

Consumption and Injecting Room (CIR) at INDRO, Münster, Germany

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Introduction/background

The Institute for the Promotion of Qualitative Drug Research, Accepting Drug Work and Rational Drug Policies ([INDRO e.V.](#)) is a low-threshold facility which operates in Münster, a town in Northern Germany with a population of about 300,000 and a visible open drug scene of some 350 users - the estimated total number of heroin and/or cocaine users is 800 to 1,000, some 450 of whom are methadone maintained patients (a very small number of users participating in drug substitution therapy are treated with buprenorphine (Subutex®) or dihydrocodeine).

All [INDRO services](#) are offered in a small one-storey building located some 150 metres off the central railway station and some 250 metres off one of the two open local drug scenes.

The CIR started to operate on April 10, 2001 and was the first German consumption and injecting facility operating in accordance with federal law (Narcotics Act of March 2000). It is integrated within a special ambulatory medical service and a drop-in center. The CIR has a total of six open places for injecting (there are no booth-like partitions) - currently we accept only four injecting users at the same time. In addition, there is a separated booth with air exhaust for visitors smoking heroin or cocaine ("foil smoking" or "chasing the dragon"). Service delivery is based on harm reduction, acceptance and anonymity. Therefore, the names of the CIR visitors are not registered. The CIR is open five days per week and its hours of operation are from 1100 to 1700 Monday to Thursday and from 1100 to 1600 on Friday.

According to the Regulation on the Operation of Consumption Rooms ([Verordnung über den Betrieb von Drogenkonsumräumen](#)) of the federal state of North Rhine-Westphalia drug users are allowed to self-administer in the CIR their own ration of pre-obtained illegalised substances like opiates, cocaine, amphetamine or its derivatives, in their preferred manner of use [intravenous, oral, inhalative (smoking) or nasal use], if they are of full age (at least 18 years old), dependent on one of the substances mentioned above and if they cannot be identified as patients participating in drug-substitution treatment. Drunk and intoxicated persons must not be admitted. The staff advise on (safe) injecting practices but must not assist injecting.

The CIR staffers have been instructed to keep non-dependent users (obvious first-time or recreational users) from entering the CIR and to refer these visitors to other appropriate counselling and support services in the area, including other INDRO services. Drug-dependent persons under 18 years of age are only accepted for using the CIR if there is a (written) consent from their parents or if the drug workers have satisfied themselves, after careful examination of other possible support provisions in each single case, as to the firm

decision of the adolescent to use drugs. The substances the users carry with them are subject to visual control. There are two staffers present in the CIR at all times, and all staff are trained to resuscitate users if they overdose.

Violations of the Narcotics Act, including dealing activities and drug sharing are strictly prohibited, except for possessing drugs in small quantities for personal use. Corresponding occurrences have to be stopped instantaneously by the provider of the CIR and have to be punished by house-bans. There are regular talks with the responsible health, public affairs and prosecution authorities (police and public prosecutors) of the city of Münster in order to prevent as early as possible disturbances of the public security and order and the committal of offences in the immediate neighbourhood of the CIR as well as to secure the low-threshold access to all INDRO services.

The following rules, put on the notice board of the CIR, are well noticeable for every visitor:

- dealing, passing on and sharing of drugs and injecting equipment is strictly prohibited
- drug use is only permitted in the CIR
- drug users must not assist one another injecting
- no violence and threats of violence to persons and objects
- no selling of stolen goods
- smoking tobacco as well as bringing in food and/or drinks (alcoholic and non-alcoholic) is prohibited.

After injecting, each user is supposed to clean his/her own place at the table and to dispose the used equipment. It is not allowed to assist others with injecting and users must only use the injecting equipment provided by the staff of the CIR. There is a maximum time limit for injectors (20 minutes) and foil smokers (15 minutes).

The CIR must not be promoted. Specific target group information material, including safer-use info, is provided.

Apart from the psychic burden the staff has to bear the amount of work and control involved is enormously high. Therefore, an increase in staff was unavoidable to ensure the current conditions of operation - there is an additional CIR staffer working half-time since January 1, 2002. The CIR staffing is one doctor (half-time, 20 hours weekly), two social workers (one full-time, one half-time, 20 hours per week) and three medically trained workers [two rescue medics (one half-time/one part-time, 10 hours per week) and one nurse (part-time, 8 hours weekly). The workload can be managed by rotation of staff, i.e. staff from other INDRO services (also trained in first aid) take turns with the CIR staffers. We could thus keep the annual overall costs for running the CIR down to some 125,000 € (Euro)*.

Summary of the most important data on the frequency of use of the CIR

All CIRs operating in the federal state of North Rhine-Westphalia are research-evaluated by the state Ministry of Women, Family, Youth and Health. There are forms designed for

evaluation purposes that have to be filled in daily by the CIR staffers and sent to the Ministry every seven days. The documentation includes: using episodes, using patterns, age groups, persons rejected admission, support/assistance provided, referrals, special occurrences, bans and emergencies. In 2002 the CIR was open on 248 days (=1,365 hours).

Using episodes, using patterns and substances used

On average, there were some 60 using episodes daily with an average duration of stay of around 10 minutes with injectors and some 15 to 20 minutes with heroin or cocaine smokers. There was a total of 15,375 using episodes (men: 13,612; women: 1,763) - 15,375 using episodes that did not take place in public areas! The men-women ratio was about 9:1. There were 11,717 intravenous using episodes (men: 10,394; women: 1,323), 3,459 inhalative (men: 3,060; women: 399), 196 nasal (men: 155; women: 41) and 3 episodes of oral application.

Approximately 90% of the visitors of the CIR used heroin, 5% cocaine, 4% heroin/cocaine, 0.5% heroin/benzodiazepine and 0.5% cocaine/benzodiazepine mixtures.

Age groups

Until now drug users under 18 years of age have not visited the CIR. In 2002 users of between 18 to 25 years were counted 4,314 times (28%), users of between 26 to 35 years 6,827 times (44.5%) and users in the age group of over 35 4,234 (27.5%) times.

Persons rejected

On the basis of the admission criteria given in the legislative framework of the Regulation on the Operation of Consumption Rooms, 99 persons identified as patients participating in drug substitution treatment had to be refused admittance to the CIR as well as 11 intoxicated users.

Support/assistance provided

Acute medical care was provided 1,768 times (e.g. wound dressings, treatment of abscesses, basic first aid). Psychosocial counselling was offered 282 times resulting in 30 referrals to specialised detoxification facilities, 21 referrals to GPs prescribing substitute substances (methadone, buprenorphine), 21 referrals to primary health carers, 23 referrals to agencies advising on in-patient, abstinence-oriented therapies (therapeutic communities) and 9 referrals to social welfare services.

Bans

All in all, there were 64 bans, 63 of which were either pronounced because of risky using behaviour, such as drug- and needle-sharing, or because of passing on of drugs and threat of violence. There was only one ban because of attempted drug dealing.

Emergencies

There occurred 105 emergencies due to overdosing while or after injecting (men: 94; women: 11), 19 of which were life-threatening conditions (respiratory depression, serious cardiovascular problems). Through immediate medical support provided by the CIR team and an ambulance together with an emergency doctor called (who, on average, arrived on-site

within 5 minutes after being called) the life of 12 users, who were taken to hospital, could be saved. 92 emergencies could be handled without calling an ambulance, in 6 of which resuscitation was necessary. Unfortunately, the death of one user of the CIR could not be prevented (anaphylactic shock). He had been a long-time poly-drug user who suffered from various serious diseases including hepatitis C, HIV-infection and affected organs. CIRs cannot prevent drug fatalities because (1.) drug users do not know what they actually inject: substances bought on the black market constantly vary in respect of compound, purity, concentration of (active) substances and degree of adulteration; (2.) according to legislation CIR providers are not allowed to analyze the substances their visitors intend to use; (3.) due to a long history of drug use many users suffer from (serious) medical conditions and mental illness; (4.) there is an increase in speedball (mixtures of heroin and cocaine) and the combined use of other psychotropic substances (e.g. mixtures of heroin and benzodiazepines, cocaine and benzodiazepines, methadone and benzodiazepines - while patients participating in methadone maintenance treatment are not allowed to enter the CIR the use of black market methadone is possible) and thus a rise in the number of users dependent on several substances at the same time (including alcohol and tobacco). However, by operating CIRs the likelihood of successful life-saving measures has been increased dramatically. CIRs provide shelter to drug using people and facilitate drug use under hygienic and medically controlled conditions.

Special occurrences

In 2002 there occurred no case of (major) violence in the CIR which confirms our view that security staff need not be employed in the facility. The admission procedure, including clarification of the rules and entry criteria, signing an agreement* on the use of the CIR (no ID check, the 'contract' will be destroyed immediately after a user has left the CIR) and responding to questions for the statistical evaluation, has been explained to many users meantime so that there is usually a stress-free atmosphere in the entrance, waiting and injecting/consumption area. There occurred no congregation of drug users and dealers in front of our facility, no disturbances of the public order in the immediate neighbourhood, no honey pot effect as well as no exceptional police actions.

Conclusions

The CIR has reached the target group of drug users from the visible public drug scene. Feared effects like congregation of drug users and dealers in front of the facility, nuisance of the public, drug dealing in the CIR or honey pot effects could have been avoided because of the professional work of our staff and the density of control. The CIR has to be regarded as a health-preventive offer to minimize harm and to provide survival support in the context of the network of the entire drug-help system in Münster. In the CIR the pre-obtained drugs can be used under relatively safe (low-risk) and hygienic conditions, the rescue-likelihood concerning possible overdoses increases (several users' lives could be saved), infection-prophylaxis can be provided and concentration of problems in the public (visible drug use and dealing, inappropriately discarded injecting equipment, congregation of a drug scene) is considerably reduced.

* Agreement between INDRO e.V. and the undersigned on the use of the injecting room:
I assure to use the injecting room only for the purpose of drug use, to keep to the rules and to follow the instructions of the staff.

I declare to have reached the age of 18 and to be drug-dependent. Currently I am not enrolled in drug-substitution treatment.

<http://www.indro-online.de/cir.htm>

I know that I am allowed to carry drugs with me only for the purpose of immediate personal use and that dealing, passing on and sharing of drugs is absolutely forbidden. Offences are immediately punished with house-bans.

Münster,

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Signature of the user

* figure corrected February 21, 2003

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