

Youth Injection Prevention (YIP) Project: Summary of Key Findings

The purpose of this study was to obtain the street-involved youth perspective on risk and resiliency factors associated with transitioning into injection drug use (IDU). Fifteen interviews and ten focus groups were conducted with a total of 60 street-involved youth age 15-24 in the Metro Vancouver area of British Columbia between November 2009 and April 2010. Youth participants identified risk factors, resiliency (protective) factors, gender influences associated with the transition into IDU and service design recommendations for prevention.

Factors
Risk Factors
<ul style="list-style-type: none">• Boredom• Peer pressure• Curiosity and experimentation• Social isolation• Drug availability and pricing• Stigma related to IDU• Family drug use• Street involvement
Resiliency (Protective) Factors
<ul style="list-style-type: none">• Concerns for health and self-image• Fear of needles• Desire for a better life• Responsibility of others• Family drug use• Values (<i>Goals, Self-Worth, Will power</i>)• Support from others (<i>community involvement, cultural & associated identity, positive role models</i>)

Gender and/or Sexual Orientation Influences
<ul style="list-style-type: none">• Female and LGBT youth transition into IDU more likely to be associated with involvement in sex work• Females more likely to be offered drugs and be doctored by males• Males more likely to be influenced by peer pressure
Youth Service Design Recommendations
<ul style="list-style-type: none">• Involvement of experimental youth• Low-barrier services• Non-judgmental services• Provide opportunities to build capacity relationships, self-worth and trust• Targeted community-specific interventions• Youth input in service design• Youth-specific services

QUOTES

1) Risk Factors:

Boredom-

"If you've got nothing to do and you've used before 'cause you wanted to see what it was like... That [IDU] alleviates boredom and it's easy to do...Especially if you don't have much money it's really hard to find things to do." –Interview #2

Drug Availability and pricing/ Peer pressure-

"I never knew anyone. I never hung around anyone that injected...I came to Vancouver, it's like, everywhere you go everyone's injecting, like, that's all they do." –Participant #5, Focus Group #3

Family drug use-

"My mom used drugs...Basically everybody in my family has been addicted to some sort of drug. My grandparents are alcoholics." –Interview #4

Social isolation/ Stigma related to IDU-

"Fills the void...I just feel like a social outcast...Before I injected, like, I had a hundred friends...Once I started I lost everybody and everything." –Interview#3

Street involvement and homelessness/ Boredom-

"If you're on the street and when you are sober...All you can think about is using again and feeling okay again... You're on the street... Anything can happen. Easier to get bored. Cold...Drugs keep you warm, at first at least." –Interview #2

QUOTES

2) Resiliency (Protective) Factors:

Concerns for health and self-image-

"I don't inject because I don't want to catch anything...If I was to fix I would be worried about catching HIV, Hep C, all that kind of stuff." –Participant #4, Focus Group #1

Desire for a better life/ Values-

"I think I can be better...I want to go back to school and go to try keep busy and stay off it...My family, they can support me and stuff and I think I'm strong." –Interview#1

Family drug use-

"I wouldn't use injection drugs because that's how my mom and my grandma and my auties died." –Participant #1, Focus Group #1

Fear of needles-

"I don't like needles. I don't like blood work...I don't like needles period. So why would I want to inject myself?" –Participant #3, Focus Group #2

Responsibility of others-

"Her kids is the only thing that's really, like, making her want to quit...She wants to be a mother again." –Participant #4, Focus Group #7

Support-

"For me it was my culture. Growing up on reserve...Sad to see a lot of my friend into that stuff and my culture really helped me through." –Participant #3, Focus Group #8

Support-

"For me it was watching my elders and listening to their stories of what's been goig on... Learn from others' mistakes... Try not to go the same path as others." –Participant #3, Focus group #9

QUOTES

3) Gender and/or Sexual Orientation Influences:

Female and LGBT youth transition into IDU more likely to be associated with involvement in sex work-

"So the guys smoke it to be cool and girls all shoot it 'cause they're all fucking emotionally scarred from having to fuck people." - Interview #3

Females more likely to be offered drugs and be doctored by males-

"Any gender that is, seems to be with or like influenced by males, like in relationships or whatever sexually wise, it seems to me, they're the ones that smash more." – Participant #2, Focus Group #3

Males more likely to be influenced by peer pressure-

"A lot of time, like, guys won't let chicks shoot up because they see them as more vulnerable or sensitive whereas guys like might get pressured to shoot up because somebody will be like, 'oh what are you, a pussy?' " – Participant #3, Focus Group #1

QUOTES

4) Youth Service Design Recommendations:

Involvement of experimental youth-

"There's no youth-to-youth based-outreach, but like kids like us...A lot of it's fucking adults that have just spent four years in school learning about people like this.- Participant #3, Focus Group #1

Low-barrier services

"Homeless at the time. I came in here. They're not supposed to let me stay. They let me stay...Somewhere to eat. Someone to talk to...If I didn't have that, I don't know where the hell I would be." - Participant #2, Focus Group #3

Non-judgmental services-

"When a service is judgmental towards you .it's going to stop you from going to that service...They judge you if you're an addict. They treat you like garbage." - Participant #1, Focus Group #5

Youth-specific services-

"Figure out what the youth want...It's got to constantly evolve and it's got to be from the people you're trying to help. And it's got to be done where they're at. Not where you want them." - Participant #5, Focus Group #8