

## **I'VE CHANGED MY ATTITUDE. I'M NOT SO AGAINST IT. FACILITATORS OF ACCEPTANCE BY INSTITUTIONAL STAFF OF CANADA'S FIRST PRISON OVERDOSE PREVENTION SITE.**

### **Authors:**

Leonard LE<sup>1, 2</sup>

<sup>1</sup> School of Epidemiology and Public Health, University of Ottawa, Ottawa, Ontario, Canada.

<sup>2</sup> Clinical Epidemiology Program, Ottawa Hospital Research Institute, Ottawa, Ontario, Canada.

### **Background:**

In June 2019, Correctional Service Canada implemented Canada's first and, to date, only Overdose Prevention Service (OPS). OPS participants are provided sterile injection and drug preparation equipment to consume their personal supply of drugs under medical supervision.

This paper reports the perspectives of institutional staff on factors mitigating initial concerns and facilitating OPS acceptance.

### **Methods:**

Following informed consent, confidential anonymous interviews held with all levels of institutional staff wanting to express an opinion; subsequently supported by purposeful maximum variation sampling.

### **Results:**

Initial announcement gave rise to mostly negative reactions; new responsibilities seen as antithetical to and a complete reversal of established roles: *"Shocked. Didn't know how this would work in Correctional Services. Our job is to keep drugs out – this is backward thinking."* *"Goes against zero tolerance. A slap in the face when give hook to use the drugs."* Three months later, at time of interview, majority of staff shared experience of a change in attitude: *"I've changed my attitude. I'm not so against it. I needed to change my way of thinking and my behavior. I had to step back from how it had always been done."* Drivers of greater acceptance and understanding repeatedly shared and recommended for replication include: (1) Senior management team's ability to quickly deflate and respond to concerns: *"Any snags dealt with immediately. I'm impressed, not what I thought would happen."* (2) *"Up close and personal communication."* Interactive OPS Open House showcasing and discussing OPS attended by ~150 staff considered pivotal to greater connection and understanding between correctional and operations staff and health care services staff.

### **Conclusion:**

Perspectives of experience of implementation of a unique program provided CSCS a sound evidence base to guide the scale up of OPS sites across Canadian federal institutions.

*"We made a touchy thing work. We made it work!"*

### **Disclosure of Interest Statement**

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