



WA  CP



# How We Speak Matters: Undoing Stigmatizing Language

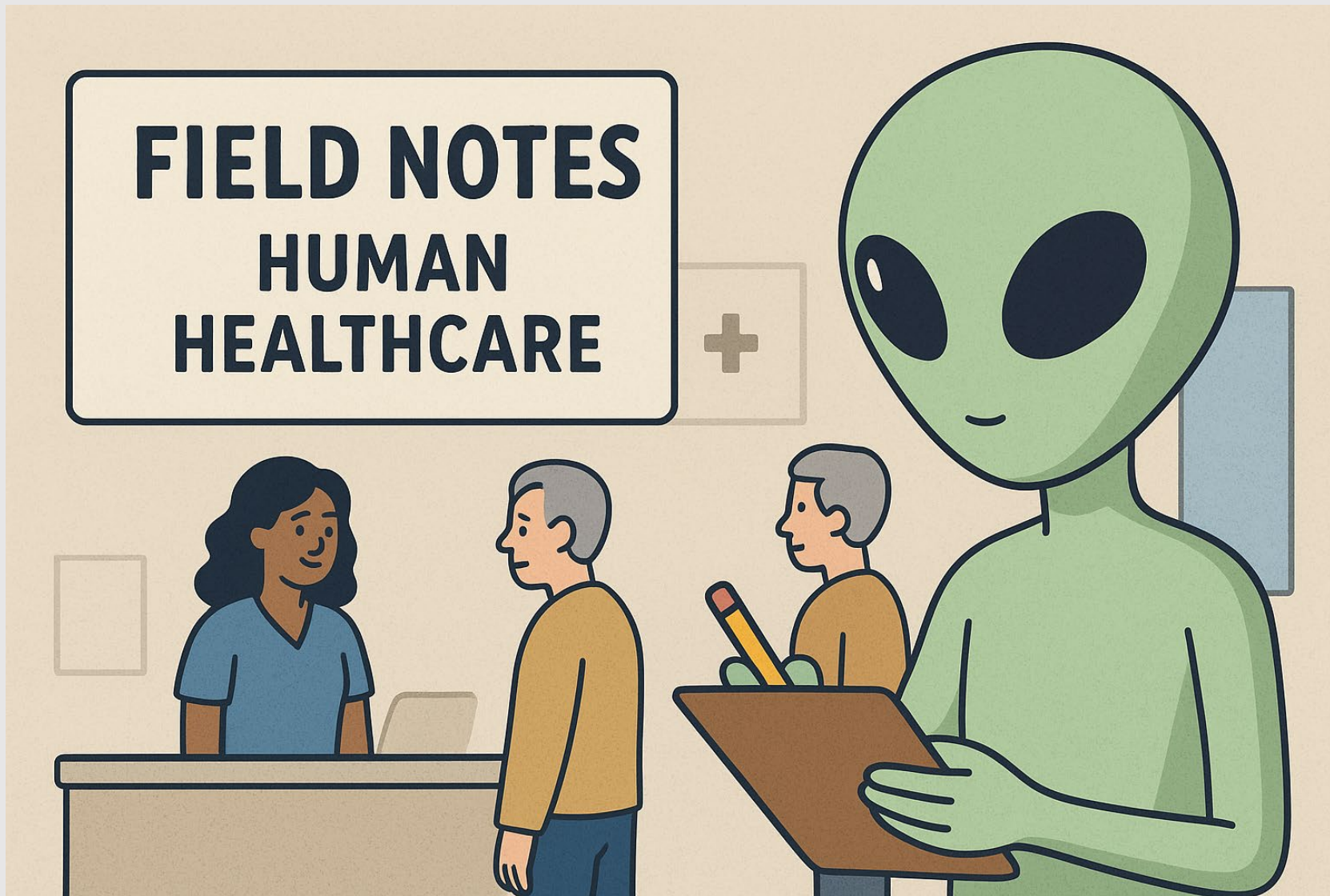
**Andrew J. Schreier**

ICS, CSAC, LPC, BACC, ICGC-II  
Director of Clinical Services  
(Wisconsin & Minnesota)

“Stick and bones may break my bones;  
but **words shall never hurt me.**”

STICKS+  
STONES

**FIELD NOTES  
HUMAN  
HEALTHCARE**

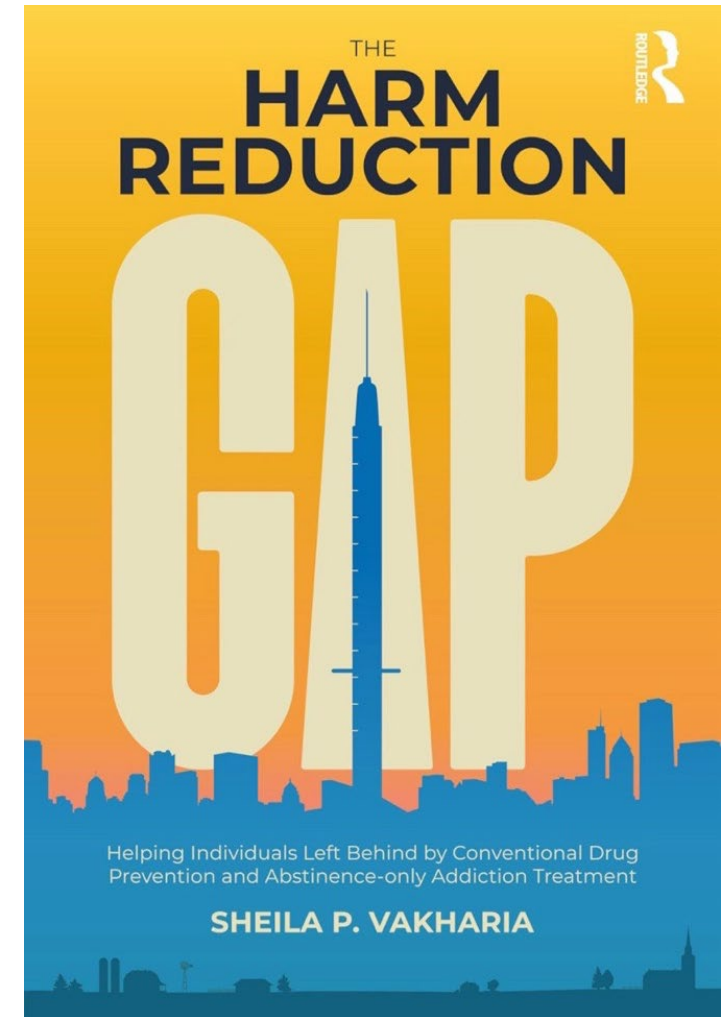


- Humans are obsessed with being clean.
- If they are dirty, they are punished.
- They describe some as frequent flyers, though no one flies.
- They call lack of progress noncompliance when people don't do what's expected.
- They label others addicts and junkies and believe this helps motivate change.
- They say they call it a medical condition, but we are not finding this language among other medical conditions we observed being treated.



# “A **Note** on Language”

- Words **matter**. How we use them can reveal our values, priorities, and perspectives.
- Language is so **powerful** that it can change how we view ourselves and others.
- It can shift our **understanding** of current circumstances and possible solutions.
- Words have **weight** and carry their own connotations, so they can also mean different things to different people.



# What is **stigmatizing** language?

- Labels People by Their Condition
- Implies Moral Failing or Blame
- Uses Negative or Dehumanizing Terms
- Creates Barriers to Care and Support



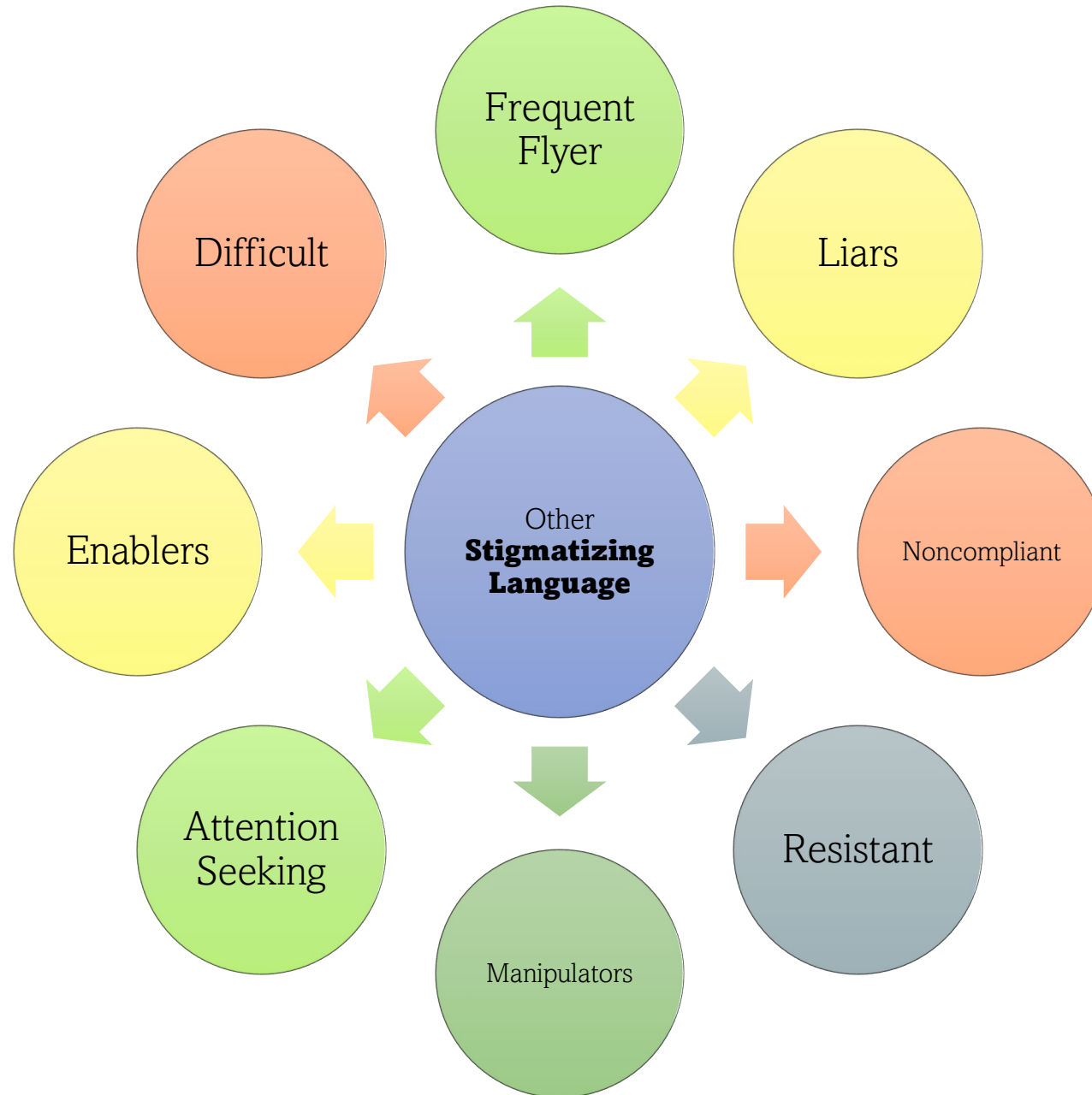
# Language Related to **Helping Profession**

Area	Stigmatizing Terms	Cultural View
Substance Use	“junkie”, “addict”, “drunk”, “abuser”, “clean”, “dirty.”	selfish, lazy, served no purpose, criminal, and dirty.
Mental Health	“crazy”, “psycho”, “loony”, “nutty”, “mentally ill” “insane/sane”	lazy, does not try hard enough, looking for attention, or even dangerous).
Gambling	“Compulsive”, “pathological”, “irresponsible gambler”	irresponsible and greedy
Criminal Justice	“felon,” “convict,” “offender” and “criminal”	compound punishment and ultimately harm by reducing people to their worst moments
Violent*	“I’ll take a stab at it.” “You are killing it.” “I bombed it.”	

“The words become **grenades** – strategically spoken at times in order to do the most **damage.**”

**Marissa Angerer**

Shatterproof Ambassador



## Maybe your client isn't "non-compliant." Maybe:

- they're not feeling safe with you
- they're not feeling safe in general
- you're not hearing their concerns
- the modality you're using is more harmful  
than helpful
- there's no flexibility to your approach
- you haven't earned your client's trust
- you're addressing the wrong thing
- you're re-enacting oppression
- you're not the best fit for them

@INTERSECTIONALRECOVERY

# We're **fluent** in using language, but largely **untrained** in examining it

- Most of us learn:
  - how to speak so we're understood
  - how to follow grammar rules
  - how to sound “professional,” “clinical,” or “normal”
- But we're rarely taught:
  - how language *creates meaning*, not just describes it
  - how words carry power, values, and assumptions
  - how systems (medicine, criminal justice, media, policy) **train us** to speak in ways that feel neutral but aren't
- We're socialized into a language **before** we're given tools to question it

- When you hear the word **addict**, notice what comes to mind.
- For most people, that word doesn't come with a neutral image.
- It comes with assumptions about responsibility, control, intelligence, and intent.
- Now here's the part we don't always talk about: the language we use doesn't just describe behavior, it quietly decides who gets empathy, who gets help, and who gets written off.
- Today is about how the words we create impact—often before we ever meet the person.

Does everyone agree on what a **penguin** is?





“Why do we say someone *has cancer,*  
but someone *is an addict?*”

# Ever wonder why some diagnoses lead to **identity labels** while others don't?

- The best reference classification is ICD-11, which contains ~**17,000+** diagnostic categories.
  - Conditions with identity labels (<1%).
- The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition contains:~**157** diagnostic categories (depending on how subtypes are counted).
  - Roughly **10–15** diagnoses have strong identity language.



# Why are **multiple words** used to describe the same thing?

- “Shooting Up: A Memoir of Love, Loss, and Addiction.”
  - *Yonkis*, addict, junkie?
  - Recovering or former addicts?
- Writers are often taught: “Don’t repeat the same word too much”
  - Use synonyms to keep writing interesting
  - So they rotate terms like: addict → user → junkie → abuser → dependent person
- The problem:
  - These are not neutral synonyms.
  - They carry very different: meanings, levels of stigma, clinical accuracy, emotional weight
- If they do mean different things: define them clearly
- If they don’t: why are we switching between them?

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**NEWS**

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**Problem gambling  
can be a damaging  
addiction**

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<b>Problem gambling</b>	<b>Gambling disorder</b>
<b>Compulsive gambler</b>	<b>Pathological gambler</b>

**Problem gamblers**

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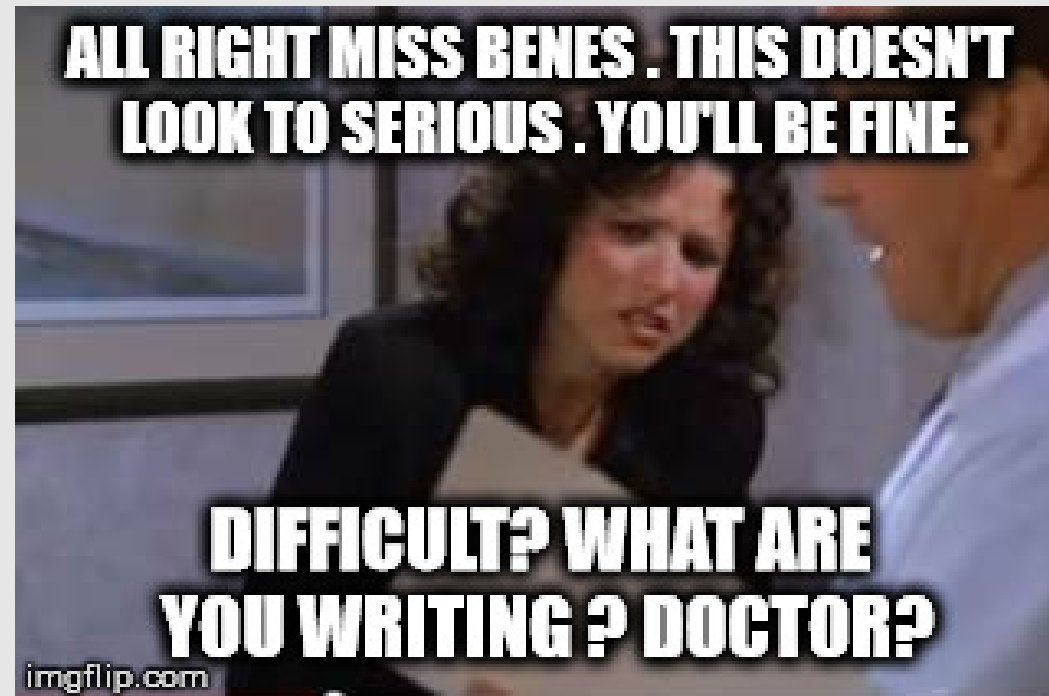
# The Pattern & Ontological Collapse

A condition is much more likely to become an **identity label** if it meets **three or four of these criteria**:

Factor	Explanation
Behavior affects others	Symptoms change how others experience the person
Perceived personal responsibility	Society believes the person has control
Chronic or lifelong	The condition is seen as permanent
Moral or social judgment	The condition violates social norms

- The disease stops being something someone **has** and becomes something someone **is**.
- Language reveals what society secretly believes about a condition.

What we say matters; but what about what we **write** (document)?



## **Same person. Same facts.**

“Chris is an addict. He relapsed three times this year, can’t stay clean, lost custody of their kids, and dropped out of treatment again. Chris is a revolving door who leaves treatment when it’s not suitable for him and returns when he wants to. Honestly, people say he just don’t want it bad enough.”

“Chris is a person living with a substance use disorder. He experienced several recurrences of use this year — a reminder of how chronic and challenging recovery can be. He’s faced immense loss, including temporary separation from his children. With all of this going on he continues to show up, still trying.”

**But who do you feel more connected to?”**



How does language cause this kind of **damage**?

# Attempting to Gain Community Support for **Substance Use Treatment**

“With overdose data that has been collected and the current lack of providers in the area we want to make access to treatment for those who are **drug addicts** to get the help they need.”

“With overdose data that has been collected and the current lack of providers in the area we want to make access to treatment for those who are **lazy and dangerous** to get the help they need.”

# Requesting Mental Health **Services**

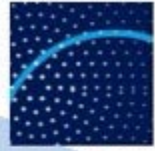
“Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act, and helps determine how we handle stress, relate to others, and make choices. We need more services for those who are **mentally ill.**”

“Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act, and helps determine how we handle stress, relate to others, and make choices. We need more services for those who **don't try hard enough** and are **looking for attention.**”

# Damage Caused By Stigmas

- Prevents People from Seeking Help
  - Many individuals with **hide their struggles** due to fear of judgment, making them less likely to reach out for support.
  - Terms like “*junkie*,” “*crazy*,” or “*weak*” suggest the person is **just bad choices** rather than a diagnosable disorder.
- Reinforces Myths About Substance Use, Mental Health, Gambling, etc.
  - Stigma often stems from **misconceptions** like:
    - “*If they really wanted to stop, they could.*”
    - “*Only weak-minded people become addicted.*”
- Shifts the Focus Away from Systemic Issues
  - Stigmatizing language tends to focus on the individual rather than the **wider factors that contribute to issues.**





# Mental Health and Substance Use Recovery Conference 2025

Poll question  
**Do you believe the words we  
use can directly influence  
treatment outcomes or  
recovery experiences?**

My response

Yes, absolutely



89 %

Somewhat



9 %

Not really



0 %

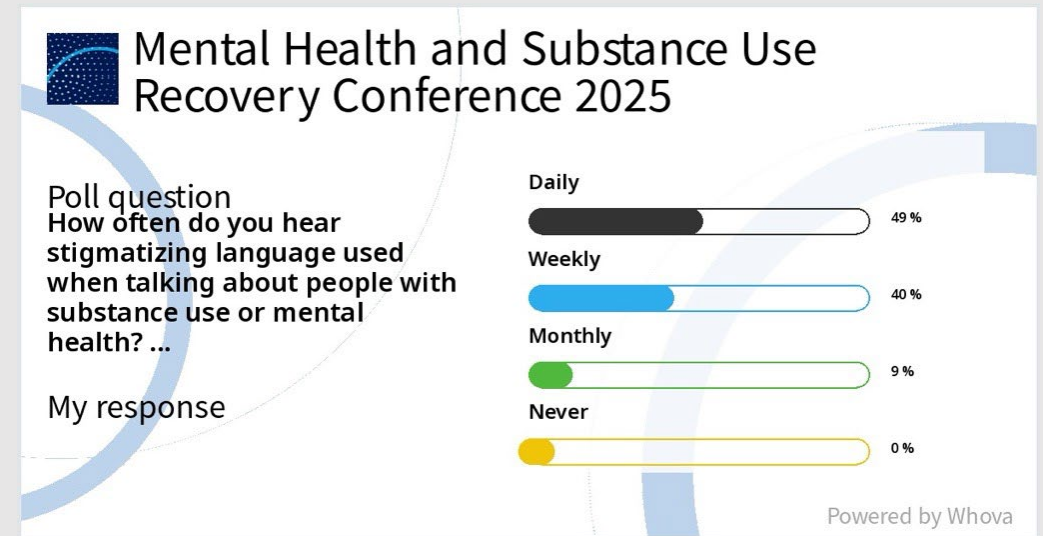
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Powered by Whova

# How **often** do we come across stigmatizing language?



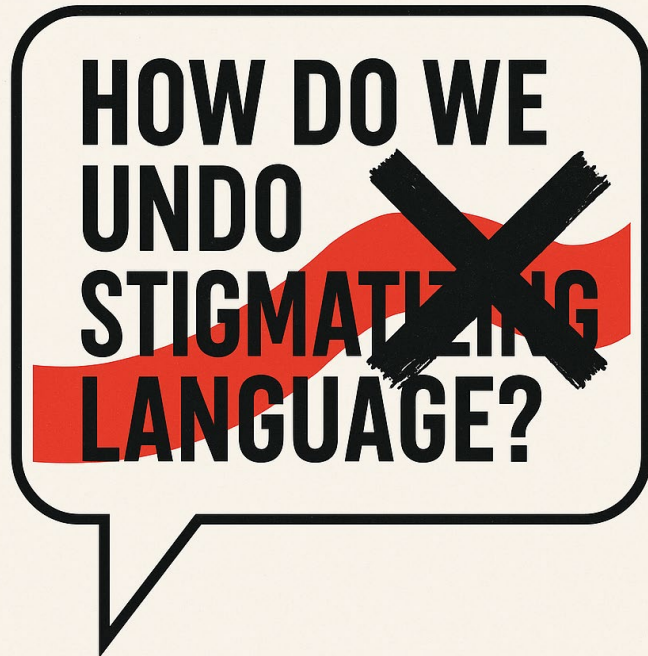
“Sticks and stones may break my bones, but words can also **hurt** me. Stones and sticks break only skin, while words are **ghosts that haunt** me. Slant and curved the word-swords fall, it pierces and sticks **inside** me. Bats and bricks may ache through bones, but words can **mortify** me. Pain from words has left its' scar, on mind and heart that's tender. Cuts and bruises have not healed, it's words that I **remember.**”

— **Ruby Redfort**

# What if the **individual(s)** uses that language?

- People have the choice to how they refer to themselves; we should respect but **not emulate**.
- Some communities intentionally reclaim identity labels.
  - People in Alcoholics Anonymous often introduce themselves as “alcoholic.”
  - Many people with Autism Spectrum Disorder prefer “autistic person” rather than person-first language.
- The same language can feel:
  - Stigmatizing in clinical settings
  - Empowering in peer communities
- Reclamation vs. Appropriation
  - This is an act of self-definition.
- Professionals and others should not casually adopt these labels.
- Best practice: respect how individuals identify themselves while using person-first language when referring to others.



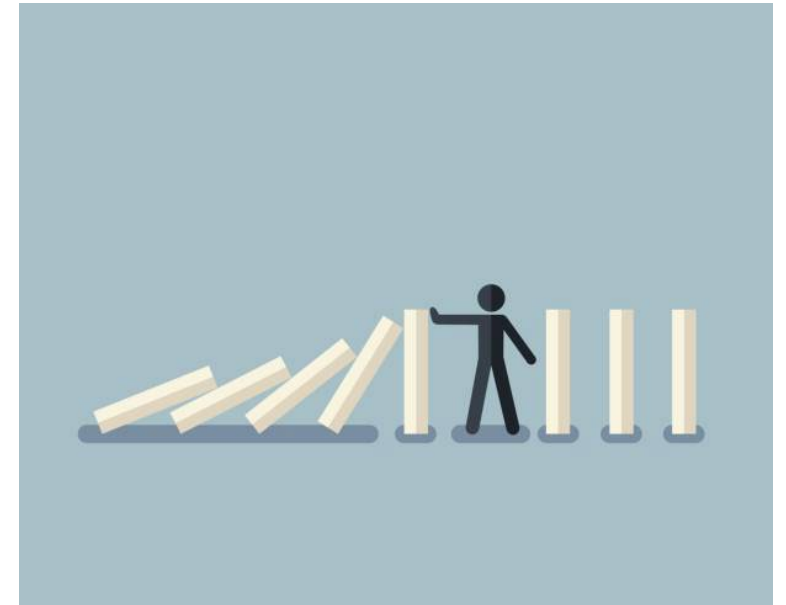


## UNDOING STIGMATIZING LANGUAGE

- Identify levels of intervention
- Explore reluctance
- Identify areas where we have stigmatizing language currently
- Speak up
- Limit or minimize use of certain language
- Replace with person-centered language
- Remove from documentation
- Adopt higher standards for speaking engagements
- Advocate for media representation

# Interventions

- Contact
  - Creating opportunities to interact with individuals with the stigmatized condition.
- Education
  - Presenting information to counteract stereotypes and correct misunderstandings of the stigmatized condition.
- Advocacy
  - Emphasize societal causes of stigmatized conditions and shift focus from the individual to society.

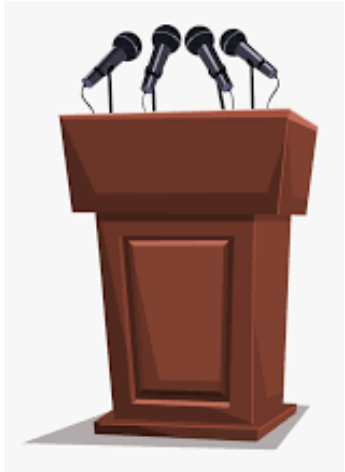


# Why are some people **resistant** to change their language? *reluctant*

- Constantly reiterated in medical, textbooks, books, podcast, etc.
- Part of how people identify themselves or their progress
- Names of organizations and part of policies/procedures
- Lost connection with culture and communities
- Activates uncomfortable feelings of using/having used stigmatizing language



# How Language **Shows**



- How we talk about people will be heard by members of the community when **presenting** or doing **outreach**.
- The language we use will be reflected in **policies** and **procedures**.
- How we refer to individuals will be read in **documentation** and **charts**.
- The way we treat them will be shared among colleagues during **staffings** and **team meetings**.
- Language is reflected in the **names** of agencies and organizations.





- “I know it is common to refer to individuals as an addict, but a person-first centered approach would be **person with a (substance, gambling) use disorder.**”
- “Historically, we may refer to this individual as noncompliant or resistant, but it is better to say **nonadherent** or **reluctant.**”
- “Instead of saying crazy it is more humane to say **experiencing issues with mental health.**”
- “We used to diagnose people as “pathological gambler.” We would identify them today as a **person diagnosed with gambling use disorder.**”
- “I still catch myself saying relapse and am working towards saying **return use.**”
- “All urine is dirty; when it comes to drug screens we refer to it as **positive** or **negative.**”

“If you are not comfortable saying it to the person you are helping, we should not feel comfortable saying it amongst each other.”

# Limit or Minimize the Use of Certain Language

- Certain language is regulatory requirements and part of treatment modalities.
- Example: Relapse
- Removing the word “relapse” does not interfere with the ability to help someone prevent a return to use.
- Alternative Languages:
  - relapse = **recurrence of a use disorder**
  - one time or short-term period of use = **episode**
  - **return to substance use/gambling**
- Instead of *Relapse Prevention Group* use “**Prevention Group**” or “**Recovery Management.**”

When the word “relapse” is used it often results in questioning a person’s character. When you use “return to use” the focus is more on **what happened.**

# The **differences** between stigmatizing and person-centered language?

Aspect	Stigmatizing Language	Person-Centered Language
Focus	Defines a person by their condition or behavior	Recognizes the person first, separate from their condition.
Tone	Judgmental, negative, or moralizing	Neutral, respectful, and non-judgmental
Impact	Reinforces stereotypes, creates shame, and discourages help-seeking	Encourages support, dignity, and empowerment
Perspective	Assume blame or personal failure	Recognizes complex factors like biology, trauma, and environment
Connotation	Often carries negative or derogatory meanings	Use clinical, supportive, or recovery-oriented language

# Removing Language from Documentation

## Watch Your Words

How do you view someone with an opioid use disorder (OUD)? What words would you use to describe that person? What types of emotions does that person generate from you?



Avoid		Use Instead	Because
Addict User Crackhead Junkie Methhead	Substance or drug abuser Tweaker	Person with opioid-use disorder (OUD) Person with substance use disorder (SUD)	The change shows that a person "has" a problem, rather than "is" the problem and that someone is not defined by their addiction.
Former addict Reformed addict		Person in recovery or long-term recovery (or remission)	The terms avoid elicit negative associations, punitive attitudes, and individual blame.
Abuse	For illicit drugs: Use For prescription medications: Misuse, used other than prescribed		The term "abuse" is found to have a high association with negative judgments and punishment. Legitimate use of prescription medications is limited to their use as prescribed by the person to whom they are prescribed. Consumption outside these parameters is misuse.
Opioid substitution Replacement therapy		Medications for Opioid Use Disorder (MOUD) Medication-Assisted Treatment (MAT) Pharmacotherapy	It is a misconception that medications merely "substitute" one drug or "one addiction" for another; it's more accurate to say they replace endogenous endorphins, which are deficient after heavy drug use.
Clean		In Recovery Sober	Implies those who experience are dirty.

SOURCE: NATIONAL INSTITUTE ON DRUG ABUSE

[communitymedicalservices.org](http://communitymedicalservices.org)

Please refrain from bringing weapons, alcohol, and any drugs (both illicit and prescription) on the premises.

Thank you

Family and Relationships (for CMS clients) #OurCausesOurCalling

Substance use is a family disease, it affects everyone in the family emotionally, psychologically, financially, and socially. Rebuilding relationships and getting out of unhealthy patterns can be difficult, but it is possible!

### Building Relationships

**Learn Healthy Communication Skills**

- Be the model for your family by practicing healthy communication.

**Reach Out to the People You Want to Reconnect With**

- You might have to make the first move. Set realistic expectations for the first meeting. Family/friends may be guarded due to past hurts.

**Listen to and Validate Others' Emotions/Experiences**

- Your family members may be feeling angry, fearful, or hopeless, even though you are doing well in your recovery. Their emotions/experiences are still valid even if they are different than yours.

**Let Go of the Past**

- Once past issues have been addressed to the satisfaction of everyone involved, don't keep bringing them up. You can't change the past, but you can change the future.

**Rebuild Trust**

- Rebuild trust by following through on promises and commitments. Be honest and direct. If you lie, correct yourself in the moment, or as soon as possible, this will help others see your making changes.

**Be Patient**

- Family/friends may not like the change, especially if they are still in active use. Accept that you cannot change others and things may take longer than you like.

Community | Connecting Recovery | Healing Communities

CONNECTING RECOVERY | HEALING COMMUNITIES

### Wisconsin Client Handbook

Hours of Operation:

Fond Du Lac: Monday – Friday 5:00 am – 1:00 pm, Saturday and Sunday 6:00 am – 10:00 am  
 Madison on Broadway: Monday – Sunday 7:00 am – 6:00 pm  
 Pewaukee: Monday – Friday 5:00 am – 12:00 pm, Saturday and Sunday 6:00 am – 10:00 am  
 South Milwaukee: Monday – Friday 5:00 am – 12:00 pm, Saturday and Sunday 6:00 am – 10:00 am  
 West Allis: Monday – Sunday 4:00 am – 6:00 pm  
 Phone calls received after hours are redirected to a 24-hour service number.



Connecting Recovery | Healing Communities

Language Matters



The words we use matter. We ask everyone who is part of the conference to use person-centered, recovery-affirming language whenever possible. Disrespectful, discriminatory, or demeaning speech directed at others is inconsistent with the values of this conference and will not be tolerated.

# IPGGC Provider **Training Guidelines**

- The use of person first/nonstigmatizing language
- Potentially triggering gambling/gaming images should not be used without specific educational purpose
- Current diagnostic terminology should be used, ie., gambling disorder rather than pathological gambling, unless there is a specific reason such as quoting a source that uses pathological gambling.

Language Matters:

Using Non-Stigmatizing, Inclusive, and Person-First Language

THESE HURT 	THESE HELP 
<b>Substance Use</b>	
substance abuse	substance use/misuse
alcoholic	person with alcohol use disorder
addict/junkies/druggies/users	person with a substance use disorder
battling/suffering from an addiction	person living with a substance use disorder
former addict	person in recovery
stayed clean	maintained recovery
dirty/clean drug screen	positive/negative urine drug test
relapse	return to use/recurrence
non-compliant/bombed out	chooses not to at this point
needle exchange	syringe services
addicted mom/dad	caregiver with a substance use disorder
addicted baby	baby with prenatal exposure to substances/ baby experiencing neonatal abstinence syndrome (NAS)/neonatal opioid withdrawal syndrome (NOWS)
medication is a crutch	medication is a treatment tool
<b>Incarceration</b>	
prisoner/inmate/detainee/offender	person who is incarcerated/person who is in contact with, involved in, or interacting with the criminal legal system
convict/felon/criminal/thug	person with convictions
<b>Mental Health</b>	
crazy/insane/psycho/mentally ill/ emotionally disturbed	person with a mental illness/person with a mental health condition

Adapted and updated 3/28/22 from National Council for Behavioral Health. Toolkit for the Surgeon General's Report on Addiction, <https://www.thenationalcouncil.org/surgeon-general-toolkit/language-matters/>

**Terms that may be okay to use with some populations**      **Terms that are inclusive to a variety of populations and experiences**

Inclusive language is a way of acknowledging and respecting the diversity of peoples' bodies, genders, relationships, and experiences. Using inclusive language can support people to feel safe within the health system or community, and acknowledges who they are and what they have experienced.

<b>Pregnancy and Parenting</b>	
pregnant women/mother	pregnant person/birthing people/parent
breastfeeding	chest feeding, body feeding
mothering/fathering	parenting/caregiving
husband/wife	partner/spouse
fetal death, fetal demise	pregnancy loss

Adapted and updated 6/13/23 from National Institutes of Health: Inclusive and Gender-Neutral Language, <https://www.nih.gov/nih-style-guide/inclusive-gender-neutral-language>; and World Health Organization, Newsroom Spotlight, Why we need to talk about losing a baby, <https://www.who.int/news-room/spotlight/why-we-need-to-talk-about-losing-a-baby>

# Media Representation & Portrayal

- People are not a spectacle, a pet project, a scoop, or an advertisement. They are **PEOPLE**.
- Recording moments of consumption, congregation, intoxication, withdrawal, shame, etc. for the sake of “raising awareness” or “documenting the crisis” (while legally valid), are morally bankrupt.
- Peoples’ lives become weaponized against them.
- Stories need to be told; but they need to be shared on the person’s terms and deserve media integrity.



“Does this mean I can’t say anything?”

“Am I not allowed to use any words?”



“When was the last time I got into a physical altercation?”

"Changing the language we use around substance use, mental health, and gambling is not just about being politically correct. It's about creating a **path to healing**. Many of us have used stigmatizing language for a long time, often without realizing its impact. But when we shift our words, we **shift perceptions**, and that can **change everything** for someone seeking care. By making the effort to use nonjudgmental, person-first language, we create spaces where people **feel seen, valued, and supported**; rather than shamed or defined by their struggles. Small changes in how we speak can lead to big changes in how people **experience treatment, recovery, and hope.**"

# **Commit** to Undoing Stigmatizing Language

- “I commit to noticing the words I use and choosing better ones when I can.”
- “I may not change every word overnight, but I can start with one.”
- “I commit to replacing at least one stigmatizing phrase in my daily language with something more respectful.”
- “I’ll pause before I speak and ask, ‘Would I use this word if the person were in the room?’”
- “I commit to progress, not perfection and to helping others grow in the same way.”
- “Each word is a choice. I commit to making more of them count toward dignity and respect.”



ANY  
QUESTIONS?

# Andrew J. Schreier

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## Our Mission

Our mission is to help those who are suffering from substance use disorders. We consider these people our patients, and our singular aim is to help them heal. We're proud that our clinics provide our patients an environment that is free of judgment and condescension and we're steadfast in treating everyone with the utmost dignity and respect.

## Our Vision

Leading the change to eliminate the consequences of substance use disorder in our communities.



## Our Values

- We see challenges as opportunities to demonstrate initiative.
- We listen to and honor the reality of those we serve.
- We are evangelists for practices grounded in science and evidence.
- We value people who are passionate about making an impact.

# Additional Resources for Changing Language

- Addiction Language Guide (Shatterproof):  
<https://www.shatterproof.org/sites/default/files/2023-02/Stigma-AddictionLanguageGuide-v3.pdf>
- Building Knowledge of Stigma Related to Gambling and Gambling Harms in Great Britain:  
<https://www.gambleaware.org/sites/default/files/2022-07/GambleAware%20Stigma%20Final.pdf>
- Language Matters in Mental Health: <https://hogg.utexas.edu/wp-content/uploads/2022/03/Language-Matters-FINAL.pdf>
- What Words We Use – and Avoid – When Covering People and Incarceration:  
<https://www.themarshallproject.org/2021/04/12/what-words-we-use-and-avoid-when-covering-people-and-incarceration>
- “Words Matter” when it comes to substance use – do images matter too? <https://www.recoveryanswers.org/research-post/words-matter-substance-use-do-images-matter/>

# Word Replacements – Substance Use

Instead of	Say This
Junkie, Addict, Drunk, User, Abuser	Person with a substance use disorder (SUD)
Addicted to...	Has a substance use disorder (SUD)
Alcoholic, Drunk	Person with alcohol use disorder (AUD)
Clean	Substance-Free
Clean (toxicology)	Testing negative for substance use.
Dirty	Person who tests positive for substance use.
Dity (toxicology)	Testing positive for substance use.
Ex-addict/former addict	Person in recovery or person in long-term recovery
Drug Addicted Infant Addicted Baby Born Addicted	Baby with neonatal opioid withdrawal/neonatal abstinence syndrome; Newborn exposed to substances.
Relapse, Lapse, Slip	Returned to substance use Resume or experienced a reoccurrence Episode

“Language has an impact – it influences the way people feel, the way they think, the decisions they’re likely to make. We’re just asking people to modify the type of language they use so that we can set people up in our systems for **success**.”

Robert Ashford

# Word Replacements – **Mental Health**

“If thought corrupts language, language can also corrupt thought.”

George Orwell

Instead of	Say This
Successful suicide	Died by suicide
Unsuccessful suicide	Suicide attempt
Unsuccessfully attempted suicide	Attempted suicide
Trauma victim	Trauma survivor
That person is crazy	Person seems to be distressed Person seems to be experiencing mental health challenges
That is nuts	That is interesting
Insane/disturbed	Individual with a mental health disorder/diagnosis.
Mental illness	Person living with a mental health challenge or person with a mental health disorder/diagnosis.

# Word Replacements – **Gambling**

Instead of	Say This
Problem Gambling Pathological Gambling Gambling Addiction Gambling Addict Irresponsible Gambler Compulsive Gambler Personality Gamblers Relief and Escape Gamblers Actions Gamblers	Person with gambling disorder. Person experiencing problems with gambling. Problematic gambling.
I bet...	I imagine... I think the likelihood...
The hand you are dealt.	The experiences you are having.
Let's just roll the dice.	Let's put ourselves out there.



# Word Replacements - **Violent Language**

Instead of	Say This
We're going to pull the <b>trigger</b> .	We're going to <b>proceed</b> .
I'll take a <b>stab</b> at it.	I'll take the <b>first pass</b> at.
Did we jump the <b>gun</b> ?	Did we <b>start too soon</b> ?
It'll bite the <b>bullet</b> .	I won't <b>avoid</b> it any longer.
That'll <b>kill</b> two birds with one stone.	That'll <b>feed</b> two birds with one scone.
What's the <b>deadline</b> ?	What's the <b>due date</b> ?
We must pick our <b>battles</b> .	We must choose our <b>opportunities</b> .
Can you <b>shoot</b> me an e-mail?	Can you <b>send</b> me an e-mail?
That was <b>overkill</b> .	That was a <b>bit excessive</b> .
I <b>bombed</b> the presentation.	I didn't <b>do my best</b> .

Instead of	Say This
Let's just roll with the punches.	Let's just move <b>forward</b> .
We can <b>soften the blow</b> by...	We can make it a <b>little easier</b> by...
I'm going to take a <b>shot in the dark</b> .	I'm going to take a <b>guess</b> .
Let's not <b>beat a dead horse</b> .	Let's not <b>focus on that</b> anymore.
I was <b>blown</b> away by the presentation	I was <b>impressed</b> by the presentation.
I was <b>kicking</b> around an idea.	I was <b>thinking through</b> an idea.
He's a <b>straight shooter</b> in meetings.	He's <b>pretty direct</b> in meetings.

# Word Replacements – **Criminal Justice**

<b>Instead of</b>	<b>Say This (people/person)</b>
Felons	Convicted of felonies
Criminals, Convicts	Convicted of crimes.
Offenders or Perpetrators	Who have committed offenses.
Defendants	Accused of a crime.
“Worst of the worst”/Violent Offenders	Who have committed serious offenses.
Nonviolent Offenders	Who have committed less serious offenses.
Ex-Cons	Who have been incarcerated.
Parolees	On parole.
Sex Offenders	Convicted of a sex crime.
Juveniles	Children, young people.
Inmate	Who are incarcerated.

“Calling me inmate, convict, prisoner, felon or offender indicates a lack of understanding of who I am, but more importantly what I can be.”

Eddie Ellis, a formerly incarcerated advocate and founder of the Center for NuLeadership on Urban Solutions



“First time, huh?”

“It’s okay if you’re not clean.”

“We just need to how dirty.”

## APA – Guidelines for Non-Stigmatizing Language

APA explicitly discourages terms like “*clean*” and “*dirty*” because they:

- Imply **moral judgment**
- Reinforce shame
- Frame substance use or relapse as a character flaw

### Preferred language:

- “Testing **negative** / **positive** for substances”
- “In recovery” / “return to use”
- Key idea: *Words like “clean” suggest the person was previously “dirty,” which carries moral weight rather than clinical meaning.*

## SAMHSA – TIP 63 & Recovery-Oriented Language

SAMHSA repeatedly emphasizes **recovery-oriented, person-first language**, including avoiding:

- “Clean/dirty”
- “Addict”
- “Abuser”

### Preferred alternatives:

- “Person with a substance use disorder”
- “Currently using” / “not currently using”
- “In remission” or “in recovery”

## NIDA – Language & Stigma Briefs

NIDA highlights that stigmatizing language:

- Reduces treatment engagement
- Increases internalized shame
- Leads to poorer outcomes

They explicitly discourage **binary purity language** (*clean vs. dirty*) in both clinical and public health settings.

## NA / AA Style Guides (Internal but Influential)

While 12-step spaces historically used “clean,” **many modern NA/AA publications now recommend alternatives**, especially in professional or public-facing contexts:

- “Time in recovery”
- “Abstinent from substances”
- “Substance-free”