



Four Pillars News - December 2003
Issue No. 2 Vol. 1

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Four Pillars News is published eight times per year for the Mayor's Four Pillars Coalition by the City of Vancouver.

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By Lesli Boldt, Corporate Communications, City of Vancouver

Early signs suggest that the supervised injection site is making a difference for injection drug users in Vancouver's Downtown Eastside. Chris Buchner of Vancouver Coastal Health (VCH) told participants at the World AIDS Day forum in Vancouver on December 1 that *inSite* is logging an average of 500 client visits per day, up from 39 visits on its first day of operation.

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By Inspector Ken Frail, Vancouver Police Department

The Vancouver Police Department has implemented an Overdose Response Policy on a trial basis for one year, in an attempt to further reduce drug overdose deaths. The new policy is modeled after an innovative policy established by Emergency Service Personnel in South Australia, which is attributed to reducing overdose deaths by 6 per cent.

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Our overwhelming focus on substance use and addiction in this community often distracts our attention from the other major social and economic issues that often contribute to the cycle of addiction.



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Dr. Christophe Bürki, Director of The Heroin Prescription Clinic, KODA Bern, Switzerland, was recently in Vancouver at the 29th Canadian Congress on Criminal Justice. I was fortunate to be able to engage him in several conversations about drug issues in Switzerland.

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Do you have news on how your company or organization is making a contribution to substance misuse prevention, treatment, harm reduction or enforcement? Submit your stories for publication in future issues of the Four Pillars News.

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FOCUS ON ... THE FOUR PILLARS

[Moving forward on the drug strategy](#)

By Donald MacPherson, Drug Policy Coordinator
City of Vancouver

The overwhelming response to the recent Prevention Symposium held at the Wosk Centre for Dialogue on November 20 and 21 reflects an ongoing momentum and passion from both government and the community to take action on implementing the Four Pillars Drug Strategy.

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FOUR PILLARS NEWS

Injection site shows early signs of success

By Lesli Boldt, Corporate Communications

Early signs suggest that the supervised injection site (SIS) is making a difference for injection drug users in Vancouver's Downtown Eastside. Chris Buchner of Vancouver Coastal Health (VCH) told participants at the World AIDS Day forum in Vancouver on December 1 that *inSite* is logging an average of 500 client visits per day, up from 39 visits on its first day of operation.

Forty per cent of clients are injecting cocaine, 40 per cent heroin, 10 per cent morphine and other prescription drugs, with another 10 per cent that use several substances. The average age of clients injecting at the site is between late 30s and early 40s, and three of the clients are youth.

"The success has been in the adoption rates, and how quickly the drug injection community has accepted the SIS," VCH spokeswoman Viviana Zanocco said in an interview. "We didn't expect to be at 525 injections a day until the six month mark.

That says to me that people know about the site, they are aware of the health benefits of using it, they feel comfortable with and trust our clinical and peer staff, and they're telling others about the non-judgmental way service is being delivered."

"When we look at the experience of supervised injection sites in other jurisdictions, in cities of a similar size, it's encouraging to see that Vancouver's site has gained such acceptance amongst injection drug users," said Donald MacPherson, Vancouver's drug policy coordinator.

MacPherson cited the example of Sydney, Australia, where just over 1500 individuals had registered at their supervised injection centre in the site's first six months of operation. In less than three months, Vancouver has already registered a third more clients (2100) -- nearly half of the Downtown Eastside's estimated 4700 injection drug users.

Zanocco says VCH is encouraged by the number of women coming through *inSite's* doors. "Women are among the most marginalized in what is already a marginalized neighbourhood. We are encouraged that women are using the injection site. Some women who use injection drugs have additional risks. There is evidence to suggest that women are more likely to have difficulty injecting themselves. This makes women vulnerable to overdose because they have less control over their dose.

"This also makes women more likely to use unclean needles, opening them up to a number of blood-borne diseases. Teaching women to inject on their own helps



The main injection room at the supervised injection site on Hastings Street.

Photo credit: Joshua Berson

them take responsibility for their own safety, and it would appear they want to."

Zanocco says the site's Research and Evaluation Team will report out on criteria including the overall health of registered clients including the incidence of disease transmission and overdose, and other indicators like drug-related public disorder to provide a more in-context evaluation of the site.

When asked whether VCH will open other supervised injection sites in the future, Zanocco says it's too early to say. VCH wants to make sure the first SIS in North America is meeting its objectives, which include stemming the spread of blood-borne disease, before they open additional sites. "This is a three-year, scientific research pilot project, and we need some scientific proof that the SIS is making an impact on health outcomes before considering a second site," said Zanocco. 🌈

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FOUR PILLARS NEWS

Forum Sparks Dialogue on Prevention

By Lesli Boldt, Corporate Communications

Thinking 'outside the box' was the main theme at the Four Pillars Coalition's Prevention Symposium, held at the Wosk Center for Dialogue in Vancouver last month.

"The Prevention Forum has succeeded in opening up the discussion on what strategies to prevent and reduce harm from drug use in this City should look like," said Mayor Larry Campbell, who hosted the forum. "While there will always be a place for abstinence-based prevention programs -- especially for children - we also need to reach the vast majority of teens who begin experimenting with tobacco, alcohol and other substances before they reach Grade 12."

University of Stockholm 's Dr. Robin Room's comments on drug use patterns made a strong impact at the Forum. Room contends that patterns of drug use are changed not by public awareness campaigns or drug education programs, but by social movements and cultural shifts that change our attitudes about substance use, as in the case of smoking and tobacco use.

Other highlights included presentations from Vancouver elementary and secondary students, who talked about the important role young people play in starting an honest discussion with friends and parents about drug and alcohol use, and remarks from Dr. Lorraine Greaves of the BC Centre of Excellence for Women's Health, on how addiction affects women and men differently.

"Prevention is so important precisely because the abuse of substances -- including tobacco, alcohol and other drugs -- is so prevalent in our society," said Donald MacPherson, Vancouver 's drug policy coordinator. "If we're going to make a difference and prevent the harm associated with substance use and misuse, talking about the issues in an open forum like this one is crucial."


Tickets for the free event -- sponsored by a number of public and private sector organizations and agencies -- 'sold out' over a week before the event took place, demonstrating the high level of public interest in prevention.



Prevention Forum at the Wosk Centre for Dialogue in Vancouver.
Photo credit: Joshua Berson



Dr. Robin Room of Stockholm University speaking at the Forum.
Photo credit: Joshua Berson

The discussion and dialogue that took place at the Prevention Forum will be summarized in a report to be released in January 2004. The City hopes to release a comprehensive prevention strategy for Vancouver in the fall of 2004. For updates on the prevention strategy, contact information and reports as they are published, go to www.city.vancouver.bc.ca/fourpillars or e-mail the Drug Policy Program at fourpillars@city.vancouver.bc.ca. 



A forum participant listens intently to the discussion.

Photo credit: Joshua Berson

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Vancouver Police Implement "Overdose Response Policy" on a Trial Basis

By Inspector Ken Frail, Vancouver Police Department

The Vancouver Police Department has implemented an Overdose Response Policy on a trial basis for one year, in an attempt to further reduce drug overdose deaths. The new policy is modeled after an innovative policy established by Emergency Service Personnel in South Australia, which is attributed to reducing overdose deaths by 6 per cent.

Research presented at a Heroin Overdose Prevention Conference in Seattle in 2000 revealed that despite the fact that half of overdose cases are witnessed by another person, the greatest barrier in obtaining emergency medical help was the fear that police would attend and lay charges for drug use. Rather than face police intervention, many witnesses to a drug overdose would respond in an inappropriate way. Sometimes a victim would be dropped in a public place hoping they would be found, sometimes an incomplete phone call would be made and the caller would leave before medical help arrived. Sometimes the overdose victim would be abandoned.

Vancouver Police recognize that drug overdose cases are primarily medical emergencies requiring rapid response. The new policy tends to restrict police attendance at overdose calls except in cases where public safety requires police attendance. The police role at a drug overdose call is clarified as "assisting with life saving measures and public safety."

If a police officer finds evidence at an overdose call, the new policy asks that officers consider the greater public good when contemplating laying of charges. In actual fact, it would be a rare circumstance to find evidence at a drug overdose call.

The trial policy addresses some of the issues contained in Recommendation #33, *Development of an Overdose Response Strategy*, in the Four Pillars Drug Strategy. The policy was developed through partnerships in the Vancouver Agreement including Coastal Health, Emergency Medical Services, the Vancouver Police Department and community groups. Currently, many agencies are assisting in getting the word out about the trial policy. In order for overdose deaths to be further reduced it is essential that public, and drug users in particular, clearly understand the policy. 🌈

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FOUR PILLARS NEWS

Moving Forward on the Drug Strategy

By Donald MacPherson, Drug Policy Coordinator
City of Vancouver

The overwhelming response to the recent Prevention Symposium held at the Wosk Centre for Dialogue on November 20 and 21 reflects an ongoing momentum and passion from both government and the community to take action on implementing the Four Pillars Drug Strategy.


The Prevention Symposium marked the start of a process that will lead to the creation of a prevention strategy for Vancouver. Prevention is an area that the whole community can be involved in and responsible for. Over the next few months, the City of Vancouver's Drug Policy Program will be inviting individuals and organizations to participate in developing a prevention strategy for Vancouver that is comprehensive, integrated with other initiatives, and based on the best evidence that we know of from around the world.



Donald MacPherson speaking at the Prevention Forum in November.
Photo credit: Joshua Berson

Substance misuse prevention is a key component of Vancouver's approach to drug use in our community and is the foundation of our efforts to reduce the harm associated with drug use. Vancouver is poised to play a significant role in Canada in designing and leading a social movement that facilitates the creation of stronger and healthier communities, and more effective approaches to reducing the harm from the use of psychoactive substances in our community.

In spring of 2006, Vancouver will host the International Conference on the Reduction of Drug Related Harm. This will be an opportunity to learn from and share with organizations from around the globe efforts to implement comprehensive and collaborative responses to harmful drug use. Over the next two years leading up to this conference the Mayor's Four Pillars Coalition will also be sponsoring dialogue forums on treatment, harm reduction and enforcement culminating in a focus on all four pillars to coincide with the international conference.

More importantly, this ongoing dialogue on all four pillars will help give the City of Vancouver the tools we need to take concrete action and advocate on behalf of Vancouver for the services, funding, interventions and programs necessary to break the cycle of addiction and create a healthier community. We look forward to working with all of you in building this movement. 

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FOUR PILLARS NEWS

A Vision for the Heart of the City

By Larry Campbell, Mayor of Vancouver

When we talk about the Four Pillars Drug Strategy, the Downtown Eastside often commands much of our attention. It is here that our city's drug problem is at its most visible and undoubtedly, at its most harmful.

While it is true that the Downtown Eastside is host to a significant number of injection drug users, we are working hard to address the related health problems this population suffers. However, our overwhelming focus on substance use and addiction in this community often distracts our attention from the other major social and economic issues that often contribute to the cycle of addiction.

As a traditionally low-income neighbourhood, the Downtown Eastside continues to face a range of challenges around housing, low incomes, high unemployment, the sex trade and property crime. Changing provincial policies around welfare promise to make these challenges even greater. However, our goal is to work through these challenges and build on the assets of the community.

It is important to remember that many of the issues the community faces around housing, poverty, the sex trade and the drug trade are inextricably linked. Let's look at housing and poverty, for example. The City recognizes that there's a need to protect secure affordable housing for low-income residents in the Downtown Eastside - housing that is often difficult to replace. We have responded with a new single resident accommodation (SRA) by-law that regulates the conversion of inexpensive apartments and residential hotels for commercial purposes, protecting the supply of low-income housing in the community.

The City is also working on an economic revitalization plan for the Downtown Eastside, to create jobs and economic activity and address high unemployment. This plan includes the Heritage Incentive Program, which facilitates the conservation and rehabilitation of heritage buildings in Gastown, Chinatown and the Hastings Street Corridor to renew the architecture of the area, and attract businesses and the public. For its part, the City of Vancouver is also reviewing its procurement policies to identify cost-effective ways to support Downtown Eastside businesses.

It is also important to acknowledge the important role that arts and culture play in the well-being of the Downtown Eastside. In late November, I had the honour of playing a cameo role in the *Downtown Eastside Community Play*, a co-production of



Mayor Larry Campbell speaks to reporters at Prevention Forum in November.

Photo credit: Joshua Berson

the Carnegie Center Association and Vancouver Moving Theatre, in cooperation with a host of Downtown Eastside organizations.

The theme of this play was the Downtown Eastside's historical place in the heart of Vancouver, as the heart of our city. The play starred members of the Downtown Eastside community, and told the story of this neighbourhood from its beginnings as a First Nations settlement, to its present-day role as a centre of life in the city that faces more than its share of challenges. The community play stands as a shining example of how arts and culture are making a positive impact in this community.

While continue to address drug-related issues in the Downtown Eastside, let us not forget to take a step back and acknowledge that housing, job creation, economic development and cultural development are the keys to a brighter future for this community. 🌈

E-mail the Mayor at larry_campbell@city.vancouver.bc.ca

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A Chat with Dr. Christophe Bürki

By Zarina Mulla, Social Planner
Drug Policy Program

Dr Christophe Bürki, Director of The Heroin Prescription Clinic, KODA Bern, Switzerland, was recently in Vancouver at the 29th Canadian Congress on Criminal Justice. I was fortunate to be able to engage him in several conversations about drug issues in Switzerland, a flavour of which is presented below.

The amiable Dr. Bürki elaborated about the evolution of heroin prescription in Switzerland, where the main drug of choice is the joint use of heroin and cocaine, or 'speed-balling.' "It started in 1994 as a trial for those users who had tried methadone prescription and failed," he said. The trials were terminated in December 1996.

Today, Heroin Assisted Treatment (HAT) has become part of the national drug strategy, and there are 23 HAT sites in Switzerland. The per capita cost of \$44 CDN is covered by the state. The program's retention rate of 70 per cent indicates that "...30 per cent [of participants] either become abstinent, or graduate to methadone," according to Bürki.

Approximately 35 per cent of the remaining need chronic treatment, even after 10 years. "This is not considered a failure," he explains. "Nobody would say your diabetes therapy is a failure because you are still injecting insulin."

On the subject of prevention, Dr. Bürki maintains that it must take into consideration "...the whole picture, starting with childhood and the family." Sometimes the lines between prevention and harm reduction may blur, especially in the case of those already using substances.

Pill testing, as regulated by the Canton of Bern, offers a case in point. While a pill is being tested at a rave for the verity of its contents (harm reduction), the prevention worker engages the youth in educational conversation about the drugs. Innovative!

While taking a tour of Vancouver, Dr. Bürki was pleasantly amazed that amongst the historical landmarks pointed out by the bus driver was North America's first safe injection site. "Vancouver has made progress since the last time I was here two years ago," he notes. And given the increasing rate of use of the supervised injection site, he thinks a second one might soon be warranted. 🌈

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FOUR PILLARS NEWS

News in brief

Toxic Leukoencephalopathy continues to rise among BC heroin smokers

Source: Vancouver Coastal Health media release, November 27, 2003

There has been a dramatic increase in the number of cases of heroin-induced toxic leukoencephalopathy in B.C., all tied to 'chasing the dragon' or smoking heroin, Vancouver Coastal Health said last month.

Between January and July of this year, 17 cases of toxic leukoencephalopathy were confirmed in the province, up from four during the same period last year. Of the 17 cases, seven died. This compares with only two deaths in 2002. The statistics came to light during an investigation this year into a smaller cluster of cases that surfaced in 2002 in the Vancouver Coastal Health region. All of the 17 individuals has a history of inhaling heated heroin, and are believed to have received their heroin from the Lower Mainland.

'Chasing the dragon' is the process of heating heroin with a flame over aluminum or tin foil, and then inhaling the white smoke, or pyrolysate, using a small tube. Toxic leukoencephalopathy is believed to be caused when a toxin within the heroin, whether added to the heroin or produced when the heroin is heated, leads to injury of the white matter in the brain.

"Current heroin users should be aware of this risk and are encouraged to seek addiction treatment," said VCH Chief Medical Officer John Blatherwick.

"Individuals, their friends and family should be aware of [symptoms of toxic leukoencephalopathy, including difficulty with speaking, walking or getting out of bed after smoking even small amounts of heroin] and seek immediate medical attention...if they are a heroin smoker."

The first identified cluster of toxic leukoencephalopathy cases was identified in Amsterdam in 1982.

Mexico City's top prosecutor calls for legalization of drugs

Source: AP, November 14, 2003 and CP, November 17, 2003

Mexico City's top prosecutor said last month that he thinks Mexico should consider a gradual legalization of drugs in order to reduce the influence and power of drug traffickers, the Associated Press reported. "I think they (drugs) could gradually be legalized, starting, for example with the prisons, where there is a whole mafia structured around control of the drug trade," said City Attorney General Bernardo Batiz.

However, Mexico's national attorney general took the opposite position days later, according to the Canadian Press. Rafael Macedo de la Concha urged Canada and other members of the Organization of American States (OAS) to reject the trend to

legalize drugs, in a speech to the OAS's Inter-American Drug Abuse Control Commission meeting in Montreal last month, says the "increased social acceptance" of drugs must also be curbed.

VCH hires Dr. David Marsh to coordinate drug and alcohol treatment

Source: Vancouver Sun, November 8, 2003

Vancouver Coastal Health has hired Dr. David Marsh of the Toronto-based Centre for Addiction Medicine and Mental Health -- Canada's largest hospital for addiction treatment -- to coordinate its drug and alcohol treatment programs.

Marsh, 37, will begin work in Vancouver in January as the region's first physician leader for addiction medicine. Marsh said he was moving to BC because of government-funded initiatives such as inSite, the new supervised injection site near Hastings and Main.

"There's a political environment and funding situation here in Vancouver that creates an opportunity to design a system that makes sense," Marsh told the *Vancouver Sun* in November.

UK MPs vote to downgrade cannabis

Source: <http://news.bbc.co.uk>, October 29, 2003

Cannabis users in the UK will generally no longer be arrested for possession, according to the BBC. British MPs have backed a move to downgrade cannabis, putting it in the same group as tranquilizers and steroids.

The reclassification of the drug was supported by a majority of 156 MPs in the British House of Commons, despite Conservative Party warnings that it would lead more young people into harder drug use.

The changes, which will come into effect in January 2004, mean penalties for possession of the drug will be lessened, but dealers could still face up to 14 years in jail. Police will also retain the power to arrest users in special circumstances, such as when the drug is smoked outside schools. 🌈

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Tell your story in the Four Pillars News

Do you have news on how your company or organization is making a contribution to substance misuse prevention, treatment, harm reduction or enforcement in Vancouver?

Ask us how we can help you share your story. Here's your chance to tell your fellow Four Pillars Coalition members and the public how you're making a contribution to the Four Pillars Drug Strategy in our community.

You can write and submit your own story to us, or suggest an idea for us to follow up on. Two to three member stories will be selected for publication in each issue of the Four Pillars News. For more information or to submit a story idea, contact Four Pillars News Editor [Lesli Boldt](#).

Note: The editor will select articles and story ideas, and will inform Coalition members if their story idea has been selected for publication in an upcoming issue. Byline credit will be given for submitted stories written by Coalition members. Stories should be no more than 350-400 words in length. Photo submissions are encouraged. The editor reserves the right to edit submitted articles for length and clarity. 🌈

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