

The language we use to talk about autism is important. A paper published in our journal ([Kenny, Hattersley, Molins, Buckley, Povey & Pellicano, 2016](#)) reported the results of a survey of UK stakeholders connected to autism, to enquire about preferences regarding the use of language. Based on the survey results, we have created guidelines on terms which are most acceptable to stakeholders in writing about autism. Whilst these guidelines are flexible, we would like researchers to be sensitive to the preferences expressed to us by the UK autism community.

Preferred language

The survey highlighted that there is no one preferred way to talk about autism, and researchers must be sensitive to the differing perspectives on this issue. Amongst autistic adults, the term 'autistic person/people' was the most commonly preferred term. The most preferred term amongst all stakeholders, on average, was 'people on the autism spectrum'.

Non-preferred language:

1. **Suffers from OR is a victim of autism.** Consider using the following terms instead:
 - is autistic
 - is on the autism spectrum
 - has autism / an autism spectrum disorder (ASD) / an autism spectrum condition (ASC)
(Note: The term ASD is used by many people but some prefer the term 'autism spectrum condition' or 'on the autism spectrum' because it avoids the negative connotations of 'disability' or 'disorder'.)
2. **Kanner's autism**
3. **Referring to autism as a disease / illness.** Consider using the following instead:
 - autism is a disability
 - autism is a condition
4. **Retarded / mentally handicapped / backward.** These terms are considered derogatory and offensive by members of the autism community and we would advise that they not be used. Consider using the terms 'intellectual disability' or 'developmental delay' instead.
5. **Referring to Asperger's syndrome as a rare / mild form of autism.** Just because someone appears to be verbally or cognitively able, does not mean they cannot be severely affected by their autism. Also note that some people diagnosed with Asperger's syndrome refer to themselves (and one another) as an autist / autie / aspie. Whilst we accept that people may wish to refer to themselves and each other in this way, it is often less acceptable when used by a non-autistic person.

6. Low or High Functioning Autism.

Many autistic adults and family members felt that dividing autistic people into categories of low or high functioning did not fully represent the rich pattern of ability and challenges faced by individuals. We would encourage a more precise description of people's abilities (such as referring to their cognitive or verbal abilities).

When referring to comparison groups, we suggest the following points be taken into consideration:

1. Avoiding the term 'normal' or 'normally developing' and 'healthy'.

Consider using the following terms instead:

- Neurotypical (*Note: This term is only used within the autism community so may not be applicable in, for example, the popular press.*)
- Typical adults or typically developing children

As a more general point, we also advocate referring to 'comparison' rather than 'control' groups, as it is almost always unclear what is being 'controlled' for.