Measuring opioid agonist treatment stigma and its effects

Theresa Caruana An exploration of pharmacist attitudes and consumer treatment outcomes

Image modified from a Wannapik design (Creative Commons)

Background

Opioid agonist treatment (OAT) consumers can experience stigma when collecting and consuming their medications at community pharmacies.

I sought to evaluate if pharmacist attitudes and behaviours towards opioid agonist treatment customers influenced consumer perceptions and experiences of treatment effectiveness.

Methods

Community pharmacists from New South Wales (Australia) were recruited in person, and they assisted in recruiting consumers by distributing study flyers.

Surveys were completed by pharmacists (n = 63) and pharmacy opioid agonist treatment consumers completed baseline (n = 132) and 6-month follow up surveys (n = 112) from February 2021 to February 2023.

Consumer outcomes were analysed at both timepoints with reference to their pharmacist's responses (including implicit and explicit stigma measures), their experiences of stigma, and demographic variables.

Results

Pharmacists reported low levels of explicit stigma towards consumers and high levels of support for the treatment model overall, possibly indicating participant selection and social desirability biases.

The small number of complete pharmacist implicit attitude measures that could be matched with two or three of their opioid agonist consumers (n = 40) precluded finding any meaningful relationships between this and consumer experiences. However, more positive pharmacist explicit attitudes aligned with improved consumer Substance Use Recovery Evaluator scores over time ($ß$ = 1.89, t = 3.18, p = .003), after controlling for baseline scores ($ß$ = 0.78, t = 6.76, p <.001).

Although consumers experienced substantial levels of stigma and other hardships due to their medication they did not report any significant changes in wellbeing or service experiences over time, which reflects the stable and enduring nature of treatment.

Conclusions

Health provider stigma is understood to be an important contributor to opioid agonist treatment dissatisfaction, but its forms and effects on consumer wellbeing can be difficult to measure and evaluate.

Stigma experienced by opioid agonist consumers in the pharmacy treatment setting may be less influential than other sources of social exclusion and discrimination in their lives.

Findings

Recruitment & demographics	n	(%)
Pharmacies visited	440	
Provided OAT	310	(70.4)
Pharmacists		
Completed survey	63	(20.3)
Gender		
Male	38	(60.3)
Female	25	(39.7)
Area		
City	32	(23.4)
Inner suburbs	38	(36.5)
Outer suburbs	39	(22.2)
Rural	23	(15.9)
OAT customers per week		
≤ 4	4	(6.3)
5-10	11	(17.5)
11-20	19	(30.2)
21-30	11	(17.5)
31-40	8	(12.7)
41-50	6	(9.5)
> 50	4	(6.3)
Other harm reduction services		
Injecting equipment	28	(44.4)
Takehome naloxone	39	(61.9)
Time as OAT pharmacist		
< 1 year	4	(6.3)
1-2 years	4	(6.3)
3-5 years	13	(20.6)
6-10 years	13	(20.6)
11-20 years	22	(34.9)
> 20 years	7	(11.1)
Consumers		
Completed first cycle survey	132	
Gender		
Male	79	(59.8)
Female	52	(40.2)
Area		
City	32	(24.2)
Inner suburbs	38	(28.8)
Outer suburbs	39	(23.5)
Rural	23	(15.9)
Type of OAT		
Methadone	103	(78.0)
Biodone	12	(9.1)
Suboxone	12	(9.1)
Subutex	5	(3.8)
OAT pharmacy visit frequency		
≥ 4 per week	21	(15.9)
2-3 per week	76	(57.6)
1 per week	30	(22.7)
1 per month	4	(3.0)
Accessed OAT at pharmacy		
≤ 1 month	2	(1.5)
2-5 months	21	(15.9)
6-11 months	5	(3.8)
1-2 years	26	(19.7)
3-5 years	30	(22.7)
6-10 years	37	(20.4)
11-20 years	4	(12.9)
> 20 years	4	(3.0)
Treatment goals (1 or more)		
Better quality of life	60	(45.5)
Prevent withdrawal	44	(33.3)
Reduce health risks	39	(29.5)
Manage pain	37	(28.0)
Avoid legal problems	24	(18.2)
Gain/maintain employment	21	(15.9)
Improve relationships	18	(13.6)
Other	51	(39.4)
Responded to second cycle survey (6 months later)	112	(84.8)
Eligible & completed second cycle survey	98	(74.2)

* pharmacists with completed attitude measures

### Pharmacy OAT consumer treatment experiences & outcomes over time, by length of time in treatment
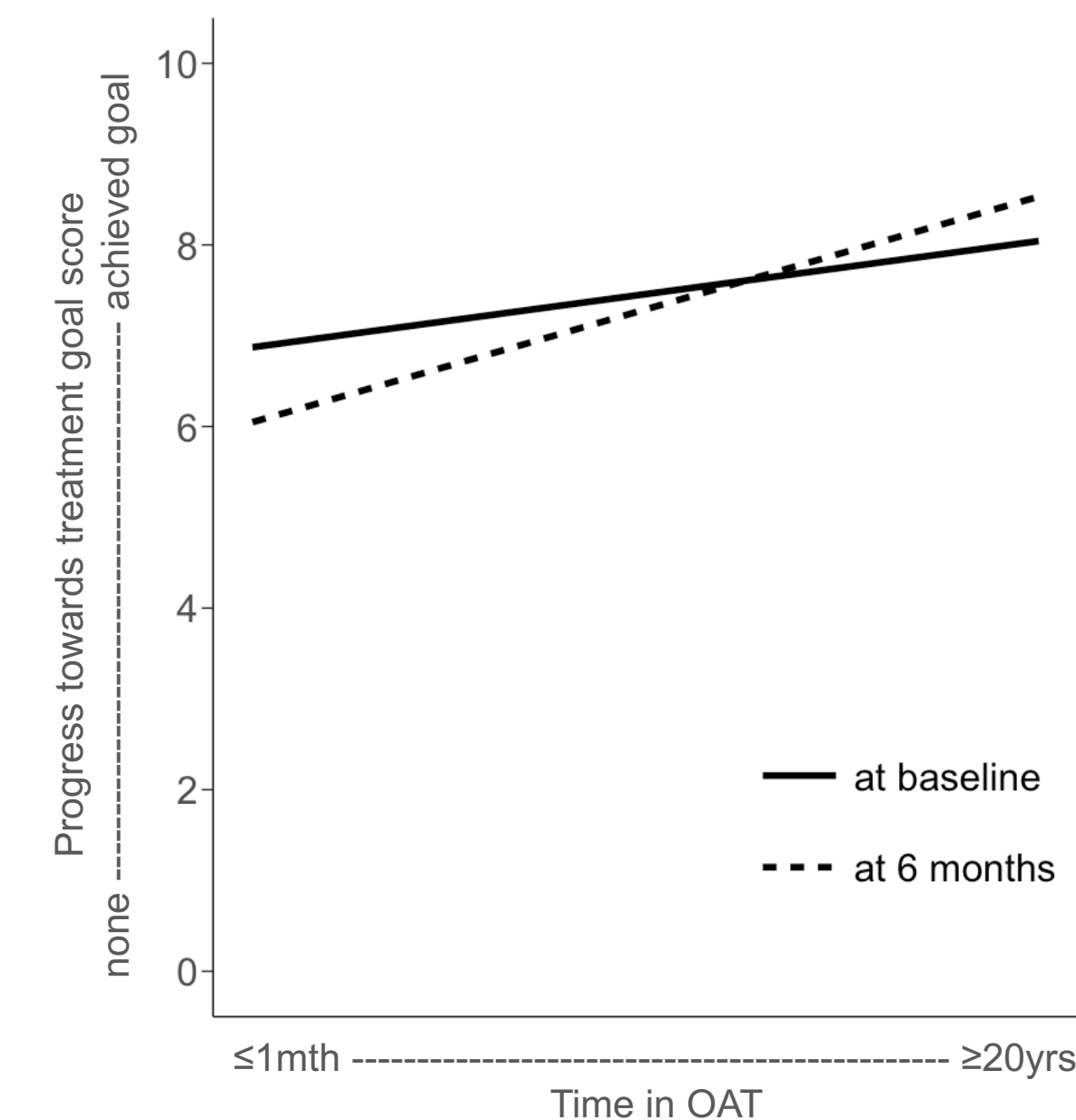
Self-reported progress towards treatment goals (single score, 0-10) improved slightly over time for people who had been in treatment longer.

For those in treatment for shorter periods, progress towards treatment goals was slightly reduced at the 6-month follow up period.
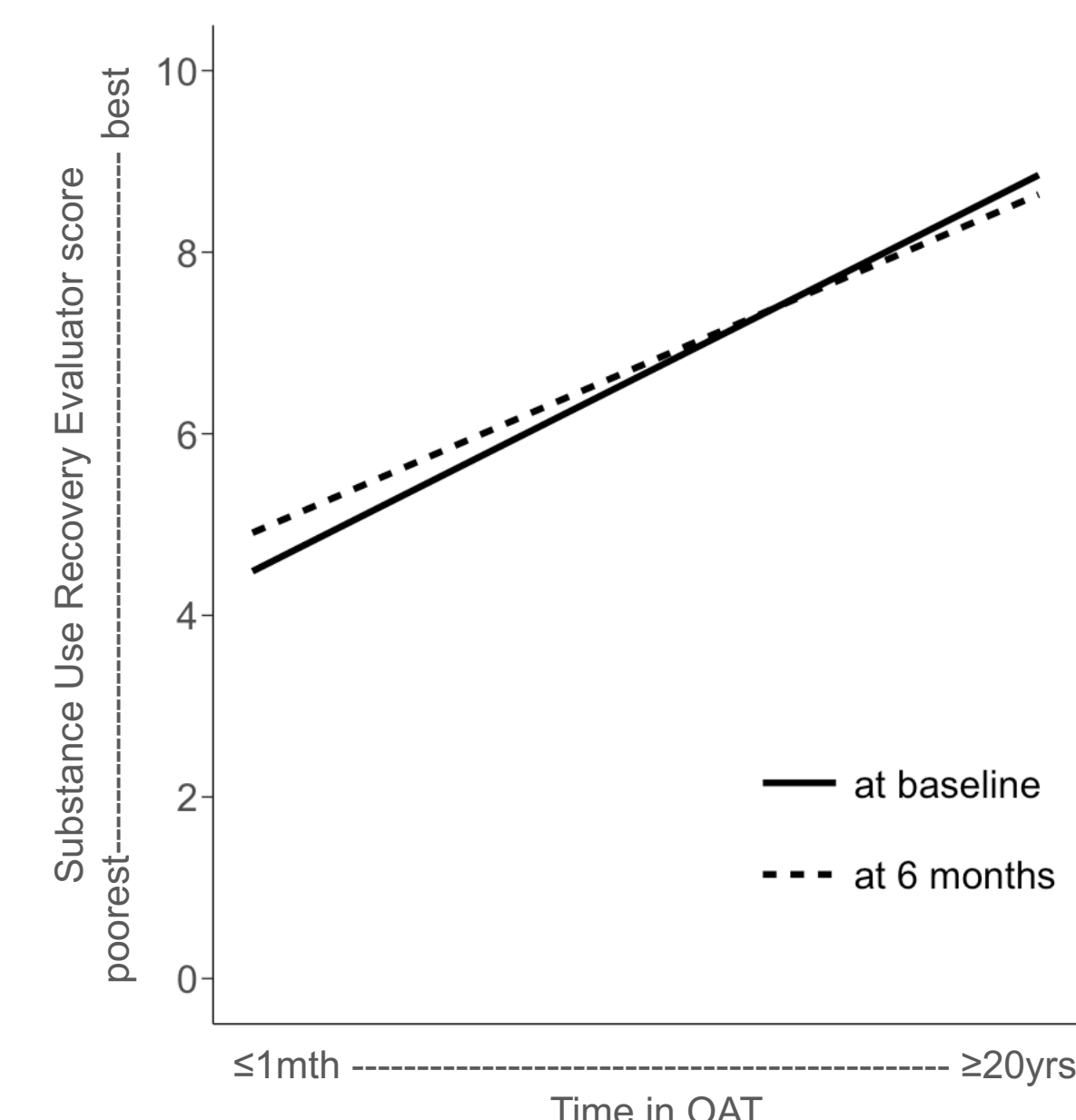

Self-reported Substance Use Recovery Evaluator (6-item scale, score 0-24) scores were higher at both timepoints for people who had been in treatment for longer, indicating perceptions of better living conditions and efforts towards improving their health and wellbeing.
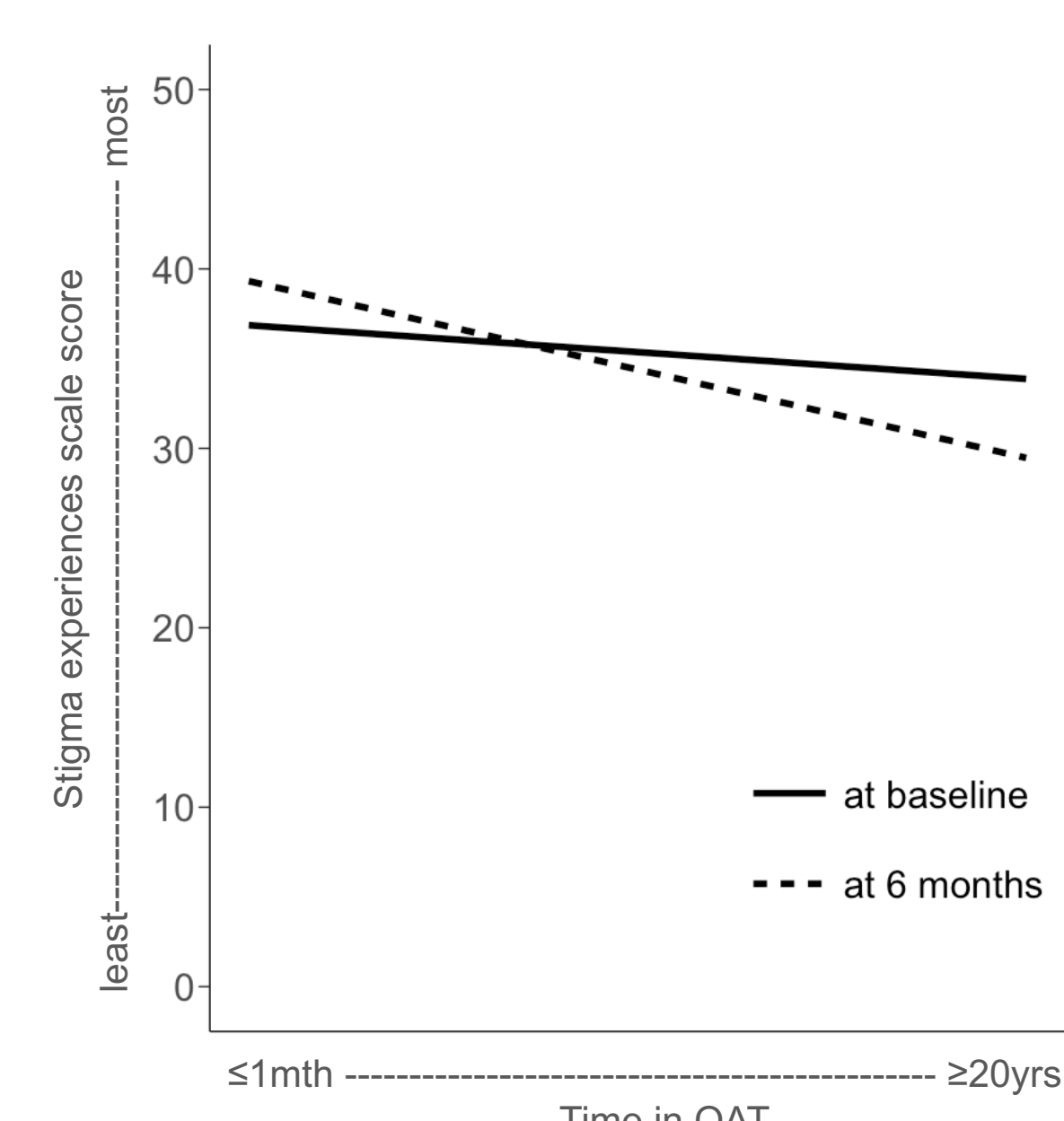
Self-reported experiences of stigma (10-item scale, score 10-50) were slightly reduced over time for people who had been in treatment longer.

For those in treatment for shorter periods, experiences of stigma were slightly increased at the 6-month follow up period.

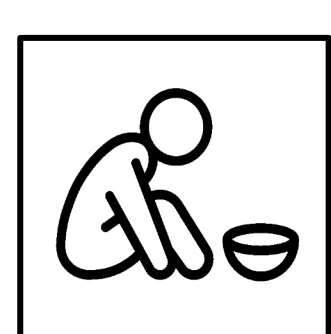### Consumer experiences of discrimination & criminalisation
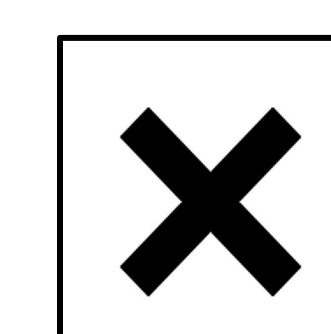
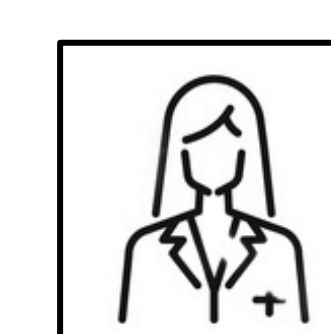82.6% had experienced discrimination in their lives

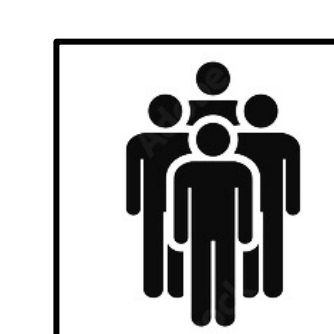75.0% had experienced discrimination for drug use

34.8% had experienced discrimination for mental illness

28.0% had experienced discrimination for poverty or homelessness

10.6% had experienced discrimination from pharmacy staff

18.9% had experienced discrimination from pharmacy customers

68.9% had been arrested or charged for drug use

64.4% had been to prison

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