

# Peer engagement in harm reduction strategies and services:

## *Findings from a BC case study, 2010-2014*

Harm reduction is a crucial strategy to prevent blood-borne infections, address overdoses, and increase access to supplies to improve social/economic circumstances. In order to adequately address the needs of people who use illicit drugs, harm reduction strategies and services must be guided by those with lived experience of drug use ('peers'). However, peers are often excluded or prevented from having decision making authority.

### **Why did we do the study?**

Evidence verifies that peer-guided policies improve the health of the population. We wanted to learn and share how to better engage peers in decision-making processes including planning, policy making, and evaluation of harm reduction programs. [See the full study [here](#)].

### **How did we do the study?**

Since 2003, the BC Centre for Disease Control (BCCDC) has overseen provincial harm reduction efforts. The BC Harm Reduction Services and Strategies (BCHRSS) committee, led by BC Centre for Disease Control, guides provincial harm reduction policy. The BCHRSS committee with membership from all regional health authorities, First Nations Health Authority, the Ministry of Health, and peers, has come to embrace peer engagement as an essential first step in policy-making.

For this study, the BCCDC staff members worked with peers to evaluate the BCHRSS committee's peer engagement efforts in order to highlight lessons learned and improvements needed. This was performed by reviewing minutes and policies and reading through and evaluating the BCHRSS committee-related documents from 2010 to 2014 using an evaluation framework we developed.

### **What did we find?**

The importance of engaging peers in the planning, delivery, and evaluation of harm reduction initiatives was affirmed. In order for organizations to meaningfully engage peers in decision making, the peer-engagement process should:

- Be regularly updated and improved in response to feedback from peers.
- Prioritize building trust, improving relationships, and equally sharing decision-making power.

### **What should practitioners and policy makers consider (based on the results of this study)?**

Peer engagement improves the health of populations, especially for vulnerable and marginalized populations with typically worse health; it does this by enhancing public health knowledge, increasing the acceptability and use of harm reduction services, promoting more equitable distribution of services, and enriching the appropriateness and effectiveness of programs and policies. Peer-engagement can also strengthen the change-making potential of peers, empowering and building-up the influence of those who are often underrepresented.

## Recommendations

### Policy Recommendations

- We stress the importance of unwavering commitment to peer-engagement in all harm-reduction initiatives

### Practice Recommendations

For effective peer engagement in harm reduction it is necessary to:

- Identify a low barrier/low threshold space
- Update the peer-engagement process in response to peer feedback
- Define clear roles and expectations for peers and providers
- Prioritise engaging under-represented peer groups
- Develop peer engagement guidelines
- Ensure consistency across regions and stakeholders
- Support peer groups and networks
- Build on existing peer strengths

### Recommendations for future research

- Build on our evaluation framework
- Examine interpersonal factors that influence peer engagement
- Examine impact of peer engagement on overall public health
- Explore unintended and sometimes negative consequences of peer engagement

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For more information, visit [towardtheheart.com](http://towardtheheart.com) or contact the BCCDC Harm Reduction Program at [outreach@towardtheheart.com](mailto:outreach@towardtheheart.com) or 604-707-2400



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