

Do you agree or disagree with the assertion that calling a person with alcohol use disorder an “alcoholic” is detrimental for their care and engagement with treatment systems?

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Essay Prompt: The passage describes stigma as a major problem in the mental health field (1). Do you agree or disagree with the assertion that calling a person with alcohol use disorder an “alcoholic” is detrimental for their care and engagement with treatment systems? Please clearly state whether you agree or disagree and provide justification for your answer. Please limit your response to the space provided below.

Yes, I agree with the assertion that calling a person with alcohol use disorder an “alcoholic” is detrimental for their care and engagement with treatment systems.

A substance use disorder (SUD) is known as “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 (2).” There is a substantial difference between labeling someone as a “substance abuser” or “alcoholic” versus recognizing them as having “substance use disorder (1).” When one refers to individuals as “substance abusers” or “alcoholics,” they reduce those individuals to their condition and imply a sense of personal choice and fault in their

situation. However, this fails to recognize the complexity of addiction or substance use. The difference between terms like “substance abuser” and “alcoholic” versus “substance use disorder” is that one identifies the person as merely the disorder they have (substance abuser and alcoholic), while the other allows for that person to not be caged into this box where they are only seen to have a substance use disorder (3).

It is critical that society and medicine acknowledges the importance of language and the stigma that harmful language can create. A stigma is “any negative attitude, prejudice, or false belief associated with specific traits, circumstances, or health symptoms (4).” In the case of substance use disorders, a stigma is constructed with insensitive language like “alcoholic” and “substance abuser.” The term “abuser” insinuates that the person who used the drugs or consumed the alcohol had a fault or moral lapse. However, this can be presumptuous. Many factors such as upbringing, social environment, and coping mechanisms, can contribute to causing or worsening a substance use disorder. For instance, parents that experienced or are experiencing, a substance use disorder or condone the use of drugs may raise children to share similar beliefs or expose them to a similar environment in early childhood. Moreover, it is said that when “kids or teens use drugs, it affects how their bodies and brains finish growing,” which increases their likelihood to continue to use drugs into adulthood (5). Thus, a cycle of substance use disorders can be perpetuated: a child who grew up surrounded by the influence of substances may affect their own children, peers, or family in the same way they were impacted. Additionally, once an individual has a substance use disorder, they are now dependent on the substance they are intaking. Specifically with drugs, thorough and extensive brain tests and studies show that once an individual is reliant upon drugs, there are “physical changes in parts of the brain that are very important for judgment, making decisions, learning and memory, and controlling behavior (5).” This strongly indicates why it is so difficult for

individuals who have a substance use disorder to maintain a healthy lifestyle (6). One of the patients interviewed in the Neuropsychiatric Patient class, Ms. Kari, an individual who has a substance use disorder and was exposed to drugs in early childhood. She described how the compulsion to use substances can become overpowering, similar to a basic human need like water. She highlighted the involuntary nature of addiction.

There is still stigma and continuous misused language surrounding substance use disorders. Many individuals with substance use disorders shy away from medical aid. Stigma is a major contributor as to why “nearly 90% of people with substance use disorders [in the U.S] do not receive treatment (1).” Due to this, it is imperative that individuals receive the proper care that they require and deserve. It can a pivotal change if society and medical professionals utilize respectful and uplifting practices and language when addressing and treating individuals with substance use disorders. This number could be reduced if the power of the term “substance use disorder” was further understood. Substance use disorder contains an empathetic undertone that empowers individuals with substance use disorders to feel comfortable, safe, and free of judgement in the spaces they occupy. The term “substance use disorder” reframes “substance abuse” as a medical condition-something to empathize with-rather than a moral flaw. The connotation of “disorder” calls for greater measures, such as medical help. Doctors are more likely to treat a patient when described to them as having a “substance use disorder,” while recommending jail for those that are presented as a “substance abuser (1).” Furthermore, when terms like “substance abuser” get used in the hospital setting, this translates to medical literature. Published research and medical journal articles are open to the public, so the language that these platforms use guides society’s views on substance use disorders. Consequently, society develops a negative connotation and avoids accepting a medical and psychiatric field (substance use disorders) that needs the appropriate attention and care.

Another significant consequence of the stigma surrounding substance use disorders is that the societal stigma can quickly turn into “self-stigma (1).” Self-stigma is a stigma that is “internalized” by an individual, as a result of societal beliefs (1). Stigmas can penetrate an individual’s mind and alter the way they think, treat, and present themselves to those around them. It is harmful for an individual to assimilate stigmas within themselves and attribute who they are to stigma because stigmas are inherently incorrect, discriminatory, and antagonistic. If a stigma is used by society to mistreat certain individuals, and in turn these individuals start believing what society is saying about them is true, this can be extremely harmful for an individual’s sense of self-worth. Consequently, their “interest in seeking help” and “hope for recovery” will be diminished, which can impact “their social relationships” and exacerbate “their psychiatric symptoms (1).” Regarding how self-stigma can detrimentally affect the way an individual treats themselves, “studies also suggest that self-stigma increases avoidant coping and suicide risk (1).” Avoidant coping is the act of someone utilizing “cognitive and behavioral efforts” to “[avoid] dealing with stressful demands (7).” Self-stigma can also negatively impact “treatment adherence and vocational functioning (1).” Avoidance coping, higher suicide risk, lack of adherence to treatment plans, and a lack of job-related abilities adversely affect an individual’s lifestyle. If someone is unable to complete everyday tasks, their tasks can continually build up and cause them to become overwhelmed. If someone is experiencing suicidal ideologies, their mindset can substantially be impacted. If someone is not complying with a treatment plan that could potentially help them, their disorder can worsen. Lastly, if someone is not able to obtain and maintain a job, this can hurt them financially but also stop them from learning career skills that are important for everyday life and interacting with others. It is extremely crucial that society discontinues presumptuous and insensitive ideologies towards individuals who have substance use disorders, constructing a comfortable environment. Similarly, it is crucial that medical professionals are trained to employ compassionate and

nonjudgmental language when attending to individuals with substance use disorders, developing optimal and fair medical treatment.

In general, when language like “alcoholic” and “substance abuser” is utilized in a medical setting, it influences the public perception and societal attitude towards substance use disorders. The stigma furthers in a negative light, which may hinder individuals from requesting or receiving the care they need. If language acknowledging the complexity of the situation was adopted, then society and the medical field can foster a more supportive and inclusive environment, resulting in suitable care for all.

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