OPIOID-USE RELATED STIGMA: FROM PRE-HEALTH AND HEALTH STUDENTS' PERSPECTIVES

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ABSTRACT

Pre-health and health students completed a brief survey assessing their stigma towards people that use opioids. The majority of the participants had been educated on drugs and/or public policy and had prior close interaction with people who used opioids. However, many participants wished to keep a social distance from this population when in a close, personal setting. This study can guide educational initiatives to ensure that the future healthcare workforce treats all patients equally and compassionately.

EXECUTIVE SUMMARY

With almost 70,000 opioid-related deaths in 2021¹, the opioid epidemic is an ongoing public health emergency in the United States. Negative stigmas surrounding people who use substances are a significant barrier to improving access to treatment. Moreover, studies have shown that healthcare professionals hold stigmatizing views on people who use substances^{2,3}.

A key finding of this study is the participants' desired level of social distance from people who use substances. Social distance is the desire to refrain from close interactions with people who have stigmatized identities⁴. Hypothetically, the more a person is willing to participate in close interactions with marginalized people, the less stigma they attribute to that identity⁵. Previous studies showed that laypeople have the strongest preference to keep a social distance from those who use substances than those with mental illnesses or physical disabilities^{6,7}.

In the present study, pre-health and health students reported desiring high levels of social distance in certain social situations. Due to the stigmas surrounding these disorders among future healthcare professionals, this study will help guide future research and educational initiatives to ensure that the healthcare workforce treats all patients equally and compassionately.

METHODOLOGY

Pre-health and health students at a large, private northeast university in the United States were asked to complete a brief survey. The survey was administered via Qualtrics, LLC Research Suite and intended to assess the stigma related to people with substance use disorders (SUDs).

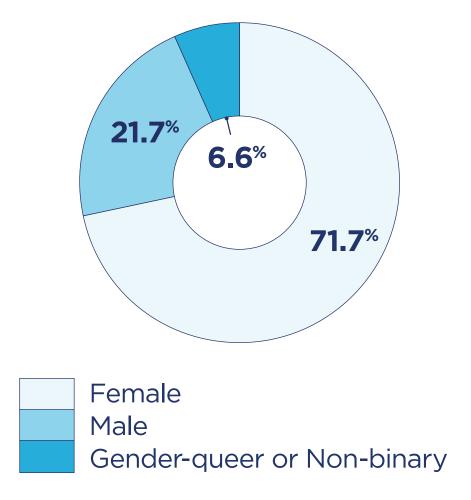
For this study, substance use-related social stigma was conceptualized in different ways:

1) dangerousness, 2) blame, 3) social distance, 4) fatalism, 5) policy items, 6) discrimination,
7) typical drug-user beliefs, and 8) naloxone. However, this poster will only focus on social distance.

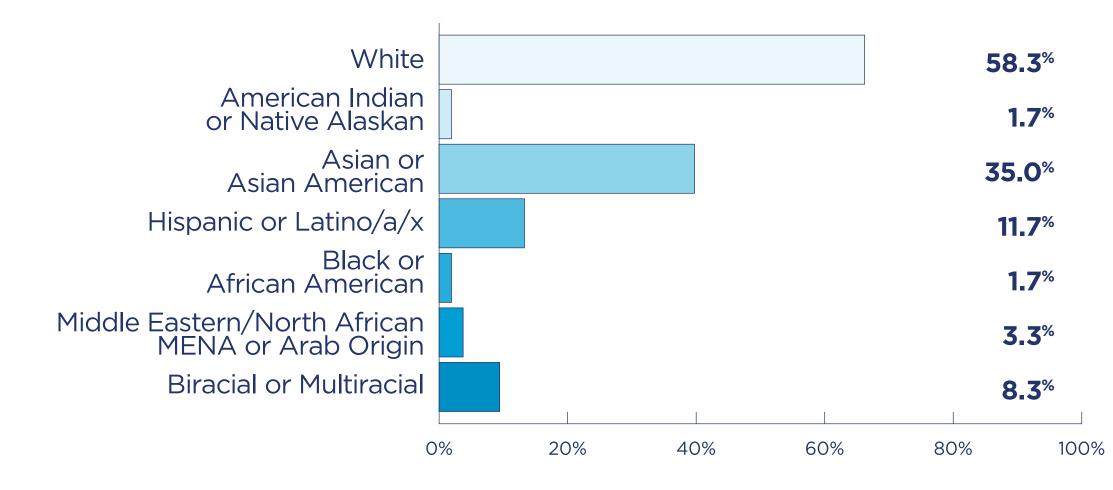
Descriptive statistics and data analysis were employed to assess the frequency of correlations between demographic data and perceptions of stigma on SUDs.

Respondents

63 undergraduate and graduate students.



Graph 1: Gender



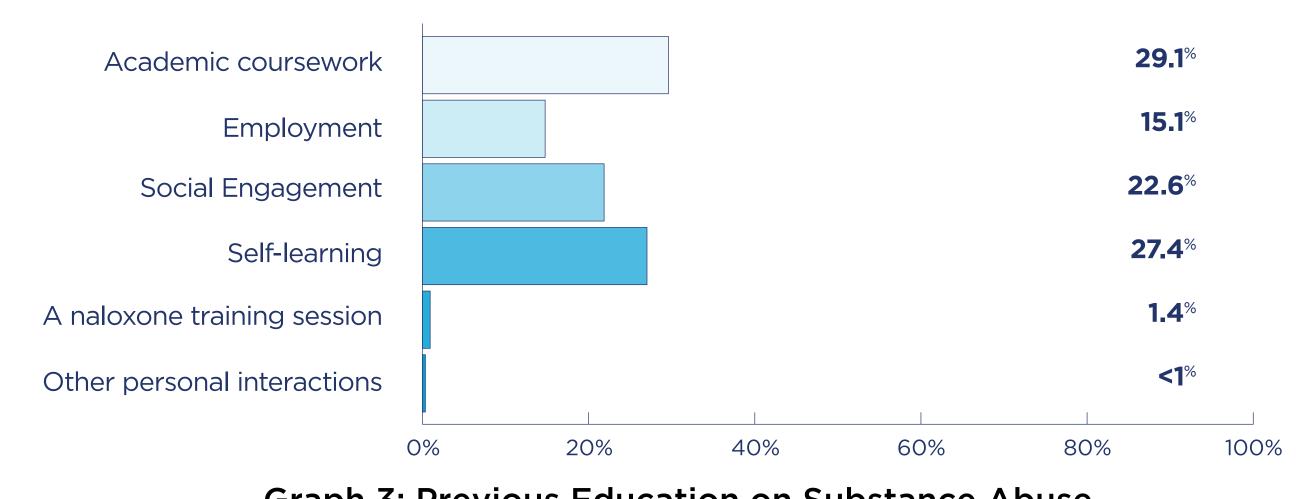
Graph 2: Race - Select ALL that apply

RESULTS

Key Findings

Education

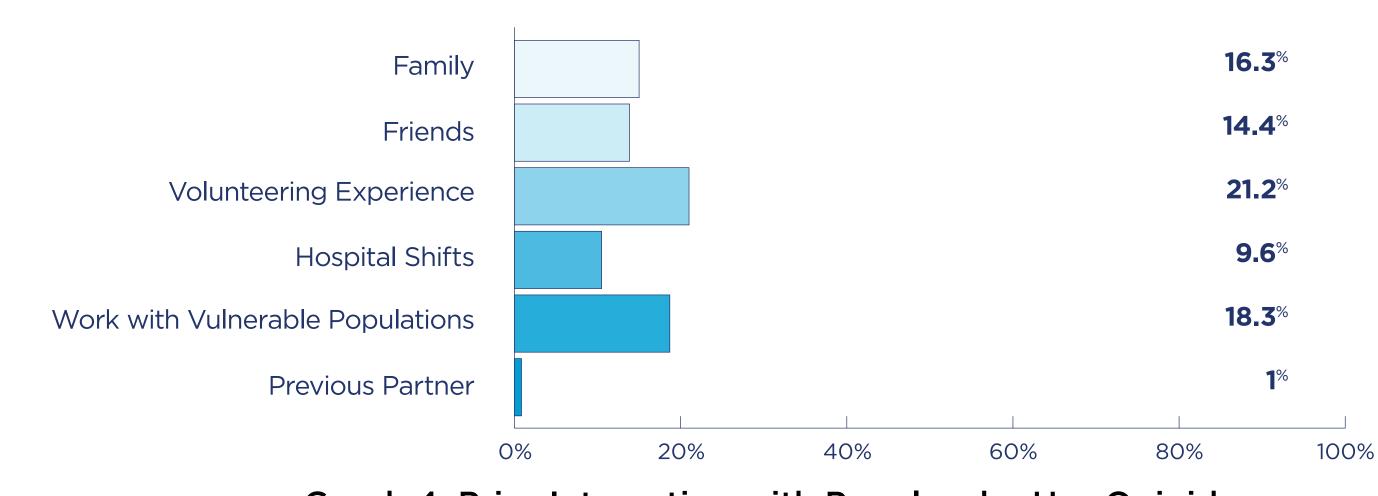
The majority of participants (95.9%) said they had been educated on drugs and/or public policy.



Graph 3: Previous Education on Substance Abuse

Have you been educated on drugs and/or public policy? (Select ALL that apply)

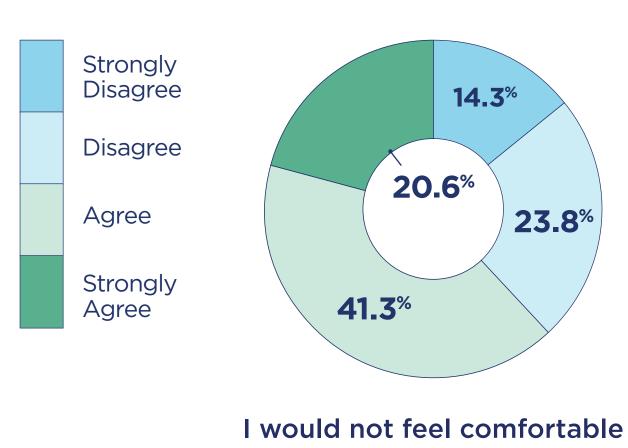
Additionally, 79.8% had prior close interaction with people who used opioids

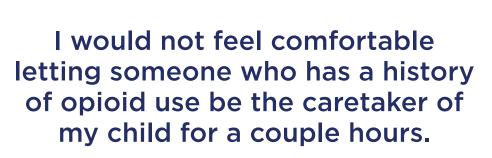


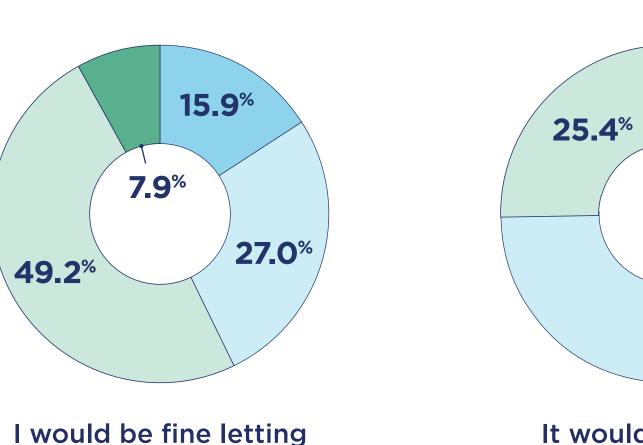
Graph 4: Prior Interaction with People who Use Opioids

Social Distance

Almost half of the participants expressed a desire to avoid certain social situations with a person who had a history of opioid use.







It would bother me to live near a person who used opioids.

31.7%

42.9%

CONCLUSIONS

In the present study, high levels of social distance were observed in certain social situations, such as marrying into the family or babysitting a child for a few hours. As participants only expressed a desire to keep a social distance in some cases but not in others (i.e., being a colleague or a neighbor), this preference appears to be a mental threshold.

Even though most participants had received education on substances and had past interactions with people who use them, the results show a clear threshold for how much they were willing to interact with those who use opioids.

Notably, the majority (44.4%) of participants that were opposed to letting someone with a history of opioid use marry into one's family identified as Asian. While research on the incidence of substance use disorders among Asian Americans is significantly limited, several studies have shown that Asian Americans are more likely to have persistent SUDs, often due to an increased reluctance to seek out treatment⁸. Moreover, because substance use is highly stigmatized among this community, Asian Americans may face increased levels of shame within their family if they engage in substance use⁸.

The results highlight a gap in the current educational curriculum for the future healthcare workforce: although they are educated, health students still hold stigmatizing views that could bar them from providing equitable and compassionate care.

The gaps identified by this study point to specific areas where additional training or curriculum development is needed.

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