

Pathways to Care for People Who Use Drugs: Equipping Health Care to Tackle Stigma, Discrimination and Inequity

Project Summary

EQUIP Health Care will partner with people with lived experience of drug use stigma (PWLEDUS), and people who provide health care services to them, to develop better pathways to care. People who use drugs (PWUD) face significant stigma and discrimination. Because trauma, violence and chronic pain are often intertwined with substance use (SU) and mental health issues, SU stigma is often deeply entwined with mental health stigma. Structural violence and inequities (systemic racism, poverty) disproportionately impact PWUD. Not surprisingly, these intersecting forms of stigma, discrimination and structural barriers prevent accessible and effective service delivery. Specific groups, such as women and trans* people experiencing violence, Indigenous people, people using stimulants and/or injecting, people doing sex work, and those living in poverty, endure the most SU stigma and the greatest barriers to effective and appropriate health care.

We will improve pathways to care for PWUD by: a) examining how to effectively engage PWLEDUS, including people actively using, and the possible processes required to foster meaningful input from PWLEDUS; and b) developing tools and resources to effectively support organizations and health care providers in serving PWUD. We will begin with a scoping review of evidence and best practice regarding engagement of PWLEDUS. Despite frequent calls for robust engagement with those with lived/living experience, the assumptions underpinning these calls, and the extent to which engagement “works”, both for PWLEDUS and for program/policy development, has not been examined. Drawing on literature related to engagement more generally, the review will identify evidence about strategies, outcomes and measures for engaging PWLEDUS. This will inform enhancement and scale up of EQUIP Health Care with and for PWLEDUS and those serving them.

EQUIP is an evidence-based, theoretically-informed complex intervention to reduce health inequities at the point of care. It aligns with the quadruple aim of health system optimization: improved population health, enhanced patient experiences and outcomes, reduced costs, and improved staff work life. We frame health equity as a social justice goal to foster the absence of unjust, systematic and avoidable differences in health status and determinants of health between groups.

EQUIP articulates three key dimensions of equity-oriented health care: Culturally Safe Care (mitigating the harms of inequitable power relations, racism, and discrimination on health and health care), Trauma- and Violence-Informed Care [TVIC] (creating safe, respectful and person-centred care by understanding the impacts of structural and interpersonal violence), and Harm Reduction (a philosophy and approach to practice that mitigates harms, including those from inequities related to SU and from historical, socio-cultural and political determinants of health).

Through this project we will develop a) a process for effective, meaningful engagement with PWLEDUS; b) enhanced EQUIP resources for PWUD, c) a plan for ongoing development, scale up, sustainability and measurement of EQUIP, including considerations for translation into French and d) an e-learning curriculum tailored to PWUD.

Our partners in two provinces include health care organizations serving PWUD, organizations with provincial scope to address improving system-level equity in health care, an organization of and for PWLEDUS, and researchers with expertise in equity, violence, trauma, stigma and substance use.