Stigma and discrimination associated with substance use, known as substance use stigma (SUS) contributes directly to significant harms and barriers to care. Because of the pervasiveness of negative attitudes towards people with substance use issues, many people are negatively judged and treated in dismissive, disrespectful or discriminatory ways in health care settings. These kinds of responses to substance use contribute to inequities in health and health care – inequities that are more likely to affect people living in poverty, those who are criminalized for their substance use, and those who experience racism, sexism and other forms of discrimination. Lack of service provider knowledge about how best to respond when working with people who are actively using, myths about who is drug seeking, limited services (ranging from safe use services to drug checking and treatment), and harmful policies can deepen inequities and cause people harm.
This project will enhance the existing EQUIP materials to deepen attention to SUS and strategies to reduce harms. A key focus is to promote trauma- and violence-informed care, and cultural safety in tandem with reducing SUS, especially the fundamental relationship between trauma, violence, chronic pain and substance use. The project will help providers and organizations shift thinking from “what’s wrong with this person?” to “what’s happened, and is still happening, to this person, and how can I help?”; and “what can my organization do better to convey respect to people who use substances, to ensure people are treated with dignity, and to counteract or eliminate the SUS that people often experience?”

**Key Dimensions of Equity-Oriented Care**

1. Trauma- & Violence-Informed Care
2. Harm Reduction
3. Culturally Safe Care

**10 Strategies for Equity-Oriented Health Care**

1. Explicitly commit to equity
2. Develop supportive organizational structures, policies, and processes
3. Re-vision the use of time
4. Attend to power differentials
5. Tailor care, programs and services to local contexts
6. Actively counter racism and discrimination
7. Promote meaningful community and patient engagement
8. Tailor care to address inter-related forms of violence
9. Enhance access to the social determinants of health
10. Optimize use of place and space

**Substance use discrimination intersects with other forms of discrimination and structural barriers to shape health and quality of life**

- Racism
- Poverty stigma
- Gender discrimination
- Reduced access to services & ineffective care
- Poor health outcomes (individual and population)

**Responding to this problem through an equity lens, we plan the following project deliverables:**

- Scoping review: how to engage people with lived and living experience of substance use discrimination.
- Strengthened EQUIP resources for health care providers and organizations
- New resources
- Organizational Action Kit for addressing substance use discrimination
- E-learning modules: Trauma- and violence-informed care; Nexus of pain, substance use, chronic pain, and trauma and violence
- Plan for expansion, scale-up, and long-term sustainability
- Action Series: Reducing substance use discrimination

The Pathways project is founded on EQUIP Health Care, an evidence-based approach to enhancing equity-oriented health care (EOHC). EQUIP uses three key dimensions of EOHC operationalized in 10 strategies. The EQUIP Tool Kit and Equipping for Equity Modules are freely available to support implementation efforts, and through this project will be adapted to be optimally relevant for counteracting substance use discrimination.

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We are working to co-develop resources with people with lived experience of substance use stigma and diverse health care partners, including: