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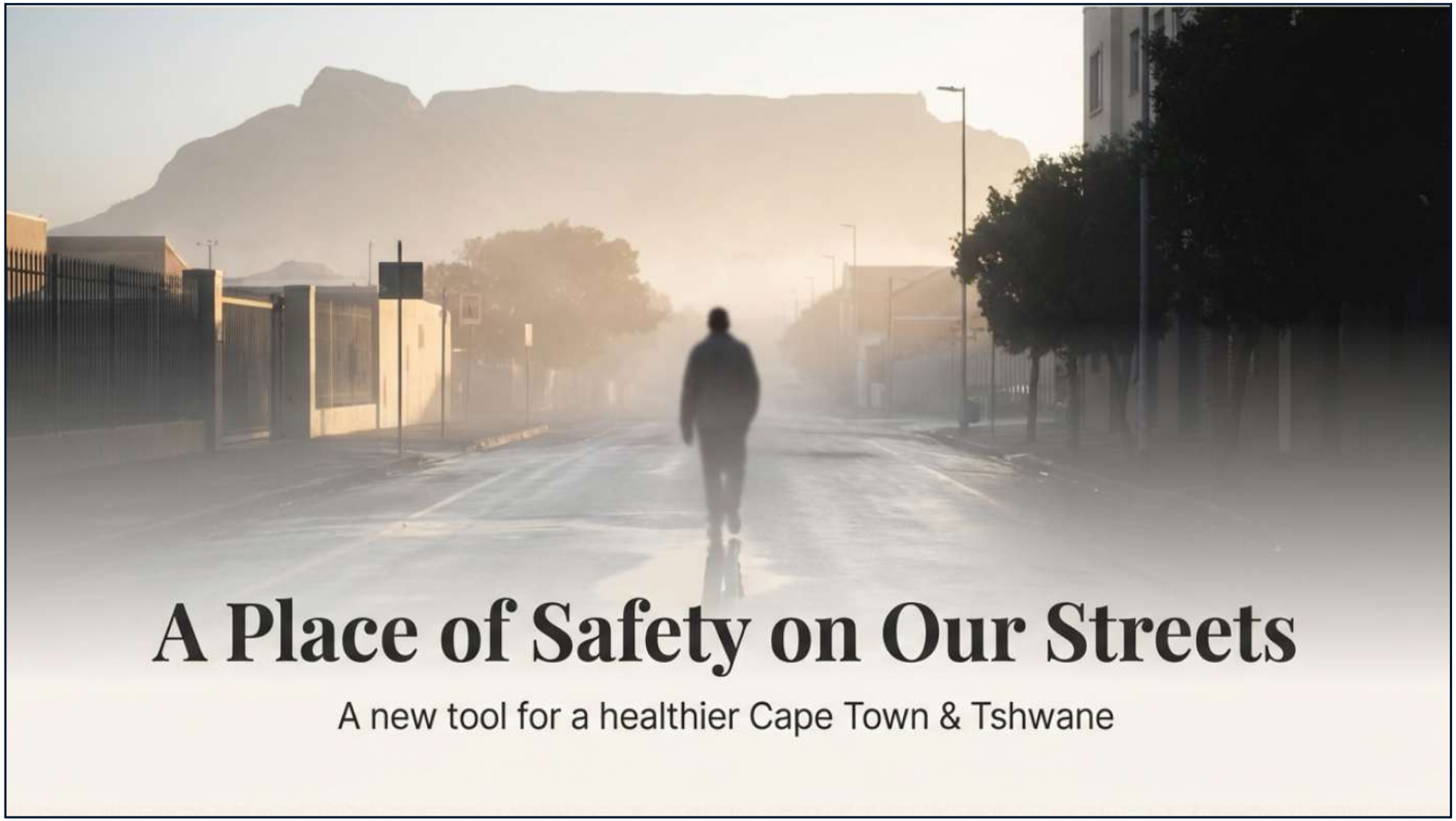
Solutions for Public Drug Use & Overdose

Creating Safer, Inclusive and Healthier Cities.


A Place of Safety on Our Streets
A new tool for a healthier Cape Town & Tshwane

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Our city is home to thousands of people like Themba.

Themba has lived on the streets for six years. He is someone's son. He is part of our community.

Like many, he uses drugs to cope with the trauma of his daily reality. He wants to be safe. He doesn't want to die.

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Without a safe place, the risks are borne by everyone.

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There is a proven way to prevent overdose deaths and restore public order.

Vancouver, Canada

Sydney, Australia

Zürich, Switzerland

Over 100 cities around the world, from Sydney to Vancouver, use a specific tool to address this crisis: Overdose Prevention Sites. They are not what you might think. They are clinical, professional, life-saving health services.

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An OPS is a clinic. It provides essential health services.

Sterile Equipment

Access to clean drug use equipment and safe disposal.

Medical Supervision

Trained staff present to monitor and assist.

Emergency Response

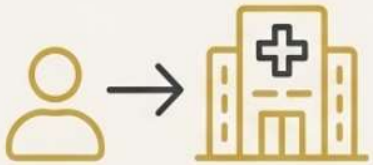
Immediate medical care for overdose, including naloxone. **No one has ever died of an overdose in an OPS.**

Wound Care

Basic health services for injection-related infections.

Health Education

Education on safer consumption practices.



Referrals to Care

A gateway to drug treatment, housing, and other social services.

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Fatal overdoses ever recorded in a supervised consumption site. Anywhere in the world.
Source: Based on data from over 100+ sites globally over 30 years. INHSU, National Harm Reduction Coalition.

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They are a critical tool for stopping the spread of HIV and Hepatitis C.

Up to 28%

of new Hepatitis C infections could be prevented over 10 years by opening an OPS.

Up to 22%

of new HIV infections could be prevented in the same period.

By reducing syringe sharing, these sites break the chain of transmission for blood-borne diseases that have a devastating and costly impact on our communities.

Source: Based on peer-reviewed modeling from cities facing similar epidemics (NIH Study on SCS in California).

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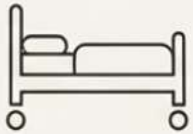
An OPS reduces the immense strain on our emergency services.

67% Reduction

In ambulance calls for overdose in the immediate vicinity of a site.

54% Fewer

Emergency room visits by people who use the site.



50% Fewer

Nights spent in the hospital by site users.

Every overdose managed safely inside a site is an ambulance run and ER bed saved for another emergency.

Source: Lambdin et al., 2022; Supervised Consumption Sites: The Epidemiological, Economic, and Policy Case

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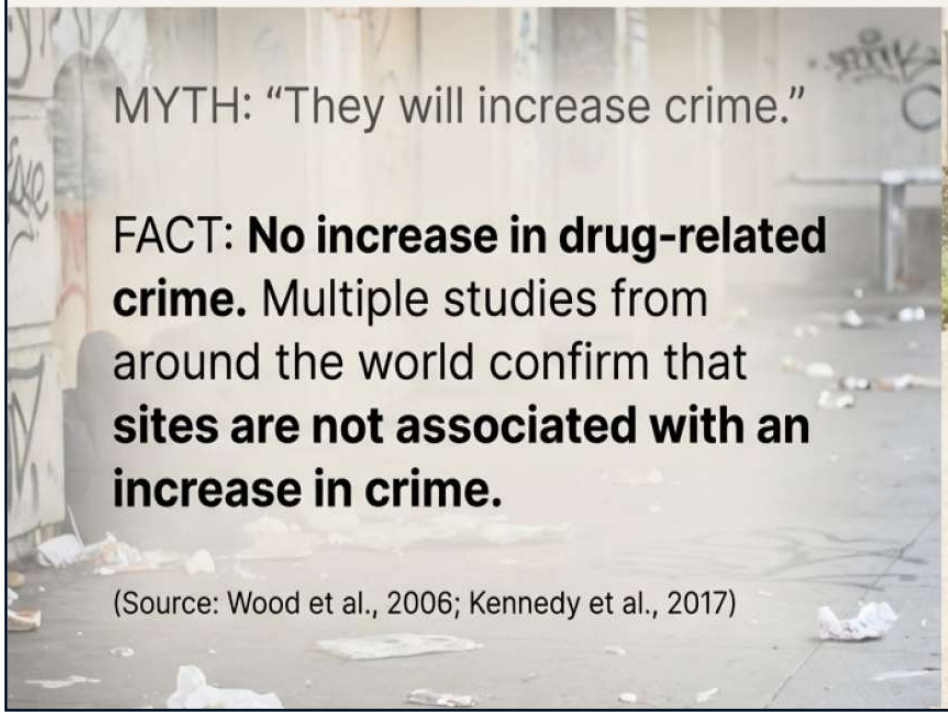
The evidence is clear: These sites make neighborhoods safer and cleaner.



MYTH: “They will increase crime.”

FACT: **No increase in drug-related crime.** Multiple studies from around the world confirm that **sites are not associated with an increase in crime.**

(Source: Wood et al., 2006; Kennedy et al., 2017)

MYTH: “They will create more public disruption.”

FACT: **A significant decrease in public nuisance.** Areas with sites see a measurable reduction in public injections and publicly discarded syringes.

(Source: Wood et al., 2004; INHSU Policy Brief)

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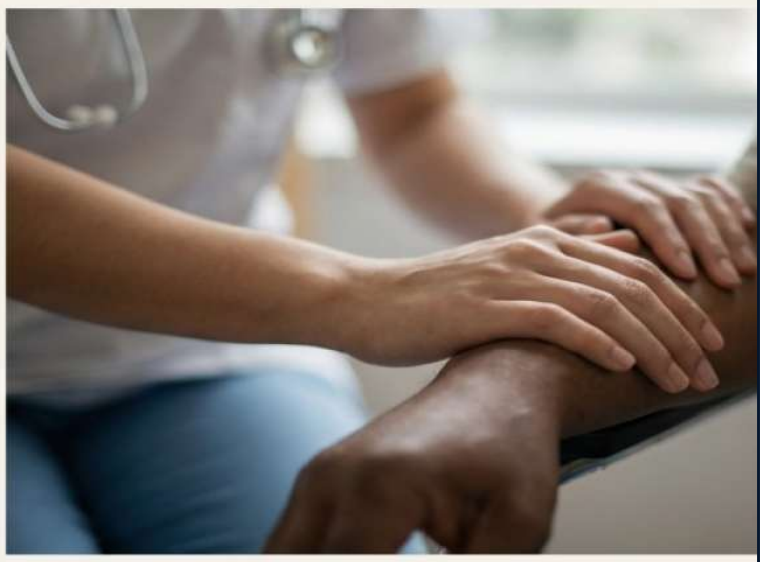
A place of safety is the first step toward a path of recovery.

Overdose Prevention Sites build trust with our most marginalized residents, making them a proven gateway to treatment.

46% of participants at one site entered addiction treatment.

20,420 referrals to treatment and other social services were made at the Sydney site in 20 years.



For people like Themba, who have been shut out of the system, this is the first door that opens. It's a connection to care, dignity, and the possibility of change.

Source: dbhids Review of Evidence; INHSU Policy Brief

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The Economic Case: Saving lives is also the most cost-effective choice.

Financial models from cities that have studied this intervention show a powerful return on investment.

Case Study: Baltimore, MD (USA)

- **Annual Cost of one OPS:** R34 Million ($1.8 Million USD)
- **Annual Savings Generated:** R147 Million ($7.8 Million USD)
- **Return on Investment:** Every R1 invested generates R4.30 in savings.

Source of Savings: Averted costs from ambulance runs, emergency department visits, hospitalizations for infections, and lifetime HIV/HCV care.

Source: Irwin et al., 2017, AAFP

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This is not just a global model. It is a solution for South Africa.

Our Reality

- A significant portion of our drug-using population is homeless, making them extremely hard to reach with traditional services.
- Public health crises of HIV, TB, and Hepatitis are deeply intertwined with injection drug use.
- Our emergency services are already stretched to their limits.

The OPS Solution

- Reaches the most marginalized and provides a consistent point of contact for care.
- Directly combats the spread of blood-borne diseases.
- Provides immediate relief to frontline responders and hospitals.

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A Safer, Healthier Future for Everyone.

Fewer **Overdose Deaths**.

Cleaner Public Spaces.

Healthier and More **Resilient** Communities.

It starts with a place of safety.

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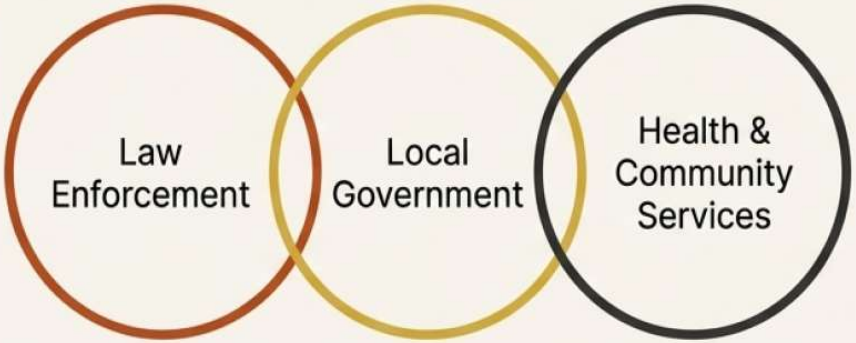
Let’s Take the First Step, Together.

The evidence is overwhelming. The need is urgent. The solution is proven. We are not asking for an immediate city-wide rollout. We are proposing the formation of a multi-sectoral task force to authorize and design a pilot Overdose Prevention Program for Cape Town and Tshwane. Let’s bring this life-saving tool to our cities.



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Thank You

For further information;

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References