LANGUAGE GUIDE

A resource for professionals to support the use of person-first language



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About the guide

This resource has been developed for use amongst leaders, managers, frontline practitioners and volunteers. It aims to provide guidelines on how to use language to empower individuals and reinforce a person-first approach.

Language is important; the terminology and words we choose to use can be harmful as well as empowering. Often the words we use are based on habit, convenience or social expectations. Being mindful of the words we use and the impact they have can help to break stigma, open up conversations and support people to seek help if they need to.

Stigmatising language reinforces negative stereotypes and attitudes amongst professionals and the general public, and can influence individuals' perceptions and experience of services.

Person-first language focuses on the person rather than their diagnosis, condition or traumatic experience. It aims to acknowledge and respect a person's dignity and worth. Person-first language is not always appropriate for all aspects of identity, or at all times, but it is a useful guiding principle.

Being conscious about the words we use is not about being politically correct. It is about acknowledging that language matters and is an important part of our practice.

Key principles

The following principles can help us to be more considerate and inclusive in the language we use.

TRY THIS

- Use language that conveys respect and acknowledges diversity.
- Choose terms that are strength-based and empowering.
- Use language that is accessible. Don't speak above a person's level of understanding or assume that a person is not capable of understanding.
- Remember, we don't just use words to communicate. Use non-verbal cues, like eye contact, tone of voice and body language to demonstrate you respect the dignity and worth of all people.



X INSTEAD OF THIS

- Don't define a person by their condition, diagnosis or behaviour – emphasise the person first.
- Don't impose your language on others. Where appropriate ask the person what language they prefer and respect their wishes.
- Avoid terms like 'non-compliant'; use terms like 'chooses not to' or 'decided against' which affirm a person's choice and preferences.
- Avoid slang and jargon which can be misinterpreted or cause confusion when used incorrectly.

How has this guide been developed?

This document is based on and informed by a range of previously published guidance which was co-produced alongside people with living experience. We also wish to acknowledge the input of Voices (People with Living Experience of Suicide) who have co-produced the suicide prevention aspect of this guide. The following sources have also been used:

- Language Matters: communicating about people, alcohol and drugs
- Words Matter: Terms to Use and Avoid When Talking about Addiction
- NADA and NUAA Language Matters resource
- Best Practices and Recommendations for Reporting on Suicide
- Samaritans' Media Guidelines
- Language Matters: Safe Communication for Suicide Prevention

What this guide is not

Language is constantly evolving and changing. As such, this guide is not intended to be an exhaustive list of terms or as a means to impose language on others. It does however attempt to embody the principles outlined above by setting out some examples of non-stigmatising, person-first language.

LANGUAGE GUIDES

Drugs and alcohol

This section has been developed using the work of:

- NHS Highland Alcohol and Drugs Partnership Language Matters
- National Institute of Drug Abuse
- Words Matter: Terms to Use and Avoid When Talking about Addiction, the Network of Alcohol & other Drugs Agencies (NADA)
- NSW Users & AIDS Association (NUAA) Language Matters resource

All of these publications were developed alongside people with living experience.

₹ TRY THIS	X INSTEAD OF THIS
Substance use, drug and/or alcohol use, non-prescribed use	Substance abuse, misuse, problem use,
Used other than prescribed (for prescription medications)	non-compliant use
People with problem(atic) substance/ drug/alcohol use	People who abuse substances/ drugs/alcohol
Person who uses drugs and/or alcohol, person who injects drugs, person in active use	Drug user, drug abuser, junkie, smack head, crack head
Currently using substances, drugs, alcohol	Using again, fallen off the wagon, had a setback, lapse, relapse
No longer using drugs	Stayed clean, maintained recovery
Person with a dependence on	Addict, junkie, druggie, alcoholic
Person experiencing drug dependence	Suffering from addiction, has a drug habit
Person who has stopped using drugs and/or alcohol, person in recovery or long-term recovery	Clean, sober, drug-free, reformed addict
Person with lived/living experience or drug/alcohol dependence	Former addict, ex-addict, used to be a

TRY THIS	× INSTEAD OF THIS
Person disagrees	Lacks insight, in denial, resistant, unmotivated
Treatment has not been effective/ chooses not to	Non-engaged, non-compliant
Person's needs are not being met	Drug seeking, manipulative, splitting
Positive/negative drug screen	Dirty/clean urine
Used/unused syringe	Dirty/clean needle, dirties
Using prescribed medicines as a treatment	Replacing one drug with another
Baby born to mother who used drugs while pregnant Newborn exposed to substances	Addicted baby
Drug and Alcohol Treatment Services	Substance Misuse Services
Opioid agonist therapy Medication for a substance use dependency	Opioid Substitution Therapy Medication assisted treatment

Domestic abuse

This section has been informed by the Hampshire Domestic Abuse Partnership, victims and survivors of domestic abuse and the developing evidence about trauma informed approaches.

✓ TRY THIS	X INSTEAD OF THIS
Domestic abuse	Domestic violence
Survivor voice/lived or living experience	Expert by experience
Subjected to domestic abuse	Experiencing domestic abuse
Victim-survivor	Victim
Person using abusive behaviours (outside criminal justice system)	Perpetrator
Reduced barriers to allow disclosure of domestic abuse	Increased willingness to disclose domestic abuse

Mental health and wellbeing

This section has been inspired by Mind's **Mental Health Language Guide**, Healthline Transform **Conscious Language Guide** and Mental Health Foundation's **Talking About Mental Health**.

✓ TRY THIS	INSTEAD OF THIS
A person who has experienced psychosis or a person who has schizophrenia	Psycho, schizo
Someone who has a diagnosis of, is currently experiencing, or is being treated for	A schizophrenic, a depressive, a psychotic, a self-harmer
A person experiencing a mental health problem	Lunatic, nutter, unhinged, maniac, mad, insane, disturbed, not right in the head
Someone with mental ill-health or someone who experiences mental health problems	Mentally ill
Living with mental illness	Suffers from mental illness
People experiencing or living with mental health problems	The mentally ill, a person suffering from, a sufferer, a victim or the afflicted
Patients, service users or clients	Prisoners or inmates (in a psychiatric hospital)
Discharged	Released (from a hospital)
Antidepressants, medication or prescription drugs	Happy pills
They're living with bipolar disorder or they have a diagnosis of bipolar disorder	They're bipolar
Sense check	Sanity check
Use more compassionate ways to describe people, the way they are behaving or the place they are receiving care. Use this as an opportunity to challenge discriminatory comments	Using illnesses as a means of description, e.g. 'I'm so OCD' or 'crazy'
	Using slang words to describe people or places where people receive care
Emotionally activating, challenging	Triggering
Sensitive association	Trigger

Suicide prevention

Every death by suicide is a tragedy and for those closest to the person who has died, it is devastating. It is estimated that for every suicide, there are at least 135 who are affected by the death.

It is important to use language and terminology that is both respectful to the person who has died and sensitive to those bereaved/affected by the death. For this reason, the suicide prevention section of this language guide has been developed by the **Voices Collective**, to help guide appropriate suicide-related terminology and language.

₹ TRY THIS	X INSTEAD OF THIS
Died by/lost their life to suicide	Committed suicide Topped themselves Successful/completed suicide
Suicide death/fatal suicide attempt	Successful attempt
Survived a suicide attempt	Failed suicide/attempted suicide/ unsuccessful attempt
Non-fatal suicide attempt	Near miss
Indicating suicide Intimating suicide Considering suicide Signalling suicide	Threatening suicide
High/higher/increased/rising rate of suicide	Suicide epidemic
Higher rate of suicide/increasing rate of suicide	Suicide wave
High risk place/frequently used location	Suicide hot spot/site
Taken their own life Ended their life A suicide Lost to suicide Lost by suicide	Suicide victim

✓ TRY THIS	× INSTEAD OF THIS
They are facing suicide They are thinking of suicide They are experiencing suicidal thoughts	Describing someone as suicidal
Approval seeking	Attention seeking
Needing support	Time waster
Needing assurance	Manipulator
Person experiencing suicidal thoughts and actively searching for methods	Suicide tourist
Echo suicide	Copycat suicide
Responding to an incident involving suspected suicide(s)	Dealing with a suicide crisis
Disclose urge to self-harm Indicate self-harm Using coping strategy	Threatening self-harm

Input from Sasha's Project, Hampshire Voices PLE of Suicide Collective, Best Practices and Recommendations for Reporting on Suicide (30/08/2021), Samaritans' Media Guidelines, Language Matters Spencer-Thomas, Suicide Language Guide CAMH (Canadian Centre for Addiction and Mental Health).

Further information and support in Hampshire is available from:

- Amparo (suicide bereavement support)
- MIND (mental health advice and support)
- **Stop Domestic Abuse** (confidential advice and support for those affected by domestic abuse)
- Inclusion Recovery Hampshire (services to support those affected by drugs and alcohol)