

Harm Reduction Project

Phase 2

Results Report

March 2023

Background

This document shares outcomes of the *Peers in the Park* (Peer to peer knowledge sharing) project conducted by the Manitoba Harm Reduction Network (MBHRN) in 2022.

The Peers in the Park knowledge sharing project was informed by the outcomes of the *Harm Reduction Client Survey* (Client Survey) conducted by the Manitoba Harm Reduction Network (MBHRN) in 2021. The survey completed in July 2021, provides information to bolster stakeholder understanding of 1) drug use practices, 2) what people need for drug use supplies and healthcare resources, and 3) how people who use drugs (PWUD) share information within social networks in order to reduce related harms. The phase 2 peers in the park project operated from July 22nd- Sep 23, 2022, on Friday afternoons at 1:30pm in Princess park Brandon, MB.

Project Aims

To increase peer to peer networking and provide the most effective harm reduction services and education to the peer population, by the peer population. This goal is based on the results obtained from the community scan survey (2021) in Brandon, MB (Phase 1).

Project Objective

1. To use the information obtained in the community scan (Phase 1) of the project to improve access to harm reduction supplies and safer drug use information through peer to peer networking. This includes access and information for People Who Use Drugs (PWUD) that do not feel safe in accessing health care spaces.
2. To use the information obtained in the community scan (Phase 1) of the project to foster and improve the relationships between health care providers and PWUD to support PWUD in accessing health care services including STBBI testing, care, and treatment.

Methodology

This project implemented the identified harm reduction recommendations from Phase 1. The most prevalent recommendation from phase one was mobilizing harm reduction with a peer to peer networking approach. We did this through:

1. Peer to peer education: "Peers in the Park". Peers received training/education on safer drug use, current peer concerns and other topics of peer interest from a trusted healthcare provider. They then shared this information along with relevant handouts with interested peers during a Peers in the Park session.

2. Peer to peer supply distribution: peers distributed harm reduction supplies to their peers through at peers in the park events, outreach and on-demand. Peers were supplied with bike(s) and backpacks to make delivery of supplies easier and more accessible.
3. In progress (Phase 3): Peers will create educational materials that can be shared with the general public on safer drug use (video, infographic).

The group ran from July 22nd- Sep 23, 2022 , on Friday afternoons at 1:30pm in Princess park Brandon, MB.

Project Stakeholders

Manitoba Harm Reduction Network (MHRN), People Who Use Drugs (PWUD) in Brandon, MB, Prairie Mountain Health (PMH) and the Canadian Research Initiative in Substance Misuse (CRISM) Prairie Node.

Peer Advisory Council

This survey was conducted in the city of Brandon, Manitoba. Brandon has an established peer advisory council made up of 12 people with lived/living experience with substance use. The peer advisory councils advise the work of the harm reduction networks, take on their own work and projects, do capacity building together to increase capacity about HIV/STBBI, host events/awareness campaigns and informally develop support networks with other people who use drugs.

Location

Brandon is located on treaty 2 territory and is the second largest city in the province of Manitoba with a population of 48,859 people. It is located in the southwestern corner of the province and is built on the banks of the Assiniboine River. Brandon is known as the wheat city for its agricultural roots.

Recruitment

In order to recruit individuals to participate in this project the following was done:

- A poster was created by the MHRN Network Coordinator inviting peers to sign up to be a facilitator, supply distributor or recruiter for the peers in the park events. (Appendix A: Recruitment Poster)
- A second poster was created by the MHRN Network Coordinator to advertise the peers in the park events. (Appendix B: Advertisement Poster)
- Peer Advisory Council (PAC) members shared the posters and information among their peer groups
- The poster was shared throughout the Brandon Network. (The Brandon network is a group of organizations, community members and stakeholders who advocate for harm reduction and implement harm reduction initiatives)
- Organizations posted the poster at their offices including: Brandon neighborhood renewal corporation (BNRC), Public Health, 7th street health access center and the Brandon Friendship Center
- The posters were shared digitally through Facebook

Project results

Peers in the park sessions

10 peers in the park sessions were held with 10 unique session topics chosen by peers. Peers received training on the topic from a public health nurse, community health nurse, SERC staff and/or MHRN staff before each session. 48 unique peers attended the sessions over the 10 weeks. With many attending multiple sessions, and 2 of the repeat attendees became members of our Brandon Peer Advisory Council. Evaluations were distributed and collected at the end of every session. A total of **73** evaluations were completed over the 10 weeks. Evaluations were optional and not all attendees completed evaluations. The survey that respondents completed each session is provided as Appendix A. The recruitment posters for the project are included as Appendix B.

Section A: About Participants

- **Project facilitators:**
 - 9 unique peers participated as Peers in the Park facilitators with some facilitating multiple times
- **Project supply distributors:**
 - 10 unique peers participated as supply distributors with some distributing multiple times
- **Project recruiters**
 - 14 unique peers participated as Peers in the Park session recruiters with some recruiting multiple times
- **Session participants**
 - ~48 unique peers attended and participated in peers in the park sessions. This number only include people who sat through all or most of the session and does not include people who passed through or only stayed a few minutes

Section B: Topics

1. **Hep C and treatment** - ~12 attendees, 10 evaluations completed
 - a. 90% (N=9) of people found this topic very helpful, 10% (1) of participants found it ok
 - b. 100% (10) of participants learned something that will help them stay safe
 - c. 100% (10) of participants said they can use this information in their life
 - d. When asked what was something you learned today we heard:
 - i. More about hep C- 2
 - ii. Don't share needles- 2
 - iii. No response- 2
 - iv. How long the treatment takes- 1
 - v. Hep C can be treated in Brandon- 1
 - vi. Babies can be born with hep C-1
 - vii. You can live with Hep C for a long time-1
 - e. When asked what was one thing you loved about the workshop we heard:
 - i. The learning/information- 5
 - ii. The food- 3
 - iii. Hearing personal experiences-1

- iv. Building connections with others- 1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing- 5
 - ii. No response- 4
 - iii. More food- 1

2. Safer injecting/avoiding abscesses- ~8 attendees, 6 evaluations completed

- a. 100% (6) of people found this topic very helpful
- b. 100% (6) of participants learned something that will help them stay safe
- c. 100% (6) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Jug shots are dangerous/don't inject in the neck- 2
 - ii. How to inject safer- 2
 - iii. Help is always out there- 1
 - iv. Many people don't know how to inject properly-1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. The knowledge of the peer facilitators- 2
 - ii. The information- 1
 - iii. Learning new things- 1
 - iv. The people- 1
 - v. The food- 1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing- 3
 - ii. Larger platform so we could invite more people- 1

3. Fentanyl test strip how to- ~12 attendees, 10 evaluations completed

- a. 90% (9) of people found this topic very helpful, 10% (1) of participants found it ok
- b. 100% (10) of participants learned something that will help them stay safe
- c. 100% (10) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. How to safely test my drugs- 5
 - ii. No response- 2
 - iii. To remember to check the expiry on strips- 1
 - iv. How to speak to a group- 1
 - v. Unusual drugs might bubble- 1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. The people/peers- 3
 - ii. Being outside- 2
 - iii. The information-2
 - iv. Learning drugs do not always look the same-1
 - v. Learning how to test drugs- 1
 - vi. It was interactive-1
- f. When asked what is one thing you would change about the workshop

we heard:

- i. Nothing- 5
- ii. Less outside interruptions-2
- iii. Information on how to test for other substances-1
- iv. More seating space-1

4. Overdose prevention/naloxone training- ~11 attendees, 7 evaluations completed

- a. 71% (5) of people found this topic very helpful, 29% (2) of participants found it ok
- b. 100% (7) of participants learned something that will help them stay safe
- c. 100% (7) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Everything/naloxone training- 2
 - ii. What substances naloxone doesn't work on-1
 - iii. About naloxone doses and timing-1
 - iv. The needles in the kits can go through pants- 1
 - v. No response- 1
 - vi. There is no medication to reverse a stimulant overdose- 1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. Peers facilitating/the people- 4
 - ii. The food- 1
 - iii. Learning how to use naloxone- 1
 - iv. The creative acting in the training- 1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing- 3
 - ii. Seating-1
 - iii. More people-1
 - iv. Interruptions- 1
 - v. No response-1

5. Using new supplies and new waters- ~9 attendees, 7 evaluations

- a. 86% (6) of people found this topic very helpful, 24% (1) of participants found it ok
- b. 100% (7) of participants learned something that will help them stay safe
- c. 100% (7) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Why my syringes were dull after being reused/needles dull after one use- 2
 - ii. Use new water every time- 2
 - iii. Needles get damaged very easily- 1
 - iv. Use new needles every time- 1
 - v. Best to use sterile water and not tap or well water- 1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. Friendly people- 3

- ii. The new information- 3
- iii. The food- 1
- iv. No response- 1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing- 4
 - ii. Outdoor/the bugs- 1
 - iii. Sessions more often-1
 - iv. Give out summary sheets- 1

6. Mixing drugs/Injecting naloxone- ~10 attendees, 5 evaluations completed

- a. 100% (5) of people found this topic very helpful,
- b. 100% (5) of participants learned something that will help them stay safe
- c. 100% (5) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Don't mix drugs-1
 - ii. Mixing drugs can be dangerous- 1
 - iii. Naloxone does not have adrenaline in it-1
 - iv. Excess naloxone that is not needed will be flushed out of your body- 1
 - v. No response- 1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. It was outside- 1
 - ii. The food- 1
 - iii. The openness and sharing- 2
 - iv. No response-1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing-2
 - ii. More info on the cause and effects of mixing uppers and downers-1
 - iii. More food-1
 - iv. Make sure presenter does not mumble-1

7. Sexual health/STI's- ~14 attendees, 6 evaluations collected

- a. 83% (5) of people found this topic very helpful, 17% (1) of people found this topic ok
- b. 100% (6) of participants learned something that will help them stay safe
- c. 100% (6) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Testing is needed/how to get tested- 2
 - ii. STI numbers are high- 1
 - iii. How to have safer sex-1
 - iv. You can't get HIV through mosquito bites- 1
 - v. No response- 1
- e. When asked what was one thing you loved about the workshop we

heard:

- i. The people/the fun- 3
 - ii. Everything- 2
 - iii. Learning how to prevent STIs-1
- f. When asked what is one thing you would change about the workshop we heard:
- i. Nothing- 5
 - ii. More facts-1

8. Needle disposal- ~14 attendees, 7 evaluations collected

- a. 86% (6) of people found this topic very helpful, 24% (1) of people found this topic ok
- b. 100% (7) of participants learned something that will help them stay safe
- c. 100% (7) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. Proper needle disposal- 2
 - ii. Bottles can be used as needle disposal containers-1
 - iii. How to break needle tips off-1
 - iv. That there are wonderful people out there that care-1
 - v. How to stay safe and keep others safe-1
 - vi. What to do if you accidentally poke yourself with a needle-1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. The people-3
 - ii. The weather-2
 - iii. Safety- 1
 - iv. The food-1
 - v. Everything-1
 - vi. No response-1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. The location/better weather-3
 - ii. Nothing-4

9. Rapid Access Addiction Medication (RAAM) ~14 attendees, 8 evaluations

- a. 88% (7) of people found this topic very helpful, 22% (1) of people found this topic ok
- b. 88% (7) of participants learned something that will help them stay safe
- c. 100% (8) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. How RAAM works- 5
 - ii. Where to go to access RAAM-1
 - iii. People care- 1
 - iv. Not all substance use suitable for RAAM- 1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. The people/People sharing personal experiences- 3

- ii. The food-3
- iii. The information/learning- 2
- f. When asked what is one thing you would change about the workshop we heard:
 - i. Nothing- 5
 - ii. The weather- 3

10. Surviving homelessness- ~11 attendees, 7 evaluations collected

- a. 71% (5) of people found this topic very helpful, 29% (2) of people found this topic ok
- b. 86% (6) of participants learned something that will help them stay safe
- c. 100% (8) of participants said they can use this information in their life
- d. When asked what was something you learned today we heard:
 - i. There are lots of resources- 4
 - ii. Homelessness affects all ages and races- 1
 - iii. How to access the homeless shelter- 1
 - iv. There is a housing resource workers at 7th st HAC-1
- e. When asked what was one thing you loved about the workshop we heard:
 - i. The people/ the caring people- 3
 - ii. The openness to share- 1
 - iii. No responses-1
 - iv. Seeing the MHRN student-1
 - v. Everything-1
- f. When asked what is one thing you would change about the workshop we heard:
 - i. More information about the housing available-2
 - ii. Longer sessions- 1
 - iii. People interrupting the speakers- 1
 - iv. Nothing- 3

Peer to Peer Harm Reduction Supply Distribution

Peers distributed harm reduction supplies to their peers through peers in the park sessions, outreach and on-demand. Peers were provided with bike(s) with a basket to make delivery of supplies easier and more accessible. Peers also delivered on foot using a backpack. Supplies were given to peers weekly for peer to peer distribution over 12 weeks.

Supplies distributed:

- 4600 Syringes
- 210 Bubbles
- 82 Stems
- 4300 Sterile water
- 5200 Alcohol swabs
- 900 Ties
- 400 Cookers
- \$600 worth of to go snacks

Summary- Phase 1 of the project (*The Harm Reduction Client Survey*) provided recommendations to meet peer supply needs based on survey results. The recommendation included: ensuring the supply of smoking supplies (Meth bubbles, crack pipes), syringes/needles, water, and ties and not limiting supplies when possible. The survey also revealed the need for 24/hr supply access. The peers in the park supply distribution program aimed to address some of these gaps by providing peers with supplies to hand out at any time of day they choose, and avoiding limits on supplies when possible.

Unexpected benefits

Reciprocal learning- Healthcare providers shared valuable learning from the peers during their education meetings before each session. Healthcare providers learning from peers was an unanticipated benefit

- Here are some of the things the healthcare learned from the peers:
 - Barriers to care - travel to appointments, needing health card, identifying stigma
 - Personal experience and feedback from Hep C treatment in Brandon
 - Use of naloxone for a “high”
 - Identifying trends in use -brown down, use of combined substances and routes like “booty bump”
 - Quote from PHN “Above all we highly value the opportunity to strengthen Public Health’s relationship and presence in the community. We thank the Peers!”

Project limitations

- The project was only 10 weeks, therefore not a lot of time to build relationships. If this project was to be repeated or continued it would be interesting to see if past attendees would return and if the number of attendees would increase. It was observed that the sessions started to gain a lot of interest near the end of the 10 weeks as the project was wrapping up
- Stigma prevented people from participating. There were many people who checked out the sessions or stayed for a few minutes and then left. Stigma is a possible reason reported by peers that people did not stay the entire session. If the project is repeated it would be beneficial to have a tool to capture those who checked out the session but did not stay.
- Near the end of the project fewer evaluations were being completed, as people were reporting it felt repetitive

Notes for future event planning

Considerations if the project was to be repeated:

- Develop a tool to capture returning attendees
- Add a question to the evaluation that asks “will you share the information learned today with someone else” to capture the reach of the information
- Adapt the evaluation tool to not feel repetitive

Analysis of information

Evaluation responses highlighted two main themes: Value of peer to peer knowledge sharing and the importance of food at meetings. When asked what people loved about the workshop, the people presenting (peers) and the food were consistent answers throughout every session. From the harm reduction client survey we learned that people who use drugs prefer to get their information from their peers and that was confirmed with the evaluation responses. People preferred to get information from peers that they trusted and have similar lived/living experience to themselves. Food was also mentioned across all evaluations. In follow up with the peer advisory council (PAC), peers stated that

enjoying a meal with their friends after each session was not only an incentive, but also a chance to build relationships, community and debrief with people they trust and feel comfortable with.

The topic recommendations from phase 1 (Harm Reduction Client Survey) of this project, as well as current peer recommendations guided the topics that were selected for each week of “peer in the park”. The community scan survey (2021) revealed the need and peer interest for more education. Education opportunities reported to be desired in the survey included Opioid Substitution Therapy (RAAM), Trauma, Injection practices, Indigenous culture, parenting and substance use, overdose response, naloxone practices and safer polysubstance use. The peers in the park sessions covered many of these topics in an attempt to fill the education gap expressed in the survey results. The survey results (phase 1) further indicated that respondents prefer to receive education from other peers who are trusted educators for respondents and would be successful at delivering education programs. In response, all of the peers in the park sessions were facilitated by people with living experience with substance use and harm reduction practices.

The community scan survey (2021) also highlighted the need for increased access to all harm reduction supplies and the need for after hours supply distribution. In response to this, Phase 2 of this project included peer to peer supply distribution. Identified peers were provided with harm reduction supplies and snacks at each peers in the park session. Peers then distributed the harm reduction supplies to their peers at peers in the park events, outreach and on-demand. Peers were supplied with bike(s) and backpacks to make delivery of supplies easier and more accessible.

As the sessions continued, more people were attending sessions however less evaluations were being completed. People who were repeat attendees of the sessions reported getting tired of filling out a survey every session. This is something that will be considered if a similar project is to be repeated. A different form of evaluation tool may be preferred and better received.

Top 10 takeaways: The top ten takeaways from the sessions were:

1. Learning how Hepatitis C is transmitted
2. Risks of jugular shots and alternative/safer injection tips
3. How to safety test your drugs using test strips
4. How to administer naloxone
5. Use new supplies everytime
6. Risk of mixing substances
7. Where to go for STI testing and how it works
8. Options for needle disposal
9. How the RAAM clinic works
10. Resources available for those experiencing homelessness

The poster features a light beige background decorated with various colorful, hand-drawn shapes including a rainbow, a blue arrow, a yellow circle, a blue star, and a red shape. The text is centered and uses a mix of bold orange and blue fonts. The main title is in large, bold orange letters. Below it, the job description is in bold blue letters. The requirements are listed in bold orange letters, with small yellow star icons flanking the first requirement. The contact information is in a smaller, black font. The logo for the Manitoba Harm Reduction Network is in the bottom right corner.

PEERS NEEDED!

**Paid Positions Available for Peers to
Facilitate Harm Reduction Education
Sessions and Distribute Supplies in
the Community**

For these positions you must:

- Have lived experience with
drugs and have Harm Reduction
knowledge**
- Be available Friday afternoons
for 2 hours a week until mid
October**

Contact Solange at 204-573-5792 or
Solange@MHRN.ca, or come to 440 Rosser
Ave. (BNRC) to apply!

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Appendix B: Peers in the Park Advertisement Poster



Manitoba Harm Reduction Network Presents

PEERS IN THE PARK

**FRIDAYS AT 1:30PM IN PRINCESS
PARK**

**Harm Reduction Education provided by People with
Lived Experience**

**Topics Covered Include: Drug Testing, Sexual
Health, Safer Injection Practices**

**Snacks, Refreshments and Harm Reduction
Supplies Available**




**Contact Solange at 204-573-5792 or Solange@MHRN.ca
with any questions.**



Appendix C: Evaluation Tool used

Workshop Evaluations

Workshop Topic: _____

This Workshop Was...   

Not Helpful

OK

Very Helpful

I learned something that will help me stay safe.

YES NO

I can use this information in my life.

YES NO

Something I learned today was....

One thing I loved about the workshop was...

One thing I would like you to change about the workshop is...

I would like to tell or ask you....

Age: _____ Gender: _____ Email: _____

Appendix D: Survey Follow-up Questions for Peers