

FACT CHECK

Dispelling myths about the Whitehorse supervised consumption site

Rates of overdoses have increased dramatically in Canada over the past several years. Supervised consumption sites help keep people who are not ready or able to stop using drugs alive and as healthy and as safe as possible. In addition to treatment and recovery supports, they are a core part of the continuum of care for people who use drugs.

MYTH 1: The supervised consumption site will normalize drug use.

FACT: Supervised consumption sites address a wide range of health and social harms associated with illegal drug use. They are an integral part of a harm reduction strategy that focuses on limiting the adverse consequences of substance use. Supervised consumption sites are helping to build non-judgmental and supportive relationships between people who use substances and health care providers. We work with the knowledge that abstinence is not always realistic for a person living with an addiction.

MYTH 2: The supervised consumption site will make it easier for people to get drugs.

FACT: The supervised consumption site does not provide illegal drugs to people who use substances. It is a place for people to use their drugs in the presence of a trained health care provider. We will be clear with people who use the site about the harms and dangers associated with drug use. We want to support people to use more safely and prevent fatal overdoses. This work is done in a trauma-informed and supportive way.

MYTH 3: The supervised consumption site will increase crime in my neighbourhood.

FACT: Research into the community impact of similar sites around the world has shown that supervised consumption sites have a positive effect on community safety. They reduce the rates of public drug use and discarded supplies without increasing substance use. Research has also shown that supervised consumption sites reduce violence and property crime rates.

MYTH 4: The supervised consumption site will increase drug use in my community.

FACT: Our community already includes many people who use drugs. A supervised consumption site will give people access to a space where they can use drugs more safely instead of alone or in public. It means there will be less issues related to drug use in areas where these sites are located.

MYTH 5: The opioid crisis only affects people with a history of addictions.

FACT: Anyone can be affected by the opioid crisis. It is devastating individuals, families, and communities across the country. Teenagers and young adults, people who only occasionally use drugs, and people who have stopped using drugs but have started using again are particularly at risk of dying by an overdose.

MYTH 6: The supervised consumption site is just a temporary band-aid solution.

FACT: Harm reduction is not a band-aid solution. Although it includes abstinence as an option (if and when a person is ready), harm reduction recognizes that abstinence is not always realistic for a person with addictions. Harm reduction programs are often the first point of access to safe treatment and prevention resources for persons who use drugs. Harm reduction approaches, like supervised consumption sites, are an important part of support services for people who use drugs and can help connect them to other primary care services.

Also, there's a direct link between reducing the stigma of drug use and people getting help when they want and need it. Consider offering support instead of judgment to those addicted to drugs and talking more openly about substance use with people in your life.

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