

Abstract

Destigmatizing opioid harm reduction interventions: Curricula for tribal and non-tribal addiction treatment professionals and lay communities in rural Utah

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From 2013-2015, Utah ranked seventh in the nation for drug overdose deaths, the majority of which were opioid-related. Several rural Utah counties had overdose mortality rates more than twice the state average. A large body of research shows harm reduction interventions, such as medication-assisted treatment and safe injection facilities, reduce overdose and other risks. Despite scientific support for harm reduction, significant stigma exists toward harm reduction interventions among the general public, as well as health professionals, and even addiction treatment professionals in the U.S. Such stigma can deter people with opioid use disorders from accessing harm reduction programs, promote discrimination by abstinence treatment programs toward patients using harm reduction interventions, and limit public support for legalizing and funding life-saving harm reduction interventions. This stigma is driven in part by inadequate exposure to the evidence base for harm reduction interventions. To address stigma toward harm reduction in Utah, we created novel educational curricula that both explain the scientific research on harm reduction effectiveness and integrate evidence-based strategies for reducing stigma toward behavioral health conditions. We partnered with a rural community advisory board and members of the Ute tribe to create culturally centered curricula tailored to key populations: health volunteers, tribal and non-tribal addiction treatment professionals, and rural tribal and non-tribal members of the public. We anticipate pre- and post-tests will show the curricula significantly reduced stigma towards effective harm reduction interventions for opioid use disorders, which is a crucial step in addressing opioid overdose mortality in rural Utah.

Administer health education strategies, interventions and programs Planning of health education strategies, interventions, and programs Public health or related education Social and behavioral sciences

