

Eliminating stigma surrounding SUD treatment among clients with HIV/AIDS

Bureau of Justice Assistance (BJA)

Residential Substance Abuse Treatment (RSAT)
Program for State Prisoners

Training and Technical Assistance Resource

This project was supported by grant No. 2019-J2-BX-K001 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the SMART Office, and the Office for Victims of Crime. Point of view or opinions in this document are those of the author and do not represent the official position or policies of the United States Department of Justice.



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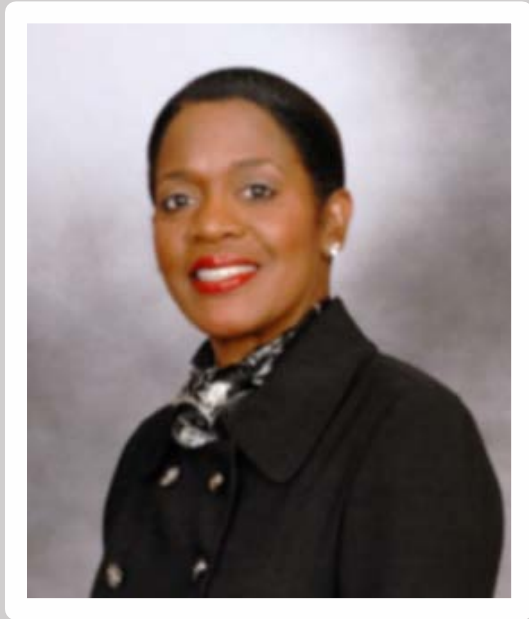
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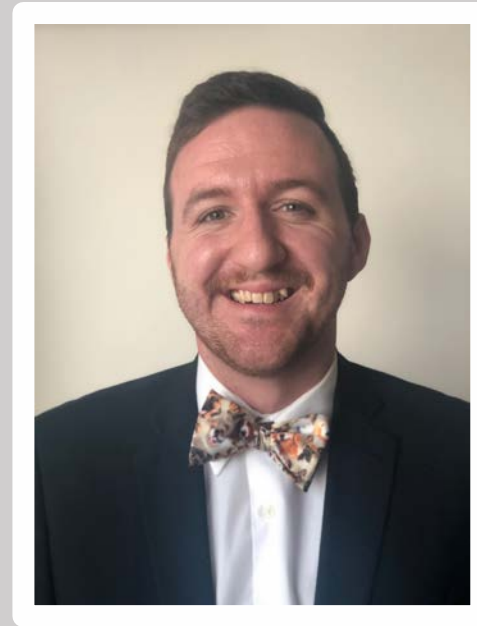
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Today's Speakers



Angelia Turner, MS
Director for Health and Justice
TASC's Center for Health and Justice



Benjamin Campbell
Administrator of First Responder Consulting and Training
TASC's Center for Health and Justice

Eliminating Stigma Surrounding SUD with Individuals Living with HIV/AIDS



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Introductions

Angelia Turner

- Director for Health and Justice – TASC’s CHJ Division and International Criminal Justice Consultant
- Federal Bureau of Prisons – Former Research Analyst
- Former College Director and Criminal Justice Professor

Benjamin Campbell

- Former EMT in West Philadelphia
- Researcher in Philosophy of Bioethics, with a focus on Shame and Stigma surrounding HIV
- Administrator for First Responder Deflection Programs at CHJ at TASC



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Learning Objectives

After completing this webinar, participants will be able to:

- Understand the problems associated with stigmas and shame specific to clients with HIV/AIDS
- Recognize how HIV and SUD/ODD are related
- Understand harm reduction programming in SUD delivery with an eye to clients living with or at risk for HIV
- Facilitate greater appreciation for community input and resources surrounding treatment models and HIV/AIDS clients



Shame or Stigma?



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- Poll Question -

1. *United States Data*

HIV - Stigma more pronounced where?

North

South

East

West



PBS Video Clip: “Isolation and Stigma Sustain HIV in the South: Its Like We’re on a Deserted Island” (2018)

Reference Source

<https://www.pbs.org/newshour/show/isolation-and-stigma-sustain-hiv-in-the-south-its-like-were-on-a-deserted-island>



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Philosophies of Shame

- Many of our everyday ideas of Shame and Guilt come from Religious Concepts
 - I *did* a bad thing, and thus am *guilty*
 - I *am* a bad person, and thus I have *shame*
- For the purposes of SUD treatment and responses
 - Guilt and Shame operate the same way



Philosophies of Shame

- While their manifestations are different, their motivations and languages are often the same
 - Something has happened that is seen, from the inside or outside, as abnormal
- Usually whatever happened is *NOT* abnormal
 - “Normal” doesn’t actually exist in Philosophy



Is Shame helpful?

“They [the different forms of shame] are available for the work of metamorphosis, reframing, refiguration, *transfiguration*, affective and symbolic loading and deformation, but perhaps all too potent for the work of purgation and deontological closure.”



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What about Stigma?

- Stigma is the societal counterpart to Shame
- How do we respond to others who are different in some way?
- Against whom do our societal institutions discriminate? Why is this how they function?
(employment, housing, voting, Public Assistance Eligibility, Physical Violence, etc.)
- Stigma has no benefit, personally or societally, for individuals with mental health concerns!



HIV and SUD/ODU

- Injection Drug Use
- High Alcohol Consumption
- Smoking
- Inhaling Drugs



HIV and SUD/ODU

- Risky behaviors and diminished reasoning capacity (lack of condom usage, high number of sexual partners, sharing needles/syringes, etc.)
- Quicker HIV Progression
- Diminished adherence to or efficacy of medications
- Worsens overall consequences of HIV
- Particularly with achieving and maintaining an undetectable viral load



1/160

An HIV-negative person has a 1 in 160 chance of getting HIV every time they use a needle that has been used by someone with HIV.

#2

Sharing syringes is the second-riskiest behavior for getting HIV. Receptive anal sex is the riskiest.



About 1 in 10 new HIV diagnoses in the United States are attributed to injection drug use or male-to-male sexual contact *and* injection drug use (men who reported both risk factors).



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Stigma of HIV+ Diagnosis

“Individuals living with HIV have been detrimentally affected in every aspect of life, including experiencing denial and termination of employment; denial of needed medical care; loss of insurance coverage; erosion of social support networks; eviction from homes; disruption of family relationships; social isolation; depression; unwarranted criminal prosecution; and excessive criminal sentences.”

-Lambda Legal

How many of these seem like responses you've heard/seen to SUD/ODD as well?



**So how do we battle the Stigma associated
with HIV/SUD?**



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Two-Pronged Approach to Stigma Reduction

Protesting

- Call Attention to the Issue
- Call Others Inside
- Led by those with Lived Experiences

Passing

- Subvert the Societal Stigma Structure
- “This has been happening all along”
- This subversion is NOT the same as lying or giving false information
- These premises must be offered in Earnest



Two-Pronged Approach to Blood Donation

Protesting

- Calling upon the FDA to update its principles according to science, not to stigma
- Refusing to offer to donate blood, regardless of gender or sexuality, until all can donate

Passing

- Refusing to acknowledge your true sexuality on official forms, donating blood regardless
- Prove that “gay blood” poses no greater risk to the national supply than does any other type of donated blood



Combining Ideas

- Passing
- Protesting
- Progress



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HIV/SUD

- Specifically for individuals with HIV and SUD, extra step in Health Care Resources plans
- Mental Health Resources
- Anti-Retroviral Therapy (ART)
- Undetectable = Untransmittable



One Last Note About Language



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It's on all of us



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QUESTIONS

- ▶ Type your questions in the Q&A box on your screen.



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1 Continuing Education Hour (CEH) approved by NAADAC, the Association of Addiction Professionals



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May 5, 2021 RSAT webinar CEH quiz link:

<https://survey.alchemer.com/s3/6327416/May-5-2021-RSAT-Webinar-CEH>

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