COUNCIL REPORT



DRUG CHECKING PROGRAM - COLLABORATION WITH HOMELESS SERVING AGENCIES - UPDATE

RECOMMENDATION

That the June 19, 2023, Community Services report CS01220REV, be received for information.

Requested Council Action		Information	
ConnectEdmonton's Guiding Principle		ConnectEdmonton Strategic Goals	
CONNECTED This unifies our work to achieve our strategic goals.		HEALTHY CITY	
City Plan Values	LIVE		
City Plan Big City Move(s)	Healthy City	Relationship to Council's Strategic Priorities	Community safety and Well-being
Corporate Business Plan	Serving Edmontonians		
Council Policy, Program or Project Relationships	Community Safety and Wellbeing Strategy		
Related Council Discussions	 CS01220, Drug Checking Program - Collaboration with Homeless Serving Agencies, Community and Public Services Committee, September 26, 2022 Upcoming - CS01242, Reducing Drug Poisoning Injuries - Recommendation and Draft Submission to Health Canada and Intergovernmental Advocacy, Community and Public Services Committee, September 18, 2023 		

Previous Council/Committee Action

At the September 26/27, 2022, Community and Public Services Committee meeting, the following motion was passed:

That the September 9, 2022, Community Services report CS01120 be referred back to Administration to complete the steps outlined in the report to ensure more research and connection with drug checking pilots and programs in other municipalities, the end users

and grassroots groups, and provide an updated report to Committee with opportunities for municipal partnership in drug checking programs.

Executive Summary

- Administration met with key stakeholders and gathered information from research, local, lived and living experiences.
- While the majority of stakeholders were not supportive of the City playing a direct role in the
 operations of drug checking services, those consulted believe that the City can contribute
 towards supporting, raising awareness, and advocating for a holistic and effective response to
 drug poisoning. Drug checking services are viewed by those engaged as part of a broader
 response required for addressing the issue.
- Administration is currently also conducting engagement with key stakeholders to develop broader recommendations for reducing drug poisoning injuries and deaths in Edmonton (Community Services report CS01242, scheduled for September 2023).
- Although developing such a response takes time to ensure thoughtfulness and efficacy, the need for a timely, coordinated and sustained effort to respond to and prevent drug poisonings in Edmonton remains.

REPORT

Drug poisoning injuries and deaths in Edmonton continue to occur at a rate higher than pre-pandemic levels¹. In 2022, 627 people died in Edmonton from drug poisoning compared to 517 deaths in Calgary. Drug poisoning deaths in Edmonton in 2022 were nearly three times higher than in 2019 (238 deaths). In 2020 there were 467 drug poisoning deaths, and 708 deaths in 2021. There are multiple factors contributing to this, including an increasingly unpredictable illegal drug supply, which includes synthetic opioids (typically fentanyl) as well as benzodiazepines and other adulterants.

Drug checking is a harm reduction service that provides chemical analysis of drug samples, while also providing an opportunity for reporting and collection of drug checking data to monitor the unregulated market (see CS01220 and its attachments for more information on technologies). This service initially emerged amidst the nightlife scene in Europe in the early 1990's and has since been initiated more recently in various locations across Canada (such as those in Attachment 1). While drug checking services cannot prevent all drug-related injuries and deaths, they can equip people who use drugs with tailored and relevant information for their substance use.

Drug checking services are applicable to all demographics and contexts. While this report title specifically names "homeless serving agencies", the term "people who use drugs" encompasses people of many different backgrounds regardless of their age, gender, race, socio-economic status, religious beliefs, place of origin, marital status, and other intersecting identity factors.

¹ Alberta Substance Use Surveillance System (updated April 2023).

In 2017, Health Canada authorized drug checking services at supervised consumption sites. Additionally, through its Substance Use and Addictions Program, which also launched in 2017, the federal government funded pilot projects to respond to drug and substance use. Some early projects that received funding included drug checking services at supervised consumption sites, which included an evaluation component. Currently, the Substance Use and Addictions Program is funding five drug testing pilot projects across the country, with one project taking place in Calgary. While some drug checking services or pilot projects occur at supervised consumption sites, others occur through community-based agencies.

Drug checking programs across Canada often rely on cross-jurisdictional efforts between federal and provincial governments. However, in Toronto, the drug checking program is largely funded by Health Canada and the City of Toronto. Toronto is uniquely positioned to support drug checking programs as Toronto Public Health is municipally focused and reports to The Board of Health, which is a committee of the City of Toronto.

Services in Edmonton

In 2022, two Edmonton-based organizations were each awarded nearly \$50,000 in micro-grant funding for projects taking place between October 2022 and March 2023. This was made possible through a larger local grant from the Substance Use and Addictions Program which ran May 4, 2022 to March 31, 2023. The Queer and Trans Health Collective used the funding to purchase a Bruker Fourier transform infrared (FT-IR) spectroscopy (to test substances) and 4B Harm Reduction Society purchased drug testing strips (see Attachment 1 for more information). In the past, Indigo Harm reduction provided drug testing services at some electronic dance music events with an FT-IR spectrometer.

Currently, the three supervised consumption sites in Edmonton (George Spady Society, Radius Community Health & Healing, and the Royal Alexandra Hospital) do not offer drug checking services due to costs associated with certain drug checking technologies, staff time and capacity, and barriers in drafting and submitting Health Canada exemption requests. The Royal Alexandra Hospital only provides supervised consumption site services to in-patients.

Research on Drug Checking Services

The research on drug checking services in Canada is emerging with mixed evidence available. A number of early evaluations were limited to occasional drug use in nightlife settings in Europe². Evidence from these contexts suggests that the benefits of drug checking services extend beyond the individual directly accessing the service, as the results and other resources are often shared with other people who use drugs in their network³. This evidence also indicates that drug checking services can be an entry point for access to services, such as primary care, mental health care, treatment and recovery services and social services.

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² Maghsoudi, N., McDonald, K., Stefan, C., Beriault, D. R., Mason, K., Barnaby, L., ... & Drug Checking Services in Toronto Working Group. (2020). Evaluating networked drug checking services in Toronto, Ontario: study protocol and rationale. *Harm reduction journal*, *17*, 1-10.

³ Maghsoudi, N., Tanguay, J., Scarfone, K., Rammohan, I., Ziegler, C., Werb, D., & Scheim, A. I. (2022). Drug checking services for people who use drugs: a systematic review. *Addiction*, *117*(3), 532-544.

A 2021 study in Victoria, British Columbia, found that drug checking addresses a "shared need"⁴. Using a public health approach (a socio-ecological model), researchers identified four overarching themes corresponding to the benefits of drug checking at each level:

- improve health and wellbeing of people who use substances,
- increase quality control in an unregulated market,
- create healthier environments, and,
- inform policies around substance use.

An international systematic review of drug checking services for people who use drugs found that these services influenced intended behaviour and, although less researched, enacted behaviour. Behaviour changes included intent to use a substance, disposal, and using less of or seeking more information about the substance⁵.

Research also notes some limitations of drug checking services. In terms of accessibility, people who live outside of urban centers are less able to access harm reduction services such as drug checking services. For those impacted by intersecting vulnerabilities, such as poverty and substance-use disorders, increased information on their drugs may be insufficient for them to modify their behaviour, as people may not have a viable option for replacing substances⁶.

Technology also poses additional barriers, as it can be costly depending on the type of technology chosen and the training requirements (see CS01220 Attachment 1). There are certain limitations with specific types of technology. For example, test strips only show the presence of fentanyl or benzodiazepines if it exists above a certain amount; however, traces of fentanyl or benzodiazepines below the threshold can still cause harm or death.

Many academics note the need for further research into drug checking programs. It will be important to monitor emerging findings as more services become available.

Opportunities for Municipal Partnership in Drug Checking Services

Based on preliminary conversations with community partners (detailed in the Community Insights section of this report), a tailored approach is necessary to reach all the diverse groups of people who use drugs. Although the majority of participants did not see a role for the municipality or other large institutions in operating drug checking services, it was identified that the City of Edmonton could take a supportive role through:

1. Providing resources (e.g., funding for staff and/or project costs, space for services, supporting system navigation). Feedback from the targeted engagement emphasized

⁴ Wallace, B., van Roode, T., Pagan, F., Hore, D., & Pauly, B. (2021). The potential impacts of community drug checking within the overdose crisis: qualitative study exploring the perspective of prospective service users. *BMC public health*, *21*(1), 1-12. bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-021-11243-4
⁵ Maghsoudi, N., Tanguay, J., Scarfone, K., Rammohan, I., Ziegler, C., Werb, D., & Scheim, A. I. (2022). Drug checking services for people who use drugs: a systematic review. *Addiction*, *117*(3), 532-544.
⁶ Maghsoudi, N., McDonald, K., Stefan, C., Beriault, D. R., Mason, K., Barnaby, L., ... & Drug Checking Services

in Toronto Working Group. (2020). Evaluating networked drug checking services in Toronto, Ontario: study protocol and rationale. *Harm reduction journal*, 17, 1-10.

that services should be driven and implemented by people with lived and living experience. It was also stressed that the City should be mindful of expectations and limitations for pilot projects, as the funding is often for a short time period, which is insufficient to demonstrate outcomes and allow for sustainability.

2. **Assuming a role in supporting and advocating for data collection, management, or dissemination of information** by sharing information (resources for using test strips), contributing to stigma reduction (educating the general public about drug checking services), convening key stakeholders, and advocating to other orders of government for additional support and/or resources. Engagement discussions also identified the need for data to inform services in a way that meets the needs of people who use drugs. The City of Edmonton Drug Poisoning Deployment Dashboard⁷, which pulls data from Edmonton Fire Rescue Services, Edmonton Transit, and the 24/7 Crisis Diversion Team, is an example of a City initiative where community groups are using the data to organize services.

Based on feedback from the engagement process, additional opportunities for municipal partnership that could be considered are:

- 1. **Conducting a needs and assets review with community partners** using a health equity-oriented approach to understand their current capacity for offering drug checking services and determine assets present and resources required. This would better inform opportunities to partner, support, and advocate for such services.
- 2. **Developing knowledge and understanding of research** on drug checking by continuing to monitor emerging data and research in collaboration with the participation of people who use drugs.
- 3. Continuing to monitor existing drug checking work taking place in Alberta. Examples of current pilot projects include the Alberta Alliance Who Educate and Advocate Responsibly project in Calgary, the Banff Library project, as well as local groups in Edmonton who are distributing testing strips and using a Bruker FT-IR spectrometer (See Attachment 1 for details on these projects).

Ongoing awareness and understanding of evolving research and best practices will allow the City of Edmonton to continuously evaluate its role and efforts in addressing the drug poisoning crisis, and additional opportunities as they may arise.

Budget/Financial Implications

Of the opportunities for municipal partnership in drug checking services outlined above, only the first - undertake a supporting role through providing resources - would require additional funds. Currently, there is no funding in place to provide such support. Any budget implications, once determined, would need to be requested through a future supplemental operating budget adjustment.

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https://transforming.edmonton.ca/how-outreach-workers-use-data-to-battle-drug-poisoning-crisis-in-edmonton/

COMMUNITY INSIGHT

Administration conducted targeted engagement with potential end users through a survey and group discussions. These took place from December 2022 to February 2023. The online survey was shared through key contacts (i.e. service providers, advocates, supervised consumption services operators, trades representatives, Indigo Harm Reduction, etc.) to ensure responses from diverse potential end users. The survey received 108 responses from people with lived and living experience, service providers, harm reduction advocates, clients at the supervised consumption services, people in the trades field, and attendees at an electronic music dance festival. Highlights from the survey responses include:

- More than half of respondents (62 per cent) had not used drug checking services before. Those who had previously used them did so at festivals, mobile sites, or at home with test strips.
- 68 per cent of respondents said they were "very likely" to use a drug checking service.
- When asked who should administer drug checking services (participants could select more than one response), 82 per cent of respondents said they would prefer services to be administered through community agencies, 57 per cent said through mutual aid groups, 37 per cent said through Alberta Health Services or another healthcare provider, and 21 per cent indicated the City of Edmonton.
- Some of the most commonly reported values of drug checking were seen as:
 - o reducing drug poisonings and saving lives, and
 - o providing information for clients to make an informed decision.
- Key elements identified to make the service accessible included:
 - o anonymity for service users, and
 - o trusting relationships, and no judgment from staff.
- Concerns about using drug checking services referred to police presence, police intervention, and lack of confidentiality.

Two group discussions also took place in January and February 2023. 4B Harm Reduction Society co-facilitated the conversations with support from City of Edmonton staff. Attendees were comprised of representatives from: Boyle Street Community Services, Canadian Students for Sensible Drug Policy, Canadian Association of People who Use Drugs, Bissell Centre, Alberta Alliance Who Educate and Advocate Responsibly, Indigo Harm Reduction, Moms Stop the Harm, HIV Edmonton, 4B Harm Reduction Society, Water Warriors, Queer and Trans Health Collective, Youth Empowerment and Support Services, iHuman, as well as people with lived and living experience.

- Participants were clear that drug checking is just one piece of the solution to prevent drug poisonings in Edmonton.
- A number of participants commented on the need for decriminalization of simple possession of certain substances, as well as safer supply or regulated substances.
- For participants, drug checking services can serve as a connection point for people who use drugs, where they can interact and build a rapport with drug checking workers, which can facilitate warm handoffs to other services and resources.

- Participants stressed that drug checking services should be peer-led in terms of development and day-to-day operations. They suggested organizations with existing relationships with people who use drugs should administer drug checking services.
- During the two group discussions, participants explicitly noted that large institutions (i.e. City of Edmonton, the Edmonton Police Service, and Alberta Health Services) should not administer drug checking for various reasons, due to the ability of smaller community organizations being able to more effectively establish trust, connection and rapport with community members.
 Community organizations and other community-based groups are also known by community members, hold existing relationships with people who use drugs, and have the ability within programming to allow for more flexibility and informality.
- Other elements that participants emphasized were ensuring equitable accessibility, and creating a welcoming, inclusive space for all people who use drugs, acknowledging that includes many different types of people.
- In terms of technology, social agencies consulted by Administration suggested a
 multi-instrument approach would be the best option, such as test strips and an FT-IR
 spectrometer. While paper spray ionization mass spectrometry was recommended for the
 preferred technology (as used in Victoria), it is costly and requires special training.

GBA+

Data shows that certain groups are impacted more heavily by drug poisoning injuries and deaths than others: the highest number of drug poisoning deaths in 2022 were men aged 35-398. Indigenous peoples are also disproportionately impacted by drug poisonings. However, it is important to note that all types of people use drugs regardless of demographic, geography, socio-economic status, housing status, etc.

Stigma around substance use poses ongoing challenges for engagement on this topic. While men working in the trades and construction fields are heavily impacted by drug poisonings, Administration had limited success in reaching this group likely due to this stigma and fear of disclosing substance use in an employment setting. Administration made attempts to reach as many demographics of people as possible.

Equity measures taken throughout the engagement and development of this report include:

- Surveys questions that were developed in collaboration with social agencies.
- Group discussion questions were developed in collaboration with 4B Harm Reduction.
- Surveys that were administered through outreach workers, staff at the supervised consumption services, and other volunteers who had existing relationships with people.
- Staff/outreach volunteers that used their own technology to collect responses verbally to mitigate barriers of limited access to technology.
- Unique and targeted survey links that were sent to different groups (trades/construction workers, community outreach, attendees at the electronic dance music festival "Get

⁸ Alberta Substance Use Surveillance System (updated April 2023).

Together", and Other (e.g. Advocates, advocacy organizational representatives, etc.) to avoid asking for demographic information that would otherwise deter participation.

- Group discussions led by 4B Harm Reduction Society to ensure increased safety and comfort for participants.
- Compensation was provided to people with lived and living experience who participated in the group discussions and to 4B Harm Reduction Society for facilitating the conversations.
- Shared group discussion notes and drafts of the report with all participants to ensure accuracy.

ENVIRONMENT AND CLIMATE REVIEW SECTION

This report was reviewed for environment and climate risks. Based on the review completed no significant interactions with the City's environmental and climate goals were identified within the scope of this report.

ATTACHMENT

1. Examples of Existing Drug Checking Services