

**HIV/AIDS Resources and Community Health  
Position Statement**

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**HIV/AIDS RESOURCES AND COMMUNITY HEALTH  
A POSITION STATEMENT ON SAFE INJECTION SITES**

**Position Statement**

A safe injection site (SIS) provides a clean, safe, supervised environment where injection drug users (IDU) can inject pre-obtained drugs, and connect to health care, treatment and community services. An SIS needs to be part of a comprehensive harm reduction strategy. The establishment of an SIS in Guelph will contribute to the prevention of the fatal consequences of injection drug use.

**Rationale**

The increasing rate of fatal illicit drug overdoses by IDU is a major public health concern. It is also devastating for the loved ones left behind. IDU purchase illicit drugs or 'street drugs' such as heroin, cocaine and amphetamines through the underground market. These illicit drugs are of unknown strength and composition, and may cause the primary mechanisms of death attributable to overdose including: respiratory depression, hypoxia, seizures, cardiac arrhythmias, stroke and hyperthermia (Marshall, Milloy, Wood, Montaner, & Kerr, 2011; Mathers et al., 2013; Small, Moore, Shoveller, Wood, & Kerr, 2012). Injection drug use is a complex behaviour and when it occurs in public it is often rushed; this factors into the increasing rate of fatal illicit drug overdoses by IDU (DeBeck et al., 2009; Jozaghi, 2012).

Another major public health concern is the increasing incidence of sexually transmitted and blood-borne infections, Human Immunodeficiency Virus (HIV), and the Hepatitis C Virus (HCV). When IDU share needles, use contaminated injection equipment, and/or have other unsafe injection practices they increase the risk of contracting HIV and HCV. Injection drug use is a well-established risk factor for morbidity due to HIV and HCV infection (Andresen & Jozaghi, 2012; Mathers et al., 2013; Spradling et al., 2010). The evidence is convincing, injection drug use has dangerous consequences.

The expectations from a new SIS would be to mitigate the fatal consequences of injection drug use. The other benefits of an SIS, as demonstrated in the research are: reduced number of people injecting in public, reduced public syringe disposal, injection technique education, the provision of safer injection conditions and sterile injection equipment (Andresen & Jozaghi, 2012; DeBeck et al., 2009; DeBeck et al., 2011; Jozaghi, 2012; Marshall et al., 2011; Mathers et al., 2013; Potier, Lapr evote, Dubois-Arber, Cottencin, & Rolland, 2014). Furthermore, there are benefits in relation to the enhanced connections of IDU to withdrawal management, addiction treatment programs and social services (Potier et al., 2014). The services of an SIS are beneficial for IDU, the police, and the community.

## **Background**

There are over 90 SISs in the world. Canada has two SIS located in Vancouver's downtown eastside. In the 1990's there was a rise in injection drug use in Vancouver's downtown eastside. The availability of high-grade heroin and cheap cocaine combined with poverty and marginalization precipitated a public health epidemic marked by escalating rates of HIV infection and overdose deaths (Carter, 2013). To address this crisis, an organization called the Vancouver Area Network of Drug Users (VANDU) spearheaded a grassroots movement to provide a voice for IDU. An unsanctioned safe injection site was opened which applied pressure on the provincial government to address the issues faced by IDU. In June 2003, the federal government granted permission to the Vancouver Coastal Health Authority to operate Canada's first SIS called InSite (Dooling & Rachlis, 2010).

## **Key Points**

In order to operate an SIS, an exemption is required from the usual enforcement of Canada's drug possession laws under section 56 of the Controlled Drugs and Substances Act (CDSA) (Boyd, 2013; Controlled Drugs and Substances Act [CDSA], 1996). With an exemption, IDU will be able to transport pre-obtained illicit drugs and use them at the SIS without fear of charge or prosecution. This involves the federal government as a stakeholder since this level of government grants the exemption. The provincial and municipal levels of government also need to be involved to approve funding and coordination.

IDU are the most important stakeholders of an SIS. IDU need to be aware of the services offered and the benefits of an SIS. Their fears will need to be addressed by providing information about the CDSA exemption. Education about the SIS can be delivered by street outreach workers along with the police.

The police need to actively and positively engage IDU. The police force that engages IDU will be able to refer individuals they find injecting in public to the SIS (DeBeck et al., 2008). The research on the benefits of an SIS needs to be shared with police in order to gain their support. Other convincing evidence is that an SIS does not increase criminal activity, does not promote drug use or have a negative impact on public order (Boyd, 2013; Potier et al., 2014). Past evaluations have shown that the support police demonstrate for an SIS plays an important role in the successful operation of an SIS (DeBeck et al., 2008).

There would need to be ongoing consultation with the police to develop protocols, particularly around the exemption to the CDSA. Education and training about drug addiction, mental health issues, HCV, HIV and Acquired Immune Deficiency Syndrome (AIDS) can also be provided. Ongoing consultation with the local police force will ensure the exemption to the CDSA is honoured, recognized and respected.

Engagement of the community surrounding the location of the SIS would include education, information and consultation about the establishment of an SIS. It is necessary to overcome common misconceptions, such as the existence of an SIS legitimizes and enables illicit drug abuse. There is no evidence to suggest that an SIS fosters the initiation of new users into injection drug use or increases the rate of overdoses (DeBeck et al., 2008; Small et al., 2012; Potier et al., 2014). A strategy to gain the support of the community can be found in the

resource entitled “Yes, In My Backyard” (HomeComing Community Choice Coalition, 2005). With a concise but compelling verbal message reinforced consistently, along with equally consistent written materials, the community can be brought onside to endorse the SIS.

## Action

ARCH will engage in dialogue with community groups and members interested in safe injection sites. In accordance with our values and mission, ARCH will support initiatives that bring an SIS to Guelph

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**Mission**

We provide anti-oppressive, sex-positive, inclusive care, treatment and prevention services in the area of HIV/AIDS and other sexually transmitted blood-borne infections through innovative health promotion strategies and community engagement.

**Vision Statement**

We dream of a time and place where everyone is free to live healthy, stigma-free, vital lives.

**Guiding Principles: What We Value and How We Work**

Greater and more Meaningful Engagement of People who live with HIV/AIDS • Harm Reduction-Based • Anti-Oppressive • Inclusive • Respectful • Caring • Accepting • Passionate and Committed • Accountable • Accessible • Sex-Positive • Client-Centered • Evidence-Based • Strength-Based • Self-Determination • Flexible