

*The way we talk about our children
is how they will talk about themselves.
I choose to surround my family with
voices that raise us up.”*
~ Emma Ward, Autistic advocate



To the professional supporting my child this year,

This is an invitation to be one of those voices that raise my child up.

As someone working closely with my Autistic child, you are in a position of power: power to influence whether my child flourishes this year, secure in the knowledge they are loved, worthy and enough as the person they are – or not. Your words have the power to raise my child up and let them live their lives fully as Autistic, not despite their Autism, or make them feel excluded and alone.

I'm not referring simply to your words of encouragement or praise. I'm talking about choosing to use respectful language that validates my child's Autistic identity.

Why might my child need to hear respectful language from you, you might wonder.

Well, during my child's formative years, they have had medical professionals reduce them to the sum of their deficits. As soon as they were diagnosed with "Autism Spectrum Disorder", their passions were recast as "restricted interests", their adaptations to manage their heightened sensitivity became "rigid, repetitive behaviours" and "early interventions" were prescribed to "treat" the "symptoms" of their "disorder" for an "optimal outcome" of a "normal" child, while fundraising bodies search for a "cure". Professionals spoke freely in front of my child of their impairments, assuming their lack of eye contact and busyness meant they were not listening, when in fact, this is how my child absorbs information most intently.

This is what Autistic whole-body listening looks like.

When my child hears such stigmatising language used to describe something that is so integral to their identity, they come to understand their Autism as something that is wrong, an affliction that ideally needs treating in lieu of a cure. They will believe that this thing they have called 'autism' is wrong and they are inherently disordered.

My child is a sensitive soul, so they will internalise this "brokenness" and it will be reinforced each time they encounter this language. My child will come to hate their autism, and since their autism is intrinsic to who they are, they will come to hate themselves. They might develop low self-esteem and anxiety, and likely everyone will blame their autism rather than the language society used to describe it – the language that became my child's inner voice.

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Since we started hearing of the lived experience and collective knowledge of Autistic adults, we have been gifted a well-established lexicon of respectful language that will help protect the next generation of Autistic people from experiencing the internalised brokenness that seems inherent in their predecessors.

By choosing to adopt neurodiversity-affirming language, you affirm my child's Autistic identity and preserve their sense of self and intactness. Below, I share some respectful language with you in the hope that you choose to adopt it and become a voice of validation in my and all Autistic children's lives.

Instead of Autism Spectrum Disorder, we use Autism Spectrum Difference or simply, Autism.

Autism is a neurological difference in the nervous system which begins in utero and makes Autistic individuals think, move, interact, sense and process atypically or differently to a standardised norm. Since Autism is a different way of processing, it is not a disease or disorder. It is a form of neurodiversity. Neurodiversity is a term that refers to the rich diversity of human minds and is an undeniable aspect of the biodiversity that is found in human beings.

Similarly, instead of Sensory Processing Disorder, we say sensory processing differences.

My child does not "have Autism"; they are Autistic.

Historically, people were taught that the respectful way of speaking about children was to use "person-first language" (PFL), i.e., "a child with Autism" and that the phrase "Autistic child" was reductive because the child is more than their Autism. However, as more Autistic adults share their experience, we now know that the majority of Autistic people choose to identify as Autistic which is "identity-first language" (IFL)*. As Reframing Autism founder and Autistic researcher Dr Melanie Heyworth explains, "Ultimately, you can't separate Autism from personhood, much in the same way you can't (and shouldn't) separate race, religion, or cultural heritage from identity and personhood. Calling myself Autistic acknowledges how integral Autism is to my sense of self. It recognises that my Autism is not a secondary or lesser part of myself. It signals that my Autism is fundamental to my identity and that I embrace that Autistic part of myself, as something of which I can be proud."

My child's functioning level changes day to day, so please don't refer to their Autism as "high-functioning" or "low-functioning".

Human functioning is never static. It changes whether you've had a good night's sleep or not, whether you're sick or healthy. The same holds true for my Autistic child. Their functioning depends entirely on the context in which they find themselves. Instead of using functioning labels, which are dehumanising and reductive, we acknowledge that the level of support my child needs varies across domains so, instead of functioning, please describe their specific strengths and needs.

*In a 2022 online poll of 11,212 people, 76.16% of Autistic respondents stated they exclusively use identity-first language when referring to their Autism. (Chris Bonello, www.autisticnotweird.com,)

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Please refer to my child's "co-occurring conditions" rather than their "comorbid conditions".

The term "comorbid" specifically relates to diseases or medical conditions that are present in a patient. As my child has a different neurotype rather than a disease or disorder, they have "co-occurring conditions". Similarly, they have Autistic traits rather than "symptoms".

Please refer to my child being "identified as Autistic", rather than "diagnosed".

People don't catch their Autism or acquire it from a vaccine. Their Autistic neurotype was always present; it just took time to become identifiable – much like hand dominance.

My child does not require "treatments" and "interventions".

They require support services, respectful therapies, educational strategies and unconditional love.

My child has individual, specific needs rather than "special needs".

In fact, all children have individual needs. My child's needs are different to the next child's, but no more special.

Similarly, my child needs inclusive education rather than "special education".

If my child shuts down and stops talking, they have become situationally mute rather than "selectively mute".

Their silence is an involuntary reaction caused by the overwhelming stress of the situation, so they do not "select" or choose to become mute.

Autistic children may be nonspeaking but they are not "non-verbal".

Excited whoops, contented sighs, upset whimpers and echolalic emulation are just some of the rich language Autistic children draw on, even when they don't use mouth words.

Finally, just like all children, my child has passions and hobbies rather than "restricted" or "special interests".

Their sense of curiosity and wonder is a joy and something to be celebrated, not pathologised.

Thank you for taking the time to familiarise yourself with neurodiversity-affirming language. The terms you use for my child will colour their perception of themselves and their peers' perception of them (and their Autistic peers) for years to come. With your validating voice added to the chorus, they will come to understand themselves to be acceptable and lovable just as they are.

And my child's inner voice will assure them, "I am different – not less."

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