The Youth Injection Prevention (YIP) Project: At-Risk Youth Share Perspectives with Youth Co-Researchers on Preventing the Transition into Injection Drug Use

N. Van Borek¹, L. Coser², YIP Co-Researchers¹, M. Botnick¹, D. Taylor^{1, 3}, E. Saewyc^{3,4}, J.A. Buxton^{1, 3}

¹ British Columbia Centre for Disease Control, Vancouver, British Columbia, Canada ² Simon Fraser University, Burnaby, British Columbia, Canada ³ University of British Columbia, Vancouver, British Columbia, Canada

ABSTRACT

From 2002 to 2008, 30% of newly diagnosed HIV cases in BC identified injection drug use as the major risk factor; with 20% of all HIV cases reported in persons aged 15-29 years¹. The Youth Injection Prevention (YIP) Project is a collaborative study between the UBC School of Population and Public Health, UBC School of Nursing, BC Centre for Disease Control, community partners and youth-co-researchers that focuses on identifying resiliency factors associated with preventing the transition into injection drug use (IDU) among at-risk streetinvolved youth aged 15-24 in Metro Vancouver, British Columbia. Preliminary results from indepth interviews (n=20) and focus groups (n=10) with injecting and non-injecting at-risk streetinvolved youth will be presented. Domain analysis identified the following: 1) factors that influence why youth choose not to inject; 2) factors that influence why youth stop injecting and; 3) recommendations for prevention services. Factors that influence youth to choose not to inject include: fear of needles, negative health consequences, not knowing how to inject, parental injection drug use, physical effects on behaviour and physical appearance, social stigma and willpower. Factors that influence youth that have transitioned to stop injecting include: change in behaviour and physical appearance, economics, experience of health consequences, housing, negative injection experiences, responsibility for others, social stigma, support and wanting a better life. Recommendations for prevention services include: awareness campaigns of available youth services, early school-based IDU education, low-barrier services, recreational activities, peer outreach with experiential youth and youth-friendly safe spaces. It is anticipated that the results of this study will inform community-level, evidence-based, youth-driven intervention strategies that intend to prevent the transition into IDU and/or reduce the harms associated with IDU, while promoting resiliency among at-risk youth.

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