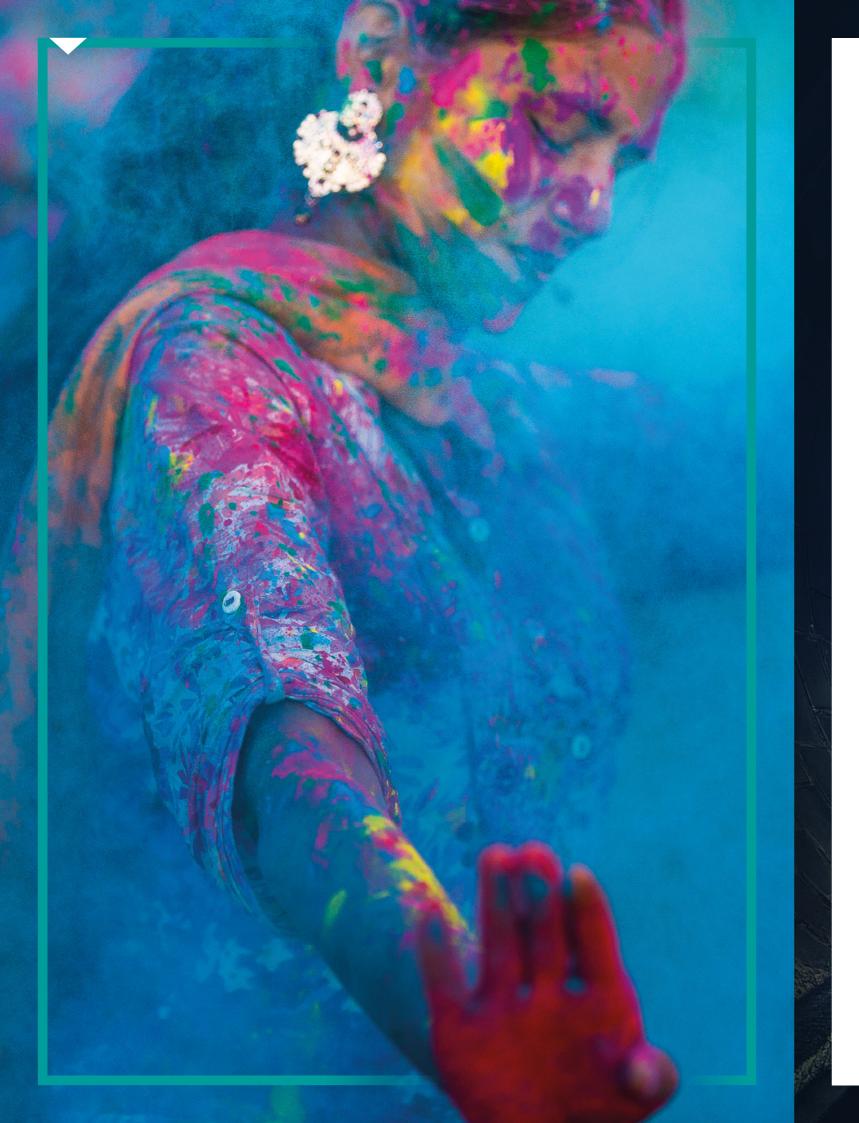
# A Change is Gonna Come

Addiction in Under-served UK Communities

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This document shines a revealing light on how different communities have the troubling issues of addiction



Creating inclusive drug recovery pathways for the black and Asian community





This document shines a revealing light on how different communities have the troubling issues of addiction, specific cultural difficulties in dealing with it and how conventional treatment organisations are not well placed or able to provide effective recovery services. Questions have been asked extensively within these communities, clear conclusions drawn and practical solutions formulated, with the goal of creating 'LEROS' Lived Experience Recovery Organisations as an effective way forward.

The research undertaken has also been linked with the award winning documentary film national screenings of *I'm Jit and I'm an alcoholic*.

The film has allowed opportunities for deep discussions with diverse audiences of both recovering addicts, family, friends and general public who are also all too frequently touched by these issues.

The process has been heartrending, touching and more importantly deeply inspiring, especially seeing how recovery has such a positive influence and benefit across the whole of society in terms of harmony and reduction of ongoing financial and emotional strain.





## Background

Each public engagement event opened with a screening of 'I'm Jit and I'm an alcoholic' which showcases the story of Jit, an Asian male, and his journey from alcohol addiction to human flourishing. This was followed by facilitated discussions centred around five main questions presented below. It is rare to hear from members of the Black and Asian community on these topics. As such the issues presented here are valuable in helping to provide valuable insights and to move the discourse on in relation to next steps for much needed change.



#### **QUESTION 1**

### Reasons why people may not seek help?

The community identified various barriers preventing individuals from seeking help for drug and alcohol addiction. These include societal perceptions, such as being judged or labelled as a bad person due to alcohol consumption. Cultural factors like shame, stigma, and negative beliefs also play a significant role. Language barriers, fear of judgement from both the community and family, and lack of awareness about available services contribute to hesitancy. Additional factors include bad experiences with other services, lack of confidence, and the use of drugs as a coping mechanism. Physical barriers like the distance to services, financial constraints, and digital illiteracy were also highlighted. The overarching theme involves a complex interplay of cultural, systemic, and personal challenges, encompassing education, trust, and systemic racism.

#### **QUESTION 2**

How do we have more conversations within our community to tackle the stigma, shame, and other sensitive concerns that surround drug and alcohol addiction?

The community proposed a multi-faceted approach to address stigma and shame surrounding addiction. Suggestions included workshops and presentations in educational institutions, community education involving various stakeholders, and normalisation of conversations about substance misuse. There is a strong emphasis on cultural awareness, removing fear, and creating culturally sensitive programmes. Personal stories from lived experiences, role models, mental health lessons, and social prescribing were also recommended. The community stressed the need for a comprehensive strategy that spans education, awareness, and open dialogue within various cultural contexts.



#### **QUESTION 3**

#### Is there something missing in current treatment and recovery services? Should there be an alternative?

Participants expressed concerns about the current treatment and recovery services, highlighting gaps such as a lack of diversity amongst staff which leads to a lack of understanding, limited services, and emotional barriers. The need for more representation, both in terms of professionals from ethnic minority groups and people with lived experiences, was emphasised. Grassroots organisations catering to ethnic communities and co-developed services were proposed as alternatives. Challenges like high staff turnover, underpaid and under-educated staff, and a lack of differentiated services were identified. The community called for a more personalised, culturally tailored approach that addresses both mental health and addiction issues.

#### **QUESTION 4**

### Are current services culturally sensitive and appropriate?

The community expressed dissatisfaction with the cultural sensitivity of current services. Issues included a lack of cultural awareness among service providers, a lack of diversity in senior staff, and services being Eurocentric. Participants mentioned feeling excluded and trapped due to shame and stigma within the community. The call for appropriate services included resources to support the work, trauma-informed care, and addressing cases through a cultural lens. The sentiment was that current services are viewed through the lens of colonial patriarchal capitalism, necessitating a shift towards more inclusive and culturally aware practices.

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#### **QUESTION 5**

#### What does an effective service look like for our community and where should it be located?

The community envisioned effective services as inclusive, accessible, and holistic, with 24-hour phone support and resources available in multiple languages. They emphasised the importance of involving families, culturally aware training, and staff with lived experiences. The proposed services should be trauma-informed, anti-racist, and accountable, offering equality of health for all.

Participants highlighted the need for decentralised, open access services, and a compassionate, nonjudgemental workplace. Suggestions included creating frameworks for family support, personal responsibility for growth, and multi-faith rooms in services. Additionally, there was a call for services to operate during holidays and weekends.

The Community suggested a range of additional measures, such as literature in different languages, audio and visual resources, services run by the community, for the community, peer-led organisations, and recovery advocates. Outreach programs, culturally tailored support for families, and services tailored to different communities were also recommended. Overall, the community emphasised the importance of a comprehensive, inclusive, and culturally sensitive approach to address the complexities surrounding drug and alcohol addiction within the BAME community.





## Recommendations

By implementing these recommendations, there is the potential to create a more inclusive, culturally sensitive, and effective approach to addressing drug and alcohol addiction within the BAME community. Continuous collaboration with the community and a commitment to understanding and addressing the unique challenges they face are essential for the success of these recommendations.



### 1 | Cultural Competence Training

Implement mandatory cultural competence training for service providers to enhance their understanding of diverse cultural backgrounds and sensitivities. Foster diversity among all staff including senior staff to ensure a representative and inclusive leadership team.

#### 2 | Lived Experience Integration

Integrate individuals with lived experiences into treatment and recovery services, fostering empathy, understanding, and relatability. Develop support programs led by peers who have successfully overcome addiction, serving as role models for those currently struggling.

### 3 | Community Education and Awareness

Conduct workshops, presentations, and educational programs in schools, colleges, and universities to raise awareness about addiction, reduce stigma, and promote early intervention. Collaborate with religious institutions and community leaders to facilitate open conversations about drug and alcohol addiction.

#### 4 | Tailored Services

Establish grassroots organisations and specialised services catering specifically to the needs of ethnic minority groups, ensuring cultural sensitivity and relevance. Address the under representation of women in addiction services by developing targeted programs and support systems.

#### 5 | Language Accessibility:

Provide resources, information, and support in multiple languages to overcome language barriers. Ensure that services are equipped to communicate effectively with individuals who may not be proficient in the dominant language.



### 6 | Address Systemic Barriers

Advocate for policies that address systemic issues such as institutional racism, financial barriers, and discriminatory practices within the healthcare system. Collaborate with local leaders to create a supportive environment for individuals seeking help, including financial and transportation assistance.

### 7 | Holistic Approach to Treatment

Implement a holistic approach to addiction treatment that addresses mental health issues, trauma, and the social determinants of health. Offer services that are trauma-informed, anti-racist, and consider the intersectionality of factors affecting individuals.

### 8 | Community Engagement and Empowerment

Empower communities by involving them in the design and implementation of addiction services. Establish community-led outreach programs, ensuring that the community actively participates in shaping solutions.

#### 9 | Open Communication Channels

Improve communication channels between service providers and the community to foster trust and understanding. Utilise various platforms, including social media, to disseminate information, share success stories, and provide support.

#### 10 Accessible and Inclusive Services

Ensure services are geographically accessible, with consideration for transportation and financial barriers. Establish services that operate during holidays and weekends to accommodate diverse schedules and needs.

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### **11** | Support for Families

Develop frameworks to support family members dealing with addiction issues, including education and resources for early intervention. Recognise the impact of addiction on families and provide comprehensive support services.

### 12 | Policy Advocacy

Advocate for increased funding for addiction services, emphasising the importance of differentiated and culturally tailored care. Lobby for policy changes that prioritise mental health and addiction issues within ethnic minority communities.



#ImJit



## More on the Film

The film maker and director Derek Roberts has family members seriously affected by these issues, so making a film with Jit was close to his heart and he has a deep understanding of what living with addiction can produce for others too.

"I have dealt with a daughter with crack and heroine addiction, helping *my young granddaughter to separate* from the situation and relocate through the courts under special guardianship. together with all the knock on effects that entails.

I have also worked for over two decades extensively within the Asian community in Leicester and understand the necessity for different cultural consideration in highlighting addiction problems and solutions, so it has been a privilege to help fit on his journey to help tell his and others' stories."

Derek



## Jit in his own words:

#### Why I made this film.

Why did I make this film, there were many factors but the main one being...'HOPE'. Hope in that it would help others to see how life can change for the better from this crumbling illness. I personally struggled with alcohol addiction for many years, over 20 years. My addiction not only impacted me mentally and physically, it had also impacted my work and the people around me.

Equally, my close friends and family had all suffered too. My parents had to go through a living nightmare, daily agony of hurt and helplessness. My addiction and its challenges had a deep impact on their health, well-being and social life. Which parent wants to see their eldest son go through this?

The worst thing is they had no solution. The community and those around would stigmatise me and them. Laugh at us. My family would not know where to get help as the subject was not spoken about openly without judgement, services were not accessible to them and people did not look like them to ask for help. One day, I made the decision and vowed that no other parent should suffer in silence like mine did.



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#### What did the film intend to do and what did it achieve?

With the film, so many factors came into consideration. We wanted to break down the stigma, highlight the despair the families and those around go through, showing the community we can talk openly about it, those in active addiction - giving them hope and inspiration in looking for help, and taking the film out into the wider community through relationships I had built to get the conversation started.

We had taken the film to numerous places:

- · World of Academia College and universities -General screening and QA and part of the MSC international Social Science course.
- Places of worship; Local Sikh Gurudwara attended by local MP and then High Sheriff, Claudia Webbe. A well-attended and full space with great conversations. This featured on BBC news.
- UK Asian Film Festival 'I'm Jit and I'm an alcoholic' selected to be part of the film festival in 2023. The screening was sold out and packed a full house at the Phoenix Cinema. Zoom Screenings we had reached over a 1,000 people.

I got introduced by Jerome C, to Sohan Sahota from BAC-IN in September 2021 and that also had an impact on me and of the work we did in the community. I had heard that Sohan was someone who was doing all the right things in Notts in the minority communities and this inspired and pushed us to do more in Leicester. It highlighted to me, through what Sohan was doing, the general conversations we had with people at the screenings or generally, that we needed something similar in Leicester.

https://www.bac-in.org/

We went to several events and conferences with BAC-IN to network, learn more about recovery services and also to raise the profile of my film;

We:

- Were invited to the book launch for 'Shades of Recovery' - A Culturally Inspired Approach To Addiction Treatment And Recovery.
- Attended the DDN conferences in 2022 & 2023.
- Attended the Ideas conference hosted by Project 6 in Sheffield #ImJit was featured in numerous articles, blogs and podcasts including: The Native Immigrant, Jamila's Legacy *https://jamilaslegacy.co.uk* and the Alcohol Health Alliance blog.
- · Participated at events and other platforms featured on <u>www.7events.org/ImJit</u>

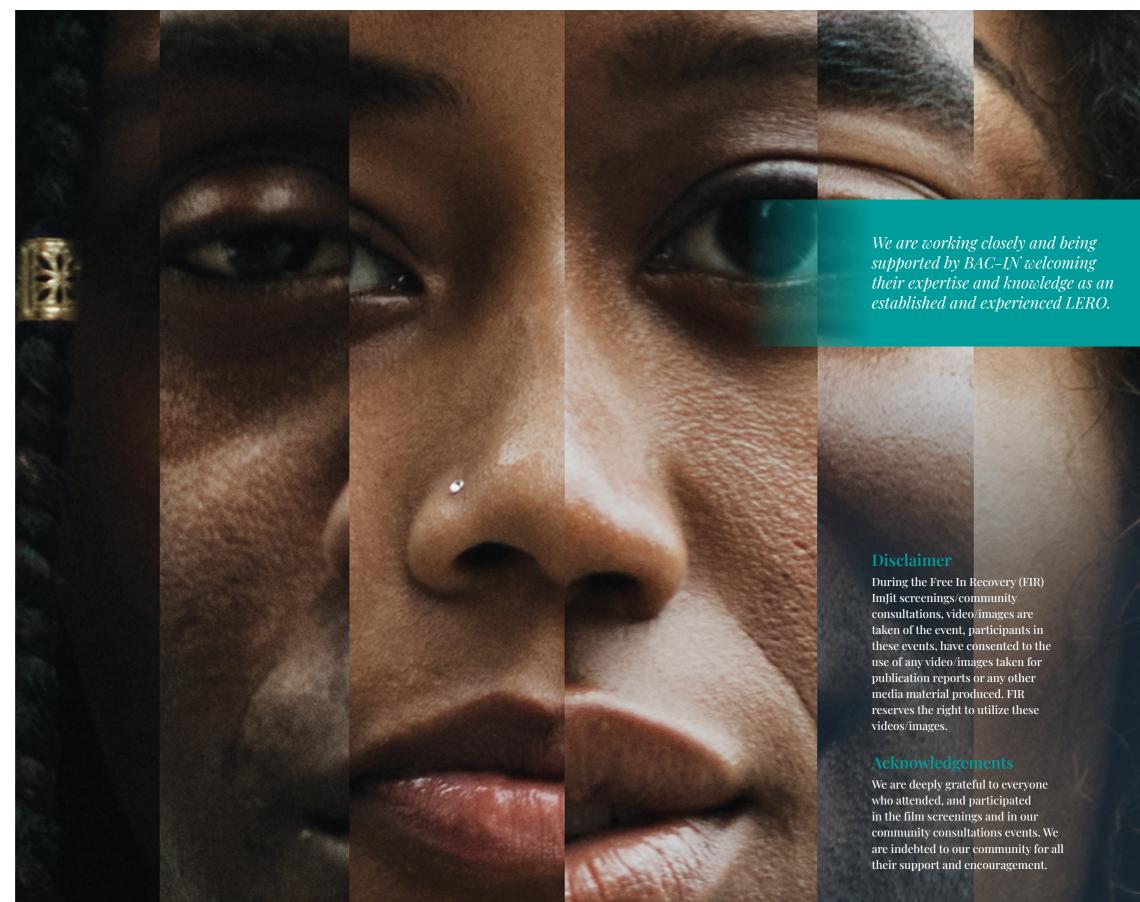
### What I want to do in the future

We have had numerous conversations with the Substance Misuse Commissioners in Leicester supported by BAC-IN and were invited to the LCC Alcohol Strategy launch and subsequent meetings. We want to be part of the future conversations around what is needed in Leicester and be part of the lived experience recovery offer here for our communities.

We have set up a LERO (Free in Recovery CIC) which is culturally sensitive to help the ethnic minority communities. We are working closely and being supported by BAC-IN welcoming their expertise and knowledge as an established and experienced LERO.

We have also set up the first Indian speaking AA (Alcoholics Anonymous) meeting in Leicester which runs every Tuesday evening.

I hope we can get the support and funding needed to keep moving ahead with this important agenda.



### A Change is Gonna Come

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#freeinrecovery











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