

Prejudice against users and ex-users of heroin

Negative stereotypes of heroin users can interfere with their chances of successful treatment. Prof David Clark reveals the results of research on attitudes to users and former users of the drug.



People who misuse heroin and other drugs often present for treatment with other problems, including health, social and criminal justice problems. They are often unemployed. Helping heroin misusers involves more than helping them become drug-free. Aftercare is required to prevent relapse. Rehabilitation involves helping the person deal with the problems that accompanies their drug misuse, including their lack of employment.

The heroin using lifestyle is often portrayed in very negative ways by the popular media and it is likely that many people form a negative stereotype of the person who has used this drug. In fact, heroin users in treatment will often refer to the prejudices they have experienced from other people. Such stereotypes and prejudices can impact negatively on a client's already fragile self-esteem, impairing treatment progress. They are also likely to make it more difficult for heroin users and former users to gain employment and be integrated (back) into mainstream society.

Given the efforts that governments in the UK are making to integrate former problem drug users back into mainstream society, it is surprising that so little attention has been focused on issues such as prejudice and discrimination. As far as we are aware, there has been no published research on these topics in relation to substance misuse.

We therefore initiated a research project to look at how prejudiced our society is towards heroin users and former users of the drug. We were also interested in people's attitudes towards the employment of users and ex-users of heroin. Our initial study was conducted in University students. For comparison, we also looked at students' attitudes towards disabled people.

Each of 141 subjects completed a questionnaire containing open and closed questions which referred to either users of heroin, ex-users of the drug, or disabled people. Each experimental group comprised over 40 subjects.

Subjects were first asked to indicate their general attitude toward heroin users, former heroin users and disabled people on a thermometer-like scale ranging from 0 (extremely unfavourable) to 100 (extremely favourable). Analyses revealed that heroin users (23.0) and ex-users (41.5) differed significantly from the neutral condition on the thermometer (50), with attributes being unfavourable in each instance. In contrast, there was a significant favourable attitude towards disabled people (72.9).

Subjects were asked about their emotions and feelings towards the three groups. The most prevalent emotion towards heroin users was anger (56% subjects), followed by sympathy (29%) and pity (27%). Results were mirrored by the students' views of former users, as anger (45%), compassion (29%) and pity (26%) were the most common responses. In contrast, the most common responses of students towards disabled people were compassion (48%) and sympathy (21%).

When subjects were asked their views of the 'values and customs' of the three groups, nearly half of the groups thought that heroin users (45% of subjects) and former users (49%) had a poor work ethic. Only 12% thought this of disabled people. The second and third most prevalent perceived values for heroin users were poor family life/values (37%) and criminal activity (31%), whilst they were poor family life/values (35%) and poor health (14%) for former users. These issues were of minimal relevance to subjects commenting on disabled people.

Subjects were asked to rate whether members of the three groups threatened or promoted various factors in British society. Heroin users and former users were deemed as threatening health, law and order, family values and personal safety, whilst disabled people were seen as promoting these factors. Surprisingly, ex-users were considered to

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threaten family values and law and order just as much as current users of the drug.

Subjects were then asked their views on the unemployment and future employment of the three groups. Both heroin users and ex-users were considered to be responsible for their unemployment and for solving the problem themselves. Subjects also thought that it was not other people's fault for heroin users and ex-users' unemployment, and it was not up to others to help them solve their trouble. In contrast, disabled people were not considered to be responsible for their unemployment as it was considered not to be their fault.

These findings demonstrate a clear negative prejudice towards heroin users and former users. Open-ended questions revealed anger towards these groups, whilst subjects associated these groups with having a poor work ethic and poor family values. They were also perceived to threaten a range of factors (e.g. law and order, family values) in British society. Heroin users and former users were considered to be responsible for causing and solving their lack of employment.

One of the most striking aspects of our research was the similarity in negative attitudes that people had towards former users of heroin, compared to current users of the drug. In fact, we have also conducted research with people in a Welsh valley community which shows a similar prejudice towards a hypothetical former user of heroin who had been in treatment for six months.

These findings emphasise the need for our society to take a serious look at the attitudes that many of us have towards people who have experienced problems with heroin. We need to enhance awareness and understanding of substance misuse – and increase compassion and sympathy – if we are to overcome these prejudices and facilitate the passage of former problem drug users into employment and mainstream society.