A quick-reference guide for reframing deficit-based clinical language into asset-based, person-first language. This is the companion to the RESPECT Framework and 3 P's of Health Communication used in this module. Swap the italicized coral phrase for the bolded teal alternative wherever it appears in documentation, verbal consults, or patient materials.

Deficit-Framed Language	Asset-Based Swap	Why It Matters
"Non-compliant" / "non-adherent"	"Has not yet been able to take/follow …" or name the specific barrier (e.g., "unable to afford refills")	Patients rank "non-compliant" and "non-adherent" among the least-preferred terms in clinical notes; behavior-specific, barrier-focused phrasing is preferred and reduces clinician bias in future encounters.
"Difficult patient"	"Patient with unmet needs" or describe the specific behavior/context	CDC's Health Equity Guiding Principles call for person-first language that avoids unintentional blaming and labels.
"High-risk patient" (used as an identity label)	"Patient at increased risk for X due to Y" — name the specific, external factor	CDC guidance cautions against vague terms that imply a condition is inherent to the person/group rather than caused by identifiable factors or systems.
"Patient denies pain/symptoms"	"Patient reports no pain/symptoms"	"Denies" carries a connotation of disbelief or defensiveness; neutral reporting language preserves the patient's account without implying doubt.
"Patient refused treatment"	"Patient declined …" or "Patient chose not to proceed with … at this time"	Stigma-reduction guidance for clinical documentation recommends neutral, autonomy-respecting verbs over language that frames the patient as oppositional.

Deficit-Framed Language	Asset-Based Swap	Why It Matters
“Vulnerable population”	“Population made vulnerable by [specific structural factor, e.g., lack of insurance coverage]”	CDC’s Health Equity Guiding Principles recommend naming the systems and causal factors driving a disparity rather than implying vulnerability is inherent to the group.
“Hard-to-reach population”	“Historically underserved” or “Systematically excluded from …”	Shifts responsibility from the population to the systems and history that created the access gap.
“Health disparities exist in this group” (passive framing)	“This group experiences health inequities driven by [structural factor]”	Naming the driver of inequity supports CDC’s equity-centered communication principle of focusing on systems, not blaming individuals or groups.
“Homeless patient” / “the homeless”	“Patient experiencing homelessness”	“Person experiencing homelessness” is the most commonly used term among providers, researchers, and policymakers, and reflects person-first framing that treats housing status as a circumstance, not an identity. U.S. Interagency Council on Homelessness.
“Non-English speaking patient”	“Patient with limited English proficiency (LEP)” or “Patient who prefers to communicate in [language]”	CDC’s Language Access Plan uses “limited English proficiency” as the standard term for planning interpretation and translation services, framing the gap as one of service access rather than a deficiency in the patient.
“Illegal immigrant”	Describe the specific, relevant circumstance (e.g., “patient without documented immigration status”) rather than labeling the person	AP Stylebook guidance retired “illegal immigrant” and “illegal alien,” directing writers to avoid applying “illegal” as a label to a person and instead describe the specific action or status.

Associated Press, AP Stylebook guidance retiring "illegal immigrant"/"illegal alien," ap.org (see also Poynter, "AP changes style on 'illegal immigrant'")
Calanan RM, Bonds ME, Bedrosian SR, Laird SK, Satter D, Penman-Aguilar A. CDC's Guiding Principles to Promote an Equity-Centered Approach to Public Health Communication. Prev Chronic Dis 2023;20:230061, cdc.gov/pcd/issues/2023/23_0061.htm
CDC, Health Equity Guiding Principles for Inclusive Communication (2021), cdc.gov/health-communication/php/toolkit/guiding-principles.html
CDC, Language Access Plan / Language Assistance Services, cdc.gov/other/language-assistance.html
Center to Advance Palliative Care (CAPC), Strategies to Reduce Stigmatizing Language in Clinical Documentation, capc.org/blog
Patient Preferences for Plain-Language Alternatives to Medical Jargon in Clinical Notes, J Gen Intern Med
U.S. Interagency Council on Homelessness, People Experience Homelessness, They Aren't Defined By It, usich.gov/news-events/news/people-experience-homelessness-they-arent-defined-i