

The GROW Model

Goal

Their 'B' - aims, desires, aspirations

Reality

Their 'A' – starting point, current position, story so far

Options

Ideas, possibilities, resources available

Will

Or way forward. The plan/next steps and their commitment to act



Language is Power

- *"Change your language and you change your thoughts."* – Karl Albrecht
- *"Language is power, in ways more literal than most people think. When we speak, we exercise the power of language to transform reality."* – Julia Penelope
- "Language is power, life and the instrument of culture..." – Angela Carter

NATP – Anna Freud training programme

#NATPmentalhealth NATP Adult Community Settings Rollout, Module 1

Language holds power and has an impact on other people

Language preferences can feel trivial to some people outside minority groups.

However, language holds **power**.

Recognising the evolution of language and ideology is fundamental to positive change - change that sees Neurodivergent people as **equal** and **valuable** members of society.

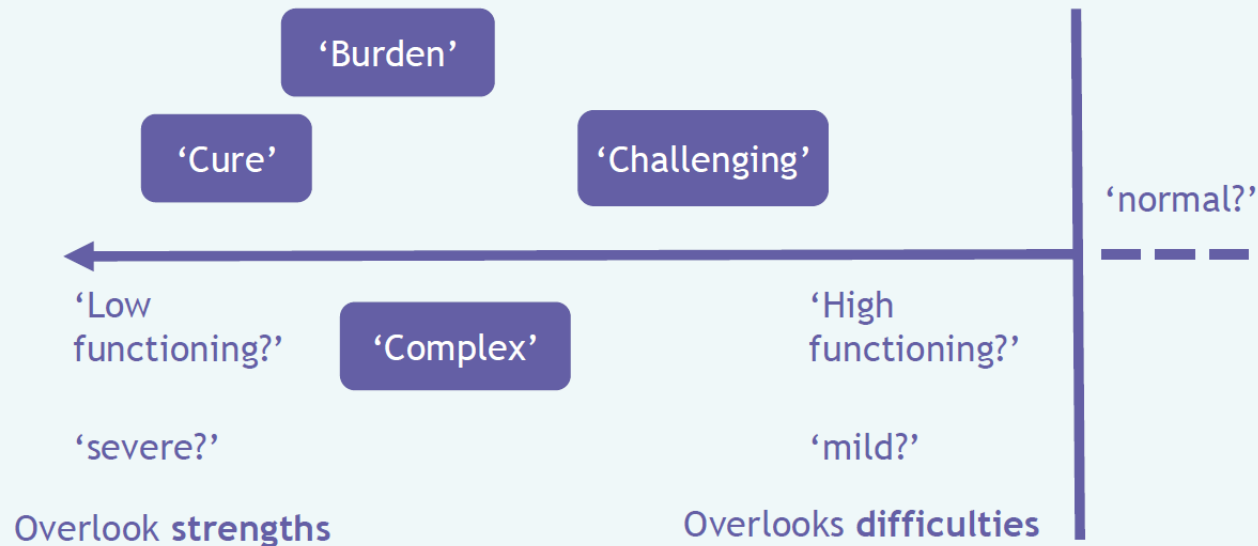
Some people do prefer person first language, so respect their wishes and ask!



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Labels can be dehumanising



Neurodiverse Connection:

Conclusion

Language evolves—and so should we. But it must be the people directly impacted who lead these changes. Neurodiversity-affirming language honours identity, promotes dignity, and helps dismantle systems that exclude. When in doubt, ask someone how they identify—but when referring to communities more broadly, use the language grounded in lived experience, research, and collective advocacy.

Neuroaffirmative Language Guide

TO USE / TO DO



TO AVOID / NOT TO DO

is Autistic

Suffers from / has autism

Characteristics

Symptoms/ impairments

Communication differences

Social impairments / Lacks Social Skills

Communication
/ Communicating Distress

Challenging / Problematic
/ Disruptive behaviour

Double empathy
/ Different communication style

Lacks Theory of mind

Stimming /
Self-expression body language

Self stimulatory behaviour
/ Repetitive movements

Support / Adaptions /
Accommodations

Treat / Treatment

How can we reframe language ?

Autism Spectrum Disorder.	Autism.
Terms such as 'mild', 'moderate' or 'severe' or 'high' or 'low' functioning.	- Describe individual experiences, variation and support needs. - Descriptive terms such as these continue to medicalise autism and may also lead to the false belief that some individuals may not experience difficulties and require support at certain points in their life.
Deficit, disorder, or symptoms.	Differences, characteristics, preferences, features.
'Concerns around ...' or 'red flags for ...'	'Features of ...' or 'experiences consistent with ...'
Meaningless, purposeless, or aimless behaviour.	Stims in order to meet own self-regulatory needs.
On their own agenda.	- Demonstrates a monotropic thinking style. - This means that a person may prefer sameness and have strong focus for a select number of things that are of interest to them. - Individuals may have difficulty shifting attention to non-preferred activities and with transitions and change.

- If this report/letter/assessment was describing myself or a loved one, how would I feel about the language used?
- Do I feel comfortable with how I described the individual and their needs?
- Does the language assign judgment? Is it shaming? Pathologising? De-humanising?
- Does the report accurately describe their strengths and difficulties?
- Has sufficient attention been given to their strengths as well as their needs?

