

## STIGMA AND SUBSTANCE USE DISORDER ( SUD)

### What is stigma?

- Stigma is a discrimination against an identifiable group of people, a place, or a nation.
- Stigma about people with SUD might include inaccurate or unfounded thoughts like they are dangerous, incapable of managing treatment, or at fault for their condition.

### Where does stigma come from?

- For people with SUD, stigma may stem from outdated and inaccurate beliefs that addiction is a moral failing, instead of what we know it to be – a chronic, treatable disease from which patients can recover and continue to lead healthy lives.

### How does stigma affect people with SUD?

- Feeling stigmatized can reduce the willingness of individuals with SUD to seek treatment.
- Stigmatizing views of people with SUD are common; this stereotyping can lead others to feel pity, fear, anger, and a desire for social distance from people with SUD.
- Stigmatizing language can negatively influence health care provider perceptions of people with SUD, which can impact the care they provide.

### How can we change stigmatizing behavior?

- When talking to people with SUD, their loved ones, and your colleagues, use non-stigmatizing language that reflects an accurate, science-based understanding of SUD and is consistent with your professional role.
- Because clinicians are typically the first points of contact for a person with SUD, health professionals should “take all steps necessary to reduce the potential for stigma and negative bias.” Take the first step by learning the terms to avoid and use.
- Use person-first language and let individuals choose how they are described. Person-first language maintains the integrity of individuals as whole human beings – by removing language that equates people to their condition or has negative connotations. For example, “person with a substance use disorder” has a neutral tone and distinguishes the person from his, her or their diagnosis.

### What else should I keep in mind?

- It is recommended that “substance use” be used to describe all substances, including alcohol and other drugs, and that clinicians refer to severity specifiers (e.g., mild, moderate, severe) to indicate the severity of the SUD. This language also supports documentation of accurate clinical assessment and development of effective treatment plans.
- When talking about treatment plans with people with SUD and their loved ones, be sure to use evidence based language instead of referring to treatment as an intervention.