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Project: *Understanding the experiences of people who provide unpaid support for people who use opioids in rural Western Canada*



### Background

Access to health and social services in rural and remote Canada is challenging - particularly for people who use opioids as stigma and discrimination compound the limited availability of services in these settings. As a result, this population does not have access to the same life-saving harm reduction and treatment interventions that are often available in urban centres. Since 2016, over 25,000 Canadians have died from apparent opioid-related deaths. This mortality has prompted significant new investments in health and social services for people at risk of opioid overdose, but there remain many service gaps in rural and remote communities (defined as

communities with a population of less than 10,000 people). When substance use services are inaccessible, family and friends often provide informal and unpaid support. Most providers of unpaid support are women who face additional family, career, financial, and health issues because of the demands of providing support. Many people provide unpaid support for people who use opioids in rural and remote Canada; however, their experiences are not well understood.

In partnership with patients and caregivers this patient-oriented research aims to understand the experiences of people providing unpaid support for people who use opioids in rural and remote communities in Western Canada (Alberta, Manitoba, and Saskatchewan). Qualitative interviews with approximately 60 caregivers (20 per province) will explore how providing unpaid support impacts their physical, emotional,

mental, social and financial health, as well as how structural, political and social contexts (e.g. gender, drug policy) shape their experiences. Patient partners, including key partner Moms Stop the Harm, will be meaningfully engaged throughout the research process. Findings will contribute to our limited knowledge of people who provide unpaid support for a highly stigmatized health issue within a politicized policy environment. Findings will also outline equitable and inclusive public health strategies and supports that lessen negative impacts on people providing unpaid support and improve health outcomes for people who use opioids in rural and remote settings.