Engaging People Who Use Drugs in Prevention Efforts: Strategies for Reducing Stigma

Though members of the drug-using community are often recognized as important peer supporters, stakeholders, and participants in recovery and treatment programs, they are not often brought on as partners or collaborators in prevention initiatives. This can be attributed, in part, to underlying biases about the nature of addiction and stigma directed toward people who use substances and/or have substance use disorders. These attitudes and biases not only prevent practitioners from reaching out to this group—they also prevent people who use drugs from welcoming these invitations.

This tool explores actions practitioners can take to reduce stigma toward members of the drug-using community in order to better engage them as partners in prevention efforts. To learn more about engaging members of this stakeholder group, see the accompanying tool *Engaging People Who Use Drugs in Prevention Efforts: Benefits & Considerations*.

Strategies for Reducing Stigma

- **Do away with labels.** Avoid stigmatizing labels such as “addict,” “junkie,” or “drug user” when referring to a member of the drug-using community. When a person is labeled as such, that label can make it feel like their drug use is an unchangeable part of their identity. Also, be conscious of how your language can unintentionally promote negative connotations. For example, using the term “clean” for someone who is not currently using drugs implies that someone who is actively using is “unclean” or “dirty.”

- **Use “person first” language.** Using person first language, such as “a person who uses drugs,” demonstrates that you aren’t defining a person by their drug use. It also serves as a reminder to see the whole person and the constellation of skills, talents, and lived experiences they bring with them.
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- Understand that drug use falls along a continuum. This continuum of substance use ranges from abstinence/low-risk use to chronic dependence and encompasses all stages in between. People may move back and forth along this continuum for a variety of reasons, including peer pressure, depression, stress, and experiencing a traumatic life event. It is important to understand that beginning to use a substance after a period of recovery does not represent a moral failure.

- Embrace positive change. Treatment for substance use disorders has historically been viewed as binary, with addiction and abstinence as a person’s only two options. But there is a productive middle ground between these two opposite ends of the substance use continuum, where people can make constructive choices to lessen the harm associated with their drug use. To stop perpetuating stigma, unintentionally creating shame, or shutting down communication:
  
  » Don’t create a dichotomy whereby someone is either using or not using. Instead, recognize that there are many positive changes a person can make to reduce the negative consequences of drug use, such as avoiding using drugs alone or avoiding mixing drugs with other depressants.
  
  » Don’t convey the impression that abstinence is the only goal for a person who uses drugs, for example, by only offering praise when complete abstinence is obtained.
  
  » Don’t assume that there is only one “right” way to address substance misuse. Instead, communicate that there are a number of positive changes a person can make to improve their immediate wellbeing and safety.¹

- Beware of unintentional bias. People initiate and continue to use drugs for a variety of reasons. Without intending to, we may make value judgments about those reasons—deeming them “good” or “bad,” “necessary” or “unnecessary,” or even considering people “weak” or “strong” based on their substance use behaviors. Engaging people who use drugs means meeting them, without judgment, where they are.

- Reflect on your own experiences. Many of us have lived experience of substance misuse—either our own or through a family member, loved one, co-worker, or neighbor. These experiences may be difficult, but they remind us that people who use drugs are first and foremost people—with strengths, passions, interests, and goals. Reflecting on how substance misuse has touched our lives and the lives of those we know and care for can help us retain our respect and compassion for people who are struggling with addiction.

- Understand that substance misuse is often linked to trauma. Trauma is a risk factor for almost all behavioral health and substance use disorders.² Understanding the relationship of trauma to

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substance misuse, and knowing how to engage with people who use drugs in ways that prevent re-traumatization, will help you create a safe and supportive environment where everyone is encouraged to hear and be heard without judgment.

Related Resources

SAMHSA Resources

**Prevention Collaboration in Action Toolkit.** This toolkit showcases stories of how practitioners work together to prevent substance misuse, along with 30+ tools and worksheets to help communities collaborate.

**Trauma-Informed Approach and Trauma-Specific Interventions.** This webpage describes SAMHSA’s six key principles of a trauma-informed approach and includes a list of interventions that address the consequences of trauma and facilitate healing.

**Words Matter: How Language Choice Can Reduce Stigma.** This tool examines the role of language in perpetuating substance use disorder stigma, tips for assessing when and how we may be using stigmatizing language, and steps for ensuring that the language we use is positive and inclusive.

**Prevention Conversations.** This series of short videos features SAMHSA prevention grantees and specialists, who share information and stories related to the prevention of opioid misuse, overdose, and other substance-related problems. A few videos of particular interest include the following:

- **Addiction as a Disease—Not a Moral Failure.** This video explores the nature of addiction and society’s attitudes toward people with substance use disorders.
- **Examining Our Biases About People Who Misuse Opioids.** The video underscores the importance of examining our misconceptions about people with substance use disorders.
- **Harm Reduction and Opioid Misuse: Embracing Positive Change.** This video explores the role of harm reduction in helping people with substance use disorders stay healthy.
- **Addressing the Opioid Crisis: Prioritizing What Works.** This video examines some of the ways prejudice toward people with substance use disorders can shape our approach to prevention.
- **Lessons from Massachusetts: Changing the Conversation About Addiction.** This video looks at how changing attitudes toward people who use drugs can play a key role in program success.

**Prevention and Harm Reduction: Opportunities for Collaboration to Address Opioid-Related Overdose.** This webinar explores the overlap of opioid overdose prevention and harm reduction—and how developing a cultural understanding of each discipline’s philosophy and work can facilitate healthy collaborations.
Resources Developed by Other Organizations

**Harm Reduction Coalition.** This coalition provides training and resources to advance programs and initiatives that help people address the adverse effects of drug use. Two archived webinars of particular interest include the following:

- *Harm Reduction Approach.* This two-hour webinar introduces a range of harm reduction strategies and encourages viewers to explore values and attitudes related to this approach.

- *Injection Drug User Cultural Competence.* This 90-minute webinar explores the culture and experience of injection drug users in order to help participants understand how to work with this group in a culturally competent way.

**The National Council.** This organization offers education and practice improvement behavioral health resources, including webinars, conferences, print, and online resources.

**Toward The Heart.** This organization provides overdose prevention and response materials to educate people on how to use naloxone, as well as resources on reducing stigma.