



IDU PERSPECTIVES ON THE DESIGN AND OPERATION OF INSITE

BACKGROUND & METHOD

- Since opening in September 2003, Vancouver's supervised injection facility (Insite) has provided a safe health-focused centre where people may inject pre-obtained illegal drugs under the supervision of nurses.
- While the public health benefits of Insite have been well documented, there is little information about how clients of Insite view the operation of the facility. This study was conducted to understand Insite clients' perspectives regarding the design and operation of the facility.
- We conducted in-depth interviews with 50 people who use Insite in order to explore clients' perspectives regarding the operation of the facility. Interviewees were recruited from the Scientific Evaluation of Supervised Injecting (SEOSI) cohort, which is composed of over 1,000 Insite users.

QUICK FACT

THE DESIGN AND OPERATIONAL MODEL OF INSITE WAS ACCEPTED BY MOST LOCAL IDU, ALTHOUGH SOME IDU CLIENTS ADMITTED TO FACING BARRIERS THAT DISCOURAGE ITS USE.

FINDINGS

- The design and operational model of Insite was accepted by most local people who inject drugs (IDU). Overall, study participants reported being satisfied with the design of Insite. Similarly, the majority of study participants approved of Insite's operating procedures and regulations. Most study participants (over 50%) expressed favourable opinions of the staff working at the injection site, emphasizing the importance of staff acceptance and understanding.
- While Insite was well accepted by clients, certain features pose barriers that discourage use among some IDU. It was reported that long wait times to enter the injection room represent a significant barrier to using Insite. While Insite operates 18 hours a day, many study participants reported injecting in other venues during the hours that Insite was closed. Operating hours represent a barrier to utilization among a minority of study participants. Importantly, Insite regulations that prohibit assisted injections and the sharing of drugs were reported to pose barriers to utilization by some study participants.

IMPLICATIONS

- Extending operating hours and expanding the capacity of Insite could address some of the barriers that clients currently face.
- Modifying operating regulations to permit assisted injections and the sharing of drugs could potentially increase Insite use among highly marginalized IDU.
- Approximately 40% of local IDU require assistance with injecting, and these individuals are more likely to experience non-fatal overdose, as well as being more likely to become HIV- positive. Supervised injection facilities should better accommodate IDU who require assistance injecting in order to avoid severe harms associated with assisted injection.

Small W, Ainsworth L, Wood E, Kerr T. IDU perspectives on the design and operation of North America's first medically supervised injection facility. *Substance Use and Misuse*, 2011; 46(5): 561-568.