

Overcoming Stigma Through Language

A Primer



Canadian Centre
on Substance Use
and Addiction



CAPSA
ACEPA



Stigma is a significant barrier to wellness and good health for people who use substances.

The goal of this primer is to facilitate conversations and increase awareness of the stigma surrounding people who use substances, their support networks and service providers in the community.

WHAT'S IN THIS PRIMER:

1. Explanation of what stigma is and how it impacts people
2. A snapshot of substance use in Canada
3. Resources to help talk about stigma and substance use disorders

GET IN TOUCH:

For inquiries or assistance in using this primer, please contact media@ccsa.ca

Welcome,

We're proud to share our new stigma primer with you. The Canadian Centre on Substance Use and Addiction (CCSA) designed *Overcoming Stigma Through Language: A Primer* to increase understanding of the devastating stigma associated with substance use and addiction and its impact on the well-being of people touched by this health issue.

We created this primer with support from our partners at the Community Addictions Peer Support Association (CAPSA). Our hope is that it will help you and your community of influence to recognize the stigmatizing language, attitudes and behaviours that surround people experiencing the harms of substance use.

Many people with lived and living experience with substance use have shared with us their stories about stigma in their communities, workplaces and homes. We have learned from those stories. On an individual level, stigmatizing words or actions are harmful. Collectively, and over time, they have an even greater impact on people's health and well-being.

At CCSA we believe in putting knowledge into action. Our primer includes practical language tips to help reduce stigma, one conversation at a time.

Ending stigma and breaking down barriers to recovery and wellness or good health are key priorities for CCSA. Together with partners like CAPSA, we are taking the conversation about stigma nationwide by holding workshops in different regions across Canada and using social media to expand our reach. We encourage you to share this resource with your family, friends, co-workers and communities. You can start the conversation about stigma today. **#StigmaEndsWithMe** and it can end with you too. We hope you'll join us in changing the conversation about substance use and addiction.

Best regards,

Rita Notarandrea

Chief Executive Officer
Canadian Centre on
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Snapshot of Substance Use in Canada: Who does substance use affect?



1/10 Canadians experience substance use problems today.¹

8/10 Canadians with a substance use disorder say they experienced barriers to recovery, including stigma.²



Almost half of Canadians in recovery from a substance use disorder experience stigma when in active addiction.³



WHAT IS SUBSTANCE USE?

Substance use is the use of any psychoactive substance, which covers all legal and illegal drugs, including alcohol, opioids, methamphetamines and cannabis.

The term substance use covers a broad range of behaviours. Some people use substances occasionally, others use more regularly. For some people who use substances, regular use can become a problem leading to harm and even substance use disorders or addiction.

SUBSTANCE USE DISORDER

Not all people who use substances will develop a substance use disorder.

A substance use disorder is a health condition. It is diagnosed when a person's substance use leads to health

issues or problems at home, school or work. A substance use disorder can be mild, moderate or severe.

Evidence shows that repeated or prolonged use of substances can make changes to the brain and impact behaviour. Addiction causes a person to not be able to control the impulse to use a substance, even when the consequences are negative or harmful. This state is a characteristic of severe substance use disorder.

Multiple factors influence a person's likelihood for developing a substance use disorder. These factors include genetics, brain development, environment and individual experiences.

What is stigma?

Stigma is any attitude, belief or behaviour that discriminates against people.

When it comes to substance use, stigma impacts people with lived and living experience, as well as their families.

Stigma often emerges in the form of derogatory language that shames and belittles people. Such language can lead to a cycle of behaviours and attitudes that isolate and marginalize people who use substances.

STIGMATIZING LANGUAGE

Stigmatizing language and disrespectful behaviour affect the way people see themselves and how they are treated by society as a whole. It is important to remember that a substance use disorder should be treated as a medical condition. Shifting language to more accurately reflect the nature of the health condition can lead to wider support of life-saving interventions.⁴

Some people internalize the stigma surrounding substance use, causing them to feel ashamed and to struggle with feelings of worthlessness. Other people's negative attitudes towards them can amplify and further reinforce these feelings.

International studies by the World Health Organization show hazardous alcohol and drug use disorders are among the most stigmatized conditions.⁵

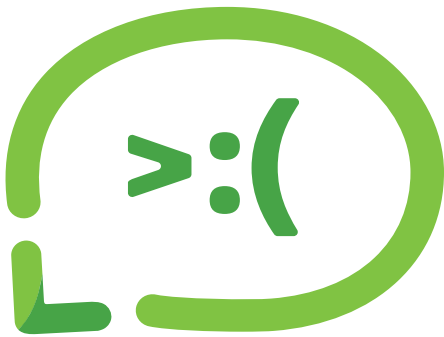


What does stigma look like?

Stigma isolates and separates people who use substances or have substance use disorders.

We reinforce stigma with the words we choose, how we treat others and how we view ourselves.

Most of us encounter stigma in our daily lives and we can amplify or extend it without meaning to. The attitudes we hold without being aware of them include assuming people choose to live with substance use disorders.



Stigmatizing language and attitudes towards people who use substances can sound like:

- Prejudice towards a person's identity by equating that identity with substance use
- Belittling a person's value based on their use of substances
- Dehumanizing a person through labels

The communities and society we live in influence us, and we can internalize stigmatizing words and beliefs. Here are some examples of how stigma can make a person who uses substances feel:

- A sense of shame that stops you from seeking help
- Believing you, as someone who uses substances, will not receive help if you ask for it
- You are not heard, seen or cared about

Stigma can make a person feel like their life doesn't matter.

How does stigma hurt people?

Stigma is a significant barrier to well-being and good health for people who use substances.

This is not just semantics. Stigmatizing language and disrespectful attitudes have real-life consequences that can lead to blame and punishment.

Stigma is both present and harmful at all levels of society, even among healthcare practitioners, law enforcement officers and social workers. It can create barriers to accessing treatment and other important services. Studies confirm that the use of stigmatizing language can have negative impacts on people's well-being.

Using **person-first**, non-stigmatizing language encourages people to seek help, increases the availability of and access to quality healthcare services, and encourages unbiased, effective policy.

Stigmatizing language:

DISCOURAGES PEOPLE FROM SEEKING HELP

- Even though substance use disorder is a health condition, people often do not seek help, not wanting to be labelled “an addict,” even within their support networks.

AFFECTS THE QUALITY OF AND ACCESS TO HEALTHCARE SERVICES

- Studies show that using words like “abuse” or “addict” can create negative opinions that lead to the refusal of healthcare services or their lower quality, even by well-trained mental health and addiction specialists.⁶

DICTATES POLICY THAT AFFECTS TREATMENT ACCESSIBILITY

- Elected officials make decisions about resources and policies that directly affect the availability of treatment services, funding of research and laws. It's important that we use non-stigmatizing terms when we speak to decision makers about substance use to encourage unbiased, effective policies and programs.

It's time to change our language.

Let's get started.

Stigmatizing language is inaccurate, hurtful and disempowering to vulnerable people and, when internalized, ourselves.

As a society, it's time that we shift our language to reflect the evidence and our understanding of substance use and substance use disorders. We can make a difference by using words that respect the dignity of all people who use substances, focus on the medical nature of substance use disorders and promote well-being. We need to stop using stigmatizing slang and too common expressions that are harmful. Instead, we need to implement **person-first language**.*

***Person-first language** is language that acknowledges someone as a person before describing their personal attributes or health conditions. Person-first language does not identify people by secondary or incidental qualities or conditions.

Instead of “druggie,” use “person who uses substances.” Instead of “addict,” use “person with a substance use disorder.”

English vocabulary has evolved to include words that are accurate and relevant, while not being harmful to others and ourselves. The time has come for language around substance use and substance use disorders to change — in the healthcare field, our personal relationships and society.

Calling someone an “addict” dehumanizes that person and can link a substance use disorder to their individual identity. A person is not defined by their illness or health condition.



Say this, not that!

By changing the words you use, you can help break down negative stereotypes one conversation at a time.

Avoid using language like asking someone if they are “clean” or “dirty.” These terms can decrease self-esteem and effectiveness of treatment for someone suffering from a substance use disorder.

INSTEAD OF THIS...	SAY THIS...
“You’ve been drinking a lot lately. Why can’t you just stop? You know I’m concerned.”	“I notice you’re drinking more than usual. Have you noticed the change or do you have any concerns? If so, is there anything I can do to help?”
“I have been clean for six months.”	“I haven’t taken any substances in six months.”
“Substance abuse affects Canadians from all walks of life.”	“Canadians from all walks of life are impacted by the use of substances.”
“Relapse means you need to restart the recovery process.” “They lied. They said they were sober but they’re using again.”	“Life can be difficult. Emotional pain, trauma and changing life patterns can be challenging for a person navigating their recovery. I understand a person’s pathway to well-being is often not linear and recurrences can and do occur with some people as they work on change.”
“Do you know what to do if you see an overdose?”	“Do you know how to help a person who’s suffered an overdose?”
“I think they’re high on the job; they should be fired.”	“I think they may have a substance use problem. We should explore whether there is anything we can do to help them get into a better space. Don’t we have a policy that keeps the workplace safe and cares for someone who is ill?”
“I can smell alcohol on them. They’re in our emergency room all the time. They’ll probably feel fine soon.”	“This person may have been using substances. They deserve a full medical assessment.”

How to intervene when confronted with stigma

WHEN YOU HEAR...

“When I see those addicts downtown, I can’t imagine why they don’t do something about their lives. You’d think they’d show a little self-respect; it’s disgusting how they choose to live.”

“Well, I see Fred’s finally back at work. It’s been 28 days, so it’s a no-brainer where he’s been. I wouldn’t have the nerve to show my face if they had to send me to detox. He must be really desperate for money to have come back. Keep an eye on your stuff.”

“I don’t know what Suzy was thinking last night. The last thing she said to me before the party was that she had to get home early to get her kids. Then there she was smashed, refusing to leave and it was embarrassing to be seen with her.”

YOU COULD SAY...

“What someone suggested to me was to imagine a child in front of me who had done their very best. Then ask myself what problems they must have encountered as they grew up, and be dealing with today, to be suffering so much. Once I started doing that, it struck me that they must be leading a life they never imagined. I wonder if there is something we can do to help? At the very least, we can offer our respect for their humanity and use person-first language.”

“I was worried about Fred’s health as well. I read up on substance use disorders so I could have a better understanding of what he’s going through. Did you know that stigma is one of the largest barriers to getting help? I think that’s why the company has medical benefits that cover substance use disorders to support them in getting help, so we don’t lose valuable employees to a health condition. I’m going to make a point of welcoming Fred back to work to help encourage him.”

“It sounds to me like Suzy was thinking about her family and responsibilities. I was concerned about her health. I read some material on substance use disorders and one of the indicators is losing the ability to act according to personal values. This inability may be a sign of a serious health issue. I’m going to share some information with her, as well as my concerns for her well-being.”

#StigmaEndsWithMe

You can make a difference.

Help end stigma surrounding people who use substances by using person-first language in your day-to-day life.

Talk with your friends, family and colleagues about how they can help too by starting conversations at the dinner table or bus stop, or by encouraging a workplace to introduce a person-first language policy.

Join the conversation online with the hashtag #StigmaEndsWithMe.

Tell friends on Facebook and Twitter that stigma around substance use hurts, and we can help change this in the words we choose to use and the attitudes we hold.



Over half of Canadians suffering from substance use disorders say that stigma is a major barrier to their well-being. We can help break down these barriers by changing the words we choose to use.

#StigmaEndsWithMe



The words we use help shape other people's experiences. Let's create the reality we want by choosing words related to substance use that are compassionate and respect people's dignity.

#StigmaEndsWithMe



Substance use disorders aren't a choice, they are a health condition. Take the first step to ending stigma by eliminating biased words from your day-to-day life.

#StigmaEndsWithMe



Learn more about substance use and stigma

CCSA website www.ccsa.ca

CAPSA website www.capsa.ca

Understanding Stigma

VISUALIZING STIGMA – EXAMINING THE PUBLIC PERCEPTION OF ADDICTION

An infographic that summarizes findings from a poll of the general public on their beliefs about addiction

Source: Recovery Brands

UNDERSTANDING STIGMA

A free online, self-directed course for healthcare providers to understand stigma

Source: Centre for Addiction and Mental Health

THE WORLD DRUG PERCEPTION PROBLEM

A report that demonstrates how policy and stigma are interwoven and affect treatment and service availability/access on a global level

Source: Global Commission on Drug Policies

Changing Stigmatizing Language

CHANGING THE STIGMATIZING LANGUAGE OF ADDICTION TO SUPPORT RECOVERY

A video with Gord Garner about changing stigmatizing language when discussing recovery from addiction

Source: Canadian Centre on Substance Use and Addiction

RESPECTFUL LANGUAGE AND STIGMA REGARDING PEOPLE WHO USE SUBSTANCES

A guide to understanding respectful language and stigma

Source: Toward the Heart

Stories about Stigma

STOP STIGMA, SAVE LIVES

People in northern communities provide stories and videos on changing stigmatizing behaviour in the community and among healthcare providers

Source: Northern Health

PERSONAL STORIES

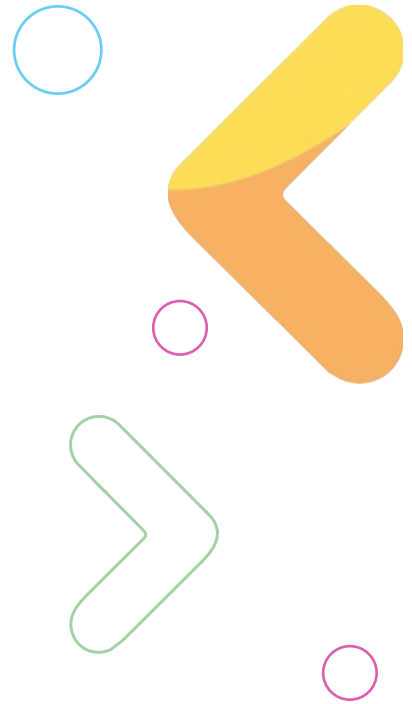
Stories about experiences of stigma related to substance use, and journeys to understanding health and well-being

Source: Here To Help

VISIONS JOURNAL

A quarterly magazine that brings together many views on mental health and substance use

Source: Here To Help





Family and Relationships

RELATIONSHIPS AND RECOVERY

An infographic about how to support a partner struggling with substance use

Source: Recovery Brands

FAMILIES FOR ADDICTION RECOVERY

A community of practice to provide resources for families to support their loved ones with an addiction

Source: Families for Addiction Recovery

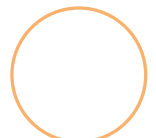
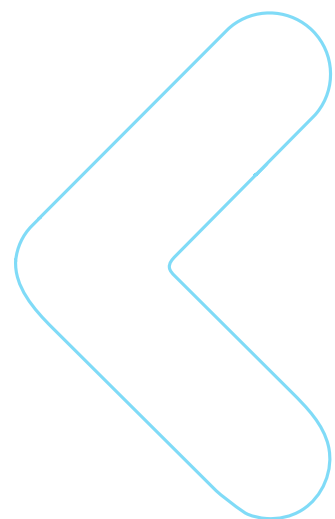


Peer Engagement

PEER SUPPORT SERVICE

A peer recovery group for individuals affected by addiction

Source: Community Addictions Peer Support Association



Endnotes

1. Canadian Centre on Substance Use and Addiction. (2017). *When it comes to substance use disorders words matter*. (Fact sheet.) Ottawa, Ont.: Author. Retrieved from www.ccsa.ca/sites/default/files/2019-04/CCSA-Substance-Use-Disorders-Words-Matter-Fact-Sheet-2017-en.pdf
2. McQuaid, R.J., Malik, A., Moussouni, K., Baydack, N., Stargardter, M., & Morrissey, M. (2017). *Life in recovery from addiction in Canada*. Ottawa, Ont.: Canadian Centre on Substance Use and Addiction. Retrieved from www.ccsa.ca/sites/default/files/2019-04/CCSA-Life-in-Recovery-from-Addiction-Report-2017-en.pdf, 19
3. Pearson, C., Janz, T., & Ali, J. (2013). Mental and substance use disorders in Canada. *Health at a Glance*. Statistics Canada Catalogue no. 82-624-X. Retrieved from www150.statcan.gc.ca/n1/pub/82-624-x/2013001/article/11855-eng.htm
4. Collins, A.B., Bluthenthal, R.N., Boyd, J., & McNeil, R. (2018). Harnessing the language of overdose prevention to advance evidence-based responses to the opioid crisis. *International Journal of Drug Policy*, 55, 77–79.
5. Room, R., Rehm, R.T., Trotter II, R.T., Paglia, A., & Üstün, T.B. (2001). Cross-cultural views on stigma, valuation, parity, and societal values towards disability. In T.B. Üstün, S. Chatterji, J.E. Bickenbach, R.T. Trotter II, R. Room, J. Rehm, & S. Saxena (Eds.). *Disability and Culture: Universalism and Diversity* (pp. 247–297). Seattle: Hogrefe & Huber Publishers.
6. Kelly, J.F. & Westerhoff, C.M. (2010). Does it matter how we refer to individuals with substance-related conditions? A randomized study of two commonly used terms. *International Journal of Drug Policy*, 3, 202–207