



Statement from the Substance Use Health Network (SUHN) on Supervised Consumption Services

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Canada is in a sustained toxic drug crisis. In this context, decisions to restrict supervised consumption services in Alberta and Ontario—and ongoing delays in Manitoba—are not neutral. They are policy decisions that abandon people who use drugs and create avoidable risks across the health system.

Supervised consumption services are a proven, evidence-based part of the substance use health continuum. The evidence is clear: they prevent fatal overdoses, reduce infectious disease transmission, and connect people to care.

There is no credible evidence that restricting these services improves health or safety. There is strong evidence that access to these services saves lives and reduces avoidable pressure on emergency departments and paramedic services.

When services are closed, limited, or delayed, people are pushed into more dangerous conditions—using alone and without timely intervention. In today’s toxic drug supply, that is often fatal.

The impacts do not stop there. Overdoses that could have been managed in supervised settings become medical emergencies—placing further strain on already stretched paramedic services and emergency departments. This means longer waits for care. It means avoidable harm. It means more deaths—not only among people who use drugs.

These are foreseeable consequences of policy decisions.

Governments have a responsibility to ensure access to a full continuum of evidence-based substance use health services. Weakening access to one of the most effective life-saving interventions weakens the entire system.

We call on governments to:

- Halt closures and restrictions on supervised consumption services
- Expedite approvals where services are delayed
- Invest in a full continuum of substance use health options
- Ground decisions in evidence, not ideology

People who use drugs deserve care that is proven to save lives.

Delaying or denying that care, in the face of overwhelming evidence, is indefensible.