

An Online Stigma Reduction Education Program For Healthcare Workers Working With People Who Inject Drugs: Development & Pilot Testing

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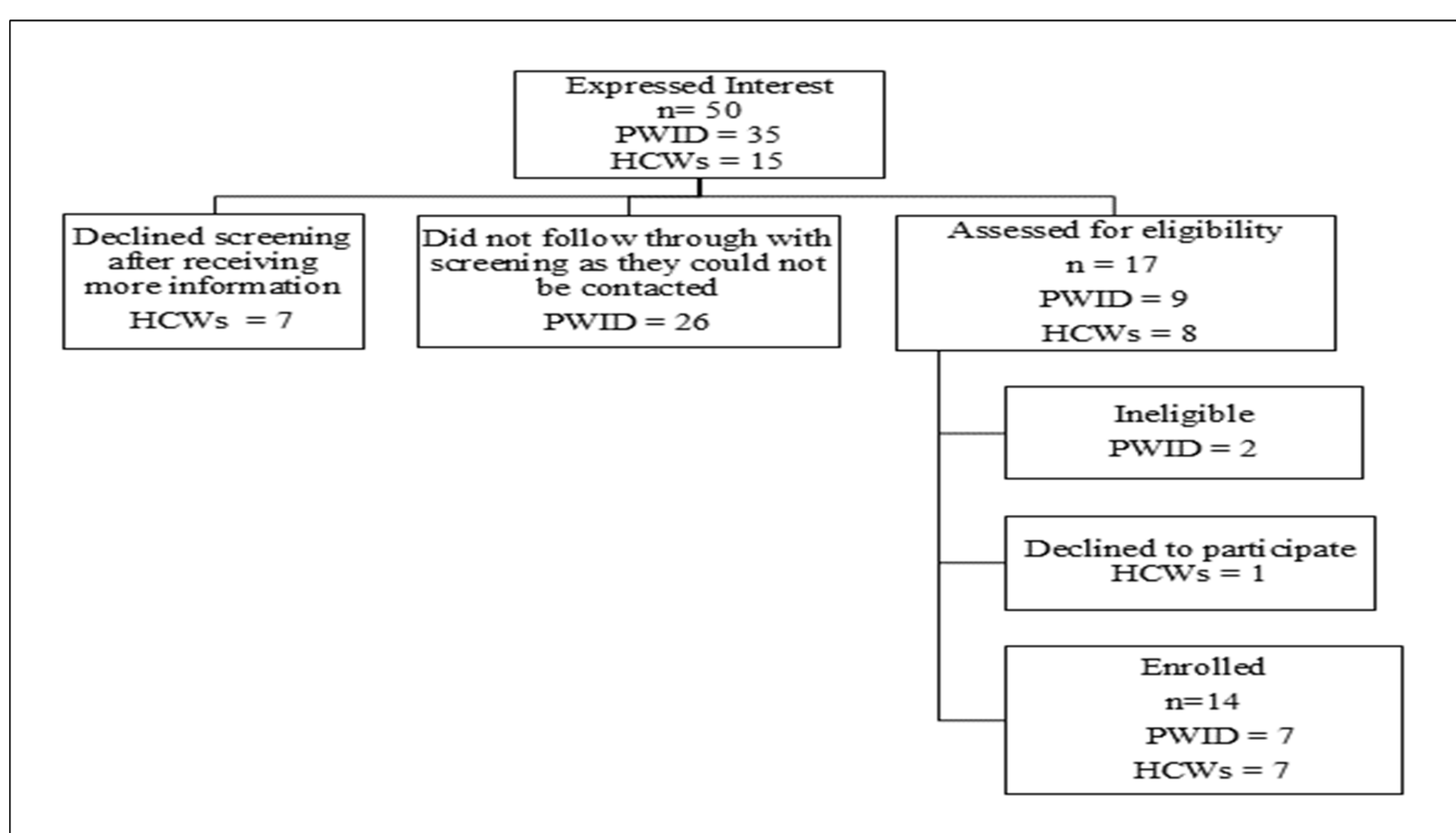
Background

- Health-related stigma and discrimination are major barriers to healthcare access for people who inject drugs (PWID).
- PWID often experience stigma when seeking treatment for skin and soft tissue infections (SSTI).
- Stigma reduction education for healthcare workers may improve care and health outcomes for PWID.

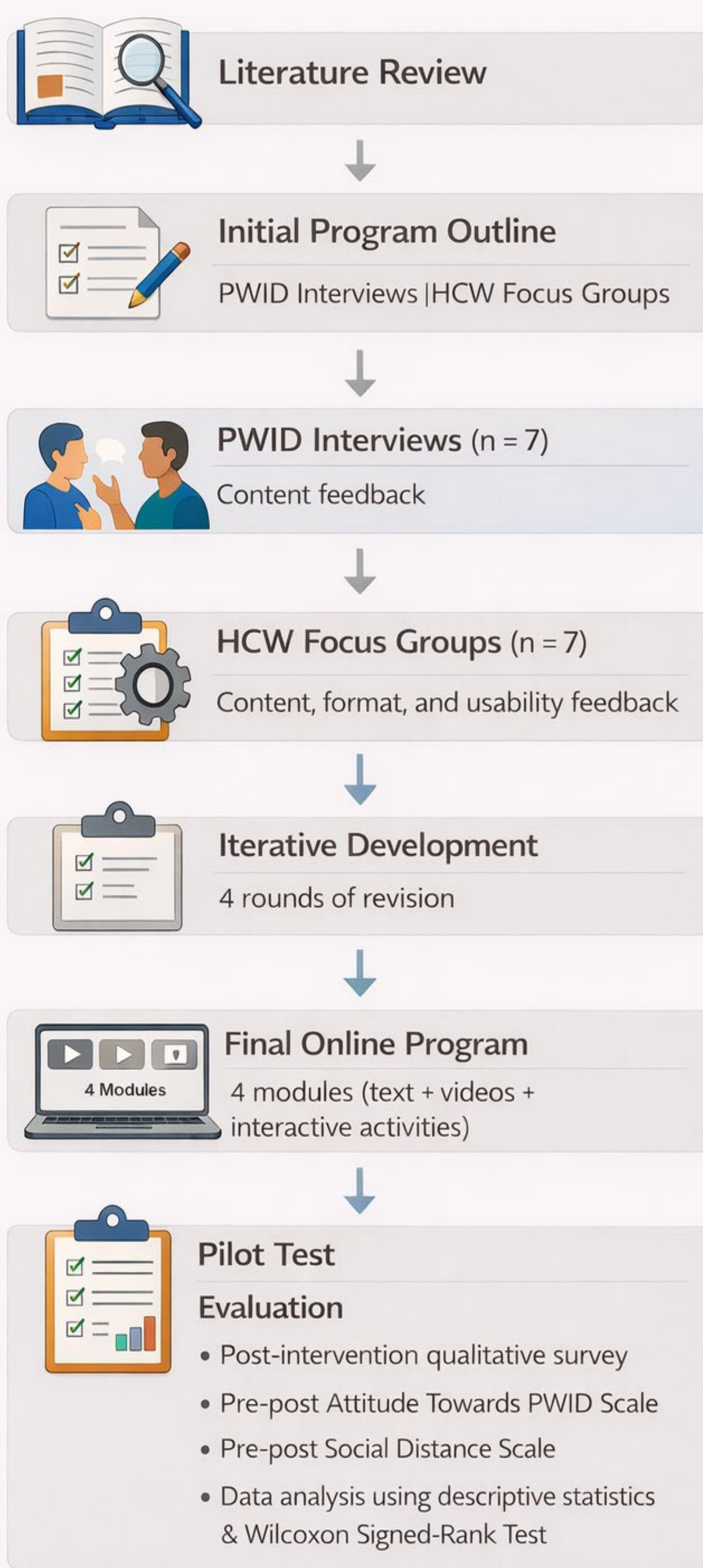
Objective

To develop and pilot test an online stigma reduction education program for healthcare workers caring for PWID with SSTI.

Program Development Process & Timeline

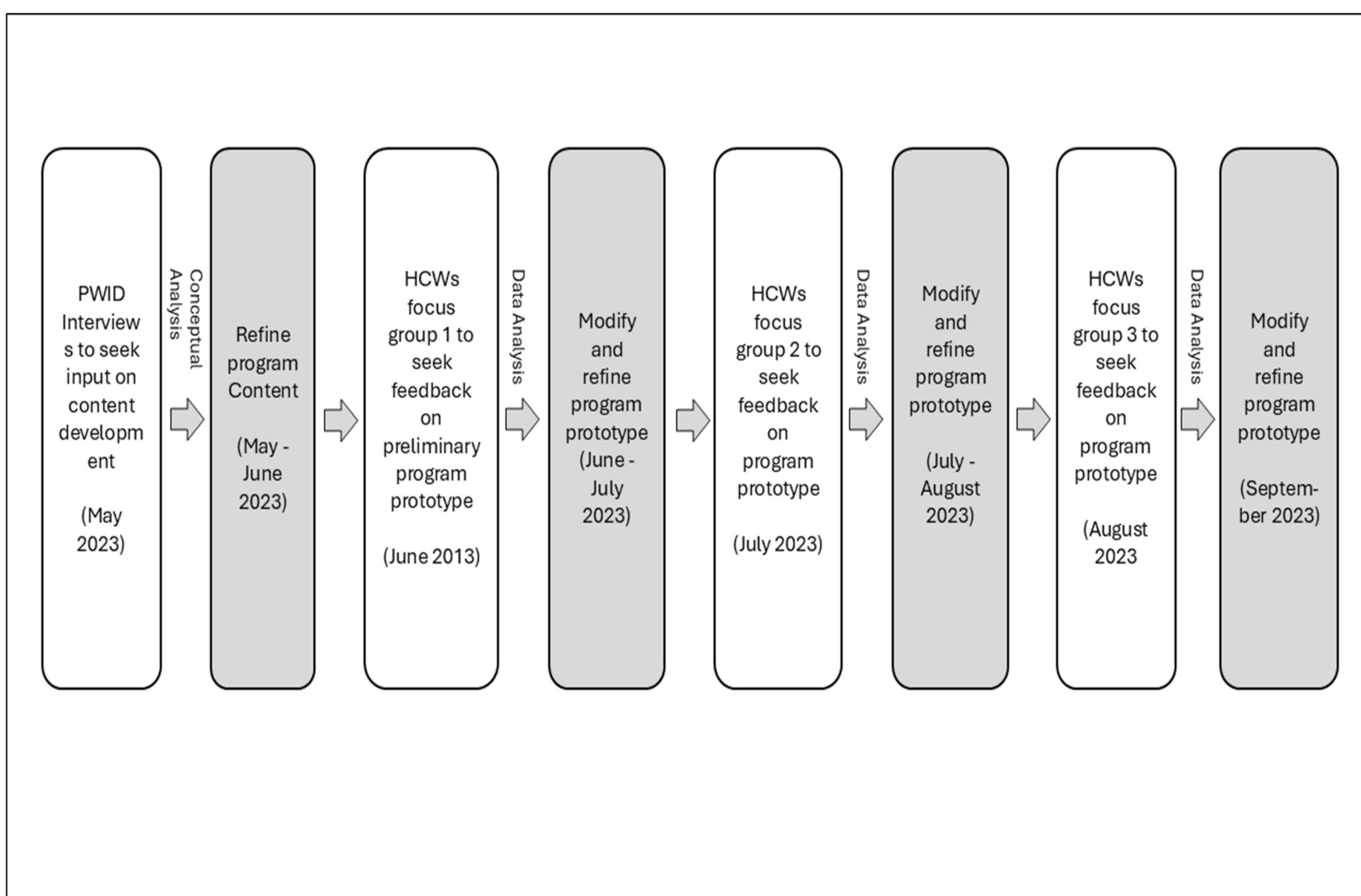


Method



Results

Domain	Median	IQR	Range			
System Usability and information quality						
Ease of navigation	7	0.6	6–7			
Ease of use	7	0.7	6–7			
Comfort using the system	7	0.7	6–7			
Effectiveness of the program	7	0.7	6–7			
Ease of finding information	7	0.8	5–7			
Ease of completing activities	7	0.8	5–7			
Ease of understanding information	7	0.5	6–7			
Effectiveness of the information	7	0.5	6–7			
Organization of information	7	0.5	6–7			
Overall system satisfaction	7	0.6	6–7			
Content						
Relevance and applicability to role	6.4	0.7	6–7			
Confidence applying the content	6.5	0.7	6–7			
Intention to use gained knowledge	7	0.69	6–7			
	Median	Interquartile Range	Range			
Attitude towards PWID scale	Pre	Post	Pre	Post	Pre	Post
	3.5	2.5	1.1	0.9	2.6	2.1
Social distance scale	Pre	Post	Pre	Post	Pre	Post
	8.4	1.3	2.0	1.1	4.5	2.5



- Interviews with PWIDs and HCW focus groups identified stigma as a key barrier to care, informing the development of an online program with four modules covering stigma, harm reduction, and SSTI care — designed to be accessible, concise, and engaging through text, videos, and interactive elements.
- The pilot test achieved 100% module completion and retention, with participants rating the program highly for usability, relevance, applicability, and ease of navigation.
- Pre–post results showed significant improvements in both the Attitudes Towards PWID Scale and Social Distance Scale ($p < 0.001$), suggesting the program is feasible, well-accepted, and promising as a stigma-reduction intervention for healthcare workers.

Conclusion and Next Steps

The program was co-developed with PWID and HCWs and demonstrated preliminary effectiveness in reducing stigma and improving attitudes towards PWID among HCWs. Future research should include larger controlled studies and extended follow-up periods to assess sustained attitudinal and practice-level changes.