



Language Strategies To Enhance Belonging

Language Strategies To Enhance Belonging

The NCAA is committed to creating an environment where all student-athletes can thrive. A key part of that commitment is for all individuals engaged in intercollegiate athletics to use intentional, compassionate language when describing and interacting with other people. This practice can strengthen relationships, reduce barriers to human connection and promote well-being.

A Note on Language Use

Language evolves with cultural shifts, environmental changes and generational perspectives. Words often carry histories or meanings we may not realize, and their impact can differ from what a speaker intends.

Practicing intentional, compassionate language requires ongoing effort and a willingness to learn. Mistakes will happen, and that's OK. What matters is understanding missteps, learning from them, and continuing to communicate with empathy and respect. Within teams, departments and campus communities, members can support one another by modeling intentional and compassionate language and offering feedback in a culture of care.

How To Use This Resource

This resource is not comprehensive. It provides strategies to foster welcoming environments and promote well-being, and it offers examples to illustrate application of the strategies.



INCLUSION

Acknowledgment: This resource was developed using best practices drawn from higher education, sports and health care contexts. Definitions are aligned with those established by the American Psychological Association. The guide benefited from the expertise of content experts who contributed to its review and editing, ensuring accuracy and broad applicability.

NCAA is a trademark of the National Collegiate Athletic Association.
April 2026

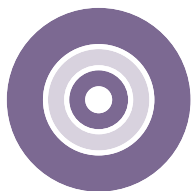
Foundational Strategies



1. Honor how individuals describe themselves.

Language preferences vary by region, generation, context and lived experience.

- **Use the terms people use to describe themselves** – Listen, ask respectfully or consult public sources, and then honor how individuals describe themselves with your own language.
- **Be mindful of person-first vs. identity-first language** – Some individuals prefer person-first wording (e.g., student-athlete who is deaf), while others prefer identity-first (e.g., deaf student-athlete). Follow their lead.
- **Be flexible** – Some people use different terms in different settings and around different people. Adjust accordingly.



2. Choose specific and accurate terms.

Accurate and specific terms help you acknowledge distinct experiences.

- **Be specific** – Don't use a general term when a more specific term applies. For example, rather than referring to “nontraditional students,” you could note specifics like “students who are parents” or “students who take evening classes.”
- **Use accurate terms** – Seek to understand the difference between related terms to connect with the individuals who use them. Not sure about the difference between terms like deaf, Deaf and hard of hearing? Do a quick search or ask an expert like a professor or health care provider.
- **Be careful with jargon (specialized terms) and idioms (nonliteral phrases)** – If a term is familiar only to experts or a limited audience, add a brief explanation so everyone can understand. For example, rather than “turn a blind eye,” try the more accurate “choose to ignore.” Instead of “burn a year,” try “use a year of eligibility.”



3. Use humanizing language.

Recognize individuals beyond labels and stereotypes.

- **Be aware of bias** – We all hold unconscious attitudes toward different social groups. Defaulting to neutral terms, avoiding generalizations or assumptions about individuals or groups, and using specific, accurate language helps counter this bias.
- **Use asset-based framing** – Focusing on achievements rather than deficiencies in your descriptions of people centers their humanity. For example, “We support student-athletes in reaching their academic and athletic goals” uses asset-based framing. “We support student-athletes who struggle to stay eligible” does not.
- **Recognize intersectionality** – People's experiences are shaped by the way multiple aspects of who they are overlap and intersect. Because no single term or category fully captures someone's lived reality, it's important to listen with openness and seek out individual perspectives.



Foundational Strategies

1. Honor how individuals describe themselves.
2. Choose specific and accurate terms.
3. Use humanizing language.

Language Practice

The following context and examples illustrate ways to use the language strategies to promote student-athlete well-being.

Example 1: Body Composition and Size

Context

Anti-fat bias is one of the most deeply rooted stigmas (negative perceptions) in modern society, reinforced by cultural beliefs that equate thinness with qualities like hard work, self-discipline and even leadership potential and intelligence. In athletics, where physical attributes are closely scrutinized, body size is frequently linked to performance, strength and even an athlete's potential for success. However, bias about body size, including weight, height and body composition, can have far-reaching effects beyond sports and competition. The misconception that higher weight equates to poorer health can stigmatize those with larger bodies and can foster a fear of gaining weight.

Referencing body size when it is not relevant can reinforce anti-fat attitudes and cause harm, so it is important to avoid appearance descriptions unless directly relevant to the conversation. Even seemingly positive remarks – like complimenting someone on weight loss – can promote anti-fat bias and the false belief that losing weight is inherently beneficial. Beyond reinforcing stigma, unnecessary references to body size can pressure people to change their bodies through potentially harmful methods.

Finally, it is important to note that individuals with perceived low weight and/or smaller bodies may also face pressure to change. For example, a football player on the offensive line might be pressured by coaches or peers to gain weight and increase muscle mass. In some cases, student-athletes pursue this weight gain through extreme diets, supplements or training routines that could negatively affect their health. Discussions about body size should be handled with care.



APPLICATION

Body Weight

- Body weight should only be discussed when medically necessary, and these discussions should use objective terminology like “weight,” “higher weight” and “lower weight.”
- Referring to weight as “ideal,” “goal” or “preferred” outside of a medical setting often fails to account for the complex factors that contribute to a person’s health.
- While euphemisms (replacement terms meant to sound less offensive) for higher and lower weight are very common, they can also be condescending. Common examples include “big boned,” “chubby,” “fluffy,” “heavy,” “plump,” “thick,” “slight” and “wiry.”
- Comments like “he is fat/skinny, but a great athlete” reinforce the stigma against higher and lower weights.

Disordered Eating

- Using person-first language (e.g., person experiencing anorexia) emphasizes that the individual who experiences disordered eating is not defined by their condition.
- Comments on what and when a person chooses to eat made outside the context of professional nutrition advice can create pressure to align eating habits with social norms rather than physical needs.

Body Size

- Using specific, accurate descriptions focused on skills and strengths of student-athletes can be humanizing. For example, “Marcus Johnson is a 6-foot-4-inch shooting guard with a 40-inch vertical leap and a 6-foot-8 arm span, providing him with elite defensive versatility.”
- Language that suggests inhuman or exaggerated traits (e.g., machine, beast) may perpetuate stereotypes. Rather than “John Davis is a beast out there, a machine with freakish speed and strength,” try, “John Davis stands out for his speed and strength, consistently breaking through defenders and driving his team’s success.”

Example 2: Disability

Context

There are two common ways to reference disability: people-first language, which emphasizes the person before the disability, and identity-first language, which emphasizes disability as a core part of a person's identity.

People-first

- Person who is deaf
- Student who is autistic
- Professor who is blind



Identity-first

- Deaf person
- Autistic student
- Blind professor

People-first language was widely accepted as the preferred choice for many years. However, many people now prefer identity-first language because they view their disability as an important part of who they are and how they experience the world. As noted in the language strategies, practicing humanizing language includes honoring how individuals describe themselves and following their use of people-first or identity-first descriptions. It is a good practice to alternate between people-first and identity-first language when a preference is unknown.

Many terms related to disability have distinct meanings that reflect specific lived experiences. One example is “Deaf,” “deaf” and “hard of hearing,” which differ based on factors like age of onset and severity of hearing loss. While these terms may appear interchangeable to some, they each carry distinct meanings that may resonate with individuals in different ways. You do not have to be a disability expert to communicate with empathy and respect. The key is to acknowledge that terms related to medical diagnoses and specific physical, mental, intellectual and emotional experiences are likely to have precise meanings and to use them intentionally. If you are not sure how people identify, ask them how they describe themselves and honor that with your own language.

There are additional reasons to be intentional with language describing disability. The Americans with Disabilities Act mandates confidentiality of medical information, and unnecessary disclosure of a person's disability or other health condition may introduce bias. Many commonly used terms carry negative perceptions, and sometimes people who need accommodations for access don't identify with the terms

being used. For example, a college student-athlete with anxiety or a learning difference might need additional support or access to mental health resources, but the student may not identify as “disabled.” Using broad or stigmatized terms could make the student feel uncomfortable or reluctant to seek support, even though these accommodations or additional services could help the student succeed both academically and athletically.

The impact of language extends beyond individual conversations; it also shapes how we portray people with disabilities more broadly. Ableism, a form of discrimination that devalues people with disabilities, can influence these portrayals in subtle and harmful ways. One common example is the tendency to portray people with disabilities as sources of inspiration, which often reflects the assumption that disability is inherently negative. These stories reinforce stereotypes and set unrealistic expectations for those with disabilities. Using asset-based framing – emphasizing the skills, dedication and athletic achievements of disabled student-athletes rather than viewing disability as a deficit – helps convey respect and promote understanding. A second common example of ableism is avoidance of people with disabilities. This is often driven by discomfort or uncertainty about how to interact.

APPLICATION	
Asset-Based Framing	- Asset-based framing describes people or groups by their aspirations and contributions before their challenges or deficiencies. For example, “person who uses a wheelchair” and “wheelchair user” are examples of asset-based framing, whereas “confined to a wheelchair” and “wheelchair bound” focus on deficiencies. “Living with” reflects asset-based framing; “suffers from” does not.
Ableist Language	- Ableist language implies that disabled people have less value than other people. Examples include the term “gimp,” a demeaning word used to talk about a person who limps or cannot walk, or “derp, der, doy, duh,” which mock the speech patterns associated with some disabilities. - Some common phrases that reflect ableist language include “turn a blind eye” or “fall on deaf ears.” These phrases can be replaced with a precise description of what is happening, like “choose to ignore.” - It is common for people with visible physical disabilities to be treated like a child or assumed to have a cognitive deficit. Use of asset-based framing can help counter the deficit perspective that is often present in language describing disability. - Avoid language like “inspiring” or “overcoming challenges” unless directly relevant to the conversation.
Obsolete Language	- Special needs person, person with special needs. - Alternatives: Person living with a disability, disabled person. - Mentally handicapped, retarded. - Alternatives: Intellectual disability, naming a specific diagnosis. - Mentally ill, crazy, insane, psycho, hysterical. - Alternatives: Person living with a mental health condition, a person who has been diagnosed with a mental health condition. - Addict, addicted to drugs. - Alternative: Substance use disorder.
Accurate Language	The terms “disability” and “disabled” are not negative in themselves; they are valid words that describe real experiences and can be used within a culture of care.