

## Exclusion in Disability Research.

Valeria Campos.<sup>1</sup>

**Affiliations:** <sup>1</sup>Unidad de Pacientes Especiales, Facultad de Odontología. Universidad de Concepción, Chile.

**Corresponding author:** Valeria Campos. Avenida Roosevelt 1550. Concepción, Chile. Phone: (56-41) 2204232. E-mail: [valeriacamposcannobbio@gmail.com](mailto:valeriacamposcannobbio@gmail.com)

Were you aware that 1 out of every 7 people worldwide has some kind of disability?<sup>1</sup> Thus, the Convention on the Rights of Persons with Disabilities (CRPD) has recognized disability as part of human diversity.<sup>2</sup>

Eleven years after the adoption of this Convention, it is worrying that researchers still use inadequate and undignified terminology to refer to persons with disabilities (PwD). Many scientific articles published in the last decade have caught my attention, in those articles individuals without any disability are described as “normal”, which therefore implies that those who have some kind of disability are “abnormal”. This labeling, which carries the meaning “not like the rest of us”, creates segregation and marginalization, and can be considered an act of discrimination as it affects the dignity of PwD. Other inappropriate concepts that are used in these databases are “handicapped” to refer to PwD, “mentally retarded” to talk about people with mental disabilities, “deaf-mute” or “deaf and dumb” to refer to people with hearing impairment or deaf people, among others.

As long as the PwD are not considered as part of the human experience, the reality, the environment and the needs of these historically, socially, educationally, medically and occupationally excluded patients will never be known. It is our responsibility as health researchers to promote the high-standard treatment of the “normal population”, whether this means “normal without disability” or “normal with disability”.

I call upon health researchers and editors of scientific journals to carry out a thorough review of the terminology used in articles to refer to a person with some kind of disability, and to do this in such a rigorous way as it is done when the methodology of the submitted articles is reviewed. Since most of the researchers and editors have not been trained in this area, they should not hesitate to ask for help and rely on global updated classifications, such as the DSM-5<sup>3</sup> for mental disorders.

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**Conflict of interests:** None.

**Acknowledgements:** None.

**Cite as:** Campos V. Exclusion in Disability Research. *J Oral Res* 2017; 6(6):145.  
[doi:10.17126/joralres.2017.047](https://doi.org/10.17126/joralres.2017.047)