Disability Language and Etiquette: Medical Facilities

This following is a guidance on disability language and etiquette. The language and actions that this guidance sheet suggest are based on what may make some individuals with and without disabilities feel more comfortable and respected, but each individual’s preference is unique. Some of what is in this guidance is now in legislation, but many issues, such as “People first language” are considered “best practice” and simply respectful. The hope, also, is that this guidance will assist people who work with individuals with disabilities to become more comfortable in their own interactions. It is understandable that any person could have some discomfort around people with certain disabilities, even if they work in a position that keeps them around people with disabilities.

Respectful Language

<table>
<thead>
<tr>
<th>Offensive</th>
<th>Preferable</th>
</tr>
</thead>
<tbody>
<tr>
<td>The disabled/A disabled person</td>
<td>People with disabilities/An individual with a disability</td>
</tr>
<tr>
<td>Mental retardation</td>
<td>Intellectual disability</td>
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<tr>
<td>Wheelchair bound</td>
<td>Individual who uses a wheelchair</td>
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<tr>
<td>The deaf/Deaf person</td>
<td>People who are deaf/Person who is Deaf</td>
</tr>
<tr>
<td>The mentally ill</td>
<td>Individuals with a psychiatric disabilities</td>
</tr>
<tr>
<td>Midget or Dwarf</td>
<td>Little Person/Person of short stature</td>
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<tr>
<td>Epileptic</td>
<td>Individual who has Epilepsy</td>
</tr>
<tr>
<td>Normal</td>
<td>Typical</td>
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</tbody>
</table>

**The Basics**

Treat individuals with disabilities as you would anyone else, while making reasonable accommodations.

Speak and direct questions to the individual, not their companion or personal care attendant (PCA). It may be necessary for you to also have a conversation with the PCA, but remember that your patient or client deserves respect and attention.

Be aware of the individual’s disabilities recognize that they may need accommodations in order to have an effective meeting. This is particularly important in a medical setting, where accurate information must be given and received. Remember that not all people require the same accommodations, despite similar disabilities, and they may feel comfortable using different language to describe their own disabilities.

**People First Language**

“People first language” means that when describing an individual they are identified first by the fact that they are a person, not by their disability. An example of “People first language” would be to call someone “a person who has diabetes” as opposed to “a diabetic.”

**Individuals who have Physical Disabilities**

- If a person uses a mobility device, remember that the device is a part of the individual’s personal space. Do not lean on the device, use it as a coat hanger, or kick it.
- If a person is at a much lower height than you due to their disability, it is best not to stand, so they need not look up while speaking. Either:
  - Sit in a chair, if there is one handy, or
  - Lean against a wall, a little further back.
- Even if an individual does not have an arm or hand, hold out your own for a handshake. The individual will be used to this situation, and you may simply follow their lead.
**Individuals who are Deaf or Hard-of-Hearing**

Be sure to speak to the individual, not to his or her interpreter or companion. Many individuals who are Deaf or hard-of-hearing may use American Sign Language (ASL) and may ask for an interpreter; some may speak spoken English, and some may read lips. Always look at the individual and speak clearly, but do not exaggerate lip movements or speak overly loudly.

**Individuals who have Visual Disabilities**

- Identify yourself to the person, as they may not recognize your voice. Example: “Hi, Mary, it’s Dr. Smith here to do your exam.”
- Let the individual know if you are holding out a pen to them, or similar.
- Put a card down at signature lines, so an individual can feel where to sign paperwork.
- Offer your arm for the individual to hold, if he or she asks for guidance. Do not simply grab the person’s arm, hand, or cane and pull them.

**Intellectual Disabilities**

Intellectual disabilities (ID) were formerly known as types of “mental retardation.” While this remains the term in some medical circles, it has fallen out of use, in favor of “intellectual disability,” in federal policy, many state laws, and in the Diagnostic and Statistics Manual 5 over the past few years. The “r-word” is now considered a disrespectful term.

When working with a person who has an intellectual disability, including a significant learning disability or similar, be sure that he or she understands their rights, the information being given, and what will be happening at your meeting. If they do not understand due to the disability, be sure that their parent or legal guardian is in attendance and that this person understands what is being said. The individual may have questions and you should address them.

**In Conversation**

It is okay to use phrases such as “Want to go for a walk?” to a person who uses a wheelchair; “Have you seen...?” to an individual who is Blind; or “Did you hear about...?” to an individual who is Deaf.

If you do not understand something an individual has said, perhaps because they have a communication disorder, do not pretend to understand. Ask them to repeat it; if you still do not understand, ask the person to write it down. Effective communication is extremely important, especially in a medical setting, and both patient or client and the professional must know what the other is trying to communicate.

**Service Animals**

Service animals should be welcomed into medical facilities; this is an obligation under Titles II and III of the Americans with Disabilities Act. The service animal may be removed if it is not well-behaved or is not under leash- or voice-control. Service animals may be barred from sterile areas, such as an operating room. Also:

- Never pet or talk to a service animal without asking the handler’s permission.
- A service animal is a working animal, not a pet.

**About Our Organization**

Northwest ADA Center provides technical assistance, information, and training regarding the Americans with Disabilities Act. Information is provided from the regional office in Washington State and state anchors in Alaska, Idaho, and Oregon. Specialists are available to answer specific questions pertaining to all titles of the ADA and accessibility of the built environment. Training staff offer presentations to businesses, organizations, schools, people with disabilities, and the general public.

**Northwest ADA Center**

800-949-4232 ♦ [www.nwadacenter.org](http://www.nwadacenter.org)

**Resources**

For our language & etiquette videos:

[http://www.youtube.com/user/NWADACenter/videos](http://www.youtube.com/user/NWADACenter/videos)

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Alternate formats available upon request.