

Words Are Powerful

Destigmatizing Opioid Use Disorder Through Language

People living with opioid use disorder (OUD) face **significant barriers** to accessing resources to support their recovery. **Shame, misconceptions and negative attitudes** held by individuals, professionals and the general public may deter individuals from seeking treatment, reduce adherence to treatment or impact outcomes.^{1,2}

Medically accurate, person-first language that is without blame has the potential to help **mitigate prejudices**, reduce stigma and increase help-seeking behaviors in people living with OUD so they can **reach their full potential**.^{1,3}

Braeburn is committed to ending stigma and transforming what it means to live with OUD, and we encourage others to join us in choosing non-stigmatizing language when communicating about this condition.

Language Guidance



Medically Accurate



OUD can often be managed successfully with medication, much like using medication to control heart disease or diabetes.⁴ People living with OUD may use FDA-approved medications as prescribed by a healthcare professional to help manage their illness.⁴ Medication for the treatment of OUD is part of a complete treatment program, varying in length, that may include counseling and psychosocial support.⁴ Access to all treatment pathways for OUD is vital to allow patients and healthcare providers to determine the best option(s) for recovery.

Non-Stigmatizing

- Treatment or medication for addiction
- Medication for the treatment of opioid use disorder
- Medication-assisted recovery
- Medication as a tool for treatment
- Pharmacotherapy
- Positive, negative toxicology screen results
- Withdrawal management

Stigmatizing

- Substitution or replacement therapy
- Medication assisted treatment
- Medication as a crutch for recovery
- Clean, dirty
- Detox



Person-first



Person-first language focuses on a person's lived experience with OUD, helping to highlight what the person needs rather than identifying them by their illness and ascribing moral judgment.

Non-Stigmatizing

- Person living with opioid use disorder
- Has an opioid use disorder
- Person with a history of opioid use disorder
- Opioid use disorder or addiction
- Opioid use, misuse
- Harmful, unhealthy, risky or heavy use
- Person in recovery
- Abstinent
- Not taking drugs
- Opioid-free
- Long-term recovery
- Maintained recovery
- Well, healthy, in recovery
- Recurrence of use
- Recovery management

Stigmatizing

- Addict
- Druggie
- Junkie
- User
- Substance/drug abuser
- Addicted to opioids
- Former addict, junkie, user
- Abuse
- Drug habit
- Problem
- Clean
- Ex-addict
- Former/reformed addict
- Stayed clean
- Sober
- Relapse
- Relapse prevention



Without Blame



The language we use to describe the experience of living with OUD has the potential to entrench implicit, punitive biases that may challenge a person's self-determination along their recovery journey.^{3,5}

Non-Stigmatizing

- Unable to/not able to adhere to treatment plan
- Adherent or concordant/non-adherent/non-concordant⁶
- Positive toxicology screen results

Stigmatizing

- Non-compliant
- Failed drug test

References

1. National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Sciences Policy; Committee on Medication-Assisted Treatment for Opioid Use Disorder; Mancher M, Leshner AI, editors. Medications for Opioid Use Disorder Save Lives. Washington (DC): National Academies Press (US); 2019 Mar 30. 5. Barriers to Broader Use of Medications to Treat Opioid Use Disorder. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK641389/>.
2. Volkow ND. Stigma and the Toll of Addiction. *N Engl J Med*. 2020;382(14):1289-1290. doi:10.1056/NEJMp1917360.
3. Kelly JF, Wakeman SE, Saitz R. Stop talking 'dirty': clinicians, language, and quality of care for the leading cause of preventable death in the United States. *Am J Med*. 2015;128(1):8-9. doi:10.1016/j.amjmed.2014.07.043.
4. Substance Abuse and Mental Health Services Administration. Medications for Opioid Use Disorder. Treatment Improvement Protocol (TIP) Series 63 Publication No. PEP21-02-01-002. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2021. https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP21-02-01-002.pdf.
5. Ashford RD, Brown AM, Curtis B. 'Abusing Addiction': Our Language Still Isn't Good Enough. *Alcohol Treat Q*. 2019;37(2):267-272. doi:10.1080/07347324.2018.1513777.
6. Chakrabarti S. What's in a name? Compliance, adherence and concordance in chronic psychiatric disorders. *World J Psychiatry*. 2014;4(2):30-36. doi:10.5498/wjp.v4.i2.30.