

Destigmatizing Language Guide

Why our words matter:

- People using substances avoid seeking medical care due to concerns about being lectured or judged about their substance use.¹
- Health care providers are more likely to support punitive frameworks when people are described as “abusers”.³
- Patients’ perception of discrimination by health care providers predict whether or not patients remain engaged in treatment for substance use disorders.²
- Perceived stigma and discrimination among people use substances are associated with worse mental and physical health.⁴

What you can do:

- Use person-first language in all situations.
- Try to speak as specifically as possible; avoid broad generalizations.
- Avoid value-laden language.
- Note that patients may use different terms to refer to themselves/peers (“I am an addict”). As care providers, it is important to acknowledge each person’s identity while also striving to eliminate stigma from our language.

Replace the terms on the left with the terms on the right:

Instead of Saying	Try Saying
Addict/Abuser	Person with substance use disorder/Person living with substance use disorder/Person who uses drugs
Alcoholic	Person with alcohol use disorder/Person living with alcohol use disorder
Clean/Dirty Urine	Urine negative or positive for substance Substance detected or not detected Expected or unexpected result

Instead of Saying	Try Saying
Clean (person)	Person in recovery from substance use/Person in remission from substance use disorder or addiction
Criminal/Felon/Ex-Con	Person with justice involvement/Person with criminal legal system involvement
Drug Offender	Person arrested or prosecuted for substances
Fired/Terminated/Discharged	Guided to more appropriate treatment setting
Illicit	Criminalized
Manipulating	Attempting to have needs met
Medication Assisted Treatment (MAT)/Opioid Teplacement Therapy	Medications for opioid use disorder (MOUD) Medication for addiction treatment (MAT)
Nonadherent/Noncompliant	Not using as prescribed
Relapse/Slip	Resume use/Restart use/Recurrence of use
Strike/Deviation	Concern
Substance Abuse	Substance use (unhealthy or harmful use)/Substance use disorder (clinical diagnosis, meeting DSM-V criteria)

1. Banta-Green, C.J., Newman, A., & Kingston, S. Washington State Syringe Exchange Health Survey: 2017. Results. Seattle: Alcohol & Drug Abuse Institute, University of Washington, January 2018. <http://adai.uw.edu/pubs/pdf/2017syringeexchange-healthsurvey.pdf>
2. Brener, L., von Hippel, W., von Hippel, C., Resnick, I., & Treloar, C. (2010). Perceptions of discriminatory treatment by staff as predictors of drug treatment completion: utility of a mixed methods approach. *Drug and Alcohol Review*, 29(5), 491-497.
3. 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*, 21(3), 202-207.
4. Ahern, J., Stuber, J., & Galea, S. (2007). Stigma, discrimination and the health of illicit drug users. *Drug & Alcohol Dependence*, 88(2), 188-196.