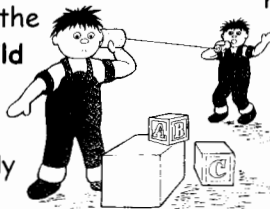


Child Care plus+

+ The Language of Inclusion

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 Begin by adopting the term "inclusion" to talk about what you are doing in your program, rather than using outdated terms such as "integration" or "mainstreaming."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 1) **every child** is included with peers and/or siblings, in neighborhood programs selected by the child's parents and 2) that the needs of **each child** (whether or not he or she has a disability) are considered in planning and implementing program activities. Inclusion means that 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 *cognitive disability or delay*.

One important underlying principle of inclusion is that 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:

- ▶ children with disabilities, not *disabled children* or *the disabled*.
- ▶ 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*.

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*. + SLM

+ In This Issue	
+ In Focus	+ Putting It Into Practice
+ Try It Out	+ Question
+ Connecting with Families	+ Resource Review

+ IN FOCUS

When you work in an early childhood program, your primary focus should be on the interests and developmental strengths of each child, not on a label associated with a child's physical characteristics, medical diagnosis, developmental disability, or particular behavior. Use what you already know about young children and their development as a foundation for learning more about them. Do not be overly concerned about what you do or do not know about a child's particular disability. Children are really quite unique individuals even when they are of similar ages or have the same disability.

Make the effort to get to know each individual child. Really study each child and learn meaningful ways to connect with him or her. Find out what interests the child and what kinds of activities she or he likes. More specifically, identify the child's favorite foods, books, toys, sleep-time routines, and leisure activities. Does the child have a pet? What is the child especially good at doing? What does he or she like to do in your program? Get to know the child's family (including siblings and grandparents) and preferred playmates as well.

Knowing children as individuals connects you to them as people first, and your language will no doubt follow in that direction as well. Remember, the child with disabilities, the child with challenging behavior, the child with a medical condition, is a child **FIRST!** + KM

* * * * *

+ TRY IT OUT

As a general rule, appropriate language a) puts the child **BEFORE** descriptions, b) always uses respectful words, and c) states what a child **HAS**, not what a child **IS**.

SAY	INSTEAD OF
■ child with a disability	■ handicapped or disabled child
■ she has autism	■ she's autistic
■ he has Down syndrome	■ he's Downs or he's a Down's kid
■ children without disabilities	■ normal or typically developing children
■ accessible parking	■ handicapped parking
■ a child who bites/hits	■ the biter/hitter
■ he has a physical disability	■ he's crippled
■ he receives special ed services	■ he is in special ed
■ congenital disability	■ birth defect
■ the child's name	■ the difficult or challenging child

+

KM

+ CONNECTING WITH FAMILIES

Parents can help you use appropriate language to talk about their child's disabilities or developmental delays. They can provide you with accurate and sensitive language to use when you communicate about their child. As they help you learn more about their child's interests and abilities as well as his or her disability or delay, they may give you direct or indirect hints about how to talk respectfully. Just remember to use child-first language along with the words they give you.

Parents may not always follow the recommendations about language that you have learned in this newsletter, and that is okay. Their job is to be a parent; your job is to be an early childhood professional. As a professional, you must accept—and not judge—the parents and families of children in your program. You are expected to follow the highest standards of recommended practices.

Following the child-first principle can have a positive effect on parents' perceptions—and your perceptions—of their children. This principle will keep you from using terms such as "my little redhead," "the wrestler," "the biter," "the whiner," "the clingy one" as well as "the behavior problem" and a whole host of other labels given to children. These labels leave out the child and focus primarily on just one—often negative—aspect of his or her appearance or behavior. Appropriate language has a positive effect on everyone who hears it, and especially on their image of that child. + SLM

+ PUTTING IT INTO PRACTICE

Early childhood professionals have a natural opportunity to build their appreciation of "children as children." Through observation and interaction, the *unique* interests, personalities, and learning processes of children with and without disabilities become evident. But it doesn't take long in a group setting to also see that the *common* elements of childhood far outweigh the differences between individual children.

As you treat a child with disabilities as a "child first," you may become more sensitive to or even offended by other families or program visitors who refer to children using inappropriate language or ignore the child-first principle. When this occurs, you can take steps to respectfully advocate for the individual child and model appropriate, child-first language.

- Advocacy starts with you. Make sure you always use child-first language.
- Review your program materials, classroom displays, and parent handouts to make sure you have used appropriate language.
- Avoid being judgmental; look for opportunities to teach rather than criticize.
- When you find a teachable moment, be humble. Relate your knowledge to your own learning process. "I used to say the word *handicap* too until I found out that people with disabilities prefer the term *disability*."
- Keep a short information sheet about child-first principles and appropriate language on hand. Give it out when someone appears to be interested.
- Periodically include information and examples about respectful language in your communication with families and program visitors to teach and reinforce these principles. Add familiar quotes to newsletters, the parent bulletin board, and your office walls, such as *Remember the ABILITY in disABILITY* or *Children with disabilities are children first*. (These quotes and others can be found at www.disabilityisnatural.com.)

Sometimes an individual may listen to you and read all of

your information but continue to use inappropriate language anyway. When this happens, you may need to address the issue more directly. If the individual is someone who will be in your program regularly, it is probably worth the time to speak plainly about your preferred practices. Following the steps below can help you be firm and clear without being confrontational.

DISABILITY is a **NATURAL PART** of the **HUMAN EXPERIENCE**

1) Identify the word or phrase that is outdated or inappropriate: *You know, a lot of people still use the word handicapped.*

2) State your knowledge: *I have learned that individuals with disabilities prefer the term disability. In fact, the wording of federal legislation has also been changed to use "disability." Even the grammar check on my computer is telling me to replace the word "handicapped" with the word "disability!"*

3) Clearly state your position: *In this program I am committed to using appropriate and respectful language. This means using the word disability instead of handicapped. This is just one of the many ways I honor the diversity of children and their families.*

4) Offer support: *Would you like some information or examples of appropriate language? or Can we work together on this? Will you point out the times you hear me successfully use these principles and offer a suggestion when I forget? Would you be comfortable if I do the same for you?*

5) Move on with the work or conversation at hand.

As you continue to explore your role as an advocate, remember that the language used by the parent of the child should always be accepted. Hold tight to your vision and commitment—when people in our world begin to put the child first in words, thoughts and actions will just naturally follow. +

SHW

+ QUESTION

QUESTION: *I care a lot about the children in my program. Why does it really matter what language I use, if my tone and my intent are positive?*

ANSWER: Change is easier when you understand the reasons for adopting recommended practices. Your question provides an opportunity for deeper exploration of the language of inclusion. Together let's look at four primary reasons to go to the effort of using appropriate words and child-first language.

First, adults with disabilities have identified and actively promoted language they consider respectful. They have united with a common voice to declare "not about us, without us." Even federal legislation about individuals with disabilities has been revised to read *disabilities* instead of *handicaps* and *individuals with disabilities* instead of *disabled individuals* because individuals with disabilities and their family members collectively advocated for this change in the wording.

Second, other staff, parents, specialists and therapists hear how we talk about children. They may or may not know us well enough to recognize our positive intentions. Using appropriate language will ensure that you will not be misunderstood.

Third, you are modeling lifelong practices for the children. How do you want them to see one another—as labels and deficits or as unique human beings who are more alike than different? How do you want them to feel about one another? What words do you want them to use

to describe each other now and in the future?

Fourth, when you are talking with parents, colleagues, or specialists who value appropriate language, you will not have to make adjustments in your thinking and speaking. You will have already mastered these skills and will be able to freely converse without feeling awkward or inadequate. You will present yourself as an educated professional who knows—and uses—the language of inclusion. +

SLM

+ RESOURCE REVIEW

www.disabilityisnatural.com is a web site that includes newsletter articles and commentaries related to the idea that disability is a natural part of life and living. Of particular application to this topic is a commentary by Kathie Snow, entitled *People First Language*.

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