

initiative 7

Eliminate the Stigma Associated with Diagnosis and Treatment of Drug Problems

- ▶ **Increase the proportion of the public that believes that drug addiction is a treatable problem comparable to other chronic diseases.** Data source:

National public opinion poll

- ▶ **Increase the proportion of health professionals who believe that drug addiction is a treatable problem comparable to other chronic diseases.**

Data source: National public opinion poll

“Concerted efforts to eliminate the stigma associated with the diagnosis and treatment of drug problems are essential.”

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POLICY RECOMMENDATIONS

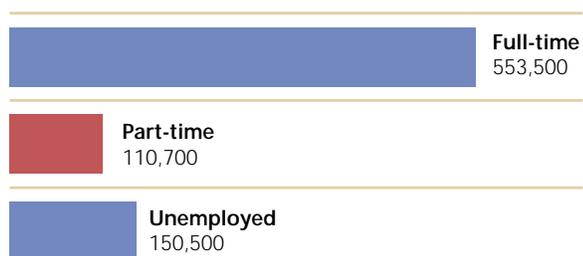
- ▶ **Increase the proportion of the public that believes that drug addiction is a treatable problem comparable to other chronic diseases.** Data source: National public opinion poll
- ▶ **Increase the proportion of health professionals who believe that drug addiction is a treatable problem comparable to other chronic diseases.**

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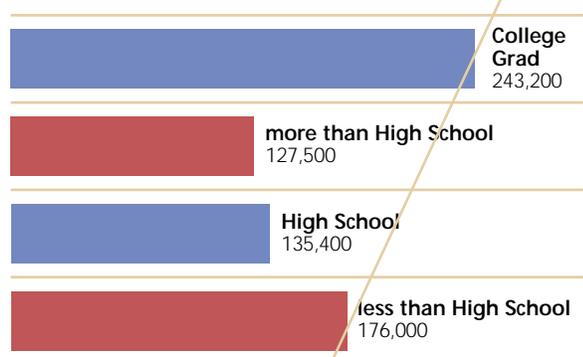
BACKGROUND AND REFERENCES

Public perceptions of drug abuse and addiction generally lag behind scientific advances in knowledge. Data from two national surveys – the National Household Survey on Drug Abuse (performed by the Substance Abuse and Mental Health Services Administration) and the Youth Risk Behavior Survey¹ (performed by the Centers for Disease Control and Prevention) – provide revealing information which contradicts many popularly held views of substance abusers. That data was analyzed and prepared by Jeffrey Merrill, a researcher in the areas of treatment economics and policy (see charts on the next page).

Monthly Cocaine Users by Employment Status



Number of Youths Who Used Cocaine in the Past Month by Father's Education Level



Understanding predominant viewpoints about addictions is vital for health professionals, leadership groups, and civic and political organizations. As reported in a recent Institute of Medicine publication, “Even after years of public statements that drug addiction is a disease, many continue to subscribe to a moralistic view of addiction and to see addicted people as immoral, weak-willed, or as having a character defect requiring punishment or incarceration.”² The compassion normally displayed by the public about chronic diseases and toward individuals suffering from such diseases is not extended to the disease of addiction. The popular prejudice is that substance abuse is simply not the same in either medical practice or treatment outcome. However, such a view is at odds with established science (see the chart on the next page).

Some argue that the stigma surrounding illicit drugs is instrumental in discouraging experimentation or even continued use. It is thought that public opinion and fear of the ramifications will help thwart desires for or curiosities about illegal substances. In the book *Body Count*, which understands drug use to be one of the “immediate causes of much of America’s moral poverty, the destruction of large parts of our inner cities, and its record-high crime rate,” the authors argue that a drug stigma works to deter casual use by children and adolescents.³ The authors also suggest that drug use in these age groups is spread by their peers, rather than by adults. They justify this idea by referring to a national survey of high school students which found that individuals who reported that they “probably will not” or “definitely will not” use marijuana in the coming year state this for four major reasons: (1) lack of desire to get high (62.4%), (2) possible psychological damage (60.9%), (3) possible physical damage (59.7%), and (4) parental disapproval (58%). Fear of arrest was one of the five leading reasons in an equivalent survey about cocaine and crack. Based on such reports, the authors conclude, “The lesson is obvious: normalize drug use and more young people will take drugs, stigmatize drug use and there will be less of it.”

On the other hand, clinicians, patients, and families understand that disease stigmatization often prevents individuals from seeking or receiving the help they need. Stigma may also prevent usually reliable sources

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some adverse behaviors and devises interventions to reduce risks to both users and non-users.

Harm reduction has become controversial because it is associated not only with needle and syringe exchange, but also with methadone maintenance treatment and, to a lesser extent, the reform movement for drug decriminalization. In his essay, MacCoun observes, “The tone of the harm-reduction debate suggests that attitudes toward drug policies – on both sides – are influenced by deeply rooted and strongly felt symbolic factors that are largely independent of concerns about policy effectiveness per se.” In other words, despite the conclusions of scientific research, stigma often drives the drug debate.

Several public opinion surveys have measured various aspects of drug stigmatization. A recent paper in the *Journal of the American Medical Association* analyzed 47 national surveys conducted between 1978 and 1997.⁷ According to the collected data, 82% of Americans considered illicit drug use a major problem in this country and 68% reported getting their information about illicit drug problems from the media, especially television. The number of people reporting drug problems in their own communities was significantly lower than their perceptions of the extent of the crisis nationwide.

The same study also found that the large majority of surveyed individuals were concerned about illicit drugs because of their link to high crime rates (73%), negative impacts on national character (72%), a fundamental decline of morality (50%), and harmful consequences to the user (89%). While 78% of the people believed that the War on Drugs has failed, most supported an allocation of resources in roughly the same policy direction as the current model (approximately two-thirds of resources toward interdiction and incarceration and only one-third toward treatment and research). Increased funding for treatment was given low priority and was strongly favored by only a minority (19%), although 59% of individuals believed that closely supervised treatment for first-time offenders could significantly reduce crime.

ENDNOTES: INITIATIVE # 7

- 1 Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion, *1995 Youth Risk Behavior Survey* (Atlanta, GA: CDC, September 27, 1996).
- 2 Institute of Medicine, *Dispelling the Myths About Addiction: Strategies to Increase Understanding and Strengthen Research*, (Washington, DC: National Academy Press, 1997): Chapter 8.
- 3 Bennett W, DiIulio J, Walters J, *Body Count: Moral Poverty... And How To Win America's War Against Crime and Drugs*, (New York: Simon & Schuster, 1996): Chapter 4.
- 4 Shapiro C, Douglas A, A Comprehensive Approach to Community Based Drug Treatment, *Physician Leadership on National Drug Policy*, November 1998.
- 5 Institute of Medicine, *Dispelling the Myths About Addiction: Strategies to Increase Understanding and Strengthen Research*, (Washington, DC: National Academy Press, 1997).
- 6 MacCoun R, Toward a Psychology of Harm Reduction, *American Psychologist* 53(11): 1199-1208 (1998).
- 7 Blendon R, Young J, The Public and the War on Illicit Drugs, *Journal of the American Medical Association* 279(11): 827-832 (1998).