

# Patients with Addiction Need Treatment – Not Stigma

Our understanding of addiction needs to change. Currently, the dominant view sees dependency as a kind of moral failure. Addicts encounter a drug, fail to resist the temptation to take it, develop a habit, get hooked, and then, through their actions, cause damage to the rest of society. Thus, becoming an addict is bound up with moral failure. Those who depend on substances aren't just ill; they're also bad people.

Researchers, however, are pushing back against this narrative as they learn more about the science of addiction. Instead of being evidence of moral depravity, they're finding instead that substance abuse is something that happens at the level of the brain. It's no more a sign of a bad person than getting diabetes or having depression.

In truth, nobody wants to become dependent on drugs. Given the right set of circumstances, however, it could happen to any of us. Chronic conditions, like diabetes and heart disease, for instance, can induce chemical changes in the brain that then dramatically increase a person's propensity for addiction. A person who would never have used substances before can suddenly feel the need to do so. It has nothing to do with their character: it's an impulse that results from a medical circumstance or trauma. And it requires **treatment**.

## Reframing The Conversation Around Addiction

For this reason, we need to reframe the conversation around addiction. The medical community needs to change the perception of a person with substance abuse disorder from a "stoner," "waster," or "low-life" to a "patient:" somebody in need of medical attention.

So what needs to happen? First, there needs to be a revolution in perceptions in the healthcare setting. Addiction is still misunderstood, even in the medical community. We need an end to the stigma surrounding addiction issues and a switch to treatments based on the latest scientific evidence. For instance, there is support in the literature for expanded use of the drug naloxone, which can help prevent deaths from opioid overdoses.

## Work With Physicians To Find Useful Resources

Next, there's a need for physicians to connect with **external resources** that they can use to help their patients overcome addictions. The *prescription drug monitoring program* could help people avoid becoming dependent on the very medicines designed to help them get better.





After that, there needs to be a greater focus on prevention. Many people first get into bad habits with substances in high-school and college in situations where there is inadequate supervision. Early interventions in these areas are the best way to prevent changes in brain chemistry that may foster lifelong propensities for addiction.

## Support The Complicated Nature Of Addiction

Finally, we need to see more support for comorbidities, especially the psychological problems that lead to substance abuse in the first place. Healthy and happy people rarely turn to drugs. Most often, it is evidence of a person struggling to deal with the stresses and strains of life, looking for an outlet. Substances can provide the temporary relief that many people feel that they need to get through the day. Offering psychiatric support to more people, therefore, is a necessary component of destigmatizing patients with addiction.



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