

# Words Matter

10<sup>th</sup> Annual C. Everett Koop Symposium on  
Substance Use for Healthcare Providers

Reducing Behavioral Health Stigma

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# Weeds or Flowers?



*If you want to care for something, you call it a 'flower';  
if you want to kill something, you call it a 'weed'*

Don Coyhis, Founder White Bison & Wellbriety\*

\*Alliance of Advocates for Buprenorphine Treatment, 'The Words We Choose Matter'  
<http://www.naabt.org/glossary.cfm> , [www.naabt.org/language](http://www.naabt.org/language)

# Words

- Filter through which we share our realities
- Resonant associations create images & feelings
- Reinforce or change perceptions
  - Used well: inform, clarify, support & unify
  - Used carelessly: misinform, discourage, isolate, and shame\*

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Why do people denigrate respectful use of language by calling it political correctness?

- Avoid: **Addict, abuser, junkie, depressive, psycho, schizo, retard etc.**
- Preferred terminology: **Person with...addiction, the disease of addiction, a substance use disorder, bipolar disorder, intellectual disability etc.** These recognize the person has a condition rather than being defined by the condition.

# Embrace of Epithets

- Proud uses
  - Hi I'm Mary. I'm an addict.
  - The Tards
  - Internal use of ethnic, national, religious slang
- Affected persons may find such language helps
  - Take ownership of a condition
  - Identify with a group
  - Accept a reality
  - Take the power from others

- Avoid: **Abuse** (of substances)
  - No longer a drug use category in DSM V.
  - Has a blaming & pejorative quality.
  - Detracts from understanding of the medical and public health nature of misuse.
- Preferred terminology: **Drug use, unhealthy use, harmful use, risky use, use to... (get high, alter mood, etc)**. These are non-pejorative, descriptive terms.

- Avoid: **Clean, dirty**
  - Stigmatizes by associating signs of an illness (drugs in urine) with filth.
- Preferred terminology: (Referring to urine drug testing) **Negative, positive for (name the drug), expected findings, unexpected findings, substance-free.** These terms simply describe the findings as is medically appropriate.

- Avoid: **Habit or drug habit**
  - Implies that drug use resolution is simply a matter of will or choice
  - Undermines understanding of the biological components of these disorders,
- Preferred terminology: **Substance use disorder, alcohol or drug use disorder, addictive disorder, addiction**
  - Indicates the health-based nature of the problem.

- Avoid: **Addiction when physiologic dependence without addiction is present.**
  - Inaccurately labels the person as having a disease
  - Trivializes addiction when it occurs.
- Preferred terminology: **Physical dependence** (for physiological dependence that would result in a withdrawal syndrome, but without impaired control, craving, compulsive use and/or use despite harm)
  - Expected with long-term use of opioids, benzodiazepines, steroids and other drugs.
  - Withdrawal can be avoided with tapering.

- Avoid: **Replacement or substitution therapy**
  - Implies therapeutic use of medications such as buprenorphine or methadone perpetuates addiction and simply provide a move from illicit to licit use.
  - MAT together with psychosocial treatment helps resolve the compulsive and potentially harmful behaviors that define addiction.
- Preferred terminology: **Medication or pharmacologic treatment, opioid agonist therapy**
  - Accurately reflect the role of medications In treatment of opioid addiction.

- Avoid: Narcotic (when referencing opioid medication)
  - Legal parlance, “narcotic” refers to illicit substance including cocaine, marijuana, heroin and others.
  - Healthcare: refers to a narcotizing substance (eg numbs, sedates, stupefies);
    - when to treat pain, we are not intending to narcotize but to provide analgesia and improve function.
- Preferred terminology: **Opioid, opiate, opioid medication.**
  - Pharmacologic name for the powerful class of pain-relieving drugs (including oxycodone, morphine, hydrocodone and others) that act through opioid receptors.

# Resources & Bibliography

- ONDCP: <https://www.whitehouse.gov/ondcp/changing-the-language>, accessed 12-7-16
- Kelly, J. F., Wakeman, S. E., & Saitz, R. (2015). Stop talking 'dirty': Clinicians, language, and quality of care for the leading cause of preventable death in the United States. *American Journal of Medicine*, 128, 8–9.
- Alliance of Advocates for Buprenorphine Treatment, 'The Words We Choose Matter' <http://www.naabt.org/glossary.cfm> , [www.naabt.org/language](http://www.naabt.org/language)
- Leshner, Alan. 2001. The essence of drug addiction. Posted at [www.jointogether.org](http://www.jointogether.org), 2001.
- White, William. *The Rhetoric of Recovery Advocacy: An Essay On the Power of Language*, 2001.
- CSAT & SAMHSA. "Substance Use Disorders: A Guide to the Use of Language"
- Savage, SR, Opioids & Language, NHMS Newsletter, September 2016.

# Summary

- Terminology seems continuously in evolution
- Rarely is there universal agreement on exactly what's best
- Use of terms preferred by affected group is usually appropriate
- We all use language from time to time that has potential to hurt or anger: the point is to do our best to be aware and sensitive to others