FAIR TREATMENT

LET'S TALK

STIGMA

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STIGMA PREVENTS FAIR TREATMENT

The way we talk about drug use, and people who consume drugs, plays an important role in helping to reduce stigma. That's why we commissioned a **Drug Stigma Message Guide** along with our partners at the Alcohol and Drug Foundation and the New Zealand Drug Foundation.

It was developed by Common Cause Australia in consultation with people from a range of backgrounds, including those with lived experience of drug use and stigma. Read this booklet for information and tips to help you as a Fair Treatment supporter. You can access the full Messaging Guide at ***fairtreatment.org/lets-talk-stigma***

LESS STIGMA = LESS HARM

Stigma is a common and complex problem for people who consume drugs, and it's a key challenge in minimising harms associated with drug use. It can make people feel unwelcome and unsafe, and may prevent them from seeking health and support services. This can in turn have negative impacts on a person's wellbeing, employment and social outcomes.

It may also intentionally or unintentionally impact on policies and systems, which can restrict opportunities for people who use illicit drugs or experience dependence. It can hinder efforts to reduce drug-related harms and result in reduced access to health services.

Whether you work in a drug treatment service or you are lobbying for drug policy reform, the recommendations in this guide are useful for reducing discriminatory attitudes and behaviours towards people who use drugs, while boosting public support for policy reform and increased funding for drug treatment.

We hope that this new narrative will also motivate our existing supporters to speak more openly, honestly and persuasively to the people in their circle of influence about drug use and drug policy.

KNOW YOUR AUDIENCE

Our research revealed 3 main attitudes in relation to drug stigma:

- **Supporters (18%)** strongly agree with messages suggesting people who use drugs deserve the same respect and care as everyone else and should not be punished.
- **Persuadables (66%)** hold weaker attitudes overall and tend to move between oppositional and supporter perspectives.
- **Opponents (16%)** strongly agree with messages suggesting people who use drugs need to be punished and shamed.

We found that supporters and opponents each represent less than 20% of Australians, while the majority of the population is persuadable.

Overall, messages that appealed strongly to supporters and also shifted persuadables were identified as most useful for future communications. These are messages that move persuadables into a supporter mindset. On the flip side, messages that appealed strongly to both opponents and persuadables were identified as harmful messages because they move opponents into a less open, more oppositional frame of mind.



18%
Supporters



66%
Persuadables



16%
Opponents

TOP TIPS TO

REDUCE

STIGMA

First, do no harm

The dominant narrative around illicit drugs in Australia is extremely unhelpful. Many journalists and public commentators frame drugs as evil, dirty and dangerous. Too often, these characteristics are then carried over and applied to the people who use these substances. Reducing the stigma our society places on people who use drugs requires us, therefore, to avoid messaging that reinforces this unhelpful narrative about drugs.

Unfortunately, our discourse analysis suggests that advocates often use language and framing that, whether intentional or not, panders to this dominant narrative. The following suggestions will help you avoid these common messaging mistakes in your future communications.

1. DON'T SCARE PEOPLE

One of the key characteristics of the opposition segment in our research, is the degree to which they believe illicit drugs are dangerous, dirty and addictive. Heightened fear and disgust around drugs correlates with higher levels of stigmatising attitudes towards people who use them. This closely mirrors findings from previous research that fear and disgust-based messaging can increase people's discriminatory attitudes and behaviours.

This means we should avoid messaging that dials up people's fear of drugs and those who use them. This includes stories that focus exclusively on the worst possible outcomes of drug use – addiction, devastation and death. Similarly, referring to drugs as a crisis or 'pandemic' is not helpful, nor are stories and imagery which associate drug use with dirtiness or disease. While this framing is likely to attract the interest of media and others, it is also likely to activate a stigmatising mindset in some audiences.

Another subtle way in which advocates may contribute to an excessive level of fear around drugs, is by implying that our primary concern is ending drug use. When we interviewed advocates, almost all said their primary concern was ending the harms associated with punitive drug policies and the discrimination people who use drugs face in all walks of life. Yet in the public discourse, advocates often failed to make this clear and either implicitly or explicitly accepted the dominant frame that ending drug use should be our ultimate goal.

Similarly, implying that everyone who uses drugs needs treatment or would benefit from reducing or stopping their consumption of drugs, panders to the unhelpful notion that drug use is inherently harmful and/or addictive.

Avoid messaging that activates fear and disgust or implies that all drug use is necessarily problematic.



2. AVOID LAW & ORDER FRAMING

In our testing, we found references to legality or crime tended to reduce support rates from persuadable audiences. Indeed, law and order appears to be a key element of the opposition mindset.

This suggests that when people think about drugs from the perspective of maintaining law and order or reducing crime, they are more likely to stigmatise people who use drugs.

In our messaging, therefore, it is important we do not imply that drug policy reform or treatment services are necessary in order to reduce crime. This is something many advocates have done previously in an attempt to appeal to audiences concerned about crime. This research suggests, however, that framing our solutions in terms of crime or community safety has the opposite effect of increasing people's judgement of those who break the law by using illegal drugs.

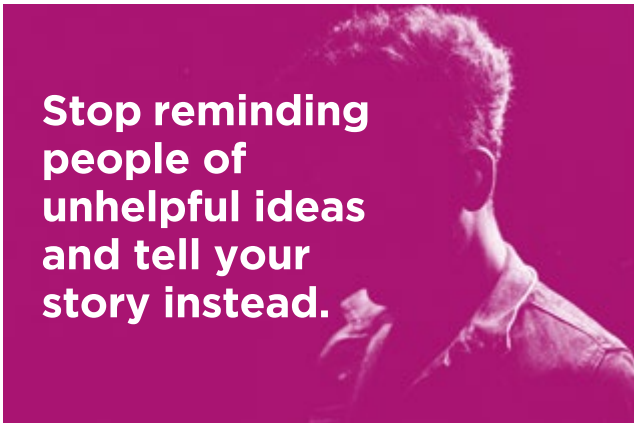
Similarly, in calling for policy reform, some advocates point to the fact that the criminalisation of drugs means that they are produced in unregulated environments and are sold on the black market. This both increases the risks of drug use and creates a profitable underworld market. Yet reminding people of this fact only builds our audiences' association between drugs and crime. This message was strongly endorsed by our opposition – a clear sign that it fails to toggle audiences out of a stigmatising mindset.

Try not to justify drug policy reform or drug treatment services from the perspective of reducing crime or increasing community safety.

3. DON'T MYTHBUST

One of the most common messaging mistakes made by advocates is mythbusting – using facts and figures to show how a common fallacy around drugs or drug use is wrong. While the desire to correct myths is both natural and strong (especially on an issue like drugs, where misconceptions are common), when you mythbust you mythbuild.

Research shows that every time we are exposed to a concept (even when framed as untrue) it's strengthened as a frame in our minds. It's also more likely to be activated next time we think about that issue. Mythbusting, therefore, has the counterproductive effect of activating and strengthening the very same ideas we are trying to dispel.



Similarly, advocates have an unhelpful tendency to remind people of what we don't want them to believe at the same time as telling them what we do want them to believe. We say things such as: "Drugs are a health issue, not a criminal issue" and "We should treat people as human beings, not criminals" and "We want treatment, not punishment". Our testing confirmed this only weakens our message, by activating unhelpful ideas in the minds of our persuadable audiences.



Don’t talk about the failed war on drugs. It traps us in an unhelpful frame and fails to move persuadable audiences.

4. ABANDON THE WAR ON DRUGS

Advocates often talk about the war on drugs having failed and the need, therefore, for ‘a new approach’. Unfortunately, reminding people of the war on drugs – even to say it has failed – does nothing to shift the frame for drugs as an issue. In fact, it locks us into the very frame we most need to escape.

In addition, our research suggests the failure of the ‘war’ means different things to different people. For supporters, it is evidence that punishment and criminalisation do not work. But for the opposition, it just means we failed to punish and enforce enough! This is not a strong foundation from which to build a new story to move persuadable audiences. In fact, in our dial testing, the message we tested that referenced the failed war on drugs was the least convincing message for persuadable audiences.

5. DON'T BUILD EMPATHY THROUGH ENJOYMENT

Framing drugs as enjoyable does not build empathy for people who use drugs.



In our interviews, many advocates suggested we should talk more about the enjoyment people derive from using drugs. They suggested this might help build greater empathy and understanding from people who do not use drugs. Our message testing, however, found that people who hold highly stigmatising attitudes towards people who use drugs already strongly agree with the statement that "people take prohibited drugs because they enjoy how it makes them feel". Repeating this message, therefore, does not appear to help us tell a more helpful story.

TELL A NEW STORY

If we want to change the way Australians think about people who use drugs, we need to tell a different story about drugs and the people who use them.

The following recommendations are designed to help you tell that new story. They are based on messages that tested well in our research, and toggled persuadable audiences into a more supportive and compassionate mindset.

6. FRAME BY VALUES

To shift the narrative on drugs and change the way persuadable people feel about those who use them, we need to embed altruistic and open-minded values at the heart of our messaging.

We found messages based around altruistic and community-oriented values including honesty, helpfulness and equality, were significantly more effective at activating supportive attitudes in persuadable audiences than purely fact-based messages.

Framing the issue of drug stigma around openness and honesty was particularly effective. It is also a key recommendation for the story structure in the full Messaging Guide (see the Story Structure section). Combining this with messages around love and support for people who need it, worked particularly well.

While the messages we tested didn't explore openness to change values such as freedom, choice, creativity and curiosity in any depth, these were central values for our supporter segment. This suggests these values may provide fruitful territory for our messaging if we can prime them in persuadable audiences.

Use messaging that connects strongly to altruistic and open-minded values.

7. PUT PEOPLE WHO PERPETUATE STIGMA IN THE FRAME

In order to tell a new story, we need to shift focus and blame away from people who use drugs and onto external actors. This means shifting the problem from 'drug use' over to 'drug stigma' and the people who perpetuate it.

Framing the community as a whole as the cause of stigma is not helpful as this activates defensiveness in persuadable audiences. Instead, it is more persuasive to shift the focus onto prominent people who support punitive policies and sensationalist media coverage.

We found most persuadable audiences agreed the legality of drugs had more to do with politics than levels of harm, and that we need more facts and less sensationalism in media coverage of drugs.

Shift the focus off people who use drugs, frame those who use perpetuate drug stigma as the problem.



8. PAINT A NEW PICTURE OF PEOPLE WHO USE DRUGS

It is easier to stigmatise a group of people who don't look like 'us'. Painting a more realistic and diverse picture of the people who use illicit drugs in Australia is, therefore, an important step to breaking down unhelpful stereotypes.

One way to do this is to ensure that the stories we tell of people who use drugs, reflects a diversity of occupations, ages, social status and outcomes.



9. POINT OUT THAT PREVENTING ALL DRUG USE IS UNREALISTIC

One way to shift the conversation from preventing drug use to improving the health and wellbeing of those who do, is to point out that stopping all use of illicit drugs is unrealistic. This is common sense to most persuadable people and, therefore, a useful element to include in our messaging to establish common ground.

Yet it is important to note that this message does not, by itself, set a new frame for the issue. It is possible to agree that drug use can never be stopped entirely, but that it should be minimised as far as possible by any means necessary – including harsh punishments for people who use them.

So make sure to couch this message within the broader context of the need for more openness and honesty around drug use and the ways in which we can support the health and wellbeing of those who do. In other words, treat this message as a throwaway line rather than a core framing device. An example of this is provided in our full Messaging Guide.

Call attention to the fact that stopping all drug use is unrealistic.



10. BRING ALCOHOL INTO THE FRAME

A key difference between supporters and opponents is the belief that the legality of drugs relates to the harms they cause. Supporters rank alcohol as the most harmful drug in Australia, while our opponents rank it among the least harmful.

So reminding persuadable audiences that alcohol is a harmful drug, is one way to activate a supporter mindset - by demonstrating subtly that the legality of drugs is not a reliable indicator of the harms they cause. It also serves to expand the definition of 'drug users' to a much larger portion of the population, challenging simplistic stereotypes.

Similarly, making references to 'alcohol and other drugs', instead of just 'drugs', helps people to connect them in their minds. We found it toggled persuadable audiences into more of a supporter mindset. Of course, this won't always be appropriate – for example, when you're referring specifically to illicit drugs. Yet connecting the 2 concepts whenever possible, will help shift this frame over time.

Remind people that alcohol is a drug that causes significant harm in Australia.

11. FRAME DEPENDENCE AS A SYMPTOM

The vast majority of the supporters in our research believed that substance dependence was a symptom, not the source, of people's problems. While the opposition disagreed, persuadables were marginally more likely to agree with supporters on this part of the narrative.

Yet most persuadables also agreed that 'people who use prohibited drugs will most likely become addicted'. So it is important that our messaging frames substance dependence as an outcome of other life challenges, rather than something caused by the drug itself.

Similarly, when talking about support services, we should be careful not to imply that everyone who uses drugs requires treatment. For example, instead of talking about drugs being a health issue (which implies that everyone who uses drugs is unhealthy), we would talk about . . .

Explain why dependence happens, rather than imply it can happen to anyone.

. . . drug dependence being a health issue.

You can access the full Messaging Guide, with more information on how to tell persuasive stories, identify and avoid stigmatising words and phrases, and details about our research and methodology, at ***fairtreatment.org/lets-talk-stigma***

The full guide was developed by Common Cause Australia in consultation with people from a range of backgrounds and experiences including those with lived experience of drug use and stigma.

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