

## POSITION SUMMARY

# Medically supervised injecting rooms

### THORNE HARBOUR HEALTH'S POSITION

Thorne Harbour Health supports the establishment of medically supervised injecting rooms (MSIRs). Areas with a high incidence of drug-related harm should be identified and targeted for expedited roll-out of permanent MSIRs.

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### RECOMMENDATIONS

1. All Australian jurisdictions should establish MSIRs in areas of need.
2. The initial MSIR in Richmond should be made permanent and its hours of operation increased.
3. At least two other MSIRs should be rolled out in Victoria in areas with a high incidence of drug-related harm, such as the cities of Melbourne and Port Phillip.

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### BENEFITS

- Reduce the number of avoidable deaths and the harm caused by overdoses.
- Decentralised services that provide care where it's most needed.

### BACKGROUND

- Medically supervised injecting rooms (MSIRs) are facilities where people can inject drugs in a safe, supported and hygienic environment. This reduces and prevents many of the harms associated with injecting drug use.
- The Victorian Government established a trial MSIR in Richmond, which commenced operation in June 2018 for a period of two years, and in 2020 was extended for an additional three years. This is the second Australian MSIR after King's Cross, Sydney, which has been operating since May 2001.
- An independent review panel evaluated the Richmond MSIR, and published findings in June 2020. In the first 18 months of operation, there were 119,223 visits to the site. Approximately 2600 overdoses and no fatalities. Modelling suggests the Richmond MSIR saved 21–27 lives.
- Some Richmond residents are concerned about occurrences happening off-site, including dealing, injecting and problematic behaviour which they perceive to be on the increase. While these behaviours predate the MSIR, and proximity to drug-based scenes are critical to the location of MSIRs, it is important to work to maintain sufficient community acceptance.

**EVIDENCE BRIEF****Medically supervised injecting rooms**

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**KEY POINTS**

- Victoria's first MSIR in Richmond is a success in terms of reducing avoidable deaths and harms caused by overdoses and should be made permanent.
- Concerns of some residents about off-site problems should be addressed through ongoing strategies.
- At least two other MSIRs should be rolled out in areas with a high incidence of drug-related harm, such as a Melbourne CBD location.

**BACKGROUND*****Medically supervised injecting rooms***

Medically supervised injecting rooms (MSIRs) are facilities where people can inject drugs in safer, hygienic conditions. This helps reduce and prevent many of the harms associated with injecting drug use. The facilities are supervised by specially-trained medical professionals who can provide information about safer drug use practices, referrals to dependence treatment, and other medical services. In the event of overdose, medical staff can provide first aid and, if necessary, rapid connections to emergency medical services.

These facilities do not provide drugs, or allow the distribution of drugs on premises. They neither promote nor condemn drug use; they exist to reduce drug-related harm and help address many of the social and economic factors that contribute to, and exacerbate, problematic drug use. In addition to medical services and sterile injection equipment, these facilities can link clients to mental health services, social welfare services, and sexual health services.

***Addressing Victoria's drug overdose mortality and morbidity problems***

The establishment of MSIRs in Victoria is incredibly valuable. In 2017, Victoria experienced at least 392 deaths due to drug overdose, including 164 deaths due to heroin overdoses.<sup>1</sup> There continues to be several new diagnoses of HIV each year where injection drug use was a factor.<sup>2</sup>

**CURRENT PRACTICE*****History of MSIRs***

MSIRs have existed since 1986, when the first facility opened in Switzerland. Since then, 90 facilities have been established throughout Europe, with additional facilities opening in Vancouver and Sydney.<sup>3</sup>

A 2018 review of evidence of effectiveness of MSIRs found "the benefits of providing supervised drug consumption facilities may include improvements in safe, hygienic drug use, especially among regular clients, increased access to health and social services, and reduced public drug use and associated nuisance."<sup>4</sup>

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<sup>1</sup> Penington Institute, 'Australia's Annual Overdose Report 2019' (2019) Melbourne, 22, 49.

<sup>2</sup> Victorian Department of Health and Human Services, 'HIV/AIDS monthly surveillance report – April-June 2019' (2019) Victorian Government, 1 Treasury Place, Melbourne, 3.

<sup>3</sup> Vendula Belackova and Allison M Salmon, 'Overview of international literature – supervised injecting facilities and drug consumption rooms – Issue 1' (2017) Sydney, Uniting Medically Supervised Injecting Centre; European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), 'Perspectives on drugs: Drug consumption rooms: an overview of provision and evidence' (Updated 7 June 2018) <[http://www.emcdda.europa.eu/system/files/publications/2734/POD\\_Drug%20consumption%20rooms.pdf](http://www.emcdda.europa.eu/system/files/publications/2734/POD_Drug%20consumption%20rooms.pdf)>

<sup>4</sup> EMCDDA (Updated 7 June 2018) op. cit. 3 p. 6.

There was no evidence to suggest that the availability of safer injecting facilities increases drug use or frequency of injecting. These services facilitate rather than delay treatment entry and do not result in higher rates of local drug-related crime.<sup>5</sup>

Since opening in 2001, the Sydney MSIR has provided significant benefits to the area it serves. Public injection of drugs has decreased by 49 per cent, with the number of discarded needles and syringes decreasing by the same amount.<sup>6</sup> Most clients further report a dramatic reduction in the frequency they share injecting equipment, with most refraining from it entirely.<sup>7</sup> This reduces the risk of exposure to blood-borne viruses like HIV, as well as the risk of infection and injury related to injecting.

The location of the Sydney MSIR – 66 Darlinghurst Road – was chosen because of its proximity to the existing drug scene, and because it met the requirement of “sufficient community acceptance”. At the time of its establishment, over 90% of ambulance call-outs to heroin overdoses in the area were to within 300 metres of the MSIR site. It is on a major road opposite a train station and a telephone poll at the time commissioned by the operating organisation showed that a majority of local residents and businesses supported that location.<sup>8</sup> There have been calls to establish a second MSIR in south-western Sydney, including from a deputy state coroner.<sup>9</sup>

### ***Establishment of the Richmond MSIR***

In the context of increasing local deaths from heroin overdoses, the Victorian Government announced in October 2017 that it would establish a two year trial of a medically supervised injecting room at North Richmond Community Health, located in an area of high incidence of long-term drug use and harms.

A transitional MSIR commenced operations on 30 June 2018, using existing space in the North Richmond Community Health building while a larger, purpose-built facility was established on the same site. This facility is now fully operational and the initial two year trial has been extended to 2023.

### ***First year performance***

An independent review panel evaluated the first 18 months of operation of the Richmond MSIR. There were 199,223 visits to the facility.<sup>10</sup> Approximately 2600 overdoses were recorded, of which 271 were extremely serious, however, no fatalities were recorded.<sup>11</sup> The panel estimated that 21–27 lives were saved.<sup>12</sup> There was a decrease in ambulance attendances and a reduction in reports of public injecting.<sup>13</sup> The site also provided 12,426 referrals to support services including alcohol and other drug treatment, primary care, oral health, blood-borne virus treatment, mental health support, housing and homelessness services and legal support.<sup>14</sup> The Richmond MSIR is meeting its objectives.

Alongside this strong level of operation, some local community members have raised concerns about dealing, injecting and problematic behaviour near the MSIR.<sup>15</sup> These behaviours predate the MSIR as proximity to drug-based scenes are critical to the location of MSIRs. However, it is important to maintain sufficient

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<sup>5</sup> EMCDA (Updated 7 June 2018) op. cit. 3 p. 6.

<sup>6</sup> Allison M Salmon, John Kaldor, and Lisa Maher, ‘Sydney medically supervised injecting centre evaluation report no. 4: Evaluation of service operation and overdose-related events’ (2007) National Centre for HIV Epidemiology and Clinical Research, Sydney, 7-8. <<https://kirby.unsw.edu.au/sites/default/files/kirby/report/EvalRep4SMSIC.pdf>>

<sup>7</sup> Ibid 7.

<sup>8</sup> Uniting, ‘History of the Uniting medically supervised injecting centre: a story of harm minimisation’ (date unknown) <<https://www.uniting.org/community-impact/uniting-medically-supervised-injecting-centre--msic/history-of-uniting-msic>>

<sup>9</sup> Kev Dertadian and Stephen Tomsen, ‘Drug users in outer Sydney need another medically supervised drug consumption room’ (online at 3 August 2018) *The Conversation* <<https://theconversation.com/drug-users-in-outer-sydney-need-another-medically-supervised-consumption-room-96463>>

<sup>10</sup> State of Victoria, , Review of the Medically Supervised Injecting Room (Report, June 2020)

<<https://www2.health.vic.gov.au/Api/downloadmedia/%7B52D63022-19E8-4347-9170-1ACDA991D926%7D>> x

<sup>11</sup> Ibid xi

<sup>12</sup> Ibid xvi

<sup>13</sup> Ibid xvi

<sup>14</sup> Ibid 60

<sup>15</sup> Iskhandar Razak, ‘Melbourne’s safe injecting room trial saving lives but upsetting locals’ (online at 20 April 2019) *ABC News* <<https://www.abc.net.au/news/2019-04-20/extended-hours-for-richmond-safe-injecting-room/11033350>>

community acceptance for all MSIRs, and ongoing strategies should be developed to keep the local community informed and address concerns.

To further address Victoria's death by overdose problems, more MSIRs should be established in areas with relatively high levels of drug injecting. This would reduce the need for people seeking safer injecting to travel to North Richmond, and enable better integration with their local health and support services and treatment.

## **CONCLUSION**

MSIRs have a strong evidence base of significant benefits in relation to reducing drug-related harms such as illness and overdose deaths. The North Richmond MSIR trial is helping people who inject drugs do so more safely and assisting them to enter the primary health care system for treatment and services they need. The Richmond MSIR should be made permanent and its hours of operation extended, alongside ongoing strategies to maintain sufficient community acceptance. All Australian jurisdictions should maintain permanent MSIRs in areas of need.

## **RECOMMENDATIONS**

1. All Australian jurisdictions should established MSIRs in areas of need.
2. The initial MSIR in Richmond, Victoria should be made permanent and its hours of operation increased.
3. At least two other MSIRs should be rolled out in Victoria in areas with a high incidence of drug-related harm, such as the cities of Melbourne and Port Phillip.