



# PERSON-FIRST LANGUAGE & FOCUSING ON EQUITY

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# Person-first and Destigmatizing Language

## From the National Institutes of Health (NIH) Style Guide

Person-first language is a way to emphasize the person and view the disorder, disease, condition, or disability as only one part of the whole person. Describe what the person “has” rather than what the person “is.”

Person-first language avoids using labels or adjectives to define someone, e.g., a person with diabetes not a diabetic; or person with cancer not cancer patient; or a person with bipolar disorder not a person who is bipolar.

## Not “one size fits all.”

Some oppose person-first language:

- if language is needed to separate them from a trait they have, it suggests that the trait is negative
- they may prefer to use identity-first language because they feel the trait is a core component of their identity.

## Ask for a person’s preference when writing a story about one person.

## If writing generally, consider using what the community at large uses.

The [National Center on Disability and Journalism’s Disability Language Style Guide](#) has great resources.

# Words Matter

*Spoken words cannot be unsaid, and they have the power to build up person, or to destroy a person.*

Marissa Angerer, Texas Mother, Friend, Lawyer,  
Person in Recovery, Shatterproof Ambassador

Stigmatizing language influences patient, provider, and public attitudes and judgments.

Remember: language changes over time and across different contexts, and we need to continually re-evaluate the words we choose.

**From Temple Health**



## Recommended language (based on consensus, research, and/or expert opinion)

- Substance-free; related: no longer using [X substance]

## Stigmatizing language

- Clean

## Rationale & related research

- Dirty/clean is associated with filth, not a medical condition. Invokes punitive bias and shame.

Shatterproof [Stigma Addiction Language Guide](#)



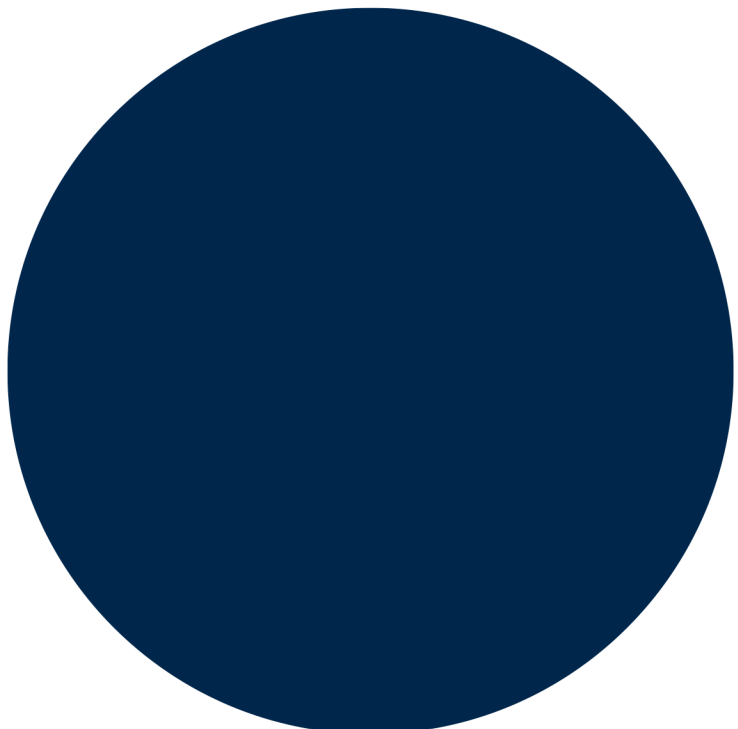
# Focusing on Equity

Avoid use of adjectives such as “vulnerable” & “high-risk.”

Avoid dehumanizing language. Use person-first language instead.

Remember that there are many types of subpopulations.

Avoid saying “target,” “tackle,” “combat” or other terms with violent connotation when referring to people, groups or communities.



Avoid unintentional blaming.



# Resources

[Health Equity Guiding Principles for Inclusive Communication](#)

[NIH Style Guide](#)

[National Center on Disability and Journalism's Disability Language Style Guide](#)