



Appendix 0.2

*Appropriate
Disability
Language*

This document provides guidance for appropriately communicating with and about patients with disabilities. People may have personal preferences on the use of Person-First versus Identity-First language when referring to their disability. Either is acceptable and you should ask their preference.

Understanding the Terminology Approaches¹

Person-First Language

Person-first language (e.g., "patient with epilepsy," "individual with a mobility impairment") places the person before the disability condition.

Examples in healthcare settings:

- "The patient with diabetes is scheduled for 2:00 PM"
- "We provide services for children with learning disabilities"
- "The woman with a visual impairment requires these accommodations"

Identity-First Language

Identity-first language (e.g., "disabled patient," "autistic child") acknowledges disability as an inherent aspect of a person's identity.

Examples in healthcare settings:

- "Deaf patients may request an ASL interpreter"
- "Our facility is designed to be accessible for Autistic adults"

“10 Commandments of Communication”

These guidelines provide ways to respectfully interact with people with different kinds of disabilities. They were developed based on the experiences of people with disabilities and slightly modified by DEC to add context. The list was originally developed by the U.S. Department of Labor’s Office of Disability Employment Policy and was accessed from Rutgers University Access and Disability Resources.²

1. When talking with a person with a disability, speak directly to that person rather than through a companion or sign language interpreter.
2. When introduced to a person with a disability, it is appropriate to offer to shake hands. Consider asking, “is it okay if I shake your hand?” before initiating contact. People with limited hand use or who wear an artificial limb can usually shake hands. Shaking hands with the left hand is an acceptable greeting.
3. When meeting a person with a visual impairment, always identify yourself and others who may be with you. When conversing in a group, remember to identify the person to whom you are speaking.
4. If you offer assistance, wait until the offer is accepted. Then listen to or ask for instructions.
5. Treat adults as adults. Address people who have disabilities by their first names only when extending that same familiarity to all others. Never patronize people who use wheelchairs by patting them on the head or shoulder.
6. Leaning or hanging on a person’s wheelchair is similar to leaning or hanging on to a person and is generally considered annoying. The chair is part of the personal body space of the person who uses it.
7. Listen attentively when you’re talking with a person who has difficulty speaking. Be patient and wait for the person to finish, rather than correcting or speaking for the person. If necessary, ask short questions that require short answers, a nod, or a shake of the head. Never pretend to understand if you are having difficulty doing so. Instead, repeat what you have understood and allow that person to respond. The response will clue you in and guide your understanding.
8. When speaking with a person who uses a wheelchair or a person who uses crutches, place yourself at eye level in front of that person to facilitate the conversation.

9. To get the attention of a person who is deaf or hard of hearing, tap the person on the shoulder or wave your hand. Look directly at the person and speak clearly. Not all people with a hearing impairment can lip read. For those who do lip read, be sensitive to their needs by placing yourself facing the light source and keeping hands, cigarettes, and food away from your mouth when speaking.
10. Relax. Don't be embarrassed if you happen to use accepted, common expressions, such as "See you later" or "Did you hear about that?" that seem to relate to the person's disability. Don't be afraid to ask questions when you're unsure of what to do.



Communicating With and About People with Disabilities (CDC)³

PEOPLE FIRST LANGUAGE

LANGUAGE TO AVOID

Person with a disability	Handicapped
Person without a disability	Normal person, healthy person
Person with an intellectual, cognitive, developmental disability	Retarded, slow, simple, moronic, defective, afflicted, special person
Person with an emotional or behavioral disability, or a mental health or a psychiatric disability	Insane, crazy, psycho, maniac, nuts
Person who is hard of hearing	Suffers a hearing loss
Person who is deaf	Deaf and dumb, mute
Person who has a communication disorder, is unable to speak or uses a device to speak	Mute, dumb
Person who uses a wheelchair	Confined or restricted to a wheelchair, wheelchair bound
Person with a physical disability, physically disabled	Crippled, lame, deformed, invalid, spastic
Person with multiple sclerosis	Afflicted by MS
Person who had a stroke	Stroke victim
Person with a congenital disability	Birth defect
Person who is successful, productive	Has overcome his/her disability, is courageous

Adapted from <https://www.ohsu.edu/sites/default/files/2019-01/CDC-People-First-Language.pdf>.

References

1. Employer Assistance and Resource Network on Disability. Person-First and Identity-First Language. 2025. <https://askearn.org/page/people-first-language>
2. Rutgers Access and Disability Resources. 10 Commandments of Communication. Accessed October 28, 2025, <https://radr.rutgers.edu/node/140>
3. National Center on Birth Defects and Developmental Disabilities, U.S. Centers for Disease Control and Prevention. Communicating With and About People with Disabilities. Accessed October 28, 2025, <https://www.ohsu.edu/sites/default/files/2019-01/CDC-People-First-Language.pdf>