

Understanding Disabilities: Respectful Etiquette and Language Guidelines

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Many professionals can agree that a priority in serving others is to show respect and appreciation. Despite our best intentions, sometimes we unknowingly may do more harm than good through our actions or words. Specifically, in working with persons with disabilities, some professionals may find it challenging to navigate preferred actions and language. This fact sheet offers guidelines for respectful etiquette and language for professional work with persons with disabilities.

Actions Matter: Appropriate Etiquette

Always consider how to respectfully treat and accommodate specific needs. Here are some guidelines for respectful etiquette.

- Reference the disability only when it is relevant to the situation.
- Talk directly to the person with the disability, not their caretaker, unless the person with the disability is nonverbal.
- Avoid baby talk or gestures that may make a person feel less competent or respected.
- Be patient while waiting for a person with a verbal or physical difficulty to reply or complete a task.
- Respect personal equipment. Do not touch or move equipment, like wheelchairs, speech devices and service animals, unless asked or told to do so.
- Be sensitive of physical contact. Do not touch a person without consent.
- Avoid making assumptions about a person's condition.
- Avoid making assumptions about a person's needs.
- Ask a person with a disability "how can I help you?" or "do you need anything?"
- Ask a person with a disability their preferences for how you refer to their disability, whether that is through person-first language or by using identity-first language, described next.

Words Matter: Respectful Language

When referring to a person who has a disability, it is important to be mindful of the appropriate terminology. Here are some guidelines for respectful language.

Person-first language

In most circles, using person-first language is preferred. This type of language respects the individual as a person first, and his or her disability status comes secondary. Some examples of person-first include "a child with autism" or "a person with disabilities."

Identity-first language

Identity-first language, which puts the disability as the primary focus, is generally to be avoided. Phrases like "a Down syndrome child" or "he's a dyslexic" are often offensive, as it places the disability status at the front and center.

However, sometimes identity-first language is acceptable depending upon the disability and group preferences. Some groups may prefer using identity-first language as a form of empowerment in owning their disability status as a central feature of who they are. For example, using “deaf” is preferred over “person with deafness,” “little person” is preferred over “person with dwarfism,” and “diabetic” is preferred over a “person with diabetes.”

Using Both

In some instances, both person-first or identity-first are both acceptable, as is the case with “exceptional children” versus “children with exceptionalities.” While this may be confusing, the best rule of thumb is to simply ask what one’s preferences are regarding how to characterize the individual’s disability. Here are some additional suggestions for appropriate, respectful language use based on different disability statuses, as well as language to avoid.

Disability	Respectful Use	Outdated or Offensive Use
Genetic	Child with Down syndrome, person with cerebral palsy	Down syndrome child, person suffering from cerebral palsy (or other genetic condition)
Visual	Blind or Visually-Impaired	Blind person
Hearing	Deaf or hard-of-hearing or person with a speech delay	Deaf and dumb
Cognitive	Child with a learning or intellectual disability	Retarded, mentally challenged, slow
Physical	Person with a physical disability or wheelchair user	Handicapped, wheelchair-bound, cripple
Mental Health	Person with a mental health disability	Emotionally disturbed, psycho, crazy, hyper-sensitive, nuts
Stature	Someone of short stature, “little person,” person with dwarfism	Dwarf, midget
General health	Person living with a health condition or survivor of a health condition or experience (i.e., stroke survivor, rape survivor)	Victim of health condition or experience (i.e., stroke victim, rape victim); person suffering from a health condition

Where can I find more information?

If you are interested in learning more, find additional fact sheets as part of our **Understanding Disabilities** series.

[W 947-A Understanding Disabilities: An Introductory Guide](#)

[W 947-B Understanding Disabilities: Behavioral Health FAQ Sheet](#)

[W 947-C Understanding Disabilities: Intellectual and Learning Disabilities](#)

[W 947-D Understanding Disabilities: Screening for Disabilities in Children](#)

[W 947-F Understanding Disabilities: Responsive Care](#)

[W 947-G Understanding Disabilities: Anxiety in Children and Youth](#)

[W 947-H Understanding Disabilities: Sensory Processing Disorder](#)

References

- American Psychological Association (2015). Choosing words for talking about disability. Retrieved 25 July from <https://www.apa.org/pi/disability/resources/choosing-words>
- National Youth Leadership Network (2006). Respectful disability language: Here’s what’s up! Retrieved 17 July 2020 from http://www.aucd.org/docs/add/sa_summits/Language%20Doc.pdf
- Respectability (2020). Etiquette: Interacting with people with disabilities. Retrieved from <https://www.respectability.org/inclusion-toolkits/etiquette-interacting-with-people-with-disabilities/>
- United Spinal Association (2015). Disability etiquette: Tips on interacting with people with disabilities. Retrieved 06 August 2020 from <https://www.unitedspinal.org/pdf/DisabilityEtiquette.pdf>



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