



National Safer Supply Community of Practice La communauté de pratique nationale sur l'approvisionnement plus sécuritaire

## Thunder Bay Safer Supply Program (TBSSP): Evaluation Results

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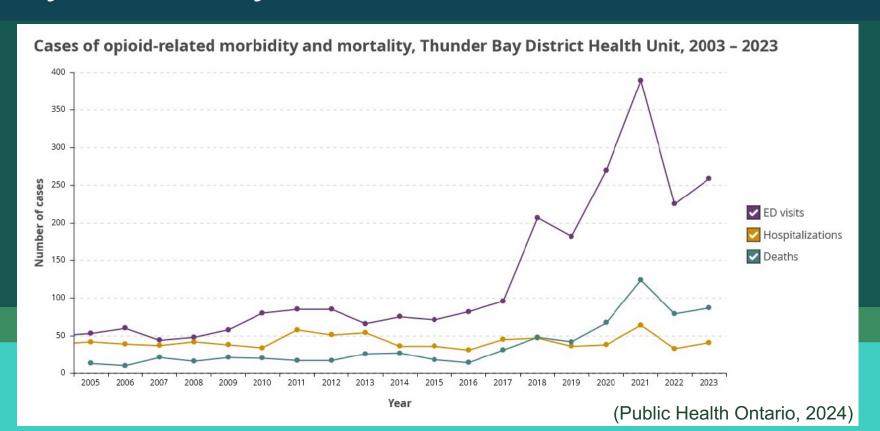




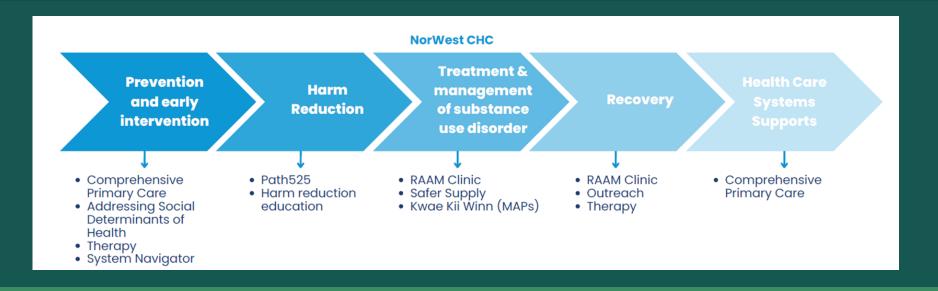
## Land Acknowledgement



## Why Thunder Bay?



## **NorWest Community Health Centres**



## **Program Model**

People Who
Use Drugs
Advisory
Committee

Path 525 (Safe Consumption Site) Nurse Practitioner

Program Manager

Client

Nurses

Other NorWest CHC Services (inter-disciplinary care)

Community
Health &
Social
Services

System Navigator Harm
Reduction
Support
Workers



## **TBSSP Steering Committee**

Steering Committee Membership

Juanita Lawson, Committee Chair, NorWest Community Health Centres Brittany D'Angelo, Co-chair, NorWest Community Health Centres Meagan Drebit, Dilico Anishinabek Family Care Holly Gauvin, Elevate NWO

Meghan Young, Ontario Aboriginal HIV/AIDs Strategy Bonaventure Egbujie, Ontario HIV Treatment Network Kandace Belanger, Thunder Bay District Health Unit Rilee Willianen, Thunder Bay Drug Strategy



## Research & Evaluation Team

Dr. Abigale Sprakes

Mike Baker

Ashley Rodericks-Schulwach

Maris Murray

Sophie Kuhn

Sydney Ambury



## **Knowledge Sharers**

TBSSP Clients

TBSSP Staff

PWUD Advisory Committee

TBSSP Steering Committee

## **Safer Supply Program Evaluation**

A response to drug poisonings in Thunder Bay, Ontario



## 'Turtle'

The turtle represents a safe place where you are treated with dignity and respect.

"the program saved my life, and it stopped me from reverting back to my older ways. Safer Supply makes my daily life easier to deal with"

~ Artist, William Perrault ~











## The Context\* of Northern Ontario

**Population**: 855, 138 (5.4% of Ontario's population)

- Northwestern Ontario: 232, 299

- Thunder Bay & District: 146,862

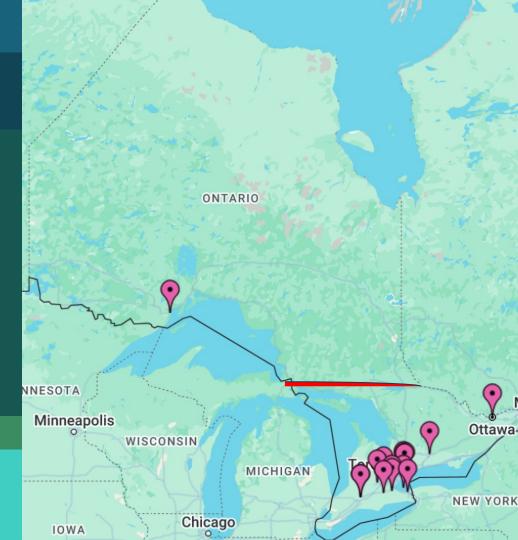
Land Mass: 806,000 km2 (88% of Ontario's land mass)

### **Opioid-related Death Rate:**

- Thunder Bay, Timmins, Sudbury, North Bay & Sault Ste. Marie have the five highest death rates in Ontario (Public Health Ontario, 2024)

### **Disproportionate Impact:**

- 13% of Ontario deaths occurred in Northern Ontario; however, the North is only 5.4% of the population (Public Health Ontario, 2024)



## 69.5



### **Goal & Vision**

To reduce the deaths and harms related to the toxic drug supply by providing individuals with opioid use disorder (OUD) prescribed opioids in a supportive care environment, leading to greater stability and wellness by addressing the social determinants of health to enhance overall quality of life.



## **Evaluation Framework**

## Framework

- Research Team Design\*
- October 1, 2022 March 31, 2024 (18 months)
- Logic Model Creation with Steering Committee and Evaluation Team
- Mixed Methods Design
- REB approval

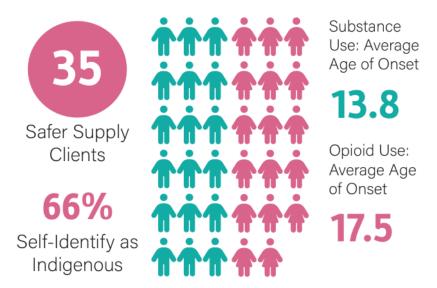
## Data Collection & Analysis

- Chart Review: De-identified Data (n=35)
- Evaluation Survey\* (n = 40)
  - SSP Clients (n=23)
  - Wraparound Clients (n=17)
- Evaluation Semi-structured Interviews\* (SSI's) (n = 30)
  - SSP Clients (n = 20)
  - SSP Staff (n = 10)



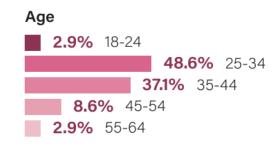
### De-identified Client Data (n=35)

## **Client Demographics**





Women's Average Age



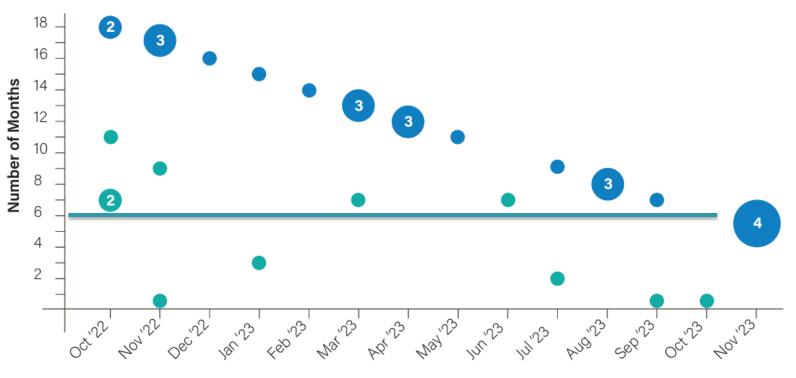
## **Length of Service**





■ Active\* ■ Closed

## **Length of Service**



### Date

■ Active\* ■ Closed

## Change over time





Clients who remained in the program for 6 months experienced the following 4 key findings





## **Key Findings**

- 1. Decreased Risk
- 2. Increased Basic Needs
- 3. Increased Health
- 4. Increased Connection

This program is the best thing that's happened in my life ... it saved my life ... I would probably be dead already if it wasn't for this.

~ CRN ~

# 1

## Decreased Risk



## Decreased Overdose Events

## **Drug Poisoning/Overdose Events**

Reduction in drug poisoning/overdoses since SSP:

77%

130 Overdoses prior to SSP (3 mos prior)

10 Overdoses since SSP

14.3% No overdose events before SSP

**5.7%** No or missing data

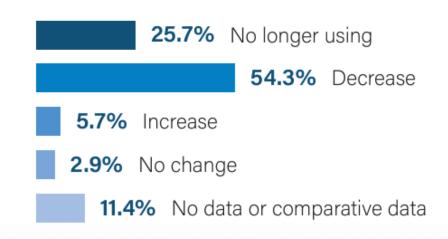
92% reduction in drug poisoning events



## Decreased Fentanyl Use



## **Decreased Fentanyl Use**



80% positive change in Fentanyl Use





## Decreased Risk . 100%



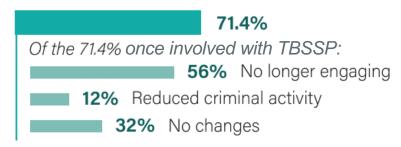
- 100% Cessation in Methamphetamine Use
- 51.4% Reduction in Crack Cocaine Use
- 8.6% Cessation in Crack Cocaine Use





# Decreased Criminal Activity

Engaged in criminal activity to support their substance use:



No criminal activity to support their substance use:



After engaging with SSP an additional 40% reported no longer engaging in CA, 8% reduced CA, with 23% still enaged in crime

And the amount of money that I was having to come up with every day was unrealistic, even probably was a job kind of thing. So I was out daily boosting, stealing, not just once, but two, three times a day ... to get freaking fentanyl or crack ... to be able to be normal functioning towards the end of the day. And the next morning the whole thing would start over again, where I'd wake up sick.

~ Jason ~

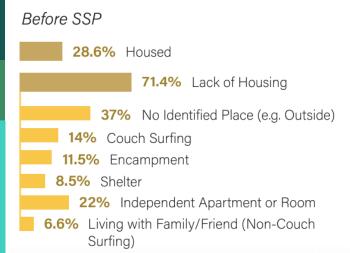
## Increased Basic Needs

## Increased Housing

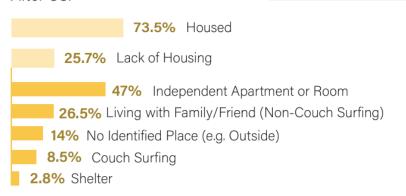




### Housing







2,5

This is an 86% increase in housing for SSP clients

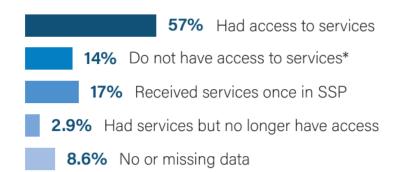
## Increased Access to Food and Services

### **Access to Food**





### **Access to Services**





I was homeless up till about a month ago... we had a tent and even though it wasn't heated, we had a propane heater, but it was one that converts into a home. So I wasn't worried about poison, but yeah it was hard getting here. You know what I mean? Yeah, because we have to be there twice a day for the first bit. But now I have an apartment and a job lined up.

~ GD /

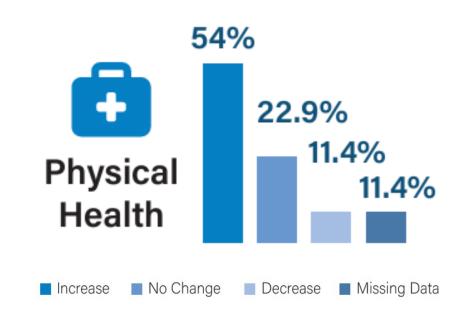
## 3

## Increased Health

## Increased Physical Health







# Increased Physical Health





- 62.8% of clients received immunizations at TBSSP
- Of those with a chronic condition:
  - 68.5% engaged in disease management
  - 100% engaged in HIV/HCV care
- 50% decrease in ER attendance (of those who utilized pre-SSP)

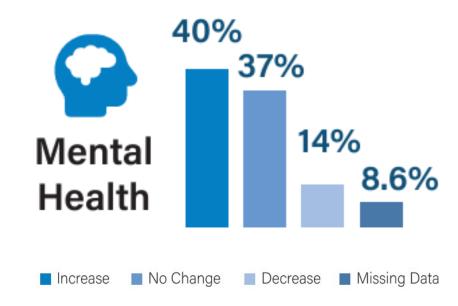
Just recently one type of down [fentanyl] started to cause my feet to swell out, like how they were before with my legs having a really bad abscess on my leg ... Like I probably even almost lost one leg so probably within the next couple of months ... if I wasn't on this program, I would have health problems like that again.

~ Jason ~

# Increased Mental Health







## Increased Mental Health

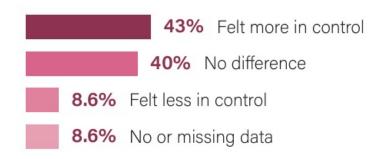




## **Change in Daily Stress**



## Change in Feeling in Control of Life



I would say that I'm more energetic, and more happy. Sometimes everybody has their days, but I feel like I'm just more happy ... I wouldn't be able to do this without the program, like getting off of everything, I wouldn't have been able to do it. Or even in treatment, or detox, you know. 'Cuz I do not feel safe in any of those places.

'~ Viola ~

### Chart 1.0 Increased Health

Physical Health* (n=33)	Mental Health* (n=21)	Vaccinations (n=22) (78 provided)	Sexual Health (n=12)	
Hepatitis C (HCV) Depression Human Anxiety		Hepatitis A (HAV) & Hepatitis B	Reproductive Health (e.g., birth	
Immunodeficiency Virus (HIV)	Post-Traumatic Stress Disorder (PTSD)  Attention Deficit Hyperactivity Disorder (ADHD)  Flu, Colds, ia Personality Disorders FASD	(HVB) Influenza/Flu	control) Sexually Transmitted Infection (STI) Testing	
Chronic Obstructive		Tetanus & Diptheria		
Pulmonary Disease (COPD)		Pneumococcal Disease	STI Treatment	
Asthma, Flu, Colds, Pneumonia		Meningococcal	Supplements*:	
Group A Streptoccal		Measles, Mumps, Chickenpox	Vitamins (e.g, D, Calcium)	
Infections		HIV Prevention &	Ensure Shakes	
Chronic Pain	Stress	Treatment*:	Other*:	
Foot care Other medical		(PrEP) and (PeP)	Drug side effects (e.g., constipation)	
conditions**				

# 4

## **Increased Connection**



## Increased Connection



Feel Part of the Community (before TBSSP)



- 28.6% Felt connected
- 6% Felt sometimes connected
- **6%** Felt connected but no longer do

No or missing data:

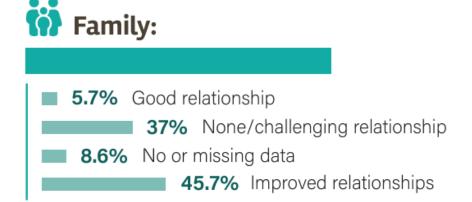


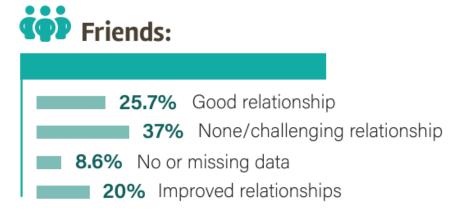
Once involved in SSP, 71.4% reported feeling connected to the larger community.

## Increased Connection



Once involved with TBSSP:





It's saved my life. Got me back in touch with my family and friends and in good graces and I'm helping doing good things for my family and not doing any crime... things are going smoother.

~ Pete ~



## Goals

## Change over time

Goals/hopes/dreams shifted for individuals who remained in the program for more than 6 months









## Goals

- 1. To stay alive
- 2. To prevent or reduce overdose/drug poisoning events
- 3. To reduce risky situations (e.g., engaging in crime, sex survival work)
- 4. To reduce withdrawals/dope sickness
- 5. To get their life back/move forward
- 6. To gain structure/stability in their life
- 7. To gain access to support and resources (e.g., healthcare)

- 8. To reunite with family/have access to children
- 9. To be employable/secure employment and save money
- 10. To attend school, upgrade or post-secondary
- 11. Seek volunteering opportunities or find work
- 12. To engage in substance use treatment programs (community based, live-in treatment)
- 13. To have access to take-home doses
- 14. To secure/have stable housing
- 15. To reconnect with their culture
- 16. To stop substance use, with an emphasis on fentanyl

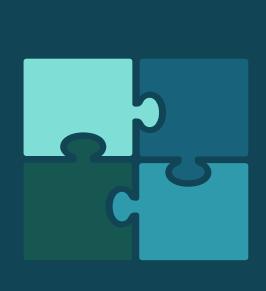






## Strengths & Challenges

	Program Strengths	Program Challenges		<ul><li>5 Increased Access to Services:</li><li>Access to Primary Care</li></ul>	Hours of Operation: Impacts ability to work due to program hours or to work	
	No fatal opioid poisoning events: TBSSP clients - "I'm alive." Reduction in overdose frequency	Care Pathways: Limited or no access to various healthcare and correctional facilities re SS prescription. Leading to no continuity of care and places clients at risk of significant withdrawals and reduce tolerance level once discharged from the facility  Treatment Centres  Hospitals Jail/Correctional Facilities	6 7 8 8		Access to Mental Health Care	outside of Thunder Bay
				6	<ul> <li>Wraparound Service:</li> <li>Access to basic needs (food, clothing, bus tickets, housing support)</li> <li>System navigation (external)</li> </ul>	Lack of fentanyl-based products: Current medication not potent enough to address level of use or potential withdrawals
				7	<ul> <li>Accessibility/Removing Barriers:</li> <li>Intake to program start date; average 7 days.</li> <li>Couples accepted together, to allow stabilization to occur</li> </ul>	Lack of Non-Opioid Safer Supply: No access to regulated stimulants. The majority of clients use both fentanyl and crack cocaine. So while they may be experiencing stabilization in some areas there is still fundraising and seeking the crack cocaine that is reducing some clients' quality of life
2	<ul> <li>Staff:</li> <li>Supportive/Caring</li> <li>Feel cared for, feel like a person, "you are seen", no judgement a. Create safety</li> </ul>	Restricted Movement:  Travel Restrictions, unable to travel with family or to see family				
	b. Role Models - Staff with lived experience			8	<b>Routine/Structure:</b> Attending program daily provides and requires routine and structure - allows for stability and positive changes in life	Not all benefits cover needed prescriptions: This creates barriers to care, including if a coverage ends and the client no longer has access. Universal coverage is not present
3	Welcoming Environment (Program Atmosphere)  • Safe	<b>Location:</b> attending twice a day challenging for those who do not live close to the SSP site (transportation, time)				
	<ul><li>"Feels like home"</li><li>Supportive, positive space</li></ul>			9	Harm Reduction Approach: client autonomy supported, nonjudgemental, reduces stigma	Prescriber recruitment: Primary care recruitment can be challenging in the North, there is an added challenge of recruiting for Safer Supply as there is a lack of prescriber education on this topic
4 .	<ul> <li>Sense of Community:</li> <li>Don't feel alone/support available</li> <li>See others with same struggles</li> </ul>	Pharmacy Model: For individuals working on stabilization the pharmacy impacts their routine and increases risk when not in the safety of the SSP site to receive doses. Pharmacy hours – limited availability on weekend (if client unable to attend during these hours they will not have their required doses for the weekend)				
				10	Reduction in injection drug use: there is a reduction in injection drug use and lowering of risk, however, there is an increase in inhalation, which has resulted in the lack of access to a safe consumption site, thereby increasing risk	Pilot Status and Inability to Scale-Up: Uncertainty of program continuity and a staffing model that cannot meet the demand in Northern Ontario



## Overall Themes



#### **Themes**

#### Connection

Staff Approach
Staff with Lived Experience
Seen as human, worthy

#### Addiction as Trauma

Not only what leads to substance use

Experiences due to addiction – overdose, death of friends/family, interaction with systems

#### Housing

Wraparound service
Lack of safe affordable
housing
Housing with Staff

#### **Diversion**

Self-administration
Withdrawal Management
Compassionate Sharing
Survival – basic needs

### Integration with Primary Care

Substance use part of health care Chronic health condition Reduce Stigma

#### **Future**

Pre-SSP, present-SPP and *future* of the program and the status of clients' lives



#### Future

Chart 2.0 Pre-SSP **SSP SSP Sustainability** Themes (past) (present) (future) **Emotional State** Hopeless Hope Fear **Connection with** Supported Uncertain Alone Others

Low

Life

Uncertain

Uncertain

### **Overdose** High Frequency **Probability of** Death Life or Death



#### Future

Chart 2.0

Themes	Pre-SSP (past)	SSP (present)		SSP Sustainability (future)
Emotional State	Hopeless	Норе		Fear
Connection with Others	Alone	Supported		Uncertain
Overdose Frequency	High	Low		Uncertain
Probability of Life or Death	Death	Life	\	Uncertain

It honestly makes me want to cry thinking about them [politicians] taking it away,
I just, honestly, that just looks like
my whole world collapsing.

~ Shiz ~



# Advocacy & Amplification of Voices

I say it's a safer alternative ... like less likely to overdose ... some people want to get off the down [fentanyl]... like the pills are helping to stop using down. They are helping.

~ James ~

Um, I feel like I matter now, yeah, I feel like I matter [getting emotional] I'm not just another statistic.

~ Nathan ~

We're people too, and we need this program; it's saving our lives. It saved my life, I'm still here, because of this program.

 $\sim WP \sim$ 

It does more good than harm... taking it away, it's gonna cause a lot more fallout ... if you think there's a problem with it [opiates], now, take it away. ... Do you see what that does? Like it's gonna cause like a big domino effect ... all those people that got better, they're gonna be back on the street, and just, you know, what I mean? ... it's helped me and just changed my life. So, just that would be devasting.

~ Shiz ~

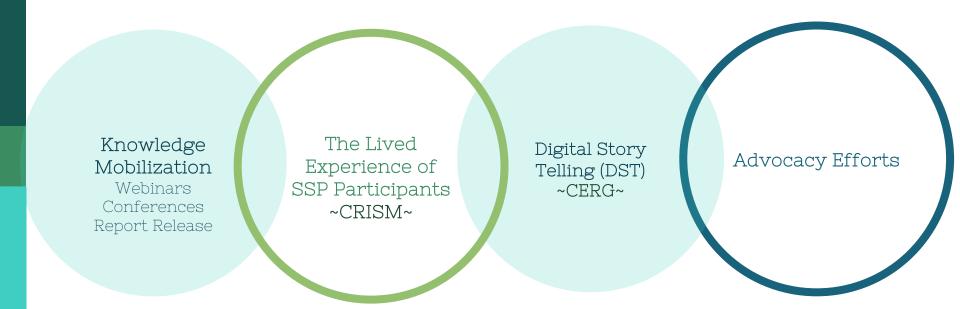
My city [Thunder Bay] is struggling, and we need the support ... I would like everyone to know that they're [TBSSP] not only helping us clients, they're also helping the city as one. Like my family, like I would say my family because they're getting me back. Yeah, they're getting back the person I was before. So they're [family] definitely grateful too. I hope that this program just doesn't stop because I think that will just cause more problems, and for me ... I won't have my support system. Yeah, it would be tough, it would be tough. And I really hope that it doesn't happen because I need them.

~ Viola ~

Growing Hope Happier
Productive I Matter
reased self-esteem Alive **Trying my best** More human Increased self-esteem Alive No longer want to give up Transformation



#### **Next Steps...**



## Safer Supply Program Evaluation

A response to drug poisonings in Thunder Bay, Ontario



Any questions not answered today?

Program Questions:

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Research & Evaluation Questions: asprakes@lakeheadu.ca







