Mediators of the Relationship Between Stigma of Addiction and Failures in Recovery

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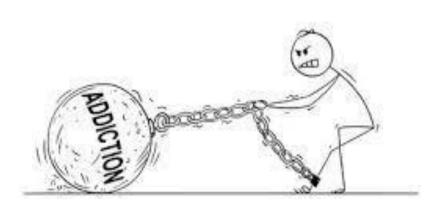
LifeBack Internship

- Behavioral Health and Addiction Intern at LifeBack
- Observed and facilitated in Weekly S.M.A.R.T Recovery Group dealing primarily with substance use disorders



How LifeBack Has Lead to This Paper

- Group dealt specifically with recovery from a substance use disorder
- Recognized similar patterns between patients with different substances of choice
- Decided that to better understand why some patients were relapsing, I should dive into the patterns I was observing



Introduction

- 21.6 million American adults battled a SUD in 2019
- Of those 21.6 million, only 12.2% received treatment
- Drug abuse and addiction cost Americans more than \$740 billion annually
- Understanding the predictors for failures in recovery can help shape treatment efforts



What is a Substance Use Disorder

 The APA classifies a SUD as encompassing varying degrees of excessive use of a substance, including: alcohol; tobacco; opioids; caffeine; cannabis; hallucinogens; inhalants; sedative, hypnotic, or anxiolytics; stimulants (e.g., amphetamine, cocaine); and more.



Failures in Recovery and Stigma

- There are a multitude of reasons as to why an individual experiences failures in recovery, but for the purposes of this research we will focus on stigma
- The two types of stigma we will be focus are internalized stigma and externalized stigma



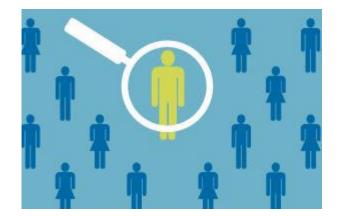
Internalized or Self Stigma

- Internalized stigma is the threat of prejudice and discrimation that causes negative internalized emotions
- Internalized stigma may generate lower levels of self-esteem and worsen recovery prospects



Externalized/Public Stigma or Discriminaton

- Public stigma pertains to the way in which the general public perceives and discriminates against specific groups of people
- People with SUDs are perceived negatively
- SUD viewed as a choice and not as a mental illness



Proposed Model Predicting Relapse

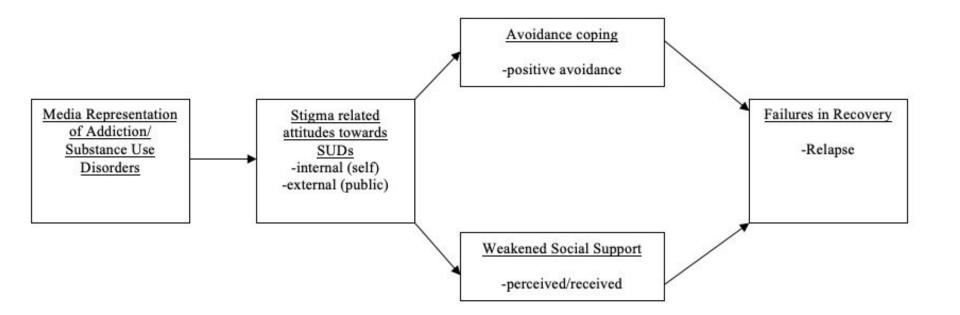
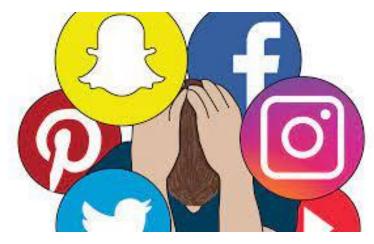


Figure 1. Psychological mediation framework.

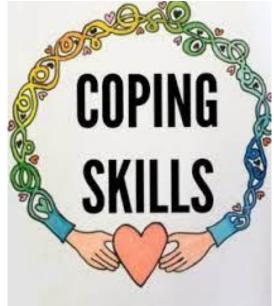
Media Representation Influences Stigma-Related Attitudes

- The more time adolescents spend on social media the more they consume alcohol and other drugs.
- Television has shaped attitudes towards substance use disorders in a negative light
- Language in print media has influenced substance use stigma



Avoidant Coping

- Negative avoidance is any response to external life strains that serves to prevent, avoid, or control emotional distress (e.g., drinking to cope)
- Positive avoidance focuses on avoiding the negative issue at hand, but avoids the problem by partaking in another positive activity instead, for example exercise or cooking.



Poor Social Support

- Negative social support such as discouraging individuals' emotional expressions, criticizing, invading privacy, or not providing promised help lead to negative outcomes in recovery
- Lack of social support such as feeling isolated leads to failures in recovery
- Public stigma around SUDs can impact the amount of support one receives
- Self stigma is also associated with lower perceived social support



Discussion

- The evidence presents support for the proposed psychological mediational model
- Novelty of positive avoidance
- Incorporation from other literatures
- Limitations
- Future directions: S.M.A.R.T Recovery to operationalize relapse



Clinical Implications

- Motivational Interviewing
- Shown as an effective form of addiction treatment and can help combat internal stigma



Societal Implications

- Efforts to destigmatize the conversations around substance use disorders
 - D.A.R.E America
 - Shatterproof





