SUPPORTING BIRTHING PEOPLE WHO USE SUBSTANCES BY FACILIATING CONNECTION TO HEALTH AND COMMUNITY SERVICES

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Background: The Parent-Child Assistance Program (PCAP) is a trauma informed, harm reduction and evidence-based community intervention for birthing people who use substances (BPWUS). PCAP Advocates support BPWUS and their families to mitigate systemic barriers and stigma to create and maintain community connections and access to services. The current study will delineate the service and community connection outcomes of the pilot phase of PCAP.

Methods: This retrospective, observational study of 71 PCAP clients at various stages in the program will describe demographic and socioeconomic factors of PCAP clients upon intake into PCAP, including age, number of children, age-of-first-use, and adverse childhood score (ACE). Rates of connection to various services while in the program through frequencies and means. This includes health services, training and skill development, legal services, and community building exercises.

Results: The average PCAP client is 27 years old with 2 children. The majority first used substances by the age of 14 (75%), did not graduate from secondary school (56%), and they have an average adverse childhood score (ACE) of 6 out of 10. Only 58% of clients report ever having a close relationship with their mother, 41% with their father, and 80% with their own children. Most have experienced emotional, sexual, and/or physical abuse (94%). While in PCAP, 18% of clients participated in academic/vocational training, 37% in personal/social skills training, and 41% participated in positive recreation and enrichment activities. Further, 87% participated in recovery programs, and most clients (80.3%) and children (74.6%) were connected to health care services.

Conclusion: PCAP uses a harm reduction and strengths-based approach to support BPWUS to build autonomy and self-efficacy. Current fundings demonstrate that PCAP clients were engaged in health care, recovery, and skill development training while in PCAP. Mitigating barriers to create access to services improves the quality of BPWUS and their families.

No disclosures to declare.

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