

**Submission Id:** 5679

**Title**

*Emergency department care experiences among people who use substances: A qualitative study*

**Priority 1 (Research Category)**

Health Care Disparities

**Presenters**

Dana Rajab, BSc, Eva Purkey, MD, MPH, Susan Bartels, MD, MPH, FRCPC, Melanie Walker, PhD, Meredith MacKenzie, Jamie Fujioka

**Abstract**

Context: People who use substances (PWUS) encounter significant barriers in accessing primary and specialty care for their complex health needs. As a result, emergency departments (EDs) often become the first point of healthcare access for many PWUS and are a crucial setting for the study of health inequities. Objective: To elucidate the ED experiences of PWUS to inform ways of improving the delivery of equitable healthcare. Study Design/Analysis: Participants shared and self-interpreted a story about their most memorable ED visit in the preceding 24 months. NVIVO 12 software was used to conduct an inductive thematic analysis. Setting: Participants were recruited from the Kingston Health Science Centre's (KHSC) ED and Urgent Care Centre (UCC) as well as at partner community organizations from June to August 2021 in Kingston, Ontario, Canada. Population Studied: Any medically stable patient, aged 16 and older, with adequate English fluency, and who self-identified as having substance use experiences. Instrument: Spryng.io software was used to capture typed or audio-recorded narratives. Outcome Measures: Qualitative perceptions and experiences. Results: A total of 246 participants self-identified as PWUS and were included in the analysis. Majority of participants were <45 years of age (61%), male (53%) and white/European (57%). Further, 45% of participants identified as a person with a disability and 39% frequently struggled to make ends meet. At the patient level, a history of substance use and intersectionality negatively influenced participants' anticipation and perception of ED care. At the provider level, negative experiences were linked to assumption making, stigma and discrimination, and negative perceptions of medical care. Whereas positive experiences were linked to positive perceptions of medical care. At the systems level, timeliness of care and inadequate mental health resources negatively impacted participants' care. These factors shaped participants' trust of the healthcare system, desire to seek care, and perception of the care received. Conclusions: PWUS encounter numerous inequities when seeking ED care at the patient, provider, and system levels. Based on our study findings, three recommendations are proposed: 1) integration of an equity-oriented approach to care in the ED; 2) widespread staff training on addiction and substance use; and 3) investment into addiction consulting resources and services that are readily accessible in the ED.