Progress Report Summary – March 2024

OPERATING GRANT: EVALUATION OF HARM REDUCTION APPROACHES TO ADDRESS THE OPIOID CRISIS IN THE CONTEXT OF COVID-19 – SAFER SUPPLY EVALUATION

Overview

The Operating Grant: Evaluation of Harm Reduction Approaches to Address the Opioid Crisis in the Context of COVID-19 funding opportunity was designed to evaluate harm reduction approaches representing critical evaluation needs that have been intensified by the COVID-19 pandemic: safer supply and supervised consumption sites.

Health Canada is supporting Safer Supply Pilot Projects (SSPPs) through their Substance Use and Addictions Program (SUAP) to expand access to pharmaceutical-grade medications as safer alternatives to the toxic unregulated drug supply (referred to as "safer supply" or also as "prescribed alternatives"), that may also provide people with pathways to care.

The Canadian Institutes of Health Research Institute of Neurosciences, Mental Health and Addiction (CIHR-INMHA) supported research to evaluate these innovative programs as part of the Evaluation of Harm Reduction Approaches to Address the Opioid Crisis in the Context of COVID-19 funding opportunity.

The 'Safer Supply Evaluation' component of the funding opportunity supports critical implementation science research on the outcomes of the SSPPs, conducted by a dedicated research team comprised of members from the *Canadian Research Initiative in Substance Matters* (CRISM) network.

The funded team is required to submit annual reports to CIHR, including an end-of-grant report. *CIHR will post summaries of these reports on its website* to provide real-time progress updates and make research findings accessible to knowledge users and all Canadians.

A PROPOSAL TO EVALUATE SAFER SUPPLY PILOT PROGRAMS IN CANADA

Nominated Principal Investigator: Daniel Werb, Centre on Drug Policy Evaluation, Unity Health Toronto

Progress Summary: March 2023 - February 2024

Over the past year, the team has continued data collection through the Centre on Drug Policy Evaluation and research centres across the country. This includes evaluating a range of service delivery models. These models include non-witnessed prescribed medications integrated into wraparound care, standalone biometric medication dispensation and witnessed injectable opioid agonist treatment (iOAT). The team has published studies from SUAP reports and social and substance use-related outcomes among a cohort of safer supply clients in Toronto. The team has also received ethics approvals and executed a contract for a research project led by Kilala Lelum, an Indigenous-led service provider that provides safer supply as part of a broader set of clinical, harm reduction, cultural, and food security services to both Indigenous and non-Indigenous clients in Vancouver, B.C.

Toronto Safer Opioid Supply (SOS) Program

Preliminary analysis of pre- and post-enrollment interviews with clients of the Toronto safer opioid supply (SOS) program revealed an approximately 80% reduction in overdose incidence after enrollment. Data also showed reduced structural vulnerability, such as improved housing, and reduced engagement in criminalized activities and interactions with law enforcement.

Diversion

Researchers examined the experiences with and perspectives about medication diversion of 25 clients of a safer supply program in Toronto and identified five main themes that can impact diversion and need to be better understood:

- i. Compassionate sharing with others to address withdrawal symptoms;
- ii. Selling or sharing due to unmet medication or survival needs of program clients;
- iii. High demand for safer alternatives to those that are available in unregulated drug markets;
- iv. Price of SOS medications in the unregulated drug markets as a diversion deterrent; and
- v. Coerced diversion through harassment or violence.

This data is expected to be published in the upcoming months.

Tablet injectable opioid agonist therapy (TiOAT) programs

The team supported the analysis of the impact of tablet injectable opioid agonist therapy (TiOAT) programs at two sites in B.C. on health and well-being. Through TiOAT, participants reported reduced overdoses, and transitioning from injecting to smoking drugs. Challenges included ensuring adequate dosing to address withdrawal and pain, with some participants requesting additional opioids. This data has yet to be published.

Challenges

Programs face challenges due to limited, short-term funding affecting staff stability and client care continuity. Many programs report concerns about the limited range of available safer supply medications and the challenges of appropriate titrating to meet the needs of clients who have been using high-potency unregulated opioids.

Next Steps

Next steps include the data collection and analysis phase of the Kilala Lelum site. The team also will continue to conduct interviews with program leadership, safer supply staff and clients from two safer supply programs. The team will also employ ICES administrative health data in Ontario to analyze clinical outcomes of safer supply pilot program clients in Ontario. Additional analyses will also be undertaken to assess the comparative effectiveness of first-line opioid agonist treatment and safer supply prescribing in improving health and social outcomes. Finally, the team will also continue to develop effective knowledge mobilization products and activities.

The next progress report from the team is expected in Winter 2025.

FOR MORE INFORMATION

Additional information about this project can be found at:

https://webapps.cihr-irsc.gc.ca/decisions/p/project details.html?applId=441626&lang=en

A full report and synthesis from the May 10, 2023, progress meeting can be found here.

More information on CIHR's Research in Substance Use can be found at:

https://cihr-irsc.gc.ca/e/50927.html or email rsu-rst@cihr-irsc.gc.ca.

For more information on CIHR's Institute of Neurosciences, Mental Health and Addiction, visit:

https://cihr-irsc.gc.ca/e/8602.html or email INMHA-INSMT@cihr-irsc.gc.ca.