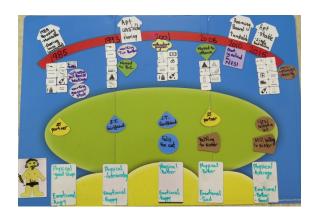


# An Infosheet for Service Providers: Findings from the Life Story Board Study From The Participatory Research in Ottawa: Understanding Drugs (PROUD) Research Team

#### Study objectives:

- 1) To evaluate the Vidaview Life Story Board<sup>TM</sup> as a qualitative interview tool with PWID in a community-based research setting
- 2) To assess the conceptualization of harm reduction and use of harm reduction practices among people who inject drugs (PWID) in Ottawa





## Socio-demographic portrait of 23 participants:

- 14 men, 9 women
- Mean age = 49 years
- Mean length of time injecting drugs = 25 years
- 75% lived in Centretown, Downtown or Lowertown
- 62% lived in an apartment or house
- 67% considered their housing to be stable

#### The Life Story Board findings:

- Participants thoroughly enjoyed participating in the study, partly because they were interviewed by people with lived experiences of drug use which allowed the following:
  - Validation of the use of harm reduction practices
  - Relating to personal experiences and not feeling judged
  - Enhanced sharing and learning (knowledge exchange)
- Participants considered the Life Story Board to be useful for the following reasons:
  - Helped jog memory
  - Enabled staying on track
  - Transparency

#### Harm Reduction findings:

#### 1) What is the relationship of PWID to harm reduction?

• Participants' motivations for using harm reduction went beyond concerns about their health to include:



- o Maintaining relationships with loved ones
- o A desire for self-improvement

### 2) What types of strategies do PWID use to reduce harm in their daily lives?

- Community health and social services
  - Community Health Centres were highlighted
  - o Used to get gear, housing support, counselling, information, medical care, etc.
  - o Reasons why participants used these services included to:
    - Obtain moral support and positive social interaction from staff
    - Have a safe space and connection to the community at drop-in rooms
- Self-management practices
  - o Moderation
  - Involvement or engagement in community
  - o Cognitive strategies, such as increasing self-awareness or reflection
  - o Behavioural strategies, such as getting out of house or staying active
  - Replacing one drug with another drug that the individual considers is less detrimental to their daily functioning
  - Modifying prescription instructions to suit everyday needs
  - o Hiding drug use from other people

## 3) What do PWID consider to be barriers to using harm reduction?

- Discrimination and stigmatization feeling judged, disrespected, rejected
- Rigid criteria prevalent for opioid replacement therapy (mainly methadone), mental health services, accommodations
- Lack of awareness or misinformation sometimes thought gear was the only service

#### 4) What do PWID consider to be facilitators for using harm reduction?

- Peer support receiving support from people with lived experiences was most helpful, and it was the most common way that PWID learned about harm reduction
- Continuity of care development of relationships with specific service providers
- Gaining self-efficacy occurred through improving appearance, getting education or skills, reconnecting with family, making positive change in the community, etc.

#### <u>Suggestions to improve services and supports include:</u>

- More peer support having safe and informal spaces to talk about harm reduction would be beneficial (such as the environment created within this study)
- More awareness and accessibility service providers should have access to and share information about services available internally and externally to their organization
- More opportunities to get involved and engaged in community activities, especially those aimed at helping people who use drugs or other marginalized populations
- More education and training for life and transferable skills people who use drugs want to learn how to do things for themselves, rather than have someone do things for them
- More involvement in own care, including the planning/implementing of services for people who use drugs, while keeping in mind that "one size does not fit all"