# SAN FRANCISCO SAFE INJECTION SERVICES TASK FORCE



MEETING 2 • JULY 21<sup>ST</sup>, 2017 • 9AM-11AM • 25 VAN NESS AVE RM 610



#### AGENDA

- WELCOME & AGENDA REVIEW
- MEETING 1 FINDINGS & THEMES
- COMMUNITY SURVEY FINDINGS
- SIS MODELS AROUND THE WORLD
- DISCUSSION
- PUBLIC COMMENT
- CLOSING & NEXT STEPS

#### TASK FORCE KEY DATES 2017

ACTIVITIES

TOPICS



MEETING 1

JULY 21
MEETING 2

**AUGUST 10** 

MEETING 3

SEPTEMBER 2017

**RELEASE FINAL REPORT** 

JUNE

**JULY** 

**♦** AUGUST

**SEPTEMBER** 

- DISCUSSION
- Injection Drug Use & Harm Reduction in San Francisco
- About Safe Injection Services
- Benefits and Risks

- DEVELOP POLICY RECOMMENDATIONS
- PWID Survey Results
- Safe Injection Service Models
- Operations & Service Considerations

- DEVELOP & FINALIZE POLICY RECOMMENDATIONS
- Business & Neighborhood Focus Group Results
- HR360 Survey Results
- Location and Siting Considerations

# MEETING 1 FINDINGS & THEMES

#### BENEFITS

- Increasing access to compassionate and quality health care services and substance use treatment for people who inject drugs (PWID)
- Improving health outcomes for people who inject drugs by providing a safe, clean, and welcoming space
- Reducing stigma towards people who inject drugs and injection drug use behaviors, and develop a more informed public community

#### BENEFITS (CONTINUED)

- Increasing collective healing, commitment, and impact, including opportunities for people who inject drugs to reach sobriety and regain productive lives
- Disseminating safer injection drug use practices in drug user community
- Improve, expand, and sustain the system of care's operations, outreach, and integration of services.

#### **OBSTACLES**

- Federal and state legal environment and the enforcement of those laws
- Limited funding and resources for sustainable and robust safe injection services
- People who inject drugs fearful of government, law enforcement, and system of care

#### **OBSTACLES (CONTINUED)**

- Negative public perceptions and misinformation about safe injection services that reinforce stigma and opposition
- Varying needs and viewpoints among those in early recovery

#### OTHER CONSIDERATIONS

- It is important that SF adapt safe injection services models to fit the diverse needs and cultures of people who inject drugs, including peer-based models.
- SF must continue being a national leader in harm reduction by demonstrating safe injection services as a way to address the opioid epidemic.
- Training and support of safe injection services staff is crucial to its success.

#### MEETING 1 FINDINGS & THEMES: PUBLIC COMMENT & FORMS

- Largely in support of SF implementing safe injection services as a way to improve health outcomes and community benefits.
- SF should consider expanding the conversation to include other drug consumption behaviors.
- Safe injection services is an effective way to reduce criminality and link PWID to a network of health and social services.
- The current conversation needs to be more inclusive of additional oppressed and marginalized communities.

# COMMUNITY SURVEY FINDINGS

#### COMMUNITY SURVEY FINDINGS







RTI

NATIONAL PUBLIC DRUG USE SURVEY

SFDPH COMMUNITY
HEALTH RESPONSE TEAM

## ACCEPTABILITY OF A SAFER CONSUMPTION SITE AMONG PEOPLE WHO INJECT DRUGS IN SAN FRANCISCO



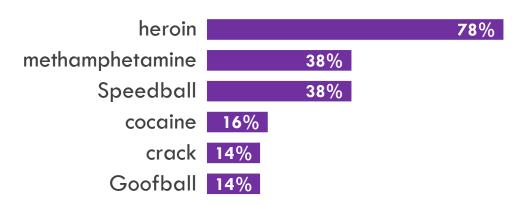
Alex H. Kral, Lynn Wenger, Lisa Carpenter, Evan Wood, Thomas Kerr, & Philippe Bourgois

#### **OVERVIEW**

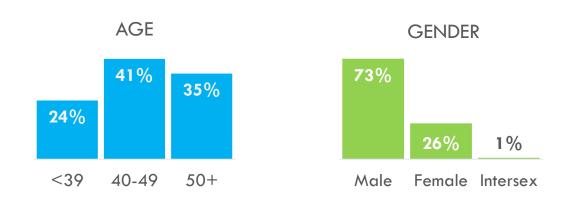
- Targeted sample of PWID (n=602)
- Jan-Oct 2008
- Interviews from 3 main SF neighborhoods
- 20min Computer Assisted Personal Interviewing

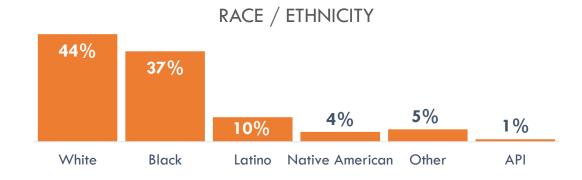
#### **KEY FINDINGS**

**Drug Use:** In the 30 days prior to the survey, participants reported if they had injected:

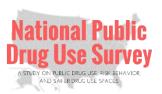


#### **DEMOGRAPHICS**





# NATIONAL PUBLIC DRUG USE SURVEY: A STUDY ON PUBLIC DRUG USE, RISK BEHAVIOR, AND SAFER DRUG USE SPACES

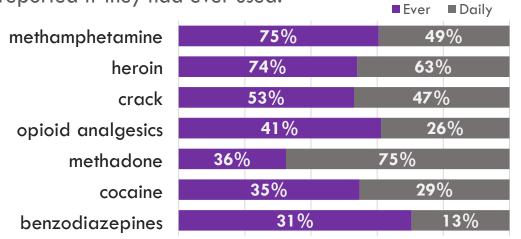


#### **OVERVIEW**

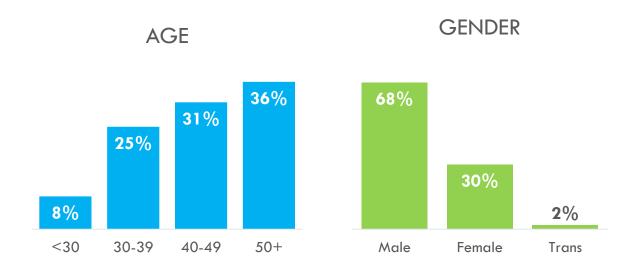
- Cross-sectional observational study design (n=747)
- November 2016 to March 2017
- Convenience sample of participants enrolled in harm reduction programs across 10 cities (12 unique sites)
- Cities include San Francisco, Oakland, Los Angeles,
   Denver, Minneapolis, Washington D.C., Atlantic City,
   New York City, Paterson, and Boston

#### **KEY FINDINGS FROM SF SAMPLE (n=198)**

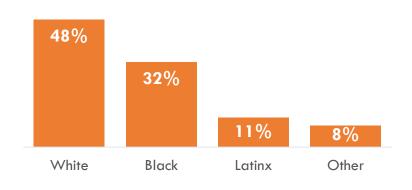
**Drug Use:** In the 3 months prior to the survey, participants reported if they had ever used:



#### **DEMOGRAPHICS**



RACE/ETHNICITY



#### **CHEP SAFE INJECTION SERVICES SURVEY RESULTS**

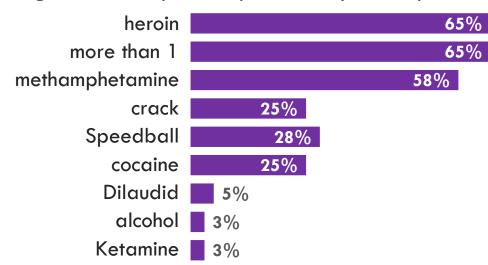


#### **OVERVIEW**

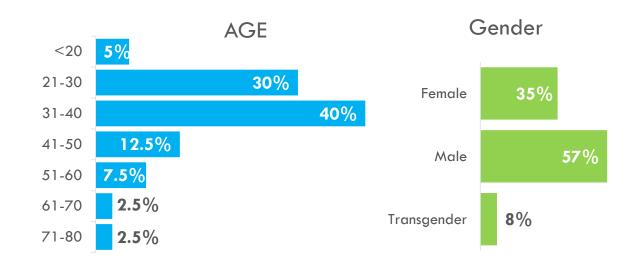
- In-person interviews with PWID in SF (n=40)
- May 23 to June 7, 2017
- 10-20 min surveys in the field
- 3 neighborhoods
  - Tenderloin (13 interviews)
  - Civic Center (12 interviews)
  - South of Market (15 interviews)

#### **KEY FINDINGS**

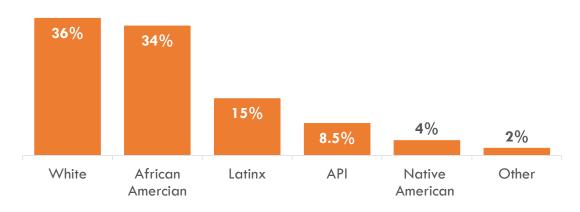
**Drug Use:** Participants reported they had injected:



#### **DEMOGRAPHICS**







#### WHERE PEOPLE REPORT INJECTING

#### **PUBLIC LOCATIONS**



- STREETS OR ALLEYS
- PARKS
- PUBLIC BATHROOMS
- PUBLIC TRANSPORTATION

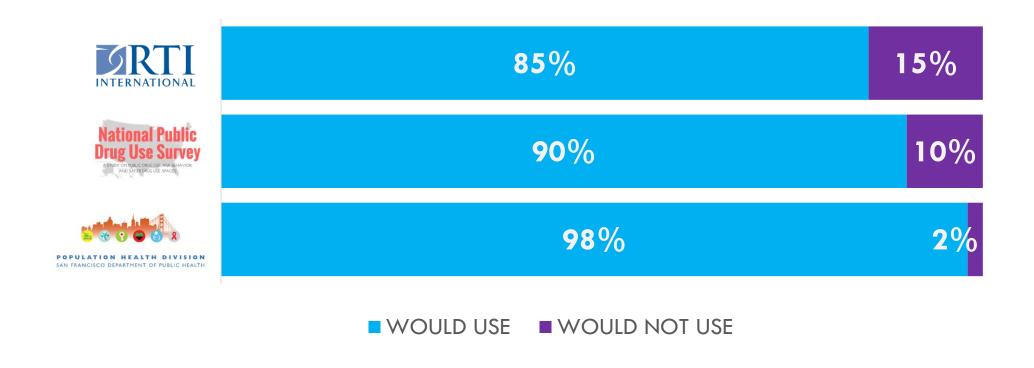
#### **PRIVATE LOCATIONS**



- OTHER'S APARTMENT, HOTEL ROOM, OR TENT
- OWN APARTMENT, HOTEL ROOM, OR TENT
- ABANDONED BUILDINGS
- VEHICLES
- STAIRWELLS OR HALLWAYS

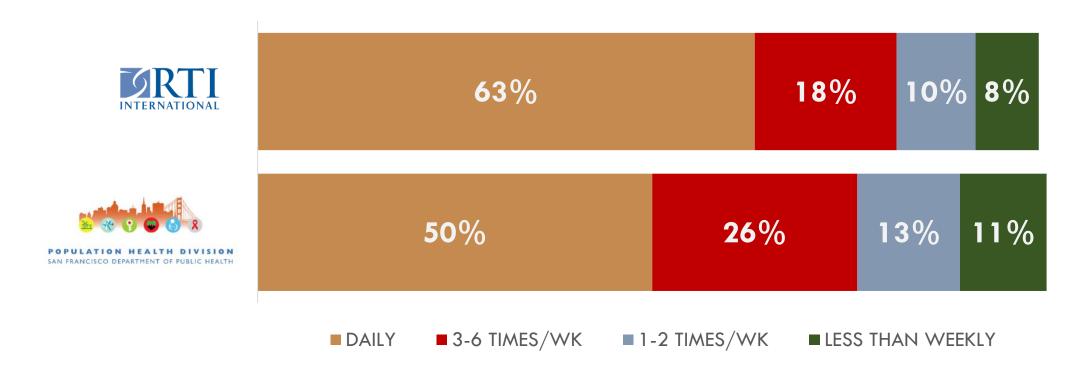
#### WILLINGNESS TO USE SAFE INJECTION SERVICES

AT LEAST 85% OF PEOPLE WHO INJECT DRUGS REPORT THEY
 WOULD USE SAFE INJECTION SERVICES

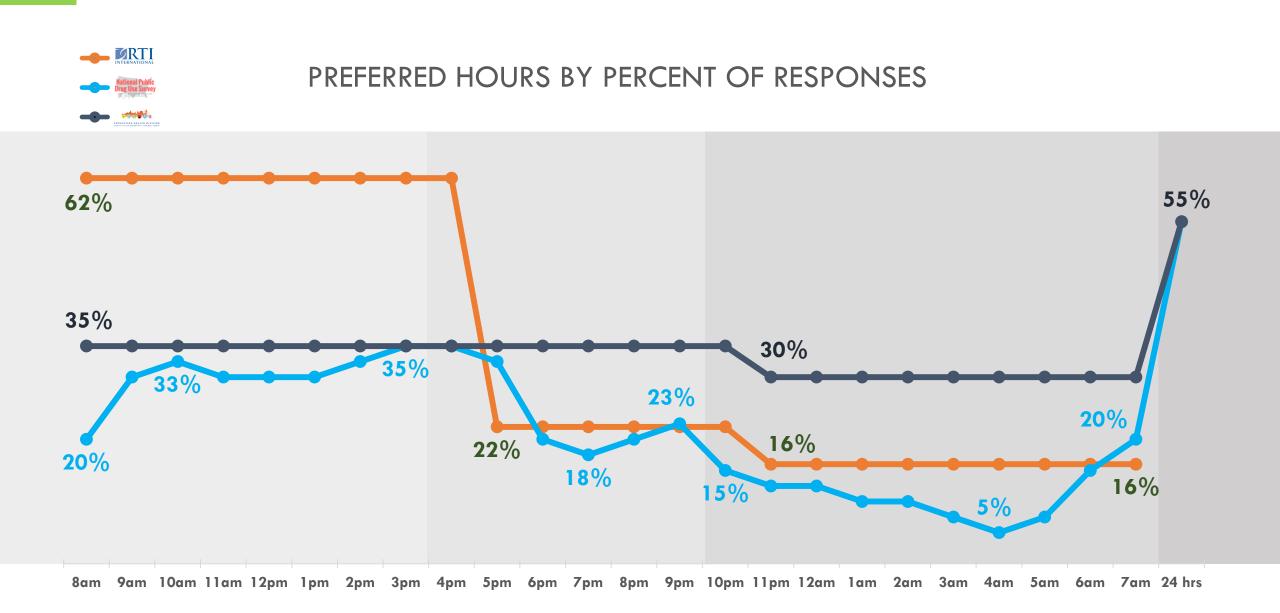


#### WILLINGNESS TO USE SAFE INJECTION SERVICES

AT LEAST 3 OUT OF 4 PEOPLE WHO INJECT DRUGS REPORT THEY WOULD USE SAFE INJECTION SERVICES MULTIPLE TIMES A WEEK

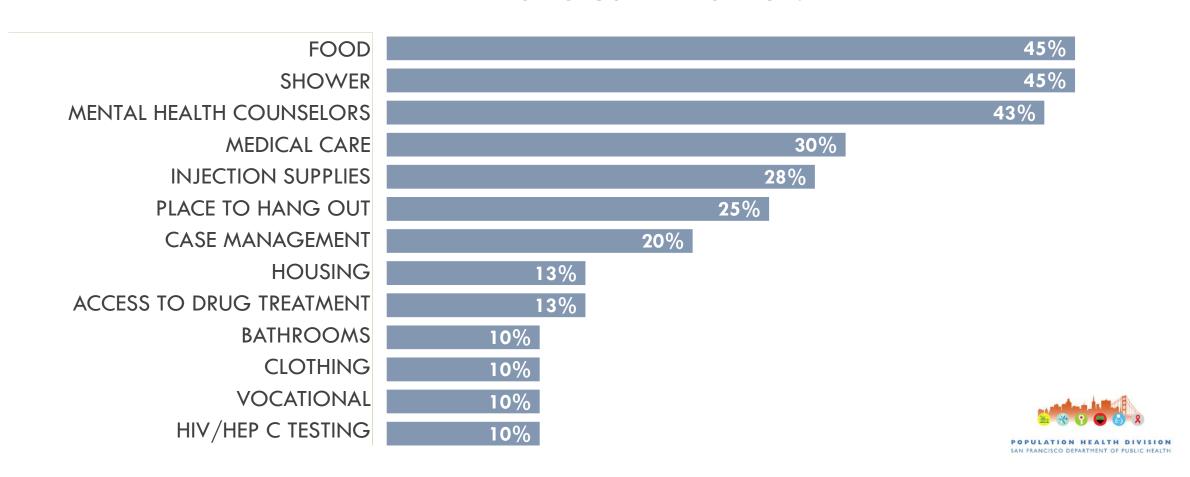


#### PREFERRED HOURS OF OPERATION



#### OTHER SERVICES

## "WHAT OTHER SERVICES WOULD MAKE IT MORE INVITING FOR COMMUNITY MEMBERS TO USE THE SPACE?"



#### STAFFING & ENVIRONMENT

## "WHAT WOULD MAKE YOU FEEL SAFE AND TRUST A PLACE THAT OFFERS THIS SERVICE?

#### GENERAL THEMES

- positive staff attributes: friendly, non-judgmental, trustworthy, down to earth, understanding, can relate
- ex-addicts, peers, and community members as staff
- general safety (for vulnerable populations, OD prevention, safety from stealing and rules to ensure safety)
- a comfortable and inviting environment
- services that provide comfort
- harm reduction and links to treatment



#### COMMON THEMES ACROSS 3 SURVEYS

#### THE MAJORITY OF SURVEY RESPONDENTS:

- indicated willingness to use SIS if available
- who reported injecting in public locations, reported injecting in streets, parks, alleys
- expressed interest in other on-site services
- desired linkages to other services
- emphasized the importance that SIS include a peer component
- preferred that SIS be open 24 hours a day or during regular business hours

## SAFE INJECTION SERVICES

Professionally supervised facilities where drug users can inject pre-obtained drugs in safer conditions

- TERMS USED TO DESCRIBE FACILITIES THAT PROVIDE SAFE INJECTION SERVICES
  - Supervised Injection Facilities (SIFs)
  - Safe Consumption Facilities (SCFs)
  - Drug Consumption Rooms (DCRs)
  - Supervised Consumption Services (SCS)

- GOALS & PRIORITIES OF SAFE INJECTION SERVICES
  - attract hard-to-reach populations of drug users
  - reduce morbidity and mortality by providing a safe environment for more hygienic drug use
  - provide education on safe injection practices
  - reduce public drug use
  - improve public areas surrounding urban drug markets
  - promote access to social, health, and drug treatment facilities

	_	AUSTRALIA	CANADA	DENMARK	FRANCE	GERMANY	LUXEMBOURG	NETHERLANDS	NORWAY	SPAIN	SWITZERLAND	USA	TOTAL
# OF SITES	ONE	$\sqrt{}$					$\sqrt{}$						2
	MULTIPLE		√	$\sqrt{}$	V	$\sqrt{}$		<b>V</b>	√	<b>V</b>	V		8
	NONE & EXPLORING											$\sqrt{}$	1

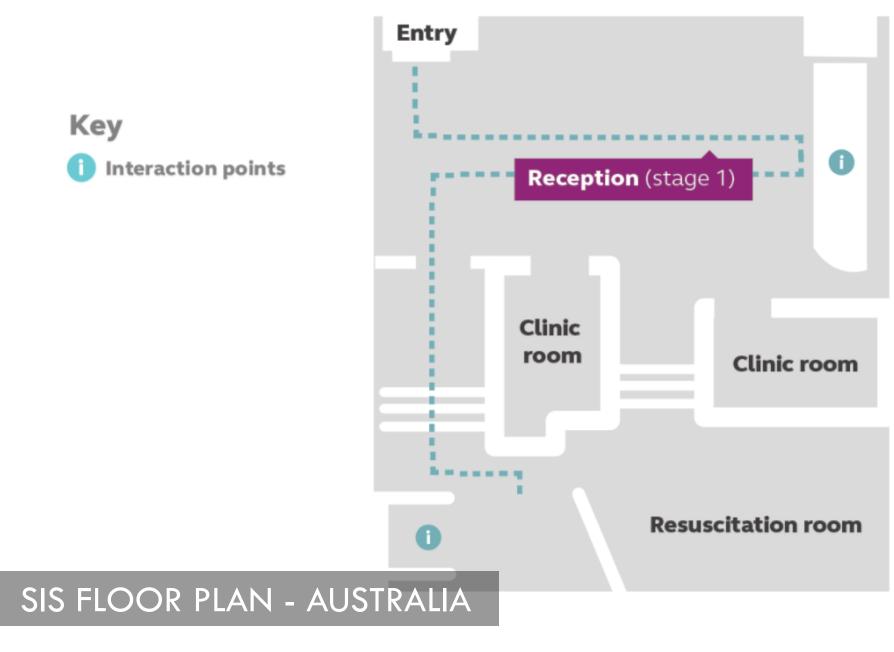
JULY 21, 2017 SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



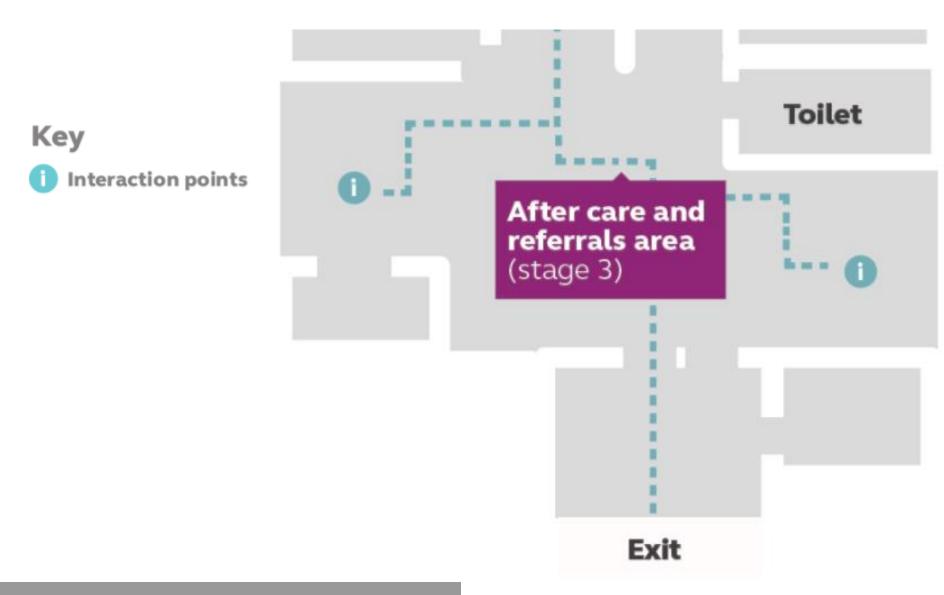












SIS FLOOR PLAN - AUSTRALIA

### SAFE INJECTION SERVICE MODELS

- INTEGRATED
- SPECIALIZED
- MOBILE

#### **MODEL**

#### **DESCRIPTIONS**

#### **KEY ADVANTAGES & DISADVANTAGES**



# NTEGRATED

- most common type
- part of a broader and interlinked network of services housed in the same facility

#### **Examples of services offered**

- showers
- laundry
- counseling
- testing for blood borne viral infections
- needle and syringe exchange
- psychosocial care
- employment programs
- medical services, wound care, medicationassisted treatment (MAT)

#### **Advantages**

- convenient access to other important health and social services
- consistent with current emphasis on offering integrated and coordinated care for persons with complex medical conditions

#### **Disadvantages**

- integrating with medication-assisted treatment places burden on individuals picking up their medication
- individuals may be trying to stay away from areas of active drug use
- complexity
- cost

Note: Adapted from Wright, N. M. (2004). Supervised injecting centres. British Medical Journal, 328(7431), 100-102. doi:10.1136/bmj.328.7431.100

#### **MODEL**

#### **DESCRIPTIONS**

#### **KEY ADVANTAGES & DISADVANTAGES**



SPECIALIZED

- focus on providing a safe place for hygienic consumption of drugs in a nonjudgmental environment, while providing referrals to other services
- usually located in close proximity to other services and where drug users already congregate

#### **Advantages**

- requires less operational complexity
- referrals to other services are available, just not in house
- less expensive to site and operate then more comprehensive models

#### **Disadvantages**

- access to additional services less convenient than integrated model
- creates a potential barrier to accessing other services

Note: Adapted from Wright, N. M. (2004). Supervised injecting centres. British Medical Journal, 328(7431), 100-102. doi:10.1136/bmj.328.7431.100

#### **MODEL**

#### **DESCRIPTIONS**

#### **KEY ADVANTAGES & DISADVANTAGES**



- specially outfitted vehicles that provide space for 1-3 injection booths inside
- offer a limited range of other services
- able to provide referrals to other services not available directly on the van

#### **Advantages**

 able to reach populations outside the service range of stationary supervised consumption facilities

#### Disadvantages

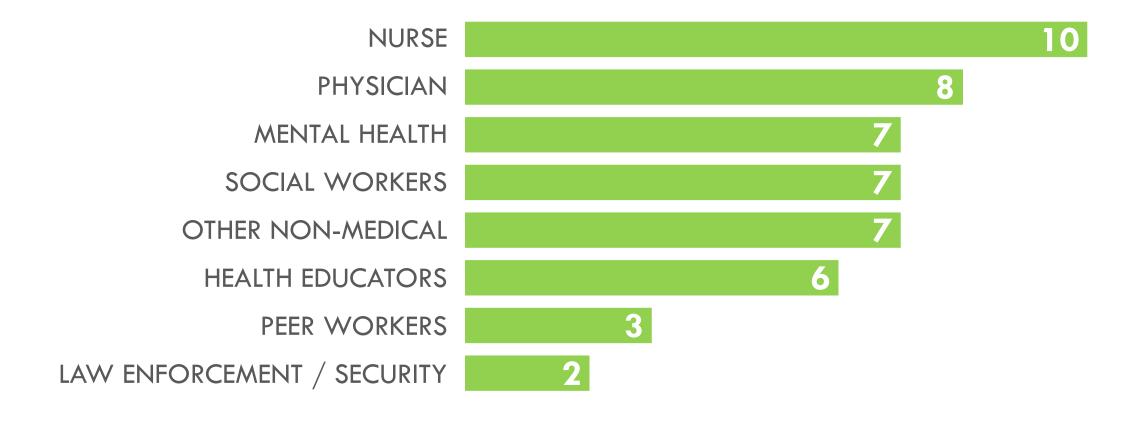
- low capacity
- limited services offered
- access to additional services less convenient than integrated model
- creates a potential barrier to accessing other services

MOBILE

Note: Adapted from Wright, N. M. (2004). Supervised injecting centres. British Medical Journal, 328(7431), 100-102. doi:10.1136/bmj.328.7431.100

		AUSTRALIA	CANADA	DENMARK	FRANCE	GERMANY	LUXEMBOURG	NETHERLANDS	NORWAY	SPAIN	SWITZERLAND	USA	TOTAL
MODEL TYPE	INTEGRATED	$\checkmark$	$\sqrt{}$	$\sqrt{}$	<b>√</b>	$\checkmark$	$\checkmark$	$\sqrt{}$		$\sqrt{}$	√		9
	SPECIALIZED								√				1
	MOBILE			<b>√</b>		<b>√</b>	V			V			4

#### **NUMBER OF COUNTRIES WITH STAFF TYPE (OUT OF 10)**



#### CONSIDERATIONS FOR SIS OPERATIONS & SERVICES

SUPPORT AN INTEGRATED MODEL THAT INCLUDES ON-SITE SERVICES

PROVIDE LINKAGES TO OTHER SERVICES

UTILIZE TRAINED & NON-LICENSED STAFF

INCLUDE PEER COMPONENT

DESIGN AS A SAFE, CLEAN, & WELCOMING SPACE

lacktriangle

OPEN DURING REGULAR BUSINESS HOURS

DEVELOP CLEAR & MEASURABLE PROGRAM GOALS

INFORMATION SOURCES:

RESEARCH/ LITERATURE COMMUNITY SURVEYS FOCUS GROUPS

TASK FORCE

## DISCUSSION QUESTION

42

#### DISCUSSION QUESTION

# WHAT ARE YOUR THOUGHTS ON THESE CONSIDERATIONS FOR SIS IN SAN FRANCISCO?

# PUBLIC COMMENT

2 MINUTES PER PERSON

# CLOSING COMMENTS & NEXT STEPS

#### **NEXT MEETING**

- BUSINESS & NEIGHBORHOOD FOCUS GROUPS
- LOCATION & SITING

THURSDAY • AUGUST 10<sup>TH</sup> • 2017 • 9AM-11AM
25 VAN NESS AVE • ROOM 610