

Our words matter checklist

This checklist was developed for use when considering language choices in communications about mental ill-health, suicide, self-harm, disordered eating and eating disorders and use of alcohol and other drugs (AOD). It will assist in applying the *Our words matter: Guidelines for language use*. For more detail and context, [click this link](#) to access the guidelines in full.

Always consider the impact language has on people. Aim to select preferred words that are safe, non-stigmatising, and considerate of the audiences and populations.



Have you considered whether the language is helpful or harmful?

- Have you avoided using details that identify methods of suicide or self-harm?
- Have you avoided using the term 'commit' when referring to suicide?
- Have you avoided language that contributes to negative stigma of mental distress?



Is your language selection considerate of your audience's diverse range of demographics, identities, experiences, and preferences?

- Have you considered the preferred names and gender pronouns of individuals?
- Have you considered the language preferences of diverse cultures and ethnicities (for example, Aboriginal and Torres Strait Islander people, Culturally and Linguistically Diverse communities).
- Have you avoided health judgments based on description of body shapes and sizes (appearance, size, weight, shape or physical measurements when communicating about disordered eating and eating disorders).



Have you used language that empowers and reflects people's lived and living experiences?

- Have you used person first language to describe a person's experience?
- Have you used language that reflects peoples personal lived and living experiences and acknowledge the diversity of these experiences?
- Have you considered how words and language chosen may encourage a person to engage in a conversation, look up a resource, or reach out to a service?
- Have you used mental health to describe a positive concept of wellbeing?
- Have you avoided the use of sensationalised language?



Is your language inclusive and accessible to a broad range of audiences?

- Is the language you have communicated with easily understood by the general community?
- Do you use clinical jargon that may label a person by their diagnosis or not be the way they describe their experience?
- Is the language and tone you use warm, respectful, polite, professional, and non judgemental?