



One obvious solution is drop boxes put in areas that have been identified as having a drug litter issue.

This is no different to the current way we respond to none drug litter... in an area with a problem you put a bin.



Drug litter that does appear everywhere, we need to remember that alcohol cans etc are a far bigger problem and one which Southampton has in abundance... but we are of course focused on sharp litter because of the 'fear' this can cause to the public.



Very little litter in the car parks, and the pickup reports we saw only a relatively small amount for each car park... while there IS an issue it is far less than in other cities. We did however see encampments in the car parks, something that is becoming more common in both the UK and internationally



This is a public injecting space within sight of the drug project. Its part of the road system and so is surrounded by busy traffic, but someone injecting here alone who overdoses wouldn't be seen until the next person uses the site to take drugs in.

The fact that we are supplying sterile injecting equipment less than 100yds away, giving people advice on best injecting practices and then they are having to use this kind of space (or a car park) is just... well, it's not sensible.



While there is some sharp litter in the area the bulk of the waste was either barrels (without needles on the end) or water/cookers. This could mean that the people injecting in the area are disposing on needles in another manner.







This is a needle that has been pushed into the ground, Dr Stephen Parkin identifies this kind of litter as people who use drugs trying to make things safer for the public, although the needle has been inappropriately disposed of it is in a way that people/pets are unlikely to get harmed by it.

The same (according to Dr Parkin) can be said of needles put up high, eg the ones put into signs that you have been previously shown, this he says is an attempt to put the needle away from accidental harm but make sure people can see it.



Empty prenoxad container(the brand name of Naloxone in the uk, naloxone is the medication given to people who overdose on opiate drugs that saves lives).

The gentlemen we spoke to in the car parks expressed concerns that they could easily find some of the regular car park users dead/dying... I would strongly advise that if possible they are given access to this medication and are trained (takes 10-15 min) in it's use. Although a prescription medication they can be supplied by a drug worker as a 'concerned person' (the same way I have access to this medication, which I carry with me whenever I'm out).



Much like the space in Southampton this is a public injecting space within site of a drug project, this time in Birmingham.

The large amount of drug litter could be because they have a more concentrated issue, or it could be that they don't have the same systems in place that Southampton does

Injecting in a space like this is a hurried activity (this is an area with plenty of passing foot traffic) and one likely to lead to increased infections, wounds and a risk of overdose.



This is somewhere people had been injecting... now it may seem like I'm showing the 'worst' situation to make a point, but from walking around sites I can tell you that public spaces people use to inject are the same ones people use as toilets.



This is somewhere people had been injecting... now it may seem like I'm showing the 'worst' situation to make a point, but from walking around sites I can tell you that public spaces people use to inject are the same ones people use as toilets at 2am... Just out of sight of the public



This Swansea site is clearly heavily used, it's away from the road (you need to climb up a bank) and offers privacy ... but also provides a place where someone is unlikely to be discovered if ODing (Josh a local worker mentioned he'd responded to ODs here).

This area is called 'Junky Jungle' by local people who use drugs, this kind of self stigmatising language is common for sites like this. Part of using drugs in this kind of area is going to effect the way you see yourself.



- People who inject in public spaces are more rushed
- >OD
 - >Injecting Injuries
 - >Infections
 - >BBV (needlestick, rushed technique, poor light)



Much like 'Junky Jungle' (Swansea) this is 'Skag Car Park' (Birmingham) another example of an area named by local people who use drugs

This is not a hidden site, it's a piece of wasteground next to, and in full open view of, a car park in a rich area. People had made a chair to sit on out of tires in the doorway.



Reasons that some
people dump their
needles



Fear of police, either that they will be searched (which of course is common) and needles be used as evidence.

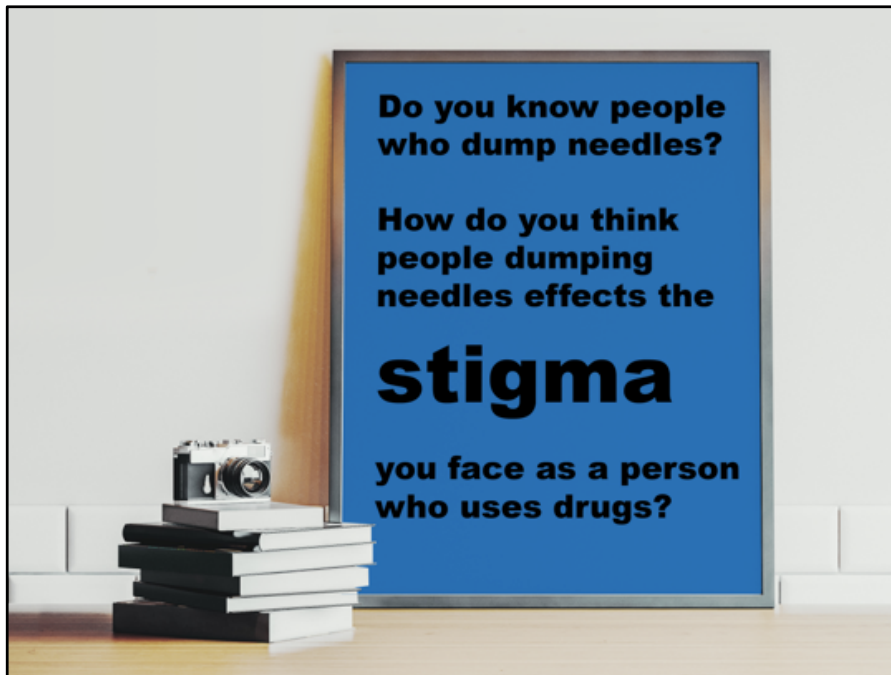


Services not open, while most litter in our society is just put in a bin anywhere in town, needle litter only has a small handful of places you can dispose of it, and those are not often open out of hours.

So for a group that often doesn't even feel able to carry their bedding around with them a used needle is just another thing to have to carry.



Car parks (upper floor). Parks

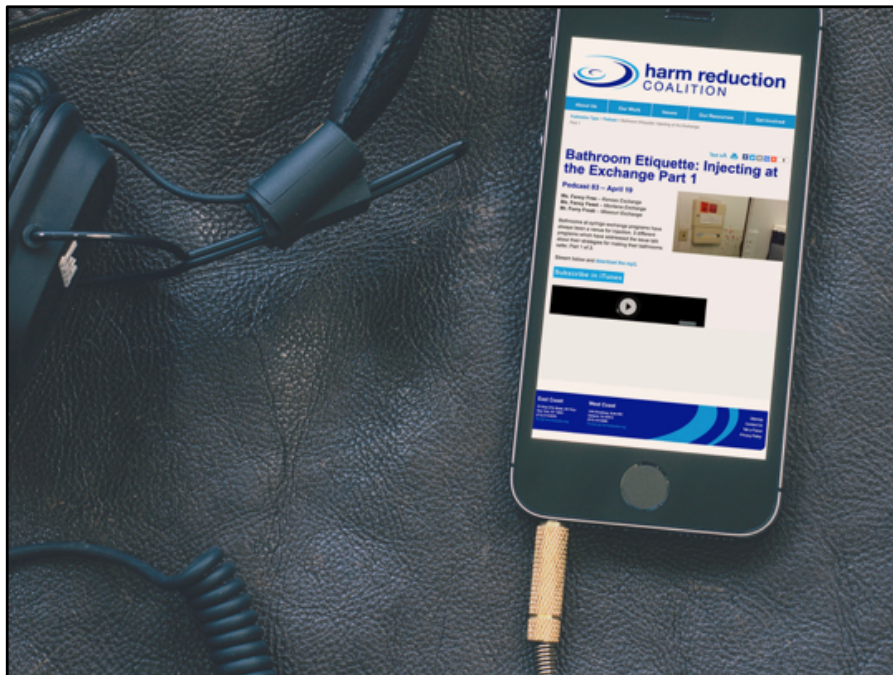


You have already done some of the most obvious things to reduce litter, cutting back bushes, the needle programme gives out a range of bins to suit each persons needs etc

Please also consider running campaigns aimed at highlighting litter as an issue within the drug use community.

Back in 2008 I wrote an article on increasing returns to NSP

<http://www.injectingadvice.com/v4/index.php/articles/harm-reduction-practice/102-increasing-returns>



Podcast discussing the use of Drug service bathrooms as Safer Injecting Rooms
Interviewed many drug services doing this to a greater or lesser extent

<http://harmreduction.org/publication-type/podcast/eighty-three/>
<http://harmreduction.org/publication-type/podcast/eighty-four/>



Drug Consumption Rooms in pretty much every article you read will be called controversial but I'm not sure they are, surely it's more controversial to allow out most vulnerable members of society us drugs in public car parks and to overdose in alleyways



I've worked in a service which regularly had to pay to have it's toilet unblocked.. This ISN'T a problem to be solved with more enforcement, but with pragmatic approaches

This Australian drug service toilet is better than 99% of UK ones because at least they understand the pragmatic need for the sharps bin

Mixed messages – and some serious overkill on the “do not use in the toilets” signs



Get rid of any blue lights, they do NOT prevent injecting but instead make people inject in areas like the groin



If you did decide to do this it should be with support of the local police as a way of responding to public injecting and street nuisance, also get Release etc to support you

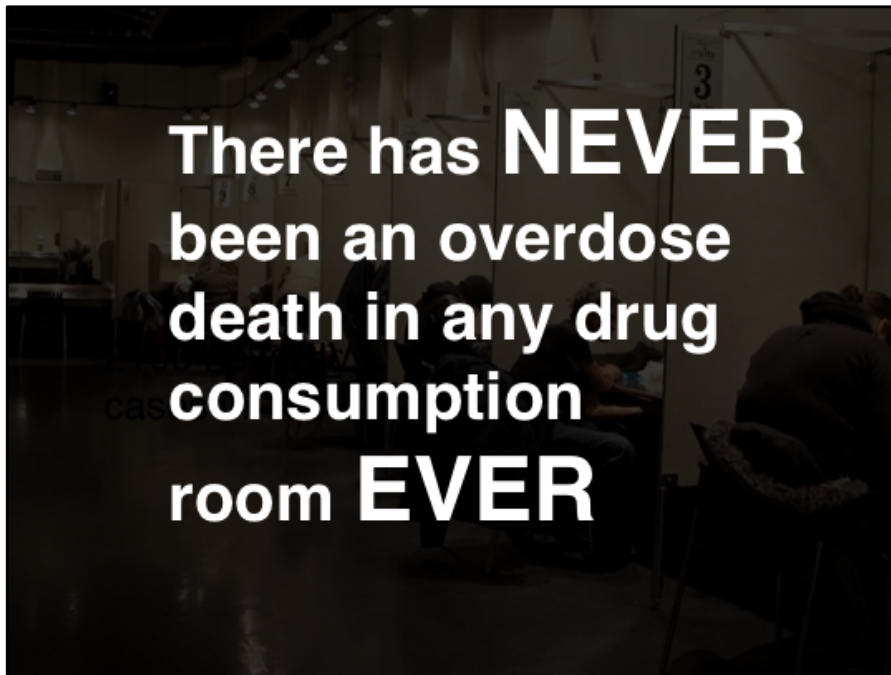
But on DCRs in general The Joseph Rowntree Foundation says : "DCRs can and should be piloted without legislative change."



Of course there is a better way (although far less controversial), this is someone injecting at Insite in Vancouver's DTES
They support underserved communities...



Compare this to the previous slide... poorly lit, dirty, public, and stigmatising vs a safe light space



Stats are for 2015 Insite (Canada)

Crime reduced around DCRs

New HIV cases are at 1.3% of what they were before it opened (2100 to 30)

<http://www.communityinsite.ca/numbers.html>

<http://supervisedinjection.vch.ca/media-centre/an-overview-of-insite---10-years-later>

volteface

BACK YARD

AN INVESTIGATION INTO THE FEASIBILITY OF ESTABLISHING DRUG CONSUMPTION ROOMS

This week a DCR report for the UK was released covering all the basics:




<http://volteface.me/publications/back-yard/>

"Harm reduction works like a game of chess, sometimes you have to make bold risky moves." - *Jakob Huber*

Jakob opened the first DCR in Berne in 1986, he didn't ask for permission, he just did it because he thought it was a good idea.



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