

STRATEGIES

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Welcome to the Second Issue of Strategies!



Welcome to the second issue of Strategies, a semi-annual newsletter brought to you by the BC Harm Reduction Strategies and Services (HRSS) committee.

The HRSS committee is comprised of representatives from all five BC regional Health Authorities, First Nations and Inuit Health, the BC Centre for Disease Control (BCCDC), and the BC Ministry of Health. We are dedicated to reducing drug related harms such as death, disease, and injury, including transmission of blood-borne pathogens through the sharing of drug paraphernalia.

I'm delighted to share this second issue with you, to keep you connected and informed of recent news and happenings in BC with respect to harm reduction. In this issue, you can read about updates on projects the HRSS committee has been working on since the last issue. We have made several achievements in the past 6

months, including completing the Best Practices document, determining a single distributor of harm reduction supplies, planning the first training workshop for frontline distributors, and developing a training manual.

Many thanks to those who provided feedback and suggestions after reading the inaugural issue of Strategies. I hope you find this issue informative, and encourage you to send us your feedback.

If you have ideas, thoughts, or comments regarding the newsletter, please contact your local representatives. Your feedback will be much appreciated.

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Standardizing Harm Reduction:

A guidance for BC's harm reduction practices

In May 2007, the HRSS committee launched the "More than just Needles" study to evaluate HR product supply distribution and to identify gaps, cost-saving measures and potential cost pressures in British Columbia.

From the study, the HRSS committee saw a need for a comprehensive and coordinated response to the widespread social issue in BC caused by illegal psychoactive substances. As a result, a provincial best practices document to provide guidance to BC's harm reduction services, supply distribution, and collection programs was developed.

Because BC is a large and diverse province, it is vital that interventions are based on a regular assessment of the nature and magnitude of drug use, as well as trends and patterns of infection. Services should be tailored in regard to specific locations and populations, drug choices and modes of administration.

The best practices policy guide draws on current local, national and international documents related to harm reduction supply distribution and services. It also incorporates feedback from BC service providers,

health authority staff and organizations of people who use injection drugs. The guide makes evidence-based best practice recommendations for Harm Reduction Supply Distribution Programs (HRSDPs), and provides local examples of best practices in BC and elsewhere.

The document highlights the importance of involving people who use drugs in planning and service delivery; community engagement; impact of and relationships with law enforcement; and the role of health authorities and governments in the establishment of and support for HR strategies and services.

All HRSDPs should have policies and procedures that use evidence-based best practices, are realistic, and reflect local resources. This guide provides guidelines and examples of best practices for policies and procedures that can be utilized and adapted in rural and urban settings around the province.

The "More than just Needles" report is available at <http://www.harmreductionjournal.com/content/5/1/37>. The best practices policy guide is available on BCCDC's website.



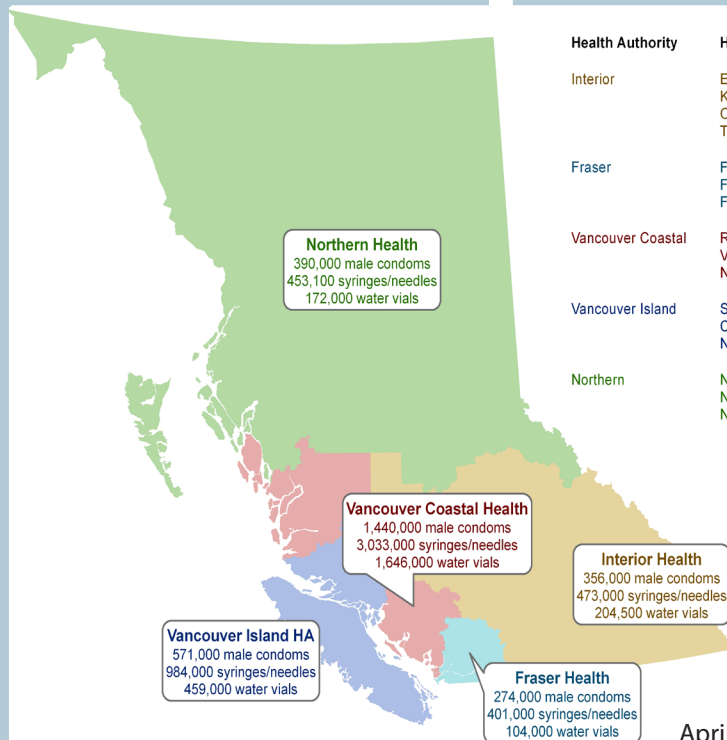
HR Product Distribution Update

Since October 2008, HR product distribution in BC has been centralized to a unique distributor located in the Greater Vancouver area.

Due to concerns with reusing or sharing of needles, 10 ml syringes are no longer provided. It is important to note again that a new needle and sterile water should be used for each injection. HRSS is exploring sterile water for injection in 1 or 3 ml plastic ampules with manufacturers.

Our condom supplier, after going through a RFP process, will be changing to Durex this year.

The most updated supply request form can be found on the BCCDC website. All forms should be sent to BCCDC and supplies will be shipped together to each site.



April 1, 2007-March 31, 2008

Follow the evidence, harm reduction works

Illegal drug use affects all Canadians and poses a threat to community and public health. Injection drug use results in a large financial burden as well as social and human costs that stem from crime, disease, and death.

In the past, the majority of resources to address the illegal drug problem have been directed to interventions whose effectiveness is most in doubt. Although policy makers are becoming increasingly interested in harm reduction as evidence showing that harm reduction programs can reduce the human and fiscal costs grows, the concept of harm reduction remains widely misunderstood by policy-makers and the public at large.

The "Evidence for harm reduction activities for communicable disease control" paper outlined the evidence and best practice for the employment of harm reduction activities in programs aimed at controlling communicable diseases. The paper reviewed several harm reduction strategies, including needle exchange programs, safer crack kit distribution programs, supervised injection facilities, supervised smoking facilities, methadone maintenance therapy, heroin prescription, educational approaches, and outreach-based interventions. It also considered the evidence supporting selected prison-based harm reduction strategies.

Each harm reduction strategy reviewed was graded based on grading scheme developed by the Health Development Agency of the National Health Service in the United Kingdom. The programs were graded from Class A (strong evidence) to Class D (weak evidence), with respect to their ability to control communicable disease

incidence as well as their ability to reduce risk behaviours and to modify environments where risk behaviours are elevated.

The review, based on evidence and reports, rated needle exchange programs (NEP), prison-based NEP, methadone maintenance therapy, heroin prescription, and outreach programs as Class A strategies. Supervised injection Facilities (SIF) were graded as Class B because despite the evidence that SIF reduce syringe sharing and reduce injection drug use in risky environments, there have been no studies of the impact of SIF on the incidence of HIV or other blood-borne diseases. Safer crack kit distribution, supervised smoking facilities, and educational programs were graded as Class D not because they are ineffective programs, but because of the lack of evidence and evaluation of these programs.

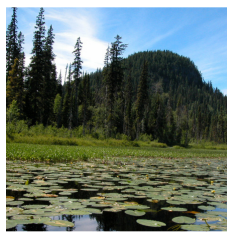
The review also looked at a number of factors that can positively or negatively affect the efficacy of any harm reduction program. Factors such as early intervention, responsiveness, coverage, comprehensiveness, and involvement of current/ former drug users in program delivery were discussed in the paper.

Given the ongoing drug-related harm throughout British Columbia, there was an urgent need to significantly expand and evaluate harm reduction programs. The review looked at the scientific evidence of various harm reduction programs. These programs can complement the other three pillars of enforcement, treatment, and prevention initiatives to reduce drug-related harms. The full report is available on the BC Centre for Disease Control website.



Vancouver Island Health Authority

In June, the Public Health and Mental Health & Addiction Programs of the Vancouver Island Health Authority co-hosted an Interactive Harm Reduction Event for those whose work involves service delivery to populations who use illicit drugs. The goals of the event were to increase knowledge and skill in i) integrating harm reduction into all health services, ii) developing a consistent harm reduction message, iii) working with user groups and iv) assigning responsibility to both governments and users. Approximately 55 people from the Health Authority, the agencies contracted to provide comprehensive needle exchange services and prevention and support services, as well as other inner city agencies, participated in an interactive presentation by Mark Haden, Vancouver Coastal Health Addiction Services, and small and large group discussions.



Northern Health Authority

A day long working session held in Fort St John on October 9, 2008 brought together a wide range of community stakeholders from around the north east to hear presentations on research and evidence regarding harm reduction. Over 60 people attended from both community based and government agencies and from a diversity of perspectives and disciplines such as the faith community, law enforcement and front line service providers. The intention of the session was to provide an opportunity for diverse views on harm reduction to meet hard facts and begin the task of finding a shared ground to address the issues of substance abuse in the region.



Vancouver Coastal Health

Vancouver Coastal Health's (VCH) HIV/AIDS and Harm Reduction program presented its second annual HIV Education Day on November 6th. This free event brought over 130 service providers, clinical staff, and community members to Vancouver's Roundhouse Community Centre to discuss the innovative and culturally appropriate HIV prevention, support, treatment and care services offered in our communities. The day's discussions centred around the successes and challenges of existing services. Dr. Gabor Maté's powerful closing presentation, "The Four Compassions: HIV Care in an Addicted Population", entreated attendees to continue to support harm reduction initiatives which ensure those affected by HIV have opportunities and appropriate supports to improve their overall health and wellness.

Rural Strategies: *Lending a Helping Hand*

For the past three years, Marilyn and Dan Tolmie of the Merritt Helping Hands Society have been passionately involved in the Needle Distribution project in the downtown core of Merritt, BC. Society co-founders Dan, Marilyn and Brian Hopkins, along with 10 other volunteers, came together with one goal in mind: to improve the health and well being of people addicted to drugs, prescription drugs, and alcohol in their community.

Dan and Marilyn, both recovering addicts themselves, have devoted the past three years of their lives to providing support and love for those in need in their community. Because of their past, they quickly gained legitimacy and trust within the community.

"We are here to make our community a better, safer place," said Marilyn. "It takes people who have experienced or are experiencing the issue to find strategies and solutions and to implement them." The group realized a pressing issue when Interior Health's needle exchange program moved up the hill to the Nicola Valley Health Care Centre. With no available transportation and a long uphill walk to a new location, most drug users stopped accessing the harm reduction services.

"People refused to go up the hill to the health centre for their supplies," explained Marilyn. "They feel humiliated and looked down on when walking up the hill and going to the hospital to get their needles." Instead of waiting for people to come to them, the Helping Hands Society decided to take the initiative to bring harm reduction products to those who need them. With the support of a

local church, public health and other partners, they began operating a weekly needle exchange site at the United Trinity Church, distributing condoms, clean syringes, water, alcohol swabs, and literature on HIV, Hepatitis B/C, and other blood borne diseases.

Gayle Carrière, Blood Borne Pathogen Outreach Nurse Educator with Interior



Dan and Marilyn Tolmie, and Brian Hopkins, co-founders of the Merritt Helping Hands Society

Health, is absolutely amazed at the group's accomplishments in such a short time frame. "The outreach nurse who used to come in was only getting to the first level of drug users in the community and the program was more of a silent service," she said. "This group was able to break that barrier and deliver the program to more people than we've ever been able to." Dan and Marilyn attributed their accomplishments to something they believe most professionals fail to establish and that is trust. "We've known some of these people for years, some are friends and some are just people we knew when we were addicts ourselves," Marilyn said.

To Dan and Marilyn, harm reduction goes

beyond providing clean needles and syringes. "You need to realize that those who still suffer from their addiction, like you and I, have needs and feelings too. Sometimes all they need is just a hug, someone to talk to, or just a bottle of shampoo," said Marilyn. She recalled the grateful smiles on the faces of the people when the group gave them brand new, clean hygiene products donated by a store in the community. "We often take simple things like this for granted. To them, things like a bar of soap are all it takes to make them feel like they are 'normal' again," Marilyn explained. The Helping Hands Society believes that empowering the people who use substances and making them feel like they belong is an important factor in the harm reduction equation.

Another crucial factor Dan and Marilyn pointed out is community support. The Helping Hands Society already has the support of the City of Merritt, the RCMP, and many other organizations in the community. "The RCMP sees us as a resource," said Marilyn. "We have educated them on what harm reduction supplies are so that they don't take them if a house gets busted." The group also does drug awareness workshops with local schools, teaching them about the consequences of drug use and the importance of harm reduction.

With trust from the drug using community and support from the Merritt community, the Helping Hands Society will continue to distribute harm reduction supplies and provide ongoing support and education to their clients.

News & Events

- The HRSS committee and BCCDC's STI/HIV Prevention and Control Division proudly supported the first Canadian Prison-Academic-Community Health and Education Conference held at UBC on Dec. 4-5, 2008.
- The International Harm Reduction Association's 20th International Conference will be held in Bangkok, Thailand from April 20-23, 2009.
- The Canadian Public Health Association 2009 Annual Conference will be held in Winnipeg, Manitoba from June 7-10.

BC Harm Reduction Strategies and Services Committee Members

Ministry of Healthy Living and Sport

Kenneth Tupper, Manager, Problematic Substance Use Prevention

Ciro Panessa, Manager, Harm Reduction and Blood Borne Pathogens

Provincial Health Services Authority (PHSA), BC Centre for Disease Control (BCCDC)

Jane Buxton, Harm Reduction Lead, Physician Epidemiologist

Juanita Maginley, Program Manager, STI Outreach
Rodney Taylor, Director of Pharmacy Warehouse & Operations

Interior Health Authority (IHA)

Bev Grunert, Communicable Disease Program Coordinator

Nora Walker, Communicable Disease Consultant
Northern Health Authority (NHA)

Mary Margaret Proudfoot, Regional Coordinator, Communicable Disease Program

Jennifer Dunn, Public Health Nurse

Health Officers Council of BC

Reka Gustafson, Medical Health Officer, Vancouver Coastal Health

First Nations & Inuit Health - Health Canada

Isobel McDonald, CDC Coordinator, STI/BBPs, First Nations and Inuit Health

Fraser Health Authority (FHA)

Amrit Rai, HIV/AIDS, Hep C & BBP Leader, Health Promotion and Prevention

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Sara Young, Community Developer, HR Programs

Miranda Compton, Manager of HIV/AIDS HR Programs