

**Addressing**  
**OPIOID STIGMA**  
**in PHARMACIES**

**Strategies for Pharmacy Professionals**

**February 2024**

**camh**

# INTRODUCTION

**Pharmacy professionals provide a crucial service to people across our health care system. As one of the most accessible care providers, you have a unique opportunity to support people on prescription medications like opioids.**

Since Canada began tracking the number of opioid-related deaths and other harms in 2016, more than 40,000 people have died due to apparent opioid toxicity. Between January and June 2023 alone, there were an average of 22 deaths per day.\*

To address this crisis, every health care professional needs to play a role. Practices such as distributing take-home naloxone kits and providing opioid agonist therapies are essential to saving lives and equipping people with the tools to respond to opioid emergencies.

However, stigma in our health care system can interfere with these practices. It is a significant barrier to effective care among people who use opioids. As a care provider who is accessible to the public, you are in a unique position to challenge the stigma of opioid use. The pharmacy professional role has evolved beyond simply dispensing medication to being an advocate and vital support for people dealing with the stigma and complexities of opioid use.

Part of that support role includes education. When you educate people about opioids and opioid therapies using language and examples that they can relate to, you empower them in their care. When you provide competent, non-judgmental care for people who use opioids, you build trust and help to prevent fatal overdoses. And when you become an ally with the people you serve, your efforts ripple outward, supporting not only individuals, but also families and communities.

This toolkit provides valuable insights and resources that you can use in responding to the opioid crisis. It describes strategies for reducing stigma around opioids and people who use them, including people who are prescribed opioids to manage pain or treat opioid use disorder, or who are seeking naloxone kits. The toolkit illustrates some of these strategies by applying them to situations that pharmacy professionals may encounter in practice.

We encourage you to review the information, strategies and resources outlined here so you can ensure that people who use opioids receive safe, respectful and compassionate care in pharmacy settings.

\* Public Health Agency of Canada (2023). *Opioid- and Stimulant-related Harms in Canada*.

# UNDERSTANDING STIGMA

**Stigma involves judgment, discrimination and shame that can significantly affect people who are seeking support for opioid use disorder or pain management.**

Stigma and discrimination against patients who use opioid medications are major barriers to care. And barriers to care can have significant negative outcomes—including loss of life. But stigma-free care can save lives. By understanding how stigma affects people and finding ways to reduce it, you can create a supportive environment for everyone.

Imagine a scenario where a person coming to the pharmacy where you work is hesitant to discuss their opioid prescription because they are afraid of being judged. This could mean that adverse effects or drug interactions go unaddressed. Or the person might decide to stop treatment, which can be dangerous. Now imagine what happens when you give that person non-judgmental support. It creates a valuable opportunity for you to offer education and resources that can significantly decrease the risk of opioid-related harms or death.

Unfortunately, many people still experience stigma in pharmacy settings. That is what people described in a series of roundtable and survey consultations conducted by the Centre for Addiction and Mental Health. Participants were people who attend pharmacies to access opioid use disorder services and opioids to treat pain, as well as pharmacy professionals.

**Participants shared these sentiments:**



**Help patients find and use their voice.** Give them education and options, not ultimatums.

**I deserve privacy.  
I deserve dignity.**

Get to know me. **I am a patient, not a problem.**

Not being able to access prescribed opioid medication is not just an inconvenience—**it could mean life or death.**

Patients are not just falling through the cracks—they are dying.  
**Pharmacy staff can be allies, or they can be part of the problem.**



**When we stigmatize people, we decrease their chances for a long and healthy life.**

# STRATEGIES THAT SUPPORT PEOPLE WHO USE OPIOIDS

Supporting people who use opioids involves a multifaceted approach that prioritizes respect, understanding and empowerment. Here are strategies you and your pharmacy team can use to provide stigma-free care.



## Respect everyone equally

Treat people who use opioids with the same level of respect and consideration that you give to everyone who accesses the pharmacy. Respecting their time, questions, and concerns fosters an environment that values their well-being.



## Get to know each person you serve

Form a relationship with the people using your pharmacy. Take the time to understand each person's circumstances, background and experiences. Simple things like remembering their name and asking how they're doing today can help build a bond of respect and trust. People may not want or need to share their experiences, but learning about trauma-informed care will help tailor your support and demonstrate your commitment to holistic care. Ensure appropriate clinical documentation so that pharmacy staff do not have to ask people to share sensitive information repeatedly, or so they don't offer the same advice at every visit.



## Offer support through education

Empower people by offering them educational resources about opioid therapies. Give people clear options and information that respects their existing knowledge and experiences and that helps them make informed decisions about using opioid medications.



## Explain and review pharmacy processes

People may encounter pharmacy processes such as "treatment agreements" or prescription restrictions such as "dispensing intervals." Take the initiative to explain these processes and their purpose using everyday language. Review processes that the pharmacy can control and consider changing those that do not seem helpful or that could hinder care.

# STRATEGIES THAT SUPPORT PEOPLE WHO USE OPIOIDS



## Provide harm reduction services

Extend your support beyond prescriptions by offering harm reduction services and information about where they are available (e.g., naloxone kits, safer injection supplies). Provide take-home naloxone kits (or refer to distribution sites) and teach people and their family or friends how to use them. This service can save lives by giving people the tools they need to respond to opioid emergencies.



## Deliver compassionate health care

Understand that people who use opioids may be experiencing stress, distress or frustration in their lives. Many have faced trauma within the medical and legal systems and may appear defensive, demanding or untrusting. But everyone deserves a supportive and safe health care environment. Your compassionate approach can alleviate a person's concerns and enhance their overall well-being.



## Respect the right to privacy

Offer patients the option to discuss their prescriptions privately. They may feel more comfortable discussing their prescriptions, use of substances and other matters in a private area, rather than at the pharmacy counter.



## Raise public awareness about opioids

Consider publicizing information about opioid use and therapies, including details about naloxone. Display posters and resources that highlight the availability of take-home naloxone kits and sharps disposal containers. By sharing this information, you ensure that everyone who comes to your pharmacy is aware of the potentially life-saving tools they can access.

**By integrating these strategies into your practice, you will create an environment where people using opioids receive the care, respect and resources they need to navigate their health journey safely and confidently.**

# WORDS MATTER

**Words can both reinforce and counter stigmatizing attitudes, views and actions. Language evolves with time and alongside our growing understanding of social and health problems.**

Many terms that were once common are now recognized as stigmatizing and harmful to people and communities. It is also important to recognize that individual preferences vary and that we need to honour how people choose to speak about and define their experiences.

The Public Health Agency of Canada has created a resource that suggests language and guiding principles you can use to help you communicate about substance use in a more compassionate, non-stigmatizing way.\* The table below gives some examples.

Rather than:	Say:
<ul style="list-style-type: none"><li>• drug users</li><li>• drug abusers</li></ul>	<ul style="list-style-type: none"><li>• people who use substances</li><li>• people who actively use drugs</li></ul>
<ul style="list-style-type: none"><li>• addicts</li></ul>	<ul style="list-style-type: none"><li>• people living with a substance use disorder</li><li>• people with living experience of a substance use disorder</li></ul>
<ul style="list-style-type: none"><li>• substance abuse</li><li>• substance misuse</li><li>• substance habit</li></ul>	<ul style="list-style-type: none"><li>• substance use</li></ul>
<ul style="list-style-type: none"><li>• relapse, lapse</li><li>• slip</li><li>• on/off the wagon</li><li>• used again</li><li>• setback</li></ul>	<ul style="list-style-type: none"><li>• recurrence of substance use</li><li>• recurrence of substance use disorder</li></ul>
<ul style="list-style-type: none"><li>• clean drug test</li></ul>	<ul style="list-style-type: none"><li>• negative drug test</li><li>• drug free</li></ul>
<ul style="list-style-type: none"><li>• dirty drug test</li><li>• failed drug test</li></ul>	<ul style="list-style-type: none"><li>• positive drug test</li></ul>
<ul style="list-style-type: none"><li>• replacement therapy</li><li>• substitution therapy</li><li>• liquid handcuffs</li></ul>	<ul style="list-style-type: none"><li>• opioid agonist treatment</li><li>• opioid agonist therapy</li></ul>

\* Adapted from: Public Health Agency of Canada, 2019. [Communicating about Substance Use in Compassionate, Safe and Non-stigmatizing Ways: A Resource for Canadian Health Professional Organizations and Their Membership](#).

# PUTTING STRATEGIES INTO PRACTICE

## Provide Education and Share Power

BT's pain started about 15 years ago after a car accident and it never really went away. Her doctor at the time tried many medications, but slow-release oral morphine (Kadian<sup>®</sup>) was the only one that seemed to help. BT now has a new doctor and all of a sudden he has been decreasing her Kadian dose because he says it's dangerous and she might be addicted. BT says no one had expressed this concern to her before, and now her pain is worse than ever. She would like to talk about changing her opioid therapy, but feels she has no voice in her care.

BT visits her pharmacist, who provides a safe space where she can express her concerns and explain her health care needs and goals. The pharmacist asks BT if she would like information about the risks and benefits of opioid therapy for chronic pain. He also offers to work with BT and her doctor to help achieve her goals.

### What people said in the consultation survey:

"Medicines that have undesirable side effects on our health should be explained to us. They should give us options other than telling us to talk to our doctor. They [pharmacists] see us more often than our doctors. They see the effects these drugs have on us."

"Patients on opioids for chronic pain are dealing with daily pain and live in fear of losing a medication that helps them have some quality of life. It causes anxiety and depression, with treatment very difficult to access."

## Practice takeaways

- Offer a private space for clinical discussions.
- Invite patients to ask questions and share concerns. Make it clear that this is a safe, judgment-free place to discuss opioid therapies.
- Provide individualized information to support the patient's decision making.
- Work collaboratively with patients and prescribers to optimize opioid therapies.

# PUTTING STRATEGIES INTO PRACTICE

## Support Opioid Agonist Therapy

After many years of opioid use that is now affecting his life, KF decides to get treatment. A few weeks after initiating KF on buprenorphine, the pharmacist asks if KF has time to discuss this medication. KF says that treatment is going well. The pharmacist asks how long he plans to stay on buprenorphine and whether he has considered tapering. KF is concerned because his family has also asked him but his doctor told him that buprenorphine is usually a long-term treatment.

The pharmacist, who thought opioid agonist therapy (OAT) was only a short-term bridge to abstinence, decides to learn more about OAT and opioid use disorder. They learn that this chronic relapsing disorder often requires long-term treatment. They see that OAT is life saving and that stopping it can increase overdose risk. The pharmacist learns that there is no need to promote discontinuation—OAT can continue indefinitely. They also begin to understand that stopping OAT is a big decision, and each person has their own reasons. They learn that a long-term taper is best for people who want to end OAT.

KF's pharmacist follows up with him to discuss his treatment goals and medication experience. KF appreciates this collaborative approach and the reassurance from his pharmacist that there is no pressure to stop treatment.

### What people said in the consultation survey:

“When someone reaches out and attempts opioid [agonist] therapy as an alternative to using street drugs to deal with their opioid addiction, it is important to appreciate the patient’s request for help with their addiction. It is important that pharmacists are aware of this and encourage the attempts being made to stay safe.”

## Practice takeaways

- Reflect on your assumptions about addiction and opioid use.
- Educate yourself on how and why OAT helps to keep people safe.
- Ensure that all pharmacy staff have the common goal of supporting people seeking or already engaged in OAT.



# PUTTING STRATEGIES INTO PRACTICE

## Challenge Barriers to Care: Assumptions

MC recently left a residential program where he started methadone. This isn't his first time on OAT, but he is confident and hopeful for the future. MC is nervous about a job interview today, so he gets to the pharmacy early for his methadone dose to ensure he won't be late for the interview. He sees the pharmacist roll her eyes and watches other patients being served before him. He feels that this is just another place where he is not welcome. Because MC had to wait, he is late for the interview and doesn't get the job.

Methadone takes longer to provide than other medications, but the pharmacist could have accommodated MC if she had established a better relationship with him. Her attitude and actions do not invite collaboration. She may believe that people who use opioids are non-productive and assumed that MC had nowhere important to go.

### What people said in the consultation survey:

"Sometimes the pharmacists don't look at you like a whole person and they just seem to be only interested in moving away from you instead of being supportive. I now have a great pharmacist who understands, and there are no barriers."

"Pharmacists often make us wait and serve the patients who arrived after us. They serve us at a counter dedicated only to customers who have opioid substitution treatment, so all customers know what drugs we come to get. It's very stigmatizing."

"Pharmacists need to be mindful of their judgment of people who use OAT and that we are more than just the prescription we require for pain. We are busy and need to go about our day. Treat us how you would treat any other customer."

## Practice takeaways

- Recognize the impact of your attitudes, beliefs and practices and how they may devalue and discriminate against people on opioid therapies.
- Develop a supportive and collaborative relationship with your patients on opioid therapies to help them reach their goals.

# PUTTING STRATEGIES INTO PRACTICE

## Challenge Barriers to Care: Power Imbalances

SL arrives at the pharmacy for her weekly observed OAT dose and take-home doses. The pharmacist informs her that her prescription has run out and they are not able to fill it. They ask SL to contact her doctor to fax over a prescription. Unfortunately, her doctor's office is closed for the day. Afraid of going into withdrawal, SL resorts to accessing unregulated opioids.

Continuity of OAT is critical in keeping people safe. Missing doses can be dangerous given how quickly people lose tolerance to opioids. Additionally, the experience of and thoughts of opioid withdrawal can be deeply distressing for patients. Pharmacy professionals should make it a priority to ensure continuity of treatment whenever possible.

### What people said in the consultation survey:

"I see sometimes in pharmacy where 'it's not my job to have told this person their prescription is running out,' and I think it totally is our job. It encourages and helps guide better comprehensive longitudinal care. When it becomes a power struggle like that it does not serve the patient."

"Pharmacists don't want to call our doctors when there's a problem with the prescription. We have to deal with it. Yet for all other drugs, pharmacists take care of it."

"People who don't get their prescribed medication may turn to street drugs to avoid the trauma of withdrawal, putting them at high risk of overdose. Since they are on prescribed medication, they may fear going to an overdose prevention site to use out of fear and stigma, putting them at further risk of harm, including overdose death."

## Practice takeaways

- Reflect on the power imbalance between pharmacists and patients, which can result in stigma-related discrimination.
- Recognize that continuity of opioid agonist therapy is critical. Support patients, depending on the clinical situation and jurisdictional practices (e.g., accept verbal OAT orders from prescribers, extend an OAT prescription).
- Consider how pharmacy systems can help to prevent gaps in prescriptions (e.g., create a schedule for checking that OAT patients' prescriptions are up to date).

# WHERE TO LEARN MORE

## Infographics

### **When It Comes to Substance Use Disorders Words Matter**

(Canadian Centre on Substance Use and Addiction)

**Pharmacist's Virtual Communication Toolkit: Engaging in Effective Conversations about Opioids** (National Association of Pharmacy Regulatory Authorities)

**Normalizing Naloxone and other fact sheets about naloxone** (University of Waterloo)

## Courses

**Opioid Use and Opioid Use Disorder online training** (Developed with the Association of Faculties of Pharmacy of Canada)

**Reducing Stigma and Promoting Recovery for Opioid Use** (Mental Health Commission of Canada/Centre for Addiction and Mental Health)

**Understanding Stigma** (Centre for Addiction and Mental Health)

**Anti-stigma workshops and online learning** (Canadian Centre on Substance Use and Addiction)

**Mental Health Structural Stigma in Healthcare eLearning course** (Mental Health Commission of Canada)

## Videos

**Beyond Stigma video series about opioids** (Subject Matter Health Research Lab, Toronto)

**Where Else Am I Supposed to Go?** (EQUIP Health Care)

## Other Resources

**Opioid awareness resources** (Government of Canada)

**A Primer to Reduce Substance Use Stigma in the Canadian Health System** (Public Health Agency of Canada)

**Opioid stewardship practice resources** (Canadian Pharmacists Association)

**Caring for Populations with Complex Social Needs tip sheet** (Street Health, Toronto)

**Trauma-and Violence-Informed Care resources and e-learning** (EQUIP Health Care)

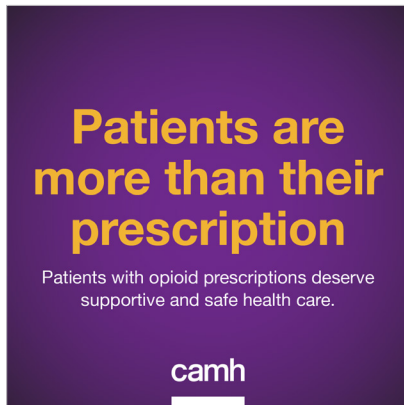
**EQUIP Equity Action Kit** (EQUIP Health Care)



**For More Resources**  
[kmb.camh.ca/eenet/communities/mental-health-and-addictions-pharmacists](https://kmb.camh.ca/eenet/communities/mental-health-and-addictions-pharmacists)

# SOCIAL MEDIA ASSETS

## Graphic



## Sample Post Copy

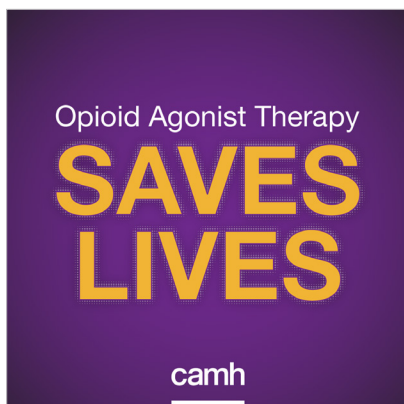
Stigma can be a major barrier for people seeking support for opioid use disorder and pain management.

By offering non-judgmental care, we can support patients to safely get the help they seek.



Canada is in the midst of an opioid poisoning crisis—but pharmacy professionals can make a difference.

By taking the time to understand individual circumstances, you can provide better care and reduce the stigma around opioids.

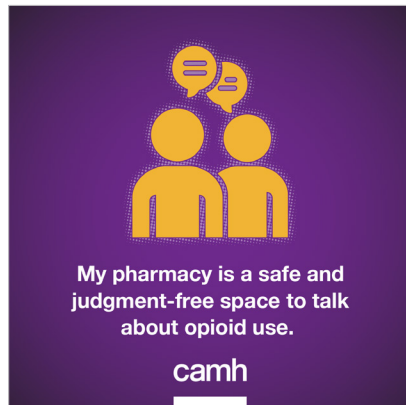


Ending the opioid poisoning crisis means that every health care professional must play a role in harm reduction.

For people with an opioid use disorder, opioid agonist therapy reduces the risk of mortality by more than half.

# SOCIAL MEDIA ASSETS

## Graphic



## Sample Post Copy

I'm committed to ending opioid stigma and providing compassionate care to people seeking support. Join me and share this message.



Research shows that people often experience stigma when they access opioid agonist therapy in pharmacies. And when stigma gets in the way of this life-saving therapy, there can be serious consequences.

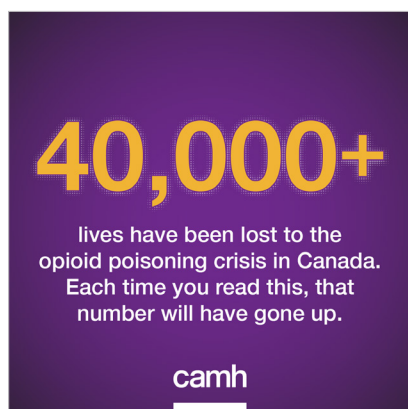


Canada's opioid poisoning crisis has taken too many lives.

Give take-home naloxone kits to patients and anyone who asks. Explain how to use them so everyone has the tools to respond to an opioid overdose.

# SOCIAL MEDIA ASSETS

## Graphic



## Sample Post Copy

Canada is in the midst of an opioid poisoning crisis—but pharmacy professionals can make a difference.

You can help save lives by extending your support beyond prescriptions. It includes offering harm reduction services, providing take-home naloxone kits and educating patients on how to use them.

## Carousel Graphic









## Sample Post Copy

Pharmacists play a critical role in addressing the opioid poisoning crisis. Swipe below and see what you can do to help reduce harm:

# POSTERS


Canada is in an opioid crisis.

**Here's what pharmacists can do to help:**

-  **Reflect**  
on how your words and actions impact others
-  **Optimize**  
care by using a trauma-informed approach for all
-  **Offer**  
to have conversations in a private space
-  **Respect**  
patient autonomy, dignity, time and privacy
-  **Learn + Lead**  
advocate for opioid agonist therapy at your pharmacy
-  **Educate**  
yourself on opioid use disorder, chronic pain, and how to manage challenging situations

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This pharmacy is a safe and **judgment-free** space to talk about **opioid therapies.**

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**Naloxone kits save lives.**  
**We will train anyone.**  
**No questions asked.**

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Canada is in an opioid poisoning crisis.

**Your pharmacist is helping by:**

-  **Providing**  
safe and judgment-free opioid services
-  **Promoting**  
life-saving opioid agonist therapies (e.g., methadone, Suboxone®)
-  **Offering**  
naloxone kits and training to people taking opioids, their friends and family, and to anyone who asks
-  **Educating**  
on safe opioid storage and disposal
-  **Supplying**  
and replacing sharps disposal kits for anyone who asks

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**Thank you for your commitment to  
addressing the stigma of opioid use  
and for providing compassionate  
care to people seeking support.**

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