

Ending Stigma with Recovery Messaging

RECOVERYU

Ending Stigma with Recovery Messaging: How to Share Your Story to Reduce the Stigma of Addiction and Recovery



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Welcome to the RecoveryU module on Ending Stigma with Recovery Messaging: How to share your story to reduce the stigma of Addiction and Recovery.

Module Goals

1. Understand what stigma is and how it can affect a person in or seeking recovery.
2. Understand what Recovery messaging is.
3. Learn how to share your recovery story in a way that is non-stigmatizing.
4. Learn ways that you can advocate and reduce stigma.



All resources and references
are located in the Resources
tab of this presentation.

By the end of this module you will:

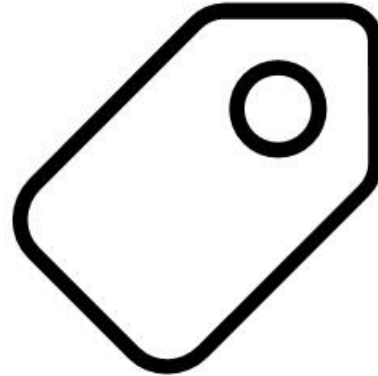
- Understand what stigma is and how it can affect a person in or seeking recovery.
- Understand what recovery messaging is.
- Learn how to share your recovery story in a way that is non-stigmatizing.
- Learn ways that you can advocate and reduce stigma.



First, we will discuss what stigma is, why people stigmatize others, and how it can affect a person in or seeking recovery.

What is Stigma?

- Stigma originally referred to as a mark or brand on Greek slaves
- Current definition: "as a mark of disgrace or infamy, a stain or reproach, as on one's reputation". (dictionary.com)
- Labels are regularly used to stigmatize people.



The word stigma originally referred to a mark or brand on Greek slaves that clearly separated them from free men. Currently the Dictionary defines stigma as “a mark of disgrace or infamy, a stain or reproach, as on one’s reputation.”

Other medical conditions besides substance use have been stigmatized, but substance use may be the most stigmatized condition in the US and around the world.

In fact, the World Health Organization (WHO) did a study that found drug “addiction” is the most stigmatized social problem in the world.”

One way that people are stigmatized is through labels. What are some negative labels that are associated with substance use? Take some time now to recall words that you have been called or ways that you have been labeled or someone you know or love in or seeking recovery has been labeled.

Stigmatizing Labels

- Addict
- User
- Abuser
- Junkie
- Loser
- Dead beat
- Worthless
- Etc.



Listed on the screen are just a few of the labels associated with substance use. You probably thought of many other ones that could have been included.

Some individuals who are negatively labeled over and over again may begin to believe what they are being called and begin to self-stigmatize.

Labels and stigma itself can lead to negative consequences for the people being targeted. This topic will be covered further in a later slide.

Why Do People Stigmatize Others?

- It's about 'otherizing'
- It's about not understanding
- It's about not knowing anyone's story/knowing someone in recovery.



So, why do people stigmatize others?

Some possible reasons as to why people may stigmatize others include:

- 'otherizing'- which may make the person feel better about themselves or one of the groups to which they belong.
- Not understanding - addiction is complicated and medicine's and societies view of addiction and substance use has changed over time.
- Not knowing anyone's story or knowing someone in recovery - it's not personal to them.

How can stigma affect a person in or seeking recovery?

- Prejudice and discrimination (housing, employment)
- Fear and shame
- Distrust and disgrace
- Stereotyping and rejection
- Anger and frustration
- Avoidance of treatment and inadequate coverage
- Ostracism and denial of rights



Listed on this slide are just some of the ways that stigma can impact a person using substances, seeking recovery, or those in recovery.

According to SAMHSA, the Substance Abuse and Mental Health Services Administration, “substance use disorders carry a high burden of stigma. Fear of judgment means that people with substance use disorders are less likely to seek help, and more likely to drop out of treatment programs in which they do enroll.”

Now that we know what stigma is and how it can negatively affect a person in or seeking recovery, what can be done to reduce stigma?

Theme 2: Messaging



Image from: <https://www.techspot.com/news/71299-open-forum-what-do-you-use-messaging-friends.html>

Research shows that there are 2 main ways to reduce stigma: (1) increasing personal contact with someone in recovery and (2) providing education on the condition and increasing someone's information about a particular topic.

Whether we are communicating with someone one-on-one or through educational settings or materials, it is important to answer the questions: What is a message? What is the intent behind your message? And how could that message be misinterpreted? Messaging is all about telling a story with a purpose.

What is a Message?

- The most important information you want your listener to hear.
- It is crucial that you know what you want to say and what you want others to remember.
- A message is more than words: what is the intent behind your message?



So, what is a message?

A message is the most important information you want your listener to hear. Before you try to communicate your message to others it is crucial that you know what you want to say and what you want your audience to remember. Depending on who your audience is, your message may change slightly or need to be shared through a different method or style.

A message is more than words. Always ask yourself: what is the intent behind your message?

What is the intent behind your message?



The sender sends the message to the receiver.

Sounds simple, right?

The receiver gets the message through a filter and might not get the message intended by the sender and may spread the wrong message. Then, the sender might get frustrated.... Communication can be more complicated than we realize!

Here are some ways to help ensure your audience receives the message you intended to communicate to them is to: 1. keep your message simple 2. be concise 3. do not use acronyms or professional specific language and 4. ask your audience if they understand what you are saying and if they have any questions.

Remember, we may be talking to people who do not know about recovery or who have stigmatizing attitudes and beliefs.

Know Your Audience

- Family
- Friends
- Co-workers
- Politicians and Policy Makers
- Media
- Neighborhoods and Communities



One of the most important parts to successfully communicating your message is knowing who your audience is. Are you talking to a family member, a longtime friend, your co-worker, or the media?

Depending on who your audience is, your story and the language you use may change. For instance when talking to a friend - it may be okay to swear, but that might not work out well for you if you swear while sharing your story with the media or politicians. Another example may be referring to yourself as an 'addict'. It could be okay when talking to a fellow 12-step group member but introducing yourself as an addict in other situations can be stigmatizing.

Another important aspect of sharing your message and knowing who your audience is being relatable. Depending on who your audience is, you may decide to share one life experience over another or even decide not mention a life experience.

Tailor your story to the audience you will be speaking to.

Word Choice Matters!

Use:	Instead of:
Use or misuse -----	Abuse
Person in recovery -----	Reformed addict or alcoholic
Medication- assisted treatment -----	Opioid replacement
Person w/ a substance use disorder -----	Addict
Abstinent -----	Clean
Actively using -----	Dirty

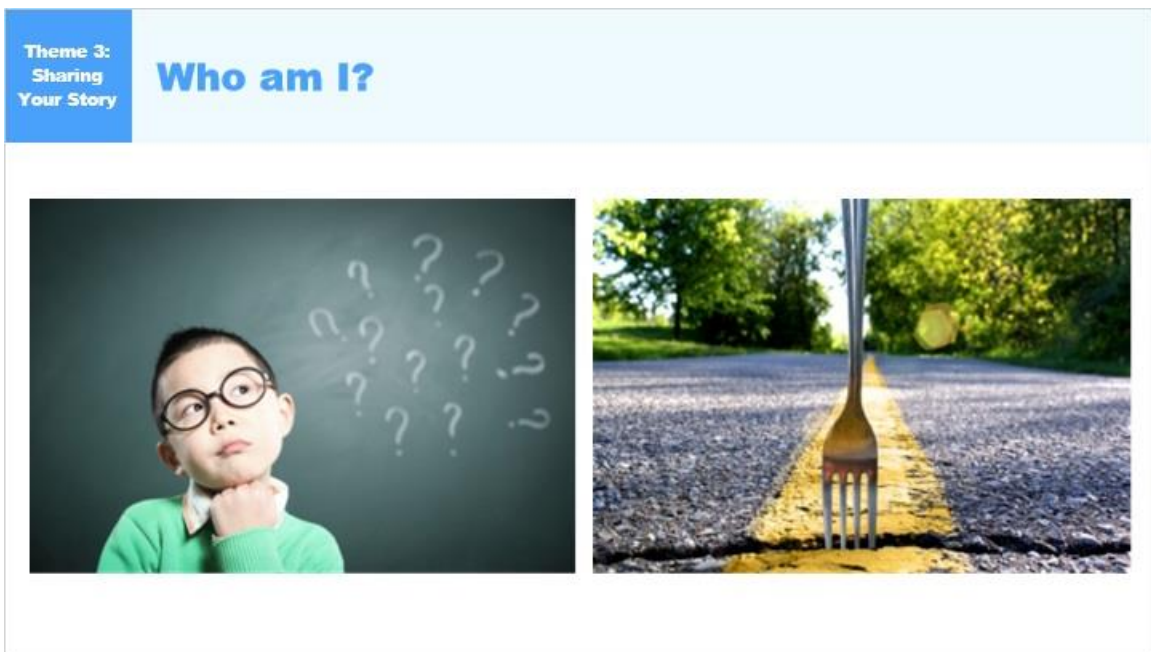
When sharing your message and recovery story it is important to keep word choice in mind. One goal of sharing your recovery story is to reduce stigma, so it's important to use terms that are not stigmatizing.

Listed on the slide are just a few word choice recommendations from one of Safe Communities' stigma awareness materials. For instance, use the phrase actively using instead of saying someone is 'dirty'. Another example is using the words "use" or "misuse" instead of the word "abuse".

Later in the module, there will be another slide that mentions additional words or phrases that you should avoid using when you tell your recovery story.



In this section, you will learn how to tell your recovery story.



How do we define ourselves and our identities as people in recovery? Who are we, and just as important, how do we communicate this to others?

Do you remember the exercise we did earlier in the module where we asked you to

name some negative labels that were associated with substance use? Now it's time to reflect on what recovery means to you and all the positives it has added to your life. Remember to highlight the good when you share your recovery story.



**Theme 3:
Sharing
Your Story**

Core Message

My name is ... and I am a person in long-term recovery. I am proof that recovery works, treatment is effective, and addiction is a medical condition...

The reason why I am sharing my story is so that others know the reality of recovery and addiction, to eliminate stigma, and so that others have the opportunity to get treatment and recover...

On this slide, you see the message suggested by Faces & Voices of Recovery. Let's run through it together. I'll be Jane.

Hi, my name is Jane and I am a person in long-term recovery. I am proof that recovery works, treatment is effective, and addiction is a medical condition. The reason why I am sharing my story is so that others know the reality of recovery and addiction, to eliminate stigma, and so that others have the opportunity to get treatment and recover.

You do not have to use this message exactly, you can adjust it to fit for you. For example, maybe you are not a person in long term recovery- you can change it to just recovery, say how many days you have been in recovery, or maybe you want to say you are a family member of someone in recovery and you want to address stigma. Adjust this message to have it be something you are comfortable saying and that it represents your viewpoints.

Why is this the way that Faces and Voices of Recovery has trained thousands of people in recovery? Well, there was research done in the early 2000s through the Living in Recovery Survey and the research found that this was the best way to share your story in a way that is non-stigmatizing.

- **Who *WE* are**
- **We Support...**

Who we are:

The recovery community is made up of people in or seeking recovery from addiction, their family members, friends, and allies.

We Support:

Many pathways to recovery including Professional Treatment, Faith-based/religious, Mutual Support/Mutual Assistance, Criminal Justice/Drug Court, Medication-Assisted Treatment, and Others

We're not going to tell you which words to elevate, celebrate, or what to say. Based on your own story you can highlight what has worked for you in terms of getting into and sustaining recovery.

What we can tell you is that there is language that is stigmatizing when we are speaking about our recovery or stories in public. Let's take a look at this on the next slide.

What's NOT in Your Message and Why

- I'm an addict (or alcoholic)
- I'm a recovering addict (or alcoholic)
- Information about 12-step programs, for examples membership in AA or NA or Al-Anon
- A "definition" of recovery
- Focusing on using history/using days

Listed on the slide are five phrases that Voices and Faces of Recovery suggest you do not include in your recovery story.

Let's take a minute to explain why you might not want to include these phrases.

The phrase 'I'm an addict or alcoholic'. If you were introducing yourself to someone who doesn't know anything about recovery or know anyone in recovery introducing yourself as an addict or alcoholic can reinforce stigma instead of reducing it. Now depending on the audience you are talking to saying you are an addict or alcoholic is encouraged and welcomed. Reflect on your audience and say what you are comfortable with.

This same reasoning also applies to the phrase "I'm a recovering addict or alcoholic".

Information about 12-step programs. When you are sharing your story in a public setting and you are in one of these support groups you are not allowed to say you are a part of AA, NA or Al-Anon because of anonymity. Instead, you can say you are in a mutual support group. We will try to explain a little further on the next slide.

A definition of recovery. Recovery is deeply personal and can look different from one person to the next.

Focusing on using history/using days. You can talk a little bit about your past, but we strongly encourage an 20/80 or 10/90 rule. 10 or 20 percent of your story can be on your past and the other 80 or 90 percent should be on how recovery has positively added to your life and where you are now.

Some audiences, like the media, can get too fixated on negative situations and images associated with the past. Recovery is a positive thing- make sure your audience hears that from you!

Theme 3:
Sharing
Your Story

Advocacy With Anonymity



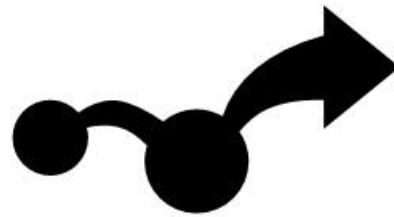
The poster features a photograph of a diverse crowd of people at what appears to be a community event or rally. Many individuals are wearing blue shirts, and some are holding signs. The text 'THE ANONYMOUS PEOPLE' is prominently displayed in the center, with the word 'PEOPLE' rendered in large, bold letters where each letter is filled with a collage of small, diverse human faces. Below the main title, a smaller line of text reads: 'RECOVERY IS OUT - TO CHANGE THE ADDICTION CONVERSATION FROM - PROBLEMS TO SOLUTIONS'.

To be clear, as a 12-step member you are allowed to advocate and share your recovery story with whoever you like. What you can't do while sharing your story publicly is to say you are a part of AA/NA, etc. As we mentioned earlier, you are allowed to say that you are a part of a mutual support group instead.

12-step groups would rather not have specific people seen as representatives of their group in the public sector in case something happens along that individual's recovery journey.

Re-Direct and Stay On Topic

- Answer the question you wished they would have asked.
- Remember you don't have to answer every question.
- Subtly correct their use of stigmatizing language or words.
- **PRACTICE!!**



While sharing your recovery story, you might be asked a question that if you answered it would reinforce stigma. What should you do?

You can either answer a question you wanted to be asked, choose to answer a part of the question or rephrase the question so that it is no longer stigmatizing. Whatever you choose to do it is essential that you stay on topic and ensure that your audience is receiving the message you intended.

Staying on topic and redirecting questions is hard, especially if you are nervous and don't have time to prepare what you are going to say ahead of time. One way to get more comfortable is to ask your friends to ask you 'bad' questions. By bad questions we mean questions that if you answered directly would reinforce stigma somehow.

Tell Your Story!

- Reduce or eliminate stigma
- Break down barriers to receiving care and treatment
- Spread HOPE!



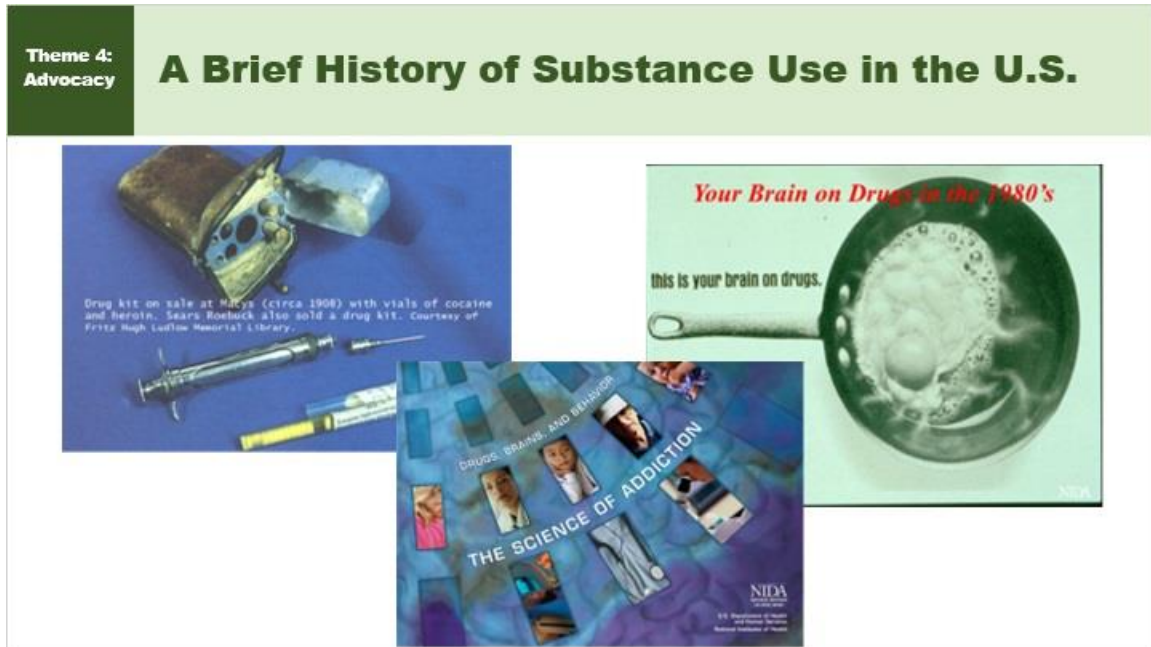
Again, why do we advocate? Why tell our stories?

To reduce or eliminate stigma, break down barriers to receiving care and treatment, and to spread hope!

Theme 4: Advocacy



In this section, you will learn a little about the history of substance use in the United States, the recovery advocacy movement, and how YOU can advocate!



We have a very interesting history with substance use and substance use disorders in the U.S.

Did you know that in the beginning of the 20th Century, you could go to your local Macy's or Sears department stores for kits of heroin and cocaine? Also, did you know that alcohol was illegal in the U.S. for thirteen years starting in the 1920s?

In the 1980s, we know that there was a huge crackdown on drug use. Does anyone remember these commercials?

Since this time, we now know (thankfully!) much more about addiction and recovery - how addiction is a medical condition that changes the brain. But that the brain can also heal in recovery!

Recovery Advocacy Movement



In the early 1990s, a group of advocates from across the U.S. - including our previous Director, Flo Hilliard, met in Washington D.C. to discuss how to meet the needs of their communities, celebrate the strengths of recovery, and address the challenges of addiction, including the challenges of stigma.

From this and other meetings, a number of grants came from the federal government at this time for states to develop organizations and projects.

What emerged was the concept of a Recovery Community Organization - support that emerged from the community and from peers and family members who had experienced addiction and recovery firsthand.



For almost 20 years, statewide and local Recovery Community Organizations (RCOs), representing people in recovery from alcohol and other drug addiction, their families, friends and allies, have formed around America to support the creation of Recovery Support Services (RSS).

Under the guidance of Faces & Voices of Recovery, these RCOs have advocated for rights and resources for individuals in or seeking recovery and their family members. Over time, because of the work of RCOs, the stigma surrounding addiction and recovery has decreased and support for recovery has grown across the country.

But, clearly more work still needs to be done!

What can you do?

- Advocacy is on a spectrum.
- Some examples of smaller advocacy tasks are: making a phone call or writing a letter to your legislators, attending a rally or other recovery event, sharing your recovery story with someone, etc.
- Some examples of larger advocacy tasks are: presenting during a legislative hearing, doing an interview with media, putting together a recovery event, creating a RCO, etc.

Advocacy happens on a spectrum from small to large actions. Some examples of smaller advocacy tasks include: making a phone call to your legislators, writing a letter to your legislators, attending a rally or other recovery event, and sharing your recovery story with someone.

Some examples of larger advocacy tasks include: presenting during a legislative hearing, doing an interview with media, putting together a recovery event, and creating a RCO.

Can you think of some other advocacy tasks that you could do?

Do whatever you feel comfortable doing- any advocacy makes a difference!