Disabilities, Diversity & Inclusion

# Module 3: What does ableism look like?

Note: This text script is intended for use as an accessibility tool for use with the video for module 3, “what does ableism look like?” To access the video, visit <https://bit.ly/33XiOap>. This script and related video content are copyright 2021, Karla Fitch. Please do not copy this content without express written consent from the author.

## SLIDE 1

**SLIDE DESCRIPTION:** A title slide

**SLIDE TEXT:** Disabilities, Diversity & Inclusion, part 3: What does ableism look like? Created by Karla Fitch, MTSC; Connecting for Kids (she/her/hers). MSW student – Cleveland State University.

**SLIDE SCRIPT:** Welcome to part three of disabilities, diversity and inclusion – what does ableism look like? This is the third part of a four-part program designed to introduce parents, caregivers, providers, and people with disabilities to the concept of ableism. After completing the program, you will not only be able to recognize ableism, you will also be able to apply what you have learned to dismantle it.

## SLIDE 2

**SLIDE DESCRIPTION:** Icons depicting a caution symbol and a group of people appear under the title, “content notes.”

**SLIDE TEXT:** Ableism/Offensive Language: This presentation Includes historical information and ableist language that may be upsetting to some. This information is included for the purposes of educating others on the harm caused by ableism.

Person-First Vs Identity-First Language:

This presentation uses both person-first and identity-first language interchangeably since either may be used depending on individual preference. When interacting with people with disabilities, it is important to consider individual preference.

**SLIDE SCRIPT:** Before we begin, I would like to review these two content notes.

First, this program contains references to ableism and some offensive language. This information is included for the purposes of educating others on the harm caused by ableism.

Second, this presentation uses both person-first and identity-first language interchangeably since either may be used depending on individual preference. When interacting with people with disabilities, it is important to consider individual preference.

## SLIDE 3

**SLIDE DESCRIPTION:** A photo of school-aged, Black American boy who uses a wheelchair is shown. The boy is writing at a desk in a classroom.

**SLIDE TEXT:** Over the course of this program, we will explore how ableism took hold in our society, how ableism hurts different people and groups, and what ableism can look like for those who experience it. We will end with a reflection on how individuals and groups can work to dismantle ableism.

We’ll use four questions to guide us:

* Part 1: What is ableism?
* Part 2: Why does it matter?
* Part 3: What does ableism look like?
* Part 4: What can we do about it?

**SLIDE SCRIPT:** As you may recall from part one, we’ll use four questions to guide us on our study of ableism, including:

* What is ableism?
* Why does it matter?
* What does ableism look like?
* What can we do about it?

Part one looked at the question, “what is ableism?” by offering you some definitions, a framework for how ableism appears in our thoughts and our actions, and some history and models that are commonly used to explain ableist behavior. In part two, we explored the different groups impacted by ableism and saw how ableism impacts not only people with disabilities but also our communities at large. We also looked at a few case examples where individuals and families experienced ableism.

Part three will take a deeper dive into what ableism looks like. The goal of this part of the program is to be able to identify ableism so that we can avoid it in our own lives.

## SLIDE 4

**SLIDE DESCRIPTION:** A photo of fingertips set on Brail text.

**SLIDE TEXT:** Part 3: What does it look like?

**SLIDE SCRIPT:** Let’s get started.

## SLIDE 5

**SLIDE DESCRIPTION:** The icons from module 1, depicting the A-B-Cs of ableism are placed in a flowchart from left to right. The flowchart begins with the icon for cognitive (brain with gear wheels), shows an arrow to the affective icon (cloud), and then an arrow to behavioral (circular arrows).

**SLIDE TEXT:** Two types of ableism. Cognitive (beliefs and stereotypes), affective (emotions and attitudinal reactions) and behavioral (actions or practices).

**SLIDE SCRIPT:** In part one, we learned that ableism is both affective and behavioral. The “affective” is an internal process associated with attitudes and emotions and the “behavioral” refers to the actions stem from those attitudinal reactions. Remember that these all trace back to those beliefs and stereotypes we create – the cognitive – to justify our structural status.

In this section, we’ll start with the behavioral ableism. Because behavior reflects the things we do, it’s easy to see examples of ableism in our behaviors and the behaviors of others. The behaviors we’ll look center on accessibility, autonomy, inclusion, and communication.

After discussing the behavioral, we’ll move on to affective ableism. This is a little harder to pin down because it’s an internal process. But the impacts of this internal process show up in our language and in how we react to the lives of people with disabilities.

## SLIDE 6

**SLIDE DESCRIPTION:** The right side of the slide includes a photo of an accessible parking spot. The left side of the slide shares examples of how lack of accessibility results in ableism. The circular arrows icon is shown, indicating that this is a behavioral form of ableism.

**SLIDE TEXT:** Accessibility

* Sharing images on social media that do not have text descriptions
* Offering services by voice only
* Planning events at venues that do not have wheelchair access ramps
* Making food an event focus
* Failing to make accommodations for sensory needs
* Distributing information without a simplified version

**SLIDE SCRIPT:** Many ableist actions are the result of nondisabled people failing to consider their privilege in a given situation. A common example goes like this:

It’s the busy holiday season and you are shopping at the mall. You are wearing a coat and carrying several store packages when you realize that you need to use the restroom. Upon entering, you notice several open stalls, including the accessible stall. You choose the accessible stall so that you have space to take off your coat and hang all your packages.

It seems harmless -- especially if there is no one else in the restroom. But at the same time, a parent with a distressed autistic child may be heading in the direction of the restroom to clean up a toilet accident.

* This is just one example of how we can forget to consider accessibility. Some other places where we fail to consider accessibility are:
* Sharing images on social media that do not have text descriptions. This limits access for people with vision impairments who use screen readers.
* Offering services by voice only -- for example: “call our office to schedule an appointment” – can limit access for people who are Deaf or nonspeaking.
* Planning events at venues that do not have wheelchair access ramps limits access for people with physical disabilities.
* Making food an event focus. A food focus can limit access for people with food allergies, disabilities that impact feeding, or food-related mental illnesses.
* Failing to make accommodations for sensory needs. This can limit access for autistic people and people with sensory differences.
* Distributing information without a simplified version. This limits access for people with intellectual disabilities.

This list is by no means exhaustive, but it offers some examples of the ways accessibility can be limited across many different types of disabilities.

## SLIDE 7

**SLIDE DESCRIPTION:** Two women are seated at a bar and preparing to toast with beer glasses. The woman on the left sits on a bar stool with her knees crossed. The woman on the right is seated in a power chair with height adjusted so that she is level with her companion. The left side of the slide shares points about autonomy as it related to ablism and includes the circular arrows (behavioral ableism) icon.

**SLIDE TEXT:** Autonomy:

* Helping a disabled person to move past an obstacle (for example, crossing a street) without first asking whether they would like assistance
* Performing an activity for a person with a disability without giving them the chance to do it themselves
* Calling attention to yourself or a disabled person after being asked for assistance with an obstacle or activity

**SLIDE SCRIPT:** Disabled people are unique individuals with likes, dislikes, talents, and dreams -- just like everyone else. Yet there are numerous examples where people with disabilities are not given the opportunity to be in charge of their own lives because nondisabled people make assumptions about their autonomy. These situations are complicated because in the interactions, the nondisabled person is usually well-intentioned. Some examples of this include:

* Helping a disabled person to move past an obstacle (for example, crossing a street) without first asking whether they would like assistance
* Performing an activity for a person with a disability without giving them the chance to do it themselves
* Calling attention to yourself or a disabled person after being asked for assistance with an obstacle or activity (for example, saying something like “it’s so lucky I was here to help you!”)

## SLIDE 8

**SLIDE DESCRIPTION:** A laptop computer appears on the right side of the slide. The screen on the laptop shows the Facebook page for Diary of a Mom. The left side of the screen shows additional points on autonomy.

**SLIDE TEXT:** Autonomy:

* Making decisions for a disabled person without seeking their input or learning their preferences
* Restricting activities based solely on your conception of a person’s wants/needs/ability

**SLIDE SCRIPT:** Another way that people with disabilities may struggle with autonomy happens when nondisabled others make decisions about what is “best for them.”

A recent Facebook post by Jess Willson (2021) at Diary of a Mom shared that her daughter, who is approaching her 18th birthday, had requested a Blues Clues birthday call as a gift. When Wilson tried to enter her daughter’s birth date on the registration form, she received a message that her daughter was too old for this experience.

Wilson’s argument was that Nickelodeon Network had made a decision, based on an interpretation of what they believed was acceptable for an adult, and chose to limit access to something that would have given Wilson’s daughter joy. The story has a happy ending: Wilson was able to connect with the creators of Blue’s Clues and the age limit on birthday calls was removed.

In some cases, full autonomy isn’t appropriate (for example, with parents of a minor child). But even in these cases, we can always find ways to include our loved ones in the decision-making process.

## SLIDE 9

**SLIDE DESCRIPTION:** A school-aged girl with Down syndrome is pictured in a library. She is wearing a backpack and smiling. The left side of the slide shares examples of how avoidance relates to ableism. The circular arrows icon is also shown, indicating that this is a behavioral form of ableism.

**SLIDE TEXT:** Avoidance:

* Accessibility-related exclusion
* Assumptions that a person with a disability can’t or won’t enjoy an activity
* Fear reactions

**SLIDE SCRIPT:** Social media is full of stories about disabled children who are the only ones not invited to birthday parties. While these examples come to mind most readily when thinking about avoiding and excluding, there are many more subtle examples as well. In some cases, exclusion is a factor of accessibility (for example, how do you include a child who uses a wheelchair at a backyard pool party when the pool is above ground and inaccessible?).

Other cases make assumptions based on misunderstood autonomy (“we’re not going to invite him because he wouldn’t be able to do it anyhow.”)

Perhaps the most painful examples of avoiding and exclusion occur when people with disabilities are not included as a result of fears. According to Nario-Redmond (2020), ancient people may have developed a survival instinct that helped them to avoid others who looked ill. Those equipped to recognize conditions like plague or disease were more likely to survive and so this trait has been handed down.

While modern medicine has made this trait less necessary for survival, it is still present in the way we behave. Nario-Redmond (2020) referenced several studies where researchers observed how close people were willing to sit to someone with a visible disability in a waiting room. In the large percentage of cases, people chose to seat themselves as far as possible from a disabled person -- even if that put them in close proximity to others who were not disabled.

## SLIDE 10

**SLIDE DESCRIPTION:** On the right side of the slide, a photo depicts a woman and a teen boy sitting on the floor. They appear to be playing a game or doing some other floor activity. The woman has placed her hand on the boy’s shoulder, and they are smiling at each other. On the left side of the slide examples of patronizing behavior are listed.

**SLIDE TEXT:** Patronizing:

* Speaking to people with disabilities using childish language or tone
* Addressing a caregiver or attendant instead of the disabled person

**SLIDE SCRIPT:** Nario-Redomd (2020) cites Goldenberg et al., saying “what it means to be truly human is often described in terms of *abilities* -- language, self-reflection, and independence -- abilities that distinguish humans from other animals” (p. 49).

While animals use many different forms of communication, our use of language is one of the things that sets humans apart. And yet, because people with disabilities have historically been dehumanized, beliefs that they are unable to participate in communication persist even today.

Because of these beliefs, many nondisabled individuals speak to people with disabilities using childish language -- or they may ignore disabled people altogether in favor of speaking to a caregiver or attendant.

## SLIDE 11

**SLIDE DESCRIPTION:** The right side of the slide includes a popular meme with a quote from Scott Hamilton. The quote reads, “the only disability in life is a bad attitude.” Behind the quote is a photo of two para-athletes: and adult man and a preschool-aged girl. Both have prosthetic legs and they are running together on an indoor track.

**SLIDE TEXT:** Inspiration Porn. Sharing memes, videos, and stories that objectify people with disabilities (behavior). Using these images/stories to feel better about our own lives (affective)

**SLIDE SCRIPT:** Inspiration porn is a good transition between behavioral ableism and affective ableism because it contains components of both. If you’ve never heard the phrase before, it comes from disabled comedian and activist, Stella Young. In a 2014 TED talk, Young told members of the audience:

**“And these images, there are lots of them out there, they are what we call inspiration porn. (Laughter) And I use the term porn deliberately, because they objectify one group of people for the benefit of another group of people. So in this case, we're objectifying disabled people for the benefit of nondisabled people. The purpose of these images is to inspire you, to motivate you, so that we can look at them and think, ‘Well, however bad my life is, it could be worse. I could be that person.’” (para. 5)**

Examples of “inspiration porn” range from memes shared on social media to news stories about nondisabled students asking a disabled student to prom. In each case, the person with a disability is objectified in order to make nondisabled people feel better about their lives.

## SLIDE 12

**SLIDE DESCRIPTION:** The right side of the slide shows a Black American woman and a Black American boy with Down syndrome, seated on opposite sides of the coffee table. The woman is laughing and holding a wooden car. The boy is also laughing and his car sits just out of reach -as if he has pushed it there. The affective (cloud) icon appears next to the slide title (Language).

**SLIDE TEXT:** Language: Outdated terms/phrases, Euphemisms, Dehumanizing & disempowering words/phrases, Labels.

**SLIDE SCRIPT:** This brings us to language. While communicating is technically a behavior, the words we choose to communicate are part of a complex process that is influenced by our emotions and attitudinal reactions. Everyone can remember a time when they blurted out something they wished they could take back after getting angry. In this same way, our internal processes impact how we talk about things and what we say.

Most ableist language reflects implicit beliefs. Implicit means “implied” and implicit beliefs can be so enmeshed with who we are that we don’t even know we have them. For example, when you’re in a crowded area and we need make a path from one side to another, we instinctively go to the right. The fact that we travel to the right is implicit knowledge in American culture. No one tells us to go to the right – instead, we’ve learned this behavior over time by witnessing it in others.

The same thing can happen with beliefs about other people. In most cases, our parents didn’t sit us down and explicitly say “disabled people are bad. They are less than you.” We absorbed this knowledge from our environment based on media portrayals, experiences with the behaviors of others, and so on.

Project Implicit (implicit.harvard.edu/implicit), a website maintained by Harvard University, offers several online Implicit Association Tests (IATs) that can help you to understand your level of implicit bias. An IAT assumes that we can make connections based on implicit attitudes very quickly (for example, “nondisabled = good”). When we are asked to make a connection that goes against an implicit attitude, it takes us longer to respond. I’ve included a link to Project Implicit at this end of this part in case you’d like to try it yourself. It’s a great tool that can help you learn more about yourself.

As we explore this section on language, we’ll look at three types of ableist language that are most common. There are definitely more, but with an understanding of these three, you can begin to improve your awareness.

## SLIDE 13

**SLIDE DESCRIPTION:** A quote by Nick Marcellino.

**SLIDE TEXT:** “Some say we shouldn’t worry about the words, just the way we treat people. But if you think about it, what you call people is how you treat people. If we change the words, maybe it’ll be the start of a new attitude towards people with intellectual disabilities. And they deserve it.” – Nick Marcellino

**SLIDE SCRIPT:** Throughout history, many terms and phrases have been used to describe disabilities. In 1858, Dr. S. G. Howe published an article in the Journal of Psychological Medicine and Mental Pathology titled, “On the Causes of Idiocy.” This article represented the first time that different categories of intellectual disability were widely communicated in the medical community. Howe’s terms included “idiots,” “fools,” “simpletons,” and “imbeciles” (Howe, 1858).

While Howe’s terms were intended for use as medical classifications, they eventually became part of the common language where they were used to describe people or animals that were unappealing. Over time, the terms took on a primary role as insults and were dropped from medical use. The same has happened with words like “moron,” “cripple,” “retarded,” and “crazy.”

In some cases, the use of outdated terms has become so inflammatory that campaigns were created to remove the term from common language entirely. “Retarded,” or the “R-word” was once a diagnostic term that has been misused in such abusive ways that there is no longer a sanctioned use of the word. In 2010, President Barak Obama signed “Rosa’s Law,” which replaced the terms “mentally retarded” with “intellectual disability,” emphasizing the dignity and self worth of people with intellectual disabilities.

When the law was signed, Rosa’s brother, Nick Marcellino, shared the powerful meaning behind changing the language in this quote:

**“Some say we shouldn’t worry about the words, just the way we treat people. But if you think about it, what you call people is how you treat people. If we change the words, maybe it’ll be the start of a new attitude towards people with intellectual disabilities. And they deserve it.”**

## SLIDE 14

**SLIDE DESCRIPTION:** A laptop sits, open on the right side if the screen. On it is a screen shot of Lawrence Carter-Long’s now viral Tweet, “Disabled.” #SayTheWord. On purpose. Until & unless we do, they won’t. #NotDifferent #NotSpecial #Disabled. On the right side of the slide is a quote from Lawrence Carter-Long and the cloud/affective ableism icon.

**SLIDE TEXT:** Tacking back terms. This slide also includes a quote by Lawrence Carter-Long that is included, in full, in the script.

**SLIDE SCRIPT:** In other cases, groups within the disability community have created campaigns to “take back” words that nondisbled people have turned into insults.

The word “crip” (short for “cripple”) is one example of a word that the disability has taken back with social media campaigns like #CripTheVote.

Taking back terms can be a source of empowerment, as this Tweet from disability activist, Lawrence Carter-Long, illustrates. Carter-Long, a disability activist with cerebral palsy, started the Say The Word campaign in response to Barack Obama’s 2016 State of the Union address. In the speech, Obama was careful to acknowledge diverse groups from across the country but failed to mention people with disabilities even once.

According to Carter-Long, acknowledging the word “disabled” and allowing people to claim this word as part of their identities is not only empowering, it allows them to be seen.

In an interview with NPR, Carter-Long stressed that: “To suggest disability is simply a 'difference' and has no impact on a person's life is a very privileged position to take. Most disabled people don't have that luxury. The assertion flies in the face of reality and minimizes the very real discrimination disabled people face."

It’s worth noting that not everyone feels the same about taking back outdated terms. In the replies to Carter-Long’s Tweet, many people offered disagreements, saying that the term had connotations or being less than or broken.

## SLIDE 15

**SLDIE DESCRIPTION:** A text-based slide defining euphemisms.

**SLIDE TEXT:** Euphemisms. “A mild or indirect word or expression substituted for one considered to be too harsh or blunt when referring to something unpleasant or embarrassing.” – Google Dictionary

Common disability euphemisms: Differently abled, Challenged, Handi-capable, Special needs.

**SLIDE SCRIPT:** According to the Google dictionary, a euphemism is “a mild or indirect word or expression substituted for one considered to be too harsh or blunt when referring to something unpleasant or embarrassing.” A common example of a euphemism is saying “the employee was let go” instead of saying “the employee was fired.”

Despite efforts to take back the term, the word “disabled” is still associated with negative connotations. To avoid that negative, “icky” feeling the word disabled invokes, indirect descriptions are substituted. These may include:

* Differently abled
* Challenged (as in mentally challenged, physically challenged, etc.)
* Handi-capable
* Special needs

Disability euphemisms are troubling for a couple of reasons. First, they can infantilize disability conditions. Imagine reporting to work at a new job and telling your employer, “I’m handi-capable and I would like to talk to you about some accommodations.”

Disability euphemisms can also create divides where we need inclusion. An educational campaign created for World Down Syndrome Day in 2017 included a video where actors with Down syndrome suggested that special needs should include things like eating dinosaur eggs for breakfast or wearing a suit of armor (McClammy, 2017). The video concludes that people with Down syndrome don’t need something special. They have the have the same needs as everyone else -- access to education, jobs, opportunities, friendships and love.

As with our discussion of outdated terms, it’s important to note that some people with disabilities embrace euphemisms because these terms are empowering to them. It’s important to recognize that the disability community is extremely diverse and to defer to individual preference.

## SLIDE 16

**SLIDE DESCRIPTION:** The right side of the slide contains a photo of a Black American man using a wheelchair to cross a city street. The left side of the side shares dehumanizing and disempowering words and phrases. The cloud (affective ableism) icon also appears on this slide.

**SLIDE TEXT:** Dehumanizing & Disempowering Words/Phrases: Wheelchair bound, Suffering from…, Crazy/insane.

**SLIDE SCRIPT:** Another way that ableism creeps into our language is through the use of dehumanizing words and phrases. Consider the common phrase, “wheelchair bound.” What does it bring to mind first? A person? Or a mobility device that is somehow attached to the person?

If I told you that my child suffers from autism, can you find anything in that statement that communicates the incredible strength that my child demonstrates each day when she contends with the challenges her disability presents? Or do you only see a victim?

What if I told you that a crazy person lived next door to me? Would you want to meet the sweet neighbor who always remembers your birthday and who also struggles with anxiety and depression?

While we may not intend to dehumanize and disempower people with disabilities, careless use of words, phrases, and even images puts them at risk of exposing vulnerabilities in ways that we would not do to a typical person.

## SLIDE 17

**SLIDE DESCRIPTION:** The right side of the slide shows a screen shot from the National Center on Disability and Journalism website that includes their disability style guide. The left side includes the URL for the style guide.

**SLIDE TEXT:** National Center on Disability and Journalism Style Guide: ncdj.org/style-guide

**SLIDE SCRIPT:** The National Center on Disability and Journalism offers a thorough style guide in both English and Spanish that can help you to identify outdated terms and decide when or why to ask about disability language preferences. While it is a good starting point, it’s best to always defer to individual preference.

## SLIDE 18

**SLIDE DESCRIPTION:** A word cloud is centered on the slide with different labels that people use to identify themselves. The cloud (affective ableism) icon is also shown.

**SLIDE TEXT:** Words from the word cloud are included in the script for this slide.

**SLIDE SCRIPT:** Labels are probably the most complicated component of language associated with disability. The reason for this is because disabled people in America are more diverse than almost any other minority population. Disabled Americans are:

* Adults, Children
* Male, Female, Gender-fluid, or nonbinary
* Black, White, Hispanic, Asian, and mixed
* Rich, Poor
* Christian, Muslim, Jewish
* Immigrant, Refugee

The list could go on and on because disabled people are part of every demographic in this country.

## SLIDE 19

**SLIDE DESCRIPTION:** Four circles overlap to form a Venn diagram, representing intersectionality. The area at the center, where all four circles overlap, has an arrow pointed to it that reads “you are here.”

**SLIDE TEXT:** Intersectionality. What five things – if they were removed from you – would make you no longer who you are?

**SLIDE SCRIPT:** The challenge with having such a diverse list is something called “intersectionality.” Your intersectionality can best be described by the influences in your life. Intersectionality reflects both sources of power and of oppression that overlap to make you the unique individual you are.

The National Association for Social Work’s Ohio chapter presented an interesting exercise in intersectionality as part of their anti-oppression informed practice training. They facilitators posed the question:

What five things – if they were removed from you – would make you no longer who you are?

For example, I am a woman. I am a white American of central and eastern European descent. I am a member of the middle class. I am a parent. I identify as neurodivergent.

These things influence every part of my life. Without them, I would not be who I am. People with disabilities have intersectionalities that are every bit as diverse as mine, and their responses to labels and language are influenced by these factors. This is why language choices are often individual preferences.

## SLIDE 20

**SLIDE DESCRIPTION:** The photo on the right side of the slide is a portrait of a Caucasian boy with Down Syndrome. His expression is thoughtful and serious. A cloud icon appears next to the slide title, “functioning labels.”

**SLIDE TEXT:** Functioning labels. Don’t give a full picture of the strengths or challenges a person with a disability faces. Often misleading because they can change depending on environment.

**SLIDE SCRIPT:** Functioning labels came into our language with Dr. S. G. Howe’s 1858 article in the Journal of Psychological Medicine and Mental Pathology titled, “On the Causes of Idiocy.” According to Howe (1858), an “idiot” was worse off than a “fool” who was worse off than a “simpleton.” While words like fool and simpleton have fallen out of use, many families and practitioners have kept functioning labels in phrases like “high-functioning autism” and “severe disability.”

Those who use functioning labels argue that we need a way of differentiating how much support a person needs in order to be part of the community. To put it another way, these people believe that without a label, their loved ones will not be able to get the services they need. Unfortunately, in today’s policy, they’re not entirely wrong. But perpetuating the labels isn’t helping anyone in the long run.

That’s because there are some major flaws with that way of thinking. First, labels can be subjective. Consider two disabled adults. One is a nonspeaking woman with average intelligence who can make certain life decisions on her own. The other is a man who can communicate with speech but who needs support in decision making. Which one is more disabled?

The second flaw with functioning labels is the environmental impact on a person’s disability. For instance, a child who is labeled with “high-functioning autism” may be able to attend school in a mainstream classroom but may also struggle with debilitating anxiety in order to do so. A “severely disabled” adult may struggle with activities of daily living but could also have a great sense of humor that makes people enjoy his company.

Simply put, functioning labels don’t give a full picture of the strengths or challenges a person with a disability faces and are often misleading at best.

## SLIDE 21

**SLIDE DESCRIPTION:** Text-based slide comparing person-first and identity-first language.

**SLIDE TEXT:** Person-first language (PFL): A person with Down syndrome, a woman who uses a wheelchair.

Identity-first language (IFL): An autistic man, a disabled child.

**SLIDE SCRIPT:** No discussion of language as it relates to people with disabilities would be complete without spending some time on person-first and identity-first language.

The People First Movement began in 1974 when the organizers of a convention on disabilities decided that they needed a name for themselves (*History of People First*, n.d.). A member of the committee mentioned that they were tired of being known for their disability, saying “I’m tired of being called retarded – we are people first” (*History of People First*, n.d., para. 4).

Disability advocates rapidly claimed person-first language (PFL), which symbolically places the person ahead of a disability diagnosis, as in “person with Down syndrome.” State legislatures followed, with many enacting laws or guidelines for using person-first language and major disability acts, including the ADA, have been written using person-first language.

Identity-first language (IFL) began to appear in the late 1980s (*A Brief History of Identity-First Language*, 2016). Despite the fact that PFL was designed to place emphasis on the person, IFL advocates argued that the concept was still anchored in the belief that disability is inherently bad. If, after all, human differences are all perceived as equally contributing to diversity, why would disability be the only difference that was emphatically placed ***AFTER*** the person? IFL advocates also argue that you wouldn’t call a Black American “a person with blackness,” nor should you need to do the same with disability.

## SLIDE 22

**SLIDE DESCRIPTION:** A cartoon on the right slide of the slide depicts a woman talking to a man who uses a wheelchair. The woman is asking him, “so what do you prefer to be called? Handicapped? Disabled? Or physically-challenged?” The man replies, “Joe would be just fine.” The caption under the cartoon reads, “The most appropriate label is usually the one someone’s parents have given them.”

**SLIDE TEXT:** Which is best? Always defer to individual reference. Use the person’s name.

**SLIDE SCRIPT:** Despite compelling arguments for PFL, IFL and other labels, there is no consensus as to which is preferred in the disability community.

Because there is so much diversity in the disability community, each of these ways of referring to oneself can be empowering to different people. In a conversation I had recently, a parent shared that her son had chosen the words “special needs” as a label for himself. She related that her son felt that his needs were special and that using this label empowered him.

For that reason, it’s best to ask what an individual prefers -- or better still -- use their given name.

## SLIDE 23

**SLIDE DESCRIPTION:** A female wheelchair user is depicted from behind. A backpack is slung on the back of her wheelchair and she is moving toward city buildings on a cobblestone street. Other people walk or stop for conversation nearby.

**SLIDE TEXT:** Thank you.

**SLIDE SCRIPT:** Thank you for joining me. This concludes part three of this program. In part four, we’ll reflect on what we’ve learned and share some tools to help you to dismantle ableism.

## SLIDE 24

**SLIDE DESCRIPTION:** Acknowledgements slide which credits program supporters.

**SLIDE TEXT:** Charisse N. Montgomery, M.A., M.Ed., GPAC. Charisse (“Nikki”) provided valuable insight into the experiences of Black Americans with disabilities.

Sarah Rintamaki. Sarah contributed to this project with continued support and insight into experiences of families with disabled children.

Lisa Ruman, LISW, CHt. As an independent social worker, Lisa provided supervision and support from a systems perspective.

**SLIDE SCRIPT:** Before we go, I’d once again like to thank some of the talented individuals who have helped to make this program a reality.

Thank you to Charisse Montgomery for your valuable insights into the experiences of Black Americans with disabilities. Sarah Rintamaki has helped to support this project from the beginning with overwhelming encouragement and with her insights into the experiences of families with disabled minor children. Finally, Lisa Ruman contributed to this project through an extension of her supervision work and by helping me to include systems and empowerment approaches consistent with social work values.

I am deeply grateful to each of you for your support.

## SLIDES 25-26 (References)

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