

Stigma

Stand up to stigma.

Stigma is the disapproval of, or discrimination against, a person based on a negative stereotype. Stigma often affects how people with opioid use disorder are treated, making it difficult for them to find jobs, places to live, and medical care. Even if unintentional, the hurtful words and actions of others can keep people who are struggling with addiction from getting help and staying in treatment for as long as they need it.

What should I know about opioid addiction in order to reduce stigma?

Opioid use disorder is not a choice. It's a disease that can be treated.

Many Americans incorrectly view opioid use disorder as a moral weakness or character flaw. In fact, it is a brain disease that can be treated.

Overcoming addiction takes more than willpower. Medicine can be a very effective part of the solution.

Stigma leads some people to believe that taking medicine for opioid use disorder is “replacing one drug for another” and “not real recovery”. In fact, [people who take FDA-approved medicines](#) like buprenorphine (Suboxone®), naltrexone (Vivitrol®), and methadone are more likely to stay in recovery and enjoy healthy, productive lives.

Why does stigma matter?

Stigma keeps people from getting the best possible care.

The myth that addiction is a lack of willpower stops people from seeing their doctors and getting treatment that can help them rebuild their lives, relationships, and health.

Stigma harms well-being and quality of life.

As a result of harmful attitudes and stereotypes, people with addictions often face devastating consequences like discrimination in employment, loss of housing, and poor treatment from health care professionals.

Stigma leads to overdose deaths.

Fear of being judged or discriminated against can keep people from getting the help they need and increase their chances of dying from an overdose.

What can I do to end stigma?

You can make a difference by creating a stigma-free environment in your family, community, workplace, and/or health care setting.

In your family

- Learn how to [talk to a loved one](#) about their opioid use.
- Understand [options for treatment](#) with medications for opioid use disorder and support your loved one's interest in going to and staying in treatment, which can be years long.

- Use [person-first language](#) (e.g., say “person with opioid use disorder” instead of “addict”) to put people before their diagnosis and [choose words](#) that lessen blame and shame.

In your community

- Learn how faith-based and community organizations can support people with opioid use disorder in finding and staying in treatment with the aim of [rebuilding their lives](#) and [getting back to work](#).
- Create an [action plan](#) to change negative beliefs in your community about opioid use disorder and its treatment with medications through education, grassroots organizing, and advocacy.

In your workplace

- Discover how workplaces can create a [recovery-friendly environment](#) for employees.
- [Improve access](#) to treatment with medications for opioid use disorder at your workplace.

In your health care setting

- Use [recommended language](#) to reduce stigma in health care settings.
- [Participate in an “Understanding Addiction” training](#) and earn 8 hours of continuing education credits.
- Learn how you can [start prescribing](#) medications for opioid use.