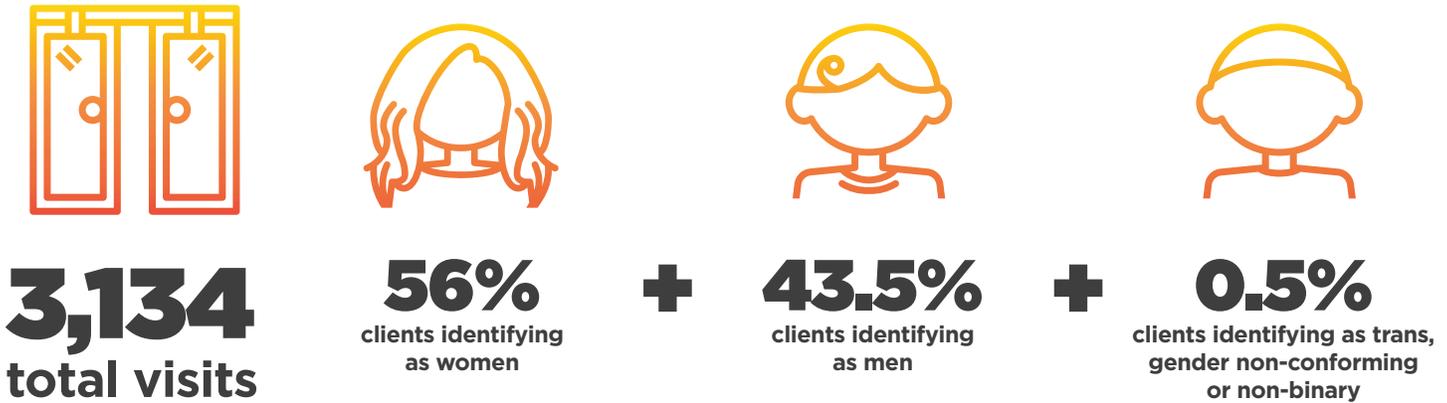


STREET HEALTH'S OVERDOSE PREVENTION SITE: EVALUATION RESULTS

Street Health has a long history of providing services to marginalized people who use drugs and who are experiencing homelessness. It is located in an area known to be the epicenter of the overdose crisis in Toronto: the Dundas-Sherbourne intersection has Toronto's 2nd highest volume of calls to paramedics for suspected overdoses, which often occur in alleyways, building stairwells, public washrooms, and in shelters and drop-in centres.

On June 27th, 2018, Street Health opened a small overdose prevention site (OPS), with 2 injection spaces, in a coach house behind their main building. The objective of the OPS is to provide a safe space for people to use drugs under supervision, with trained staff able to respond to overdoses, provide support, safer drug use education and supplies, and to connect people to additional healthcare and social services as needed.

PROGRAM USAGE STATISTICS



Number of overdoses successfully reversed: **50**

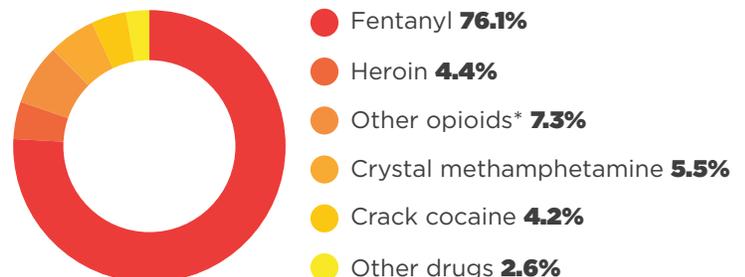
Average number of visits per month:¹ **272**

Average number of referrals per month to healthcare including substance treatment:² **53**

Average age of clients: **36 years old**

Peer-to-peer assisted injections: **12.9%**

PRIMARY DRUG CONSUMED



* oxycodone, hydromorphone, etc.

¹ Average number of visits per month from January – August 2019

² Average number of referrals per month from April – August 2019



Health and social impacts of the overdose prevention site:

Street Health's OPS has led to several positive health and social impacts for OPS clients, including:

- **Reduced overdose-related harms:** Staff intervene to reverse overdoses, preventing death and harm.
"I'm alive today because of it." (STREET HEALTH OPS CLIENT)
- **Encouraging safer drug use:** Clients using the OPS are able to consume drugs slowly, and use sterile equipment and safer consumption practices.
"I'm more educated [on HIV and hepatitis C] because of it." (STREET HEALTH OPS CLIENT)
- **Increased engagement in wrap-around care:** Provision of OPS services improves access to other healthcare and social services, both on-site or through referrals to community partners.
"They're good at providing other services. Like housing or treatment, stuff like that." (STREET HEALTH OPS CLIENT)

Potential impacts of OPS closure

When asked about the impacts if the OPS were to close, the following potential outcomes were reported:

- **Increased drug use in public spaces**
"This neighbourhood, there's people using all the time, and we're just going to see more of it, unsafely in the alleys and the buildings and the other services. They would not have a safe place to be" (STREET HEALTH OPS STAFF)
- **Increased risk of overdose and related harms, including death**
"These places save lives. They are a necessity and a staple to our community and we need them. People will die if these places close. These places literally are what keeps, like, we're all here right now, because the site is open." (STREET HEALTH OPS CLIENT)

Staff reported that they worried about the following outcomes:

- **That clients would lose a safe space with a supportive community**
- **Loss of jobs and income for people working in the OPS**
"I really love my job, and I put a lot of myself into it. I think that without my job, I would fall deeper and deeper into drug use that I don't want for myself." (STREET HEALTH OPS STAFF)

Potential impacts for the community if the OPS were to close:

- **Increased public drug use and increased overdoses in public spaces**
"People would be forced to use in public again. Before the OPS, they told us they used in stairways, alleys, parks, public washrooms. They'd go back to doing that." (STREET HEALTH OPS STAFF)

OPS Service Delivery Model and Implementation

Location and space

- The corner of Dundas & Sherbourne has the 2nd highest rate of overdose calls to paramedics in the City of Toronto. The OPS is desperately needed in the neighbourhood to respond to overdoses and public drug use.
- Locating the OPS onsite at Street Health facilitates client access to other healthcare and social services.
- Clients prefer the small, calm, and non-clinical environment in comparison to other OPS in the city.
"It's absolutely essential that Sherbourne and Dundas have an OPS. We know that people are using and experiencing overdoses in the shelters and the buildings and alleys that surround us so, yeah, I think it's key that we be right where we are." (STREET HEALTH OPS STAFF)

Accessibility

- The OPS provides low-threshold services, with short wait times and access to other services.
"People come here to use drugs but it's like a one-stop shop where we'll try to get all of their social and health needs met." (STREET HEALTH OPS STAFF)

Staff with lived experience

- Clients appreciated that the staff are primarily women with lived experience.
- This enhanced OPS accessibility and increased client willingness to use the OPS and other healthcare and social services.
"As much as educational experience or work experience would be an asset, lived experience with drug use was considered an asset." (STREET HEALTH MANAGEMENT)

OPS provides a refuge

- The OPS provided a welcoming space for people who are homeless.
- Women and trans-people identified the OPS as a safe space; Street Health sees a much higher proportion of use by women than at other Toronto OPS.
"What clients tell me most is that the coziness of the space and the quietness of the space is what draws them. Women identified folks in particular, will come in and say 'Oh my god, this is the first quiet moment I've had all day. I cherish this. I value this.'" (STREET HEALTH OPS STAFF)

Challenges:

Lack of shelter beds or treatment/detox space

- OPS staff reported frustration with securing shelter beds and detox beds. They frequently spent many hours trying to find available beds for clients.
"When it comes to detox and treatment, it's rare that there's a bed or a program ready when that person is ready. It's often the case of spending the whole day on the phone waiting for a cancellation or for a space to open up." (STREET HEALTH OPS STAFF)

Lack of smoking facilities

- Lack of supervised spaces for people to smoke drugs is a health equity issue.
- Smoking is a common mode of consumption of opioids and stimulants, and the OPS is currently not able to accommodate this.
"We need an inhalation site desperately. When folks are on the street, they are at risk of criminalization, but also they're not gaining that streamlined access to all these other services - medical, housing, food. It's unfair." (STREET HEALTH OPS STAFF)

Funding insecurity

- The major organizational challenge affecting service delivery was the uncertainty around long-term funding.
- Efforts to keep the OPS open required balancing service delivery with the considerable time and human resource demands dedicated to securing funding and developing contingency plans for if the site were to close.

Community reaction

- Participants describe pushback from community as 'heartbreaking' and a threat to the provision of effective harm reduction and overdose prevention services that are keeping people alive during a crisis.