



Background

Supervised Consumption Facilities (SCFs) are spaces in which people are legally allowed to administer pre-obtained illicit drugs under medical supervision and in a hygienic environment. Most SCFs only allow drug injection (i.e., safe injection sites or supervised injection facilities) but some allow drug smoking (i.e., safe/supervised smoking sites/facilities). SCFs are often part of a complement of harm reduction services including education, needle exchange, medical care, social work, addiction care, counselling, and peer support.^{1,2} SCFs promote safer injection conditions (e.g., decreased equipment sharing, decreased public injecting), facilitate access to health and addiction care, and reduce overdose rates. SCFs are not associated with negative outcomes such as increased injection drug use, drug trafficking or crime in the surrounding neighbourhood.²

The Status of SCFs in Canada and Ontario

Since 1986, over 90 SCFs have operated in Canada, Australia, and Europe, mostly in Europe.³ There are currently two SCFs in Canada, both in Vancouver: InSite - North America's first legal SCF, opened in 2003 - and the Dr. Peter Centre - operational since 2002 but granted permission to operate in 2016. Although there are currently no SCFs in Ontario, feasibility studies have been or are currently being carried out in Toronto, Ottawa, London, Thunder Bay, and Hamilton.^{1,4,5}

Feasibility of SCFs in Ontario

The Toronto and Ottawa feasibility study shows that demand for SCFs is high, especially by people who are most at risk for harms from drug use. In both Toronto and Ottawa, a few smaller facilities (3 in Toronto, 2 in Ottawa) are recommended over a large, centralized facility, all integrated into existing harm reduction organizations.¹ It is projected that these SCFs would reach 30% of PUD in Toronto and 58% in Ottawa.⁶ Mathematical modelling shows that each SCF would prevent 2-3 HIV infections and 15-20 hepatitis C infection per year in Toronto and 6-10 HIV and 20-35 hepatitis C infections per year in Ottawa.^{1,6} The first SCF in Toronto and Ottawa would confer net savings of \$9.6 and \$0.8 million, respectively, over 20 years, primarily due to averted hepatitis C infections.^{1,6}

Public Opinion about SCFs in Ontario

Public support for supervised injection sites increased between 2003 and 2009 (13% vs. 27%) but public support for supervised smoking facilities remains lower than for

supervised injecting facilities (20% vs. 28%).^{7,8} Despite growing approval, implementation remains controversial; community stakeholders have expressed concerns about SCFs' locations, exacerbation of drug problems, and diversion of resources from other drug prevention or treatment efforts.⁹

The Future of SCFs in Ontario

In Canada, an SCF is permitted to operate once it is granted an exemption to the Controlled Drugs and Substances Act.¹⁰ However, exemptions are only to be granted in "exceptional circumstances" and only after meeting criteria that critics deem to be overly onerous.^{10,11} The federal government has recently signaled that it is considering legislative changes that will remove these undue barriers to opening SCFs.¹² In 2016, the Ottawa and Toronto Boards of Health voted to support the creation of SCFs in their cities.^{13,14} In December 2016, Toronto applied for exemptions to the Controlled Drugs and Substances Act for 3 SCFs.¹⁵

References

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