




RECOVERY EMPOWERED LANGUAGE TOOLKIT



Recovery Empowered Language Toolkit

This is a resource to guide individuals in using language that is **respectful, empowering, and effective** when engaging with communities addressing opioid use disorder (OUD) and overdose prevention.

Recovery is a holistic, individualized, ongoing journey that enhances health, well-being, and overall quality of life. It encompasses much more than overcoming substance use or managing mental health challenges; it seeks to address all facets of an individual’s life, including physical health, relationships, personal growth, and social connections.

Guided by key principles such as hope, empowerment, and cultural competence, recovery emphasizes personal agency, resilience, and the belief in the potential for meaningful change. **This process is deeply rooted in respect, trauma-informed care, and a strengths-based approach**, ensuring that individuals are supported in achieving their unique goals and navigating setbacks with dignity and determination.

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Key Concepts in Recovery



Core Values and Philosophy

Reflect foundational attitudes and approaches that value individual potential, dignity, and autonomy.

Strengths-Based

Focusing on individual strengths, skills, and resources builds confidence and reinforces one's belief in one's ability to recover.

Hopeful

Recovery is grounded in the belief that progress is always possible, even amid setbacks. This hope fuels motivation and sustained effort throughout the recovery process.

Person-Centered

Each recovery journey is unique and shaped by individual values, strengths, and goals. This approach empowers individuals to make informed decisions tailored to their needs.

Respectful

Recovery respects each person's dignity and rights, reducing stigma and fostering an environment where individuals feel valued and understood.

Self-Directed

Recovery promotes autonomy, encouraging individuals to take responsibility and accountability for achieving their goals.

Empowering

Recovery encourages individuals to take control of their lives, make meaningful decisions, and build resilience and self-efficacy.

Relationships Connections

Focuses on the role of interpersonal relationships and shared experiences in recovery and growth.

Peer Support

Connecting with others who share similar experiences fosters empathy, encouragement, and guidance. Peer support helps reduce isolation, strengthen connections, and showcase recovery possibilities.

Trauma-Informed

Recognizing the impact of trauma on substance use and mental health is essential. A trauma-informed approach fosters a safe, supportive space for healing and addressing past experiences.

Relational Support

A supportive network of family, friends, healthcare providers, and community groups strengthens resilience, enhances recovery, and provides a safety net during challenges.

Culturally Competent

Recovery respects the cultural, social, and personal contexts that shape an individual's journey, ensuring inclusivity and accessibility for diverse populations.

Approach to Care and Support

Reflects a comprehensive, inclusive, and sensitive approach to health and healing.

Wellness-Oriented

Recovery focuses on improving overall quality of life, emphasizing balance, fulfillment, and well-being beyond addressing substance use or mental health symptoms.

Holistic

Recovery addresses all aspects of life, including physical health, mental well-being, relationships, housing, education, and spirituality. Focusing solely on substance use is insufficient for long-term success.

Process and Progress

Acknowledges that personal development and healing are ongoing, evolving, and not always a linear process.

Non-Linear

Recovery is a dynamic process of progress, setbacks, and adaptation. It normalizes challenges and emphasizes that setbacks are not failures.

Advocacy and Engagement

Highlights the importance of collective voice, social justice, and active participation in broader systems.

Continuous Growth

Recovery is an ongoing journey of learning, adaptation, and personal achievement, emphasizing growth and resilience over time.

Advocacy and Community

Engaging in advocacy, education,
and service to others fosters a sense of
purpose, builds supportive communities,
and reduces stigma.

NOTES

The Importance of Language in Recovery Messaging

- > Language is crucial in influencing perceptions and outcomes related to substance use and recovery. The words we choose can uplift and support individuals on their recovery journey or contribute to stigma and discrimination. Thoughtful recovery messaging requires intentional language that fosters understanding, empathy, and encouragement. **Effective communication is essential for successful recovery, prevention, and harm reduction efforts.** Using language that is empowering, non-stigmatizing, and transparent helps build an understanding of substance use disorders and the value of harm reduction. Strategic and intentional messaging can shift perceptions, reduce stigma, and support individuals in their recovery journey.

This resource outlines a framework for developing and implementing communication strategies to address the opioid crisis and improve outcomes for individuals and communities affected by substance use.

Language Matters

- > Reducing stigma in communication and understanding the impact of stigmatizing language, matters. Stigma, characterized as a mark of disgrace linked to a specific circumstance, trait, or individual, profoundly affects those with substance use disorders (SUDs) and mental health conditions.

The language used in public discussions, media, and healthcare can reinforce or help dismantle this stigma.

Stigma is more likely to arise when the public perceives individuals as responsible for their condition. **Many mistakenly assume that people with substance use disorders (SUDs) or mental health conditions have complete control over their circumstances,** leading to the misconception that these conditions stem from personal failings rather than a complex mix of biological, psychological, and environmental factors. This misunderstanding reinforces harmful stereotypes and discrimination.

Two key factors that contribute to the stigma of certain health conditions are:

- 1 Perceived control over the condition**
(for example, e.g., cause)
When we say, "They can't help that," stigma is diminished.
- 2 Perceived fault in acquiring the condition**
(for example, ., controllability)
When we say, "It's not their fault," stigma is diminished.

Key Principles of Recovery Messaging

Promoting Empathy and Understanding

Effective communication should cultivate empathy by helping audiences understand the complexities of substance use disorders.

This includes explaining their impact on the brain and behavior and emphasizing that recovery is a long-term process that requires ongoing support.

Focusing on Recovery

Messages should highlight the reality and possibility of recovery by sharing personal stories and resilience that inspire hope and show that recovery is achievable.

Respect

Recovery messaging prioritizes person-first language, recognizing individuals as people before their condition.

For example, rather than calling someone an “addict,” it is more appropriate to say, “a person with a substance use disorder.” This approach affirms their humanity and prevents them from being defined solely by their condition.

Accuracy

Avoid stigmatizing terms like “abuse,” “clean,” or “dirty,” as they carry negative connotations that reinforce stigma.

Instead, use medically accurate terms such as “substance use disorder” or “in recovery,” which help frame substance use as a health condition rather than a moral failing and prevent the spread of harmful misconceptions.

Cultural Sensitivity

Be mindful of diverse cultural perspectives and values. To interact with cultural sensitivity, we must intentionally show up in conversations, relationships, and community spaces.

For example, in some cultures, substance use may be viewed as a moral failing, while in others, it might be understood as a health condition influenced by social or environmental factors.

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Strategies for Effective Communication in Prevention and Harm Reduction

- > Harm reduction and prevention strategies play a crucial role in addressing the opioid crisis and other substance use challenges. These approaches prioritize minimizing the harmful effects of drug use rather than solely focusing on prevention. Effective harm reduction communication is **clear, supportive, and non-judgmental**. On the right are key communication strategies in harm reduction.



Education on Harm Reduction

It is essential to clearly communicate the purpose and effectiveness of harm reduction. It is important to clarify that harm reduction does not condone drug use but aims to minimize associated risks. For example, syringe service programs (SSPs) and supervised consumption sites (SCSs) are often misunderstood, making education on their benefits crucial for stakeholders.



Addressing Misconceptions

Many people hold misconceptions about harm reduction and prevention strategies, thinking they promote drug use. Effective communication should counter these misconceptions by offering evidence-based information on how harm reduction saves lives, reduces the spread of infectious diseases, and acts as a pathway to treatment and recovery.



Empowering Individuals

Harm reduction and prevention messaging should empower individuals by respecting their autonomy and choices. This means acknowledging that everyone's journey is different and supporting them in making informed decisions about their health and well-being.



Community Engagement

Engaging with the community is essential for successful prevention and harm reduction initiatives. This includes fostering open discussions with community members, policymakers, and healthcare professionals to build trust and cooperation. Clear and consistent messaging is key to securing community support for harm reduction efforts.

Additional Considerations

- > **Avoid Sensational or Fear-Based Language**
Using terms like "crisis" or "epidemic" to describe drug-related issues can increase stigma by presenting individuals as dangerous or uncontrollable. It's better to use accurate, non-inflammatory language emphasizing public health.
- > **Steer Clear of Moral Panic**
Language that induces moral panic, such as "crack babies" or "opioid babies," marginalizes and dehumanizes those affected, making it harder for them to access care without fear of judgment or mistreatment.
- > **Use Technical Language Correctly**
It's important to use terms like "pharmacotherapy for opioid use disorder" instead of stigmatizing alternatives like "replacement therapy," which suggests that one addiction is simply being swapped for another. This is why the acronym MAT was updated from "medication-assisted treatment" (which diminished the significance of medication-first approaches) to "medication for addiction treatment."

The Importance of Language Audits

- > Regularly conduct language audits on materials and communication strategies to ensure they do not use stigmatizing language. **Changing language is a step toward changing culture, and we recognize that this process takes time.** Mistakes are part of the journey, and sometimes, we may revert to old habits and language that we now know to be harmful or stigmatizing. Relying on these terms with more inclusive and supportive alternatives is essential, as it ensures that messaging promotes a sense of community, value, and connection.

Auditing your own language is essential because everyday words and phrases—like “crazy,” “strung out,” or “jonesing”—can unintentionally reinforce stigma and create barriers for people in recovery. While these terms may seem harmless in casual conversation, they often carry loaded, negative connotations that can dehumanize individuals and reduce their experiences to stereotypes. Using such language can contribute to a culture of shame and misunderstanding, making it harder for people to feel safe, respected, or willing to seek support. **By being intentional with our words and choosing respectful and person-centered language, we help create a more compassionate and inclusive environment that supports recovery and healing.**

Implementing Effective Messaging in Practice

- > Effective communication in recovery messaging and harm reduction requires **careful planning** and execution.

The following steps can help ensure that messaging is impactful:

Use Stories and Data

Combining personal stories with data creates a powerful, evidence-based narrative that humanizes the issue and highlights effective solutions. To do this responsibly, commit to sharing stories in a way that avoids tokenization, stigma, or shame, ensuring that every voice is represented with respect, dignity, and authenticity.

Provide Actionable Information

Effective communication should educate and guide the audience on the actions they can take. Offering clear steps is crucial whether supporting harm reduction efforts, advocating for policy changes, or seeking help for themselves or others.

Know Your Audience

Customize messages for the specific audience, whether it's policymakers, community members, or individuals impacted by substance use. Understanding their values, concerns, and knowledge level is key to effective communication.

Consistency is Key

Consistency in messaging reinforces key points and fosters trust. Repeating core messages across various platforms and interactions ensures the message is understood and retained.

Evaluate and Adapt

Communication strategies should be regularly assessed to determine their effectiveness. Feedback from the audience and stakeholders offers valuable insights, enabling adjustments to enhance the impact of the messaging.

Helpful Tips and Examples for a Public Awareness Campaign



Overdose Prevention

Message Theme:
Understanding Overdose and Naloxone Use

Headline:
"Naloxone Saves Lives: Know the Signs of Overdose"

Message:
"Opioid overdoses can happen to anyone using opioids or other drugs contaminated with opioids like fentanyl. Knowing the signs of an overdose and how to administer naloxone can save lives. Learn to use naloxone and keep it accessible—because a few minutes can make all the difference."

Call to Action:
"Get trained on naloxone today. Contact your local health department or visit [website] for more information."

Why This Works:
This message is direct and informative, focusing on life-saving actions individuals can take. It avoids stigmatizing language and emphasizes the importance of being prepared to help others.

Community Outreach: Syringe Service Programs (SSPs)

Message Theme:
Reducing Harm, Protecting Health

Headline:
"Safe Syringe Access Protects Everyone"

Message:
"Syringe Service Programs (SSPs) provide people who inject drugs with access to clean needles, reducing the spread of HIV and hepatitis. These programs also connect individuals with critical health services, including substance use treatment, testing, and vaccinations. SSPs are a proven, evidence-based approach that makes our community healthier and safer."

Call to Action:
"Support local SSPs and learn how they help protect our community's health. Visit [website] to find an SSP near you."

Why This Works:
The message highlights the public health benefits of SSPs, framing them as a community-wide solution rather than focusing solely on individual behavior. It emphasizes evidence-based outcomes and encourages community support.

Policy Advocacy: Support for Supervised Consumption Sites (SCSs)

Message Theme:
Safe Spaces for Safer Use

Headline:
“Supervised Consumption Sites Save
Lives and Support Recovery”

Message:
“Supervised Consumption Sites (SCSs)
offer a safe, clean space for individuals to
use pre-obtained drugs under medical
supervision. These sites prevent fatal
overdoses, reduce the spread of infectious
diseases, and provide access to health
and social services, including pathways
to treatment and recovery. Studies show
that SCSs do not increase drug use or
crime but instead offer a compassionate
response to the drug issue.”

Call to Action:
“Urge your local officials to support
the establishment of SCSs in our
community. Together, we can save
lives and create a safer, healthier
environment for everyone.”

Why This Works:
This message addresses common
misconceptions about SCSs by
presenting evidence and emphasizing
their role in promoting public
health and safety. It positions SCSs
as a compassionate and pragmatic
response to the drug crisis.

Patient Education: Harm Reduction for Opioid Use Disorder (OUD)

Message Theme:
Safe Use Practices to Reduce Harm

Headline:
“Take Steps to Protect Yourself: Harm
Reduction Tips for Opioid Use”

Message:
“If you or someone you know uses
opioids, there are steps you can
take to reduce the risk of overdose
and other health issues. Avoid
using alone, start with a small
dose, and never mix opioids with
other substances like alcohol. Keep
naloxone nearby and let others know
how to use it. Remember, reducing
harm is critical to improving your
health and safety.”

Call to Action:
“Talk to your healthcare provider
about harm reduction strategies that
work for you. Visit [website] for more
resources and support.”

Why This Works:
This message is practical and
non-judgmental, providing
actionable steps individuals can
take to protect themselves. It also
encourages open communication
with healthcare providers, promoting
a harm-reduction approach in
overall health management.

Social Media Campaign: Changing Perceptions on Addiction

Message Theme:
Addiction is a Health Condition,
Not a Moral Failure

Post Image:
A person holding a sign that reads, “I
am in recovery, and I deserve respect.”

Caption:
“Addiction is not a choice; it’s a
complex health condition. People
struggling with addiction need our
support, not our judgment. Let’s end
the stigma and start seeing people
for who they are: friends, family, and
members of our community who
deserve compassion and respect.
#EndStigma #HarmReduction”

Call to Action:
“Share this message if you believe
in treating addiction with care and
dignity.”

Why This Works:
This social media message uses
personal stories and imagery to
humanize individuals affected
by addiction. The call to action
encourages engagement,
spreading a message of
compassion and reducing stigma.

School Program: Preventing Youth Substance Use

Message Theme:
Knowledge is Power

Headline:
“Make Smart Choices: Understand
the Risks of Substance Use”

Message:
“Experimenting with drugs can have
serious consequences, including
addiction and long-term health
issues. Knowing the facts about
substances and their effects can
help you make informed decisions.
If you’re facing peer pressure or
struggling with stress, there are
safer ways to cope—talk to a trusted
adult, find healthy activities, and seek
support.”

Call to Action:
“Learn more about healthy choices
and find resources at [website].
Remember, it’s okay to ask for help.”

Why This Works:
This message is designed to
resonate with young people by
emphasizing the importance of
informed decision-making and
providing alternatives to substance
use. It encourages proactive
behaviors and seeking support
without using fear-based tactics.

Language Changes: What *not* to use

- > Using inappropriate language in harm reduction and prevention efforts can unintentionally reinforce stigma, create misunderstandings, and alienate these programs that aim to help. Listed on the next page are examples of language used to avoid harm reduction and prevention communication, along with reasons why these terms are problematic.

Language plays a significant role in shaping attitudes, behaviors, and outcomes in these areas. **Avoiding stigmatizing, judgmental, or negative language fosters a more supportive and effective environment** for individuals seeking help and for the broader community addressing substance use issues. By carefully choosing words that respect and empower individuals, we can contribute to a more compassionate and impactful approach to harm reduction and prevention.



Using Labels like “Addict” or “Junkie”

What Not to Say:

“Addicts should just stop using drugs.”

Why It’s Problematic:

Terms like “addict” or “junkie” reduce a person to their substance use, ignoring their full identity and humanity. These labels are stigmatizing and can perpetuate the idea that individuals with substance use disorders are morally deficient or undeserving of care.

Preferred Language:

Use “person with a substance use disorder” or “person who uses drugs.” instead. This is person-first language that acknowledges the individual beyond their condition.

Referring to “Abuse” Instead of “Use”

What Not to Say:

“Substance abuse is a major problem in our community.”

Why It’s Problematic:

“Abuse” implies intentional, harmful behavior and carries a heavy moral judgment. It can lead to punitive attitudes and responses rather than supportive and empathetic ones. Abuse and dependence are diagnostically incorrect, and the terms were removed in 2013 in DSM-5 to a spectrum of mild, moderate, and severe substance use disorder.

Preferred Language:

Use “substance use” or “substance use disorder.” These terms are more neutral and clinical, focusing on the health condition rather than assigning blame.

Implying Moral Weakness or Failure

What Not to Say:

“People who use drugs lack willpower.”

Why It’s Problematic:

Statements like this perpetuate the myth that substance use is a simple matter of choice or character flaw. They ignore the complex biopsychosocial factors that contribute to substance use and addiction.

Preferred Language:

Frame the discussion around substance use as a health issue, emphasizing that addiction is a complex condition influenced by various factors, including genetics, environment, and mental health.

Using Terms Like “Clean” or “Dirty”

What Not to Say:
“Is he clean now, or is he still using?”

Why It’s Problematic:
Referring to someone as “clean” or “dirty” in the context of drug use is deeply stigmatizing. It implies that those who use substances are “dirty” or impure, reinforcing negative stereotypes and shame.

Preferred Language:
Instead of “clean,” use “in recovery” or “substance-free.” Instead of “dirty,” refer to whether someone uses substances without attaching moral judgment.

Blaming Language

What Not to Say:
“People who overdose are just making bad choices.”

Why It’s Problematic:
This type of language blames individuals for their substance use and the outcomes of that use, which can deter them from seeking help and support. It overlooks the factors that lead to overdose, such as addiction, mental health issues, and the presence of highly potent substances like fentanyl.

Preferred Language:
Focus on the need for supportive interventions, such as naloxone distribution and education about safe use practices, rather than attributing blame.

Describing Substance Use Disorders as Hopeless

What Not to Say:
“Once an addict, always an addict.”

Why It’s Problematic:
This fatalistic statement implies that recovery is impossible, which can be incredibly discouraging for individuals struggling with substance use. It undermines the hope and motivation necessary for recovery.

Preferred Language:
Emphasize that “recovery is possible for everyone, with the right support and resources.” This promotes a hopeful and empowering message.

Judgmental Language About Relapse

What Not to Say:
“He relapsed, so he must not be serious about recovery.”

Why It’s Problematic:
Relapse is often a part of the recovery process, not a sign of failure or lack of commitment. Judgmental statements about relapse can lead to shame and discourage individuals from continuing their recovery journey.

Preferred Language:
Frame relapse as “a setback in the recovery process” or “return to use” and emphasize that “it’s important to support individuals in getting back on track.” It’s also helpful to equate return to use as part of what we know occurs for most people with addiction, and these rates are similar to rates of other chronic health conditions.

Referring to Treatment as the Only Solution

What Not to Say:
“The only way to fix this problem is through treatment.”

Why It’s Problematic:
This statement implies that treatment is the only valid path to recovery. It disregards other approaches, such as harm reduction or peer support, that can be equally effective for different individuals.

Preferred Language:
Use phrases like “There are multiple pathways to recovery, including treatment, harm reduction, and peer support.” This recognizes the diversity of recovery experiences and respects individual choices.

Negative References to Harm Reduction Programs

What Not to Say:

"These harm reduction programs are just a waste of money."

Why It's Problematic:

This statement dismisses the value of harm reduction initiatives, ignoring the evidence that these programs save lives, reduce disease transmission, and provide critical support services.

Preferred Language:

Highlight that “harm reduction programs are a cost-effective way to improve public health and reduce the negative consequences of drug use.” This focuses on the positive outcomes of such initiatives.

Using “Enabling” in a Negative Context

What Not to Say:

"Harm reduction just enables people to keep using drugs."

Why It's Problematic:

The word “enabling” is often used to criticize harm reduction strategies, implying that these approaches condone or encourage drug use. This ignores the evidence that harm reduction saves lives and supports long-term recovery.

Preferred Language:

Emphasize that harm reduction “supports safer practices” and “provides a pathway to recovery.” These phrases highlight the positive impact of harm reduction without the negative connotations.

NOTES

Language to Avoid and Preferred Alternatives

> Language examples in harm reduction, prevention, healthcare access, mental health, and addiction.



HARM REDUCTION, PREVENTION, AND ADDICTION LANGUAGE

INSTEAD OF THIS

TRY THIS

Drug-users/addicts/drug abusers	Persons who use drugs OR People who inject drugs
Alcoholics/abusers	Persons with alcohol use disorder
Persons taking/prescribed medication assisted treatment (MAT)	Medication for addiction treatment OR Persons taking/prescribed medications for opioid use disorder (MOUD)
Persons who relapsed	Persons who returned to use
Smokers	People who smoke
Addict/junkie	Person with a substance use disorder
Substance Abuse	Substance use OR Substance use disorder
Clean/Dirty "Is he clean now, or is he still using?"	"Is he in recovery?" OR "Is he currently using substances?"
Lack of willpower "People who use drugs lack willpower."	"Substance use disorders are complex health conditions that require comprehensive treatment."

HARM REDUCTION, PREVENTION, AND ADDICTION LANGUAGE

INSTEAD OF THIS

TRY THIS

Enabling "Harm reduction just enables people to keep using drugs."	"Harm reduction supports safer practices and provides pathways to recovery."
Hopelessness "Once an addict, always an addict."	"Recovery is possible for everyone, with the right support and resources."
Blaming Language: "People who overdose are just making bad choices."	"Overdose prevention saves lives and is a critical component of harm reduction." OR "Addiction is continued use despite harmful consequences, typically against a person's sincere wishes and desires."
Referring to Treatment as the Only Solution: "The only way to fix this problem is through treatment."	"There are multiple pathways to recovery, including treatment, harm reduction, and peer support."
Judgmental Language About Relapse: "He relapsed, so he must not be serious about recovery."	"Relapse is a setback, not a failure. It's important to support individuals in continuing their recovery journey."
Negative References to Harm Reduction Programs: "These harm reduction programs are just a waste of money."	"Harm reduction programs are a cost-effective way to improve public health and reduce the negative consequences of drug use."

HEALTHCARE ACCESS AND ACCESS TO SERVICES AND RESOURCES LANGUAGE

INSTEAD OF THIS

TRY THIS

Underserved* people/ communities/the underserved*	People who are underserved* by [specific service/resource]
Hard-to-reach populations	People who are underserved by mental health/behavioral health resources
The uninsured	People who are uninsured/people who are underinsured/people who do not have health insurance.
Medically underserved*	People who are medically underserved*

*NOTE: Use "underserved" to refer to limited access to services that are accessible, acceptable, and affordable, including healthcare. Avoid using "underserved" when referring to people disproportionately affected by a specific issue.

MENTAL HEALTH AND BEHAVIORAL HEALTH LANGUAGE

INSTEAD OF THIS

TRY THIS

Mentally ill	People with a mental or behavioral health condition
Crazy/insane	People with a diagnosed mental health or behavioral health condition
Mental defect	People with a pre-existing mental health or behavioral health condition
Suffers from or is afflicted with [condition]	Person with specific mental health condition, e.g., "Person with depression," "People with obsessive-compulsive disorder"
Asylum	Psychiatric hospital/facility

Resources

- > **SAMHSA's Words Matter: How Language Choice Can Reduce Stigma**
<https://facesandvoicesofrecovery.org/wp-content/uploads/2019/06/Words-Matter-How-Language-Choice-Can-Reduce-Stigma.pdf>
- > **NRPA Mental Health and Substance Use Disorder Language Guide**
<https://www.nrpa.org/globalassets/research/mental-health-and-substance-use-disorder-language-guide-december-2021.pdf>
- > **National Institute on Drug Abuse**
<https://nida.nih.gov/nidamed-medical-health-professionals/health-professions-education/words-matter-terms-to-use-avoid-when-talking-about-addiction>

GET IN TOUCH

For more information on expanding evidence-based practices in Substance Use Disorder (SUD) and overdose prevention, please visit

www.prevention.org/leadership-center



800.252.8951



www.prevention.org



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These services are funded in full or in part through a State Opioid Response Grant (TI083278) to the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery, from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.