



POLICING AND PUBLIC HEALTH PARTNERSHIPS: THE ROLE OF VANCOUVER POLICE IN SUPPORTING A SUPERVISED INJECTION FACILITY

BACKGROUND & METHOD

- Although certain law enforcement practices have been found to undermine some HIV prevention efforts, little is known about how police affect the operation of Vancouver's supervised injection facility called 'Insite'.
- Researchers asked 1,090 randomly selected Insite clients if they had ever been referred to Insite by local police while injecting in public.

QUICK FACT

17% OF PARTICIPANTS REPORTED THAT THEY HAD PREVIOUSLY BEEN REFERRED TO INSITE BY LOCAL POLICE.

FINDINGS

- In total, 182 individuals (17% of the sample) reported that they had previously been referred to Insite by local police while injecting in public.
- In addition, the individuals the local police were referring to Insite were more likely to be engaged in sex work, to be frequent cocaine injectors, and to report discarding used syringes in public.
- By referring high-risk injection drug users, including those engaged in sex work, to this health facility, local police appear to be helping to reduce health-related harms. Furthermore, by referring drug users who report discarding used syringes in public, the local police are also helping to reduce the public order impacts of public injecting.
- Insite is providing an opportunity to coordinate policing and public health efforts. By referring public injectors to Insite, police are helping to meet public health and public order objectives.

IMPLICATIONS

- In summary, this study demonstrates that local police are playing an important role in supporting Vancouver's supervised injection site and indicates a disconnect between the views of local police officers working in direct proximity to Insite and those of external law enforcement organizations who remain vocally opposed to the facility.

DeBeck K, Wood E, Zhang R, Tyndall M, Montaner J, Kerr T. **Police and public health partnerships: Evidence from the evaluation of Vancouver's supervised injection facility.** *Substance Abuse Treatment, Prevention, and Policy*, 2008; 3(1): 11.

