Service Provider's Perspectives: Risk and Resiliency Factors for Injection Drug Use Initiation among At-Risk Youth

C. Chambers[1,2], N. Van Borek[1], N. Angus[1,3], D. Taylor[1,2], E. Saewyc[2,4], J. Buxton[1,2]
[1] British Columbia Centre for Disease Control, Vancouver, British Columbia, Canada
[2] University of British Columbia, Vancouver, British Columbia, Canada
[3] University of Saskatchewan, Saskatoon, Saskatchewan, Canada
[4] The McCreary Centre Society, Vancouver, British Columbia, Canada

ABSTRACT

The purpose of this study was to obtain service providers' perspectives regarding the risk and resiliency factors associated with the transition into injection drug use (IDU) among street-involved youth. Sixteen in-depth, semi-structured interviews were conducted with service providers who work with street-involved youth between January and May 2009 in Metro Vancouver, British Columbia. Domain analysis was conducted to identify three main threads related to IDU initiation: perceived risk and resiliency factors, perceived gender differences, and perceived risk behaviours. Six main themes emerged from the transcripts: (i) *social influences* from peer groups; youth initiate IDU simply because their friends use; (ii) *cultural influences* from the normalization of IDU in the street community; (iii) *structural influences* from the lack of safe, affordable housing and the availability and cost of drugs on the street; (iv) *family history* affecting youth through violence, abuse, and neglect as well as parental drug use; (v) *individual-level factors* such as the development of tolerance and addiction to non-injection drugs; and (vi) *gender differences* related to traditional gender roles and how they contribute to youths' vulnerabilities on the street. The results of this study will inform evidence-based, youth-driven intervention strategies, which aim to prevent the transition into IDU among at-risk youth. Our findings suggest that these strategies should incorporate youth input and focus on the social structural influences around IDU initiation in conjunction with individual-level change. These strategies should adopt a dual strategy of reducing environmental risk factors for IDU initiation, while promoting resiliency among marginalized youth.