

# Highlighting the Role of Peers in the Overdose Crisis:

## A Participatory Evaluation of Phase Three of the Overdose Prevention and Education Network

### Executive Summary

The participatory evaluation of phase three of CAI's Overdose Prevention and Education Network (OPEN), was guided and led by an Evaluation Steering Committee comprised of peers<sup>1</sup> and service providers representing OPEN-funded communities, and CAI staff. The objectives of the evaluation were two-fold: to explore the impact of the OPEN project's focus on peer engagement and community overdose response efforts, and to build the capacity of peers within the OPEN network in participatory evaluation approaches and methods. Findings highlight the integral role that peer engagement and support plays in community overdose response, harm reduction, and peers' own healing journeys. An overarching theme throughout the evaluation was peers' interest in fostering connections and networks, building community, and creating a sense of belonging and acceptance. This is in line with public health research evidence regarding inclusive definitions of health and wellness, which doesn't require abstinence, and focuses on connection.

Other findings include the following:

- **Capacity Development:** OPEN plays an important role in expanding and encouraging peer capacity development, engagement and opportunities to earn income. Of 28 peers interviewed, 57% have been working in their role as a peer through OPEN-funded projects, for a year or less, suggesting that funded groups might be building momentum in terms of engaging and supporting peers in roles related to overdose prevention, response and harm reduction.
- **Support for Healing:** OPEN's focus on peer engagement allows grantees to find ways to connect hard-to-reach people who use substances with supports, harm reduction supplies, and life-saving naloxone through peer workers, while also supporting the healing journeys of those same peer workers. Peer work gives people the opportunity to connect with others, practice empathy, and learn self-value, including a more positive outlook on life and self, and promotes improvements in mental and physical health. Building connections, fostering trust in the community and giving back is an important part of peers' healing journey as it pulls people out of isolation and helps them work through shame. This is a significant finding, given the relatively small funding outlay (\$20-\$40,000 per community group) of this granting stream.
- **Essential Component of Harm Reduction:** Peers and allies are unanimous in identifying the essential role of peers in harm reduction and overdose prevention. Peers are engaged and leading

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<sup>1</sup> Peers are people with lived experience of substance use who are often engaged as experts, and use their lived experience to inform effective health service programming and delivery. BC Centre for Disease Control, <http://www.bccdc.ca/our-services/programs/peer-engagement> accessed Jan 29th, 2020.

a wide range of harm reduction and overdose prevention work, including giving out harm reduction supplies and practices, sharing information, outreach, referrals, peer support and navigation, naloxone training, distributing naloxone kits, connecting people with overdose prevention sites, mentoring, and drug checking. Peers cited the ability to foster trust and be accessible for people to relate to, as a primary reason their personal experience helps them in their role as peers. Peers also described the need for strong communication and listening skills and for an ability to approach the work with compassion, understanding and empathy and open-minded acceptance of others.

- **Unrecognized and Unsupported Work:** Despite collectively engaging in many aspects of the province's overdose response from front-line service provision, to community level engagement and education, to systems-level advocacy, peers largely feel underappreciated and unacknowledged for the work that they do. Community allies too, cited the huge burden of unrecognized and unsupported work that peers do in reaching out to friends and peers to provide harm reduction and keeping them alive while they're using.
- **Barriers to Meaningful Participation:** Peers face a variety of barriers which limit their ability to participate meaningfully and create positive change. The most significant barrier cited by peers was the stigma encountered in a variety of ways at various levels. They most often felt stigmatized in their interactions with health care professionals, bureaucrats, politicians and police / RCMP. In addition, many peers interviewed are in volunteer positions (9/28). Peers and allies would like to see more funding directed towards their wages, including expansion of paid employment to be able to train more people and hire more peers.

This evaluation provides first-person evidence regarding the burden of work that peers are leading in reducing harm and preventing overdoses, while also contextualizing the valuable experience and skill set that peers bring to the province's overdose response. While OPEN's focus on peer engagement has helped expand opportunities for peers to build their capacity and earn income, this report also identifies the many barriers and challenges peers face in leading this essential work.

## Calls to Action

1. Acknowledge the valuable experience and skill set that peers have in overdose prevention, response and harm reduction, and their integral role in the province's overdose response, by:
  - a. Prioritizing meaningful peer engagement and support within the province's overdose response strategy and related initiatives, including ensuring robust representation of a diversity of peer voices at all decision-making tables.
  - b. Financially support initiatives that foster social inclusion and help peers build connections, network, and create community.

2. Expand and fund paid peer worker positions within NGOs in a sustainable, ongoing and continuous way in order to incorporate paid peer positions into the structural framework of community-based organizations.
  - a. Improve peer access to trauma-informed and culturally safe services and supports, including trauma and grief counselling.
3. Support the adoption of organizational / institutional stigma auditing processes and standards of inclusive practice by all overdose response stakeholders to ensure that services and supports for people who use drugs are trauma-informed, culturally safe, and free from stigma.
4. Decriminalize drug use and provide a regulated, safe supply of drugs.