

Words matter: Communicating with patients who have diversabilities

Choose your words carefully when caring for patients with diversabilities. Follow these do's and don'ts.

WHAT *NOT* TO SAY

“Why can’t you talk [or walk, see, hear]?”

“That looks difficult for you. Let me help.”

Disabled

Handicap parking

Impaired vision, impaired hearing, or wheelchair use

Hidden disabilities

Accommodations

Suffers from, struggles with, is challenged by

WHAT TO SAY INSTEAD (AND WHY)

“I’m curious about your health history. Can you tell me a bit about yourself?”

This lets patients describe themselves within the boundaries of their comfort level.

“I’d be happy to help, if you’d like to tell me how and allow me to do so.”

This preserves the patient’s personal space and allows him or her to be independent.

Person with disability or diversability

This puts the person first. A disability is what someone has, not what he or she is.

Accessible parking

“Accessible” describes the parking; “handicap” does not.

Low vision, hard of hearing, or uses a wheelchair

“Impaired” may be used in a legal context, but it can be offensive and implies the person is damaged.

Nonvisible or nonapparent disabilities or diversabilities

“Hidden” has negative connotations and implies purposeful concealment or shame.

Adjustments or modifications

“Accommodations” may be used in a legal context, but “adjustments” or “modifications” captures the concept without suggesting a favor or special treatment.

Just describe the specific situation; for instance, “someone who uses a wheelchair”

Adjusting life to personal challenges doesn’t make one a victim or a hero. It’s simply what one does.