



# Drug consumption rooms

## *Global State of Harm Reduction 2018 briefing*

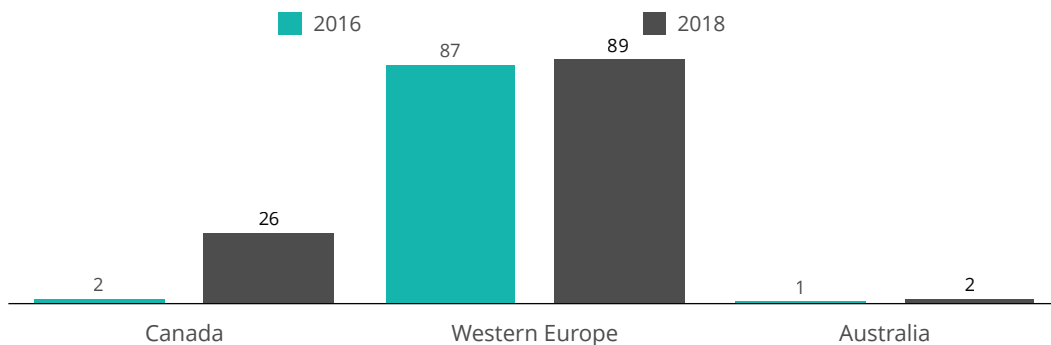
Drug consumption rooms (DCRs)<sup>1</sup> are professionally supervised healthcare facilities where people can consume illicit drugs in a safe and non-judgmental environment.

Evidence and experience shows that DCRs:

- Reduce high-risk injecting behaviour associated with HIV and viral hepatitis transmission
- Reduce the incidence of overdose, and facilitate the use of naloxone when overdose does occur
- Attract populations who may use drugs in risky and unhygienic conditions
- Reduce public injecting
- Facilitate links between people who use drugs and health and social services, such as HIV and viral hepatitis testing, housing and employment support and opioid substitution therapy.

DCRs form part of a comprehensive harm reduction response to drug use, along with other essential services such as needle and syringe programmes, opioid substitution therapy, drug-checking and blood-borne disease testing and treatment.

Chart 1: Number of DCRs in the world



DCRs now operate in 11 countries around the world; however, these are located in just three world regions. Unsanctioned DCRs are reported to be operating in Latin America and North Africa, but without state-approval the people accessing these facilities – and those running them – remain at-risk of criminalisation.

Belgium is the only new country to formally establish a DCR since 2016. In that time, Australia, Canada, France, Spain, Switzerland and Norway have also opened new sites, and at least three further countries are anticipated to open new facilities in 2019 (Ireland, Mexico and Portugal). In total, 117 sites operate as of December 2018, compared with 90 in 2016. The increase since 2016 is mainly due to 24 new sites opening in Canada.

**RECOMMENDATION:** Governments should ensure policy and funding environments are conducive to the operation of drug consumption rooms, so that there is a safe and non-judgmental space for people who use drugs.

<sup>1</sup> Also known as safe injecting sites, supervised injection facilities and overdose prevention sites, among others.





## RESTRICTIONS ON TYPES OF DRUGS USED IN DCRS

In several countries, access to DCRs is restricted for people who inhale drugs or inject drugs other than opioids. Even where formal restrictions are not in place, there is sometimes a perception that these services are primarily targeted at people who inject opioids.

There are exceptions to this. In Luxembourg, the Netherlands and Switzerland, all DCRs permit the consumption of drugs through inhalation, as do some facilities in Spain and Canada. In Australia, 20% of people using the Sydney DCR inject methamphetamine. By making these facilities more widely accessible, the countries ensure that the benefits of DCRs are available to as many people as possible.

**RECOMMENDATION:** Governments should ensure that drug consumption rooms are able to provide spaces for people who inhale drugs or inject drugs other than opioids, as well as those who inject opioids.

## LIMITS ON ACCESS TO DCRS FOR CERTAIN POPULATIONS

Civil society groups have raised concerns in several countries about the accessibility of DCRs to certain groups of people who use drugs; for example, people who are homeless, young people, migrants, people in rural communities and women. Young people and migrants are formally excluded from accessing DCRs by regulations in the Netherlands, among other places, as are people on opioid substitution therapy in Luxembourg.

Regional variation in availability of DCRs also presents a barrier to access for people who use drugs, particularly those in rural areas. DCRs are frequently only available in major cities or are limited to certain regions, such as in Germany and Spain. Mobile services, like those in Berlin, Germany, widen access to drug consumption rooms to those in underserved areas.

Women who use drugs face unique challenges when accessing drug consumption rooms, related to gender-based stigma, discrimination and violence. In Vancouver, Canada, a woman-only overdose prevention site called Sister Space opened in 2018 and is the first female-only space in the country where women can access needle and syringe programmes and overdose prevention. Unsanctioned sites in Latin America and North Africa also ensure women-only spaces.

**RECOMMENDATION:** Governments should ensure that drug consumption rooms are as widely accessible as possible, including ensuring access for migrants, women, homeless people and young people.

## DCRS AS A LINKAGE TO CARE

By creating a non-judgemental environment in which people can use drugs, DCRs can provide a first point of contact between people who use drugs and health and social services. For example, in many DCRs people can access HIV and viral hepatitis testing and be linked to further care without the stigma sometimes experienced in some medical environments. To address the specific dangers posed by fentanyl in the North American opioid market, DCRs in Canada have also introduced fentanyl-testing strips.

In some cases, DCRs have expanded beyond their central roles, to address wider harms related to drug use, stigmatisation and criminalisation. In the Netherlands, some DCRs provide clients with access to social workers, support with administrative issues, referrals to mental and physical health care, and housing and employment advice. This is supplemented with warm meals, tea and coffee, showers and recreational activities, and low-threshold work opportunities such as cooking, cleaning and bicycle repair.

**RECOMMENDATION:** Governments and DCRs should continue to innovate to provide people who use drugs with integrated services tailored to their needs and that address wider harms related to drug use and drug policies.