The Language of Addiction 10/19/22

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Disclosures

•No conflicts of interest to disclose

Learning Objectives



- •Recognize the importance of using non-stigmatizing language for substance use
- •Recognize the terminology related to substance use recommended by the ONDCP

Office of National Drug Control Policy: Changing the Language of Addiction



EXECUTIVE OFFICE OF THE PRESIDENT OFFICE OF NATIONAL DRUG CONTROL POLICY Washington, D.C. 20503

January 9, 2017

MEMORANDUM TO HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES

FROM:

Michael P. Botticelli Director

SUBJECT:

Director
Changing Federal Terminology Regarding Substance Use and

Substance Use Disorders

Attached you will find *Changing the Language of Addiction*, a document addressing terminology related to substance use and substance use disorders. The document was developed through consultation with external research, policy, provider and consumer stakeholders, as well as in collaboration with Federal agencies through the OMB clearance process.

We encourage Executive Branch agencies to consider using this guidance in your internal and public facing communications to comport with current medical terminology of the *Diagnostic* and Statistical Manual of Mental Disorders (5th ed., American Psychiatric Association, 2013). The document is not a Federal regulation and does not change the statutory or regulatory definitions of terms or change any substantive or procedural rights under Federal law, to include the names of Federal Agencies.

We appreciate your support in this important endeavor and ask that you inform the Office of National Drug Control Policy (ONDCP) of planned or undertaken activities to adjust internal and public facing communications.

If you have any questions, please contact Sarah Wattenberg at ONDCP (202-395-6700; <u>swattenberg@ondcp.eop.gov</u>).

ATTACHMENTS Changing the Language of Addiction

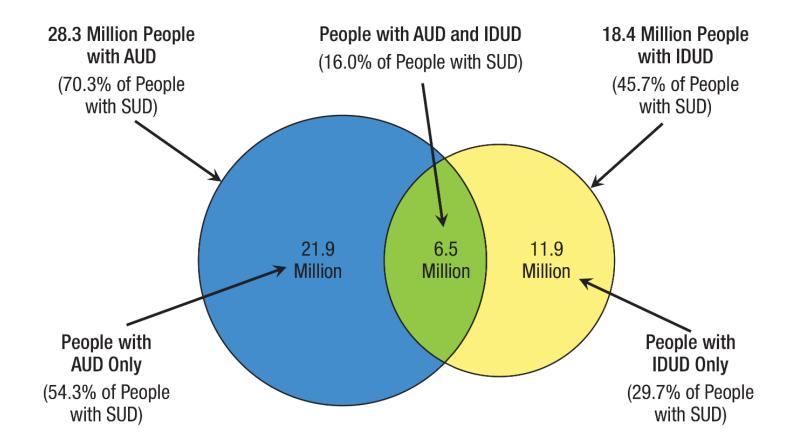
cc: The National Prevention Council

Background – Substance Use

- Substance use imposes a devastating health and emotional burden on individuals, families, and communities
- 21.2 million Americans 12 or older have a SUD
- More Americans die every year from drug overdoses than in motor vehicle crashes
- 89% of individuals in need of treatment for a SUD do not receive treatment

Substance Abuse and Mental Health Services Administration. (2019). Key substance use and mental health indicators in the United States: Results from the 2018 National Survey on Drug Use and Health (HHS Publication No. PEP19-5068, NSDUH Series H-54). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www.samhsa.gov/data/

Substance Use Disorder (Alcohol Use Disorder and Illicit Drug Use Disorder) in the Past Year



40.3 Million People Aged 12 or Older with Past Year SUD

https://www.samhsa.gov/data/release/2020-national-survey-drug-use-and-health-nsduh-releases

Background – the Brain

- Substance Use Disorder (SUD) is a chronic brain disorder
- •Addictive substances can lead to dramatic changes in brain function
- Changes in brain reduce a person's ability to control their substance use
- People can and do recover



Background – Stigma

What is stigma?

- When a person or group experiences prejudice or discrimination in society because of a particular characteristic
- May be intentional or unintentional, but the outcome is the same

Examples of stigma toward people who use drugs:

- Criminalization of substance
 use
- Being called a "junkie," "addict," etc.
- Being denied care in emergency departments, primary care, or pharmacies

Background – Stigma

- People with SUD are viewed more negatively than people with physical or psychiatric disabilities
- The terminology often used can suggest that SUD is the result of a personal failing/choice
- The term "abuse" is highly associated with negative judgments and punishment
- Even trained clinicians are likely to assign blame when someone is called a "substance abuser" rather than a "person with a SUD"

Kelly JF, Westerhoff CM. Does it matter how we refer to individuals with substance-related conditions? A randomized study of two commonly used terms. Int J Drug Policy. 2010 May;21(3):202-7. doi: 10.1016/j.drugpo.2009.10.010. Epub 2009 Dec 14. PMID: 20005692.

Substance Use Disorder

- •Diagnostic and Statistical Manual of Mental Disorders (DSM-5) replaced categories of substance "abuse" and "dependence" with single classification of **"substance use disorder"**
- Terms such as "drug habit" inaccurately imply that a person is choosing to use substances or can choose to stop

Person with a Substance Use Disorder

- Person-first language is the accepted standard for discussing people with disabilities and/or chronic medical conditions
- •Use of the terms "abuse" and "abuser" negatively affects perceptions and judgments about people with SUD
- •Terms such as "addict" and "alcoholic" can have similar effects

Person in Recovery

- Various terms used to label the substance using status of people "clean" and "dirty"
 - •Alternatives:
 - Instead of "clean"
 - "negative" (for a toxicology screen)
 - "not currently using substances" (for a person)
 - Instead of "dirty"
 - "positive" (for a toxicology screen)
 - "currently using substances" (for a person)
- "Person in recovery" refers to an individual who is stopping or at least reducing substance use to a safer level, and reflects a process of change

"Medication-Assisted Treatment"

- Terms "replacement" and "substitution" imply medications "substitute" one drug or "one addiction" for another - this is a misconception
- Medications used in treatment for opioid addiction do not result in a "high," they help to reduce opioid cravings and withdrawal
- "Medication-assisted treatment" (MAT)
 - •MOUD (Medication for Opiate Use Disorder
 - •Medication for a Substance Use Disorder
 - Medication for Addiction Treatment (MAT)

Why change our language?

- Reflects our conscious & unconscious biases
- Affects our **actions** and **interactions** with others

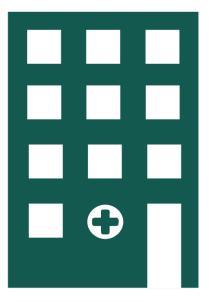
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Slide Courtesy of Erin Madden, PhD, MPH

Why change our language?

- Stigmatizing language has **downstream** effects
 - Affects treatment and other healthcare
 - Access to services
 - Adherence to treatments
 - Affects how the **larger community** sees people who use drugs
 - Employment
 - Housing
 - Other services





Slide Courtesy of Erin Madden, PhD, MPH

Evidence of language importance for people who use drugs

Across 134 studies,¹⁰ people who feel discriminated against are more likely to report:

- Stress
- Unhealthy behaviors
- Worse physical and mental health outcomes

Summary

- Language matters
- Preferred terminology:
 - Substance Use Disorder
 - Person with a Substance Use Disorder
 - Person in Recovery
 - Medication-Assisted Treatment
 - Medication for Addiction Treatment (MAT)
 - •MOUD (Medication for Opiate Use Disorder
 - •Medication for a Substance Use Disorder

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Questions?