



South Southwest (HHS Region 6)

**PTTC**

Prevention Technology Transfer Center Network  
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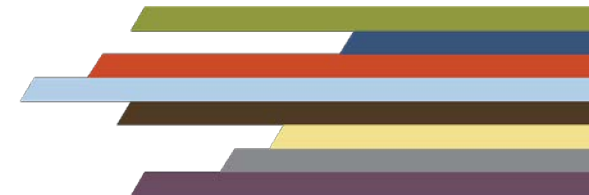


# Partnering with Faith Communities to Improve Prevention Outcomes Reducing Stigma, Gaining Faith in Prevention

Tracy Johnson

August 3, 2021

South Southwest Prevention Technology Transfer Center



# Funding and Disclaimer

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This work is supported by awards 6UR1TI080205-02M002, SM081726 and 1H79SP081006-01 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

The views, opinions, and content expressed in this product do not necessarily reflect the views, opinions, or policies of SAMHSA.

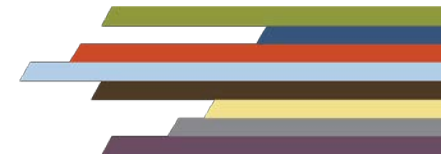


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Assistant Regional  
Administrator, Region 6

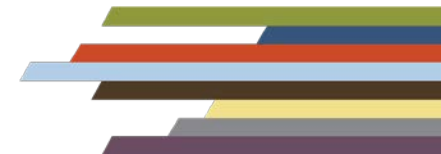
LCDR Traci M. Murray,  
PhD, MPH, RN, CPH



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# Presenters

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Tracy Johnson



Carl Alves



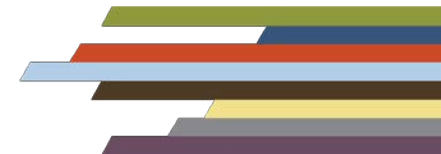
Katrina Wyche, Ed.D



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# Learning Objectives

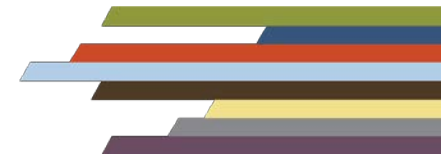
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- Summarize the role of faith-based organizations in substance misuse prevention work.
- Explore strategies for disrupting stigma against people with a substance use disorder in faith organizations.
- Identify strategies for engaging the faith-based organizations.
- Identify evidence-based and promising programs, policies, and practices used in faith communities.



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# Agenda

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- Role of Faith Communities
- Addressing Stigma
- Lunch Break
- Panel Discussion
- Prevention Programming in Faith-Based Settings

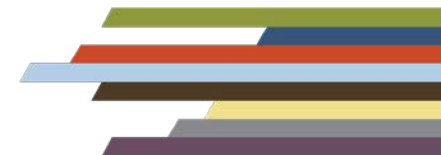
We will pause for stretch breaks throughout the session.



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# Roles

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“Faith in action is love  
and love in action is  
**SERVICE.**”

- Mother Teresa



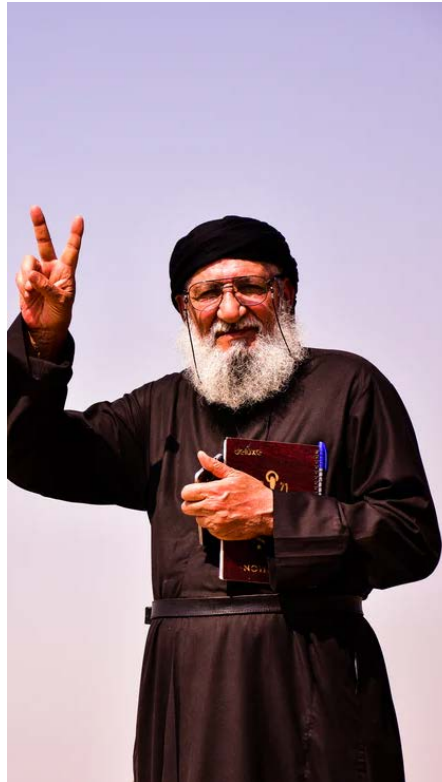


“Take the first step in faith. You don’t have to see the whole staircase just take the first step.”

Dr. Martin Luther King, Jr.



- Faith communities have a history of leading the way.
- Faith communities have a long legacy of addressing societal ills.

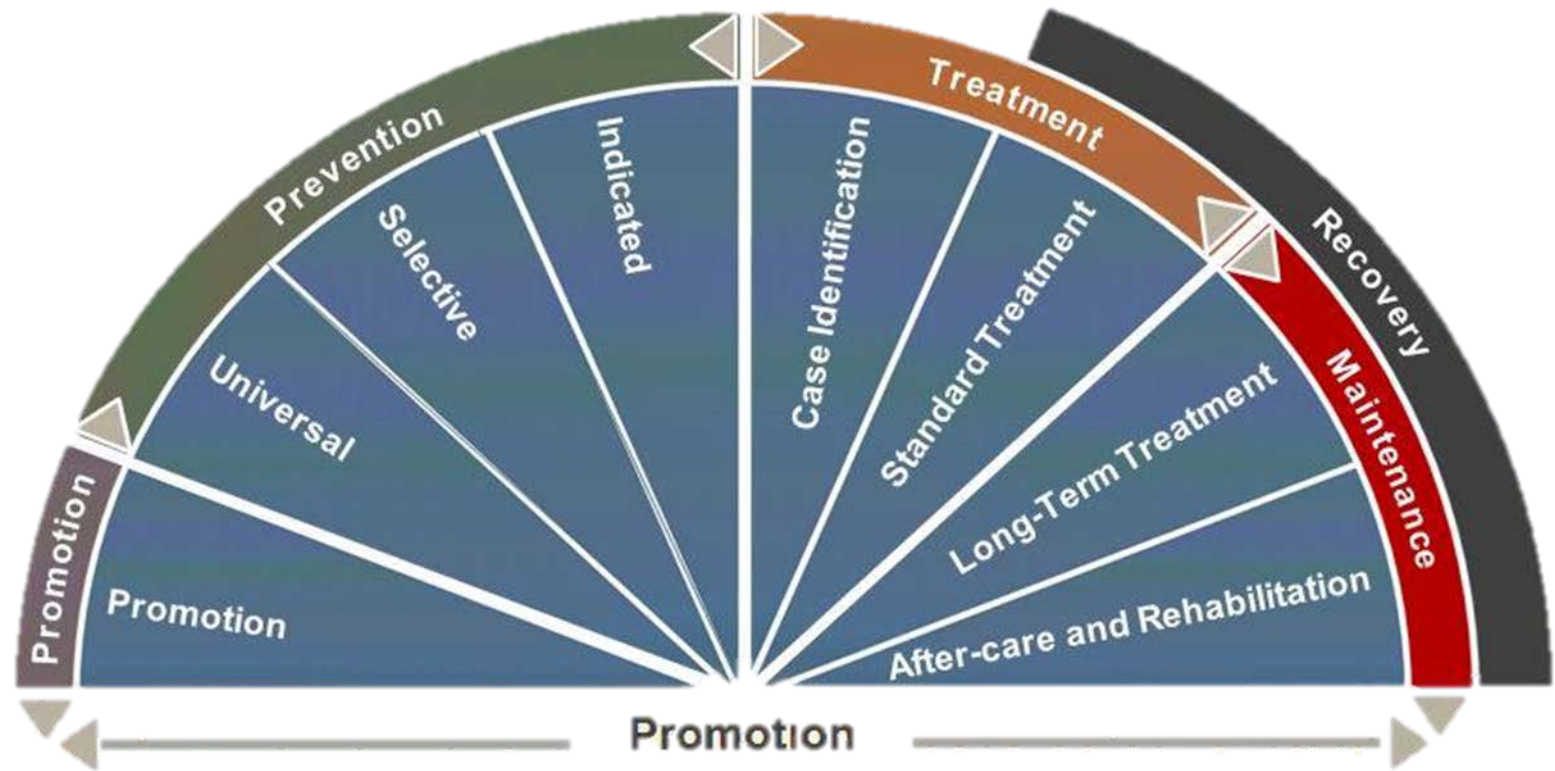


# How did/has the faith community impact(ed)?

- Slavery
- Homelessness
- Social Injustice
- Poverty



Faith communities have an outsized history of addressing substance misuse across the Continuum of Care.

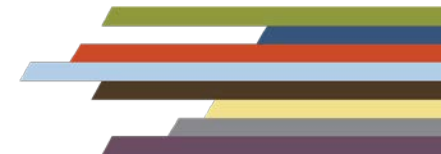


# Activity/Discussion

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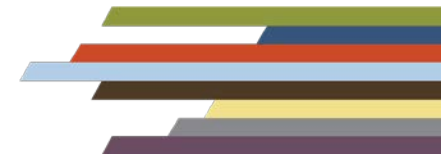
What substance misuse messages are conveyed by the faith community in the communities you serve?



# Why involve faith-based/spiritual institutions?

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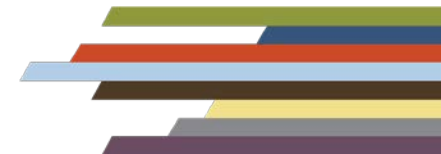
1. Faith groups exist in nearly every community throughout the country.
2. The presence of faith groups lends credibility.
3. Faith groups touch people of all ages, economic levels, and ethnicities, and mobilize them.
4. They provide a sense of community and responsibility.
5. Members look to and respect the opinions and guidance of their faith leaders.



# Why involve faith-based/spiritual institutions?

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6. Clergy and laity recognize substance misuse as an important issue among family members in their congregation.
7. There is support from congregational members.
8. They provide opportunities to work with families who might otherwise not be involved in prevention.
9. Religion and spirituality are key protective factors in the prevention and treatment of substance abuse and in maintaining recovery.

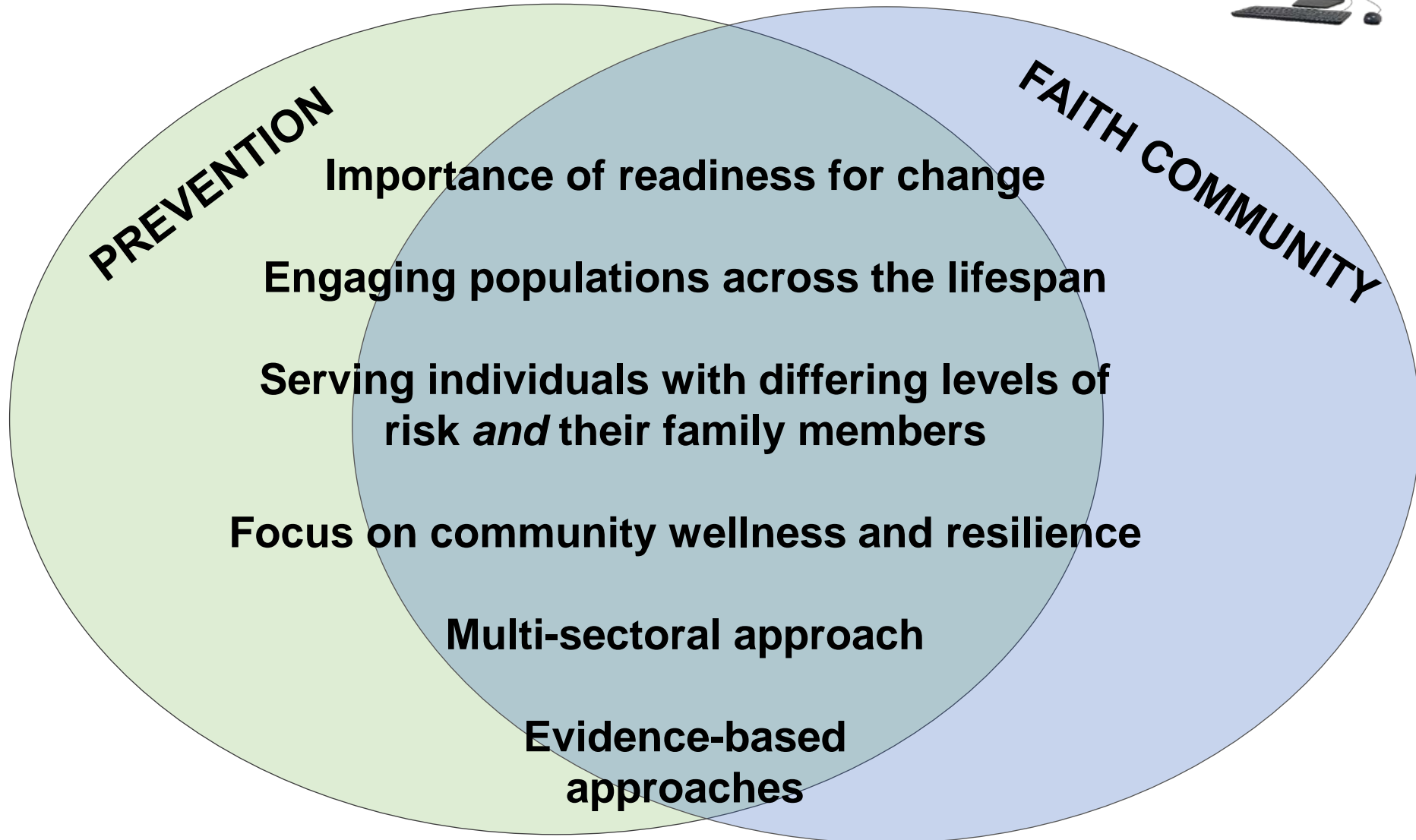


Much of what community members learn about alcohol, tobacco, and other drug use is conveyed through what the faith community says, or does not say, about it.





# Similarities: Prevention Science and Faith



# A Role for Every Sector

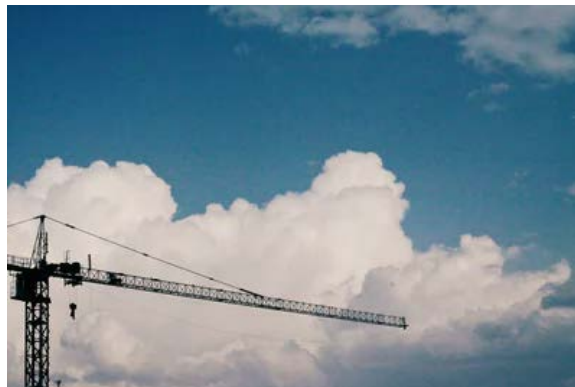


# Blue Sky Vision Activity



If you woke up tomorrow and a miracle occurred and all faith based/spiritual groups were having a positive impact on substance misuse, what would that look like?

Share images, words, or a phrase, the sky is the limit.





**See you soon!**



Stigma

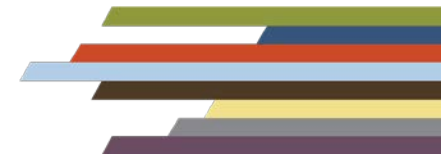
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# What is Stigma?



A mark of disgrace associated with a particular circumstance, quality, or person<sub>1</sub>

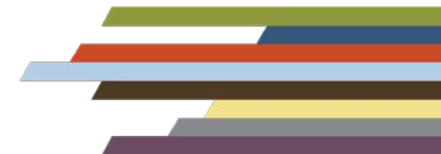
Stigma is a discrimination against an identifiable group of people, a place, or a nation. It is associated with a lack of knowledge, need for blame, fears, and rumors or myths. <sub>2</sub>





# Stigma exists when four specific components come together

- 1. Differentiation and labeling:** Identifying which human differences are important and worthy of labeling is a social process and requires a significant amount of oversimplification in order to create groups. Differences must be socially judged to be relevant for labeling to occur.
- 2. Linking to stereotypes:** The labeled differences must be linked to stereotypes.

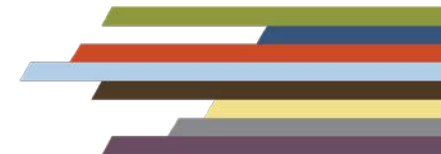




# Stigma exists when four specific components come together

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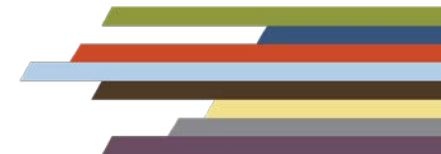
- 3. Us and them:** The linking of negative attributes to differentiated groups facilitates a sense of separation between the “us” and the “them.” This implies that the labeled group is slightly less human in nature, and at the extreme, not human at all.
- 4. Disadvantage:** As individuals are labeled and linked to undesirable characteristics, status loss and discrimination occur in areas including income, education, mental well-being, housing, health, and medical treatment.



# How Stigma Impacts

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In *Changing the Conversation* (2000), stigma was addressed as a “powerful, shame-based mark of disgrace and reproach that impedes treatment and recovery.”<sup>3</sup>

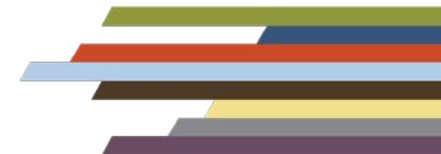


# How Stigma Impacts

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Stigmatized individuals may **internalize negative perceptions of themselves**, further affecting their ability to effect positive change in their lives.

It can affect the **individual's confidence** in their ability to seek treatment, remain in recovery, keep jobs, and trust the systems set up to help them.



# How Stigma Impacts

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They begin to accept the idea that their addiction is their own fault, and they may be too weak to do anything about it.

Hiding addiction becomes the “rational” thing to do when seeking help could result in losing a job or insurance or losing a child to state systems because the individual is declared an “unfit parent” because of drug or alcohol addiction.

As a social justification for giving up on people, stigma pushes public policy away from a medical response to addiction and toward punishing its symptoms.

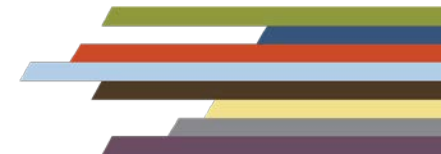


# Stigma Domains

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## Areas of Health and Social Impacts

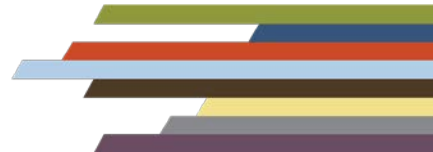
- Individual
- Peers
- Family
- School
- Community (Social Group, Institutional, Governmental)
- Faith



# Strategies to Disrupt Stigma

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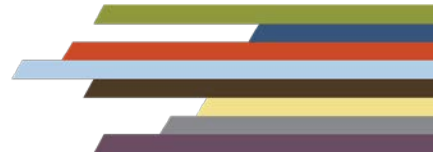
- Promote anti-stigma campaigns expressly for faith-based settings; including social media and online approaches
- Promote anti-stigma programs expressly for use in faith-based settings
- Support and enhance individual coping strategies for people in stigmatized groups



# Strategies to Disrupt Stigma

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- Address stereotypes and stigma among clergy and laity
- Employ pro-health non stigmatizing, neutral, and clinically accurate language, messaging and use person first language





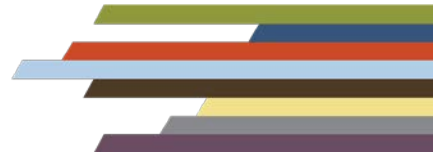
**LUNCH TIME**  
(We will resume in 1 hour)



# Panel

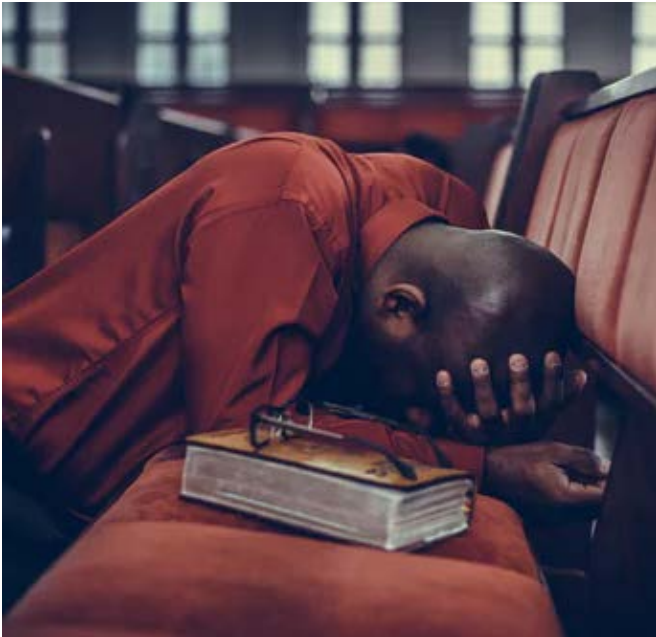
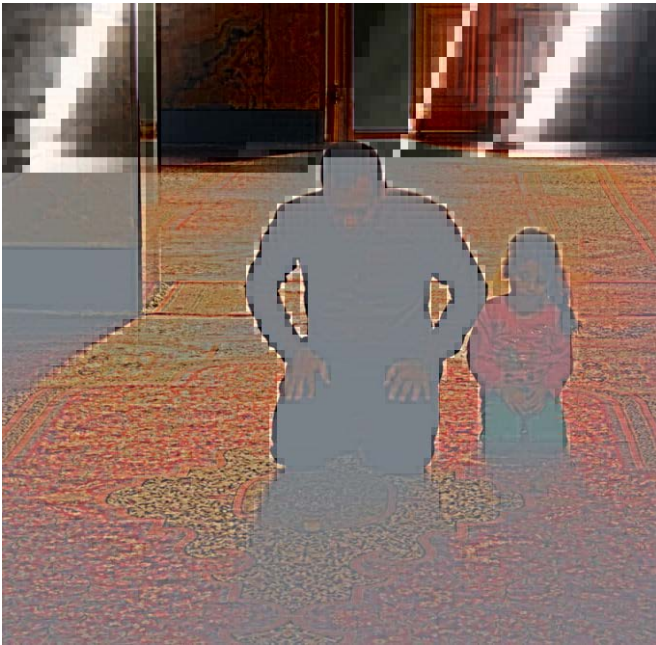
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Please use the chat box to ask questions or raise your hand to be unmuted.





**See you soon!**

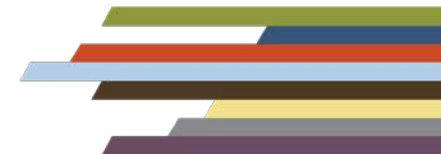
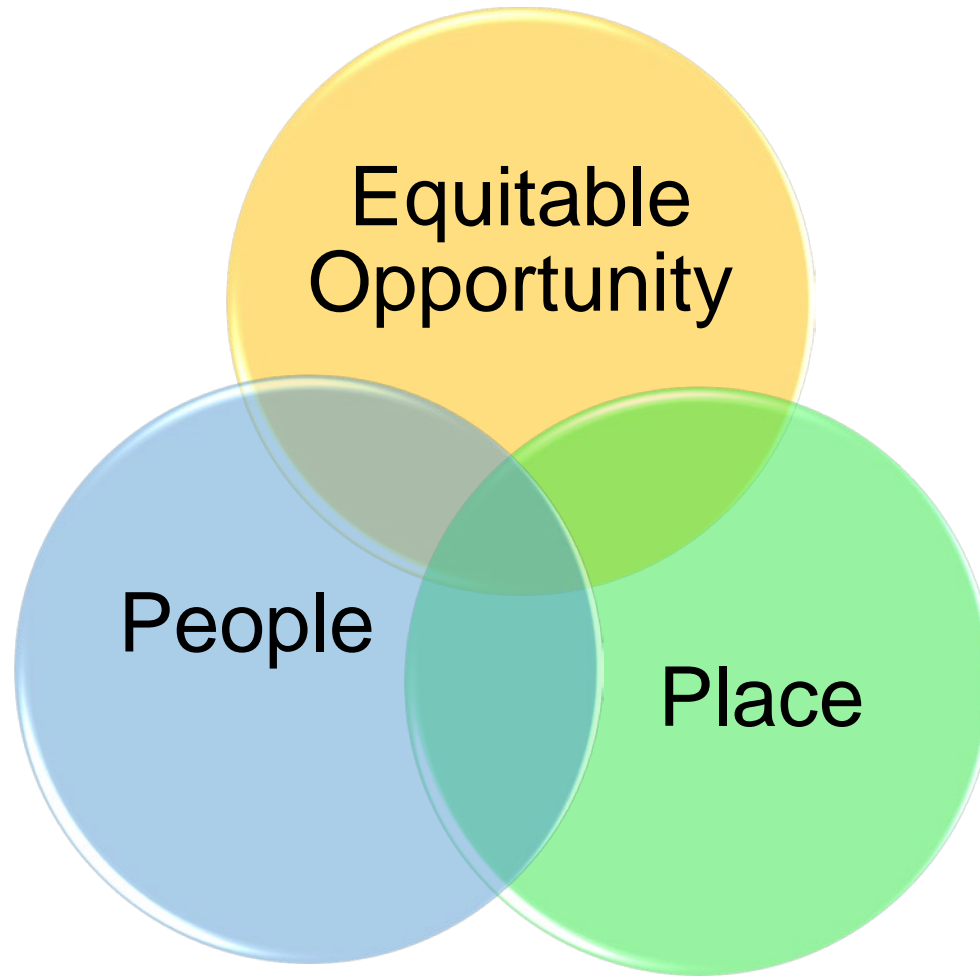


## Prevention Programming in Faith-Based Settings

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# Community Environment Strategies<sub>4</sub>

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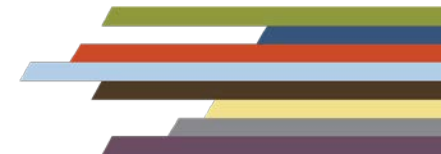
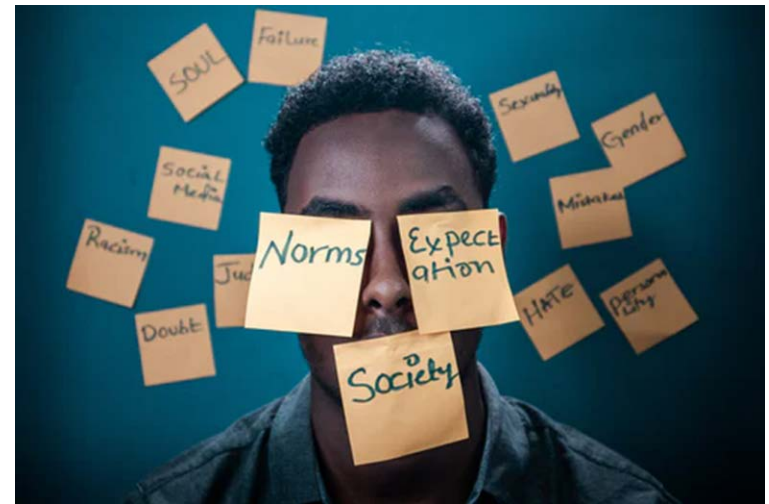


# What the Faith Community Can Do

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## Equitable Opportunity

- Support people to stay on paths to pursue educational and economic opportunities
- Promote economic empowerment/opportunity and workforce development

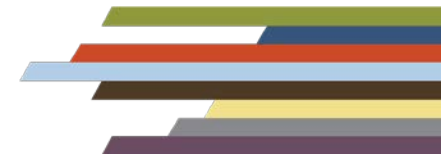


# What the Faith Community Can Do

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## Place

- Improve the quality of the built environment and public spaces and maintain these for the community
- Create safer public spaces through improvements in the built environment through addressing parks, housing quality and transportation
- Reclaim and improve public spaces for the community

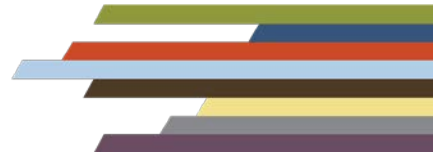


# What the Faith Community Can Do

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## People

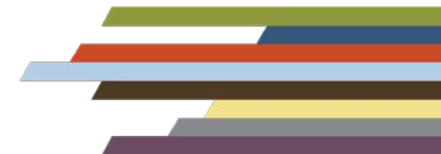
- Rebuild social relationships, particularly intergenerational relations
- Revitalize damaged or broken social networks and infrastructure of social support
- Strengthen and elevate social norms that promote or encourage healthy behaviors, community connection and community oriented positive social norms



# What the Faith Community Can Do

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- Establish collaborations that promote community-level strategies while rebuilding community social networks
- Change the narrative about the community and the people in it
- Provide a voice and element of power for community folks around shifting and changing environmental factors as well as the structural factors
- Promote and restore a connection to, and sense of, cultural identity which has been shown to have a positive impact on mental health outcomes





# How The Faith Community Can Do It

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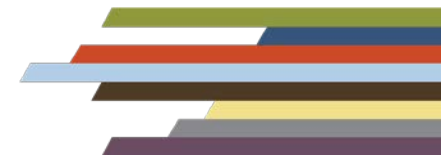
- Provide assistance to congregational members and staff with a substance use disorder
- Help members develop personal guidelines for substance use and nonuse
- Help members understand the spiritual dimension of substance misuse and prevention



# How the Faith Community Can Do It

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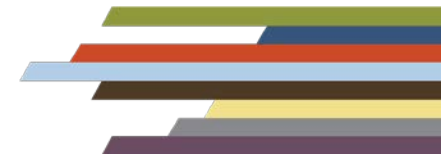
- Work with other community organizations to design and implement community-based prevention efforts
- Develop a framework for integrating prevention within the congregation



# Resources

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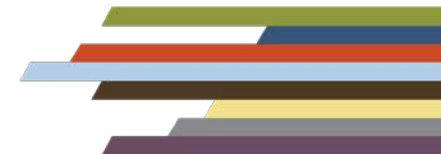
- Mental Health First Aid - the National Council for Mental Wellbeing <https://www.mentalhealthfirstaid.org/>
- B.A.M. BH - (Break the stigma. Ask for help. Make the call) - [www.sherays.com](http://www.sherays.com)
- Faith Partners - [www.faith-partners.org](http://www.faith-partners.org)
- Prevention First - <https://www.prevention-first.org/>
- SAMHSA - <https://www.samhsa.gov/faith-based-initiatives>
- Adverse Community Experiences and Resilience - <https://www.preventioninstitute.org/publications/adverse-community-experiences-and-resilience-framework-addressing-and-preventing>
- PTTC - <https://pttcnetwork.org/centers/great-lakes-pttc/great-lakes-pttc-products-preventing-and-reducing-stigma>



# First Steps

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- Identify why you want to collaborate
  - Have you noted an absence of faith leaders or members in your prevention groups?
- Get the lay of the land
  - What prevention services are available in your state, tribe, jurisdiction, or community through faith-based institutions?
- Establish a relationship
  - Do you have a friend-of-a-friend who is a part of the faith community/organization that you can invite to lunch?



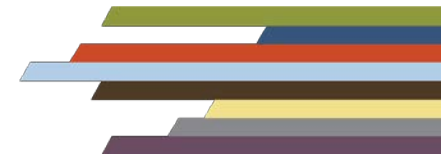
# Questions

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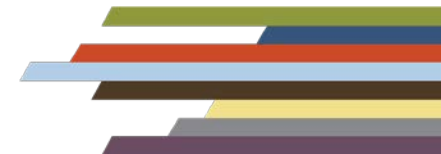
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# References

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1. <https://www.dictionary.com/browse/stigma>
2. <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/reducing-stigma.html#:~:text=Fear%20and%20anxiety%20about%20a,other%20negative%20behaviors%20toward%20others.>
3. (n.d.). *Changing the Conversation*. <https://atforum.com/documents/Natxplan%201.pdf>.
4. Pinderhughes, H., Davis, R., & Williams, M. (2016, February 1). Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma. Prevention Institute. <https://www.preventioninstitute.org/publications/adverse-community-experiences-and-resilience-framework-addressing-and-preventing>



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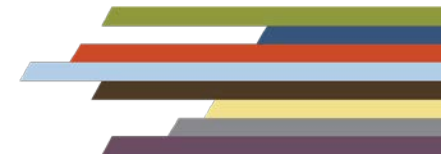
[Check out the PTTC Pandemic Response Resources page](#)



Ask us! Access TA from the PTTC



[Join us on twitter at SSWPTTC6](#)



# Thank You

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For questions:

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