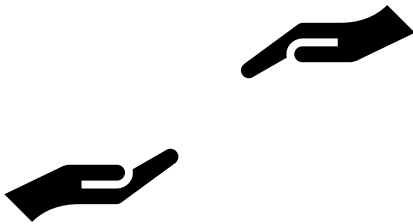


Stigma and Harm Reduction



Study Purpose

Wolfson and colleagues examine scholarly articles published between 1999 and 2019 that examine barriers people who are pregnant face when seeking substance use and child welfare services.

Study Findings

Barrier	Examples	Recommendation
Individual-level stigma	Self-directed stigma, trauma, fear of others' reactions	Group-based harm reduction programming
Relationship-level stigma	Stigma from friends, family, and service providers	Multidisciplinary workshops for service providers
Service-level stigma	No communication between service providers, unrealistic standards	Training and education
Population-level stigma	Stigma based on substance use history, mental health status, or other characteristics	Funding of collaborative-care programming

TAKEAWAYS

- ✓ Studies show that stigmas can affect how people view those who use drugs and influence whether people will support harm reduction policies.
- ✓ Stigma towards people who use drugs presents barriers to seeking harm reduction services.
 - ❖ Reform recommendations include the creation of safe environments where people can come together in a non-stigmatizing fashion, the establishment of continuing and cross-disciplinary education for service providers, and the funding of harm reduction services.
- ✓ People with substance use histories and harm reduction specialists can successfully collaborate to create educational programs.

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