

CHANGING THE CONVERSATION WITH PERSON-FIRST LANGUAGE



People with behavioral health conditions are not "others"

1 in 5 Americans experience a mental health condition every year. Nearly **17%** of Americans are living with a substance use condition.

The language you use to talk about us matters!

The words used to describe us can influence:

- What the public thinks of us
- How we are represented in the media
- How included we are in healthcare policy-making
- How comfortable we are with getting treatment

Identity-first vs. Person-first

Many people in the disability community prefer to use identity-first language, which puts the disability first in its description. However, we always use person-first language when speaking about others, unless we know their preference is identity-first. **When in doubt, ask!**

When you use person-first language, you prioritize personhood over health status.

People with behavioral health conditions are just that: people with a health condition. Their diagnosis does not define who they are, just as your physical health conditions do not define who you are.

When you use inclusive language, you respect people's dignity.

People who are experiencing symptoms of their behavioral health condition deserve to be discussed respectfully, just like anyone else. We don't use insults or jokes to talk about people experiencing a physical health crisis, like an asthma attack. Using words like "crazy" or "junkie" is insulting. We cannot help having symptoms sometimes.

Offensive, Ableist Language

Instead of using:

- Mentally ill / Mental illness
- Addict/Junkie
- Crazy/Insane
- Alcoholic
- Clean
- Schizophrenic
- Disabled



Inclusive Person-First Language

Try using:

- Person living with a mental health condition
- Person in active use/living with a substance use condition
- Not well/experiencing symptoms
- Person living with an alcohol use condition
- Person in recovery
- Person living with schizophrenia
- Person with a disability

