

Stigma turns patients with co-occurring mental health and substance use disorders into non-patients without rights to proper and competent treatment in the psychiatric treatment system in Denmark

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8th conference – together against stigma

Purpose

- To explore and describe first-person experiences of being a patient in the mental health care system among people with co-occurring mental health and substance use disorders in Denmark

Method

- In-depth individual interview with patients (n = 18)

Patients' experiences with the mental health care system

- To patients the issue is how they generally are met by the psychiatric system:
 - They often experience being met with condemnation because of their substance abuse
 - *I was just a fucking drunk, taking up beds from the mentally ill*
 - *I can just feel it. They don't like me. No one like drug users*
 - The patients feel like a kind of second-rate patient

Patients' experiences with the mental health care system

- Patients tell about being turned down because of their substance abuse – they are told, e.g.
 - *Drugs are not accepted in psychiatry*
 - *This is not a place for rehab*
- Therefore, the patients usually keep silent about their use of alcohol and/or drugs during contact with the mental health care system

Patients' experiences with the mental health care system

- Patients often experience being discharged after one or a few days admission – without having received help with the problems, they initially reported
 - *They stay in the staff office, and then they make sure you have something to eat, and then they go back to the office, and then you see a doctor and then you are probably discharged, and then you have the very same problems as you did when you came in. I thought those acute wards were there to start up something, so you weren't just, 'well, you can just go home'*

When the patients are admitted they usually don't experience that staff members concern themselves with the patients problems with substances

- The patients experience that staff doesn't have an understanding of the huge part substances play in patients' lives
 - *You are not allowed to use substances, and if that is what you usually do to get things going, you don't know what to do. They don't understand just how important it is*
- Usually, the patients doesn't experience staff asking about their problems with substances
- Withdrawal symptoms is a challenge!

Patients' experiences with the mental health care system

- The patients experience being met with distrust
 - *The doctors and the nurses wants us to trust them. But they don't trust us*
 - *The staff think we fool them and tell lies*

Patients' experiences with the mental health care system

- The patients describe a mental health care system that doesn't address their problems, including substance abuse problems, and exclude them in a number of ways. Patients experience:
 - There is no good understanding of their problems with substances
 - There is no one listening to them
 - And the problems, the patients report, aren't taken seriously

Stigma and dual diagnosis in the mental health care system

- The study finds striking processes of rejection and stigma in staff members daily interactions with patients with a dual diagnosis
- Stigma turns patients with a dual diagnosis into non-patients in the mental health care system
- That is, a kind of patient, that staff members does not regard as someone they must take care of and provide proper and competent treatment

Why is that?

- Patients with a dual diagnosis challenge the psychiatric treatment model (S. Jöhncke et al 2007)
- Patients with a dual diagnosis challenge the role of ‘the good patient’ (Parsons 1951)
- Drug abuse is one of the most stigmatized practices in modern societies (Ahern, Stuber & Galea 2007)
- See: K. Johansen, S. Busch et al. (in press) Psykiatriens syn på stoffer og de patienter, der bruger stoffer. *Tidsskrift for Forskning i Sygdom og Samfund*, 28.

Stigma and dual diagnosis in the mental health care system

- Staff members way of meeting and treating patients (stigma) were described as the major issue that should be addressed in regard to dual diagnosis, if treatment are to be improved for patients with a dual diagnosis
- We need to consider stigma as an important thing – in its own right – if we want to improve treatment for patients with a dual diagnosis

Stigma and dual diagnosis

- A more general problem!?

**THANKS
FOR
LISTENING**

ANY QUESTIONS?