## Virtual Learning Together Series Webinar Recap

## **Harm Reduction**

#### Webinar, June 1, 2021

Presented by:

- Scott Elliott (Executive Director), Clem Fong (Clinical Counsellor), Patrick McDougall (Director of Knowledge Translation and Evaluation), the Dr. Peter AIDS Foundation
- Kevin Barlow (Owner/Principal Consultant), J Kevin Barlow Consulting

#### **Reflections on the children at Kamloops Residential School**

Kevin Barlow works with the Dr. Peter AIDS Foundation – guiding the organization, as an Indigenous person, on how to do better for the Indigenous people who use the services. He led reflections and a minute's silence to honour the 215 children from the former residential school in Tk'emlúps te Secwépemc territory near Kamloops in British Columbia, and all residential school survivors. He believes wider acknowledgement of the residential schools is needed. He also believes anybody can heal from trauma; but time is needed in between traumas to heal. For Indigenous people, history shows they are not afforded time in between, the traumas kept coming. "When you find balance between the mind, body and spirit, it's like a braid of sweet grass – you can twist and turn it, pull on it and it won't break." Kevin recited a poem as part of the reflections.

When they buried the children, What they didn't know, They were lovingly embraced, By the land. Held and cradled in a mother's heart, The trees wept for them, with the wind, They sang mourning songs their mothers didn't know to sing, Bending branches to touch the earth around them, The creator cried for them, the tears falling like rain. Mother Earth held them, Until they could be found. Now our voices sing the mourning songs – with the trees, the wind. Light sacred fire, ensure they are never forgotten, As we sing JUSTICE.

– Abigail Echo-Hawk

#### The Dr. Peter Centre

The <u>Dr. Peter Centre</u> in Vancouver works with people of all ages living with HIV/AIDS and other sexually transmitted and blood-borne infections, mental health conditions and trauma, and physical disabilities; people who use substances, who are vulnerably housed or unhoused, or living in poverty. The Day Health Program serves around 420 "participants" (around 150 per day) – they participate in creating the healing environment and have choice and control over what they do. The long-term care Residence offers 24-hour complex medical care, with 12 short-term stabilization beds and 12 long-term care beds. About 30 percent of participants identify as Indigenous.

The entire Centre is the therapeutic space and community of care. All staff – from kitchen staff, housekeeping and nurses to therapists and counsellors – are work in line with the Dr. Peter Centre values and work to create a stigma free environment. Staff are harm reductionists who see substance abuse as a human behaviour rather than a problem.

The Residence is unique in that, while it uses a medical based model, it has an embedded community of care: accepting substance use, understanding trauma and supporting mental health. Understanding their residents' complex needs is critically important in helping staff to deliver their care. An important element is letting residents choose what medical care they want (if any). Staff have created a joyful and accepting home where people can live and die in contentment, a place where they feel safe and that they want to participate in.

The Centre has been running supervised consumption services since 2002 in both the Day Health and Residence programs. It also runs a safe supply program offering hydromorphone and diacetylmorphine (the first community agency to start the latter).

A qualitative study by researchers at the BC Centre on Substance Use interviewed 31 Dr. Peter Centre participants and found that:

- The Centre acted as a lifeline helping them through periods of extreme instability, whether that was because of challenges around HIV, medication adherence or bereavement.
- The caring and non-judgmental atmosphere of the Centre contributed to enhanced mental wellness through instilling a sense of safety and hope in the future.
- The supervised injection services supported them in safer substance use.

#### Questions

# How does the Dr. Peter Centre support participants and staff in the grieving process?

Staff help participants process their grief through 'honouring' the deceased for a week, including a memorial day where stories and thoughts are shared. . They also read together an affirmation written by Dr. Peter. In a memorial space with a photo of the deceased, people can light candles and provide offerings (e.g. tobacco, stuffed animals, flowers). As Centre staff know every participant by name, when residents die the aim is for staff to be able to heal with each other a little, or at least acknowledge the loss and the challenge of working through their grief. Staff make time to debrief as a team and discuss the impact of the loss.

#### How does the Centre engage participants to make sure that they feel they're part of creating a safe, welcoming community of care?

For the redesign of the safe consumption area, the Centre set up a community advisory committee for participants. This type of engagement may take a lot longer than making a management decision, but it's important to understand that harm reduction is always born out of activism and the best activists are the people who use the services. Similarly, the Centre has an Indigenous program: all the participants who identify as Indigenous are invited to join in discussions and circles around how to make the Centre more welcoming for Indigenous people and better meet their needs.

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#### Webinar recording

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