

The stigma against people who use heroin makes it harder for them to get help

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Credit: AI-generated image (disclaimer)

Heroin use and dependence have grown dramatically in the US over the last decade. Between 2002-2004 and 2011-2013, past-year use increased by 62.5% and abuse/dependence by 90%. And the demographics of heroin use have changed as well. Over a decade ago, heroin was less prevalent and more specific to marginalized individuals in low-income



areas and inner cities. But <u>today</u>, use and dependence have increased among all demographic groups. Heroin use has also doubled among those who have historically had low rates of use – women and white individuals.

The epidemic has the potential to affect anyone. I know this firsthand, not only as a drug researcher, but also from the death of my little sister, Tara, who died five years ago this week from acute intoxication involving heroin.

As heroin use and dependence have become more prevalent, the chances that each of us knows someone dependent on heroin (or opioid pills) have climbed. Your friend, <u>family</u> member, roommate, office mate, or significant other may be struggling with a heroin problem. In my case, it was my little sister.

But stigma toward drug users, especially those who use heroin, is still strong. And this stigma can make it that much harder for people to come forward and get the help and support they need.

The roots of today's epidemic

The heroin epidemic has many causes, but it is now closely linked to another drug epidemic: prescription opioids. Between 2004 and 2011, emergency room visits related to opioid use nearly <u>doubled</u>, and between 1999 and 2011, opioid-related deaths nearly <u>quadrupled</u>. Tara, like many others in recent years, got caught up in the prescription opioid epidemic that is sweeping through the US.

Many people who are hooked on pills are moving onto heroin because it is a cheaper and more easily available alternative. In fact, a recent <u>study</u> found that 75% of recent heroin initiates first used opioid pills. My sister was part of this changing demographic as she, too, got hooked on pills



and felt she had no other alternative than to move on to heroin.

Stigma makes it harder to get help

Most of us disapprove of heroin use, and many of us stigmatize users. While disapproval is <u>lower</u> for other drugs such as ecstasy ("molly"), cocaine and especially marijuana, 94%-99% of adults in the US <u>disapprove</u> of someone trying heroin even once or twice. Even frequent users of drugs such as ecstasy tend to <u>stigmatize</u> heroin use.

Although much of the public is <u>undereducated</u> about drugs, this disapproval is still understandable, as <u>experts</u> agree that heroin appears to be associated with a higher level of dependence and physical and social harm than any other drug. (And of course many would argue that much of this harm is in fact a result of punitive drug policy.)

Therefore, disapproval toward use is understandable – regardless of the reasons that someone started using. However, stigmatizing or ostracizing users, or saying they <u>deserve to die</u>, does not appear to help improve their condition, especially when the users are our friends or family.

Heroin addicts are already at odds with much of society, and many are at risk for losing life resources, such as a job or home. They may need to depend most on friends and family to help pull them through (assuming they want help).

I, myself, was an enforcer of "tough love" with my sister who was struggling with addiction, and five years later I still wonder if it helped her or made her worse. Sadly, I think it was the latter.

Does stigma prevent abuse?



While I have found in my own <u>studies</u> that those who stigmatize drug users are less likely to use themselves, societal stigma against drug use does not necessarily <u>decrease</u> risk of use.

Stigmatizing attitudes toward heroin use might help prevent a lot people from initiating use, but such attitudes appear to be less than helpful or even harmful when it comes to individuals who have become dependent.

These attitudes encourage users to be more <u>secretive</u> about use, and makes them hesitant to seek <u>treatment</u> due to stereotypes about being "junkies."

Knowing drug users <u>tends</u> to be associated with decreased stigma. But, interestingly, <u>studies</u> have shown that health care professionals such as physicians tend to hold negative attitudes toward individuals with drug use disorders, and educational interventions have been <u>shown</u> to do little to reduce this <u>stigma</u>.

Many of us have been taught to stigmatize or ostracize <u>drug users</u> through antidrug programs in school. And since heroin use is illegal, many of us stigmatize use and addiction and perhaps feel that it is "wrong." It is already difficult enough for someone to get treatment – it is very expensive – with or without health insurance – and it can be hard to tell an employer that you need time off to go to rehabilitation. So further marginalizing those who are dependent does not seem to help the situation.

If users aren't willing to be open about use and seek help, their drug problem will likely only get worse. If family, friends and even medical professionals stigmatize users, then there is little incentive for those with drug problems to seek help.

Public awareness and public response



Attitudes are beginning to change as more and more people are losing friends and family to use. A recent <u>poll</u> found that two-thirds of adults in the US now favor treatment for heroin users, not jail.

Friends and family of addicts in certain areas can now be <u>trained</u> to administer Naloxone to individuals overdosing on heroin to reverse an overdose. Officers in police departments within at least <u>28 states</u> have also received training to administer Naloxone in cases of overdose. As more people take a hands-on approach to overdose prevention for their loved ones and fellow citizens, heroin dependence appears to becoming viewed more as a health issue and as less of a stigmatized moral "failing."

Good Samaritan laws that encourage people to call for medical help when necessary (by providing limited immunity from arrest or prosecution) also now exist in at <u>least 20 states</u>. While it is sad that these services and laws largely did not exist until the heroin problem reached the middle and upper classes, at least now attitudes toward heroin dependence are in fact changing.

Reducing stigma makes drug abuse easier to talk about

Users can benefit when we are able to discuss the realities of heroin use in a more open, nonstigmatizing manner. Whether or not there is an element of <u>choice</u> in starting or continuing use, these are often people who need help, and many users are abandoned by close ones who don't understand. I may have been guilty of this myself.

Public understanding that this is a health issue and not a moral issue will continue to influence policy and availability of treatment.



As <u>heroin</u> use continues to be a major public health issue, we have to remember that people who use this drug are human – in fact, many may even be our friends, our family or our colleagues. While prevention should be our main concern, a lot of people need help, and less stigmatizing attitudes toward these people can greatly affect their chances of recovery.

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