



Addictions &
Mental Health
Ontario

Dépendances &
santé mentale
d'Ontario

OVERVIEW OF THE EFFECTIVENESS OF SUPERVISED CONSUMPTION SERVICES: WHAT DOES THE EVIDENCE AND THE ONTARIO EXPERIENCE TELL US?

Submission to the Ministry of Health and Long-Term Care

September 4, 2018

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CONTENTS

1. Introduction	3
2. Context	3
2.1 How supervised consumption services fit into the continuum of treatment, services & supports	3
2.2 The opioid crisis and the importance of supervised consumption services.....	4
3. How supervised consumption services are helping communities address the opioid crisis.....	5
3.1 Connections to treatment and improvements in substance use behaviour and health outcomes	6
3.2 Preventing overdoses and overdose deaths.....	7
3.3 Improving community safety and reducing public use.....	8
3.4 Preventing the transmission of infectious diseases	9
4. A whole of community approach	9
5. Working together to improve outcomes for people using substances.....	10

About AMHO

Addictions and Mental Health Ontario (AMHO) represents over 220 addiction and mental health organizations in Ontario. Our members provide services and supports that help Ontarians across the province with their recovery, including community-based counselling and case management, peer support and consumer run businesses, residential treatment, withdrawal management, supportive housing and hospital-based programs.

This submission was prepared for the Ministry of Health and Long-Term Care as part of the review of evidence around supervised consumption services.

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1. INTRODUCTION

Each day, Addictions and Mental Health Ontario (AMHO) members see firsthand the impact that problematic substance use and addiction, including opioid use, have on individuals, families and communities. Through these interactions they see firsthand how the appropriate treatment, services and supports can help people find a path to healthier living.

We are encouraged by the government's commitment to seek input and evidence from experts about supervised consumption services, especially those who work every day with Ontarians to get people the help they need and support them on their recovery journey.

Supervised consumption services are an important part of the continuum of mental health and addiction treatment, services and supports. Our submission provides an overview of the effectiveness of supervised consumption services and overdose prevention sites, drawing on the evidence from both Ontario's direct experience, as well as current research and evidence, with a focus on four key outcome areas:

- 1. Connections to treatment and improvements in substance use behaviour and health outcomes**
- 2. Preventing overdose and overdose deaths**
- 3. Improving community safety and reducing public use**
- 4. Preventing transmission of infectious diseases**

The conclusion arising from our overview is clear: these services save lives, and help connect people who use opioids and other substances with addictions and healthcare treatment. We recommend the minister allow the overdose prevention sites (OPSs) that have already been approved to open immediately, and facilitate a coordinated, responsive application process for continuing supervised consumption services, based on evidence of local need.

2. CONTEXT

2.1 HOW SUPERVISED CONSUMPTION SERVICES FIT INTO THE CONTINUUM OF TREATMENT, SERVICES AND SUPPORTS

The recovery journey is a personal one and very different for each person. There needs to be a range of services available, to meet people where they are in their journey. A continuum of mental health and addictions services is necessary, including harm reduction and ongoing support, to ensure that people are as healthy as possible and given an opportunity to recover.

Due to the stigma around drug use, many people who use drugs find it hard to access traditional healthcare settings, or have been stigmatized and discriminated against when accessing places like hospitals. They may also be homeless, suffer mental illness and have faced significant trauma in their lives.

Supervised consumption services reach marginalized individuals who for the most part are not easily connected to traditional healthcare settings. For many years the system has left a significant gap for many of the most marginalized Ontarians. Through relationship building and trust, these services are

able to link clients to other health and social services - and many often provide these links in person onsite.

The wait times to get into treatment can be months to years. The proposed investments of your government in mental health, addiction and housing supports will go a long way to improving those wait times. Along with harm reduction services such as supervised consumption, the new investment will help establish a full continuum of mental health and addictions services that will stabilize the lives of vulnerable individuals so that they can be able to benefit from treatment. The client voice needs to be critical in decision-making related to these live-saving services.

2.2 THE OPIOID CRISIS AND THE IMPORTANCE OF SUPERVISED CONSUMPTION SERVICES

Canada is experiencing a large-scale opioid overdose crisis.

There were over 1,261 overdose deaths in Ontario 2017, an increase of 45% over the previous year. Since 2013, overdose deaths caused by opioids have doubled¹. Prescription and non-prescription drug use have both driven this crisis, compounded by the potency of fentanyl and carfentanil in drug supplies².

On August 14, Toronto police alerted the public that seven people in the city's downtown core had died of a drug overdose over the previous 12 days, which highlights further that people's lives are at stake and the opioid crisis is only growing³.

The crisis is taking a toll on the healthcare system. In 2017, there were 7,512 opioid-related emergency department visits⁴. The average length of stay for people admitted to the hospital for opioid poisonings is 8 days⁵.

In response to this public health emergency, two types of supervised consumption services - Supervised Consumption Sites (SCSs) and Overdose Prevention Sites (OPSs) - have provided acute services, aimed at reducing the harms related to drug consumption, including overdose deaths, while connecting people to the right services and supports.

Supervised Consumption Sites (SCSs), also called safer injection sites, drug consumption rooms and supervised injecting centers or facilities) are facilities designed to reduce the health and public safety issues often associated with public injection.

Overdose Prevention Sites (OPSs) were created to address the need for immediate harm reduction support. While SCSs take years to be approved and opened, the crisis continues to claim lives at an increasing rate. OPSs can bridge the gap until such time the SCS is opened and

¹ <https://www.toronto.ca/legdocs/mmis/2018/hl/bgrd/backgroundfile-116008.pdf>

² <https://www.cbc.ca/news/canada/toronto/overdose-deaths-downtown-toronto-police-warning-1.4785698>

³ <https://www.cbc.ca/news/canada/toronto/overdose-deaths-downtown-toronto-police-warning-1.4785698>

⁴ <https://www.publichealthontario.ca/en/dataandanalytics/pages/opioid.aspx#/trends>

⁵ https://secure.cihi.ca/free_products/Opioid%20Poisoning%20Report%20%20EN.pdf

help build relationships with substance users that have become marginalized in the healthcare system.

“What makes the Regent Park Community Health Centre OPS a special place to me, upon making the decision to stop using and enter a detox, the support from the OPS staff was overwhelming. Not only did they allow (and occasionally remind me) to call the detox hotline every half hour, I also received support for the RNs in the form of an initial dosage of common over the counter medications to help alleviate those first pangs of withdrawal symptoms. What I garnered from all of this, although they - the RNs/HR staff are there to make sure we have a safe place to inject - if and when a client chooses to take the steps to better their lives, that they will be with an equally supportive group, which truly means a lot as many of us, as unfortunate as it may sound, do not have many supports outside of the OPS staff.”

- Client from Regent Park Community Health Centre

These services are located in areas where opioid overdoses are concentrated. For example, the Moss Park and Church-Yonge Corridor are home to two SCS and two OPS locations. From August 2017 to August 2018, the Moss Park area had 337 suspected overdose calls to paramedics, and the Church-Yonge Corridor had over 350. The next highest area, the Bay Street Corridor, by comparison, reported 150⁶. As a result, uptake of these services, when provided in neighbourhoods where prevalence is high, has been significant. For example, The Works SCS saw 15,362 visits and reversed 213 overdoses from August 2017 to July 2018⁷. Research shows that people won't travel far for these services so it is important they continue to be embedded in the community where the clients are located⁸.

3. HOW SUPERVISED CONSUMPTION SERVICES ARE HELPING COMMUNITIES ADDRESS THE OPIOID CRISIS

Ontario's SCSs and OPSs are helping communities to address the opioid crisis by:

- 1. Connecting people to treatment and improving their substance use behaviour and health outcomes**
- 2. Preventing overdose and overdose deaths**
- 3. Improving community safety and reducing public use**
- 4. Preventing the transmission of infectious diseases**

⁶ https://www.toronto.ca/wp-content/uploads/2018/08/90a6-CallsforSuspectedOpioidOverdoses_GeographicInformation_2018Aug09_AODA.pdf

⁷ <https://www.toronto.ca/community-people/health-wellness-care/health-inspections-monitoring/toronto-overdose-information-system/>

⁸ <http://www.catie.ca/sites/default/files/TOSCA%20report%202012.pdf>

Below we outline both the evidence from the literature and from Ontario's supervised consumption services in these four outcome areas.

3.1 SUPERVISED CONSUMPTION SERVICES CONNECT PEOPLE TO TREATMENT AND IMPROVE THEIR SUBSTANCE USE BEHAVIOUR AND HEALTH OUTCOMES

Supervised consumption services enable marginalized people to access health care services, including primary care and addiction treatment, leading to improvements in their substance use behaviour and overall health. SCSs and OPSs are commonly co-located with other health and social services, further enabling connection to health care, counselling and referrals to health and social services, including treatment. These sites are effective at helping people access treatment because they are low-barrier way to access the healthcare system, and are often staffed with peers and embedded in their community. As a result, clients are more comfortable accessing services and receiving referrals than they would be at other, more traditional healthcare settings. While building non-judgmental and supportive relationships between substance users and health-care providers, SCSs can help individuals stop using drugs when they are ready.

*"I have never felt like I can talk with health professionals so openly about my drug use. I am able to talk about others issues in my life. E.g. the other day they helped me by connecting me with mental health support. All around they've been very helpful."*¹

- Client from Ottawa Public Health Supervised Consumption Site

Evidence from Ontario:

- Ottawa Public Health SCS - Most (97%) clients received health services during their SCS visits since opening in September 2017. Health services provided included: supportive counselling (79%); harm reduction education (63%); and health teaching (15%). An additional 4% of health services (over 340) were clinical and these included wound care and assessment; and HIV, hepatitis C and syphilis testing. Over 240 referrals were also provided for clients. Most referrals were for health care, mental health, social supports and housing, and to other addictions services.
- Client feedback from the Ottawa Public Health SCS shows that 60% of clients are thinking more about reducing or stopping their drug use⁹
- 100% of people who visited Sandy Hill Community Health Centre and Somerset West Community Health Centre received harm reduction education and referrals to social services.¹⁰

⁹ Ottawa Public Health Safe Injection Site Evaluation Report

¹⁰ <https://ottawacitizen.com/opinion/columnists/opinion-preventing-drug-overdoses-is-just-the-first-step>

- There have been more than 7,000 visits by 2,000 people to London's temporary overdose prevention site at 186 King St. since it opened on Feb. 10. Around 10 per cent, or approximately 200, of the clients have been referred to rehabilitation¹¹.

Evidence from the literature:

- Studies conducted in Vancouver and in Sydney, Australia have repeatedly shown that people who access supervised injection sites have increased levels of access to a diverse forms of treatment (e.g. detox, residential treatment centres, opioid agonist treatment)¹².
- Evidence shows that the introduction of a SCS can also lead to a reduction in harmful drug-related behaviours while also decreasing risk of deaths:
 - A study found that 23% of clients who had used SCSs had stopped injecting by the end of the study period, and another 57% had entered addiction treatment¹³
 - One study reported 75% of clients positively changed their injecting behaviour as a result of using a SCS, including less public injection and reduced unsafe disposal of needles¹⁴

3.2 SUPERVISED CONSUMPTION SERVICES PREVENT OVERDOSES AND SAVE LIVES

The evidence is clear on the ability of OPSs and SCSs to save lives, but not even these statistics capture the full scale of the positive impact of the overdoses deaths avoided because of these services. Among all age groups, it was Canadians between the ages of 20 and 29 who suffered the most overdose deaths last year. If still alive they might have found their way into recovery.

Evidence from Ontario:

- The London OPS has reversed 34 overdoses between February 12 and September 2, 2018.
- The Works SCS in Toronto has administered naloxone 67 times, reversing overdoses, saving lives and reducing EMS calls, ED visits and hospitalizations¹⁵
- Over 1,450 overdoses were either prevented or reversed in the last four months at Sandy Hill Community Health Centre and Somerset Community Health Centre SCS.¹⁶

¹¹ <https://lfpres.com/news/local-news/spike-in-london-overdoses-sparks-warning>

¹² https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5437687/pdf/12954_2017_Article_154.pdf

¹³ DeBeck K, Kerr T, Bird L, Zhang R, Marsh D, Tyndall M, et al. Injection drug use cessation and use of North America's first medically supervised safer injecting facility. *Drug and alcohol dependence*. 2011; 113(2):172-6.

¹⁴ Petrar S, Kerr T, Tyndall MW, Zhang R, Montaner JS, Wood E. Injection drug users' perceptions regarding use of a medically supervised safer injecting facility. *Addictive behaviors*. 2007; 32(5):1088-93.

¹⁵ <https://www.toronto.ca/community-people/health-wellness-care/health-inspections-monitoring/toronto-overdose-information-system/>

¹⁶ <https://ottawacitizen.com/opinion/columnists/opinion-preventing-drug-overdoses-is-just-the-first-step>

Evidence from the literature:

- Of people living within 500 m of Vancouver's Insite program, overdose deaths decreased by 35%¹⁷.

3.3 SUPERVISED CONSUMPTION SERVICES IMPROVE COMMUNITY SAFETY AND REDUCE PUBLIC USE

Supervised consumption services help bring stability to the community by improving public order and reducing the number of injections taking place in public, in alley ways and parks.

Evidence from the literature:

- There is no evidence to suggest that supervised consumption services increase drug use¹⁸, theft or crime¹⁹.
- SCS sites significantly reduce:
 - the number of people publicly injecting drugs,
 - publicly discarding syringes, injection related litter²⁰

Evidence from Ontario:

- Crime has increased in the Moss Park area since at least 2014, long before any injection sites, according to Toronto Police Service data. In 2014, police reported 623 offences, compared to 713 in 2016. The majority of offences were assaults. But in 2017, the same year supervised injection sites began opening in the area, the number of offences dropped to 680, with fewer assaults and robberies.²¹
- Some concerns related to improperly discarded needles have also been improved through the services of these sites. For example in Ottawa, 96% of recovered needles were retrieved from harm reduction partners and needle drop boxes. Of note, the total number of needles recovered through drop boxes alone has increased by approximately 18% compared to 2016. This is consistent with evidence that demonstrates that harm reduction programs, such as supervised injections services, help reduce the number of discarded needles in the community²²

¹⁷ <http://www.cfp.ca/content/63/11/866>

¹⁸ Kerr T, Tyndall M, Zhang R, Lai C, Montaner J, Wood E. Circumstances of first injection among illicit drug users accessing a medically supervised safer injection facility. *American Journal of Public Health*, 2007; 97(7): 1228-1230.

¹⁹ Wood E., et al. (2006). Impact of a medically supervised safer injecting facility on drug dealing and other drug related crime. *Substance Abuse Treatment, Prevention, and Policy*, 1(1): 13

²⁰ Wood, E., Kerr, T., Small, W., Li, K., Marsh, D., Montaner, J., & Tyndall, M. (2004). Changes in public order after the opening of a medically supervised safer injecting facility for illicit injection drug users. *Canadian Medical Association Journal*, 171(7), 731-734.

²¹ <https://www.thestar.com/news/gta/2018/08/15/do-supervised-injection-sites-bring-crime-and-disorder-advocates-and-residents-disagree.html>

²² http://www.ottawapublichealth.ca/en/public-health-topics/resources/Documents/enhanced_harm_reduction_results_2016_en.pdf

- 97% of clients surveyed by Ottawa SCS reported that because they have been accessing OPH's SIS, they find that they inject in public or inject alone less often.²³
- Some community members have voiced concerns about seeing individuals waiting outside of the sites for services. Typically this is caused when services are at capacity, and is a demonstration of the demand for services.

3.4 SUPERVISED CONSUMPTION SERVICES PREVENT THE TRANSMISSION OF INFECTIOUS DISEASES

By enabling access to clean needles and other harm reduction materials, SCSs and OPSs greatly reduce the spread of infectious diseases.

Evidence from Ontario:

- Infectious disease prevalence is strongly related to injection drug use. In London, more than half of people diagnosed with Hepatitis C in 2016 and 2017 had experience with injection drug use. Similarly, more than 70% of those diagnosed with HIV had experience with injection drug use.²⁴

Evidence from the literature:

- According to a report from the Ontario HIV Treatment Network (OHTN), the annual cost savings as a result of HIV infections prevented at Insite are estimated to be between \$2.85 and \$8.55 million²⁵.
- Studies show that SCSs contributed to a decrease in HIV infections²⁶.

4. A WHOLE OF COMMUNITY APPROACH

Many community partners are supportive of the need and value of supervised consumption services. Community consultation is a required process in establishing an SCS.

"The board of Hamilton's Downtown BIA supports a supervised injection site," executive director Kerry Jarvi said²⁷. In Vancouver, which has offered supervised consumption services since 2003, the BIA CEO

²³ <file:///C:/Users/joshuam/Downloads/TOSCA-2012-SCSNeedsAssessmentFinalReport.pdf>

²⁴ Middlesex London Health Unit and Regional HIV/AIDS Connection Supervised Consumption Facility Application

²⁵ <http://www.ohtn.on.ca/rapid-response-83-supervised-injection/>

²⁶ <http://www.cfp.ca/content/63/11/866>

²⁷ <https://www.thespec.com/news-story/8583317-injection-site-woes-willing-landlords-wanted/>

Charles Gauthier has said “the Downtown Vancouver Business Improvement Association is proud to officially lend our support to supervised consumption sites in the downtown core.”²⁸

“We cannot arrest our way out of addictions. We cannot arrest our way out of this health crisis.”

- Chief Murray Rodd, Peterborough Police Service

Peterborough Police Service chief Murray Rodd says officers have seen first-hand the devastating impact and tragedy that opioids and more recently, fentanyl, has had on the community. “We cannot arrest our way out of addictions,” said Rodd. “We cannot arrest our way out of this health crisis. Our service remains focused on those who profit from the illicit drug trade and not those who are victims of it. Until we can discover ways to get at the root cause of the issue community agencies will continue to work together and support the cause of providing safe spaces that have a medical intervention component for those with addictions.”²⁹

In 2017, Ottawa Public Health employees went door-to-door within the surrounding area of the safe injection site at 179 Clarence to collect the opinions of neighboring residents. Residents in the surrounding neighbourhood have expressed diverse opinions regarding the impact of OPH opening an interim SIS at 179 Clarence. Of the 59 residents who completed the survey, the majority were supportive of OPH’s interim SIS.³⁰

5. WORKING TOGETHER TO IMPROVE OUTCOMES FOR PEOPLE USING SUBSTANCES

Without the proper health service response, 2018 is projected to follow the trend of increasing overdose deaths. To approach this crisis, an integrated and intensive public health approach must incorporate a continuum of strategies and treatment options, of which supervised consumption services are a critical piece. Supervised consumption services offer an intensive and acute response directed at a marginalized population. As our evidence review demonstrates, these services have quantifiable benefits to a variety of stakeholders. Supervised consumption services connect people to treatment, reduce the spread of harmful disease, improve community safety and ultimately save lives.

Continued efforts to engage and educate the community regarding the purpose and outcomes of these sites and the severity of opioids crisis is critical. Both SCS and OPS sites in Ontario are supportive and

²⁸ <https://www.vancourier.com/news/vancouver-business-association-lends-support-to-fighting-opioid-crisis-1.23299006>

²⁹ <https://globalnews.ca/news/4062883/peterborough-temporary-safe-injection-site/>

³⁰ http://www.ottawapublichealth.ca/en/public-health-topics/resources/Documents/enhanced_harm_reduction_results_2016_en.pdf

actively involved in the evaluation of their services and refining their services to better meet the needs of the people they serve in their community.

“The opposite of addiction is connection and people who are struggling with addiction are often isolated. We need to make sure people know they’re worth saving . . . that they mean something to us . . . these are human lives that we’re talking about. If we don’t have these services, people will struggle to get to treatment.”

- Sonja Burke, Director of Counterpoint Harm Reduction Services, London Overdose Prevention Site

These initiatives are one element of what needs to be a comprehensive plan to address addictions and reduce deaths resulting from opioid overdose. Investments are needed to enhance capacity in Ontario’s mental health and addiction system, to ensure that individuals and families can access the treatment, services and supports they need to live well in the community.

We look forward to the Minister’s decision and thank the government for their focus on building a comprehensive mental health and addictions system across the continuum.