

WHAT'S LANGUAGE GOT TO DO WITH IT?

**CAADS Conference
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WISDOM FROM DR. MAYA ANGELOU

Image Source:
<https://equipforlifecoaching.com/2017/how-you-made-them-feel/>

“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget *how you made them feel.*”

Maya Angelou
1928 - 2014



PERSON-CENTERED LANGUAGE FEELS BETTER

People notice what language you use

- People using your services
- Families and Caregivers
- Associates
- Stakeholders
- Visitors

It is about the impact, not the intention

- Best intention can no longer be an excuse for negative impact

We have all been there.

**THIS IS A
JUDGEMENT
FREE ZONE**

THE POWER OF LANGUAGE

By changing our language, we can change the way we see people, but most importantly we can **change the way people see themselves.**

Today you will:

- Deepen your understanding of how language evolves & impacts the lives of the people we serve.
- Learn strategies to increase self-awareness of your word choices and incorporate more empowering person-centered language in the services we provide.
- Leave with practical ideas that can be adapted and implemented within any team and/or service.

WHAT IS PERSON-CENTERED LANGUAGE?

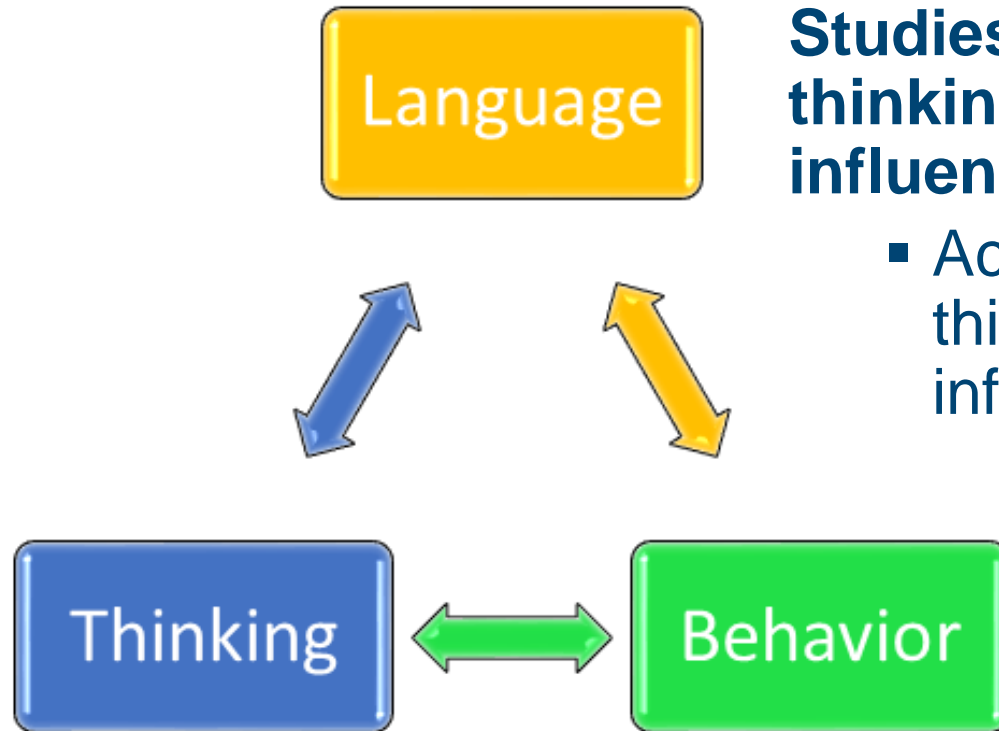
Person-Centered Language:

- Respects the dignity, worth, unique qualities and strengths of every individual. A person's identity and self-image are closely linked to the words used to describe them.
- Learns from each person how they see themselves and makes sure that is reflected in how we speak to and about the person.
- Uses language that is respectful and honors personhood to help people feel recognized as individuals.

WHAT PERSON-CENTERED LANGUAGE HELPS US TO DO?

- **See the whole person**
- **Build trusting relationships**
- **Recognize all forms of communication**
- **Be a better ally**

LANGUAGE TRIANGLE



Studies have shown that our language, thinking, and behavior each have a direct influence on each other.

- According to Boroditsky (2011), the way we think influences the way we speak, but the influence also goes the other way.

If we change our language, our thinking will follow. Ultimately how we interact with the people around us will change.

RULE OF THUMB

If you would not say it about yourself, a friend, or family member, then you probably should not say it about a person you are supporting.

Speak to the context of what you are saying.

- What is appropriate to say in one circumstance is not necessarily the same in another. Otherwise, you are creating a new label.

Ask what someone prefers!

Person First

Person-first language is language that puts a person before their diagnosis, such as being a person with a disability.

Identity-first language is language that leads with a person's diagnosis, such as being a disabled person.

Identity First

WHAT PERSON-CENTERED LANGUAGE MAY LOOK LIKE?



PREFERRED LANGUAGE

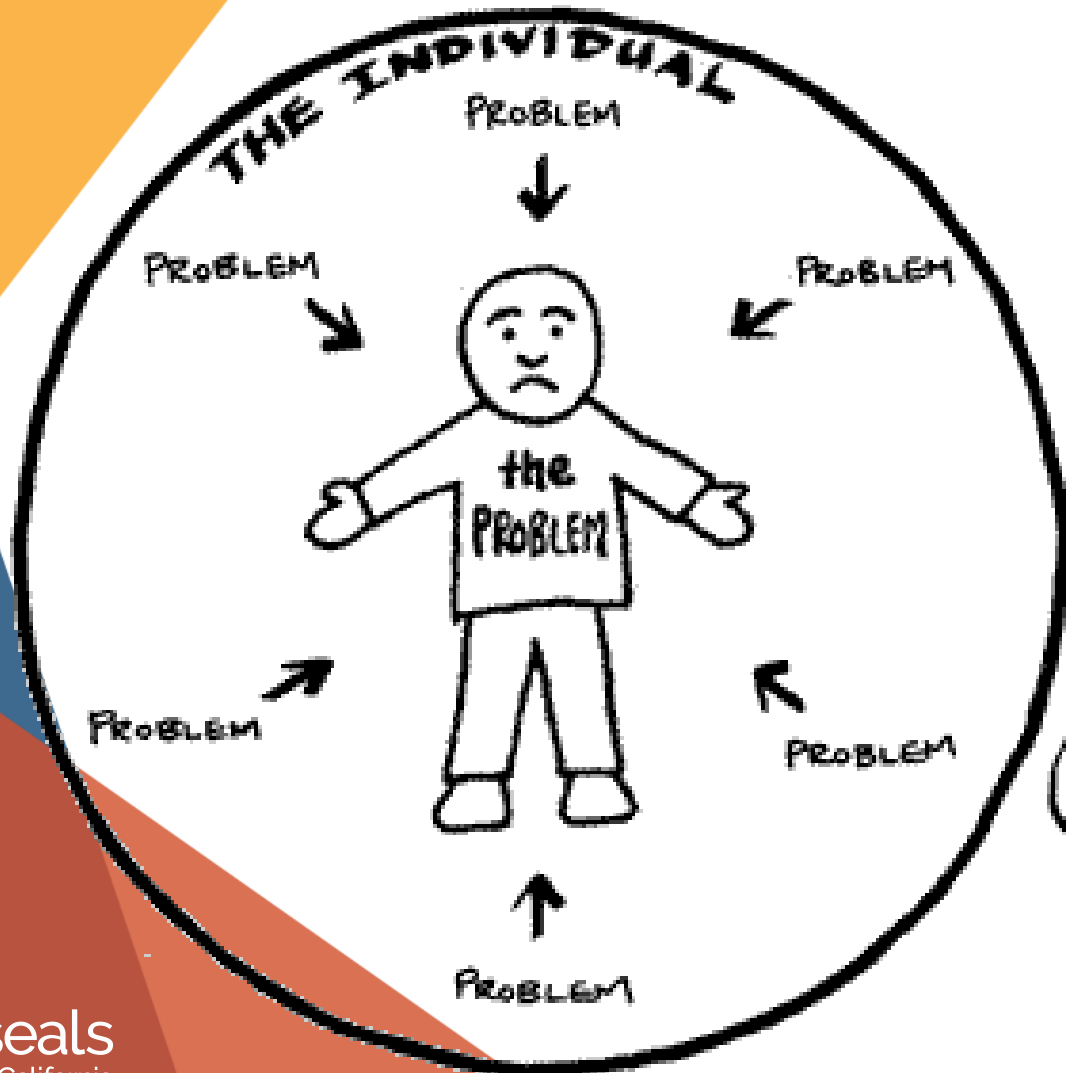
"The limits of my language mean the limits of my world."

Ludwig Wittgenstein

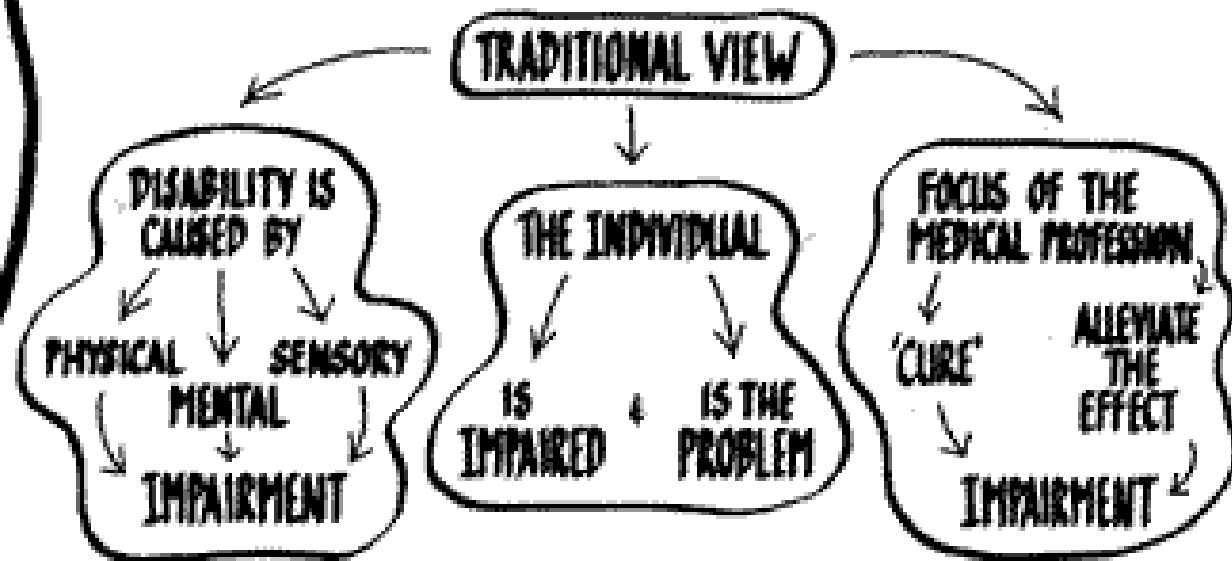
Preferred language:

- **Connects us culturally**
- **Connects our memory**
 - **Soothes anxiety**

THE MEDICAL MODEL OF DISABILITY



IMPAIRMENTS AND CHRONIC ILLNESS
OFTEN POSE REAL DIFFICULTIES BUT
- THEY ARE NOT THE MAIN PROBLEMS



MEDICAL MODEL EXPLAINED

- The medical model of disability influenced our outdated language.
 - How we say things changes how we think (remember the triangle?)

Language

- **Medical Model**

- **Blames person for their aging, disability, and related support needs.**

- Blaming leads to stigma and exclusion.

- **Professionals are the authority of the person and what is best for them.**

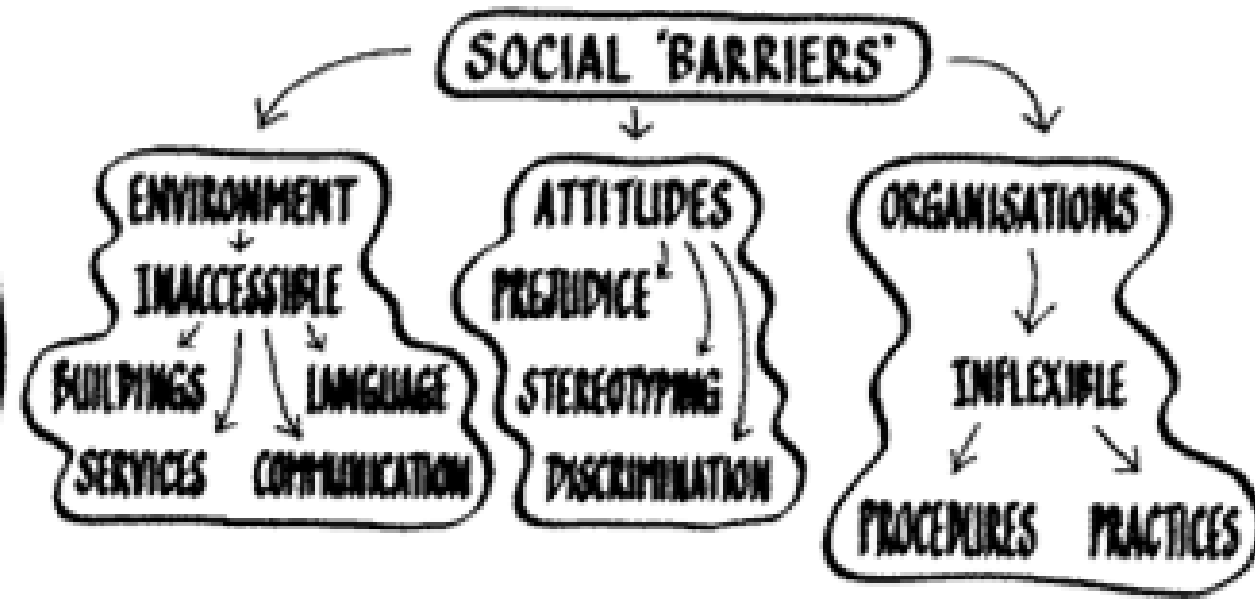
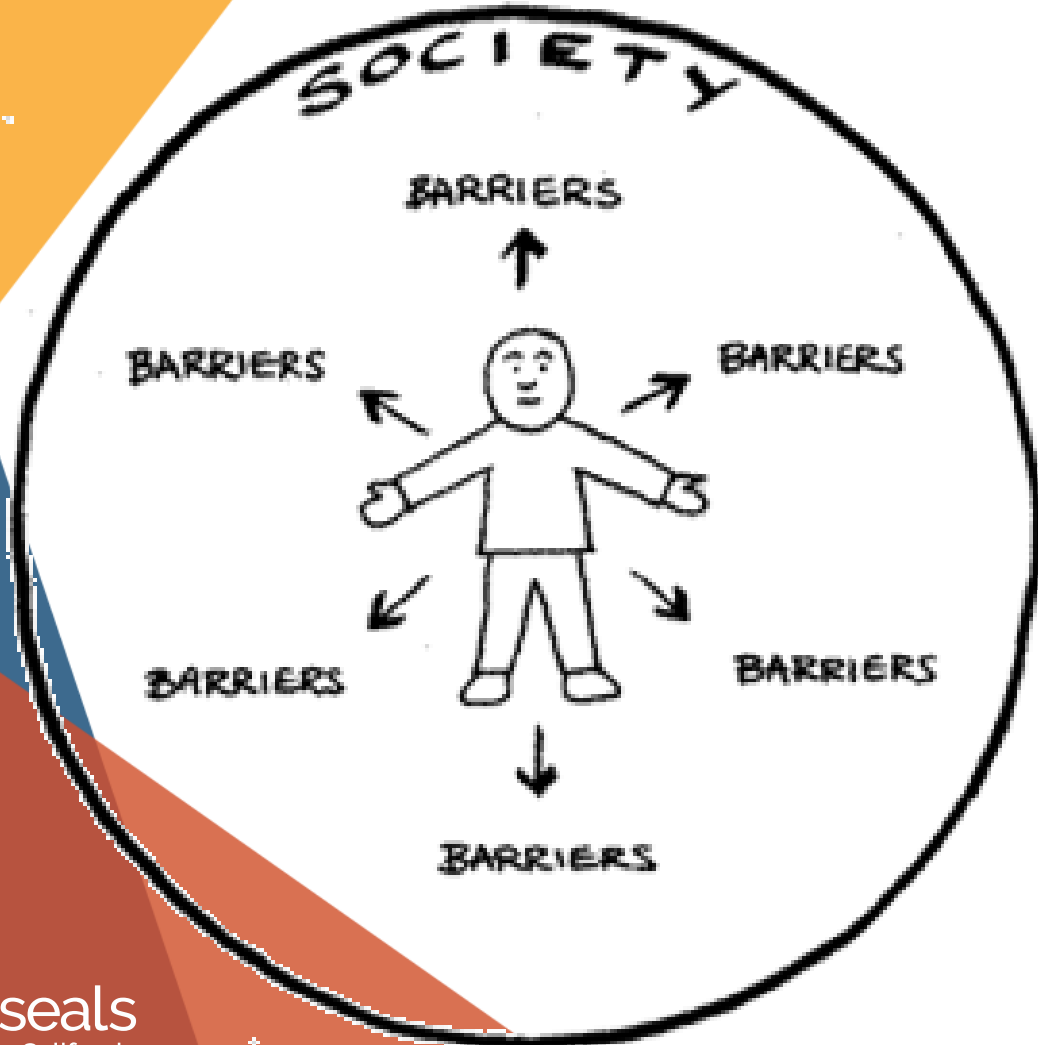
- People conditioned into this power dynamic.

- **Protects safety at the cost of autonomy.**

- Limits choice and the dignity of risk.



THE SOCIAL MODEL OF DISABILITY



SOCIAL MODEL EXPLAINED

- **Social Model of disability** assists us to reframe how we say things.
- How we say things changes how we think (remember the triangle?)

- **Social Model**

- **Challenges experienced are the result of systemic and societal barriers.**
 - A lack of accessibility and ageist/ableist attitudes create the challenges experienced.
- **The person is the authority on themselves, and what is best for them.**
 - People direct their lives, and anything done to or with them.
- **Accepts Dignity of Risk as a part of a full life.**
 - Acknowledges mistakes are part of growth.

Language



Thinking

Behavior

SOCIAL MODEL IN PRACTICE

Instead of: **We can't go there I have too many wheelchairs with me.**

✓Try: **The bus doesn't have enough spots to securely transport everyone's wheelchair who wants to go.**

Instead of: **I can't support her today, because I already have people who need to be fed.**

✓Try: **I will need more help at lunch today, so no one I am supporting must wait too long to be assisted with lunch.**

Instead of: **They can't do that, because they will probably hurt themselves.**

✓Try: **I am glad they want to give that a try, I wonder if they are open to any modifications to reduce some of the risk.**

WHAT IS **NOT** PERSON-CENTERED LANGUAGE?

Person-Centered Language is **NOT**

- Deficit Based
- Dehumanizing
- Derogatory
- Stigmatizing
- Authoritative
- Assuming
- Disrespectful
- Disempowering

NEGATIVE IMPACTS

OUR WORDS MATTER

Due to negative stereotypes, our choice of language **exposes** people to:

- Segregation
- Isolation
- Accepting Labels
- Forced Compliance
- Internalized ageism
- Prejudice
- Discrimination
- Being stereotyped
- Medical provisions
- Internalized ableism

LANGUAGE OF DISCRIMINATION

Labeling

- Diagnosis, Objects, Behavior, Care need

Segregating Language

- Using different terminology when someone in services engages in an activity or event, than you would use for yourself or others.

Instead

- ✓ Speak to the external challenge not the person (social model).
- ✓ Call it what it is. Normalize experiences and interactions.

WE HAVE ALL DONE IT

Examples 1/2

NOT Person-Centered

Person-Centered

Why?

Non-verbal

The person communicates with their eyes, assistive device, etc.

Focuses on strengths not deficits.

“Chairs” (referring to people who use wheelchairs)

People using wheelchairs

Removes label that the person is their device.

Outing

Name of a specific place, neighborhood, community event, etc.

Use the same terms as used in our larger society, and/or for ourselves.

LANGUAGE OF DISEMPOWERMENT

- Maintains a power dynamic
- Possessive word choice
- Permission word choice
- Speaking to the person as if they were a child

Instead:

- ✓ Presume competence
- ✓ Wait to be asked, or ask someone, if they need help
- ✓ Normalize and validate people's experiences and opinions
- ✓ Reinforce autonomy and self-direction

WE HAVE ALL DONE IT

Examples 2/2

NOT PERSON-CENTERED	PERSON-CENTERED	WHY?
Wheelchair bound	Uses a wheelchair	A wheelchair is a tool of independence and freedom.
My group, My client/patient, My service, etc.	Use names	Removes your ownership, or implied “power” over the people you support.
Letting people...	Encouraging people...	The word “let” implies we are giving permission; anything we allow means we can also take it away.

IT IS NOT JUST WHAT WE SAY, BUT HOW WE SAY IT

TRADITIONALLY ASKED QUESTION

How is his diabetes being managed?

Do you let her go out in the back garden?

How many community outings does he go on?

Are you happy at your day service? *(asked in front of the day service providers)*

PERSON-CENTERED QUESTION

Can you show me what you do to maintain your blood sugar levels?

Do you enjoy your back garden? How much time do you spend there?

What were some of your favorite places that you have visited lately?

What do you enjoy the most about your day service? What do you enjoy the least?

DEFICIT-BASED VS STRENGTH-BASED APPROACH

DEFICIT-BASED APPROACH (*Medical Model*)

Focus

- Challenges
- Differences (negative??)
- Needs

Examples:

- What's the problem?
- How can we fix this?
- What are the person's areas of weaknesses?

STRENGTH-BASED APPROACH (*Social Model*)

Focus

- Strengths
- Abilities
- Successes

Examples:

- What are the person's areas of the strength?
- What's going well?
- How can we build upon this?

DEFICIT VS. STRENGTH BASED LANGUAGE

Instead of: He has severe meltdowns.

- ✓ Try: He feels emotions intensely.

Instead of: He displays restricted and repetitive behaviors.

- ✓ Try: He enjoys moving his body in the same way.

Instead of: He is perseverating on cars.

- ✓ Try: He is very passionate and enthusiastic about cars.

Instead of: He is rigid with his routines.

- ✓ Try: He prefers consistency and sameness.

Instead of: He is an extreme picky eater with severe food aversions.

- ✓ Try: He has a sensitive palate and specific food preferences.

Instead of: He is nonverbal.

- ✓ Try: He communicates using...

WORDS HAVE POWER

Having awareness about the words we choose to use is essential to support the inclusion of people with disabilities, mental health and older citizens.

SUMMARY OF PERSON-CENTERED LANGUAGE TIPS

- Words have power; choose your words carefully.
- Best practice is to ask, especially if you are unsure.
- LISTEN, and get to know the person.
- Validate and normalize the person's experiences, choices, and opinions.
- Speak directly to the person and respect their adulthood.
- Focus on strengths.
- Recognize the external factors that create barriers.
- Make sure everyone is part of the solution.
- Apologize and move on if you make a mistake.

TIME FOR A CHANGE



What will you change that has “always been done that way”?

Thank You!

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