

## Public amenity and the North Richmond Medically Supervised Injecting Room (MSIR)

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**Introduction:** The North Richmond Medically Supervised Injecting Room (MSIR), underwent two extensive reviews during its trial tenure but limited available data suggesting no improvement to public amenity in the surrounding area. We aimed to document levels of public amenity in the North Richmond area to address this lack of evidence.

**Method:** Ongoing structured observations (n=76) have been conducted three times per week in the neighbourhood surrounding the MSIR since August 2022. Field researchers capture information on counts of people and behaviours including public drug use, general and injecting related litter, street activities, and unusual events.

**Key Findings:** On each observation field researchers observed people ( $M=140$ ) and episodes of injecting drug use ( $M=0.5$ ) and alcohol consumption ( $M=1$ ). Discarded needles/syringes ( $M=7.5$ ) were collected in several distinct locations. Fieldworkers noted the presence of security guards ( $M=1.5$ ). Construction and the obstruction of access to homes and services was prevalent in defined areas. Further, we found most of the public amenity issues, drug related and general, were observed toward the perimeter of the sample area.

**Discussions and Conclusions:** While many of the aims of supervised injecting facilities are focused on health, public amenity also features large in public debates around their efficacy. We observed a range of issues related to public amenity, many unrelated to the MSIR.

**Implications for Practice or Policy:** Ongoing structured observations will enable information on public injecting, litter, and general public amenity to be recorded to understand what is occurring in the area surrounding the MSIR and better inform ongoing debate around the impacts of the service.

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