

## **“We didn’t cause the opioid epidemic”: The experiences of Australians prescribed opioids for chronic non-cancer pain at a time of increasing restrictions.**

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**Introduction:** Many countries have implemented strategies to reduce opioid-related harms, including policies and prescribing restrictions. This study aimed to explore the lived experiences of Australians prescribed opioids for chronic non-cancer pain (CNCP) in the context of increasing restrictions for accessing opioids.

**Methods:** Semi-structured telephone interviews were conducted with 14 Australian adults (aged 24-65-years; 10 female/4 male) self-reporting regular use of prescribed opioids for CNCP. Participants were asked to describe their experiences using prescribed opioids to manage CNCP, as well as about perceived and actual changes in pain management including access to treatments. Using reflexive thematic analysis, four dominant themes were identified.

**Key Findings:** In *‘On them for a reason’: Opioids as a last resort*, participants described the role of opioids as an important tool for pain management following unsuccessful treatment using other strategies. In *‘You’re problematic’: Deepening stigma*, participants described how increased attention and restrictions led to increasing stigma of opioid use and CNCP. In *‘We didn’t cause the opioid epidemic’: Perceiving and redirecting blame*, participants described feeling unfairly blamed for public health problems and an ‘opioid epidemic’ they described as ‘imported’ from America, drawing distinctions between legitimate and illegitimate opioid use. Finally, in *‘Where do we go from here?’: Fearing the Future*, participants described anticipating further restrictions and associating these with increased pain and disability.

**Discussions and Conclusions:** The experience of being prescribed opioids for CNCP in Australia in the context of increasing restrictions was characterised by stigma, blame, and fear. There is a need to ensure people prescribed opioids for pain are considered when designing measures to reduce opioid-related harms.

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