

#smokedontpoke:

Meth Pipe Distribution Pilot Project

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HARM REDUCTION IS CHANGING OLD SYSTEMS
HARM REDUCTION IS KEEPING PEOPLE ALIVE
HARM REDUCTION IS MEETING PEOPLE WHERE THEY ARE
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#smokedontpoke: Meth Pipe Distribution Pilot Project Summary of Findings Year 1

Introduction

In the continuum of harm reduction, it is common knowledge that smoking drugs is safer than injecting them. Unfortunately pipes for smoking methamphetamine (meth) are specialized and can be hard to find or expensive. The success of safer crack use kits distributed in Manitoba has been credited with helping to keep drug use transmission of HIV and Hep C low by providing a safer way to use. Some harm reduction organizations have already started handing out pipes to curb the rise of methamphetamine injection. In the last few years the MHRN has been receiving increasing requests for meth pipes from people who use drugs in Winnipeg, Selkirk and Pine Falls.

For these reasons the MHRN created a pilot project to examine the impacts of meth pipe distribution. This information may be used to support proposals for pipe distribution in the future, and in the meantime, the pilot project got pipes into the hands of people who need them. This project was funded through a grant from the Public Health Agency of Canada.

The Manitoba Harm Reduction Network (MHRN) is a provincial harm reduction advocacy, education, and research organization in Manitoba. The mandate of the MHRN is to work with peers, network members, policymakers, academics, and community leaders to make recommendations regarding the development, implementation, and evaluation of sexually transmitted and blood-borne infection prevention initiatives based on evidence and harm reduction. The MHRN is comprised of 11 network sites with most in rural, remote, and Northern Manitoba. Each of these networks are comprised of over 30 members from local health authorities, service organizations, community members and people who use drugs. Each site has a Peer Advisory Council of people who use drugs and the MHRN engages monthly with over 200 Peers that use drugs throughout Manitoba

The Peer Advisory Councils (PACs) are the advisory bodies of the MHRN. The members are people who use drugs and are impacted by HIV, hepatitis C, and are actively involved in preventing the transmission of STBBI in their communities through harm reduction. The PACs inform the organization on issues related to safer drug use, safer sex practices, harm reduction strategies, peer engagement strategies and tools, community based research, program development and implementation, knowledge translation, and support for individuals affected by STBBI, the social determinants of health, and substance use.

From June to October 2020 the MHRN offered Peer Advisory Council members and their peers the opportunity to participate in a pilot pipe distribution project in Selkirk, Pine Falls and Winnipeg. These sites were chosen due to the advocacy of PAC members at these sites for meth pipe access.

While this project initially planned to occur during Peer Advisory Council Meetings, methods had to be adjusted due to COVID-19 safety. Instead of meetings, participants met individually with staff to do a survey (pre), an optional education session, and receive up to 5 pipes. When participants returned for another visit, they completed a different survey (post) and were able to pick up more pipes.

Project Participants

44 People Who Use Drugs participated in the project from 3 sites: 27 in Winnipeg, 10 in Pine Falls and 7 in Selkirk. 44 individuals received pipes in 74 interactions with staff. 44 Pre surveys and 30 post surveys were completed.

- The age of participants ranged from 24-69 years old.
- 25 men, 18 women and 1 non-binary person participated.
- 500 pipes were distributed

Key Results

Sharing frequency (pre/post):

In the pre-test only 23% of participants (n: 10) stated they NEVER shared drug use supplies. In the post test this number increased to 46% (n:14). Generally participants did not share injection equipment but were more likely to share pipes for smoking.

Injection frequency (pre/post):

In the pre survey, 28% of participants injected daily (n: 12)

In the post survey, 12% of participants injected daily (n: 3)

Smoking frequency (pre/post):

Smoking frequency was fairly consistent with participants smoking daily 43-45 % of the time (pre test 45.5%, post test 43.3%).

Sharing of information:

In both the pre and post survey most of individuals felt somewhat or very comfortable sharing information about substance use (pre: 97.7%, post: 96.4%). In the post test, 79% of participants had shared information since their last visit. Participants shared information about safer drug use practices, not sharing smoking equipment and gave new pipes to other people who use drugs.

Suggestions:

Participants suggested that lack of pipe access contributed to the sharing of pipes, but also a culture around sharing drugs. Increasing accessibility of supplies through increased hours, sites and peer to peer distribution were also suggested.

Considerations

The onset of COVID-19 limited number of participants, sites and staff availability. The context of COVID-19 has led to substantial changes in drug use practices since this data was collected.

Year 2 of this project will support peer-to-peer distribution of meth pipes and harm reduction information.