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The provincial decision to end funding for supervised consumption sites

The Ontario AIDS Network (OAN) is deeply concerned by the provincial government's [decision to end funding](#) for supervised consumption and treatment services (CTS) across Ontario.

“When supervised consumption services disappear, the need doesn’t disappear with them; it shifts into emergency rooms, public spaces, and communities that are already under strain,” said Gilles Charette, Interim Executive Director of the Ontario AIDS Network. “A strong response to the toxic drug crisis requires coordinated health services that meet people where they are.”

As a network representing community-based organizations working across HIV, hepatitis C, substance use, and related health services, OAN recognizes the complex challenges posed by the ongoing toxic drug crisis. Many of our member organizations work closely with people who use drugs and with partners across the health system to reduce health risks, prevent infectious disease transmission, and connect people to care.

Organizations in Ontario’s HIV and hepatitis C sector have long worked at the intersection of infectious disease prevention, substance use, and community health. Many of the public health approaches now used to respond to the toxic drug crisis grew out of the early HIV response, when community-driven strategies were developed to prevent infection and build trust with people who faced barriers to healthcare. These approaches reflect the same common-sense safety practices widely accepted in public health, such as seatbelts, condom use, or looking both ways before crossing the street.

Supervised consumption and treatment services are one component of this broader response. Across Ontario, these sites have helped prevent overdoses and provided immediate responses when they occur, often stabilizing individuals who might otherwise require ambulance transport or emergency department care. They also serve as important points of connection to primary care, mental health supports, housing services, and opioid agonist treatment.

Many supervised consumption programs also incorporate peer-led services delivered by people with lived and living experience of substance use. Evidence shows that peer-led, dignity-affirming services can build trust and engagement with healthcare systems and often serve as important pathways to different forms of recovery, including treatment, stabilization, and improved health and social wellbeing.

Research from Toronto and other jurisdictions has also challenged common assumptions about community safety. Studies examining neighbourhood trends around supervised consumption sites have found no long-term increases in crime and, in some cases, declines in serious incidents in surrounding areas.

The province has indicated that new services will be developed to support people who use drugs, including treatment-focused programs and other community supports. However, many of these initiatives have not yet been fully implemented. Removing supervised consumption services before replacement supports are operational risks creating gaps in care during an ongoing public health crisis.

Without supervised environments, people may be forced to use substances alone or in unsafe spaces, increasing the risk of fatal overdoses in the context of an increasingly toxic drug supply. The loss of these services may also increase risks of HIV and hepatitis C transmission, deepen stigma and health inequities experienced by already vulnerable populations, and ultimately create additional pressures for Ontario's public healthcare system to manage.

Across Ontario, outreach workers, residents, and local businesses increasingly find themselves responding to overdoses in public spaces. While widespread naloxone access has saved many lives, it cannot substitute for a coordinated and adequately resourced public health response.

It is also essential that public discussions about substance use remain grounded in compassion and respect for the dignity and worth of all people. People who use drugs are members of our communities and deserve access to care, safety, and respect, just like anyone else.

The Ontario AIDS Network remains committed to working collaboratively with government, healthcare partners, and communities to strengthen Ontario's response to substance use, HIV, hepatitis C, and the toxic drug crisis. Addressing these challenges requires a comprehensive approach that includes prevention, treatment, community-based health services, and pathways to care that meet people where they are.