

General guidelines:

- When speaking or writing about a person's mental illness or substance use disorder, use person-first language.
- Do not refer to a person's behavioral health diagnosis unless it is relevant to the conversation.
- Use "disability" rather than "handicap" to refer to a person's disability.
- Avoid referring to persons with mental illness or substance use disorders as "the disabled," "the impaired," "the mentally ill," "the retarded," and "those people." Descriptive terms should be used as adjectives, not nouns.
- Avoid negative or sensational descriptions of a person's behavioral health disorder. Don't say "suffers from, a victim of, or afflicted with." These descriptions elicit unwanted sympathy or pity toward the people being described.
- Don't use "normal" to describe people who do not have mental illness or substance use disorders. It is better to say "people without mental illness" or "people without substance use disorders" when making comparisons.

For more information about recovery principles and the use of person-first language, contact:

The Allegheny County
Coalition for Recovery
(ACCR)
www.coalitionforrecovery.org
(412) 325-0369

About ACCR

Consumers, family members, and providers created ACCR in response to service users who felt that they were not being heard by providers and seldom had opportunities to participate in the planning of their treatment. ACCR strives to transform systems of care in Allegheny County to systems that are supportive of people who have mental health or substance use disorders. Its mission is to increase awareness of behavioral health recovery and to promote the use of recovery principles in practices in behavioral health services.



Words Matter!

A Guide for Using

Person-First Language



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Recovery

Recovery is an ongoing process through which persons learn to manage disabilities and diversities, such as mental illnesses and substance use disorders, in a way that allows them to have a full and satisfying life. A key aspect of recovery is overcoming stereotypes and stigma. Everyone encounters challenges, however, challenges are even more significant when people face stigma and discrimination based on their health status, as is often an issue of significant concern for persons with mental health or substance use disorders. These illnesses affect behavior and can cause changes in a person's judgment, attitude, values, self-control, citizenship, and mannerisms that may be offensive or hurtful to others. One way to combat the stereotypes and stigma often associated with mental illness and substance use disorders is to use person-first language.

Choosing to use person-first language

When talking about people with mental illnesses and substance use disorders, the guiding principle is to refer to the person first, not the illness. The emphasis should be on the person, not the illness. A behavioral health diagnosis should not be the primary, defining characteristic of an individual, but merely one aspect of the whole person. It is better to refer to the person's mental illness only if it is relevant to the conversation or situation.

Why use person-first language?

People who are in recovery from mental illness and substance use disorders are present in every aspect of society. They are:

- Moms, dads, sons, and daughters.
- Employees and employers.
- Friends and neighbors.

Most importantly, they are people first.

The following terms should be avoided when speaking to, or about, persons with mental illness or substance use disorders:

Psychotic/Psycho
Crazy
Schizophrenic
Handicapped
Victim
My patient
Manic Depressive
Afflicted with
Suffers from
Retarded
Defective
Borderline
Drunk
Drug addict
Special person
Emotionally disturbed

There is some debate about which terms are most appropriate to use when describing persons with mental illness or substance use disorders. Regardless of the terms you use or the settings you are in, be respectful and always use person-first language.

Examples of person-first language:

- “People in recovery” or “people who have mental illness” rather than “the mentally ill.”
- “He has been diagnosed with an intellectual disability” rather than “he is retarded” or “he is MR.”
- “She is diagnosed with alcohol dependence” rather than “she is an alcoholic.”
- “Accessible” parking or bathroom rather than “handicapped” parking or bathroom.
- He has “a need for” rather than he has “a problem with.”

Many labels used for mental illness and substance use disorders in our society have negative connotations or are misleading. Using labels contributes to negative stereotypes and stigma. All of these words devalue the person they attempt to describe and could affect his or her self-esteem.