

ACT Position Statement: Harm Reduction Services for People Who Inject Drugs (August 2017)

Introduction to issue:

People who inject drugs are more vulnerable to acquiring hepatitis C and HIV. In Toronto, people who inject drugs have also been dying from overdoses at an increasing rate. Harm reduction distribution and establishing integrated supervised injection services are effective public health tools for reducing the spread of HIV and hepatitis C, and preventing unnecessary deaths from overdoses. For these reasons, ACT fully supports Toronto establishing comprehensive harm reduction services that protect people who inject drugs and affirms their right to healthcare services.

Background + context:

In 1989, and in the face of ardent opposition from the police, Toronto Public Health began offering unused injection drug gear as part of a new needle distribution program called the Works. The program was initially set up in direct response to high rates of HIV and AIDS among people who inject drugs.

Toronto Public Health's Harm Reduction Distribution Program has since expanded to cover many areas of the city and has been highly effective at preventing HIV from spreading. It has been found that the prevalence of HIV among people who inject drugs is approximately 3%, one of the lowest among major North American cities. However, upwards of 70% of people who inject drugs in Toronto were living with hepatitis C.¹

In 2012, St. Michael's Hospital and the University of Toronto published the results of a feasibility study into supervised consumption sites in Toronto. The authors recommended that Toronto "would benefit from implementation of supervised injection facilities" and that "the optimal model" for such sites was a "fixed facility that is integrated within an existing organization."² In 2017, the City of Toronto Public Health

Department approved three supervised injection sites to be located at Public Health (The Works), Queen West-Central Toronto Community Health Centre, and South Riverdale Community Health Centre. These agencies are three of the busiest needle distribution programs in Toronto and together they distribute almost 75% of sterile needles in Toronto. ³

Between 2004 and 2015 (the most recent figures available), deaths resulting from overdoses increased by 73%, from 146 to 253. When looking specifically at deaths from accidental overdose, the numbers have jumped by more than 149%, going from 82 in 2004 to 204 fatalities in 2015. The reason for such a rise is understood to be an increase in the prevalence of narcotics such as fentanyl and heroin. ⁴

Toronto's Overdose Action Plan (2017) outlines 10 recommendations, two of which are related to the work of ACT; Recommendation #2: Overdose Protocols and Naloxone, and Recommendation #9: Social Factors. ACT is committed to meeting these recommendations through its policies and procedures, resources, and by training its staff.

Conclusion:

ACT supports equitable access to life-saving health services for all people living with and affected by HIV and AIDS, including people who inject drugs. We acknowledge that some people who inject substances may not be ready, willing, or able to begin treatment to reduce their use. For this, we encourage all proposed and future supervised injection sites to offer a range of supports to help care for people who use drugs who struggle with addiction, HIV and AIDS, hepatitis C, mental health challenges, and other physical sickness.

ACT believes in the benefit of comprehensive harm reduction strategies for all groups living at increased risk for HIV and hepatitis C, including safer sex tools, harm reduction distribution, safe injection sites and procedures for responding to an overdose.

1. <http://www.stmichaelshospital.com/pdf/research/SMH-TOSCA-report.pdf>. Page 11

2. <http://www.stmichaelshospital.com/pdf/research/SMH-TOSCA-report.pdf>. Page 14

3. <https://www1.toronto.ca/wps/portal/contentonly?vgnextoid=f998163207663510VgnVCM10000071d60f89RCRD>

4. Toronto Public Health, *Toronto Overdose Action Plan: Prevention and Response* (March 2017) page 4.