Service Providers' Perspectives on Preventing the Transition into Injection Drug Use among Street-Involved Youth: Successes, Barriers and Opportunities

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ABSTRACT

The 'Preventing the Transition of At-Risk Youth into Injection Drug Use' study is a collaborative research project between the UBC School of Population and Public Health, UBC School of Nursing, BC Centre for Disease Control and our community partners. The project is divided into four phases. The purpose of phase II of project is to identify service provider's perspectives on successes, barriers and opportunities in the provision of service delivery to prevent the transition into injection drug use (IDU) among street-involved youth aged 15-24 in Metro Vancouver, British Columbia. Preliminary results from phase II will be presented. Twenty-four in-depth, semi-structured interviews were conducted with service providers who work with street-involved youth from January-June 2009 in Metro Vancouver, British Columbia. Participants were recruited through purposive and snowball sampling. Audio recordings and field notes from interviews were transcribed verbatim and analyzed using NVivo 8 qualitative software by three members of the research team in order to ensure interrater reliability. Thematic analysis identified three main threads: service components, barriers, and gaps and recommendations. Preliminary findings suggest: (i) service components that attract and engage youth include consistency, non-judgemental policies, capacity and relationship building, peer education and recreational activities; (ii) barriers that prevent youth from connecting with services include abstinence based-programming, age restrictions, limited hours and staffing, perceived discrimination by race and gender, geography (iii) gaps and recommendations include alternative educational models, early parenting interventions, increased availability of youth specific housing, detox and treatment, ongoing support for transitioning out and back into community, prevention, harm reduction and education services appropriately designed for developmental stages and marginalized groups of youth. Results of this study will inform youth-driven, community-based, evidence-informed intervention strategies that aim to prevent the transition into IDU and/or reduce the harms associated with injecting among street-involved at-risk youth.

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