

EXPERIENCES AND PERCEPTIONS OF PRESCRIBED SAFER SUPPLY AMONG FORMERLY INCARCERATED PERSONS AT-RISK OF OVERDOSE IN BRITISH COLUMBIA, CANADA: A QUALITATIVE STUDY

Authors:

O'Callaghan S¹, Budau J¹, Korchinski M², Young P², Banjo J³, Fernando S³, Gamage R³, Roth K^{1,4}, Luk N¹, Salmon A^{1,3}, Snow B^{1,3}, Small W⁵, Slaunwhite A^{1,3,4}

¹ School of Population and Public Health, University of British Columbia, ² Unlocking the Gates Services Society, ³ Centre for Advancing Health Outcomes, ⁴ Canadian Collaboration for Prison Health and Education, ⁵ Faculty of Health Sciences, Simon Fraser University

Background:

North America continues to experience high rates of overdose mortality, driven by a toxic illicit drug supply characterized by illicit fentanyl, related analogues, and additives. To prevent overdose, prescribed safer supply (PSS) has been implemented in select Canadian provinces to provide prescribed pharmaceutical alternatives to people who use drugs (PWUD) who are at-risk of overdose. Formerly incarcerated PWUD are a sub-population at extreme risk of overdose-related death and are a priority target for overdose prevention interventions to reach. This study explored experiences and perceptions of PSS among this sub-population.

Methods:

Between February and August 2023, in-depth interviews were conducted with 120 persons at-risk of overdose leaving correctional facilities in British Columbia, Canada. Interviews were completed by trained peer researchers with lived experience of incarceration, ranged from 45-60 minutes, and were recorded, transcribed, and coded using NVivo.

Results:

Situated perceptions of overdose risk strongly framed participant interest in accessing PSS. Individuals who perceived minimal personal overdose risk (e.g., currently abstinent) were generally uninterested in PSS and felt the intervention was at-odds with recovery goals. Other participants characterized the value of PSS for persons concerned about the perceived likelihood of relapse in the context of the toxic drug crisis (a major overdose risk factor), and described positive experiences receiving prescribed alternatives to complement other healthcare services and support care-related goals. Certain prescribing features (e.g., limitations related to supported medications, doses, and modes of consumption) were associated with participant challenges that impacted intervention accessibility and efficacy.

Conclusion:

Our findings describe the intersection of overdose risk perceptions, post-release goals, and receptiveness to novel risk-mitigation interventions, such as PSS, among PWUD with a history of incarceration. This study contextualizes PSS along the substance use care continuum, and illustrates how PSS may complement treatment, recovery, and harm reduction services to support the health of PWUD.

Disclosure of Interest Statement:

Funding for this study was provided by Health Canada's Substance Use and Addictions Program (SUAP). SUAP had no direct role in the design, conduct, and analysis of the study, or in writing the manuscript.