

# NON-INJECTION DRUG USE WITHIN SUPERVISED CONSUMPTION SERVICES

## BACKGROUND & METHODS

Supervised consumption services (SCS) provide safer spaces for people to use drugs and connect to health and social supports. However, most research focuses on injecting drugs within SCS, while little is known about smoking, snorting, or consuming drugs by mouth within SCS. Therefore, we searched available articles to describe the characteristics of these types of SCS (e.g., layout, staffing) and the people who use them, as well as the practicality and outcomes of including non-injection drug use within SCS.

## FINDINGS

In total we identified 48 SCS globally that included non-injection drug use. We discovered that the physical characteristics and the demographics of people who used these SCS were similar to SCS that only included injection drug use. The key differences we found included layout (e.g., ventilated areas to allow smoking) and having shorter time limits for non-injection drug use. However, we discovered some challenges to including smoking in SCS such as the concern of staff exposure to second hand smoke and the fact smoking drugs tends to be more social (leading to the risk of people sharing drug use equipment).

We found that there is high willingness to use SCS that include non-injection drug use. We also found that including smoking in SCS may lead to positive individual and community outcomes (e.g., improved health and safety of people who access SCS, decreased sharing and public disposal of drug use equipment).

## IMPLICATIONS

There is considerable interest in including non-injection drug use such as smoking, snorting, and consuming by mouth within SCS; however, unique considerations should be addressed when implementing these types of SCS. Additional research documenting outcomes and best practices would support further implementation of this service for people who use drugs.

## MAIN MESSAGES

1. Including non-injection drug use in SCS supports groups of people who use drugs who may be excluded from existing services.
2. At least 48 SCS include non-injection drug use globally and there is high willingness to use these SCS.
3. SCS that include smoking need to account for the social nature of smoking and the concern of second-hand smoke.
4. Current evidence suggests positive outcomes of including smoking within SCS.

## Inner City Health and Wellness Program

Speed K, Gehring N, Launier K, O'Brien D, Campbell S, Hyshka E. To what extent do supervised drug consumption services incorporate non-injection routes of administration? A systematic scoping review documenting existing facilities. *Harm Reduction Journal*. 2020;17:72.

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