

## Cues Location: A Community-Informed Approach

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### Background

As Philadelphia prepares to launch perhaps the first supervised injection facility (SIF) in the nation (locally dubbed Comprehensive User Engagement Sites, CUES), the Center for Public Health Initiatives (CPHI) and the Penn Injury Science Center (PISC) at the University of Pennsylvania convened an interdisciplinary “CUES Evaluation Working Group” of faculty, fellows, and stakeholders from the city and the drug-using community. The working group is funded by a grant from the Leonard Davis Institute for Health Economics (LDI).

“We are facing an epidemic of historic proportions. The people of the city Philadelphia — our brothers, our sisters, our parents, our children are dying. And they don’t need to die.”  
— Commissioner Dr. Thomas Farley

Department of Public Health, Department of Behavioral Health and Intellectual Disability Services, Office of the Mayor (2018). City Announces Progress on Opioid Task Force Recommendations. [online] Available at: <https://beta.phila.gov/2018-01-23-city-announces-progress-on-opioid-task-force-recommendations/> [Accessed 28 Mar. 2018].

### Cues: A Harm Reduction Approach

Drug overdoses are a leading cause of death in Philadelphia, surpassing the number of deaths caused by HIV, guns, or car crashes. With 55,000 illicit intravenous drug users in the city, Philadelphia, may surpass 1,200 overdose deaths in 2018.

As part of an integrated effort to reduce overdose deaths and address the Opioid Epidemic, the city of Philadelphia announced in January 2018 their support for Comprehensive User Engagement Sites (CUES) -- sites where people can inject drugs under medical supervision in well-lit, hygienic spaces. These sites often advise clients about injection-related harms, provide clean injecting supplies, provide linkages to medical and social services, and are equipped and trained to reverse overdoses. Sites that operate in this fashion have existed for over 3 decades in Europe, and for over a decade in Australia and in Canada. Over 100 facilities are in operation globally.

Aside from preventing fatal overdose, people with an addiction to opioids who use CUES to inject drugs report less frequent public injection, less syringe sharing, and more uptake in addiction treatment than do other people who inject drugs (PWID). Since the Insite supervised injection facility opened in Canada in 2003, not a single fatal overdose has occurred at the site, and overdose rates have declined 35% in the neighborhoods around the facility and 9% city-wide. Economically, start-up and operating costs for a CUES are small compared to the cost of providing reactive care for PWID with otherwise unmet needs.

Assets
City Council District support
Condom distribution site
Medicated Assistance Treatment site
HIV testing site
Opioid support site
Philadelphia Department of Health Center
Pharmacy
Pharmacy with Naloxone
Public transit
Social cohesion
Syringe needle exchange
Barriers
School
Certified daycare center
Park and Recreation facilities
Police station
Fire station
Alcohol outlet
Gentrification pressures
Demand
Overdose deaths
Narcotics administration events
Police narcotics arrests
Homeless encampments

Figure 1: Features of locations in Philadelphia suggested by stakeholder as relevant to siting a CUES

## The Problem: Siting a CUES

Although the City of Philadelphia supports a CUE, questions remain regarding what organization will launch the site and, importantly, where such a site should be located. A location will have the potential to house a Comprehensive User Engagement Site successfully if access is convenient for PWID, if it is nearby amenities and services that compliment those provided by the CUES, and if a CUES can operate in harmony with residents and businesses in the area.

## The Solution: A Rapid-Response, Community-Engaged Effort

The “CUES Evaluation Working Group” rapidly undertook a scientific, stakeholder-engage approach to identify fundamental criteria, and report them without delay to the City and eligible organizations as they carry out the important process of determining where to open a CUES.

Using a mixed methods approach that combines geographic analyses and qualitative research methods, we asked stakeholders including municipal employees, healthcare providers, PWID, and residents from across Philadelphia for their thoughts about what features would make a location either well suited or not well suited for operating a CUES (Figure 1). That process revealed approximately 20 aspects of the built environment or the social environment that we used to classify each city block according to the presence or absence of each type of asset, barrier, or indicator of demand.

Geocoding these location features, assigning a weight to each to represent its relative importance, and summing the values into a score produced a map of Philadelphia that identified 5 specific locations that appear to be most well suited for operating a CUES (Figure 2).

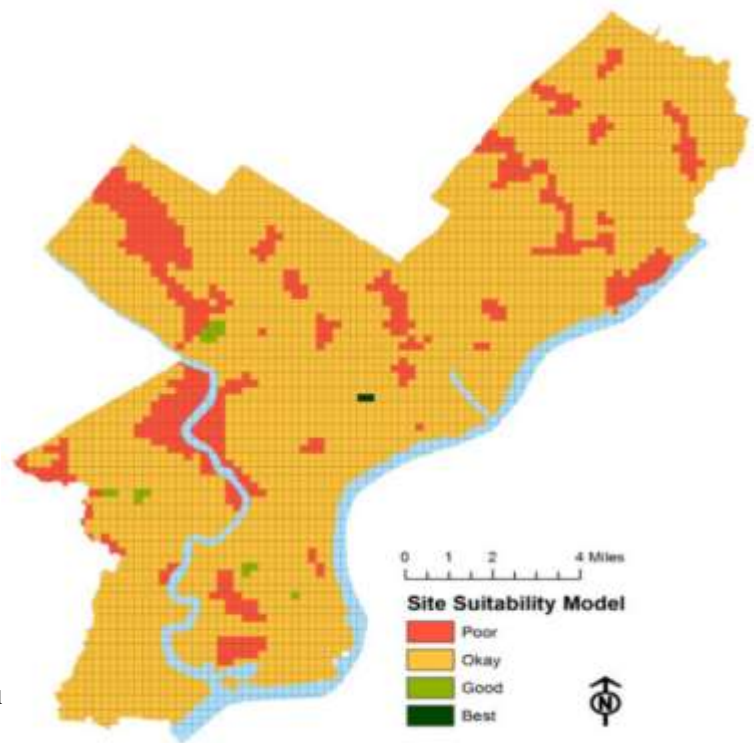


Figure 2: Initial top 5 locations most well suited for operating a CUES

\*The CUES Working Group members from the community of Philadelphia, Prevention Point, the University of Pennsylvania, and other organizations are Paul Cherashore, Evan Anderson, Carolyn Cannuscio, Roxanne Dupuis, Heather Klusartiz, Maggie Lowenstein, Graceann Palmarella, Jennifer Pinto Martin, Hillary Nelson, Meghan Schwarna, Catalyst Twoomey, Erica Goldberg, Zachary Meisel, Jeanmarie Perrone, Ben Cocchiaro, Dave Metzger, Bernadette D’Alonzo, Vicky Tam, and Jose Benitez. The map data came from publically accessible sources including the City of Philadelphia, the Philadelphia Police Department, the Philadelphia Health Management Corporation, and the Pennsylvania Liquor Control Board.

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