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| **10.4** | **Strategic Advocacy Around Implementing Additional Harm Reduction Strategies in Yarra** |

**Executive Summary**

**Purpose**

To propose that Council strategically advocate for the implementation of additional harm reduction strategies in Yarra as a means of improving public amenity and increasing perceptions of safety, and reducing drug related harm.

**Key Issues**

Council has done significant work around implementing initiatives to manage public injecting and amenity throughout Yarra. These include improvements to amenity through decreasing the presence of discarded needle and syringes through improved reporting and contract management and provision of information to residents and local organisations on how to manage issues arising from illicit drug use, such as public injecting and overdose.

Council has reached the point where it is unable to make any contributions in this space, beyond what it is already doing.

Although there is international and national evidence to support the implementation of Supervised Injecting Facilities (SIFs) and Council has reiterated their support for a trial SIF in Yarra, thus far the State Government refuses to consider it as an option.

There are additional harm reduction strategies which can be implemented locally which will improve public amenity and increase perceptions of safety, and reduce drug related harm.

These strategies include:

1. extending the hours of needle & syringe programs (NSPs);
2. increasing outreach to people who inject drugs (PWID) during evenings and weekends;
3. enabling peer administered naloxone;
4. enabling peer distributed needles and syringes; and
5. installing syringe vending machines (SVMs).

Council can make a greater difference to the community outside the realm it is working in. It is time for Council to look to the future and be innovative given there has been little innovation in this space for the last decade.

**Financial Implications**

The funding of the aforementioned strategies would be the responsibility of State Government.

Council may need to fund a community awareness campaign to raise the issue and inform the community about the facts, benefits and implications of SVMs or a SIF.

While not a significant cost, Council would need to potentially provide planning approval if a SIF is to be established in the City of Yarra. Although, existing Needle and Syringe Programs (NSPs) such as North Richmond Community Health or North Yarra Community Health could be expanded to include a SIF.

**PROPOSAL**

That Council endorse officers to engage with the State Government to discuss local implementation of harm reduction strategies.

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| **10.4** | **Strategic Advocacy Around Implementing Additional Harm Reduction Strategies in Yarra**    |

Trim Record Number: D13/80598

Responsible Officer: Manager Community and Corporate Planning

**Purpose**

1. To propose that Council strategically advocate for the implementation of additional harm reduction strategies in Yarra as a means of improving public amenity and increasing perceptions of safety, and reducing drug related harm.

**Background**

1. Injecting drug use, overdoses, and discarded needles and syringes are significant concerns for businesses and residents; in 2012 alone, almost 50,000 syringes were collected across Yarra as a result of public injecting.
2. Yarra City Council’s 2012 Annual Customer Satisfaction Survey reports a higher than average proportion of respondents in Abbotsford (33.3%) and Richmond North (8.2%) identifying alcohol and other drug related issues as a concern.
3. Council has done significant work around implementing initiatives to manage public injecting and amenity throughout Yarra. These include improvements to amenity through decreasing the presence of discarded needle and syringes through improved reporting and contract management and provision of information to residents and local organisations on how to manage issues arising from illicit drug use, such as public injecting and overdose.
4. Council is well versed in the issues arising from illicit drug use in Yarra. It has co-funded research into both the feasibility and need for a supervised injecting facility in North Richmond, and the impact of public injecting on North Richmond.
5. Council has reached the point where it is unable to make any contributions in this space, beyond what it is already doing.
6. Although there is international and national evidence to support the implementation of Supervised Injecting Facilities (SIFs) and Council has reiterated their support for a trial SIF in Yarra, thus far the State Government refuses to consider it as an option.
7. There are additional harm reduction strategies which can be implemented locally which will improve public amenity and increase perceptions of safety, and reduce drug related harm.
8. These strategies include:
	1. extending the hours of needle & syringe programs (NSPs);
	2. increasing outreach to people who inject drugs (PWID) during evenings and weekends;
	3. enabling peer administered naloxone;
	4. enabling peer distributed needles and syringes; and
	5. installing syringe vending machines (SVMs).
9. Council can make a greater difference to the community outside the realm it is working in. It is time for Council to look to the future and be innovative given there has been little innovation in this space for the last decade.

**Consultation**

1. The Advocacy Matrix attached highlights interventions that will reduce drug related harm in Yarra. The interventions are framed within the context of problems faced by the City of Yarra in terms of injecting drug use, and the supporting evidence. It also highlights the issues arising as a result of these problems.
2. Officers will identify the best options for engaging with key staff from the Departments of Health and Justice around reaffirming their commitment to strategies outlined in *Reducing the alcohol and drug toll Victoria’s Plan 2013-2017* and addressing their concerns around strategies such as SVMs.
3. Where appropriate Officers will invite relevant Ministers to engage with Yarra staff and Councillors to discuss the issues the community faces and the evidence-based approaches employed elsewhere that would be suited to Yarra.

**Financial Implications**

1. The funding of the aforementioned strategies would be the responsibility of State Government.
2. Council may need to fund a community awareness campaign to raise the issue and inform the community about the facts, benefits and implications of SVMs or a SIF.
3. While not a significant cost, Council would need to potentially provide planning approval if a SIF is to be established in the City of Yarra. Although, existing Needle and Syringe Programs (NSPs) such as North Richmond Community Health or North Yarra Community Health could be expanded to include a SIF

**Economic Implications**

1. The potential economic implications from increasing harm reduction strategies in the City of Yarra include:
	1. increased property values of residential properties surrounding the Victoria Street precinct due to less public injecting, (as a result of improved perceptions of safety); and
	2. attracting greater business investment in the Victoria Street precinct due to less public injecting.

**Sustainability Implications**

1. Not applicable.

**Social Implications**

1. Council’s role is to respond to the amenity and safety needs of the community.

**Human Rights Implications**

1. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being.

**Council Plan, Strategy and Policy Implications**

1. The Safer Yarra Plan 2011-2014 contains a range of strategies and actions to manage the impacts of illicit drugs on the community. These strategies and actions are in line with best practice approaches recommended by the former state government as outlined in the report *‘Addressing public injecting through community based interventions: Guidelines for the development of a comprehensive response’.*
2. While Council is undertaking a range of harm reduction strategies, there is certainly scope to actively support other evidence-based approaches.

**Legal Implications**

1. Enabling peer distributed needles and syringes would require a change in legislation.

**Other Issues**

1. Not applicable.

**Options**

1. Not applicable.

**Conclusion**

1. No single intervention is an effective enough response to manage the complex and dynamic issues arising from public injecting of drugs. Rather, a suite of responses is required that suit the diversity of the community affected by public injecting.

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| **RECOMMENDATION**1. That Council endorse officers to engage with the State Government to discuss local implementation of harm reduction strategies.
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**CONTACT OFFICER: Sarah Jaggard**

**TITLE: Community Safety Project Officer**

**TEL: 9205 5160**

**Attachments**

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| **1**  | Advocacy Matrix - Issues Arising from Injecting Drug Use in Yarra |  |
| **2**  | Council's work to date re harm reduction |  |