

Our Words Matter

To demonstrate our desire to partner with people for the best possible life we want to be intentional about the words we use when talking with them, talking about them or writing about them. Our language should be clear, understandable, respectful and affirm our commitment to their full potential.

Some general best practices when writing or talking about or with a person include:

- Use quotes from the person, or other supports to record information.
- Instead of being general (behavior) it is usually best to be specific (bites his wrist when upset).
- Speak or write for the person. Use the appropriate reading and vocabulary level for the person so that the documentation makes the most sense for them. (If the person is an attorney and is living with cerebral palsy she might prefer having documentation written with a broad vocabulary. If the person has moderate intellectual disability and is unable to read without assistance, they might prefer simpler terms written in a more conversational style.)

While our words matter, our tone and body language is critically important in showing respect when we speak about someone. We can use all the right words and still be disrespectful or disparaging if we are not professional in our tone of voice and body language.

Historical Language	Best Practices
Abuser/User/Addict/Junkie	<ul style="list-style-type: none">• Substance use disorder is now the preferred terminology• “Uses [specific substance]”• “Has alcoholism”• “Is diagnosed with an addiction that experiences the following...”• “Person with an addiction to substances”• “Substance abuse interferes with the person’s life”
Acronyms/Jargon (may be appropriate to use among colleagues, providers)	<ul style="list-style-type: none">• Spell out for people, families, guardians• Use full name at the beginning of a document, including the Community Support Plan and Notice of Action• Examples are CAC, CADI, BI, EW, AC, PCA, DD, CCB, CSG, FSG, IHO, NOA, PS, CHF, HTN, ASD, ADHD, etc.• Use ACRONYM LIST as a reference
Acting-out	<ul style="list-style-type: none">• “Disagrees with supports and prefers to cope by...”
ADLs or Activities of Daily Living	<ul style="list-style-type: none">• Personal Cares• Personal Assistance



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Developed by Washington County’s Person-Centered Best Practices Workgroup: Molly Henningsgard, Winna Bernard, Caitlin McNamara, Christina Blake, Amy Heimkes, Julie Beckel, Sheena Bauer, Erin Boyle, Thao Le, and Chantelle Heifort-Adams

Baseline	<ul style="list-style-type: none"> Describe what a person looks like when they are doing well
Behaviors (Challenging Behaviors, Aggressive Behaviors)	<ul style="list-style-type: none"> “Expresses frustrations/emotions/self by ____” State the typical cause of the behavior first (i.e. communication difficulty, change in routine or environment, etc.), then say what specifically may happen: “When having a hard time communicating what he wants, Bob may yell or throw things.” It may be OK to use the term “behaviors” when there are many of them and it would be less person-centered to generate a long list of what they are (this could be in situations where you are documenting eligibility for a program or service)
“Brain Injury/BI Home”, “CADI Home”, “Mental Health Home”	<ul style="list-style-type: none"> Consider being mindful of putting a label on the house – it is or could be the person’s <i>home</i> “Home with staff that specializes in supporting people with brain injuries” “Home that accepts CADI waiver funding” “Home that has staff that offer experience with mental health needs”
Childlike	<ul style="list-style-type: none"> “Continuing to develop social skills” Quote what the parent or caregiver says Specify actual age and correlation to social behavior age Link when it happens to situation Quote out of diagnostic assessment “Talks in a babyish voice when anxious” as per therapist... State what you see or what the person is doing. “He loves watching Donald Duck and Road Runner” or “She prefers to spend time with children instead of people her own age.”
Client, Consumer	<ul style="list-style-type: none"> Use the person’s name “Person I support” “Person I work with” Ask them how they would like to be referred to “Person receiving support” “Person in recovery” When discussing a large group: “People we support”
Clinical Case Manager	<ul style="list-style-type: none"> Recovery Coach or Recovery Guide (“I’m not a case, and you’re not my manager!”)
“Cute” or “Kid” or “Kiddo” (when referring to an adult with disabilities)	<ul style="list-style-type: none"> Do not refer to an adult with disabilities as “cute” or as a “kid” or “kiddo”
Dangerous or Danger to self and others	<ul style="list-style-type: none"> Specify what is happening and what the safety concern/risk/issue is

Dependent/Dependency	<ul style="list-style-type: none"> • “Benefits from support with _____” • “Needs support with _____” • “Needs help with _____”
Elderly	<ul style="list-style-type: none"> • Find out how the person would prefer to be referred to • Older adult • “Over 65”
Entitled	<ul style="list-style-type: none"> • Aware of one’s rights • Self-advocate
Epilepsy	<ul style="list-style-type: none"> • Seizure Disorder • OK to say epilepsy if it is being quoted from a diagnostic report
Fail/Failure/Failed, Decompensated, Relapse	<ul style="list-style-type: none"> • “Unsuccessful at this time” • “Unable to ___ because ___ happened.” • “Chose not to ___” • “Declined to ___” • “She is re-experiencing symptoms of...” • Reoccurrence
Frequent Flyer	<ul style="list-style-type: none"> • “Requests frequent support” • “Familiar face” • “Is needing a lot of support right now” • “Takes advantage of services and supports when needed” • Resourceful • Good self-advocate
Front-lines/In the trenches	<ul style="list-style-type: none"> • Support staff • Direct support
Grandfathered In	<ul style="list-style-type: none"> • This is a legal term that broadly refers to the grandfather clause, which exempted anyone who was able to vote before 1867 from the literacy tests, property requirements, and poll taxes needed for voting. However, enslaved Black people were not freed until 1865 and not granted the right to vote until 1870. This clause effectively excluded Black from voting, which continued until the 1960s. • “Exempt from”
Grandiose	<ul style="list-style-type: none"> • Has high hopes and expectations of self
Hearing Impairment	<ul style="list-style-type: none"> • Hearing loss • If born with hearing loss, deaf or specific type of loss
Heavy Hitter Button Pusher	<ul style="list-style-type: none"> • “Requires a lot of support from their case manager at this time.”

Helpless	<ul style="list-style-type: none">• Unaware of capabilities
High Functioning	<ul style="list-style-type: none">• “Does really well in _____ areas”• “Does really well with _____”• Use a specific diagnosis, if known (i.e. “diagnosed with mild intellectual disability.”)
Hopeless	<ul style="list-style-type: none">• Unaware of opportunities
IADLs or Independent Activities of Daily Living	<ul style="list-style-type: none">• Home management• Daily living needs/areas• Community living needs/areas
IDD, DD [acronyms]	<ul style="list-style-type: none">• Consider saying “intellectual disability” or “developmental disability” (whichever is the individual’s situation you are speaking of) when talking amongst colleagues
Lack of insight, Lacks insight, Denial	<ul style="list-style-type: none">• “Has difficulty understanding how memory is affecting ability to make good decisions/stay safe/manage money.”• “Does not see how [mental health symptom] affects ability to keep a job/relationships with others/why does not have consistent PCA/homemaker.”• “Has high expectations for himself and what he wants to do with his life.”
Low Functioning	<ul style="list-style-type: none">• “Has challenges with _____”• “Needs support with _____”• “Struggles with _____”• “Symptoms interfere with their [relationships, work habits, etc.] in the following way...”• Be specific with needs• Use a specific diagnosis, if known (i.e. “diagnosed with severe or profound intellectual disability.”)
Manipulative	<ul style="list-style-type: none">• Resourceful• Really trying to get help
Mental Retardation	<ul style="list-style-type: none">• Intellectual Disability (when there is an actual diagnosis with an IQ of 70 or below)• Developmental Disability (when there is not necessarily an IQ below 70, such as Autism, Cerebral Palsy, etc.)• Use actual diagnosis when possible
Minimize risk	<ul style="list-style-type: none">• Maximize growth



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Noncompliant, Resistant	<ul style="list-style-type: none">• “Declines”• “Does not engage in _____”• “Does not take medications as prescribed”• “Not open to...”• “Chooses not to...”• “He has his own ideas of how he wants to live his life.”• “Prefers to use other ways to support himself.”
Nonverbal	<ul style="list-style-type: none">• Doesn’t communicate with words but expresses herself by _____”• “[So and so] recognizes Bob is saying _____ when he/by _____”• “Rachel is able to understand you when you speak. She uses facial expressions and body language to communicate with you. See her communication chart for details.”
Patient, Person Served	<ul style="list-style-type: none">• Use the person’s name• “Person I support”• “Person I work with”• Ask them how they would like to be referred to• When discussing a large group: “People we support”
Peanut Gallery	<ul style="list-style-type: none">• Dates back to the late 19th century and referred to sections of a theater where Black people typically sat• Avoid using this term
Placement, “Looking for an opening”, “Bed” or “Looking for a bed”	<ul style="list-style-type: none">• Home• Specify the type of home if the person knows what they want: assisted living, group home• Supportive environment• “Exploring available options”• Be specific - “I am working with someone that is looking for a group home in the Newport area, he’d like to live with other guys in their 30s and be close to a bus line, do you know anything that is available?”
Pronouns	<ul style="list-style-type: none">• If possible, identify and use the person’s preferred pronouns• When referring to a group of people, consider saying “they/them” instead of “him/her” or “he/she”• <i>See examples at the end of this document</i>
Puts self at risk	<ul style="list-style-type: none">• “She is taking chances to grow and experience new things”• Chooses to use other supports or chooses to not use support
Refused	<ul style="list-style-type: none">• “Chooses to _____”• “Prefers to _____”• “Prefers to take a bath in the morning”• “Has chosen not to... ”



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	<ul style="list-style-type: none"> • “Is choosing to do ____ instead” • “Does not want to...” • “Is not in agreement with...” • “Declined offer for...” • Find out why, it might not be a refusal but something else going on (forgetting to take their medication, doesn’t have what they need to be able to do the task, etc.”
Relapse/Failure (in terms of use of substances)	<ul style="list-style-type: none"> • “Has started using ____ again.”
Revolving Door	<ul style="list-style-type: none"> • “Recidivist” (used in legal situations) • “Uses services when needed” • “Familiar face”
Schizophrenic, “Is Borderline” or “Is a borderline”, Autistic	<ul style="list-style-type: none"> • Diagnosed with [Autism, Schizophrenia, Borderline Personality Disorder] • The person HAS the diagnosis, not the person IS the diagnosis
Sober	<ul style="list-style-type: none"> • “In recovery” • “Is doing well in recovery”
Stability, Maintaining stability	<ul style="list-style-type: none"> • “Is doing well with _____ because of her support system and support plan.”
Suffering from	<ul style="list-style-type: none"> • If the person identifies as suffering from something (pain, mental health disorder), then appropriate to use this terminology • If the person does not see it as suffering from something, “struggling with [mental health disorder]” or “has [mental health disorder/health condition]” • “Working to recover from...” • “Experiencing...” • “Living with...” • Be as specific as possible
Treatment Team	<ul style="list-style-type: none"> • Recovery Team • Support system or support team
Total Care	<ul style="list-style-type: none"> • “Needs support with all areas of ____” • “Needs assistance with [specify areas]”
Train wreck	<ul style="list-style-type: none"> • “Sue has unmanaged diabetes, cardiovascular disease and vision loss.” • “Ken is experiencing co-existing mental health symptoms, is using meth and has chosen not to take his medications at this time.”
Undocumented, Migrant	<ul style="list-style-type: none"> • “Does not have citizenship”

	<ul style="list-style-type: none">• “Immigrated from....”
Unmotivated	<ul style="list-style-type: none">• “Lack of inertia” (used to describe depressive symptoms)• “Does not wish to ____ when [symptom, situation, etc.]”• Provide specific example of situation and how that could lead to a depressed day• Can quote the person if they identify as being unmotivated• Avoid assuming someone is unmotivated without a clinical reason, such as depression• “Preferred supports are not available”• “Is not interested in what has been offered”• “Is unsure what they want or need”• “When experiencing symptoms of depression she may not have the energy to [clean her house, take medications, etc.]”
Unrealistic	<ul style="list-style-type: none">• “Bob wants ____, but his team is concerned he needs to work on ____ so he can work towards this goal.”• “At this time [specific situation]”• “Benefits from [specific type of support]”• “Has high expectations for herself.”
Uppity	<ul style="list-style-type: none">• An adjective that was used by White people during the Jim Crow era to describe Black people they believed weren’t showing them enough submission or respect. It remains an insulting way to describe a Black person because it insinuates they have poise or independence they should not have.• Avoid using this term
Vulnerable	<ul style="list-style-type: none">• OK to say as it is identifying risk, but be specific to the area of vulnerability (i.e. finances, etc.)
Vision Impairment	<ul style="list-style-type: none">• Vision Loss• If born with vision loss, low or no vision
Weaknesses	<ul style="list-style-type: none">• Refer to as “needs” or “needs support with”• “Experiences barriers to/with...”



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Standard and Non-Standard Pronouns

	Nominative (subject)	Objective (object)	Possessive determiner	Possessive Pronoun	Reflexive
Traditional pronouns					
He	<i>He</i> laughed	I called <i>him</i>	<i>His</i> eyes gleam	That is <i>his</i>	He likes <i>himself</i>
She	<i>She</i> laughed	I called <i>her</i>	<i>Her</i> eyes gleam	That is <i>hers</i>	She likes <i>herself</i>
It	<i>It</i> laughed	I called <i>it</i>	<i>Its</i> eyes gleam	That is <i>its</i>	It likes <i>itself</i>
They	<i>They</i> laughed	I called <i>them</i>	<i>Their</i> eyes gleam	That is <i>theirs</i>	They like <i>themselves</i>
Invented pronouns					
Ne	<i>Ne</i> laughed	I called <i>nem</i>	<i>Nir</i> eyes gleam	That is <i>nirs</i>	Ne likes <i>nemself</i>
Ve	<i>Ve</i> laughed	I called <i>ver</i>	<i>Vis</i> eyes gleam	That is <i>vis</i>	Ve likes <i>verself</i>
Spivak	<i>Ey</i> laughed	I called <i>em</i>	<i>Eir</i> eyes gleam	That is <i>eirs</i>	Ey likes <i>emself</i>
Ze (or zie) and hir	<i>Ze</i> laughed	I called <i>hir</i>	<i>Hir</i> eyes gleam	That is <i>hirs</i>	Ze likes <i>hirsself</i>
Ze (or zie) and zir	<i>Ze</i> laughed	I called <i>zir</i>	<i>Zir</i> eyes gleam	That is <i>zirs</i>	Ze likes <i>zirsself</i>
Xe	<i>Xe</i> laughed	I called <i>xem</i>	<i>Xyr</i> eyes gleam	That is <i>xyrs</i>	Xe likes <i>xemself</i>

Resources for the Best Practices Language include:

- Andrew, Scottie and Kaur, Harmeet. "Everyday words and phrases that have racist connotations." *CNN*, <https://www.cnn.com/2020/07/06/us/racism-words-phrases-slavery-trnd/index.html>
- Gender Neutral Pronoun Blog <https://genderneutralpronoun.wordpress.com/category/gender-neutral-pronoun/invented-pronouns/>
- Mental Health Coordinating Council Recovery Oriented Language Guide <http://mob.mhcc.org.au/media/5902/mhcc-recovery-oriented-language-guide-final-web.pdf>



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- Office of Mental Health, New York State Person Centered Planning Practice and Resources
https://www.omh.ny.gov/omhweb/pros/Person_Centered_Workbook/
- Tondra, et al., (2007)
- Washington County Peer Learning Circles & Best Practices Workgroup
- Yale University School of Medicine Program for Recovery and Community Health
<http://www.ct.gov/dmhas/lib/dmhas/publications/PCRPLanguage.pdf>

If you have additional words or phrases for *Our Words Matter*, please email:
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