



The Injecting Rooms Scam

in the words of their government
evaluators

3. Reducing public nuisance

**DRUG
FREE**
AUSTRALIA

Public Nuisance

Elements

- public injecting
- discarded syringes in public places
- honeypot effect
 - open drug dealing
 - drug users congregating in one area
- drug-related crime
- feelings the area is unsafe

Sydney honeypot effect

Sydney facility is directly opposite station entrance

- p 120 – increase in discarded needles collected around MSIC
- p 144 – City Rail worker reports users congregating at station
- p 146 - reports of key informants of drug activity at train station
- p 146 – police note correlation of loitering with MSIC opening hours
- p 147 – drug dealing at station had never been a problem before
- p 141 – local businesses report “continual” drug dealing near MSIC
- p 141 – doubling of drug-related loitering at MSIC back door

Compare

- **Police** p 147 – “It’s a morning tasking due to more congregating near the train station. We have to move them along.”
- **Evaluators’ conclusion** p 27 – “The available evidence does not suggest that there was a large increase in drug related loitering in Kings Cross following the opening of the MSIC.”

FINAL REPORT OF
THE EVALUATION OF
THE SYDNEY MEDICALLY
SUPERVISED INJECTING CENTRE

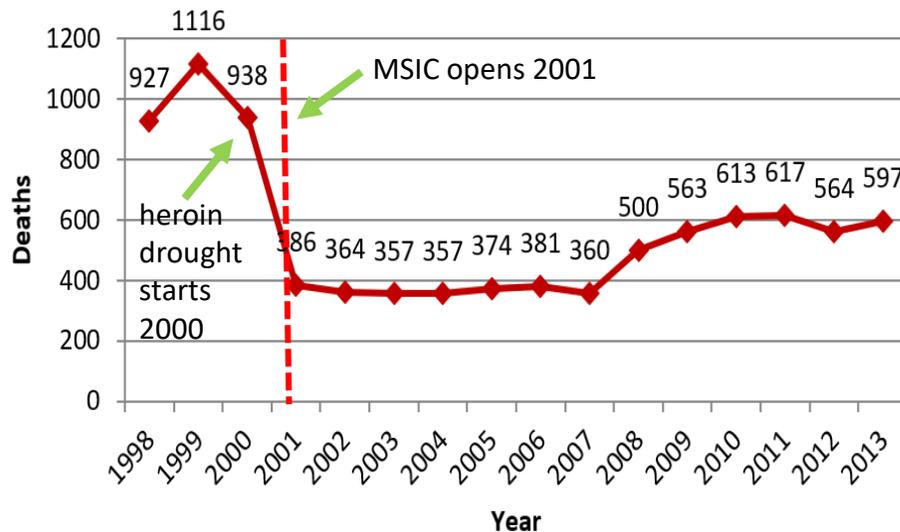
MSIC Evaluation Committee

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Public Nuisance

Sydney MSIC opened (May 2001) after 'heroin drought' commenced (December 2000)

Australian Opiate Deaths 1998-2013



Evaluators -
"Monthly counts of discarded needles and syringes collected locally indicated a decrease of around 50% following the establishment of the service that has been sustained over six years." p 8



NATIONAL CENTRE IN HIV
EPIDEMIOLOGY AND
CLINICAL RESEARCH

Sydney Medically Supervised Injecting Centre
Evaluation Report No. 4:
Evaluation of service operation and overdose-related events

A report for the NSW Department of Health
by the National Centre in HIV Epidemiology and Clinical Research

June 2007

The National Centre in HIV Epidemiology and Clinical Research is funded by the Australian Government Department of Health and Ageing, and is affiliated with the Faculty of Medicine, University of New South Wales

Melbourne honeypot effect

‘Local residents told the *Herald Sun* they were “glad police were trying” to tackle the drug scourge, but were not hopeful it would be effective.

“I don’t think announcing it to all the dealers is a great idea,” one Elizabeth St resident said. “They’ll just go away and return in a couple of weeks.”

She had seen a large increase in the number of dealers in the area since the safe-injecting room opened.

“It’s the honey-pot effect. They’re moving in and setting up shop outside the injecting room where they know they’ve got a guaranteed market,” she said.’



The screenshot shows a news article from the Herald Sun. The headline is "Police target drug traffickers and crime in Richmond during Operation Apollo". Below the headline, there is a sub-headline: "Just hours after police announced a drug blitz operation on Richmond, a man has been arrested suspected of trafficking heroin." The article is written by Genevieve Allison. A photograph shows a syringe with blood inside and a discarded orange cigarette butt lying on a dark asphalt surface. The caption below the photo reads: "A blood filled needle in a laneway, Richmond. Picture: Nicole Germann". The article text continues: "A 61-year-old man was arrested on suspicion of heroin trafficking just hours after police began a drugs sweep in Richmond on Monday. Operation Apollo's focus was on drug dealers, especially those operating around Victoria St, where drug trafficking had long been a concern, Acting Inspector Trish Duke said. Insp. Duke said the crackdown was not prompted by the opening of a safe-injecting room six months ago. Police would be arresting drug dealers, not drug users, she said."

<https://www.heraldsun.com.au/news/victoria/police-target-drug-traffickers-and-crime-in-richmond-during-operation-apollo/news-story/c7b10e05340619b9282588ca81889bd9>

Melbourne honeypot effect

From the Victorian Police's own website:

From their survey of their own police officers

- Nearly 80 per cent of (police) members surveyed do not think the MSIR trial is working well from a policing perspective.
- 68 per cent of members indicate the trial has impacted their workload day-to-day.
- Increase in crime overall, public drug use and drug related activities in the Yarra PSA are the most widely cited negative outcomes of the MSIR trial raised by members.
- Nearly 80 per cent of members surveyed indicate that crime has overall increased around the precinct in which the facility is located since it opened.
- Members indicate that crimes against the person, property crime, drug-related crime and anti-social behaviour have all increased.
- 64 per cent of members do not believe the facility should continue operating on an ongoing and permanent basis.
- There has been an increase in complaints from local residents and local traders and increasing feelings among the local community that the area is no longer safe.



<https://web.archive.org/web/20210415065828/https://tpav.org.au/news/journals/2019-journals/june/safe-injecting-rooms>

Public Nuisance

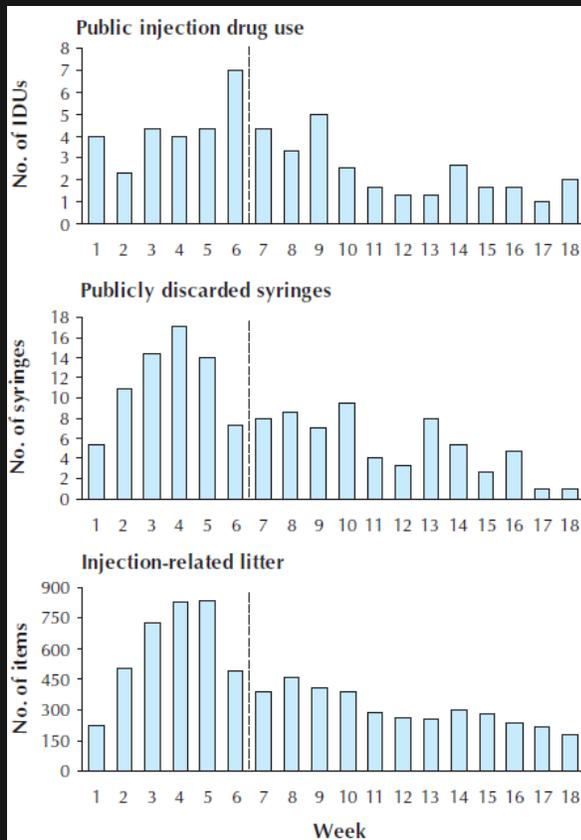
Melbourne

- p 85 - "significantly fewer residents and business respondents reported feeling safe walking alone during the day and after dark due to concerns about violence and crime . . . "
- p 85 - "more people reported considering moving house (32 per cent to 37.1 per cent) or their employment (27.6 to 32.5 per cent) because of drug-related activity"
- p 85 - Victoria Police reported seeing significantly more:
 - people buying or selling drugs
 - people who appear to be under the influence of drugs
 - antisocial behaviour that appears to be drug-related
- p 85 "This (sic) finding of this review is that amenity has not improved during the review assessment period."



Public Nuisance

Vancouver's Insite



Graphs show decreases
in public nuisance . . .

BUT

**Is it the injecting room
making the difference or
something else?**

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> CMAJ. 2004 Sep 28;171(7):731-4. doi: 10.1503/cmaj.1040774.

Changes in public order after the opening of a medically supervised safer injecting facility for illicit injection drug users

Evan Wood¹, Thomas Kerr, Will Small, Kathy Li, David C Marsh, Julio S G Montaner, Mark W Tyndal

Affiliations + expand
PMID: 15451834 PMCID: PMC517857 DOI: 10.1503/cmaj.1040774
Free PMC article

Abstract

Background: North America's first medically supervised safer injecting facility for illicit injection drug users was opened in Vancouver on Sept. 22, 2003. Although similar facilities exist in a number of European cities and in Sydney, Australia, no standardized evaluations of their impact have been presented in the scientific literature.

Methods: Using a standardized prospective data collection protocol, we measured injection-related public order problems during the 6 weeks before and the 12 weeks after the opening of the safer injecting facility in Vancouver. We measured changes in the number of drug users injecting in public, publicly discarded syringes and injection-related litter. We used Poisson log-linear regression models to evaluate changes in these public order indicators while considering potential confounding variables such as police presence and rainfall.

Results: In stratified linear regression models, the 12-week period after the facility's opening was independently associated with reductions in the number of drug users injecting in public ($p < 0.001$), publicly discarded syringes ($p < 0.001$) and injection-related litter ($p < 0.001$). The

<https://pubmed.ncbi.nlm.nih.gov/15451834/>

Other explanation

Never referenced in any of many studies on Insite:

- a more than tripling of police numbers 6 months before Insite opened - and maintained thereafter



Numbers of police officers in the 12 blocks around Insite were increased from 20 to 65 in the 6 months before Insite's September 2003 opening. Those increased numbers were still being maintained in 2011, when a spurious study on decreased overdose deaths around Insite was published in Lancet

Analysis of the 2011 Lancet study on deaths from overdose in the vicinity of Vancouver's Insite Supervised Injection Facility

Executive Summary

Dr Greg Pike
Director, Southern Cross Bioethics
Institute, South Australia

Dr Joe Santamaria
Epidemiologist, previous Dept Head of
Community Medicine, St Vincents
Hospital, Victoria, Australia

Dr Stuart Reece
Addiction Medicine practitioner,
Queensland, Australia

Dr Robert DuPont
First President of the United States'
National Institute of Drug Abuse
(NIDA)

Dr Colin Mangham
Director of Research, Drug Prevention
network of Canada

Gary Christian
Research Coordinator, Drug Free
Australia

In an article published in *The Lancet* on April 18 2011, it was claimed that Vancouver's Insite Supervised Injection Facility, which commenced operations on 21 September 2003, was associated with a 35% decrease in overdose deaths in its immediate surrounding area compared with the rest of Vancouver which had decreases of 9%. However, the article contains serious errors which make that claim unsustainable.

The *Lancet* article's claim that all overdose deaths in Vancouver declined between 2001 and 2005 is strongly influenced by the inclusion of the year 2001, a year of markedly higher heroin availability and overdose fatalities than all subsequent years. A study period starting from 2002 in fact shows an increasing trend of overdose deaths. The higher availability of heroin in 2001 was the subject of two previous journal articles by three of the *Lancet* article's researchers, but was not acknowledged in this current study.

The *Lancet* article's researchers also failed to mention that 50-66 extra police were specifically assigned to the 12 city blocks surrounding Insite since April 2003 which are a significant part of the target area in which the questionable 35% reduction was said to occur. A change in policing such as this could account for any possible shift in overdose deaths from the vicinity of Insite. Remarkably, three of the *Lancet* article's researchers had previously published a detailed analysis of the effects of the changed policing, where they described drug users as 'displaced' from the area around Insite.

The facility is statistically capable of saving just one life per year from fatal overdose, a reduction which would not be detectable at the population level. This estimate is backed by the European Monitoring Centre's methodology and avoids the error of naively assuming overdose rates in the facility match overdose rates in the community.

In their unsubstantiated claim of decreased overdose deaths as a result of Insite's presence, the researchers further failed to mention that 43% of British Columbia's overdose fatalities are not even injection-related, and therefore not relevant to any putative impact Insite may have.

Other explanation

“the objectives of the (policing) initiative were relatively clear:

- (1) to restore order to the DTES community;
- (2) to disrupt the open drug market in the DTES; and,
- (3) to interfere with the flow of stolen property into the DTES

“The CET was, first and foremost, a police initiative designed to improve the quality of life in the DTES by focusing on two specific activities that were contributing to disorder in the community. It is best described as an attempt by the VPD to provide police services to a community that had been long-neglected, and in which the VPD had traditionally pursued a policy of **containment**.” p 2

“The initiative incorporated the basic tenets of the “broken windows theory” of policing, including a “**zero tolerance**” strategy for addressing social disorder and crime.” p 3

CONFIDENT POLICING IN A TROUBLED COMMUNITY

Evaluation of the Vancouver Police
Department's City-wide Enforcement Team
Initiative

A report prepared for the City of Vancouver and
the Vancouver Agreement Coordination Unit

Yvon Dandurand
Curt Griffiths, Ph.D.
Vivienne Chin
Joseph Chan

September 1, 2004



Displacement

What was the effect of the changed policing?

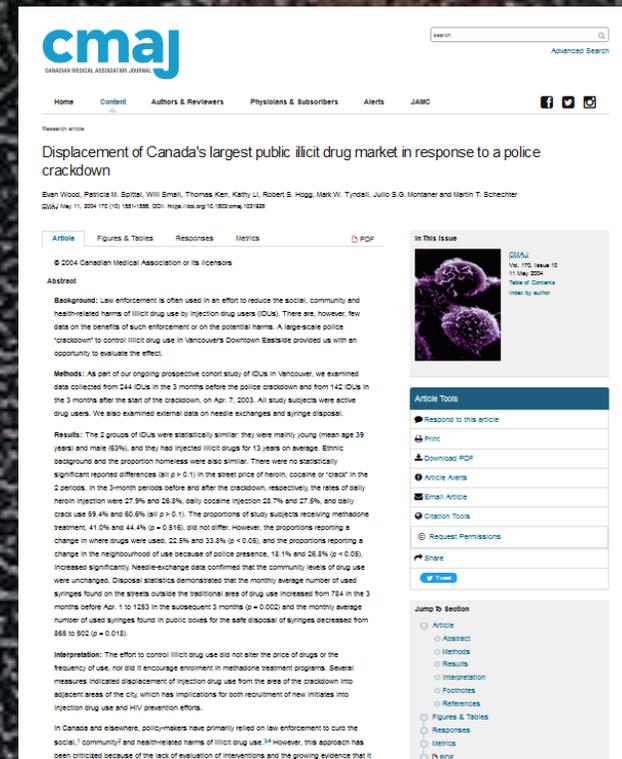
A funded study examined the impact. From its Abstract.

“In April 2003 the Vancouver Police Department embarked on a large-scale enforcement operation aimed at illicit drug users (IDUs) in the city's Downtown Eastside (DTES). The stated goals of the “crackdown” involved “disrupting the open drug market and interrupting the cycle of crime and drug use that marks the streets of the Downtown Eastside.”

“Several measures indicated displacement of injection drug use from the area of the crackdown into adjacent areas of the city . . .”

Who authored this study?

Evan Wood, Thomas Kerr, Julio S.G. Montaner (amongst others)



The screenshot shows the CMAJ (Canadian Medical Association Journal) website. The article title is "Displacement of Canada's largest public illicit drug market in response to a police crackdown". The authors listed are Evan Wood, Patricia M. Spittal, Willi Smeil, Thomas Kerr, Kathy Li, Robert B. Hogg, Mark W. Tynsaki, Julio S.G. Montaner, and Martin T. Schreiner. The abstract text is visible, starting with "Background: Law enforcement is often used in an effort to reduce the social, community and health-related harms of illicit drug use by injection drug users (IDUs). There are, however, few data on the benefits of such enforcement or on the potential harms. A large-scale police 'crackdown' to control illicit drug use in Vancouver's Downtown Eastside provided us with an opportunity to evaluate the effect." The article is dated May 11, 2004, and is available in PDF format.

<https://www.cmaj.ca/content/170/10/1551.full>

Displacement

What, we should ask, moved away from the area around Insite?

- drug dealers - to avoid arrest
- drug users – to find drugs from their displaced dealers
- with the users went their discarded needles
- public injecting went elsewhere
- so did their crime
- so did their overdoses
- so did overdose deaths

Displacement

35% reduction in deaths near Insite

Articles

Reduction in overdose mortality after the opening of North America's first medically supervised safer injecting facility: a retrospective population-based study

Brandon D L Marshall, M-J Milloy, Evan Wood, Julio S G Montaner, Thomas Kerr

Summary
Background Overdose from illicit drugs is a leading cause of premature mortality in North America. Internationally, more than 65 supervised injecting facilities (SIFs), where drug users can inject pre-obtained illicit drugs, have been opened as part of various strategies to reduce the harms associated with drug use. We sought to determine whether the opening of an SIF in Vancouver, BC, Canada, was associated with a reduction in overdose mortality.

Methods We examined population-based overdose mortality rates for the period before (Jan 1, 2001, to Sept 20, 2003) and after (Sept 21, 2003, to Dec 31, 2005) the opening of the Vancouver SIF. The location of death was determined from provincial coroner records. We compared overdose fatality rates within an a priori specified 500 m radius of the SIF and for the rest of the city.

Findings Of 290 decedents, 229 (79.0%) were male, and the median age at death was 40 years (IQR 32–48 years). A third (89, 30.7%) of deaths occurred in city blocks within 500 m of the SIF. The fatal overdose rate in this area decreased by 35.0% after the opening of the SIF, from 253.8 to 165.1 deaths per 100 000 person-years ($p=0.048$). By contrast, during the same period, the fatal overdose rate in the rest of the city decreased by only 9.3%, from 7.6 to 6.9 deaths per 100 000 person-years ($p=0.490$). There was a significant interaction of rate differences across strata ($p=0.049$).

Interpretation SIFs should be considered where injection drug use is prevalent, particularly in areas with high densities of overdose.

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See Online/Comment
DOI:10.1016/S0140-6736(11)60132-3

British Columbia Centre for Excellence in HIV/AIDS (B D L Marshall PhD, M-J Milloy MSc, E Wood PhD, Prof J S G Montaner MD, T Kerr PhD), Faculty of Medicine (E Wood, J S G Montaner, T Kerr), School of Population and Public Health, University of British Columbia (M-J Milloy), Vancouver, BC, Canada; and Department of Epidemiology, Mailman School of Public Health, Columbia University, New York, NY, USA (B D L Marshall)

Who authored this study?

Evan Wood, Thomas Kerr, Julio S.G. Montaner (amongst others)

THE LANCET

“Radial access for coronary angiography and intervention reduced major vascular complications compared with femoral access, with similar PCI success rates.”

Section	Articles	Articles	Health Policy	Articles
Editorial	Coronary angiography and intervention: radial access vs femoral access	Coronary angiography and intervention: radial access vs femoral access	Coronary angiography and intervention: radial access vs femoral access	Coronary angiography and intervention: radial access vs femoral access
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Ignorance?

Lancet authors claim no knowledge of the policing changes

“Migration of IDUs (intravenous drug users) out of the study area could also theoretically explain the decrease in overdose mortality rates. However, a previous analysis of Vancouver IDUs showed that migration rates were stable and low throughout the study period, and that active injectors and those at greater risk of overdose tend to remain entrenched in the Downtown Eastside neighbourhood.

Additionally, we know of no changes in policing policy that could have confounded our results (our emphasis).“





The Injecting Rooms Scam

in the words of their government
evaluators

- 4. Referral to treatment