

HIV Care Provider Tip Sheet

Compassionate Care for Patients with HIV and Opioid Use Disorder

Evidence-based strategies to reduce stigma, improve engagement, and optimize outcomes

Why This Matters

- People with HIV and people with opioid use disorder (OUD) frequently experience stigma that delays testing, treatment, and retention in care.
- Integrated HIV and OUD treatment improves viral suppression, treatment retention, and overall quality of life.
- Every clinical interaction is an opportunity to strengthen trust and reduce barriers to care.

Use Person-First, Affirming Language

Avoid	Preferred
Addict / Abuser	Person with OUD
Clean / Dirty	Negative / Positive test
Drug abuse	Substance use
Relapse	Return to use / recurrence
Medication-assisted treatment	Medications for opioid use disorder (MOUD)

Communication Pearls

- Start with: "How can I help you today?"
- Use open-ended questions and reflective listening.
- Avoid assumptions about adherence, motivation, or readiness for change.
- Thank patients for sharing sensitive information.
- Recognize recovery is not linear.

Clinical Actions

- Screen routinely for HIV, viral hepatitis, substance use, mental health, and overdose risk.
- Offer or refer for medications for opioid use disorder (MOUD; buprenorphine, methadone, or extended-release naltrexone).
- Prescribe or dispense naloxone whenever appropriate.
- Provide linkages to overdose prevention services.
- Coordinate HIV, behavioral health, and social support services.

MOUD at a Glance

Medication	Key Features	Clinical Note
Buprenorphine	Partial agonist	Office-based; reduces cravings/withdrawal
Methadone	Full agonist	Highly effective; OTP dispensing
Extended-release Naltrexone	Antagonist	Requires opioid-free period before initiation

Quick Reminders

- Stigma is a clinical barrier—not a patient characteristic.
- Low-barrier, patient-centered care improves engagement.
- MOUD is the gold standard treatment for OUD.
- Overdose prevention, MOUD, and HIV prevention complement one another.
- Compassion and respect improve outcomes.

Provider Checklist

- ☐ Use person-first language.
- ☐ Ask permission before discussing substance use.
- ☐ Assess readiness for change.
- ☐ Offer HIV prevention or treatment services.
- ☐ Offer MOUD or referral.
- ☐ Provide naloxone and overdose education.
- ☐ Schedule follow-up before the patient leaves.

Resources

- HIV.gov: <https://www.hiv.gov/>
- Centers for Disease Control and Prevention: <https://www.cdc.gov/hiv/index.html>
- Substance Abuse and Mental Health Services Administration: <https://www.samhsa.gov/substance-use/treatment/options>
- Get Naloxone Now: <https://getnaloxonenow.org>
- Recovery Research Institute Addictionary: <https://www.recoveryanswers.org/addiction-ary/>
- Shatterproof: <https://www.shatterproof.org/>

Adapted from: Changing Minds, Changing Systems: Promoting Compassionate Care for Opioid Use Disorder and HIV (Pacific AIDS Education and Training Center (PAETC) and Pacific Southwest Addiction Technology Transfer Center (PSATTC)).