Substance and Stigma, Pregnancy and Discrimination

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Disclosures

• I have no relevant disclosures of conflicts of interest

Stigmatization and marginalization from 3 sources:
1) Personal: “intimate process of social control and censure among family and friends”
2) Interactional: “decisions by social agents and agencies”
3) Structural: “Policy (local and national)”

“Please indicate how people in society would react to a person with the health condition appearing in public”

Most marginalized those visibly drunk or under the influence of drugs.
Stigma Greater for Drug Addiction than Mental Illness

Addiction Stigma: Common among health providers

Table 1: Overview of attitudes toward each disorder by type of respondent

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Negative</th>
<th>Neutral</th>
<th>Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug addiction</td>
<td>34%</td>
<td>42%</td>
<td>24%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>38%</td>
<td>41%</td>
<td>21%</td>
</tr>
<tr>
<td>Social stigma</td>
<td>40%</td>
<td>39%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Stigma

• Plural – Stigmata, crucifixion wounds of Jesus Christ
• A mark of disgrace associated with a particular circumstance, quality or person
• An attribute, behavior or condition that is socially discrediting

“[T]here is a problem with the word “stigma”—using it tends to create or even reinforce discrimination, whether consciously or subconsciously. Using the term reinforces the concept of the “other”—that people with behavioral health conditions are somehow different from the rest of us… Words like “discrimination” and “prejudice” are better choices to describe the inappropriate actions of those who shun or demean people who experience mental illness or addiction… Using the word “stigma” puts the burden on the illness and those who experience it rather than on all of us who need to work to understand those health conditions, and promote acceptance and inclusion of those who experience them.” M. Hendricksson

https://blog.samhsa.gov/2016/05/16/words-matter/#.Wt0PgYjwaUk

Discrimination and Prejudice
Stigma

Discrimination and Prejudice

Punishment

States where pregnant women have been prosecuted for drug use

The first known indictment of an American woman for drug use in pregnancy was in California in 1977.

https://projects.propublica.org/graphics/maternity-drug-policies-

State Policies on Substance Use during Pregnancy

<table>
<thead>
<tr>
<th>Policy</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Use Considered Child Abuse</td>
<td>23+DC</td>
</tr>
<tr>
<td>Substance Use Grounds for Civil Commitment</td>
<td>3</td>
</tr>
<tr>
<td>Mandatory Reporting</td>
<td>25+DC</td>
</tr>
<tr>
<td>Targeted Programs for Pregnant Women</td>
<td>19</td>
</tr>
<tr>
<td>Pregnant Women Given Priority Access</td>
<td>17+DC</td>
</tr>
<tr>
<td>Pregnant Women Protected from Discrimination</td>
<td>10</td>
</tr>
</tbody>
</table>

Guttmacher Institute January 1, 2020
Punitive State Policies:
Evidence-Based = Worse Public Health Outcomes

State Policies related to drug use during pregnancy have become increasingly punitive

“Punitive policies are associated with efforts to restrict women’s reproductive rights rather than policies that effectively curb alcohol-related public health harms.”
Punishment of Pregnant People Who Use Drugs

- Punishment for Addiction
  - Unethical, immoral and ineffective to punish people for the illness of addiction

- Punishment for Reproduction
  - Pregnancy increases the likelihood of prosecution, and enhances the penalty upon conviction
  - Drug use is misdemeanor while distribution/child abuse is felony
  - Pregnant women receive harsher sentences than men or non-pregnant women for drug-related convictions
Women who are punished for drug use during pregnancy are penalized for choosing to have the baby rather than an abortion. They are being punished for having babies.

Discrimination Negatively Impacts Care

Discrimination Decreases Treatment Receipt

Stigma Common

“Dose-dependent” relationship between Stigma and Odds of lifetime AUD services
Discrimination Decreases Public Acceptance of Supportive Public Policy

Freedom from Discrimination is a Human Right

Discrimination is Rooted in Ignorance

- Ignorance of Addiction as a Disease
- Ignorance of Addiction Treatment
- Ignorance of Recovery
- Ignorance regarding Risks to Newborn of Substance Exposure
Do Less Harm:
1. Language is Important
   - Counter de-humanizing discourse with humanizing language
   - Language: Evidence-based and Person-centered
   - The words we use influence how others conceptualize addiction and public health
   - Unlearn prior terminologies

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The Power of Words to Hurt or Heal

<table>
<thead>
<tr>
<th>Stigmatizing Words</th>
<th>Preferred Words</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addict, Abuser, Junkie</td>
<td>Person in active addiction, person with a substance misuse disorder, person experiencing an alcohol/drug problem, patient</td>
</tr>
<tr>
<td>User</td>
<td>person who misuses alcohol</td>
</tr>
<tr>
<td>Abuse</td>
<td>Misuse, harmful use, inappropriate use, hazardous use, problem use, risky use</td>
</tr>
<tr>
<td>Clean, Dirty</td>
<td>Negative, positive, substance-free</td>
</tr>
<tr>
<td>Habit or Drug Habit</td>
<td>Substance misuse disorder, alcohol and drug disorder, alcohol and drug disease, active addiction</td>
</tr>
<tr>
<td>Replacement or Substitution Therapy</td>
<td>Treatment, medication-assisted treatment, medicated</td>
</tr>
</tbody>
</table>
Scientific Language is Necessary but Insufficient to Resist Discrimination

Endorsement of Biomedical model increased
But so did “disease of character”

Scientific Language is Necessary but Insufficient to Resist Discrimination

Public support for biomedical model increased
But no improvement in public tolerance for AUD

Do Less Harm
2. Resist Discrimination
Educational Interventions don’t change knowledge and attitudes towards people with addiction.

Resist Discrimination: Emphasize Treatment.
Resist Discrimination: Advocate to Roll Back Punitive Policies

Do Less Harm:
3. Autonomy and Maternal Subjectivity

- Both media and scientific narratives value one autonomy versus another
  - False Dichotomy
  - Unethical
- How does dyad figure into autonomy/personhood?
- For pregnancy and child rearing: embrace non-binary modes of subjectivity

“Risk”, Autonomy and Bioethics

- Cognitive biases in terms of risk:
  - Absolute vs. Relative confused
  - Ranges likely dichotomized into “high” and “low” risk
  - Information framing alters risk perception
- Risk is value-laden
- Risk=Harm
- Medical abstraction of risk (population health) divorced from context of individual decision making (clinical care)
  - Scientific probabilities don’t equal individual value
- Proper comparison group needed for interpretation
1. Conclusions
• “Stigma” is a euphemism for discrimination
• Discrimination and Prejudice are compounded for pregnant people with addiction
• Discrimination is rooted in Ignorance
• Discrimination is Countered by:
  – Humanizing our Discourse
  – Resisting Punitive Policies
  – Insisting that Care be both Evidence-Based and Person-Centered

2. Conclusions
• Evidence-Based: Grounded in Science
  – Harms of illicit substances exaggerated; Effects of licit substances minimized
  – Overstate the importance of intrauterine exposure; Neglect the role of the care-giving environment
• Person-Centered: Ethical and Grounded in Human Rights
  – Reproductive Health as a human right - Right to determine whether and when to become pregnant
  – Support autonomy and maternal subjectivity in decision making surrounding pregnancy
  – Remain attuned to the unique demands we place on pregnant and parenting people, their bodies and their minds
Thank You

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STAMP OUT STIGMA