

Hi 😊

Welcome to the NAMI Editorial Style Guide

NAMI does a lot. We educate; we advocate; we talk; we support; we guide. If you work at NAMI, you know a lot, and we want you to share what you know. It's important that you contribute so that NAMI can continue to grow the movement and meet the needs of the people who need our help.

Our homepage gets more than 35K views a week and our website gets 10 million visitors a year! High-quality content keeps our users coming back. And the more they come back, the more likely they become part of the NAMI family.

Whether you're writing a blog, report, press release or a piece of permanent Web content, this guide will cover some grammar basics, the types of articles we publish and give you a sense of NAMI's tone and voice when it comes to writing for the public. This is a set of standards to help you write solid and engaging website content that unifies NAMI's look, feel and sound.

Voice and Tone

NAMI's voice is casual, friendly and conversational. We are a "friendly guide" to our Web visitors, leading them through difficult and intimidating topics and breaking them down in a language that they can understand. We educate when appropriate, and act as a shoulder to lean on when someone needs support. We aim to inspire hope and encourage engagement.

NAMI's voice is:

- Authoritative but not condescending
- Friendly but not patronizing
- Casual and conversational, but not sloppy
- Helpful but not overbearing

We wouldn't say: *Facebook is a great social media website where you can create a profile and connect with friends. Facebook and NAMI can share information with each other, so you should add a NAMI signup form to your own Facebook page.*

Instead, we'd say: *Add a newsletter signup form to your Facebook profile. Here's how it works.*

We want to be welcoming, inclusive and meet people where they are, and speak to them in a way that sounds natural. Everything we do should aid the user in an end result, whether it's learning about an illness, signing up for a NAMIWalk, taking a class at a local NAMI or signing an online petition.

Watch Your Tone

There's a difference between voice and tone. You always speak with the same voice, but your tone changes. You might speak in one tone to your closest friends and family but in a different tone with your boss. Your tone also changes depending on the emotional state of the person you're addressing. You wouldn't use the same tone of voice with someone who's upset as you would with someone who's laughing.

For example, we are more to-the-point in the "Learn About" area of our site, but gentler and more hopeful in our "Find Support" areas. Just like in regular life, your voice doesn't change much from day to day, but your tone does depending on the situation.

When you're writing, keep in mind the NAMI "persona," or audience, you're writing for. Also consider the reader's state of mind. Is she relieved to finally have a diagnosis? Mad that she can't log in? Confused about how to take a NAMI education class? Adjust your tone accordingly.

We're experts, but we make it simple.

We WOULDN'T say: An individual who lives with depression should seek treatment through talk therapy and medications.

We WOULD say: Therapy and medication can help you manage symptoms of depression.

We WOULDN'T say: The action of self-harm can include the following methods: cutting, burning or scratching.

We WOULD say: Self-harm or self-injury means hurting yourself on purpose. One common method is cutting, or using a knife.

We take tough topics and make them easy to understand.

We WOULDN'T say: *Individuals with disabilities, including mental illness, deserve fair and equal treatment in the workplace. The Americans with Disabilities Act and the Rehabilitation Act of 1973 are two federal laws that prohibit discrimination against individuals with disabilities on the job. Many states also have laws that protect individuals with disabilities from discrimination and unfair treatment at work.*

We WOULD say: *People with mental illness deserve fair treatment at work. The Americans with Disabilities Act is just one federal law that prohibits discrimination at the workplace. Many states also have laws that protect individuals with disabilities from discrimination and unfair treatment at work.*

We WOULDN'T say: *Each month a person pays a premium in order to get health insurance. A person decides on a health insurance plan by examining the amount of coverage it offers.*

We WOULD say: *Like car insurance, health insurance requires a person to choose a plan and agree to pay a certain amount each month—known as a premium—in exchange for coverage when care is needed.*

We keep it friendly, but don't coddle.

We WOULDN'T say: *Family Response: A parent or caregiver of a child with mental illness covers the predictable stages of emotional reactions among family members dealing with the challenges of mental illness and the lived experience of raising a child with a mental illness.*

We WOULD say: *Family Response: Taking care of a child with mental health challenges can cause a great deal of stress for your whole family. This part of the program includes common scenarios of the emotional reactions that can affect the rest of your household.*

We WOULDN'T say: *It'll all be OK if you get a friend or family member involved. Don't worry; you can make it through this.*

We WOULD say: *Talking to a doctor or a trusted friend or family member is the first step towards understanding your behavior and finding relief.*

Writing for NAMI

NAMI has a Quality Checklist you should use to help you frame your article. Always ask yourself the following questions before writing anything:

- Why am I writing this?
- Who's my audience (persona), and what's their emotional state?
- What's the outcome I want this piece to achieve?
- Did I give the reader a conversion (the opportunity to take further action)?

NAMI chose **4 major personae** to craft user journeys when crafting our primary Web strategy:

- The caregiver/parent
- The individual with mental illness
- The crusader/nurturer
- The donors (both major and individual)

Each persona has conversion goals, and every navigation and Web journey on nami.org is based around these personae achieving these conversions. Conversions, outside of the big three listed above, can also be micro. They can be watching a video, signing a petition, downloading a report or even looking at NAMI's financials. When you are creating static Web content, be sure to think about what conversions can be woven into your content.

When you finish writing an article, read it out loud to yourself. While everything you write will make perfect sense to you, you get a better sense of how a user's going to understand it when you read it out aloud. Keep in mind our users aren't subject matter experts—you are. You need to educate and engage. You don't need to use flowery language to fill space; Web readers want to know what to do as soon as they can.

Keep in mind we never want to publish "dead-end content." Dead-end content leaves the user without a further action to take. If we think hard, we can always find a tie-in to a NAMI activity or cause, (even if it's something as simple as "stay in touch with NAMI! Join us on Facebook) or providing them deeper reading, even if it's off-site. We want our content to serve as a catalyst for action as well as inform.

Make sure what you say is accurate.

Our stats, facts and figures need to add up. Everything across the site and in any publication should be the same. As a rule, NAMI uses the same statistics as NIMH. Anything addressing statistics, medicines or health care in general needs to be vetted by our medical director, Dr. Ken Duckworth. And *anything* you publish—print or Web—needs to meet NAMI’s editorial style guide and branding guidelines, which are updated by the communications team.

Writing Tips

Be casual, but smart.

This isn’t a term paper, so there’s no need to be stuffy. But be smart. Clearly, you know what you’re talking about—that’s why you’re writing the blog post. Lay down some knowledge, but casually engage your readers in conversation.

Example: The first step in getting help is talking to a trusted adult, friend or medical professional who is familiar with the subject, ideally a psychiatrist. A psychiatrist will ask that person questions about their health, life history and any injurious behaviors in the past and present. This conversation, called a diagnostic interview, may last an hour or more. Allow yourself time in your schedule so that you aren’t in a hurry during this conversation. Doctors can’t use blood tests or physical exams to diagnose mental illness, so they rely on detailed information from the individual. The more information that person can give, the better the treatment plan will be.

Example: When someone rejects a diagnosis of mental illness, it’s tempting to say that they’re “in denial.” But someone with acute mental illness may not be thinking clearly enough to consciously choose denial. They may instead be experiencing “lack of insight” or “lack of awareness.” The formal medical term for this medical condition is anosognosia, from the Greek meaning “to not know a disease.”

Get to the point.

Don’t make your reader work. Get to the important stuff right away. Web content should be scannable, shareable, and easy to digest. Break up your paragraphs into short chunks—and use subheadings wisely—so distracted readers don’t lose focus.

Example: *Know the Warning Signs*

Identifying the suicide warning signs is the first step towards protecting your loved one.

- **Threats or comments about killing themselves**, also known as suicidal ideation, can begin with seemingly harmless thoughts like “I wish I wasn’t here” but can become more overt and dangerous. Regardless of intensity, all comments should be taken seriously.
- **Increased alcohol and drug use.**
- **Aggressive behavior.** A person who’s feeling suicidal may experience higher levels of aggression and rage than they are used to. They may take these feelings out on the people around them.
- **Social withdrawal** from friends, family and the community.

- *Dramatic mood swings indicate that your loved one is not feeling stable and may feel suicidal.*
- *Preoccupation with talking, writing or thinking about death.*
- *Impulsive or reckless behavior.*

Don't be abstract.

Give pointed advice. Give them something to act on. Saying "Be there for your loved one" may sound nice, but it's not really. Give them specific things to do.

Example: Pinpoint your stressors and triggers. Are there specific times when you find yourself stressed? People, places, jobs, and even holidays can play a big role in your mood stability. Symptoms of mania and depression may start slow, but addressing them early can prevent a serious episode. Feelings of mania may feel good at first, but they can spiral into dangerous behavior such as reckless driving, violence or hypersexuality. Depression may begin with feeling tired and being unable to sleep.

Make sure content is relevant.

This may seem obvious but content on the page should be about the topic. For example, if a page is about managing mental health in the workplace you don't need to include something about supported employment (that would be on a page about finding work.)

Write short sentences.

Sentences should as concise as possible but still able to get the essential information across. And don't forget to vary the sentence structure.

Watch for double writing.

Eliminate words that simply say the same thing again. It cuts length and can make the writing clearer.

Example: You may have also experienced pressure to drink, use drugs or abuse medication to fit in ~~because it seems like everyone is doing it~~. The strike through part is not necessary. "Fit in" already implies that everyone is doing it.

Use headings and subheads.

They can cut the length and take the place of transitional sentences. And most importantly, they help divide up your content so people can find what they need.

Example: ***Types of Psychosocial Treatments***

Psychotherapy

Often called "talk therapy," psychotherapy is when a person, family, couple or group sits down and talks with a therapist or other mental health professional. Psychotherapy helps people learn about their moods, thoughts, behaviors and how they influence their lives. They are then taught techniques to restructure their way of thinking.

Psychoeducation

Psychoeducation teaches people about their illness and how they'll receive treatment. Often family or friends will join, learning things like coping strategies, problem-solving skills and how to recognize the signs of relapse. Getting the family involved can often ease tensions at home, which can help the person experiencing the mental illness to recover. NAMI's education programs are examples of psychoeducation.

Self-help and Support Groups

Self-help and support groups can help challenge feelings of isolation. Members of support groups share frustrations, successes, referrals for specialists, where to find the best community resources and tips on what works best when trying to recover. They also form friendships with other members of the group and help each other on the road to recovery.

Use title case in headlines.

Which is to say: capitalize important words. Articles (a, and, the) and prepositions (for, to, as, by, of, in, through, etc.) should be lowercase in headlines.

Pictures and video

Include images in your blogs and articles—but only if they're real NAMI photos (and good ones). Make sure to include a caption that points out time, place and people. Your image should also include metadata (an "alt tag") that you believe would be a search term that would bring someone to the page.

Links (hyperlinks)

Provide a link when referring to a website. Don't capitalize links or words within links.

Don't say things like "Click here!" or "Click for more information." Write the sentence as you normally would, and link relevant keywords. The link text should always describe what the user will see when they click on it.

When hyperlinking text, do not hyperlink the acronym. *Example: An effective treatment is [cognitive behavioral therapy](#) (CBT).*

Links should look different than regular copy, strong, or emphasis text. They should have a hover state that communicates they're interactive, and should have a distinct active and visited state. When setting the hover state of links, be sure to include focus state as well, to help our customers using assistive technologies or touch devices.

SEO

Understanding the ins and outs of SEO isn't easy. If you don't remember anything else, just remember to write clear and descriptive copy, and use keywords instead of "click here" in link labels. Use language that you think people will use in their Web searches. If you want to take this a step further, check out [Google AdWords](#) or [the Moz blog](#). You don't need to pay for any Google AdWords to check to see what people are searching for and get some ideas of some language that might be better to use.

Exclamation points

Go easy on the exclamation points! Only use exclamation points when you're basically giving someone a high five. Never use them in failure messages or alerts.

Extreme writing

Don't try to combine every known method of emphasis in one document. You probably will never need to use more than two: bold and italics. And *never* use underlining. Underlining denotes a hyperlink.

Content Types

We produce all kinds of content for potential and existing customers. Here's a breakdown of the types of content we publish, the purpose each department serves, and their typical formats. For a full list of content assets, see the Governance Handbook.

Blogs

NAMI blog posts can be between 300-500 words and are typically under 1,000 words and use the author's own tone, voice and opinion. They're informative, authentic and written for the general public. This means that blogs are about topics that everyone would find interesting. Topics are flexible, but every post should teach our readers something new. NAMI staff members are regular bloggers, but guest bloggers who are experts are encouraged to write as well. Lifespan for blog posts is 2 years, with exceptions for high-performing blogs (read: popular) and blogs by the subject matter experts (SMEs) listed above.

Why we do it: To create value-added (only content NAMI can author).

Home Page Articles

Home page articles are news and/or feature articles covering topics important to the general public. These should be topics that people that will search for online such as dealing with mental illness in a relationship, tips for adjusting to a medication, how to help calm someone down who is having a panic attack or how to support a family member's recovery. They are written in plain language and can cover general news topics, pop culture items, interviews with experts, book and movie reviews, research, mental illness info, etc.

Why we do it: To help people who are interested in issues related to mental health find NAMI.

Press Releases

NAMI releases a press release whenever we've got a major endeavor, from a testimony on capital hill to a new report to a celebrity relationship in bloom. Press releases are very formal, to-the-point and short-and-sweet. For guidance, touch base with Bob Carolla. Lifespan for PRs is eternal, as we archive them by year to show a living record of NAMI's work.

Why we do it: To garner press attention for NAMI endeavors.

Web Sections by Navigation

Our public site provides three major areas of navigation and has a deep strategy that results in conversions (donate, join or take an action). Most users of nami.org want to either **learn about mental illness**, **find support** if they are in recovery or **get involved** (take action) if they are interested in advocacy, volunteering, raising money for NAMI or walking.

Learn

Our tone in the Learn about Mental Illness is still casual—we are not the *DSM*—but we are less personal in this section. All of our personas, as well as ones we haven't introduce yet—use this section. Think about students writing papers for school, MH professionals, journalists, etc. This section is for learning, not feeling supported or rallied into action (that's what the other sections are for). We have a lot of information to relay about mental illnesses, so the less fluff, the better. Keep it simple, easily to digest and professional—like a well-informed social worker who happens to be your friend.

Why we do it: To provide current, easy-to-understand and accurate information on mental health.

Find Support

Find support is where people go when they need help—and to acquire more information on how to live well in recovery.

We want to provide a conversion right away so we need to them the information right away. Don't add a lot of fluff.

The personas using this section are the individuals living with mental illness and the caregivers/parents/family members. (NAMI Parent/caregiver). Tone in this section should be much warmer and friendlier than in the “learn about section.”

Why we do it: To provide a tangible solution and starting point to recovery utilizing NAMI resources (classes, support groups, online tools).

Get Involved

Get involved is geared toward the Crusader and Nurturer personas, as well as people and families affected by mental illness that want to spread the word and take action around mental health advocacy, public education and personal fundraising.

The tone here is friendly and casual when talking about the issues and solutions, and to-the-point when informing readers about complex issues.

Why we do it: To build the movement of supporters across the country to fight for mental health supports and access to better treatment, remove mental health stereotypes, raise awareness and educate the public.

Email newsletters

NAMI's email newsletters serve many purposes. Different departments send their own newsletters to small groups, and NAMI sends one newsletter every month—NAMI Now—that is a collection of all the published articles and blogs from the homepage to all those registered on nami.org

Why we do it: To be able to maintain contact with our members on a regular basis from the national level to highlight what we are working on.

Social media

NAMI has a Twitter ([@NAMICommunicate](#)) and [Facebook](#) page, where we post links, make announcements and connect with users. Twitter and Facebook posts are conversational and informative. We need to make sure everyone outside our office knows what we are doing inside our office!

Why we do it: To participate and engage in public discussions on mental health and to show that NAMI is a vital force in the mental health field.

Grammar and More

We rely on the [AP Style Guide](#) for general Web and grammar guidelines but we do differ in a few areas. The list below includes some exceptions to that rule, and topics worth mentioning twice.

Abbreviations and acronyms

If there's a chance a reader won't recognize an abbreviation or acronym, and then spell it out the first time. If the abbreviation is more common than the long form, then just use the short form (DVD, FTP).

Ampersands

Only use in headers.

Books, Movies and Music

Titles of publications should be italicized.

Bulleted Lists

Bulleted lists are definitely encouraged, but don't overuse them. And avoid bullets within bullets.

- This is good.
 - This is generally not good.
 - Only use this if you are Luke Skywalker.

All bulleted items should end with period, regardless if it is a complete sentence or not.

Cities

The following U.S. cities are always listed without the state (a.k.a. standalone cities):

Atlanta	Houston	Philadelphia
Baltimore	Indianapolis	Phoenix
Boston	Las Vegas	Pittsburgh
Chicago	Los Angeles	St. Louis
Cincinnati	Miami	Salt Lake City
Cleveland	Milwaukee	San Antonio
Dallas	Minneapolis	San Diego
Denver	New Orleans	San Francisco
Detroit	New York	Seattle
Honolulu	Oklahoma City	Washington, D.C.

The following international cities also stand alone:

Amsterdam	Monaco
Baghdad	Montreal
Bangkok	Moscow
Beijing	Munich
Beirut	New Delhi
Berlin	Oslo
Bogota	Ottawa
Brussels	Panama City
Cairo	Paris
Copenhagen	Prague
Djibouti	Quebec City
Dublin	Rio de Janeiro, Rome
Frankfurt	San Marino
Geneva	Sao Paulo
Gibraltar	Shanghai
Guatemala City	Singapore
Hamburg	Stockholm, Sydney
Havana	Tokyo
Helsinki	Toronto
Hong Kong	Vatican City
Islamabad	Vienna
Istanbul	Zurich
Jerusalem	
Johannesburg	
Kabul	
Kuwait City	
London	
Luxembourg	
Macao	
Mexico City	
Milan, Madrid	

Commas

Don't use the serial or Oxford comma unless it helps to clarify something.

Example: We interviewed some of our customers, Oprah and Justin Timberlake. You would want to include a comma after Oprah.

Follow common sense with commas. Read the sentence out loud. If you need to take a breath, use a comma.

Company names and products

Honor companies' conventions, according to their official websites (iPad, YouTube, Yahoo!).

Refer to a company or product as "it." You can refer to NAMI as "we," but don't overdo it.

#Contractions

Use them! Aren't they awesome? We can't emphasize just how cool they are.

Dates

Do not use st, nd, rd or th.

Capitalize the names of months in all uses. When a month is used with a specific date, abbreviate only Jan., Feb., Aug., Sept., Oct., Nov. and Dec. Spell out when using alone, or with a year alone.

When a phrase lists only a month and a year, do not separate the year with commas. When a phrase refers to a month, day and year, set off the year with commas.

EXAMPLES: January 1972 was a cold month. Jan. 2 was the coldest day of the month. His birthday is May 8. Feb. 14, 1987, was the target date. She testified that it was Friday, Dec. 3, when the accident occurred.

In tabular material, use these three-letter forms without a period: Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec.

e.g., and i.e.,

Don't use them. Try to use "such as" or "for example" or other similar phrases. The exception is in charts or tables or other representations where words don't fit or unnecessarily clutter the information.

Ellipses

Use ellipses (...) to show that you're omitting words or trailing off before the end of a thought. Don't use an ellipsis for emphasis or drama.

Don't use ellipses in titles or headers, and don't use an ellipsis when you really should be using a colon (a list is to follow).

En dashes

En dashes are used to describe a range that is inclusive. For example, you would write June 7–June 14, 2009–2014, or pages 23–37. There should be no space around an en dash.

Em dashes

Use an em dash (—) without spaces for a true break or to set off a parenthetical statement.

Don't use two hyphens in place of an em dash.

Email

Email is the preferred form, rather than e-mail. However, related terms follow this format (“e-newsletter, e-News” etc.)

Ethnic (-/racial) group names

African American, Asian American, etc. are not hyphenated. Prefer Latino to Hispanic, as the later implies Spanish descent, as distinguished from the broader range of Spanish-speaking origins. It is acceptable to use “black” when discussing people of African descent outside the United States.

Health care

Always two words.

Hyphens

Use a hyphen without spaces to link words to form a single phrase (first-time user), and to indicate a range that is not inclusive. *Example: The paper should be 500-1,000 words.* See **en dash** for more information.

Italics

Italicize to emphasize a word, cite an example, or indicate the title of a long work (books, movies, albums).

Millions, billions, trillions

Use figures with million, billion or trillion in all except casual uses: I'd like to make a billion dollars. But: The nation has 1 million citizens. I need \$7 billion. The government ran a deficit of more than \$1 trillion.

Do not go beyond two decimal places. *7.51 million people, \$256 billion, 7,542,500 people, \$2,565,750,000.* Decimals are preferred where practical: *1.5 million.* Not: *1 1/2 million.*

Do not mix millions and billions in the same figure: 2.6 billion. Not: 2 billion 600 million.

Do not drop the word million or billion in the first figure of a range: *He is worth from \$2 million to \$4 million.* Not: *\$2 to \$4 million,* unless you really mean \$2.

Note that a hyphen is not used to join the figures and the word million or billion, even in this type of phrase: *The president submitted a \$300 billion budget.*

In headlines, abbreviate only millions, billions: \$5M lawsuit, \$17.4B trade deficit

NAMI

The national office of NAMI is simply referred to as NAMI, not NAMI National. When talking to the public, it's preferred to say "your local NAMI." When talking to the field, NAMI State Organizations and NAMI Affiliates are the proper format.

NAMI Programs

The first mention of a NAMI signature program should always include NAMI. It does not need to in subsequent mentions. *Example: NAMI Family-to-Family has helped thousands of families. Family-to-Family is a remarkable program.*

Numbers

Use figures for any value.

Do not begin a sentence with a numeral, write out the number. *Example: Eleven dogs found 6 scraps of meat.*

However, it is acceptable to begin a headline with a number.

OK

Written as *OK*, not *okay* or *Ok*.

Political Party Affiliation

Let relevance be the guide in determining whether to include a political figure's party affiliation in a story.

Party affiliation is pointless in some stories, such as an account of a governor accepting a button from a poster child. Include party affiliation if readers need it for understanding or are likely to be curious about what it is.

GENERAL FORMS: When party designation is given, use any of these approaches as logical in constructing a story:

–Republican Sen. Tim Scott of South Carolina said...

–Sen. Tim Scott, R-S.C., said...

–Sen. Tim Scott also spoke. The South Carolina Republican said...

–Rep. Frank Lucas of Oklahoma, the senior Republican on the House Agriculture Committee, said he supports the amendment.

Use the abbreviations listed in the entries for each state. (No abbreviations for Alaska, Hawaii, Idaho, Iowa, Maine, Ohio, Texas and Utah.)

Use R- for Republicans, D- for Democrats, and I- for independents: Sen. Joseph Lieberman, I-Conn., spoke with Sen. Bernie Sanders, I-Vt.

Percent

Use the % sign. Do not spell out percent. Numbers that precede % should *always* be a numeral. This means don't start a sentence with a percent.

Pronouns

Don't use "they" or "one" as singular pronouns. Use "she" or "he," or avoid it altogether. But don't use both together. In other words, don't say "He or she would not want you to do that." You can alternate if you need to use both.

Quotation marks

Use quotes to refer to words and letters, titles of short works (articles), and—you guessed it—direct quotations.

Periods and commas go **within** quotation marks. Question marks within quotes follow logic—if the question mark is part of the quotation, it goes within. If you're asking a question that ends with a quote, it goes outside the quote.

Use single quotation marks for quotes within quotes.

Semicolons

Go easy on semicolons. When appropriate, use an em dash (—) instead, or simply start a new sentence.

States

Do not use USPS abbreviations *unless* writing an address. Instead use:

Ala.,	Ariz.,	Ark.,	Calif.,	Colo.,	Conn.,	Del.,	Fla.,	Ga.,	Ill.,		
Ind.,	Kan.,	Ky.,	La.,	Mass.,	Md.,	Mich.,	Minn.,	Miss.,	Mo.,		
Mont.,	Neb.,	Nev.,	N.C.,	N.D.,	N.H.,	N.J.,	N.M.,	N.Y.,	Okla.,		
Ore.,	Pa.,	R.I.,	S.C.,	S.D.,	Tenn.,	Vt.,	Va.,	Wash.,	W.Va.,	Wis.,	Wyo.

Telephone numbers

Use dashes without spaces between numbers and country codes. 404-123-4567

Time zones

Capitalize the full name of the time in force within a particular zone: Eastern Standard Time, Eastern Daylight Time, Central Standard Time, etc.

Lowercase all but the region in short forms: the Eastern time zone, Eastern time, Mountain time, etc. List ET first, unless you're referring to an event that takes place in another time zone.

If the event is taking place in multiple time zones simultaneously, list each time zone. *Example: The show is airing at 10 a.m. EST, CST and PST.*

Blacklist

Don't use these words and phrases:

- Consumer
- Suffer
- Schizophrenic (or any term using an illness as an identifier)
- Brain disorder
- Brain disease
- Patient (unless it absolutely necessary, such as in a study or describing the relationship with a doctor)
- Individual or individuals. When possible use a person or people.

Writing and Contributing

NAMI's website is constantly evolving, and our content is constantly becoming outdated. Each department owns different types of content.

- Website, general style concerns: Comm (Courtney or Brendan)
- Hero image: IT (Nathan)
- Technical problems: IT (Nathan or Don)
- Blog and Editorial Calendar: Comm (Brendan)
- Social: Comm (Joni)

NAMI's communications department manages the content inventory and editorial calendar. Let them know if you have any questions, requests, or expressions of praise and admiration. Quarterly content reviews, other staff stuff?

Process and Maintenance

We update website content and resources on a weekly basis. We publish blogs and news to the homepage, and YANA/OK2T stories come in daily. Twice a year (in January and July), we do a major content review. We update our content inventory, delete/revise/edit all website content, resources and copy with our style and strategy guidelines in mind.

Congratulations. You've reached the end. Happy writing!