

WHA! Statement re: Closing of Ontario Supervised Consumption Sites



Following the announcement on August 19th, 2024 from Premier Doug Ford and Minister of Health Sylvia Jones about the closure of 10 supervised consumption sites, **WHA! unequivocally stands in solidarity with those who will be affected by these decisions.**

Supervised consumption sites align with WHAI values and the prioritized areas of our work. They provide crucially needed spaces for people to use substances, helping to prevent overdose deaths. They also offer sterile injecting equipment, which reduces the rates of HIV and Hepatitis C infections, and linkages to thoughtful and wholistic models of care. These closures are not supported by evidence and do not align with research findings on harm reduction, health, community safety or drug policy. WHAI is particularly worried about the impact these cuts will have on cis and Trans women, as well as 2-Spirit and Non-Binary individuals in Ontario who rely on the essential and life-saving services provided by these low-barrier sites.

- ▶ A national report “Holding and Untangling – A Lived Experience Lens: Women & Gender Expansive Populations’ Access to Supervised Consumption / Overdose Prevention Site” by the Dr. Peter Centre found that 74.3% of respondents felt comfortable accessing safer consumption sites. Many of these sites also serve marginalized communities, including sex workers and people from queer and racialized backgrounds¹. Closing these sites will further isolate these already marginalized groups.
- ▶ WHAI aims to address the inequalities faced by priority populations, such as Black and Indigenous women, who are at a higher risk for HIV and often receive inequitable care after opioid-related incidents. For example, research shows that ACB women are less likely to be administered naloxone or be treated in a hospital following opioid-related poisoning². Safe consumption sites are a critical service in working to remedy these realities of health inequity.
- ▶ In WHAI’s *Collective Action Community Change* report, a report based on community consultations with 501 women who face systemic and structural health inequities across Ontario, 42% of those who participated identified as someone who uses drugs or substances³, which has led WHAI to make people who use drugs a priority population in our work to address health inequities.

All of these pieces of research demonstrate the need for equitable and accessible overdose prevention and harm reduction services across Ontario and this work is a fundamental priority for WHAI work.

WHA! is committed to collaborating with communities and allies to address this impending crisis. As a member or community partner of WHAI, it is essential for us to work together provincially and locally to build community awareness and capacity to respond to the government announcement, and to call on all levels of government to reverse this decision.

You can engage in this work by:

- Joining in and supporting province wide actions to raise awareness about supervised consumption and harm reduction services and resisting cuts to these services.
- Partnering with local harm reduction and overdose prevention teams to promote the importance of these services, especially for gender-inclusive, low-barrier access.
- Participating in community meetings focused on overdose prevention and harm reduction to show support and enhance local advocacy efforts.
- Educating community stakeholders about the benefits of supervised consumption and harm reduction services, utilizing resources like WHAI’s Women and Harm Reduction Toolkit available on the WHAI website.
- Collaborating with local groups who support the closure of these sites to foster understanding of drug use, harm reduction, and overdose prevention.
- Promoting community safety through evidence-based practices, drawing on local and provincial public health data about overdose emergency calls and deaths.
- Working with community members who use drugs to enhance community education and create connections to safe, trauma-informed, culturally inclusive care.
- Supporting the expansion of overdose emergency response training including naloxone training.

¹ Kaminski N, Carl E, Swann S, Smith C, Smoke A, Gyan-Mante A, D’Alessio H, Mizon L, Rex A, Rudzinski K, and Ranger C. Holding and Untangling - A Lived Experience Lens: Women & Gender Expansive Populations’ Access to Supervised Consumption/Overdose Prevention Sites. Report prepared in collaboration with the Canadian Association of People Who Use Drugs (CAPUD) and the Dr. Peter AIDS Foundation.

² Campbell TJ, Kitchen SA, Tadrous M, et al. Varying circumstances surrounding opioid toxicity deaths across ethnoracial groups in Ontario, Canada: a population-based descriptive cross-sectional study. *BMJ Public Health* 2024;2:e000480. doi:10.1136/bmjph-2023-000480

³ Women and HIV/AIDS Initiative. (2024). *Collective Action Community Change: A Report Amplifying Community Voices*. Collective Action Community Change: A Report Amplifying Community Voices - WHAI Toronto