

Table 2. Summary of scoping and systematic reviews focused on SCS included in this rapid response

Author and year of publication	Evidence synthesis focus	Year of last search	Assessment of methodological quality using AMSTAR tool	Location of included studies	Key findings organized by Belackova <i>et al.</i> 's (15) eight outcomes								Conclusions
					i. attracting high-risk, marginalized users	ii. management of overdose and decreased mortality	iii. enhancement of safe injecting practices	iv. decreased public drug use and improved public amenity	v. increased uptake of addiction treatment and other healthcare and social services	vi. prevention of transmission of blood-borne diseases and the associated economic benefits from it	vii. no increase in crime	viii. no increase in drug use or related risks	
Dow-Fleisner et al. 2022 (4)	To examine the impact and effectiveness of safe consumption facilities (SCF) on individuals and communities and the cost-effectiveness of these facilities	2020	7/10	Canada (n=13) USA (n=3) Australia (n=2) Europe (n=6)	N/A	SCF were associated with the prevention of overdose	Reduced chance of rushed injection and shared needles	Reduction in public disorder, including less public disposal of syringes and drug use in public spaces	Increased uptake in addiction and other treatment services	Reduction of HIV/HCV transmission, injection-related injuries, and injection-related risk behaviors	No increase in drug-related crime	SCF are not associated with significant increases in drug use	Evidence supports SCF as a promising harm reduction approach for people who inject drugs with potential for positive community outcomes
Levengood et al. 2021 (1)	To determine the effectiveness of supervised injection facilities (SIF) for harm reduction and community outcomes	2019	8/10	Canada (n=16) Australia (n=3) Europe (n=3)	Study populations included those who reported high levels of syringe sharing, a history of overdose, and poor mental health indicators	SIF were associated with significant reductions in opioid overdose morbidity and mortality; no sites observed any fatal overdoses	SIF were associated with significant improvements in injection behaviours and harm reduction	No demonstrated increase or reduction in drug use-related public nuisance	SIF were associated with significant improvements in access to addiction treatment programs	N/A	No demonstrated increase or reduction in crime	N/A	SIF may reduce overdose morbidity and mortality and improve access to care while not increasing crime or public nuisance
Kennedy et al. 2017 (2)	To review quantitative research on the health and community outcomes associated with supervised consumption facilities (SCF)	2017	8/10	Vancouver (n=28) Sydney (n=10) Germany (n=4) Denmark (n=2) Spain (n=2) Netherlands (n=1)	N/A	SCF have contributed to reductions in overdose-related deaths, emergency department presentations, and ambulance attendances	Reductions in syringe sharing and other unsafe injection practices (reusing syringes, injecting outdoors, rushed injecting)	SCF can reduce public disorder association with illicit drug use via declines in public injection and discarded drug use-related equipment	SCF can facilitate entry into addiction treatment programmes and access to co-located services (e.g. nursing, wound care, counselling, syringe exchange services)	SCF may reduce the burden of costs on public healthcare	The implementation of SCF in Vancouver and Sydney did not appear to contribute to increases in drug dealing or drug-related crime	SCF have not significantly altered community drug use patterns (e.g. rates of injection initiation, relapse, or cessation)	Evidence demonstrates that SCF are effective in achieving their primary public health and order objectives, and concerns regarding the potential negative consequences of establishing SCF are not supported
Potier et al. 2014 (3)	To systematically collect and synthesize the currently available evidence regarding supervised injection sites (SIS)	2014	6/10	Vancouver (n=51) Sydney (n=13) Europe (n=2)	SIS attracted marginalized people who inject drugs	No death by overdose was reported within SIS where this metric was evaluated	SIS allowed safer injection conditions and promoted enhanced health education	Canadian & Australian studies found that SIS contributed to a reduction of drug injection in public spaces	Services varied among SIS; while most people who inject drugs use these services, benefits are not sufficiently addressed	The reduction of syringe sharing	Increased crime was not evident in the included Canadian and Australian studies	No study identified an increase in the total number of local people who inject drugs	SIS have largely fulfilled their initial objectives without enhancing drug use or drug trafficking