

## Affirming Language Guidelines

The ASDD SIG aims to be a safe space for all members to communicate and collaborate, inclusive of neurotype. The guidelines below center autistic perspectives regarding strengths-based language that is accepting of differences.

Instead of This...	Try This!
Autism Spectrum Disorder, ASD <sup>3</sup>	Autism, autistic (the term "disorder" is unnecessarily medicalized and reinforces negative discourses that autism is wrong or needs to be cured)
Person-first language (e.g., "person with autism" or "person with ASD") <sup>2,4</sup>	Identity-first language (e.g., "autistic person"), on the autism spectrum, formally identified as autistic
High/low functioning; high/low severity or support needs <sup>2</sup>	Describe specific strengths and needs, acknowledge support needs likely vary across domains (e.g., requires substantial support to participate in unstructured recreation activities, but minimal support to complete academic work)
"At risk" for autism or ASD <sup>2</sup>	Increased likelihood/chance of autism/being autistic
Autism symptoms <sup>2</sup> and impairments <sup>3</sup>	Specific autistic characteristics, features, traits, or experiences
Treatment <sup>2</sup>	Support, services, educational strategies (when applicable)
Cure/recovery/optimal outcome <sup>2</sup>	Focus on quality-of-life outcomes that prioritize what autistic people want for themselves
Mild/moderate/severe language difficulties <sup>1</sup> ; social communication difficulties <sup>4</sup>	Specify the language difficulties or differences; describe characteristics of autistic communication
Poor reciprocity, monologues, goes off on tangents <sup>4</sup>	Uses longer conversational turns and info-dumps, characteristic of autistic communication style for sharing information and connecting with others
Blunt, abrupt, rude <sup>4</sup>	A direct communicator, uses language efficiently
High-/low-functioning autism, severe autism or severity of autism <sup>1</sup> , Level 1/2/3	Descriptions of individual characteristics (e.g., with/without intellectual disability or language impairment) or specific support needs (see above)
Deficit/Weakness <sup>1</sup>	Area of challenge, difficulty, difference
Flat affect <sup>1,4</sup>	Uses neutral facial expressions
Poor/unusual eye-contact <sup>1,4</sup>	Prefers to use reduced levels of eye-contact; eyes move around the room when speaking
Restricted/Special interests <sup>1,2</sup>	Focused, intense, or passionate interests; Areas of interest/expertise
Meaningless/aimless/purposeless play <sup>4</sup>	Preference for parallel play and interaction
Rigid, Inflexible <sup>1</sup>	Preference for sameness and routine; Consider whether it is the autistic individual, the environment around them, or both that is or are inflexible
Stereotyped behaviors <sup>4</sup>	Repetitive body movements or stimming as a form of self-regulation and communication
Aloof and disinterested, on their own agenda, in their own world <sup>4</sup>	Demonstrates a monotropic thinking style characteristic of neurodivergent children; hyperfocused on interests and difficulties shifting attention to less interesting activities; differences in preference for body language and proximity
Challenging behavior/disruptive behavior/problem behavior <sup>1,2</sup>	Meltdown (when uncontrollable behavior), stimming (when relevant), more specific description of the behavior (e.g., self-injurious or aggressive behavior)
Discussions about economic impacts of autism/autistic people or compare costs to those of potentially fatal diseases, conditions <sup>2</sup> or natural disasters	Discussions about economic impacts that situate costs in society's systemic failure to accommodate autistic people and recognize the people most affected by oppression due to this failure are autistic people (not "taxpayers"). Avoid suggesting autism is uniformly detrimental and will lead to poor outcomes.

### References and Further Reading

- <sup>1</sup>Dwyer, P., Ryan, J. G., Williams, Z. J., & Gassner, D. L. (2022). First do no harm: Suggestions regarding respectful autism language. *Pediatrics*, 149(Supplement 4). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9066426/pdf/nihms-1801134.pdf>
- <sup>2</sup>Bottema-Beutel, K., Kapp, S. K., Lester, J. N., Sasson, N. J., & Hand, B. N. (2021). Avoiding ableist language: Suggestions for autism researchers. *Autism in Adulthood*, 3(1), 18-29. <https://doi.org/10.1089/aut.2020.0014>
- <sup>3</sup>Monk, R., Whitehouse, A. J., & Waddington, H. (2022). The use of language in autism research. *Trends in Neurosciences*, 45(11), 791-793. <https://doi.org/10.1016/j.tins.2022.08.009>
- <sup>4</sup>Divergent Perspectives (2022). *Neurodivergent Report Writing*. <https://www.divergentperspectives.co.uk/post/neurodivergent-affirming-report-writing>  
Journal of Autism and Developmental Disorders (2022). *Suggestions for inclusive language in JADD submissions*. <https://www.springer.com/journal/10803/updates/23353702>
- American Psychological Association. (2021). *Inclusive language guidelines*. <https://www.apa.org/about/apa/equity-diversity-inclusion/language-guidelines.pdf>

