

OPINION | ANDREW LELLING

# Safe injection sites aren't safe or legal



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**The Insite safe injection clinic in Vancouver, B.C.**

**By Andrew Lelling**

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The opioid epidemic is the greatest public health crisis facing the United States since the Spanish influenza of 1918. But while federal and state authorities continue to battle this threat, others work to effectively legalize opioid abuse by opening supervised injection sites in Boston and surrounding towns. Injection sites give addicts a “safe” place to inject themselves with heroin and fentanyl — “safe” meaning with medical supervision but without the risk of arrest. These sites are a terrible idea and, more important, they are illegal.

Heroin and fentanyl are not pot brownies. Promoters of supervised injection sites need to understand that, short of legislative reform, any effort to open an injection site in Massachusetts will be met with federal enforcement. Following marijuana legalization, some in the Commonwealth have come to view federal drug laws as a mere inconvenience, stubbornly antiquated rules that surely must yield to those with superior insight and the best of intentions. I urge advocates for these sites to focus on winning over Congress, not on convincing city leaders to (a) ignore federal law and then (b) hope federal authorities ignore it too.

Supporters of supervised injection sites are quick to highlight studies of foreign injection sites that purport to show, for example, [a decline in overdose-related deaths in surrounding areas](#).. But, [as the RAND Corporation recently concluded](#), most of these studies are marred by methodological flaws and ignore risks people care about, like the risk that giving addicts somewhere to take drugs might extend — not shorten — their period of addiction. Many studies are also [coauthored by long-term promoters of supervised injection sites](#), including the Insite facility in Vancouver, British Columbia.

Moreover, while that facility is often touted as a model of its kind, proponents tend to ignore inconvenient facts. For example, [overdose deaths in Vancouver rose steadily](#) for years after Insite was opened in 2003. The presence of the site [increased public disorder in Vancouver's Downtown Eastside](#) to the point that one official called it “a war zone.” Within a year of its opening, Vancouver Police posted four officers at the site and an additional 40 in the surrounding neighborhood.

These consequences should surprise no one: If you're a drug dealer looking for customers, an injection site is where you'll find them. If your neighborhood hosts an injection site, drug addicts will go to your neighborhood. The City of Vancouver dropped the speed limit on the street next to Insite to about 20 miles per hour because addicts might wander into traffic. Do you want this in Boston? In Cambridge?

Ultimately, however, debating studies misses the point. This is a philosophical contest about how Americans should confront a social crisis. Injection sites normalize intravenous drug abuse, encourage a horrible addiction, and let down the people who suffer from it. Promoters of these sites offer addicts little but failure — medical safety at the time of injection but, overall, mere complicity in a nightmarish cycle of addiction leading to death. Perhaps not when the addict shoots up under the careful eye of a medical professional, but one of the hundreds of other times she shoots up somewhere else.

I am unwilling to declare defeat in the battle to reduce opioid abuse, especially when the creativity and hard work of state and federal authorities is bearing fruit. [Overdose deaths are leveling off or declining in areas hardest hit by the crisis](#) : New Hampshire may post its first decline in six years, echoing declines in Massachusetts, Rhode Island, Ohio, and Kentucky.

There is, of course, more to do; in Massachusetts, for example, overdoses still exceed the national average. But federal authorities, like our state and local counterparts, now devote unprecedented resources not just to arresting traffickers but to outreach, education, and addiction treatment. At the national level, the First Step Act shows that bipartisan consensus is possible on innovative criminal justice reform, including improving treatment for opioid addicts. We are beginning to see results. It's not the time to give up and — make no mistake — supervised injection sites amount to giving up.

*Andrew Lelling is the US attorney for Massachusetts.*

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