

Access to Supervised Injection Services

Can we count on your support to save lives from overdose deaths by increasing access to supervised injection services (SIS) through: provincial funding for proposed SIS in Ottawa, Toronto, and any other SIS needed across the province as part of existing health services?

Can we also count on your support to encourage your federal counterparts to repeal federal Bill C-2, *Respect for Communities Act*, because it hinders treatment of SIS as an essential health service?

Record numbers of Ontarians continue to die without access to supervised injection services (SIS). Fentanyl is now the leading cause of opioid deaths across the province much like the alarming trends witnessed in British Columbia and Alberta.¹ Toronto Public Health confirms a 77 per cent increase in reported deaths from drug overdose from 146 in 2004 to 258 in 2014, the highest annual number in Toronto to date.² The evidence is clear that SIS are essential health services that help to save lives and improve the health of communities.³ Safer spaces where people can inject previously obtained drugs with access to nursing services prevents deaths from overdoses, decreases infections, and enables access to other critical health and social services.⁴

On June 21, 2016, the Ottawa Board of Health voted in favour of supporting proposals from community health centres to set up SIS services as recommended by Ottawa's Medical Officer of Health.⁵ Work is now underway to complete the federal exemption application requirements under section 56.1(2) of the *Controlled Drugs and Substances Act*. On July 14, 2016 Toronto City Council approved a Toronto Board of Health proposal in support of three SIS locations at South Riverdale Community Health Centre, Queen West--Central Toronto Community Health Centre, and the Works program (Toronto Public Health).⁶ These well-respected health organizations already provide harm reduction services for the highly marginalized people they serve in their communities. London⁷ and Thunder Bay⁸ are in the process of doing studies to explore the need for and feasibility of SIS in their communities.^{9 10}

In addition to asking for provincial funding for SIS as part of existing health services, RNAO asks that you advocate for the repeal of the federal *Respect for Communities Act*. This piece of legislation imposes unnecessary hurdles making it as difficult as possible for new SIS to open, despite the compelling public health evidence and human rights concerns.^{11 12} Public education and engagement can be beneficial to helping the public understand the rationale for SIS. However, as evident from ongoing opposition to the opening of new homeless shelters,^{13 14} some forms of public consultation are damaging by further stigmatizing people who already suffer from discrimination.

An Ontarian suffering from a heart attack or a broken leg can access health services based on need. Those with addiction and mental health challenges should be able to do the same. These kinds of health services are basic human rights, especially among vulnerable populations, and should not be subject to politicized processes that ignore evidence.¹⁵

References:

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- 4 Supervised Injection Services Working Group (2013). Supervised Injection Services Toolkit. Toronto: Toronto Drug Strategy. <http://www.toronto.ca/legdocs/mmis/2013/hl/bgrd/backgroundfile-59914.pdf>
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- 6 Toronto City Council, HL 13.2 Implementing Supervised Injection Services in Toronto, July 14, 2016. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.HL13.2>
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