



SisterSpace

SHARED USING ROOMS

WOMEN-ONLY OVERDOSE PREVENTION SITE

Three-Month Developmental Evaluation

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SisterSpace is run by Atira Women's Resource Society, in partnership with Vancouver Coastal Health, the City of Vancouver, BC Housing, BC Women's Hospital, and the Provincial Health Services Authority.



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Abbreviations used in this report

OPS: Overdose prevention site
VCH: Vancouver Coastal Health
DTES: Downtown Eastside

In addition, the terms “peer support worker” and “peer” are used interchangeably throughout this report.



Executive Summary

SisterSpace is the first and only women-only overdose prevention site in Canada. The program provides women who use substances with a safe and supportive environment where they can use substances in the presence of peer support workers who are trained in overdose response. To describe program activities and report on early impacts, a three-month developmental evaluation was conducted. The evaluation began as soon as SisterSpace opened in May, 2017.

As an integrative program, women who visit SisterSpace are able to access other support in addition to harm reduction, including snacks, referrals to other programs and services, and access to housing. A nurse practitioner and a fentanyl testing kit will become available on site in late August. In the interest of creating a safe and accessible program for women who use substances, gender responsive and trauma informed principles guided the development and implementation of the program.

Overall, the evaluation has identified three key findings:

- SisterSpace is a safe and accessible program for women who are highly marginalized and under-served.
- The peer support worker model is essential to SisterSpace's ability to provide a safe space.
- Integrated services are a way to increase the impact of the program.

In light of these findings, five next steps are recommended:

- Explore changing or expanding hours to better meet the needs of women who do sex work.
- Target outreach efforts to women with heightened safety concerns.
- Invest in the skills and well-being of peer support workers.
- Continue to focus on building relationships, as described in the gender-responsive and trauma-informed principles.
- Continue to operate as an integrated program that provides other services in addition to harm reduction.

Over the first three months, 115 women visited SisterSpace a total of 1,073 times. The peer support workers managed five overdoses and there were no overdose deaths. Over 30 referrals were made to other services including emergency shelters, housing support, medical care, dental care, legal aid, take-home naloxone programs, substance use treatment and detox programs. Women also benefited from SisterSpace by receiving social and emotional support and by finding physical and emotional safety.

The peer support workers are all current or former substance users and most of them also live in the Downtown Eastside. Their shared experience with the women who use SisterSpace makes them passionate about the work they do and also increases their resilience for the stress of front-line work. Having a job that is meaningful to them has also helped some peer support workers cope with negative experiences in their personal lives.

Program Overview

Program Background

SisterSpace, the world's first women-only, community-accessible overdose prevention site, opened on May 16th, 2017 in Vancouver's Downtown Eastside (DTES). The program is run by Atira Women's Resource Society, in partnership with Vancouver Coastal Health (VCH), the City of Vancouver, B.C. Housing, B.C. Women's Hospital, and the Provincial Health Services Authority.

SisterSpace provides women who use substances with a safe and supportive environment where they can use substances in the presence of peer support workers who are trained in overdose response. The peer support workers are also able to answer questions about safer substance use practices and make referrals to other services in the DTES. Other resources available at SisterSpace include snacks, harm reduction supplies and connections with Atira housing outreach workers. SisterSpace is a trans-inclusive program and trans women, genderqueer women, and non-binary people who are significantly femme-identified are welcome.

SisterSpace is open from 6am-12pm and then again from 6pm-12am. These hours were chosen to fill gaps in existing services in the neighbourhood. SisterSpace is the only OPS in Vancouver that is regularly open before 7am and after 11pm. It is also open earlier than any other women-only program in the neighbourhood.

The space is located at 135 Dunlevy, which is attached to a women's only housing residence called Sereena's, also run by Atira. The newly renovated site can accommodate up to 15 women at a time. It consists of a main room where women can use substances, a kitchen and a nurse's office. A bathroom is also available on site. The main room is furnished and decorated with the intention of creating a 'living room' atmosphere where women can feel comfortable and welcome. Air-purifying plants have been placed around the space and a colourful mural was added to one of the walls.



Program Objectives

- To provide space for women to use substances under the supervision of staff and peers trained to intervene in overdose
- To improve the overall health of women who use substances
- To reduce the harm associated with illicit drug use (e.g. crime, discarded needles, public drug use) that affects communities
- To increase appropriate use of health and social services by women who use substances
- To reduce health, social, legal and incarceration costs associated with drug use
- To create opportunities to work with women who use substances to facilitate stabilizing their lives



SisterSpace in Context

SisterSpace opened in response to BC's ongoing overdose crisis. Since the overdose crisis was declared by public health officials in April 2016, overdose rates have remained high (1). The most recent statistics come from June 2017, when 111 people died from an overdose across BC, which is an increase of 61% from the number of overdose deaths in June 2016 (2). From January 1 to July 31 this year, 4,983 people presented to VCH emergency departments for an illicit or unknown drug overdose, the majority of who were from Vancouver City Centre and the DTES (3).

OPS are one of the main strategies to address the overdose crisis. Their primary purpose is to provide a space where people can use substances in the presence of others who are trained in overdose intervention. As of March 2017, there were 20 OPS in BC and none of them have ever had an overdose death (4). There are five OPS in Vancouver, of which SisterSpace is the newest (3). SisterSpace is also the only women-only site in Canada.

What is the difference between safe injection sites (SIS), overdose prevention sites (OPS), and consumption rooms (CR)?

All three are spaces that allow people to use substances with the goal of reducing the risk of overdose death. The BC Ministry of Health defines them as follows:

- SIS are permanent services that have been approved by Health Canada and are exempted from Section 56 of the Controlled Drugs and Substances Act, which is why it is not illegal to possess illicit substances in the site (5). Insite, which opened in 2003, is the only SIS in the DTES. Recently, a new SIS was approved for the neighbourhood at the Powell Street Getaway, and two were approved in Surrey (3).
- OPS are temporary services meant to support other services during the overdose crisis (5). Their structure and function vary depending on local needs and resources, and they often have a less medicalized

environment than SIS, which may increase their accessibility for many groups affected by the overdose crisis (6). Since December 2016, six OPS have opened in Vancouver, and five of them are still operating (3). SisterSpace is the newest of these sites.

- A CR is a designated space for substance use, often in a shelter, hotel, or other residential building. These rooms are not operated in partnership with a regional health authority, and therefore do not have as many resources as an OPS or SIS (5).

Evaluation Approach

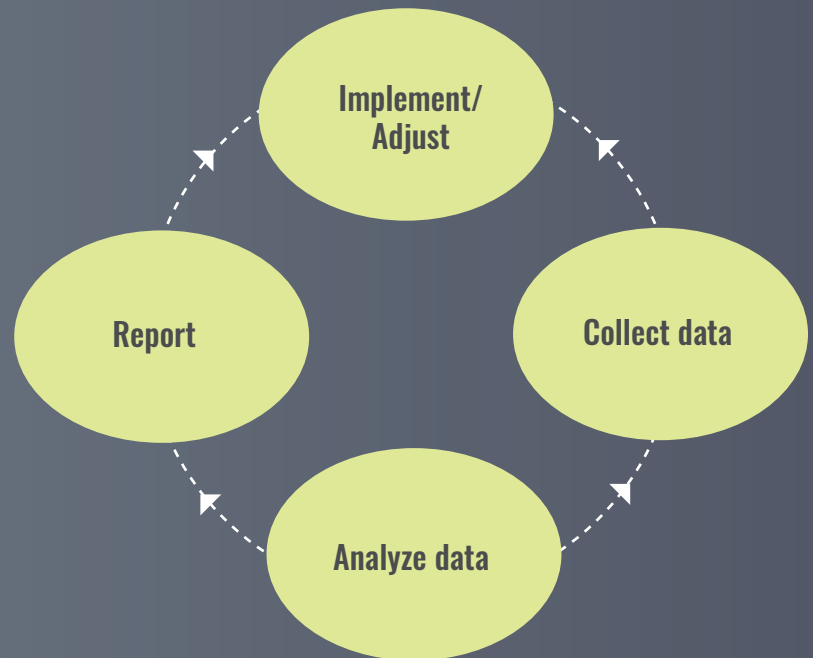
Evaluation Goals

The evaluation took place over three months, with data collection occurring between May 16th and August 11th. As a developmental evaluation, data collection, analysis and reporting were done in three monthly cycles. This iterative process allowed the evaluation to adapt to changes in the program and social context as they occurred. It also provided an opportunity for the evaluation to inform program development.

Two previous reports have been written as part of this evaluation: an update for the month of May and an update for June. Both these reports are available on the Atira website.

The evaluation has three central questions:

1. How has the program evolved over the first three months?
2. What is the impact of the program at the individual and program level?
3. What have we learned about promising strategies for women-only overdose prevention sites?



What is developmental evaluation?

This evaluation approach is called developmental evaluation. Developmental evaluation differs from traditional evaluation because it occurs in tandem with the early stages of program delivery, rather than after program delivery has been established (7). This approach is useful for informing the development of innovative programs, which might not be able to model themselves after existing initiatives. This is the case for SisterSpace, which is the first program of its kind in the world. Developmental evaluation also lends itself well to programs that exist in changing social contexts. As other services and programs develop, research is published, new opioids become available, and policies change, the context of the work being done in SisterSpace evolves. By taking a developmental approach, the evaluation will be able to adjust accordingly.

Data Collection and Analysis

To answer the evaluation questions, quantitative and qualitative data were collected. Data sources include:

- Data collection forms
- A focus group with the peer support workers
- Surveys with women who use SisterSpace services
- Observation of daily activities in SisterSpace, staff meetings and staff training
- Peer support worker log book

Quantitative data were analyzed using descriptive statistics and qualitative data were analyzed iteratively using a grounded theory approach.

Evolution of the evaluation and participation of SisterSpace peer support workers

The evaluation plan was adapted over the course of the evaluation to address emerging issues and to incorporate the input of the peer support workers.

For example, the original data collection forms, which are provided by VCH, only collect information related to substance use and overdose response. The peer support workers suggested that an additional data collection form be developed to collect information about other services provided at SisterSpace. This form was developed by the researcher and incorporated into the data collection plan.

As another example, Atira became interested in outreach activities to promote SisterSpace in the community, so a question about strategies for engagement was added to the surveys conducted with women who use SisterSpace services. The peer support workers also contributed to these surveys by reviewing the questions developed by the researcher.



“ SisterSpace makes women feel safe by providing a clean, comfortable space run by women, for only women. ”

A peer support worker

Program Activities

SisterSpace by the numbers

How many visits to SisterSpace were there during the first three months?

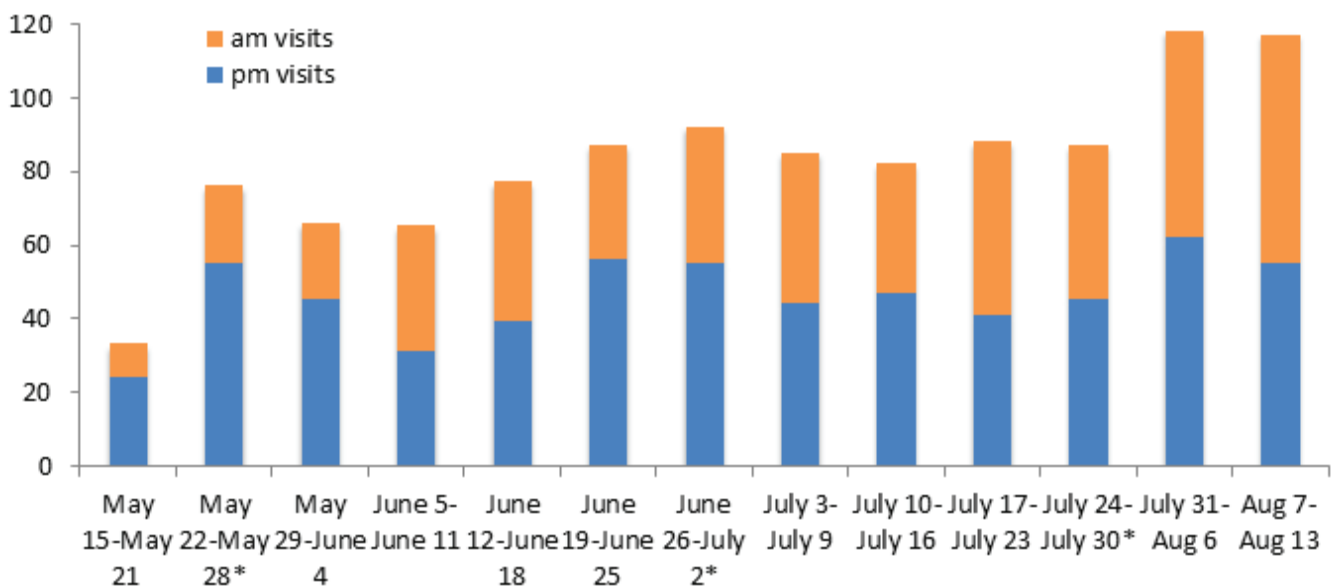
Figure 1 shows the distribution of visits per week throughout the data collection period. There were a total of 1,073 visits to SisterSpace by women who used substances during their visit. This number does not include women who visited SisterSpace for reasons other than substance use, like accessing harm reduction supplies or referrals.

In general, the number of weekly visits has been rising since SisterSpace opened in mid-May. Between July 1 and August 13, the average number of visits per day

was 13.6, which is a 22.5% increase from the average number of visits per day in June (11.1). There was an even more significant increase in the last two weeks of data collection, possibly because of new outreach efforts to raise women’s awareness of SisterSpace.

Previous research has shown that overdose rates are significantly higher during the weeks when BC Income Assistance cheques are distributed, known as cheque week (8). In Figure 1, the cheque weeks are highlighted with an asterix. There appears to be a small increase in SisterSpace visits during these weeks for May and June, but not in July. Cheque distribution has not had a significant effect on the number of visits to SisterSpace during the first three months.

Figure 1.0 Number of weekly visits to SisterSpace over the first three months



How many women registered at SisterSpace during the first three months?

Since opening in mid-May, 115 women have registered at SisterSpace. This means that over the first three months, the average woman has visited SisterSpace 9.3 times, or roughly three times a month.

102 of the women who registered at SisterSpace during the first three months provided their date of birth when they registered (89%). Of these women, 69% are between 30 and 49 years of age.

What hours do women come?

Figure 2 shows the distribution of visits to SisterSpace by time for July and August. Data from May and June is excluded in this analysis because the ratio of morning to evening visits shifted in the second half of data collection, as shown in Figure 1.

There is a dip in the number of visits for the last hour of both the morning and evening shifts because peer support workers stop seating new women around a half hour before closing. This ensures that everyone has enough time to use before SisterSpace closes.

Mornings are busiest during the first half of the shift, with a dip in visits from around 9:00 until closing. Some women who do sex work have told the peer support workers that they value how early SisterSpace is open because they like to use substances before going on dates with men who are on their way to work. SisterSpace is the only OPS that is regularly open before 7:00am.

Women come fairly consistently in the evening, with a peak in visits from 22:00-22:59. It is unclear whether that peak would continue into the night if SisterSpace were open longer.

Figure 2.0 Number of visits by hour in July and August

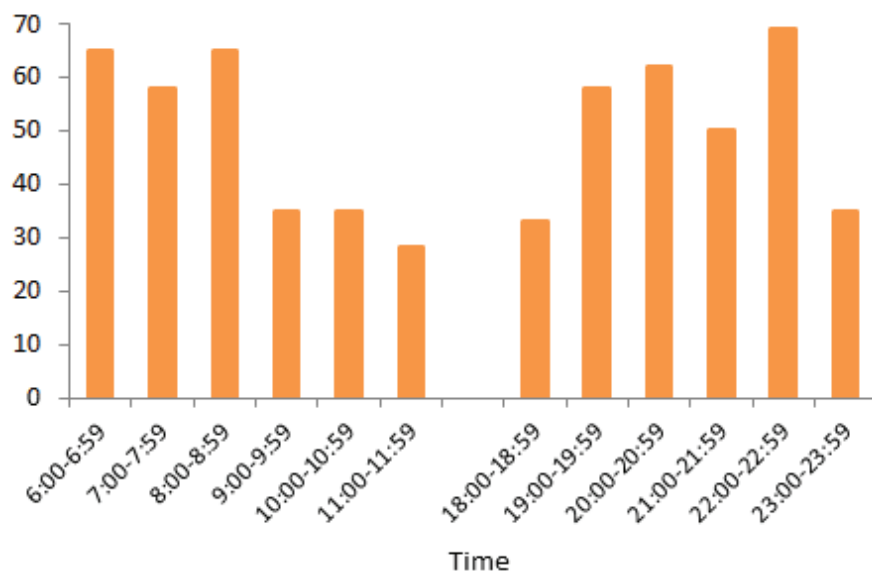
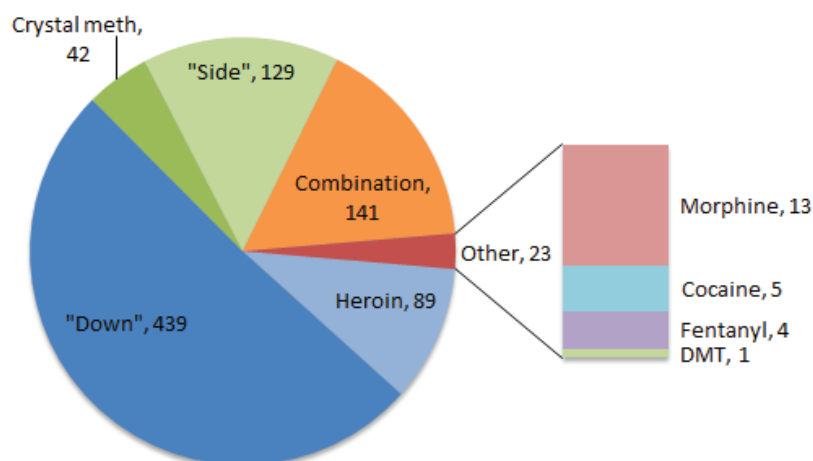


Figure 3.0 Substances used in SisterSpace



What substances do women use in SisterSpace?


In June, new data collection forms were developed by VCH that collect information about what substance(s) women are using during their visit to SisterSpace. This information was collected for 92% of visits to SisterSpace from June 1 to August 13, and is presented in Figure 3.

"Down" was the most frequently reported substance used in SisterSpace (51%). "Down" is a term that can be used when the substance is some unknown opiate. However, it can also be used as a street name for heroin. It is unclear how many

women who reported using "down" meant it as a synonym for heroin and how many meant it as a term for an unknown opiate. Similarly, "side" can be used to refer to an unknown stimulant, or as a synonym for crystal meth.

Roughly 16% of injections in SisterSpace were a combination of substances. All of these combinations were a mixture of a stimulant and an opiate. The most frequently reported mixture was "down and side" (78%).

Four women reported using fentanyl. However, many more women likely used fentanyl unknowingly, since a large proportion of illicit substances in Vancouver are laced with some amount of the highly toxic opiate (9). All substances used in SisterSpace were injected, although a few women have come into SisterSpace after smoking substances so that they can be monitored by the peer support workers for an adverse reaction.



Services provided

Most women who access SisterSpace use the program as a space to use substances in a safe, controlled and observed environment. However, SisterSpace also provides other services and resources to women. These include:

Responding to overdoses

Four overdoses have occurred in SisterSpace so far, two in June and two in July. Three of the overdoses were opiate overdoses and one was a stimulant overdose. In response to the opiate overdoses, paramedics were called and two of the women went with paramedics to the hospital. None of the overdoses required naloxone to be administered, as their breathing remained normal. In addition, a SisterSpace peer support worker responded to one off-site overdose. A woman ran into SisterSpace to say that her friend had overdosed in a nearby alley. The peer support worker administered naloxone and paramedics took the woman to the hospital.

Harm reduction supplies

Injecting supplies are available in SisterSpace, including needles, sterile water, cookers, tourniquets, alcohol swabs and vitamin C packets. Condoms

and lubricant are also available. In June, SisterSpace started distributing safer smoking kits, which include a pipe, mouthpiece, screen and push stick.

Phone

Women are able to make local phone calls from a phone in SisterSpace. Several women have used the phone to make or follow up on medical care appointments. One of the peer support workers mentioned that some women do not feel comfortable calling health clinics themselves and so she has called on their behalf at their request.

Looking out for missing women

When women who usually come regularly to SisterSpace stop coming, the peer support workers discuss it at team meetings. If none of the peers know what happened to the woman in question, the program manager is able to file a missing persons' report. During the first three months, one missing persons' report was filed.

Bad date reporting

WISH Drop-in Centre Society, a program that serves women engaged in sex work, has a Bad Date Reporting program where women who have experienced violence while doing sex work can fill out a form explaining what happened, and the description will be posted to warn other women. A woman has come into SisterSpace for help filling out the form. In addition, the program manager regularly posts bad date reports from WISH on the wall in SisterSpace.



Referrals and information about other services

The peer support workers supported women in accessing other services by answering questions and making referrals. Referrals to emergency shelters and housing outreach programs were most common; other referrals included medical and dental care, take-home naloxone programs, substance use treatment, legal aid and women's only spaces like the DTES Women's Centre. In June, an outreach worker from Atira began regularly visiting SisterSpace to answer women's questions about accessing housing as well as government services for people with disabilities.

Snacks

Fruit, cookies and cereal are available for women, as are drinks including tea, coffee and juice. Offering women water has been particularly important in the summer months, as several women have come to SisterSpace feeling dizzy and dehydrated.

Medical care

Many of the women who use SisterSpace services have health issues, but face barriers in accessing healthcare services. The peer support workers have helped several of these women access the care that they need by recognizing their health needs, helping women make appointments, and by referring them to relevant programs. The peer support workers distribute basic first aid supplies to women who need them, including band aids, gauze, medical tape and antiseptic spray. They have also called the BC Centre for Disease Control Outreach Program to get nursing care for a couple women. In late August, a nurse practitioner will begin visiting SisterSpace in the morning three days a week so that women can access medical care on site.

Social interaction and support

While in SisterSpace, women often have conversations with each other and with the peer support workers. Most often, they are light-hearted, friendly conversations about plans for the rest of the day, showing off new clothes, or mutual friends. Other times, women choose to open up about sensitive topics like being bullied on the street, mental wellness, homelessness, family issues, the loss of loved ones and past experiences of violence. These more personal conversations are usually between the women and the peer support workers and the peers respond by listening, being supportive and validating the woman's experiences.

Fentanyl testing

A fentanyl testing machine will become available in SisterSpace in September so that women can choose to test their substances for the presence of fentanyl and use this information to help them reduce their risk of overdose.



Creating a safe space

When designing SisterSpace, staff at Atira were aware that many of the women who would benefit most from the program would have previous experiences of violence. In fact, they became aware of the need for a women-only OPS after some women who access Atira's services said that they have difficulty accessing mixed-gender OPS because

of their need to avoid men who have hurt them or who want to hurt them. Furthermore, research indicates that for women, substance use and experiences of gender-based violence are often interconnected (10, 11). Therefore, any space designed to be used by these women needs to be trauma-informed and gender-responsive.

“ The women-only aspect is important to me. I've been abused and raped in my life and having a place to feel safe and comfortable is important to me. ”

A woman who uses SisterSpace

Gender-responsive principles

To ensure that the program is informed by the influence of gender, SisterSpace (and all of Atira's programs) embrace these principles¹:

- Acknowledging that gender makes a difference.
- Creating an environment based on safety, respect, and dignity, and recognizing that safety is consistency and predictability across time.
- Developing policies, practices, and programs that are relational and promote healthy connections to children, family, significant others and the community.
- Addressing struggles with substance use, trauma, and mental wellness through comprehensive, integrated, and culturally relevant practices.
- Providing women with information and opportunities to improve their socioeconomic conditions.
- Establishing a system of comprehensive and collaborative community partnerships with other services.

Trauma-informed principles

These principles encourage program planners to consider how experiences of trauma influence the safety and accessibility of the program. According to Harris and Fallot (2001), trauma-informed principles of program delivery include:

- Being aware of the impact that trauma has in people's lives.
- Avoiding triggering trauma reactions or re-traumatizing people.
- Adjusting the behaviour of staff to support individuals to cope.
- Allowing survivors to manage their trauma symptoms successfully; this requires giving people options.

These principles have been practically applied in SisterSpace in three main ways:

Using a peer staffing model

SisterSpace staff are peer support workers, meaning that they are women who have a current or previous history of substance use. Previous research has established that a peer model is a useful way to increase the safety and accessibility of services for marginalized populations (11). The peer support workers are required to complete Naloxone training as well as Non-Violent Crisis Intervention training to ensure that they are able to create a safe space. The staffing model used at SisterSpace is discussed further in the next section.

Furniture and layout

To make SisterSpace as low-barrier as possible, women are allowed to use substances in whatever area of the space they feel most comfortable. The furniture is also mobile so women can rearrange it to meet their needs. There are single chairs and screens for women who prefer privacy, and couches or a large table for women who want to socialize. It is common for women to come to SisterSpace in small groups and to sit together while they use substances. Initially, it was thought that the peer support workers would sit at the main table with the women who use SisterSpace's services. However, the peer support workers quickly became aware that many women were uncomfortable with this layout, and decided that it was better for them to have a separate table. Now, the peer support workers sit at a smaller table in the back of SisterSpace, which they think works much better.

Responding to violence or threats of violence from men

There have been a couple violent and/or threatening incidents with men who have partners that access services in SisterSpace. On one occasion, a man broke the glass front door but did not come inside. The peer support workers called police and the man was arrested. A camera has been installed to get a better view of people approaching SisterSpace from the street. In cases of violence or other emergencies, the peer support workers are able to call for backup from the staff at Sereena's.





“ I think it's really important that everyone has a place that they belong. ”
A peer support worker

The staffing model

The peer support workers are women who share lived experience with the women using SisterSpace's services. They are all women who have lived experience with substance use and most of them also live in the DTES. Several of the peers have other experiences in common with the women who use SisterSpace services, including the loss of family and friends to the overdose crisis, accessing substance use therapies, chronic illness and difficulties accessing the healthcare system, homelessness and abusive relationships with male partners. These shared experiences encourage the formation of trusting, respectful and non-judgemental relationships between peer workers and women who use SisterSpace services.

Peer support workers at SisterSpace work in pairs and shifts are typically two or six hours long depending on the needs and preferences of the peers. Before starting at SisterSpace, the peer support workers complete training in overdose response from VCH and non-violent crisis intervention. In addition to this training, several of the peer support workers have

practical experience working as peer support workers at other programs, including other OPS.

In addition to their responsibilities in SisterSpace, peer support workers are required to attend weekly team meetings with the program manager. These meetings are an opportunity for the peer support workers to discuss questions, challenges and suggestions as a group, and get insight and guidance from both the program manager as well as from their fellow peer support workers.

The work is fairly demanding and not all women have been able to commit to it. On a few occasions, women who were hired as peer support workers quit or stopped showing up for shifts. Punctuality has also been an issue, especially for the 6am shift. However, many women from the community have expressed interest in working in SisterSpace, so the program manager has been able to hire new peer support workers. The program manager meets with interested women before hiring them to ensure that they are able to commit to the demands of the work.

SisterSpace guidelines

In the interest of being as accessible as possible, Atira initially designed the program with no rules or guidelines for women's behaviour. However, the peer support workers quickly noticed

that some behaviours were disruptive to the program and that a set of guidelines were necessary to create some structure. The peer support workers brought this up during a team meeting and brainstormed a set of guidelines to address the issues that they were observing. These were presented to Atira management, who approved them. In creating the guidelines, the team ensured that they would create structure without introducing barriers to women's access of the program. The term 'guidelines' is used instead of 'rules' because they are not enforced strictly and there are no consequences for not following them.

“ [Being a peer is] not an imagined sort of understanding of the way the world works. We know the way it works and the way it doesn't work. ”
A peer support worker

After the content of the guidelines were approved, the peer support workers decided on the wording of the guidelines to make sure that they would be clear to the women accessing SisterSpace. They are now posted on the wall in SisterSpace as follows:

- Please sign in when you arrive.
- In order to ensure as many women as possible benefit from SisterSpace, please limit stays to 30 minutes.
- As smoke can be harmful to some women, please smoke outside.
- Please make sure you clean up when done and dispose of all works.
- Unpacking can take up space and make the room less accessible to some women. Please don't unpack¹.
- Please remember to cap needles when walking around SisterSpace.
- Sorry but we don't have space to store belongings. Please take them with you².

¹ Many of the women who access SisterSpace, particularly homeless women, carry several bags around with them. During the first couple weeks, women would sometimes unpack their bags and not clean up. This not only made a mess, but also took up space that other women needed.

² As mentioned above, many women carry bags around with them. Some women have tried to use SisterSpace as a storage locker by leaving their bags behind and coming back a few days later when they needed them.

The time limit is rarely enforced, but was included to encourage women to think about how long they are staying. The peer support workers have noticed that women tend to follow this guideline on their own if they notice that it is busy in the space.

In addition to the guidelines developed by the peer support workers, there are rules from VCH and the BC Ministry of Health that govern the activities in all OPS, including SisterSpace:

- The peer support workers are not permitted to assist women with injections in SisterSpace.
- Women are not permitted to 'pass' each other substances while on site, as this is legally considered drug dealing, even if no money is exchanged.
- No one under the age of sixteen should be allowed to access SisterSpace services. This has not been an issue as no one under the age of 20 has tried to access SisterSpace.



Engagement and Outreach

A key program activity during the first three months was to promote SisterSpace in the community. This was accomplished through media presence, flyers and outreach, and an open house.

Media Presence

There was a press release to announce the opening of SisterSpace that involved announcements on the Atira and VCH websites, news articles in print and online (13-15), and a radio interview (16). In June, another interview was given and published online. The interview describes how SisterSpace has been developing, with a focus on the safety issues that have emerged (17).

Flyers and Outreach

When SisterSpace first opened in May, flyers for the program were posted in Atira buildings in the neighbourhood, and the peer support workers distributed flyers as well. Starting in June, the program manager and peer support workers began doing outreach to increase awareness of SisterSpace. They put up posters and distributed flyers at other OPS, women-only services and single room occupancy hotels in the neighbourhood. They put particular focus on WISH Drop-in Centre Society, which provides services to women involved in street-based sex work and is located around the corner from SisterSpace. WISH staff requested this outreach because they had observed many women use substances while at WISH. This puts women at risk of overdose, because WISH is not able to nor does it want to dilute its primary focus to observe substance use and respond to overdoses like SisterSpace does. By increasing women's awareness of SisterSpace, staff of both programs hope to encourage more women to access SisterSpace.

The open house

An open house was held on June 15th. Women and men from various programs in the DTES stopped by, as did women from the community and several peer support workers. Food was served and the Wildflower Woman of Turtle Island drumming group performed songs and did a smudging.



Program Impact

Impact on women using SisterSpace services


Although the program is still new, SisterSpace has had early impacts on the lives of women that access the program, including:

- Reduced harms associated with substance use
- Receiving social and emotional support
- Finding physical and emotional safety
- More than 30 referrals were made to other services including emergency shelters, housing support, medical care, dental care, legal aid, take-home naloxone programs, substance use treatment and detox programs.
- Peer support workers answered women's questions about how to access programs available to them
- Several women have found new housing after meeting with an Atira housing outreach worker who regularly visits SisterSpace. The program manager has also helped women find housing.
- Women had a snack and or a drink during their visit to SisterSpace over 620 times. Several women have come to SisterSpace with symptoms of dehydration and have been able to rest and rehydrate.
- Several women have accessed medical care because of the suggestions, support and encouragement of the SisterSpace peer support workers.

The first three impacts are discussed in greater detail below.

Reducing harms associated with substance use

During the first three months, 115 women have used substances in SisterSpace 1,073 times. Women have accessed harm reduction supplies in SisterSpace approximately 250 times, including safer injection supplies and safer smoking supplies. Using new, clean supplies is one of the best ways for people who use substances to reduce their risk of infection and vascular damage (18). Many women are able to take their time while injecting substances in SisterSpace because the 30 minute time limit is rarely enforced. The peer support workers have noticed that many women take advantage of this time to inject two smaller doses instead of one large dose, which decreases their risk of overdose. Five overdoses were managed by SisterSpace peer support workers, potentially saving the lives of these women. Finally, several women have accessed substance use treatment programs and detox centers because of the referrals and encouragement of the peer support workers.




USER FRIENDLY


We know our tenants who use drugs value their **SAFETY** and **WELL-BEING**.
So do we.

OUR GOAL
is to provide **every** tenant with
THE BEST TENANCY WE CAN

WE ARE WITH YOU

 **atira**
WOMEN'S RESOURCE SOCIETY

For more info, visit www.atira.bc.ca



“ I love the peacefulness and option of being able to come here and it's a loving environment and its safe, the staff are amazing and like having tons of moms. ”

A woman who uses SisterSpace

Receiving social and emotional support

The survey results indicate that women value the relationship they have with the peer support workers; over half mentioned the peers among the things they liked best about SisterSpace, describing them as “friendly”, “helpful” and “easy to talk to”. While in SisterSpace, women sometimes choose to open up to the peer support workers about sensitive issues they have experienced. During the focus group, the peer support workers suggested that these women aren't necessarily looking for solutions to their problems, but simply want to be heard, and the act of listening contributes to women's emotional and psychological wellbeing: “Sometimes you need to talk. You need to clear the air and get stuff out. You don't necessarily need someone to answer, or have answers... they just need to get it out. Cause then they don't have

to hold responsibility for that all on their own, they've shared it with somebody else so the burden isn't fully upon them. Just being willing to listen, without any judgments, without having to have the answers - I don't think they expect anything else from us. They just want to be heard.”

The peer support workers have also suggested that being heard is empowering for women because it shows them they are worth listening to. The peer support workers described how mainstream society ignores, demonizes and pities addicts, and so simply giving women a space where they can honestly speak about their lives without fear of judgement or misunderstanding actively counteracts the stigma they face. Even simple, surface-level relationships can be impactful, as one peer explained: “We're

slowly learning their names and they're learning ours. And a lot of it goes a long way to remember their names and how they take their coffee in the morning. Very simple things a lot of people take for granted because you're dehumanized down here.”

Women who access SisterSpace also value SisterSpace because they are able to connect and socialize with other women. Several women mentioned “conversation”, “interaction” and “hanging out” among the things they like best about SisterSpace. Women often visit SisterSpace in small groups, sit around a table and socialize while they use substances together. Other times, women come in alone but still interact and socialize with others in the space.

Finding physical and emotional safety

By being a women-only program, SisterSpace provides physical safety. The fact that there have been violent encounters with men suggests that some women are using SisterSpace as a way to get away from men who want to hurt them. On a few occasions, women have come to SisterSpace and asked the peer support workers to close and lock the door. The peer support workers always do so without asking questions. In a survey with eleven women visiting SisterSpace, 80% said that having a women-only injection site was very important to them and a few of them elaborated by saying that they did not always feel safe in male-dominated spaces, which other injection sites tend to be.

Women also report that they find emotional safety in SisterSpace. Of women who completed the survey, 90% said that they feel comfortable in SisterSpace and 100% said that they would recommend SisterSpace to a friend. Several women described SisterSpace as “calming” and “relaxing”, which was a welcome break from the chaos in many of their lives. The social and emotional support from other women and the peer support workers described above was identified as a major factor that contributes to women’s sense of safety in SisterSpace.

What do women say about SisterSpace?

In surveys and comments, the following words were used when describing SisterSpace. The size of the word corresponds to how frequently it was mentioned.



Case Studies

Below are three case studies to illustrate the impacts that SisterSpace has had on women who access the program (all names have been changed):



Helen Housing

Helen is good friends with some of the peer support workers at SisterSpace and was one of the first women to visit SisterSpace when it opened in May. During one visit, she opened up to the peer support workers and told them that she did not feel safe in the single room occupancy hotel where she was living. With the help of the program manager, the peer support workers helped Helen find new housing. Helen continues to visit SisterSpace regularly and updates the peer support workers on how she is doing. She has told them that she feels comfortable where she is living now and that she really appreciates all the work that they do in SisterSpace.



Mara Medical care & emotional support

During one of their shifts in SisterSpace, two peer support workers noticed that a young woman they knew well had a PICC line in her arm. A PICC line is a long catheter inserted into a vein, often for long-term IV antibiotic treatment. When the peers asked her about it, Mara told them that she had been at the hospital getting treatment for endocarditis, but had decided to leave. The peer support workers stressed to Mara that she needed to have the PICC line taken out because it could cause another infection, and that it needed to be taken out by a medical professional. Mara did not want to go back to the hospital, but she gave the peer support workers permission to call the BC Centre for Disease Control Outreach Program, who sent nurses to take the PICC line out. On another occasion, Mara came into SisterSpace in search of emotional support after a traumatic experience. One of the peer support workers on shift that day is especially close with Mara and took the time to sit with her and listen supportively.



Stephanie Feeling safe

Stephanie is a transwoman who comes regularly to SisterSpace. During her visits, she often opens up to the peer support workers about struggles she is dealing with and the peer support workers respond supportively and empathetically. In particular, Stephanie has spoken about the transphobia that she experiences and that she rarely feels safe accessing services because of it. She has told the peer support workers that SisterSpace is one of the few places where she feels safe and is very thankful that the space exists. Joni, another transwoman who uses SisterSpace, echoed this sentiment in a written comment: "As a transgendered woman safety is always my #1 concern in any space hence I feel respected and accepted here - THANK YOU"

Impact on peer support workers

Giving back and making a difference

During training sessions, team meetings, and the focus group, the peer support workers have consistently expressed a passion for the work that is done in SisterSpace. They believe that SisterSpace is an important program that is making a real difference in the lives of women in their community, and they value being able to contribute to it. For example, one peer said during the focus group: “You know, it’s such a blessing to have this place. Like it’s such - I get very emotional because of my history on these streets and... for me, it’s just such a passion to be here and just to be a part of it. To help, to try to do something, to try to help women. Because, there’s just not enough. There’s not enough!”

The peer support workers also talk about their work as “giving back”, which is a way for them to create positivity out of the hardships they have experienced in their lives: “For me I suppose [being a peer] means I get a chance to give back and also use my life experience to inspire and help other women.”

Contributing to resilience

Several peers have reported that their experience with substance use and the DTES increases their resilience to handle the demands of front-line work: “It would take a lot to really flap any one of us down here, ‘cause... we’ve been there done that.” The peers have also reported that they are able to rely on one another to debrief when needed, because they know that their partners have had similar life experience to them. “So I think we’re, we’re getting more comfortable with each other and being able to share a bit more about our own experiences and, and not being even judged by our own peers.” However, a few peer support workers have found their work to be stressful, and at times, overwhelming. When peers have shown signs of stress, the program manager has worked with them to find a workload that is manageable for them.

Working in SisterSpace has also contributed to the peers’ resilience outside of work. A couple of the peer support workers have recently lost loved ones, and another few are currently struggling to manage chronic illnesses. They have shared these hardships during team meetings and have said that having a job that they are passionate about has helped them keep their mind off of negativity.





Key Findings

SisterSpace is a safe and accessible program for women who are highly marginalized and under-served

Many of the women who access SisterSpace have multiple stigmatized and marginalized identities, including women who do sex work, homeless women and transwomen. Women who engage in sex work represent an especially significant portion of the women who visit SisterSpace. The peer support workers have said that the majority of women who regularly visit SisterSpace are engaged in sex work to some extent.

Women who are highly marginalized are more likely to experience gender-based violence and/or threats of violence in their daily lives (10, 11). In fact, Atira became aware of the need for a women-only OPS after some women reported that they avoided using other injection sites because of their need to avoid men who had hurt them or who want to hurt them. In addition, the stigma that these women experience increases the chance that they will face discrimination when they try to access programs, leading some women to avoid using services and creating mistrust between women and service providers (6). Therefore, the fact that women who belong to these groups frequently visit SisterSpace and describe the program as “safe” and “non-judgemental” is especially significant. As one transwoman who also engages in sex work said: “If it’s safe for me, it’s safe for anybody.”

In surveys with women who use SisterSpace services, several women said that they feel safer in SisterSpace

than they do at other OPS. They attributed this safety to the fact the program is women-only, the social and friendly atmosphere, and especially to the peer support workers. One woman summed this up when she said: “The staff are friendly and helpful. I find it nice here. I would rather come here than the other ones because I have a lot of guys after me. I call them my ‘fans and stalkers’”. The importance of a peer model for providing safety is discussed further in the next section.

In addition to stigma, women who engage in sex work face geographical barriers to accessing programs. Studies have found that some women who do sex work need to avoid the physical location of some programs in order to avoid violence or interactions with police (10). The peer support workers report that SisterSpace is located in one of the Vancouver’s major strolls for street-based sex work and women come from across the city to work in the area. When asked why they had chosen to come to SisterSpace, several women said that it was conveniently located for them because they work in the area. Others mentioned that they were on their way to or from WISH, a drop-in centre for women who engage in sex work. Being located in this geographical location therefore increases the accessibility of the program for women who do sex work.



Next steps

1. Explore expanding and or changing the hours to better meet the needs of women who do sex work

A couple of the peer support workers and several women who use SisterSpace services have suggested that the program should be open through the night, because that's when many women who do sex work are in the area and using substances. The fact that SisterSpace is busiest early in the morning and late at night also suggests that more women would access the program if the hours were expanded or changed. When the issue was discussed at a peer team meeting, a few of the peers said that they would be willing to work overnight shifts, but others said that overnight hours would not be possible for them. The impact and feasibility of expanding and or changing SisterSpace's hours should continue to be explored.

2. Target outreach efforts to women with heightened safety concerns

In order to promote their own safety, it is possible that some women become socially isolated and do not use services. If these women use substances, they are at increased risk of overdose death (2). Outreach efforts to increase women's awareness of SisterSpace should consider how to reach women who are isolated and who are not engaged in other programs. Targeting single-room occupancy hotels is one potential strategy. Another strategy could be to partner SisterSpace outreach with programs designed to serve isolated women, like Atira's SheROes program.

The peer support workers have expressed concern that women who do not access other OPS will be unfamiliar with the term "overdose prevention site". On several occasions, women have come into SisterSpace asking if they are allowed to use substances there, because the sign on the door says "Overdose prevention site" and women were unsure what was meant. Most women refer to SisterSpace as a "safe injection site", which is a more familiar term to them. However, all the promotional material, like posters and flyers, refer to SisterSpace exclusively as an OPS. Changing the terminology or adding an explanation might increase the uptake of the program and should be considered.

The peer support worker model is essential to SisterSpace's ability to provide a safe space

In the surveys conducted with women who use SisterSpace services, the peer support workers are mentioned more frequently than any other single topic. The women describe them as "friendly", "non-judgemental", "welcoming" and "helpful", and have said that these positive interactions make them feel comfortable and safe. When asked why they had chosen to visit SisterSpace, several women who had been to SisterSpace before said that they wanted to come back after having a positive experience with the peers in the past.



“I’m very impressed and grateful for stopping by here. Kudos to everyone here.”

A woman who uses SisterSpace

In the focus group, the peer support workers agreed that providing safety and comfort is a central part of the work that they do. They attributed their ability to create a safe space to their shared experience with the women who use SisterSpace services. The peer support workers at SisterSpace are all women who have lived experience with substance use and most of them also live in the DTES. Several of them have other experiences in common with the women who use SisterSpace services too, including the loss of family and friends to the overdose crisis, accessing substance use therapies, chronic illness and difficulties accessing the healthcare system, homelessness and abusive relationships with male partners. These shared experiences allow the peer support workers to form unique relationships with the women who use SisterSpace services that non-peers would not be able to form for several reasons.

First, shared experience allows peers to build relationships based on a sense of community. During the focus group, the peers emphasized that they identify as members of the same community as the women that visit SisterSpace, even if they were no longer active in their addiction: “I’ve been clean 20 years, but I am still an addict. I am no different from them.” Similarly, another peer said, “I think that’s so important too, you know, that we’re not better than them. We’re the same as. Each one that walks through this door.” Comments from women who use SisterSpace services indicate that they pick up on this sense of community and that it makes them feel welcome in the space. One woman said that the peers made her feel “like family.”

Shared experience also allows the peer support workers to empathize with, understand and relate to the women that visit SisterSpace. As one peer said, “For me [being a peer] means that I can have empathy with them. And not sympathy, but empathy... I understand. I’ve been there, you know? I know what you’re feeling.” The fact that women often open up to the peer support workers about sensitive issues and that they describe the peers as “easy to talk to” demonstrates that they do in fact feel understood. The peer support workers have suggested that being able to talk about things in a space where you will be heard is empowering for women because it shows them that they are worth listening to.

Their shared experience also makes the peers passionate about the work they do and motivates them to work hard. This is something that the women notice and have commented on. For example, one woman said, “I think the women here really do care”, and another said, “they give us their all, 110%”.

Finally, shared experience also has practical implications for providing safety. The peer support workers are able to make referrals that are based on personal experience, rather than simply referring women to the nearest program. For example, the peer support workers mentioned specific doctors and dentists that they recommend to women because they have had good experiences there themselves. Getting a referral from someone they trust might help women overcome the mistrust that many of them have for service providers.

Next steps

3. Invest in the skills and well-being of peer support workers

Since safety, and therefore the program's success, depends heavily on the peer support workers, it is important to ensure that they continue to feel passionate and capable in their role. As the peers mentioned in the focus group, the trust they have built with women can be easily lost if they stop putting effort into providing safety. Burn-out is a major concern for front-line workers, so activities to help the peer support workers avoid and manage burn-out will be essential to the sustainability of SisterSpace. Potential strategies include team-building activities, providing training sessions about managing stress and or hiring more peer support workers to reduce the workload of the current team.

4. Continue to focus on building relationships, as described in the gender-responsive and trauma-informed principles

A central tenet of the principles that SisterSpace is based on is that relationships are important for creating safe, accessible, and effective programs. Finding that the peer support workers are central to providing safety is therefore not surprising and further demonstrates the value of implementing these principles.

Integrated services are a way to increase the impact of the program

When SisterSpace first opened, some of the peer support workers were concerned that offering other services in addition to harm reduction services would become a problem. Their main concern was that women who do not use substances would try to access the program for these additional services, making the women that do use substances feel uncomfortable. While this is a legitimate concern, it has not been a major problem in SisterSpace. Adding other services, while still keeping harm reduction and overdose response as the primary objectives of the program, is a model that works. In fact, some of the most important impacts of SisterSpace are not directly related to substance use. For example, SisterSpace has connected several women with housing and medical care, and has provided social connection and support.

Not only does the idea of combining other services into an OPS work, in some cases it can even strengthen the other services that the program provides. For example, the survey responses show that being offered snacks contributes to women's sense of belonging and safety in SisterSpace. Offering snacks has been a great way for the peer support workers to establish rapport with women. Once this rapport is established, the peers can offer other services; there have been several times when women came in for just a snack and ended up leaving with harm reduction supplies or a referral. Furthermore, a couple women have told the peer support workers that they come to SisterSpace to use substances because of the snacks. Therefore, providing snacks has contributed to the overall impact of the program.



However, it is important to note that while other services were added, SisterSpace has always been an OPS first and foremost. This is how the program is labelled and promoted and creating a safe space for substance use is the main focus of the program activities. It is unclear whether the peer support worker's initial worries would have been realised if SisterSpace had shifted its focus to be equally a drop-in program and an OPS.

Next steps

5. Continue to operate as an integrated program that provides other services in addition to harm reduction.

Other services like snacks and housing support contribute to the overall impact of the program and also encourage women to access services related to substance use. However, attention should be placed on the balance between offering a holistic set of services and maintaining a space that primarily serves women who use substances.

Topics of interest for future evaluations

- The influence of seasons and weather on program activities: In the summer months, people are more inclined to use substances outside. But as the weather changes, more women might begin accessing SisterSpace. The peer support workers also suspect that women might have greater physical safety needs when the days are shorter and the nights are longer.
- The impact of new services: In late August and early September, a nurse practitioner will begin regularly visiting SisterSpace and a fentanyl-testing kit will become available to women. Future evaluations could investigate the impact that these programs have for women who use SisterSpace.
- What happens if the hours are expanded and or changed: Future evaluations could investigate how the decision to expand and or change hours is made, the process used to introduce new hours, and new issues that emerge if the hours change.

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3-MONTH DEVELOPMENTAL EVALUATION: How SisterSpace supports women who use substances

115 women have used substances **1,073** times.
Women have accessed safer injecting and smoking supplies **250** times.
5 overdoses were managed, including one woman who had overdosed outside.
There were **0** deaths.

Over **620** snacks and/or drinks were distributed, including fruit, cookies, cereal, water, tea, coffee, and juice.

Several women have used SisterSpace to get away from men who want to hurt them.
90% of women said that they feel comfortable in SisterSpace, and **100%** said that they would recommend SisterSpace to a friend.

Reducing harms associated with substance use

Snacks

Providing physical and emotional safety

Offering social support

Connecting women with other programs

Housing support

Medical care

70% of women mentioned the peer support workers among the things they like best about SisterSpace, describing them as "friendly" and "helpful". Another **45%** mentioned socializing with other women visiting the program.

Over **30** referrals were made to other services including emergency shelters, housing support, medical care, legal aid, take-home naloxone programs, substance use treatment programs and detox programs

In June, an outreach worker from Atira began regularly visiting SisterSpace. Because of her, several women have found **new housing**.

In late August, a **nurse practitioner** started visiting SisterSpace in the morning, three days a week.

SisterSpace is a safe and accessible program for women who are highly marginalized and under-served, like women who do sex work, homeless women, and transwomen

KEY FINDING

1

The peer staffing model is essential to providing safety, because their shared experience allows peers to build relationships that are based on community, empathy, and understanding.

KEY FINDING

2

By integrating other services into an overdose prevention site, SisterSpace has been able to impact women's lives more holistically.

KEY FINDING

3