Addiction Disorders and Dignity:

A Toolkit for Media Professionals



Lancaster County Recovery Alliance

lancastercountyrecovery.com

Opioid-related deaths alone have lowered the life expectancy of Americans. Many individuals die so young because **the vast majority of those with addiction disorders do not seek treatment or recovery support services** – or do so in the advanced stages of addiction.

1 in 10 Americans

— some 30.8 million people have a substance use or gambling disorder

Why the wait? Because of the stigma associated with addiction – specifically the public's perception that addiction is a *choice*, not an *illness*. Addiction disorders are the most negatively-viewed health issues – and that has a major impact on a person's chance for successful recovery. Evidence shows that when recovery from addiction is maintained for five years, 85% will sustain that recovery for life. Stigma, however, remains a major barrier to accessing resources and support over that 5-year period.

Stigma is defined as:

A mark of disgrace associated with a particular circumstance, quality, or person (*Oxford Dictionaries*).

A pervasive and damaging influence on the quality of services, treatment outcomes and therapeutic, professional and personal relationships (*The Anti-stigma Project,* 2012).

So let's analyze and reconsider what we are saying and writing about those affected by addiction. Public perception is strongly guided and influenced by media reports and the language contained in those reports. Journalists, we encourage you all to review the reporting you have done on the addiction epidemic. What has been its purpose? Did it have a positive impact on the community at large? Did it promote addiction recovery?

Moving forward, we ask you to consider projects and stories outside the scope of death and devastation, and more towards illustrating the reality that **recovery is possible** – and is the expectation, given the appropriate support and care. Messaging really can make a difference to people with addiction disorders, as well as their loved ones and communities.



People with Addiction Disorders

When we reinforce stigma:

People with addiction disorders are less willing to seek help and more likely to drop out of treatment or recovery support services.

When we promote recovery:

People with addiction disorders can reach out for services without fear, and therefore recover!

Healthcare Professionals

When we reinforce stigma:

Healthcare professionals may avoid patients with addictions or shorten their visits, leading to worse care.

When we promote recovery: Healthcare professionals have increased empathy for patients with addiction disorders and are more likely to see them as needing treatment, rather than incarceration.

Friends & Family

When we reinforce stigma: Family & friends are more likely to be blamed for their loved one's addiction, and to be socially shunned.

When we promote recovery: Family & friends feel less ashamed and are more likely to confide in others and to ask for support.

The General Public

When we reinforce stigma: The general public sees addiction as a matter of poor willpower and immoral choices.

When we promote recovery: The general public is more likely to support public health policies that fund treatment and recovery supports.

How we speak and write about addiction, and the images we use to illustrate the illness, have the power to increase or decrease stigma. The public's understanding of addiction as an illness has increased for decades, but this has *not* decreased stigma against those with addictions. Key to reversing negative beliefs, attitudes, and assumptions is the use of positive or neutral words and images by members of the media.

Addiction-disorders are the last frontier when it comes to using person-first language. We commonly use phrases such as "person with a learning disability" or "person with a mental illness" and would not dream of labeling someone as "slow" or "crazy." You will never see media images of someone in the midst of a heart attack or unconscious in a diabetic coma. Extending the same respect to those with addiction disorders sends a powerful message that lets individuals release shame and self-blame, permits health systems to treat without fear, encourages loved ones to unburden themselves and seek support, and people with addiction to recover.



Avoid using sensationalized images that encourage the public's moral outrage, as well as any image that may trigger cravings in someone in recovery:

- People in the throes of their illness (passed out, actively using drugs, drinking or gambling)
- Images of alcohol, drugs, pills, powders, paraphernalia (spoons, needles, razor blades) and gambling items (dice, cards, casino games)
- Instead, use positive or neutral images like used in this tool-kit.

Tips for Media Professionals

- When reporting on addiction disorders, include the perspective that they are treatable health conditions.
- Portray addiction recovery as normal and attainable, as opposed to an exception to the rule. Research shows most addictions result in recovery.
- Differentiate between active addiction disorders, treatment, and recovery.
- Look for stories of long-term recovery, as opposed to the newly-sober.
- Recovery stories should not focus on the dramatic details of past active addiction, but rather on the richness and rewards (contributions to family and community) of long-term recovery.
- Recovery stories should focus on not just individual recovery, but that of the family and the community.

STIGMA TEST

If you're unsure whether your work contributes to negative perceptions of addiction, use this simple test. If the subject were a different illness, such as diabetes, cancer, or hypertension:

- 1. Would you use this type of language?
- 2. Would you show this type of image of the person with the disease?
- 3. Would your words or images remind someone of how they felt during the worst times of their illness?

If you would address another chronic disease differently, chances are your work can be revised and improved.



June 2017 -The Associated Press Stylebook recommends person-first language when reporting on addiction.

Recovery Dialects		Support Group Meetings	In Public	Journalists
A	Addict		X	X
Alc	oholic		X	X
Substance Abuser		X	X	X
Opioid Addict Relapse			X	X
			X	X
Medication Assisted Treatment		X	X	X
Medication Assisted Recovery				
Person w/ a Substance Use Disorder				
Person w/ an Alcohol Use Disorder				
Person w/ an Opioid Use Disorder				
Long-term Recovery				
Pharmacotherapy				

Language matters, but can change depending on the setting we are in. Choosing when and where to use certain language and labels can help reduce stigma and discrimination towards substance use and recovery.

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