

Let me tell you a secret about Harm reduction

Vancouver police are practising it daily on the street, whether they know it or not, or just don't want to admit it

I have been a police officer for some 26 years. I was a police liaison with the Vancouver Agreement — a city, provincial, and federal government partnership dedicated to solving the longstanding problems of Vancouver's Downtown Eastside.

I was the police lead for Vancouver's supervised injection site project team as well as the North American Opiate Medical Initiative and a member of the Citywide Enforcement Team.

I am the Vancouver Police Department's drug policy coordinator.

But I am also a police officer who came to the VPD from the RCMP in 1987 and walked a beat on Granville Street. At the time, arresting people for using drugs was just simply part of what I did as a police officer.

However, I was lucky; I had a senior partner, Roy Fleming, who told me this: "Always remember that the only difference between you and them is that they stuck a spike in their arm and you did not, otherwise they could be your neighbour."

So perhaps that's why nearly 19 years later I am here today to talk to you about policing and harm reduction.

The police in Vancouver have a secret we don't want to tell you, but I will share it with you today. We are harm reduction practitioners; we just don't know it ourselves or we don't want to admit it.

I suggest harm reduction can simply be defined as the practice of reducing harm. Therefore, anyone can be a practitioner, whether a police officer, a street outreach worker, a drug user peer or a health care worker, to name a few.

The public perception that needle exchange and injection sites are the sole definition of "harm reduction" may undermine support for harm reduction.

Police have an important role to play. In the mid-'90s a study revealed that nearly half of the homicides in Vancouver occurred within a 13-block radius of Main and Hastings Street, and involved intoxication by alcohol, and a knife.

Enforcement at licensed premises was increased dramatically and

Scott Thompson



over the next five years we witnessed nearly a 50-per-cent annual reduction in the homicide rate as the alcohol and knife homicides disappeared.

I suggest that the "saving" of those lives through selective enforcement was harm reduction or reducing harm.

We also learned of research that showed a link between fatal heroin overdoses and alcohol consumption.

So enforcement in licensed premises may have had an impact in reducing the heroin overdose death rate and the homicide rate in the late '90s and into this century.

Of course, there may have been other variables that could have accounted for this. But what matters is that there was a shift in our awareness and consciousness that police should do liquor enforcement because it could save the lives of heroin users and others in the Downtown Eastside.

The elimination of rice wine from corner stores was our greatest success. Vancouver's public health officer and the coroner estimated rice wine caused 100 deaths a year as well as thousands of calls for ambulances.

Vancouver police partnered with the community, including the Vancouver Area Network of Drug Users and became an advocate for having this product removed from corner stores.

Government stymied these efforts for years. Then in 1999, a group of Vancouver police officers called the *Odd Squad*, the same officers who created a film in partnership with the National Film Board called *Through a Blue Lens*, volunteered to help. They created a startling and provocative video showing the human face and misery of rice wine.

After some four years of discussion, legislative changes were

enacted within three months of the video's release. This almost sounds a bit like activism to achieve social and political change.

In 2003, Vancouver police supported and worked with the supervised injection site project team. The policing plan recommended our officers encourage and direct intravenous drug users to use the site. In many cases our officers used their discretion and actually escorted users to the site with their drugs in hand.

I suggest this support was, and is, a reduction of harm or harm reduction.

In 2004 the VPD, with the support of the Vancouver Agreement, engaged in enforcement Projects Lucille and Raven. These projects were directed at the infrastructure of hotels, pawnshops, bars and so on that support and perpetuate the cycle of crime, violence and exploitation of the most vulnerable.

This was a harm reduction initiative and another example of "community activism" to kick-start changes in government policy and practice.

The eventual outcome we hope will be decent housing for this vulnerable population.

There may be times when enforcement and policing appear to be a barrier to harm reduction practices such as needle exchange and access to services.

The police have to balance this with the need to serve all members of the community and maintain a level of safety and security for all, including drug users.

As with the supervised injection site, we had to strike a balance between ensuring ready and open access and also ensuring violence and criminal activity on the street were kept to a minimum.

We may take a different path from our community and health care partners to get there, and at times we may disagree about what the best path should be. But we are all, in our own way, harm reduction practitioners.

Insp. Scott Thompson is with the Vancouver Police Department. This column is a synopsis of a talk he delivered at the Harm Reduction Conference in Vancouver last week.