Workers offer insight into Insite

SAFE DRUG INJECTION: When people ask where they work, the answer might be ‘retail’

BY IAN BAILEY
STAFF REPORTER

For some workers at North America’s only supervised injection site, one of the trickiest things about the job is explaining it. “How do you describe the job of helping addicts safely use drugs that are deemed illegal?”

“You know you’re in for an hour-long conversation,” said Allison Laing, a 35-year-old dayshift co-ordinator at Insite. “From now on, at any parties at my dad’s house, I am in retail.”

Beside her in a booth at the Ovaltine Cafe on East Hastings, about a block east of the Insite safe-injection facility, program worker Paulo Ribeiro recalled a function at the house of his girlfriend’s stepfather.

Ribeiro, 32, was among business types and accountants in their mid-50s and older. “When they asked me, ‘Where do I work?’ and I said where I worked, it was kind of like this uncomfortable conversation stopper, so I realized, ‘The next time they ask me...’ “

“Retail,” interjected Laing. “Social worker,” continued Ribeiro, though he added that most people are supportive. “Or they’re very curious,” said Laing.

Insite — which opened in September 2003 as an experiment to try to prevent overdose deaths and the spread of blood-borne diseases — is still controversial to some. To its employees, it is also a job.

Three of them — Laing, Ribeiro, and Darwin Fisher, 40 — agreed to sit down with The Province to provide an insight into Insite.

Each came to Insite over the past three years from other jobs in the downtown Eastside. There are others at Insite, including nurses from Vancouver Coastal Health and peer workers. In all, 16 people a day work at the facility, funded by the B.C. government to the tune of $1.5 million to $1.8 million a year.

They work in two shifts of about nine hours each. The average hourly wage for the program workers interviewed by The Province is $16.75 an hour. There is a night-shift differential. Nurses earn more.

Fisher drew a sketch of the storefront facility. It showed the front door and waiting room where clients arrive between operating hours of 10 a.m. and 3:45 a.m.

By the time the doors open, staff have cleaned up and stocked stations for injecting with syringes, water, alcohol swabs and rubber ties to be affixed to arms so veins are easy to find.

As users arrive, they give their names, usually code names so staff can call up records for relevant information.

“They pick a handle or a nickname that they will be identified by, which is to protect every- one’s privacy,” said Ribeiro.

Then they proceed to the Injection Room — a.k.a. the “Hair Salon” — to inject their drugs under medical supervision.

Nurses are on hand to assist. They deal with specific health needs like hygiene, abscess- es, handing out information and helping users find their veins. “There’s a whole roster of injection information that even a lot of people who have been using for a long time don’t know,” said Fisher.

Some female users linger to do their make-up in the Injection Room, taking advantage of mirrors at a station where they shoot up. Staff gently try to move people along so there is no traffic jam.

“There are people who get bogged down for a variety of reasons,” said Fisher. “It can be absolute hell finding a vein for some of the users, and it can take hours of work with a nurse and program staff and anybody else.”

Sometimes there are overdoses, sparking a protocol that includes nurses applying oxygen and calling 911, if required.

There was one the night before this interview. The woman, using heroin, survived. “She was on oxygen for a bit, sat there, her heart rate went back to normal,” said Laing.

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Fisher’s map showed a route from the Injection Room to the “Chill Lounge” where there is coffee and orange juice, and users can relax for a moment before leaving.

There, users are given information on housing, detox programs and other services. “It’s a great time to talk to people, get to know them,” said Fisher.

Not all of the users are down trodden. There are some working people. “Even white-collar working people,” Ribeiro noted. “In three-piece suits,” added Laing.

Why? “For safety,” said Laing; they fear overdosing if not supervised.

Christmas is a complication. “People are running a lot about their personal history and past and want to talk to other people,” said Ribeiro.

“There is a lot of pain associated with (Christmas),” said Laing.

For staff like Laing, Ribeiro and Fisher, it can be a challenging way to earn a living. They came to Insite for the challenge, to try something different, or because they knew someone involved in the project, whose primary partners are Vancouver Coastal Health and the Portland Hotel Community Services Society.

“I enjoyed the notion that we’re providing some service that’s not being provided anywhere else,” said Ribeiro. And the work “never gets boring.”

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In September, federal Health Minister Tony Clement said Insite could continue to operate until his department makes a decision on its fate by the end of 2007.

Meanwhile, studies are to be conducted into the impact of supervised injection sites on crime prevention and treatment.

“We’re happy to still be open,” said Fisher. “Hopefully, this window of opportunity will allow for some real discussion. If it’s dealt with in terms of the facts, we’ll stay open.”

Asked where they’ll be in a few years, Laing quipped, “We’ll be looking at the other Insite that has opened across the street.”

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Insite workers Paulo Ribeiro (left), Allison Laing and Darwin Fisher are drawn to jobs that are like no other — staffing North America’s only supervised drug injection site in Vancouver’s Downtown Eastside. ARLIE REDKOP — THE PROVINCE

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