



MEETING SD 32-20-24

STANDING COMMITTEE ON SOCIAL DEVELOPMENT

**WEDNESDAY, OCTOBER 9, 2024
DET'ANCHOGH KÚÉ - EAGLE ROOM / ZOOM
1:30 PM**

AGENDA

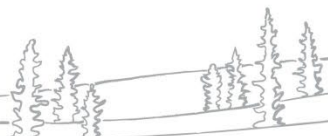
1. Call to Order
2. Prayer
3. Review and Adoption of Agenda
4. Declarations of Conflict of Interest
5. Public Matters:
 - a. Public Technical Briefing on Harm Reduction Programs from Officials from the Department of Health and Social Services and the Northwest Territories Health and Social Services Authority
6. In Camera Matters:
 - a. Debrief: Harm Reduction Programs
 - b. Debrief: Housing as a Human Right with Sarah Buhler
 - c. Workplan
7. New Business
 - a.
8. Date and Time of Next Meeting: Thursday, October 10, 2024 at 10:30AM
9. Adjournment



Technical Briefing: Harm Reduction Initiatives

Standing Committee on Social Development

October 9, 2024



Harm Reduction

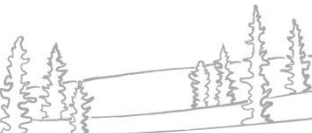
- Public Health practice is comprised of health promotion, health protection, and the prevention of illness, injury, and disease.
- Harm reduction typically refers to public health initiatives aimed at reducing harms associated with substance use and other stigmatized behaviors and practices.
- The primary purpose of many harm reduction initiatives is to reduce the risk of spreading infectious diseases.
- Initiatives often arise in response to a specific need and should be tailored to the local context.
- Harm reduction approaches are evidence-based, cost-effective, and can enable people to increase control over their health.



Harm Reduction as Outreach

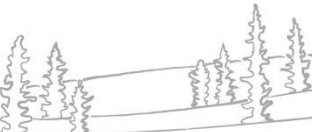
- Harm reduction approaches do not treat substance use disorders, however they can help connect people with services to support recovery.
- Engaging with harm reduction services can often be a first step to thinking about making a change.
- Addiction is complex; many people with substance use disorders have a history of mental health issues, trauma, grief, or other contributing factors.
- The first step to recovering from trauma is to create safety and stabilization.
- Processing and dealing with trauma is difficult if the person is still feeling unsafe.

Harm reduction initiatives can help support a sense of safety and provide stability in people's lives.



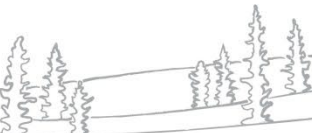
Safer Injection Supplies

- Needle distribution aims to reduce the risk of spreading blood-borne infections such as Hepatitis C and HIV, and other potential complications of using contaminated equipment such as tetanus and bacterial infections.
- These initiatives have been shown to significantly reduce short and long-term health care costs.
- Needle distribution services have been available in the Territory since 1991. This began in Yellowknife Region through Public Health in response to demand from the community. Public Health programs in other regional hubs have also offered the service as needed.
- Injection is not a common method of drug use in the NWT. Demand on needle distribution programs is very low (none in some regions) so data is limited.



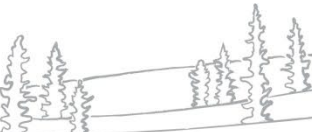
Safer Inhalation Supplies

- Inhalation supplies (aka “crack pipe kits”) can reduce the risk of transmission for infections (e.g. Hepatitis C, MRSA), respiratory illnesses (e.g. COVID19, tuberculosis), and reduce the risk of injuries from cuts, burns, or inhaling fragments from homemade equipment (e.g. melted plastic, steel wool fragments).
- Availability of inhalation supplies has been shown to reduce the incidence of injection drug use.
- This initiative arose in 2019 in response to demand from service users, with occasional supplies being funded through various one-time sources.
- An estimated 5000 safer inhalation kits have been distributed in Yellowknife since February 2023.



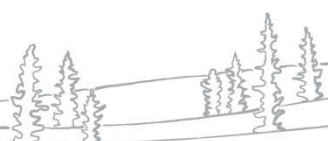
Safer Snorting Supplies

- Safer snorting supplies can reduce the risk of transmission of Hepatitis C, MRSA, and respiratory infections.
- Packages of straws with educational pamphlets on the risks of sharing snorting supplies have been distributed through Yellowknife Public Health.
- This approach stemmed from an identified need in Yellowknife Region in 2016.



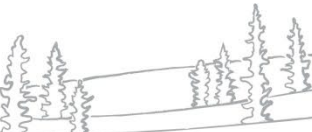
Managed Alcohol Programs (MAP)

- Managed Alcohol Programs (MAPs) provide a set dose of beverage alcohol in a safe setting, aiming to limit intoxication levels and consumption of non-beverage alcohol.
- MAPs work to preserve the dignity of the person and increase access to health care, and social and cultural programming. MAPs have been shown to:
 - increase safety and quality of life,
 - reduce alcohol related harms, and
 - decrease police interactions, and emergency-department visits.



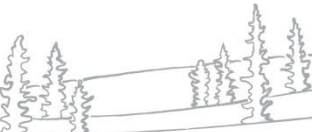
Managed Alcohol Programs (MAP)

- Community based MAP began during the pandemic to support clients during isolation, and later through the Spruce Bough program.
- Results from this initiative informed the development of Territorial standards.
- This program is relatively new and its stability has been impacted by a lack of permanent resourcing; data to measure program outcomes & impacts is still being collected.
- The Canadian Research Initiative in Substance Matters (CRISM) has provided funding to support a study gathering feedback from residents of the Spruce Bough program.



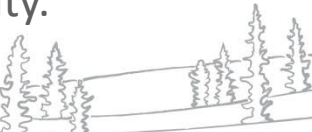
Managed Alcohol Programs (MAP)

- An inpatient Managed Alcohol Program was also started during the pandemic to help manage the symptoms of alcohol withdrawal for people admitted to hospital for reasons unrelated to their alcohol use.
- Hospital-based MAP initiatives have been shown to reduce overall alcohol consumption and reduce the rates of people leaving hospital prior to completion of their medical/surgical treatment.
- Alcohol withdrawal syndrome can be deadly, and the symptoms of withdrawal can complicate other health issues.
- Detox alone is not a treatment for substance use disorder and has been shown to have little to no impact on long term substance use behaviors.



Opioid Use Disorder

- Long-term remission from Opioid Use Disorder (OUD) can be achieved with effective treatment and follow-up.
- First-line treatment is opioid agonist therapy (OAT) medications such as suboxone or methadone, ideally combined with behavioral and social supports.
- Short-term, abstinence-based treatment programs are associated with high relapse rates (and therefore increased risk of overdose), and generally do not facilitate stable long-term recovery.
- OAT medications can stabilize the cycle of intoxication and withdrawal. People who are maintained on OAT typically experience significantly improved health and social functioning and a considerable reduction in the risk of overdose and all-cause mortality.



Territorial Opioid Recovery Program

The Opioid Recovery Program provides guidance for the use and monitoring of medications used in the treatment of opioid use disorder, and coordination of OUD client care throughout the territory. The program is available for consultation with community-based prescribers, or for prescribing via telehealth in communities who do not have a practitioner available.

Goals for Opioid Use Disorder may include:

Harm reduction in the form of:

- Reduced risk of Overdose
- Reduced reliance on illicit opioids to manage withdrawal symptoms
- Reduced Injection Drug use and subsequently reduced risk of Blood Borne Illnesses

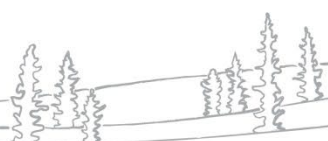
Social goals such as:

- Reduced reliance on illegal means to support substance use
- Improved access to healthcare services
- Improved access to housing/social work



Territorial Opioid Recovery Program

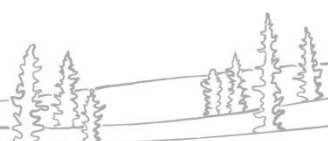
- The Opioid Recovery Program was expanded from Yellowknife only to a territory wide service in 2019, and now supports over 60 clients with Opioid Use Disorder.
- The addition of a Nurse Specialist to support the program resulted in wait times to access care being reduced from over a week to 1 business day or less, and treatment retention rates of over 90%.
- With the stability of being on treatment and connections to resources and supports, many participants have been able to secure stable housing, disengage from illegal activities, obtain and maintain jobs, go back to school, better care for their children, and improve relationships with family.



NWT Opioid-Related Deaths

Year	Total*
2016	5
2017	1
2018	2
2019	1
2020	3
2021	4
2022	7
2023	2
2024	2
Total	27*

***Note:** all deaths on chart to confirmed and occurred in the NWT there are deaths of NWT residents in other jurisdictions or that have not been official confirmed by the NWT Coroner's office that are not reflected in this table.



OCPHO Response to Crisis

Public Health Advisories Issued Responding to Illicit Drugs in the NWT

2020

2 Advisories Issued

- 8 Dec 2020 – Two fentanyl-related deaths in the NWT
- 1 July 2020 – Lab confirms illegal carfentanil found in the NWT

2022

5 Advisories Issued

- 2 Dec 2022 – Carfentanil and fentanyl detected in drugs in Hay River
- 15 Nov 2022 – Carfentanil detected in Hay River
- 3 Jun 2022 – Carfentanil detected in Hay River
- 10 May 2022 – Counterfeit Xanax (Flualprazolam) detected in the NWT
- 24 Feb 2022 – Suspected opioid overdoses prompts health alert

2023

4 Advisories Issued

- 11 Nov 2023 – Two suspected overdose-related deaths in the NWT
- 13 Oct 2023 – Carfentanil mixed with benzodiazepine detected in Hay River
- 9 May 2023 – Bromazepam detected in fentanyl in the Northwest Territories
- 13 Apr 2023 – Flubromazepam detected in fentanyl in the Northwest Territories

2024

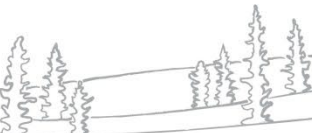
3 Advisories Issued

- 11 Mar 2024 – Suspected Overdose-Related Death in the NWT
- 5 Jun 2024 – “Brown Crack” Cocaine Mixed with multiple other substances found in Hay River
- 30 Aug 2024 – Para-Fluororfentanyl detected in drug seizure enroute to Yellowknife

OCPHO Surge Response

Since late 2022:

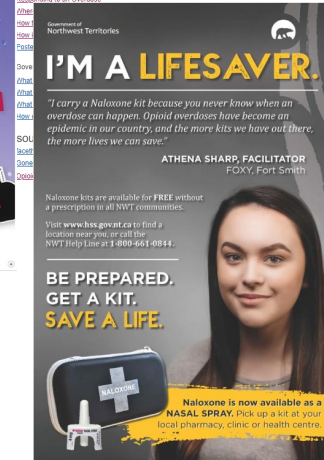
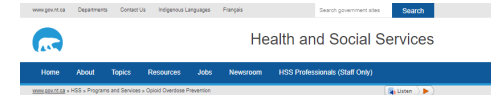
- In-depth community knowledge exchange and resource distribution (Where communities had experienced clusters of opioid related deaths).
- CPHO presentations to increase awareness regarding illicit drugs and the contamination within the drug supply.
- Indigenous Services Canada provided additional surge doses of nasal naloxone; OCPHO distributed in a targeted manner within communities.
- OCPHO staff delivered naloxone training, community surge response and presentations on the NWTs context in relation to illicit drugs.
- Targeted Fentanyl test strip distribution; will be rolled into future initiatives



Messaging to Inform the Public

Both people who use drugs and people who are concerned about people who use drugs should know:

- What drugs are in the community
- The risk of drug poisoning
- The dangers of mixing drugs and other substances
- The danger of using drugs alone
- How to recognize the signs of an overdose
- How to use naloxone
- How to provide mental health first aid to someone who is under the influence of drugs or alcohol
- About the *Good Samaritan Drug Overdose Act*
- Recovery may be different depending on what a person has been taking



Forthcoming OCPHO Illicit Drug Response Initiatives:

- Territorial Toxic Drug Supply Campaign
- Drugs 101 Information Pieces
- Community-based Workshop Toolkit
- Continue raising awareness through leadership discussions

Naloxone is distributed through the Emergency room, health centres and retail pharmacies who can provide one-on-one training.

A step by step video on [How to Use Naloxone Intranasal Spray](#) can be found on the DHSS website

