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# Words Matter: How Language Impacts Stigma

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## Harm Reduction Coalition

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# A Note on Changing Language

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*“Language changes so quickly these days, the right to speak about people, trauma, about identities, about gender, about geography — everything is in motion on a regular basis. I know that in writing this book I am creating something infinitely dated.”*

Adrienne Maree Brown, excerpt from *Pleasure Activism*

# The Problem:

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- We are seeing more national discussion of the overdose crisis but **many people are still using stigmatizing language or frameworks**
- Many providers, physicians and national media frame the issue in ways that can increase stigma, are incorrect and can be harmful.

# The Problem:

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- We need to **reshape perception to humanize people who use drugs** & have the most effective strategies because
  - Research shows that using language like “*abuse*” or “*substance abuser*” instead of “*use*” or “*substance use disorder*” leads to more punitive medical care, and negative judgements
  - Research shows the language contributes to stigma therefore addressing our language around substance use isn’t merely semantics or political correctness. Widespread use of stigmatizing language has led to misunderstanding of the fundamental nature of addiction creating some deadly misconceptions about how it should be managed.

# The Solution:

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There are a few questions we'd like to pose for you to reflect on your own language practices when it comes to communications & interpersonal interactions...

# Are You Using Person First Language?

## Changing the Language of Addiction



Terms that stigmatize addiction can affect the perspective and behavior of patients, clients, scientists, and clinicians. Clinicians especially need to be aware of person-first language and avoid more stigmatizing terms.

### Terms Not to Use

- addict, abuser, user, junkie, druggie
- alcoholic, drunk
- oxy-addict, meth-head
- ex-addict, former alcoholic
- clean/dirty (drug test)
- addictions, addictive disorders

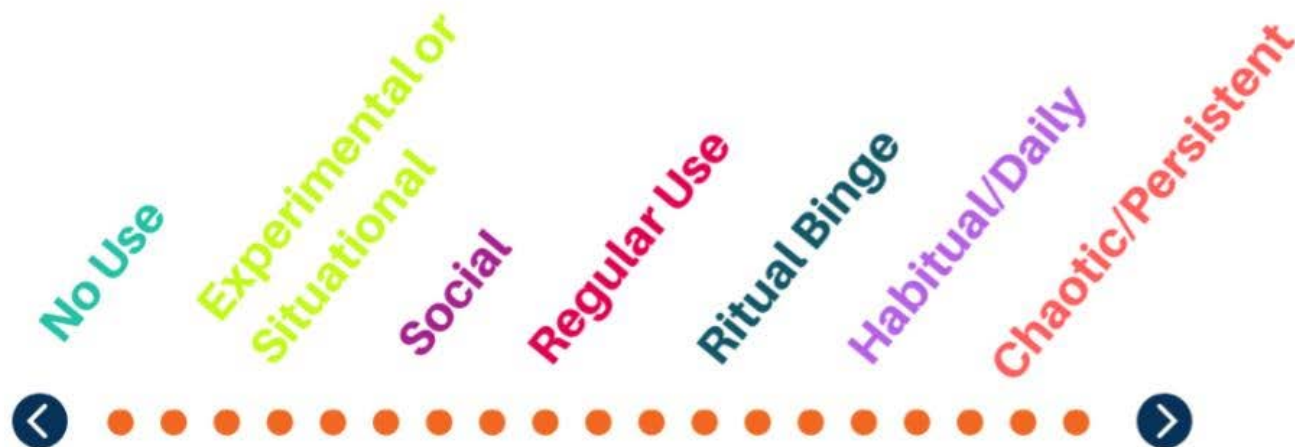
### Terms to Use

- person with a substance use disorder
- person with an alcohol use disorder
- person with an opioid use disorder
- person in recovery
- negative/positive result(s)
- addiction, substance use disorder



# Are You Talking About All Drug Use As a Disorder?

## A Continuum of Language About Drug Use

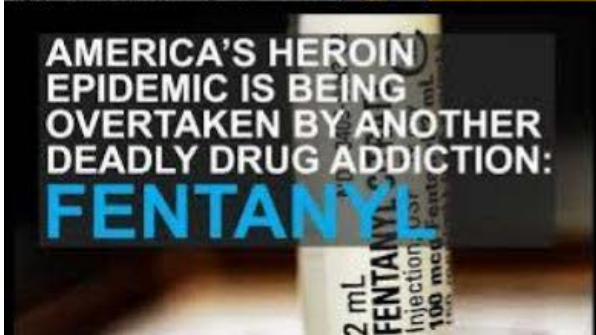


# Are You Using Sensational or Fear Based Language?

## Crack Babies: The Worst Threat Is Mom Herself

By Douglas A. Bohrer

**L**AST WEEK in this city, Greater Southeast Community Hospital released a 7-week-old baby to her homeless, drug-addicted mother even though the child was at severe risk of pulmonary arrest. The hospital's explanation: "Because [the mother] demanded that the baby be released."  
 The hospital provided the mother with an apnea monitor to warn her if the baby stopped breathing while asleep, and trained her in CPR. But on the very first night, the mother went out drinking and left the child at



How scary? Well, in the incident described year-old man, Rudy Eugene of Miami, attac  
 Jun 4, 2012

**IN** New Idea

### Flakka –What is it & Why is it Called the Zombie Drug?

... and the bath salt drug because the chemicals in Flakka resemble those found ... there have still been several major scares on Aussie shores.  
 Jan 17, 2019



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# Overcoming Pushback:

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- It is challenging for people to change long standing language patterns – and people question whether it's important
- We make sure we give actionable ways people can address their own language and **acknowledge that it is challenging but emphasis the importance**

# Overcoming Pushback:

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Choose an accountability buddy to share your areas of growth and to correct and support you

Perform a language audit of existing materials (forms, brochures, signs) and replace with inclusive language

When developing new materials, seek input from various stakeholders including people who use drugs

Stay teachable! Follow reputable sources for information and be open to ongoing growth and change

# Successes: Know Overdose Campaign


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- One example of a public health overdose prevention campaign that reflected on these three questions is the *Know Overdose* campaign released by Harm Reduction Coalition's DOPE Project in San Francisco, California.
- *Know Overdose* expertly addresses real risks for overdose while incorporating people who use drugs themselves as the storyteller, experts and consultants – which is our biggest advice.
- If you want to create a similar media campaign make sure you:
  - Reflect on your language
  - Include people with lived experience at every stage of creation (concept, photographing, editing & roll-out)

# Our Experts & Their Strategies




## KNOW OVERDOSE

**We're better together**  
 Know the signs if someone is overdosing.  
 Carry naloxone and know how to use it.



**Use naloxone (Narcan®) to save lives:** Naloxone is a medicine that reverses overdose from opioids, including heroin, prescription pain pills and fentanyl.


**Get free naloxone (Narcan®) + overdose prevention training:** Injectable naloxone is available at local syringe access programs. Nasal spray naloxone is available at CBHS Pharmacy, 1380 Howard St.

 [harmreduction.org/dope](http://harmreduction.org/dope)  

**LET'S TAKE CARE OF EACH OTHER,  
SAN FRANCISCO**




## KNOW OVERDOSE

**Change it up**  
 Injecting drugs carries the highest risk of overdose, so  
 try smoking or snorting instead.



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# Just the Facts

## KNOW OVERDOSE

People who use drugs, their loved ones, and the greater San Francisco community **reverse** around **1,500 overdoses a year.**



**Use naloxone (Narcan®) to save lives:** Naloxone is a medicine that reverses overdose from opioids, including heroin, prescription pain pills and fentanyl.

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## KNOW OVERDOSE

Reversing an overdose with naloxone is **safe, simple, and legal.**

In San Francisco, getting an overdose prevention kit and training is **free.**



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# Their Portraits

## KNOW OVERDOSE

"I've seen a lot of drug use here. That really doesn't bother me. **What bothers me is seeing a lot of people die or come close to death—that can be prevented.**"

—Frank E., GLBE Harm Reduction Services



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## KNOW OVERDOSE

"I passed out, and there were people around me who saw. They Narcan-ed me... I had no idea. **I'm glad I was with them when it happened. I could have been alone.**"

—Tony, STDUU



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# Resources:

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*Know Overdose* campaign information and materials can be found at Harmreduction.org

<https://harmreduction.org/issues/overdose-prevention/know-overdose/>