

ATOD – Mental Health Alliance Community of Practice online portal: Code of Conduct

All members of a Community of Practice (CoP) online portal hosted by the Mental Health Community Coalition ACT (MHCC ACT) are expected to abide by this Code of Conduct. Breaching this code may result in your membership being suspended, either temporarily or permanently, at the discretion of the MHCC ACT.

This Code of Conduct may be amended from time to time, as may the procedures it sets out where appropriate in a particular case. Your agreement to comply with this Code of Conduct will be deemed agreement to any changes to it. If you would like to suggest updates to the code, you can do so by emailing communications@mhccact.org.au.

Behavioural expectations

All members are expected to:

- Foster a cooperative environment by sharing knowledge and supporting other members.
- Ensure fair and equitable treatment of all individuals, regardless of race, gender, disability, cultural background or sexual orientation.
- Promote a culture that values diversity and inclusion.
- Be respectful of differing opinions, viewpoints and experiences.
- Discuss consumers, clients, participants or service users in a way that upholds their privacy, dignity and human rights.
- Take personal accountability for the information they add to the CoP online portal.
- Maintain confidentiality and respect privacy.
- Report any content, users or behaviours that breach this Code of Conduct.

We will **not** tolerate:

- bullying
- harassment
- discrimination
- insulting or derogatory comments
- personal or political attacks
- publishing private messages without consent (except when they are being reported to MHCC ACT for moderation)
- other conduct which could reasonably be considered inappropriate in a professional setting.

Influencing or inciting unacceptable behaviour and activities will be viewed as the behaviour and activities themselves, and result in the same consequences.

Appropriate language guidelines

All content posted on the CoP online portal, whether in the forums or an uploaded or linked document, should use appropriate, respectful and person-centred language. The only exception is

where the content is related to calling out messaging that does not follow this guideline; in this case, the member posting the content should provide appropriate context and warnings.

In general, the ATOD – Mental Health Alliance supports the [Mindframe](#) program's guidance on safe language use related to mental health and substance use. This program seeks to decrease stigma and increase help-seeking behaviour by encouraging people to:

- consider the language and images they use
- present information in a balanced and accurate way
- present mental health concerns and harmful AOD use as treatable public health issues, with multiple paths to recovery
- promote stories of lived and living experience that offer hope
- promote help-seeking information
- use person-first language and stress that a person is more than their diagnosis or substance use
- refrain from glamorising AOD use
- move language away from dichotomies, such as the use of 'clean' to mean a person is no longer using drugs, which suggests that using drugs is 'dirty'.

Unacceptable language

The below is a non-exhaustive list of terminology that we do not accept, as well as more suitable options. This list is non-exhaustive.

Unacceptable	Use instead
Committed suicide; successful suicide	Died by suicide Ended their own life
unsuccessful suicide	Non-fatal suicide Made an attempt on their life
Criminal; prisoner	People in the criminal justice system People who have been incarcerated
Junkie; addict; drunk; alcoholic; pot-smoker; crackhead; drug user / abuser	Person who uses drugs / injects drugs Person experiencing drug dependence / Person with a dependence on (drug of choice) Person who uses (drug of choice)
Drug habit; Drug abuse / misuse; Problem use of drugs; Non-compliant use of drugs	Dependence on drugs Substance use Non-prescribed use
Clean; ex-addict	Person who no longer uses drugs Person with lived experience of drug dependence
Equating a person with a diagnosis (e.g. an anorexic, a schizophrenic)	A person living with (preferred term or diagnosis) A person living with the symptoms of (preferred term or diagnosis)
Non-compliant	Expressing concerns about the treatment plan
Compliant / cooperative	Agreeable with care plan

Unacceptable	Use instead
Low functioning	Requires additional supports with (identify tasks)
Rejecting help	Finding it difficult to accept support and expressing the need to be independent
Institutionalised / dependent on services / frequent flyers	A person who is frequently seeking help
Aggressive / violent	Experiencing an escalating emotional state that leads to (describe behaviour)

More information

For more information, see Mindframe guidelines on safe communication, including:

- [Reporting suicide and mental ill-health: A Mindframe resource for media professionals](#)
- [Our words matter: Guidelines for language use](#)
- [Guidelines on media reporting of severe mental illness in the context of violence and crime](#)
- [Mindframe for Alcohol and Other Drugs](#)
- [Guidelines on reporting and portrayal of eating disorders: A Mindframe resource for communicators.](#)
- [Language Matters resource for Alcohol and Other Drugs by NADA and NUAA](#)