

Stigma experienced by people who use substances in rural South Dakota

Stigma, Treatment,

Avoidance and Recovery in Time

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INTRODUCTION

- Roughly 16% of people have a substance use disorder (SUD) in South Dakota¹
 - Of those, only 3% receive treatment.
- Stigma can be a key factor in preventing treatment efforts.
 - Stigma can lead to feeling shame, guilt, a sense of devaluation, discrimination.
 - Self-stigma can be defined as the personal endorsement of stereotypes about oneself and the resulting of prejudice and self-discrimination.²

OBJECTIVES

- Assess how stigmas affect individuals who use drugs for non-medicinal purposes in rural South Dakota, using survey data (n=38).
- Identify frequently experienced stigmas to create future anti-stigma campaigns and increase access to SUD treatment and recovery services in the targeted counties.

METHODS

- Participants were recruited via convenience sampling and in five rural South Dakota counties.
- A 23-question online survey, adapted from previous research,³ was promoted via flyers and postcards.
- Responses were coded and analyzed using SAS version 9.4
- Likert scale (never, rarely, sometimes, often, or very often) were collapsed into yes/no categories (due to low sample size) and analyzed using Chi-square tests.

RESULTS AND IMPLICATIONS Table 1: Demographic characteristics of Participants Table 2. Patient Stigma Surv

Age mean (standard de	eviation)	Family Annual Incor	ne n (%)
34.60 (11.03)			
Gender n (%)		\$0-\$24,999	20 (52.63)
Male	19 (51.35)	\$25,000-\$50,999	12 (31.58)
Female	16 (43.24)	\$51,000-\$75,999	2 (5.26)
Other	2 (5.41)	\$76,000 and above	4 (10.53)
	Employment	Status n (%)	
Employed, 32+ hours of	22 (59.46)	Not employed, not	0
work per week		looking for work	
Employed, 1-31 hours of	6 (16.22)	Disabled/unable to	0
work per week		work	
Not employed, looking	8 (21.62)	Other	1 (2.70)
for work			

- Results indicate a majority of respondents experienced all three types of stigma – Discrimination, Alienation, and Perceived Devaluation.
- "I think I am dangerous because I use drugs." was the only question in which majority of the respondents had not experienced stigma.
- Family income <\$51,000, female gender, and unemployment were significantly associated with participants experiencing more stigma.
- Race, martial status and education did not impact whether the participant experienced stigma.
- Results can be utilized to develop targeted efforts within South Dakota including expanding workforce development opportunities for those in treatment or recovery and development of messaging for women.

Table 2. Patient Stigma Survey Responses				
	Never experienced stigma n (%)	Experienced stigma n (%)	P-value (OR)	
Disci	rimination			
Friends have rejected me because I use drugs.	8 (21.05)	30 (78.94)		
Family members have rejected me because I use drugs.	15 (39.47)	23 (60.53)		
The use of drugs has prevented me from obtaining proper medical care.	15 (39.47)	23 (60.53)	\$ 0.016 (11.0) \$ 0.038 (4.81)	
The use of drugs has prevented me from obtaining housing.	14 (36.84)	24 (63.16)	\$ 0.01 (12.7)	
Ali	ienation			
I have avoided people because I think they might look down on me because I use drugs.	9 (23.68)	29 (76.32)	\$ 0.007 (10.8) \$ 0.016 (10.9)	
feel I have to prove my worth because use drugs.	11 (28.95)	27 (71.05)	\$ 0.03 (7.1) \$ 0.003 (16.7)	
I feel ashamed of myself because I use drugs.	7 (18.42)	31 (81.58)	\$ 0.03 (7.0)	
Perceive	d Devaluatio	n		
I think that I am dangerous because I use drugs.	25 (65.79)	13 (34.21)	0.02 (6.0)	
I think that I am not a good person because I use drugs.	16 (42.11)	22 (57.89)	Q 0.02 (5.96) = 0.04 (8.0)	
I think that I am unreliable because I use drugs.	12 (31.58)	26 (68.42)		
*				

\$Family Annual Income <\$51,000 per year QGender Female Unemployed

This research will be used to develop anti-stigma messaging targeting the specific stigmas experienced by those using substances including increasing understanding of the disease of substance use disorder and how loved ones can provide healthy support those struggling with substance use with a goal of increasing the use of treatment and recovery services for those in need.

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