Life History Calendar in a population of Chronic Opioid Users: An evaluation of methodological utility to identify patterns of drug use and addiction treatment

**Background (Optional):**
Identifying and understanding patterns of drug use and access to health care is essential to the effective treatment of individuals with chronic substance dependence. In this study the Life History Calendar (LHC) was used to identify patterns of substance use, addiction treatment, and other major life events. To our knowledge, this is the first time this instrument and unique method of analysis has been used in this population.

**Objectives:**
O1: Discuss the methodology and feasibility of the use of the LHC in a population of chronic opioid users.
O2: Determine patterns of drug initiation, continuance, abstinence, treatment and relapse over a lifetime using the LHC.

**Methods:**
Interviews took place in a research office on the downtown eastside of Vancouver, British Columbia. A total of 56 individuals with chronic opioid dependence completed the LHC (male=33; female=22; transgender=1). The reference period for the interview was date of birth to present; participant responses were recorded on a grid style spreadsheet and took between 30-60 minutes to complete.

**Results:**
Factors impacting feasibility of LHC administration included interviewer training, techniques to facilitate memory recall, and reference period for collection. Descriptive analysis revealed heroin as the primary illicit opioid injected for the first time (78.6%; mean age of first use=25) and methadone maintenance most frequently reported as the first drug treatment accessed (41.8%; M= 2.5 attempts).

**Conclusions:**
The LHC was useful in identifying determinants and patterns of drug use and addiction treatment and provided new information about the health needs of chronic opioid users. Methodological considerations, opportunities for use of this tool, and findings from the study will be discussed.

**What are the implications of your research on practice or policy?**
Understanding patterns of drug use and treatment access could have implications for prevention and provision of services, bringing individual experiences into context and allowing health care providers to ensure that the addiction needs of this population are effectively met.