

## 8 Language through a recovery lens



**Words and language are critically important in the mental health field where discrimination, disempowerment and loss of self-esteem can cause people to battle with self-stigma.**

Language powerfully shapes sense of self by influencing how people describe themselves and are described by others (Slade 2009b). Language also shapes possibilities, and promotes positivity and strengths more generally. It helps people to break with the past, transform the present and usher in the future they wish to see. In changing language, people are able to 'be the change [they] wish to see' (Mahatma Gandhi).

Recovery paradigms increasingly advocate the adoption of such 'people-first' language descriptors as: 'person in recovery', 'person who is expert by training' or 'person with lived experience' rather than descriptions that focus on deficits or relationships to services (Recovery Devon 2012).

The national framework adopts a similar approach. Consistent with the language of recovery, the terms 'person', 'people with lived experience', 'lived expertise' and 'experts by experience' are used wherever possible rather than 'clients', 'service users' or 'patients'. Family and support include family members, partners, friends or anyone whose primary relationship with the person concerned is a personal, supportive and caring one. The terms 'lived experience' and 'experts by experience' may also apply to family members, partners and friends.

Many people find a depth of personal meaning in the terms 'consumers' and 'carers'. These terms are acknowledged and used throughout the framework.

To further reflect language consistent with recovery paradigms, the terms 'mental health issues', 'challenges' and 'emotional distress' are used in place of, and at times alongside, the term 'mental illness'.

