cues of perceived differences, leading to categorization for better understanding. While categorization can be helpful, outdated and erroneous stereotypes can be limiting and misleading, leading people to form opinions based on misconceptions. Negative stereotypes can lead to prejudice, wherein individuals automatically assume that everyone adheres to the stereotypes accepted by society, often resulting in negative behaviours, such as disgust or avoidance. Discrimination, the last stage, is a reaction to emotions fueled by prejudice. For instance, social distance can be connected with fear (Overton & Medina, 2008).

Stigma can also result in inadequate access to physical and mental healthcare, social isolation, low self-esteem, delayed access to services, reduced life expectancy, limited opportunities for higher education, employment and housing, increased risk of involvement with the criminal justice system, victimization, poverty, and homelessness (Overton & Medina,

2008; Whitley & Berry, 2013; Rhydderch et al., 2016; Chen & Lawrie, 2017). While these outcomes have multifaceted causes, stigmatization and unfavourable portrayals can play a role (Murphy et al., 2013; Whitley & Wang, 2016; McGinty et al., 2016; Anderson et al., 2018).

Notably, terminology related to mental, behavioural, and neurodevelopmental disorders is one of the most stigmatized groups among disabilities. The stigmatization of people with mental health issues has a long history influenced by various factors. Fear of the unknown and deviations from societal norms can lead to discomfort and avoidance. Additionally, the perception that mental health issues are controllable and preventable contributes to stigmatization (Ahmedani, 2011). Psychotic disorders, in particular, tend to be more stigmatized (Overton & Medina, 2008).

Studies have shown that reading articles in newspapers about mental health issues can discourage individuals from seeking medical help and may foster a negative view of their diagnosis (Bowen & Lovell, 2019). Exposure to such articles led individuals without personal experience of mental health issues to believe more in the likelihood of suicide rather than recovery (Rhydderch et al., 2016). After reading articles linking disabilities to mass shootings, people automatically associated mental illness with such incidents, leading to generalized fear and the assumption that all individuals with mental illness might pose a danger (Whitley & Wang, 2016).

### **2. 2. 3 Current preferences in talking about disability**

One of the most recommended strategies for discussing disability or communicating with a disabled person is to inquire about their preferences. While it may not always be feasible to ascertain such information, different types of disabilities often have their own preferred language, whether it involves people-first or identity-first language or any other approach that fosters a more inclusive conversation or portrayal of disabled individuals as part of the societal in-group rather than the out-group. When describing individuals, guidelines advise against focusing solely on their disabilities unless it is explicitly relevant to the context, suggesting the use of more specific terms related to the person's condition (Siebers, 2017). Numerous guidelines share a common principle, emphasizing that a person's disability should not define their entire identity (Disability Language Style Guide, 2021).

It is crucial to avoid guidelines that primarily highlight derogatory terms, as this could unintentionally reinforce the prominence of such words. Instead, creating guidelines that promote positive language is encouraged, as it can be more constructive for individuals who

may be unsure about how to communicate with or refer to disabled people ("Understanding Learning Disability Terminology," n.d.).

Furthermore, when examining individual terms, it is essential to recognize that some may be oversimplified, and although they may appear synonymous, they carry subtle distinctions in meaning. For instance, "impairment" refers to a condition affecting one's body, whereas "disability" encompasses an individual's overall experience, which can extend beyond the physical impairment to encompass the impact of the environment. For instance, the inability to move one's body is an impairment, but not having access to a building due to stairs or other obstacles can result in disability (Coleman-Fountain & McLaughlin, 2012). Albrecht et al. (2001 p. 11) argue that "impairment" primarily refers to a biological condition, while "disability" is more closely connected to the social context. Additionally, Obosi suggests that the term "user" in conjunction with "wheelchair" or "personal assistant" implies "someone who takes from others and gives nothing in return." Moreover, the term "people with learning disabilities" implies an inability to improve, which is not an accurate representation, as individuals with learning disabilities can indeed progress and develop (2010).<sup>2</sup>

#### **2. 2. 4 People-first language and Identity first language**

There are two main approaches to talking about disability – people-first language and identity-first language. People-first language is recommended because it emphasizes that individuals are first and foremost people, and their disabilities do not define them as being lesser or greater in value. Thus, it can be said that person-first language advocates for equality (Jensen et al., 2013). However, even this well-intentioned approach can inadvertently perpetuate stigmatization. Despite its universal intent, person-first language is often disproportionately applied to people with disabilities, further segregating and categorizing them. Moreover, this trend tends to be more prevalent in association with stigmatized disabilities, such as autism or mental health issues. To address this issue, a straightforward solution is to use language, mostly phrases rather than concrete terminology, consistently and uniformly for all individuals, avoiding favouritism towards one group over another and refraining from language changes influenced by biases. This includes mentioning disability only if it is necessary for the context

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<sup>2</sup> Other words that may appear but are preferred to be avoided are a victim, mental retardation, confined to a wheelchair, suffers from, cripple and others. Phrases such as physically challenged, physically different or physically inconvenienced contributes too strongly to the denial of existing realities. These words may emphasise dependency or pity and contribute to stereotypes of disabled people (Obosi, 2010).

or referring to everyone with people first approach not only people with disabilities (Gernsbacher, 2017; Crocker & Smith, 2019).

On the other hand, research has demonstrated that identifying with one's disability can significantly impact well-being, self-assurance, and overall quality of life. Consequently, certain disability groups prefer identity-first language, as their disability is a crucial aspect of their identity (Brown, 2011). Nonetheless, adopting this perspective may be seen as distancing disabled individuals from their personal side and elevating their disability above all other aspects of their identity (Flink, 2019). In conclusion, both approaches carry complexities. Certain groups for example Deaf community chose to use identity-first language, however, other disability communities consider people-first language being “a step in the right direction,” (Gernsbacher, 2017; Crocker & Smith, 2019).

### **2. 2. 5 Mental health issues in newspapers**

Limited research has been conducted on the terminology surrounding disability and mental health issues in specific genres, despite the recognized significance of disability as a crucial topic of discussion (Ellis & Goggin, 2015b). Among various genres, newspapers have received the most extensive research attention.

Considering the limited research available on the evolution of frequency in mental health-related terminology, this thesis will incorporate studies conducted in other English-speaking countries. Recent studies showed that mental health issues make up a fifth of all articles concerning health in UK newspapers (Chen & Lawrie, 2017). Pieces of research have also shown a rise in articles related to mental health issues in British newspapers between 1992 and 2008, and a subsequent increase between 2008 and 2016, continuing up to the year 2019 reflecting a growing interest in this subject (Goulden et al., 2011; Murphy et al., 2013; Rhydderch et al., 2016; Chen & Lawrie, 2017; Anderson et al., 2018; Hildersley et al., 2020). This was supported by another study done between the years 2004-2005 and 2010-2011 which however focused on disability terminology and not specifically only mental health issues. Notably, it showed a decline in terms that have offensive meanings (Briant et al., 2013). An increase in coverage was also observed in Canadian newspapers between years 2005 and 2015 and social media platforms, such as Twitter, taking into account tweets including news about people with disabilities, from 2005 to 2017 (Whitley & Wang, 2016; Bowen & Lovell, 2019). All of these observed increases in frequency are linked to articles rather than individual words.

In addition to investigating frequency, the varying use of terms has been explored when referring to disabled individuals and able-bodied people in articles. The articles often portray able-bodied individuals engaging in regular exercise and having personal fitness trainers, while individuals with disabilities are depicted as undergoing rehabilitation therapy or being assisted by physiotherapists. Notably, there are distinctions in the way certain activities are presented; for instance, children with disabilities may receive music therapy instead of conventional music lessons, and similarly, swimming lessons may be referred to as hydrotherapy ("What Is in a Word? The Evolution of Disability Language," 2005).

Conducting research on the language used when discussing mental health issues is crucial due to the significant influence of journalism on how society perceives health-related matters, prompting journalists to pay careful attention to their language when reporting on disability, as highlighted by Fellows et al. (2019). Discussions about individuals with mental health issues often involve the perpetuation of stereotypes, which commonly portray them as unpredictable, incurable, or socially strange. Moreover, they are depicted as failures, socially withdrawn, incompetent, untrustworthy, and outcasts (Overton & Medina, 2008; Goulden et al., 2011; Chen & Lawrie, 2017). The use of such stereotypes can significantly shape the public's perception of mental health illnesses. When the media consistently associates mental health issues with danger, it inadvertently fosters an association between disability and danger in the public's mind (Whitley & Berry, 2013).

The perpetuation of disability-related stereotypes can be attributed, in part, to the framing techniques employed by journalists. Although frames are used to facilitate public understanding, they may inadvertently lead to harmful portrayals of the topic (Kenez et al., 2015; McGinty et al., 2016). Another contributing factor to the negative depiction of disability by journalists could be their reliance on sources considered more credible, which often exclude perspectives from disabled individuals themselves (Fellows et al., 2019). Additionally, the use of negative language can be influenced by readers' preferences, as dramatic stories tend to attract more attention and incentivize newspapers to focus on such topics to boost profitability (Murphy et al., 2013; Rössler, 2016; Bowen & Lovell, 2019).

A persistent concern lies in the negative portrayal since the 1960s, contributing to the stigmatization of mental health conditions. The portrayal of mental health in newspapers often focuses on aspects of violence, criminality, or aggression, perpetuating misleading and inaccurate connections between mental health issues and these negative traits (Paterson, 2006; Goulden et al., 2011; Whitley & Berry, 2013; Whitley & Wang, 2016; Anderson et al., 2018).



Historically, the portrayal of mental health issues was predominantly distorted, often confined to evening dramas depicting individuals unable to articulate coherent sentences, drooling, or laughing without reason. These depictions instilled fear in people as they perceived them to be closely aligned with reality. A study conducted in 1996 revealed that half of the articles about mental health issues in British newspapers associated them negatively with criminality, violence, and social disorder (Whitley & Berry, 2013). Similar trends were observed in American newspapers during the 1980s and 1990s, as reported by McGinty et al. (2016), who noted that even in 1999, criminality remained the most prevalent theme in mental health issues coverage.

Regarding the issue of negative language in Canadian newspapers, no improvement has been observed, as reported by Rhydderch et al. (2016) and Bowen & Lovell (2019). Between the years 2005 and 2010, approximately forty percent of mentions of mental illness were still associated with crime and violence, while less than 20% addressed recovery, treatment, or expert perspectives (Whitley & Berry, 2013; Whitley & Wang, 2016).

Various efforts have been made to address and combat stigma, such as the initiatives *Defeat Depression* and *Changing Minds* (Goulden et al., 2011). However, according to Rhydderch et al. (2016), no noticeable improvement in UK newspapers was observed between the years 1989 and 2005. Similarly, a study conducted between 1994 and 2003 also revealed no significant change in attitudes towards mental health issues (Goulden et al., 2011). Another long-term campaign, known as *Time to Change*, focused on enhancing language use in British newspapers and was active from 2007 to 2021 (Time to Change | Mind, n.d.). Several research studies have shown that the impact of this campaign was not substantial. Anderson et al. (2018) indicated that during the first phase of Time to Change (2008-2011), there was minimal change, and newspapers continued to promote stereotypes. However, towards the end of the second phase, between 2014 and 2016, a decline in stigmatizing articles was observed, suggesting a shift towards a more positive depiction of language. This may be attributed to an increased public demand for information about mental health issues. Another study by Thornicroft et al. reported an increase in anti-stigmatizing articles between 2008 and 2011; however, this also might be attributed to a general rise in articles discussing mental health issues, as stigmatizing articles did not decrease. Furthermore, more individuals with lived experiences were quoted in such articles, and there was an increase in articles devoted to explaining and educating about mental health issues (2013; Goulden et al., 2011).

According to Corrigan et al. and their 2005 research on American newspapers, nearly forty percent of articles related to a disability focused on themes of dangerousness and violence. The majority of these articles portrayed mental illness in a negative light and did not address the topic of recovery at all. However, the research did find a positive aspect in that there were not many articles that included self-blame, which is often associated with mental health issues. Fellows et al. (2019) expressed doubt about the extent to which guidelines are followed by journalists, as stigma, simplification, and generalization continue to be present in American newspapers. Mental health issues are still depicted negatively to attract readers' attention. This explains why articles about mental health are often closely associated with violence and danger. The intertwining of symptoms and disabilities is also common among journalists, even when there is no direct connection, such as linking depression and suicide (Fellows et al., 2019).

Analyzing specific terms, such as schizophrenia and personality disorder, they are frequently linked to emotions like fear and violence (Goulden et al., 2011; Bowen & Lovell, 2019). In 2014, ADHD and anxiety disorder were found to be the disorders most positively portrayed and associated with anti-stigmatizing attitudes, particularly in terms of recovery, among all the researched disorders. This finding is consistent with research conducted a few years prior (Goulden et al., 2011). In terms of frequency, Chen & Lawrie's research (2017) found that schizophrenic disorders constituted the minority of results, while Murphy et al. (2013) stated they were among the most frequently discussed disorders. Depression tends to receive more sympathetic representation in Canadian newspapers than schizophrenia. Over time, the word depression showed improvement in its portrayal between 1991 and 1997 in British newspapers, according to Goulden et al. (2011). However, personality disorders, schizophrenia, OCD, PTSD, and eating disorders are still mostly portrayed negatively (Rhydderch et al., 2016).

In conclusion, while the number of articles addressing mental health issues has increased over time, the overall negative portrayal of mental health disabilities persists in newspaper coverage (Murphy et al., 2013). Addressing this issue requires more mindful and unbiased language use, as well as responsible journalism to combat stigmatization and foster a more accurate understanding of mental health issues in society (Fellows et al., 2019).

### **2.3 List of words**

For the analysis, this thesis has selected a specific list of words derived from the Disability Language Style Guide, which is available on the website of the National Center on

Disability and Journalism (NCDJ). The NCDJ is an organization based in the United States that focuses on American English. The organization's work was initiated based on the observation that disability is either insufficiently covered or covered in a detrimental manner by the media. Consequently, they developed a guide specifically for journalists who may find themselves writing about disability-related topics. In addition to the aforementioned guide, the NCDJ provides assistance in conducting interviews or engaging with individuals with disabilities in a respectful and appropriate manner. They also offer numerous other resources pertaining to disability. The NCDJ collaborates with several universities and their journalism faculties (About NCDJ | National Center on Disability and Journalism, n.d), and in 2020, they established a partnership with The New York Times (NCDJ and the New York Times Renew Disability Reporting Fellowship | National Center on Disability and Journalism, n.d.). The selection of this particular list was based on its journalistic focus, as it is one of the few resources specifically tailored to journalism. Furthermore, the list provides background information for each term, including historical context, usage recommendations, and information extracted from The Associated Press Stylebook as can be seen in *Figure 1* which shows all information that NCDJ provides about autism in Disability Language Style Guide. The Associated Press Stylebook is a guide for journalists that offers pieces of advice on language and terminology (Fellows et al., 2019). Compared to other available lists, it is considerably more extensive, and the most recent update was conducted in the summer of 2021. The NCDJ incorporates the perspectives of disabled individuals and collaborates with an advisory board consisting of respected academics in the field of disability studies, ensuring that their website is regarded as an objective source of information (Disability Language Style Guide, 2021). However, it should be acknowledged that there not all entries include citations or explicit sources. While the NCDJ has established partnerships with journalism universities, it is difficult to measure its overall influence on journalism, and there is limited research on the extent to which this guide is followed by professionals in the field.

## Autism/autism spectrum disorder/autistic

**Background:** Autism spectrum disorder is a group of complex disorders related to brain development, according to the National Institute of Mental Health. Common symptoms of autism spectrum disorder include difficulties in communication, impaired social interaction and restricted and repetitive patterns of behavior, interests or activities, according to the Institute. However, symptoms vary across the spectrum. Many experts classify autism as a developmental disability.

Prior to 2013, subtypes of autism, such as Asperger's syndrome, autism disorder and childhood disintegrative disorder, were classified as distinct disorders. The fifth edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders consolidates all autism disorders under the larger autism spectrum disorder diagnosis.

Opinions vary on how to refer to someone with autism. Some people with autism prefer being referred to as "autistic" or an "autistic person." Others object to using autistic as an adjective. [The Autism Self Advocacy Network details this debate.](#)

**NCDJ Recommendation:** Refer to someone as having autistic spectrum disorder only if the information is relevant to the story and if you are confident there is a medical diagnosis. Ask individuals how they prefer to be described. Many prefer to be described as "autistic," while others prefer "an autistic person" or a "person with autism."

**AP style:** The stylebook states that it's acceptable to use the word "autism" as "an umbrella term for a group of developmental disorders." It also says it is acceptable to use the word autism in stories. It does not address the use of autistic as an adjective.

*Additional material: "[I Don't Have Autism, I'm Autistic](#)," Lenny Letter*

*Figure 1 - example of information provided about autism by NCDJ in Disability Language Style Guide.*

### 2. 3. 1 Distinction of disability terms in Disability Language Style Guide

The NCDJ guide, as it currently stands, does not organize its content into distinct groups but presents a simple list of words. To differentiate words that are related to mental health issues which was essential for the following analysis this thesis used browser ICD-11 created by World Health Organisation (WHO). In *Figure 2* bellow can be seen information which ICD-11 provided for the term autism but it should be noted that no additional information from the browser, aside from the categorization, has been taken into account.

**ICD-11 for Mortality and Morbidity Statistics** (Version : 02/2022) EN

Search  [ Advanced Search ]

**6A02 Autism spectrum disorder**

**Parent**  
Neurodevelopmental disorders Show all ancestors

**Description**  
Autism spectrum disorder is characterised by persistent deficits in the ability to initiate and to sustain reciprocal social interaction and social communication, and by a range of restricted, repetitive, and inflexible patterns of behaviour, interests or activities that are clearly atypical or excessive for the individual's age and sociocultural context. The onset of the disorder occurs during the developmental period, typically in early childhood, but symptoms may not become fully manifest until later, when social demands exceed limited capacities. Deficits are sufficiently severe to cause impairment in personal, family, social, educational, occupational or other important areas of functioning and are usually a pervasive feature of the individual's functioning observable in all settings, although they may vary according to social, educational, or other context. Individuals along the spectrum exhibit a full range of intellectual functioning and language abilities.

**Inclusions**

- Autistic disorder

**Exclusions**

- Rett syndrome (LD90.4)

Figure 2 - Results of searching term autism in ICD-11

The NCJD guide contains a compilation of 220 terms, with 80 words not identified in the ICD-11 browser. Some of these terms were considered too broad or loosely connected to disability, lacking specific definitions within the ICD-11, such as "handicap," "able-bodied," "disability," or "impairment." Additionally, phrases like "the victim of" or "afflicted with" were occasionally used in disability-related contexts but were not categorized by the ICD-11.

The remaining terms were grouped into nine categories based on their relevance to specific types of disabilities. These categories encompassed disabilities related to the auditory system, nervous system, injuries, visual system, developmental anomalies, metabolic diseases, and words falling within the extension codes category, such as "wheelchair."

Within the 220 terms, 60 were related to mental, behavioural, or neurodevelopmental disorders. This group included terms with varying meanings, describing different aspects of these disorders. Some terms referred to places where these disorders can be treated, like "mental health hospital" or "psychiatric hospital." The NCJD advises against using terms like "detox" or "rehab center" for such facilities, recommending the use of a "treatment center" instead. Additionally, 29 terms were diagnoses or versions of diagnoses, such as "ADHD" and "attention deficit," each having specific backgrounds and usage advice. However, most of these terms are suggested to be mentioned only if relevant to the context of the story. Furthermore, certain terms within this group have more general meanings, encompassing various types of mental

health issues, or their primary meaning may not be related to disability, such as "addict," "mental illness," "crazy," or "nuts."

Lastly, some terms are considered outdated or offensive and are strongly advised against using, like "mentally deranged" or "mentally retarded" (Disability Language Style Guide | National Center on Disability and Journalism, n.d.). These terms were categorized separately for the analysis, with a specific emphasis on tracing their evolution in contrast to terms that hold broader societal acceptance.

The working hypothesis for the terms analyzed in this thesis postulates an increasing trend in their frequency of usage. Existing literature primarily focusing on the terms associated with mental health conditions has highlighted a rise in articles addressing mental health matters. Although prior studies have predominantly centered on article count rather than the specific frequency of individual terms, this thesis presupposes an escalation in the usage frequency of the selected words. The exploration of the impact of guidelines on journalistic discourse concerning disability has been rather limited in previous research. Nonetheless, with the availability of such guidelines, the growing wealth of insights shared by individuals with disabilities, and the expanding advocacy community for disability-related issues, communication about disability appears to be undergoing a simplification process. Despite the challenges posed by traditional article-writing practices that often influence the portrayal of specific topics, there is an anticipated upward trajectory in frequency due to the increasingly favourable conditions for addressing disability in the media. While the future trajectory of terms to be avoided cannot be definitively predicted, the persistent negative connotation surrounding articles related to mental health suggests that certain words may persist in usage despite being considered outdated or offensive.

### **3. Material and Method**

This bachelor thesis aims to provide a comprehensive examination of the terminology associated with disability and individuals with disabilities, specifically focusing on mental health-related terms, over the course of several decades. Specifically, it investigates the usage of words related to mental health issues in American English. The dataset for analysis was obtained from the Corpus of Contemporary American English (COCA). The study focuses on the frequency of these terms, spanning from 1990 to 2019, within the newspaper genre. Furthermore, it conducts a detailed analysis of the selected word list within three prominent newspapers: The New York Times, USA Today, and The Washington Post.

#### **3. 1 List of words and its editing**

The list of words utilized for the analysis is comprehensively presented in section 2.3.1 of this thesis. Within the Mental, Behavioural, or Neurodevelopmental Disorders category, a total of 60 words were initially identified. However, prior to conducting the analysis, it became evident that the list required refinement. Firstly, certain words exhibited similar or identical meanings, such as "OCD" and "obsessive-compulsive disorder," or "addict" and "addiction." Consequently, these words were grouped together and treated as a single term during the analysis. This process of grouping based on their relation to a particular type of disability was consistently applied to all terms. This thesis specifically focused on words closely associated with disability or individuals with disabilities, thus only diagnoses or terms describing disabled individuals were retained, while words pertaining to places (e.g., "Psychiatric hospital" or "Detox center") or terms describing individuals (e.g., "shrink") were excluded. Lastly, there were words whose primary meanings were not inherently linked to disability. Despite their presence in the corpora, in most instances, these words were used in different contexts or it proved challenging to determine whether they were used in a disability-related context or not. Consequently, they were omitted from the analysis, examples being "nuts," "crazy," or "insane." Following the refinement process, the resulting list of words comprised 26 terms.

### 3.2 Corpora

The data used for this analysis was obtained only from COCA. This corpus consists of a vast collection of text, exceeding one billion words, which spans from 1990 to 2019. It provides balanced data across eight distinct genres of American English. For the purpose of this thesis, the focus was specifically on the genre of newspapers. The newspaper genre within COCA encompasses more than 90,000 texts, amounting to over 122,000,000 words. This dataset



Figure 3 - The data that COCA provides for word autism

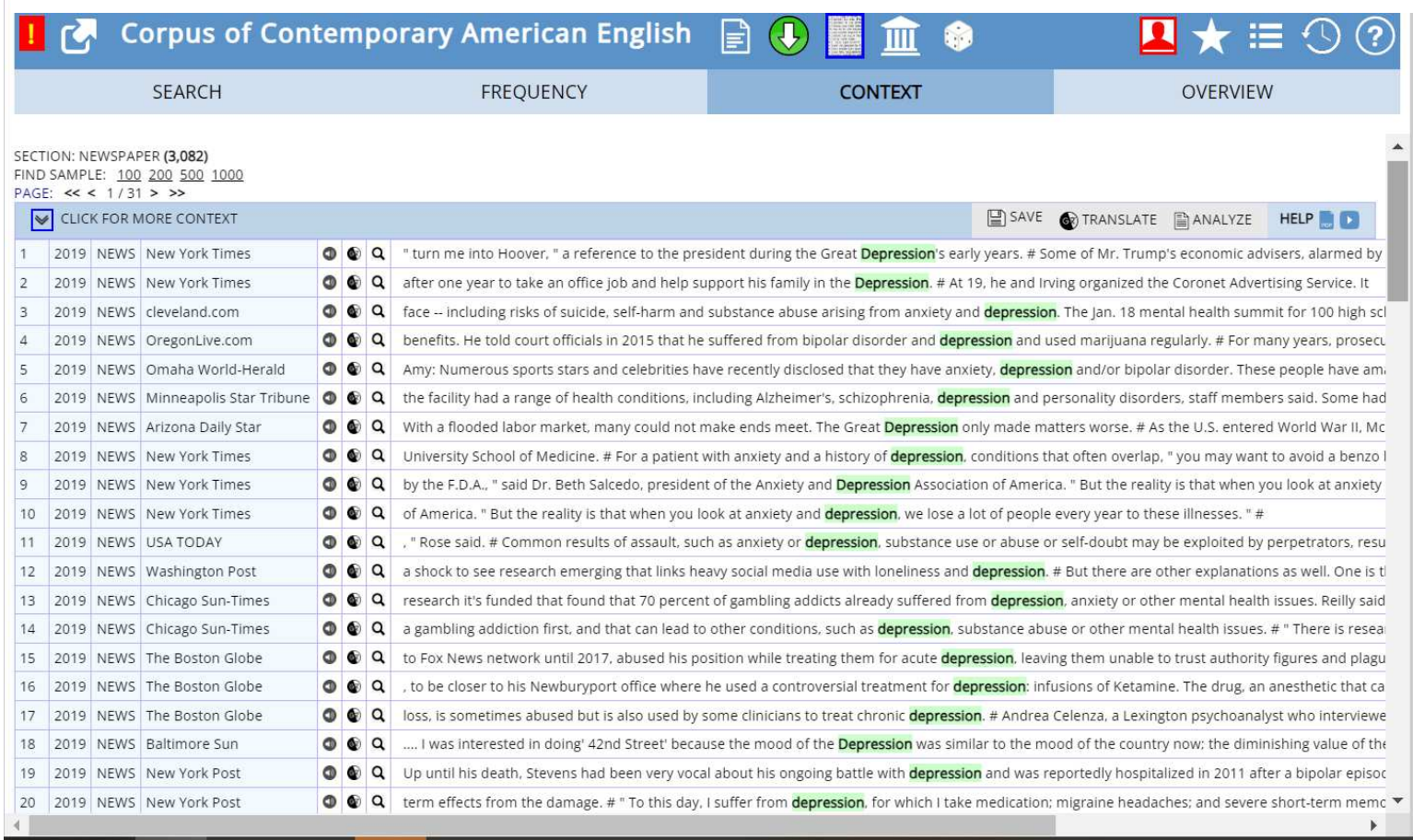


Figure 4 - results for word depression in newspapers category in COCA

includes texts from diverse newspapers across the United States, sourced from various sections (English-Corpora: COCA, n.d). Figure 3 presents results for a search of the term “autism” and in Figure 4 can be seen results of the term “depression” in genre newspapers. The choice to



concentrate on the newspaper genre was based on previous research that predominantly explored disability terminology within newspaper sources.

### 3.3 Analysis

These terms were used for the analysis:

- Addict, Addiction
- ADHD, attention-deficit, Hyperactivity disorder
- Alcoholism, alcoholic
- Asperger's, Asperger's syndrome
- Autism, Autism spectrum disorder, autistic
- Behavioral health
- Bipolar disorder
- Catatonia, Catatonic
- Dementia
- Depression
- Developmental disabilities, Developmental disability
- Dissociative identity disorder, multiple personality disorder
- Dyslexia, Dyslexic
- Insanity
- Intellectual disabilities, Intellectually disabled
- Learning disability
- Mental disorder, Mental illness
- Mentally deranged
- Obsessive-compulsive disorder, OCD
- Post-traumatic stress disorder, PTSD
- Psycho, Psychotic
- Psychosis
- Retarded
- Senility
- Schizophrenia, Schizophrenic
- Tourette syndrome, Tourette's syndrome

At the outset of the analysis, comprehensive data pertaining to each word was extracted from the COCA, including the year, context, and specific newspaper source. The list of words initially encompassed meanings beyond disability-related contexts, which were subsequently excluded from the analysis. For certain words, all instances were applicable for analysis, such as "PTSD" or "schizophrenia." However, for other words, distinctions were made based on different meanings. For example, "depression" was considered when used as a name for mental illness but not when used to describe a period of economic downturn. Similarly, "insanity" was only included when referring to the actual illness, particularly in legal contexts using phrases like "reason of insanity." Instances of the word "psycho" used to describe a movie or music band were not counted. Various types of addiction were mentioned, but data was only collected for those recognized as mental health disorders, while instances where "addiction" was used

more casually without the medical connotation were not included. All words, regardless of whether they had a single meaning, underwent analysis to ensure that only disability-related contexts were considered for the final results.

The data extraction process was conducted manually, with a thorough examination of each sentence and word. Subsequently, frequency normalization was applied. Despite the claimed balance of the corpus, there was an inherent imbalance in the data, which could potentially impact the results of the newspaper analyses. While the COCA extracted a similar number of words per year from all newspapers, the actual quantity varied from year to year. Here is a list of numbers of items extracted from each newspaper:

Years	New York Times	USAToday	Washington post
2019	277512	257978	255119
2018	282541	218782	225271
2017	210441	204814	218682
2016	154986	159225	161818
2015	419800	421551	373158
2014	421487	426248	399156
2013	425071	424502	390941
2012	450075	444261	410401
2011	447444	431901	394828
2010	459615	394006	420755
2009	418648	437638	407090
2008	422646	346599	411261
2007	516479	525342	208680
2006	493229	382264	385289
2005	472698	355715	413347
2004	494406	347905	412462
2003	495624	322287	398406
2002	475095	319124	388312
2001	509550	335737	392010
2000	503391	390687	405151
1999	500253	403938	465968
1998	506406	379761	459467
1997	507422	382838	451699
1996	500881	341097	463100
1995	506396	356941	490883
1994	488862	300005	681646
1993	534599	420808	670134
1992	506679	447024	641395
1991	610682	539918	661787
1990	583494	623181	804507

Table 1 – Number of items per year for three main newspapers (Source: COCA)

To address the imbalance, the available data on the corpus website enabled the normalization of each year's frequency based on the number of words. The frequency was divided by the number of words for each newspaper in each year and then multiplied by a million.

$$\text{Total frequency} \div \text{number of items} * 1,000,000 = \text{occurrences per million words (pmw)}$$

The initial part of the results presents an overview of all words extracted from the list of all newspapers. For this section, normalization was not applied, and the different numbers of words from each newspaper were not taken into account. Consequently, these results should not be considered as relevant as the subsequent analysis. The remaining analysis and corresponding numbers were calculated using Microsoft Office Excel formulas. All numbers are expressed in occurrences per million words (pmw), ensuring comparability. No other software or programs were employed for the analysis. Words that did not appear in certain years were consistently counted as zero for the average calculations. The analysis results are presented in *Tables 2 to 9* included in the thesis appendix, along with graphs appearing in the results section. The tables were separated just for a better graphic outlook. The figures provide information regarding the individual frequency of each word in each year, along with the respective newspapers in which they appear. The results section specifically focuses on the comparison of three newspapers. The analysis incorporates the frequencies of individual words, the average frequency of all words for each year, the number of terms appearing in each newspaper, and the average frequency of individual words over the years.

While the COCA offers balanced data for ten various newspapers across different sections, the composition of newspapers changes over time as new ones are established and others cease publication. This limitation prevented a comprehensive comparison of all newspapers throughout the entire analyzed period. Therefore, this thesis concentrates on the comparison of the three newspapers included in the COCA from 2019 to 1990. All three newspapers are reputable, daily publications and currently rank among the top five best-selling newspapers in the United States, each possessing a longstanding history and respected standing in the field of journalism (Talbot, 2023).

### **3. 4 Working hypothesis**

The majority of research conducted in the realm of mental health issues is built upon the foundational studies outlined in the theoretical part of this thesis, which were primarily undertaken in Canada and Britain. Based on this existing research, the hypothesis posits that the results of this study may reveal that the average frequency of these words will exhibit an increase, reflecting the growing societal inclination to engage in discussions and searches pertaining to mental health issues. Regarding the comparison of newspapers, there has been limited recent research focused on disability coverage or mental illness representation in concrete American newspapers so the hypothesis can only assume an increase based on pieces of research that spotted this trend in other newspapers.

**4. Results**

This bachelor thesis is aiming to look at the development of terminology associated with disability throughout the course of time. Drawing upon previous research it is anticipated that the findings will reveal a notable rise in the frequency of usage on average.

**4. 1 Overview of all terms in all newspapers**

For the initial segment of the analysis, only the contextual aspects of each word were taken into consideration, without distinguishing between different newspapers. As previously mentioned in the methodology section, the list of included words comprised 26 terms that described either a diagnosis or refer to individuals with disabilities. Certain words, such as “addict/addiction”, “depression”, “mental illness/mental disorder”, and “alcoholism/alcoholic”, exhibited a higher frequency of occurrence in the corpora. In contrast, there were terms with more specific connotations that appeared infrequently in the corpora, such as “catatonia/catatonic”, “Asperger's/Asperger's syndrome”, or “obsessive-compulsive disorder/OCD”. *Figure 5* presented below provides an overview of the average frequency of all words for each year throughout all newspapers.<sup>3</sup> Initially, in 1990, the average frequency stood at approximately 10 words per year. Throughout the period until 2012, the line representing the frequency remains consistently below 15 words, except for a notable increase in 1999. Subsequently, a series of peaks occur during the years 2013-2016,

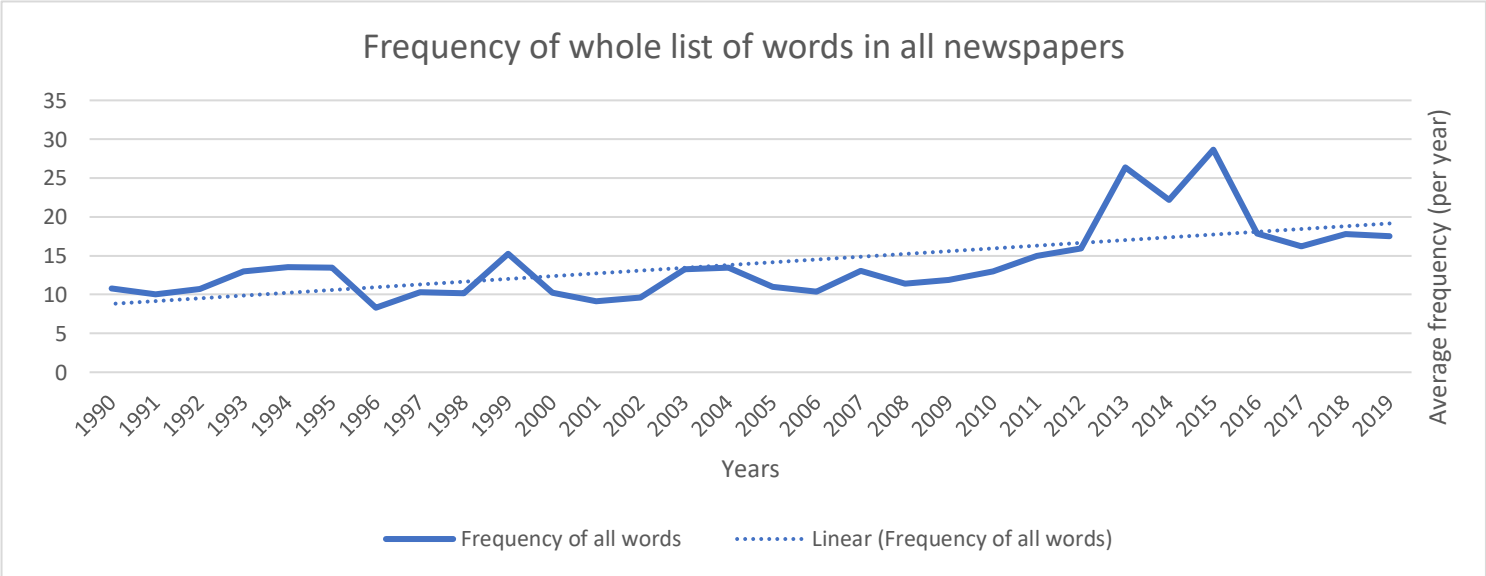


Figure 5 – average frequency of all terms in all newspapers (source: COCA)

<sup>3</sup> These findings have not undergone normalization, and the varying word counts across different newspapers have not been accounted for in the analysis.

followed by a subsequent decline in the final three years. Upon comparing the average frequency between the first and last year, a marginal increase is observed. The trendline in *Figure 5* also demonstrates a rise. However, it is important to note that the progress between the initial and final time points of the analyzed period is not linear in nature and shows a decline towards the end.

The list comprised three terms that were deemed outdated by the NCJD or were recommended to be avoided. Henceforth, these terms will be referred to as derogatory terms for the remaining analyses. Among these three terms, namely “retarded”, “psycho/psychotic”, and “mentally deranged”, distinct developmental patterns were observed across all newspapers. “Retarded” initially appeared a lot during the early stages of the analyzed period but subsequently experienced a significant decline, with minimal to no usage in recent years. In contrast, “mentally deranged” exhibited a consistently low average frequency throughout the entire period, punctuated by minor fluctuations. Additionally, “psycho/psychotic” began with a relatively modest average frequency but displayed a substantial peak in 2013, followed by an even greater peak in 2015, where the average frequency reached 60 occurrences. However, the subsequent trend involved a decline, returning to a low average frequency once again.

The most frequently occurring words on the list included "addict/addiction," "depression," and "mental illness/mental disorder". The term "addict/addiction" exhibited fluctuating patterns, with a shared peak in 1999 alongside the term "mental illness/mental disorder". However, starting from the year 2012, a significant decline followed a peak, and subsequently, there was an increase until 2019, when the term reached its highest average frequency of over 160 occurrences per year. In comparison, "depression" displayed a notable peak in 2015, succeeded by a mostly declining trend. The difference in average frequency between the beginning and end of the analyzed period was not as significant as observed for the other terms. "Mental illness/mental disorder" began with a relatively low average frequency compared to other terms, showing one peak and a subsequent substantial increase during the years 2013-2014. However, it was then followed by a continuous decline. Notably, there was an overall increase in average frequency for this term between the years 1990 and 2019.

**4. 2 Terminology in three chosen newspapers**

Figure 6, which focuses on three selected newspapers (New York Times, USA Today, and Washington Post), demonstrates both upward and downward trends. The numerical values vary, with the highest recorded average frequency (in 2015) reaching merely 7pmw, while the lowest point occurred in 1996, slightly surpassing 1 pmw. When comparing the initial and final stages of the analysis, the figures exhibit a relatively close resemblance. At the outset, the average appearance of the chosen set of words was merely 3pmw, while towards the end of the analyzed period, it hovered just below three occurrences pmw. Throughout the interim period, the line fluctuated, experiencing multiple peaks and lows but the overall trendline indicates a consistent upward trajectory.

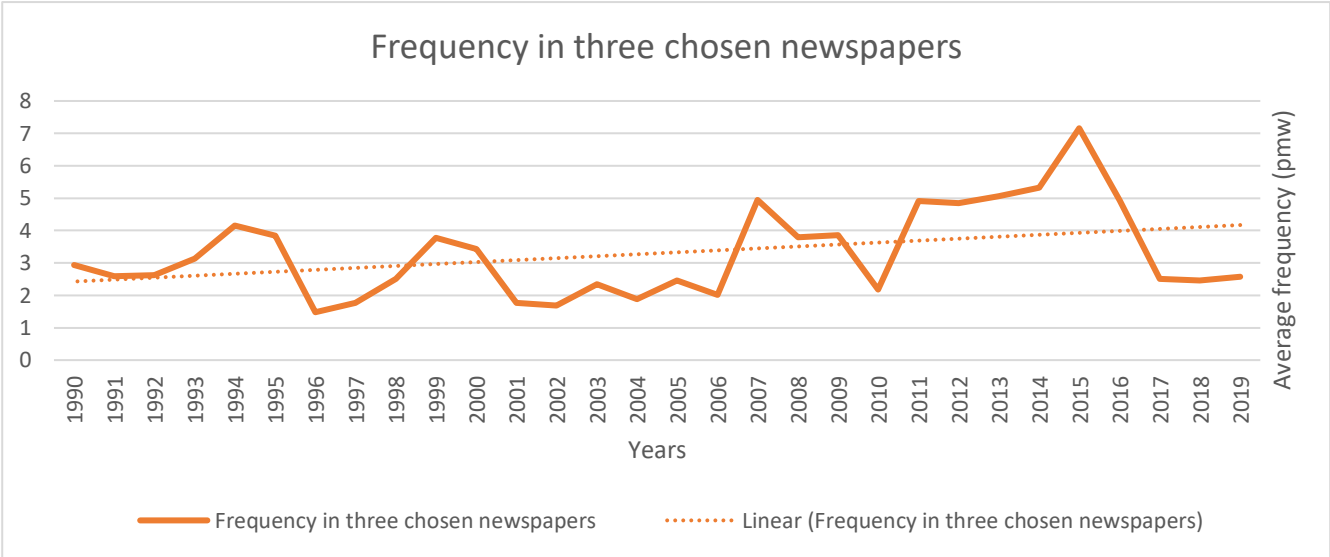


Figure 6 – Frequency of all words in three chosen newspapers – New York Times, USA Today, Washington Post (source: COCA)

**4. 2. 1 All three newspapers separately**

When examined individually, each newspaper demonstrates distinct trends over the years. The Washington Post displays greater fluctuations, beginning in 2006 after a single significant peak in 2000. Subsequently, peaks and lows alternate until 2015 and 2016. In 2015, the average frequency of mental health-related terminology reached its highest level (14 pmw) among all three newspapers throughout the analyzed period. This peak is followed by a period of nearly the lowest average frequency, which continues until 2019.

In contrast, USA Today initially exhibits a low average frequency, followed by two peaks. This is succeeded by a subsequent phase of low frequency starting in 2000 and concluding with a peak in 2010. *Figure 7* illustrates a pattern of highs and lows for USA Today, which ultimately concludes with a small average frequency in 2017. The New York Times follows a similar trend to the Washington Post, although the peaks are not as pronounced but occur around the same time. Comparing the years 1990 and 2019, USA Today demonstrates nearly identical figures, while the New York Times exhibits a slightly higher average frequency, and the Washington Post shows a lower one. All three newspapers exhibit an upward trend as evidenced by the ascending trendline depicted in *Figure 7*.

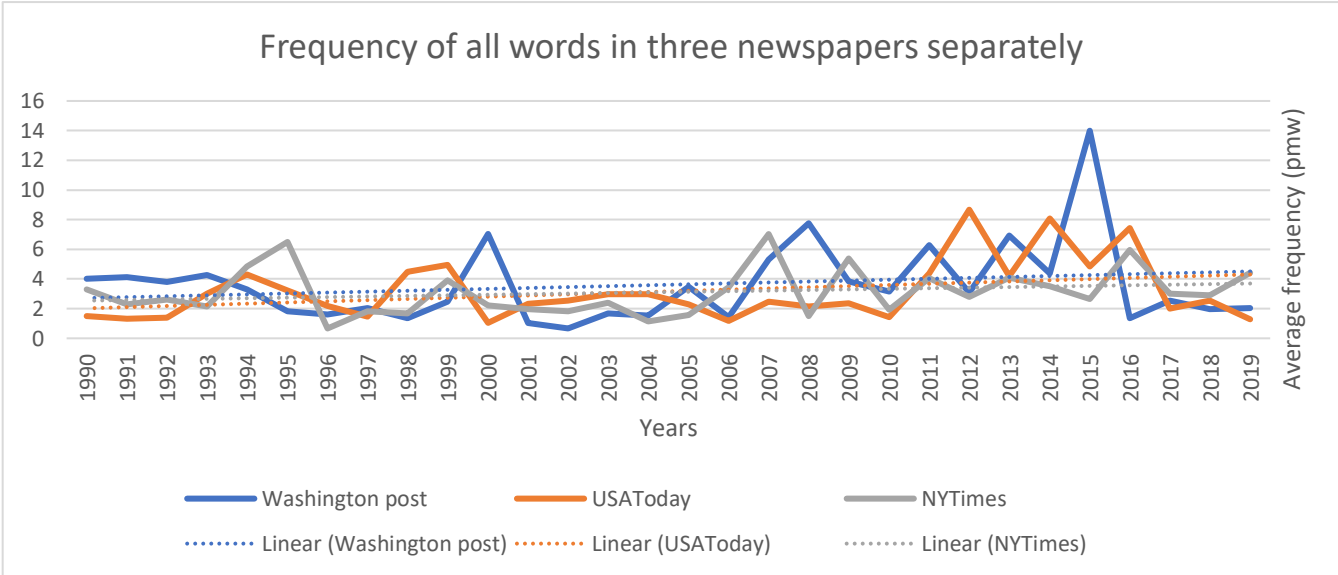


Figure 7 – Frequency of all words in three newspapers separately (source: COCA)



#### 4. 2. 2 USAToday

The derogatory terms in USAToday exhibited distinct patterns. For instance, the term "psycho/psychotic" experienced periods of non-usage interspersed with high frequency in the early years of analysis, followed by peaks in 2011 and 2014, suggesting continued usage. Similarly, the term "mentally deranged" showed peaks and lows until 2003, followed by a period of non-usage. However, it saw increased usage in 2012, 2016, and 2017, with no recorded instances in 2018 and 2019. In contrast, the term "retarded" was found only once per million words in USAToday, specifically in 1990. The trendlines for the words "psycho/psychotic" and "mentally deranged" exhibit an increase, whereas the word "retarded" shows a marginal decrease.

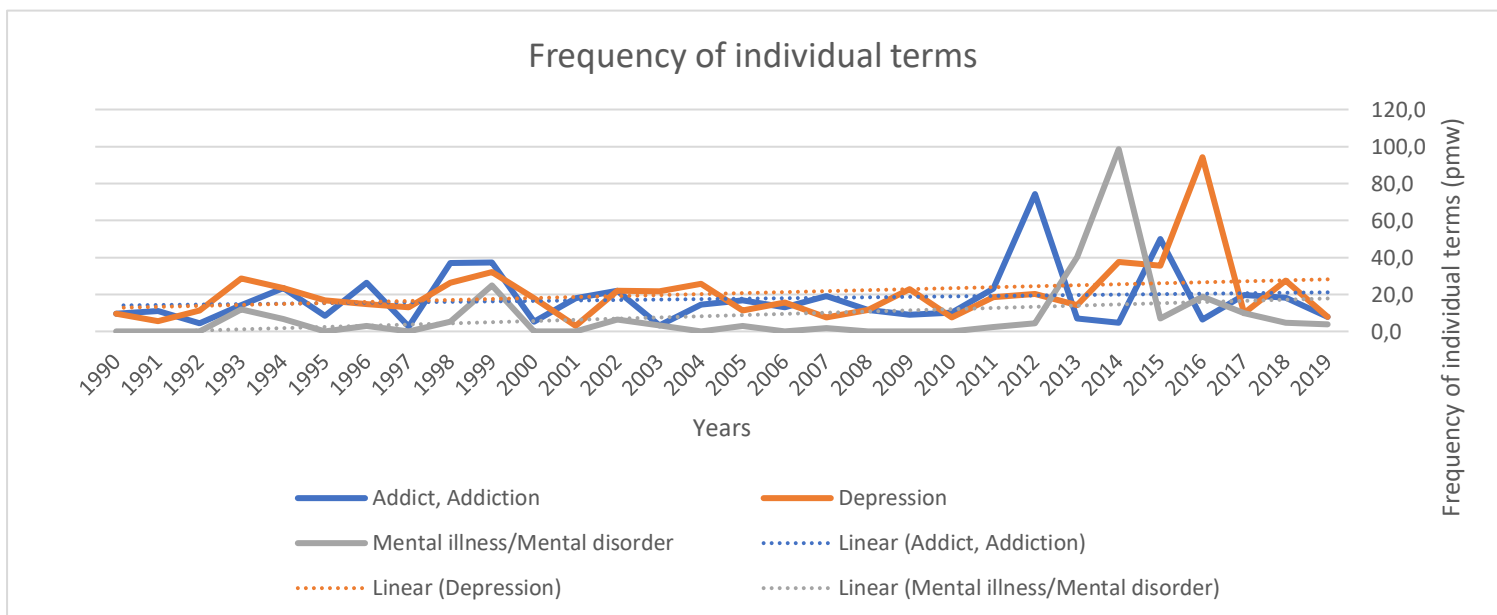


Figure 8 - Frequency of addict/addiction, depression and mental illness/mental disorder (Source: COCA)

Analyzing the most frequent words, such as "addict/addiction," "depression," and "mental illness/mental disorder," they showed relatively similar patterns of development over the years. "Mental illness/mental disorder" began with zero average frequency, followed by peaks in 1993 and 1999. It then returned to a very low average frequency, peaking again in 2013 before declining once more. "Depression" exhibited a balanced average frequency with a low point in 2001 and a preceding peak in 1999. This fluctuation of highs and lows continued until 2016 when the term reached nearly 100 occurrences pmw before declining again. In comparison as can be seen in *Figure 8*, "addict/addiction" exhibited the biggest variations in USAToday. The line for this term displayed lows and highs from 1990 to 2011, reaching nearly 80 occurrences pmw at its peak, followed by a decline, a subsequent increase to slightly above 40 occurrences pmw, and then another decrease. Upon examining the trendlines for all three

words, it is evident that they display an upward trajectory from the beginning to the end of the analyzed period. However, each word exhibits distinct starting and ending points.

While the most frequent terms related to mental health significantly influenced the timeline in USA Today, there were other words and their occurrences that impacted it as well. "post-traumatic stress disorder/PTSD," despite rarely exceeding 15 occurrences pmw, registered 43 instances in 2016, making it the second most frequent word of the year, trailing only "depression." In 2012, autism/autism spectrum disorder/autistic" reached its highest occurrence, matching the frequency of "addiction/addict" at 74 occurrences pmw. This peak is noteworthy, as, in other years, the term had much lower frequencies, only surpassing 20 occurrences of pmw in 2003, during which it became the most frequent term among the set list. Additionally, "alcoholism/alcoholic" experienced peaks in 1994, 1999 and 2011, ranking among the most frequent terms for those respective years.

The lows in the line were primarily due to many words not appearing in USA Today for certain years, as well as decreased occurrences of the most frequent terms. In the initial years of the analyzed period, only eight out of 16 terms were used in this newspaper, with a different set of eight terms each year. In 2000 and 2006, only three terms from the entire list were found, leading to the lows in *Figure 7*. The number of words used did not exhibit a discernible trend and fluctuated throughout the years. The derogatory terms, with the exception of "retarded," were not among the least frequent words. The terms "dissociative identity disorder/multiple personality disorder," "Asperger's/Asperger's syndrome," "learning disability," and "catatonia/catatonic" occurred very rarely in USA Today. Thirteen terms had an average frequency below one occurrence pmw, in contrast to the most frequent term, "depression," which had on average 20 occurrences pmw in USA Today.

#### **4. 2. 3 Washington Post**

In contrast to USA Today, the derogatory terms analyzed in the Washington Post exhibited distinct frequency patterns. The term "retarded" had notable occurrences at the beginning of the analyzed period, peaking at 12 occurrences pmw in 1991 and showing another similar peak in 1999. Subsequently, its frequency declined to zero, persisting until 2019 with the exception of 2006. The term "mentally deranged" began with a frequency of zero, which continued until 1994, followed by peaks and lows not exceeding 2 occurrences per million words. In 2003, its frequency rose to 5 occurrences pmw. Similar peaks were observed in 2011, 2014, and even larger ones in 2016 and 2017, followed by a decline to zero frequency again. The term "psycho/psychotic" exhibited the most fluctuations among these three terms, with

years of zero frequency and peaks not exceeding 4 occurrences per million words, except for 2005 when the frequency reached almost 8 occurrences pmw as can be seen in *Figure 9*. The trendlines for "deranged" and "psycho/psychotic" both indicate an upward trajectory, while the trendline for "retarded" displays a decreasing pattern.

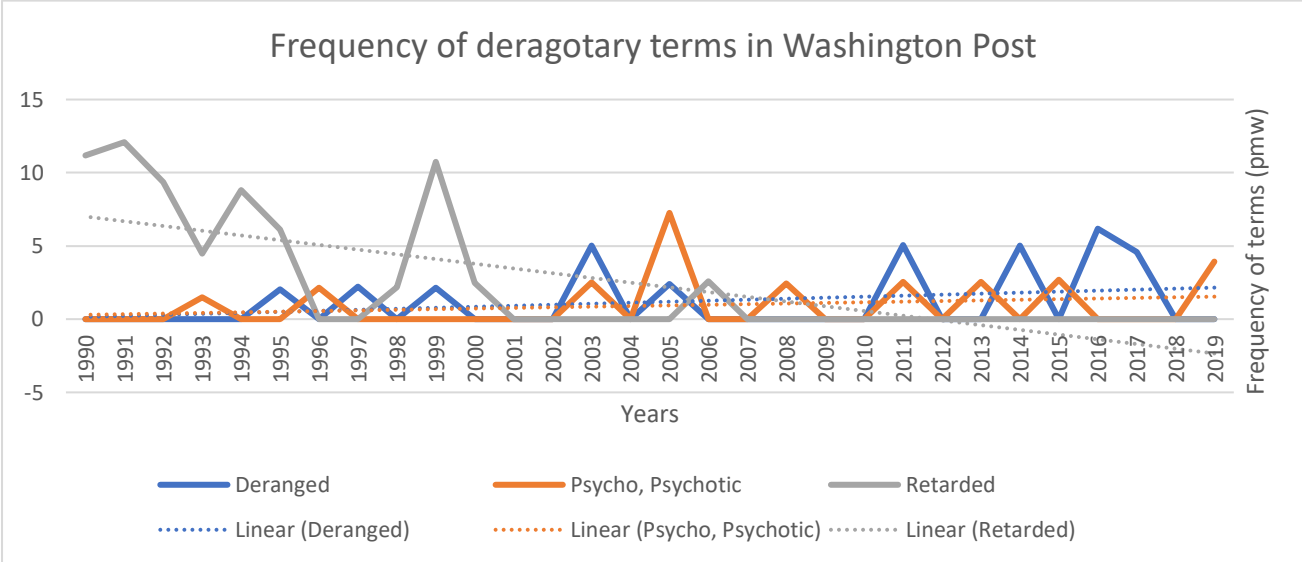


Figure 9 - Frequency of derogatory terms in Washington Post (Source: COCA)

Among the most frequent terms, "depression" showed the highest peak. It began with a relatively lower average frequency, rising to 50 occurrences pmw in 1992-1993. This increase was followed by alternating highs and lows, all below 50 pmw. However, in 2015, the word was used in the Washington Post over 260 pmw, declining to zero occurrences the following year. In the subsequent years after this peak, its frequency rose again, reaching only slightly higher than the frequency at the beginning of the analyzed period. The term "addict/addiction" initially had the highest frequency among the three terms, followed by a decline and fluctuations between small peaks and zero frequency. Eventually, it rose again after the year 2006, reaching the same number of occurrences as "depression," which was the second-highest frequency throughout the years, right after 1990 when it was 24 occurrences pmw. The term "mental illness/mental disorder" began with the lowest frequency in that year, followed by a continuous decrease, occasionally interrupted by sudden peaks. For example, in 2008, the term was used above 50 occurrences of pmw, followed by two more peaks in 2013-2014 and 2017, only to decline to zero frequency in 2019. Therefore, all three terms exhibited different patterns, particularly in certain years, with a shared tendency towards higher frequency, although in varying numbers and ascending trendlines.

Similar to USA Today, other words influenced the average frequency of the 26 analyzed terms in the Washington Post. "Alcoholism/alcoholic" exhibited a relatively high frequency at the beginning of the analyzed period, rising to 44 occurrences per million words and not falling below 28 occurrences per million words, which was higher than other words in that year. In 1997, the overall frequency was very low, with "insanity" having the highest occurrences at only 15 occurrences per million words. The peak in 2000 was influenced by the high frequency per million words of "autism/autism spectrum disorder/autistic," which rose to 135 occurrences pmw, significantly higher than all other terms. The higher average number in 2008 was caused by 13 appearances in the Washington Post, supported by high pmw for "autism/autism spectrum disorder/autistic," "depression," and "mental illness/mental disorder." In 2011, the "ADHD/attention deficit/hyperactivity disorder" suddenly increased to 78 occurrences pmw, significantly higher than its average frequency in other years which eventually lead to a high spotted in *Figure 7*. The lows observed in *Figure 7* can be explained by the infrequent appearance of words at the beginning of the analysed period and in the last few years, leading to a low average frequency. Until 2006, most years included no more than 8 terms from the list. In 2002, only 5 words were used, the second-lowest count after 2019, when only 4 words appeared. In the Washington Post, two out of the 26 analyzed words, namely "senility" and "catatonia/catatonic," did not appear in any instances. Additionally, there were words with lower average frequencies compared to the derogatory terms. Fourteen terms exhibited an average frequency below 1 occurrence pmw.

#### **4. 2. 4 New York Times**

The derogatory terms in the New York Times exhibited variations from the patterns observed in the other two newspapers. Starting with the highest frequency of 36 occurrences of pmw in 1990, the term "retarded" experienced a significant decline, followed by another peak in 1995. In the subsequent years, a relatively lower frequency was observed, with an exception in 1998 when the frequency rose to 10 pmw. Unlike the other newspapers, "retarded" continued to appear in the New York Times and exhibited another peak in 2019, indicating ongoing usage. "Psycho/psychotic" showed sporadic peaks and periods of zero frequency at the beginning of the analyzed period, followed by no occurrence at all. However, starting in 2015, the word reappeared in the New York Times, reaching 13 pmw, but subsequently declined. "Mentally deranged" had the lowest average frequency among the three terms throughout the years, despite displaying the most fluctuations. Similar to "psycho/psychotic," it also showed a peak

toward the end of 2017. „Mentally derranged“ showed a declining trendline in compare to other terms, mainly the trendline of „retarded“ which exhibited a steep increase.

For "depression," "mental illness/mental disorder," and "addict/addiction," all terms exhibited fluctuations with highs and lows, some occurring in the same years, such as in 1994-1995 or 1999. "Depression" started at 10 pmw initially and reached its highest frequency in 2007 at 42 pmw, followed by a sudden decline and subsequent increase. The year 2019 also saw an increase preceded by a decrease, but in comparison to 1990, "depression" was used more frequently in the New York Times, with approximately 25 occurrences per million words. "Addict/addiction" began with the highest frequency among the three terms, declined to almost zero occurrences in 1996 and 1998, and then fluctuated between 9 pmw and 28 pmw from 1999 to 2014. In *Figure 10*, it can be observed that the frequency decreased again, but suddenly rose in 2018-2019 to 51 pmw. Considering only the beginning and end of the analyzed period, the difference suggests progress in the development of this term. "Mental illness/mental disorder" reached its lowest frequency in 1996 and 1998, similar to the previous term, with near-zero occurrences in more years, such as 2001, 2004-2005, and 2010-2012. Even in 2018, the frequency remained considerably low, followed by a rise in 2019 to 11 pmw. The highest frequency for "mental illness/mental disorder" was observed in 1999, reaching 37 pmw. An ascending trend can be observed in the trendlines of all three terms.

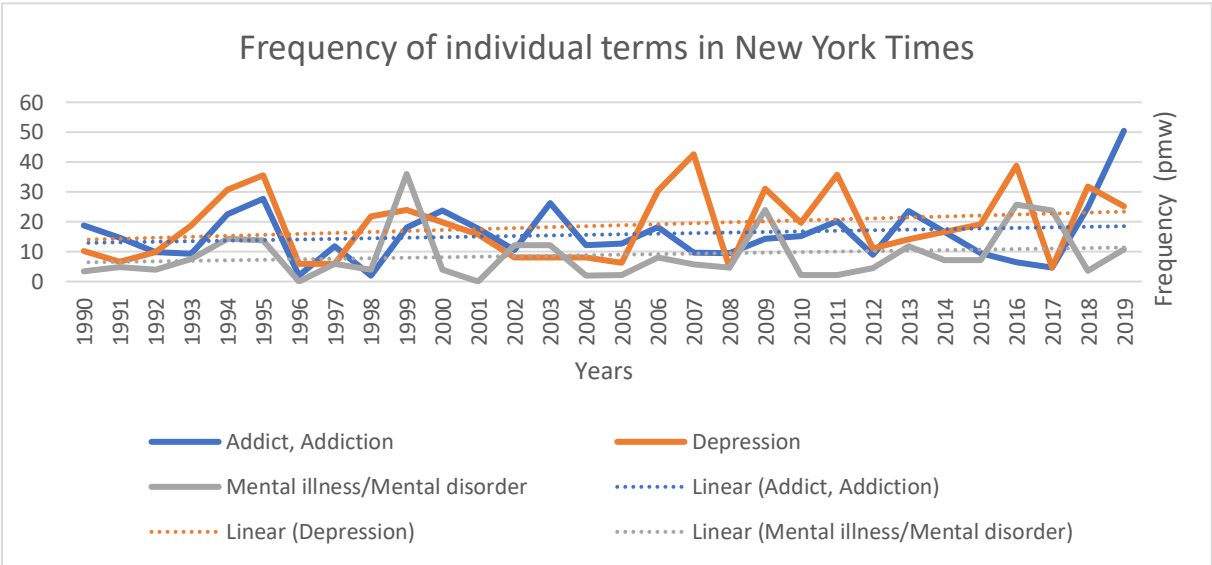


Figure 10 - Frequency of individual terms (Source: COCA)

The alternating highs and lows observed in the New York Times were primarily influenced by the three most frequent terms mentioned above, as well as the number of terms

that appeared in a given year. Similar to the Washington Post, the word "alcoholism/alcoholic" exhibited higher frequency in the early years, contributing to a high average frequency in 1990. In the subsequent years 1994-1996, "schizophrenia/schizophrenic" and "autism/autism spectrum disorder/autistic" exhibited high frequencies, leading to a peak as depicted in *Figure 7*. This peak was followed by a low caused by the appearance of only five terms in the New York Times, which is the lowest number of used terms alongside the year 2004. In other years, usually, more than 7 terms were used, and in 2014, the number of used words rose to 15, which did not even reach half of the entire list. Notably, the years 2007 and 2009 showed higher frequencies for the term "autism/autism spectrum disorder/autistic," with the term being the most frequent in both years, reaching 87 pmw in 2007. The last peak in the development of New York Times terminology can be observed in 2016, primarily due to the increased occurrences of the term "post-traumatic stress disorder/PTSD." The term "dissociative identity disorder/multiple personality disorder" did not appear at all in the New York Times, and the other 12 terms did not exceed an average frequency of 1 pmw. All derogatory words had an average frequency higher than those 12 terms, with "retarded" even being among the five most frequently used words on average in the New York Times.

## 5. General Discussion

The present bachelor thesis focuses on investigating the evolvement of disability-related terminology over time, concretely mental health issues terminology from the year 1990 till 2019 based on data from COCA corpora. The primary emphasis of the analysis lies in examining the average frequency of the selected 26 terms across different years and newspapers including derogatory terms identified based on the recommendations of the NCJD (National Center on Disability and Journalism).

Initially, the analysis encompasses the contextual aspects of 26 terms without distinguishing between different newspapers or normalizing the data. The findings reveal an overall increase in the average frequency of the analyzed terms from 1990 to 2019, although the progression is not uniform, with pronounced peaks occurring between 2013 and 2016. Hence, it can be posited that, based on the upward trajectory of the word frequencies, these terms are being employed more frequently on average in newspapers. Notably, certain terms such as "addict/addiction," "depression," "mental illness/mental disorder," and "alcoholism/alcoholic" demonstrate higher frequencies in the corpora, while terms with more specific connotations, such as "catatonia/catatonic," "Asperger's/Asperger's syndrome," or "obsessive-compulsive disorder/OCD," appear infrequently. Derogatory terms present distinct patterns in this overview, with "retarded" showing a decline in usage, "mentally deranged" exhibiting low average frequency overall, and "psycho/psychotic" displaying a peak in later years. Among the most frequent words on the list, "depression," "mental illness/mental disorders," and "addict/addiction" demonstrate fluctuating patterns, with both peaks and lows, deviating from the expected continuous incline. While certain terms seem to indicate that journalists are becoming more informed about disability terminology, others like "psycho/psychotic" suggest that certain words are still in use, unbeknownst to journalists that they might be considered offensive.

The analysis of this thesis further explores three specific newspapers, namely the New York Times, USA Today, and the Washington Post, each of which exhibits distinct trends in disability-related terminology over the years. The Washington Post demonstrates greater fluctuations, with notable peaks in 2015, reaching the highest average frequency of mental health-related terms throughout the analyzed period. USA Today displays a pattern of highs and lows with fluctuations between several peak years, while the New York Times exhibits trends similar to the Washington Post but with less pronounced peaks. Despite the dissimilar

patterns, all three newspapers display an overall trend of increased term frequency, coinciding with the ascending trendlines.

Regarding derogatory terms in USA Today, they show varying occurrences over the years, with "retarded" appearing rarely, and the other two terms exhibiting more occurrences throughout the years. Consequently, two of these terms imply an ongoing utilization by journalists contributing to USA Today, while the term "retarded" notably exhibits minimal presence within this particular newspaper. This observation may potentially indicate a favourable inclination towards addressing mental health topics in a sensitive manner. The most frequent terms "addict/addiction," "depression," and "mental illness/mental disorder" also display fluctuating patterns, most of the peaks shown in the results section appeared in the second half of the analysed period. However, all terms showed a decline towards the last years despite that the trendlines for all three words show an increase. There were also terms, such as "post-traumatic stress disorder/PTSD" and "autism/autism spectrum disorder/autistic," along with rare occurrences of other terms, which impact the average frequency in certain years for example in 2008 or 2011 and other years. It is difficult to explain the decline at the end of the analysed period but the increasing trendline suggests a continuous increase of using mental health terminology which eventually could indicate a higher amount of discussions about this topic.

Within the Washington Post, the term "retarded" demonstrated noticeable occurrences at the commencement of the analyzed timeframe, followed by a continuous decline to zero instances, with an exception observed in the year 2006. In contrast, the term "mentally deranged" exhibited a relatively low frequency during the initial phase, which was succeeded by peaks in the latter portion of the analytical period, subsequently declining to zero frequency. The term "psycho/psychotic" exhibited the most substantial fluctuations among these three terms, with instances of zero frequency during certain years and most peaks not surpassing 4 occurrences per million words. The trajectory of trendlines for both "deranged" and "psycho/psychotic" demonstrates an upward trend, while the trendline for "retarded" exhibits a declining pattern. Conversely, the term "depression" displayed comparatively lower frequencies at the outset, culminating in a significant peak in 2015 that substantially influenced the results of this newspaper. The term "addict/addiction" displayed oscillations between minor peaks and instances of zero frequency, followed by a resurgence after the year 2006. Notably, "mental illness/mental disorder" exhibited multiple peaks but eventually recorded zero



frequency by the conclusion of the analytical period. Consequently, all three terms exhibited distinctive patterns, particularly within specific years, while collectively displaying an inclination toward greater frequency, albeit in varying magnitudes and upward trendlines. Similar to the observations in USA Today, other terms also impacted the average frequency. For instance, "alcoholism/alcoholic" demonstrated relatively higher frequency at the outset of the analyzed period. The peak in 2000 was influenced by the term "autism/autism spectrum disorder/autistic." Additionally, the sudden increase in the term "ADHD/attention-deficit/hyperactivity disorder" in 2011, significantly surpassing its average frequency in other years, led to a peak. The observed troughs can be attributed to the infrequent appearance of these terms during the initial years of the analyzed period and in the concluding years, ultimately resulting in a diminished average frequency.

Likewise, the New York Times manifests distinct patterns concerning derogatory terminology, wherein each of the three terms undergoes alternating periods of peaks and reductions over the passage of time. Notably, the New York Times displays elevated occurrences of all three terms during the latter phase of the scrutinized interval. This observation implies that an assessment of the data might indicate that the New York Times performed less favourably in comparison to the other two newspapers, exhibiting a higher frequency of usage of derogatory terms, particularly during the latter segment of the analytical period. All derogatory words had an average frequency higher than those 12 terms, with "retarded" even being among the five most frequently used words on average in the New York Times. The most frequent terms "depression," "addict/addiction," and "mental illness/mental disorder" also display fluctuations in usage over the years, some occurring in the same years. All terms display increasing trendlines suggesting an increase in the usage of these terms. The alternating highs and lows observed in the New York Times were primarily influenced by the three most frequent terms mentioned above, as well as the number of terms that appeared in a given year. Similar to the Washington Post, the word "alcoholism/alcoholic" exhibited higher frequency in the early years, contributing to a high average frequency in 1990. In the subsequent years 1994-1996, "schizophrenia/schizophrenic" and "autism/autism spectrum disorder/autistic" exhibited high frequencies. Notably, the years 2007 and 2009 showed higher frequencies for the term "autism/autism spectrum disorder/autistic," with the term being the most frequent in both years. The last peak in the development of New York Times terminology can be observed in 2016, primarily due to the increased occurrences of the term "post-traumatic stress disorder/PTSD." The results thus show an increasing trendline for all words and for the

most frequent words as well but additionally, in New York Times the derogatory words seem to be still in use and even among the most frequent ones on the list. It is impossible to conclude that New York Times would not follow the guidelines made for journalists but it suggests a deeper research that would either support this claim or rebutted it.

The analysis of this thesis offers insight into the utilization of mental health terminology in newspapers, revealing an overall increasing trend. However, the research also identifies certain anomalies in the frequency patterns. Previous research in Canadian and British newspapers focused on articles rather than the frequency of specific words. Their findings indicated an increase in discussions about mental health issues, which to some extent aligns with the results of this thesis. However, due to the limited existing research in this field, the various peaks and lows observed in the graphs within the results section remain unexplained. The data also shows continuous usage of derogatory terms which differ from term to term. Some terms stopped appearing just like “retarded” in USA Today and some are still exhibiting peaks like the same word in New York Times. However in conclusion all the trendlines of average frequency and the frequency of the most used words showed increasing trendlines which suggests that journalists use terminology concerning mental health issues more and more despite the notable peaks and lows displayed in the figures.

The discrepancies may be partly influenced by the source of data, even though COCA presents itself as a balanced corpora. The thesis acknowledges its limitations in not considering the negative or positive context surrounding disability terminology and solely relying on data collected from the COCA corpora. It also commented on the average frequency of all terms concerned with mental health issues which due to the new aspect of disability in general could also influence the reliability of the results. Consequently, this thesis encourages further research to explore variations in the declination, particularly observed in the last three years of the analyzed period. Deeper insight into the usage of mental health issues terminology in newspapers and the examination of other potentially derogatory, outdated, or offensive terms in newspapers are also warranted. Additionally, repeating the research with more recent data after the year 2019 could shed light on potential changes in the trend lines. Despite its limitations, this research may serve as a catalyst for further exploration due to the anomalies observed in the presented figures.

## **6. Conclusion**

This thesis examines the historical development of disability terminology, with a specific focus on mental health-related language in genre newspapers from the years 1990 to 2019. The analysis is based on data extracted from the COCA corpora, encompassing 26 terms related to mental health issues and their evolving frequency over time. The categorization of these terms was guided by the Disability Style Guide from the National Center on Disability and Journalism, referencing the ICD-11 browser provided by the World Health Organization. The primary newspapers under scrutiny were the New York Times, USA Today, and Washington Post.

The initial objective of this research was to provide a theoretical background on the concept of disability itself. The theoretical section of this thesis presented several definitions of disability and explored various approaches to its categorization. Furthermore, it offered a concise historical overview of disability and mental health issues, followed by examples of the evolving language used to describe disability. To gain insights into disability representation in the media, common models for discussing disability were explained, including the stigmatization that remains closely intertwined with mental health issues. Additionally, guidance on the appropriate usage of disability terminology was provided together with results from previous pieces of research that suggested an increase in the frequency of articles concerned with mental health issues. The theoretical section culminated in the compilation of the terms used in the subsequent results section.

The ensuing results demonstrated an overall increasing trend in the average frequency of the terms across all newspapers, but they also revealed numerous variations both within all newspapers and among the three analyzed newspapers. The New York Times, USA Today, and Washington Post exhibited distinct patterns in their figures, albeit sharing some similarities, particularly in the peaks observed in the later part of the analyzed period. An examination of the most frequent terms unveiled divergent developmental trajectories, as was the case with derogatory terms that were advised against by the Disability Style Guide. Nevertheless, when considering the broader scope, the outcomes indicated a prevailing upward trend in the utilization of terminology related to mental health issues, implying a sustained and progressive increase in the usage of these terms by journalists.

This research solely relied on data extracted from the COCA corpora and omitted the examination of contextual positivity or negativity surrounding the usage of these terms. Subsequent research could delve deeper into different years to explain these variations, which

were beyond the scope of this thesis due to limited existing research on this topic. Alternatively, a repeated analysis could shed light on how the trend progressed in more recent years and determine whether the in some cases observed decrease towards the end of the period is merely a fluctuation or merits further scrutiny. Moreover, the persistence of derogatory language suggests the need for more extensive investigations into these terms and their relationship to the guidelines prepared for journalists.

In conclusion, the hypothesis positing an increase in disability-related terminology was confirmed by the results section, while also highlighting the need for more nuanced analyses. Despite the upward trend, the substantial variations observed throughout the results underscore the importance of deeper research in this area.

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## 8. Resumé

Tato bakalářská práce si predevzala zkoumat terminologii týkající se postižení, konkrétné postižení týkající se duševních nemocí. Oblastí výzkumu bylo zvoleno období od roku 1990 do roku 2019. Data byla sesbírána z Korpusu Současné Americké Angličtiny. Seznam slov, který byl zkoumán nabídl Disability Style guide sestavený National Center on Disability and Journalism a kategorizován pomocí vyhledávače ICD-11 od Světové zdravotnické organizace. Konkrétné se tato práce zabývala změnami ve frekvenci jednotlivých slov, průměrné frekvenci všech slov a to jak v celém žánru novin, tak konkrétné ve třech hlavních amerických novinách – New York Times, Washington Post a USA Today.

Úvod této práce nabízí náhled do tématu, krátce představuje téma této práce tedy postižení. Tato práce staví na definici Světové zdravotní organizace, protože zahrnuje mnoho členských zemí a bývá základem pro mnoho akademických prací a definic. Postižení jako samostatný koncept má bohatou historii, která vedla k mnohotvárnosti a pestrosti současné podoby toho zkoumaného konceptu. Nicméně by se dalo říct, že historie byla spíše negativní, což se reflektuje na současném přístupu k postižení. Ačkoliv lidé s postižením jsou v současnosti přijímáni ve společnosti a jejich práva se mnohem zlepšila pořád je jejich místo ve společnosti nejisté. Z tohoto důvodu a taky kvůli novosti tato bakalářská práce poznamenala, že je pořád důležité postižení zkoumat a zabývat se jím. Jedním z prostředků, na kterém je vidět přístup společnosti k postižení je jazyk. Jazyk hlavně skrz média, konkrétně tedy novin, je nástroj, kterým se dá šířit jednak pozitivní přístup k postižení, ale také negativní v mnoha formách jako je diskriminace, stigmatizace, strachem a nebo předsudcích. Z toho důvodu se zdá být důležité mít přehled o tom jak noviny o postižení mluví. Tato bakalářská práce se na tuto problematiku rozhodla soustředit, konkrétně na problematiku frekvence slov týkající se duševních nemocí v amerických novinách za posledních třicet let. Zároveň porovnává tři hlavní americké noviny mezi sebou a hledá nějaké vzory, které by se dali aplikovat pro pochopení jakým způsobem se zobrazení duševních nemocí v rámci histori změnilo nebo vyvíjelo. Dále pak už je v úvodu zahrnuto pouze krátké shrnutí budoucích kapitol.

Teoretická část této práce je rozdělena na tři kapitoly. První kapitola představuje postižení do hloubky pro lepší pochopení problematiky. Začíná s definicí, která je velmi složitá a mnohotvárná. Rozdílné zdroje nabízí rozdílné definice. Je zde nabídnuta jak definice z *Handbook of Disability studies* tak zákonu s názvem *The American with Disabilities Act* z roku 1990, který napomohl postiženým lidem k lepším právům v USA. Nakonec je zde prezentována definice z National Center on Disability and Journalism a Světové zdravotnické organizace. Následně tato práce nabízí několik způsobů rozdělení postižení soustředíce se na to od Světové zdravotnické organizace, protože to bylo použito pro tuto práci. Konkrétně se jmenuje ICD-11 a bylo naposled updatováno v roce 2021 po tom co ho v ruce 2001 schválilo 191 zemí. Následuje bližší představení duševních nemocí. Ty jsou zase hlavně definovány podle Světové zdravotnické organizace. Zároveň však jsou představeny i další možné komponenty toho konceptu. Následuje kapitola, které se snaží shrnout mnohdy komplikovanou historii postižení. Začíná od dob Starověkého Řecka až po současnost. Blíže přibližuje dobu před kapitalismem, kdy postižení na tom byli mnohdy společensky lépe než po nástupu kapitalismu, kdy nestíhali rychlost doby. Z tohoto důvodu mnohdy zůstali na pospas osudu a museli se uchýlit k žebračení na ulici, které například v USA bylo i nezákonné. Nasledovalo období, kdy se začali zřizovat instituce pro péči o tyto lidi, které ale ne vždy jednali s respektem. Vývoj postižení značně ovlivnila druhá světová válka jednak přístup nacistů k postiženým, ale také množství veteránů, kteří potřebovali začlenění po válce. V posledních pár desetiletích se přístup k postižením markantně zlepšil. Lidé začali utvářet organizace na podporu komunity. To společně s novými vynálezy jako je internet hrálo velkou roli ve změnách, která se konají. Historie postižení avšak není finálně dozkoumaná a zaslouží si další pozornost hlavně kvůli nedostatku zdrojů a nebo neprobádanosti zdrojů. Tyto mezery jsou mnohdy způsobené tím, že samotný koncept postižení jako jednotného celku vznikl teprve nedávno. Duševní zdraví prošlo fázemi, kdy si lidé mysleli, že nemoc je způsobená slabostí vůle. Někteří lidé byli za svoje nemoce i upalováni. Nakonec stejně jako u ostatního postižení i tito lidé byli zavíráni do asylových domů s mnohdy pochybným zacházením. K vylepšení situace došlo s vynálezem léků v padesátých letech minulého století. Po historii přichází kapitola, která dává pár příkladů z vývoje terminologie týkající se postižení, ačkoliv nepopisuje vývoj celkový, protože to je velmi náročná a mnohdy neprobádaná akademická oblast.

Druhá část teoretické kapitoly představuje zobrazení postižení v médiích. Zdůrazňuje důležitost zkoumání této problematiky z důvodu toho, že média mnohdy formulují názory lidí. Jsou zde prezentovány některé modely skrz které se o postižení mluví. Řadově jsou to medicínský, společenský, “supercrip”, civilní, kulturní pluralistický, business a spotřebitelský model. Zároveň je prezentovaná méně používaná varianta modelů od Retiefa Letšosa, která dělí modely trochu jinak. Dále je zde definice stigmatizace jako důležitého aspektu této problematiky. Stigmatizace nadále zůstává součástí zobrazení postižení v médiích a přispívá v některých případech k negativnímu zacházení s postiženými. Nasledující pod kapitola představuje současné preference v rámci mluvení o postižení, které zahrnují něco čemu se v angličtině říká “people-first” a “identity-first” jazyk, který se zabývá pozicí slova o postižení ve vrázi. Oba přístupy jsou využívány a v rámci vývoje jazyka se přetahují o tom, který je správnější. Další kapitola je rozsáhlejší, protože zahrnuje výzkumy, které se zabývaly duševním zdravím v novinách. V rámci frekvence mnoho minulých výzkumů není a tak se tato práce opírala o výzkumy dělané v Kanadě a Velké Británii, které ve většina říkali, že frekvence slov by měla stoupat. V jejich prápadě aspoň bylo ukázáno, že frekvence článků stoupá. Dále pak kapitola prezentuje studie, které poukázali na negativní kontext článků, ve kterém se tyto slova objevují. Ať už se jedná o spojení s kriminalitou nebo nebezpečím tento koncept přetrvává, na čemž se shodne několik zmíněných studií. Zároveň se tato kapitola krátce zmiňuje o rozdílném přístupu k rozným slovům jakými jsou deprese nebo schizofrenie.

V poslední části teoretické kapitoly je prezentován list slov, která byla použita pro analýzu. Počínajíc představením organizace National Center on Disability and Journalism, která list pro novináře vytvořila, pokračujíc představením prohlížeče ICD-11, který byl využit pro přiřazení slov k cílené kategorii postižení. Následně nadchází krátké představní listu a jejího slov.

V metodologické části je popsáno jak byl list zeditován, aby vyhovoval analýze slov, což zahrnovalo seskupení některých slov a vyřazení některých, která nebyla patřičná jako třeba slova popisující místo. Dále pak je více přiblížen Korpus Současné Americké Angličtiny a jakým způsobem byla slova extrahována a zpracovávána. Vše bylo dělané pomocí Microsoft Excel a jeho vzorců. Data

musela projít normalizací z důvodu rozdílných slov, který korpus obsahoval. V závěru této kapitoly bylo řečeno, že bakalářská práce očekává nárůst ve frekvenci slov.

Následující část obsahující výsledky začala s daty, které nebyly normalizovány a slouží pouze pro přehled. Zde bylo vidět, že data neukazují linární křivku a mnohá slova se od sebe velmi liší. Největší frekvenci slova zaznamenala v rocích 2013 až 2015. Slova nedoporučována NCJD všechny zobrazovala rozdílný vývoj a nenaznačovala, že bych se jich novináři úplně vzdali. Jediný výzaz, který zobrazil očekávané výsledky byl “addict/addiction”. Další část se soustředila na tři vybrané noviny – New York Times, USA Today a Washington Post. Každé noviny ukázaly jiný trend, ale po zkoumání jejich souhrné průměrné frekve zde šlo opět vyzorovat pokled v posledních pár letech předcházející nárůstem v roce 2015. Všechny tři noviny byly zkoumány i odděleně. Výsledky byly nejen ovlivněné třemi nejvíce frekventovanými slovy, ale také nevysvětlenými náhodnými výkyvy jednotlivých slov. Žádné z těchto výkyvů se nezdály vykazovat nějaký vzorech, ze kterého by se dal vyvodit závěr. Zároveň slova nedoporučovaná v každých novinách měla jiný vývoj, ale ve většině se nadále objevovala ve člancích ačkoliv v malé míře.

Závěrečná kapitola tedy pouze shrnula celý výzkum, porovnala ho s předešlými studiiemi a spíše doporučila hlubší výzkum v budoucnosti. Korpus nedodal dostatečná data k vysvětlení oněch výkyvů a kapacita této práce ani nedovolila se navíc soustředit na kontext všech slov, která byla zkoumaná. Nějaké zvýšení bylo zpozorováno ale nejdůležitějším poznatkem této práce byla motivace k dalším studiím, která by dopomohla k lepšímu pochopení zkoumané problematiky.

## 9. Appendix

### 1) Tables exhibiting data of all occurrences in all newspapers in COCA corpora

	Addict Addiction	ADHD, attention- deficit, Hyperactivity disorder	Alcoholism alcoholic	Asperger's Asperger's syndrome	Autism Autism spectrum disorder Autistic	Behavioral health	Bipolar disorder	Catatonia Catatonic	Dementia	Depression	Developmental disabilities, Developmental disability	Dissociative identity disorder multiple personality disorder	Dyslexia Dyslexic
2019	163	0	24	0	16	20	5	1	33	47	22	1	1
2018	114	1	19	0	29	38	9	1	16	79	3	0	1
2017	107	1	31	1	46	9	6	1	45	45	5	1	1
2016	105	5	14	2	28	17	9	0	21	97	6	1	0
2015	106	3	43	1	26	9	3	2	31	166	5	0	2
2014	49	1	22	1	71	20	21	0	34	94	5	0	8
2013	79	34	32	9	73	14	11	3	40	93	9	0	2
2012	92	3	43	4	44	8	3	2	25	59	11	3	7
2011	47	33	32	2	58	5	6	0	30	58	6	0	3
2010	66	15	24	6	40	1	2	2	21	58	7	1	3
2009	49	1	32	1	36	10	6	2	10	60	14	1	2
2008	41	6	25	4	42	2	8	0	5	41	3	0	1
2007	45	5	46	2	62	0	6	0	7	67	4	0	16
2006	63	7	42	0	11	2	5	0	8	66	1	0	7
2005	42	3	30	0	8	1	12	1	8	59	0	1	6
2004	72	8	46	1	23	1	10	1	7	83	2	1	3
2003	59	41	19	1	54	1	12	0	4	43	2	0	2
2002	48	2	21	0	35	1	1	1	15	42	1	0	2
2001	40	7	30	0	15	2	3	1	8	51	3	0	5
2000	34	0	28	0	61	2	3	0	5	75	1	0	3
1999	66	5	50	0	17	1	3	1	17	86	22	0	5
1998	31	0	30	0	15	0	0	0	6	83	3	3	4
1997	39	0	44	0	11	1	2	0	5	52	10	0	2
1996	50	2	31	0	7	0	1	0	9	49	3	2	3
1995	63	11	52	1	3	1	0	1	3	74	2	0	4
1994	70	1	71	0	25	0	0	1	11	72	1	0	1
1993	44	0	61	0	28	0	0	1	7	101	0	2	0
1992	44	0	72	0	0	2	0	1	1	78	1	0	2
1991	58	0	65	0	3	0	0	1	5	49	1	0	3
1990	71	0	86	0	0	0	0	0	0	33	1	1	1

Table 2 - Words and their frequency in all newspapers – part 1 (Source: COCA)

	Insanity	Intellectual disabilities Intellectually disabled	Learning disability	Mental illness Mental disorder	Mentally deranged	Obsessive- compulsive disorder OCD	Post- traumatic stress disorder PTSD	Psycho Psychotic	Psychosis	Retarded	Senility	Schizophreni a Schizophreni c	Tourette syndrom e Tourette' s syndrom
2019	10	0	4	58	8	0	12	6	2	2	0	20	0
2018	15	3	1	76	1	0	24	2	1	4	0	25	0
2017	13	3	0	62	8	0	20	4	2	0	0	11	0
2016	20	2	0	72	5	0	34	7	5	1	0	13	0
2015	61	9	1	102	2	1	43	60	13	1	1	53	1
2014	13	2	1	124	5	4	59	9	4	1	1	27	0
2013	54	6	0	126	1	3	39	19	9	0	0	30	0
2012	21	1	0	26	3	4	40	2	3	2	0	8	0
2011	20	2	2	27	7	14	20	4	3	1	0	10	0
2010	7	1	0	33	7	4	24	4	2	0	0	10	0
2009	10	1	6	34	1	1	15	2	3	0	0	11	1
2008	5	5	5	43	1	2	42	3	2	1	0	9	1
2007	6	0	1	25	7	0	16	2	2	6	0	15	0
2006	7	0	4	24	2	1	4	3	1	3	1	5	3
2005	3	0	2	22	6	0	44	13	7	2	1	11	3
2004	4	0	2	33	4	0	5	8	4	4	0	27	1
2003	6	0	2	30	3	0	5	5	2	32	0	20	1
2002	8	0	0	25	5	1	9	10	1	6	0	16	0
2001	12	0	0	17	8	0	5	7	2	10	1	11	0
2000	7	0	3	15	1	0	4	1	0	11	1	11	0
1999	20	0	2	56	5	0	0	9	3	11	0	15	2
1998	12	0	1	22	3	0	4	1	3	28	0	15	0
1997	14	0	0	30	5	1	3	4	0	25	2	18	0
1996	7	0	5	15	0	0	0	4	3	15	0	9	1
1995	16	0	0	25	8	0	0	14	8	34	1	29	0
1994	24	0	2	16	2	0	0	13	0	26	0	14	1
1993	17	0	2	21	1	0	2	5	1	28	1	15	1
1992	5	0	0	11	1	1	1	7	3	29	2	17	0
1991	18	1	1	13	1	2	6	4	2	20	0	8	0
1990	7	0	1	16	1	0	0	7	5	44	0	6	0

Table 3 - Words and their frequency in all newspapers – part 2 (Source: COCA)

## 2) Tables exhibiting data of normalized frequency in three chosen newspapers in COCA corpora

	Addict Addiction	ADHD, attention- deficit, Hyperacti vity disorder	Alcoholism - alcoholic	Asperger's Asperger's syndrome	Autism Autism spectrum disorder Autistic	Behavioral health	Bipolar disorder	Catonia Catatonic	Dementia	Depression	Developmental disabilities, Developmental disability	Dissociative identity disorder multiple personality disorder
2019	7,8	0,0	0,0	0,0	0,0	0,0	0,0	0,0	7,8	7,8	0,0	0,0
2018	18,3	0,0	0,0	0,0	9,1	4,6	0,0	0,0	0,0	27,4	0,0	0,0
2017	19,5	0,0	0,0	0,0	4,9	0,0	0,0	0,0	0,0	9,8	0,0	0,0
2016	6,3	0,0	0,0	0,0	0,0	0,0	6,3	0,0	6,3	94,2	6,3	0,0
2015	49,8	0,0	4,7	0,0	9,5	0,0	0,0	0,0	7,1	35,6	0,0	0,0
2014	4,7	0,0	9,4	0,0	4,7	2,3	16,4	0,0	7,0	37,5	4,7	0,0
2013	7,1	2,4	7,1	2,4	7,1	2,4	2,4	0,0	2,4	14,1	4,7	0,0
2012	74,3	0,0	20,3	0,0	74,3	13,5	0,0	2,3	2,3	20,3	0,0	0,0
2011	23,2	0,0	13,9	2,3	13,9	4,6	0,0	0,0	13,9	18,5	2,3	0,0
2010	10,2	0,0	2,5	0,0	0,0	0,0	0,0	0,0	10,2	7,6	0,0	0,0
2009	9,1	0,0	11,4	0,0	11,4	0,0	0,0	0,0	0,0	22,8	0,0	0,0
2008	11,5	2,9	0,0	0,0	0,0	0,0	0,0	0,0	2,9	11,5	0,0	0,0
2007	19,0	7,6	3,8	0,0	9,5	0,0	1,9	0,0	0,0	7,6	0,0	0,0
2006	13,1	2,6	0,0	0,0	0,0	0,0	0,0	0,0	0,0	15,7	0,0	0,0
2005	16,9	2,8	2,8	0,0	2,8	0,0	0,0	0,0	0,0	11,2	0,0	0,0
2004	14,4	2,9	11,5	0,0	0,0	0,0	0,0	0,0	2,9	25,9	0,0	0,0
2003	3,1	3,1	3,1	0,0	24,8	0,0	12,4	0,0	0,0	21,7	0,0	0,0
2002	21,9	0,0	3,1	0,0	0,0	0,0	0,0	3,1	0,0	21,9	0,0	0,0
2001	17,9	0,0	6,0	0,0	17,9	0,0	0,0	0,0	6,0	3,0	0,0	0,0
2000	5,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0	5,1	17,9	0,0	0,0
1999	37,1	0,0	17,3	0,0	5,0	0,0	2,5	0,0	9,9	32,2	0,0	0,0
1998	36,9	0,0	10,5	0,0	13,2	0,0	0,0	0,0	10,5	26,3	0,0	0,0
1997	2,6	0,0	2,6	0,0	2,6	0,0	0,0	0,0	0,0	13,1	0,0	0,0
1996	26,4	2,9	5,9	0,0	0,0	0,0	0,0	0,0	0,0	14,7	0,0	0,0
1995	8,4	30,8	5,6	0,0	2,8	0,0	0,0	0,0	2,8	16,8	2,8	0,0
1994	23,3	3,3	33,3	0,0	6,7	0,0	0,0	0,0	6,7	23,3	0,0	0,0
1993	14,3	0,0	9,5	0,0	0,0	0,0	0,0	0,0	0,0	28,5	0,0	0,0
1992	4,5	0,0	4,5	0,0	0,0	4,5	0,0	2,2	0,0	11,2	0,0	0,0
1991	11,1	0,0	7,4	0,0	3,7	0,0	0,0	0,0	0,0	5,6	0,0	0,0
1990	9,6	0,0	12,8	0,0	0,0	0,0	0,0	0,0	0,0	9,6	0,0	0,0

Table 4 - normalized frequency in USAToday – part 1 (Source: COCA)

	Dyslexia Dyslexic	Insanity	Intellectual disabilities Intellectually disabled	Learning disability	Mental illness Mental disorder	Mentally deranged	Obsessive- compulsive disorder OCD	Post- traumatic stress disorder PTSD	Psycho Psychotic	Psychosis	Retarded	Senility	Schizophrenia Schizophrenic	Tourette syndrome Tourette's syndrome
2019	0,0	0,0	0,0	0,0	3,9	0,0	0,0	7,8	0,0	0,0	0,0	0,0	0,0	0,0
2018	4,6	0,0	0,0	0,0	4,6	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2017	0,0	0,0	0,0	0,0	9,8	4,9	0,0	0,0	4,9	0,0	0,0	0,0	0,0	0,0
2016	0,0	0,0	6,3	0,0	18,8	6,3	0,0	44,0	6,3	0,0	0,0	0,0	0,0	0,0
2015	0,0	0,0	2,4	0,0	7,1	0,0	0,0	11,9	2,4	0,0	0,0	0,0	0,0	0,0
2014	4,7	0,0	0,0	0,0	98,5	0,0	0,0	9,4	2,3	0,0	0,0	16,4	0,0	0,0
2013	0,0	0,0	0,0	0,0	40,0	0,0	2,4	7,1	4,7	2,4	0,0	0,0	4,7	0,0
2012	0,0	0,0	0,0	0,0	4,5	2,3	2,3	18,0	0,0	0,0	0,0	0,0	0,0	0,0
2011	0,0	2,3	0,0	0,0	2,3	0,0	4,6	11,6	2,3	2,3	0,0	0,0	0,0	0,0
2010	0,0	5,1	0,0	0,0	0,0	0,0	0,0	2,5	0,0	0,0	0,0	0,0	0,0	0,0
2009	0,0	0,0	0,0	0,0	0,0	0,0	0,0	9,1	0,0	0,0	0,0	0,0	0,0	0,0
2008	2,9	2,9	0,0	0,0	0,0	0,0	0,0	20,2	0,0	0,0	0,0	0,0	2,9	0,0
2007	1,9	3,8	0,0	0,0	1,9	0,0	0,0	1,9	0,0	0,0	0,0	0,0	7,6	0,0
2006	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2005	5,6	2,8	0,0	5,6	2,8	0,0	0,0	8,4	0,0	0,0	0,0	0,0	0,0	0,0
2004	0,0	11,5	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,9	0,0	0,0	0,0	8,6
2003	0,0	0,0	0,0	0,0	3,1	0,0	0,0	3,1	0,0	0,0	0,0	0,0	6,2	0,0
2002	0,0	6,3	0,0	0,0	6,3	3,1	3,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2001	6,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	6,0	0,0
2000	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
1999	0,0	2,5	0,0	0,0	24,8	2,5	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
1998	0,0	2,6	0,0	0,0	5,3	2,6	0,0	0,0	0,0	0,0	0,0	0,0	13,2	0,0
1997	0,0	0,0	0,0	0,0	0,0	2,6	0,0	5,2	5,2	0,0	0,0	5,2	0,0	0,0
1996	0,0	0,0	0,0	0,0	2,9	0,0	0,0	0,0	5,9	0,0	0,0	0,0	0,0	0,0
1995	0,0	5,6	0,0	0,0	0,0	2,8	0,0	0,0	2,8	0,0	0,0	0,0	5,6	0,0
1994	0,0	6,7	0,0	0,0	6,7	0,0	0,0	0,0	3,3	0,0	0,0	0,0	3,3	0,0
1993	0,0	4,8	0,0	0,0	11,9	0,0	0,0	2,4	2,4	0,0	0,0	0,0	7,1	0,0
1992	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	4,5	0,0	0,0	2,2	4,5	0,0
1991	0,0	1,9	0,0	0,0	0,0	0,0	0,0	1,9	1,9	0,0	0,0	0,0	1,9	0,0
1990	0,0	0,0	0,0	0,0	0,0	1,6	0,0	0,0	1,6	0,0	1,6	1,6	1,6	0,0

Table 5 - normalized frequency in USAToday – part 2 (Source: COCA)

	Addict Addiction	ADHD, attention- deficit, Hyperacti- vity disorder	Alcoholism alcoholic	Asperger's Asperger's syndrome	Autism Autism spectrum disorder Autistic	Behavioral health	Bipolar disorder	Catatonia Catatonic	Dementia	Depression	Developmental disabilities, Developmental disability	Dissociative identity disorder multiple personality disorder
2019	23,5	0,0	3,9	0,0	0,0	0,0	0,0	0,0	0,0	23,5	0,0	0,0
2018	4,4	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	4,4	0,0	0,0
2017	22,9	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	13,7	4,6	0,0
2016	6,2	0,0	12,4	0,0	0,0	0,0	0,0	0,0	0,0	0,0	6,2	0,0
2015	21,4	0,0	2,7	0,0	18,8	0,0	0,0	0,0	42,9	265,3	0,0	0,0
2014	10,0	0,0	2,5	0,0	32,6	10,0	0,0	0,0	10,0	7,5	5,0	0,0
2013	12,8	2,6	2,6	2,6	7,7	0,0	2,6	0,0	40,9	46,0	0,0	7,7
2012	2,4	4,9	0,0	0,0	4,9	2,4	0,0	0,0	14,6	19,5	0,0	17,1
2011	15,2	78,5	10,1	0,0	7,6	0,0	0,0	0,0	5,1	2,5	5,1	0,0
2010	11,9	0,0	9,5	0,0	7,1	0,0	0,0	0,0	2,4	19,0	0,0	4,8
2009	7,4	2,5	4,9	0,0	19,7	0,0	2,5	0,0	19,7	4,9	0,0	4,9
2008	17,0	9,7	7,3	9,7	31,6	2,4	0,0	0,0	0,0	31,6	0,0	0,0
2007	14,4	4,8	4,8	0,0	14,4	0,0	4,8	0,0	9,6	38,3	0,0	4,8
2006	5,2	2,6	7,8	0,0	5,2	0,0	0,0	0,0	2,6	10,4	0,0	0,0
2005	0,0	2,4	12,1	0,0	0,0	2,4	4,8	0,0	2,4	31,5	2,4	0,0
2004	2,4	0,0	12,1	0,0	0,0	0,0	0,0	0,0	4,8	14,5	0,0	0,0
2003	7,5	0,0	7,5	0,0	0,0	0,0	0,0	0,0	0,0	2,5	5,0	0,0
2002	0,0	2,6	0,0	0,0	0,0	2,6	0,0	0,0	0,0	5,2	0,0	0,0
2001	7,7	2,6	0,0	0,0	0,0	0,0	0,0	0,0	2,6	10,2	0,0	0,0
2000	0,0	0,0	14,8	0,0	135,8	2,5	0,0	0,0	0,0	19,7	0,0	0,0
1999	8,6	0,0	21,5	0,0	0,0	0,0	0,0	0,0	0,0	8,6	2,1	12,9
1998	0,0	0,0	4,4	0,0	2,2	0,0	0,0	0,0	0,0	19,6	0,0	0,0
1997	11,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,2	11,1	2,2	0,0
1996	10,8	0,0	4,3	0,0	2,2	0,0	0,0	0,0	0,0	8,6	0,0	0,0
1995	4,1	0,0	18,3	0,0	0,0	0,0	0,0	0,0	0,0	4,1	2,0	0,0
1994	13,2	0,0	11,7	0,0	7,3	0,0	0,0	0,0	11,7	24,9	0,0	0,0
1993	10,4	0,0	28,4	0,0	0,0	0,0	0,0	0,0	1,5	50,7	0,0	0,0
1992	4,7	0,0	28,1	0,0	0,0	0,0	0,0	0,0	0,0	48,3	0,0	0,0
1991	19,6	0,0	34,8	0,0	0,0	0,0	0,0	0,0	4,5	16,6	0,0	0,0
1990	24,9	0,0	44,7	0,0	0,0	0,0	0,0	0,0	0,0	9,9	0,0	0,0

Table 6 - normalized frequency in Washington Post – part 1 (Source: COCA)

	Dyslexia Dyslexic	Insanity	Intellectual disabilities Intellectually disabled	Learning disability	Mental illness Mental disorder	Mentally deranged	Obsessive- compulsive disorder OCD	Post- traumatic stress disorder PTSD	Psycho Psychotic	Psychosis	Retarded	Senility	Schizophrenia Schizophrenic	Tourette syndrome Tourette's syndrome
2019	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	3,9	0,0	0,0	0,0	0,0	0,0
2018	0,0	0,0	4,4	0,0	0,0	13,3	0,0	22,2	0,0	0,0	0,0	0,0	4,4	0,0
2017	4,6	0,0	0,0	0,0	0,0	22,9	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2016	0,0	0,0	6,2	0,0	0,0	0,0	0,0	6,2	0,0	0,0	0,0	0,0	0,0	0,0
2015	0,0	2,7	2,7	0,0	0,0	16,1	0,0	2,7	2,7	0,0	0,0	0,0	0,0	0,0
2014	0,0	0,0	5,0	0,0	0,0	32,6	0,0	0,0	0,0	0,0	0,0	0,0	2,5	0,0
2013	0,0	0,0	2,6	2,6	0,0	33,3	0,0	0,0	2,6	7,7	0,0	0,0	12,8	0,0
2012	4,9	0,0	0,0	2,4	0,0	9,7	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2011	0,0	0,0	7,6	2,5	5,1	5,1	17,7	0,0	2,5	0,0	0,0	0,0	5,1	0,0
2010	0,0	0,0	2,4	0,0	0,0	16,6	9,5	2,4	0,0	0,0	0,0	0,0	0,0	0,0
2009	2,5	2,5	0,0	2,5	0,0	22,1	0,0	2,5	0,0	2,5	0,0	0,0	2,5	0,0
2008	0,0	0,0	0,0	12,2	12,2	60,8	0,0	2,4	2,4	0,0	0,0	0,0	9,7	0,0
2007	0,0	0,0	0,0	0,0	0,0	19,2	0,0	28,8	0,0	0,0	0,0	0,0	0,0	0,0
2006	0,0	0,0	0,0	0,0	0,0	2,6	0,0	0,0	0,0	0,0	2,6	0,0	0,0	0,0
2005	0,0	2,4	2,4	0,0	0,0	12,1	0,0	0,0	7,3	0,0	0,0	0,0	12,1	0,0
2004	0,0	2,4	0,0	0,0	2,4	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,4	0,0
2003	0,0	0,0	5,0	0,0	0,0	5,0	0,0	0,0	2,5	0,0	0,0	0,0	10,0	0,0
2002	0,0	2,6	0,0	0,0	0,0	5,2	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2001	0,0	0,0	2,6	0,0	0,0	2,6	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2000	0,0	0,0	0,0	0,0	0,0	2,5	0,0	2,5	0,0	0,0	2,5	0,0	9,9	0,0
1999	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	10,7	0,0	2,1	0,0
1998	0,0	2,2	2,2	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,2	0,0	4,4	0,0
1997	0,0	0,0	15,5	0,0	0,0	4,4	0,0	0,0	0,0	0,0	0,0	0,0	8,9	0,0
1996	4,3	0,0	2,2	0,0	4,3	2,2	0,0	0,0	2,2	2,2	0,0	0,0	0,0	0,0
1995	0,0	2,0	2,0	0,0	0,0	10,2	0,0	0,0	0,0	0,0	6,1	0,0	0,0	0,0
1994	0,0	1,5	2,9	0,0	0,0	1,5	0,0	0,0	0,0	0,0	8,8	0,0	4,4	1,5
1993	0,0	0,0	9,0	0,0	1,5	4,5	0,0	0,0	1,5	0,0	4,5	0,0	3,0	0,0
1992	0,0	0,0	0,0	0,0	0,0	4,7	0,0	0,0	0,0	1,6	9,4	0,0	6,2	0,0
1991	0,0	4,5	10,6	0,0	1,5	4,5	0,0	1,5	0,0	0,0	12,1	0,0	1,5	0,0
1990	0,0	0,0	2,5	0,0	0,0	7,5	1,2	0,0	0,0	3,7	11,2	0,0	2,5	0,0

Table 7 - normalized frequency in Washington Post – part 2 (Source: COCA)



	Addict Addiction	ADHD, attention- deficit, Hyperacti vity disorder	Alcoholism alcoholic	Asperger's Asperger's syndrome	Autism Autism spectrum disorder Autistic	Behavioral health	Bipolar disorder	Catatonia Catatonic	Dementia	Depression	Developmental disabilities, Developmental disability	Dissociative identity disorder multiple personality disorder
2019	50,4	0,0	7,2	0,0	7,2	0,0	0,0	0,0	3,6	25,2	0,0	0,0
2018	24,8	0,0	3,5	0,0	3,5	0,0	0,0	0,0	0,0	31,9	0,0	0,0
2017	4,8	0,0	9,5	0,0	9,5	9,5	0,0	0,0	9,5	4,8	0,0	0,0
2016	6,5	0,0	0,0	0,0	6,5	0,0	0,0	0,0	19,4	38,7	0,0	0,0
2015	9,5	0,0	9,5	0,0	2,4	2,4	0,0	0,0	0,0	19,1	2,4	0,0
2014	16,6	2,4	7,1	0,0	4,7	2,4	4,7	0,0	4,7	16,6	0,0	0,0
2013	23,5	2,4	11,8	0,0	0,0	0,0	0,0	0,0	9,4	14,1	0,0	0,0
2012	8,9	0,0	13,3	4,4	6,7	0,0	2,2	0,0	6,7	11,1	0,0	0,0
2011	20,1	0,0	4,5	0,0	13,4	0,0	0,0	0,0	8,9	35,8	8,9	0,0
2010	15,2	0,0	4,4	0,0	2,2	0,0	0,0	0,0	0,0	19,6	0,0	0,0
2009	14,3	0,0	19,1	0,0	40,6	0,0	4,8	0,0	0,0	31,1	0,0	0,0
2008	9,5	0,0	7,1	0,0	4,7	0,0	0,0	0,0	0,0	4,7	0,0	0,0
2007	9,7	0,0	21,3	0,0	87,1	0,0	5,8	0,0	1,9	42,6	3,9	0,0
2006	18,2	2,0	6,1	0,0	0,0	0,0	6,1	0,0	6,1	30,4	0,0	0,0
2005	12,7	0,0	2,1	0,0	0,0	0,0	8,5	0,0	6,3	6,3	0,0	0,0
2004	12,1	0,0	6,1	0,0	0,0	0,0	0,0	0,0	0,0	8,1	0,0	0,0
2003	26,2	0,0	0,0	0,0	6,1	0,0	2,0	0,0	2,0	8,1	0,0	0,0
2002	10,5	0,0	0,0	0,0	6,1	0,0	2,0	0,0	2,0	8,1	0,0	0,0
2001	17,7	0,0	13,7	0,0	0,0	0,0	0,0	0,0	0,0	15,7	0,0	0,0
2000	23,8	0,0	2,0	0,0	0,0	0,0	0,0	0,0	0,0	19,9	0,0	0,0
1999	18,0	0,0	6,0	0,0	0,0	0,0	0,0	0,0	6,0	24,0	0,0	0,0
1998	2,0	0,0	2,0	0,0	0,0	0,0	0,0	0,0	0,0	21,7	0,0	0,0
1997	11,8	0,0	3,9	0,0	0,0	0,0	0,0	0,0	3,9	5,9	0,0	0,0
1996	2,0	0,0	4,0	0,0	0,0	0,0	0,0	0,0	0,0	6,0	0,0	0,0
1995	27,6	0,0	11,8	0,0	0,0	0,0	0,0	0,0	0,0	35,5	0,0	0,0
1994	22,5	0,0	16,4	0,0	28,6	0,0	0,0	0,0	0,0	30,7	2,0	0,0
1993	9,4	0,0	7,5	0,0	0,0	0,0	0,0	1,9	1,9	18,7	0,0	0,0
1992	9,9	0,0	29,6	0,0	0,0	0,0	0,0	0,0	0,0	9,9	0,0	0,0
1991	14,7	0,0	16,4	0,0	0,0	0,0	0,0	1,6	0,0	6,6	0,0	0,0
1990	18,9	0,0	13,7	0,0	0,0	0,0	0,0	0,0	0,0	10,3	0,0	0,0

Table 9 - normalized frequency in New York Times – part 1 (Source: COCA)

	Dyslexia Dyslexic	Insanity	Intellectual disabilities Intellectually disabled	Learning disability	Mental illness Mental disorder	Mentally deranged	Obsessive- compulsive disorder OCD	Post- traumatic stress disorder PTSD	Psycho Psychotic	Psychosis	Retarded	Senility	Schizophrenia Schizophrenic	Tourette syndrome Tourette's syndrome
2019	0,0	0,0	0,0	0,0	10,8	3,6	0,0	0,0	0,0	0,0	7,2	0,0	3,6	0,0
2018	0,0	3,5	0,0	0,0	3,5	0,0	0,0	3,5	3,5	0,0	0,0	0,0	0,0	0,0
2017	0,0	0,0	0,0	0,0	23,8	9,5	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
2016	0,0	0,0	0,0	0,0	25,8	0,0	0,0	45,2	12,9	6,5	0,0	0,0	0,0	0,0
2015	0,0	2,4	4,8	2,4	7,1	4,8	0,0	2,4	0,0	0,0	0,0	2,4	0,0	0,0
2014	0,0	0,0	0,0	0,0	7,1	2,4	2,4	9,5	0,0	2,4	2,4	0,0	9,5	0,0
2013	0,0	25,9	0,0	0,0	11,8	0,0	0,0	2,4	0,0	0,0	0,0	0,0	9,4	0,0
2012	2,2	2,2	0,0	0,0	4,4	0,0	0,0	2,2	0,0	4,4	2,2	0,0	4,4	0,0
2011	0,0	4,5	0,0	0,0	2,2	0,0	0,0	8,9	0,0	0,0	0,0	0,0	2,2	0,0
2010	0,0	0,0	0,0	0,0	2,2	2,2	0,0	2,2	4,4	0,0	0,0	0,0	0,0	0,0
2009	0,0	2,4	0,0	2,4	23,9	0,0	0,0	4,8	0,0	0,0	0,0	0,0	2,4	0,0
2008	0,0	0,0	0,0	0,0	4,7	0,0	2,4	0,0	0,0	2,4	0,0	0,0	4,7	0,0
2007	0,0	3,9	0,0	0,0	5,8	1,9	0,0	0,0	0,0	0,0	0,0	0,0	5,8	0,0
2006	8,1	2,0	0,0	4,1	8,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,0
2005	0,0	2,1	0,0	0,0	2,1	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,1	0,0
2004	0,0	0,0	0,0	0,0	2,0	0,0	0,0	0,0	0,0	0,0	2,0	0,0	0,0	0,0
2003	2,0	2,0	0,0	0,0	12,1	0,0	0,0	0,0	0,0	2,0	0,0	0,0	2,0	0,0
2002	2,0	2,0	0,0	0,0	12,1	0,0	0,0	0,0	0,0	2,0	0,0	0,0	2,0	0,0
2001	0,0	0,0	0,0	0,0	0,0	2,0	0,0	2,0	0,0	0,0	0,0	0,0	2,0	0,0
2000	0,0	4,0	0,0	0,0	4,0	0,0	0,0	0,0	0,0	0,0	2,0	0,0	4,0	0,0
1999	0,0	0,0	0,0	0,0	36,0	2,0	0,0	0,0	0,0	0,0	6,0	0,0	8,0	0,0
1998	2,0	0,0	0,0	0,0	3,9	0,0	0,0	2,0	0,0	2,0	9,9	0,0	0,0	0,0
1997	2,0	2,0	0,0	0,0	5,9	0,0	0,0	0,0	3,9	0,0	5,9	0,0	3,9	0,0
1996	0,0	0,0	0,0	4,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0	2,0
1995	0,0	7,9	0,0	0,0	13,8	2,0	0,0	0,0	3,9	2,0	35,5	0,0	35,5	0,0
1994	0,0	0,0	0,0	0,0	14,3	2,0	0,0	0,0	2,0	0,0	6,1	0,0	6,1	0,0
1993	0,0	1,9	0,0	0,0	7,5	0,0	0,0	1,9	0,0	0,0	3,7	1,9	1,9	0,0
1992	2,0	0,0	0,0	0,0	3,9	0,0	0,0	0,0	3,9	2,0	9,9	0,0	65	0,0
1991	0,0	9,8	1,6	0,0	4,9	0,0	0,0	1,6	0,0	0,0	1,6	0,0	3,3	0,0
1990	0,0	3,4	0,0	0,0	3,4	0,0	0,0	0,0	0,0	0,0	36,0	0,0	3,4	0,0

Table 8 - normalized frequency in New York Times – part 2 (Source: COCA)