



THE STARTING PLACE

Understanding systemic stigma
barriers to knowledge about
Substance Use Health and
associated services in Canada

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and associated services in Canada**

CAPSA and the Canadian Centre on Substance Use and Addiction (CCSA)

Rationale for this survey: 78% of people living in Canada (over the age of 15) consume alcohol, tobacco, and other substances across a spectrum of use – recreationally, medically, with low risks, higher risks, and to the point of a disorder (Canadian Tobacco, Alcohol and Drugs Survey, 2017). The vast majority do not have an “addiction”/ substance use disorder (SUD). The most recent statistics put 4.4% of Canadians (aged 12 and older) as meeting the criteria for a SUD (Huỳnh et al., 2022).

Literature, best practices, and media narratives can be readily found for those with a SUD. Much less is known about how we do, or do not, support the health of everyone else in Canada who use substances. For instance, in a global scan of standard health literature databases from 1946-present, only nine articles moved beyond a focus on SUDs to consider the health and information needs of the broader population when it comes to their substance use (CAPSA & Ottawa Public Health, 2023).

This survey is a first step to quantify the health service and knowledge gap across the spectrum of substance use (including non-use). It is meant to stimulate discussions about an equitable and cost-effective allotment of resources that could improve the health of more people regarding their substance use. Given the wide-ranging impacts of substance use and the contributions that can be made to narrow the knowledge gap across sectors, the audiences for this study are broad – the general public, researchers, health service providers, policymakers, and the media.

Methods: The survey was designed and analyzed by CAPSA, an organization led by stigma experts who also have personal experiences of SUDs, as well as the Canadian Centre on Substance Use and Addiction (CCSA), a non-government organization that provides national leadership on substance use. The survey was conducted in partnership with Leger, a market research and analytics company, who conducted a cross-Canada poll of 4023 people from December 2022-January 2023.

CAPSA led the development of 24 survey questions, based on its expertise of systemic stigma in the healthcare system. Specifically, the survey asked:

- *Where* the general population gets its information related to substance use and health;
- *Who* they talk to if they have questions or need help; and
- *If* they are being offered services to support their needs, regardless of how much or what type of substance they use.

Key Findings: Survey responses show that most respondents believed they are making healthy decisions about their substance use. 86% self-identified with substance use that involves no risk,

low-risk, or benefits to their health (e.g., medical use). 4% reported problems occurring because of their substance use, 3% have self-diagnosed disorders, and 1% have been medically diagnosed with SUD by a healthcare professional.

A deeper look at the data, however, raises questions about *where* average Canadians are turning for health information about their substance use and whether these sources accurately inform perceptions about healthy consumption. Below are the main findings of the survey.

1. Substance Use Health is an important issue to survey participants.

- 78% of those surveyed believe Substance Use Health is an urgent issue.
- 80% believe individuals need more access to Substance Use Health information and services to increase lifelong wellness.

2. Most respondents reported getting their information about substance use from outside the healthcare system.

- 49% turn to the media, reading studies (37%), family and friends (34%), followed by their healthcare providers (29%).
- Three times as many respondents relied on a self-diagnosis of a SUD than on the diagnosis made by a health professional.
- When asked how people “knew they had a disorder,” the most common responses were:
 - “I know what a disorder looks like” (38%);
 - “I did my own research” (33%); and/or
 - “I talked to family and friends” (15%).

3. More than a fifth of people who completed the survey had a false belief about substance use:

- 21.6% believe “addiction [substance use disorder] is a choice.”

4. Healthcare providers are not asking about substance use.

- 62% of those surveyed have never been asked about their substance use by a healthcare provider.
- 79% have never received any direct support (education, advice, strategies to maintain health or reduce harms) – or did not think the question applied to them.

5. The majority of those surveyed have not asked their healthcare providers about their substance use.

- 83% have never asked their healthcare providers about their substance use. When asked why, the most common responses include:

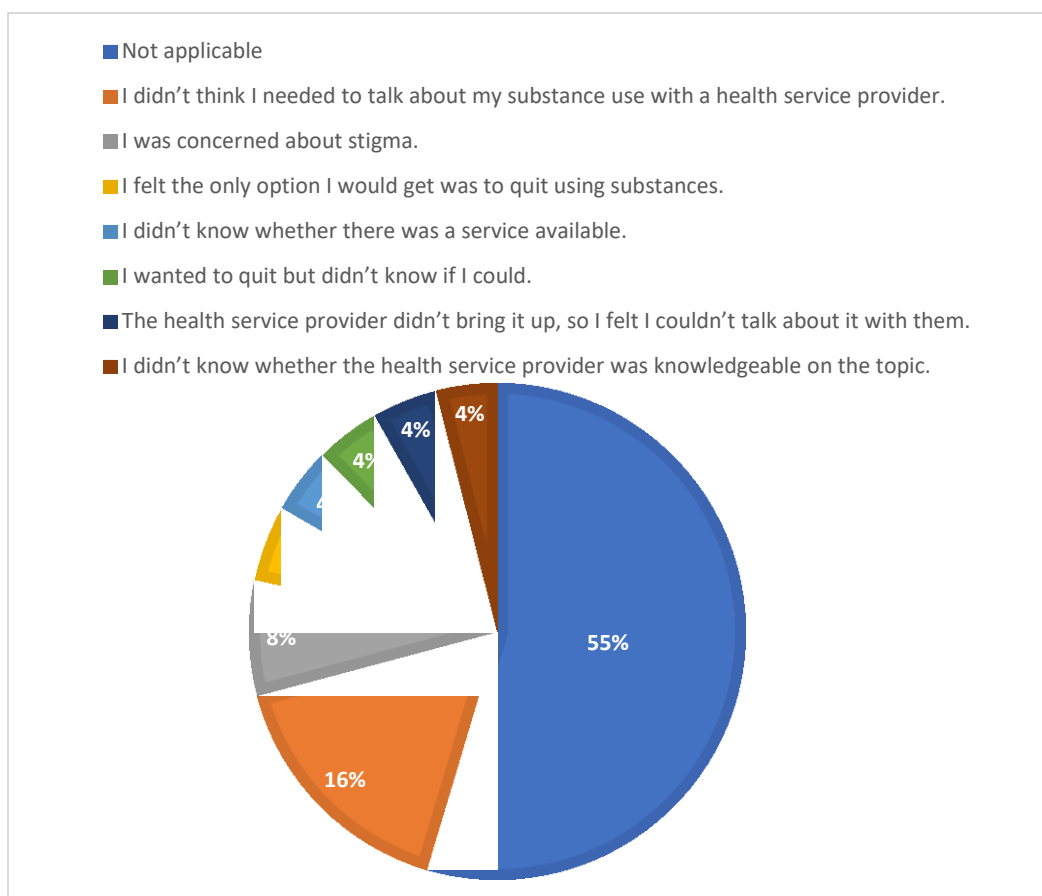


Figure 1: Why survey respondents do not talk to their healthcare provider about substance use.

6. When people do talk about substance use, it is mostly focused on illness.

- 86% of those surveyed have never spoken to someone about how they personally overcame issues related to their substance use.
- 64% have never heard about how someone overcame their substance use issues to achieve better health or other beneficial outcomes.

7. Less than a third of those surveyed knew where to go for help if they needed it.

- 29% of those surveyed reported knowing where to turn if they wanted to “change or manage their substance use in some way.”
- Of the 29% who did know where to go, only 0.7% thought their doctor could help them.

8. Survey respondents think they have enough information to make informed decisions.

- 76% believe they personally have enough information about their health and substance use.
- 79% believe they do not have any reason to talk to their healthcare provider about their substance use – or the question does not apply.

Summary: The data suggests that there is very little health information or services available for people who do not have SUDs; that people do not know where to go to find this information; or they do not feel they need it. Outside of a disorder, substance use and health are distinctly

separate conversations, usually held with family and friends, online, or through the media, and not with health professionals. These conversations are largely focused on illness. Incomplete or questionable information about substance use from outside the healthcare system contributes to false beliefs (i.e., stigma), which are barriers to care for anyone seeking support.

Why do these findings matter? Two recent examples show how silence on Substance Use Health for those without disorders present significant concern.

1. Uninformed decision-making about the health risks of substance use: In January 2023, the CCSA released updated guidelines on alcohol consumption and health: No amount of alcohol is healthy, but if you are going to drink, 3-6 drinks/week are “moderately risky” and 7+ drinks/week put Canadians at a “high risk” of premature death. The causes of death are not only liver disease, but of multiple cancers, stroke, heart disease, diabetes, epilepsy, tuberculosis, lower respiratory infections, hypertension, and several types of injuries.

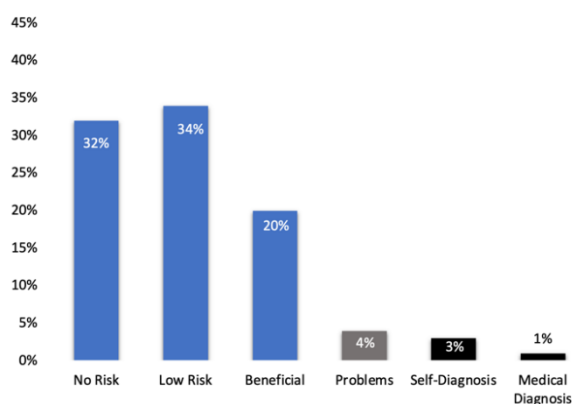


Figure 2: Canada's Guidance on Alcohol and Health, CCSA, 2023.

41% of Canadians fall into this “high risk” category (CCSA, 2023). When we juxtapose this 41% with the 86% of survey respondents who believe their substance use is healthy, we see a clear discrepancy between what survey respondents *believe* about the risks of their substance use and the *actual* risks. The graphs below highlight this discrepancy.

This discrepancy presents a clear need for minimum expectations around basic and accurate

Self-reported Substance Use Risk of Survey Participants



Actual Substance Use Risk (Alcohol)

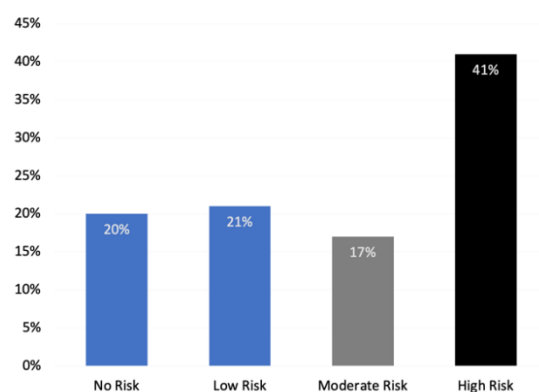


Figure 3: Self-reported and actual risks of substance use.

information about effects substances on health so a) people can decide for themselves the level of risk they are willing to tolerate; and b) policymakers can accurately, equitably, and cost-effectively respond to health issues arising from substance use across the spectrum.

2. The most recent report on the *Costs of Substance Use in Canada* (2020) sheds light on the total costs associated with the substance use from the general population, including but not limited to those with SUDs. The report puts the total cost of all substance use at \$41.9 billion per year. As expected, healthcare costs for people with disorders are higher per capita than that the general population.

Often overlooked, however, is the source of the largest *total cost* of substance use: Lost productivity of statistically “average” consumers of substances from the general population far outweighs healthcare costs by \$9 billion annually (CCSA & University of Victoria, 2020). Again, this example points out the considerable losses associated with the 86% of people who consider their use to be healthy (when it may or may not be). It also presents a case for more targeted education initiatives that move beyond those with, or at risk of a disorder.

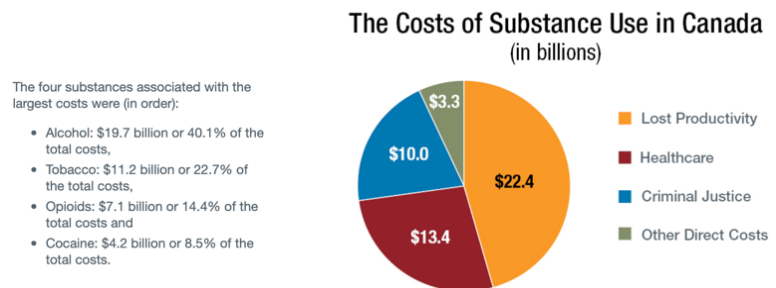


Figure 4: *The Costs and Harms of Substance Use in Canada*, CCSA & University of Victoria, 2020.

Conclusions: The purpose of this survey was to capture baseline knowledge about Substance Use Health and associated services among the general population in Canada. Specifically, it sought to answer:

1. **Where does the general population get its information related to substance use and health and who do they turn to for help?** The short answer is *not* the healthcare system. The overwhelming majority – the general public and healthcare providers alike – do not talk about substance use until there is a perceived problem. Survey respondents were far more likely to turn to the media, the internet, family, and friends than a healthcare provider – for a diagnosis, advice, or to ask questions.

The result of relying on information outside the healthcare system is an overemphasis of extremes: illness on the one hand (“addiction”) and “healthy” use on the other. This polarizing narrative overshadows the health and financial costs associated with the largest proportion of people who use substances who fall *between the extremes*. Consequently, what this population *believes* about their use versus what the scientific *evidence* proves is not congruent.

2. **Are Canadians being offered services to support their health, regardless of how much or what type of substance they use?** The short answer is no – unless you are among the 1% of survey respondents with a diagnosed disorder (and even then, the wait lists are often long). Crisis is the entry point for health services when it comes to substance use. Most people believe their substance use is healthy and the risks of their use are low or non-existent. This belief, in part, comes from the failure of the health care system to even discuss it.

Recommendations: The results of this survey are clear. Low to no information leads to false beliefs about substance use and uninformed decision-making. These barriers to care are *systemically* created and can be *systemically* reversed with some relatively quicker wins than the course we are currently on. Given the diverse contributions that can be made to narrowing the knowledge gap, these recommendations apply to a broad audience – the public, researchers, service providers across sectors, and policymakers alike:

- Make any entry point the right entry point. Raise an awareness of Substance Use Health anywhere along the spectrum as a healthcare provider in any sector, as researchers, policymakers, and as a family member, or friend – just as you would with Physical Health and Mental Health.
- Provide basic and accurate health information about the substances Canadians are consuming and raise an awareness of existing resources.
- Question inaccurate or incomplete narratives about substance use – in the media, literature, and among family and friends. Contribute to spreading *more* accurate and complete narratives in your life and work.
- Talk about *Substance Use Health*, not only *substance use disorder*.

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