

# Talking about Drug Use: A Glossary for Elected Officials



This glossary was developed in partnership with the Peer Network of New York, a group of harm reduction support specialists who provide vital services including health education, testing (for HIV and Hepatitis C), harm reduction guidance, recovery coaching, and community outreach. They have lived experience and can relate to the community in a unique way, and are a crucial asset in building community health and well-being.

We created this glossary to provide guidance on language to avoid when talking about drug use and people who use drugs, with the intention of moving away from stigmatizing and dehumanizing language and toward people-first language that confers dignity and respect.

For people who use drugs, or who formerly used drugs, stigma can be a barrier to a wide range of opportunities and rights. People who are stigmatized for their drug involvement often face social rejection, labeling, stereotyping, and discrimination, even in the absence of any negative consequences associated with their drug use. This manifests in a variety of ways, including denial of employment or housing.

The public's perception of drugs is often not based on scientific evidence. You can help end stigma by learning the facts about drugs, drug use, and evidence-based drug treatment and sharing the information with others. The way we talk about drugs and the people who use them can create or uphold stigma. Focus on the whole person, not a behavior.

## ✗ DON'T USE | DO USE ✓

*Dehumanizing, demeaning, demoralizing language, such as:*

*People-first language that confers dignity and respect, such as:*

Addict/fiend

It's important to distinguish between problematic use and personal use—not all people who use a drug are inherently addicted.

*When speaking generally, say:* person who uses drugs.

*When talking about a specific issue, say:* person who has a problematic relationship with drugs.

Get clean, Clean drug test

Stay away from this term, which implies that a person was previously “dirty.”

*Instead say:* a person who formerly used drugs. When possible, ask the person directly how they refer to themselves and their journey.

*If referring to a test, say:* test was negative, test was not positive for a substance.

Junkie, Crackhead, Zombie, Tweaker

Do not use dehumanizing terms for people who use various substances—that contributes to the othering, stigmatizing, and discrimination of people who have needs.

*Instead say:* person who uses injection drugs/crack cocaine/synthetic cannabinoids, if in fact it's necessary to specify.

“Those” people	Don’t use othering language that draws false distinctions among people. <i>Instead:</i> use inclusive language and describe the group or individual using people-first language.
Crazy vs. “normal” (acting/behavior)	Avoid using terms that refer to mental illness—unless that’s truly what’s being discussed. Also stay away from speech that defines mainstream actions or behavior as normal—which implies those who don’t fall in line with that are wrong. <i>Instead:</i> celebrate difference and diversity of experiences and approaches.
Crack baby	This label is not scientifically supported and leads to damaging stereotyping. A major long-term <a href="#">study</a> has shown that there is no statistically significant difference in health or life outcomes for babies exposed to crack in utero. Poverty – not drugs – was found to pose a much higher danger to children’s outcomes. <i>Instead say:</i> pre-natal exposure to a controlled substance.
“Poisoning themselves”	Stigmatizing use only makes it harder for people to ask for help when they need it. Due to prohibition many people are hesitant to seek help for fear of criminalization and stigmatizing—we should avoid speaking in ways that reinforce stigma.
“New” crack	This analogy reinforces fear-mongering. Our response to crack was criminalization, but we’re in a different era now – prioritizing public health and harm reduction – and harkening back to the crack era plays on hysteria and harmful stereotypes.
Synthetic marijuana	An inaccurate term that perpetuates the myth that novel substances such as K2 and Spice are like marijuana when synthetic cannabinoids actually have quite different, and often more powerful, effects than marijuana.
Offender/inmate	<i>Instead say:</i> formerly incarcerated person.
Drawing distinctions (type of drug, violent/nonviolent crime)	It’s best to stay away from creating unnecessary distinctions, such as whether someone sniffs a drug or injects, or between how a crime is classified, since those differences are often arbitrary and lead to othering.
“Crack down” / cut off the supply	Prohibition and criminalization as a strategy has failed in the past and won’t work now. There are more drugs, and they’re more accessible, than ever before. Trying to stop the market only pushes it underground and makes it less safe. Also, “cutting off supply” often victimizes subsistence-level sellers without solving the problem.