

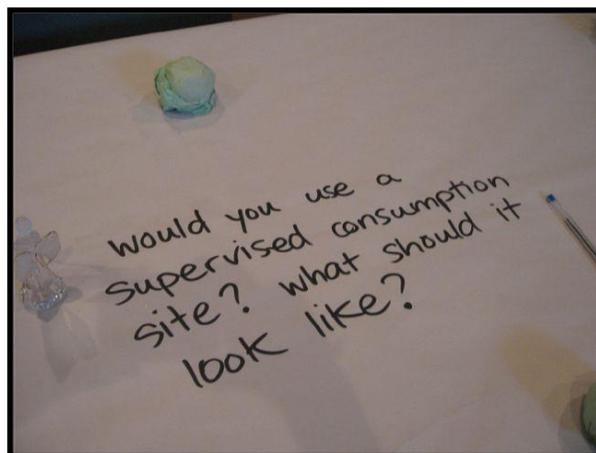
Results from Surveys and Tables- DRAFT

The Randy Beddow Centre

First Gathering

First Metropolitan Church

December 22, 2010



Introduction

The Victoria Harm Reduction Resource Centre Society, also known as The Beddow Centre, was established this year to combat some of the barriers to basic health care faced by people who use drugs in Victoria. The society is guided by best practices and policy recommendations that support harm reduction services as an essential part of health care delivery. The Beddow Centre aims to close the gap in health care services for the most marginalized populations in Victoria by offering harm reduction information and resources, and envisioning a space in which people who



use drugs can access dignified, practical health supports in the community.

The Beddow Centre is run by and for people who use drugs.

On December 22, 2010, the Beddow Centre hosted a large community dinner for approximately 60 people who identify as people who use drugs in our community. The purpose of this meeting was to begin community dialogue about the development of the Beddow Centre.

The interviews were informal and the questions were open ended. The interview process consisted of a volunteer reading out questions to a respondent and recording their answers by hand.

28 people in total were interviewed. Responses are below in **PART I and II**.

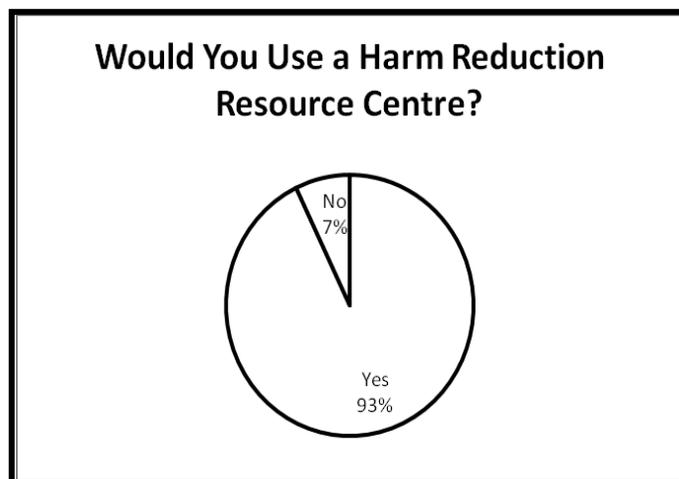
Folks were also invited to write responses to written questions on paper table cloths. The responses are below in **PART III**.



PART I: Interview Questions, Initial Findings

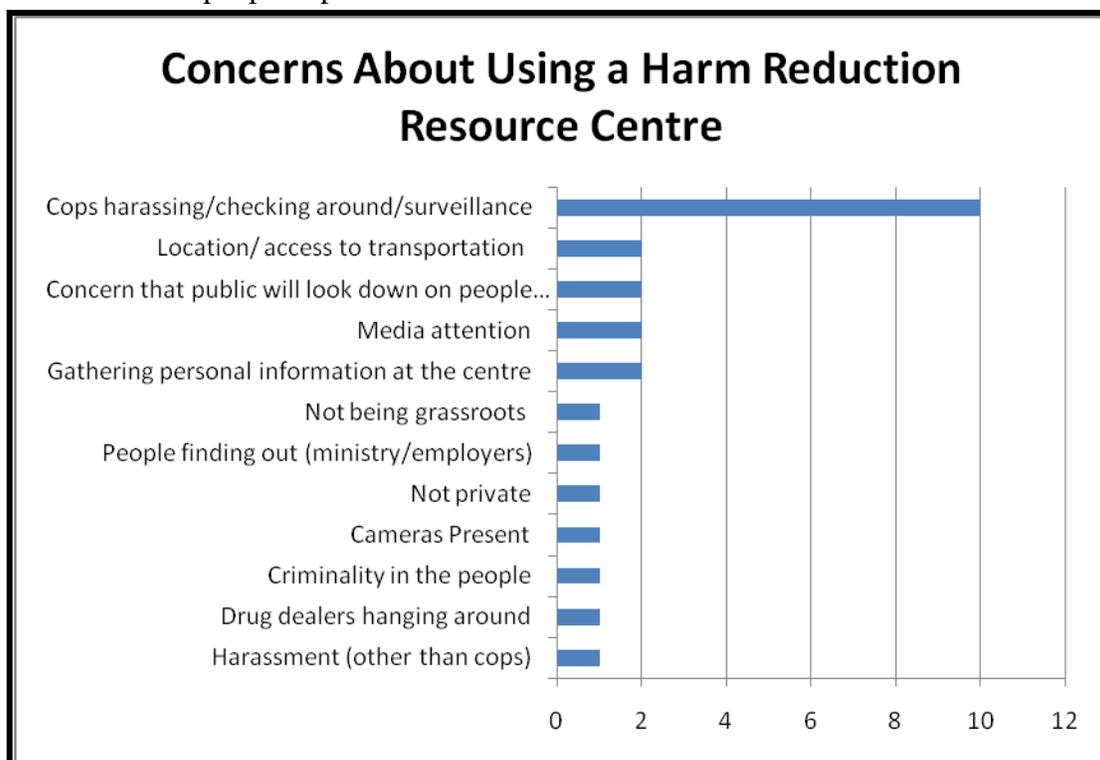
Question 1: Would you use a harm reduction resource centre?

- 26 out of the 28 people interviewed responded “yes” to the question when asked if they would use a harm reduction resource centre.
- The 2 respondents who said they wouldn’t use a harm reduction resource centre said that 1) they didn’t use hard drugs & 2) they had a home. *“No, because I have a home. That’s the point.”*



Question 2: What would keep you from using a harm reduction resource centre (do you have any concerns about going to a place like that)?

- 5 people reported that they would have **NO concerns** with using a harm reduction resource centre in Victoria.
- 23 out of 28 people reported concerns that are summarized in this chart:



Question 2 (CONTINUED):

The concerns about using a harm reduction resource centre can be divided into 3 themes (overlapping themes): police involvement/safety, surveillance/privacy issues and concerns around the development of the centre.

Theme 1: Police Involvement/Safety- Biggest Concern!!!

- Cops harassing/checking around/surveillance (10)
- Harassment (other than from cops) (1)
- Drug dealers hanging around (1)
- Problems with criminality in the people (1)

Theme 2: Surveillance/Privacy Issues

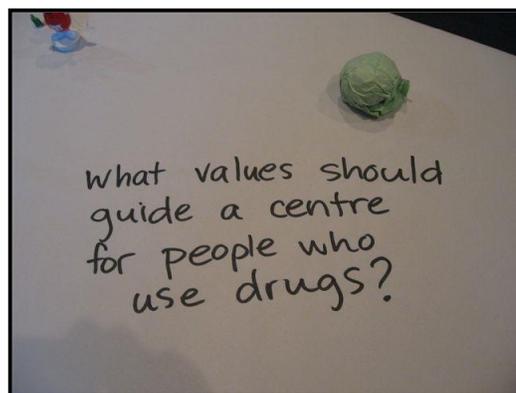
- Gathering personal information at the centre (2)
- Media attention (2)
- Concern that public will look down on people that use/stigma (2)
- Cameras (1)
- Not private (1)
- People finding out about who uses the services (ministry/employers) (1)

Theme 3: Development of the Centre

- Being another government service, not being grassroots (or having involvement of past/present drug users) (1)
- Location/ access to transportation to the centre (2)

Question 3: What services should be offered at a harm reduction resource centre?

- Space for safe consumption (14)
- Medical staff (nurses) and healthcare (i.e. testing or foot care) (13)
- Quite space and privacy, place to relax, sleeping area (9)
- Councillors for support, counselling for those who want to quit and information on detox (9)
- Clean supplies (8)
- Up to date information on bad dope (including peer education), how to taste difference, how to use drugs safely and OD'ing (8)
- Open 24/7 (7)
- Clean environment (5)
- Confidentiality, honesty, integrity and trust (3)
- Security (3)
- Testing for bad dope (2)
- Safety (2)
- Non-judgemental support (3)
- Open for housed and un-housed (2)
- Lockers (2)
- Place for animals (2)
- Food/drink (2)
- Blankets/clothes (1)
- Warm and welcoming (1)
- Services that are available to everyone else in the community (1)



- Doesn't look like a jail (1)
- People working have time to listen (1)
- No police involvement (1)
- Pain management (1)
- Place to do activities (1)
- Information on rights (1)
- Washrooms (1)
- Support group (1)
- People who are working know when to call medical professionals or 911 (1)
- Scales for dosage and weighing (1)
- Indoor tobacco and smoking room (1)
- Open hours of old needle exchange (1)

Question 4: Does it matter where a place like this should be in Victoria? Any ideas where would be best?

- On transportation routes, central Victoria, downtown core (13)
- Away from schools (5)
- More than one location, rotate (4)
- Close to facilities for homeless, where drug users are (4)
- Away from residential (3)
- Rock Bay outer limit, lots of stuff moving towards Rock Bay (2)
- Not in downtown (1)
- Out in the boonies (1)
- Concern about creating a crime hub around centre (1)

- Not right where all the traffic is (1)
- In a high rise- regulate people coming in (1)
- Doesn't matter if it is by a school/residential if it is run properly (1)

Question 5: How should people be involved in this project? Eg. People who use drugs? Non-drug users? What should the membership criteria be/who gets to vote?

- People who use drugs, people who are former drug users, people with experience should be involved (20)
- People who understand us, committed to help (10)
- Nurses/medical staff/health professionals (7)
- Anyone who wants to be involved, inclusive space, mix of drug users/non-drug users (8)
- Past/present drug users make up the board (5), Only people who use/used drugs vote (2), peer-run (2)
- Councillors (4), peer councillors (1)
- Need to recognize the division between drug using community (1)
- People who use drugs need to be straight when they work/no drug dealing at work (1)
- Concern that some people start as allies and turn into superiors (1)
- People who are supporting drug users need to be clear in their role (1)
- Need for people to show up at meetings (1)
- Best person for the job isn't necessarily a person with a degree (1)

PART II: Optional Questions

Optional Question 1: What do you want the public to understand about people who use drugs?

- We're all human, not different from them, drug users used to be non-drug users (6)
- Everyone has faults, goes through ups and downs (2)
- Don't judge me
- They're no better than us
- Need to understand us and our history (why people use drugs)
- Welfare and drug use don't necessarily go hand in hand
- Not all drug users are bad people
- Varying lifestyles of drug users
- Society fights symptoms not cause
- When people OD or die because of drugs, the public needs more information so they don't make assumptions about the person who uses drugs (i.e. if the death was caused by bad dope)
- Bleeding hearts/sympathy for drug users doesn't work, people care about money
- Addiction is a health issue
- Economic benefits of treating as healthcare instead of enforcement
- Many people are one paycheck away from homelessness
- People do drugs because of their inside fears
- People who use drugs are not going away, better to provide supervised consumption rather than unsupervised (needless death)
- Can't use drugs at home because don't have a home

Optional Question 2: what kinds of barriers do you face in getting the support you need as a person who uses drugs?

- Stigma (2)
- Accessibility, transportation (2)
- Not being sure what to tell people
- “Addiction doesn’t sleep”
- Being pushed away from businesses

Optional Question 3: Do you face negative attitudes, discrimination, mistreatment, etc. because you use drugs?

- “This is a big one...everyone needs to know there are reasons to use drugs Peer education is really important courses are really useful. You are a whole person not just that part. Have time to sit with a support worker is important”
- Yes, look down and perceived as weak willed
- No

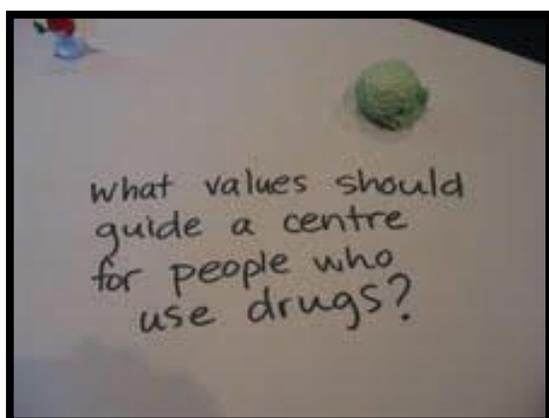


PART III: Quotes from Tables and Interviews

Table Question 1: What do you want people to know about drug users?

- “Quit busting and give us a better solution”
- “Quit busting and help us out instead of throwing us in jail”
- “Smoke a doob scoob- you never know how much it helps you”
- “Understand, no judgment”
- “When we keep our minds busy. Like art. Extra busy and hours later realize we did not do drugs. We enjoy that time. That becomes a habit & when I love something more than drugs. I end up cheating on drugs too”
- “That all users are extremely intelligent. And were often not challenged in school. So often are extremely abused. But we also (?) something to challenge our mind. Then we find drugs. That starts the wind down. Remember when you have extremely challenged children. Take time to help them (?) that craving for more knowledge. Cause they too can be not realizing the habit. (?) of drugs when. They find it and enjoy the knowledge craving mind find a temporary solution. That’s when it all starts.”

Table Question 2: What values should guide a centre for people who use drugs?



- “Honesty, integrity, healthy atmosphere” *
- “Integrity, honesty, healthy clean atmosphere” *
- “Don’t think small on an honourable cause” *
- “Easy access to counsellors and rehab. Every counselling centre I go to is always too busy. Or referrals to doctors taking new patients or things like that.” *
- “To be open 24/7, having a worker on who have time, not judge, listen, coffee/tea, food blankets, clothes, not make it look like a jail” *

Table Question 3: How should a centre for drug users be run?

- “Obviously, wouldn’t the (gov?) end locals, prefer to know where all the users are at one time and not worry about paraphernalia being in their back yards and parks”
- “Besides drug users would rather we are all together and out of site of people who would rather not see us. The shooting range in (Jan?) works well for all those reasons. Not only people do not have to find dead bodies as often and an O.D. is usually seen before they O.D. And O.D. will often set a person straight”
- “Plus people do not need to do stupid dope simple things like share needles which spreads to non-users and babies who mingle with other innocent people and children as they are innocent and unending themselves when all the supplies is offered all the time in one spot”

Table Question 4: What should be included in a harm reduction program?

- “Pain management” *
- “I want awesome, peer-run, supervised consumption site! Let’s do it! XO!” *
- “Beddow= Safe= Lifestyle”
- “People there to keep you safe” *
- “Get the business out of the industry needs to be off the street, old days you knew which bar to go to for drugs, now on the street .don’t know what you get. street nurses should be there, place to relax like a living room place for people to sleep too.” (included in counts above) *
- Counselling to help people with issues, a crisis or just to talk. counsellors 1.need official training 2.street credibility 3.consumer past or present. Society has to buy the place,can’t rent it because the owner will be harassed. ‘tis a responsible community service” should have user friendly options ther , like option for looking at the options in the future. education upgrading.. could be self generating income. community doesn’t want to see the street stuff. Time has to be 24/7 “addction doesn’t care what time it is” *
- “HOURS old time needle exchange hours late afternoon evening” *
- Certain number of hours to start is realistic. Get supplies during the day night for safe injection” *

- “Somebody watching over you” for health problems OD violence properly run with rules. needs ot be safe, respectful people follow the rules everyone do it eothout being harassed.have privacy need to be safe sit down sort of AVI friendly, relaxing *

Table Question 5: Would you go to a safe consumption site?

- “Yes! Warm and welcome, like my living room” *
- “Dinner was great. Thanks so much. All the best to you all in 2011. Everyone be safe!”

Other Comments: Where should the site be located?

- Out in the boonies “if you build it they will come” *
- Peer involvement on the board *
- “I know what my peers need cause they are the same as what I would need” *
- Everybody who wants to anyone who needs to get things for friends could come People who are non users can be helpers *Make sure there are resources for people who want to get clean are available got to be 100% sure but have interview and intake right there. *

*Comments included into counts above

