

Stigma and Addiction

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- Volkow ND. Stigma and the toll of addiction. N Engl J Med. 2020 Apr 2;382(14):1289-1290. PMID: 32242351
- McGinty EE, Barry CL. Stigma reduction to combat the addiction crisis – developing an evidence base. N Engl J Med. 2020 Apr 2;382(14):1291-1292. PMID: 32242352

Definition of Stigma

- A process wherein people with a particular social identity are labeled, stereotyped, and devalued, unfolding within the context of unequal and often preexisting power relations, leading to discriminatory behavior against people with the stigmatized identity

Toll of Addiction and Stigma

- Addiction a key factor in lower US life expectancy
- Few with SUD get any kind of treatment
- One major barrier to care is stigma:
 - Keeps people away from help
 - Impacts treatment programs and care delivery
 - Also impacts addiction on the individual level
- Stigma and mental health:
 - Some progress, e.g. Depression
 - Less progress with addiction

Why is Addiction Stigmatized?

- People with addiction sometimes lie or steal, or can be aggressive when intoxicated or in withdrawal
 - Hard to show compassion
- Assumption that willpower is sufficient, that addiction is a choice
- Resistance to disease model of addiction
 - Brain changes identified, strong genetic component
 - Often no longer fun, but diminishes distress, craving
- These views are widespread in society, health care

Effect of Stigma on Individuals

- Resistance to seeking care even when clearly needed
- Resistance to even disclosing the problem
- Stigma can become internalized, promoting isolation and encouraging more drug taking, making it worse
 - “Rat Park” experiments show impact of social isolation
 - Neurological overlap of drug rewards and social rewards
 - Stigma removes social rewards, promotes rejection (pain)

A Path Forward

- Stigma may not be conscious bias
- If we want more people in treatment, the healthcare system has to reduce the social penalty for help seeking by educating health care providers:
 - Addiction is chronic and relapsing medical condition
 - Addiction is treatable
 - Addiction has multiple causes

Widespread Effects of Public Stigma

- Individual level:
 - Hiding use, isolation, high risk solitary use
 - Prevent seeking treatment or harm reduction services
- Health system level:
 - Underinvestment in treatment, poor care
 - Discriminatory policies (e.g. insurance parity)
- Societal level:
 - Discrimination in insurance, employment, housing
 - NIMBY, punitive vs public health solutions

Evidence on Reducing Public Stigma

- Unlike evidence-based practices, tools used to reduce stigma are mostly based on intuition
 - Communication and education campaigns
- Example: national “Disease Like Any Other” campaign
 - Framed mental illness as like other chronic diseases
 - Did not reduce, and by some measures increased stigma
 - Perhaps heightened perception of permanence
- Evidence for combating public stigma of addiction is underdeveloped

Principles to Guide Stigma-Reduction Campaigns

- From randomized message testing experiments:
- “Person-first” language essential for stigma reduction
 - “Abuse” vs “Use Disorder” leads to more punitive attitudes¹
 - DSM-5 eliminated “substance abuse” as a diagnosis
- Emphasizing solutions reduces stigma
 - Portrayals of successful treatment reduced stigma²
 - Support for “Overdose Prevention Site” much greater than for “Safe Consumption Site”³

¹Kelly JF et al. *Int J Drug Policy* 2010;21:202-7

²McGinty EE et al. *So Sci Med* 2015;126:73-85

³Barry CL et al. *AJPH* 2018 Sep;108(9):1157-9

Principles to Guide Stigma-Reduction Campaigns

- Sympathetic narratives can reduce stigma¹
 - Reduced blaming of pregnant woman with OUD
 - However, this effect seen for high SES, not low SES
 - Intersectional nature of addiction stigma: race, class, etc.
- Emphasize societal rather than individual causes of addiction
 - Cognitive bias assumes individual's actions depend on intrinsic personal characteristics > societal factors
 - Choices vs poverty, trauma, structural barriers
 - Research needed in this area
 - Adverse Childhood Experiences (ACE) Study

¹Kennedy-Hedricks A. J Health Polit Policy Law 2016;41:

Context Matters

- Anti-stigma campaigns can be evaluated rigorously
- Messages can be pre-tested
- Need to determine which messages work for which groups
 - public, medical care providers, criminal justice workers, Child Protective Services
- In health care, context matters:
 - Treatment availability may be key to changing attitudes

Summary

- Stigma has important impacts on addiction and its treatment
- Reducing stigma is one key to improving care and care access
- Public stigma mitigation can be studied scientifically in a variety of settings

Questions?

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