

2010-  
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# Lack of Youth using Mainline

## Gathering Data While Accessing Targeted Groups

Observations while travelling with Mainline Needle Exchange and the lack of youth participating in the needle exchange. The effect that the new Opiate Treatment Program may be having on the change of numbers in the area.



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To make contact with members of the Injection Drug Use (IDU) community that may possibly have contracted Hepatitis C or are living with Hep C and HIV/AIDS arrangements were made to conduct outreach visits with Mainline Needle Exchange. This allowed NACS staff to gain access to and/or become familiar with this community. Trust is extremely important and a trust level can be achieved through an introduction by a member of the Mainline team.

Mainline Needle Exchange does outreach throughout mainland Nova Scotia. They travel to the communities in which their clients live

- *providing needles, syringes, condoms, safer smoke kits, sterile water, cookers, filters, over the counter nutrition and safe disposal of used needles*
- *providing awareness and education of safer injection and sexual practices*
- *providing peer support, including assistance with exploring and accessing detox, treatment, methadone, as well as support with legal, social services and housing issues*<sup>1</sup>

While on the road, contact was made with Mainline's service users in New Glasgow, Stellarton, Westville, Pictou Landing, Truro, Millbrooke and Indian Brook. Not all of them wanted to talk with someone from Northern AIDS Connection Society. It was not certain if it was because they were uncomfortable meeting with someone unfamiliar or if it had something to do with stigma and discrimination often attached to HIV/AIDS and Hep C. Some individuals would take the information if one of Mainline staff provided it, which resulted in a transfer of information. Those that would agree to talk to NACS staff would openly share information of their Hep C status when asked. Persons engaged in IDU would give contact information and were willing to take information when offered. Some would even ask if we could provide specific information and deliver it to them. It must also be noted that Mainline's service users may not have been home or not able to be contacted by phone to inform them that their particular area was being visited.

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<sup>1</sup> Extracted from the pamphlet by Mainline Needle Exchange

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Of the individuals seen and of the ones receiving information NACS staff was able to give them the following material. During the initial contact NACS staff passed out a package of information consisting of *Sharp Shooter, Safer Snorting, Safer Injecting, Straight Up On Hep C*. When contact was made in these areas the next time the following package of information was distribute by NACS staff. *Hepatitis C You Can Have It And Not Know It #1 The Basic Facts, Get The Full Picture. Get The Right Test. Hep C #2 Newly Diagnosed, Hep C A Year Of Treatment Is Worth The Rest Of Your Life. You Can Get Through It. #3 Treatment Options, Body Piercing Before Care cards, Body Piercing After Care cards, Tattoo Before Care cards, Tattoo After Care card.*

The Sharp Shooter pamphlet was well received and an appreciated piece of literature/resource. In some cases we were asked if they could have extra copies of the information for peers that they would be seeing later. A total of 31 clients would allow NACS staff to meet and talk with them. This broke down to 21 male and 10 female. Nine of the 31 service users that were willing to talk with us disclosed that they were Hep C positive, and of the nine, three were female. One other informed us that when they were tested they had showed evidence of exposure to the antibodies. When asked the question “Have you ever been tested for Hepatitis C?” some would tell me that they got regular testing done (every six months), others had not even been tested and was also told that they had been tested in prison.

It is hard to conduct a quick survey as the only time that you have to make contact with them is when they are getting the supplies they needed from Mainline. As soon as they have their stock from Mainline they want to get back into their homes away from prying eyes. This uneasy behaviour may also be attributed to the level of stigma and discrimination within their home community. When they are standing at the back of the van telling the workers from Mainline what they require that is when you have an opportunity to talk to them. This process does not take very long unless you have more than one person show up at the same time.

The majority of Mainline’s service user base is in their mid to late 20’s and goes upward from there. They do not reach teenagers. Youth do not access this service for probable reasons due to being seen or caught when living at home with their parents accessing the services, therefore speaking to the fear of being labelled. It is not sure if it is because they are not aware of the services that Mainline provides or if they have not yet decided to make that contact. Those living at home may not be aware that Mainline would meet them at another location.

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While on the road with Mainline in this phase of the project it was noted that the Pictou area seemed to have a larger service user base than in the previous year. In the discussion that ensued it was learned that through death, migration and the new Opiate Treatment Centre in Truro that while the numbers in one area may decrease in others they could rise. When NACS was doing work in some of the schools in the Pictou region we had heard of a school where the principle was going to put up a shelter of some sort for IDU youth to use in off of the school grounds. This was mentioned to Mainline staff and they had not heard of any shelter in the Pictou area or made contact with youth that are using or may be using a facility like this.

Because of the declining number of service users in the Amherst area, travel to this region never seemed to happen. The numbers never were all that high in the Amherst area and at present there are less than five service users. Truro has also seen a drop in clients that Mainline serves. One of the reasons for this could be because of the methadone clinic that has opened its doors in the Truro area.

A conversation with the director of the Opiate Treatment Centre verified that its service user base is made up mostly of persons in and around the local area with some coming in from Pictou. The average age of persons utilizing the methadone clinic runs 25 – 30 years of age. The client base is made up mostly of males. They do have a few female, around four at present and they are running at capacity (25).

The Treatment Centres five service users coming in from Pictou area take the bus over. Because, the bus schedule corresponds with the hours of operation at the centre this makes it possible for individuals to be able to come in from other areas. This however, is not the case with anyone wishing to travel in from the Amherst area. There are four service users using the program from the Amherst area. These individuals are classified as “stabilized”. This means that they do not need to come into the clinic on a daily basis to receive their treatment. They are only required to come into Truro to renew their prescription and report on their progress. This means that service users needing to come in from as far away as Amherst require other arrangements to travel that distance or to move to the Truro area so that they can make the necessary required visits to the clinic. One additional note is to mention the increased number of youth accessing the NACS site to exchange needles. This highlights the need and the fact of a safe non judgemental location to visit.