

# Safer Spaces

## Feedback from Women about Overdose Prevention Sites

### Project Description:

This project examined how women use Overdose Prevention Sites (OPS) and what makes OPS more or less accessible to women. Between June and August 2018 surveys were conducted at 5 OPS: 3 in British Columbia (Campbell River, Courtenay, Victoria), and

2 in Toronto, Ontario (Moss Park\*, Regent Park). Below are highlights from these surveys and strategies to create more gender-inclusive OPS. We hope these strategies will serve as a starting point to help other sites build more inclusive OPS spaces.

\* Surveys conducted at Moss Park were done so when services were offered out of an unsanctioned trailer in Moss Park, prior to receiving funding.

## Who Participated:

 **45** Individuals participated in the survey (32 in BC and 13 in Ontario)

 **98%** Identified as cis women

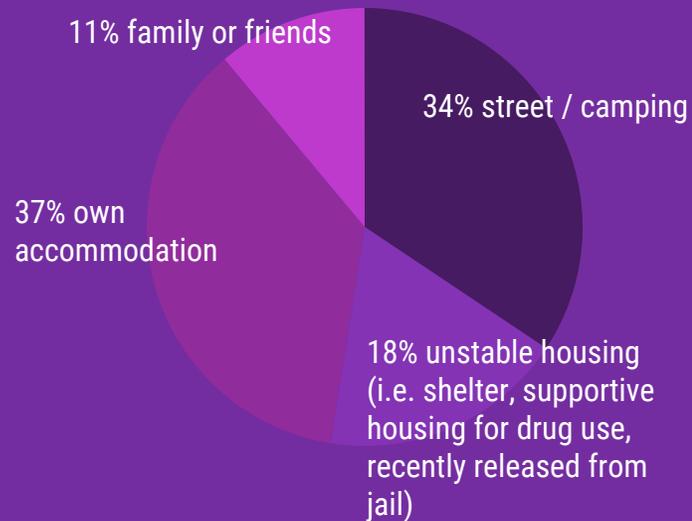
 **36** The average age of participants was 36 years old with 52% under the age of 36

 **Race / Ethnicity** was self defined by participants:

- White / Caucasian (52%),
- Indigenous / Aboriginal (36%), and
- Both of the above (5%)
- Other (i.e. Black, Asian) (7%)



**HOUSING:** Reported housing status (last 30 days)



## How & Why Women Use OPS

### To Access Safer Spaces

#### Women Value Trust and Social Connection

Women were first connected to the OPS in a variety of ways highlighting the importance of relationships and trust between women, and the value of creating and maintaining a sense of community:

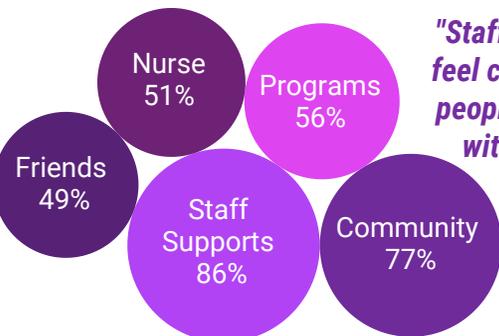


- 46% were referred by someone else who uses the site
- 23% were already using other services at the site

Once connected, 90% of participants reported that they recommended the OPS to other women. **90%**

#### Women Value Community Support

Women reported that they go to OPS to access:



*"Staff who use make me feel comfortable, seeing people who use working with professionals, as peers, being respected"*

- 14% of women also said they came in to get information about 'Bad Dates'
- Many women highlighted feeling respected as major factors in their sense of safety at the site

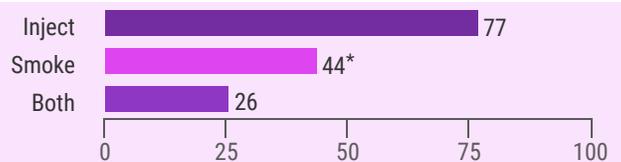


88% of women identified food as an important element of the OPS space, both in terms of it creating welcoming community spaces, as well as filling a need for those living in poverty.

### To Facilitate Safer Drug Use

#### Women Value Overdose Prevention & Safer Drug Use:

When asked why they come to the OPS, women said they come to:



\* The only site with space for safer smoking was Moss Park, while it was operating unsanctioned in the park; however, women indicated using each site for safer smoking regardless of whether the space is designated that way.

In addition, women also access OPS to get:



**79%**

**Naloxone**



**74%**

**Injection Supplies**



**70%**

**Overdose Prevention**



**65%**

**Smoking Supplies**



**63%**

**Supplies for Friends**

*"They taught me how to do testers and go slow"*

#### Important gender considerations for women at OPS include:

**Sharing a booth** with someone. Close to 60% of participating women noted sharing a booth with someone was critical  
**Being "doctored"** (assisted with injection). Close to 60% of participating women indicated "doctoring" as essential  
**Enough time:** Over 50% of participating women noted that they valued being given the time to do test shots (and not being rushed)  
**Space to smoke:** Safer places to smoke and safer smoking supplies are an important part of harm reduction for women  
**No Police:** Women expressed concern about using a site when there are frequently police around it.

# 5 TIPS FROM WOMEN

## How to Make OPS Work Better for Women

### 1 TIME & PLACE

ARE IMPORTANT TO WOMEN

Having OPS in locations that are easy to get to, close to spaces women frequent and / or use drugs, and open when women need them are important considerations to increase accessibility and therefore reduce overdose risk.

 **63%** Walk to the OPS

 **26%** Use transit to travel to the OPS

Of participants who reported ever using alone:

**25%+** Said they may use alone if the OPS was too far away from where they are

**37%** Said they use alone when the OPS isn't open

### 2 SPACE

IS IMPORTANT TO WOMEN

Women talked about their preferences for OPS space, including:

- **Smaller** spaces that were **less crowded** and therefore felt less intimidating
- **Non-clinical** spaces that were **'warm,'** 'felt like home,' and had a **comfortable 'chill out'** space (i.e. consideration for factors such as lighting, comfortable furniture etc)
- **Sight lines** towards the door as a safety factor, to see who is coming in and out
- **Clean spaces**
- **Privacy** where people weren't sitting at a desk watching them

 **77%** Access to a washroom was identified by 77% of participating women as a very useful part of the OPS space

"I feel comfortable here, I like the chill-out space and I like to hang out there. I like the people here. It's close to where I pick up."

"It's not fancy or clinical, there's no stuck-up nurses or paramedics in uniforms. I don't like it when people are sitting at a desk watching me."

"Women aren't bothered by men here. On the streets and at other places men harass women. Here it isn't tolerated, it is a different vibe."

### 3 STAFF

ARE IMPORTANT TO WOMEN

The staff who are hired make a big difference. Women appreciate:

- Well-trained staff who are non-judgmental
- Staff who consistently enforce rules
- Staff who treat them as a person and not an 'addict'
- Staff with lived experience of drug use
- Staff who show empathy
- Staff who are women

Women also highlighted the importance of staff enforcing no tolerance for threatening behaviour against women (including rape jokes), and trauma informed practice.

"They support the need for women to have their own peer support. There's lots of female staff."

"It feels like I can be myself here. I like their language and communication. Staff seem ... willing to discuss things with us, which is different from other places."

"Staff and environment make me feel safe. There's consistent enforcement of rules. Staff handle conflicts well. They don't let things get out of hand, and when people do go off, staff respond and shut it down. [Peer] Staff make me feel comfortable, seeing people who use working with professionals as peers, and being respected."

### 4 RESOURCES & EDUCATION

ARE IMPORTANT TO WOMEN



Having access to resources, education & supplies all made a difference for women. Examples included:

- Supportive, harm reduction oriented community resources and information that are gender specific
- Opportunities for education and training (including sex-work positive opportunities)
- Access to / referrals to harm reduction based counselling, social groups
- Basic needs supplies (i.e. tampons, pads, pregnancy test kits, make up, hair elastics etc.)

### 5 WOMEN'S PROGRAMMING

IS IMPORTANT TO WOMEN

Women's only groups, women's programming, and women's - only days all help to increase women's use of OPS. These should be inclusive of cis and trans women.



#### Project Limitations:

This project was conducted to give insight into women's experiences accessing OPS and develop strategies to foster gender-inclusive OPS; however, it was done so on a limited budget. As such, a limited number of people participated,

including trans and two-spirited people, and African, Caribbean and Black women. Additionally, only 1 site had safer smoking space, creating limited data about the importance of safer smoking spaces. Future reviews would benefit from considerations and increased focus on these factors.