

## **Improving pharmacists' provision of naloxone through a campaign to normalise the conversation of opioid overdose**

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**Introduction and Aims:** Illicit and prescription opioid use, dependence, and overdose are increasing at a staggering pace. Fatalities due to opioid overdose are preventable with the administration of naloxone. Despite Commonwealth funding for the naloxone provision, uptake of the program by pharmacists has been poor.

This study aimed to increase the distribution of naloxone by addressing the gap between the evidence of naloxone's effectiveness and its implementation into community pharmacists' practice. Specifically the objectives were to test the effectiveness of communication campaign to (i) improve pharmacists' knowledge, attitudes, and perception of feasibility, acceptability and appropriateness of naloxone provision, and (ii) increase pharmacists' skills, confidence, intentions and behaviour in relation to naloxone provision.

**Design and Methods:** A communication campaign targeting Western Australian pharmacists, consisting of a short video, an infographic, and links to educational resources, was developed through a participatory process. Pre-post analyses were conducted using paired samples t-tests.

**Results:** In total, 183 pharmacists (62% female) completed the pre and post surveys. The sample included pharmacists working in a range of pharmacy roles and pharmacy types, with varied years of pharmacy experience. After viewing the video, participants showed a significant ( $p < 0.05$ ) increase in skills and confidence to educate on naloxone, and perception of feasibility, appropriateness, and intentions to provide naloxone. There was no change in attitudes, knowledge and behaviour.

**Discussions and Conclusions:** A simple communication campaign directly targeting identified implementation barriers has the ability to improve key influences in the provision of Take Home Naloxone.

**Implications for Practice or Policy:** Funding for program implementation is imperative to address the barriers for program uptake.

**Implications for Translational Research:** Barriers exist for the scale-up of Take Home Naloxone. Further implementation research to investigate and address these multilevel barriers across the multiphasic implementation process is needed.

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