

# Drugs Research Network Scotland Conference workshop

Putting peers at the centre of research on reducing  
harms: reflections on the SHARPS project

Josh Dumbrell and Wez Steele, with  
Dr Hannah Carver

# Outline of workshop



- Part 1. Presentation – introduction to the SHARPS study and our experiences of being involved.
- Part 2. Activity – your views on how we can more meaningfully involve peers/those with lived experience in research. Small groups then feeding back to whole group for discussion.

# Introduction to SHARPS study



*'Supporting Harm Reduction through Peer Support'*

## The SHARPS team

Dr Tessa Parkes (Chief Investigator, University of Stirling)

Professor Catriona Matheson (Deputy Chief Investigator, University of Stirling)

Dr Hannah Carver (University of Stirling)

Dr John Budd (NHS Lothian)

Dave Liddell (Scottish Drugs Forum)

Jason Wallace (Scottish Drugs Forum)

Professor Bernie Pauly (University of Victoria)

Dr Maria Fotopoulou (University of Stirling)

Professor Isobel Anderson (University of Stirling)

Dr Adam Burley (NHS Lothian)

Professor Graeme MacLennan (University of Aberdeen)

Dr Rebecca Foster (University of Stirling, Study Research Fellow)

SHARPS hosts:  
The Salvation  
Army  
Cyrenians  
Streetwork

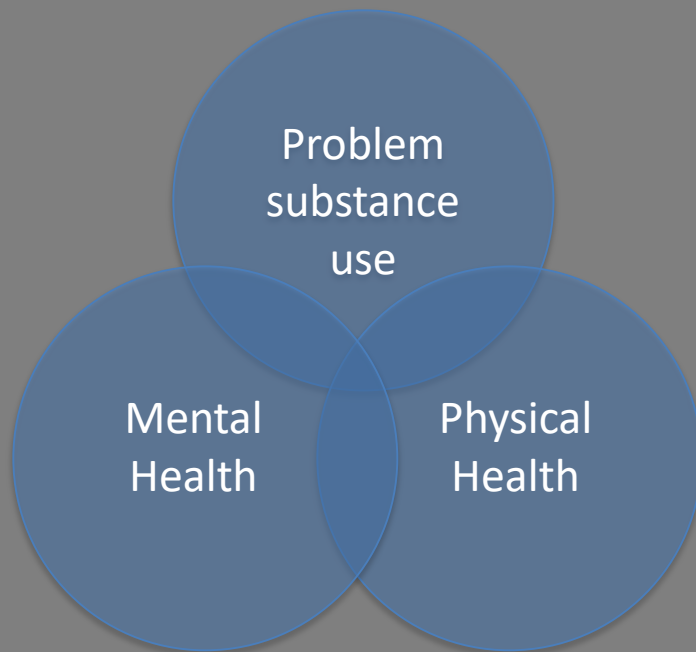
Peer Navigators:  
Josh Dumbrell  
Wez Steele  
Michael Roy

\*Funded by the National Institute for Health Research (NIHR) – the research arm of the NHS.

SHARPS is an intervention which aims to provide support to individuals who:

- Are over the age of 18
- Are homeless/at risk of homelessness
- Self-identify as having a problem with alcohol and/drugs that has a negative effect on their lives.

## Tri-morbidity and Deep Social Exclusion



**exclude** verb **1** prevent someone from entering or participating in something. **2** deliberately leave out when considering or doing something: *this information was excluded from the judicial investigation.* **3** expel a pupil from a school.

## Problem Substance Use & Harm Reduction

### Principles

- Respecting the Rights of People Who Use Drugs
- Commitment to Evidence
- Commitment to Addressing Discrimination
- Avoidance of stigma

### Goals

- Keep People Alive and Encourage Positive Change
- Offer Alternatives to Approaches that Seek to Prevent/End Drug Use



Background



# Supportive Relationships & Peer Support



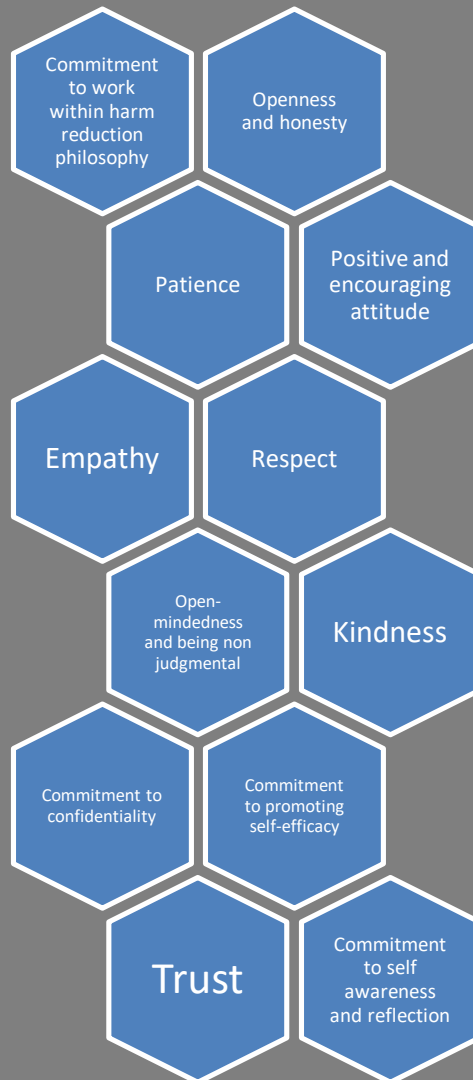
## Study objectives (in short)

- To develop and implement a non-randomised, peer-delivered, relational intervention, that aims to reduce harms and improve health/wellbeing, quality of life and social functioning, for people who are homeless with problem substance use
- To conduct a process evaluation, in preparation for a potential randomised controlled trial (RCT), assess all procedures for their acceptability, and analyse important intervention requirements



# Intervention Design

## Peer Navigators



## Settings



## Data Collection

### Quantitative and Qualitative Data

- Peer Research (SDF volunteers)
- Interviews with Navigators (and staff)
- Reflective Diaries
- Holistic Health Check ('outcome measures')
- Case studies
- Observations in all settings.



Intervention Delivery

## Summary



- Pre-intervention
- The early stages
- Data collection
- Supporting participants
- Winding down and debrief

## Intervention Delivery

### Pre-intervention

- Introductions
- Training
- Reading (NPT/PIE papers)
- Lead time in services
- Agency visits
- Handbook and local directory

## Early stages



- 'Buy in' from staff and participants including potential participants
- Recruitment of participants
- Relationship building
- Variation of sites
- Evolution of the role

Intervention Delivery

Data collection

- Measures
- Peer researchers
- Reflective diaries
- Interviews
- Case studies

Intervention Delivery

Delivering support

- Caseload management
- Autonomy and flexibility in role
- Support from study team
- Budget
- Advocacy
- Staying with the person

## Intervention Delivery

# Winding down and debrief



- Referring people on
- Irony of 'relational intervention' being short-term
- Emotional process
- Debrief



Thank you for taking the time to listen to our presentation. Does anyone have any questions?

**Funding acknowledgement**

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**Department of Health and Social Care disclaimer**

The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health and Social Care.

Protocol is available here:

<https://pilotfeasibilitystudies.biomedcentral.com/articles/10.1186/s40814-019-0447-0>

# Workshop Activity



## How can peers be more meaningfully involved in research?

Here are some pointers to guide your discussion (not exhaustive!)

- Proposal development stage/funding application
- Study/intervention set up
- Delivery of intervention
- Data collection
- Data analysis
- Dissemination of research findings.

Workshop activity

Feeding back and whole group  
discussion.