



## OCRINT Spring 2025 Newsletter

### Policy Shifts and Program Closures in Ontario: What's Happening?

The Ontario government introduced new restrictions on **Supervised Consumption Sites/Consumption Treatment Services (SCS/CTS)**, prohibiting them from operating within 200 metres of schools or child-care centres. As a result, multiple SCS/CTS across the province faced closures. Around the same time, the province announced the rollout of Homelessness and Addiction Recovery Treatment (HART) Hubs, intended to offer housing, mental health, and addiction supports, but notably excluding harm reduction services such as SCS/CTS.

These developments have occurred alongside the province-wide closure of **Safer Supply Programs (SSPs)**, following the expiration of federal funding on March 31, 2025, and new provincial policies restricting municipalities and local boards from participating in such programs.

**SCS Update:** In March 2025, following a legal challenge led by a [coalition of health organizations](#), a court injunction temporarily allowed **10 affected SCS/CTSs to remain open**. Despite this legal victory, only [one site](#) has remained open, while the other nine sites are transitioning into HART hubs, effectively ending their SCS/CTS services.

**In response to these significant policy changes, OCRINT has undertaken a series of projects to document and understand the impacts of these closures on people who use drugs, service providers, and the broader community.**

#### [OCRINT - Toronto Public Health \(TPH\) Partnership:](#)

In collaboration with TPH, the OCRINT team is leading a mixed-methods evaluation of 'The Works' SCS, previously located at 277 Victoria St., in Toronto. This study uses ethnographic observations, interviews with clients and staff, surveys with local community members and clients, and analyses of overdose and crime data, to assess impacts pre-closure (up until March 31, 2025) and post-closure (April 1 – September 1, 2025). Findings will inform future harm reduction strategies and community health planning.

#### [The Impact of Announcing Supervised Consumption Site Closures in Ontario: A Qualitative Study \(Disclose\)](#)

Under the leadership of Dr. Ahmed Bayoumi, interviews with 29 clients and 10 service providers from 7 SCSs across the province have been completed and the data is currently being analyzed. The findings will help to understand the anticipated impacts of site closures on service users and providers, in addition to guiding evidence-based policymaking and supporting informed decisions that prioritize public health and community well-being.

### Safer Opioid Supply Program Qualitative Study:

In March 2025, OCRINT conducted a qualitative study with 25 SSP clients across Ontario to understand the impact of the province's planned program closures. Participants shared how these programs supported their health and stability, their concerns about losing access, and the strategies they expected to use to cope with the disruption.

The findings, which have now been analyzed and submitted for publication, highlight the critical role SSPs have played in clients' lives and underscore the consequences of removing these evidence-based services. A follow-up study is being coordinated.

## OCRINT Demonstration Project Updates

### Digital Stories: Amplifying the Voices of PWUD

Dr. Abigale Sprakes is leading a powerful **digital storytelling (DST)** initiative that brings the human impact of SSP closures to life. This project shares firsthand stories from people who have relied on SSP, offering a deeply personal look into how these services have supported their health, safety, and dignity amidst the toxic drug crisis.

**View the digital stories and learn more about the project [here](#).**

### Casey House Foundation

This research project, led by Dr. Yasser Ismail, established an advisory committee of PWUD in early 2024, bringing together diverse voices to shape harm reduction services, advance the understanding of supervised inhalation services within hospital settings, and determine transformative practices for supporting individuals who use these services.

The committee provided recommendations to improve and expand the SCS and other harm reduction services delivered at the hospital and contributed to the development of harm reductions strategies and wrap-around services to support people who inhale drugs and other PWUD. Given the high level of engagement with the hospital, the PWUD advisory became a key interest holder engaged in the development of the organization's **Re-Imagining Care five-year strategy** and provided significant input to ensure that the insights of PWUD shape how we provide compassionate care based in social justice.

### Evaluating BC's Drug Decriminalization Policy

OCRINT is leading the evaluation of BC's landmark drug decriminalization policy, examining its impact across five key domains: **People Who Use Drugs (PWUD)**, **Policy & the Criminal Justice System**, the **General Public**, the **Health Service System**, and **Economic Impacts**.

**Findings from the first year of implementation have been shared through a series of publications, presentations, and infographics, all accessible on our [website](#).**

Evaluation activities for year two are currently underway, and updated findings will be shared as they become available.

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### ASCME: A Pan-Canadian Clinical Trial for Methamphetamine Use Disorder

Led by Dr. Bernard Le Foll and the Translation Addiction Research Laboratory at CAMH, the ASCME trial is now recruiting participants. This multisite, randomized, placebo-controlled study is the largest of its kind in Canada for methamphetamine use disorder (MUD).

The trial is evaluating the efficacy of high-dose lisdexamfetamine (Vyvanse), with or without contingency management, in reducing methamphetamine use and improving related outcomes.

**The trial is seeking participants who are: currently using methamphetamine, between 18 and 55 years, have a diagnosis of moderate or severe MUD, and are looking to stop or reduce their use**

Interested individuals who may be eligible can be referred to the study team via email at [ascme.study@camh.ca](mailto:ascme.study@camh.ca), or by phone at 416-535-8501 ext. 31571.

## Research Spotlight

Drs. Nikki Bozinoff and Csilla Kalocsai conducted a scoping review, "Facilitators of and barriers to buprenorphine initiation in the emergency department", published in *The Lancet Regional Health – Americas*. The study was also featured in a recent [Sunnybrook article](#), and a synopsis of the study is available [here](#). Additionally, in a related editorial published in *ASAM Weekly*, they urge clinicians to move beyond buprenorphine-focused initiation pathways and consider a broader spectrum of opioid agonist treatment (OAT) and harm reduction options within emergency department settings.

### Interested in reading more about our work?

The [OCRINT website](#) features our latest peer-reviewed publications, knowledge translation materials, and ongoing research initiatives from across the network.

## Exciting Initiatives

### CRISM Indigenous Engagement Platform

As part of the newly launched **CRISM Indigenous Engagement Platform**, CRISM is inviting Indigenous youth, adults, seniors, and Elders/knowledge holders with lived or living experience with substance use to join our Indigenous-focused engagement circle. The circle aims to provide a safe and respectful space to share experiences related to substance use, identify community priorities, and help guide research grounded in Indigenous knowledge and lived realities. Participation in the circle would also be a valuable opportunity to connect with others in the community who share similar experiences and a commitment to making a positive impact. The group will meet virtually throughout the year, with in-person gatherings occurring once or twice a year. Honorariums and costs for attendance will be provided and covered.

For more information, or to get involved, please contact Heather Poirier at [IEPcoordinator@Usask.ca](mailto:IEPcoordinator@Usask.ca).

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### RECLAIM Collective

Co-founded by members of the CRISM Ontario Node, the **RECLAIM Collective** is a harm reduction social enterprise dedicated to supporting individuals impacted by substance use and advocating for transformative changes in drug policy. RECLAIM offers a range of services, including educational webinars, research assistance, training, and event planning, while also prioritizing community support by allocating a portion of its earnings to grassroots mutual aid initiatives.

For more information, please visit: [www.reclaimcollective.ca](http://www.reclaimcollective.ca).



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