

Research Based Abstract Template

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Social contact interventions to reduce substance use disorder stigma among healthcare providers: a scoping review

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Introduction: Stigma among healthcare providers acts as a barrier to the delivery of effective substance use disorder (SUD) treatment. Evidence from the mental health stigma reduction literature suggests that contact with people with lived experience (PWLE) can produce greater and more long-lasting effects than education alone. However, the ways in which social contact has been used to challenge SUD stigma and the efficacy of this approach in improving attitudes among healthcare providers is less well established.

Methods: A scoping review was undertaken to understand how social contact has been operationalised in interventions to reduce SUD stigma in healthcare providers, and explore the conditions under which contact-based strategies have been effective in reducing stigma.

Results: We identified 30 interventions to reduce SUD stigma among healthcare providers published prior to March 2024, including 18 interventions incorporating social contact. The most common target populations included primary care and community health staff (n=9 50%). Twelve interventions (66%) included in-person contact, while six (33%) examined indirect contact through videos and written narratives. Effective interventions included consumer-led training and personal testimonies from PWLE in recovery, often delivered alongside targeted education. Interventions that had no or limited effect on stigma operationalised social contact as clinical experience and/or had limited PWLE involvement. Outcomes were typically assessed over the short-term, with few high-quality studies overall.

Discussions and Conclusions: Identifying effective components of contact-based interventions remains challenging despite a growing evidence base. Recent research suggests even brief online interventions can reduce SUD stigma, and emphasises the importance of including PWLE at all stages of program design and delivery. Future research should evaluate longer-term impacts on practice, including from the perspective of clients and lived experience workers, and develop interventions for providers in mental health settings, as these have been largely overlooked in the stigma reduction literature to date.

Disclosure of Interest Statement:

SA and DL are recipients of NHMRC Investigator Grants (#2008193 and #1196892).