



# Overdose Prevention Centers: What You Need to Know



## WHAT ARE OVERDOSE PREVENTION CENTERS (OPCS)?

These are spaces where primarily intravenous drug users are provided a facility to consume pre-obtained illicit drugs under the supervision of a medical team. Their purpose is to reduce death by overdose, public drug usage, injection-related harms, crime, and disorder. Over 140 OPCs currently operate in 10 countries across North America, Europe and Australia. New York City (NYC) opened the first two city sanctioned OPCs in the U.S. in 2021 within East Harlem and Washington Heights, and Rhode Island became the first state to authorize the centers through state statute in 2023.

Vermont authorized OPCs in 2024 through a veto-override. Burlington, Vermont will be implementing an OPC with an accompanying study on the center's impacts.

### OPCs may reduce overdose deaths.

In Vancouver, overdose mortality rates decreased by 35% in the area where most OPC service users lived, while overall overdose mortality rates for the city decreased by 9%.

### No studies have provided any evidence of increases in drug usage, crime or disorder as a result of OPC programs.

In San Francisco, According to a 2023 analysis, before the operation of the OPC in San Francisco, there was a 65% chance of finding a drug-related issue on any given block in the OPC area; in 2022 the chance was 46%.

### OPCs have been shown to attract high-risk target populations.

Data from Vancouver has found that OPCs are most commonly used by individuals at risk for overdose, blood-borne disease infection, those

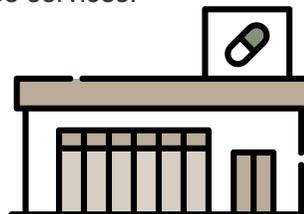
who would otherwise have used drugs in public, and those who were experiencing homelessness.

### OPCs may increase access and uptake of long-term addiction treatment.

In Vancouver, studies have found that OPC utilization increased entry into detoxification programs (30% increase) and led to greater odds of initiating long-term addiction treatment.

### OPCs may reduce the burden on other emergency systems.

OPCs in France have been associated with a 59% reduction in emergency department (ED) utilization for overdose services.



## CHALLENGES

### LEGAL UNCERTAINTY SURROUNDING OPCS IN THE UNITED STATES

Title 21 of U.S. federal law (known commonly as the “crack house statute”) makes it illegal for any entity to allow usage of controlled substances on premises. An unsanctioned OPC appealed an adverse ruling in 2021 and is awaiting response.

### STUDIES CITING POSITIVE OUTCOMES FROM OPCS COME FROM MAJOR CITIES.

There is limited evidence on how effective OPCs may be in rural areas. While some countries have begun creating mobile sites to reach these areas, they have only been enacted in recent years and lack a large body of data showing their value.

### OPC IMPACT ON OVERALL MORTALITY RATES IS UNCLEAR.

While research is clear that OPCs reduce overdose deaths within the centers, it is unclear how effectively OPCs can impact overdose mortality rates in their communities overall.

### MORE OPC RESEARCH IS NEEDED.

80% of published studies come from Vancouver, Canada and Sydney, Australia, and many studies were conducted before fentanyl use became widespread.