



DRUG POLICY MOBILITIES: FOLLOWING HARM REDUCTION THROUGH URBAN BUILT ENVIRONMENTS

SFU Faculty of Environment
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Eugene McCann, Geography, SFU

Outline

- Introduction to key concepts
 - ▣ Harm Reduction
 - ▣ Policy mobilities
 - ▣ Built environment
- Drug policy mobilities
- Example 1: Public space & the local politics of policy mobility
 - ▣ Mobilities and politics in and through Oppenheimer Park
- Example 2: Global networking among Drug Consumption Rooms
 - ▣ Site of persuasion in the politics of policy mobility
- Conclusions

What is Harm Reduction?



- “Harm Reduction’ refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption. (International Harm Reduction Association, 2010)

- We can also understand Harm Reduction as a social, political, & policy movement.



The concept of policy mobilities

The mobilities perspective sees mobility as a “meaningful and power-laden geographical phenomenon” involving “the displacement of an object from A to B” in which **“the type, strategies and social implications of that movement are considered”** (Cresswell, 2001 & 2006, my emphasis)

“[T]he ‘role of the analyst,’” is . . . ‘to follow networks as they stretch through space and time, localizing and globalizing along the way” (Olds, 2001, 9, citing Murdoch 1997, 334-335, my emphasis).

“[We must] develop adequate conceptualizations and robust empirical assessments of policies ‘in motion’, including descriptions of the circulatory systems that connect and interpenetrate ‘local’ policy regimes” (Peck, 2003).

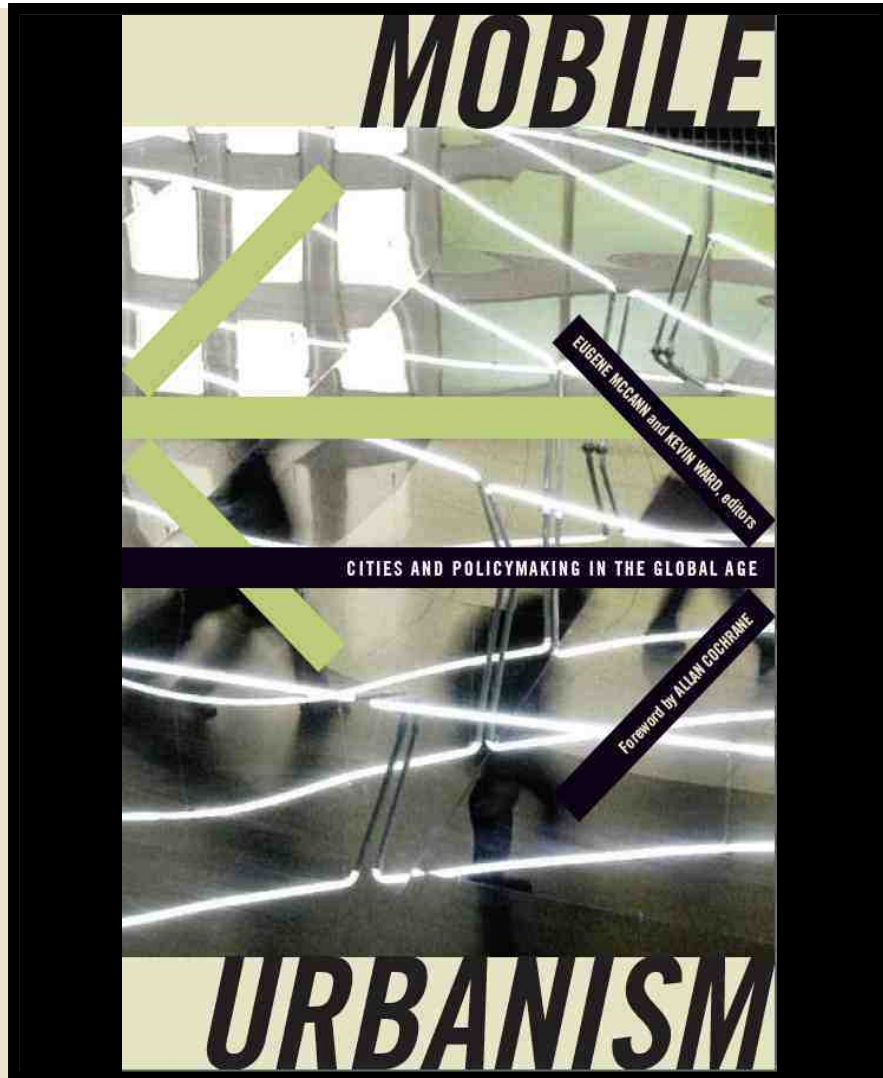
“[There is a need to delineate] the strong diffusion channels and distribution networks that exist to facilitate the transfer of policies of a particular type from one place to another” (Ward, 2006).

The concept of policy mobilities

- **Policy mobilities:** The social and spatial process of circulating, mediating, (re)molding, and operationalizing policies, policy models, and policy-related expertise among policy actors (broadly defined).
 - e.g., McCann (2008, 2011a, 2011b, 2011c); Cook (2008); Mountz & Curren (2009); González (2010); Larner & Laurie (2010); McCann & Ward (2010, 2011), McFarlane (2010); Peck and Theodore (2010a, 2010b), Prince (2010); Ward (2011).
- **Four commitments of the policy mobilities approach:**
 - To detailed empirical analyses of the contexts and practices of policy mobilization
 - To analyses of inter-local mobilizations while seeing wider contexts
 - To analyses of mutation, hybridity, & emergence
 - To rich accounts of the politics of policy mobilities

Mobile Urbanism: Cities & Policymaking in the Global Age

Eugene McCann & Kevin Ward, eds. (Spring 2011, Minnesota)



Preface *Allan Cochrane*

1: Urban assemblages: Territories, relations, practices, and power *Eugene McCann & Kevin Ward*

2: A counterhegemonic relationality of place *Doreen Massey*

3: The spaces of circulating knowledge: City strategies and global urban governmentality *Jennifer Robinson*

4: Creative moments: working culture through municipal socialism and neoliberal urbanism *Jamie Peck*

5: Policies in motion and in place: the case of Business Improvement Districts *Kevin Ward*

6: Points of reference: knowledge of elsewhere in the politics of urban drug policy *Eugene McCann*

7: The urban political pathology of emerging infectious disease in the age of the global city *Roger Keil & S. Harris Ali*

8: Airports, territoriality and urban governance *Donald McNeill*

9: Cities assembled: Space, neoliberalization, (re)territorialization, & comparison *Kevin Ward & Eugene McCann*

What's the urban built environment got to do with it?

Vancouver



Zürich



Geneva



- Geographers on the urban built environment:
 - ▣ A social product & also productive of society
 - ▣ Relational and scaled
 - ▣ Concreteness & process; Fixity & flow
 - ▣ Circuits of capital and people
 - ▣ Circuits of knowledge
 - ▣ Ideas & actions; Politics & policy-making

What's the urban built environment got to do with it?

Supervised Drug Consumption Rooms

Vancouver



Zürich



Geneva



- Following Harm Reduction through urban built environments:
 - Who mobilizes HR knowledge & policy?
 - What informational & institutional 'infrastructures' facilitate this mobilization?
 - What are the key sites of persuasion and political struggle around this mobilization?

Drug policy mobilities

- **Who mobilizes** Harm Reduction knowledge & policy?
 - Politicians; policy professionals (e.g., planners, social workers, medical professionals) and public health departments; police departments; AIDS activists, & drug policy activists, including users; think tanks; ...
- What **informational & institutional 'infrastructures'** facilitate this mobilization?
 - International Harm Reduction Association (IHRA); *International Journal of Drug Policy*; *Harm Reduction Journal*; Drug Policy Alliance; Keeping the Door Open; Hungarian Civil Liberties Union; International Network of People who Use Drugs (INPUD); popular media; documentary film makers; ...
- What are the **key sites of persuasion and political struggle** around this mobilization?
 - Offices of activist organizations; government chambers; public spaces (public meeting rooms, streets, parks; health care facilities, including consumption sites); ...

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Urban public spaces and the local politics of policy mobility

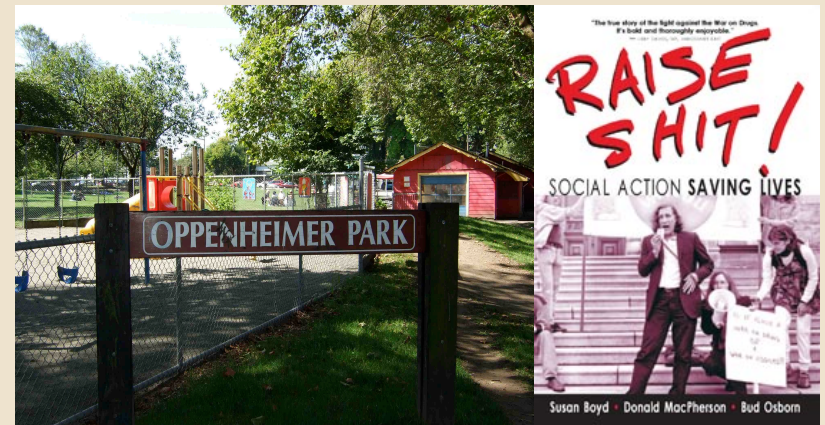
“And at that time, on the hundred block of Hastings, there was just thousands of people openly shooting and smoking crack and it was quite a scene. And so then . . . we did an event in the summer of '97 called “A Thousand Crosses” . . .

... we put a thousand crosses up in Oppenheimer Park and it was sort of a memorial for those people that had died of overdose, drug overdose ...

... I wanted to raise this cry with the demonstrations that we had done and with the thousand crosses, the conditions down here were beginning to register with people beyond the Downtown Eastside” (Vancouver activist).



“A Thousand Crosses.” Oppenheimer Park 1997



Urban public spaces and the local politics of policy mobility

The Oppenheimer 'tent event,' 1998: Policy mobilization in action

“We decided that we wanted to have an event to at least bring the community together. To have that as a starting point. Because if we have a united community then maybe more can be done. So we did an event at Oppenheimer Park. . . . We didn't want it to be in any of the sort of traditional places. Like, to make it in Oppenheimer Park, to make it in a tent, made it very neutral and made it truly a community event” (Event organizer)

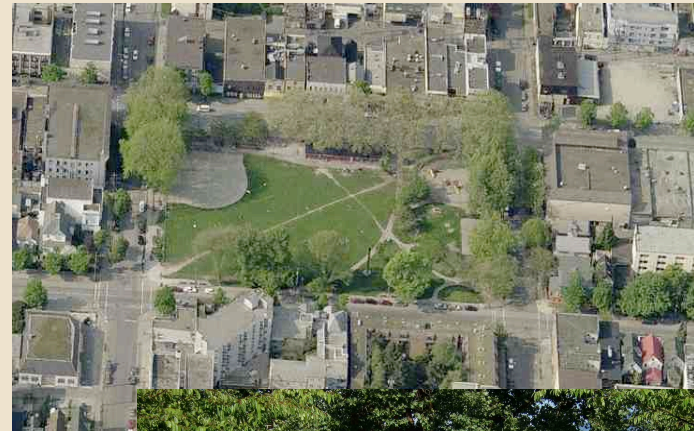


[T]hey brought some people from Bern, Switzerland, Frankfurt, and . . . Merseyside, Liverpool, to an event here. And that was the first time I actually got to talk to other people from the local government level. . . . It was a real watershed in terms of making connections . . . (Senior drug policy official).

Urban public spaces and the local politics of policy mobility

Oppenheimer Park as a “globalizing micro-space” (Larner and Le Heron, 2002, 765).

“We would just cling to [this information from elsewhere] ... [I]t’s really empowering for users to understand that drug users elsewhere were being treated as citizens, citizens that are deserving, you know, [with] compassion.” (VANDU organizer)



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Global/inter-urban networking among Drug Consumption Rooms (DCRs)



Eastside DCR, Frankfurt



Insite
DCR,
Vancouver

Quai 9 DCR,
Geneva



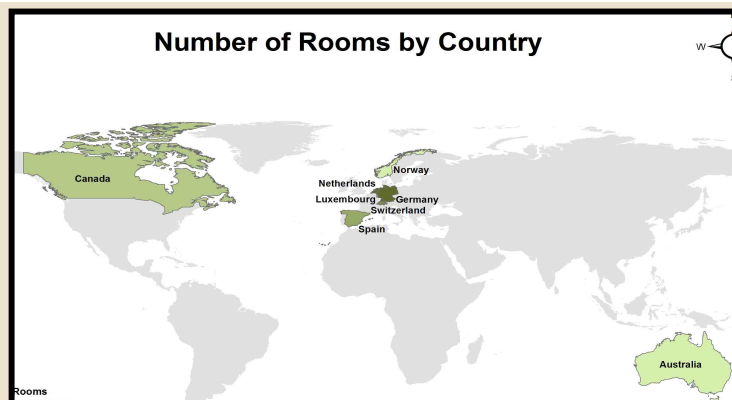
- DCRs: Sites of 'knowledge transfer,' persuasion, and political struggle.

- DCRs: "Protected places for the hygienic consumption of previously obtained drugs, in a non-judging environment & under the supervision of qualified personnel" (Akzept, 2000.)

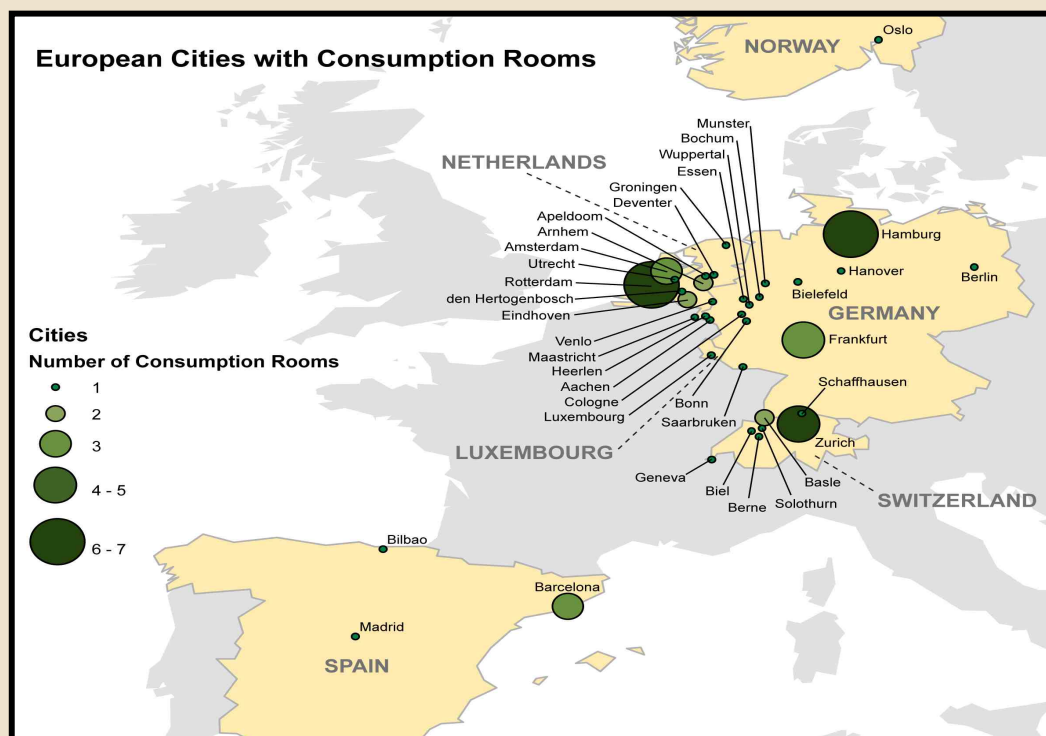


La Strada DCR, Frankfurt

The global-urban geography of DCRs



Country (8)	# of Cities (40)	# DCRs (67) (77)
Germany	14	23
Netherlands	12	22 (32)
Switzerland	7	12
Spain	3	5
Canada	1	2
Australia	1	1
Luxembourg	1	1
Norway	1	1

[illegible]

One informational infrastructure: International Network of DCRs (INDCR)

- “[K]eep and promote the communication directed to exchange knowledge and experiences;”
- “motivate the internal development of these resources based on this exchange;”
- “support the implementation [DCRs] in new contexts of need;”
- “work towards the incorporation of other entities, centres and harm and risk reduction institutions into the Network in order to strengthen it and increase its impact and social utility.”

International Network of Drug Consumption Rooms

MAIN MENU

- About us
- About our activity
- INDCR articles
- Library
- Search
- Contact us
- Links

FAQS

What services does a drug consumption room usually offer?

Are substances provided at drug consumption rooms?

Who uses drug consumption rooms?

Is there any documented evidence on the efficacy of drug consumption rooms?

What is the impact produced by drug consumption rooms within a community?

What is the economic impact produced by drug consumption rooms?

WE SUGGEST...

HAVE YOU VISITED OUR LIBRARY?

Formación Comunitaria en Trastornos Adictivos

Investigación de Dependencias

About us

The 1st International Network of Drug Consumption Rooms (INDCR) is a platform born on the initiative of consumption rooms from all over the world that attended the 1st International Scientific Meeting on Drug Consumption Rooms. The Meeting was organized by **Munduko Medikua** on the 22nd of October 2007 in Bilbao (Spain).

This Network aims at:

- Exchanging scientific knowledge and reaching consensus on best practices.
- Implementing multicentered research that contributes to increasing the efficacy and efficiency of drug consumption rooms.
- Improving and harmonizing data collection from drug consumption rooms.
- Providing support and advice on the creation and opening of new drug consumption rooms.

WHAT ARE DRUG CONSUMPTION ROOMS?

Drug consumption rooms emerge at the end of the 80s, with the first room ever being opened in Switzerland (Berne) in 1986. They are defined as "protected places for the hygienic consumption of previously obtained drugs, in a non-judging environment and under the supervision of qualified personnel" (Akzept 2000). Their aim is to reduce the risk and harm associated to drug consumption both at individual and community level, allowing people to consume drugs in safer and more hygienic conditions and reducing public nuisance associated to drug consumption. These facilities are open to people who are legally of age, with a preceding history of consumption (injection, smoking or sniffing) of illegal drugs. More specifically, they are open to drug users who are in situations of social exclusion and marginalization, whose basic needs are often not met.

Drug consumption rooms represent a strategy among others within the framework of "Risk and Harm Reduction" policies, the latter consisting of the collection of sanitary or social actions, at individual or community level, that aim at reducing adverse effects of any kind (sanitary, social, psychological, economic, family or work related, etc.) that may derive from the consumption of illegal substances. Together with drug consumption rooms, needle (syringe) exchange programs, low threshold access centres for drug users, street and peer work programs or low demand treatment centres also constitute strategies of acknowledged efficacy in "risk and harm reduction".

If you would like to learn more about drug consumption rooms and drug use Risk you can carry an **advanced search** within our website or visit **our archive**.

HIGHLIGHT

Help preventing the shutdown of InSite

Help InSite to continue their work for a safer and more hygienic drug consumption. Don't wait, act!

LATEST CONTENT ADDED

'La Calle de Todos' #1 #0 of "La Calle de Todos" out

Manual Introductorio a la Investigación en Drogodependencias

International Survey of Supervised Injecting Centres 1999-2000

Las Salas de Consumo Higiénico

Global Overview of Injecting Drug Use and HIV Infection among Injecting Drug Users

WE SUGGEST...

#2 La Calle de Todos

Finally online

Mouse-flip through its pages

WHO'S ONLINE

Excerpt from INDCR's founding document (2007) showing signatures of representatives from Frankfurt, Geneva, & Vancouver.

1st REUNIÓN CIENTÍFICA INTERNACIONAL SOBRE ESPACIOS DE CONSUMO SUPERVISADO, Bilbao, 22 de Octubre de 2007

LOS ABAJO FIRMANTES SUSCRIBEN LA DECLARACIÓN DE INTENCIONES RELATIVA A LA CREACIÓN DE LA RED INTERNACIONAL SOBRE ESPACIOS DE CONSUMO SUPERVISADO

1ST INTERNATIONAL SCIENTIFIC MEETING ON DRUG CONSUMPTION ROOMS, Bilbao on October 22nd 2007

THE UNDERSIGNED SUBSCRIBE THE DECLARATION OF INTENTS RELATED TO THE CREATION OF THE INTERNATIONAL NETWORK OF DRUG CONSUMPTION ROOMS

La Strada, AIDS-Hilfe Frankfurt e.V., Frankfurt, Alemania	
La Strada, AIDS-Hilfe Frankfurt e.V., Germany	
Première Ligne, Quai 9, Ginebra, Suiza	
Première Ligne, Quai 9, Geneva, Switzerland	
InSite, Vancouver, Canada	
InSite, Vancouver, Canada	
Novis, Luxembourg	

‘See for yourself’: The power of site visits & first-hand experience



< Members of the Council of Europe's 'EXASS Network' of frontline drug workers meeting with a DCR staff member (right) at La Strada DCR, Frankfurt as part of a fact-finding trip, June 2008.



< Geography students (from Frankfurt) talking to an Insite DCR staff member (left) after a tour, Vancouver September 2008.

(Insite holds regular tours to educate the public and 'normalize' the idea of DCRs.)



International Harm Reduction Association conference delegates visiting Barcelona's mobile DCR, May 2008.

‘See for yourself’: The power of site visits & first-hand experience

“I think that when you tell people that you’ve actually seen [a DCR], they lend greater credence to what you’re saying ... Personal experience cannot ever be underestimated, right? ... You know, it normalizes it” (Social service agency representative, Vancouver).



^

Crack smoking room,
La Strada DCR, >
Frankfurt, 2008



Common room, K&A
Kaserne DCR, Zürich,
2010 (with flag
signed by Swiss
World Cup football
team)

Conclusions

“In classic migration theory, the choice of whether or not to move would be the result of so-called push and pull factors in A and B respectively. The content of the line between them would remain unexplored . . . [and] taken for granted”

(Tim Cresswell, 2006, On the Move (Routledge), 2, my emphasis).

“**Public health** in all its wide and shifting forms is an **important part of urban political geography** that we should consider more fully.”

(Michael Brown, 2009, Public health as urban politics, urban geography. Urban Geography, 30(1), 1-29, my emphases).

Conclusions

- ❑ Harm Reduction is both a public health approach and also a political movement. It is both global and also local.
- ❑ It operates in and through specific assemblages of expertise, practice, institutions, and built environments.
- ❑ These 'globalizing micro-spaces' are:
 - ❑ Circulatory basing points – heterogeneous sites of experimentation and 'best practice,' reference points for global policy communities, locales with circulatory capacities.
 - ❑ Political spaces – objects of governance, sites of politics, symbols of hope (or pessimism, or opposition), and reference points for global activist communities.

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Related Papers available

At www.sfu.ca/~emccann

- McCann, E. In Press (2011). Points of reference: Knowledge of elsewhere in the politics of urban drug policy. (From Mobile Urbanism book).
- --- In Press (2011). Urban policy mobilities & global circuits of knowledge: Toward a research agenda. Annals of the AAG.
- --- & K. Ward, 2010. Relationality / territoriality: Toward a conceptualization of cities in the world. Geoforum, 41, 175-184.
- --- 2008. Expertise, truth, and urban policy mobilities: Global circuits of knowledge in the development of Vancouver, Canada's 'Four Pillar' drug strategy. Environment & Planning A, 40, 885-904.

By email emccann@sfu.ca

- McCann, E. Policy boosterism, policy mobilities, & the extrospective city. Under review at Urban Geography
- ---. Veritable inventions: Cities, policies, assemblage. Under review at Area.