

SYNTHESIZING THE RESEARCH ADDRESSING THE UNIQUE NEEDS OF AFRICAN, CARIBBEAN, AND BLACK (ACB) POPULATIONS IN CANADA ACCESSING SUBSTANCE USE HARM REDUCTION SERVICES: A REVIEW OF THE EVIDENCE

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Background:

African, Caribbean, and Black (ACB) populations in Canada face significant barriers in accessing harm reduction services due to systemic racism, socio-economic marginalization, and a lack of culturally responsive care. Despite the disproportionate impact of the drug poisoning crisis on racialized communities, there is limited understanding of how harm reduction services can be tailored to meet the unique needs for ACB people who use drugs (PWUD). This narrative review examines challenges ACB PWUD have in accessing substance use harm reduction services and identifies facilitators and strategies to improve service delivery and outcomes.

Approach/Methods:

Guided by Ferrari (2015), we conducted a narrative review to synthesize literature on experiences of ACB PWUD with harm reduction services in North America using scholarly databases and grey literature published between 2010 and 2024. We screened literature to identify concepts impacting ACB PWUD's service access and equity, including barriers, facilitators and strategies to improve service delivery outcomes.

Results:

We identified several key findings: (1) systemic racism and stigma, leading to mistrust in healthcare (2) socio-economic factors, such as poverty and housing instability, limiting access to services; (3) cultural stigma within ACB communities that discourages help-seeking behaviours; and (4) a lack of culturally focused harm reduction care in Canada. Programs outside of Canada that incorporate culturally responsive practices – such as community engagement, anti-racist frameworks, and culturally safe care - have demonstrated success in reducing drug related harm and fostering trust.

Conclusion:

Culturally informed harm reduction services are urgently needed for ACB PWUD populations in Canada. Addressing systemic barriers and centring ACB voices can improve service equity and effectiveness. Recommendations include expanding community-led initiatives, integrating cultural safety frameworks into service delivery, and addressing socio-economic determinants of health. Developing culturally responsive practices and policies is essential for reducing health disparities and enhancing outcomes for ACB PWUD populations in Canada.

Keywords: Harm reduction, cascades of care/linkage to care, community engagement, drug policy, health services and systems.

Disclosure of Interest Statement:

This study was conducted as part of Salwa Musa's doctoral research. The author declares no conflicts of interest or competing financial, professional, or personal interests that could influence the research or its outcomes.

