

**BREAKING NEWS**

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# OPIOID CRISIS

25,000 DEATHS  
IN THE LAST

OPIOID TRAINING

**CHEMISTRY NOT CHARACTER: AVOIDING STIGMA**

SOCIAL SERVICES  
day more than 90  
after

reassure  
community that patients  
become addicted to  
pain

understand  
deaths due to  
overdoses have ac  
underrep

- This training module was developed as part of Florida's State Targeted Response to the Opioid Crisis (Opioid STR) through a Substance Abuse and Mental Health Services Administration (SAMHSA) grant.



## OPIOID STR GRANT PURPOSE

The grant aims to address the opioid crisis by:

- ✓ Increasing access to treatment;
- ✓ Reducing unmet treatment need; and
- ✓ Reducing opioid overdose related deaths.

## LEARNING OBJECTIVES

Participants will:

- Describe two factors that contribute to stigmatizing persons with substance use disorders (SUDs).
- Name at least three words or phrases that describe individuals with SUDs or their activities in a stigmatizing manner.
- Describe at least three alternative ways to describe individuals with SUDs or their activities in a *non*-stigmatizing manner.

## MOST STIGMATIZED CONDITIONS

- SUDs are among the most stigmatized conditions in the world.
- Two main factors affect the burden of stigma placed on a particular disease or disorder:
  - Perceived control that a person has over the condition; and
  - Perceived fault in acquiring the condition.



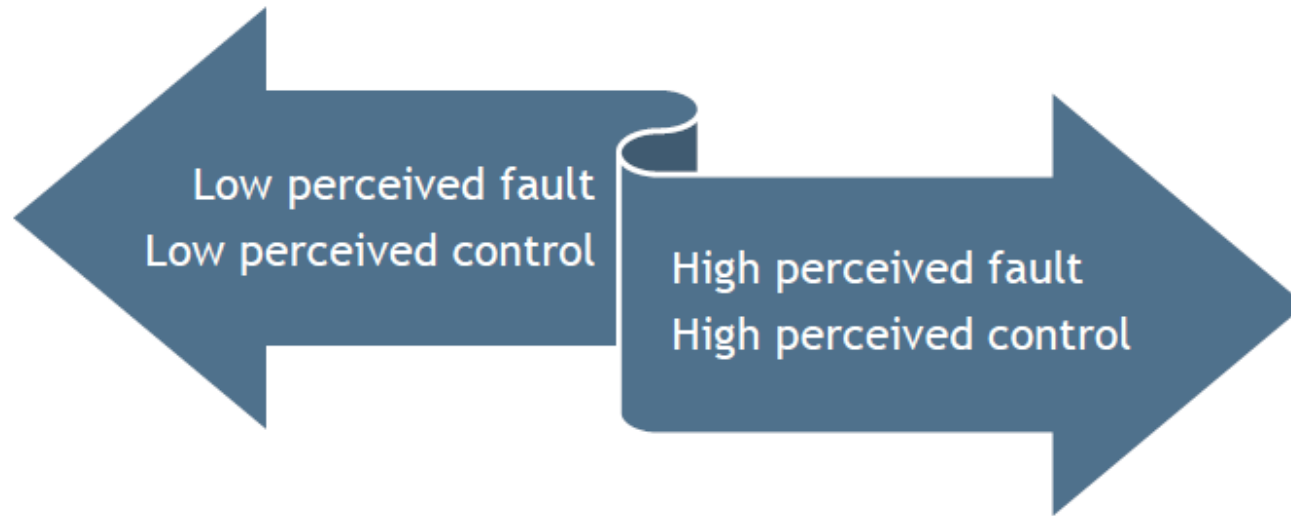
## MOST STIGMATIZED CONDITIONS

**Non-stigmatized  
Conditions**

Low perceived fault  
Low perceived control

High perceived fault  
High perceived control

**Stigmatized  
Conditions**



# GREATER STIGMA FOR PERSONS USING ILLICIT SUBSTANCES

- The potential for stigma is greater still when someone is using an illegal substance, which carries the additional perception of criminality.



## PEOPLE WITH SUDS ARE VIEWED MORE NEGATIVELY

- Research also has shown that people with SUDs are viewed more negatively than people with physical or psychiatric disabilities.
- Researchers found that even highly trained SUD and mental health clinicians were significantly more likely to assign blame and believe that an individual should be subjected to more punitive (e.g., jail sentence) rather than therapeutic measures, when the subject of a case vignette was referred to as a “substance abuser” rather than as a “person with a substance use disorder.”



## PEOPLE WITH SUDS ARE VIEWED MORE NEGATIVELY

- For people with a SUD, stigma disproportionately influences health outcomes and mental well-being.
- Fear of being judged and/or discriminated against can prevent people with SUDs, or who are at risk of SUDs, from getting the help they need.
- Stigma can also prevent caregivers and others in the position to help from providing needed services, including medical care.
- Stigma may prevent mothers who use drugs from accessing prenatal care because they are afraid of being judged or mistreated by medical professionals, or of being forced into the child welfare system.

# SUDS CARRY A HIGH BURDEN OF STIGMA



- People who experience stigma are less likely to seek out treatment services and access those services.
- When they do, people who experience stigma are more likely to drop out of care earlier.
- Both of these factors compound and lead to worse outcomes overall.

# STIGMATIZED STEREOTYPES

- Negative language turns people who use drugs into a stigmatized stereotype.
- This type of language is discriminatory, patronizing, and challenges public understanding of people who use drugs and the issues they face (whether they are in long-term recovery, or actively using).



# HUMAN BEINGS

- Addiction is a disease. It's important that we use language that frames it as a health issue and shows respect to people with an addiction and to their families who are impacted.
- Those who are battling addiction are not one-dimensional fictional characters -- they are supremely real human beings who are suffering every single day.



# STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Alcoholic/Addict/ Junkie</b>	Person; or Person not yet in recovery; or a person with an alcohol/drug disorder	It is not right to define the person by the disease or by the drug.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Clean and sober</b>	Free from illicit and non-prescribed medications	“Free from illicit and non-prescribed medications” is a description of a person’s current substance use status, as opposed to a value-laden term.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Clean drug screen</b>	Negative drug screen	Clear description of test results, versus a value-laden term.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Dirty drug screen</b>	Positive drug screen	Clear description of test results, versus a value-laden term.



## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Drug abuser</b>	A person with a substance use disorder	Drug abuser implies the person <i>is</i> the problem, rather than as a person with a substance use disorder.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Drug-addicted babies/opioid babies</b>	Babies experiencing neonatal opioid withdrawal (NOW) or neonatal abstinence syndrome (NAS)	Babies can be born “dependent” on a substance used by their mother but cannot be born “addicted.” Addiction requires meeting a number of criteria such as the inability to control or reduce use; continue use despite adverse consequences, and more.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Drug habit</b>	Substance use disorder	“Drug habit” inaccurately implies that a person is choosing to use substances or can choose to stop.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>Drug of “choice”</b>	Drug(s) of use/drug(s) used	Ignores the genetic, environmental, and coercion aspects of addiction as well as the brain science

# STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>IVDUs (injection drug users)</b>	A person who injects substances	Injection drug abuser/IVDU implies the person <i>is</i> the problem, rather than as a person who injects substances.

## STIGMATIZING VS. NON-STIGMATIZING LANGUAGE

<b>Dated Language Instead of ...</b>	<b>Use Preferred Language</b>	<b>Rationale</b>
<b>“Replacement” or “substitution” when discussing opioid use disorder treatment medications</b>	Medication- assisted treatment (MAT)	“Replacement” or “substitution” imply that medications merely “substitute” one drug or “one addiction” for another.

Avoid these

Junkie  
Denial  
choice  
Drug  
Untreated  
Sober  
Clean  
Relapse  
addict  
Dirty  
Alcoholic

## SUMMARY

- Having an increased awareness of the relationship between language and stigma is key to changing how we communicate with more respectful and inclusive language!
- With careful attention to language, we can reduce the burden of stigma surrounding SUDs, improve access to health care for people with SUDs, and save lives.





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