

Manila Women's Forum

A Network of Women Professionals

September 2010

Butterfly Wings

By Penelope Poole

Following the regular round of self introductions, we were introduced to Vaishali (Vaish) Ray, an Indian actress who presented a 50-minute mini-drama she appeared in. Butterfly Wings, directed by Sanjay Arora, was given an "Audience Recognition" award at the We Care Film Festival this year in New Delhi.

Although she holds a degree in Hotel Management from India, Vaish has nurtured a passion for acting since childhood. Following in the footsteps of her theater artist mother, she was

actively involved with stage performances as a girl and went on to become the cultural secretary for her college.

She has performed in the plays Kean, and Caligula, and her Hindi comedy "Neem Hakim" performed by the Sutradhar theatre group. The play became a local success in Hyderabad, her hometown. She is currently an active member of the MMQ theatre group (see info on MMQ below).

Vaish credits her acting skills to her tenure with Sutradhar. She certainly demonstrated her fine acting abilities in Butterfly Wings, where she plays
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What is MMQ?

Michelle Washington, MMQ President and Founder attended MWF to invite us to their Cirque du Cabaret on Sept. 18 – promising a naughty evening of fun and frolic with prizes for the best dressed. Sequins and feathers and shiny things are welcome.

Have you been getting notices through MWF and other groups about MMQ? Have you Googled the acronym and found only references to: Monday Morning Quarterback, Modern Mandolin Quartet, or Master of Medical Qigong?

Even the MMQ Theater's website is coy about the definition, but Michelle Washington and her MMQ team revealed to about thirty of us gathered at MWF chair Lisa Lumbao's home in Urdaneta Village that it stands for Making Miracles Quickly. Michelle was promoting MMQ's black tie fundraising event for the theatre group.

From her enthusiastic description, the production Cirque du Cabaret on September 18 promises to be an evening of fabulous fun and frolic. Not for kids, we were told, and Michelle—the star, producer, director, and promoter—warned us the adult humor was at times a little naughty.

"I hope you can handle it," she warned.

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Cecilia Leung, Vaish Ray (speaker), and Michelle Washington

April MWF Meeting ■ **When:** Monday, 2010 September 20, 6:30 p.m. **What:** Raju Mandhyan, author, coach and trainer, will speak about how you can improve your public speaking skills and develop and conduct seminars as a part-time business—how to package your expertise into something you can sell, how to present yourself, and how to communicate effectively. **Where:** Eli Fossum's home, 205 Country Club Drive, Ayala Alabang Village, Muntinlupa City. (Let Lisa Lumbao know if you want to carpool from Makati.) **Bring:** Something to share for the potluck dinner. **October meeting:** Monday, 2010 October 18.

From Butterfly Wings and the We Care Film Fest to “people first” language, appropriate terminology, disability portrayal issues, and the origin of the term “handicap”.



KaWoMeNaN

Selected and edited by
Beulah Pedregosa Taguiwalo

“People First” language

The American Psychological Association style guide states that, when identifying a person with an impairment, the person’s name or pronoun should come first, and descriptions of the impairment/disability should be used so that the impairment is identified, but is not modifying the person. Improper examples are “a borderline”, “a blind person”, or “an autistic boy”. More acceptable terminology includes “a woman with Down syndrome” or “a man who has schizophrenia”.

It also states that a person’s adaptive equipment should be described functionally as something that assists a person, not as something that limits a person, e.g. “a woman who uses a wheelchair” rather than “a woman in/confined to a wheelchair.”

The term “handicap”

Some people with disabilities do not like the term “handicap” because they believe that it originally meant someone who could not work and went begging with their cap in hand.

This, however, appears to not be the true origin of the word. It originated in a lottery game known as Hand In Cap in the 1600s which involved players placing money in a cap. It moved later into horse racing where it meant bringing the strongest competitors back to the field by

giving them extra weight to carry.

In golf, it became the number of strokes a player could subtract from his score to give him a chance against better players, so a bigger handicap is actually an advantage in golf. Only in 1915 did it become a term to describe disabled people.

Disability rights movement

The disability rights movement, led by individuals with disabilities, began in the 1970s. This self-advocacy is often seen as largely responsible for the shift toward independent living and accessibility. The term “Independent Living” was taken from 1959 California legislation which enabled people who had acquired a disability due to polio to leave hospital wards and move back into the community with the help of cash benefits for the purchase of personal assistance with the activities of daily living.

Disability issues

Political rights, social inclusion, and citizenship. In developed countries, the debate has moved beyond a concern about the perceived cost of maintaining dependent people with disabilities to an effort of finding effective ways to ensure that people with disabilities can participate in and contribute to society in all spheres of life.

Many are concerned, however, that the greatest need is in developing nations—where the vast bulk of the estimated 650 million people with disabilities reside. A great deal of work is needed to address concerns ranging from accessibility and education to self-empowerment and self-supporting employment and beyond.

Disability Studies

For any program describing itself as “Disability Studies”, one of the guidelines offered by The Society for Disability Studies is this:

It should challenge the view of disability as an individual deficit or defect that can be remedied solely through medical intervention or rehabilitation by “experts” and other service providers. Rather, a program in disability studies should explore

models and theories that examine social, political, cultural, and economic factors that define disability and help determine personal and collective responses to difference.

At the same time, Disability Studies should work to de-stigmatize disease, illness, and impairment, including those that cannot be measured or explained by biological science.

Finally, while acknowledging that medical research and intervention can be useful, Disability Studies should interrogate the connections between medical practice and stigmatizing disability.

Appropriate terminology

1. Able-bodied: Refers to a person who does not have disability. “Non-disabled” or “does not have a disability” is preferred. “Able-bodied” comes from a “physical ability” perspective, excluding the majority of people with disabilities. It also implies people with disabilities do not have “able” bodies. The term “non-disabled” or the phrase “does not have a disability” is the most neutral.

2. ADHD (Attention Deficit Hyperactivity Disorder): ADHD is a syndrome of learning and behavioural problems that is not caused by any serious underlying physical or mental disorder and is characterized especially by difficulty in sustaining attention, impulsive behaviour, and usually by excessive activity. Do not say hyperactive. Say person with ADHD.

3. Afflicted with: These terms come with the assumption that a person with a disability is in fact suffering or living a reduced quality of life. Instead, use neutral language when describing a person who has a disability. Not every person with a disability “suffers” is a “victim” or “stricken”. Instead simply state the facts about the nature of the person’s disability. For example, “He has muscular dystrophy” or use [the] term “acquired disability” to describe the affliction causing disability.

4. ASL: American Sign Language, a language used by deaf community of America to communicate.

5. Assistance animal: (also see “guide dog”, “seeing eye dog”, “service
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People with Disabilities: Portrayal Issues

Please consider the following when writing about people with disabilities:

Do Not Focus on Disability unless it is crucial to a story. Avoid tear-jerking human interest stories about incurable diseases, congenital impairments, or severe injury. Focus instead on issues that affect the quality of life for those same individuals, such as accessible transportation, housing, affordable health care, employment opportunities, and discrimination.

Do Not Portray Successful People with Disabilities as Superhuman or Heroes. Even though the public may admire superachievers, portraying people with disabilities as superstars raises false expectations that all people with disabilities should achieve this level.

Do Not Sensationalize a Disability by saying afflicted with, crippled with, suffers from, victim of, and so on. Instead, say person who has multiple sclerosis.

Do Not Use Generic Labels for disability groups, such as "the retarded", "the deaf". Emphasize people, not labels. Say people with mental retardation or people who are deaf.

Put People First, not their disability. Say woman with arthritis, children who are deaf, people with disabilities. This puts the focus on the individual, not the particular functional limitation. Because of editorial pressures to be succinct, we know it is not always possible to put people first. If the portrayal is positive and accurate, consider the following variations: disabled citizens, non-disabled people, wheelchair-user, deaf girl, paralyzed child, and so on. Crippled, deformed, suffers from, victim of, the retarded, infirmed, the deaf and dumb, etc., are never acceptable under any circumstances. Also, do not use nouns to describe people, such as epileptic, diabetic, etc.

Emphasize Abilities, not limitations. For example: uses a wheelchair/braces, walks with crutches, rather than confined to a wheelchair, wheelchair-bound, differently-abled, birth difference, or crippled. Similarly, do not use emotional descriptors such as unfortunate, pitiful, and so forth.

Do Not Use Condescending Euphemisms. Disability groups also strongly object to using euphemisms to describe disabilities. Terms such as handicapped, mentally different, physically inconvenienced, and physically challenged are considered condescending. They reinforce the

idea that disabilities cannot be dealt with upfront.

Do Not Imply Disease when discussing disabilities that result from a prior disease episode. People who had polio and experienced after effects have post-polio syndrome. They are not currently experiencing the disease. Do not imply disease with people whose disability has resulted from anatomical or physiological damage, e.g., person with spina bifida or cerebral palsy. Reference to disease associated with a disability is acceptable only with chronic diseases, such as arthritis, Parkinson's disease, or multiple sclerosis. People with disabilities should never be referred to as patients or cases unless their relationship with their doctor is under discussion.

Show People With Disabilities as active participants of society. Portraying persons with disabilities interacting with non-disabled people in social and work environments helps break down barriers and open lines of communications.

Source: Media Info Kit
We Care Film Fest
www.wecarefilmfest.net

(Appropriate... from page 2)
animal"): Currently there is no uniform terminology. Animals, mostly dogs, can provide services to a person with disability, including the blind, but not limited to fetching objects for those who use wheelchairs, providing visual clues for those who are blind or alerting deaf individuals to household audio clues.

6. Audiologist: This term should be used for a para medical professional who diagnoses hearing ability of a person with hearing disability. In India, they are not considered doctors. Hence do not address or term them as doctors as they are not medical professional.

9. Autism: A mental disorder originat-

ing in infancy that is characterized by absorption in self-centered subjective mental activity, especially when accompanied by marked withdrawal from reality, inability to interact socially, repetitive behaviour, and language dysfunction. Do not say autistic. Say person with autism.

8. Barrier-free environment: A phrase to depict the accessibility for the persons with disabilities without additional assistance, a place using a ramp, lift, railings, induction loop system, power counters and any other arrangement made to a place/a vehicle or office to make it user friendly to the persons with disabilities.

9. Birth defect: Avoid the term "defect" or "defective" when describing a

disability because it indicates that the person is somehow incomplete or subpar. Instead use terms that simply state the facts of the nature of the disability (when appropriate) such as: "congenital disability", "born with a disability", or "disability since birth".

10. Blind: Use as an adjective, not as a noun. Describes a person with complete loss of sight. Many people who are legally blind have some vision, which they sometimes use in combination with canes, dogs and other low vision aids. For them, the label "blind" is inaccurate. For others, use terms such as "visually impaired", person with "low vision" or "partially sighted".

(For the whole list of 99 items go to www.wecarefilmfest.net and click on Media Info Kit.)

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the challenging lead role. She portrays a young woman who takes control of her family's emotions and keeps their hopes alive when her sister Neha meets a tragic accident that leaves her paralyzed. Not managing hotels at the moment, Vaish is however managing a busy household as a trailing spouse and a doting mother.

In the film, Neha Bhatia is a free-spirited young woman who takes life for granted, but ends up a victim of a near fatal accident that leaves her comatose and quadriplegic. Thus

About We Care Film Fest

We Care Film Fest aims to:

(a) create awareness about disability issues through the medium of films and foster integration in society by spreading the message of ability; (b) give a fillip to the rights-based approach where persons with disability are considered persons first; (c) remove the myths, misconceptions, prejudices and stereotypes about disabled and disability among society through the medium of films.

Contact information:

The Director, We Care Filmfest
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New Delhi 110003 India.
Email: wecarefilmfest@gmail.com
Website: www.wecarefilmfest.net

begins the journey of Neha's unexpected but not impossible recovery.

Based on a true story, the script explores the role of unconditional love and support in the recovery process, in this case from Neha's older sister Ayesha (Vaish). Ayesha's immense faith in her sister's ability to heal is the backbone of the film. Neha eventually recovers enough to shed her insecurities and become an inspiration through her ultimate independence.

The film is a reminder that life is a fragile blessing to be appreciated every day and celebrated with unconditional love.

(Adapted from the film cover.)

Producer and Director: Sanjay Arora.
Actors: Anil Mo nga, Satwant Dutta, Mark Lovejoy, Dr.Ravi Butani, Dushant Suhashani Vinimay, Vaishali Ray, Abhimanyu Sharma, Manish Srivastva, Nisha Aggrawal, Neel Money, Manish Jain.

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So pull out your sequins, feathers, splendid dresses, glitter, and heels, and join the fun:

MMQ's 4TH Annual

Le Cirque Du Cabaret Gala

Sofitel Philippine Plaza Ballroom
Saturday, 18 September 2010
6pm Sunset Cocktails by Manila Bay
Followed by a 4-course French dinner
& a FABULOUS SHOW
Silent & Live Auction, Door prizes galore, & Prizes for best dressed (BLACK TIE) cabaret wear!!!
Join us for a Spectacular Cabaret Circus with a bit of naughty

& a lot of sexy FUN!

FOR MATURE AUDIENCES

Contact mmqtheatre@gmail.com
or 0927-383-9517 for tickets.

MMQ Theatre & Events Group Inc. aims to promote Expatriate-Filipino partnerships, build Expatriate and Filipino audiences, and support women's and children's charities in the Philippines. More information at <http://www.mmqtheatre.com>.

Manila Women's Forum

Manila Women's Forum (MWF) is a cross-cultural network for women. It provides opportunities to build friendships, talk to women of various cultures, and share information about resources. Our meetings are intended to provide intellectual stimulation and lead to personal and professional development. All women are welcome to join.

The current officers are: **Amy Alexander**, Message Board. **Julia Holz**, Treasurer, Membership and Programs. **Cecilia Leung**, Programs. **Lisa Lumbao**, Chair. **Lisa Stuart**, Message Board Moderator. **Beulah P. Taguiwalo**, Newsletter, Website. **Shari Virjee**, Programs, Message Board.

Cost of membership is P300 per year. Members receive a copy of the current mailing list in addition to the newsletter, which is also sent to non-members. A contribution is collected at each monthly meeting: P20 for members, and P40 for non-members. For more information about MWF, please contact Lisa Lumbao at Tel. 813-0168, or at lumbao@mozcom.com.

Visit our website – a work in progress
www.geocities.com/manilawomensforum

MWF Newsletter
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