Center for Community Engagement at Chestnut Health Systems

Frequently Asked Questions

About Stigma

General Questions About Stigma

Q1. What is stigma?

A1. Stigma is the negative attribute signaling that one is flawed or condemned, leading to rejection and avoidance of others

Q2. What is the impact of stigma on communities?

A2. Addiction is classified as a medical disease, just as asthma and diabetes are diseases. However, society has long treated addiction in a much more negative light than other diseases. Because of the survival instinct is part of the disease of addiction, it often leads to behaviors that society judges to be undesirable: lying, cheating, neglecting responsibilities, slothfulness, carelessness, and recklessness.

Q3. People with severe mental health conditions and addictions make me uncomfortable, what can I do about that?

A3. It is normal to feel uncomfortable in any type of situation that we are unfamiliar with. One of the most substantial reasons why addiction is stigmatized is because most people don't understand it, which can bring fear misunderstanding and judgement. Learning more about addiction is the quickest way to reduce stigma and one's discomfort around people with the disease.

General Questions About the Basics of Addiction

Q1. What do I need to know about addiction?

A1. Addiction (or substance use disorder) is not a choice, and it's not due to a lack of willpower. Addiction is a CHRONIC BRAIN DISEASE – that can be compared to other chronic diseases like diabetes, heart disease, and high blood pressure. With treatment, and sometimes medication, it is a disease that people can learn to manage.

Q2. What do I need to know about risk reduction?

A2. Risk reduction is a set or practical ideas and services aimed at reducing negative Consequences associated with drug use. Risk reduction seeks to improve drug laws, policies, and law-enforcement practices so that they are not detrimental to the health and well-being of people who use drugs and their communities. Risk reduction is founded on kindness, compassion, and caring; an approach that includes policies, programs, and practices that aim to reduce the negative consequences of using substances without necessarily reducing substance use itself.

Q3. What do I need to know about addiction treatment?

A3. Treatment is based on the unique needs of each individual. It may include one or several evidence-based approaches to treating addiction. Drug treatment can include behavioral therapy, medications, or a combination. The specific type of treatments will vary depending on person's individual needs and, often, on the types of substances they use.

Q4. What do I need to know about recovery?

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life and strive to reach their full potential. Recovery services are about removing barriers and providing supports to aid the long-term recovery process. The belief that recovery is real provides the essential and motivating message of a better future – that people can and do overcome the internal and external challenges, barriers, and obstacles that confront them.

Do I Speak Stigma/What Narratives Keep Stigma Spreading in Communities?

Q1. What is person-first language?

A1. Person-first language places the focus on the person, not the disease. Shifting the language eliminates labeling and instead helps us view individuals with dignity and respect. "Research shows that the language we use to describe [addiction] can either reinforce or overcome stereotypes, prejudice, and lack of empathy that keep people from getting the treatment they need."

Q2. Isn't Medically Assisted Recovery (MAR) trading one addiction for another?

A2. Medication-Assisted Recovery doesn't rely solely on medication. The medication simply moderates withdrawal symptoms and cravings to prevent setbacks, thus helping to keep someone in supportive counseling and allowing the body to slowly adapt by reducing use over time. The result of MAR Treatment along with counselling allows someone to return to a more stable state of dependence. It is important to understand the difference. Like insulin helps someone with diabetes, MAR stabilizes the body making it possible to function, feel normal, and re-engage with daily activities, like steady employment.

Q3. Isn't helping someone with a substance use disorder enabling them?

A3. **It can be difficult to tell the difference between enabling and support. Here are five of the most common patterns found where one enables their loved one:**

- **Protecting a loved one from the consequences of addiction**
- **Keeping secrets about your loved one's addiction**
- **Refusing to follow through with boundaries & expectations**
- **Making excuses for your loved one's behavior**
  Avoiding the topic or your loved one altogether

Healthy support encourages a person to address their addiction and all of its consequences. One should clearly outline your expectations about substance use, express your hope that your loved one will attend treatment, then follow through on these expectations and attend support meetings and/or treatment with your loved one. Look at ways you may be contributing to their shame by any stigmatizing words or beliefs you may have toward people with an addiction.

The Center for Community Engagement is funded in full or in part through a State Opioid Response Grant (TI085769) to the Illinois Department of Human Services, Division of Behavioral Health and Recovery, from the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.