Section D: Consider Disability as an Example for Inclusion

Chapter 18
Use Sensitive Terminology

More people are blinded by definition than by any other cause.
-Jahoda

Orientation Activity: Change Terminology

Directions Alone: Write a substitute word or phrase for those presented that communicates a more positive attitude toward people with disabilities. Circle the numbers of the words or phrases most difficult to change.

Directions with Others: Divide into small groups and discuss the words or phrases that posed the most difficulty for each participant. Allow members of the group to explain the rationale for their choices. After a specified time, discuss your responses with the entire group.

1. a special kid
2. crippled
3. the retarded
4. autistic people
5. the blind
6. AIDS victim
7. the deaf
8. a CP
9. those MDs
10. wheelchair bound
11. dependent on crutches
12. suffers from MS
13. mental age of 3
14. confined to a wheelchair
15. stricken with epilepsy
16. borderline retarded
17. dummy
18. feeble-minded
19. a nervous breakdown
20. a spinal-injured man
21. maniac
22. crazy
23. deaf

24. dumb
25. deaf mute
26. handicapped person
27. normal
28. able-bodied
29. a paraplegic
30. afflicted with autism
31. imbecile
32. the amputee
33. the special woman
34. lunatic
35. moron
36. deformed person
37. a spina bifida child
38. the schizophrenic
39. a neurotic person
40. psycho

**Debriefing:** Language and words are probably the most severe handicaps facing people with disabilities. Although breakthroughs in technology, medical treatment, and legislation are opening doors to meaningful lives for people with disabilities, language persists in developing barriers. To illustrate this point, Erin Texeira (2005, p. A10) quoted Luke Visconti of DiversityInc, which advises business on racial issues:

> Modern-day discrimination is more subtle than in years past, he said, and “language is the dominant way today of expressing oppression.”

The use of insensitive language to describe other people often creates tension. To reduce this barrier to interaction, we can use clear and accurate communication. To improve attitudes we can stop using words that convey fear, insensitivity, stereotyping, and discrimination.

This chapter supplies information on terminology that encourages communication of positive attitudes toward people with disabilities. As you examine the words and phrases you substituted for the previous words, consider the following questions:

- In what situations are you not sure of how to refer to people with disabilities?
- What general rules can you offer when attempting to describe people with disabilities?
- Why is it important to focus on the words you use to describe people with disabilities?
Introduction

Young children recite the phrase “Sticks and stones may break my bones, but names will never hurt me.” Agreed, words might not physically harm individuals, but the words we choose in our interactions with others can have an impact on how people feel about themselves and us. Abu-Tahir (1995, p.2) responded to criticisms about trying to use the most sensitive terminology when he stated:

Some say, “What’s the big deal? What’s all the fuss about what we call them.” We need to remember that how we refer to a people has everything to do with how we treat those people. The early African-Americans were labeled “slaves” thereby justifying their inhumane treatment. The original Americans were called “savages,” not “people.” Women were called “girls.” Today, labels are used to disregard people’s beauty and value.

The suggestions provided in this chapter primarily come from recommendations from people from the United States (U.S.) and, therefore, are generated from a particular perspective that does not encompass preference of all people across the globe. For example, some people associated with the British disability movement use the phrase “disabled people;” however, most people with disabilities in the U.S. prefer using people first terminology resulting in a preference for the phrase “people with disabilities.”

The following questions are addressed in this chapter:

- Why is it helpful to use sensitive terminology?
- How can we use words that are sensitive?
- Why does sensitive terminology change?
- Why do we consider perspectives of people who are oppressed?

Why is it helpful to use sensitive terminology?

It is important for leisure service providers to express acceptable attitudes that demonstrate respect for participants and all people. One way to achieve this goal is to become aware of behaviors that offend different individuals.

Terminology should reflect equality of all citizens and sensitivity to the situation. An important aspect of selecting terminology is to ensure that respect toward members of the group is communicated. Scully (2008, p. 33) stated that:

The words people elect to use demonstrate their respect, or lack of it, for members of other groups. This matters because particular words cause offence, to women or ethnic minorities, for example, but also because their use engenders alienation, contempt, or hatred in those who use them . . . examining the language of disability is ethically important. Language not
only affects the everyday treatment of disabled people, it also
determines the technical capacity to conceptualize in moral
terms the agents and situations . . .

Our behaviors toward participants can affect their quality of life, self-concept, and acceptance. Since leisure services providers frequently interact with participants, it is critical to project a positive attitude through the use of sensitive terminology.

For example, Byrd, Crews, and Ebener (1991) reported that students who were briefed on appropriate use of language when referring to people with disabilities performed significantly better than students who did not. They concluded that there is benefit to providing this instruction to students.

By advocating for sensitive terminology, people who have been oppressed have stimulated some professionals to rethink old assumptions and redefine ways to address needs identified by participants. According to Smith (1992, p. 1):

Laws, such as the Americans with Disabilities Act, approved in July 1990, bar discrimination of people with physical or mental disabilities in public accommodations, private employment, and government services. By passing laws, the federal government hopes to empower people with disabilities, but the battle for access may be better fought on the communication front. Educators can help the next generation of writers and the working press learn to use language that promotes the notion that people with disabilities are entitled to access. The day the ADA bill passed, The Atlanta Journal and Constitution announced, “Handicapped Rights Bill Awaits Final Approval” (1990, p. 11). This usage may seem innocuous enough, but it is off the mark. The preferred usage is “people with disabilities.”

How can we use words that are sensitive?

This chapter suggests ways to use sensitive terminology that communicates positive attitudes toward all people, including the following (see Figure 18.1):

- focus on people’s similarities
- consider the person first
- emphasize each person’s abilities
- communicate respect for each person
- use consistent terminology
- refer to people without disabilities
The following sections of this chapter encourage professionals and students to act as agents of change to help other people use the most appropriate terminology to describe individuals with disabilities.

Focus on People's Similarities

Focusing on a person's uniqueness can be a positive way to view the individual. However, an emphasis on unusual traits might become so overwhelming that the similarities shared by all people are ignored.

Failure to recognize that all individuals have the same basic needs can set people apart from one another and create barriers to interpersonal relationships. Typically, it is easier to interact with a person if we initially concentrate on similarities we share with this person as opposed to differences. People's attitudes tend to be more positive when they focus on similarities.

One way that people mistakenly focus on differences rather than similarities between people is by identifying some individuals as being "special." Typically, people who have been oppressed in some manner express the desire to be treated with the same respect as any person. Charles Greenlaw, an official associated with the Boy Scouts, summarized the involvement of Tim Fredricks (1987, p. 27), a scout who happens to have an intellectual disability, in a community Boy Scout program.

_The other scouts see nothing unusual about having Tim in the group, nor do they treat him as "special." The only way that Tim is "special" is that he is an Eagle Scout._

When people are identified as "special" as a result of having a characteristic that is different such as being the only boy in a dance class, being the only person in a wheelchair in a billiards tournament, or being the only Native American on a cruise, the implication may be that their difference limits them. When this generalized impact of their characteristic is accepted, people tend to lower their expectations of these individuals. McFadden and Burke (1991, p. iii) stated:

_We're trying to prevent use of the word "special," because every time you have a "special" person, you make that person different. We must have the dream and the hope that our future will be inclusive of everyone._

When a person identifies with someone because of similarity, there is a tendency for that person to like the other person. However, primarily focusing on individuals' differences could be perceived in as a way that promotes prejudice. Therefore, when we use terminology to describe people, it is helpful if we consider only using a label when absolutely necessary.

For example, Sinead, a supervisor who is educating her staff about the needs of Anthony who is being included in a leisure
program may say, “Anthony may have some difficulty with abstract concepts; so, it may be useful to provide demonstrations when giving verbal directions.”

When writing about people who have been oppressed, journalists and others are encouraged to avoid referring to a person’s characteristic such as race, religion, or ability unless it is critical to the story. Emphasizing the worth of all people, rather than differences between people, encourages portrayal of people in a positive fashion.

**Consider the Person First**

When relating to people who have been grouped together for whatever reason, consider these individuals as people first and then, if relevant, consider their group affiliation. According to Luckasson and Reeve (2001, p. 47):

> ... first and foremost, we emphasize that the term given to any disability is not the essence of any individual who has the disability. Individuals are people first.

If it is relevant to use a label, emphasize the person’s humanness. This can be achieved by not making stereotypic generalizations about people who, in addition to many of the other characteristics that affect their humanness, such as a sense of humor and honesty or that they happen to be Asian, or gay, or Jewish, or have a disability.

**People first** language describes what a person **has**, not what a person **is** and therefore puts the person before the condition. Snow (1998, pp. 15–16) provided insight about the use of people-first language:

> **My son, Benjamin, is 11 years old. He loves the Lone Ranger, ice cream, and playing on the computer. He has blond hair, blue eyes, and cerebral palsy. His disability is only one small piece of his life. When I introduce myself to people I don’t tell them I’ll never be a prima ballerina. Like others, I focus on my strengths, the things I do well, not on what I can’t do. I don’t say, “My son can’t write with a pencil.” I say, “My son uses a computer to do his school work.” I don’t say, “My son can’t walk.” I say, “My son uses a walker and a wheelchair.”**

By making reference to the person first, respect for the worth of the person is demonstrated. Use of disability-first language such as “the disabled” or “disabled kids” can be interpreted as demonstrating a lack of respect for people with disabilities. Another way to focus on the individual is to avoid labeling people into groups according to medical diagnoses or disabilities such as “the blind” or “the amputee.” Focus on people first, such as “individuals with visual impairments,” or “people with amputations.”
In general, it is helpful to avoid using acronyms such as “CP” for cerebral palsy, “MS” for multiple sclerosis, or “MD” for muscular dystrophy. The use of such acronyms emphasizes the condition rather than the person. In addition, use of acronyms may create confusion and make some people feel ignorant because they are unaware of the meaning of some acronyms. This breakdown in communication can limit our ability to present a positive image of people with disabilities. However, if it is relevant to identify the person’s medical diagnosis, the name of the condition is lengthy, and there is high recognition of the acronym within a given society, the acronym may be appropriately used.

For example, Acquired Immune Deficiency Syndrome is most frequently identified as AIDS because the acronym has a higher recognition rate. Therefore, in some limited situations, use of an acronym may be accepted.

When identifying individuals, it is useful to recognize their humanness and address them as “people” or “program participants” rather than “patients” or “cases.” The use of the words “patients” or “cases” implies that individuals are ill and in need of medical assistance. Many participants including older adults and people with disabilities are not receiving medical care, are in excellent health, and therefore should not be identified as patients.

Most of us, at some time, will be receiving medical care and be identified as a patient in the context of the medical environment; however, this does not imply that we should then be identified as a patient in all contexts of our lives.

The condition of being a patient or a case varies according to the situation and, therefore, the use of these terms as a label for people with disabilities is often inaccurate. The word “client” may be used to describe people participating in a variety of leisure services. If the word “client” is used consistently to describe all participants, then it is more acceptable than when client is used only to describe those individuals with disabilities.

An example of people first terminology occurred years ago on May 10, 1988, when former President Reagan signed Executive Order 12640 establishing the President’s Committee on Employment of the Handicapped as the President’s Committee on Employment of People with Disabilities. People working to improve the language concerning disability enthusiastically supported the name change (Rog Time, 1989). Chairperson Harold Russell stated that the new name demonstrated that the President’s Committee was sensitive to the desires of people with disabilities. In addition, other legislation such as the Individuals with Disabilities Education Act (formerly known as the Education of the Handicapped Act) and the Americans with Disabilities Act, clearly demonstrate a focus on people first terminology.
Inclusion encourages people to focus on similarities and to accept differences. When disabilities are seen as secondary to the overall humanity of the person attitudes may change to reflect a greater openness to the person and a greater optimism regarding the amelioration of the disability.

**Emphasize Each Person’s Abilities**

It is important for us to emphasize individuals’ abilities rather than focusing on limitations. For example, it is more accurate to say “a woman who uses a wheelchair” rather than “she is confined to a wheelchair” or “she is wheelchair-bound.” The use of the phrase “he walks with crutches” is more accurate than “he is dependent on crutches.”

Typically, when people access forms of transportation other than walking such as an automobile, bicycle, or skateboard, they are not described as being “confined to” or “dependent on” that particular means of transportation. It is helpful to be consistent with this line of reasoning when describing people with disabilities who use alternative forms of transportation or mobility.

Many words used to describe individuals who have been oppressed reflect concepts of dependency and helplessness that perpetuate negative attitudes and corresponding patterns of response and expectation. At times, fundraising efforts have employed the use of counterproductive terminology intended to evoke impressions of needy, fragile people requiring special treatment. Organizations using such tactics to raise funds intended to promote independence may in fact foster a sense of dependency through the fundraising campaign.

It is helpful to describe people as simply having a disability rather than using words that imply pain and suffering. Phrases such as “afflicted with... suffers from...a victim of...crippled by...stricken with...” sensationalize the disability and tend to evoke sympathy toward individuals. Instead, it would be more appropriate to say “the person has...the condition is caused by...a disability resulting from...”

In a February 1988 issue of *Time* magazine entitled “Roaming the Cosmos,” the lead sentence to the article describing the renowned physicist Stephen Hawking was: “Physicist Stephen Hawking is confined to a wheelchair, a virtual prisoner in his own body.” This description can be contrasted with the lead sentence in the article entitled “Black Holes Figured Back in Time” reported in a June 1988 issue of *Insight* magazine: “Through the intricate equations devised over two decades, cosmologist Stephen W. Hawking has advanced intriguing visions of the universe’s origin and structure.” The differences between the two representations are striking.

Frequently, sympathetic views evoked by such words as “confined” or “prisoner” restrict people’s independence by limiting other people’s tendency to treat individuals who have disabilities with dignity and respect.
For instance, at the second AIDS forum in Denver back in 1983, individuals with AIDS condemned attempts to label them as “AIDS victims.” People attending the conference stated that the phrase AIDS victims implied defeat and identified the phrase “persons with AIDS” as the most preferred terminology.

Communicate Respect for Each Person
The practice of classifying individuals according to mental age has been drastically reduced in recent years. It is important that we avoid using the phrase “mental age,” because the label tells us nothing about the person’s cognitive strengths and areas to develop.

For instance, when discussing the implications of following written directions by a woman, say “a woman who is 35-years-old and currently identifies a few words” as opposed to stating “the woman who has the mind of a 3-year-old.”

Use of the phrase “mental age” may result in mistakenly treating a person with a mental impairment such as Alzheimer’s disease or an intellectual disability as a child. In her book, *Riding the Bus with my Sister: A True Life Journey*, Rachel Simon (2003, p. 10) had the following reaction when someone would inquire about her sister’s “mental age:”

*Mental age. It was as if they thought that a person’s daily passions – and literacy skills, emotional maturity, fashion preference, musical tastes, hygiene habits, verbal abilities, social shrewdness, romantic longings, and common sense – could fit neatly into a single box topped, like a child’s birthday cake, with a wax 7, or 13, or 3. It would become clear to me that their understanding of mental retardation had never moved beyond the stereotype of the grinning, angelic child.*

Using terminology that labels adults with intellectual disabilities as children, such as “he is childlike” or “our kids” can show disrespect. Instead we can communicate dignity provided to other adults in our society by using age-appropriate terminology to describe individuals. Age-appropriate terminology involves the use of words that are typically used to describe people of similar ages to the person being identified. Age-appropriate terms encourage development of programs that are appropriate for the age of the participants and do not require participants to compromise their dignity.

Many words that have been used in the past to describe people with disabilities have communicated ideas of deviancy, helplessness, and dependency. Words such as imbecile, lunatic, moron, borderline, dummy, feeble-minded, manic, crazy, deaf and dumb, or deaf mute are no longer acceptable because of their strong negative overtones. Instead, we can use phrases such as people with developmental disabilities, individuals with intellectual disabilities, people with
psychological disorders, individuals with communication disorders, or people with speech and hearing disorders. Through the use of these words and phrases, we will better communicate a positive attitude about people with disabilities.

Use Consistent Terminology

Impairment, disability, and handicap are three distinct words defined in different ways. Unfortunately, many people use the words interchangeably and often inaccurately.

The word *impairment* means to diminish in strength and refers to identifiable organic or functional conditions that may be permanent (such as an amputation) or temporary (such as a sprain). When an individual possesses an impairment, the focus is on the problem—a disease or injury with a specific portion of the body.

For instance, a visual impairment involves a deficit with the eye, such as that caused by clouding of lenses resulting in cataracts. When cataracts are mentioned, the problem with the eye is emphasized. Another example may be that a person has a neurological impairment, such as cerebral palsy, that prevents independent leg movement. In this situation, when the phrase “neurological impairment” is used, attention is directed toward the central nervous system that was damaged.

The focus of the discussion related to impairment is not on the person; rather, the discussion is directed to the actual condition. Impairment can result in a disability and a person being handicapped in particular situations.

*Able* is defined as having sufficient power, skill or resources to accomplish a task. When the word able is combined with the prefix dis, which refers to being deprived of, the definition of the word disability becomes apparent. The word *disability* describes the reduction or deprivation of a skill or power. This reduced ability is a result of a particular impairment, as mentioned previously.

For instance, Rocardo, a man with cataracts has a visual impairment that may result in a reading disability even when corrective lenses are used. When the word disability is used, attention is given to the interaction of the visual impairment with the functioning ability of the individual.

When discussing a person’s disability, it is necessary to examine the individual and the effect that the impairment has on that person. However, according to Whyte and Ingstad (1995, p. 3):

*A preliminary common-sense definition of disability might be that it is a lack or limitation of competence. We usually think of disability in contrast to an ideal of normal capacity to perform particular activities and to play one’s role in social life. Sickness also inhibits ability, but we distinguish between*
sickness, which is temporary (whether ended by healing or death), and disability, which is chronic.

Although, at first glance, this definition might seem harmless, this notion of disability is reflective of a belief of social inferiority or stigma.

The word handicap was originally used to denote a disadvantage in sport (Hale, 1979). A handicap is a game in which forfeits were held in a cap (hand in cap), a content in which artificial advantage is given (or disadvantage imposed) on a contest to equalize chances of winning. The word “handicap” has been linked with the practice of beggars who held cap in hand to solicit charity. These definitions demonstrate that the labeling of people as handicapped represents an impression of society that these individuals are dependent on others.

The important aspect of the word handicap is that it varies from one situation to another. In effect, a handicap is an interaction between environmental conditions and the individual, rather than simply inherent in the person.

For instance, Yanlin, a woman with a visual impairment may be handicapped when going to the theater to watch a movie but may not be handicapped when listening to music on the radio. Andy, a man with a neurological impairment who uses a wheelchair may be handicapped when playing soccer but may be extremely gifted at billiards.

Because a person may be handicapped in one situation and not handicapped in another, it is inaccurate to label the person as handicapped. The word handicap implies that the person is handicapped in every situation. This generalization of a condition to all life situations imposes unnecessary restrictions on the individual.

Since being handicapped is a social phenomenon influenced by our society, people with disabilities can handicap themselves by believing that they cannot do something and society can handicap people with disabilities by denying them opportunities to participate. The term “handicap” is reserved for describing obstacles that lessen a person’s chance of success. These obstacles often will prevent people from doing something. Jack Kemp (1994, p. 28), an attorney and an advocate for people with disabilities who was born with multiple limb anomalies stated:

One day I came home crying that these kids had been making fun of me. They said I had wooden arms and wooden legs and a wooden head—which probably isn’t too far off the mark! My dad said, “Well, those kids have a handicap too.” He told me that I might have a disability, but other people who don’t accept me have a handicap. A handicap is something external to me that interferes with my freedom to be a part of my community. A curb without a curb cut is a handicap to someone in a wheelchair. People’s negative stereotypical thinking about individuals with disabilities is a handicap to our acceptance. That was the first time someone had lifted
the burden of “handicapism” off of me. I got teased, but my dad put it into perspective.

Miller and Sammons (1999) identified four types of handicaps: social, personal, physical, and those associated with resources.

- **Social handicaps** are associated with other people’s negative attitudes toward people with disabilities.
- **Personal handicaps** occur when people lack adequate information about their disability or about ways participate in activities.
- **Physical handicaps** can include inaccessible buildings, parks, or transportation.
- **Resource handicaps** are when people have insufficient funds, training, and people to assist them.

To illustrate the point that these handicaps or obstacles can shape a person’s quality of life as much or more than a person’s specific medical, physical, or cognitive disability, Miller and Sammons (1999, p. 29) provided the following example:

Imagine that you have arthritis (impairment) and cannot climb stairs (disability). You want to go to a concert, but the theatre has no elevator or ramp. You have a handicap because of the architectural inaccessibility of the theatre. Similarly, a person who is deaf has a handicap while watching television without closed captioning; a person who is blind has a handicap in an elevator without Braille signs; and a person who uses a wheelchair has a handicap when shopping in a store that does not have accessible parking entrances, restrooms, and aisles.

Many people have stated that they want to be identified with a disability rather than a handicap. For instance, Karol Davenport, a leisure services provider who also happens to use a wheelchair, explained that she prefers to be referred to as a “person with a disability” rather than “handicapped” (Jesiolowski, 1988).

Ms. Davenport’s preference was supported by a survey conducted by *The Disability Rag* (“The results are in!” 1986) reporting the preferences of the magazine’s readership. Nearly three-fourths of the respondents with disabilities stated that they would prefer the phrase “a person with a disability” when referring to them, while only 3% preferred “handicapped person.”

Shapiro (1993) stated that the term “disabled” has replaced “handicapped” and is becoming the first word to emerge by consensus from people with disabilities.
Refer to People without Disabilities

The word "normal" is acceptable when referring to statistical norms and averages; however, this term is demeaning to people with disabilities when used in reference to people with no disability (National Easter Seals Society, 1981). The use of the word normal to describe people who do not possess an apparent disability implies that a disability is the one distinguishing factor that separates people into two primary categories: normal and disabled.

Not only is the word normal demeaning to many people with disabilities, but also many people without disabilities resent being labeled as normal. Normal implies that people act similar to many other people in almost all aspects of their lives. This view stresses conformity and ignores individuality, creativity, and diversity.

When describing people without disabilities, it is helpful to apply the same principles described earlier in this chapter. If not having a disability is irrelevant to a particular situation then we can simply avoid labeling the individual. However, if it is important to identify the person as not having a disability we can use the phrase "people without disabilities" to refer to people who do not possess an apparent disability. Some people use the phrase "able-bodied" to describe individuals without disabilities. This phrase can cause confusion, however, because individuals with disabilities may also possess bodies that are very able such as people with intellectual disabilities, autism, and learning disabilities. See Figure 18.1 for a summary of guidelines that promote sensitive terminology.

![Figure 18.1 Ways to Use Sensitive Terminology](image-url)
Why does sensitive terminology change?

Language is the means by which we attempt to accurately communicate with others. Over time our words change to reflect changes in attitudes, thinking, and expression. People who have been stigmatized are in a continuous and evolutionary process of choosing language they prefer to be used to describe themselves and their experiences. Words identified today as being sensitive may no longer be responsive tomorrow.

History has shown us that acceptable terms in the past often are no longer acceptable today. Crouser (1999) provided the following example when discussing the American Association on Mental Retardation:

We were founded to serve idiotic and feebleminded persons and eventually we moved on to serve imbeciles and morons. Decades later our constituency was described as mentally deficient and now we support people who are mentally retarded. And now we must ask ourselves, again... Is it time to change our terminology?

The term mental retardation is a social invention resulting from many factors, including the human tendency to label people based on perceived differences and development of standardized intelligence tests (Warren, 2000). According to Warren, the term mental retardation has been attacked as promoting stigma and negative stereotyping in our society, many people with disabilities hate it and consider it demeaning, and other point out that it lacks sufficient specificity for meaningful professional applications. As a result, people with disabilities, family members, and professionals have asked that we find a more contemporary, less pejorative term to describe this group of individuals (Crouser, 1999).

As an illustration, based on the experiences of an elementary-aged girl, Rosa Marcellino, and her family on October 5, 2010 U.S. President Obama signed S. 2781: Rosa's Law that replaces the term “mental retardation” with “intellectual disability” in specific federal, health, education, and labor laws. The law does not expand or diminish services, rights, or education opportunities; rather, it requires federal language consistent with that used by organizations such as the World Health Organization and the U.S. Centers for Disease Control. At the time the bill was introduced Susan James (2009) provided this description:

On any given day at the mall, the sports field or the movies, 8-year-old Rosa Marcellino hears people say, “That’s so retarded,” or “You’re such a retard.” “Even good kids use the word, not realizing that they’re talking about people like my sister,” said Rosa’s brother, Nick, a Maryland 14-year-old. Rosa -- who Nick calls the “smartest person I know” -- has Down syndrome and is now at the center of a bill in Congress to strike the term “mentally retarded” from the federal lexicon.
Given that the words “retard” or “retarded” have taken on such a negative connotation, people are now using the phrase “intellectual disability” instead of saying “mentally retarded.” Callaway (2010) interviewed Greg Coni, a high school senior who has a sister with Down syndrome. He reported on people’s desire to end the use of the ‘R-Word.’

I hear it all the time. A lot of people, they just use it. It’s really not known too widely that it is such a derogatory word. People have come to use it so freely with such a negative connotation that it is really hurtful. If people use it properly, I wouldn’t mind, but it is the fact that it’s come to have such a horrible usage.

Speaking of the R-Word, another word that has an extremely negative connotation is the word “nigger.” The N-word is a word that not only offends African-Americans but offends most people across the globe. Leonard Pitts (2009, p. 115-117) has this to say about the use of the N-word.

As Richard Pryor told it years ago, he was sitting in a hotel lobby in a trip to Africa when he heard a voice within. “What do you see?” it asked. “Look around.” I looked around and I saw people of all colors and shapes. And the voice said, ‘Do you see any niggers?’ I said, ‘No.’ It said, ‘Do you know why? There aren’t any.” Pryor told an audience that he started crying then. The comedian, whose speech had always been peppered with the ugly word, abruptly realized that it had not passed his lips in the three weeks he’d spent among the blacks of Africa. Pryor subsequently renounced the word altogether. . . But I haven’t seen anybody say a damn thing about black comics who fly it like a dirty flag. Haven’t heard a peep about the tiny talents of raunch rap who spill it into the ether like sewage. Haven’t heard anyone say the obvious: that if African-Americans truly abhor this word then the protest ought to begin on our own doorstep. . . So the last word some beaten black man heard before gravity yanked him down and the rope bit into his neck becomes a shock tactic for a callow youth. The word that followed his torn corpse as it was dragged down dusty roads behind the bumper of a car now serves some oafish rapper who can’t find anything to rhyme with trigger. That’s grotesque. It is obscene.

Changes in the way we think about people result in changes in the terms we use. However, changing terminology that describes certain people every few decades is no solution and that ultimately we must find a way to somehow transcend the issue of terminology.

Some other terminology that describes people with visual impairments, such as “partially sighted,” has met controversy. Some individuals feel the phrase
“partially sighted” implies an avoidance of the acceptance of having a disability, while others feel it accentuates positive aspects (sight). Rana Arnold reported that when polling members of the Sight-Loss Support Group of Central Pennsylvania views regarding the phrase “partially sighted” varied from person to person.

Another controversy relates to ways to describe people who are deaf. Some people who are deaf reject “people first” terminology and prefer being described as “Deaf people.”

According to Dolnick (1993, p. 38), “the upper-case D is significant. It serves as a succinct proclamation that the deaf share a culture rather than merely a medical condition.” The argument of deafness as culture relates to the belief that over a half a million Americans who are deaf share a common language (American Sign Language) and as a result share a common identity. However, the view that deafness is akin to ethnicity is far from unanimously held.

Considering people who have a hearing loss, the particular phrase that was acceptable previously but is no longer suitable is “deaf and dumb.” Related to this idea, Williams and Finnean (2003, p. 40) stated that:

“Dumb” referred to inability to speak, as well as inability to think. Researchers in the field of deaf education have consistently emphasized that people who are deaf possess the same range of intellectual potential as those who are. Therefore, the phrase “deaf and dumb” is arguably inaccurate and unacceptable terminology.

One problem that arises when using phrases that have yet to receive general support from people associated with a particular group is the difficulty in receiving services such as financial aid, education, and recreation. Although phrases such as “partially sighted” and “physically challenged” seem to accentuate the positive for some people, these same phrases may create problems in acquiring services and seem to offend other individuals. In describing the perceptions of the hundreds of people with disabilities whom he interviewed, Shapiro (1993, p. 33) wrote:

Concoctions like “the vertically challenged” are silly and scoffed at. The “differently-abled,” the “handi-capable,” or the “physically and mentally challenged” are almost universally dismissed as too gimmicky and too inclusive. “Physically challenged doesn’t distinguish me from a woman climbing Mt. Everest, something certainly I’ll never do,” says Nancy Mairs, an essayist and poet with multiple sclerosis. “It blurs the distinction between our lives.” Only by using direct terminology, she argues, will people think about what it means to be disabled and the accommodations she needs, such as
wheelchair accessible buildings or grab bars in bathrooms. Dianne Piastro, who writes the syndicated column “Living with a Disability,” complains that such terms suggest that disability is somehow shameful and needs to be concealed in a vague generality. “It’s denying our reality instead of saying that our reality, of being disabled, is okay,” says Piastro.

At this time it is difficult to recommend the consistent use of such phrases. It is important, however, for us to realize that identification of the most preferred terminology to describe persons with disabilities is a continuously evolving process.

**Why do we consider perspectives of people who have been oppressed?**

If we are unsure of which words to use when we make contact with people, we can ask the person what terminology he or she prefers. Words that are currently creating controversy and have yet to receive a general consensus may be the words of choice in the future.

In all situations, listen to people to determine the terms and phrases they most prefer and attempt to understand their reasons for these choices. This sentiment is reflected by Coulter (1992, p. 2):

*I believe that people have a right to call themselves whatever they want, and that others should respect their choice. We should not be surprised when these choices change over time. We have seen several such changes recently: people preferring to be called gay or lesbian instead of homosexual, or people preferring to be called African-American instead of colored or black, for example. If this choice reflects a reasonable consensus of those who may be so described, then I believe we should respect it. People with disabilities have made it perfectly clear that they want us to use people-first language, and so we should.*

In the same way, although many people express a desire for the use of people first terminology, as with any labels, there is not total support for its use. For example, Hartman (1998, p. 10) described Carol Gill, who, based on her research, private practice as a psychotherapist, and experiences as a woman with a disability, stated that:

*I don’t mind people-first language; I do mind the insistence on it. My disability is an integral component of who I am—I am incredibly proud to be a disabled woman.*
Dr. Gill’s statements illustrate the point that, although many suggestions are provided on sensitive language by many people with disabilities, a critical suggestion to follow is to learn what each individual desires and to respect the right of that person to name him or herself. As further illustration of this suggestion, Nancy Mairs (1992, pp. 56–57) takes the extreme position as she writes the following:

_I am a cripple. I choose this word to name me. People—crippled or not—wince at the word “cripple.” Perhaps I want them to wince. I want them to see a tougher customer, one to whom the fates/gods/viruses have not been kind, but who can face the brutal truth of her existence squarely. But I don’t care what you call me, so long as it isn’t ‘differently abled,’ which strikes me as pure verbal garbage designed, by its ability to describe anyone, to describe no one. I would never refer to another person as a cripple. It is the word I use to name myself._

Similarly, it is helpful for us to remember that interpretation of the meaning of words is based on our perspective, which is strongly influenced by our culture. Words and sentences used in one culture may demonstrate respect; however, use of the same words in a different culture may be viewed as offensive.

Fernald (1995, p. 99) compared language preferences of people with disabilities among English-speaking countries and stated: “some terminology that Americans assume to be sensitive and stigma-free was, in fact, offensive to British colleagues.”

Therefore, it is important to consider that the information presented in this chapter is one perspective of sensitive terminology and, when in doubt, ask individuals what they most prefer.

**Final Thoughts**

Crabtree (1994) presented a quote by Judy Clouston, a recognized poet, who demonstrated how she felt about sensitive terminology:

_When the clerk shouts, “Hey, Joe, there’s a crippled lady up here who needs some sour cream,” I wince. When a stranger says, “My aunt is an invalid…” I can’t hear the rest of the sentence. When I hear the phrase “confined to a wheelchair” I want to jump out of mine. They’re words, but they make a difference._

One way to communicate respect for people is to avoid using words that offend them and to use words that make them feel valued. The use of sensitive
terminology can set the stage for a positive interaction that lead to successful, meaningful, and enjoyable leisure experiences for all. The use of language is an ethical issue since the language we use to describe people influences the treatment they receive on a daily basis.

Based on the premise that changing social attitudes through language has been a powerful tool for the civil rights movements, it is important to use terminology describing all people that is empowering rather than demeaning. Use of empowering terminology establishes groups of people as a social and economic force to be considered and respected.

Use of insensitive terminology may occur because well-intentioned people are not aware of the most accurate words or phrases to describe people. Do not assume that the person using insensitive terminology was purposefully being offensive—the person may be using them out of ignorance and does not intend to be disrespectful. After reading this chapter and gaining knowledge of the most appropriate terminology, consider the perspective of the people using the inappropriate terminology when educating them about the most desired behaviors to exhibit as they interact with or represent individuals with disabilities.

We can become change agents within society. Although this chapter is intended to describe what many people with disabilities and professionals espouse as sensitive terminology, consider that the use of terminology is an evolving process. It is helpful if we continuously respond to the most recent information presented, demonstrate a willingness to listen to and consider other people’s perspectives, and revise our terminology to best represent the desires of the people we serve.

I think it is fitting to close this chapter by reporting the sentiments of Benjamin Saenz (2010, p. B44), a professor of creative writing:

_Today, in the Americas, we live in an age of violence and suspicion. Rather than thoughtfully solve issues that confront us, many choose to speak a language that divides us. There is much talk about building walls. Where is the talk about building bridges?_

**Discussion Questions**

1. What is the people first philosophy?
2. What are six general suggestions for using sensitive terminology?
3. Why is it important to focus on individuals’ similarities?
4. Why is it best to avoid the use of the term “special?”
5. Why should acronyms be avoided? When is it appropriate to use acronyms?
6. What is the difference among the terms “patient,” “client,” and “participant?” Which term is preferred and why?
7. What are two ways the federal government acknowledged the importance of people first terminology?
8. Why should we avoid using terminology that sensationalizes or exploits people with disabilities?

9. What is meant by the terms "impairment," "disability," and "handicapped?"

10. What is the best way to refer to people who do not have disabilities?