



Supervised Injection Facilities for a Safe and Healthy New York

What Are Supervised Injection Facilities?

Supervised injection facilities (SIFs) are controlled health care settings where people can more safely inject drugs under clinical supervision and receive health care, counseling, and referrals to health and social services, including drug treatment. SIFs have been rigorously studied and found to reduce the spread of infectious disease, overdose deaths, and improperly discarded injection equipment, and to increase public order, access to drug treatment and other services, and to save taxpayer money.

Also called safer injection sites, drug consumption rooms, and supervised injecting centers, SIFs are designed to reduce the health and public order issues often associated with public injection by providing a space for people to inject pre-obtained drugs in a hygienic environment with access to sterile injecting equipment and under the supervision of trained medical staff.

There are at least 98 SIFs operating in 66 cities around the world in ten countries (Switzerland, Germany, the Netherlands, Norway, Luxembourg, Spain, Denmark, Greece, Australia and Canada) – but none in the United States.¹

Numerous peer-reviewed scientific studies have proven the positive impacts of SIFs.² These benefits include:

- Increased access to drug treatment, especially among people who distrust the treatment system and are unlikely to seek treatment on their own.
- Reduced public disorder, reduced public injecting, and increased public safety.
- Attracting and retaining a high risk population of people who inject drugs, who are at heightened risk for infectious disease and overdose.
- Reduced HIV and Hepatitis C risk behavior (e.g. syringe and other injection equipment sharing, unsafe sex).
- Reducing the prevalence and harms of bacterial infections (e.g. staph infection, endocarditis).
- Successfully managing overdoses and reducing overdose death rates.
- Cost savings resulting from reduced disease, overdoses, and need for emergency medical services, and increased preventive healthcare and drug treatment utilization.
- Not increasing community drug use.
- Not increasing initiation into injection drug use.
- Not increasing drug-related crime.

Why NYC Needs SIFs

New York City has been the epicenter of injection drug use in the U.S. for decades. Coupled with an exploding homelessness crisis in recent years – when for the first time the city’s shelter system exceeded 60,000 people on any given night³ – public injection drug use is an increasing problem.

Through a recent survey by the Injection Drug Users Health Alliance (IDUHA), nearly half of syringe exchange participants reported having to inject in a public place like a park or building stairwell. Moreover, 60% had recently injected in semi-public locations, often restaurant and other public restrooms. Homeless people were more than 9 times more likely to report public injecting than those who were stably housed.⁴

Public injection drug use in NYC is leading to many negative consequences. The IDUHA study found that public injectors are twice as likely to have overdosed in the past year compared to injection drug users who do not inject publicly. They are twice as likely to not have a consistent supply of new, sterile injection equipment and more than 4 times more likely to re-use injection equipment, which can lead to permanent vein damage and HIV, viral hepatitis, and other infectious disease transmission.⁵⁻⁶

In relation to broader public safety and order, a recent study⁷ by the National Research and Development Institutes and BOOM!Health interviewed managers of businesses with public bathroom facilities. Fifty-eight percent reported having encountered people using drugs in their bathrooms in the previous six months, 34% had encountered discarded syringes, and 25% had called 911 because of drug use. Moreover, 44% had received customer complaints.

These factors and others, including public safety and order and the high cost of providing preventable medical care to people harmed through public injection drug use, are what led scores of other cities to adopt SIFs as a solution.

Insite Vancouver

Vancouver’s SIF, Insite, has been the most extensively studied SIF in the world, with more than two dozen peer-reviewed papers now published that examine its effects on a range of variables, from retention to treatment referrals to cost-effectiveness.⁸ These reports are in line with reviews of the 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.⁹

Insite clients have been found to be 30% more likely to use detoxification services than other injection drug users in Vancouver.¹⁰ Several studies have found Insite to be cost-effective,¹¹ with one cost-benefit analysis estimating that the facility results in a net savings of more than \$6 million per year.¹²

Insite also directly saves lives. A study published in the prestigious journal *The Lancet* found that the fatal overdose rate in the neighborhood around Insite decreased by 35% percent since it began operating in 2003, while the rest of the city experienced a much smaller reduction of 9 percent.¹³

A survey of more than 1,000 people utilizing Insite found that 75% reported changing their injecting practices as a result of using the facility. Among these individuals, 80% indicated that the SIF had resulted in less rushed injecting, 71% indicated that the SIF had led to less outdoor injecting, and 56% reported less unsafe syringe disposal.¹⁴ Overall, as a 2006 evaluation concluded, the SIF has produced a “large number of health and community benefits...and no indications of community or health- related harms.”¹⁵

Recommendations

SIFs are a vital part of a comprehensive public health approach to reducing the harms of drug use. New York City and State governments should explore the implementation of authorized supervised injection facilities staffed with health professionals to reduce overdose deaths, increase access to health services including drug treatment, and further expand access to safer injection equipment to prevent the transmission of HIV, hepatitis C, and other infectious disease.

SIFs, of course, cannot prevent all risky drug use or related harms. However, evidence demonstrates that they can be remarkably effective and cost-effective at improving the lives of people who inject drugs and the safety and health of their communities.

References

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⁴ Injection Drug Users Health Alliance. 2015a. *Public Injection Drug Use in New York City*.

⁵ Injection Drug Users Health Alliance. 2015b. *Syringe Access in New York City*.

⁶ Injection Drug Users Health Alliance. 2015a.

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⁸ Semaan et al.; and British Columbia Centre for Excellence in HIV/AIDS, Findings from the Evaluation of Vancouver's Pilot Medically Supervised Safer Injection Facility – Insite (2009), http://uhri.cfenet.ubc.ca/images/Documents/insite_report-eng.pdf.

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¹² Andresen and Boyd 2010.

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¹⁵ Evan Wood et al., "Summary of findings from the evaluation of a pilot medically supervised safer injecting facility," *Canadian Medical Association Journal* 175 (2006):1399–404.