



Sergeant Schlitz, Sergeant Compton and Collin Coxhead

Senior Sergeant Collin McKinny, Demos Krouskos and Peter Lord

ISSUES MANAGEMENT

It might sound like public relations double-speak but in the world of public health and needle and syringe programs, where public concern can mean the closure of a service, issues management can be a cornerstone tool for survival. Here, the *Anex Bulletin* takes an in-focus look at issues management: what it is, how you can use it and how it helped one needle and syringe program survive a concerted public attack.

CASE STUDY: NORTH RICHMOND COMMUNITY HEALTH CENTRE

One of Melbourne's busiest needle and syringe programs, situated within North Richmond Community Health Centre, came under public attack in August due to its location next door to a primary school.

Front-page newspaper articles and an image of a person injecting near the school put the needle and syringe program in what would usually have been an untenable position.

Usually the story would have been followed by a flurry of outrage on talkback radio and calls from government and local groups for the service to close. But in this instance the story ran out of steam very quickly. So what made this situation different?

The answer is that the centre had pre-empted possible problems and taken the time to manage its issues in advance...

Located in inner-city Melbourne, North

Richmond Community Health Centre provides primary health and needle and syringe program services to a large number of injecting drug users. The centre has been in its current location for 31 years and the needle and syringe program has operated for 12 years.

Set in the grounds of one of Melbourne's largest inner-city housing estates, the needle and syringe program is near residential housing, popular restaurants and a primary school.

North Richmond Community Health Centre's Chief Executive Officer, Demos Krouskos, said the organisation took an issues-management approach to help manage community concern and educate people about the importance of harm reduction and needle and syringe programs.

"The Coordinator of our Drug Safety Program, Colin Coxhead, works with the

North Richmond Tenants Council, Richmond West Primary School, Belgium Avenue Neighbourhood House, City of Yarra, Richmond Asian Business Association, Richmond police, Office of Housing, ethnic community organisations, local business, local residents associations and other health and community service providers, including GPs," he said.

"His work can range from having his staff introduce themselves to residents to being available to hear community concern, providing education sessions, speaking at meetings and holding joint visits to local businesses with groups like the Richmond police.

"We also take active steps to address community concerns in the shortest possible time-frames.

"Calls to the needle and syringe program about inappropriately discarded injecting equipment and requests to collect syringes are usually responded to in 15 minutes and staff sweep the grounds twice a day.

"Needle and syringe program staff also visit residents or local businesses on request to directly address any matters of concern.

"Staff also monitor the areas around the needle and syringe program to minimise the incidence of public injecting and work directly with clients to reduce any inappropriate behaviour.

"We are very conscious of our location near peoples' homes and school children and we take a zero tolerance approach to people using or dealing near the centre."

Other community service providers have been working with the needle and syringe program for some time now and publicly supported the service during the media onslaught.

Senior Sergeant Collin McKinney of the Richmond Police said the centre's approach to working together was good for all in the community.

"We hold joint education programs and community information sessions as well

cont on p.6.

First public hepatitis C infection from needle stick injury

THE SCHOOL OF MEDICINE AT SPAIN'S UNIVERSITY OF BARCELONA WROTE TO THE CLINICAL INFECTIOUS DISEASES JOURNAL IN JULY THIS YEAR OUTLINING THE WORLD'S FIRST PUBLIC TRANSMISSION OF HEPATITIS C FROM A NEEDLE STICK INJURY.

WHAT DOES THIS CASE MEAN TO NEEDLE AND SYRINGE PROGRAMS IN AUSTRALIA, OUR DISPOSAL PROGRAMS AND TO THE WAY IN WHICH NSP WORKERS ENGAGE THEIR LOCAL COMMUNITY?

CASE STUDY

In a letter to the *Clinical Infectious Diseases Journal* 2005:41 (1 July) doctors outlined the case of a 64-year-old woman who accidentally pricked her hand with a discarded needle while she was cleaning a cemetery mausoleum. Five hours later the woman was admitted to an emergency department

where antiretroviral prophylaxis was given. A blood analysis was performed and she received a first dose of hepatitis B vaccine.

The findings from that blood analysis showed that her renal function and liver enzyme levels were normal. She returned negative results for hepatitis B, HIV 1, HIV 2 and HCV antibodies and HIV and HCV were undetectable in her blood.

cont on p.6.

4 OVERDOSE AWARENESS DAY

Thousands of people supported Overdose Awareness Day 2005 as an opportunity to recognise grief and provide overdose education.

6 ISSUES MANAGEMENT

What is issues management? Public relations double-speak or a cornerstone tool for the survival of your service?

8 PROMOTING EXCELLENCE IN HARM REDUCTION

While only one person and one service could be chosen for this year's Anex Awards for Excellence in Harm Reduction, we couldn't go past a few exceptional nominations.