



KEY FINDINGS FROM THE 12- MONTH REPORT OF THE MEDICALLY SUPERVISED INJECTING CENTRE

24 May, 2002

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It has been one year since the Medically Supervised Injecting Centre (MSIC) first opened its doors and the findings of the 12-month report of the evaluation of the project have been released today.

During the twelve months of operation, 2,729 individuals were assessed and registered to use the services at the Medically Supervised Injecting Centre (MSIC).

- Registered clients made 31,675 visits to the MSIC during which their injection of drugs was supervised. The majority of these registered clients were male (71%), and less than one-third were female (28%). Male clients accounted for majority of visits (61%).
- Heroin was the drug most frequently used at the MSIC (injected on 50% of the visits) followed by cocaine (injected on 42% of the visits).
- Clients made an average of 12 visits in the twelve months (range = 1 to 535). The average time spent in the MSIC per visit was approximately 28 minutes.
- On approximately one in every three visits, a health care service was provided to the clients (in addition to the supervision of their injecting). Over half of the occasions of service were injecting and vein-care advice (55%).
- Approximately one in 31 visits resulted in a referral for further assistance. Among the 1007 referrals for further assistance, 44% were for the treatment of drug dependence, 31% were to primary health-care facilities and 25% were to social welfare services.

Two hundred and fifty drug overdose incidents occurred at the MSIC requiring clinical management, a rate of 8 overdoses per 1000 visits. These were 184 heroin overdoses, 50 cases of cocaine-related toxicity, and eight benzodiazepine overdoses and eight non-heroin opioid overdoses.

For the first time since the Centre was opened figures have been released on loitering and criminal activity around the MSIC. This part of the evaluation has been co-ordinated by Dr Don Weatherburn at the Bureau of Crime Statistics and Research.

“One of the arguments put forward against the establishment of the MSIC was that it would have a ‘honey-pot effect’, whereby large numbers of drug users and dealers would congregate in the area, bringing an associated increase in crime and public amenity problems,” said Dr Weatherburn. “This interim report provides little evidence of any significant increase in loitering and no evidence of any increase in drug-related crime.”

Counts of loitering commenced seven months before the MSIC opening and are continuing.

The overall level of loitering has remained very low throughout the observation period. On average, there have been 1.79 loiterers in total at the front of the MSIC on each occasion of observation and an average of 0.46 loiterers at the back of the MSIC on each occasion of observation.

The total number of loiterers at the front of the MSIC increased by approximately one person per observation after the MSIC opening, but then began to decline. The number of ‘drug-related’ loiterers at the front of the MSIC was increasing before it opened but began to decline after it opened.

There appears to have been a slight increase in the total number of loiterers at the back of the MSIC after it opened. But there was no apparent increase in the number of drug-related loiterers at the back of the MSIC after it opened.

“One of the greatest concerns for business owners in the area was that it would have a negative effect on people coming to Kings Cross,” said Dr Weatherburn. “In actual fact, the number of pedestrians on Darlinghurst Road increased over the entire measurement period. Pedestrian flow was unaffected by the opening of the MSIC.”

There was no indication that the MSIC had any effect on either theft or violent acquisitive offences in Kings Cross Local Area Command based on the COPS database from 1 May 2000 to 30 December 2001.

“The findings of this report indicate that the MSIC continues to be well-utilised and has successfully managed a substantial number of overdose situations,” said Professor Richard Mattick, Chair of the MSIC Evaluation Committee and Director the National Drug and Alcohol Research Centre. “It has also referred many clients onto drug treatment, medical services and social welfare agencies. The impact of the service on rates of overdose, crime, public amenity and community attitudes is still under evaluation.”

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