



Welcome to HRSA-BHTA Offering: Virtual Peer Learning Office Hours Event

Vision: Healthy Communities, Healthy People





Health Center Program

Acknowledgement

**Health Resources Services Administration
Health Center Program**

Provides the Funding for this

Behavioral Health Technical Assistance (BH TA)

Virtual Peer Learning Office Hours Event





Addressing Stigma Toward Individuals with Substance Use Disorders

Dr. Lyle Cooper, Ph.D., MSSW

Amber Murray, BSN, MA – Virtual TA/Office Hours Task Lead & Moderator

Thursday August 25, 2022

11:00am – 12:00pm Eastern

Vision: Healthy Communities, Healthy People

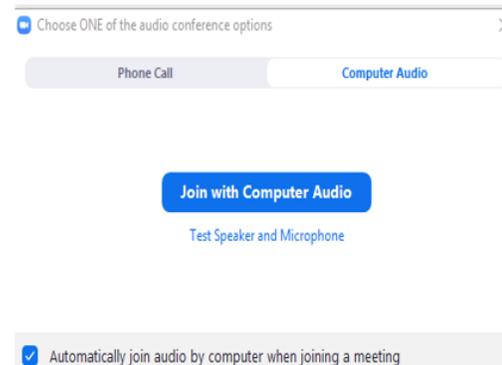


Housekeeping

To establish an audio connection:

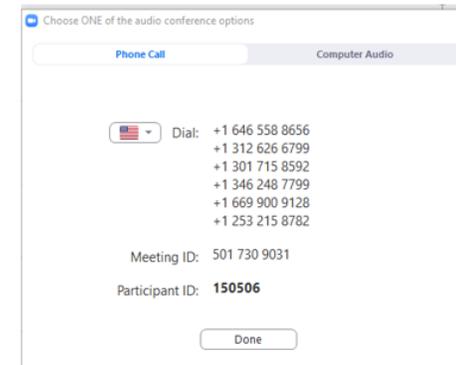
By computer:

- Click **Join with Computer Audio**.



By phone:

- Click the **Phone Call** tab, dial a listed phone number, and enter **Meeting ID** and **Participant ID**.



- You will begin muted. To **unmute/mute**, click the **microphone** icon located at the bottom left of your Zoom window.



- We encourage everyone to keep their video enabled. Click **Start Video** to join by webcam.



- To ask a question using the **Chat** feature, click the **Chat** icon located at the bottom center of your Zoom window.



Notes:

- Please participate and, if possible, be on camera.
- Please mute your phone line if dialed in for audio and remain on mute until you would like to speak.
- This Office Hours Event is being recorded.

Virtual TA: Presenters & Facilitators



Presenter:

R. Lyle Cooper, PhD, MSSW

Associate Professor

Co-Director Addiction Medicine Residency Training

Director of Didactics Mid South Addiction Medicine Fellowship

Founder/Co-Director Meharry Addiction Clinic, Department of Family, and
Community Medicine, Meharry Medical College



Facilitator:

Amber Murray, BSN, MA

Technical Expert & Task Lead

JBS International, Inc.



Today's Agenda

- Welcome & Introductions
- Presenter Presentation
 - *Addressing Stigma Toward Individuals with Substance Use Disorders*
- Facilitated Discussion
- Announcements
 - Office hours for this event
 - Future TA events
 - Satisfaction assessment form



Source: iStock



Addressing Stigma Toward Individuals with Substance Use Disorders

Vision: Healthy Communities, Healthy People



Objectives for Today's Session

As a result of attending this training learners will be able to:

- Identify different types of stigma
- Recall the impact that stigma has on people with substance use disorder
- Describe several strategies to reduce stigma related to substance



Source: iStock

Substance Use Disorder (SUD) Prevalence



40 Million
or **>1 in 7**

**AGES 12 AND OLDER HAVE
A SUBSTANCE PROBLEM...**

**...THIS IS MORE THAN THE
NUMBER OF AMERICANS WITH:**



HEART CONDITIONS
(27 Million)



DIABETES
(26 Million)



CANCER
(19 Million)

Addiction may be most stigmatized condition in the US and around the world:

Cross-cultural views on stigma

Across 14 countries and 18 of the most stigmatized conditions...

Illicit drug addiction ranked 1st

Alcohol addiction ranked 4th

Stigma, social inequality and alcohol and drug use

ROBIN ROOM
Centre for Social Research on Alcohol and Drugs, Stockholm University, Stockholm, Sweden

- **Sample:** Informants from 14 countries
- **Design:** Cross-sectional survey
- **Outcome:** Reaction to people with different health conditions



Studies have shown that...



Compared to other psychiatric disorders, SUD is more stigmatized



Compared to other psychiatric disorders, people with SUD are perceived as more to blame for their disorder



Describing SUD as treatable helps



Patients themselves who hold more stigmatizing beliefs about SUD less likely to seek treatment; discontinue sooner



Physicians/clinicians shown to hold stigmatizing biases against those with SUD; view SUD patients as unmotivated, manipulative, dishonest; SUD-specific education/training helps

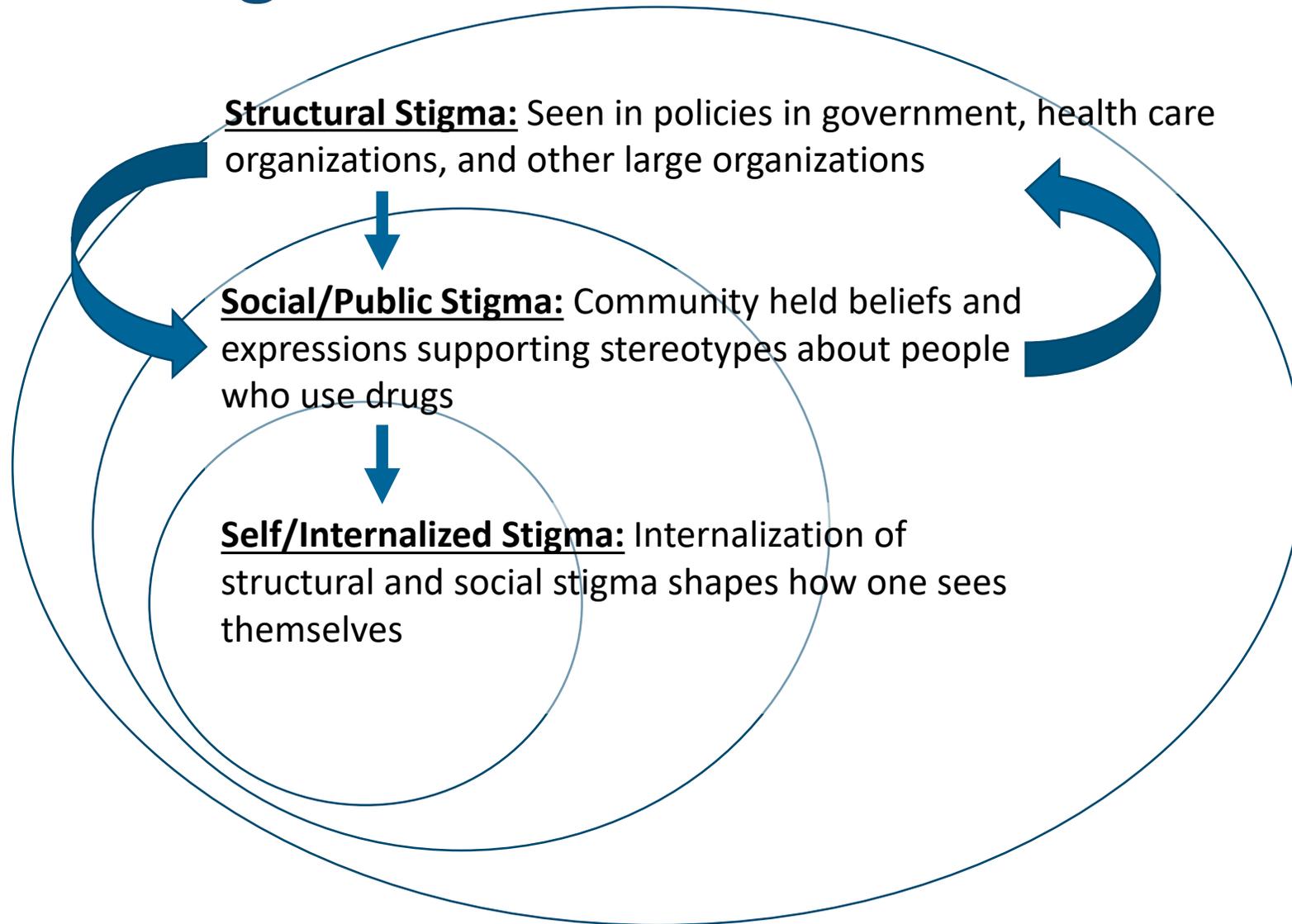
Types of Stigma

Stigma	Description
Structural Stigma	Seen in policies in government, health care organizations, and other large organizations
Social/ Public Stigma	Community held beliefs and expressions supporting stereotypes about people who use drugs
Self/ Internalized Stigma	Internalization of structural and social stigma shapes how one sees themselves

Please type some examples of structural, social and self stigma in the chat box.



Types of Stigma



How Stigma Becomes Internalized Chat Activity

Instructions

- I am going to read off a few of the examples of structural and public/social stigma.
- I would like you to “translate” this in the chat to what you think might be a person’s internalized message about themselves.

Statements/Examples

- “During the 1980s crack epidemic was addressed by establishing mandatory minimum sentences and developing laws to address so called super-predators.”
- “People believing that all people who use drugs are lazy.”



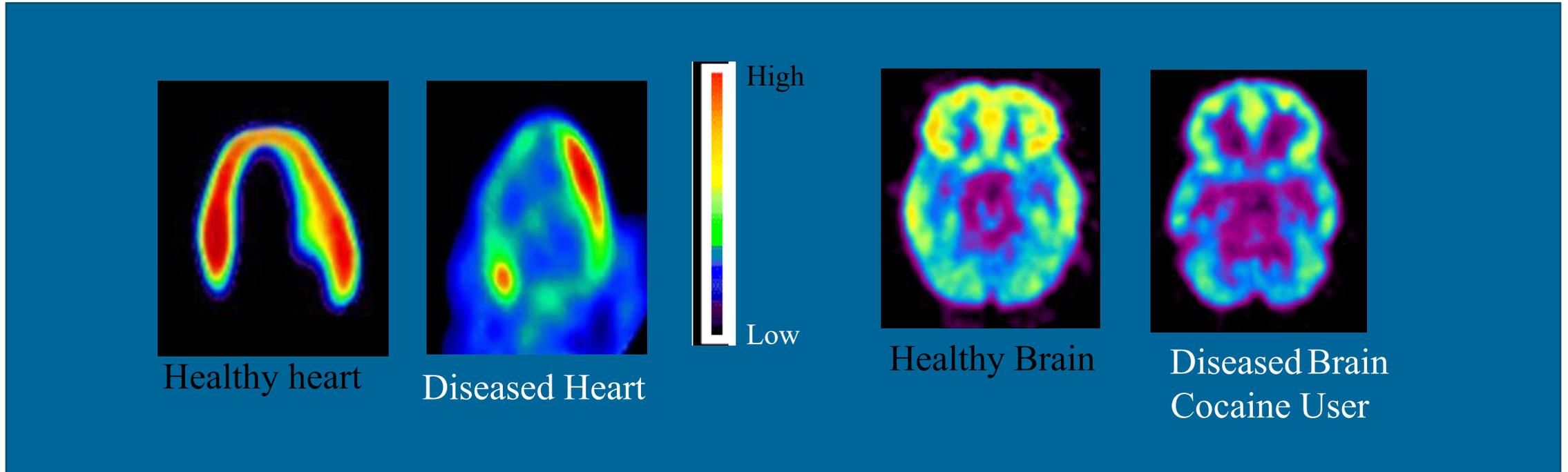
Using **EASE** to Address Stigma

- **EDUCATING** people about the inaccuracy of stereotypes and myths vs facts regarding mental illnesses can have profound positive effects, dispel misinformation and incorrect assumptions.
- Increasing **AWARENESS** of the effects of public stigma, of what internalized stigma is, and how it had additional harmful effects – naming self-stigma as a problem -- helps people to be conscious of the hazard so they can guard against it or work to reduce it.
- **SHIFTING** perspective means to help people reevaluate their beliefs about themselves that may be inaccurate and self-stigmatizing. This is powerful in reducing / countering self-stigma.
- **EMPOWERMENT** in this context is to help people counteract the effects of public and self-stigma by attending to and developing their diverse personal strengths to benefit themselves.

Think of this model as being a parallel process.



Educating to Destigmatize Substance Use Disorders



- One way to lessen social or stigma is to teach providers, clients and community members about the disease model of addiction.
- Explaining myths and facts

Become Aware of Stigmatized Language

Your Words Matter

The Real Stigma of Substance Use Disorders



In a study by the Recovery Research Institute, participants were asked how they felt about two people
"actively using drugs and alcohol."

One person was referred to as a
"substance abuser"



The other person as
"having a substance use disorder"



No further information was given about these hypothetical individuals.

THE STUDY DISCOVERED THAT PARTICIPANTS FELT THE **"SUBSTANCE ABUSER" WAS:**

- less likely to benefit from treatment
- more likely to benefit from punishment
- more likely to be socially threatening
- more likely to be blamed for their substance related difficulties and less likely that their problem was the result of an innate dysfunction over which they had no control
- they were more able to control their substance use without help



Awareness Chat Activity

- Consider the statement below from a commonly used stigma measure (the Internalized Stigma of Mental Illness Inventory) that I modified to reflect substance use disorder.
- I want you first to type in the chat how you think your clients would react if you brought this up in group.
- Then I will pick a few examples and I want you to tell me how you would guide the conversation with your patients .

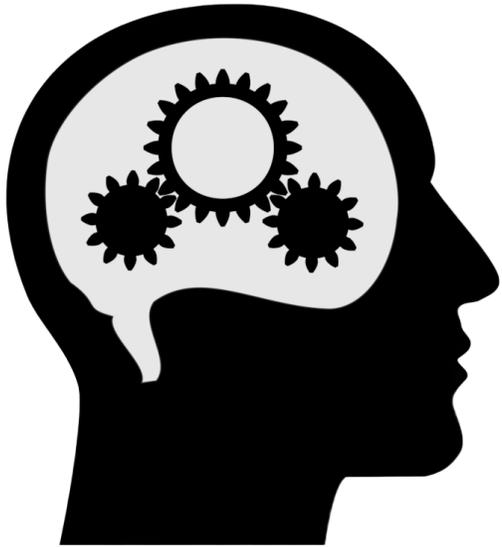
“I cannot contribute to society because I have a substance use disorder.”



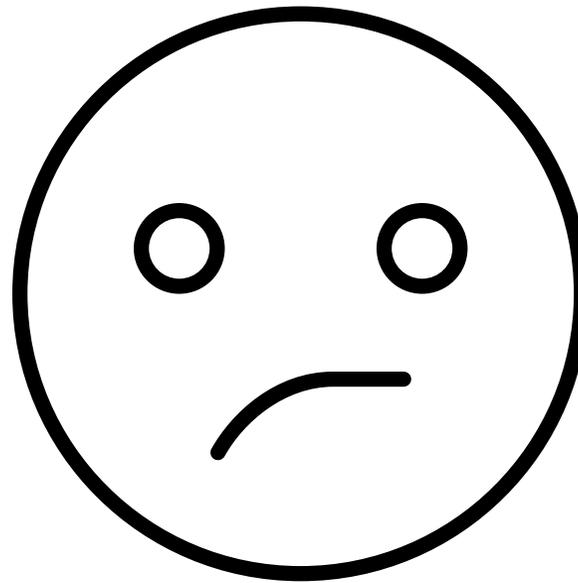


Shifting Perspectives (A Little CBT)

Thoughts



Emotions

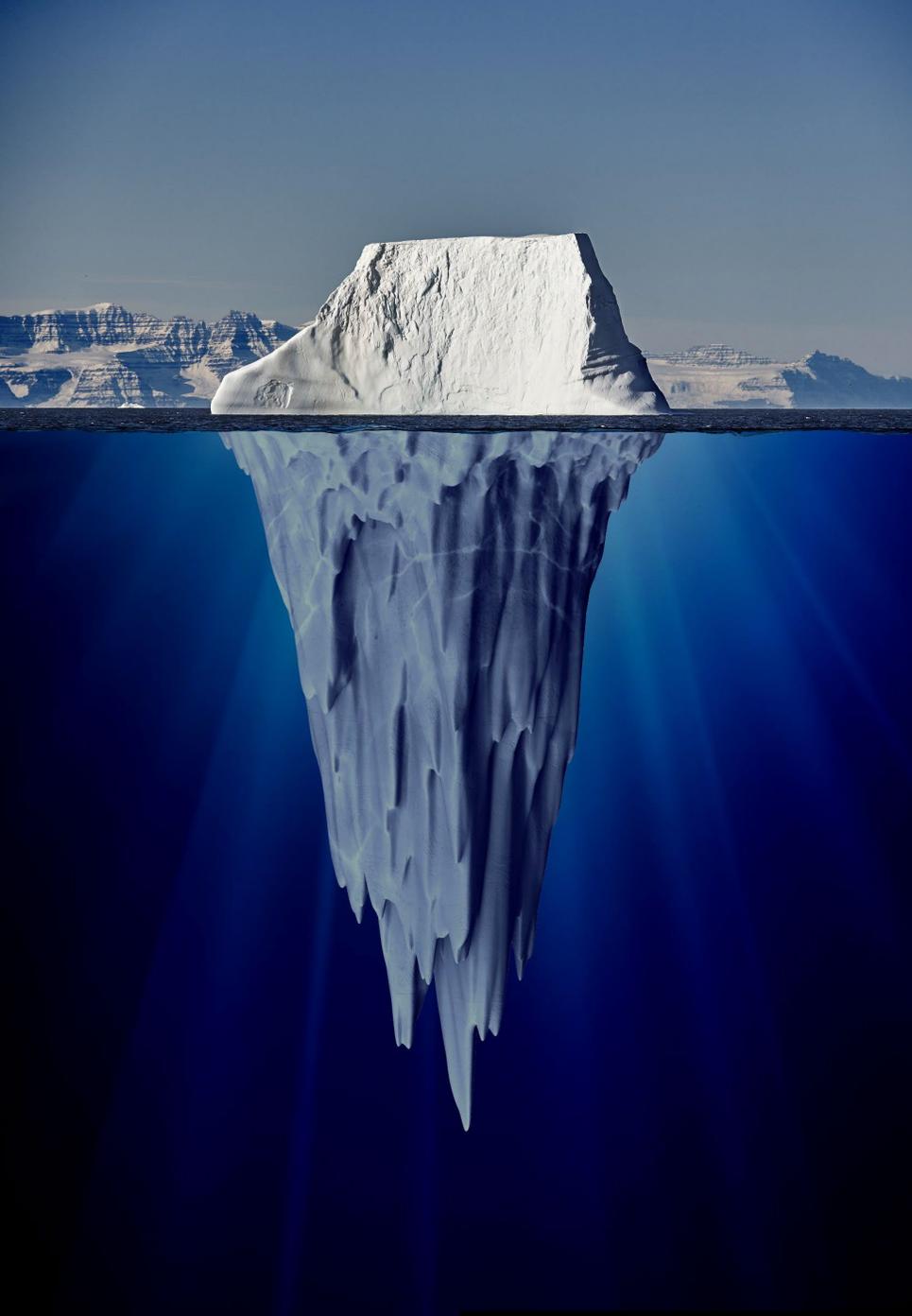


Behaviors



Shifting Perspectives Cont'd (3 C's)

- **Catch it:** Help your clients identify stigma as another thought or belief
e.g., “People with substance use disorder can’t make their life better.”
- **Check it:** Work with the patient to identify the sorts of emotions this may lead to:
e.g., feelings of hopelessness; sadness; apathy
- **Check it:** How then do those thoughts and emotions shape the things they choose to do?
e.g., “I do not try to stop using, because I will fail.”
- **Change it:** What would be a different way of thinking about this?
e.g., “Substance use may make some things harder, but I can recover with effort.”



Empowerment: Iceberg Metaphor

- Patients often narrow their own identities in response to internalized or self-stigma: i.e. “I am a junky”
- Structural or social/public stigma may influence this narrowing of identities
- People are much broader than a single identity

Empowerment Activity

This is a description of a client with substance use disorder and mental illness. As I read it, form a description of the patient in your mind.

- Robert is 63 years old, a Vietnam Era Veteran
- His VA diagnoses are PTSD and Alcohol Use Disorder, including several hospitalizations
- He lives alone in an apartment
- He smokes about a pack of cigarettes per day
- He was arrested twice in the past for disorderly conduct after fighting

Type in the chat a brief description of this patient with the information you have so far.



Empowerment Activity Cont'd

Now I'm going to finish the description, please continue to form your image of this patient with this new information:

- After his service, Robert completed his bachelor's degree, and some years later, an MBA
- His most recent job was as a sales manager for 12 years, ending last year when he retired.
- Although he prefers to spend quite a bit of time alone as it makes his PTSD symptoms easier to deal with, he does not like to feel isolated. So, Robert is active online, stays in touch with family by phone, email, and Facetime, and pushes himself to attend family and friend functions and to get out of the house.
- Currently he is volunteering 10-20 hours per week helping to write project grant proposals for two local nonprofits whose mission he feels strongly about.
- He has several close long-time friends who watch out for each other and will call, email, or come by. They check in if they have not heard from each other in a while.

Type in the chat a brief description of this patient with the information you have now.



Polling Question

What are the main reasons for your participation in today's Office Hours? Select all that apply.

1. General information on the topic from the presenter
2. To engage in discussion with other health centers
3. To raise questions about this topic as it relates to my health center
4. To listen and learn about the experiences of other health centers



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BPHC-BH TA Portal

<https://bphc-ta.jbsinternational.com/>

- Request TA
- Access Learning Management System (LMS) modules
- Learn more about BH TA options
 - One-on-One Coaching
 - E-learning Webinars
 - Strategies for Community Outreach
 - Virtual Site Visits to Improve Outcomes
 - Join a Community of Practice (CoP)



The screenshot shows the homepage of the BPHC-BH TA Portal. At the top left is a logo consisting of a grid of colored squares (yellow, blue, red, green) next to the text "BPHC-BH TA" and "Bureau of Primary Health Care Behavioral Health Technical Assistance". Below the logo is a navigation bar with links: "Home", "Request Technical Assistance", "Learning Management System", "About Us", and "Contact Us". The main content area features a large heading "Welcome to the BPHC-BH TA Resource Portal!" followed by a table with columns "View", "Edit", "Delete", and "Revisions". Below the table is a paragraph of text: "The Bureau of Primary Health Care (BPHC) Behavioral Health (BH) Technical Assistance (TA) portal is designed to meet the specific needs of HRSA health centers and shall focus on both mental health and substance use disorders (referred to jointly as 'behavioral health'), with an emphasis on the opioid epidemic." To the right of this text is a box titled "Learn About BH TA Options" containing a list of services: "One-on-One Coaching", "E-learning Webinars", "Strategies for Community Outreach", "Virtual Site Visits to Improve Outcomes", and "Join a Community of Practice (CoP)". Below this is another box titled "Complete the Readiness Assessment".



Additional TA Opportunities

- Webinars
- SDoH Roundtable
- Virtual TA: Challenges & Solutions Series
- 1:1 Coaching
- Intensive TA





BHTA Satisfaction Assessment

- We'd love your feedback – please complete a satisfaction assessment.
 - <https://survey.alchemer.com/s3/6624870/Health-Center-TA-Satisfaction-Assessment-Office-Hours-General>
- Remember! – if you want to obtain CEUs for your time today, you must complete a satisfaction assessment.
- There are two ways navigate to the assessment:
 1. Follow the link provided in the chat here.
 2. You will be emailed a link from us via Alchemer, our survey platform.



Continuing Education

- We will be offering **1 CE credit** for your attendance at today's event.
- You **must** complete the Health Center Satisfaction Assessment to be eligible for CEs.
- **CE credits will be distributed within 2 weeks of the event.**



This course has been approved by JBS International, Inc. as a NAADAC Approved Education Provider, for educational credits. NAADAC Provider #86832, JBS international, Inc. is responsible for all aspects of their programming.



JBS International, Inc. has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 6442. Programs that do not qualify for NBCC credit are clearly identified. JBS International, Inc. is solely responsible for all aspects of the programs.



Thank You!

Please submit questions to
Amber Murray: amurray@jbsinternational.com

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