

Speaking of Exceptionalities

This is general information for your knowledge and understanding of how to support students who are exceptional. It is important to remember that exceptionalities affect all people differently. It is not Tutor Doctor's role to suggest an exceptionality is present in a student, diagnose an exceptionality, suggest a course of action with the school, or to suggest treatment for exceptionalities.

It is important that we understand how to speak of exceptionalities, what to say, and what not to say, so we can build relationships of trust and understanding with our students and their families. We have a few tips for ensuring you are taking a supportive approach that will help you build a great rapport with your student and their family.

Use People First Language:

Remember, students are <u>NOT</u> their diagnosis. It is very important to ensure that you are speaking of the student first and their diagnosis second. Use language such as has or diagnosed with. For example: "Sarah has Autism." Not, "Sarah is Autistic." By putting the diagnosis first, Autism is being made the most important thing about Sarah. Many exceptional students and their families feel that not using people first language diminishes who the student is as a person and reduces them to a label. Many students and families will be very attuned to people first language and may be offended if it is not used.

Be Aware of What You Say:

It can be easy to fall into casual speech patterns and not realize exactly what you are saying. It is very important to be aware of the statements you make and whether they could be offensive. It is common in some social circles to make statements such as, "I am OCD about keeping my house clean." Obsessive Compulsive Disorder (OCD) is a debilitating disorder that may prevent people from functioning day to day and/or may be physically harmful to them. Making generalized statements about this disorder diminishes the struggles of the people who live with it. It also perpetuates the stereotype that OCD is related to a need for cleanliness and order. Only a small group of people living with OCD have obsessions and compulsions related to perfectionism and they are not often related to the cleanliness of their home, etc. Such casual use of OCD is often seen as extremely offensive by people in exceptional circles, especially those living with this disorder. It is also common for some people to say things like, "I am ADHD today." This is also often very offensive for people who have Attention Deficit Hyperactivity Disorder (ADHD). Like OCD, ADHD is a serious disorder that presents many challenges for the people who live with it. Using ADHD in this casual way makes light of those challenges and perpetuates the stereotype that all people with ADHD can't concentrate or are distracted. A good rule of thumb is to avoid using exceptionalities as descriptors and instead use specific language, such as "I am particular about keeping my house clean," or "I am having trouble concentrating today."

Don't Presume:

It is important to treat each student as the unique individual that they are. Every exceptionality will present differently in each student, so it is important to leave presumptions at the door. You may have worked with a student who has Autism Spectrum Disorder (ASD) that had a sensitivity to light and sound, but the next student you work with who has ASD may not be bothered by the same bright lights or loud noises. This is also true of tutoring strategies, what worked for one student may not work for another student with the same exceptionality. Make sure that you get the whole picture from the local office, the student, and the family. Ask questions to gain a better understanding and encourage your student to self-advocate and let you know what is or isn't working for them.

Understand the Student and Family:

All exceptional students and families will have different levels of comfort surrounding the student's exceptionality and how it is spoken of. Some will be very attuned to people first language and some won't use it. Some will have preferred terms that they use to describe their child's needs or the strategies they use, and some will not. Be aware of the family's comfort level and preferred language and be sure that you are always being respectful and professional. If the family does not use people first language, it is still a best practice to use it to convey professionalism and understanding. It is also important to be aware that some families will use community language. These are terms or phrases that are only acceptable for members of the exceptional community and often only for those who have a particular exceptionality and their family. For example, the term "Aspie," may be used by a family to describe their student who has Asperger's Disorder. This is a term that is most often only acceptable for the exceptional person, their family, and closest friends to use. While the family may use the term very casually, someone outside their inner circle would cause great offense by using the same term.

Be Aware of Offensive Terms and Language:

Sometimes even the best intentions can cause upset. It is important to be aware of preferred language and any terms that could be unintentionally offensive. For example, many people understand the appropriate term for some-one who has partial hearing to be "hearing impaired," however, according to many within the deaf community, the term hearing impaired is offensive. People who have no hearing usually prefer to be referred to as having deafness and those with some hearing usually prefer to be referred to as being hard of hearing. The same is often true of people who have no sight or vision loss. Often, people prefer the terms blindness or partial sight over visually impaired. If you are unsure of what language is appropriate, you can contact your local support authority for an exceptionality and ask what language is generally preferred by the people in that exceptional community. However, remember that exceptionalities are individual, so take your cues from the family and use their preferred language when in their home.

Be Aware That Some Students are Not Aware of their Diagnosis:

Not all parents choose to share information about their child's diagnosis with their child. Some families have decided to tell their child that they learn differently and get extra support at school to help, rather than tell them that they have been given a diagnosis. Or they may have

shared no information with their child at all. This is the choice of the parents and it is very important that you respect their decision and do not give the student any information the parents would not agree with. Check with your local office to see if the child is aware of their diagnosis and if you are ever unsure, it is always best to say nothing about the student's exceptionality and contact your local office for support.