THE ILLINOIS WARM LINE: WELLNESS SUPPORT & EDUCATION BY TELEPHONE

TENTH ANNUAL REPORT: FISCAL YEAR 2018 (FY18)

SUBMITTED BY THE ILLINOIS WELLNESS AND RECOVERY TEAM JUNE 2018
Introduction

The Illinois Warm Line is a recovery-oriented telephonic service provided by the Illinois Mental Health Collaborative for Access and Choice (Beacon Health Options) in partnership with the Illinois Department of Human Services/Division of Mental Health (IDHS/DMH). In its tenth year, the Warm Line continued to provide outstanding education, support, information and referrals for the residents of Illinois. Since its inception in July 2009, the Illinois Warm Line has responded to 64,082 calls.

In FY18, the Warm Line continued to be staffed by the Wellness and Recovery (W/R) Team under the management direction of Trenda Hedges. The team consists of six (6) full-time Wellness Support Specialists (WSS) who provide consistent support and reliable education to callers. The minimum requirements for the WSS position is to obtain the Certified Recovery Support Specialist (CRSS) Credential within one year (and maintain it) and individuals must have at least two years’ experience working in mental health systems. The Warm Line has historically served as a ‘non-official’ CRSS internship site due to the extensive training, experience, and supervision provided on the job. Because staff also fully invest in professional growth, the W/R team proudly consists of:

- Five (5) individuals with the national Certified Peer Recovery Specialist credential
- Four (4) individuals trained in Mental Health First Aid

Over the course of FY18, staff received training and supervision to ensure that callers receive high quality support and education. All trainings are customized for application on the Warm Line. Training topics for this fiscal year included but were not limited to:

- Trauma-informed training – part of the team attended the National Council on Behavioral Health trauma-informed training then developed a complete module for the rest of the team that included self-assessments and ways to create safety over the phone.
- Crisis calls – as part of the changes in the Collaborative ASO Contract, the clinical team in Illinois was eliminated. Beacon has provided clinical consultation opportunities with licensed clinicians that work for other Beacon teams. The IL W/R Team went through extensive training to screen callers for risk and take appropriate measures based on updated protocols.
- Suicide prevention – while we recognize that the Warm Line is not a crisis line, it is also apparent that many callers experience suicidal thoughts on a regular basis. The W/R Team, as part of the new crisis call protocols and the Zero Suicide Initiative, learned new ways to have these challenging conversations about suicide.
- Provider call training – the W/R Team is now the first line of contact for IL Providers who may have questions. New protocols and methods for tracking these calls were developed and implemented in FY18.
- Intentional Peer Support – as a spinoff of the trauma-informed training, the team also received an introduction to this style of peer support.
- Certified Recovery Support Specialist (CRSS) Annual Competency Training – all staff are required to attend one of the three locations.
- Recovery & Empowerment Statewide Calls – though not a required training, Beacon provides the opportunity for staff to attend the calls on a rotation schedule.

Many of the individuals on the Warm Line staff are also involved in community organizations, causes, and awareness activities. Their personal lives role model wellness. Their professional standards serve as a model for the field of recovery support.
FY18 also birthed three new initiatives:

- In order to align with the current language culture in Illinois, job titles were changed from Peer and Family Support Specialists to Wellness Support Specialists. Staff were included in the job title redevelopment process. Based on their feedback, the term ‘recovery’ was also removed and replaced with ‘wellness’.
- The Warm Line Wave (wellness resource handouts and worksheets) was introduced to the public starting with three handouts: Anniversary Reactions, Self-Advocacy, and Words Matter (Addendum A, B, C). There are plans to expand the Warm Line Wave and add it to the Collaborative website.
- Beacon Health Options internally rolled out the Zero Suicide Initiative company-wide. Each office has a team of Zero Suicide Champions and a designated support person that anyone can go talk to if personally experiencing suicidal thoughts, have a loved one that is, or have been impacted by a suicide attempt or completion. This initiative provided opportunities to redesign the Warm Line materials. Because the Warm Line is not a crisis line, but rather a form of proactive wellness support, it was important to us to provide additional crisis contact info. Wallet cards, flyers, and brochures all now include the numbers to the Suicide Prevention Lifeline and the Crisis Text Line.

The diversity and quantity of the services provided on the Warm Line are clearly depicted within this tenth annual report which contains data and analyses on:

<table>
<thead>
<tr>
<th>Call Volume</th>
<th>Customer Service Logistics</th>
<th>Service Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual</td>
<td>Abandoned Calls</td>
<td>Education</td>
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<tr>
<td>Monthly</td>
<td>Speed of Answer</td>
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<tr>
<td>Daily</td>
<td>Average Talk Time</td>
<td>Referrals</td>
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<td>Hourly</td>
<td></td>
<td>Information</td>
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<td>Regional</td>
<td></td>
<td>Crisis Calls</td>
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<tr>
<td>New Callers</td>
<td></td>
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</tbody>
</table>

In addition to this data, feedback from callers has been included. Recommendations for enhancements that will contribute to the Warm Line’s continued service in Illinois have also been incorporated.
Call Volume Analysis

Annual Call Volume

During its tenth year of operation, the Warm Line received 14,223 calls. This annual call volume is a 15.5% increase compared to the previous fiscal year and a 63% increase over FY16. The chart below illustrates a historical call volume comparison. From FY09 to FY18, the Warm Line’s yearly call volume has risen from 3,428 to 14,223; a 315% growth rate. This demonstrates the ever increasing use of this resource by the residents of Illinois.

![Fiscal Year Call Volume Comparison](chart)

Monthly Call Volume

The Warm Line experienced increased monthly call volume eleven out of twelve months of FY18. This monthly growth was as high as 58% and averaged 17.25%. All-time high call volume records were broken in June (1226), July (1250), August (1268), March (1271), and May (1330). The Warm Line averaged 1185 calls per month in FY18. Historical call volume growth started to occur in the 7th year of operation. The chart below compares monthly call volume during the first (FY09), fifth (FY13), and tenth (FY18) fiscal years of Warm Line operations:

![Monthly Call Volume Comparison](chart)
Daily Call Volume

Call volumes fluctuate throughout the week. The chart below illustrates the total number of calls per week day in FY18. Data demonstrates that Thursday was the day of the week that call volume was at its peak this year. Last fiscal year, Wednesday was the highest call volume day of the week. Based on the numerous uncontrolled variables, there is not enough information to provide an analysis on daily call volume but rather only a snapshot of the data.

Hourly Call Volume

Call volume also fluctuated based on the time of day. One peak call volume hour stands out from among the others, 8:00-9:00 a.m., during which 17.23% of all calls occur. This trend has consistently presented since hourly data collection began in FY16. Based on verbal feedback, some callers consider calling the Warm Line as part of their daily wellness plan. The 9:00-10:00 a.m. hour experienced a 19% growth rate and is now comparable with the 4:00-5:00 p.m. call volume. We believe this growth to be a cause of the high volume of the first hour.
Regional Call Volume

Area code data collection continued in FY18 for the purpose of measuring call volume by regions. The data provides a snapshot of the areas of Illinois from which Warm Line calls originate. Area codes across Illinois cross over into various DMH Regions as indicated in the table below.

<table>
<thead>
<tr>
<th></th>
<th>217</th>
<th>224</th>
<th>309</th>
<th>312</th>
<th>618</th>
<th>630</th>
<th>708</th>
<th>773</th>
<th>815</th>
<th>847</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reg.</td>
<td>3, 4, 5</td>
<td>Reg.</td>
<td>2, 3, 4</td>
<td>Reg.</td>
<td>1</td>
<td>Reg.</td>
<td>4, 5</td>
<td>Reg.</td>
<td>1, 2</td>
<td>Reg.</td>
<td>1</td>
</tr>
</tbody>
</table>

The “other” category includes calls from out of state callers, calls generated from a voice over internet port, and calls from less utilized area codes in Illinois (331, 779, and 872). Out of state calls are not completed except to provide resources and referrals. Out of state calls make up 66.38% of the calls in the “other” category. Although this percentage appears high, consider that overall, out of state calls account for only 4% of total call volume.

Data shows that calls originated from three area codes (708, 773, and 217) had the highest call volume in FY18. Two of these area codes fall within DMH Regions 1 and 2 (708, 773), and the other area code (217) crosses into Regions 3, 4, 5. Calls from area codes 224 and 630 remained relatively consistent between the two fiscal years. Calls from area code 708 demonstrated the highest numerical increase in growth (471). This area code also had the largest numerical increase in FY17. Besides the ‘other’ category, area code 309 exhibited the highest growth rate (43%). Calls from 618 decreased by 46.85%. Some of this decrease can be attributed to a few individuals who used to call daily from that area code but no longer utilize the Warm Line. Calls from 847 experienced a 27% decrease. There is no known factor for this decrease.

The chart below compares area code data collected in FY18 to FY17.
**New Caller Call Volume**

FY18 was the third year that staff collected self-reported referral source data from new callers. The Warm Line classifies a caller as “new” if they have never before called. There were a total of **693 New Callers** in FY18. Callers were asked where they had heard about the Warm Line and given the choice whether or not to share this information. Most of the time (82%), callers chose to disclose their referral source. The top three referral sources listed in order were: the internet, DMH providers, and crisis lines. Some new referral sources this fiscal year included faith communities, social security offices, criminal justice entities, and other Warm Line callers. New callers accounted for only 5% of total call volume. This indicates that 95% of callers are satisfied with the services to the point that they utilize the Warm Line more than once. The chart below compares the area codes from new callers between FY18 and FY17.

![NEW Callers by Area Code Comparison](chart.png)

In summary, call volume continued to increase in FY18 though at decreased growth rates compared to previous fiscal years. This data suggests that the Warm Line continues to serve as a well-utilized service in Illinois.

- **14,223 calls**
  - 15.5% growth rate from FY17
  - 63% growth rate from FY16

- **5 Record Breaking Months**
  - June 1226 calls
  - July 1250 calls
  - August 1268 calls
  - March 1271 calls
  - May 1330 calls

- **Monthly Average = 1185 calls**
  - Compared to 1026 in FY17

- **693 New Callers**
  - 95% of callers use the Warm Line more than once
Customer Service Logistics Analysis

The table below provides a visual of the overall customer service logistics provided through the Warm Line. A slight dip in customer service was noticeable at the advent of FY18. This is a direct cause of the loss of the clinical team who historically provided overflow call coverage. Once Wellness & Recovery staffing levels were brought up to par, the percentage of abandoned calls leveled out to an acceptable level. As contractual services and teams have changed, a level of adaptability and resilience has been demonstrated by the Warm Line team.

![Graph showing percentage of calls not abandoned, average talk time, and speed of answer over time]

**Abandoned Calls**

Over the course of twelve (12) months and a total of 14,223 calls, three hundred and eighty-two (382) calls (2.66%) were abandoned. This figure does not include calls abandoned in less than twenty (20) seconds. Industry standards most often exclude those calls because calls abandoned in that time frame typically include callers who have dialed the wrong number and hung up or changed their mind about completing a call. Generally speaking, a call abandonment rate of 2% is seen as good, with 5% being seen as acceptable, and anything above 5% is considered problematic. Applying these standards to average abandoned calls on the Warm Line, 2.66% falls in a more than acceptable range.

**Average Talk Time**

Average talk time for calls remained consistent and in line with the 20-minute contractual call length. This call length limit was set in early FY09 and once again adhered to in every month of FY18. The average talk time per call computed to 14 minutes. Monthly averages fluctuated between thirteen (13) and fifteen (15) minutes.

In order to provide self-directed, recovery-oriented services, staff use professional discretion to balance call lengths with professional responsibility and ethical decision making to ensure callers experiencing mental health crises and/or who are utilizing interpreter services receive appropriate support.

**Speed of Answer**

Warm Line calls are routed through Beacon’s call center technology directly to the headset of the next staff member in queue. Without another team to take overflow calls when all staff are on calls, callers now receive a hold message and are offered the choice to wait for the next available agent. For this reason, the average speed of answer rate has increased from zero (0) seconds to 4.83 seconds.
Service Category Analysis

Beacon’s advanced data tracking system provides detailed reports on the services offered on Warm Line calls. For FY18, the Wellness and Recovery Team is pleased to furnish a Service Snapshot. This info graphic made its debut in Warm Line Orientations presented this fiscal year. It combines all services into five (5) categories, affording a simpler visual overview. Details on each service category are contained in the following paragraphs.

![FY18 Services Snapshot](image)

**Education**

Services under the education category totaled **36.53% of all services** in FY18. Education was provided to Warm Line callers 10,150 times. Services included in this category:

- Mental Health Recovery Education (32.70%)
- Substance Use Recovery Education (2.69%)
- Suicide Prevention Education (1.13%)

**Support**

We recognize that there are times when a caller just needs a supportive presence. Warm Line Staff meet callers in that place while conveying unconditional positive regard, empathy, and affirmation. Data demonstrates that emotional support amounted to a total of **39.12% of all services** in FY18. It is not surprising that this is the highest service provided. Many callers state how wonderful it is to finally be heard, to have someone who will truly listen to their thoughts and feelings.
Information
This category encompasses a variety of types of information that aids callers to make decisions for themselves, loved ones, and others. One of the service changes in FY18 routed not just individuals and families to the Warm Line, but also providers. Staff assisted providers towards finding the appropriate department or other entity to resolve their concerns. The majority of services in this category, while not prominent services provided, do enhance the overall wellness and recovery vision of the Warm Line. The percentage of information services totaled 22.46%; subcategories included:

- Self-Advocacy (18.28%)
- Member Information (2.54%)
  - Recovery & Empowerment Statewide Calls
  - Recovery & Empowerment Handbook Requests
  - CRSS Credential
  - WRAP® Locator
- Provider and Misdirected Calls (1.63%)

Referral Requests
In total, only 1.78% of all services in FY18 fell within the referral category. Throughout the fiscal year, staff provided 494 referrals to services. The majority of individuals who use the Warm Line are already connected to services in their communities. Others have chosen to work on their wellness without professional services. It is also very common for staff to work with callers for a period of time as they prepare to engage in services. This occurs when callers are on waiting lists for services or are in the preparation stage of change. While the list below is not exhaustive, some examples of the referrals provided are as follows:

- Counseling Services
- Substance Use Treatment Options
- Dental Care
- Community Resources
  - Food pantries
  - Clothing giveaways
  - Transportation options

Crisis Calls
These calls were documented when staff followed Warm Line protocols to contact a third party to ensure the life and safety of the caller. Nineteen (19) calls in FY18 were classified as crisis. This number is down from twenty-five (25) in FY17. Crisis calls and clinical consultations comprised a mere 0.12% of total services. We attribute this low rate to the proactive nature of services provided on the Warm Line, combined with information on the Suicide Prevention Lifeline and Crisis Text Line that is included in all Warm Line literature.
Caller Feedback

Because the Warm Line does not collect demographics on callers or keep case files, outcome data is not available. As an alternative, the Wellness and Recovery Team document compelling feedback from callers that pertains to the impact the Warm Line staff and services have on their lives. Here are just a few examples:

- I called a lot this year when I was experiencing some physical health issues that made me feel very anxious. I was really very hopeless and I did not think I could recover but the people that work on the Warm Line always believed in my ability to recover.
- I heard about your line from someone in group who talked about the benefits of calling.
- A supervisor or someone at the state needs to know how you all have supported me through such a hard time when I was sick.
- It made all the difference to me that I have somebody to call. I’m still here today partially because of you guys.
- Ever since I’ve been talking to you, the bad thoughts haven’t been as bad.
- It helps me to be completely honest with somebody that understands and truly cares.
- You guys have given me the self-esteem to clean my house.
- I needed an infusion of positive energy, and that’s what you gave me when I called.
- Even when I mess up you do not judge me.
- You’ve provided me with a lot of insight that I appreciate.
- Connecting on a heartfelt/spiritual level does better than any chemical.
- It’s good for me to have this conversation to get some reflection and positive feedback.
- You guys sure do believe in me a lot!
- I have never talked to anyone else who had depression and did anything about it but you are functioning and helping other people. You made it clear to me yesterday that I can and do cope with things. You give people hope.
- Calling this number has helped me like no other line.
- What I love best about the Warm Line is that you guys are really informative and open to listening.
- You all inspire me. I feel really good speaking to the Warm Line.
- You guys were a lifeboat to me.
- Talking to people at the Warm Line helps me change my life.
- Since calling the Warm Line I finally feel like myself again.
- I have never had a drop in quality when I call the Warm Line.
- I am starting to see the benefits of the Warm Line. I can call and talk about all kinds of things.
- If I won a million dollars and someone offered me the choice of giving up the money or the Warm Line, I would give up the money. I can’t have a conversation with a ten-dollar bill.
Future Recommendations

Training and Evaluation
To ensure continual and enhanced professional development, the Collaborative Recovery and Resilience Team suggests the following ongoing development steps for consideration:

- Expand the existing Certified Recovery Support Specialist (CRSS) Mentoring Program
  - Develop an official CRSS internship opportunity
- Continue to provide opportunities for all staff to receive training on Mental Health First Aid
- Provide additional training on how to effectively support individuals from specific people groups:
  - Individuals without addresses
  - Individuals involved with the justice system
  - Individuals choosing medication assisted recovery from substance use

Service
To enhance the overall service parameters provided by the Warm Line, the following option is recommended:
- Offer Wellness Recovery Action Plan (WRAP®) Introductions via webinar / teleconference
  - Increase access to WRAP® for individuals in Illinois
  - This would benefit the following populations
    - Individuals living in rural communities with limited or no access to transportation
    - Individuals who live in communities that do not offer WRAP®
    - Individuals who live in communities that only offer WRAP® in closed classes

Outreach
To ensure Warm Line information reaches those that need to utilize the service, the following suggestions are offered:
- Provide information on services to:
  - Criminal Justice Sectors
  - Re-entry organizations
  - 12-Step groups
  - Housing Authorities
  - Fitness Centers
- Target specific areas of the state based on FY18 area code data
  - Region 2 (847 area code)
  - Region 5 (618 area code)
Conclusion

Throughout FY18, the Illinois Warm Line provided services on 14,223 calls. The Warm Line connects individuals with a professional source of wellness and recovery support, credible information, and referrals for services within their community of choice.

The Wellness and Recovery Team role-models a lifestyle of wellness, using mutuality to drastically reduce hierarchies present in other healthcare services. Each staff person provides callers with a unique perspective towards whole heath that has been built on a combination of lived experience and professional training.

For callers that are experiencing hopelessness, staff hold the hope. For callers that are ready to take action towards self-directed goals, staff empower. For callers that need information, staff find credible sources. For callers that need support, staff convey unconditional positive regard. For callers that are learning how to use their voice, staff role play and role model effective communication styles. For callers that wish to explore meaning and purpose, staff mutually collaborate towards that discovery. For callers that don’t fit perfectly in any of these categories, staff meet them where they are at, create a safe environment to explore thoughts, feelings, and actions and/or provide the information and customer service necessary to get their needs met.

The scope of the IL Warm Line services has been outlined within this tenth annual report. The recommendations identified in this report will further equip the Warm Line to make a valuable impact on the residents of Illinois on behalf of the Illinois Department of Human Services/Division of Mental Health and the Illinois Mental Health Collaborative for Access and Choice.
Anniversary Reactions

Some people may experience a reaction around a certain date following a traumatic event. Others may not have a reaction at all. Whatever you may feel or don’t feel is natural. If you do find that you are struggling with anniversary reactions, there is hope.

Here are 10 possible ideas to explore:

1. **Express** your feelings, thoughts, and memories. You might express them to yourself or someone you identify as a supporter.

2. **Self-Care.** Take care of you. Think; What do I enjoy? What calms me? What will relieve stress?

3. **Wellness Tools.** What have I done that has helped in the past? What grounds me and gets me through the day?

4. **Supports.** Identify ahead of time who you can turn to for support. You may also consider calling the Warm Line and meeting with another professional supporter, like your counselor.

5. **Awareness.** You may practice mindfulness of your actions, thoughts, and behaviors.

6. **Memorials.** You might go to a gravesite, memorial service, or something like a butterfly release.

7. **Spirituality.** You may want to draw on your faith, or what gives you meaning and purpose.

8. **Plan.** You may find it helpful to make a plan for the week. Who do you want to call, meet with, or what do you want to do?

9. **Reframe.** How could I change the way I think about this situation, event, or memory? Could I see any positives or things I learned from it?

10. **New Memories.** Make a new memory. Do something that honors the date. Volunteer, develop a new routine, or throw a party.

Remember, you are not alone on these dates. There is hope to heal! Most people feel better within a week or two following an anniversary trigger.

[Contact information]
Self-Advocacy

Self-advocacy is the ability to speak up for yourself about things that are important to you. The following are some ways you can practice self-advocacy:

<table>
<thead>
<tr>
<th>Believe in Yourself</th>
<th>Plan Your Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learn your strengths.</td>
<td>Plan the steps to take.</td>
</tr>
<tr>
<td>Take good care of yourself.</td>
<td>Create a timeline.</td>
</tr>
<tr>
<td>You can do this!</td>
<td>Get feedback from others.</td>
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<td></td>
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<tr>
<td>Gather Support</td>
<td>Ask for What You Need</td>
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<tr>
<td>Talk to someone you trust.</td>
<td>State your message clearly.</td>
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<tr>
<td>Join with people who care about the same</td>
<td>Be polite and respectful.</td>
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<tr>
<td>things.</td>
<td>Repeat as needed.</td>
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<tr>
<td>Connect with an advocacy group.</td>
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<td></td>
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<tr>
<td>Get Good Info</td>
<td>Follow Up</td>
</tr>
<tr>
<td>Find reliable sources.</td>
<td>Send a thank you and/or a follow-up</td>
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<tr>
<td>Get ideas from dependable people.</td>
<td>note.</td>
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<tr>
<td>Write things down.</td>
<td>Summarize action steps.</td>
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<td></td>
<td>Provide a timeline request for action</td>
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<tr>
<td></td>
<td>steps.</td>
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<td></td>
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<tr>
<td>Stay Organized</td>
<td>Debrief</td>
</tr>
<tr>
<td>Keep all papers and other</td>
<td>After you advocate, arrange to meet a</td>
</tr>
<tr>
<td>materials together.</td>
<td>supporter.</td>
</tr>
<tr>
<td>Try using folders or file organizers.</td>
<td>Talk about positives and challenges.</td>
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<tr>
<td></td>
<td>Revise your strategy as needed.</td>
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<td></td>
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<tr>
<td>Make a List</td>
<td>Be Persistent</td>
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<tr>
<td>Circle things that are very important.</td>
<td>Change may take time.</td>
</tr>
<tr>
<td>Prioritize the things you circled.</td>
<td>Stick with it until you get what you</td>
</tr>
<tr>
<td>Decide what you want to work on first.</td>
<td>need.</td>
</tr>
<tr>
<td></td>
<td>Keep trying!</td>
</tr>
</tbody>
</table>

Warm Line
866-359-7953
www.illinoismentalhealthcollaborative.com
**WARM LINE WAVE**

**Words Matter**

The words we use matter. Words can heal or hurt. Words can support or stigmatize. Words can respect or reject. Words can love or label.

<table>
<thead>
<tr>
<th>Words to Avoid:</th>
<th>Words to Use:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addict</td>
<td>Person with a substance use disorder</td>
</tr>
<tr>
<td>Alcoholic</td>
<td>Person with an alcohol use disorder</td>
</tr>
<tr>
<td>Drug problem, drug habit</td>
<td>Substance use disorder</td>
</tr>
<tr>
<td>Clean</td>
<td>Abstinent, not actively using</td>
</tr>
<tr>
<td>Clean drop / drug screen</td>
<td>Tested negative for (________)</td>
</tr>
<tr>
<td>Dirty</td>
<td>Actively using</td>
</tr>
<tr>
<td>Dirty drop / drug screen</td>
<td>Tested positive for (________)</td>
</tr>
<tr>
<td>Former/reformed addict/ alcoholic</td>
<td>Person in recovery</td>
</tr>
<tr>
<td>Opioid replacement</td>
<td>Person in long-term recovery</td>
</tr>
<tr>
<td>Methadone maintenance</td>
<td>Medication Assisted Treatment</td>
</tr>
</tbody>
</table>

Person-first language is proven to reduce stigma. It is not about being polite or politically correct. It is about not defining someone based on my judgment, assumption, or beliefs. If you do not know what words to use, ASK.

[Illinois Warm Line](http://www.illinoismentalhealthcollaborative.com)