

Exceptional Individuals Language Consultation 2022

Introduction

In January 2022, Exceptional Individuals conducted a consultation on our use of language about neurodiversity.

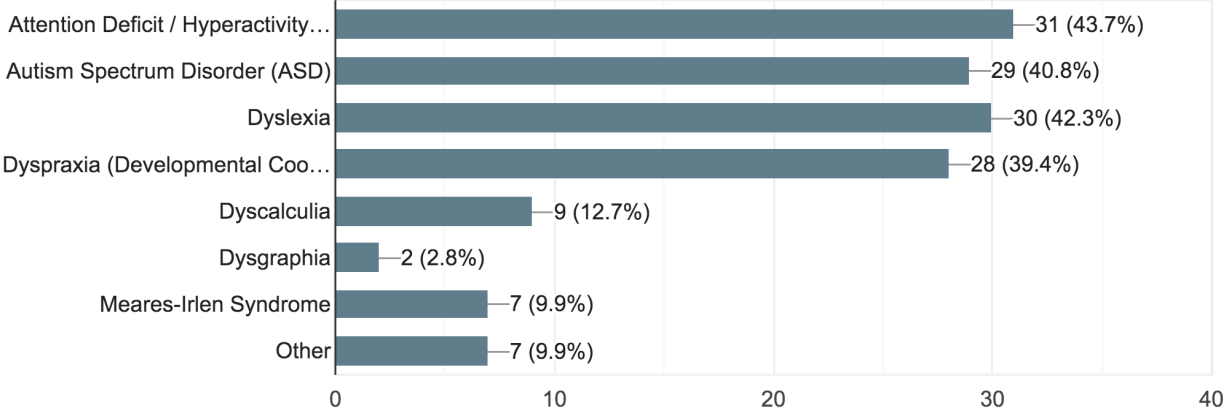
This consultation supports our language use and policies which reflect the preferences of our valued community.

We surveyed our team and our community, and received over 70 responses.

We asked general questions on disability, neurodiversity, and neurodivergence specific questions.

While all questions were open to respondents, we have conducted detailed analysis to prioritise the comments about specific neurodivergences, made by the people with those neurodivergences.

Respondent Sample



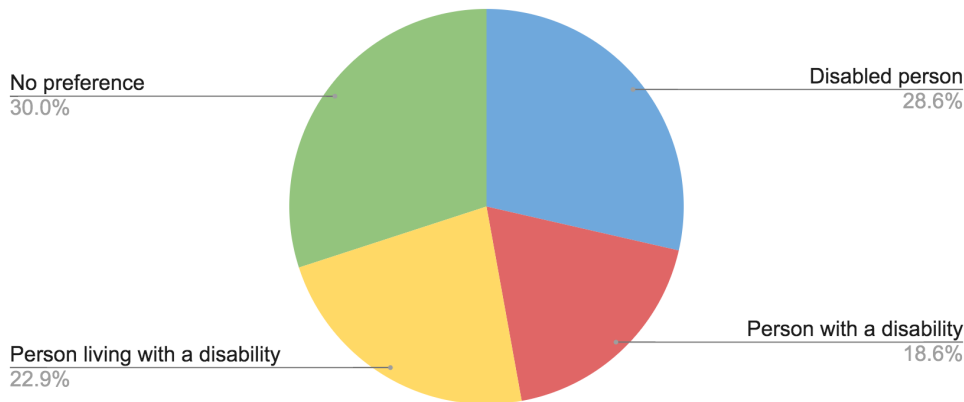
Language on disability

Identity-first vs person-first language

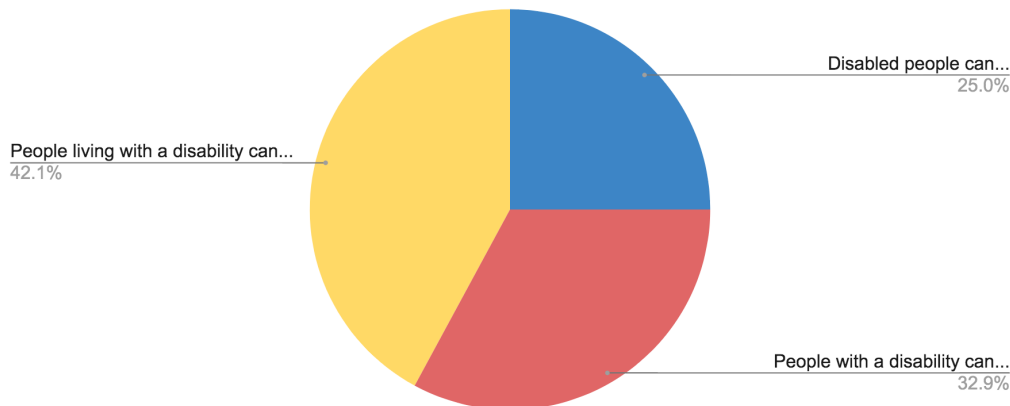
Identity-first language is language which puts the 'identity' before 'person'. For example, 'gay person', 'white person', 'disabled person'. Person-first language is typically in the form 'person with' or 'person living with'. For example, 'person with a disability.'

The majority of respondents were undecided, however the second most popular option was 'disabled person', rather than 'person with a disability'. However, when talking about disabled people as a group, the respondents preferred the 'person-first' term 'people living with a disability.'

Person first or Identity first language: singular



Person first or Identity first language: plural



Preferences:

Singular: **Disabled person**

Plural: **People living with a disability**

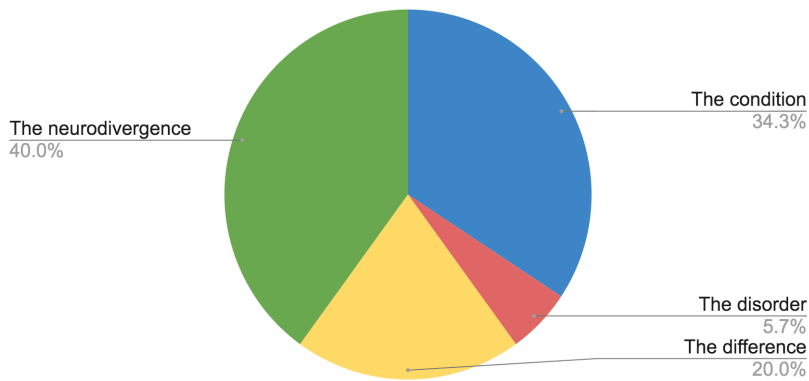
Language about neurodiversity and disability

Respondents favoured the term 'neurodivergence' over condition, disorder, and difference. However, the term 'condition' was the second most preferred option to describe neurodivergence.

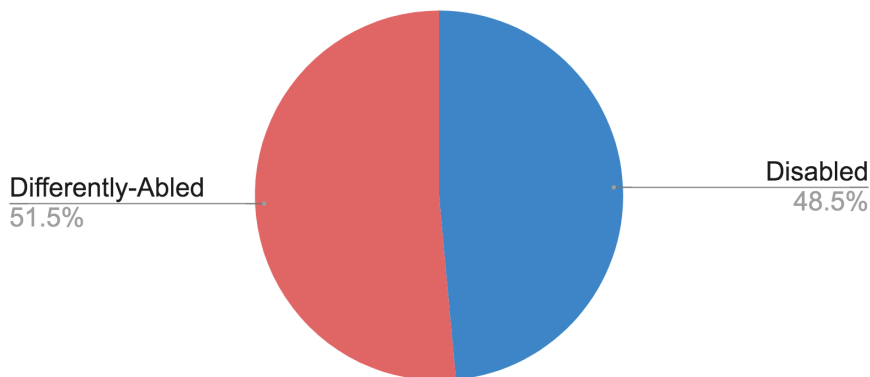
Respondents narrowly preferred the term 'differently-abled' over 'disabled' to describe people with neurodivergence. However, the results were marginal. Similarly, the term 'learning-different' was strongly preferred over 'learning-disability'.

Respondents preferred the term 'neurodiverse' to describe someone with autism, adhd, dyslexia, etc over the term 'neurodivergent'. However, this preference was marginal. There was a stronger preference for the term 'neurodiversity' over the term 'neurodivergence' to describe conditions such as autism, adhd, dyslexia.

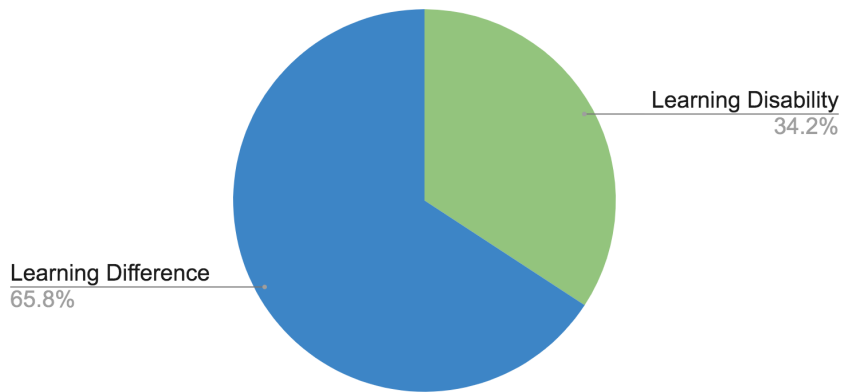
Preferred name to describe autism, adhd, dyslexia, dyspraxia etc



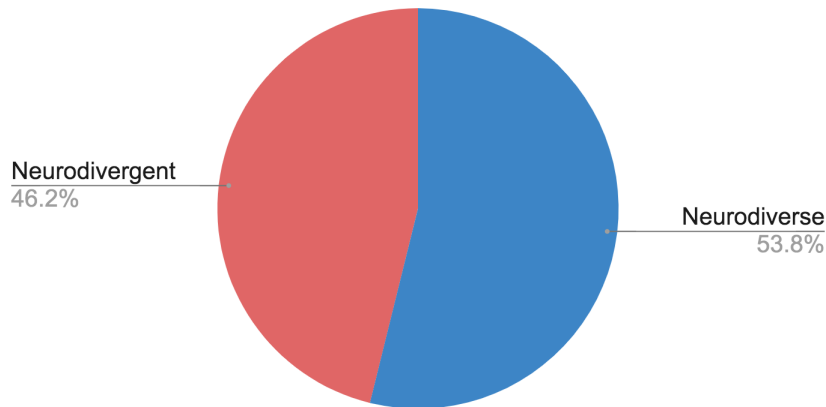
Disabled or differently-abled



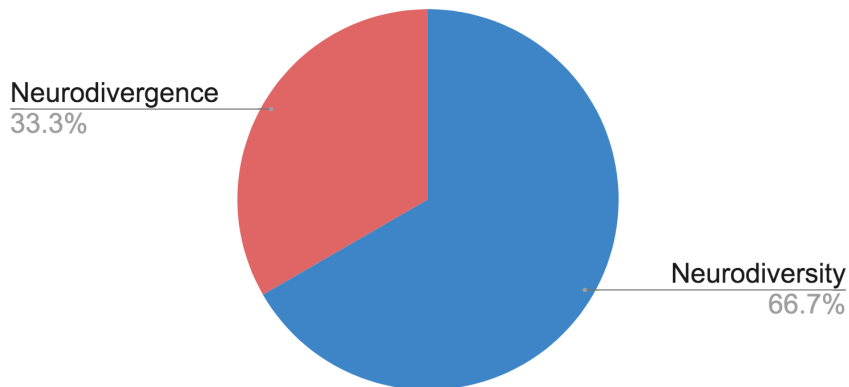
Learning disability or learning difference



Neurodiverse or neurodivergent



Neurodiversity or neurodivergence



Preferences:

Neurodivergence over condition, disorder, and difference

Differently-abled over disabled

Learning-difference over learning-disability

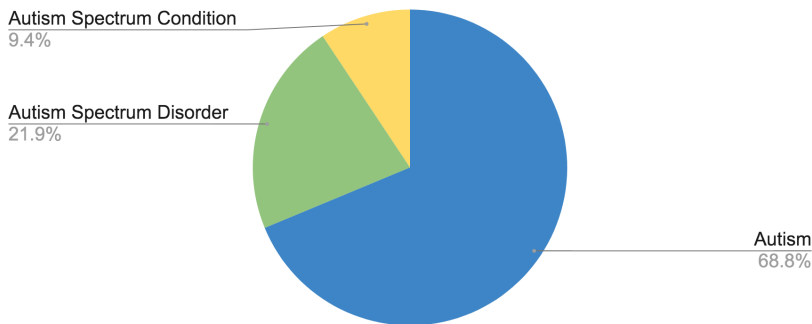
Neurodiverse to describe someone who has autism, adhd, dyslexia etc

Neurodiversity to describe the collection of 'conditions' such as adhd, autism, dyslexia

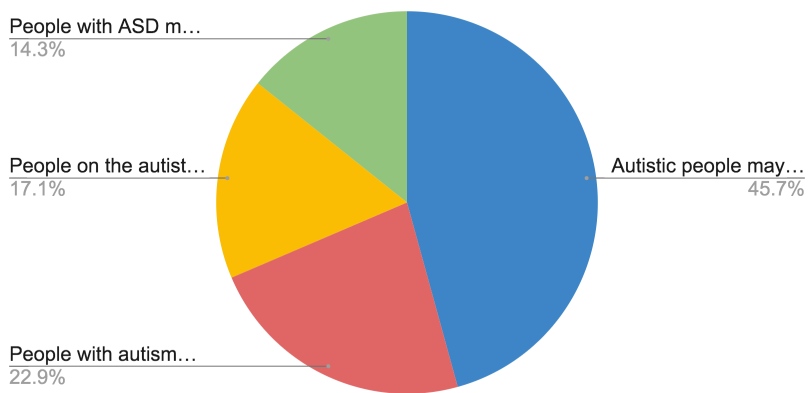
Autism

Our autistic respondents strongly preferred the term 'autism' over 'autistic spectrum disorder' or 'autistic spectrum condition'. Autistic respondents also preferred identity-first language when referring to autism. Eg. 'autistic people may prefer...'. Furthermore, autistic respondents had a narrow preference to not capitalise 'autism' and strongly prefer the use of the term 'higher support needs' to discuss the way autism may affect someone.

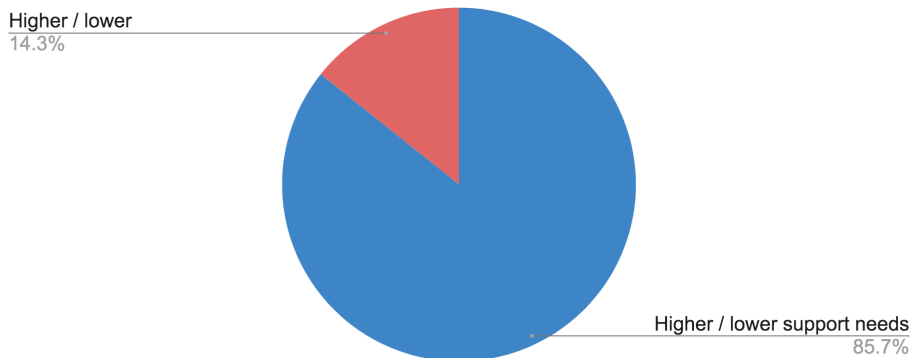
Which name do you prefer to use to describe autism?



Which sentence do you prefer?



Describing differences in autism



Preferences:

Autism over other terms

Identity-first language eg. 'Autistic people may prefer...'

Do not capitalise 'autism'

Use '**higher / lower support needs**' when talking about different types of autism

Only refer to **Asperger's** when discussing historical terminology and where it is an autistic person's preferred way to describe themselves.

Comments:

"Unsure of what my preferred alternative to autism is but given the terms roots - like Asperger's - in the eugenics movement of Nazis, I feel like a better term exists."

"Very much dislike the words 'disorder' and 'condition'"

"Don't really like the term 'on the spectrum', there are lots of spectrums. I think it makes me sound like I'm very different to everyone else."

"Asperger / severe (will say high functioning but not low)"

"Different support needs"

"In general, I think varying support needs is best"

"Don't like the idea of people having more or less needs being marginalised"

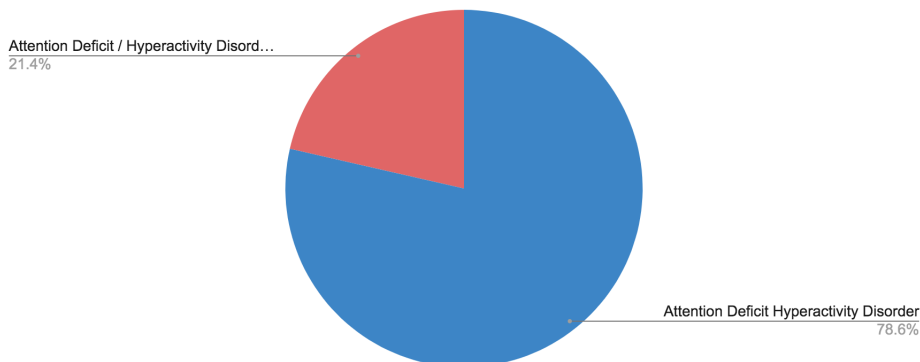
"I would prefer a reperspectivised version of the autism spectrum which doesn't place it as a linear narrative but recognises a diversity of different needs which come and go with each individual. Largely,

I think the current idea of the 'spectrum' does more harm than good.. I'd probably prefer language which just normalised that all autistic people need support which varies across time, in the same way that I wouldn't expect depression to be categorised by level of support need when Thursday might be a good day and January might be a bad month."

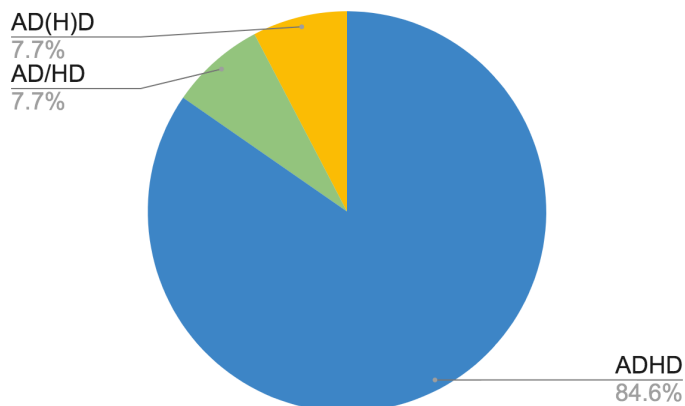
ADHD

Our respondents with ADHD had strong preferences for **not** including a 'forward slash' in the term or the acronym. Moreover, there was a strong preference for 'person-first language' eg. 'people with ADHD'. However, there were comments around disliking the terms 'disorder', 'deficit', and 'condition' and would prefer different language, such as 'VAST' (Variable Attention Stimulus Trait). There were narrow margins between whether we should continue to distinguish between ADD, exclusively use ADHD, or refer to ADHD and the presentations. However, the majority preferred to not distinguish between ADHD and ADD. Interestingly, from the data collected from all responses, the majority prefer to distinguish between ADHD and ADD. However, as noted, we are prioritising the responses of people with ADHD.

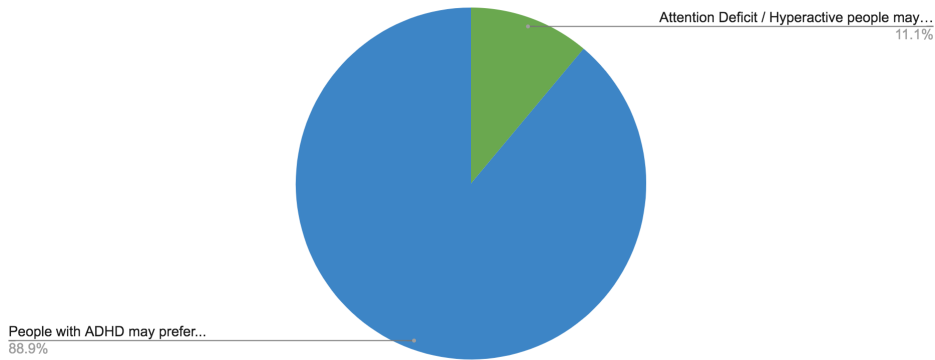
Which name do you prefer to describe ADHD?



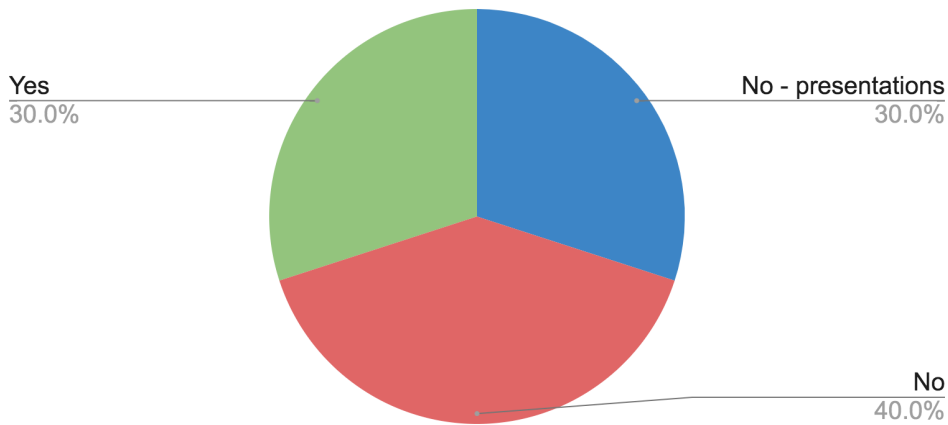
Which acronym do you prefer?



Which sentence do you prefer?



Should we distinguish between ADD and ADHD or use presentations?



Preferences:

Attention Deficit Hyperactivity Disorder without the brackets or forward slash

ADHD without the brackets or forward slash

Do not distinguish between ADD and ADHD as separate neurodivergences in official copy

Person-first language 'People with ADHD may prefer...'

Comments:

"I use ADHD because people understand what that is. However, I really hate the word disorder."

"something without "deficit" and "disorder""

“tbh I’m not fussed- lol. but tend to go with adhd - although the slash is good for highlighting not everyone is hyperactive - I’d say I’m on the sloth-like scale of stereotypical hyperactivity!!”

“I think Attention Deficit Disorder (ADD) is a separate condition, without the hyperactivity component, but I’m not sure.”

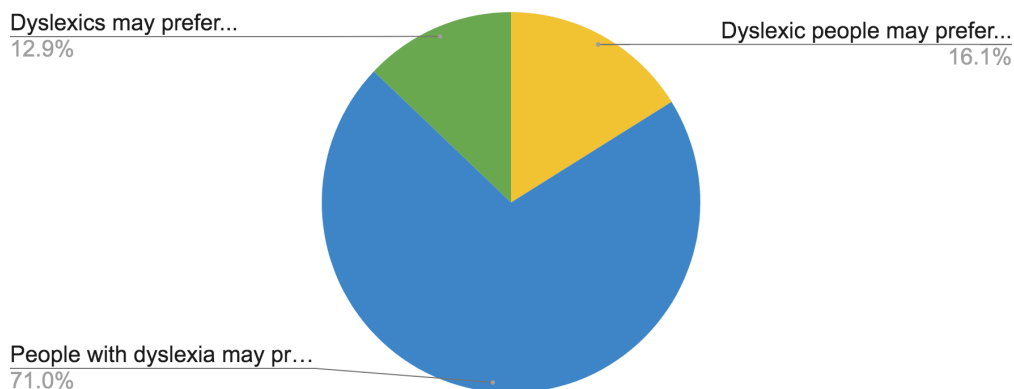
“In an ideal world, a more accurate term like VAST (Variable Attention Stimulus Trait)”

“Let people diagnosed with ADD keep using that label, but when talking in generalities, using ADHD as an umbrella keeps things simple and easier for an audience to digest.”

Dyslexia

Our dyslexic respondents had strong preferences for person-first language and the capitalisation of ‘dyslexia’.

Which sentence do you prefer?



Preferences:

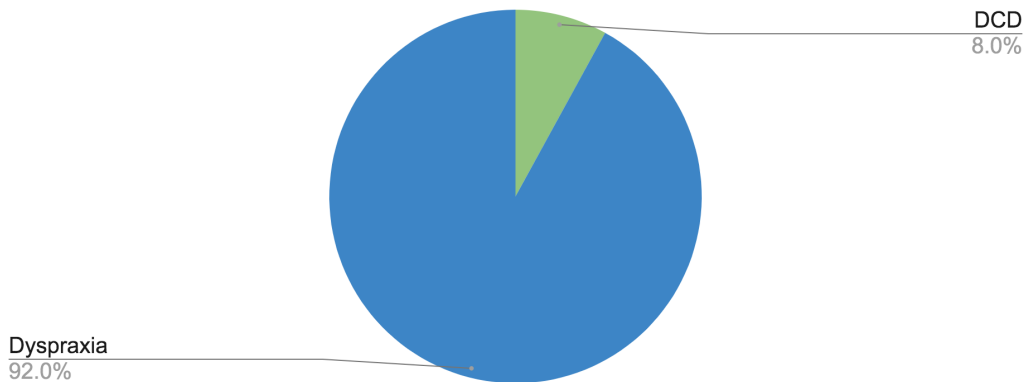
Person-first language eg. ‘people with dyslexia’

Capitalise dyslexia

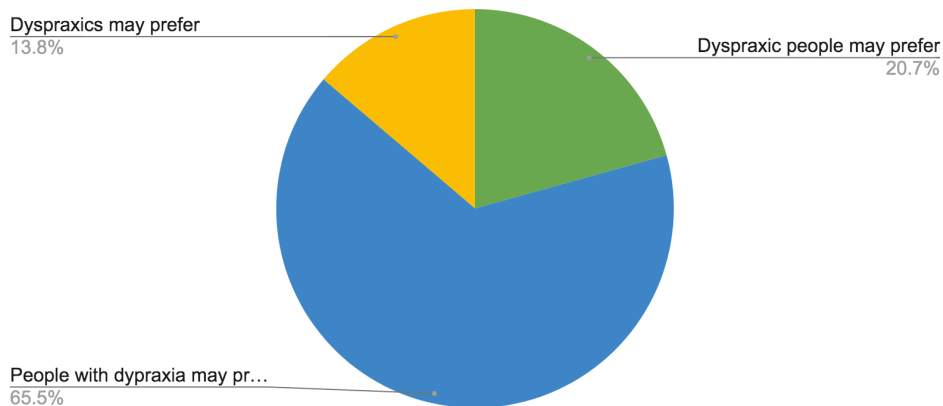
Dyspraxia

Our respondents with dyspraxia had a strong preference for the term 'dyspraxia' over 'developmental coordination disorder' and person-first language. There was also a narrow preference towards capitalising 'dyspraxia'.

Which name do you prefer?



Which sentence do you prefer?



Preferences:

Dyspraxia over other terms

Person-first language e.g. 'people with dyspraxia'

Capitalise dyspraxia e.g. 'Dyspraxia'

Comments:

"Anything other than clumsy child syndrome is fine"

"Developmental Coordination Condition?"

General Comments

"In regards to ADHD I feel it is important to differentiate between those with hyperactive/impulsive tendencies and those without. ADD is used by me and those in my family because it is a way to describe ourselves easily to neurotypical people especially those in the medical profession even though I'm aware it's an outdated term. I've also had difficulty when trying to find support groups or support spaces where I am unable to relate to most of the other people there with ADHD due to not having hyperactive or impulsive behaviours. I've never heard of AD/HD before but I feel like it might leave out people with combined type adhd. I normally describe myself as inattentive ADHD previously known as ADD in person or online as ADHD(I). Grouping people under the umbrella of adhd is good in general because we are all in the same boat. I feel it's always important to acknowledge the subcategories as they influence the way people experience ADHD massively and therefore the support they need from organisations such as yourselves."

"I'm less concerned with capitalisation, but my preferences with my conditions (ADHD and dyspraxia) are condition-first, unless grammatically unwieldy. Some person-first language can sound condescending, despite the intent being otherwise, and there really should be no shame in identifying with your condition enough to use condition-first language. Also, I would definitely advise using ADHD (no '/') and only referring to the subtypes when the subject explicitly doesn't apply to the condition as a whole. Thank you for taking the time to consider this though."

"Neurodiverse people should not be seen as 'abnormal' and neurotypical people not seen as 'normal'."

"Uppercase or lowercase does it really matter. It's just words you use in sentences when writing/typing in the beginning, middle & ending formations."

"Try and not use disability, because day time day people don't understand that it doesn't necessarily hold people back. Unfortunately disability has a negative connotation. They also assume it's physical rather than potentially being cognitive, so then you're treated badly for saying you're disabled when they think you're not. There are preconceived ideas to what disabled means, and cognitive, for day to day people, is not part of it."

"I wonder if it should be called the Dyslexia group (instead of just Dyslexia) as all Dyslexic suffer from a number of issues, Dyscalculia etc It's a shame non of these names allude in any easily understandable way to the conditions problem, like 'Number Difficulty'. Even if the word could have 'digit' it, or 'number' in the description. I had to look up Dysgraphia because it involves comprehension, not just writing ability. I know you can't do anything about that but it is super frustrating."

"Personally my issue with person-first language is only that it sounds euphemistic, which I think is patronising. The exception would be ADHD as there isn't really an adjective for this disorder like there is with autism"

"I would caution against the use of Neurominority as black friends have expressed concern considering the usual use of minority relates to race and ethnicity. Neurodivergent people don't face anywhere near the kinds of oppression that are usually discussed surrounding minorities."

Next steps

In light of the results of our language preferences survey, we will update our language policies and language use on our website and social media.

We acknowledge that language preferences can be personal and we respect the different perspectives within our communities. However you chose to describe yourself and your neurodiversity, when you access our services, for example mentoring, coaching, or workplace needs assessments, we will endeavor to use your preferred language.