

WRHA Population and Public Health
 Healthy Sexuality and Harm Reduction (HSHR)
 Program Monitoring Report: January 1 – December 31, 2018

1. Harm reduction supplies distributed and recovered

	2018 Current Year	2017 Previous Year	Year-to-year Change
Needles Distributed	2,087,594	1,640,982	+27%
Needles Collected	697,772	623,141	+11% [#]
Safer Crack Use Kits Distributed	68,992	53,625	+28% [^]

[#] There has been a decreased in needles collected through our program. 40% were recovered in 2018. Many of our distribution partners do not return needles to our program nor keep track of returned needles. Further, a recent survey of Street Connections clients suggests that many put used needles into an alternate puncture proof container (non-approved sharps container) and dispose of the container in the municipal garbage. We continue to inform clients and partners of safe disposal practices.

[^] While the number of Safer Crack Use Kits distributed has remained stable for years, in the last two years distribution has doubled. We believe that this is due to increased use of crystal meth.

2. Naloxone kits distributed and used

Overall distribution numbers are comparable in numbers to previous years. In 2016, 255 kits were distributed. In 2017 HSHR distributed 331 kits, 20 reported used in overdose events. Among those reporting using their kit were 60% males, and 40% female. 40% of people who reported using a kit in an overdose event were between 19 and 30 years of age. About the same proportion were between 31 and 50 years of age.

The capacity for distribution in 2018 was limited by demands of the syphilis outbreak, concurrent outbreaks of GC and hepatitis C, and increased harm reduction supply demand. The pressure to make naloxone available in community was lessened by the increased availability across the province at other sites. This is significant as in 2016 HSHR was the only naloxone distribution site in the province. By January 2018 there were over 60 sites in Manitoba, and more than 15 in Winnipeg.

In 2018, HSHR also launched a community trainer training program to prepare non-health care providers as overdose/naloxone trainers – so that they could go on to train their own service users. This decreased the need for PHN allocation of time to provide group training in other institutions (Main Street Project, Elizabeth Fry, Turning Leaf, AYO!

	2018	2017
Total number of naloxone kits distributed	331	523
First (initial) kits distributed	242	386
Kits used in overdose events	20	69
Lost kits	42	44
Stolen kit	22	17
Confiscated	3	4
Expired	1	3
Other	1 - damaged	0

3. Sexually-transmitted and blood-borne infection (STBBI) tests performed—and results—in Street Connections van, office and other outreach venues

The following tests were performed by *Street Connections ONLY*, according to statistics completed by staff.

	Serology				Urine	Swabs
	HIV	Syphilis	HCV	Other	NAAT	
2018 (current year)	581	609	553	359	475	NA
2018 (Van only)*	79	85	74	54	53	2
2017 (previous year)	119	117	117	109	88	4

*mid-way through 2018 there were changes to our forms, which left gaps in ways we account PHN activities performed for Street Connections’ office.

Results – ALL of HSHR outreach (Street Connections, Corrections, bath house outreach, and PHN investigations)

	Syphilis	HIV	GC/CT/HCV/HBV	TOTAL
2018 (current year)	103	4	288	395
2017 (previous year)	14	3	249	266

4. HIV Point of Care/rapid tests administered and results

52 POC tests were administered, with one reactive test. This results in a percent-positivity of 1.9%. The estimated population prevalence = 0.02%, confirming the program is effective at reaching and detecting HIV among a population of high HIV prevalence who have not previously tested positive. In 2017, 76 POC test were administered, with two reactive tests (2.6%).

5. ‘Opened’ contacts per infection

2061 contacts were pursued by HSHR in 2018, 345 less than in 2017. The decrease in pursued contacts is attributed to changes in practice as we only follow up contacts for Chlamydia with clients in highest priority populations. Note that these do not include contacts for whom we have insufficient information to pursue, and who therefore are not entered into the database. However, the nature of syphilis related work is more complex and time consuming.

	HIV	Syphilis	Hepatitis C	Gonorrhea	Chlamydia	Chl/GC	Other*	TOTAL
2018	102	883	113	311	341	276	35	2061
2017	139	224	61	526	1132	300	24	2406

* ‘Other’ represents primarily individuals who were contacts to hepatitis B, and/or to more than one infection at once (e.g., Chl/HIV, Syph/HIV, etc.).

6. ‘Other health care’ services provided by Street Connections

Under this category we include immunizations, giving results, TB sputum, wound care, antibiotic treatment, and referrals. In 2018, the total was 206 episodes of care.

7. Group education sessions and attendance

HSHR staff (outreach workers and PHNs) animated 94 groups—to university groups, residential facilities, youth centres, etc.—and reached 1233 participants. In 2016, the total was 44 groups, with 1103 participants.

8. Community development, advocacy, and partnerships activity

This year, HSHR:

- In partnership with Indigenous Health, AYO!, Ka Ni Kanichihk and the Manitoba Harm Reduction Network, HSHR organized [Community Matters](#), a conference on substance use prevention and harm reduction inspired by the Icelandic Model of substance prevention.
- HSHR became a member of the [Safer Consumption Spaces](#) Network and actively participated in their Needs Assessment and Consultation.
- Continue to enhance harm reduction supply distribution through over 15 community groups.
- HSHR staff also participated in numerous local groups, including the Manitoba Harm Reduction Supply Distribution Working Group, Manitoba Trans Health Coalition, the Teen Services Network, the Health Outreach and Community Support (HOCS) team, and the Inner-City Safety Committee, Manitoba STBBI/HIV Collective Impact Network.
- Participated in a number of community and intersectoral consultations.
- Funded programming at [Sunshine House](#), supporting the House as a centre for art and recreation, including the *Like That* initiative, a recreation-as-prevention project aimed at urban queer communities.
- Funded community safer sex supplies distribution through [Klinic](#).
- Funded a sexual health program for the Afro-Francophone community at [SERC](#).
- Funded the launch and monitoring of new '[Bad Date](#)' system in collaboration with [Sex Workers of Winnipeg Action Coalition](#) (SWWAC)
- Supported *Our Place Safe Space*, a drop-in program for those who identify as sex workers, experiential folks, and victims/ survivors of sexual exploitation at Daniel McIntyre St. Matthews Community Association with the [Spence Neighborhood Association](#)
- Supported [Ka Ni Kanichihk's](#) community engagement process for *Manitoba Mino Pimatisiwin Model of STBBI Care*.

9. Website views

In 2018, the [StreetConnections.ca](#) website received 42,409 page views by 12,880 unique visitors. These represent a **slight increase** in both categories (5% and 6.5%, respectively) over 2017. The most visited page was to our interactive map.

In 2018, [Syphilismb.com](#) received 3661 page views by 2725 unique visitors. When compared to 2017, **there was an increase of about 30% in usage to this site**. The increase is mostly attributed to the small social media campaign conducted at the end of the year (see item 12). Notably, the increase greatly surpassed the number of page views and visitors for 2016, when we also conducted our first targeted social media campaign.

In 2018, there was a **significant increase in usage of the [GetSomeCondoms.com](#)** website. The site received 11,545 page views, up from 2,733 – but still under half of the page views received in 2016 when we launched a new social marketing campaign. **Larger number of visits was to the interactive condom map**. We believe that the increase in traffic has been due in part to having shared list of clinics and our map locator with the Yes Means Test campaign of the Society of Obstetricians and Gynecologist of Canada.

10. Health Communication and Social marketing

Towards the end of 2018, we revamped a small social media campaign to address the current syphilis outbreak among heterosexual men and women in Winnipeg. This consisted in posters and a small social media campaign through facebook which targeted locations where larger number of people affected with syphilis appear to congregate or receive services.

Ongoing increased demand in harm reduction supplies, mostly needles, has affected HSHR social marketing.