DEFINING EMPATHY AND STIGMA

**EMPATHY** is the ability to feel connected to another person’s emotions. It is being able to put yourself in someone else’s shoes and experience their emotions with them free from judgment.

**STIGMA** is a set of negative and often unfair beliefs that a society or group of people have about something. It is an attitude that sets a person apart from others because the dominant culture recognizes something different about them.

“*You never really understand a person until you consider things from his point of view... until you climb into his skin and walk around in it.*”

- Atticus Finch, *To Kill a Mockingbird*

**DISCUSSION QUESTIONS**

What does **empathy** mean to you?

How do you personally show empathy for others?

What does **stigma** mean to you?

How have you seen stigma demonstrated in your community?

**DID YOU KNOW?**

**STIGMA** leads to
- Shame
- Blame
- Secrecy
- Isolation
- Discrimination
- Distress
- Hopelessness
SUBSTANCE USE DISORDER IS A DISEASE

DISCUSSION QUESTIONS

How are diseases like diabetes and heart disease similar to substance use disorder?

How are they different?

How might things change if people treated substance use disorder as a disease instead of as a weakness?

DID YOU KNOW?

People with substance use disorder often avoid seeking help for fear of the way they will be treated.

In fact, only 1 in 9 people with substance use disorder in the U.S. get the care and treatment they need.

There are five components that may feed into society’s rejection of those with substance use disorder:

Responsibility - People with substance use disorder are often held responsible for their condition.

Uncertainty - Many people feel that a person with substance use disorder is unlikely to recover.

Incompetence - Society views people with substance use disorder as incapable of rational decision-making.

Unpredictability - People believe that those with substance use disorder may behave erratically.

Danger - We might avoid people with substance use disorder because we are afraid we may become a victim of a crime or a random act of violence.

“Addiction is a brain disease. This is not a moral failing. This is not about bad people who are choosing to continue to use drugs because they lack willpower.”

The Effects of Stigma on Our Communities

Discussion Questions

Why is there such a difference between our response to a pandemic and our response to substance use disorder?

How do you think substance use disorder affects your community?

What role does stigma play in shaping those effects in your community?

Did You Know?

NAS is a treatable condition. Symptoms of NAS include severe irritability, respiratory problems, and seizures.

Prior to birth, engaging pregnant women who have substance use disorders in treatment and other services can mitigate or prevent negative birth outcomes.

“Getting sober was one of the three pivotal events in my life, along with becoming an actor and having a child. Of the three, finding my sobriety was the hardest thing.”

— Robert Downey, Jr.
Discussion Questions

What social and economic factors do you think influence or perpetuate stigma toward substance use disorder in your community?

What could your community do better to support people with substance use disorder?

What images come to mind when you think about a person with substance use disorder? Are these images based in reality?

Did You Know?

While our knowledge of substance use disorder has grown, stigma surrounding it has largely stayed the same.

Many states have enacted limits on Medication Assisted Treatment for patients who are in Medicaid programs, have been incarcerated, or have “failed” a prior treatment program.

A few things to keep in mind regarding stigma surrounding SUD

Nobody chooses to have a substance use disorder - it hijacks the brain. A combination of genetic predisposition and environmental stimuli leads to the increased tolerance, cravings, and compulsive behavior associated with SUD.

Moral judgment of people with SUD is a holdover from a time when we had less understanding of addiction. We now know that SUD can be treated successfully - but stigma often interferes with treatment.

Punitive measures such as criminal prosecution of pregnant women with SUD have no proven benefits. In fact, they deter expectant mothers who use opioids from seeking prenatal care and prevent them from sharing critical information with their doctor.

“The way we as a society view and address opioid use disorder must change—individual lives and the health of our nation depend on it.” -Jerome M. Adams, M.D., M.P.H. U.S. Surgeon General
The words we use when talking about substance use disorder are important!

Here are some ways we change our language starting today:

- **Clean or Dirty** ➔ **Positive or Negative**
- **Reluctant or Noncompliant** ➔ **Experiencing Barriers to Accessing Services**
- **Drug Addicted Baby** ➔ **Neonatal Abstinence Syndrome**
- **Drug Problem** ➔ **Drug Misuse or Harmful Use**
- **Substance Use Disorder** ➔ **Person in Recovery**

“We can at least try to understand our own motives, passions, and prejudices, so as to be conscious of what we are doing when we appeal to those of others. This is very difficult, because our own prejudice and emotional bias always seems to us so rational.”

- T.S. Eliot
SERVING OUR CHILDREN

Discussion Questions

What resources exist in your community to help children whose parents have a substance use disorder? How can you find out about additional resources?

What barriers exist for these children in your community?

How could reducing stigma toward substance use disorder reduce these barriers?

Building Resiliency in Youth

Kids whose parents have a substance use disorder should be connected to services as early as possible.

Use a strengths-based approach and offer validation.

Support parenting skills through community resources and referrals.

Prioritize supportive relationships - youth need at least one positive adult role model.

Strengthen the child’s connection to their school.

Facts about Children of Parents with Substance Use Disorder

Children of parents with substance use disorders exhibit symptoms of depression and anxiety more than children whose parents are not affected by SUD. They are also more likely to show signs of psychiatric and psychosocial dysfunction.

It is estimated that parental substance use disorder is the chief cause in at least 70% of all child welfare spending.

Children of parents with SUDs have increased resilience when they connect with at least one supportive adult. They have greater autonomy and independence, stronger social skills, better ability to cope with difficult emotional experiences, and better day-to-day coping strategies.

Substance use treatment for parents is essential to the well-being of their children. Many resources are available to help children when a parent has an SUD. Visit https://ncsacw.samsha.gov for information and resources for children and families affected by substance use disorder.
HOW DID WE DO?

Let us know by taking a brief survey at this link:

https://tinyurl.com/y2plwdwj

ADDITIONAL READING

*Supporting Families in Child Welfare Affected by Opioid and Other Substance Use Disorders*, National Perinatal Association, 2018
http://www.nationalperinatal.org/Infographics

*Committee Opinion: Opioid Use and Opioid Use Disorder in Pregnancy*, The American College of Obstetricians and Gynecologists, and American Society of Addiction Medication, 2017

*America’s Opioid Crisis: The Unseen Impact on Children*, American Academy of Pediatrics United States Fact Sheet, 2018

*Topical Issue Brief: Intervention IDEAs for Infants, Toddlers, Children, and Youth Impacted by Opioids*, U.S. Office of Special Education Programs, 2017
https://osepideasthatwork.org/sites/default/files/IDEAsIssBrief-Opioids-508.pdf