



Safe injecting facilities: reducing harm and improving public safety and amenity

Professor Robert Power

Principal for Disease Prevention; Centre for International Health, Burnet Institute, Melbourne and CREIDU Chief Investigator.

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Key messages

- International evidence supports Safe Injecting Facilities (SIFs) as viable harm reduction interventions.
- SIFs improve individual and public health (reduced rates of overdose, risky injecting behaviours and HIV infection).
- SIFs have a positive impact on public amenity (reduced public injecting and crime).
- SIFs should be seen as part of a comprehensive harm reduction approach.
- SIFs lead to a reduction in potential healthcare costs.
- SIFs improve access to healthcare and treatment services, especially for the most marginalised.
- SIFs provide a vehicle for referral to drug treatment agencies.
- To be viable, SIFs need strong political and community support.

- SIFs are valuable where there is public concern over drug use, open drug markets and overdose.
- SIFs can be situated where drug users congregate, or mobile SIFs are also an option.
- SIFs can be integrated into existing services, but need adequate ongoing funding.

What is the issue?

The link between injecting with unsterile equipment and the spread of HIV, hepatitis C and other blood-borne viruses is well established. SIFs provide safer, supervised locations for individuals to inject drugs. More than 90 sites operate worldwide and the success of SIFs in reducing harm from injecting drug use is widely documented.

Many social and structural factors have contributed to the establishment of SIFs. These include the presence of street based drug scenes; high incidence rates of blood-borne virus; public amenity issues related to public injecting and inappropriately discarded injecting equipment; and a high concentration of street-based people who inject drugs (PWID) in the area. Where these factors are present, SIFs have been considered a viable intervention to help reduce harms experienced by PWID and improve public amenity in the surrounding community.

What is the evidence?

SIFs operate in environments with high rates of public injecting, with the prime aim of alleviating the risk of injecting-related harms to PWID. Research and evaluation has demonstrated that SIFs have a range of benefits for both SIF clients and the broader community. Those benefits include:

Reduced overdose

A key benefit of SIFs is the reduced occurrence of fatal overdose given that staff are available at all times. There has been no onsite fatal overdose reported at any SIF. Reductions in non-fatal overdose numbers and severity in the community have also been reported. Around 60% of a sample of PWID reported in 2010 that they had experienced an overdose in their lifetime. Previous research suggests that many of these occur in public places.

Safer Injecting

The ability of SIF staff to provide and observe the use of sterile injecting equipment may directly contribute to an increase in safer using practices. A reduction in equipment sharing has been observed in SIFs, contributing to reduced rates of blood-borne virus (BBV) transmission and injecting-related injury and disease (IRID). Disease surveillance statistics may not immediately register this effect. However, a reduction in HIV risk behaviours, a reduction or no increase in hepatitis C virus (HCV) and hepatitis B virus (HBV) transmission, and a reduction in IRID incidence have been reported in locations where SIFs are situated.

Public Amenity

Public injecting is associated with reduced public amenity, as it can lead to inappropriately discarded injecting equipment and violence and loitering in an area. Improved public amenity and gains in public safety have also been attributed to SIFs. They have been unequivocally associated with reduced public injecting and publicly discarded injecting equipment.

Access to health services and public health

PWID require treatment for complex health issues, such as BBVs and IRID, and experience barriers to accessing care. Overall, SIFs improve access to healthcare and treatment for clients. This is achieved through the development of trusting relationships with staff and by providing appropriately delivered on-site services. Further gains are made through SIFs attracting marginalised clients and nursing staff providing referral to care. SIFs have been shown to improve psychosocial functioning amongst clients.

SIFs have an important role to play in decreasing demand for illicit drugs in the community through providing referral to drug treatment. An increase in treatment referrals and uptake following the implementation of SIFs has been widely reported.

In terms of public health, SIFs have been found to lead to a reduction in healthcare costs due to early intervention in overdose and IRID. On-site IRID and overdose response reduces the burden on other health services, particularly hospitals and ambulance. A cost-benefit analysis predicted that if Insite, the SIF in Vancouver, Canada, was not operating there would be an additional 83 new HIV infections annually. Averting this many cases was estimated to reduce lifetime HIV-related medical care costs by up to CAD\$17.6 million, a figure almost six times the annual cost of operating the SIF.

Further information:

Resources

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