

UNIVERSITY of STIRLING

Study Team: Dr Tessa Parkes (Chief Investigator), Professor Catriona Matheson (Deputy Chief Investigator), Dr Hannah Carver, Dr John Budd, Mr Dave Liddell, Mr Jason Wallace, Professor Bernie Pauly, Dr Maria Fotopoulou, Dr Adam Burley, Professor Isobel Anderson, Professor Graeme MacLennan & Dr Rebecca Foster



Supporting harm reduction through peer support (SHARPS): Testing the feasibility and acceptability of a peer-delivered, relational intervention for people with problem substance use who are homeless, to improve health outcomes, quality of life and social functioning, and reduce harms

1. The intervention and its aims

Our National Institute for Health Research funded study (SHARPS) involves Peer Navigators providing a 'relational intervention' for people who are experiencing homelessness and problem substance use.

The Peer Navigators have lived experience of homelessness and/or problem substance use. They draw from this to support study participants (practically and emotionally) with the aim of improving their health and wellbeing, and reduce harms.

2. Design

SHARPS is mixedmethods feasibility
and acceptability
study to explore if the
Peer Navigator
intervention is
feasible and
acceptable to service
users (participants),
members of staff in
services and the
local context.

The international evidence informs us that peer workers offer valuable support to people with a range of challenges. Yet, this support has not been systematically studied in the field of substance use.

3. Setting

The Peer Navigators are based in:

- 3 outreach/drop in settings in Scotland
- 3 hostels in the north of England.

There are also two standard care sites, in both Scotland and England. The study started in May 2018 and is funded for 2 years. The relational intervention for participants will last for up to 12 months.

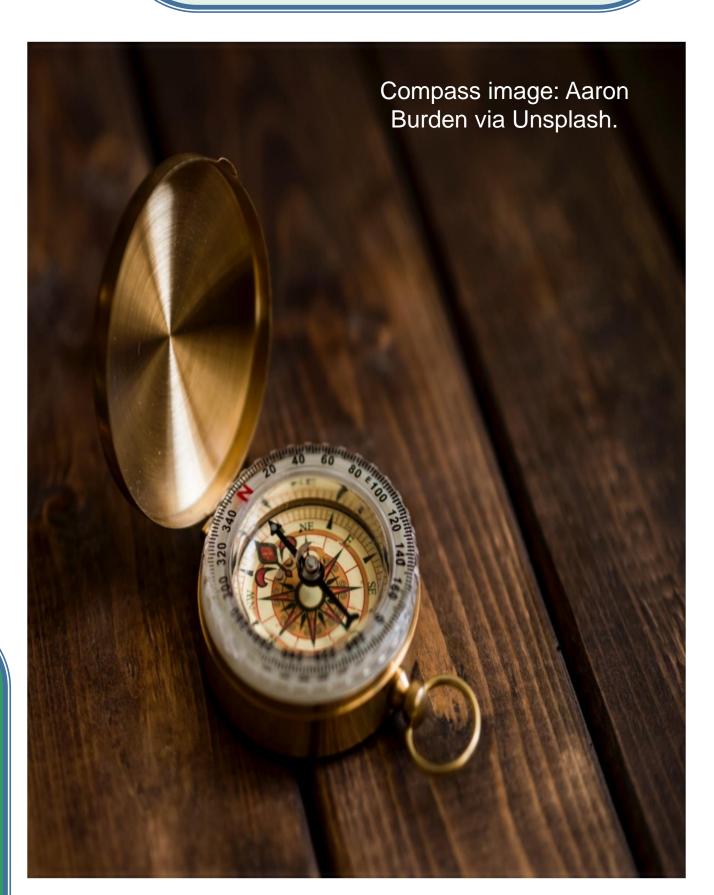
Peer
Navigators –
Navigating
people
towards health



4. Participants

The Peer Navigators are each working with around 15 participants. These participants:

- Are over the age of 18 years
 old
- Are homeless or at risk of homelessness e.g. vulnerably housed
- Self-identify as having a problem with drugs and/or alcohol which has a negative impact on their lives.



Poster Authors:
Dr Tessa Parkes and Dr Rebecca Foster, both
University of Stirling

6. Findings and conclusions

This study is on-going. We would like therefore to share here how the study team are using NPT. NPT was developed by academics in different fields as a way of understanding why in reality some interventions work and others do not, or don't work quite so well. We have used NPT to evaluate the processes involved in the design and set up of the intervention. We are currently using it in intervention delivery and in our analysis of data. There are 4 key elements of NPT:

- 1. Coherence: e.g. Does everyone know and understand the study, and the Peer Navigator roles and values?
- 2. Cognitive participation: e.g. Are key people and organisations working together to support the study and the Peer Navigators?
- 3. Collective action: e.g. What work and actions are required of staff and organisations to enable this to work?
- 4. Reflexive monitoring: e.g. Capturing data throughout the study from a range of sources, and reflecting on how the study is going via notes and diaries.

We look forward to sharing the findings from the study with colleagues in Spring 2020.

5. Measurements

SHARPS is a mixed methods study:

- Quantitative data (socio-demographic and health information) is being collected from intervention participants.
- Qualitative data is being collected via observations in all settings, and interviews with participants, Peer Navigators and staff.

We are investigating the potential as well as challenges of providing this intervention using a framework called Normalisation Process Theory (NPT) to understand these dynamics.

Funding acknowledgement

This study was funded by the NIHR Health Technology Assessment (HTA) programme (16/153/14).

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.

