One way that you can demonstrate your commitment to including young children with disabilities in your early childhood program is by what you say and how you say it. Begin by adopting the term “inclusion” to talk about what you are doing in your program, rather than using outdated terms such as “integration” or “mainstreaming.”

Inclusion means:
- Every child is included with peers and/or siblings, in neighborhood programs selected by the child’s parents.
- The needs of each child (whether or not he or she has a disability) are considered in planning and implementing program activities.
- Each child is truly involved as a valued member of the group.

Basic understanding of inclusion sets the stage for using other appropriate language. For instance, there are a few common terms that should no longer be used to refer to people with disabilities. One of these is the word handicap to refer to a person’s disability. The word disability is appropriately used to refer to people, and handicap should only be used to refer to barriers in the environment. The word retarded is also inappropriate. It is more appropriate to say a person has a intellectual disability or delay.

Children deserve respect just for being who they are. There are unique and wonderful things about each child that are more significant than labels or details of a disability. You can convey that you value children as children first by recognizing their individual needs and differences without minimizing typical every-day-little-kid qualities. You can clearly demonstrate this value by using what has been called the child-first principle. This means referring to the child before using any other descriptive characteristics, and only referring to a child’s disability when it is relevant to the question being asked or to the comment being made.

Using the child-first principle, you would say:
- A child with a hearing impairment, instead of a hearing-impaired child. (Note one exception: most members of the deaf community feel perfectly comfortable being described as deaf or “the deaf.”)
- A child with cerebral palsy (CP), rather than a cerebral palsy child or CP child. (Note: This is applicable to adults as well—An adult diagnosed with schizophrenia rather than a schizophrenic.)

If using respectful words and the child-first principle do not initially seem important, take time to think deeply about the hidden impact of language. Words speak volumes, and carefully selected words can display a positive attitude. It is critical for you to communicate respect for each child to children, colleagues, and parents, through the words you do or do not choose to use.

You may notice that newspapers, magazines, news broadcasters, some parents, and a few professionals, for whatever reasons, consistently ignore the respectful words they should be using to refer to individuals with disabilities. Your message of respect will be clear, regardless of the language parents or other professionals may use.

In addition to what you say, respectful language should be evident in your written materials, such as parent handbooks, brochures, letters to families, and notes on the bulletin board. These materials visibly convey your feelings about working with young children and communicate your commitment to inclusion.

Using appropriate language when referring to children with disabilities is not just about being politically correct. Using appropriate language is evidence of a positive and respectful attitude toward young children. It identifies you as what you are: an early childhood professional.

Continue on page 2
As a general rule, appropriate language:
- Puts the child BEFORE descriptions
- Always uses respectful words
- States what a child HAS, not what a child IS

<table>
<thead>
<tr>
<th>SAY:</th>
<th>INSTEAD OF:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child with a disability</td>
<td>Handicapped or disabled child</td>
</tr>
<tr>
<td>She has autism</td>
<td>She’s autistic</td>
</tr>
<tr>
<td>He has Down Syndrome</td>
<td>He’s Down or he’s a Down kid</td>
</tr>
<tr>
<td>Children without disabilities</td>
<td>Normal or typically developing children</td>
</tr>
<tr>
<td>Accessible parking</td>
<td>Handicapped parking</td>
</tr>
<tr>
<td>A child who bites/hits</td>
<td>The biter/hitter</td>
</tr>
<tr>
<td>He receives special ed. services</td>
<td>He is in special ed.</td>
</tr>
<tr>
<td>Congenital disability</td>
<td>Birth defect</td>
</tr>
<tr>
<td>The child’s name</td>
<td>The difficult or challenging child</td>
</tr>
</tbody>
</table>

RESOURCES

TRAINING OPPORTUNITIES
- The Registry Training Calendar [https://www.the-registry.org](https://www.the-registry.org)
- WI Early Care Association (WECA) Training Calendar [http://wisconsinearlychildhood.org/](http://wisconsinearlychildhood.org/)
- MECA Special Needs Support Program (SNSP) [https://dcf.wisconsin.gov/meca/specialneeds](https://dcf.wisconsin.gov/meca/specialneeds)

This document was modified for use by the State of Wisconsin from The Language of Inclusion tip sheet created by Montana Child Care plus+, [http://www.ccplus.org/Products.html](http://www.ccplus.org/Products.html).

Race to the Top–Early Learning Challenge is a cross-departmental grant that uses the talent, experience, and vision of three Wisconsin State Departments: Department of Children and Families, Department of Public Instruction, and Department Health Services. The contents of this document were developed under the RTTT-ELC grant. However, the contents do not necessarily represent the policy of the Federal Department of Education, and you should not assume endorsement by the Federal Government.