Attitude of non-neuropsychiatric staff Towards Patients with addiction

Thesis

Submitted for Partial Fulfillment of
Master Degree in Neuropsychiatry

By

Amira Rafik Kirolos Bichara
MB, BCh Ain Shams University

Under Supervision of

Prof. Dr. Mona Mahmoud El Shiekh

Professor of Psychiatry
Faculty of Medicine - Ain Shams University

Prof. Dr. Dalia Abdel Monaem Mahmoud

Assistant Professor of Psychiatry
Faculty of Medicine - Ain Shams University

Dr. Yomna Ahmed El Hawary

Lecturer of Psychiatry
Faculty of Medicine - Ain Shams University

Faculty of Medicine
Ain Shams University
2019

Acknowledgments

بِسْمِ اللَّهِ الرَّحْمَٰنِ الرَّحِيمِ

قَالُوا

سُبْحَانَكَ لَا عِلْمَ لَنَا

إِلَّا مَا عَلَّمْتَنَا إِنَّكَ أَنتَ

الْعَلِيمُ الْحَكِيمُ

صدق الله العظيم

سورة البقرة الآية: ٣٢

List of Contents

List of Tables

List of Charts

List of Charts Cont...

List of Abbreviations

Abb.	Full term
Σ	Sum
ADHD	Attention deficit hyperactivity disorder
AOD	Alcohol and other drugs
ASPD	Anti-social personality disorder
AUD	Alcohol use disorder
BBV	Blood born viral infection
CD	Conduct disorder
FH	Family history
IDU	Injection drug user
INCB	International narcotic control broad
INL	International Narcotics and Law Enforcement
MDD	Major depressive disorders
N	Number
NAS	National academic of science
NS	Non significant
NSP	Needle and syringe programs
ODD	Oppositional defiant disorder
P value	Probability value
PEID	Performance and image enhancing drugs
PSA	Public service announcements
PWID	People who inject drugs
SAMHSA	Substance abuse and mental health service administration
SUD	Substance use disorder
THC	delta-9-tetrahydrocannabinol
UNODC	United nation of drug and crime

INTRODUCTION

Stigma is defined as the dehumanization of an individual based on their social identity or participation in a negative or undesirable social category. Stigma is also defined as 'a trait which is deeply discrediting'. He makes clear that stigmatization is an interactive social process, but some interpret his work as indicating that the blame lies within the person carrying the stigma *(Goffman, 1963).*

A person who is stigmatized is considered devalued, unimportant, and flawed in important ways. Experiences with stigma can lead to the internalization of these beliefs for those who identify with a stigmatized group *(Ritsher et al., 2003).*

At least three conceptually distinct forms of stigma can be identified: <u>***Enacted stigma***</u> refers to directly experienced discrimination based on membership in a stigmatized group, for example difficulty in obtaining employment, reduced access to housing, poor support for treatment, or interpersonal rejection. <u>***Perceived stigma***</u> refers to beliefs that members of a stigmatized group have about the prevalence of stigmatizing attitudes and actions in society. <u>***Self-stigma***</u> refers to negative thoughts and feelings (e.g., shame, negative self-evaluative thoughts, and fear) that emerge from identification with a stigmatized group and their resulting behavioral impact avoidance of treatment, failure to seek employment, and avoidance of intimate contact with others *(Luoma et al., 2007)*.

Drug addiction and alcoholism consistently rank among the most devalued stigmatized characteristics worldwide *(Room, 2005).* Similar to other illnesses, however, stigma associated with substance use is considered a significant barrier to detection and treatment, and research is needed to understand and address this issue *(Kulesza et al., 2013).*

Researchers have found that substance use disorders are more highly stigmatized than other health conditions *(Schomerus et al., 2011).* There is no physical or psychiatric condition more associated with social disapproval and discrimination than alcohol and/or other drug dependence *(Corrigan et al., 2006).*

Many studies reported that medical practitioners hold a negative attitudes towards individuals with a psychiatric diagnosis similar to those held by the general public, claiming that they overuse system resources, they are not vested in their own health, they abuse the system through drug-seeking and diversion and fail to adhere to recommended care, However, practitioners with the most knowledge about mental illness are generally the least stigmatizing *(Henderson et al., 2008).*

Also, there are numerous studies documenting the failure of primary care settings to identify and differentiate individuals who use, abuse, or are dependent on substances *(Hack & Adger, 2002)*. It has also been reported that health professionals in general medical settings (e.g. emergency departments,

medical–surgical wards, general medical wards, and intensive care units) found the complex care of patients with mental and physical health comorbidity to be very challenging for them as patients with SUD are usually considered difficult to deal with, dangerous,unpredictable and contribute all physical symptoms to substance abuse *(Zolnierek, 2009).*

Stigma can prevent people with drug problems recognizing their emerging problem and seeking help. The feelings of shame and worthlessness engendered through stigmatization also prevent people accessing treatment because they feel they are 'not worth dealing with *(Jones et al., 2010)*.

A study revealed high levels of public stigma across all classes of substances, the cannabis user is considered significantly less dangerous than someone who uses alcohol, and there are gender differences in attitudes towards people who use substances. These findings highlight the importance of developing targeted interventions to increase treatment seeking behavior *(Sorsdahl et al., 2012).*

This attitude has been remarkably constant despite advances in scientific understanding of mental illness and extensive efforts to improve public understanding *(Pescosolido et al., 2010).*

RATIONALE

Substance misuse is a major problem that the world is facing. Substance misuse not only ruins the social fabric of society but it contributes significantly towards disease and violence.

Several studies have been made to measure stigma of mental illness however; the experiences of stigma towards substance using populations are not as well researched.

Stigma towards substance use patients among non-psychiatric staff also is not well researched wish subsequently leads to poor health care delivery for this population and contribution of physical symptoms to substance abuse.

In Egypt, this problem and its extent are not well researched without enough highlighting of the negative and pervasive impact of stigma on diagnosis, treatment and rehabilitation.

HYPOTHESIS

The current study hypothesized a high rate of occurrence of negative attitude among non psychiatric health care workers towards patients with substance use disorder; that would be higher towards heroin and alcohol addiction than that towards cannabis addiction.

AIM OF THE WORK

The aim of the study is to:

- Measure the rate of occurrence of stigma variables among non-psychiatric health care workers towards patients with substance use disorder.

- Investigate the relation between the different demographic variables of the non psychiatric health care workers and the different variables of stigma among them towards patients with substance use disorder.

- Compare the stigma variables among non psychiatric health care workers towards different types of psychoactive substances abused.

- Compare stigma variables among different psychoactive substances.

Chapter 1

Definition of Substance Use Disorder and its Negative Impact

Definition of "Substance dependence"

Substance dependence, also known as drug dependence, is an adaptive state that develops from repeated drug administration, and which results in withdrawal upon cessation of drug use. A drug addiction is a distinct concept from substance dependence, is defined as compulsive, out-of-control drug use, despite negative consequences *(Malenka et al., 2009)*.

Drug dependence is considered a multi-factorial health disorder that often follows the course of a relapsing and remitting chronic disease. Unfortunately in many societies drug dependence is still not recognized as a health problem and many people suffering from it are stigmatized and have no access to treatment and rehabilitation. Over recent years, the bio-psychosocial model has recognized drug dependence as a multifaceted problem requiring the expertise of many disciplines *(WHO, 2006)*.

Diagnostic criteria of substance use disorder

The American Psychiatric Association's Diagnostic and Statistical Manual (DSM-IV), moreover, has its own set of