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Many of the people who are injecting would use a space inside that feels safe – healthier for them and better for communities.

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The model is not a storefront, stand-alone facility. Rather, it adds one more health service to reduce harm and can connect people with social supports, primary health care, counselling and addiction treatment programs.

What will the supervised injection services look like?

In each agency space will be set aside for:

- A waiting and intake space.
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Staff teams will include:

- A nurse.
- A social worker/addiction worker.
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Improved safety and health for individuals and communities

Research from around the world where supervised injection services are offered points to:

- Fewer deaths through overdose – To date, no one has died while using supervised injection services.
- Increased uptake into primary care and treatment.
- Increased community safety – One example comes from Sydney, Australia. Five years after the services began, local business owners reported a significant decrease in public injecting and publicly discarded injection equipment. Similar research comes from the Vancouver models.
- Decreased neighbourhood crime – Studies show that incidents such as thefts and vehicle break-ins tend to go down after supervised injection services are established.

Maintaining the status quo has a major impact on our healthcare system

From 2015 data:

- 100 new cases of HIV in Edmonton – Lifetime treatment costs at $380,000/person.
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Does offering supervised injection services encourage people to experiment with, and use, drugs?

The people for whom supervised injection services are designed are already dealing with problematic substance use. They are usually homeless and often resort to injecting in public places because they don’t have the option of a safe environment.

Will medically supervised injection services eliminate existing concerns related to ‘social disorder’ in the inner city?

Research shows they will reduce social disorder by reducing public injecting in the vicinity. They are one part of a comprehensive approach to promote the health and social well-being of everyone in Edmonton’s inner city.

Instead of spending money on supervised injection services, shouldn’t we put all our resources into prevention and treatment?

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the facts

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Will introducing supervised injection create a ‘honey pot’ effect, attracting people from all over the city to inject?

The supervised injection services are set up for residents who usually inject in public: those who can inject in their own homes are less likely to come in. In the Edmonton study, individuals said they would travel up to one kilometre to use the service. Research in Vancouver showed that people will walk up to ten blocks to use supervised injection services.

Will people who sell drugs come and target those who are there to use medically supervised injection services?

Because medically supervised injection will be integrated within existing facilities used by community members with a variety of needs, the service individuals are there to use won’t be obvious. Enforcement related to drug dealing remains part of a comprehensive strategy to address substance issues.
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The need

Injection drug use is increasing in Edmonton and many of the people with problematic substance use are homeless. That means that injection in public places is also rising. Injection drugs in public places creates a high risk of disease transmission, infection, and overdose, and it has a negative effect in neighbourhoods.

In 2014, 320 people in Edmonton’s inner city were surveyed about their experiences over the previous six months. We found:
- 80% had injected in public.
- 23% had one or more non-fatal overdoses.
- 17% reported borrowing used syringes and 19% reported lending used syringes.
- 47% had difficulty accessing sterile syringes; 75% cited operating hours as the main access barrier.
- 85% had unmet care needs for mental health or substance use problems.
- 91% of those who injected drugs were willing to attend supervised injection services.

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 AMSISE – our coalition members

- AAWEAR (People who use drugs)
- Addiction and Mental Health, Alberta Health
- Addiction and Mental Health, Alberta Health Services
- Boyle McCauley Health Centre
- Boyle Street Community Services
- Community Engagement, Faculty of Medicine and Dentistry, University of Alberta
- Family and Community Supports, Housing and Homelessness, Edmonton Fire Rescue Services, City of Edmonton
- Edmonton Opioid Dependency Program, Alberta Health Services
- Edmonton Police Service
- Edmonton STI Clinic, Alberta Health Services
- Faculty of Nursing, University of Alberta
- George Spady Society
- HIV Edmonton
- Kairos House, Catholic Social Services
- Medical Officers of Health, Alberta Health Services
- Moms Stop the Harm
- Northern Alberta HIV Program
- REACH
- Royal Alexandra Hospital, Alberta Health Services
- School of Public Health, University of Alberta
- Streetworks

Access to Medically Supervised Injection Services Edmonton (AMSISE)

- Integrating services into agencies where people need them the most – for the safety and health of individuals and communities
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