



**PADS**  
PARTNERSHIP FOR ACTION  
ON DRUGS IN SCOTLAND  
Drawing on our  
collective strengths

# Recovering Connections

*Changing stigma to respect*



Scotland's recovery communities speak out.

At Tramway, Glasgow, 1<sup>st</sup> September 2017

## Minister's preface



One of the very happy consequences of Scotland's Road to Recovery Drug Strategy has been the formation and growth of visible recovery from addiction communities all over the country. Run voluntarily by individuals and families in recovery themselves; there are at least 120 of these groups in Scotland now. They operate a diverse array of activities, support groups and creative outlets for people seeking to stay in recovery from addiction.

These communities are key to the work of the Partnership for Action on Drugs in Scotland (PADS). One of our goals is to help create communities in which recovery from addiction can flourish. The PADS group invited every one of these communities to gather together for the first time to explore the impact stigma has on their addiction and recovery experiences. Also invited were key influencers whose policy areas and work are directly affected by addiction and recovery.

As Chair of the PADS Executive group, I was delighted to be invited to support and address the Recovery Connections event held in The Tramway, Glasgow on 1st September 2017. I was hugely impressed by the range of activities, amount of hours and sheer creativity that the recovery community members put into helping people in their area to recover.

The PADS Communities Sub Group is committed to taking forward the report's recommendations, exciting work is already underway and will continue throughout the year. For example, liaison with pharmacies and their staff to help address issues of stigma and work with media organisations to change the narrative has already produced positive results in the way stories are reported. This work will continue with other public bodies including DWP. To raise public awareness, events are planned throughout Scotland in 2018 and include a webinar and an exhibition. The exhibition will also be loaned to recovery communities throughout Scotland to enable them to hold their own awareness and social contact events.

I invite everyone to look at this report and make their own contributions to ending stigma in Scotland. We need to show help and support for this often marginalised group - it is vital that recovery communities throughout Scotland continue to thrive. But, we also need to do more to ensure that the wider community are aware of the realities of recovery and are supportive of those in recovery.

**Ms. Aileen Campbell**  
Minister for Public Health and Sport



# Recovering Connections – the day in photos



**Celia Tennant, Chair of PADS Communities Sub Group and CEO Inspiring Scotland, opens event**



**Address by Minister For Public Health and Sport, Ms Aileen Campbell**



**Lee Hollinshead, Spoken Word Artist, contributes poetry**



**What's happening in recovery now? - briefings from recovery activists around Scotland**



**Stigma workshop- what is it and how do we experience it?**



**Open Spaces and Methadone Memoirs launch- recovery activists share their new ideas, approaches and recovery groups with participants**



**Challenging stigma – How do we challenge it effectively?**



**Final reflections and call to action**



**Maxinne Connolly, Spoken Word Artist, contributes poetry**



**Delegates consider what next on stigma?**

# Recovering Connections – the facts



Recovery from addiction groups and communities from all over Scotland were invited to take part in this unique gathering. Key influencers from areas of public policy and life impacting on people with an addiction and recovery experience were also invited to immerse themselves in Scotland's recovery community for a day. Our goal was to study stigma and reflect on our experiences of it together.

In its first years work the PADS Communities Sub Group had learned that the attitudes of some public services were areas of serious concern for people and families experiencing addiction and recovery from it. We wanted to explore this further and experiment with creating "social contact", which has been found to be a most effective strategy when challenging stigma.

*"Evidence suggests that (social) contact approaches may have a greater impact on attitudinal changes than educational strategies (Corrigan et al., 2001)."*

**350** people were present on the day; two thirds of the participants identified themselves as being in recovery from addiction or as a family member of someone in addiction or recovery. One third of the participants identified themselves as influencers. The event, chaired by Celia Tennant of the PADS Communities Sub Groups was co-created by a working group from PADS Communities Sub Group and delivered by **50** volunteer and commissioned contributors. **2** Graphic artists and a photographer made a visual record of the day and **3** performance artists in recovery were commissioned to create a piece on theme and perform it as part of the event.

More than half of those who led the event had personal or family lived experience of addiction and or recovery. In this we met the optimum conditions for effective anti stigma social contact strategies:

- (1) *Equal status between groups: weaker stigmatizing responses are elicited when the stigmatized and the stigmatizer are more equal in social status and social power.*
- (2) *Common goals: both groups should be working toward the same ends.*
- (3) *No competition: the tone of the contact should be a joint effort, not a competitive one.*
- (4) *Authoritative sanction for the contact: the contact intervention is sponsored or endorsed by management of a business or by particular community organizations (Pettigrew and Tropp, 2006)*

## Stigma To Respect event survey

**99.9%** of participants think that people do experience stigma and discrimination as a result of an addiction to drugs or alcohol

**92%** of participants have witnessed a person being stigmatised or discriminated against due to their addiction and / or recovery.



# What do we think stigma is?

## Participants said

*"It appears with a GP's mistrust that 'all addicts are lying'. In having to prove myself more than other patients that I am deserving of treatment."*

*"It is flat out discrimination. They don't see the change, they just see the past."*

*"We are blamed and are criminalised."*

*"Organisations can stigmatise by passing judgment on us without seeking any understanding. Its in how organisations perceive some people to be threatening."*

*"I hear it in our opinions about each other. You can see it in public negativity towards people who are evidently different, e.g. people living on the street homeless."*

*"See that negative stuff people say to you – well you start to believe that's what you actually are. I took on the judgments of others and hated myself on the basis of what others thought of me."*

*"It's in being treated differently in job centres and in the benefits system."*

With the help of the SEE ME campaign we learned about the different kinds of stigma:

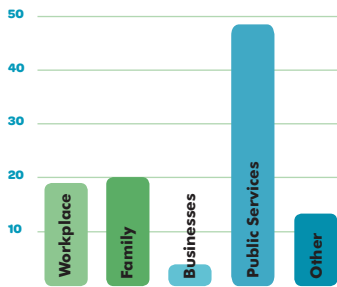
- Structural stigma – the laws, policies and inequalities that sustain it
- Public Stigma – the negative emotional reactions towards the stigmatized group
- Stigma by association- the devaluation of an individual because of association with stigmatized group.
- Self stigma – internalized negative public stereotypes and believing them to be true.

# How do we experience stigma?

Armed with the facts about stigma we reviewed our experiences and came up with over 50 separate examples of stigma in these categories. Here are some examples:

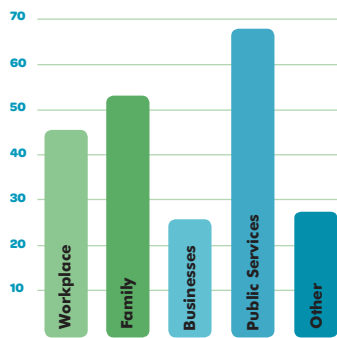
## Structural Stigma

- Collecting Methadone from chemist – but were not allowed to shop from the same chemist shop as you were judged to be a potential thief.  
Stigma To Respect event survey: The most damaging stigma **48%** felt that accessing public services is the worst place to experience stigma **20%** found the family the worst place to experience it. **17%** the workplace **13%** an other place **3%** dealing with businesses.



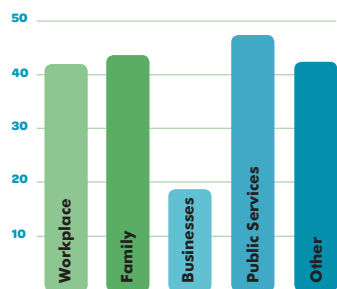
## Public stigma

- As soon as the label “addiction” appeared more labels followed like ‘bad parent’  
Stigma To Respect event survey: Stigma Witnessed **67%** of respondents had witnessed stigma towards people in addiction and or recovery in public services . **52%** had witnessed it in families **46%** in the workforce **25%** in dealing with businesses



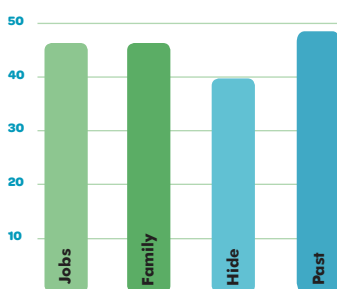
## Stigma by Association

- We were known in school as “that family”  
Stigma To Respect event survey: Stigma Experienced **47%** experienced stigma in public services **43%** in the family **42%** in the work place **42%** in other areas **18%** in dealing with businesses.



## Self -Stigma

- “I feel partly responsible for the mess the NHS is in because I used it so much.”  
Stigma To Respect survey: True or False **46% True** “I don’t bother applying for some jobs because I know my addiction will be held against me” **47% True** “I often feel ashamed of my past addiction and this holds me back in life” **40% True** “I often hide the fact that a family member of mine has/had an addiction” **46% True** “I am treated worse when it is known that a family member has an addiction to drugs/alcohol”



# How do we challenge stigma effectively?

We collectively explored the different methods that could be used to challenge stigma in a variety of forms through education, social contact and protest. Here are some examples of the challenges explored:

## Structural Stigma Challenge: The local pharmacy

Widespread stigma was experienced from chemists/pharmacies who have the power to make individuals collecting methadone feel like second-class citizens.

### Actions suggested by participants

- Wider recognition for pharmacists doing a good job so others can follow suit and learn from good practice.
- Breaking down barriers through social contact and education and create the space for dialogue and mutual learning. Share lived-experience and implement peer support advocacy at a local level. Set up local conversations between recovery activists, families and community pharmacists. Inform training on how staff behaviour can aid recovery and how negative responses can harm patients
- Consider the environment including changing the layout of premises to break down barriers.
- Challenge chemist policies on how they treat methadone customers differently; speak to NHS or ADP who are paying for service. Twitter / social media protest.

## Stigma by Association Challenge

The stigma experienced by a young family member caring for a parent with an addiction was explored. The young adult carer told of being excluded from activities or singled-out in some cases due to their connection with someone who uses drugs.

### Actions suggested by participants

- Educate young people about recovery in schools via the stories of children who have lived in an environment with someone who has an addiction. Start educating children at a young age about addiction and recovery – learn from what other countries have done (Portugal)
- Set up children's info sessions similar to 12 Step (*Love and Light do this at their family retreats*)
- Peers in recovery will work with influencers including teachers, employers, public services, young people – share their stories
- Use Social media, TV, online spaces for change
- Celebrate recovery for all the family - not just the addicted person or individual in recovery

***“Society, structures and environment play a huge part in addiction, social class and opportunities (lack of) may hinder people, their motivation (to recover)”***

**Stigma To Respect event survey response**

***“There are too many underlying issues around health, poverty, social deprivation, isolation and stigmatisation. Stigma can prevent engagement and seeking of support.”***

**Stigma To Respect event survey response**

***“I believe I never learned life skills, coping methods and proper solutions to the life that lay in front of me. This led me to struggle emotionally and led me to what I thought was the solution to everything (addiction).”***

**Stigma To Respect event survey response**

***“My experience when I’ve witnessed others talking about people with an addiction to drugs and alcohol are that they are useless humans who don’t contribute to society.”***

### **Self-Stigma Challenge**

Individuals hide their problems and past because they feel judged and unable to complain about the lack of adequate services. Individuals expressed feeling like they have been silenced in the past and developed feelings of general apathy.

### **Actions suggested by participants**

- Focus on the positives and strengths
- Build self-esteem and confidence learning from other’s
- Advocacy & education to support change, more education of society at large
- Power of example – *meet others who have been where you are and come through the problem*. Being open about own recovery on social media
- Gain acceptance through mutual aid fellowships
- Visible Lived Experience working in all kinds of services associated with addiction/ recovery/ homelessness
- Celebrate recovery through local recovery events – public walks and events to make recovery visible

### **Public Stigma challenge**

Public shaming of people with alcohol or drug problems has been experienced by most of us. The media promotes many negative stereotypes of individuals and whole communities with very little or no accountability for the impact this has. E.g. even good news recovery stories being reported with picture of bottles, pills and needles and generally negative language.

### **Actions suggested by participants**

- Educate – teach not only alcohol and drug awareness but addiction and recovery awareness
- Social contact -change news tone from resentment to compassion.
- Media packs to be sent to all media outlets that use negative language and best practice via media unions.
- Making contact with ‘recovery welcome’ media outlets
- National campaign similar to ‘see me’ television/ media campaign.
- Making Recovery visible in communities
- Challenging public judgment- open conversation. Challenge but in a positive way. Don’t become too invested in vitriolic views



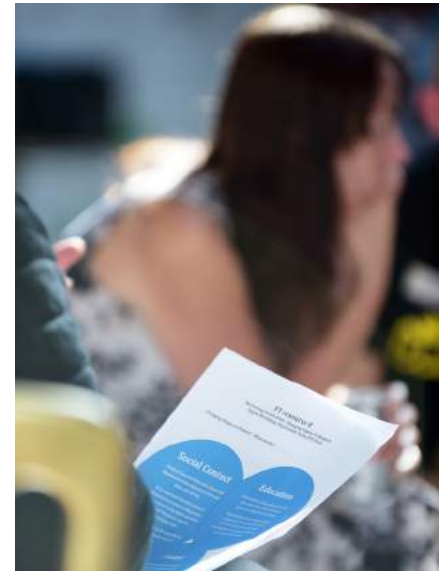


# Call to Action: Our contributions.

Having thoroughly explored the experiences, the research and suggestions given to them at the event, the PADS Communities Sub Group have agreed to take the following actions:

## First wave of action: Making more use of the data

- Create an event report that shares findings
- Present the findings to other PADS groups (Minister/ executive/ harms/ quality of service/ CAPSM) and agree their contributions in a shared action plan.
- Pass findings to other bodies working on areas mentioned by participants (DWP/ Pharmacy/SSC), agreeing what contribution we could make to their campaigns. Pass findings to bodies concerned with communities.
- Send report to participants and host webinar to discuss findings and actions
- Create Stigma and Recovery awareness exhibition panels from the findings. Hold a parliamentary event to launch them. Make them available to recovery community groups to host their own awareness/ social contact events. Create online version of panels for social media distribution.



## Second wave of action: Set up our own working groups to take forward event suggestions in the following areas

- Self stigma and stigma by association
- Transport
- Media
- Housing and Homelessness

## Third wave of action: Review

- We imagine this work will be a years work for the PADS Communities Sub Group. At the end of this time we commit to reflecting on the results of our actions and refocussing our work.

### \* The Stigma To Respect Survey

Stigma to Respect Survey took place in the lead up to, during and after this Recovering Connections event. 100 people with personal and family lived experience of addiction and recovery and influencers in the field of substance use policy were surveyed. The survey was designed by the event working group assisted by the Mental Health Foundation's research team. PADS Communities Sub Group had heard a great deal of anecdotal evidence from communities about their experience of Stigma and this survey was intended to check if those anecdotal accounts had greater validity.

***"Everyone has someone in his or her life with an experience of addiction or recovery"***

**Stigma To Respect  
event survey  
findings**



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# Stigma To Respect event survey finding

*"If stigma and discrimination  
did not exist in society I would..."*

*"Be able to feel more accepting of  
my situation, less of a failure and  
more hopeful for my son and all who  
suffer like him."*

Partnership For Action on Drugs in Scotland  
– Communities Sub Group.

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