

Table 1*Language Use Correlates in Clinical Disorders*

Language use in clinical disorders	Interpretation of Findings
Depression ^a	
Increased use of singular, personal pronouns (“I”, “me”, “my”)	May signal self-focus and attentional bias to factors related to self
Suicide ^b	
Completers: Increased use of second person pronouns (“you”), hearing words (“listen”, “hear”), references to other people pronouns (“them, they, her”), increased future tense verbs, fewer inclusive words (“with”, “included”) and increased metaphysical language (“god”, “heaven”)	May signal an emphasis on attention toward others, the future and spirituality or religion and less focus on self with others or being part of a group (i.e. functional separation of one’s self)
Attempters: Less positive emotion words (“love”, “nice”, “sweet”), social references (“mate”, “talk”, “together”) and future tense words	May signal increased emotional distress, desire to connect with others and need for social support as well as perceived hopeless in future often present in suicidal ideation
Homicide ^c	
2x the amount angry words (“kill”, “hate”, “annoy”) and 6x the amount of future tense words and 3x the number of pronouns	May signal clear indication of aggressive intent indiscriminate emphasis on specific person or persons as targets
Trauma ^d	
Increased use of positive emotion (“love”, “nice”, “sweet”) and negative emotion (“ugly”, “nasty”, “hurt”)	May signal increased level of emotional reactivity often present in PTSD
Reexperiencing symptoms were associated with increased use of cognitive mechanism words (“cause”, “know”, “ought”) and negative emotion	May signal effort and difficulty with repeated attempts or experiences processing trauma as well as difficulties integrating and resolving trauma
Dissociation was associated with increased pronoun use	The nature of pronoun use may help uncover how trauma is being processed (i.e. third-party may reflect focus on others versus personal pronouns)
PTSD diagnosis increased use of third-party singular pronouns (“he”, “she”, “him”), and more death related words (“bury”, “coffin”, “kill”)	May signal emphasis presence or absence of avoidant coping style as well numbing symptoms

^a (Edwards & Holtzman, 2017); ^b (Handelman & Lester 2007); ^c (Egnoto & Griffin, 2016); ^d (Jaeger et.al., 2014)