

Leading the Way to a Healthier Durham



HEALTH  
DEPARTMENT

**Survey Report:  
Consumption and Treatment Services  
Community Consultation  
March 22, 2019**

**An Accredited Public Health Agency**

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# Consumption and Treatment Services Community Consultation

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## Background

Opioid overdoses have been identified as a public health crisis. In Durham Region, emergency department (ED) visits and deaths related to opioids have increased in recent years. Between 2013 and 2017, the rate of ED visits in Durham Region due to opioid poisoning more than doubled to 57 visits per 100,000 people. In 2017, there were 58 deaths related to opioid use in Durham Region, more than triple the amount in 2013.

In response to the ongoing opioid crisis, the Ontario Government confirmed it will approve a new model of service for people who use opiates, called a Consumption and Treatment Service (CTS). Addressing opioid and drug addiction is not simple. Evidence shows a comprehensive approach with multiple ways to access treatment is best. A CTS site will provide treatment as well as health and social services to people who use drugs.

Lakeridge Health, in partnership with the John Howard Society of Durham Region and the Durham Region Health Department are developing a proposal for a CTS site in Oshawa. The proposal will be submitted to the federal and provincial governments. One aspect of the proposal is a community consultation to find out what the community thinks about CTS and identify any concerns that the community may have. The Durham Region Health Department (DRHD) is the lead for the survey portion of the consultation, which is the focus of this report.

## Methods

An online survey was created using Ocean software and was primarily based on survey questions used by other cities and regions when seeking feedback for safe injection sites or overdose prevention sites. The survey was available through the DRHD website for 20 days (February 22, 2019 to March 13, 2019). An extensive media plan was executed with promotion through traditional and online media channels, community event listings and advertising to ensure the public was informed and aware of the opportunity to provide input (see Appendix B). Paper copies were made available at an information open house event in Oshawa on March 12, 2019 for people who were

unable to complete the online version. Data entry of 16 paper surveys was completed by a program assistant.

Descriptive analysis of the survey was completed using Excel 2016. Two public health nurses and an epidemiologist reviewed and themed open-ended questions. A consensus approach was used when needed.

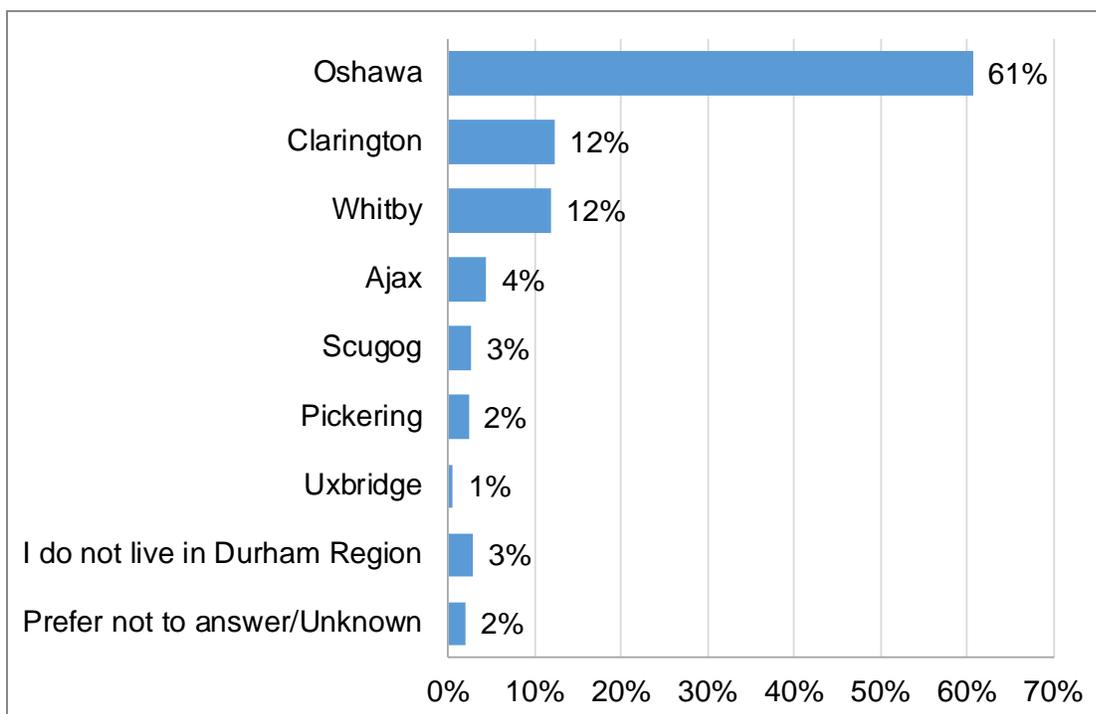
## Results

A total of **903** responses are included in this report. Two responses were excluded as they were not residents of Durham Region and did not work or attend school in Durham Region.

### Demographics

The majority (61%) of survey respondents lived in Oshawa. All respondents lived (96%), worked (49%) or were students (13%) in Durham Region. Most respondents (89%) were aged 25 years or older, with only 8 per cent of respondents aged 16 to 24. Half of the survey respondents (50%) reported that their annual household income was greater than \$70,000, while 29 per cent reported income as less than \$69,999, and 19 per cent preferred not to answer this question.

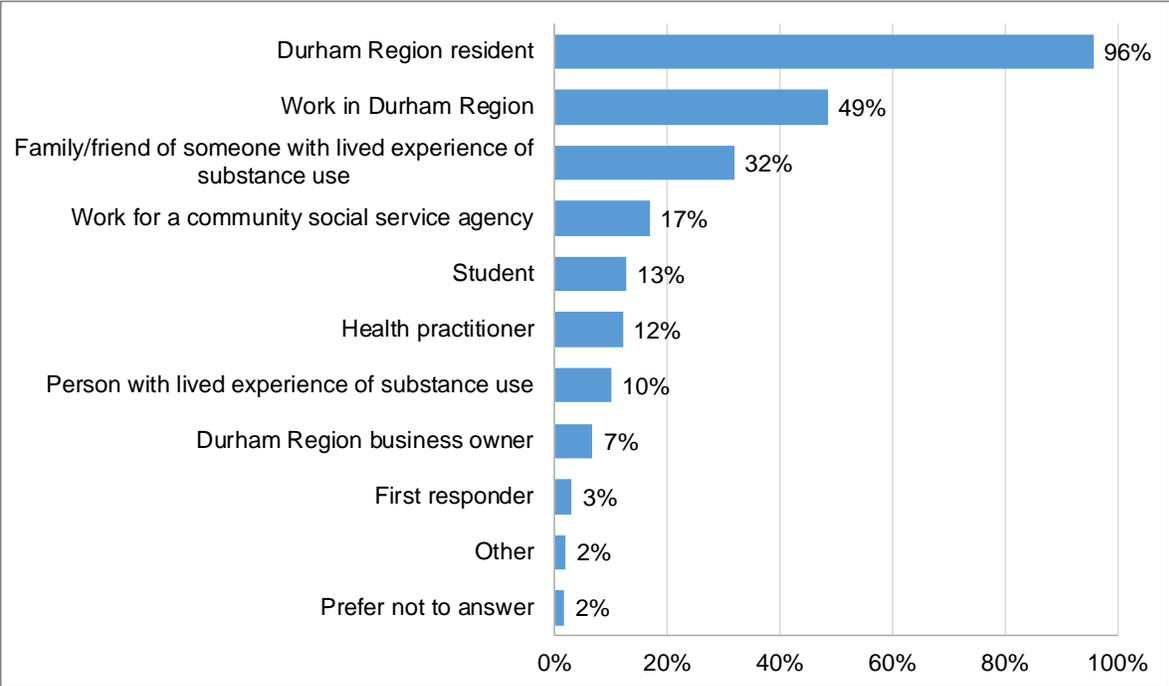
**Figure 1: Municipality where respondents live**



**Table 1: Municipality where survey respondents live**

Municipality	Number of Respondents	Per cent of Respondents (%)
Oshawa	549	61
Clarington	112	12
Whitby	108	12
Ajax	40	4
Scugog	24	3
Pickering	21	2
Uxbridge	5	1
I do not live in Durham Region	26	3
Prefer not to answer/Unknown	18	2

**Figure 2: Description of survey respondents**



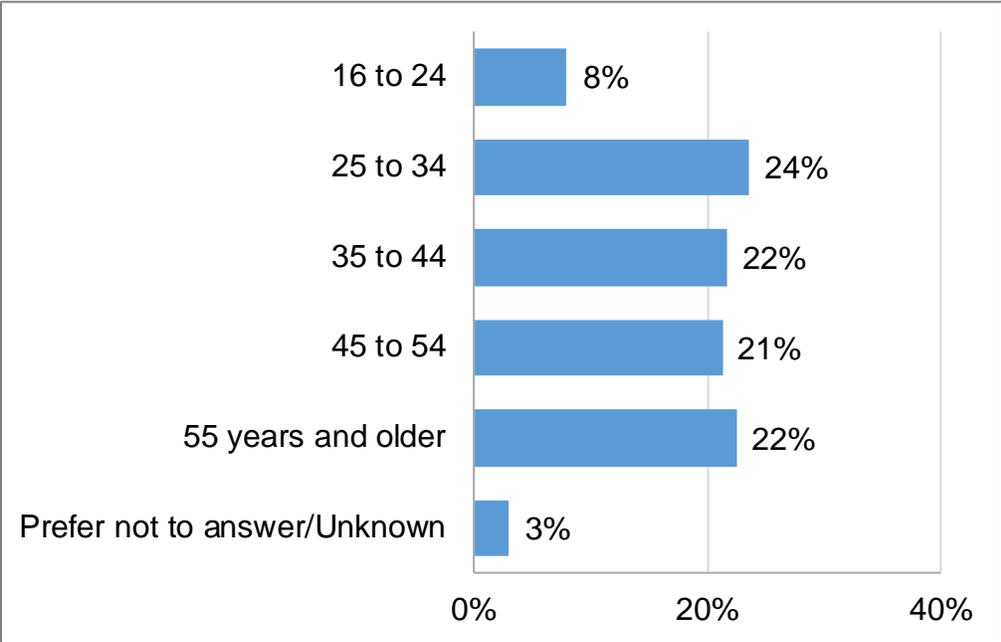
Note: Respondents could choose more than one response.

**Table 2: Description of survey respondents**

<b>Descriptions</b>	<b>Number of Respondents</b>	<b>Per cent of Respondents (%)</b>
<b>Durham Region resident</b>	864	96
<b>Work in Durham Region</b>	438	49
<b>Family/friend of someone with lived experience of substance use</b>	288	32
<b>Work for a community social service agency</b>	152	17
<b>Student</b>	115	13
<b>Health practitioner</b>	109	12
<b>Person with lived experience of substance use</b>	91	10
<b>Durham Region business owner</b>	61	7
<b>First responder</b>	27	3
<b>Other</b>	17	2
<b>Prefer not to answer</b>	15	2

Note: Respondents could choose more than one response.

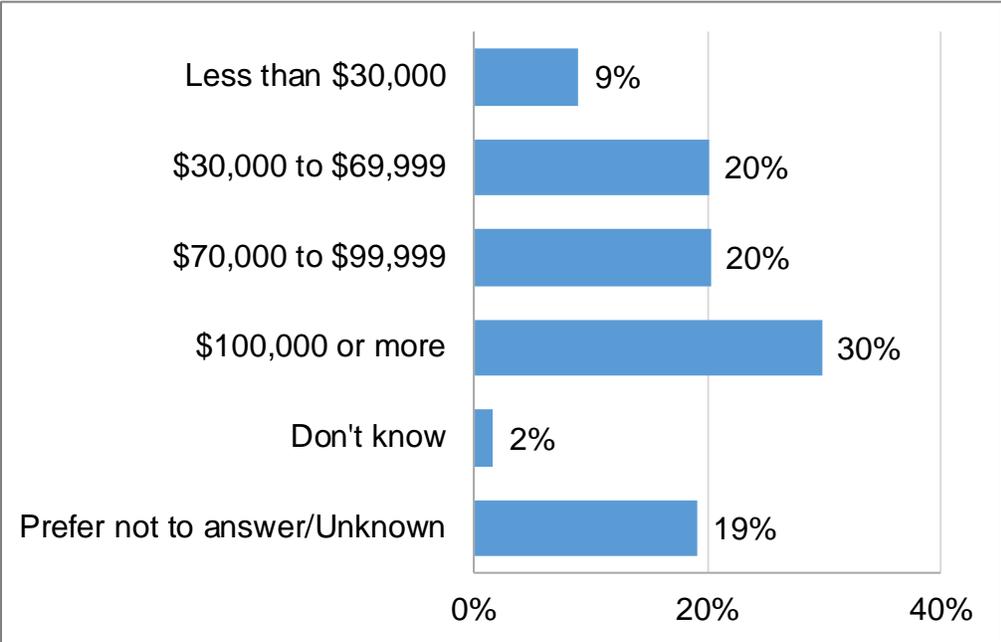
**Figure 3: Age category of survey respondents**



**Table 3: Age category of survey respondents**

Age category	Number of Respondents	Per cent of Respondents (%)
16 to 24	72	8
25 to 34	213	24
35 to 44	196	22
45 to 54	192	21
55 years and older	203	22
Prefer not to answer/Unknown	27	3

**Figure 4: Annual household income of survey respondents, 2017**



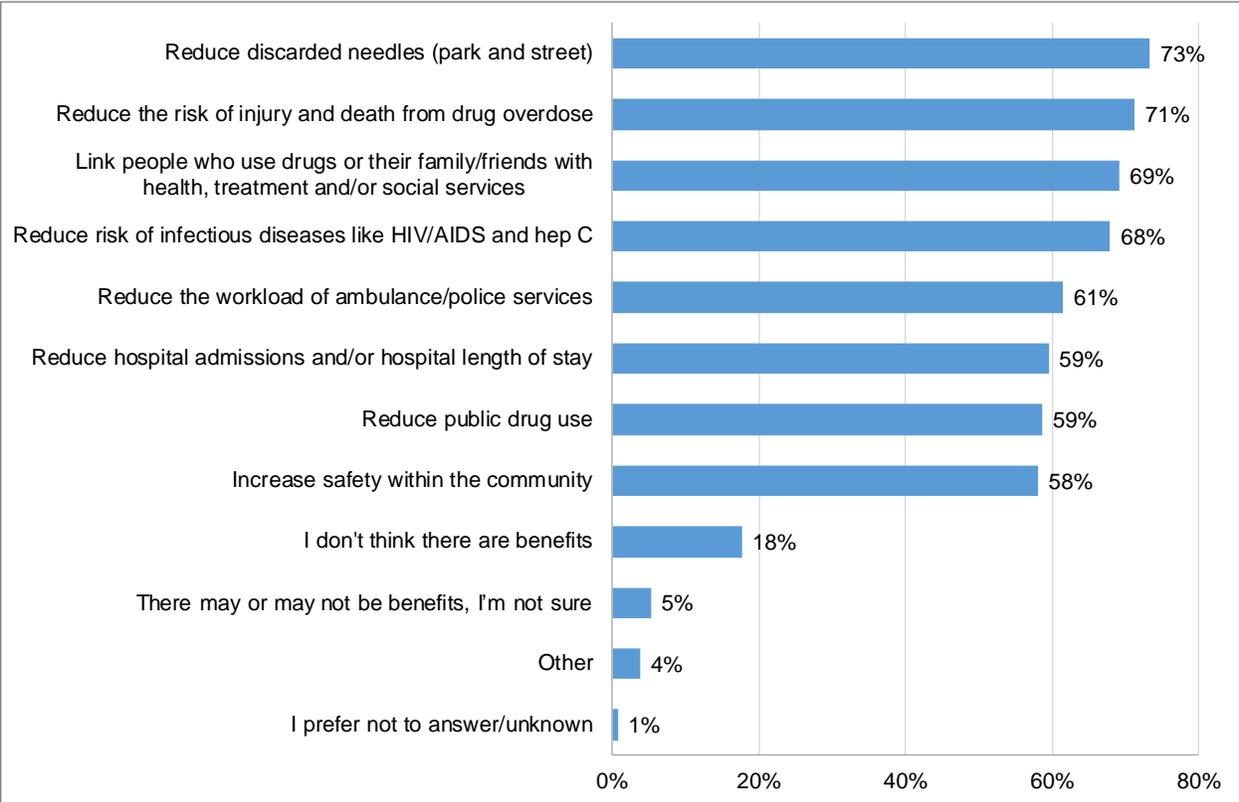
**Table 4: Annual household income of survey respondents, 2017**

Annual household income	Number of Respondents	Per cent of Respondents (%)
Less than \$30,000	81	9
\$30,000 to \$69,999	182	20
\$70,000 to \$99,999	183	20
\$100,000 or more	269	30
Don't know	15	2
Prefer not to answer/Unknown	173	19

# Benefits

Respondents were asked to select the benefits they felt a CTS site could provide to Oshawa. Out of 903 respondents, 724 (80%) felt there was at least one benefit identified. The three most selected benefits by respondents were: reduce discarded needles (park and street) (73%); reduce the risk of injury and death from drug overdose (71%); and link people who use drugs or their family/friends with health, treatment, and/or social services. There were 159 (18%) respondents that did not think there were any benefits. Other benefits identified by respondents included reducing stigma, increased service coordination and access to services, and education.

**Figure 5: Benefits of a CTS site identified by survey respondents**



Note: Respondents could choose more than one response.

**Table 5: Benefits of a CTS site identified by survey respondents**

<b>Benefit</b>	<b>Number of Respondents</b>	<b>Per cent of Respondents (%)</b>
<b>Reduce discarded needles (park and street)</b>	662	73
<b>Reduce the risk of injury and death from drug overdose</b>	643	71
<b>Link people who use drugs or their family/friends with health, treatment, and/or social services</b>	624	69
<b>Help reduce the risk of infectious diseases like HIV/AIDS and hepatitis C</b>	613	68
<b>Reduce the workload of ambulance/police services</b>	555	61
<b>Reduce hospital admissions and/or hospital length of stay</b>	537	59
<b>Reduce public drug use</b>	529	59
<b>Increase safety within the community</b>	524	58
<b>I don't think there are benefits</b>	159	18
<b>There may or may not be benefits, I'm not sure</b>	48	5
<b>Other</b>	35	4
<b>I prefer not to answer/unknown</b>	7	1

Note: Respondents could choose more than one response.

# Concerns and Recommendations

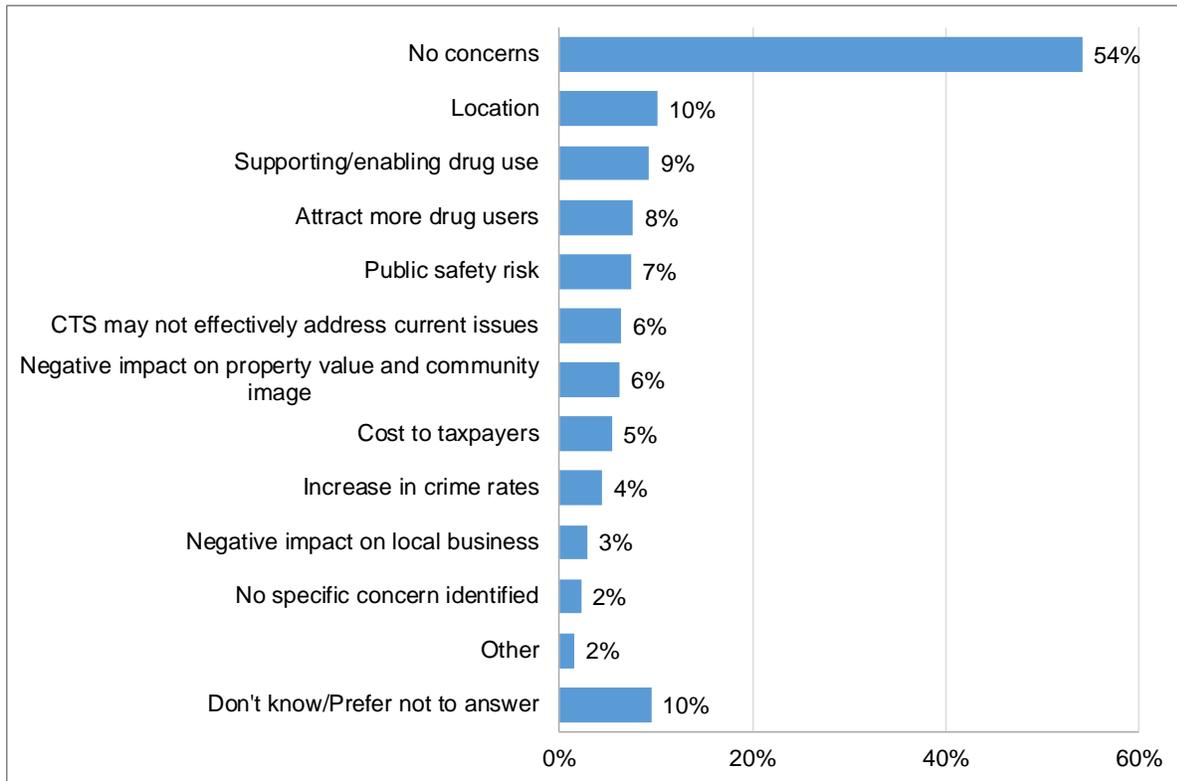
Most (54%) survey respondents did not have any concerns about a CTS site in Oshawa, while 36 per cent identified they did have concerns. The three most commonly identified concerns included location (10%), that a CTS site would be supporting and enabling drug use (9%), and that it would attract more drug users to Oshawa (8%).

Recommendations that most survey respondents felt would help address community concerns included: providing information to the community about the goals and benefits of a CTS site (68%); evaluating services, sharing results with the community, and responding to evaluation results (62%); establishing a process to receive community feedback (e.g. phone number or email address) (53%); and establishing a community advisory group with representation from different members of the community to identify and address any issues (52%). Other recommendations included having a clean facility in an accessible and safe location away from schools and ensuring that the CTS is well staffed and has adequate security measures.

**Table 6: Do survey respondents have any concerns about a CTS site in Oshawa?**

Concerns?	Number of Respondents	Per cent of Respondents (%)
No	489	54
Yes	328	36
Don't know/Prefer not to answer	86	10

**Figure 6: Concerns identified by survey respondents about a CTS site in Oshawa**



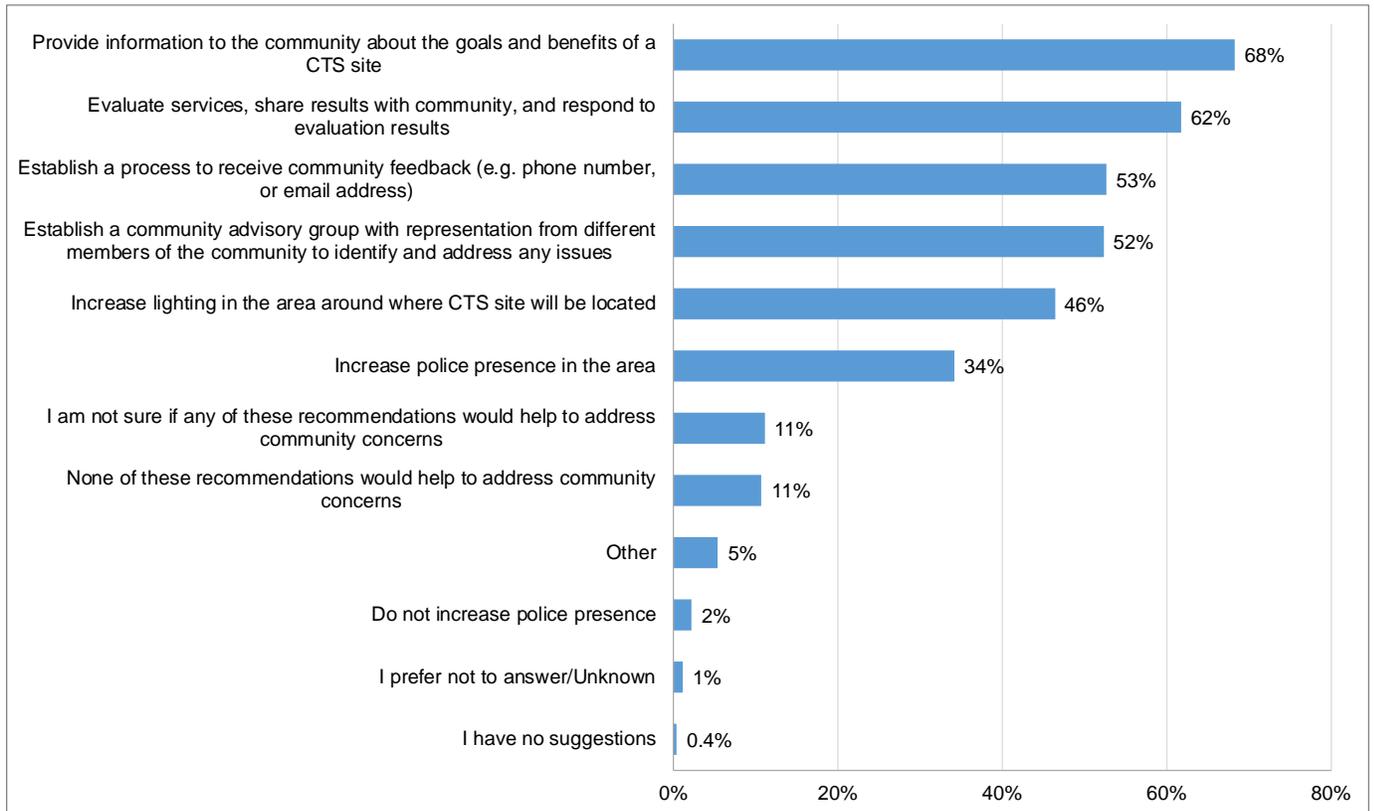
Note: Respondents could identify more than one concern.

**Table 7: Concerns identified by survey respondents about a CTS site in Oshawa**

<b>Concerns</b>	<b>Number of Respondents</b>	<b>Per cent of Respondents (%)</b>
<b>No concerns</b>	489	54
<b>Location</b>	92	10
<b>Supporting/enabling drug use</b>	84	9
<b>Attract more drug users</b>	69	8
<b>Public safety risk</b>	67	7
<b>CTS may not effectively address current issues</b>	58	6
<b>Negative impact on property value and community image</b>	56	6
<b>Cost to taxpayers</b>	49	5
<b>Increase in crime rates</b>	40	4
<b>Negative impact on local business</b>	26	3
<b>No specific concern identified</b>	20	2
<b>Other</b>	14	2
<b>Don't know/Prefer not to answer</b>	86	10

\*Respondents could identify more than one concern.

**Figure 7: Recommendations to address community concerns about a CTS in Oshawa selected by survey respondents**



Note: Respondents could identify more than one concern.

**Table 8: Recommendations to address community concerns about a CTS in Oshawa selected by survey respondents**

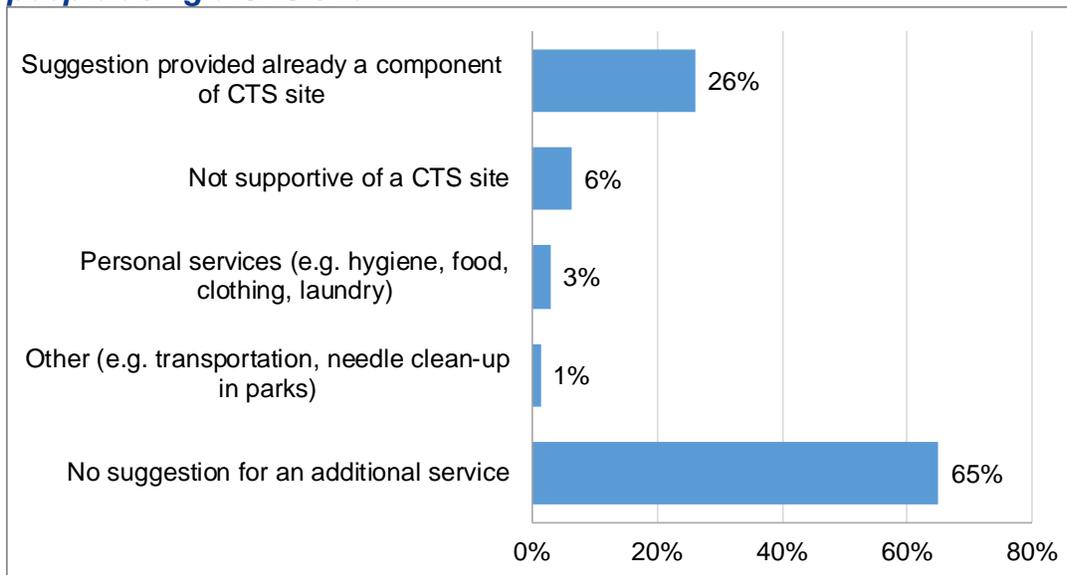
<b>Recommendations</b>	<b>Number of Respondents</b>	<b>Per cent of Respondents (%)</b>
<b>Provide information to the community about the goals and benefits of a CTS site</b>	617	68
<b>Evaluate services, share results with community, and respond to evaluation results</b>	558	62
<b>Establish a process to receive community feedback (e.g. phone number, or email address)</b>	476	53
<b>Establish a community advisory group with representation from different members of the community to identify and address any issues</b>	473	52
<b>Increase lighting in the area around where CTS site will be located</b>	419	46
<b>Increase police presence in the area</b>	309	34
<b>I am not sure if any of these recommendations would help to address community concerns</b>	100	11
<b>None of these recommendations would help to address community concerns</b>	97	11
<b>Other</b>	49	5
<b>Do not increase police presence</b>	20	2
<b>I prefer not to answer/Unknown</b>	10	1
<b>I have no suggestions</b>	4	0.4

Note: Respondents could choose more than one response.

## Additional Services

The majority of survey respondents (65%) did not identify an additional service to be included in a CTS site. There were 26 per cent of respondents that suggested a service that would already be included in a CTS site. In terms of additional services, providing personal services including hygiene, food, clothing and laundry, was the most common service identified (3%). Other services (1%), included transportation and needle clean-up in parks and communities.

**Figure 8: Additional services identified by survey respondents to best support people using a CTS site**



Note: Respondents could identify more than one response.

**Table 9: Additional services identified by survey respondents to best support people using a CTS site**

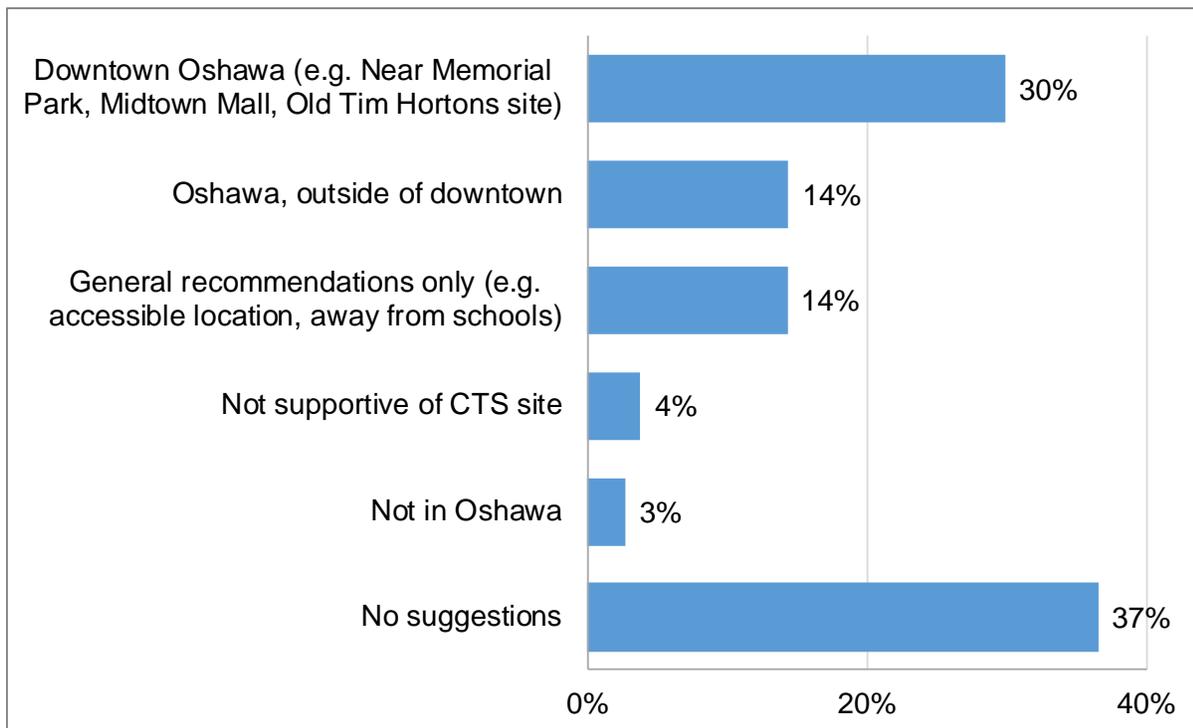
Concerns	Number of Respondents	Per cent of Respondents (%)
<b>Suggestion provided already a component of CTS site</b>	235	26
<b>Not supportive of a CTS site</b>	58	6
<b>Personal services (e.g. hygiene, food, clothing, laundry)</b>	27	3
<b>Other (e.g. transportation, needle clean-up in parks)</b>	12	1
<b>No suggestion for an additional service</b>	587	65

Note: Respondents could identify more than one response.

## Location

In regard to location, 37 per cent of respondents did not provide suggestions for where the CTS should be located. Of those who indicated a site should be located in downtown Oshawa (270 respondents), the top three locations were: near Memorial Park (47 respondents); Midtown Mall (43 respondents); and the closed Tim Hortons site at 17 Athol St W (30 respondents). For those respondents that suggested a location outside of downtown Oshawa (130 respondents), the most common site suggested was near or within Lakeridge Health Oshawa (36 respondents). General recommendations from respondents included: having the location easily accessible by clients (e.g. on a transit route); choosing an evidence-based location (i.e. where the greatest need is); and ensuring that the location is away from schools.

**Figure 9: CTS Location suggestions by survey respondents**



Note: Respondents could choose more than one response.

**Table 10: CTS Location suggestions by survey respondents**

<b>Location</b>	<b>Number of Respondents</b>	<b>Per cent of Respondents (%)</b>
<b>Downtown Oshawa (e.g. Near Memorial Park, Midtown Mall, Old Tim Hortons site)</b>	270	30
<b>Oshawa, outside of downtown</b>	130	14
<b>General recommendations only (e.g. accessible location, away from schools)</b>	129	14
<b>Not supportive of CTS site</b>	34	4
<b>Not in Oshawa</b>	24	3
<b>No suggestions</b>	330	37

Note: Respondents could choose more than one response.

## Advice or Recommendations if CTS is approved

The majority of respondents (57%) did not have any additional advice or recommendations if a CTS site is approved for Oshawa. Recommendations identified are outlined in Table 11 and included advice on model of care, public education, location, evidence-based practice and evaluation, advocacy, community engagement, and public safety.

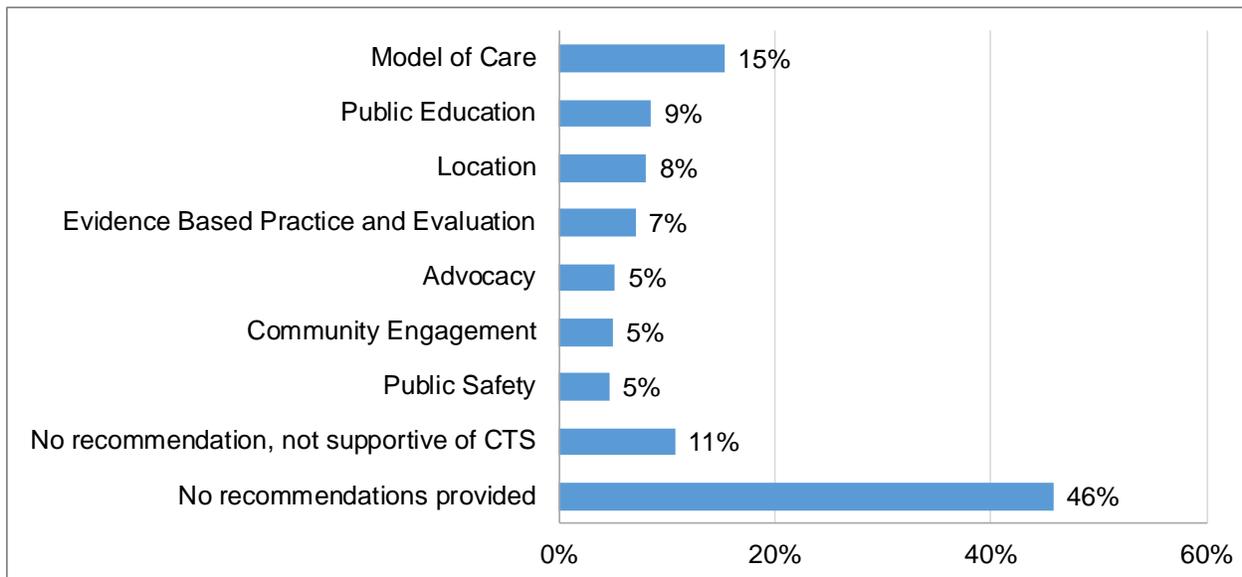
**Table 11: Recommendations identified by survey respondents if a CTS site is approved in Oshawa**

Recommendations	Number of Respondents	Per cent of Respondents (%)
<b>Model of Care: Have an accessible model of care that includes access to treatment and existing social services. Have high quality staff and a clean facility.</b>	139	15
<b>Public Education: Provide public education to ensure the public understands the need for the site and the purpose. Provide community education to help reduce the stigma that is associated with opioid addiction.</b>	77	9
<b>Location: Identify a location that is accessible and on a bus route. Keep the site away from places where children and youth are. Consider the current density of social services in the downtown core and try to spread services out so they are not altogether. Consider placing it near other health care services e.g. hospital.</b>	73	8
<b>Evidence Based Practice and Evaluation: Ensure services are based on current evidence and have shown to be effective. Evaluate services and make changes based on evaluation results.</b>	64	7
<b>Advocacy: Continue to advocate locally and provincially to ensure services like this are available. These are important services and should be offered locally.</b>	47	5

Recommendations	Number of Respondents	Per cent of Respondents (%)
<b>Community Engagement: Engage the community on an ongoing basis, including residents, business, clients of the CTS site as well as other health care and social services.</b>	45	5
<b>Public Safety: Take steps to ensure public safety e.g. prevent loitering and increase security measures.</b>	42	5
<b>No recommendation: Respondent indicate they were not supportive of the service</b>	97	11
<b>No recommendations provided</b>	414	46

Note: Respondents could identify more than one recommendation.

**Figure 10: Recommendations identified by survey respondents if a CTS site is approved in Oshawa**



Note: Respondents could identify more than one recommendation.

## Conclusion

Most survey respondents feel that there are benefits to having a CTS site in Oshawa. The survey participants indicate that a CTS will help to reduce the number of needles discarded in public areas, reduce the risk of injury and death from drug overdoses, and provide people who use drugs with access to health and social services as well as addiction treatment services. It was also noted that a CTS would help reduce the spread of infectious diseases like HIV and hepatitis C. A small number of survey respondents reported having concerns about a CTS, including concerns that a CTS will enable drug users, attract more drug users and jeopardize public safety. Some of the respondents offered suggestions about a possible location for the CTS. Of those who indicated a location, a small number of respondents indicated they did not want the CTS to be located downtown while most people suggested the CTS should be located in or near downtown Oshawa.

## Next steps

The survey data will be shared with local stakeholders to help inform the next steps for the proposed consumption and treatment service.

# Appendix A

## Consumption and Treatment Services Survey

*Website Page with “Begin Survey” button*

**Please tell us what you think about Consumption and Treatment Services (CTS).**

**The goal of this consultation is to better understand the needs of our community. We want to know what the community thinks about CTS and identify any concerns that the community may have.**

### **Background Information**

Opioid overdose and addiction can have negative health, social and economic effects on individuals, their families and communities. Emergency department (ED) visits and deaths related to opioids have increased in Durham Region over the past five years. Between 2013 and 2017, the rate of ED visits in Durham Region due to opioid poisoning more than doubled to 57 visits per 100,000 people. In 2017 there were 58 deaths related to opioid use in Durham Region, more than triple the amount in 2013. Addressing opioid and drug addiction is not simple. Evidence shows a comprehensive approach with multiple ways to access treatment is best.

The Ministry of Health and Long-Term Care announced in October 2018 their new Consumption and Treatment Services model (CTS), to help people who use drugs access treatment.

The CTS site will provide treatment as well as health and social services to people who use drugs. Services offered at a CTS site will include:

- Addiction treatment services, including medication assisted treatment with buprenorphine (suboxone)
- Health care (e.g. wound care)  
Mental health services
- Housing and social services
- Harm reduction services
  - Education on safe injection practice to reduce infections and disease transmission
  - Distribution and disposal of harm reduction supplies

- Supervised consumption space where people who use drugs can use their own pre-obtained drugs in a safe and clean environment supervised by a Registered Nurse
- Overdose prevention services provided by the supervising Registered Nurse
- Provision of naloxone through the Take Home Naloxone Program
- Removal of inappropriately discarded harm reduction supplies (e.g. potentially contaminated needles and other drug use equipment surrounding the Consumption and Treatment Services site)

Evidence shows that in areas with supervised consumption treatment services there is

- a reduction in illness and death from overdoses
- lower rates of public drug use and
- lower rates of infectious diseases associated with shared needles

**Lakeridge Health, in partnership with the John Howard Society of Durham Region and Durham Region Health Department are developing a proposal for a Consumption and Treatment Services site in Oshawa. The proposal will be submitted to the federal and provincial governments.**

Your feedback is important. The survey is made up of 10 questions. Participation is voluntary, and all responses are anonymous. You may stop at any time or leave any question unanswered. We thank you for your time.

[“Begin Survey” Button](#)

### **First Page of Survey**

In response to the ongoing opioid crisis, the Ontario Government has recently confirmed it will approve a new model of service for people who use opiates, called a Consumption and Treatment Service. Paramedic data shows that between 2017 and 2018, 68% of all paramedic calls in Durham Region related to potential opioid overdoses occurred in Oshawa. Lakeridge Health, the John Howard Society of Durham Region and Durham Region Health Department are currently preparing an application for a Consumption and Treatment Service in Oshawa.

Consumption and Treatment Services sites offer harm reduction and treatment services as well as medical and social services. Services that will be offered at a Consumption and Treatment Services site include:

- Addiction treatment services, including medication assisted treatment with buprenorphine (suboxone)
- Health care (e.g. wound care)  
Mental health services
- Housing and social services
- Harm reduction services
  - Education on safe injection practice to reduce infections and disease transmission
  - Distribution and disposal of harm reduction supplies
  - Supervised consumption space where people who use drugs can use their own pre-obtained drugs in a safe and clean environment supervised by a Registered Nurse
  - Overdose prevention services provided by the supervising Registered Nurse
  - Provision of naloxone through the Take Home Naloxone Program
  - Removal of inappropriately discarded harm reduction supplies (e.g. potentially contaminated needles and other drug use equipment surrounding the Consumption and Treatment Services site)

1. Select the benefits that you feel a Consumption and Treatment Services site could provide to Oshawa (Select all that apply)

- Reduce the risk of injury and death from drug overdose
- Help reduce the risk of infectious diseases like HIV/AIDS and hep C
- Reduce discarded needles (park and street)
- Link people who use drugs or their family/friends with health, treatment and/or social services
- Reduce public drug use
- Reduce the workload of ambulance/police services
- Reduce hospital admissions and/or hospital length of stay
- Increase safety within the community
- I don't think there are benefits
- There may or may not be benefits, I'm not sure
- I prefer not to answer
- Other (please tell us more)

2. Do you have any concerns about a Consumption and Treatment Services site in Oshawa?
  - Yes
  - No
  - Don't know
  - Prefer not to answer
- a) What concerns do you have about a Consumption and Treatment services site in Oshawa?
3. What recommendations do you think would help address community concerns about a Consumption and Treatment Services site in Oshawa (Select all that apply)
  - Provide information to the community about the goals and benefits of a consumption treatment services site
  - Evaluate services, share results with community, and respond to evaluation results
  - Establish a community advisory group with representation from different members of the community to identify and address any issues
  - Establish a process to receive community feedback (e.g. phone number, or email address)
  - Increase lighting in the area around where the consumption treatment services site will be located
  - Increase police presence in the area
  - None of these recommendations would help to address community concerns
  - I am not sure if any of these recommendations would help to address community concerns
  - I have no suggestions
  - I prefer not to answer
  - Other (please tell us more)
4. What, if any, additional services do you think should be included to best support people using the Consumption and Treatment Services site?

**Second Page of Survey**

Oshawa has the 6th highest emergency department visit rate for opioid poisoning in Ontario and the highest number of opioid overdoses in Durham Region. Between 2017 and 2018, the majority (68%) of suspected opioid overdose calls received by Region of Durham Paramedic Services were in Oshawa.

5. If the Consumption and Treatment Services site was in or near downtown Oshawa, do you have suggestions as to where the site should be located?
6. What advice or recommendations do you have if a Consumption and Treatment Services site is approved for Oshawa?

**Third page of Survey**

To help us understand our survey respondents, we would like to ask the following questions

7. In what community do you reside?
  - Town of Ajax
  - Township of Brock
  - Municipality of Clarington
  - City of Oshawa
  - City of Pickering
  - Township of Scugog
  - Town of Whitby
  - Township of Uxbridge
  - I do not live in Durham Region
  - Prefer not to answer
8. How would you describe yourself? (check all that apply)
  - Durham Region resident
  - I work in Durham Region
  - Durham Region Business owner
  - I work for a community social service agency
  - Health practitioner
  - First responder
  - High school, college or university student
  - A person with lived experience of substance use
  - Family member or friend of someone with lived experience of substance use
  - Prefer not to answer
  - Other (please specify)
9. What age bracket do you fall in?
  - 15 years and under

- 16 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 years and older
- Prefer not to answer

10. What is your annual household income before taxes for 2017?

- Less than \$30,000
- \$30,000 to \$69,999
- \$70,000 to \$99,999
- \$100,000 or more
- Don't know
- Prefer not to answer

# Appendix B

## Media Promotion

Media Relations included:

- Public Service Announcement
- Media Coverage
  - Oshawa Express article - Feb. 25 - [No council decision on consumption and treatment site](#)
  - Durhamregion.com article - Feb. 27 - [Lakeridge Health, Durham health department make the case for Durham's first safe injection site in Oshawa](#)
  - Durhamregion.com - Oshawa This Week article - March 7 - [Oshawa open house on safe injection sites on March 12](#)
  - Oshawa Express article - March 7 - [Residents can share thoughts on proposed CTS site](#)
  - Durham Radio News - March 9 - [Have your say on the proposed safe injection site in Oshawa](#)
  - Durhamregion.com – Oshawa This Week article - March 18 - [Open house on safe injection sites part of public consultation prior to Oshawa council vote](#)
- Staff interviews with Lakeridge Health
  - Global News - March 12
  - Metroland - March 12:
- Print Newspaper advertisements
  - Oshawa This Week - Circulation of 49,029
  - Oshawa Express - Circulation of 35,000
- Online advertisements
  - Weather Network - 125,002 Impressions
  - durhamregion.com - 20,404 Impressions
  - Oshawa Express online – impressions not available at time of publication
  - durhamradionews.com - 19,996 Impressions
- Community Event Listings (Online):
- The Open House event was submitted on the following websites:
  - KX96.com
  - Durhamregion.com
  - Snapd Oshawa
  - Rogers TV Durham Region
  - Oshawa Express
- Social Media:
  - The social media campaign on Durham Region Health Department platforms: Facebook, Twitter and Instagram
  - 105,679 people reached and 134,315 impressions

- 1,069 media / link clicks, 64 shares / retweets and 182 reactions / likes