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Report challenges stigmatisation of people with problematic alcohol and drug use

Stigma and discrimination can cause far-reaching, long-term harm to people living with problematic alcohol and other drug use, making it difficult for them to seek help and recover.

The Queensland Mental Health Commission today released *Changing attitudes, changing lives*, a report on the impact of stigma and discrimination on people experiencing problematic alcohol and other drug (AOD) use, including options for reform.

The report found stigma and discrimination was pervasive in a wide range of settings including within health care, welfare and support services, often long after substance use has stopped.

It also found that there was potential for stigmatising attitudes to affect the way policies, laws and practices were implemented.

Stigmatising portrayal in the media was identified as inadvertently creating barriers to people seeking help and potentially further entrenching negative community attitudes.

The report outlines 18 options for reform focused on human rights, social inclusion, engagement of people with lived experience, service access, the justice system and economic participation. It provides evidence-based policy advice to inform discussion and action.

Mental Health Commissioner Ivan Frkovic said stigma and discrimination has a profound negative effect on individuals, often leading to them being excluded and marginalised, both in their personal and family relationships as well as in employment and other areas of community life.

“We need to challenge stereotypes and see problematic AOD use as a public health issue, not a moral or criminal one,” he said.

“Queenslanders from all walks of life use alcohol, tobacco and other legal and illicit drugs.

“Most people, most of the time, don’t experience harm, but when people fall into problematic use and dependency, they can be shunned, considered blameworthy and dangerous.

“This can be distressing, and can make people feel a sense of worthlessness and hopelessness, that can trigger a vicious cycle of further problematic AOD use.

“Often we fail to separate the person from the alcohol or drug use itself, or see this as a health issue.”

Rebecca Lang, Chief Executive of the Queensland Network of Alcohol and Drug Agencies

(QNADA), said that as a community, we have a duty to ensure people are treated fairly and have access to the support they need.

“People experiencing problematic substance use—and their families—are discriminated against in many facets of their lives, compounding exclusion and disadvantage,” she said.

“It’s important to emphasise that recovery is the norm, and people who have experienced problematic substance use can go on to live full and contributing lives as part of their family and community.”

Mr Frkovic said stigma could be overt or subtle, but its complexity required a wide-ranging approach to achieve change.

Reform options include:

- anti-stigma training for social services workforces, such as health, housing, child safety and justice, as well as police
- measures to address potentially discriminatory provisions in Queensland law
- better engagement of people with lived experience of problematic AOD use in service design and delivery
- public awareness campaigns and media guidelines
- actions to foster more supportive workplaces.

Mr Frkovic said some options could be put into action immediately, while others would require further policy discussion and consideration.

The Commission’s reform options are based on government and community consultation, as well as research by the National Drug and Alcohol Research Centre. Both reports are available at www.qmhc.qld.gov.au

***Note: the following page includes quotes from Queenslanders who were interviewed as part of the NDARC research about their experiences of stigma and discrimination.**

ENDS

Voice of lived experience

The following quotes were taken from interviews with people as part of the independent research by the Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of New South Wales on behalf of the Queensland Mental Health Commission.

Stereotypes and assumptions

“They assume that we’re all low lives, dole bludgers... A lot of people here, including myself, we’re very switched on. We’ve done apprenticeships, we’ve got certificates and degrees... it’s just that we’ve been stuck at a certain point in our life.”

“I’ve been spat on in the street.”

Subjectivity, self-esteem and self worth

“Puts you into a spiral... it affects your mental health, your self esteem and your self-worth... one thing that people in the world strive for is connection, and if no one wants to connect with you, then you have nothing... it leads down the roads to suicide and self-harm...”

“[on stereotypical ‘junkie’ attributes]... having that put on you by people that don’t even know you, don’t know your story... for them to judge you and class you as something that is worthless, it’s hard to deal with. That just spins you into further addiction, because you’re like, people already think less of me... I might as well be a junkie.”

“You feel a little bit of shame a guilt because of where – you know that you made your own bed. You feel a little bit untrustworthy, you feel dirty and you feel like you have to climb a mountain to say ‘Hey, I’m actually a decent person when I’m straight’.”

Effects on drug use

“Being told that you’re worthless, you’re good for nothing, you’re a low life, you’ll never accomplish anything, makes you feel if I’m not good enough, why should I even bother? So for me personally, it made me want to go harder in my addiction.”

Stigma as a barrier to help-seeking

“The judgement does come in, when you really need that help. So you get knocked back a few times, and that’s what makes you go back out using.”

Family/social

“I would not get invited to certain things because they didn’t want their children or their friends to be around me. Even though I wasn’t using at that point, I was still classed as a junkie and they still saw me to be that dirty person. If I did go to an event, there would always be talking or whispering behind your back...”

“Not long ago my sister and my brother stopped talking to me because they found out that I used to inject... I was honest with them... so they judged me pretty harshly on that.”

“No one ever asked me, ‘Why are you doing it?’ They were just like, ‘Oh, you’re nothing but scum.’”

Health care

“One time I went into hospital for something. One of the doctors said, ‘She’s a bloody drug user. No use keeping her in hospital...”

“The first thing the ambulance driver did was tell the doctors it’s just alcohol withdrawal and I got told to leave... I had a temperature of 41.9... [it’s] because I’m homeless and alcoholic.”

“They just assumed I was there for something, a big hit of... morphine or a big hit of Fentanyl or something.”

“The pharmacy assistants, you could tell just thought of us as second class... there was just like that sense of disgust... just because you were on [methadone].”

Employment

“I didn’t feel as worthy because three people knocked me back because I had a criminal history... I’d battled for a few years to get my clean time up, to get into a routine and of not being an addict... So I’d put in the hard yards, only just to be kicked in the teeth three times.”

Police/public order

“I have had organisations like Queensland Police, even though they know that I’ve been rehabilitated, that I’m trying to change my life, they’re still down on me...”

Legal

“I’ve shown 18 months of clean drug-testing and all the rest of it, but because I’ve had previous history on police records, and mental health records, it was all brought up that I’d suffered from induced psychosis... it was basically dismissed as... an inactive period... You’re still a junkie, you’re just inactive.”

Positive examples

“Mum’s particularly good. She’s known about my problems for years and she still stands by me...”

“[The health worker] actually listened to what I had to say, she had positive things to say. Made me feel good about myself and said, ‘Look, like you’re just dealing with it the only way you know how... stop kicking yourself.’”

“They were beautiful; both of them were beautiful, they had my best intentions at heart. They didn’t see what the society saw, they had understanding, they could see me for me.”

“We were in rehab in a car, but we got pulled over... we were open about the fact we were recovering addicts and ... the response was good. [The police officer] was smiling saying ‘That’s really awesome, you guys are doing really well, good on you.’”