

# Impact of Health System Engagement on the Health & Well-Being of People Who Use Drugs: A Realist Review

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## INTRODUCTION

### WHAT IS HEALTH SYSTEM ENGAGEMENT?

People who use drugs (PWUD) working and advocating on behalf of their community through:



Roles often in research programs, harm reduction organizations, or peer led initiatives!

### WHY ARE WE INTERESTED IN ENGAGEMENT WORK AFFECTING PEOPLE WHO USE DRUGS?

#### Community benefits well known:

- Align research priorities with end-user priorities
- Encourages services to become more end user accessible
- Provides “reality check” to researchers etc.

#### Individual level health impacts less explored:

- PWUD uniquely situated, are historically underserved or harmed by conventional health services and academic structures
- Many efforts of engagement, leave PWUD feeling tokenized, exploited, and not meaningfully included
- However, some PWUD report an improvement in mental health, increased confidence, skill development, connection to others, and ability to provide self care<sup>2,3,4,5,6</sup>

## OBJECTIVES

- Examine how engaging in health system activities (e.g. service planning, research, collaborative advocacy) influences the health and well-being of PWUD.
- Develop recommendations for PWUD engagement in health system activities that support the health and well-being of PWUD.

## LIVED EXPERIENCE TEAM MEMBERS



- 3 team members are PWUD involved in engagement (board membership of peer led organizations, seminar speaking, outreach work, advisory group membership, and research consultation).
- Team meetings on an ongoing basis
- Contribute to the work across all stages of the review

## METHODS

### WHAT IS REALISM?

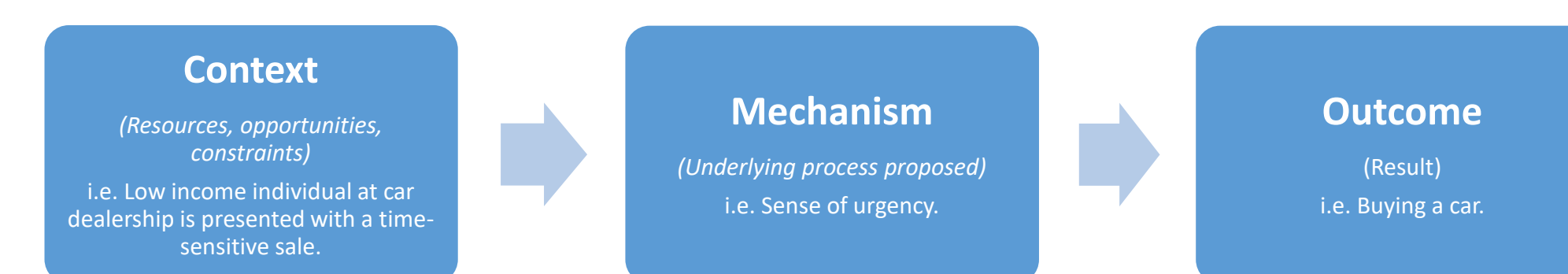
- Between Positivism and Constructionism
  - Positivist – Reality is physically measurable
  - Constructivist – Reality is only socially constructed through senses
  - Realist – There is an objective reality, but social constructs can approximate and we can improve our understanding of reality
- Stratified Reality
  - Layers of reality underly social processes. Although complex, trends are not altogether unpredictable

### WHY REALIST REVIEW?

- Emerged to tackle complex interventions acting on complex systems.
- Evaluating program effectiveness traditional approach
- Decision makers have little to work with when multiple effectiveness studies conflict.
- Offers a detail rich investigation into complex systems.
  - What works, for whom, why, and under what circumstances?
- Enables a nuanced understating, allowing decision makers to make practical decisions.<sup>7</sup>

### HOW IS REALIST REVIEW A THEORERETICAL APPROACH?

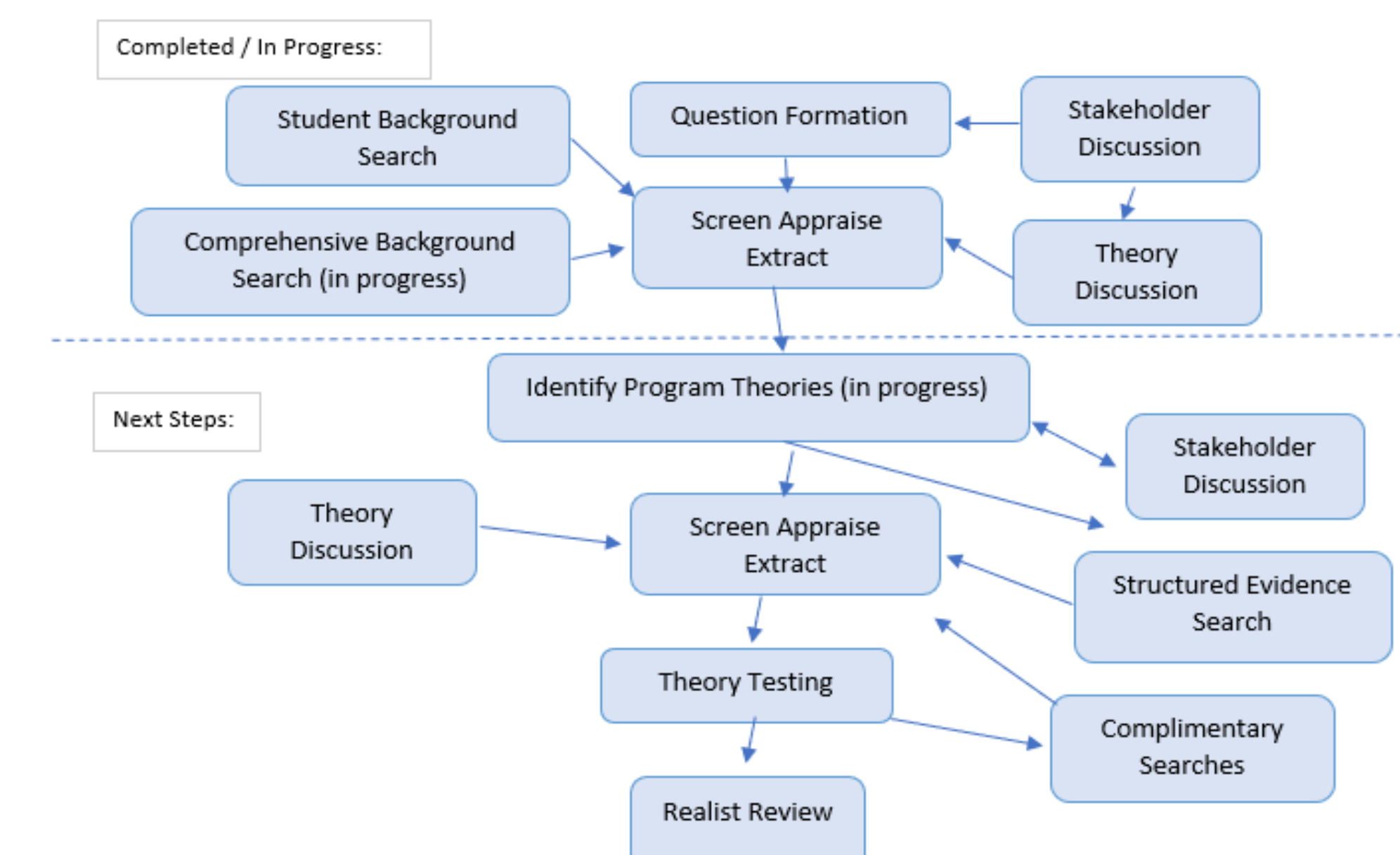
Elucidating contexts and outcomes, and proposing mechanisms which account for these, allows realist reviewers to generate a model explaining how a given intervention functions.



Program Theory: A broad explanatory model of how the intervention (or “program”) is thought to work. Once assumptions of how the program is thought to work, program theory is iteratively developed and tested against the literature, until a refined explanatory model remains.

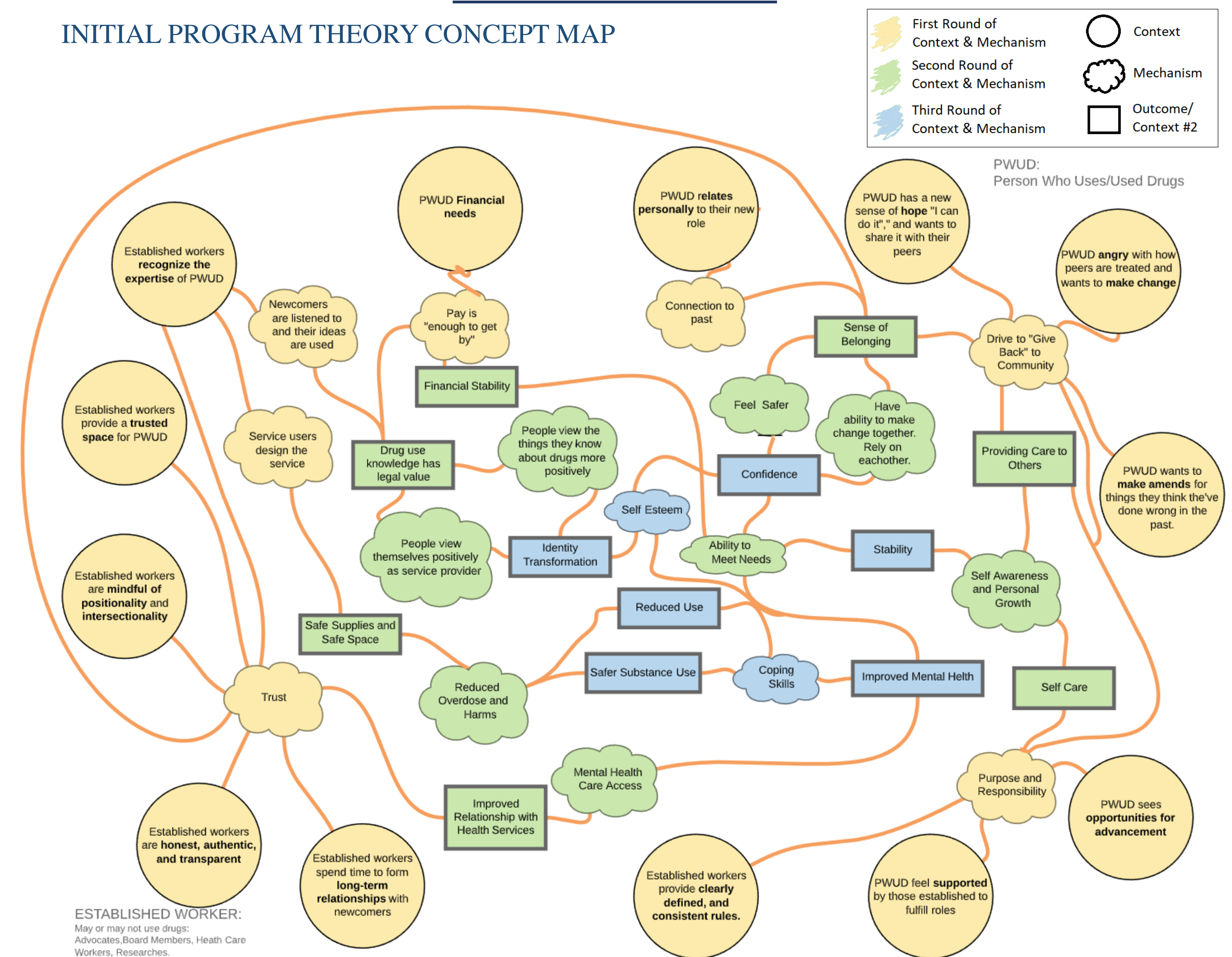
Middle Range Theory: Aims to be specific enough to be testable, but abstracted enough to apply to many different cases. Aids in the construction and testing of program theory, and links it to a more substantive body of knowledge.<sup>8</sup>

### HOW DID WE CONDUCT OUR REALIST REVIEW?



## INTERIM FINDINGS

### INITIAL PROGRAM THEORY CONCEPT MAP



The above concept-map showcases our initial program theory. It offers our current perspective of how engagement may ideally work to improve the health of PWUD.

## DISCUSSION & CONCLUSION

PWUD engage in research activities and health system planning to give back to the community and to that end form a sense of purpose and responsibility. PWUD may be motivated to engage through supportive, structured, and consistent environments, opportunities for advancement, hope for a better life, a desire to improve how their community is treated, and wanting to make amends for past deeds. Engagement results in a sense of community belonging and may improve self-care and care of others. If research/administrative partners are mindful of intersectionality and continuity, offer meaningful remuneration, and genuinely integrate lived experience, PWUD are more likely to feel validated and build trusting relationships. This results in an enhanced sense of belonging to the endeavor, and transformation of self-concept. Cumulatively, the resultant confidence from sense of belonging, stability, and improved self-care and self-esteem work towards an increased likelihood of reduced drug use, safer drug use and improved mental health. Consistent with realist review methods, our findings propose current assumptions, and evidence-informed beliefs on how PWUD engagement “ought to work.” Through iteratively refining, testing against the literature, and theoretically exploring this model, insights and recommendations for improved engagement and collaboration will be developed and shared.

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