



Welcome to the **Positive Choices Webinar Series**

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Australian Government
Department of Health
and Aged Care



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Acknowledgement of country

I'd like to begin by acknowledging the Traditional Custodians of Country throughout Australia and their connections to land, water and community. I am currently on the land of the Gadigal people of the Eora Nation and pay my respects to Elders, past and present. I further acknowledge the Traditional Owners of the land on which you are and pay my respects to their Elders, past and present.

I would also like to acknowledge any Aboriginal and Torres Strait Islander people joining us for the webinar today.



Housekeeping

1 Listen only mode.

2 This webinar is being recorded and will be made available on the Positive Choices website.

3 We will have a Q&A session at the end of the webinar. Please add questions to the Q&A box available.



What is Positive Choices?

positivechoices.org.au



Teachers & Schools

Evidence-based teaching programs and activities, webinars for teachers, and resources for your students



Parents & Families

Parenting advice and information to help you talk to your children about drugs and alcohol



Students

Facts, advice and interactive tools to help you find out information about drugs and alcohol and make positive choices



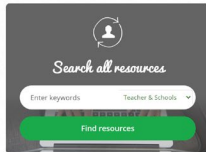
Culturally & Linguistically Diverse Peoples

Evidence based drug education resources for individuals from culturally and linguistically diverse communities



Aboriginal & Torres Strait Islander Peoples

A collection of culturally appropriate resources based on research and consultation with people from Aboriginal and Torres Strait Islander communities



- Central access point for trustworthy, up-to-date drug and alcohol information and educational resources.
- Developed by the Matilda Centre in consultation with teachers, parents and students. Funded by Australian Government Department of Health and Aged Care.
- Learning resources, factsheets, videos, webinars and games to engage young people with drug education.
- Access to classroom-based drug prevention programs that are proven to reduced drug-related harms.




positivechoices.org.au

Understanding stigma: creating a safe, supportive environment for Australian young people

Dr Steph Kershaw, Research Fellow at the Matilda Centre for Research in Mental Health and Substance Use, the University of Sydney

21st June 2023



Understanding stigma.
Creating a safe
supportive environment
for Australian young
people



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*Acknowledge and pay respects
to the traditional owners of the
land*

*Acknowledge those with living
and lived experience of mental
health and substance use
conditions*



Today's webinar

- What is stigma? What are the impacts?
- Case study: crystal methamphetamine use & stigma
- How can we reduce stigma?



What is stigma?

- Stigma is a mark of disgrace applied to someone because of something about them that's viewed negatively by others.
- Stigma often stems from stereotypes and assumptions
- Discrimination refers to unfair treatment of someone based on a personal characteristic



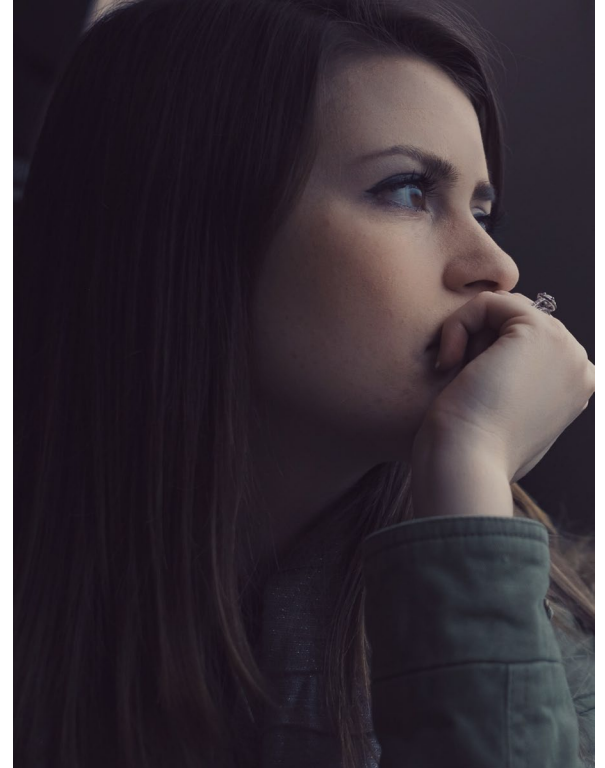
Types of stigma

- Public stigma: society holds negative attitudes and beliefs
- Self-stigma: the internalisation of negative beliefs about oneself
- Structural stigma: policies and practices that perpetuate unequal opportunities



Stigma and health conditions

- Associated with many health conditions e.g. HIV/AIDS, physical disabilities, mental health disorders, neurodevelopmental disorders and drug use disorders
- Drug use disorders have been classified by the World Health Organisation as the most stigmatised health condition in the world



Impacts of stigma

- Delay help seeking
- Increase loneliness, isolation
- Associated with bullying, physical violence
- A barrier to other services and social settings
- A cause of psychological distress for both the individual, their friends and family



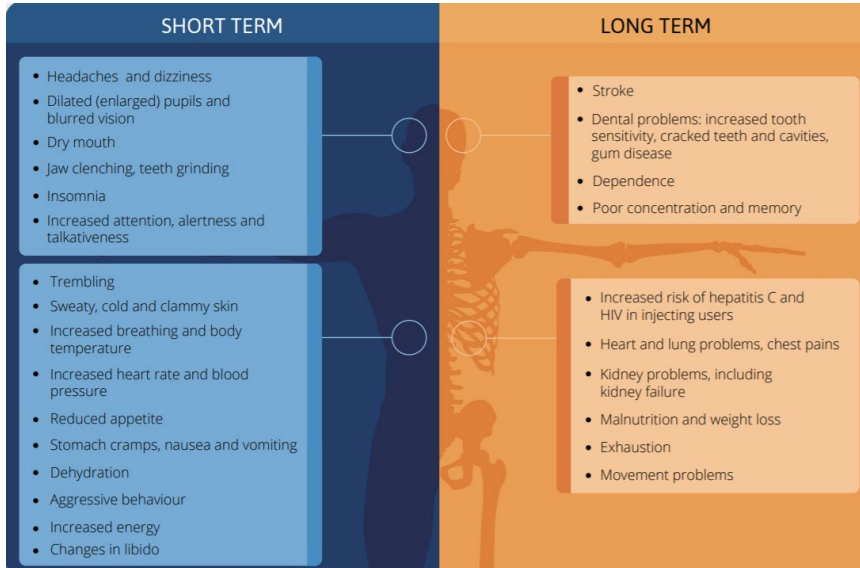
Research case study

- Methamphetamine is a stimulant drug that typically comes in three different forms (ice, base and speed) that vary in their appearance and potency
- Crystal methamphetamine ('ice') is often a purer form of methamphetamine
- Associated with stronger and longer-lasting euphoria, and increased risk of serious effects

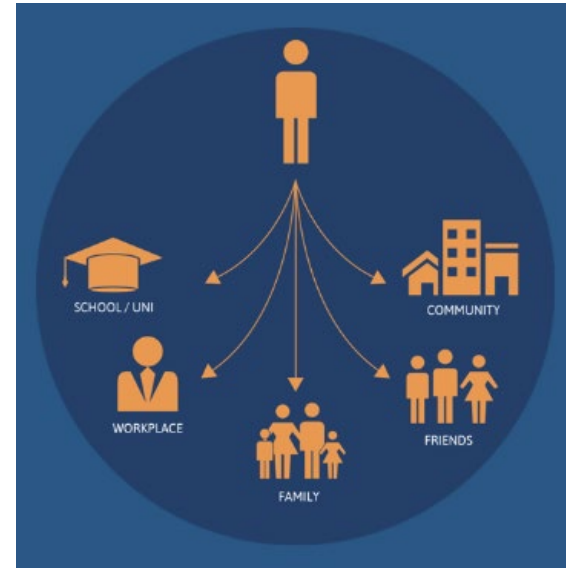


Crystal methamphetamine

- Has a number of effects on the body

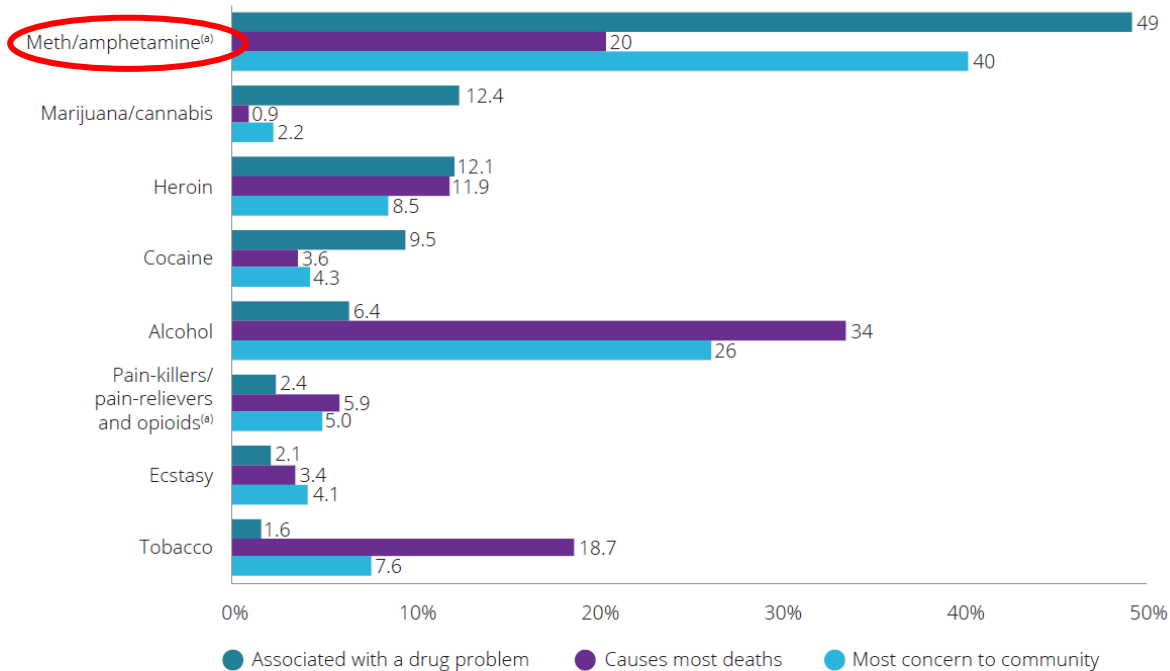


- Impacts families, friends and communities



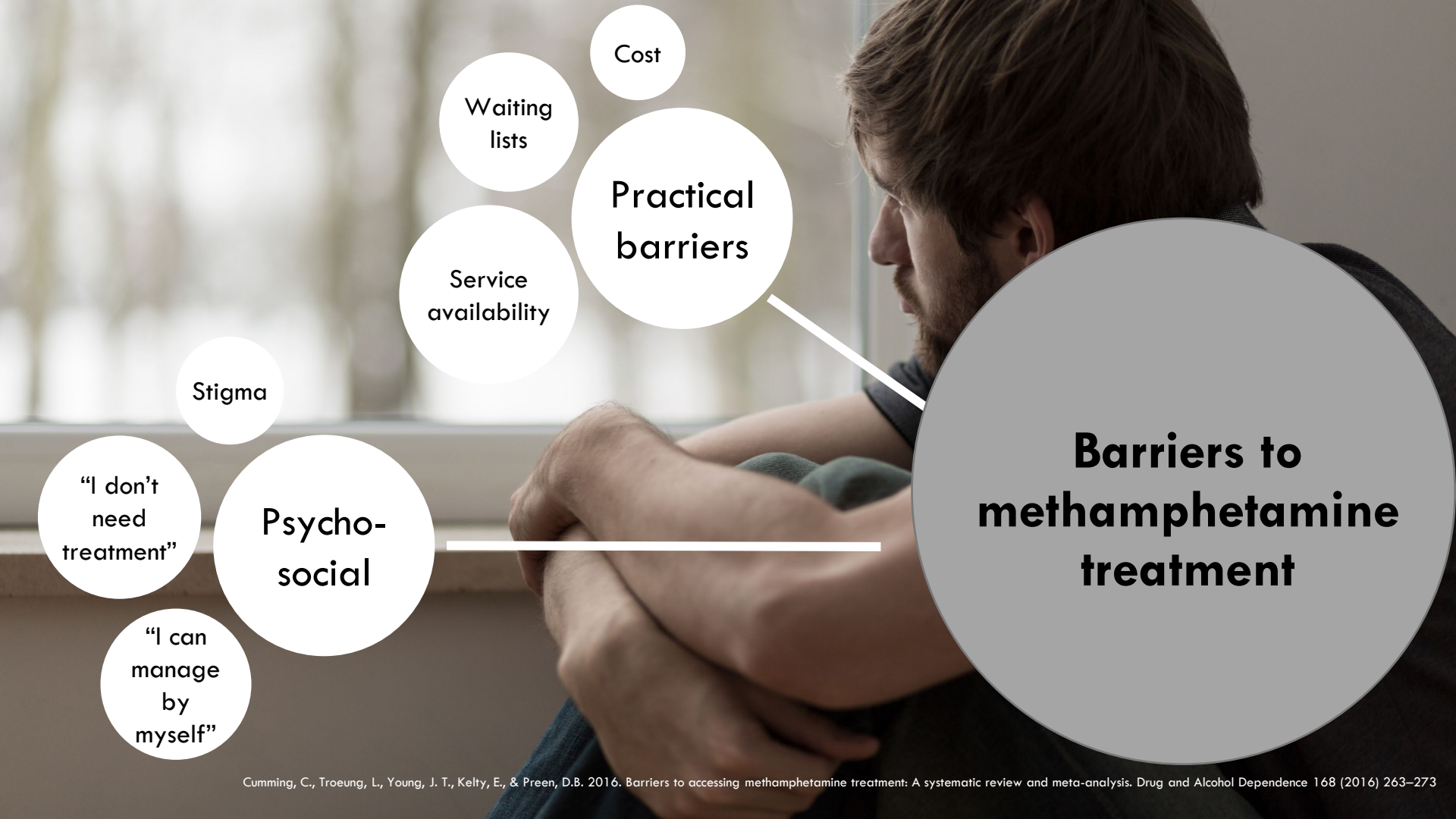
Drug of concern in Australia

Figure 9.1: Perceptions of selected drugs, people aged 14 and over, 2019 (per cent)



(a) For non-medical purposes.

Source: tables 9.1, 9.3, 9.5.



Barriers to methamphetamine treatment

Cost

Waiting lists

Service availability

Practical barriers

Stigma

“I don't need treatment”

Psycho-social

“I can manage by myself”

Stigma

Cost

Waiting
lists

**Practical
barriers**

Service
availability

"I do
need
treatment"

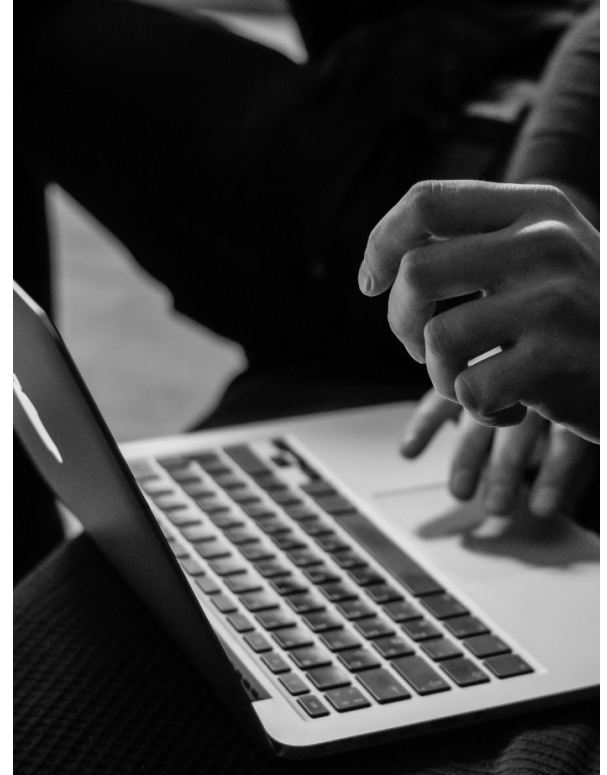
**Psycho-
social**

"I can
manage
by
myself"

**Barriers to
methamphetamine
treatment**

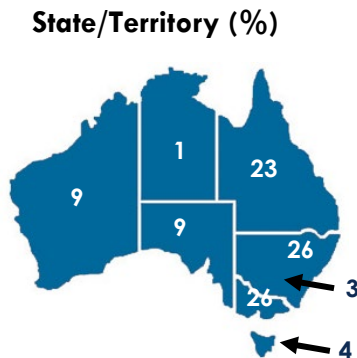
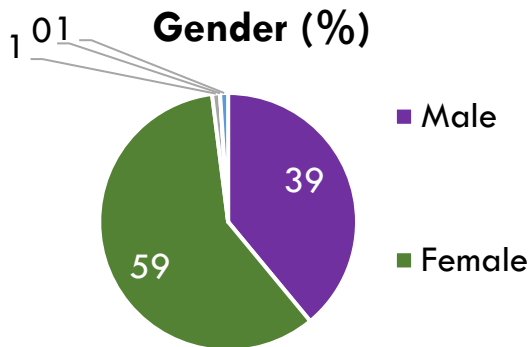
Research study

- Online survey open to all Australians aged 18 years and over
- We asked participants questions about:
 - Knowledge, beliefs and attitudes about crystal methamphetamine and people who use the drug
 - Experiences of discrimination
 - Barriers to help-seeking

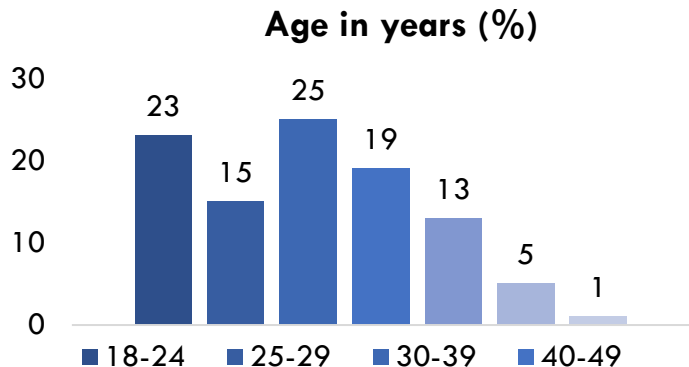
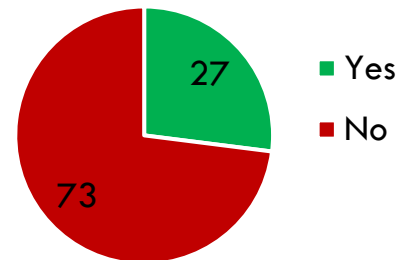


Who participated

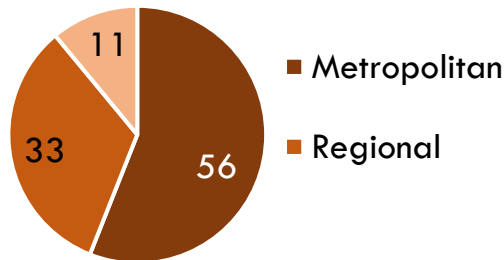
Total sample: N=2108



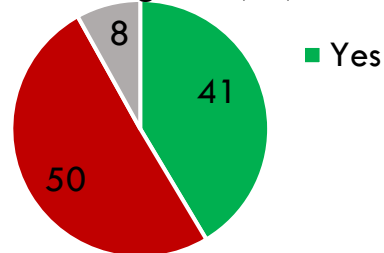
Have you ever used crystal methamphetamine (ice)? (%)



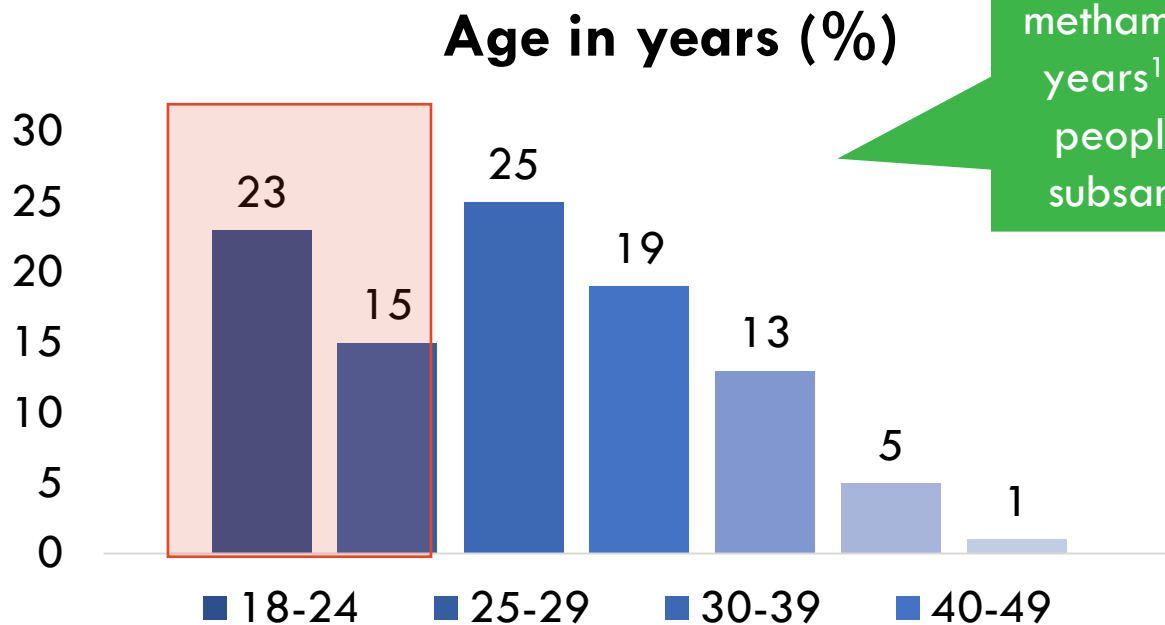
Region (%)



Do you have a family member or friend who you think may be using ice? (%)



Young people



Mean age people report having first tried methamphetamine is 22 years¹, making young people an important subsample of interest

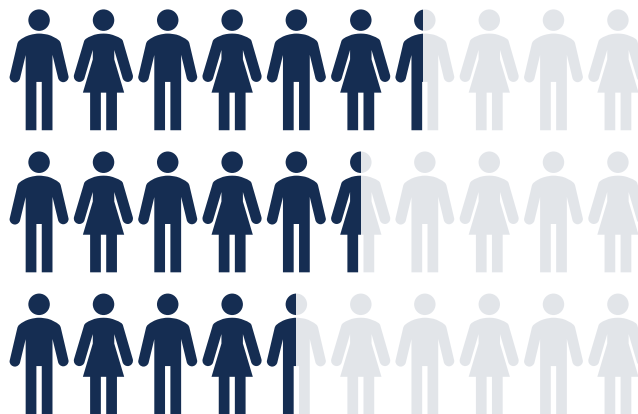
Stigmatising attitudes are common

45 to 65% of Australians agreed

I won't associate with people who use 'ice'
if I can help it

Use of 'ice' is just plain wrong

People who use 'ice' are dangerous

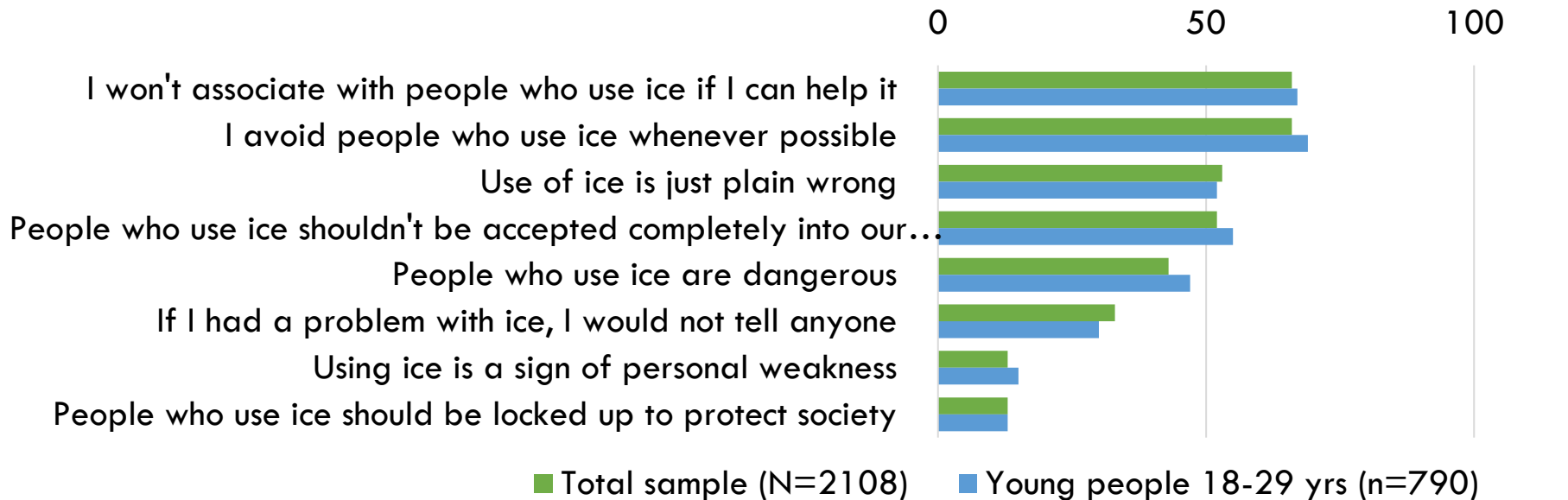


Proportion of participants who selected "agree" or "strongly agree" on a 5-point Likert scale where one human figure represents 10% of the total sample (N=2108).

Stigmatising attitudes are common

People in Australia can also have very diverse views about the use of 'ice'. Please rate whether you agree or disagree with each of the following statements

% **Agreed or strongly agreed** with statement (on 5 point Likert scale)



Discrimination was common

Have you ever felt discriminated against because of your ice use?



39% total sample

People who had used ice before:
n=565



46% young people

Young people who had used ice before:
n=157

Barriers to care

“Were there any barriers that have stopped you from seeking help for your ice use?”

I was afraid of what others would think of me



I was afraid to seek help



Total sample

Young people

People who had used ice before: n=565

Young people who had used ice before: n=157

Media portrayals

'Aggravating the problem': New ice inquiry to tackle worsening epidemic

Australia's ice epidemic: 1,500 users have died from the drug in the past decade

Ice use is growing, but in one region it has shot up by 1000 per cent

Received: 12 July 2022 | Revised: 24 November 2022 | Accepted: 23 January 2023
DOI: 10.1111/dar.13622

ORIGINAL PAPER  WILEY

Media reporting on alcohol and other drugs in Australia and the Mindframe guidelines: Baseline data

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Abstract
Introduction: The aim of this study was to generate a baseline database of print media reporting on alcohol and other drug (AOD) issues prior to the release of the *Mindframe* guidelines in March 2019. Specifically, to: (i) describe the content associated with media entries that focus on AOD use in Australian news media; (ii) determine how the media entries compare to several domains associated with recently developed Mindframe guidelines for publicly reporting on AOD; and (iii) identify content factors associated with different scores.

For more information

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Research Paper

Stigma, discrimination and crystal methamphetamine ('ice'): Current attitudes in Australia

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ARTICLE INFO

Keywords:
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Attitudes
Knowledge
Methamphetamine

ABSTRACT

Background: Crystal methamphetamine attracts an elevated level of negative attention in Australia and internationally, however there is a paucity of research into stigma and discrimination surrounding this drug. This study aimed to investigate and compare levels of public stigma, self-stigma and discrimination surrounding crystal methamphetamine use in a large sample of Australian residents.

Methods: A cross-sectional online survey, open to all Australian residents aged 18 years and over, was conducted from November 2018 to March 2019 examining stigmatising attitudes towards people who use crystal methamphetamine. Respondents also reported any personal history of crystal methamphetamine use and experiences of discrimination. Multiple linear regression examined whether prior crystal methamphetamine use was associated with holding stigmatising attitudes. Covariates included in the analysis were presence of a family member or friend who uses crystal methamphetamine, knowledge about crystal methamphetamine, gender, age and region.

Results: A total of 2108 Australian participants completed the study (mean age = 36.3 years, 50% female; 27% had used crystal methamphetamine). Many participants reported being discriminated against because of their crystal methamphetamine use. Stigmatising attitudes were prevalent, particularly among those who had not used crystal methamphetamine ($p < .001$). Others more likely to endorse stigmatising attitudes included females ($p < .004$ vs. males), individuals with less knowledge about crystal methamphetamine ($p < .001$) and those living in regional ($p < .001$) and rural/remote locations ($p < .001$) compared to metropolitan areas.

Conclusion: Stigma and discrimination surrounding crystal methamphetamine use was common in this sample of Australian residents, with public stigma more prevalent than self-stigma. This highlights a need for stigma reduction initiatives. Given higher levels of knowledge were associated with less stigmatising attitudes, public education campaigns providing accurate, evidence-based information about crystal methamphetamine along with guidelines and support for accurate media reporting, present promising approaches to stigma reduction. Exploration of other stigma reduction initiatives is also vital to ensuring people who use crystal methamphetamine feel supported in seeking help.

Introduction

Methamphetamine use is an increasing global health concern and Australia has one of the highest rates of use worldwide (World Drug Report 2019), with 1.3% of Australians aged 14 years or over reported to have used meth/amphetamine in 2019 (Australian Institute of Health and Welfare, 2020). Although overall rates of meth-

amphetamine use appear to be stabilising in Australia, rates of associated harms, such as hospitalisations and deaths, have risen substantially in recent years (Darke, Kaye, & Duffell, 2017; Degehardt et al., 2017) and it is estimated that approximately only a third of people dependent on amphetamine-type stimulants receive treatment each year (Lanyon 2019; McKetin & Kelly, 2007). Increasing harms related to methamphetamine use have been partly attributed to an increase in

Original Paper

Evaluation of a Digital Health Initiative in Illicit Substance Use: Cross-sectional Survey Study

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Abstract

Background: The *Cracks to the Ice* (CITI) community toolkit was developed to provide evidence-based, up-to-date information and resources about crystal methamphetamine to Australians. Given the high rates of internet use in the community and the potential for misinformation, CITI has the potential to play an important role in improving knowledge and challenging misconceptions surrounding crystal methamphetamine.

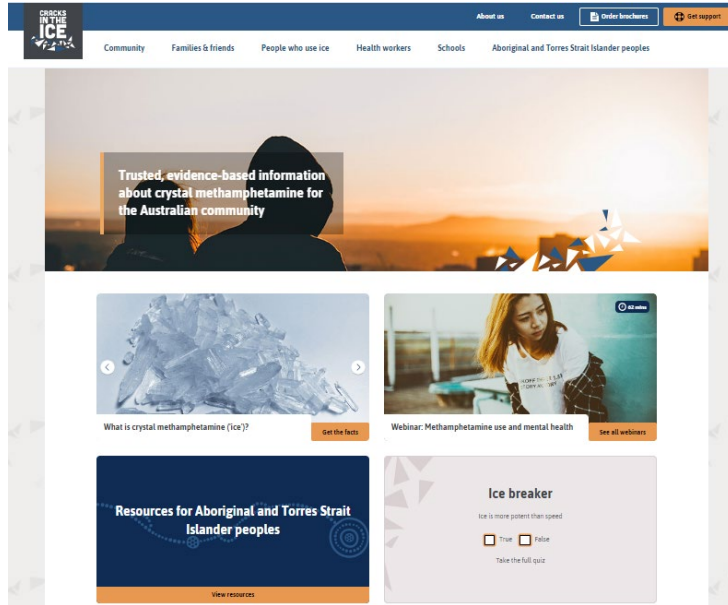
Objective: This study aims to determine (1) whether the CITI toolkit is achieving its aim of disseminating evidence-based information and resources to people who use crystal methamphetamine, their family and friends, health professionals, and the general community and (2) examine the association between the use of CITI and the knowledge and attitudes about crystal methamphetamine.

Methods: A cross-sectional web-based survey among Australian residents (aged ≥18 years), was conducted from November 2018 to March 2019. People who had previously visited the website (referred to as “website visitors” in this study) and those who had not (“naïve”) were recruited. At baseline, knowledge, attitudes, and demographics were assessed. CITI website visitors then completed a series of site evaluation questions, including the System Usability Scale (SUS), and naïve participants were asked to undertake a guided site tour of a replicated version of the site before completing the evaluation questions and reporting knowledge and attitude scales.

Results: Of a total 2108 participants, 564 (26.7%) reported lifetime use of crystal methamphetamine, 434 (20.6%) were health professionals, 288 (13.7%) were health professionals, and 822 (38.9%) were community members. The average SUS score was 73.49 (SD 13.30), indicating good site usability. Health professionals reported significantly higher SUS scores than community members ($P < .02$) and people who used crystal methamphetamine ($P < .001$). Website visitors had significantly higher baseline knowledge than naïve participants ($P < .001$). Among naïve participants, knowledge scores increased following exposure to the website (mean 15.2, SE 0.05) compared to baseline (mean 14.4, SE 0.05; $P < .001$). The largest shifts in knowledge were observed for items related to prevalence, legal issues, and the effects of the drug. Stigmatising attitude scores among the naïve group were significantly lower following exposure to CITI (mean 41.97, SE 0.21) compared to baseline (mean 44.3, SE 0.21; $P < .001$).

How can we reduce stigma associated with mental health and substance use disorders?

Educational approaches



Increase in
knowledge
about the drug



Decrease in
negative or
stigmatising
attitudes

Knowledge scores increased following exposure to the website (mean 15.2, SE 0.05) compared to baseline (mean 14.4, SE 0.05; $P < .001$). Stigmatizing attitude scores among the naïve group were significantly lower following exposure to CITI (mean 41.97, SE 0.21) compared to baseline (mean 44.3, SE 0.21; $P < .001$).

Educational approaches

Positive Choices Drug and Alcohol Information
Get informed, stay smart, stay safe.

Drugs A to Z About us **Get support**

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Positive Choices is an online portal to help Australian schools and communities access accurate, up-to-date evidence based alcohol and other drug education resources.

More about us

Developed in collaboration with researchers, teachers, parents and students across Australia

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A collection of culturally appropriate resources based on research and consultation with people from Aboriginal and Torres Strait Islander communities

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REACH4MHT Home Connect with others Explore

Depression Eating disorders Personality disorders

Professional help Psychotic disorders Self-harm

Beyond Blue

Get support Learn about mental health Maintain wellbeing Get involved Login

Search Donate Need support?

Learn about mental health

In Australia, around 1 in 2 people will struggle with their mental health during their lifetime.

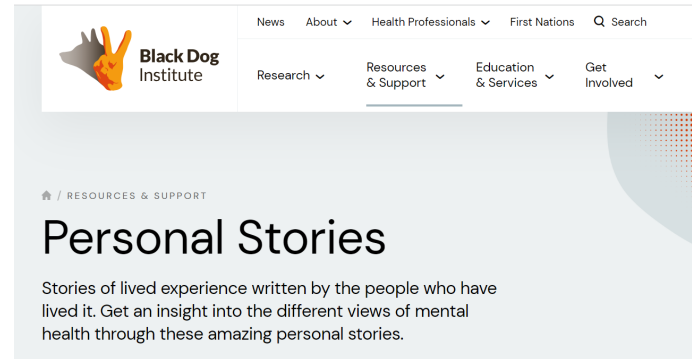
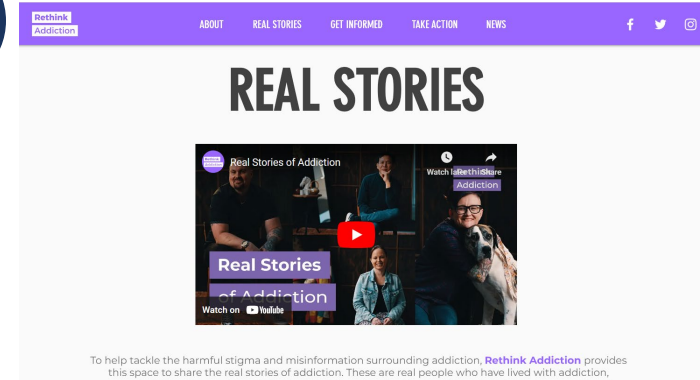
Learning about mental health will help you look after your social and emotional wellbeing. It will also help you support people close to you.

It's important to get support early if you're feeling unsettled or struggling. We've got information and resources about the signs and symptoms to watch out for and where to find support.



Contact based approaches

- Engage with/involve people with lived experience
- Build understanding and empathy



Both approaches are complementary

Other ways

- Fact check!
- Consider the language you use
– person centred and empowering approach
- Connect people with one another, their family, community and culture



language matters | Language is powerful—especially when discussing alcohol and other drugs and the people who use them. Stigmatizing language reinforces negative stereotypes. “Person-centred” language focuses on the person, not their substance use.

When working with people who use alcohol and other drugs...

| try this | instead of this |
|---|---|
| substance use, non-prescribed use | abuse / misuse / problem use / non-compliant use |
| person who uses/injects drugs | drug user/abuser |
| person with a dependence on... | addict / junkie / druggie / alcoholic |
| person experiencing drug dependence | suffering from addiction / has a drug habit |
| person who has stopped using drugs | clean / sober / drug-free |
| person with lived experience of drug dependence | recovered / former addict / used to be a... |
| person disagrees | lacks insight / in denial / resistant / unmotivated |
| treatment has not been effective/chooses not to | not engaged / non-compliant |
| person's needs are not being met | drug seeking / manipulative / splitting |
| currently using drugs | using again / fallen off the wagon / had a setback |
| no longer using drugs | stayed clean / maintained recovery |
| positive/negative urine drug screen | dirty/clean urine |
| used/unused syringe | dirty/clean needle / dimes |
| pharmacotherapy is treatment | replacing one drug for another |

Adapted from Language Matters from the National Council for Substance Use Health, United States (2013) and Aronoff, New Zealand (2016)

NADA NUA

<https://mindframe.org.au/>; <https://adf.org.au/talking-about-drugs/power-words/>;
<https://www.nada.org.au/resources/language-matters/>

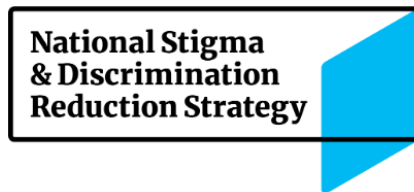
Other ways to challenge stigma

- Encourage people to seek help and support, remind them that that there is no shame in asking for help.



Watch this space

- Development of a national strategy
- Draft includes mental health disorders and their co-occurrence with drug use disorders



As a part of the nation's mental health reform agenda, the National Mental Health Commission has been tasked with developing a National Stigma and Discrimination Reduction Strategy.

The Strategy's focus and objectives include:

- Reduce self-stigma amongst those who experience mental ill-health and those who support them.
- Reduce public stigma by changing attitudes and behaviours in the general community and amongst identified target audiences.
- Take steps towards eliminating structural stigma and discrimination towards those affected by mental ill-health in identified settings.

<https://haveyoursay.mentalhealthcommission.gov.au/hub-page/national-stigma-and-discrimination-reduction-strategy>

In summary

- Many health conditions are stigmatised
- Stigma and discrimination can be a barrier to help seeking
- There are ways we can reduce stigma



Acknowledgements

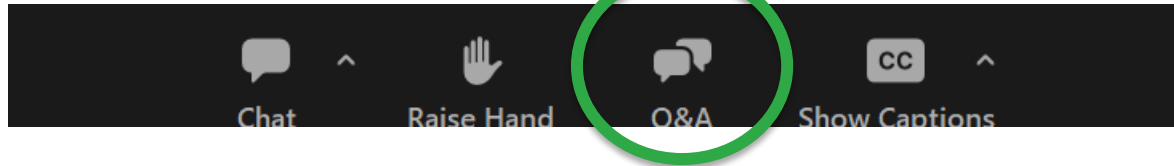
- Australian Government
Department of Health and Aged
Care for funding the project
- The Matilda Centre for Research
in Mental Health and Substance
Use
- The *Cracks in the Ice* Team &
Collaborators
- Many community members and
people with lived experience.





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Questions?





Thank You

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