

# STIGMA ASSOCIATED WITH OUD

FACT SHEET - APRIL 2019

RURAL COMMUNITIES  
OPIOID RESPONSE  
PROGRAM FOR  
EAST TENNESSEE  
CONSORTIUM



## SEVERITY

Like other substance use disorders, Opioid Use Disorder (OUD) and medically-assisted treatment (MAT) of OUD is highly stigmatized, or worthy of strong disapproval. OUD is often treated as a moral failure rather than a health concern.<sup>1</sup> Stigma may limit availability of services and the number of people seeking services.<sup>1, 2</sup>

## RIPPLE EFFECT

Reducing OUD stigma could:<sup>1</sup>

- Reduce health risks associated with needle sharing (blood-borne pathogens)
- Improve mental health
- Improve completion of treatment
- Reduce overdoses

## FEASIBILITY

Medical providers can:

- Use nonjudgmental, appropriate language to describe OUD<sup>2</sup> and talk with patients diagnosed with OUD and their family members
- Encourage and/or provide medically assisted treatment or MAT<sup>2</sup>

Community members can:

- Be trained in antagonist use (i.e. naloxone)

Persons with OUD can:

- Participate in self-stigma interventions<sup>1</sup>

RCORP-ETC members can:

- Improve public attitudes by developing and implementing educational programs for primary care providers and local community members that include scientific information on addiction and recovery success stories<sup>1</sup>

Policy-makers can:

- Promote comprehensive health services and expand access to effective MAT treatment in the criminal justice system<sup>2</sup>

## COMMUNITY VIEW

Of the 710 people who answered the community survey in the 10 county region, 10% reported experiencing OUD now or in the past. Over half reported someone close to them experienced OUD.

The community survey included 8 questions about stigma. The 8 answers were added together to create a scale score to measure perceived levels of community OUD stigma. The scale scores ranged from 14 to 40, and the average was 29.3, and scores were not different by county. People with personal OUD experience reported a significantly higher mean levels of perceived stigma compared to people without a personal OUD experience. No differences were found between people who did or did not have someone close to them with OUD experience.

When asked to indicate the top three challenges related to OUD in their community, some survey respondents selected issues related to stigma:

- Community disapproval of OUD (4.1%)
- Little community knowledge about addiction (13%)
- Poor opinion of people with OUD who seek help (10%)
- Negative perceptions of OUD treatment (7%)
- Poor perception of MAT of OUD (5.6%)

Of the 710 people who answered the community survey in the 10 county region, 10% reported In guided discussions, RCORP-ETC members and their invited colleagues shared that OUD is often hidden by families; they are aware of the associated stigma and fear that disclosure may lead to state intervention, such as child protection intervention.

RCORP-ETC members also shared that OUD-related stigma challenged the collaboration between public health and medical services.

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### References

1. Livingston JD, Milne T, Fang ML, Amari E. The effectiveness of interventions for reducing stigma related to substance use disorders: a systematic review. *Addiction*. 2012;107(1):39-50.
2. Olsen Y, Sharfstein JM. Confronting the stigma of opioid use disorder—and its treatment. *Jama*. 2014;311(14):1393-1394.