

# Supervised Consumption Services

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## Overview

Supervised consumption services (SCS) – also called safer injection facilities (SIFs), drug consumption rooms (DCRs), supervised drug consumption facilities (SCFs) or safer drug use services (SDUS) – are legally sanctioned facilities designed to reduce the health and public order issues often associated with public injection. These facilities provide a space for people to consume pre-obtained drugs in controlled settings, under the supervision of trained staff, and with access to sterile injecting equipment. Participants can also receive health care, counseling, and referrals to health and social services, including drug treatment.

There are approximately 120 SCS currently operating in ten countries around the world (Australia, Canada, Denmark, France, Germany, Luxembourg, the Netherlands, Norway, Spain and Switzerland) – but none in the U.S.<sup>i</sup> In the past two years, Canada, and especially the city of Vancouver, has grown from two authorized sites to thirty, plus multiple smaller Overdose Prevention Sites – a temporary site set up to address the immediate need in a community.

There are plans for the opening of SCS in Portugal, Belgium, Ireland and the UK. In the United States, Seattle, San Francisco, Philadelphia and New York City have committed to opening sites, but none are in operation yet.<sup>ii</sup> There is, however, one underground site in the U.S., according to researchers.<sup>iii</sup>

SCS can play a vital role as part of a larger public health approach to drug policy. SCS are intended to complement – not replace – existing prevention, harm reduction and treatment interventions.

## SCS Improve Safety and Health

Numerous evidence-based, peer-reviewed studies<sup>iv</sup> have proven the positive impacts of supervised injection services, including:

- Increasing use of substance use disorder treatment, especially among people who distrust the treatment system and are unlikely to seek treatment on their own;
- Reducing public disorder, reducing public injecting, and increasing public safety;
- Attracting and retaining a population of people who inject drugs and are at a high risk for infectious disease and overdose;
- Reducing HIV and Hepatitis C risk behavior (i.e. syringe sharing, unsafe sex);
- Reducing the prevalence and harms of bacterial infections;
- Successfully managing hundreds of overdoses and reducing drug-related overdose death rates;
- Saving costs due to a reduction in disease, overdose deaths, and need for emergency medical services;
- Providing safer injection education, subsequently increasing safer injecting practices;
- Increasing the delivery of medical and social services.

In areas surrounding existing SCS, there has been no evidence of increased community drug use, initiation of injection drug use, or drug-related crime. A 2017 systematic review concluded: “*Consistent evidence demonstrates that SCFs mitigate overdose-related harms and unsafe drug use behaviours, as well as facilitate uptake of addiction treatment and other health services among people who use drugs (PWUD). Further, SCFs have been associated with improvement in public order without increasing drug-related crime. SCFs have also been shown to be cost-effective.*”

And a previous review concluded: “All studies converged to find that SIFs were efficacious in attracting the most marginalized people who inject drugs, promoting safer injection conditions, enhancing access to primary health care, and reducing the overdose frequency. SIFs were not found to increase drug injecting, drug trafficking or crime in the surrounding environments. SIFs were found to be associated with reduced levels of public drug injections and dropped syringes.”<sup>v</sup>

### **Vancouver’s InSite**

Vancouver, Canada’s supervised injection facility, *InSite*, has been the most extensively studied SIF in the world, with over 60 peer-reviewed articles published examining its effects on a range of variables, from retention to treatment referrals to cost-effectiveness.<sup>vi</sup> These reports are in agreement with reviews of Australian and European SIFs, which show that these facilities have been successful in attracting at-risk populations, are associated with less risky injection behavior, fewer overdose deaths, increased client enrollment in drug treatment services, and reduced nuisances associated with public injection.<sup>vii</sup> For example, one study found a 30 percent increase in the use of detoxification services among *InSite* clients.<sup>viii</sup>

*InSite* has proved to be cost-effective in terms of overdose and blood borne disease prevention as well.<sup>ix</sup> One cost-benefit analysis of *InSite* estimated that the facility prevents 35 cases of HIV each year, providing a societal benefit of more than \$6 million per year.<sup>x</sup>

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**“InSite saves lives. Its benefits have been proven. There has been no discernable negative impact on the public safety and health objectives of Canada during its eight years of operation.”**

*- Supreme Court of Canada, 2011.*<sup>xi</sup>

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A survey of more than 1,000 people utilizing *InSite* found that 75 percent reported changing their injecting practices as a result of using the facility. Among these individuals, 80 percent indicated that the SIF had resulted in less rushed injecting, 71 percent indicated that the SIF had led to less outdoor injecting, and 56 percent reported less unsafe syringe disposal.<sup>xii</sup> *InSite* has produced a “large number of health and community benefits...and no indications of community or health-related harms.”<sup>xiii</sup>

### **Several Cities on the Verge of Opening First SCS in U.S.**

In 2012, New Mexico adopted a proposal to study the feasibility of a safer injection facility in the state – becoming the first state in the nation to consider this potentially life-saving intervention.<sup>xiv</sup>

In 2016, the city of Ithaca launched the “The Ithaca Plan” – a comprehensive municipal drug strategy which included a proposal for a safer injection site.<sup>xv</sup>

In January 2017, Seattle and the surrounding King County announced a plan to establish several SCS in the area as a pilot test to address overdose and drug use in the community.<sup>xvi</sup> And in 2018, city officials in Philadelphia, San Francisco, and New York City announced their plans to open sites in their cities.<sup>xvii</sup> Momentum for SCS has also emerged in cities such as Boston and Baltimore. Additionally, legislation has been introduced in California, Colorado, Maryland, Massachusetts, Missouri, New York and Vermont to allow SCS.

### **Recommendations**

SCS are a vital part of a comprehensive public health approach to reducing the harms of drug misuse. Local, state and national governments should explore the implementation of legal SCS (at least at the pilot level) staffed with trained professionals to reduce overdose deaths, increase access to health services and further expand access to safer injection equipment to prevent the transmission of HIV and Hepatitis C.

DPA supports the efforts of local communities in the U.S. to pursue SCS programs.

Though SCS cannot prevent all risky drug use and related harms, evidence demonstrates that they can be remarkably effective and cost-effective at improving the lives of people who inject drugs as well as the public safety and health of their communities.

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<sup>i</sup> European Monitoring Centre for Drugs and Drug Addiction, "Drug consumption rooms: an overview of provision and evidence," (2018) [http://www.emcdda.europa.eu/system/files/publications/2734/POD\\_Drug%20consumption%20rooms.pdf](http://www.emcdda.europa.eu/system/files/publications/2734/POD_Drug%20consumption%20rooms.pdf); Government of Canada, "Supervised consumption sites: status of applications," <https://www.canada.ca/en/health-canada/services/substance-abuse/supervised-consumption-sites/status-application.html>;

<sup>ii</sup> K. Stone and G. Sander, "The Global State of Harm Reduction 2016" (Harm Reduction International, 2016) <https://www.hri.global/contents/1739>; Heroin and Prescription Opiate Addiction Task Force: Final Report and Recommendations (September 15, 2016) [http://www.kingcounty.gov/~media/depts/community-human-services/behavioral-health/documents/herointf/Final-Heroin-Opiate-Addiction-Task\\_Force-Report.ashx?la=en](http://www.kingcounty.gov/~media/depts/community-human-services/behavioral-health/documents/herointf/Final-Heroin-Opiate-Addiction-Task_Force-Report.ashx?la=en).

<sup>iii</sup> Alex H. Kral and Peter J. Davidson, "Addressing the Nation's Opioid Epidemic: Lessons from an Unsanctioned Supervised Injection Facility," *American Journal of Preventive Medicine*, Volume 53, Issue 6 (2017) 919-922, doi: <https://doi.org/10.1016/j.amepre.2017.06.010>.

<sup>iv</sup> C. Potier et al., "Supervised injection services: What has been demonstrated? A systematic literature review," *Drug Alcohol Depend* 145C(2014): 48-68; S. Semaan et al., "Potential role of safer injection facilities in reducing HIV and hepatitis C infections and overdose mortality in the United States," *Drug Alcohol Depend* 118, no. 2-3 (2011): 100-10; Mary Clare Kennedy et al., "Public Health and Public Order Outcomes Associated with Supervised Drug Consumption Facilities: a Systematic Review," *Curr HIV/AIDS Rep* (2017) 14: 161-183.

<sup>v</sup> Potier et al., "Supervised injection services: What has been demonstrated? A systematic literature review," 48 Mary Clare Kennedy et al., "Public Health and Public Order Outcomes Associated with Supervised Drug Consumption Facilities: a Systematic Review," *Curr HIV/AIDS Rep* (2017) 14: 161-183.

<sup>vi</sup> T Kerr et al., "Findings from the Evaluation of Vancouver's Pilot Medically Supervised Safer Injection Facility—Insite," (Vancouver, BC: Urban Health Research Initiative, BC Centre for Excellence in HIV/AIDS, 2009) [http://uhri.cfenet.ubc.ca/images/Documents/insite\\_report-eng.pdf](http://uhri.cfenet.ubc.ca/images/Documents/insite_report-eng.pdf).

<sup>vii</sup> See KPMG, *Further evaluation of the Medically Supervised Injecting Centre 2007-2011*, [http://www.health.nsw.gov.au/resources/mhdao/pdf/msic\\_kpmg.pdf](http://www.health.nsw.gov.au/resources/mhdao/pdf/msic_kpmg.pdf); European Monitoring Centre for Drugs and Drug Addiction, "Drug consumption rooms: an overview of provision and evidence."

<sup>viii</sup> E Wood et al., "Rate of detoxification service use and its impact among a cohort of supervised injection facility users," *Addiction* 102(2007): 918.

<sup>ix</sup> M. A. Andresen and N. Boyd, "A cost-benefit and cost-effectiveness analysis of Vancouver's supervised injection facility," *Int J Drug Policy* 21, no. 1 (2010): 70-76; AM Bayoumi and GS Zaric, "The cost-effectiveness of Vancouver's supervised injection facility," *Can Med Ass J* 179, no. 11 (2008): 1143-51; SD Pinkerton, "Is Vancouver Canada's supervised injection facility cost-saving?," *Addiction* 105(2010): 1429-36.

<sup>x</sup> Andresen and Boyd, "A cost-benefit and cost-effectiveness analysis of Vancouver's supervised injection facility."

<sup>xi</sup> Brandon DL Marshall et al., "Reduction in overdose mortality after the opening of North America's first medically supervised safer injecting facility: a retrospective population-based study," *The Lancet* 377, no. 9775 (2011): 1429-37.

<sup>xii</sup> S Petrar et al., "Injection drug users' perceptions regarding use of a medically supervised safer injecting facility," *Addict Behav* 32(2007): 1088-93. Steven Petrar et al., "Injection Drug Users' Perceptions Regarding Use of a Medically Supervised Safer Injecting Facility," *Journal of Addictive Behaviors* 32, no.5 (2007):1088-1093.

<sup>xiii</sup> E Wood et al., "Summary of findings from the evaluation of a pilot medically supervised injecting facility," *Can Med Assoc J* 175, no. 11 (2006): 1399-404.

<sup>xiv</sup> 50th Legislature, State of New Mexico, Senate Memorial 45 (2012) <http://www.nmlegis.gov/Sessions/12%20Regular/memorials/senate/SM045.pdf>

<sup>xv</sup> Drug Policy Alliance, "Ithaca to Release Groundbreaking Plan to Address Over-Incarceration and Skyrocketing Overdose Deaths, While Creating Comprehensive Health-Based Approach to Drug Policy," February 21, 2016 <http://www.drugpolicy.org/news/2016/02/ithaca-release-groundbreaking-plan-address-over-incarceration-and-skyrocketing-overdose>

<sup>xvi</sup> Heroin and Prescription Opiate Addiction Task Force: Final Report and Recommendations (September 15, 2016) [http://www.kingcounty.gov/~media/depts/community-human-services/behavioral-health/documents/herointf/Final-Heroin-Opiate-Addiction-Task\\_Force-Report.ashx?la=en](http://www.kingcounty.gov/~media/depts/community-human-services/behavioral-health/documents/herointf/Final-Heroin-Opiate-Addiction-Task_Force-Report.ashx?la=en)

<sup>xvii</sup> Elana Gordon, "What's Next For 'Safe Injection' Sites In Philadelphia?," *NPR*, January 24, 2018, <https://www.npr.org/sections/health-shots/2018/01/24/580255140/whats-next-for-safe-injection-sites-in-philadelphia>; Heather Knight, "SF safe injection sites expected to be first in nation open around July 1," *San Francisco Chronicle*, Feb 6, 2018, <https://www.sfchronicle.com/news/article/SF-safe-injection-sites-expected-to-be-first-in-12553616.php>; William Neuman, "De Blasio Moves to Bring Safe Injection Sites to New York City," *New York Times*, May 3, 2018, <https://www.nytimes.com/2018/05/03/nyregion/nyc-safe-injection-sites-heroin.html>.