

WRHA Population and Public Health
 Healthy Sexuality and Harm Reduction (HSHR)
 Program Monitoring Report: January 1 – December 31, 2017

1. Harm reduction supplies distributed and recovered

	2017 Current Year	2016 Previous Year	Year-to-year Change
Needles Distributed	1,640,982	1,254,597	+ 31%
Needles Collected	623,141 [#]	648,581 [*]	- 4%
Safer Crack Use Kits Distributed	53,625	33,389 [^]	+ 61%

[#] To address concerns on needle/syringe disposal HSHR developed a sticker with easy to follow instructions for distribution through supply distribution partners.

^{*} A recent survey of clients suggests that large volumes of needles are being distributed to networks outside of Winnipeg, and/or disposed in secure containers in the municipal trash. This explains how the widened gap between distribution and collection has NOT resulted in a rise in needles discarded in the community.

[^] While the number of Safer Crack Use Kits distributed has remained stable for the last few years, this year we saw a significant increase in demand/supply. We noticed an increased demand of SCUK for the main or sole purpose of accessing screens for cannabis use.

2. Naloxone kits distributed and used

Street Connections piloted the province’s first take-home naloxone program in 2016 completely supported by HSHR budget and human resources. In January of 2017, Manitoba Health, Seniors and Active Living launched a provincial take-home naloxone program, of which Street Connections/HSHR became a site. HSHR was the most active site in the province for 2017, distributing nearly half of all the take-home naloxone kits in the province. For details on other sites and overdose events in which take-home naloxone kits were used, see Manitoba Health Seniors and Active Living reports.

	2017	2016
Total number of naloxone kits distributed	523	250
First (initial) kits distributed	386	191
Kits used in overdose events	69	32
Lost kits	44	20
Stolen kit	17	6
Other	0	1 (kit given away)
Confiscated	4	0
Expired	3	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	
2017 (current year)	119	117	117	109	88	4
2016 (previous year)	158	155	149	94	134	4

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

	Syphilis	HIV	GC/CT/HCV/HBV	TOTAL
2017 (current year)	14	3	249	266
2016 (previous year)	13	7	240	260

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

76 POC tests were administered, with two reactive tests. This results in a percent-positivity of 2.6%. This is 13 times higher than the estimated population prevalence of 0.2%.

In 2016, 127 POC test were administered, with three reactive tests (2.4%).

5. ‘Opened’ contacts per infection

2406 contacts were pursued by HSHR in 2017, 447 less than in 2016. 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.

	HIV	Syphilis	Hepatitis C	Gonorrhea	Chlamydia	Chl/GC	Other*	TOTAL
2017	139	224	61	526	1132	300	24	2406
2016	129	268	38	534	1610	255	19	2853

* ‘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 2017, the total was 220 episodes of care.

7. Pregnancy tests completed

13 pregnancy tests were conducted. In 2016, the total was 37 tests. Prenatal blood tests are included in ‘Other’ serology tests (see indicator 3, above).

8. Group education sessions and attendance

HSHR staff (outreach workers and PHNs) animated 44 groups—to university groups, residential facilities, youth centres, etc.—and reached 1103 participants. In 2016, the total was 44 groups, with 743 participants.

9. Community development, advocacy, and partnerships activity –

This year, HSHR:

- Organized and presented [Drug and Overdose Matters](#), a conference on harm reduction services, current policies in current local and national context.
- Continue to enhance harm reduction supply distribution through over 15 community groups.
- HSHR staff also participate 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.
- Participated in a number of community and intersectoral consultations.
- Conducted weekly Naloxone training at Main Street Project.
- 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 [Klinik](#).
- Funded a sexual health program for the Afro-Francophone community at [SERC](#).
- Funded the exploration and development of a new '[Bad Date](#)' system in collaboration with [Sex Workers of Winnipeg Action Coalition](#) (SWWAC)
- Funded the development of a Truth and Reconciliation Toolkit at [Manitoba Harm Reduction Network](#).
- Funded the assessment and discussion on improved STBBI testing at [Nine Circles Community Health Centre](#)
- 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](#)

10. Website views

In 2017, the [StreetConnections.ca](#) website received 40,185 page views by 12,085 unique visitors. These represent increases in both categories (145% and 137%, respectively) over 2016. The 'Overdose' page alone received 4,757 page views by 3,572 unique visitors. These represent increases in both categories (193% and 177%, respectively) over 2016.

In 2017, [Syphilismb.com](#) received 926 page views by 639 unique visitors. When compared to 2016, there was a decrease in usage to this site.

In 2017, there was a significant decrease in usage of the [GetSomeCondoms.com](#) website. The site received 2,733 pageviews, down from 35,956 in 2016. Larger number of visits to the interactive condom map in 2016 was attributed to more assertive promotion in the campaign.

11. Health Communication and Social marketing

Over the years, HSHR has launched health communication campaigns on STI awareness and condom promotion (e.g., 'Condoms Are Always in Style,' 'Protect Yourself From What You Can't See,' 'heads up?!'). Evaluation of these campaigns has shown that those in the target audience remember the campaigns, knew where to find safer sex resources in Winnipeg, and found the campaign messages de-stigmatizing.

In 2017, HSHR was not able to keep up with social marketing campaigns messaging for priority populations. This was due to the increased demand in harm reduction supplies, mostly needles (see item 1).