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# Background: A Deficit-Based Approach to Research Among People Who Inject Drugs

- Nearly exclusive focus on harms, risks, and vulnerabilities
- Perpetuates stigma and discrimination
- Limits capacity of programs to recognize or build upon unique strengths



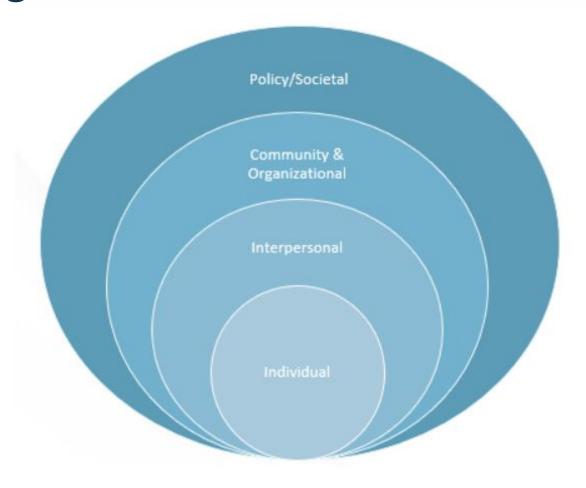
#### **Background & Objectives**

- Resilience is the process of negotiating, managing, and adapting to significant sources of stress or trauma. Assets and resources within the individual, their life, and environment facilitate this capacity for adaptation and 'bouncing back' in the face of adversity. 1
- Can protect against negative impacts of violence and trauma<sup>2</sup>
- Research on resilience among PWID is scarce and limited to individual-level factors<sup>3</sup>
- Sought to examine multilevel resilience and strengths-based responses to stressors (any traumatic event or experience) among PWID

- 1. Windle G. What is resilience? A review and concept analysis. *Reviews in Clinical Gerontology*. 2011;21:152-169. doi:10.1017/S0959259810000420
- 2. Anderson KM, Renner LM, Danis FS. Recovery: resilience and growth in the aftermath of domestic violence. *Violence Against Women*. 2012;18(11):1279-1299.
- Rudzinski, K., McDonough, P., Gartner, R., & Strike, C. Is there room for resilience? A scoping review and critique of substance use literature and its utilization of the concept of resilience. Substance Abuse Treatment, Prevention, and Policy. 2017;12(1):1-35.



#### The Socio-Ecologic Model



Source: Adapted from Bronfenbrenner, U. (1979). The ecology of human development. Cambridge, MA: Harvard University Press.



#### **Study Design/Methods**

- Coping And Resilience Experiences (CARE)
   Study
- Inclusion criteria:
  - 1) injection drug use in the past six months, 2) age 18+, 3) lifetime traumatic experience(s)
- Sample comprised of N=22 PWID
- Compensated \$50/interview
- N=13 participants completed a follow-up interview
  - Focus on "moving forward," "not giving up," and "bouncing back"

Characteristic	N (%)
Sex Male Female	13 (59%) 9 (41%)
Race Black White	13 (59%) 9 (41%)
Age Range	24-69, median 43
Housing status Unsheltered homelessness Recovery program Privately housed	1 (5%) 10 (45%) 11 (50%)
Completed FU Yes No	13 (59%) 9 (41%)



## **CARE Study Results: Individual-level**

Level	Mechanism	Resilience Factor
Individual	Cognitive	<ul> <li>Engaging a positive outlook</li> <li>Mindfulness techniques</li> <li>Self reliance</li> <li>Future orientation</li> <li>Motivation to succeed for others</li> <li>Belief in a Higher Power</li> </ul>
	Emotional	<ul> <li>Positive sense of self through serving as a support to others</li> <li>Unconditional love</li> <li>Feeling of not being judged/ stigmatized</li> <li>Physical and emotional safety</li> </ul>
	Behavioral	<ul> <li>Hobbies/ leisure activities</li> <li>Learning</li> <li>Action to ensure physical/drug use safety</li> <li>Exercise</li> <li>Self care</li> </ul>



"I guess growing up being told by my mother that I was never going to be nothing and I was never going to amount to nothing. I was a piece of shit. I shouldn't have been born. Da da da da. I want to prove everybody wrong. And I'm one of the ones that wants to say, 'Ha ha. I told you I would'"

40-year-old white woman(Individual-level, cognitive)

 40-year-old white male (Individual-level, emotional)

"My wife always asks me, 'Why you watch documentaries so much?' I say, 'That's what helped me get out of prison. I like to learn.' She said, 'You got too much knowledge.' I said, 'No, you can never have too much knowledge.'"

54-year-old Black male (Individual-level, behavioral)

"A lot of times I feel like I want to help, because there's a lot of people in here that are going through what I went through, and I want to explain to them that it does get better. Because I think a lot of them think it will never get better. I got three of them in there [treatment program] that I went and got myself. And they're still doing good. That feels good."

## **CARE Study Results: Interpersonal-level**

Level	Mechanism	Resilience Factor
Interpersonal	Social	<ul><li>Social Support</li><li>Parental Influence</li><li>Trusted Professionals</li><li>Similar Others</li></ul>



"I ain't going to let nothing keep me down. I was brought up like that. If you fall down, get yourself up and keep on going, keep trying to accomplish what you need to accomplish... I used to watch my father. He said if a door close in front of him, he found another way to get into that door or go another route. He going to keep going until he gets what he wants."

-- 51-year-old Black man (Interpersonal-level, parental influence)

- 30-year-old white woman (Interpersonal-level, similar others)

"I've been able to get to know a lot of people who have been through similar things. And it's really helped to know that I'm not the only one that's been through hell and made it out, because I used to feel like there wasn't anybody who had gone through anything quite so terrible and been able to get clean and stay that way. And it's really helped me to know that it can be done. And that it is done every day."



## **CARE Study Results: External-level**

Level	Mechanism	Resilience Factor
External	Community	<ul> <li>AA/NA</li> <li>Smart Recovery programs</li> <li>Community Services</li> <li>Harm Reduction Organizations</li> </ul>
	Structural	<ul> <li>Government phones</li> <li>Transportation services</li> <li>Food Stamps/ Financial Asst. Programs</li> <li>Accessibility of Medications for Opioid Use Disorder</li> <li>Grant programs</li> <li>Housing</li> </ul>
	Place-based	Safe spaces



"So I applied for this apartment where I really wanted to live up in a better neighborhood.

Once I turned 62, they called me immediately.

So I got in there within two months."

– 62 year-old Black man(External-level, structural)

40-year-old Black woman
 External-level, place-based

"Like I say, just somewhere a space by myself. I feel safe and calm someplace where I can go in and I can lock the door and I know that no one's going to be able to come in, and I can close my eyes and I don't have to look over my shoulder."



### Conclusions

- Call for a strengths-based approach to better support PWID and drive new solutions to addiction crisis
- Construct of resilience has value but must be broadened
- PWID are strong and resilient, and they know what they need 
   community-based participatory methods
- Future work:
  - [Research] More research on resilience that accounts for the role of external factors
  - [**Policy**] Advocate for/ adopt policies that build up and support access to external resilience factors (e.g. substance use treatment, mental health, social services)
  - [**Practice**] Build up and fortify systems that build resilience across multiple levels; Engage PWUD in design of treatment programs; Reduce stigma!



## Thank you!



