



WOMEN, RELIGION AND SUD STIGMA

(INTERSECTIONALITY)

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OBJECTIVES



- To discuss how religious beliefs and practices can influence stigma against women with SUD
- To discuss strategies to overcome stigma against women with SUD

HOW RELIGIOUS COMMUNITIES PERPETUATE STIGMA

1. Moral judgement:

- Most religions have moral codes and behaviours that they have to adhere to be considered part of the religion.
- some religious teachings emphasise strict moral codes and view substance use as immoral behaviour and sinful.
- Women are held at a higher Standard of morality and purity compared to men making them more likely to face judgement and stigma for their actions leading to stigma.

2. "Just world" Belief:



- some religious teaching promote the idea that you reap what you sow or bad things happen to those who deserve it.
- Consequently, people struggling with SUD may be viewed as having brought their condition upon themselves, leading to stigmatizing and belief that they deserve the suffering.
- The stigmatizing viewpoint often fails to recognise the complex factors that contributes SUD.
- It is essential to emphasise that SUD are complex mental condition and is not solely an issue of willpower and choice

3. Lack of Compassion:



Certain religious teachings may prioritize punishment or consequences for perceived wrongdoings without emphasizing compassion or understanding.

• This can result in stigmatizing attitudes, as individuals with substance use disorders may be seen as deserving of punishment rather than support and empathy.

4. Exclusivism;



Exclusivism refers to a belief system or ideology that promotes the exclusivity where a select group has priority over others.

- In some religious communities there may be a strong sense of identity and belief that they possess the right path to salvation of spiritual fulfilment
- This belief can lead to an exclusionary mindset where those who deviate from prescribed norms including individuals struggling with SUD are seen as morally inferior or outside the favoured group.
- This exclusionary mindset can contribute to stigma and hinder the provision of compassionate care and support.



5. Lack of Education:

In some cases, religious communities may lack proper education or understanding about substance use disorders, leading to misconceptions, fear, and stigmatization.

• Religious communities often play an important role of shaping the attitudes and beliefs of their members. However if there is lack of Education and adequate information about SUD, harmful stereotypes and stigmatizing attitudes can prevail.

STRATEGIES TO OVERCOME STIGMA



Education and awareness:

Promote accurate and evidence-based education about substance use disorders, addiction science, and the factors that contribute to the development of addiction.

- Providing information on the biological, psychological, and social aspects of addiction can help dispel myths and misconceptions and foster empathy and understanding.
- Religious leaders can also take the initiative to educate themselves and the communities.



- **2. Language and Communication**: by using certain strategies and approaches, we can create a more inclusive and supportive environment that encourages understanding and empathy.
 - Person-first language using phrases like a woman with SUD rather than an alcoholic
 - Non judgemental and non stigmatizing terminology
 - Normalising the conversation
 - Sharing personal stories
 - Collaborative partnerships

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3. Media Representation:

- Authentic story telling
- Highlighting resilience in recovery
- Showcasing diversity
- Accountability and responsible reporting
- Collaborating with experts



4. Support and Empathy:

- Education and awareness
- Peer support networks.
- Counseling and pastoral care
- Support groups and programs.
- Addressing intersectionality



5. Policy and Legal Reforms:

- Creating a supportive legal framework
- Anti -discrimination laws
- Funding and resources. Policy changes to allocate adequate funding and resources specifically for SUD prevention and treatment.
- Training and education
- Incorporating addiction treatment within religious practices.
- Monitoring and evaluation. This allows an ongoing assessment and adjustment of policies to ensure they contribute to meet the revolving needs of individuals with SUD.



6. Collaboration and Partnership:

- Sharing knowledge and resources
- Awareness campaigns
- Joint programs and networks
- Networking and community engagements.
- Offering support for marginalized communities.
- Advocacy for change



7. Advocacy

Here are several ways in which advocacy can be a strategy to combat stigma

- Raising awareness
- Challenging stereotypes
- Support and policy change
- Enhancing treatment and support services
- Promoting parity and reducing discrimination
- Shifting public discourse
- Empowering individuals and families

CONCLUSION

- INTERNATIONAL SOCIETY OF SUBSTANCE USE PROFESSIONALS
- Recognizing and addressing gender specific challenges is essential for developing effective prevention, intervention, and treatment strategies tailored to the needs of women with SUD.
- It will require a comprehensive approach that considers the social, cultural and gender specific factors that influence substance use and recovery outcomes.
- Addressing substance use disorder stigma in relation to women requires targeted efforts to combat gender-specific challenges.



- This includes creating gender-responsive treatment programs, providing comprehensive support services, promoting trauma-informed care, and challenging societal norms and stereotypes that perpetuate stigma.
- By recognizing and addressing the unique needs and experiences of women with substance use disorders, we can work towards reducing stigma and improving outcomes for this vulnerable population.

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