

# Facts & Friction:

## *The politics of evidence in the mobilization of urban drug policy*

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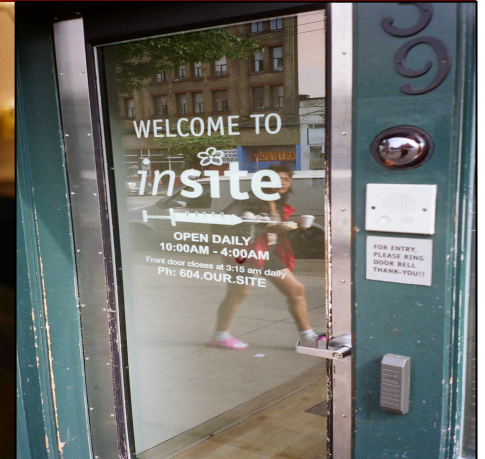


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## Insite, the Four Pillars, & Harm Reduction

- April 2009: News conference before a court case where the federal government argued to close Insite.
- Operating as a trial since 2003, Insite is a facility where street drugs can be injected using sterile equipment, under nurses' supervision.
- It is the most visible face of the Harm Reduction pillar of Vancouver's 'Four Pillar' drug strategy (along with Prevention, Treatment, & Enforcement).
- A Harm Reduction approach advocates 'evidence-based,' rather than ideological, strategies to reduce the health, social, and economic harms of drug use without necessarily seeking to reduce drug consumption or criminalizing users.
- The model was 'imported' to Vancouver from Europe at the beginning of this decade.





## Overarching context:

- The conceptualization of global-urban 'policy mobilities'
  - As socially enacted; as political; as inter-local; as potentially constitutive of progressive outcomes.

(See J. Peck, 2003, *Prog. Hum. Geog.*, 27(2), 222-232; K. Ward, 2006, *IJURR*, 30: 54-75).

- A consideration of public health as urban politics & as globally networked  
(See M. Brown, 2009, *Urban Geography*, 30(1): 1-29; R. Keil & H. Ali eds., 2008, *Networked Disease*, Wiley).

- This has led me to ...

### A social/geographical history of Vancouver's 'four pillar' drug strategy

- Mobilized from Europe; Modified in the process; Operationalized and contested locally (and elsewhere).

E. McCann, 2004. *Urban Studies*, Vol.41(10), 1909-1929.

---- 2008. *Environment & Planning A*, Vol.40(4), 885-904.

---- & K. Ward, In Press (2009). *Geoforum*, Vol.41.

---- Forthcoming. *Annals, Assoc. American Geographers*, Vol.100.

---- Forthcoming. In E. McCann, K. Ward eds. *Assembling Urbanism: Mobilizing Knowledge & Shaping Cities in a Global Context* Minnesota.

Available at: <http://www.sfu.ca/~emccann/>

## 'Trust the Evidence'? Knowledge and politics in Vancouver's drug policy

The mobilization of policy models and best practices involves various forms, constructions, and locations of knowledge:

- Knowledge of/from elsewhere; Codified, credentialized, & institutionalized expertise & evidence; Tacit knowledge
- The 'politics of evidence' marks debates over the appropriateness of 'importing' policies from elsewhere – especially in the context of controversial public health policies



1. Evidence from elsewhere ...  
*Conflicting stories of Frankfurt and Zürich*
2. Insite, Insight, Incite ...  
*The scientific evaluation of Insite and its critics*

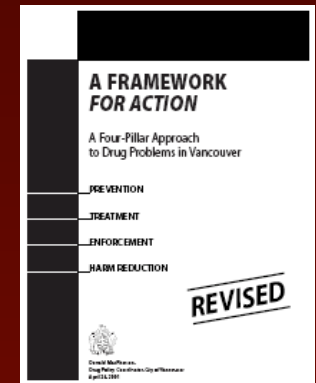


# 1. Evidence from elsewhere: Conflicting stories of Frankfurt and Zürich

- Key reports advocate policy change in Vancouver, based on European evidence & practices:

MacPherson D 1999 Comprehensive Systems of Care for Drug Users in Switzerland and Frankfurt, Germany

MacPherson D 2001 A Framework for Action: A Four Pillar Approach to Drug Problems in Vancouver



- These reports & related activism drew from fact-finding trips to Frankfurt and elsewhere:

*"I think that when you tell people that you've actually seen [a Drug Consumption Room], they lend greater credence to what you're saying ... Personal experience cannot ever be underestimated, right? You know, it normalizes it" (Interview, social service agency rep., 2007).*



From largely positive evaluations of the early Swiss Prescription Heroin trials:

Ali, R., et al. 1999. Report of the external panel on the evaluation of the Swiss scientific studies of medically prescribed narcotics to drug addicts. Geneva: World Health Organization.

- And from visits to Vancouver by drug policy experts and practitioners from Europe (including Frankfurt police) who criticized the criminalization approach to drug use:



## 1. Evidence from elsewhere: Conflicting stories of Frankfurt and Zürich

- Yet, skeptics urged caution on three grounds:
  - Whether European cities could be validly compared with Vancouver in terms of ability to shape drug policy
  - The specter of Zürich's 'Needle Park' (see photo >>>)
  - Concerns with the research methodology underlying the early Swiss Prescription Heroin Trials



- Advocates in Vancouver responded:

"[Skeptics would] point to Zürich. But they'd have their facts wrong. Because they'd ... say, 'That was a total disaster. Look at 'Needle Park.'" And then we'd say, 'Well, no, 'Needle Park' was before ...' (Interview, drug policy official, 2005).

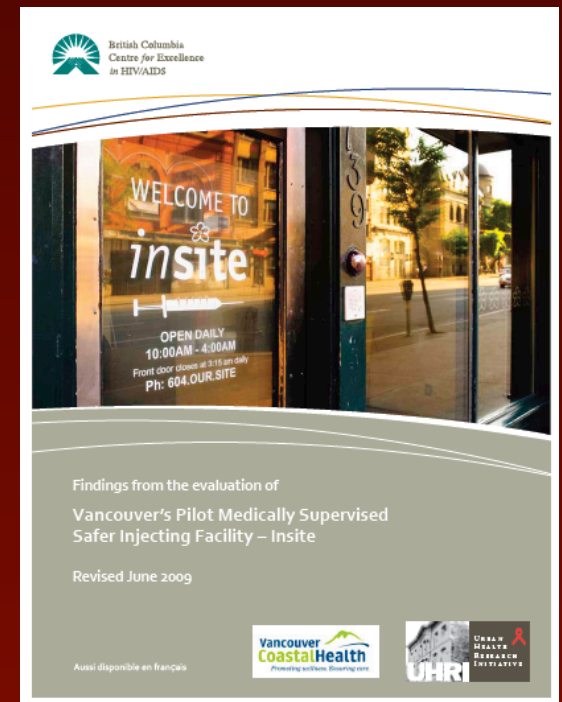


*Prescription heroin in a Frankfurt clinic, 2008*

"[A prominent critic] went over, and any little sort of whisper or [anything she found that was] not quite exactly perfect or [had] a little bit of debate about [it], her mind would pick that out and bring it back ... She'd be the 'yes, but' person. So, I think it came down to just morally she couldn't go there. (Interview, advocacy organization representative, 2006).

## 2. Insite, Insight, Incite: The scientific evaluation of Insite and its critics

- Since 2003, Insite has been under scientific evaluation by a team from the BC Centre for Excellence in HIV/AIDS:
  - They have published over 30 research papers in peer-reviewed journals including *CMAJ*, *NEJM*, & the *Lancet*.
  - Results suggest that Insite: reduces HIV risk behaviour & overdose risk; promotes treatment; improves public order; provides safety for women who inject; offers medical care for injection-related infections; & does not increase drug use or crime.
- Yet, skeptics question this body of evidence:
  - “[T]he published evaluations ... overstate findings, downplay or ignore negative findings, report meaningless findings and overall, give an impression the facility is successful, when in fact the research clearly shows a lack of program impact and success” (C. Mangham, *Journal of Global Drug Policy & Practice*, 2007).
  - “There has been more research done, and some of it has been questioning of the research that has already taken place and questioning of the methodology of those associated with Insite” (Tony Clement, Canadian Minister of Health, Aug. 2007, before appealing a judge’s decision that Insite be made permanent).





## 2. Insite, Insight, Incite: The scientific evaluation of Insite and its critics

- The evaluators' choice of outlets for their work is politically strategic:

"[W]e said, 'look this is controversial. The best defence is adhering to the highest standard of scientific peer review. We want to ensure this is a really credible evaluation.' ... And then we sought publication in the best journals in the world that have a low acceptance rate and rigorous review. Because at the end of the day we wanted to be able to stand back and say, 'look the international community has conducted an independent evaluation of our work and deemed it worthy of publication in these journals. And if you have an issue with our work take it up with the board of the New England Journal of Medicine'" (Interview, lead member of Insite scientific evaluation team, 2008).

- But neither the results or the outlets have satisfied some leading critics:

"Well being published doesn't guarantee that something isn't biased. It's just being published, that's all" (Interview, former federal politician, 2007).

"[O]ne of the things you are going to learn is there is a lot of junk in very good journals. ... [O]ne of the questions [for journal reviewers is], 'is this new and does this add to knowledge?' Well my golly yes, [Insite's] the first one! ... But ... a group of reviewers in a field like this would not be deciding whether it was so much true or not as whether it is properly worded and [if] ... its cogent and there are research questions and things like that. And so to me, the sad thing for the public is that they don't realize that just being in a journal like that, does not itself mean that it's obvious that you're programme must be doing great things. It merely means that you have prepared a scientific paper written in a proper fashion" (Interview, prominent critic of the Insite evaluations, 2008).

## 2. Insite, Insight, Incite: The scientific evaluation of Insite and its critics

- The evaluators' respond strongly to defend Insite and their professional reputations:

[F]irst of all, to say that these [leading medical] journals, ... their editorial boards are full of pro harm reduction people [is untrue] . We're publishing in general medical journals. You look at the editorial boards, the overwhelming majority of people are in general medicine, right? ... They're not addiction experts. Bet you if you looked at the editorial board of the *Lancet* [or] *New England Journal* there would not be one person there in the area of addiction. In terms of people [only] looking for logic [when reviewing papers], well you know what [the critics] should try publishing in some of these journals and you'll find out that its not just about logic. All these journals have statistical editors. They go through your numbers like crazy. ... In terms of the defensiveness. Yeah, I probably seem very defensive right now but you know what? I've had my personal credibility attacked by these people. I have the national police force funding people to discredit me individually. And I've been personally slandered by these idiots. So, yeah, I get very angry (Interview, lead member of Insite scientific evaluation team, 2008)."

## Conclusion: Facts & (political) Friction

- The politics of evidence is central to policy mobilization/adoption because it is about legitimation, verification, and persuasion.
- The politics of evidence in drug policy is not abstract or esoteric. It is about life and death, well-being, and the right to health care.
- Scientific facts should be interrogated critically as social constructions and for the power-relations in which they are implicated
- But they can also act as powerful resources that sustain progressive social movements and help them to make change

*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.*



*Vancouver Area Network of Drug Users (VANDU) memorial event, Oppenheimer Park, Vancouver, 2007*