

Language around Disability

Sometimes, talking about disability can feel awkward. Sometimes, the language doesn't feel right, and sometimes we just don't know what to say. Person-first language is a great place to start. This language is to acknowledge that a person is not their diagnosis or disability in a negative way. Here are some helpful resources for using person-first language.

<http://www.tcdd.texas.gov/resources/people-first-language/>

<https://ncdj.org/style-guide/>

<https://adata.org/factsheet/ADANN-writing>

Just as persons of various ethnic backgrounds have personal and/or cultural preferences in how to refer to themselves or persons of the LGBTQIA community will state preferred pronouns, it's helpful to know that a person with a disability may do likewise with their associated disability. Listen for clues and, as you build on your relationship, don't be afraid to ask someone to share about their preferences; nuances will exist. Examples illustrating this include persons with blindness or deafness or both which have group preferences.

- The National Federation of the Blind advocates for identity first language, but the American Foundation for the Blind advocates for person-first language. (A Blind Person vs. A person who is blind)
- Many users of American Sign Language see Deafness as their culture and use the language of "Deaf person" (note the capitalization) instead of person-first language. Folks who are deaf and are not ASL users may not see their deafness as a part of their identity and may prefer person-first language.

<http://www3.gallaudet.edu/clerc-center/info-to-go/deaf-culture/american-deaf-culture.html>

Common language used:

- Impaired?
Language around the word "impaired" is varied. The Deaf Community prefers the language of Deaf and Hard of Hearing (vs. hearing impaired). Some folks who are blind prefer the language of blind and low vision (vs. vision impaired).
- Suffering?
Avoid suffering or victimizing language. Persons with disabilities are "living with their disabilities" not necessarily suffering from or struggling with their disability. Persons with disabilities are also not victimized by their disability. Rather, the disability is the reality that folks live with daily. It is not helpful to assume the reality of a disability is suffering.
- Sick and Shut-ins?
Many churches pray for "the sick and shut-in" or "our sick and shut-ins," and phrase it as such. The "our" can be patronizing and/or perceived as though they

are possessions, rather than human. “The sick and shut-in” is not using person-first language and is often heard as “othering” a person by distinguishing them as different/separate/apart from/less than the person speaking. Additionally, a person’s disability is not an illness.

There is not a consensus on language to use because some people are new to having a disability, some have temporary inabilities, some have deteriorating health that lead to decreased attendance in worship, etc. Suggestions: Remember our friends at home, we pray for members who are in the hospital, friends recovering at home, our online worship community, those experiencing chronic or long-term illness, etc.

- **Mental?**

The term mental health or mental illness is helpful, yet it’s important to avoid abbreviations. The term “mental” has historical significance and was used in very negative ways – name calling, shaming, alluding to flawed intelligence, persons institutionalized, or persons with developmental or cognitive disabilities. This contributes to a great deal of emotional pain, as well as an unspoken socialized stigma. Person-first language is especially helpful when talking about mental health. When we talk about person-first language in mental health, it is helpful to use diagnosis language or naming feelings/symptoms associated with such diagnosis.

Examples: A person living with mental illness, members/friends experiencing anxiety or depression. It helps to include ourselves in ways that are similar such as “when our lives are interrupted by deep sadness, grief, or loss,” “those of us in relationship with someone diagnosed with mental illness,” etc. Consider grouping mental health with other bodily and spiritual matters; “Lord, tend to our hearts, minds, and souls” or “bring us healing in mind, body, and spirit.” Depending on who is in prayer with us, some (caregivers, working professionals, etc.) may appreciate the use of medical terminology (i.e. psychological) and some may benefit from a leader’s prayer naming of emotions or more common language (i.e. bring us peace of mind). Identifying sources and/or causes of mental illness can also be complicated as many family members and friends blame themselves for their loved one’s condition, use of alcohol, suicide attempt(s) or inability to bring happiness to those they love. Naming violence, trauma, abuse, and/or lack of accessible health care might be helpful, but demonizing persons who enact violence and abuse are often themselves living with mental illness, not currently accepting treatment, or are unaware of their own contribution to a loved one’s mental health experiences.

Incorrect: a person who is bipolar

Correct: a person who experiences mood swings and/or depression.

Incorrect: Johnny is bipolar.

Correct: Johnny lives with bipolar disorder.

Incorrect: a person who has bipolar disorder.

Correct: a person diagnosed with bipolar disorder.

Incorrect: depressed (depressing) people.

Recommended: a person experiencing depression.

Incorrect: a person dealing with the devil.

Recommended: a person searching/listening for God's voice.

<https://www.psychologytoday.com/us/blog/the-recovery-coach/201706/ten-commandments-how-talk-about-mental-health>

- Differently Abled?

Language like Special, Differently Abled, Definitely Abled, and Varied Ability can be patronizing. This can imply that there are normal and not normal people – a sort of “othering.” This can give the word “Disability” an unnecessary negative connotation. Suggestions: “Bless us in our creative and adaptive abilities” or “thank you for, Lord, for your creating us in diverse and beautiful ways.”

“Members living with disabilities”, rather than the disabled; “wheelchair users”, rather than “the handicapped.” As we prepare to speak or pray aloud and invite others into the prayer, replace language such as “please stand, if you're able” to “please stand if you wish” or “let us posture ourselves for the hearing of God's word.”

Disability vs. varied ability vs. differently abled

“For myself (Lisa Heffernan), terms like varied ability and differently abled wrap up disability into too nice of a little bow. This language feels condescending to me. I have a disability. I own it. I'm okay with it. This is how I was made. Yes, we all have varied and different abilities. I am a paraplegic. I use a wheelchair. Saying I have a disability does not take away my identity or sense of self and who God made me to be. “Varied” and “Differently abled” don't own that part of who I am enough for me. I am not “disabled”; my wheelchair and spina bifida do not hinder my life. They, largely, make it the gift it is. I HAVE a disability, and that's ok.”

Prepared by the ELCA Disability Ministries advisory team (The Rev. Brian Krause, The Rev. Lisa Heffernan, The Rev. Peter Heide, Anita Smallin, and Chris Ludwig) and Coordinator for Disability Ministries, Carol A. Johnson of Domestic Mission unit of the ELCA churchwide office.

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