

FOR IMMEDIATE RELEASE

**IAS APPLAUDS CANADIAN COURT'S RULING ALLOWING VANCOUVER'S
MEDICALLY SUPERVISED INJECTION SITE TO CONTINUE OPERATING**

**HIV Researchers and Other Professionals Point to Evidence
of Programme's Proven Effectiveness in Decreasing Risk Behaviors
that Lead to the Transmission of HIV and Hepatitis C**

19 January 2010 (Geneva, Switzerland) - The International AIDS Society (IAS) today welcomed a British Columbia court's ruling on Friday dismissing the federal government's effort to close Vancouver's medically supervised injection site, emphasizing the programme's proven track record of attracting some of the most marginalized and difficult to serve individuals who are addicted to drugs and decreasing risk behaviors that lead to the transmission of HIV and other blood borne pathogens such as hepatitis C.

"Medically supervised injection facilities are an important entry point to HIV prevention and primary medical care for the most vulnerable among us," said Robin Gorna, Executive Director of the IAS. "Such services acknowledge the dignity and value of all human life, protect the health of those who use drugs, and reduce the risk of HIV transmission to the wider community by reducing discarding of dirty and potentially contaminated needles."

It has been estimated that Vancouver is home to about 12,000 people who inject drugs, with more than one third living in the Downtown Eastside. The Downtown Eastside is the poorest neighbourhood in the city, and one of the poorest in the country. This area has extremely high HIV rates: three in 10 people who inject drugs are infected with HIV and nine in 10 with hepatitis C. The overall mortality rate for residents in the Downtown Eastside is 14 times that of other BC residents.

InSite first opened its doors in 2003, under a temporary exemption from national drug laws. The exemption was extended under a B.C. Supreme Court ruling that recognized the critical medical services it provided. It is the first programme of its kind in North America though today there are some 65 medically supervised injection facilities in 27 cities and eight countries worldwide: Australia, Canada, Germany, Luxembourg, the Netherlands, Norway, Spain and Switzerland. Most centres are located in urban areas, and aims to reduce drug related harm, prevent negative health effects and minimize the public disturbance arising from street-based drug use.

"The evidence in support of supervised injection sites is clear and compelling," said IAS Executive Director Robin Gorna. "The recent court ruling in Vancouver is an example of science trumping politics. We need more examples like this in Canada and elsewhere if we are serious about ending AIDS."

Supervised injection facilities are first and foremost health facilities, guided by a core set of objectives including: reduction of morbidity and mortality associated with drug overdose; enhancing access to health and social welfare services for a marginalized group of people who

inject drugs; reduction of transmission of blood borne viruses including HIV and Hepatitis C; reduction of public injection and the associated 'public nuisance' such as discarded injecting equipment.

Such programmes provide a range of services including: supervision and education for safer injection practices; emergency response to drug overdoses; assessment and referral to primary health care and service providers, including addiction counseling and treatment; harm reduction education and counseling; exchange of syringes and injecting equipment; sexual health education; and access to condoms and lubricant.

The impact of medically supervised injection facilities has been scientifically evaluated in several sites. The evidence from these studies shows that this is an effective intervention. These studies have demonstrated results including:

- Measurable reductions in public drug use and publicly discarded syringes;
- Overall reductions in rates of syringe sharing among people who inject drugs in the wider community, and up to 70% among those who use supervised injection facilities;
- Reduction in morbidity and mortality associated with drug related overdoses;
- Reduction in health care expenditure and costs related to criminal activity;
- Services attract the most vulnerable drug users, including those who engage in high-frequency drug use, highest-risk behaviour, have high rates of HIV, Hepatitis C and overdose; and those who contribute to problems of public drug use and unsafe syringe disposal;
- No increase in drug-related crime, rates of arrest for drug trafficking or rates of relapse among former drug users.

“Given the strong, compelling evidence generated from rigorous, peer reviewed evaluation of InSite, the time has come for the development of guidance for the scale up of similar facilities to other sites and cities in Canada and in other countries,” said Robin Gorna. “Chronic addiction to drugs should not be a death sentence.”

About the IAS:

The International AIDS Society (IAS) is the world's leading independent association of HIV professionals, with 14,000 members from 190 countries working at all levels of the global response to AIDS. Our members include researchers from all disciplines, clinicians, public health and community practitioners on the frontlines of the epidemic, as well as policy and programme planners. The IAS is the custodian of the biennial International AIDS Conference, which will be held in Vienna, Austria from 18 to 23 July 2010.

For more information:

Regina Aragón (Rome, Italy)
Acting Communications Manager
Email: Regina.Aragon@gmail.com
Tel: +39 329 445 9590

Jacqueline Bataringaya (Geneva, Switzerland)
Senior Policy Advisor
Email: Jacqueline.Bataringaya@iasociety.org
Tel: +41 22 710 0800