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RESEARCH ARTICLE/ARAŞTIRMA MAKALESİ

Attitudes of healthcare professionals toward individuals with substance use disorders

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Abstract

Introduction and Objectives: This research project aims to gain insight into the attitudes of health professionals towards individuals with substance use disorders, and to examine the impact of these attitudes on various aspects of healthcare, including treatment processes, the physician-patient relationship, and social interactions.

Materials and Methods: The scientific research on the awareness of health personnel towards substance addicts included medical professionals such as doctors, pharmacists, nurses, midwives and medical secretaries, as well as other similar health personnel. A total of 69 health personnel participated in the research. The questionnaire comprised demographic questions, questions about their professional behaviours and their thoughts about substance addicts in their social lives.

Findings: The many of participants (73.9%) were doctors, while a smaller proportion were pharmacists (5.8%), nurses (5.8%), pharmacist journeymen (5.8%), medical secretaries (4.3%), and individuals from other occupational groups (4.3%). A total of 27.9% of the participants were between the ages of 35 and 44, while 25% were between the ages of 45 and 54. Three individuals reported encountering substance addicts on a daily basis within the workplace. Seven individuals indicated that they had been subjected to violence by individuals with substance use disorders. Twenty health care personnel reported that they had been forced to procure drugs illegally. Among those who were subjected to violence, 10.1% experienced verbal violence, while 6% experienced physical violence. Additionally, 42% of respondents perceived the applicability of preventive measures against substance addiction in society to be low.

Conclusion: Substance addiction can be defined as a life-threatening condition that needs to be treated. Increasing the level of education and awareness of health personnel in substance addiction should be considered to have a positive effect on the addicts who receive and want to receive treatment.

Keywords: Substance Addiction, Health Worker, Awareness, Behaviour, Violence.

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1. INTRODUCTION

Substance addiction represents a significant threat to an individual's health and well-being, necessitating prompt and effective intervention. The current prevalence of addictive substances, facilitated by their increased accessibility, is contributing to an elevated number of patients undergoing treatment in healthcare facilities. Nevertheless, healthcare professionals may hold negative views regarding this patient group. Healthcare professionals may exhibit behaviours that are perceived as harsh, ascribe irresponsibility to the addicted person, and exhibit fear of potential harm or stigmatisation (Van Boekel et al., 2014)healthcare professionals often have negative attitudes towards this patient group. Healthcare professionals' regard for working with patients with substance use disorders was examined and three sectors in which professionals are working were compared. Methods: General practitioners (GPs; N= 180. The study revealed that a significant number of healthcare professionals acknowledge substance addiction as a brain disease, yet they exhibit reluctance in disclosing the role of the social environment. It is hypothesised that the correlation between substance abuse and criminality is intensifying in parallel within society. The findings indicated that health personnel who had undergone training in substance abuse held more positive views (Sasman Kayli et al., 2020). In a study involving individuals with substance addiction, it was observed that these individuals exhibited low self-esteem and experienced depression, anxiety, and sleep problems as a result of stigmatisation (Birtel, Wood and Kempa, 2017). In the report of the Department of Combating Narcotic Crimes, approximately 30 per cent of substance addicts attempted to quit on their own, and 35 per cent expressed a desire to be treated (Turkey Drug and Narcotics Directorate, 2023). In a separate study, 51% of healthcare professionals surveyed reported that they believed substance addicts to have low motivation, while 59% stated that they considered substance addicts to be dishonest and anti-social (Cazalis, Lambert and Auriacombe, 2023). While the individual with substance use disorder seeks treatment, they may be influenced

by the negative attitudes and behaviours of their surrounding environment. Conversely, healthcare providers may experience feelings of insecurity or engage in stigmatizing behaviours towards the individual in need of care. Such circumstances have the potential to exert a detrimental impact on both the health personnel and the individual seeking treatment.

In a meta-analysis study, 51% of healthcare professionals stated that they held the view that individual with a tobacco use disorder lack motivation that those with a substance use disorder (SUD) are manipulative, irritable and lacking in motivation, that individuals with an alcohol use disorder are difficult to treat and are not honest about their alcohol use. A significant proportion of nurses hold the view that individuals who engage in substance use may be prone to violence and that those who utilise intravenous substances may pose a threat due to the potential for HIV infection (Cazalis, Lambert and Auriacombe, 2023).

racial disparities Furthermore, the management of opioid use disorder (OUD) represent a significant concern. In the United States, the rate of opioid-related overdoses among Black individuals has increased at the fastest rate of any demographic group. The situation has been further exacerbated by the advent of the global pandemic caused by the SARS-CoV-2 virus. Nevertheless, a lower proportion of Black individuals than White individuals commence treatment with the gold standard medications for OUD. The utilization of any OUD treatment service among Black OUD patients is approximately 50% less prevalent compared to their white counterparts. Furthermore, Black individuals who present to the emergency department for an overdose are less likely than their white counterparts to receive follow-up care and behavioural counselling or to be referred to a treatment programme (Khatri et al., 2023).

The objective of this research is to examine the attitudes, awareness and thoughts of healthcare professionals towards individuals with substance addiction disorders, and to evaluate the ethical aspects of these attitudes. In addition,

the research will assess the extent to which these attitudes comply with ethical principles in healthcare service delivery. The objective of this research is to gain insight into the attitudes of healthcare professionals towards substance addiction and to ascertain the impact of these attitudes on treatment processes, the physician-patient relationship and social interactions. In this process, adherence to ethical standards, including confidentiality and informed consent, is fundamental to ensuring the integrity and reliability of the research findings.

2. MATERIALS AND METHODS

The objective of this research is to examine the attitudes, awareness and thoughts of healthcare professionals towards individuals substance addiction disorders, and to evaluate the ethical aspects of these attitudes. In addition, the research will assess the extent to which these attitudes comply with ethical principles in healthcare service delivery. The objective of this research is to gain insight into the attitudes of healthcare professionals towards substance addiction and to ascertain the impact of these attitudes on treatment processes, the physicianpatient relationship and social interactions. In this process, adherence to ethical standards, including confidentiality and informed consent, is fundamental to ensuring the integrity and reliability of the research findings.

The research was conducted on a sample of employees aged 18 or over, employed in the health sector. The questionnaires were administered via a face-to-face interview method. A total of 69 health personnel participated in this preliminary study. The questionnaire comprises three sections: demographic information, questions about professional behaviours, and questions about attitudes towards substance addicts in the social context. The questionnaire comprises a series of questions pertaining to the health personnel's habits with regard to the monitoring of current information pertaining to substance addiction, the frequency of their encounters with substance addicts, whether they have ever been subjected to violence by substance addicts, whether they have ever been compelled to supply illicit drugs, their general level of knowledge about addictive

substances, their willingness to interact in a social environment with individuals struggling with addiction, their level of knowledge about addiction, and their awareness of the institutions that combat addiction. The frequency with which they follow current treatment approaches is also assessed. Additionally, the evaluation of addiction as a moral or voluntary problem, the association of addiction with personality weakness, thoughts about drug treatment and rehabilitation interventions, thoughts about marrying addicts, thoughts about living next door or in the same neighbourhood, thoughts about tending to crime, thoughts about getting a job and working, and thoughts about emotional states such as humiliation, stigmatisation and embarrassment are explored. In the study, the opinions and attitudes of health personnel regarding individuals with substance use disorders were evaluated and compared with demographic data and a series of propositions.

The survey was prepared by the author based on a literature review. It consisted of a total of 41 questions: 10 questions focused on demographic characteristics and knowledge level, while 31 questions addressed attitudes, opinions, and behaviors. The results were analyzed using SPSS Statistics Version 22 in this research.

3. FINDINGS

A total of 69 individuals participated in the study. The demographic characteristics of the participants are outlined below: The many of participants (73.9%) were doctors, while 5.8% were pharmacists, 5.8% were nurses, 5.8% were pharmacist journeymen, 4.3% were medical secretaries, and 4.3% were from other occupational groups. The age distribution of the participants was as follows: 27.9% were between 35 and 44 years of age, and 25% were between 45 and 54 years of age. The male employee cohort comprises 35 individuals, representing 50.7% of the total number of employees. The female employee cohort comprises 34 individuals, representing 49.3% of the total number of employees. A total of 31 employees have been in the profession for at least 20 years, representing a rate of 44.9%. A total of 48 individuals possess a medical specialisation.

An evaluation of the knowledge and experiences associated with substance addiction.

The many of participants demonstrated awareness of AMATEM, Green Crescent and CEMATEM, which are among the organisations that address substance addiction. A total of 39 individuals indicated that they encountered individuals struggling with substance addiction three to four times per year. The number of individuals who encounter substance addicts on a daily basis in a professional setting is 3. The number of participants who reported experiencing violence from substance addicts is 7. The number of healthcare professionals who were compelled to obtain drugs through illicit means was identified as 20 (29%). The prevalence of violence experienced was 10.1%, with the majority of incidents involving verbal violence (10.1%) and physical violence (8.7%).

Table 1. Demographic characteristics of healthcare personnel.

Number and percentange	N	%
Gender		
Female	34	49,30%
Male	35	50,70%
Profession		
Doctor	51	73,90%
Pharmacist	4	5,80%
Pharmacist Journeymen	4	5,80%
Nurse	4	5,80%
Medical Secretary	3	4,30%
Other	3	4,30%
Marital Status		
Married	36	52,90%
Single	29	42,60%
Other	3	4,40%
Education		
Madical Specialization	48	69,60%
Master's/ PhD	3	4,30%
University Degree	10	14,50%
Associate Degree	3	4,30%
High School	5	7,20%
Children		
Yes	40	59,70%
No	27	40,30%
Years in Profession		
20 years and over	31	44,90%
10-20 years	17	24,60%
1-3 years	14	20,30%
4-10 years	7	10,10%

3.1. Assessment of Attitudes Towards Substance Abuse

A total of 42% of the participants expressed the view that preventive measures against substance abuse are less applicable in society. Upon inquiry regarding their general level of knowledge, 20% of the participants indicated that they possessed sufficient knowledge, 3% stated that they had very sufficient knowledge, and 51% indicated that they had a moderate level of knowledge. With regard to the practice of monitoring developments in the field of treatment, 55% of the participants indicated that they do not engage in such monitoring, 33% stated that they do so on an annual basis, and 11% stated that they do so on a monthly or weekly basis. It is noteworthy that only 12 participants reported having received training on substance addiction.

3.2. Evaluation of Beliefs About Substance Addiction

A total of 42% of the participants indicated that they believe that preventive measures against substance addiction are less applicable. The proportion of respondents who strongly agree that substance addiction is a mental disorder is 9%. 26% of respondents strongly agree, 35% moderately agree, 13% very slightly agree and 17% strongly disagree. The rate of agreement with the idea that substance addiction is caused by the weakness of personality structure is as follows: 17% strongly agree, 31% strongly agree, 19% moderately agree, 17% very slightly agree and 16% strongly disagree.

3.3. Evaluation of Substance Addiction And Social Perception

A total of 44% of participants indicated that they strongly agreed with the statement, "Some substances that cause substance addiction are drugs and some have stimulant properties." A further 36% of participants indicated that they strongly agreed with the statement, while 12% indicated that they moderately agreed with the statement, 7% indicated that they very slightly agreed with the statement, and 1% indicated that they strongly disagreed with the statement. A total of 42% of respondents indicated that they believe smoking and its derivatives (e.g., pipes,

hookahs) can lead to addiction. Additionally, the many of participants (93%) agreed that environmental factors, psychological reasons, and parental influence can contribute to the development of addiction. Notably, none of the respondents selected the option indicating strong disagreement with this assertion.

3.4. Evaluation of Attitudes Towards People with Substance Addiction

The proportion of respondents who agreed with the statement that substance addicts can recover with treatment was 33%. Of these, 42% strongly agreed, 13% moderately agreed, 10% very slightly agreed, and 2% strongly disagreed. The proportion of respondents who agreed that rehabilitation is an important addition to treatment was 32%. Of these, 49% strongly agreed, 16% moderately agreed, 16% somewhat agreed, and 3% very slightly agreed. With regard to the statement that the most effective treatment method is one that is provided in the community, 6% disagreed, 9% indicated a very slight agreement, 24% expressed a moderate agreement, 51% a strong agreement, and 10% a complete agreement.

3.5. Assessment of Relationships with Substance Addicted Persons

The proportion of individuals who express complete agreement with the notion that an individual with a substance addiction can marry is 6%. The proportion of respondents who expressed disagreement or only limited agreement was 62%. Moderate and strong agreement was expressed by 32% of respondents. Nineteen individuals did not agree at all, 19 people agreed very little, 16 people agreed moderately, 11 people agreed very much, and only 4 people agreed completely. Of those who provided a response, 19 strongly agreed, 18 moderately agreed, 14 very slightly agreed, and 11 strongly disagreed with the suggestion of living in the same neighbourhood.

3.6. Evaluations on the Place of Substance Addicts in Work and Social Life

A total of 30 respondents indicated that individuals with substance addiction disorders

should not be permitted to work, while 23 respondents advocated for their acceptance in the workforce. A total of 16 individuals abstained from voting. The proportion of respondents who indicated that co-existence in the same social environment would not be problematic was 4%. Of those who provided a response, 16% strongly agreed, 33% moderately agreed, 31% slightly agreed, and 16% strongly disagreed. A total of five individuals expressed strong agreement with the assertion that individuals with substance use disorders are less likely to engage in criminal behaviour. Of these five individuals, ten indicated strong agreement, 26 indicated moderate agreement, 19 indicated very slight agreement, and nine indicated strong disagreement.

3.7. Evaluation of the Relationship Between Stigmatisation and Substance Abuse

The respondents who indicated a strong agreement with the statement that a person's status as a substance addict should not influence their behaviour towards that person included 20 individuals who strongly agreed, 21 who moderately agreed, 16 who very slightly agreed, and 5 who strongly disagreed. The number of respondents who strongly agreed with the statement that learning that someone from the family or the environment is addicted to substances does not humiliate the person was 11. The number of respondents who strongly agreed was 20, those who moderately agreed were 18, those who very slightly agreed were 14, and the number of respondents who strongly disagreed was 6. Of the respondents, 18 (26%) indicated that they strongly agreed with the proposition that individuals with substance use disorders should not be excluded from social interactions, while 7 (10%) expressed that they agreed with the idea of exclusion.

A total of 56 respondents indicated that they believe the orientation of substance-addicted individuals towards their goals and objectives will contribute positively to the treatment process. A total of 13 individuals indicated that they believe the impact will be neutral. The proportion of respondents who strongly agree that individuals with substance use disorders

can assume their responsibilities is 4%. The proportion who strongly agrees is 32%. The proportion who moderately agrees is 35%. The proportion who slightly agrees is 23%. The proportion who strongly disagrees is 6%. The proportion of respondents who strongly agreed, agreed, moderately agreed, and strongly disagreed with the statement "It is wrong to take a person's opinions seriously because he/she is a substance addict" was 17%, 20%, 17%, 23%, and 28%, respectively. While six respondents indicated that they completely agreed with the assertion that substance addicts may not exhibit aggressive behaviour, four respondents stated that they would, in fact, display such behaviour. A total of 30 individuals expressed strong agreement, 22 indicated moderate agreement, and seven indicated very slight agreement with the statement, "They may not always show aggressive behaviour."

In conclusion, 27 individuals expressed complete agreement, 27 individuals indicated strong agreement, eight individuals indicated moderate agreement, and seven individuals indicated slight agreement with the proposition that individuals with substance use disorders should be encouraged to seek treatment independently, but may be compelled to do so if their capacity to evaluate reality is compromised. No respondents indicated a strong disagreement with the statement.

4. DISCUSSION AND CONCLUSION

The study conducted on health personnel revealed that it may be challenging to assert that the thoughts and attitudes towards substanceaddicted individuals are inherently positive and constructive. This finding aligns with the existing literature (Sasman Kayli et al., 2020). Another noteworthy aspect of the research is the lack of interest among health personnel in pursuing careers in the field of substance addiction. It may be posited that the aforementioned situation is the result of stigmatisation of those afflicted by addiction and a perceived lack of benefit to be derived from treatment. A review indicated that between 20% and 50% of health personnel held negative attitudes towards substance addiction. However, this perception shifted positively

following training on addiction. Additionally, there were notable differences in behaviour and attitudes between personnel who interacted with individuals with substance use disorders and those who did not (Cazalis, Lambert and Auriacombe, 2023).

Inourstudy, the level of knowledge was evaluated, with only 20% of respondents indicating that it was very sufficient and 50% indicating that it was moderate. In a separate study conducted for physicians, 80% of respondents indicated that they believed training on substance use was important (Narasimha et al., 2022).

In the survey conducted among different segments of society, 48% of respondents indicated that they view substance addiction as a genuine medical condition. In the same survey, among respondents who disagreed that SUD was not a real disease, only 31% expressed willingness to cohabitate with a person with SUD, 20% asserted that individuals with SUD should be afforded the same right to employment as the general population, and 61% indicated concern regarding the potential dangers posed by such individuals. The group that considers substance use disorder (SUD) to be a genuine illness exhibits markedly disparate attitudes. Only 54% of respondents in this group were amenable to residing in the same neighbourhood as an individual with SUD, and only 59% concurred that individual with SUD should be entitled to gainful employment. Less than a third of respondents in this group believe that people with SUDs are dangerous (Lanzillotta-Rangeley et al., 2021).

In our research, the responses of the health personnel were found as follows: 30 people stated that substance addicted individuals should not be accepted to work and 23 people argued that they should be accepted to work. The number of respondents who completely agreed with the statement that addicted individuals may not show a tendency to commit crime was 5, the number of respondents who strongly agreed was 10, the number of respondents who moderately agreed was 26, the number of respondents who slightly agreed was 19 and the number of respondents who strongly disagreed was 9.

Mixed answers were given to the questions about stigmatisation. Emotions felt by health personnel may be in the form of uneasiness and feeling insecure. There are 7 people who completely agree, 20 people who strongly agree, 21 people who moderately agree, 18 people who very slightly agree and 5 people who strongly disagree with the statement that a person's substance addiction should not change the attitude towards him/her. Those who strongly agree with the statement that learning that someone from the family or the environment is addicted to substances does not humiliate the person are 11, those who strongly agree are 20, those who moderately agree are 18, those who very slightly agree are 14 and those who strongly disagree are 6. Those who strongly agreed that addicted people should not be excluded were 18 (26%), while those who agreed that they should be excluded were 7 (10%). Stigmatisation was consistent with the literature. People with substance addiction are stigmatised by both health personnel and society (Skinner et al., 2007; Van Boekel et al., 2013; Lanzillotta-Rangeley et al., 2021; Narasimha et al., 2022). The research findings on nurses emphasise the importance of regular training in preventing stigmatisation. This can lead to an improvement in the quality of healthcare services and a change in behaviours substance-addicted people negative to positive (Lanzillotta-Rangeley et al., 2020). A comparable outcome was observed in a study conducted in China. A total of 418 clinical staff were included in the study, which revealed that these individuals engage in the stigmatisation of substance users, a practice that has a detrimental impact on the treatment process for those struggling with addiction. It has been demonstrated that this situation has become more positive with the implementation of regular training programmes (Luo et al., 2019). A similar feature is observed in the research conducted in the USA. It was asserted that individuals who inject substances are subjected to stigmatisation and exclusion within pharmacies and clinics (Paquette, Syvertsen and Pollini, 2018).

A substantial body of research on stigmatisation and exclusion has been conducted in a number of countries, including the USA(Paquette, Syvertsen and Pollini, 2018; Carson, 2019; Bielenberg et al., 2021), China (Luo et al., 2019) and the Canada (Meyers et al., 2021). Our research findings are in alignment with those presented in the existing literature on this topic. Gunn et al. (2016) emphasise the role of policy and societal norms in perpetuating social stigma, which in turn discourages individuals with OUD from seeking treatment. The study was conducted on Russian immigrants residing in the USA, and the researchers observed that disparate attitudes towards excessive alcohol consumption and substance abuse were shaped by cultural norms that were influenced by past Soviet policies (Gunn and Guarino, 2016).

The study conducted by Bearnot (2019) emphasised that stigmatisation and discrimination represent significant barriers to the provision of care for individuals with opioid use disorder (OUD). As reported by both patients and healthcare providers, this resulted in delayed care and discriminatory treatment. The participants indicated that they were perceived as "second-class citizens" by the healthcare providers when seeking treatment, which had a detrimental impact on their decision to seek medical assistance (Bearnot et al., 2019).

Hewell et al. (2017) emphasised the detrimental impact of negative community perceptions of individuals engaged in long-term opioid use disorder (MOUD) treatment on their prospects for sustained recovery. The participants indicated that the stigmatisation they experienced impeded their ability to advance in their treatment processes (Hewell, Vasquez and Rivkin, 2017).

Hatcher and colleagues (2018) discussed the impact of socio-economic status and ethnicity on the social needs of individuals seeking treatment for opioid use disorder (OUD) and emphasised the importance of these factors in improving medication adherence and treatment outcomes (Hatcher, Mendoza and Hansen, 2018).

It was highlighted that the 150 doctors participating in another study held disparate views regarding individuals with substance abuse disorders (Narasimha et al., 2022). Prior

research indicates that the many of medical professionals espouse the view that individuals with substance use disorders (SUD) are deserving of the same level of medical care. However, they also adhere to the notion that personal responsibility is a primary contributing factor to the development of SUD. Furthermore, they posit that unfavourable living conditions may also bear some responsibility. However, they expressed considerable exasperation and moderate indignation towards substance users (Linn, Yager and Leake, 1990).

In conclusion, the findings of this study indicate that negative attitudes, stigma and exclusionary practices directed towards individuals with substance use disorders may have a detrimental impact on those seeking treatment and those attempting to cease substance use. In order to overcome this situation, it is essential to minimise negative attitudes and thoughts, raise awareness, and encourage the performance of supportive behaviours for individuals seeking to overcome addiction. For this awareness, it may be important for both health personnel and all segments of the society to receive awareness training. Trainings that can be given to combat addiction can be done in cooperation with nongovernmental organisations, health institutions and universities with a multidisciplinary approach.

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