

Using This Guide

This guide is meant to serve as a supplement to Ooligan's house style guide. It contains resources and guidelines for consciously editing language around race, gender, sexuality, disability, and other potentially sensitive topics that may arise in Ooligan manuscripts. None of these guidelines should be taken as hard-and-fast rules that can be applied the same way in all cases: every manuscript is different, and there may not be a clear “right” way to word something. The key requirement of conscious writing and conscious editing is that they be done *consciously*. This means that words should be chosen thoughtfully and with an eye toward how the writing will be perceived by readers from a variety of backgrounds.

Ooligan editors are not expected to be subject-matter experts; rather, when they edit manuscripts that engage with any of the topics addressed in this guide, they should consult the appropriate resources to help them determine whether these manuscripts contain language that may be inaccurate, out of date, or unduly inflammatory or offensive.

The author's background and intentions should be key considerations throughout the editorial process. Sometimes writers use inflammatory or controversial language intentionally; sometimes they do so unwittingly. While authors generally have the final say in regards to the words that appear in their books (and they can disregard editorial advice if they so choose), it is the editor's responsibility to bring potential sensitivity concerns to the author's attention in a tactful way. If an editor is unsure about how to word a query or otherwise address a sensitivity issue, they can consult with the manuscript's managing editor.

Language and resources are always changing and evolving, and this guide is therefore a living document that should be updated whenever necessary. If you would like to propose making a change to the guide or adding a new section, resource, or guideline—or if you notice that any links are broken or out of date—please contact the current managing editor (editing@ooliganpress.pdx.edu) or copy chief (copychief@ooliganpress.pdx.edu).

General Resources

[Conscious Style Guide](#)

[Radical Copyeditor](#)

[Diversity Style Guide](#)

[The Chicago Manual of Style](#)

[APA Guidelines on Bias-Free Language](#)

Ability and Disability

Resources:

- [Disability in Kidlit: Introduction to Disability Terminology](#)
- [NCDJ Disability Language Style Guide](#)
- [Autistic Hoya: Glossary of Ableist Phrases](#)
- [CDC: Communicating with and about People with Disabilities](#)

Style and Mechanics:

- *Deaf/deaf*: Capitalized when referring to the Deaf community or a member thereof; lowercased when referring to a hearing-loss condition.

Things to Keep in Mind:

- Avoid implying that some disabilities are better or worse than others.
- Language to avoid (or to be very careful with):
 - *Confined/bound to a wheelchair*
 - *Cripple/crippled* (But note that the word *Crip* has been reclaimed by some people with disabilities.)
 - *Deformed/deformity*: It is better to describe the specific condition or appearance.
 - *Invalid*
 - *Freak*
 - *Abnormal/abnormality*
 - *Afflicted with/stricken with/suffers from/victim of*
 - *Differently abled, different abilities, diffability*: Some consider this language condescending, offensive, or evasive—as some advocates observe, we are *all* differently abled, which renders such terms meaningless. However, others prefer these terms to *disabled* or *disability* because they sound less negative.
 - *Handicap(ped)/handicapable*
 - *Lame*
 - *Suffers from* _____
 - *Harelip*
 - *Hearing impaired/hearing impairment*: The World Federation of the Deaf has taken the stance that *hearing impaired* is no longer an acceptable term.
 - *Mentally retarded/retard/mental retardation*: These terms were once common but are now considered outdated and offensive.
 - *Mongoloid*: Always avoid the use of this term when referring to someone with Down syndrome.

Health and Illness

Resources:

- [Cancer Institute NSW's Guidelines for Writing about Cancer](#)
- [The ASCO Post: The Language of Cancer](#)
- [HIV Plus Style Guide](#)
- ["Here's How to Respectfully Talk about HIV"](#)

Things to Keep in Mind:

- Avoid terms that frame cancer as a fight or a battle. Many people with cancer do not relate to this narrative.
 - These terms include the following:
 - *survivor* (a term embraced by some but rejected by others)
 - *hero/heroic*
 - *battle*
 - *war*
 - *lost/won*
 - *fight/fighter*
 - *victim*

- AIDS is a syndrome that does not directly cause death. People do not “die of AIDS”; rather, they might die of “complications from AIDS” or of “an AIDS-related illness.” It’s best to be specific wherever possible.

Mental Health

Resources:

- [BuzzFeed's Style Guidelines for Writing about Mental Health](#)
- [Mindframe](#)
- [APA: Reporting on Mental Health Conditions](#)

Things to Keep in Mind:

- Any book with content involving mental illness or suicide should contain relevant