

**CENTRE FOR INNOVATION IN PEER SUPPORT**

# **Compassionate Language for Mental Health and Substance Use**

**Holding People in High Regard**

**Support  
House**



Centre for  
Innovation in  
Peer Support

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Centre for Innovation in Peer Support (Centre) is embedded in Support House. The Centre promotes & facilitates the meaningful engagement, empowerment and enhanced capacities of people with lived experience and families, as well as effective peer support services regionally, provincially, nationally and internationally. Copyright 2022© by Support House and Centre for Innovation in Peer Support. All rights reserved worldwide. This resource may be freely reproduced and distributed. Citation of the source is required under copyright law.

# How to Use This Resource

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## Legal

The views represented herein solely represent the views of the Centre for Innovation in Peer Support. Information in this document should not replace your own research and due diligence. The information used to create this resource draws on the experience of the Centre and public sources, referenced throughout. The materials in this resource are general guidelines only. This resource is not intended to provide legal advice. If there is a discrepancy between this document and any applicable legislation, the legislation will always prevail.

## Acknowledgements

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# About the Centre

The Centre for Innovation in Peer Support provides both direct service and system focused supports across Ontario. The Centre for Innovation in Peer Support team has a robust expertise in the application of the *Guiding Standards of Peer Support*.

The Centre has been recognized as a “benchmark of excellence” in peer support, and meaningful co-design and engagement of people with lived/living experience and family & caregivers.

## The Centre’s Focus: Professional Peer Support

**The Centre focuses on providing, and supporting the practice of *professional peer support*.**

The practice of professional peer support is emotional, social and/or practical support delivered by mutual agreement by persons who self-identify as having lived/living with similar circumstances and/or challenges. Professional peer support workers have engaged in training and skill development to enhance their ability to support empowering and empathetic relationships with others in their pursuit of self-determined wellness and/or change (Hopkins & Gremmen, 2022).

Professional peer support is when those with personal lived/living experiences work or volunteer in designated roles in mainstream/traditional services while ensuring that the critical aspects of hopefulness, recovery-orientation, empowerment, non-judgmental acceptance, and trust are promoted within the peer support relationship. Professional peer support is an intentional service provided where there is an identifiable ‘giver’ and ‘receiver’ of care. Professional peer support workers uphold the fidelity of peer support, while also honouring the responsibilities of their workplace (Hopkins & Gremmen, 2022).

[For more information on professional peer support, we invite you to read \*Understanding Peer Support: A Proposed Core Service in Ontario\* on our Resource Hub](#)

## Supporting Provincial Systems & Partners

The **Centre’s Provincial, Systems & Partner** stream works within the mental health and substance use/addictions system to support peer staff, supervisors, and organizations from the approach of the *Guiding Standards of Peer Support* with a focus on professional peer support. The Centre also supports organisations to empower people with lived experience and/or family/caregiver experience through meaningful engagement and co-design.

Our full programming is offered through our **Virtual Learning Centre & Resource Hub** which supports the most current, best practices in Peer Support. Through our **Virtual Learning Centre**, we offer trainings, consultation, our peer professional development webinars, and provincial communities of practice. Our **Resource Hub** is home to our toolkits, models, and resources. All of these offerings support the implementation and practice of peer support within Ontario.

We continue to evolve, listening to input from our stakeholders across the province to identify gaps and needs within the system, and using quality improvement processes to pivot, pilot, evaluate and then scale and spread new innovations in peer support.

## Supporting People Engaging in Services

The **Centre's Peer Programming** stream began as a consumer survivor initiative under the name TEACH (Teach, Empower, Advocate for Community Health) in 1999. TEACH later came to be housed at Support & Housing Halton (now Support House) and continued to evolve in order to meet the needs of our community, eventually amalgamating with Support House's peer support provincial systems & partner support program, the Centre for Innovation in Peer Support.

Today, the Centre's Peer Programming utilizes its expertise from having provided peer support services for over 23 years in the Halton-Mississauga region to offer quality programs that are designed, developed, implemented, and evaluated by people with lived experience. This stream is focused on peer-led psychosocial and rehabilitative programming. Together, we build community and connection through creating safe spaces to heal and grow for people navigating mental health and substance use/addiction challenges, as well as supporters/families.

## Our History

In 2014, the Mississauga Halton LHIN Mental Health & Addictions Leadership Table began discussing future funding priorities. Peer support was identified as the main priority. After consultations and research, the Mississauga Halton LHIN created the Enhancing and Sustaining Peer Support Initiative in 2015. This initiative created peer support positions, supported service coordination, and supported the training and development of these positions across the region.

Support & Housing Halton (now Support House) became the lead agency that hired and housed the Peer Support Systems Lead and the Substance Use & Provincial Systems Lead in a program that would become the Centre for Innovation in Peer Support (Centre). This team worked to sustain the new peer support positions that had been funded, build infrastructure, and bridge the many stakeholders impacted by this initiative.

In January of 2020, the Centre amalgamated with Support House's direct-service-facing peer support program, TEACH. The Centre now has a direct service stream of peer support programming as well as a system and partners stream, which has grown beyond the Mississauga/Halton area to include the entire province of Ontario.

## About Support House:

Support House is directed by our core values. They guide our agency's decisions and actions, unite our staff, define our brand, and inspire our culture. We put people first – our supports are **person directed**. We **connect and engage** and start conversations to build and maintain relationships. We focus on **health and wellness** practices to inspire our culture. All employees are required to adhere to our values-based Oath of conduct.

# About this Resource

This resource has been created by Peer Supporters working in the mental health and addiction field, who have lived experience with mental illness and/or substance use. We are bringing forward considerations and alternatives to language that has the potential to do or perpetuate harm and stigma related to mental health, mental illness and substance use.

We recognize that language is powerful and personal. This resource is not intended to bring shame or blame, but to raise awareness and different perspectives to members of helping professions, community and media. We hope this resource helps others in reducing stigma and prejudice, discrimination, and harm. Everyone has a role to play in this endeavour.

## Intersections

We recognize that the realm of mental health and addiction support intersects with all parts of identity and experience, and as such, we encourage you to seek out learning and growth opportunities that can inform your language and practice in regard to these intersections.

## Holding People in High Regard

### Always, in all ways

As a community we seek to be in support of one another. Our language in regard to, and towards one another is one way that we can actively support our community.

Language is not passive. It is active, an action. Our actions in regard to our language and communication, have the power to cultivate hope and healing or distrust, resentment and harm. We can strive to hold others in high regard. Holding people in high regard requires empathy. We can look for context behind behaviours and seek to connect with and understand the experiences of those around us rather than pass judgement or blame. The language we use, demonstrates our care for others, it is a tangible way of supporting people in our community, and therefore it is a tool of compassion.

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*Compassionate language recognizes that every person with their own situation and context is valuable and worthy of care and kindness.*

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We are honouring a person's existence without conditions, and valuing their humanity. When we treat others with respect and honour their dignity, we are not only showing care for them, we are supporting them in treating themselves with the same kindness and care, instead of self-stigma and shame.

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*"...language reflects attitudes, and attitudes lead to actions (or inactions)"*

*(Lines et al., 2015).*

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*"If you want to care for something, you call it a flower.  
If you want to kill something, you call it a weed."  
- Don Coyhis*

# Shifting our Language

Shifting our language requires time, intention and practice. Be kind to yourself.

*“I believe that if I regularly connect into my intention to do no more harm... my awareness of my use of language seems to flow more naturally”*

- Clare Sheedy, Peer Supporter

## Reflective Practice

Reflection is a key instrument of building awareness. As we often do with other actions, language is something we can regularly reflect upon. When we consider ways to keep our language compassionate, we consider how to hold others with high regard and we take an important step in building person directed supports; fostering connection and engagement, and enhancing health and wellness.

### Key questions to consider:

- Am I holding a person in high regard? Do my words honour a person’s dignity?
- If this person or their loved one was present, would I speak the same way?
- If it was my loved one, or myself, would I speak the same way?
- If it was me, would I like people sharing about me this way?
- Have I kept the person’s humanity present in my language or have I medicalized and simplified their experience?
- Whose needs directed my language?
- Is my language neutral or driven by my own judgements?
- Does my language reflect a person’s autonomy in this process?
- What can I do to shift my language?

## Reflexive Practice

Reflexive practice takes our reflections and awareness and translates these into actions. When we are aware of and consider who is at the centre of our conversation, we can put our needs, perceptions and judgements aside. Reflexively, we can then consciously shift our language to be in support of others. We can choose a word or phrase and intentionally start to use it. Over time it will replace our previous language. Through continual reflexive practice, our caring vocabulary will grow and progress, demonstrating our commitment to providing the best care possible, for others and ourselves.

If you use a term that you believe could be harmful, you can acknowledge this and rephrase your words. An apology is one way of acknowledging our desire to act differently and communicate that we do not wish to cause another person harm. If you feel an apology is appropriate, we recommend you keep it succinct and then rephrase and continue the conversation at hand. A long-winded apology generally evokes the other person(s) to console and validate you, which distracts from the original concern and takes away the power of the apology

# Person-Centred Language

Putting the human being, the person we are talking to or about at the centre of the conversation means that we are honouring them, their needs and their wellbeing. Consciously centering the person is important to maintaining empathetic and compassionate connections.

## Honouring the Person

It is a privilege when people engage with us, sharing details of their lives and engaging in emotional vulnerability. When we honour the person and the privilege it is to be part of their journey, we avoid connotations of burden or battling (us vs. them).

Consider the impact of:	Alternatives:
<p>I am dealing with... How do I deal with...?</p>	<p>I am experiencing... I am supporting someone... How can I support someone with...?</p>
<p>Frontlines Frontline Worker</p>	<p>Providing direct support Direct service worker Supporting Working with/alongside</p>

Taking stock of our emotions is an important practice. Venting or complaining is about us, not about the other person. Remember that you are experiencing challenges and therefore your expression of such should take ownership of your reflections while continuing to hold the person in high regard. When we honour a person we can vent our own emotions, and avoid placing these on the other person, internalizing them for ourselves or perpetuating stigma publicly. We also avoid creating blame and resentment that affects our attitude and actions with this person, and keeps us from being solution focused.

Alternatives:
<ul style="list-style-type: none"> <li>• I'm frustrated that my suggestions are not meeting this person's needs</li> <li>• I have a different perspective than the person I am offering support to</li> <li>• I am experiencing challenges supporting this person</li> </ul>

## Humor

Humor can be important in healing and helping. It becomes harmful when this humor is regarding someone's experiences, or situation, at their expense. We are decentering this person from the conversation and not holding them in high regard. We are not honouring their dignity.

## Humanizing Language

When we separate ourselves from the experiences and humanity of others, it becomes easier to dehumanize people. Instead, we seek to consider individual contexts before talking about someone. We avoid generalizations, as these can perpetuate stigmas and harm. It can keep people "othered" or excluded. Othering fails to acknowledge the systemic and societal forms of oppression that people experience, and their strengths and resilience.

<b>Consider the impact of:</b>	<b>Alternatives:</b>
<p style="text-align: center;">Those people They/Them (in a collective sense) Generalizations: "all people with.." Marginalized and Disenfranchised</p>	<p style="text-align: center;">Person's name People experiencing people/groups that face barriers related to... people/groups experiencing...</p>

Attributing behaviours to diagnosis can be insensitive and puts the diagnosis first, instead of the person. It can be dismissive to the needs and experiences of people, dehumanizing them. We can acknowledge the experiential nature of symptoms and explore or consider the personal interactions with these experiences.

<b>Consider the impact of:</b>	<b>Alternatives:</b>
<p style="text-align: center;">They are so bipolar That's the depression Disordered Mental health/ substance issues</p>	<p style="text-align: center;">Experiences... Has concerns about... Lives with... Is coping with... Is working through/navigating/processing... Experiencing challenges/barriers...</p>



# Person-First Language

*“Please be mindful, while I may suffer from depression on some days, it does not describe my overall quality of life. I do not suffer with depression, much like I am not depression...”*

– Anonymous, Peer Supporter

Person first language allows us to move away from assigning an oversimplified defining label. It puts the person and their humanity at the forefront and treats their experiences as just that, experiences. These experiences do not singularly define a person’s existence. It keeps us away from judgement, perpetuating stigma and using demeaning words with negative societal connotations. It also avoids placing the onus of blame and shame on a person.

Furthermore, person-first language helps keep power imbalances minimal. Remember, the person is choosing to engage with us. We can value the shared expertise within the relationship, the expertise of the person with lived experience in knowing themselves, and the expertise of the supporter. It can also be important to use language that does not skew the nature of the helping relationship to one of friendship.

Consider the impact of:	Alternatives:
Schizophrenic, Bipolar, Etc. Unstable, Dysregulated, Abnormal Crackhead, Junkie, Crazy, Druggy, Vagrant, Delinquent, Loser, Psycho, Etc. Abuser, Addict, Alcoholic, Drunk	Living with... Experiencing... Is working through/navigating/processing... ...uses drugs/alcohol... A Person who uses drugs/substances/alcohol
***Client, Patient*** Individual, Offender, Inmate Pal, Bud, Dude, My Friend, Sweetie, Love etc.	Peer Person Person engaging <u>with</u> service The person’s name
Clean, Sober (Implies people who are using substances are dirty, or less worthy)	Practicing abstinence Not partaking in... Meeting/working towards their substance use, addiction and/or behavioral goals

\*\*\* Peer Supporters typically do not use the words patient or client \*\*\*

## Person-Directed and Neutral Language

We can ensure that our language neutrally reflects the decisions, actions and needs of a person. We can honour people's needs by honouring their self-determination, autonomy, informed decision making, and personal learning and growth. Keeping our language neutral avoids putting judgement first. Although some substances are illegal, when we neutralize our language about substances, we stop perpetuating the stigma associated with criminal activity and moral failings. Honouring the person, instead of judgements and our own opinions, ensures we are honouring the needs and decisions of that person without creating shame or resentment and perpetuating prejudice and discrimination.

Consider the impact of:	Alternatives:
<p style="text-align: center;">Should Non-compliant Refuses</p>	<p style="text-align: center;">What are some options...? What would you like to do...? What do you think are the possible outcomes of this decision? ...is experiencing challenges/barriers to... ... made the informed decision to decline ...</p>
<p style="text-align: center;">Positive, Negative, Right, Wrong Normal</p>	<p style="text-align: center;">Remaining neutral and simply stating the action. Not using moralizing or quantifying descriptors that are based in our judgement</p>
<p style="text-align: center;">Substance/drug abuse or misuse</p>	<p style="text-align: center;">Substance/drug use</p>
<p style="text-align: center;">Illegal/Illicit drugs Street drugs</p>	<p style="text-align: center;">A drug supply Unregulated drug supply</p>

## Strengths-Based Language

When we use strengths-based language, we are acknowledging the skills, abilities and resilience of a person. Understanding our relationship to this person is one of support and empowerment; we strive to uplift and support one another. We avoid victimizing, patronizing, blaming or stigmatizing people. We do not perpetuate detriment and hopelessness. We avoid polarizing connotations of “all or nothing,” “pass or fail” and acknowledge the full spectrum of human experiences and resilience, noting that people are navigating their lives as best they can. We make room for people to learn and grow in their journey of wellness and acknowledge the benefits of overcoming challenging and difficult situations.

If someone wants our attention, have we considered that they deserve our attention? Can we acknowledge this need and support them in self-validation and connection?

<b>Consider the impact of:</b>	<b>Alternatives:</b>
<p>Suffering from... Victim of...</p>	<p>Currently experiencing... Experiencing challenges with... Survivor of... ...has lived through... Seeking support around...</p>
<p>Relapse, Slip up, Setback, Falling back...</p>	<p>A change in experience They are exploring options They are experiencing...</p>
<p>Assuming something is wrong: “What’s wrong?”</p>	<p>What is most important to you right now? Is something causing you distress?</p>
<p>They want attention</p>	<p>They are looking for connection and support</p>

# Talking about Suicide

This section is excerpted from: [Language Matters: Safe Communication for Suicide Prevention](#).

This booklet was created by the Public Health Agency of Canada in Partnership with Centre for Suicide Prevention and l'Association québécoise de prévention du suicide

*“It is important that language about suicide is careful and factual. When we replace problematic language with neutral and respectful language, we help shift how society reacts to and understands suicide. We can make the conversation about suicide safer.”*

“The term ‘committed’ is stigmatizing as it implies someone is criminal or immoral or has committed an offence. Suicide is not a crime. It was decriminalized in 1972. Recent amendments to the *Criminal Code of Canada* (section 241) refer to die by suicide rather than ‘committed suicide’.

Suicide is a tragic outcome of many complex factors with lasting impacts; it is never about success or failure. It is not something to achieve or finish like a task or project.”

<b>Consider the impact of:</b>	<b>Alternatives:</b>
Commit suicide Committed suicide Successful suicide Completed suicide	Die by suicide Died by suicide Death by suicide
Failed suicide Failed attempt Unsuccessful attempt Incomplete suicide	Suicide attempt Attempted suicide
High-risk people/ populations/groups At-risk Vulnerable or susceptible Those people/populations/groups	Populations with higher rates of suicide Populations with potentially high risk for suicide Factors that may increase people’s risk for suicide
Burden of suicide	Social and economic costs associated with suicide
Suicide victim Suicidal/Contemplators Attempters	Person who has died by suicide Person thinking about suicide People who have experienced a suicide attempt

# Shifting Language: Creating Change

Shifting the language of systems and society requires us to be bold and take ownership of the ways we use our language to care for others. Be kind yourself... and others.

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*The compassionate action we take with our language has a ripple effect, strengthening relationships, reducing the stigma and detriment we may witness or experience within ourselves, our workplaces, for our friends and family, within the media and broader community. We can cultivate awareness and share strategies to create a more accepting and healing community.*

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## Role Modelling

By shifting our language, we are role modelling change. Others may take notice and begin to shift their language to match ours.

## Calling others in, not out.

It can be challenging to use new language; we cannot expect others to pick this up right away. We can hold others in high regard while they explore their language. We can invite people to be aware of how their language affects us, people we care for and other people in the community. We can do this warmly and compassionately. When we call people out, they are likely to become defensive, and our messaging can be lost. Calling people into conversation and offering alternatives can be more effective.

Examples:

- That word/phrase often carries the connotation of.... I often use \_\_\_\_\_ instead.
- Have we considered how \_\_\_\_\_ would feel if they were with us?
- \_\_\_\_\_ makes me feel uncomfortable because \_\_\_\_\_. Can we find another way to share \_\_\_\_\_?

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*Compassionate language is our humanity in action.  
It calls on us to be courageous in our kindness.*

*– Alyssa Gremmen, Peer Supporter*

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## **ADDITIONAL RESOURCES TO EXPLORE**

### **Centre for Innovation in Peer Support's Provincial Systems Virtual Learning Centre & Resource Hub for Peer Supporters & Organizations**

Support House's Centre for Innovation in Peer Support's full programming is offered through our Virtual Learning Centre & Resource Hub which supports the most current, best practices in Peer Support.

Through our Virtual Learning Centre, we offer trainings, consultation, our Peer Professional Development Webinar Series, and provincial communities of practice. Our Resource Hub is home to our educational toolkits, documents and videos. These offerings support the practice and implementation of Peer Support within Ontario.

#### **Products on our Resource Hub:**

- ***Guiding Standards of Peer Support*** (from Mental Health Commission of Canada, Peer Support Canada & Centre for Innovation in Peer Support)
- ***Empathetic Communication Toolkit***
- ***Peer Support Examining Bias Toolkit***
- ***Examining Bias Toolkit***

**[CLICK HERE TO VISIT OUR VIRTUAL LEARNING CENTRE & RESOURCE HUB](#)**

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## References

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