Welcome!

The Power of Media

Changing the Narrative on Substance Use

Hosted by the Connecticut Alcohol and Drug Policy Council's Prevention Subcommittee
The Power of Media

*Changing the Narrative on Substance Use*

Stephen Holt, MD, MA, FACP, FASAM
Yale School of Medicine

Hosted by the Connecticut Alcohol and Drug Policy Council’s Prevention Subcommittee

Presentation prepared by Ladan Karim-Nejad, VCU School of Pharmacy
OBJECTIVES

• Describe the key aspects of substance use disorders
• Describe the adverse consequences of stigmatizing language
• Identify words and language that can be either stigmatizing, or destigmatizing.
• Identify resources to address substance use stigma
Media consumption has increased

Stigma negatively impacts addiction treatment

Challenging the stigma, encouraging positive action, and making a conscious effort to help people with substance use disorders is an important part of protecting the public.
Stigma is an attribute, behavior, or reputation that depersonalizes people.

WHO Study: Drug addiction was the most stigmatized condition in 14 countries.
Substance Use Disorder

Unhealthy use of alcohol, prescription drugs, or other substances.

Addiction
A treatable disorder that alters the inhibition and reward centers of the brain

The Four C's of addiction:

- Craving
- Control
- Compulsion
- Continued
Trauma occurs as a result of abuse, neglect, loss, disaster, war and other emotionally harmful experiences.

Research demonstrates a strong link between exposure to trauma and substance use.

SAMHSA, 2014
Approaches to Treatment

Harm reduction:
Any effort toward decreasing harms of substance use.
• Naloxone training/distribution
• Needle exchange programs

Barriers to treatment include:
• judgment/stigma
• internalized guilt and shame
• not knowing about services
• financial burdens
• services only available in English

• Medications
• Counseling
• Intensive Outpatient Programs
• Detoxification?
• Residential Treatment
Multiple Pathways of Recovery

• 12-step (AA, NA, CA, ACA, DRA, Women in Sobriety)
• Spiritual (Celebrate Recovery, Alcoholics for Christ, Refuge Recovery, White Bison)
• Secular (Life Ring, SMART)
• Wellness based (Yoga, Meditation, Qigong, Tai-Chi, etc.)
• Active Sober Community (Phoenix Multi-Sport, ROCovery Fitness, Fit2Recover, etc.)
• Online Recovery Supports (In the Rooms, Apps, Daily Affirmations, etc.)
Medications for Opioid Use Disorder

• Rationale
  – Cross-tolerance
  – Narcotic blockade

“These medications coupled with psychosocial support are the current standard of care for reducing illicit opioid use, relapse risk, and overdoses, while improving social function. However, limited access to providers and programs can create barriers to treatment.”
**Medication-based Treatment vs. Untreated Addiction**

“If we're just substituting one opioid for another, we're not moving the dial much.”*

<table>
<thead>
<tr>
<th>Parameters</th>
<th>Buprenorphine or methadone</th>
<th>Heroin, fentanyl, or prescription opioids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Route</td>
<td>Oral, sublingual</td>
<td>Intravenous, intranasal</td>
</tr>
<tr>
<td>Time to take effect</td>
<td>30 minutes</td>
<td>Immediate</td>
</tr>
<tr>
<td>Duration of action</td>
<td>24 – 36 hours</td>
<td>3 – 6 hours</td>
</tr>
<tr>
<td>Euphoria</td>
<td>Absent</td>
<td>Marked</td>
</tr>
</tbody>
</table>

*Tom Price, M.D., Director, Health and Human Services for 231 days...
Benefits of buprenorphine and methadone for opioid use disorder

Increased:
- Retention in treatment
- Social functioning

Decreased:
- Drug use
- Overdose death
- HIV transmission
- HCV transmission
- Criminal behavior

Endorsed by:
World Health Organization, White House Office of National Drug Control Policy, President’s Commission on Combatting Drug Addiction and the Opioid Crisis, Surgeon General, NIH, Substance Abuse and Mental Health Administration, National Governor’s Association, many others
From: **Comparative Effectiveness of Different Treatment Pathways for Opioid Use Disorder**


**Figure Legend:**

Probability of Opioid Overdose and Acute Care Use During the 12-Month Follow-up Period

CE indicates continuing education; MOUD, medication for opioid use disorder.
Do words matter to professionals?

516 mental health professionals read one of two vignettes and were asked to complete a questionnaire.

- substance abuser versus individual with a substance use disorder.
Yes, words matter to professionals!

• “Substance abuser” group was more likely to agree that:
  – The person was culpable
  – Punitive measures should be taken

Kelly, JF, Dow, SJ, Westerhoff, C. *Int J Drug Policy* 2010. 21 (3) 202-207
Do words matter to the public?

- 314 lay persons were asked to provide recommendations for two individuals.
- **substance abuser** versus **substance use disorder**.

Yes, words matter to the public!

Do words matter to the public?

• 2,065 participants were presented with vignettes of individuals with an opioid addiction that differed on gender (male/female) and language ("drug addict" or "opioid use disorder")

• Participants graded the individuals on responsibility, dangerousness, and negative emotions

"Addicts" were more responsible for their condition
"Addicts" were rated with more negative emotions of anger
Male "addicts" were more dangerous than males with "opioid use disorders"
  Male "addicts" were rated with the most negative emotion

Agreed that people with addiction are demonized in media.

A study from 2016 surveying 1,089 people on public attitudes toward addiction and recovery:

- 44% agreed that people with drug dependence are a burden to society.
- 26% would not want their kids playing with kids of someone with a history of drug dependence.
- 74% thought that medication is not a solution.
- 55% agreed that people with addiction are demonized in media.
Language affects how the public thinks about addiction and how people with addiction think about themselves.

Even when content may be using stigma-reducing terminology, titles may contain language to drive attention.
Use of non-medical terms perpetuate stigma
Terms can trigger responses that call upon IMPLICIT BIASES and perpetuate stigma.
Perpetuates Stigma

Junkie junkyard: Bloody heroin needles pile up at Manhattan subway station
Junkie junkyard: Bloody heroin needles pile up at Manhattan subway station

Overdose Deaths On The Rise, But Recovery Help Is Available

Perpetuates Stigma

Promotes Recovery
Through advocacy and outreach, other stigmatizing conditions have normalized terms like "person with schizophrenia" over "schizophrenic" or having an "eating disorder" than being a "food abuser"
THE ASSOCIATED PRESS STYLEBOOK
55TH EDITION

THE INDUSTRY’S BESTSELLING REFERENCE
FOR MORE THAN 30 YEARS,
ESSENTIAL FOR JOURNALISTS, STUDENTS, EDITORS
AND WRITERS IN ALL PROFESSIONS

2020–2022

FULLY UPDATED WITH MORE THAN 200 NEW AND REVISED ENTRIES

LANGUAGE IS CHANGING
Addiction is a treatable disease that affects a person's brain and behavior.

- *Addiction* is the preferred term.
- *Substance Use Disorder* is preferred by some health professionals.
- *Alcoholism* is acceptable for addiction to alcohol.
- Avoid words like *abuse* or *problem* in favor of *use* or *misuse*.
- Avoid words like alcoholic, addict, user, abuser, junkie, drunk or crackhead.
Stigmatizing or punitive language can be a barrier to seeking treatment.

Avoid describing patients as “clean”.

The term misuse can be helpful instead of abuse.
AP STYLEBOOK 2020 EXAMPLES

USE: Keene had trouble keeping his job because of alcoholism.

NOT: Keene had trouble keeping his job because he was an alcoholic.

USE: Yang joined other people with heroin addictions at the conference.

NOT: Yang joined other heroin addicts at the conference.
<table>
<thead>
<tr>
<th>RATHER THAN...</th>
<th>RATIONALE</th>
<th>USE...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addict, abuser, junkie, alcoholic</td>
<td>Dehumanizes and ignores the person with the condition</td>
<td>Person with (addiction, use disorder, alcoholism)</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>Associated with intentional and controllable improper use that</td>
<td>(drug, substance, alcohol) use disorder, substance misuse</td>
</tr>
<tr>
<td></td>
<td>elicits anger and blame toward the person with the condition</td>
<td></td>
</tr>
<tr>
<td>Clean, dirty</td>
<td>Implies a previous state of dirtiness with the condition</td>
<td>(positive/negative) sample, in remission, in recovery</td>
</tr>
<tr>
<td>Detox</td>
<td>Promotes the misconception that addiction can be treated by abrupt</td>
<td>In (remission, recovery, treatment)</td>
</tr>
<tr>
<td></td>
<td>abstinence and ignores the long-term nature of the condition</td>
<td></td>
</tr>
</tbody>
</table>
Addictionary by Recovery Research Institute

A comprehensive list of addiction terminology from A-Z. It offers a definition, resource for more information, stigma association, and alternative language.

**ADDICT**

*(Stigma Alert)* A person who exhibits impaired control over engaging in substance use (or other reward-seeking behavior, such as gambling) despite suffering severe harms caused by such activity. While this language is commonly used, in order to help decrease stigma associated with these conditions, it has been recommended to use “person first” language; instead of describing someone as an “addict,” describe them as “a person with, or suffering from, addiction or substance use disorder.”

*(Kelly, Saitz, & Wakeman, 2016; Kelly & Westerhoff, 2010; Kelly et al., 2010; Sholten et al., 2017)*

www.recoveryanswers.org/addiction-ary/
Final Notes to Think About

Use medically accurate terms for this medical condition

Language about a particular group should be determined by the group itself

Small steps can be taken to improve the existing practices and facilitate ongoing discussion

ASK:
• Have I used language that promotes or reduces stigma?

REMEMBER:
• Addiction is a medical, not a moral issue.

ALWAYS:
• Include a treatment and recovery resource, this encourages community and societal support.
THANK YOU

We appreciate the media for helping to spread accurate, balanced, and sensitive information regarding substance use disorders!

Recognizing implicit biases and continuously working to produce a better environment to discuss addiction is a multi-disciplinary effort.
Citations:


