

Reducing Stigma: A Law Enforcement Guide to Supporting Those with Substance Use Disorders

As law enforcement officers, you're often the bridge between crisis and recovery. By approaching addiction as a health issue rather than just a criminal matter, you can save lives while making your community safer. Your interactions with people experiencing substance use disorder (SUD) can be the difference between someone seeking help or avoiding it entirely.

Why Officer Attitudes Matter

You are often first responders to overdose calls and mental health crises. Your approach in these critical moments can directly impact whether people seek treatment or continue to avoid help due to fear. Community policing approaches that reduce stigma don't just improve public health—they enhance public safety and build stronger community relationships.

The Current Reality: Barriers Created by Fear

- **67% of people with addiction** avoid calling police in emergencies due to fear of arrest¹
- **Police officers show higher implicit bias** toward people with addiction than the general population²
- **Traditional enforcement-only approaches increase** both overdose deaths and criminal recidivism³

Train Officers on Addiction as a Medical Condition

- **Mental Health First Aid for Law Enforcement:** This 8-hour specialized training helps officers understand addiction and mental health, leading to better outcomes for everyone involved.
- **Crisis Intervention Team Training:** A comprehensive 40-hour program that gives officers 67% improvement in confidence when handling addiction-related calls while reducing injuries to both officers and civilians



Adopt Harm Reduction Approaches

Naloxone (Narcan) Training and Distribution:

- Train all officers to recognize overdose signs and administer naloxone
- Carry naloxone on all patrols as standard equipment
- Partner with community organizations for broader distribution

It is a myth that you can overdose by touching fentanyl.

Support Good Samaritan Policies:

- Focus on life-saving over law enforcement when someone calls for overdose help
- Educate your community about Good Samaritan laws
- Understand that fear of arrest prevents people from seeking emergency help

Language That Build Bridges

Use Person-First Language

Instead of	Say This
Addict, Junkie, User, Substance abuser	Person with substance use disorder or Person who uses drugs
Recovering addict, former addict	Person in recovery
Substance abuse	Substance use for illicit drugs and substance misuse for prescription medications
Drug habit	Substance use disorder, opioid use disorder, addiction
Opioid substitution or replacement therapy	Medication for Opioid Use Disorder (MOUD) or opioid agonist therapy
Clean or Dirty (test results)	Testing negative for drugs or testing positive for drugs

De-escalation Techniques That Work

- Approach with compassion rather than suspicion
- Ask about medical needs before investigating potential crimes
- Connect people with available resources rather than just enforcing consequences

Training and Resources Available

National Programs

- [Police Assisted Addiction & Recovery Initiative](#)
- [International Association of Chiefs of Police](#)
- [Police Executive Research Forum](#)
- [National Association of Drug Court Professionals](#)
- [Crisis Response and Intervention Training](#)

Connecticut-Specific Resources

- [CT Police Officers Standards and Training Council](#)
- [CT Department of Mental Health and Addiction Services](#)
- [Community and Law Enforcement for Addiction Recovery \(CLEAR\) initiative](#)

The Impact of Your Approach

When officers treat addiction as a health issue:

- Communities see decreased overdose deaths
- Crime rates often decrease as people get treatment instead of cycling through the criminal justice system
- Public trust in law enforcement increases
- Officers report greater job satisfaction and reduced stress

Sources

1. [Drug Policy Alliance](#)
2. [Journal of Police and Criminal Psychology](#)
3. [American Journal of Public Health](#)