Changing the Culture Around Substance Use Disorders

Michigan Premier Public Health Conference 2023

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Pre-Test
https://forms.office.com/r/cGcChChTpf
Purpose:
Assess the prevalence of stigma regarding SUDs in specific subpopulations in the Northwest Community Health Innovation Region to inform effective and targeted interventions to reduce the impact of stigma and improve outcomes for people experiencing SUDs.
Addressing substance use disorders in northwest Michigan is urgent.

Increasing access to SUD services was identified as a priority strategic issue in the 2021 MiThrive Community Health Needs Assessment (CHNA) conducted across the ten counties of the NWCHIR.

In 2022, there have been 70 overdose deaths within the 10 NWCHIR counties (MDHHS MOTA Dashboard, 2023).
Despite the reality that substance use disorders are associated with changes in brain circuitry, people with substance use disorders often face significant stigma for “choosing” to use. As a result, they are sometimes viewed as “bad”, “weak”, or “unfit for society”. These public biases against people with SUDs can deter those affected from seeking help.
Our Goals

• Evaluate the Prevalence of Stigma Against Substance Use Disorders in the public and in target populations in the Northwest CHIR

• Design a Campaign to Change Perceptions of people with Substance Use Disorders and Reduce Stigma
Since 2021, 33 stakeholders in the NWCHIR have been engaged in the work of this Action Team.
Implementation Steps

01 Funding
Received funding from NACCHO for a one-year project to assess and address stigma against SUDs in NW MI.

02 Develop Surveys
Developed a public stigma assessment tool, healthcare provider tool, law enforcement/first responder tool, and self-stigma assessment tool with the support of CDC’s Dr. Yang.

03 Distribute Survey 1
Distributed the public stigma assessment tool in September 2022. We also distributed the public assessment to four local health departments.

04 Distribute Additional Surveys
Data: Public Assessment

1,374 respondents across 10 counties (Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford). Respondents answered 38 questions (including background questions) virtually on the Alchemer platform. The assessment was distributed between Aug 15th to Sept. 19th 2022.

Demographics: 78% of the respondents were white. The average age is between 35-44 years old and the average income is $50,000 to $89,999. Additionally, 53% were females and 46% were males. 46% have a bachelors degree or higher.
Data: Public Assessment

Have you ever had a family member or close friend who currently or had previously had a problem with SUD?

- Yes: 6 out of 10 respondents answered yes
- No: 4 out of 10 respondents answered no

Have you ever had a family member or close friend who has faced stigma or discrimination due to a SUD?

- Yes: 5 out of 10 respondents answered yes
- No: 4 out of 10 respondents answered no
Data: Public Assessment

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most people would be willing to accept someone who has been treated for</td>
<td>34%</td>
<td>51%</td>
</tr>
<tr>
<td>substance use disorder as a close friend.</td>
<td></td>
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<tr>
<td>Most people would believe that someone who has been treated for</td>
<td>28.1%</td>
<td>51.4%</td>
</tr>
<tr>
<td>substance use disorder are trustworthy.</td>
<td></td>
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<tr>
<td>Most people would hire someone who has been treated for substance</td>
<td>22.0%</td>
<td>47.9%</td>
</tr>
<tr>
<td>use disorder to take care of their children.</td>
<td></td>
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</tbody>
</table>
Data: Public Assessment

Substance use disorder is a chronic condition like diabetes mellitus

- Yes: 5 out of 10 respondents agreed or strongly agreed
- No: 2 out of 10 respondents disagreed or strongly disagreed

People with a substance use disorder can, with treatment, get well and return to productive lives.

- Yes: 7 out of 10 respondents agreed or strongly agreed
- No: 1 out of 10 respondents disagreed or strongly disagreed
Opioid Overdose Signs & Symptoms

- False: Having Blood-shot Eyes
- True: Slow or Shallow Breathing
- True: Lips, hands, or feet turning blue
- True: Loss of consciousness
- True: Unresponsive
- True: Deep snoring
- True: Very small pupils
- True: Agitated behavior
- False: Rapid heartbeat

Public

- 66% Correct
- 54% Correct
- 51% Correct
- 63% Correct
- 63% Correct
- 27% Correct
- 26% Correct
- 40% Correct
- 63% Correct
A vignette, a short descriptive story, was used in the second half of this assessment to ask respondents thoughts and opinions about individuals who have experienced substance use disorder.

Rick, 30 year old male, has never used opioids.

Sally, 30 year old female, continues to use unprescribed opioids received from a friend.

John 30 year old male, currently taking medication treatment for opioid use disorder.
Sally and John likely used drugs because they were raised poorly.

- Individuals who know someone with SUD:
  - 23.1% agree or strongly agree
- Individuals who do not know someone with SUD.
  - 38.3% agree or strongly agree

Sally, who takes unprescribed opioids received from a friend, is likely violent towards others.

- Individuals who know someone with SUD:
  - 33.5% agree or strongly agree
- Individuals who do not know someone with SUD
  - 47.4% agree or strongly agree
I can be friends with Rick more easily than John.

- Individuals who know someone with SUD:
  - 41.4% agree or strongly agree
- Individuals who do not know someone with SUD:
  - 59.2% agree or strongly agree

If Sally were to seek treatment for her SUD, I would view her more positively.

- Individuals who know someone with SUD:
  - 61.8% agree or strongly agree
- Individuals who do not know someone with SUD:
  - 56.5% agree or strongly agree
Data: Public Assessment

Support Everyone At-Risk of Witnessing an Overdose Should Carry Naloxone

62.2% of individuals who know someone with a SUD agree.

33.1% of individuals who do not know someone with a SUD agree.

Would Assist Someone Who is Having an Overdose

75.1% of individuals who know someone with a SUD agree.

53.5% of individuals who do not know someone with a SUD agree.
Data: Public Assessment

Support Harm Reduction Strategies
- 66.3% Strongly Support or Somewhat Support

Support Safe Consumption Sites
- 51.0% Strongly Support or Somewhat Support

Support Syringe Service Programs
- 54.8% Strongly Support or Somewhat Support

Support Needle Distribution Programs
- 59.7% Strongly Support or Somewhat Support
Data: Individuals in Recovery (Self) Assessment

Age Impact on Stigma
- Older adults internalized stigma was less than younger adults.
- 29% of adults aged 18-34 feel as though I'm not as good as others because I have a substance use disorder compared to 6% of adults aged 45 and older.

Gender Impact on Stigma
- Females were less impacted by internalized stigma than males
- 22% of males have often thought that being around people who don’t have a substance use disorder makes me feel out of place or inadequate compared to 5% of females.

Substance-Free Impact on Stigma
- Individuals who were substance-free were less impacted by internalized stigma than individuals who were still using substances related to their substance use disorder.
- 30% of individuals who are still using substances related to their SUD agreed that having a substance use disorder makes them feel unclean, compared to 16% of individuals who are substance-free.
  - Although, individuals who are substance-free may have reduced internalized stigma, enacted and anticipated public stigma stays the same.
Implementation of the Interventions

Implement Social Media Campaign

The Action Team developed the materials for a series of Facebook posts sharing information about stigma toward substance use disorders in the region. These posts are designed to educate the public about:

- What substance use disorders are and how substance use can change a person's brain chemistry
- The results of the public stigma assessment
- The resources in the region for people with substance use disorders
- What they can do to reduce stigma towards people with substance use disorders and, thereby, improve their quality of life
- How they can support the people with substance use disorders in their life and in their community

This social media campaign was launched in August on the District Health Department #10 Facebook Page!

Create Story-telling Videos

Highlight Hope

Sharing and celebrating recovery stories connects community members with one another and empowers those who are still struggling to know they are not alone. It also helps to eliminate the stigma people in recovery often face and educate the public that recovery is possible. (Source: Faces and Voices of Recovery)
Implementation of the Public Assessment: Example of a Social Media Post

8/4/2023

ADDICTION IS A DISEASE, NOT A DECISION

#DidYouKnow that 84% of participants in Northwest Michigan agree that “Most people in my community believe that a person who uses cocaine, methamphetamine, opioid, or heroin is to blame for their own problems”?

Help us #StopStigma! Please visit: 
https://beatthestigma.org/

To see more information about the BHI’s Substance Use Disorder (SUD) Stigma Action Team: 
Reduce Stigma Regarding SUDs Video
https://youtu.be/qcnSR3yr82Q
Reduce Stigma Video Discussion Questions

1. What message stood out to you from this video?

2. Has any part of your attitude towards people with substance use disorders changed after watching this video?
We are planning a virtual presentation for Munson Healthcare Providers in October.

We are developing a packet of educational materials that law enforcement can use on their own.
Reducing the Stigma of Substance Use Disorders
Saying goodbye to hurtful, stigmatizing language.

The words we use communicate our attitudes, biases and stereotypes.
Words Matter!

What words come to mind that people use to describe someone with a SUD?
What is stigma?

Stigma is a strong feeling of disapproval about somebody, especially when it is unfair to feel this way. It can lead to:

- **Stereotypes**: Generalized belief; “People with mental illness are violent”

- **Prejudice**: Judgement based on that belief; “They’re violent, I’m scared and don’t want anything to do with them”

- **Discrimination**: Action based off those judgements and beliefs; “I won’t hire or rent to a person with mental illness because I’m scared of them”
Different types of Stigma

Self-stigma
  ○ Accepting and internalizing negative stereotypes about oneself.

Public Stigma
  ○ Negative attitudes and fears that isolate those with addiction.

Stigma Against Medication
  ○ Belief that medications “trade one addiction for another”.

Structural Stigma
  ○ Excluding those with addiction from opportunities and resources.
Reducing the Stigma Example Training

How can we make change?

- Change language use to change culture
- Changing culture through education
- Changing people and environments through advocacy
Reducing the Stigma Example Training

Making a Difference:
What are some specific actions you can take to make change to reduce stigma in your organization and/or communities?

Small Group Discussion & Action Steps Development
Conclusion

To see more information about the BHI’s Substance Use Disorder (SUD) Stigma Action Team:


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