



District of Sooke
MAR 14 2008
Received

March 7, 2008

Janet Evans
Chair, Planning and Protective Services Committee
Capital Regional District
625 Fisgard Street
Victoria, BC V8W 2S6

Dear Chair Evans

Re: Proposed Distribution of Mouthpieces and Push Sticks for Crack Cocaine Pipes

Street drug use is a concern for communities across the province and within the Vancouver Island Health Authority (VIHA). This includes an increased use of smoked crack cocaine. I want to take this opportunity to provide additional information about this issue, and update you on VIHA's commitment to consult with local communities on harm reduction strategies as part of our effort and mandate to reduce the spread of communicable diseases.

At this time, VIHA does not fund or distribute crack kits, mouthpieces or sticks for street drug users. Like all health authorities in BC, VIHA participates in the Provincial Harm Reduction Committee, and is responsible for following best practices in harm reduction as outlined in the BC Harm Reduction Supply Services Policy through the BC Centre for Disease Control (BCCDC).

This provincial committee recently announced that mouthpieces – in the form of clear vinyl tubing and small wood push sticks – to reduce the spread of disease, will be included in provincially available harm reduction supplies beginning in April 2008 through funding provided through the BCCDC. The purpose of these items is to reduce the spread of communicable diseases such as Hepatitis C among users and within the community itself.

Nearly 70 percent of drug users smoke crack cocaine, a practice that often results in the users sustaining burns. These burns, along with the common habit of sharing crack pipes, put them at risk for abscesses and the spread of communicable diseases such as Hepatitis C.

The Vancouver Island Health Authority's Medical Health Officers support the distribution of sterile mouthpieces for crack pipes as a simple and inexpensive approach that can help prevent the spread of disease. The distribution can also be a point of contact for marginalized and vulnerable street people to access health care and addiction treatment services that they might not otherwise receive.

We are aware there may be other agencies in some communities distributing mouthpieces and push sticks independently of VIHA. It is important that support systems are coordinated within communities and to this end VIHA is committed to work with these agencies on harm reduction strategies and support the coordination of services.

Office of the Chief Medical Health Officer

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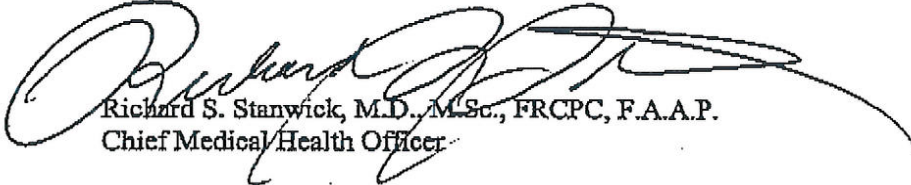
Our Vision: Healthy People, Healthy Island Communities, Seamless Service

VIHA has previously committed to consult with municipalities across the health authority prior to implementing any policy change on harm reduction programs in your community.

VIHA will be contacting your office in the near future to arrange a meeting if you so wish. Please do not hesitate to contact me if you have any additional questions. For more information on harm reduction, please refer to the attached Health File document *Understanding Harm Reduction*.

I look forward to working with you.

Yours sincerely



Richard S. Stanwick, M.D., M.Sc., FRCPC, F.A.A.P.
Chief Medical Health Officer

c.c.: Medical Health Officers, Vancouver Island Health Authority



BCHHealthFiles

Number 102
July 2007

Understanding Harm Reduction

What is harm reduction?

"Harm reduction" aims to keep people safe and minimize death, disease, and injury from high risk behaviour.

Harm reduction involves a range of support services and strategies to enhance the knowledge, skills, resources, and supports for individuals, families and communities to be safer and healthier.

A range of services is available to prevent harms from substance use. Some examples include:

Impaired driving prevention campaigns

Create awareness of the risks of driving under the influence of alcohol and other legal or illegal substances

Peer support programs

Groups for people who use substances - to improve their quality of life and to address gaps in services

Needle distribution programs

Distribute clean needles and other harm reduction supplies and educate on their safe disposal

Outreach and education

Make contact with people who use substances to encourage safer behaviour

Substitution therapies

Substitute illegal heroin with legal, non-injection methadone or prescription heroin

Supervised consumption facilities

Prevent overdose deaths and other harms by providing a safer, supervised environment for people using substances

What are the benefits of harm reduction?

Harm reduction has many benefits for people who use substances, their families, and communities. Research shows harm reduction activities can:

- Reduce HIV infection and hepatitis
- Reduce overdose deaths and other early deaths among people who use substances
- Reduce injection substance use in public places, and reduce the number of used needles in public
- Reduce the sharing of needles and other substance use equipment
- Educate about safer injecting and reduce injecting frequency
- Educate about safer sex and sexual health and increase condom use
- Reduce crime and increase employment among people who use substances
- Increase referrals to treatment programs and health and social services

What does harm reduction mean for people who use substances?

Harm reduction makes it as easy as possible for people who use substances to get help.

Harm reduction services are open to all people who use substances, at any stage of their substance use. This way, help is available when someone using substances wants to move in a new direction, for example switching from injecting, or using heroin to using methadone, or accessing treatment.

People who use substances are encouraged to participate in harm reduction activities. These services aim to involve people in their own health by keeping them connected to the health system. Harm reduction can empower people to improve the quality of their lives.

I have concerns about harm reduction...

Many people express concerns about harm reduction. Some of the more common concerns are addressed here.

Q: Could harm reduction make it easier for people to use substances and prevent them from quitting?

A: In society, there are people who use substances. Dependent users may not want or be able to quit, or may continue to relapse into substance use. Harm reduction reduces the risk and spread of infections like hepatitis and HIV. Harm reduction creates opportunities for people to lead healthier lives.

Q: Could harm reduction activities encourage people to use substances?

A: Research shows that harm reduction activities do not encourage substance use.

Q: Does harm reduction drain funding from treatment programs?

A: Treatment programs are part of harm reduction. Specific harm reduction activities

are cost-effective, and prevent costly outcomes like hepatitis and HIV.

Q: Does harm reduction mean trying to legalize substances?

A: Legalization is not part of harm reduction. Harm reduction applies to both legal and illegal substance use. A high school organizing safe rides home after graduation because parents realize their teenagers may be drinking, is an example of harm reduction.

For More Information

- Harm Reduction: A British Columbia Community Guide
www1.hlth.gov.bc.ca/prevent/substance.html
- Substance Information Link
www.silink.ca



BC Centre for Disease Control
AN AGENCY OF THE PROVINCIAL HEALTH SERVICES AUTHORITY

For more BC HealthFile topics visit
www.bchealthguide.org/healthfiles/index.stm,
or visit your local public health unit.

Call the BC NurseLine to speak to a
registered nurse, available 24-hours every
day:

- In Greater Vancouver, call 604-215-4700
- In BC, call toll-free 1-866-215-4700
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