Recommended Terminology When Referring to Hearing Differences

Language and terminology evolve over time and reflect cultural norms of the time period. This document is intended to provide guidance on preferred and non-preferred terms to use when speaking with or referring to a person or persons with atypical hearing. In general, preferred terms acknowledge hearing differences without implying a negative value to hearing status. Non-preferred terms generally identify reduced hearing levels as a negative or undesirable trait.

It is always most appropriate to ask an individual how they would like their hearing status to be addressed. This is represented best by the slogan “nothing about us without us” (1). However when referring to hearing differences in general, we cannot ask each individual so must turn to groups which represent members who have hearing differences to determine what terminology is preferred. Furthermore, there is variation depending on geographical location, age, hearing level, and cultural background. A term that is considered acceptable in North America may not be as acceptable in the United Kingdom. In the United States the Individuals with Disabilities Education Improvement Act (IDEA) of 2004 (20 U.S.C, 2004) references the term “hearing impaired” and “auditory impairment” (2) and until that law is updated, it is recognized that those terms may be used in legal documents.

Terms that are currently (as of May 2023) considered appropriate to use include: deaf; Deaf; hard of hearing; deaf and hard of hearing; deafblind; deafened, late-deafened; hearing loss; people who are Deaf, deafened or hard of hearing, people with hearing loss, person with hearing loss.

deaf

The term deaf, typically refers to someone who has severe to profound hearing levels but does not necessarily identify as part of the Deaf community.

Deaf

The term Deaf refers to someone who identifies as part of the signing Deaf community, regardless of their hearing thresholds levels. The Deaf community considers itself a linguistic minority, having its own history, culture, and social norms.

hard of hearing

There are regional differences in how this term is used. In the United Kingdom it is generally considered outdated and if it is used, typically only refers to age-related, presbycusic hearing loss. In North America this term typically refers to people who have some auditory access, for example, individuals who can use a voice telephone.

deaf and hard of hearing

This term is intended to encompass people regardless of hearing level but does not give any indication of their culture or communication preferences. The term “deaf and hard of hearing” refers to a collective group that does not necessarily coincide with audiometric hearing thresholds. It is intended to be inclusive of an entire spectrum of individuals representing different hearing levels and types of hearing loss as well as varied cultural identities. When referring to an individual, it is preferred to say “deaf or hard of hearing” (instead of “and”) because Deaf individuals typically want to maintain their unique identity.

deafblind

This term is used to describe someone who has both reduced hearing and vision that impacts their daily functioning.

deafened, late-deafened

Many people with reduced hearing were not born deaf. The term deafened is used to explain that their hearing differences were acquired after birth. Their experiences are different from someone who was born deaf or hard of hearing.
hearing loss
This term is commonly used to describe various levels of hearing. People born with hearing differences may not perceive the difference as a loss because they never had typical hearing and therefore do not feel they lost something. However, the term hearing loss may be appropriate to describe late-onset hearing changes or noise-induced hearing changes.

people who are Deaf, deafened or hard of hearing / people with hearing loss / person with hearing loss
Person first terminology emphasizes the person as an individual before the hearing difference. Person first terminology tends to be used more in formal writing. Identity first language places the difference first. The Deaf community typically prefers identity-first language. Some Deaf individuals prefer to use the deaf descriptor first, i.e., deaf or hard of hearing person.

deaf and/or hard of hearing with additional needs
When referring to deaf or hard of hearing individuals with more complex needs/with concurrent diagnoses (e.g., intellectual challenges), the preferred term is deaf and/or hard of hearing with the specific additional needs. It is preferred to be specific about what the other complex needs/concurrent diagnoses are (e.g. deaf with CP, Deafblind)

Terms that should be avoided include: deaf-mute, hearing impaired, hearing impairment, hearing disabled, hearing handicapped.

deaf-mute
People who are deaf are not mute and are capable of producing speech. This term is considered offensive because it implies deaf people cannot communicate or that it prioritizes oral communication over visual/tactile communication.

hearing impaired, hearing impairment, hearing disabled, hearing handicapped, hearing deficit
These terms imply that hearing differences are negative and that the person with the hearing difference is not a whole person. The definition of “impaired” in the Merriam-Webster dictionary is “being in an imperfect or weakened state or condition; such as a) diminished in function or ability; lacking full functional or structural ability b) unable to function normally or safely.” (3) Being “impaired” implies that one is less than perfect, not in whole condition, or defective. As such, the term impaired as included in hearing impaired “makes assumptions about the abilities of the person, rather than providing a description of the person.” (4) People with hearing loss do not view themselves as less than or diminished in ability; rather people with hearing loss are fully capable when appropriate support is provided.

Deaf-plus
“Although it has been used for many years to refer to people who have challenges in addition to deafness, the preferred terms now are “Deaf with intellectual challenges”, “Deaf-blind”, “Deaf with CP”, etc.” (5)

In addition to how one describes a person’s hearing difference, one should be careful to avoid describing the person themselves using terms such as: overcoming, inspiring, brave, courageous, noble, special, afflicted with, sustains, victim of, suffering from (“which convey a falsely inferior image of being deaf or hard of hearing”) (6)

When referencing a specific sign language, such as American Sign Language, British Sign Language, Langue des Signes Québécois, the words should always be capitalized just as oral languages such as “English” and “French” would be capitalized as they are each a whole language. Similar to spoken languages, there are many sign languages with unique syntax, grammar, and words across the globe.

One may think to themselves, "Well, my uncle calls himself hearing impaired." Remember, whenever possible ask an individual their preference and then honour their request. Educational audiologists work to empower students with hearing differences to develop self-determination and self-confidence as people who are fully capable and confident to advocate for their individual hearing needs. As such, it is important to be cognizant of the terms being used and their potential negative implications. These guidelines are intended to do just that - guide educational audiologists who are speaking about people with hearing differences as a group, when an individual’s preference is not known.
Terms to Use When Describing Audiological Assessment Results and Diagnoses:

It is helpful to differentiate the medical diagnosis terminology versus the psychosocial terminology. A medical diagnosis may use terms to describe a medical condition whereas, in social contexts the focus is on how an individual functions within the social and communication context of their everyday life. (7) In a medical diagnosis model, hearing is usually referred to as normal or abnormal. When working in a psychosocial model, instead of referring to normal or abnormal hearing, these terms are preferred:

atypical hearing
reduced hearing/decreased hearing thresholds at birth obtained outside of the typical range of hearing. Example: “Susie was born with atypical hearing in both ears. Her hearing status was identified at 3 months of age through the newborn hearing screening process.”

hearing loss
hearing thresholds outside the range of typical hearing, acquired after birth. Example: “Susie’s hearing levels have progressed to severe to profound sensorineural hearing loss.”

typical hearing
hearing thresholds recorded within the normal range of hearing (-10 to 15 dBHL for children and -10 to 25 dB HL for adults) on an audiogram. Example: “Susie has severe to profound hearing levels for her right ear and typical hearing levels for her left ear.”

References:
(3) https://www.merriam-webster.com/dictionary/impaired#:~:text=%3A%20being%20in%20an%20imperfect%20or%20full%20functional%20or%20structural%20integrity
(5) http://cad.ca/issues-positions/terminology/
(7) https://www.who.int/classifications/international-classification-of-functioning-disability-and-health

Resources:
8. https://www.merriam-webster.com/dictionary/impaired#:~:text=%3A%20being%20in%20an%20imperfect%20or%20full%20functional%20or%20structural%20integrity