



Speaking without stigma

A guide to reducing stigma in substance use through the language we use

September 2025 (Updated from first edition October 2023)

Introducing this guide



This guide aims to help people think about the words we use about drugs and alcohol. It was first co-produced with the people we support in 2023, for staff, peer mentors, and volunteers at Turning Point.

Now, we're sharing it wider in the hope that more people benefit from its messages and use it to help further reduce stigma through the words we use - and better support friends, family or people we work with.

The use of stigmatising language negatively impacts people who use drugs in a variety of ways, affecting their self-worth, increasing their use of substances, isolating them, and preventing them from seeking support. At Turning Point our vision is to constantly find ways to support more people to discover new possibilities in their lives. Working to remove barriers caused by stigma is essential.

Many of the people we support experience stigma daily. It is vitally important that we provide them with a different experience when they come to us.



We at Turning Point are passionate about challenging and reducing the stigma experienced by the people we support. One of the ways we can all participate in effectively challenging this stigma is with the language that we use, whether this be when we are talking to the people who use our services, speaking with colleagues, when writing emails or reports, or in our external facing communications such as our website or social media channels.

This is not about telling people what they can and cannot say. It is about encouraging people to think about the possible impact language can have.

We are starting a conversation.

There are some terms which we prefer not to use at all but acknowledge that it's not always straightforward. Some terminology can depend on the specific circumstances in which it is used. For example, addiction is a medical term, but it becomes stigmatising when used to label someone as an addict. On the other hand, for some people identifying as an addict is an important part of their recovery. It's complex, and the thoughts, feelings and beliefs of people that use our services must always be considered.



What is important is that we acknowledge the role language can play in contributing to stigma and the damage stigma can cause. We can work together to change that – one conversation at a time.

Turning Point has collaborated with people we support to challenge stigmatising language and has published this brief guide with suggested words and phrases that put people first. A landmark report from the Global Commission on Drug Policy Research highlighted how the prejudices and fears surrounding drugs are expressed in stigmatising language, leading to social discrimination, repressive drug policy and

the creation of barriers preventing people from accessing the services they need.

Nat Travis, National Head of Service at Turning Point said:

"We know that stigma is a significant barrier in seeking support for people with challenging drug and/or alcohol use. The negative stereotypes associated with addiction can be a barrier to recovery." "The language we use can stigmatise people without us even realising it which is why we want to encourage everyone to think about the impact of the words we use. Our aim is to create a more inclusive and destigmatising culture within services and the sector."

"As a first step we have taken the decision to change the title of the business unit from Public Health and Substance Misuse (PHSM) to Public Health and Substance Use (PHSU)."

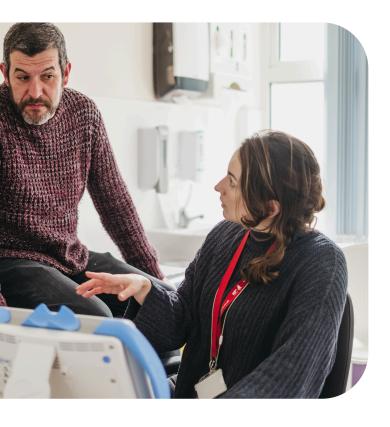
"Turning Point has worked with its Service User Council, people who use a range of different Turning Point drug and alcohol services, to consider words and phrases that can feel stigmatising, and agree more inclusive, supportive and up-to-date language."



Lukas Oppegaard, a member of Turning Point's Service User Council said:

"Language is so important to make sure people feel empowered and not judged. Some words and phrases around drugs and alcohol can feel really outdated and have an impact on how you feel about yourself – even if no malice is intended.

It's been a really good exercise to work together to debate some of these phrases – and come up with alternatives. Not everyone will agree on language. What works for one person might not be right for someone else, but to have an awareness about the impact of words is really important."



Through engagement with the Council and colleagues, Turning Point is committed to a person- first language approach which emphasizes the person before the behaviour, condition or disability and doesn't subsume a person's identity into their health or social care need. An example would be describing someone as a person who uses drugs rather than a drug user.

Turning Point has created this guidance for staff, peer mentors and volunteers with suggested terminology that will encourage people across the organisation to think about the impact of the language they use.

Person first language

Person-first language acknowledges that everyone, regardless of disability, behaviour or illness, is a person first.

Person-first language introduces a person before any description of them.

Person-first language emphasises the whole person and avoids defining them exclusively by any disability or condition.

Examples of person-first language include person who uses drugs instead of drug user or person with a disability rather than disabled person.



Guiding Principles

- 1. Use person-first language
- 2. Reframe it choose terms that are empowering and don't blame or victimise
- 3. Consider the preferred language of the person you are speaking to, but don't be afraid to challenge stigmatising terminology
- 4. Use terminology that can be understood avoid jargon and acronyms
- 5. Consider what a phrase or word could mean and how it might make someone feel before you use it
- 6. Use language that is non-judgemental substance use is neither good nor bad and our language should reflect that.



Our recommended language

Language is always changing and evolving, and it would not be possible to include every term in this document that people may find stigmatising. We have chosen a number of words and phrases that demonstrate the principles and will help to begin the conversation.

This guide is intended to be used as a starting point in encouraging us all to think about the impact of the language we use and is part of a bigger piece of work across the organisation to address the stigma experienced by the people we support.

Preferred Phrase		Stigmatising Language	Reasons for this suggestion
Substance use	Replaces	Substance misuse or substance abuse	Misuse and abuse are loaded with judgement and have negative connotations. As a service we promote a non-judgemental approach towards people, and our language should reflect that.
Drug dependence	Replaces	Drug addiction, drug abuse	The term 'dependence' factually describes the physical experience of requiring drugs to prevent withdrawal. There are negative connotations around the terms abuse and addiction.
Person who uses drugs and/or alcohol	Replaces	Drug user, drug abuser, user, druggie, drinker, alky	We promote the use of person first language. This recognises the person as an individual and does not define them by one activity or behaviour alone.
Person who injects drugs	Replaces	Injecting drug user, injector	By putting the person first, we ensure we are not defining someone solely by one behaviour and acknowledge that their drug use is just a small part of who they are as whole.
Person who is dependent on drugs	Replaces	Drug addict, junkie	We are committed to person first language and avoid words like addict. These words can feel labelling, disempowering, and judgemental.

Preferred Phrase		Stigmatising Language	Reasons for this suggestion
Positive or negative drug screen	Replaces	Clean or dirty drug screen, Failing a drug test	We use neutral and accurate terminology and avoid the judgement implied in terms like dirty or failing.
People who face barriers to accessing services they need People who services find it difficult to engage	Replaces	Hard to reach	As service providers it is our responsibility to find ways to remove barriers that prevent access to support - not the responsibility of people who need support - and our language should reflect that.
Person who no longer uses drugs or alcohol	Replaces	Clean, sober, drug free, ex- user	This puts the person first before describing their current relationship with substances, avoiding judgemental, stigmatising terms.
Person who has returned to using drugs Person who is currently using drugs	Replaces	Relapse, no longer clean, fallen off the wagon, using again, had a setback	When a person returns to drug use after a break, we should remain judgement free and use language that reflects that.

This document has been developed collaboratively with people we support and colleagues. Thanks particularly to members of Turning Point's Service User Council for their insight, and to the publications below which have informed this work:

Words Matter! INPUD & ANPUD Language Statement & Reference Guide

Exchange Supplies – Talking about drugs and those of us who take them

<u>Scottish Drugs Forum - Moving Beyond People First Language, a glossary of contested terms in</u> substance use

Turning Point Head Office America House 2 America Square London EC3N 2LU 020 7481 7600 www.turning-point.co.uk



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