

## Beliefs About Addiction Among People in Treatment, and Alcohol and Other Drug Professionals.

Robyn Dwyer, Craig Fry

Centre for Cultural Diversity and Wellbeing, College of Arts, Victoria University, Melbourne, Victoria, Australia

Presenter's email address: [Robyn.Dwyer@vu.edu.au](mailto:Robyn.Dwyer@vu.edu.au)

**Introduction and aims:** Debate continues on the impacts of addiction on capacities for self-control, choice and responsibility. This paper presents findings on the beliefs about addiction held by people in treatment for heroin or alcohol dependence, in particular, beliefs about capacities for control and responsibility.

**Design and methods:** Structured questionnaire administered to people in treatment for alcohol (n=23) or heroin (n=39), and a comparison group of AOD professionals (n=30). Addiction beliefs were determined by the *Addiction Beliefs Inventory* - 30 statements pertaining to eight subscales (Table 1), measured on a 5-point Likert scale with higher scores indicating agreement.

**Results:** Treatment groups agreed with the Inability to Control use subscale while AOD professionals disagreed. All groups agreed with the Responsibility for Actions subscale. The Responsibility for Recovery subscale received the highest endorsement from all groups (means >4) while all groups tended to disagree with the Genetic Basis and Moral Weakness subscales (means <=3). On several of the subscales, means for the treatment groups ranged between 3.22 and 3.66 indicating many participants neither agreed nor disagreed with the statements. **Discussion and Conclusions:** Substance dependent people and AOD professionals simultaneously endorse multiple models of addiction and hold diverse beliefs about the impacts of addiction on control and responsibility. These groups recognise uncertainty and complexity around the impacts of addiction.

**Implications for Practice or Policy:** Recognition of the complexities of addiction can help to critique the normative assumptions underlying contemporary models of addiction and has potential application in treatment design and conduct, wider health and welfare service delivery, and policy making.

### Table 1. Addiction Beliefs Inventory subscales (Luke et al., 2002)

- |                                      |                                       |
|--------------------------------------|---------------------------------------|
| 1. <i>Inability to Control use</i>   | 5. <i>Responsibility for Recovery</i> |
| 2. <i>Chronic Disease</i>            | 6. <i>Genetic Basis</i>               |
| 3. <i>Reliance on Experts</i>        | 7. <i>Coping mechanism</i>            |
| 4. <i>Responsibility for Actions</i> | 8. <i>Moral Weakness</i>              |

### Reference

1. Luke DA, Ribisi KM, Walton MA, Davidson WS. Assessing the diversity of personal beliefs about addiction: development of the addiction belief inventory. *Subst Use Misuse* 2002;37:89–120.