



**MOUNTAIN PLAINS**  
RURAL OPIOID TECHNICAL ASSISTANCE CENTER

# PERSON FIRST RECOVERY LANGUAGE and STIGMA REDUCTION

Presented By: Ivory Tubbs, Ph.D.

# ETYMOLOGY



- Circa: 1590s (earlier stigmatē, c. 1400), "mark made on skin by burning with a hot iron"
- Greek – stigma "a mark made by a pointed stick, a dot"
- A mark of disgrace associated with a particular circumstance, quality, or person.
- A set of negative beliefs and prejudices. Judgement, discriminations, bigotries, intolerances, negative behaviors.
- Britannica: A set of negative and often unfair beliefs that a society or group of people have about something.



**WHO CAN BE ~~INFECTED~~... AFFECTED?**



# TRAUMA'S INFLUENCE on SUBSTANCE USE DISORDER

Trauma can play a significant role in the development and perpetuation of addiction. Trauma, whether physical, emotional, or psychological, can have a profound impact on an individual's mental and emotional well-being.

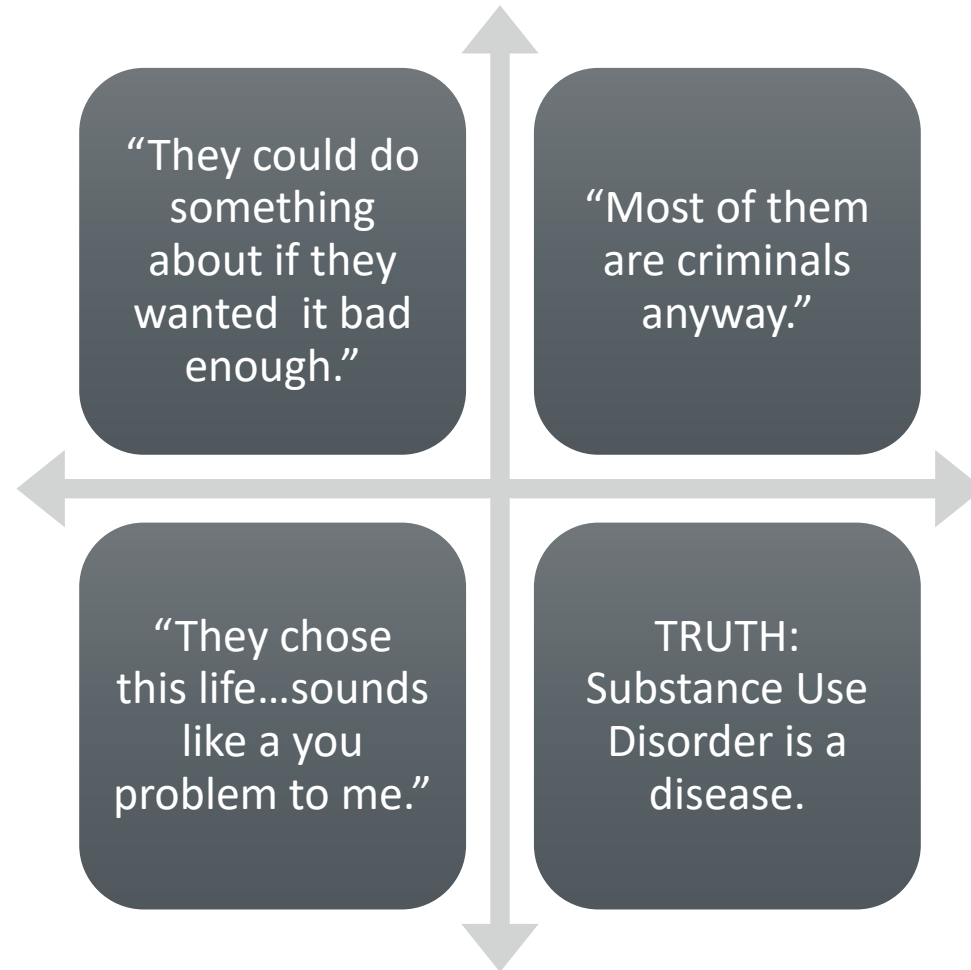


# Adverse Childhood Experiences (ACEs)

## ACEs Include

- Domestic violence
- Parental abandonment through separation or divorce
- A parent with a mental health condition
- Being the victim of abuse
- Being the victim of neglect (physical and emotional)

# COMMON MISCONCEPTIONS BELIEVED ABOUT SUBSTANCE USE DISORDER





**“I felt hopeless, like no one cared.”**

**“People judged me.”**

**“I was battling alone.”**






**“I don’t like you or your kind bringing down the neighborhood.”**







**“when you leave someone so vulnerable and frustrated, instantly those addictions come back because they’re the only ones that comfort you.”**

# THE EMOTIONAL IMPACT of STIGMA



- So many carry with them the weight of guilt, every moment of their daily lives.
- The personal shame of the missed and squandered opportunities, poor and nonexistent familial connections due to their substance use or mental ailment.
- It is akin to ripping off a scab every time someone faces mistreatment and bias because of their disease.
- A constant reminder of their shortcomings.

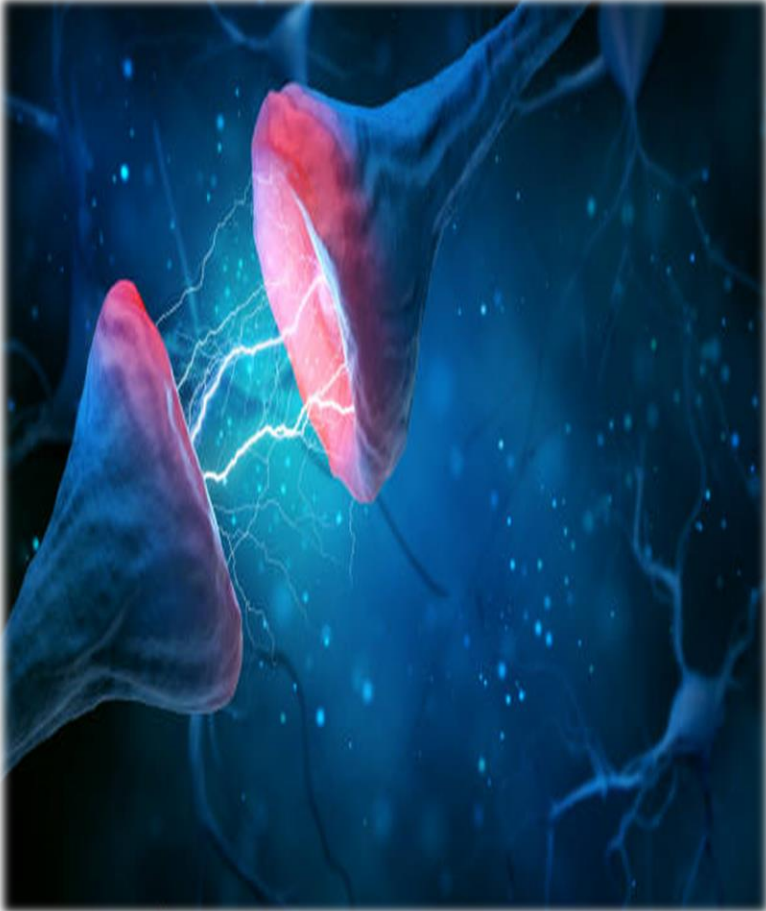
# SUBSTANCE USE DISORDER and THE BRAIN



Substance Use Disorder can have a profound impact on the neurological system, altering the way the brain functions and communicates.

The neurological effects of drugs vary depending on the type of drug and its mechanism of action.

# NEUROLOGICAL EFFECTS of SUBSTANCE USE DISORDER



Neurotransmitter  
Regulation

Reward Pathway  
Activation

Dopaminergic  
System

Synaptic  
Plasticity

Neurotoxicity

Withdrawal  
Symptoms

Neurocognitive  
Impairment

Seizures

Mood and  
Emotional  
Regulation

Tolerance and  
Withdrawal

# THE NEUROLOGICAL EFFECTS of SUBSTANCE USE DISORDER

The neurological effects of substance use disorder can vary widely depending on the specific drug, its dosage, the frequency of use, and individual factors such as genetics and overall health. Additionally, the long-term consequences of drug use can be complex and may include addiction, cognitive impairment, and mental health disorders.

# SUBSTANCE USE and CO-OCCURRING MENTAL DISORDERS

Substance use disorder is a treatable mental disorder that affects a person's brain and behavior, leading to their inability to control their use of substances like legal or illegal drugs, alcohol, or medications.

# PSYCHOPHYSIOLOGICAL EFFECTS of SUBSTANCE USE DISORDER


- Altered Brain Function
- Psychological Dependence
- Impaired Judgment and Decision-Making
- Impact on Emotions
- Negative Consequence
- Impaired Functioning





# SUMMARY: PSYCHOPHYSIOLOGICAL EFFECTS

Recognizing substance use disorder as a mental health disorder underscores the importance of providing individuals with comprehensive care that addresses both addiction's physical and psychological aspects. Treatment approaches often involve behavioral therapy, counseling, medication, and support to address the complex interplay between substance use and mental health.





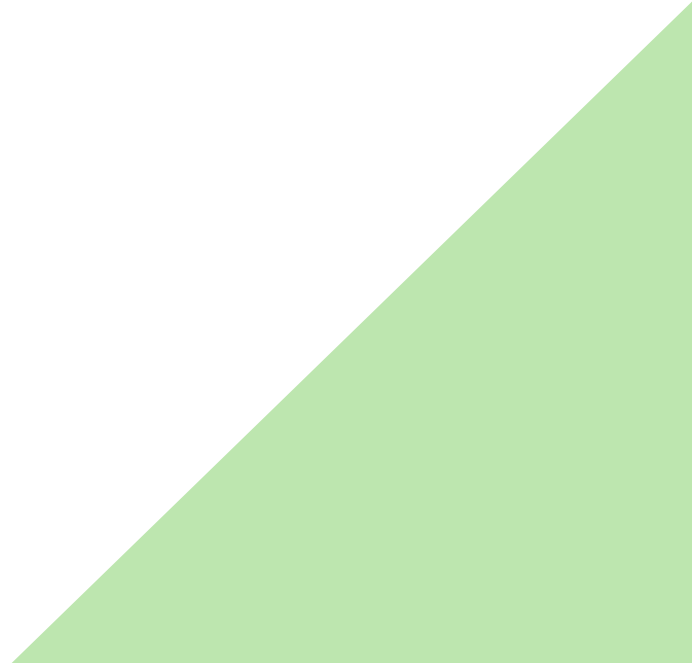
# “DON'T TRUST EVERYTHING YOU SEE. EVEN SALT LOOKS LIKE SUGAR.”

- Methamphetamine use bears a striking resemblance to severe anxiety.
- Someone with bipolar disorder experiencing psychomotor agitation can be misdiagnosed as methamphetamine use.
- An opioid user who presents with a flat, indifferent affect can resemble depression in patients.
- Stimulant use can mirror a manic episode.



# THE IMPACT of LANGUAGE to REDUCE STIGMA

The importance of language in reducing stigma around substance misuse cannot be overstated. Language plays a pivotal role in shaping attitudes, perceptions, and behaviors toward individuals who struggle with substance use disorders.



# THE TRANSFORMATIVE POWER of LANGUAGE

- **Humanizing Individuals**
- **Reducing Blame and Shame**
- **Encouraging Disclosure and Seeking Help**
- **Fostering Effective Communication**
- **Promoting Inclusivity**
- **Combating Stereotypes**
- **Supporting Recovery Oriented Care**
- **Empowering Advocacy**
- **Changing Public Perception**
- **Promoting Public Health Initiatives**


# ALTERNATIVE LANGUAGE

<b>Addict, Abuser, Junkie</b>
<b>Clean/Sober</b>
<b>Relapse Prevention</b>
<b>Substance Abuse</b>
<b>Relapse</b>
<b>Resistant to Treatment</b>
<b>Denial</b>

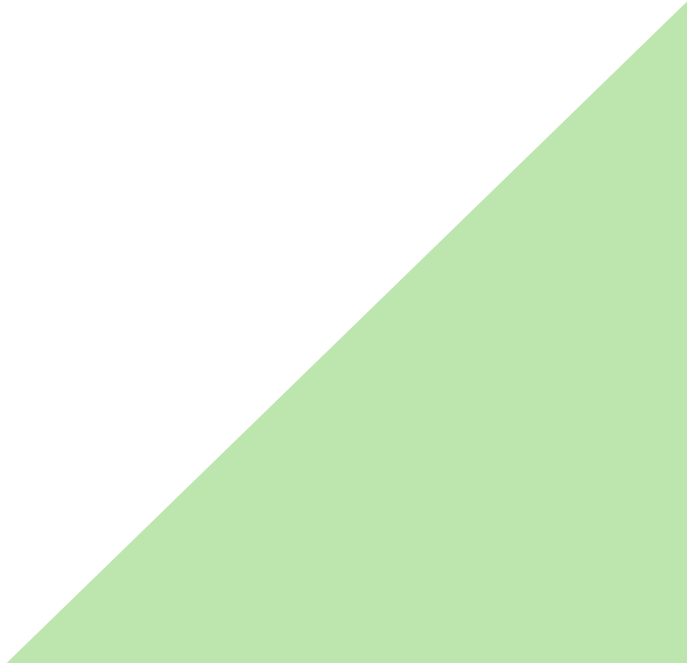
<b>Someone with a Substance Use Disorder</b>
<b>Drug Free</b>
<b>Recovery Management/ Harm Reduction</b>
<b>Substance Use Disorder</b>
<b>Recurrence</b>
<b>Undecided about treatment</b>
<b>Having mixed feelings</b>

# STIGMA and LANGUAGE

Language is a powerful tool in the fight against stigma surrounding substance misuse. By using respectful, person-centered language, we can create a more compassionate and supportive environment that empowers individuals to seek help, access treatment, and achieve recovery. Reducing stigma is not only a matter of semantics but a critical step in improving public health outcomes and the well-being of those affected by substance use disorders.



“I was told that my son’s death is Darwinism. That if they saw my son overdosing in the street, they would step right over him and keep walking.”



Use this QR code below to review the Mountain Plains Rural Opioid Technical Assistance Center's Alternative Language document.



Please use the QR code below to tell us what you think – SAMHSA survey. *This survey is a requirement for the Mountain Plains Rural Opioid Technical Assistance Center.*

**THANK YOU!!!**



## THANK YOU! FROM THE MPROTAC TEAM

**Ivory Tubbs, Ph.D.**  
Psychologist, SME  
[itubbs@wiche.edu](mailto:itubbs@wiche.edu)

**Bobbi Perkins**  
Project Director  
[bperkins@wiche.edu](mailto:bperkins@wiche.edu)

**Jessica Jones**  
Program Manager  
[jjones@wiche.edu](mailto:jjones@wiche.edu)

**Margie DeAnda**  
Administrative Assistant  
[mdeanda@wiche.edu](mailto:mdeanda@wiche.edu)