

Addiction as a disease: Mitigating or fuelling stigma?

La adicción como enfermedad: ¿mitigando o alimentando el estigma?

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To the Editor,
The recent editorial by Pascual Mollá and Pascual Pastor (2017) on stigma in the addicted person echoed the nationwide awareness raising project implemented by Socidrogalcohol during 2017 with the aim of reducing the stigmatization of people with addictive disorders. We would like to congratulate both the authors for their timely editorial and Socidrogalcohol for their relevant and necessary initiative (all the more so considering that scientific associations are not normally characterized by particular enthusiasm for public sociopolitical action). Nevertheless, and in connection with both one of the goals of the awareness raising program ("To increase social awareness that addiction is a disease") and one of the statements of the editorial ("In a way, considering the addicted as sick alleviated the problem"; Pascual Mollá & Pascual Pastor, 2017, p.224), we would like to point out that the destigmatizing potential of the addiction-as-disease model is not as self-evident as both editorial and initiative suggest.

A small number of empirical studies have already explored this issue. An Australian survey on attitudes among the general population has shown that conceptualizing addiction as a brain disease is not associated with less stigmatization or less support for involuntary treatment or other punitive approaches to addiction (Meurk, Carter, Partridge, Lucke & Hall, 2014). Similarly, an experimental study conducted by Wiens and Walker (2015) concluded

that strengthening the belief in a brain disease model of addiction not only does not diminish the feelings of stigma and shame in people with a mild-moderate dependence on alcohol, but even negatively affects several of their perceptions of agency regarding drinking behavior (e.g., locus of control, coping style, and levels of self-efficacy for controlled drinking). Likewise, a qualitative study on the implications of conceptualizing nicotine addiction as a brain disease has shown that the majority of smokers interviewed attributed negative connotations to the term disease and considered that the brain disease label increased the stigma and prejudice against smokers (Morphett, Carter, Hall & Gartner, 2017). Some participants even reported that adopting a biomedical model could hinder the search for treatment and discourage possible attempts to quit smoking (Morphett et al., 2017). Finally, a recently published experimental study on general population has shown that attributing the etiology of addiction to genetic causes significantly diminishes (in comparison to attribution to non-genetic causes) the levels of both personal agency and self-control over the addictive behavior, independently of the type of addiction (alcohol or gambling) considered in the study (Lebowitz & Appelbaum, 2017).

The rather more abundant literature linking stigma to the conceptualization of psychiatric diagnoses in biogenetic terms or as brain disease appears to point in the same direction with reasonable consistency (Angermeyer, Holzinger, Carta & Schomerus, 2011; Kvaale, Haslam &

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Gottdiener, 2013). Indeed, from the perspective of the sociology of health and disease, the idea that labeling something as a disease would alleviate the stigma is surprising (Fraser et al., 2017).

In any case, we should remember that the origins of the addiction-as-disease model can be traced back to the beginning of the 17th century (Warner, 1994), and that this model, while dominant among the principal associations and scientific publications in the field of addictions, is not hegemonic among workers in the field (Trujols, Manresa, Batlle, Duran-Sindreu & Pérez de los Cobos, 2016).

These considerations do not diminish the importance and relevance of the aforementioned editorial (Pascual Mollá & Pascual Pastor, 2017) or the need for and relevance of the initiative led by Socidrogalcohol, but seek to draw attention to a specific issue that, rather than modify stigmatizing attitudes towards people with addiction problems, could contribute to promoting beliefs that would perpetuate them.

Conflicts of interest

The authors declare that there are no conflicts of interest directly or indirectly related to the content of this article.

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