

## Key findings from qualitative and quantitative baseline interviews with iOAT clients

### Background

The Short Cycle iOAT Evaluation was conducted to inform health system planning, and to support the effective, timely and client-centered scale-up of injectable opioid agonist treatment (iOAT) programs.

This interim update includes self-report data from clients on their experiences accessing iOAT. These participants were enrolled in separate but parallel quantitative and qualitative baseline interviews between April and December 2018.

Key findings are presented here as a complement to the full report. Further results will be shared in phases as they become available.

### Summary of Key Qualitative Findings:

Participants reported accessing iOAT for a number of reasons including (from 34 participants):

1. Participants wanted to get away from the daily “hustle” related to buying and using drugs, and make changes to their daily life (e.g. save money, buy food, access supports).
2. Desire to manage drug use and reduce overdose risk.

*“Yes, [...] and I didn’t want to die off the street [...] the fentanyl stuff, because at that point I had already gone down like four or five times with ODs (overdoses). So, I wanted to get on something regularly, so I wouldn’t die.”*  
[51-year-old Indigenous man]

3. Negative past treatment experiences and the belief that iOAT could better meet their needs and was a good treatment option, both in terms of the medication offered and the way the program is delivered (e.g. ability to inject).
4. Desire to improve the management of chronic pain.

### Contacts

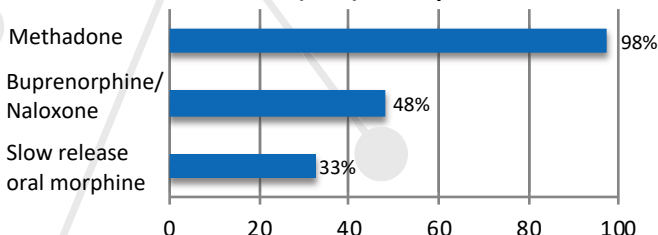
Please contact the evaluation team with any queries or for a copy of the full report: [ioatstudy@bccsu.ubc.ca](mailto:ioatstudy@bccsu.ubc.ca)

### Summary of Key Quantitative Findings:

**Cohort:** 91 participants,\* median age 47 years  
81% identified as male, 32% as Indigenous

80% of participants reported a past opioid overdose. Of this group, 30% had experienced more than 11 overdoses.

#### Respondents accessing oral opioid agonist treatment (OAT) in the past



#### Proportion of participants reporting:

- A decrease in illicit opioid use while being prescribed iOAT **93%**
- No opioid overdose on iOAT **90%**
- Engagement with iOAT provided them with access to other health services **41%**
- Access to diacetylmorphine a desired program improvement **43%**

\*results may not represent all 91 participants

### Acknowledgements

Our sincere thanks to all participants. We respectfully acknowledge that this work was hosted on the ancestral and unceded traditional territory of the Coast Salish Peoples.