

## Board of Health Briefing Report

**To:** Chair and Members of the Board of Health  
**Date:** January 29, 2020  
**Topic:** “All they ever see is the addict.”: Lived Experience of Opioid Use in Timiskaming  
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### RECOMMENDATIONS

**It is recommended that the Timiskaming Board of Health receive “All they ever see is the addict.”: Lived Experience of Opioid Use in Timiskaming for information.**

#### Overview

After receiving ethical approval from the Public Health Ontario Research Ethics Board in fall 2018, the Timiskaming Health Unit began recruiting individuals presenting to the harm reduction program from December 2018 to May 2019. Clients who self-identified as having used opioids within the past two years, as living in the Timiskaming District, and as English-speaking were provided with an information package including a flyer and a letter of consent as well as the contact information for the lead investigator. The lead investigator conducted fifteen interviews lasting 12-90 minutes. Participants were compensated for their travel and their time (\$50).

The lead investigator and the project supervisor analyzed and codified the interviews using content analysis. Five themes were abstracted: quality of life, interpersonal impacts of opioid use, stigma, managing addiction, and facilitators and barriers to accessing health care services. Additionally, the interviews also provided rich information on the specifics of using opioids in Timiskaming including the routes and costs of use and how participants initiated their opioid use.

#### **Ontario Public Health Standards (2018) and Timiskaming Health Unit Strategic Plan 2019-2023 Links**

This work directly contributes to meeting requirements and expected outcomes in the Ontario Public Health Standards (2018) and supports the following THU 2019-2023 strategic direction 2.

#### **We create, share and exchange knowledge**

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- We use the best available information, including local lived experience, to inform local programs and services
- We exchange information with communities and partners to broaden our understanding of local needs
- We create quality data to address gaps in knowledge and to identify changing local needs
- We share our knowledge with stakeholders to understand the causes and impacts of health inequities

## **Background**

This research project fulfills the requirement of engaging individuals with lived experience as outlined in the Harm Reduction Program Enhancement directives and the Ontario Public Health Standards. A component of the scope of work for the Harm Reduction Program Enhancement is the completion of a situational assessment that meaningfully engages individuals with lived experience. The Ontario Public Health Standard [Health Equity Guideline \(2018\)](#) outlines the requirements for health units to conduct public health interventions to decrease health inequities based on local needs. The [Substance Use Prevention and Harm Reduction Guideline \(2018\)](#) specifies that boards of health shall assess risk and protective factors for substance use, consult and collaborate with local stakeholders, and assess existing programs and services to build on community assets and minimize duplication.

The situational assessment is a systematic process to gather, analyze, synthesize and communicate data to inform planning decisions specific to opioid use in the Timiskaming Health Unit (THU) catchment area. The information gathered through the research project interviews will be used to inform the opioid situational assessment to contextualize the surveillance data gathered, to identify priorities and gaps, and to inform planning.

Moreover, in addition to an alignment with provincial directives, this research project addresses the paucity of research conducted on opioid use in northern and rural Ontario and aligns with the strategic directions of Timiskaming Health Unit's 2019-2023 strategic plan. The research project ensures that those who do not usually have a voice in program planning are heard and provided an opportunity to influence community interventions that promote and protect the health and wellbeing of all people through collaboration, research, and advocacy. The values of THU were also demonstrated through respect for lived experience and by engaging in primary research to support evidence-informed public health.

## **Local Initiatives**

This research project provides unique insight into the lived experience of opioid use in Timiskaming and expands the literature on this subject in rural and northern Ontario. The study also aimed to empower and lend a voice to those who have not historically been engaged in local research or planning initiatives. Lived experience research is critical in small, rural communities as most evidence-generating projects, particularly on opioids, have been concentrated in urban centres.

The Timiskaming Health Unit will disseminate the results of this paper with local health care providers and stakeholders in the hope that the findings will provide valuable insight and instigate local discussions. Examples of stakeholders who will receive this report include health care agencies, law enforcement, harm reduction supply distribution partners, and agencies serving clients with mental health and addictions challenges. Timiskaming Health Unit will be available to respond to external inquiries and can use this report to initiate and facilitate conversations about opioid use in Timiskaming with local stakeholders and roundtables.

As the results of the research identified, the local response to national concerns about the use of opioids is a multi-sectorial responsibility that requires collaboration and innovation infused with caring and anti-stigma efforts. Internally, knowledge exchange will be conducted by sharing the report with all agency employees and potentially a grand rounds presentation facilitated by the harm reduction public health

nurse. Many internal health unit teams may elect to integrate the findings of this report into their program planning activities.

The Executive Summary can be viewed in [Appendix A](#) and the full report is available on the THU website [here](#).

# Executive Summary

## Purpose

The aim was to empower individuals who use opioids to share their experiences and to provide them with an opportunity to influence local priorities and program planning.

## Research Question

What is the lived experience of individuals using opioids in Timiskaming? What are the health and medical needs of individuals who use opioids in Timiskaming?

## Context

The Ontario Public Health Standards outline the requirements for health units to conduct public health interventions based on local needs. The Substance Use Prevention and Harm Reduction Guideline (2018) specifies that boards of health shall assess risk and protective factors for substance use, consult and collaborate with local stakeholders, and assess existing programs and services to build on community assets and minimize duplication. The information gathered through the interviews will be used to inform the opioid situational assessment to contextualize the surveillance data gathered, to identify priorities and gaps, and to inform program planning. The situational assessment is a systematic process to gather, analyze, synthesize and communicate data to inform planning decisions specific to opioid use in the Timiskaming Health Unit (THU) catchment area.

Moreover, the Harm Reduction Program Enhancement launched in 2017 further directs boards of health to build on existing harm reduction programs and services and to improve local opioid response capacity and initiatives. A component of the scope of work for this program is the completion of a situational assessment that meaningfully engages individuals with lived experience. The harm reduction program at Timiskaming Health Unit has seen a significant recent increase in demand and in the years of providing harm reduction services, there has been minimal client input.

Formal efforts to understand the perspective of individuals who use opioids in rural northern Ontario, specifically Timiskaming, have not been conducted. Individuals living in rural northern Ontario may cope with a wide range of unique challenges that can influence their lived experience such as: geographic isolation, transportation challenges, stigma and lack of anonymity, and lack of access to health care/specialized health care services such as addictions services. There is a need to understand the perspective of individuals with lived experience to deepen our understanding of the local needs of this population.

## Methods

After receiving ethical approval from the Public Health Ontario Research Ethics Board, individuals who currently use opioids (prescription or illicit use) or have used opioids in the past two years self-identified when presenting to the harm reduction program at Timiskaming Health Unit. From December 2018 to May 2019, these individuals were provided an information package and the contact information of the lead investigator. They were also encouraged to engage in snowball sampling with others who met the inclusion criteria. Interviews were only available in English; therefore, any interested participants who did not speak English or who had not used opioids in the past two years were not eligible to participate in this project. Participants (n=15) were compensated for roundtrip travel expenses in the form of their choosing: either bus tickets or taxi vouchers. Participants received \$50 for their participation in the research project.

The lead investigator began the interviews by collecting basic demographic information and then engaged participants in a discussion that encouraged them to share their lived experience using opioids. Individuals were guided to share their narrative through semi-structured interviews with open-ended questions, prompts, and probes. Participant interviews were recorded and transcribed for thematic analysis. Interviews ranged from 12 to 90 minutes with the average length of the interviews being 40 minutes. All interviews took place in a health unit office or in a private space at a local library.

## Data Analysis

After each interview was transcribed by support staff, interviews were reviewed for accuracy and identifying and confidential information was redacted from the transcript by the lead investigator. Content analysis was used to systematically and objectively quantify the phenomena of the experience of opioid use in Timiskaming. The lead investigator and the project supervisor separately read the interviews several times to establish familiarity with the data. The data was then organized by making notes and writing the units of analysis in the margins separately. After the open coding process, groupings, categories, and abstractions were created. After which, the lead investigator and the project supervisor met to discuss and agree upon shared themes identified before finalizing the analysis.

## Results

Although the sample was diverse, including individuals with a variety of backgrounds, methods of use, and source of opioids, many strong themes arose when participants were asked to share their lived experience of opioid use in Timiskaming. Participants were asked to share their history of opioid use, how they currently or did use opioids, and how opioids affect their daily life. In addition to eliciting themes, the interviews also provided rich information on the specifics of using opioids in Timiskaming including the routes and costs of use and how participants initiated their opioid use. The themes that arose from the interviews were: quality of life, interpersonal impacts of opioid use, stigma, managing addiction, and facilitators and barriers to accessing health care services.