

Drug Consumption Rooms (DCR)

Monitoring of 4 Drug Consumption Rooms in Frankfurt am Main/Germany

Technical Report 3/2021

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Introduction

Since 1st of January 2003 all drug consumption events in the four drug consumption facilities in Frankfurt am Main/Germany are documented by a unified system. Also, personal data of the users are collected and stored annually.

The facilities are the drug consumption room Niddastraße, the drug consumption room Elbestraße, the drug consumption room Schielestraße and the drug consumption room La Strada in Mainzer Landstraße. These four facilities opened in the period from 1994 to 1996 in order to create rooms where psychotropic substances can be consumed intravenously under hygienic, stress-free and harm-minimising conditions. In order to address the crack problem and to also allow for inhaled heroin use, the facilities were later equipped with ventilation systems or separate rooms for inhaled use. In 2020, an inhalation room was built at DCR La Strada, so that all four facilities are now also oriented towards inhalative drug use.

The following evaluation refers to the data for the year 2020 and is based on the following data sources:

- **148,471 instances of drug use**
- **3,521 users of the facilities.**

These figures are rather conservative, as there are occasional short-term system failures in the drug consumption facilities. It can be assumed that further consumption transactions took place which could not be documented and cannot be precisely quantified.

The documentation system “Kontext”

The data are collected by the staff members in the entrance area of the drug consumption rooms. Each client receives a code ("HIV code") on their first visit, which allows the data to be assigned to a person. The code is created according to a specified algorithm and is composed made up of the information given from the passport.

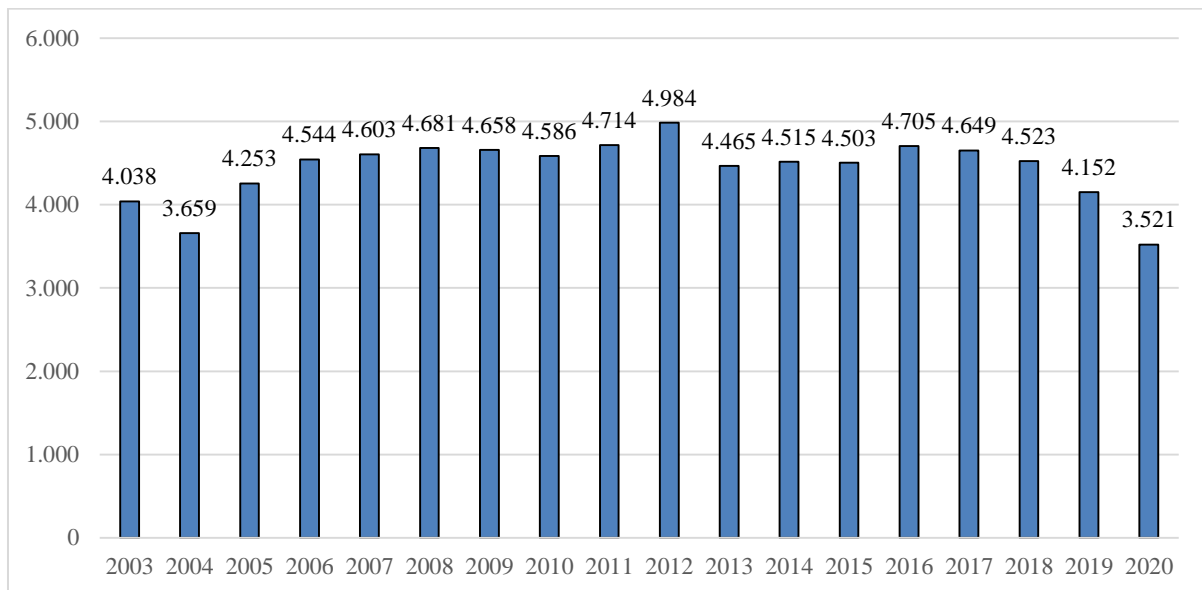
The “Institut für Suchtforschung” (ISFF) of the Frankfurt University of Applied Sciences receives the data in pseudonymised form, so that an identification of individuals is impossible. The various data of a person can be merged for evaluation by means of HIV code. Since 2003, the data have been evaluated in the form of interim and annual reports. This is a trend study. In the comparison of the current annual report with previous years, trends and developments become visible. The client is the “Drogenreferat” of the City of Frankfurt am Main.

Number of drug consumption room users

A total of **3,521 people** used the drug consumption facilities in 2020. Out of these users 2,978 (85%) are male and 543 (15%) female.

The number of users has clearly decreased by 631 persons (15%) compared to the previous year. This decrease is due to the Corona pandemic. All drug consumption rooms had to restrict their offer from March 2020 in order to comply with the distance rules and thus prevent virus transmissions.

Figure 1: Number of drug consumption room users between 2003 and 2020*

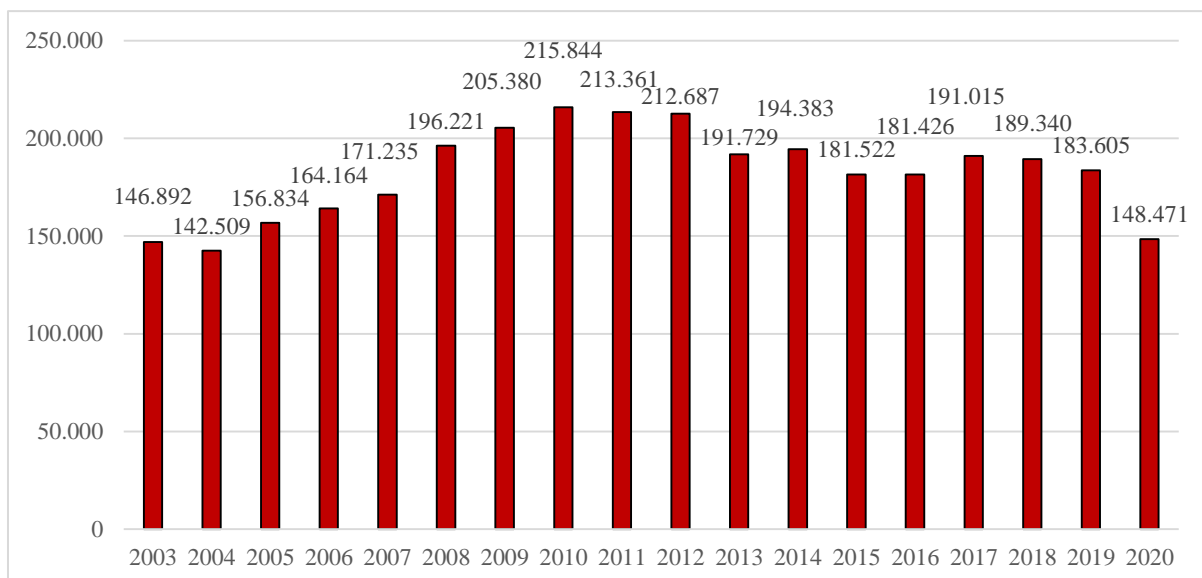


*until 2007: upper estimate or extended Number (chapter 2.5)

Drug use events

In 2020, **148,471 events of drug use** were documented. Compared to the previous year the number of consumption activities decreased by 19%. 2019 counted 183,605 events of drug use.

Figure 2: Drug use events between 2003 and 2020

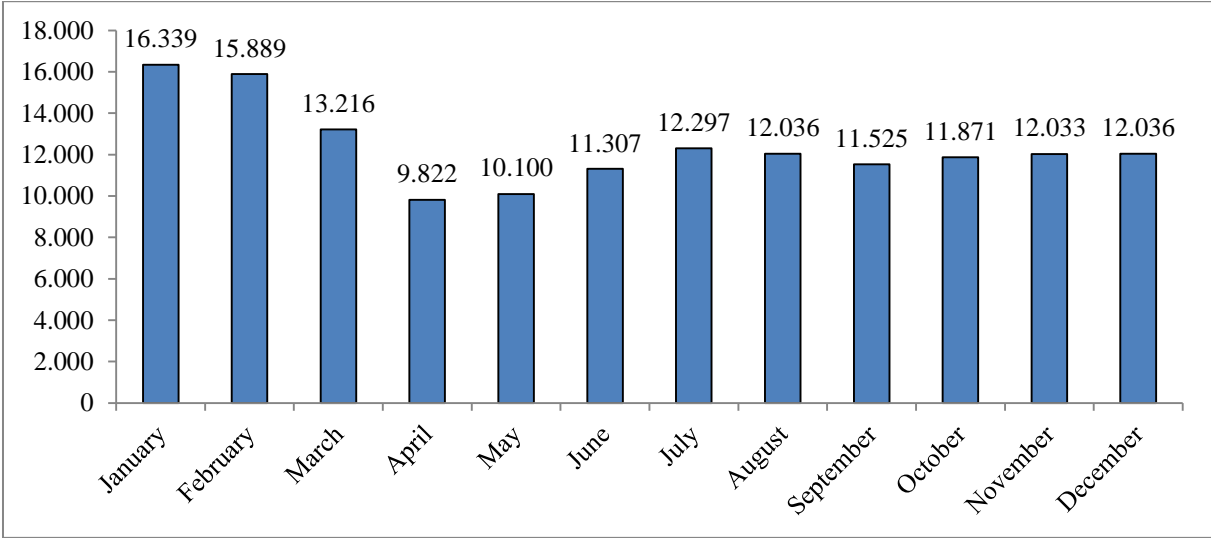


The following graph clearly shows how the Corona pandemic and the supply restrictions that became necessary as a result have affected the number of consumption transactions. In the first two months of 2020 - i.e. before the first wave of the pandemic - the number of consumption processes still corresponds roughly to the previous year's values. From the month of March onwards, there is a clear decline, as the facilities had to reduce the number of consumption places from the middle of March 2020. After the month of May, the numbers increase again because some of the blocked places could be released again as of 1 June 2020 (cf. Chapter 8.1).

On average, 12,373 consumption events are documented per month. The month of January has the highest number of consumption events, while April has the lowest number.

A consumption event is equivalent to a visit to the consumption room. It should be noted that several consumption units are often consumed during one consumption process. Behind the 148,471 consumption events that take place in 2020, there are significantly more consumption units. In data storage, only the visit and the substance or substances are documented. However, it is not documented whether several consumption units of a substance are consumed - for example, several puffs of a crack pipe.

Figure 3: Events of drug use by months in 2020

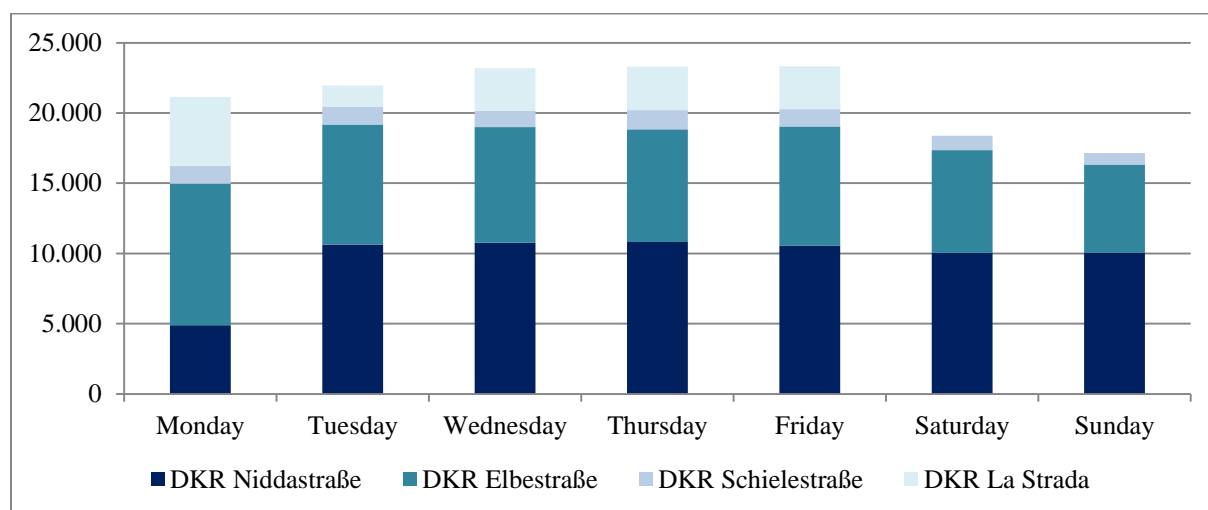


The next figure shows how events of drug use in 2020 is distributed over the days of the week. The higher the bargraph, the more consumption took place on this day of the week. It can be seen that Sunday is the day on which the least consumption takes place; this bar is the shortest.

In addition, each DCR is shown in a different colour to demonstrate how the consumption processes are distributed daily among the individual facilities. Opening hours are an important influencing factor here.

For example, DCR Niddastraße has shorter opening hours on Mondays than on other days of the week; thus, on Mondays, significantly fewer consumption processes are possible there than during the rest of the week. Therefore, on Mondays, parts of the clientele switch to other DKRs; on this day, the number of consumption processes in the other two facilities near the station (DKR Elbestraße and DCR La Strada) increases. The short opening hours on Tuesdays at DKR La Strada also lead to fewer consumption transactions taking place there on that day. The fact that this establishment is closed on weekends contributes to the overall lower consumption figures on Saturdays and Sundays.

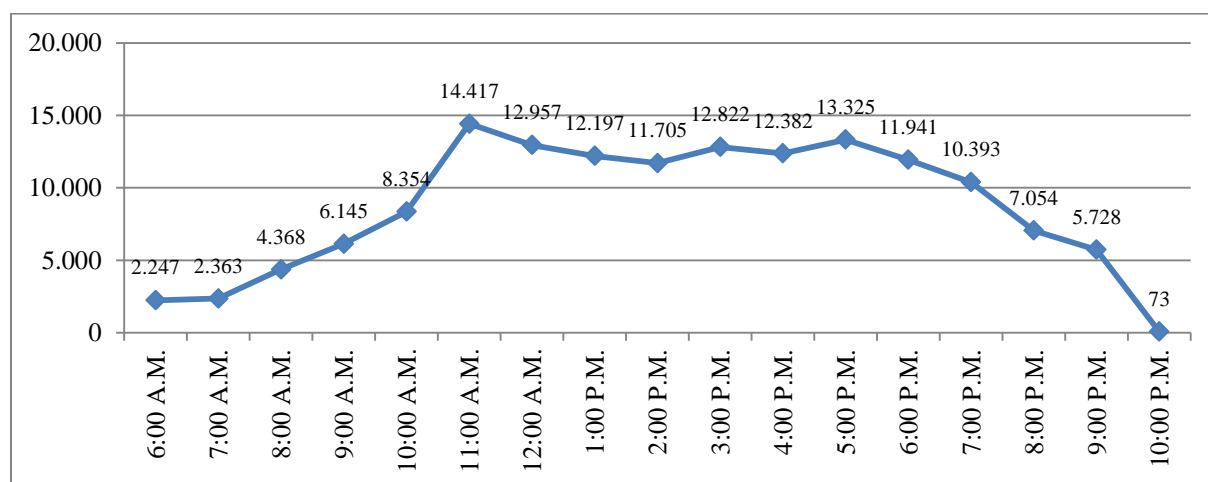
Figure 4: Events of drug use in 2020 by institution and day of the week



There are documented about 406 instances of drug use daily. Most of them between 11 A.M. and 7 P.M. The curve is very similar to that of the previous year.

The first consumption room opens at 6 A.M. The last consumption room closes at 11 P.M., but no admission is possible after 10 P.M. Towards evening and in the morning consumption decreases, which is also related to the fact that not all facilities are open at that time. At night all facilities are closed.

Figure 5: Events of drug use in 2020 by time*

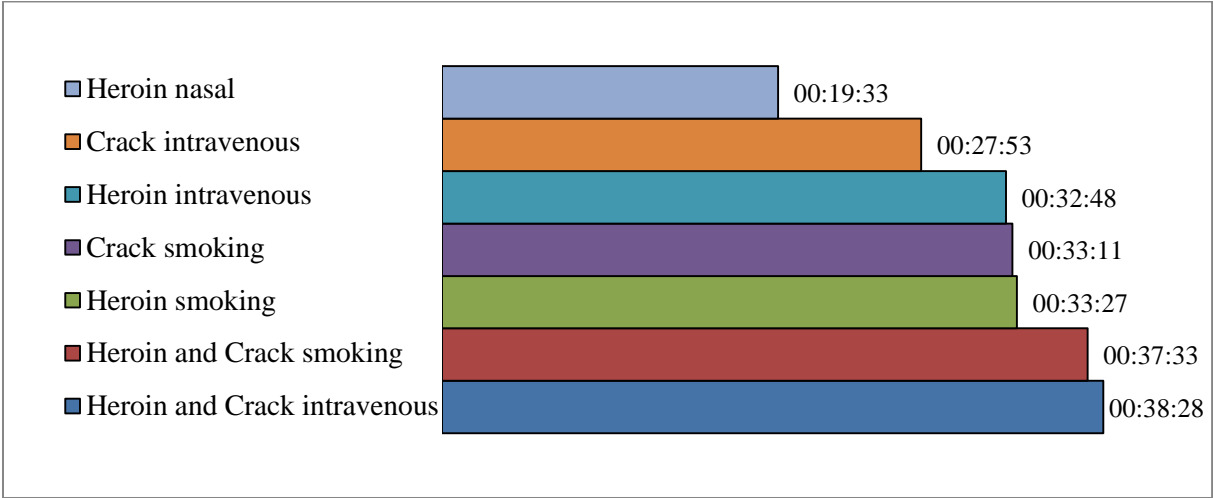


*All instances of drug use were summed up after hours. Thus, the graph shows 2,247 consumption processes at 6 a.m.; all these instances of drug use were documented between 6 a.m. and 6.59 a.m. and attributed to the full hour. The same applies to the other times.

Duration of one event of drug use

On average, an instance of drug use takes slightly longer than 33 minutes. Nasal consumption processes take a comparatively short time. Intravenous consumption processes take considerably longer. Inhalative use takes even longer. The most time-consuming is the mixed use of heroin and crack. Thus, the duration of a consumption process depends on the one hand on how the drug is applied and on the other hand on whether only one substance or several substances are consumed.

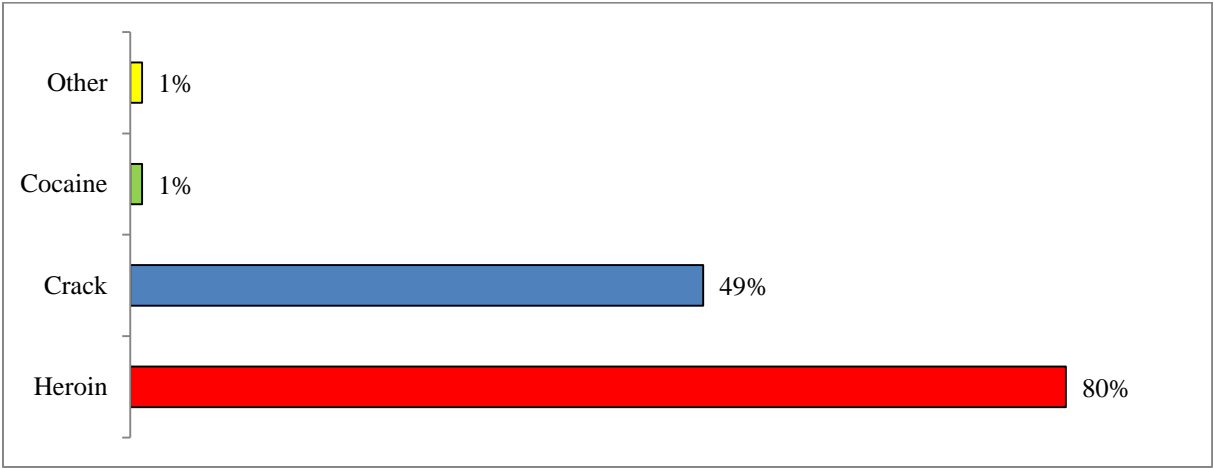
Figure 6: Average duration of a consumption process by substance and application in 2020



Drug use

Heroin is the drug most frequently used in the four facilities overall. It is applied in four fifths (80%) of all consumption processes in 2020. The second substance that is frequently used (49%) is crack. The consumption of cocaine is around 1%. Often, several substances are taken during a course of use, mostly heroin and crack (see the next section on "consumption patterns"). Therefore, the sum of the percentage values here exceeds 100%.

Figure 7: Consumed drugs (intravenously and others) in 2020 (multiple answers possible)



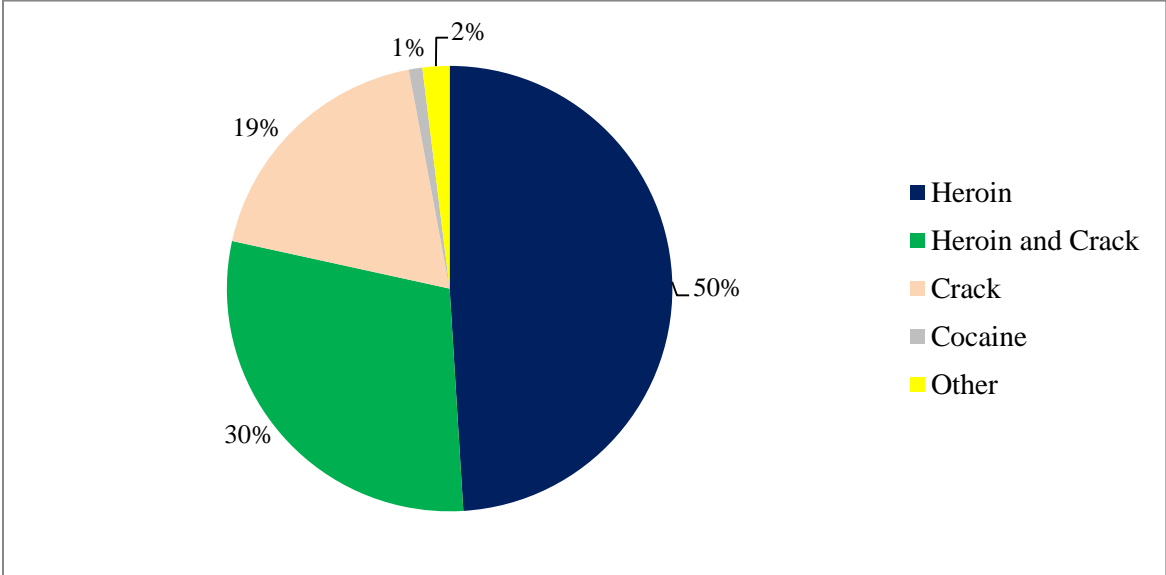
Heroin has been the most commonly used drug since the start of documentation in 2003. Crack has always been the second most commonly consumed drug. Since 2012, benzodiazepine consumption no longer plays a role in the facilities because the drug Flunitrazepam from the benzodiazepine group was placed under the Narcotics Law in November 2011. Cocaine was rather rare from the beginning (cf. chapter 9).

Drug consumption patterns

Three common patterns of consumption emerge. Most frequently, heroin alone (mono-consumption) is used. In 2020, mono-consumption of heroin makes 50% of all instances of drug use. Mixed use of heroin and crack is second most common during a visit to the drug consuming facilities. The combination of these two substances makes 30%. Crack alone (mono-consumption) is the third most

common form of consumption. The mono-consumption of crack takes place in 19% of all instances of drug use. A further 3% is accounted for by other drugs and drug combinations, of which 1% is the mono-use of cocaine.

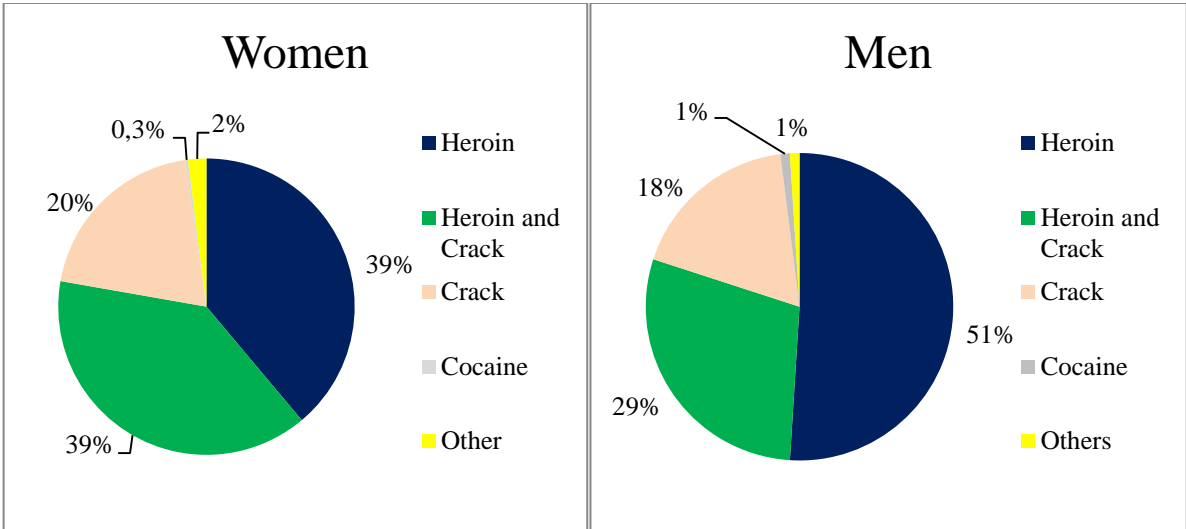
Figure 8: Consumption patterns (intravenous and others) in 2020



With regard to these patterns of use, different preferences can be seen among men and women, as the next chart shows. While mono-consumption of heroin clearly dominates among men with 51%, it accounts for only 39% among women. In contrast, women tend more towards mixed use of heroin and crack. This mixed use accounts for 39% of consumption among women, but 29% among men.

The stronger tendency of men to use heroin and the stronger preference of women for mixed use of heroin and crack can be observed since the beginning of the documentation in 2003. In addition, women have been using crack (mono-consumption) slightly more than men since 2017.

Figure 9: Consumption patterns (intravenously and others) depending on gender in 2020



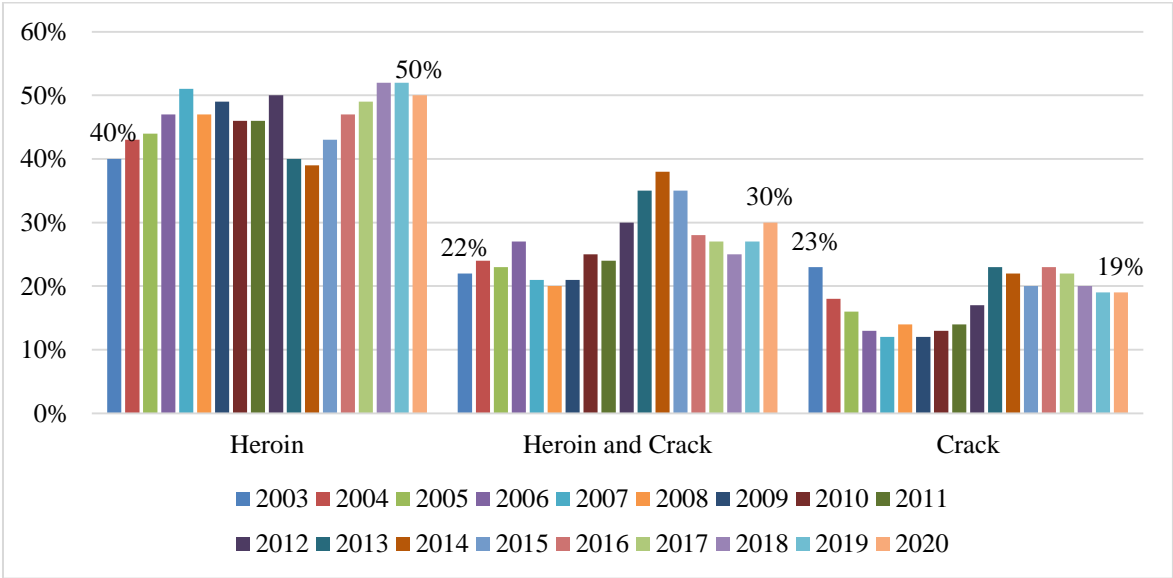
Over the years there are fluctuations in consumption patterns. Mono-consumption of heroin has been the most used form since the beginning of the documentation in 2003. This has not changed by 2020. It increased significantly in the first years of the survey until 2007 and was at 50% or slightly below in

the following years. In 2013 and 2014, heroin mono-consumption loses much of its significance and goes back to the lowest value since the beginning of the survey, only to rise again and reach the maximum of 52%. Currently, it is at 50%.

In contrast, the mixed use of crack and heroin gains strongly in importance after 2011, reaches its maximum in 2014 and then declines significantly again. Since 2018, this mixed use has increased again by five percentage points.

The mono-consumption of crack strongly decreases in the first years of the survey, increases again after 2009 and reaches the initial value since the beginning of the survey again in 2013. In the following years, it fluctuates around a value of about 20%. Crack mono-consumption has been declining for four years.

Figure 10: Common consumption patterns (intravenously and others) between 2003 and 2020*

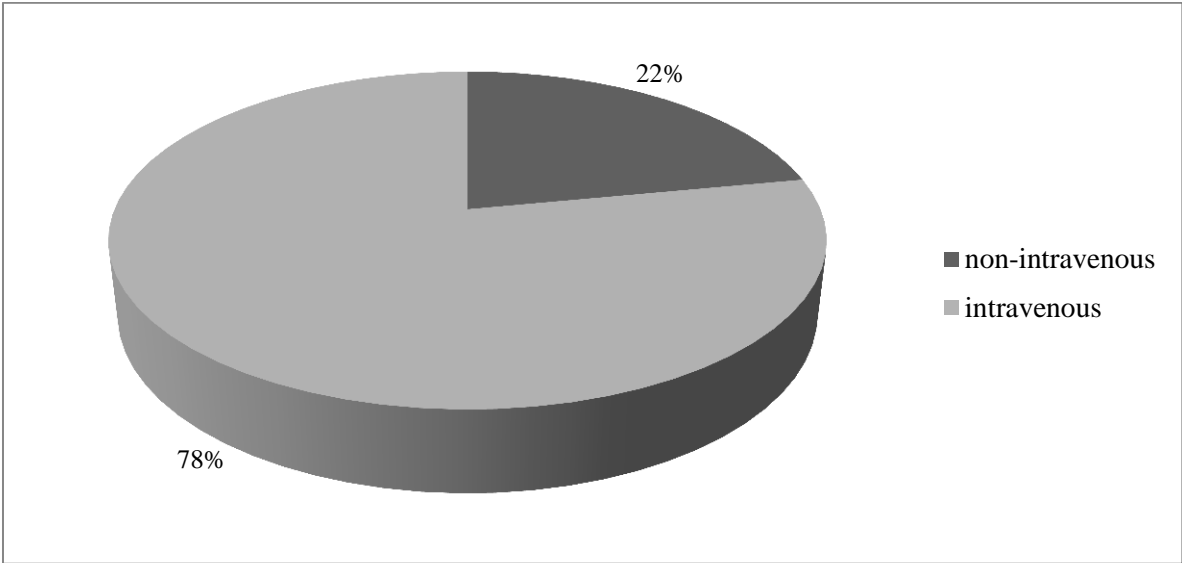


* Until 2011, only intravenous consumption was analysed here, as at the DKRs people almost exclusively used intravenous drugs. The figures from 2012 onwards refer to intravenous and non-intravenous use.

Application of drugs – intravenously and non-intravenously

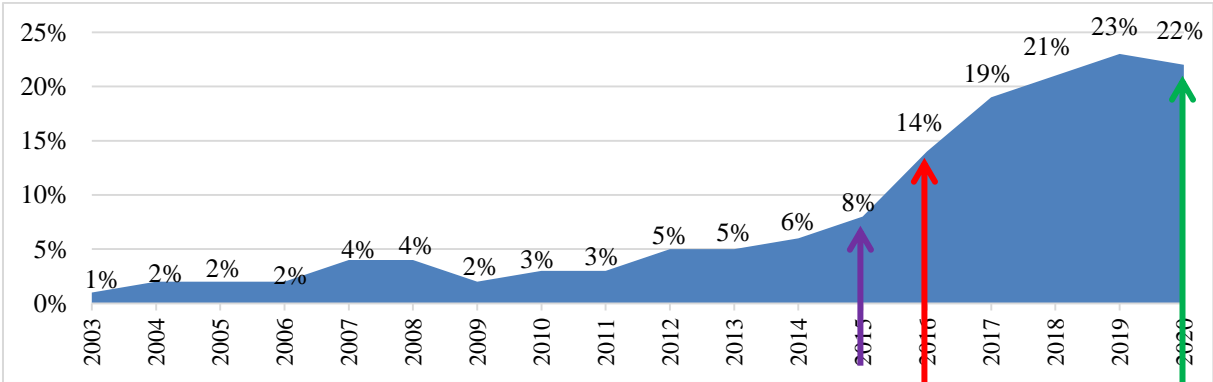
Intravenous consumption is associated with high health risks for consumers, especially the risk of overdose and the risk of infection with HIV or hepatitis. Non- intravenous consumption comes with less health risks. The way in which the drugs are applied is therefore of particular interest. In 2020, 78% of drug use instances were intravenous and 22% non-intravenous.

Figure 11: Form of application: Intravenous and non-intravenous consumption in 2020



A steady increase in non-intravenous instances of drug use has been observed for some years. A gradual change in consumption habits is emerging, moving away from intravenous consumption and towards other forms. Inhaled heroin consumption in particular has increased in recent years. This trend is currently not continuing; despite the opening of the inhalation room ("smoking room") at DKR La Strada, non-intravenous consumption is decreasing by one percentage point, but is still at a comparatively high level.

Figure 12: Mode of application: Development of non-intravenous consumption between 2003 and 2020 (in%)



January 2015: Smoking room Elbestraße included in data collection

March 2016: Smoking room in Niddastraße is opened

January 2020: Smoking room in La Strada is opened

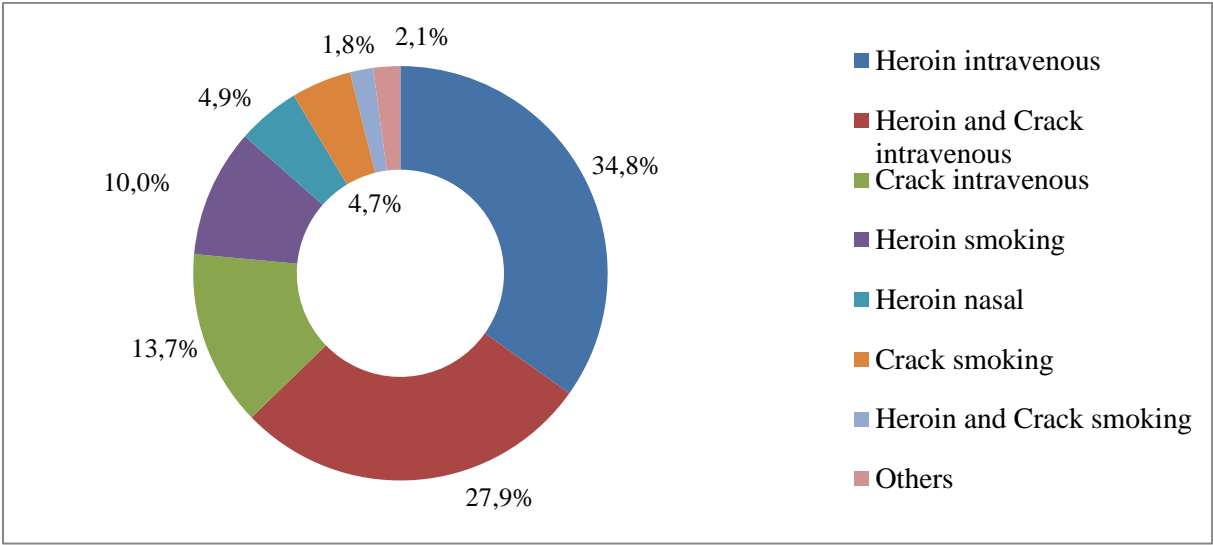
Summary overview of the events of drug use and application

The following graph summarizes the results on the instances of drug use; all instances of drug use of the year 2020 are presented with regard to application and substance(s). Intravenous mono-consumption of heroin accounts for around 35% of instances of drug use. Intravenous mixed consumption of crack cocaine and heroin accounts for another 28%. Crack (mono-consumption) is the

third most frequently injected in drug consumption facilities (14%). Around 10 % are related to heroin inhalation and 5% to nasal heroin consumption. Crack smoking also accounts for 5%. In rare cases (2%), both heroin and crack are smoked in the same instance of drug use.

The consumption preferences of the clientele have changed only slightly compared to 2019. Intravenous mixed use of heroin and crack has increased by about two percentage points. The i.v. mono use of crack has shrunk by about one percentage point, heroin smoking has decreased by about two points. Nasal heroin use ("snorting") and crack smoking have increased by about one point. Smoking crack and heroin has also increased by about one percentage point.

Figure 13: General overview consumption patterns and forms of application in 2020



Personal Data (Master Data)

The personal data relates to all consumption room users who visited one or more injection rooms in 2020. These are 3,521 persons.

The master data include information about the place of residence, date of birth and gender as well as the date of the first visit. These data are available for almost all clients.

In addition, information on the health situation, the housing and work situation, information on the type and frequency of drug use in the past 30 days (30-day prevalence) as well as the use of drug help and the need for further support is collected annually. It should be noted that only a part of the clients is surveyed in these annual data; this part has decreased significantly in recent years. In 2020, 40% of all clients were interviewed, whereby not all interviewed clients answered every question. Therefore, these data do not provide an overall picture of all clients. Nevertheless, it gives an impression of the social and health status of the clients, their consumption behaviour in the last month and their needs regarding drug help.

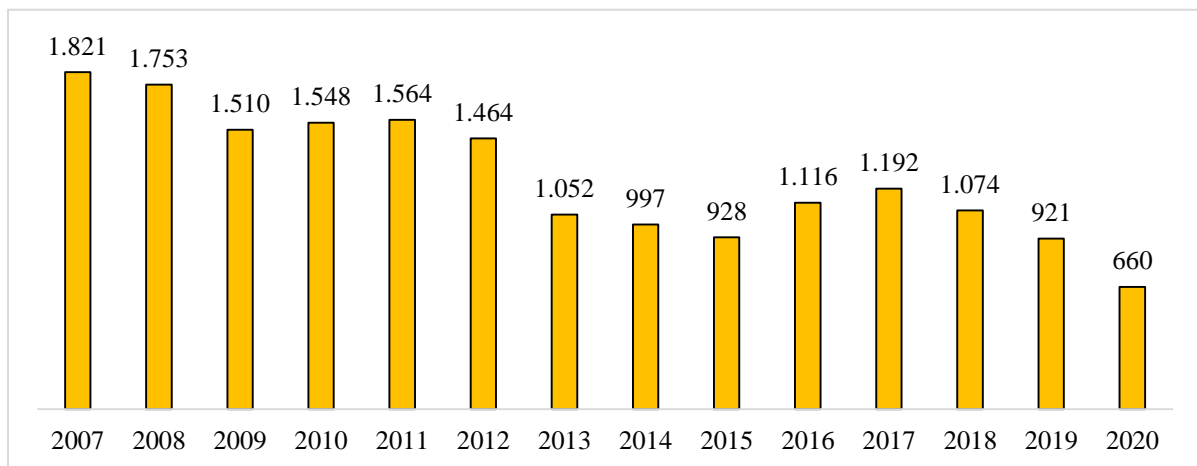
Newcomers and continuers

A subgroup of all users of the consumption rooms are the newcomers. These are 660 people per year. They used one of the drug consumption rooms in Frankfurt am Main for the first time in 2020. 19% of the users of the consumption rooms are newcomers. The remaining 81% of the clients are continuers, i.e. people who already used the drug consumption rooms in

2019 or earlier and came to the facilities again in 2020.

The number of new arrivals is declining. While 1,821 new admissions were counted in 2007, there are currently 660 new admissions, i.e. only slightly more than a third of the initial value. This result is probably influenced by the Corona pandemic and the resulting restrictions in the range of services offered by the facilities. In the years before the pandemic, however, the numbers were also in sharp decline.

Figure 14: Number of new entrants between 2007 and 2020



The majority of all new entrants who have never used a Frankfurt consumption room before head for either Niddastraße or Elbstraße consumption room on their first visit. These two facilities count about 6 resp. 5 new entrants per week. The La Strada consumption room has about 4 new entrants per week. In the drug consumption room Schielestraße, on the other hand, which is not located near the central station, new entrants are rather rare (about 3 persons per month).

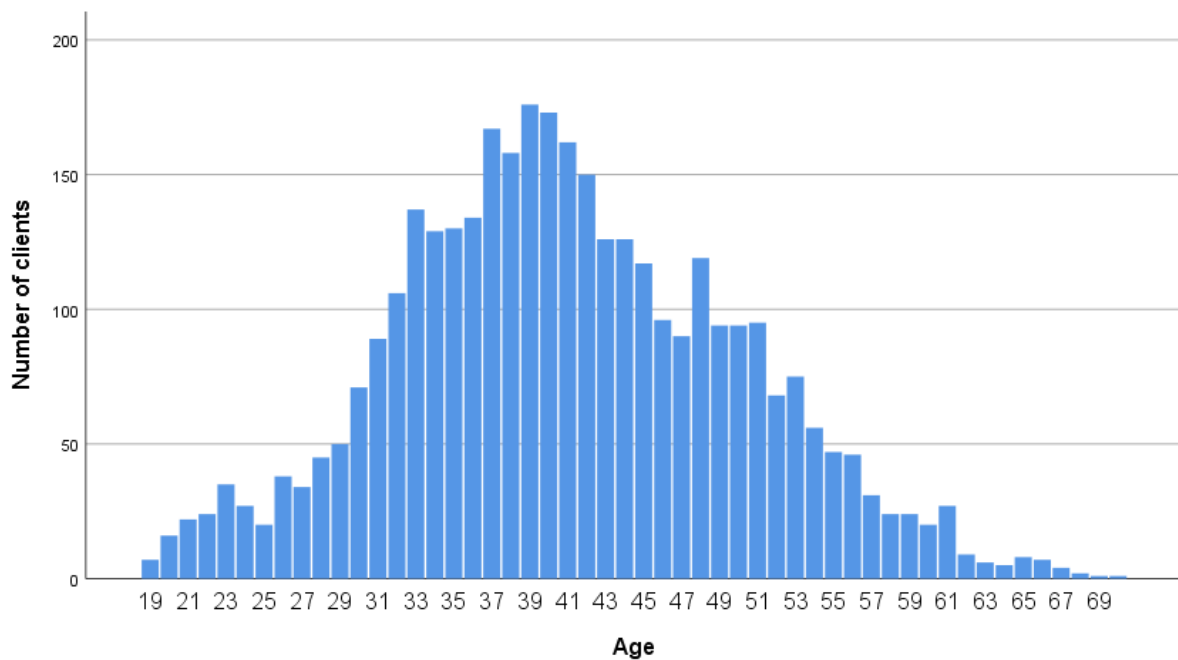
Significant differences between the subgroup of continuators and the subgroup of new entrants are pointed out in chapters 5 and 6 of the report.

Gender and age

2,978 clients are male and 543 are female. The total group of consumption room users consists, similar to last year, of 85% men and 15% woman. Since the beginning of the survey, the proportion of women has never been higher than 20%.

The 39-year-olds are the age group to which most users of consumption rooms belong, as the following chart shows.

Figure 15: Age distribution in 2020

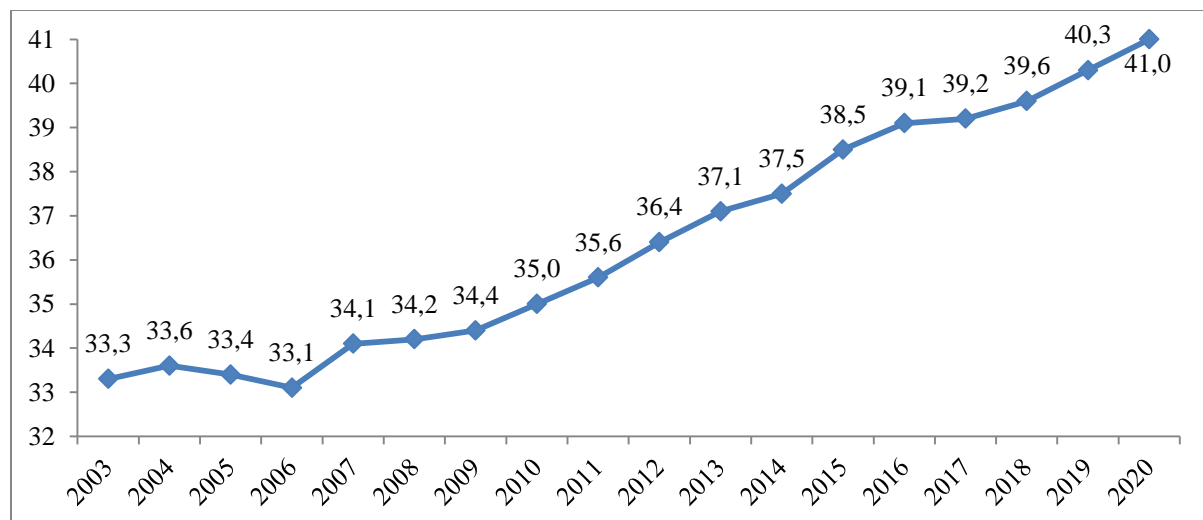


Only a few young people use the drug consumption rooms. A total of 9% of the users of consumption rooms (318 persons) are younger than 30 years. In contrast, 91% of the clients are 30 years or older.

The average age of the users of the drug consumption rooms is 41.0 years, with women being younger than men on average. An aging of the users can be observed. As the following figure shows, the average age has grown significantly in the last few years. From 2006 to 2020 it increased by 7.9 years.

Until 2006 there was no trend towards ageing. The curve goes up and down during this period. This finding indicates that in the earlier years new, comparatively young people joined the program who lowered the average age. In the meantime, the new arrivals are also older than in earlier years. They are currently 38.2 years old on average.

Figure 16: Average age of the clientele 2003 to 2020

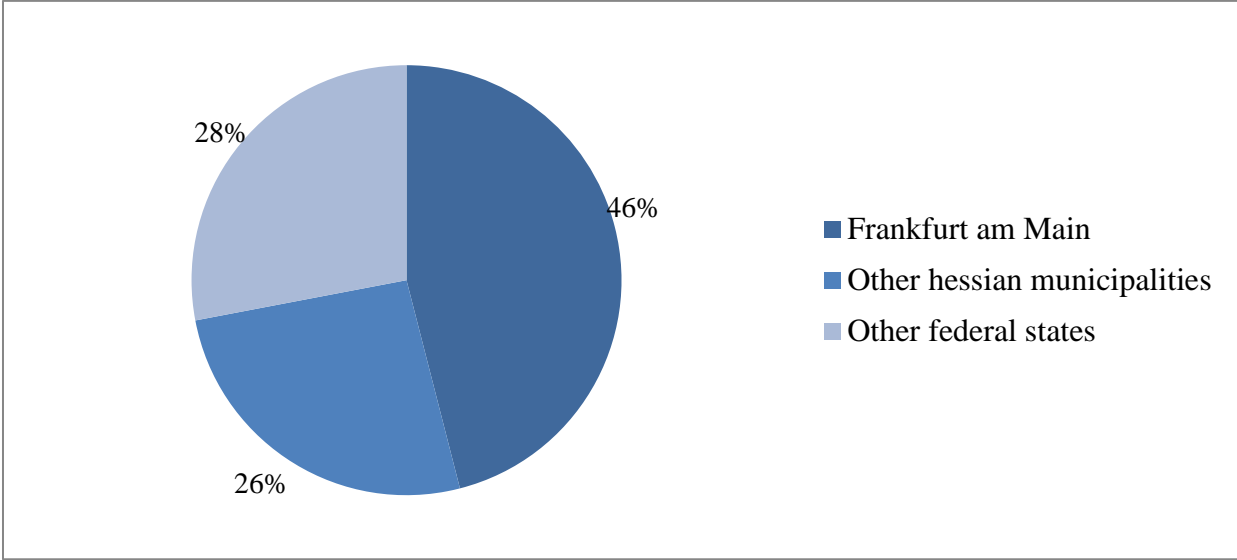


Residence

Around 46% of all drug consumption room users have indicated Frankfurt am Main as their place of

residence. Around 26% come from other hessian municipalities and 28% from other federal states. Thereby many consumption room users are recorded as foreigners, although they now live in Frankfurt am Main.

Figure 17: All consumption room users according to residence in 2020



Housing and working situation

59% of all surveyed drug consumption room users live in private housing and a further 5% live in facilities such as assisted living, homes or clinics. In total there are 35% of all users living in precarious housing situations – homeless, in shelters and other temporary housing situations.

Not all clients were interviewed, but at least 476 clients live in precarious housing conditions. At the time of the survey, 150 of them live in emergency sleeping facilities. Frankfurt's addiction support thus clearly contributes to the fact that fewer people spend the night in public spaces.

Continuers live more often in precarious housing conditions than newcomers. DKRs are an important place to go, especially for people who do not have a place to live, because here they can consume in a stress-free, hygienic and harm-minimized way, which is often not possible in public spaces.

More than two third (68%) of all consumption room users are unemployed. Woman (76%) are clearly more often unemployed than men (67%). The unemployment rate for new entrants (60%) is lower than that of continuers (74%).

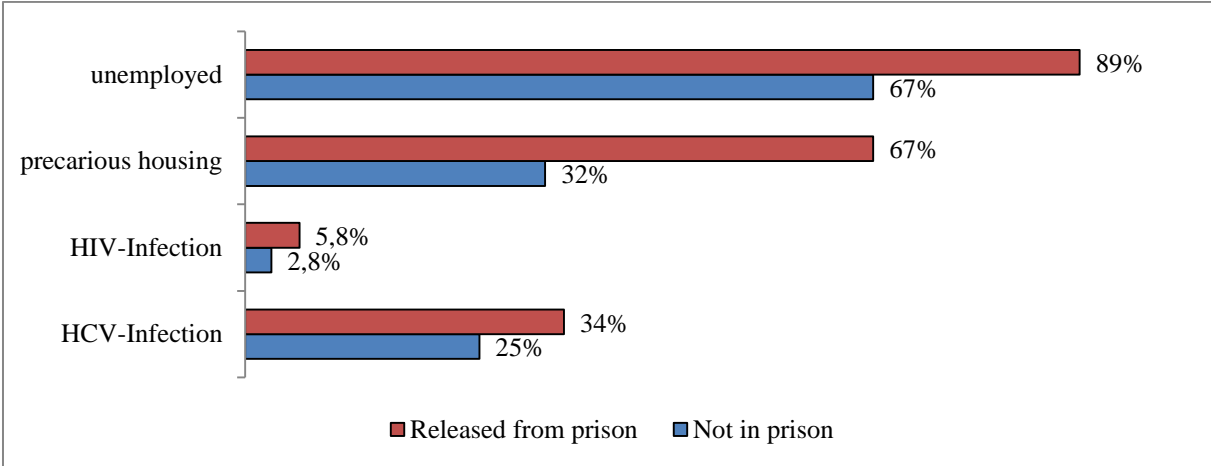
22% of clients are in employment; this includes not only full-time jobs but also part-time, marginal and one-euro jobs. 2% of the clients are in apprenticeship, school or university.

Penalties

Prison sentences are relatively widespread among users of consumption room users. 133 clients claim to have been imprisoned recently - within the last six months. This means that 10% of the interviewed clients have recently been released from prison.

Those released from prison - 83% of them are men - are at high risk of social exclusion (precarious housing, unemployment) and are even more frequently affected by hepatitis C infection or HIV infection than other users of consumption rooms who have not been in prison in the last six months.

Figure 18: Comparison of people with prison experiences and others in 2020: infectious diseases, unemployment and precarious housing



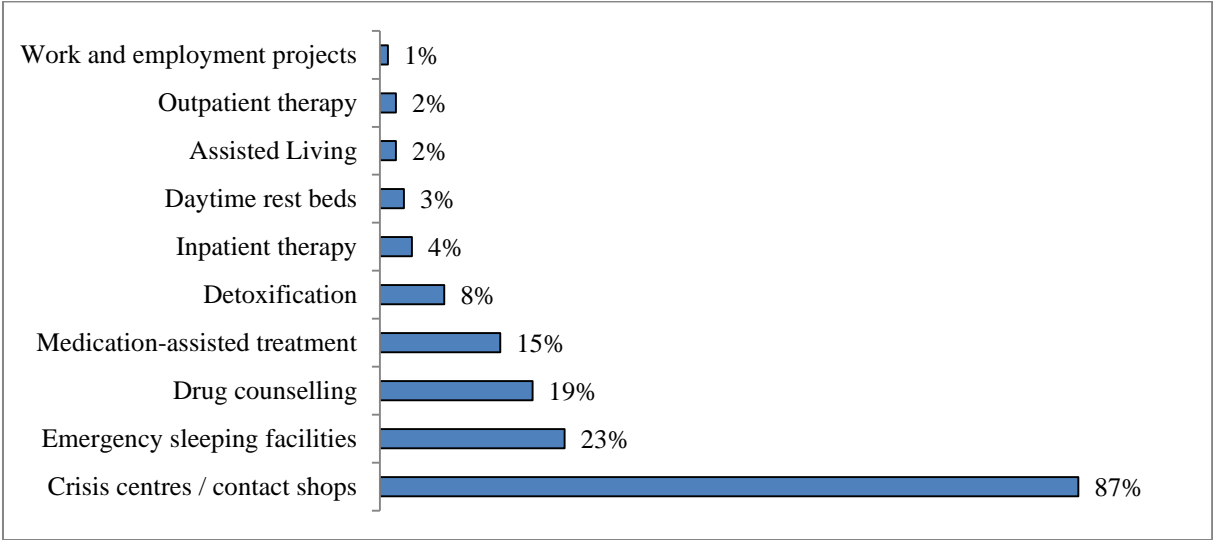
Support requirements

When asked about the need for support, the wish for detoxification (drug withdrawal in hospital) was mentioned most frequently. 37% of the interviewed clients expressed this need for support. Likewise, almost 37% of the interviewed clients mention the need for support in finding housing; this figure corresponds to the value of 35% of all interviewed users of consumption rooms who live in precarious housing conditions. About one third (35%) of the clients mentioned their need for therapy. Help in finding a suitable job was mentioned by 31% of the clients. 26% seek substitution treatment with heroin substitutes. 15% mention drug counselling and 10% medical treatment.

Use of the drug help system

The most important or most frequently used drug help facilities are again the low-threshold crisis centres and contact shops, which also include the DKR. 87% of the interviewed clients stated that they had used such a facility in the last 30 days. 23% had used an emergency shelter. In third place is the use of drug counselling (19%), and the fourth most frequently mentioned is the use of medication-assisted treatment (15%).

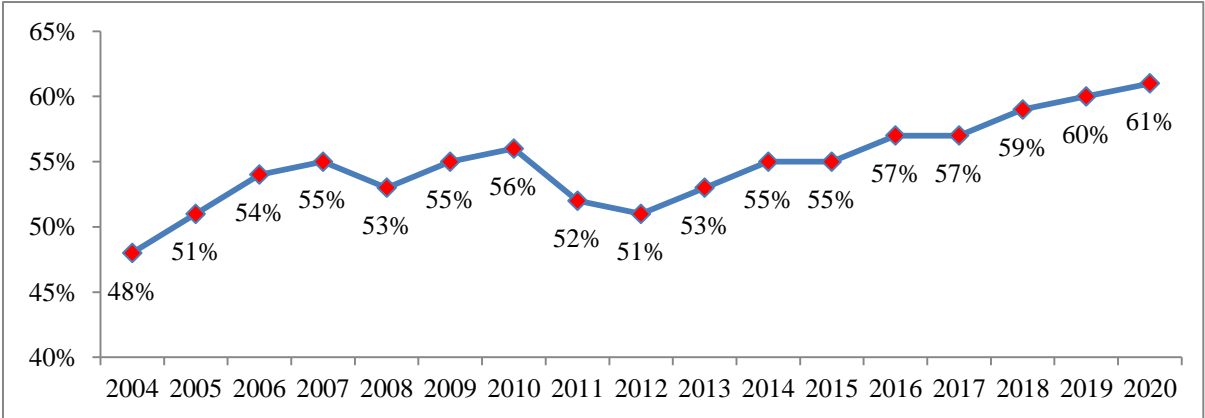
Figure 19: Use of drug help facilities in 2020 (multiple answers possible)



Health status

61% of the consumption room users have been in medical treatment due to their drug use within the last 30 days. As in previous years women have used a medical treatment more often than men. Out of the new entrants, 53% and out of the continuers, 66% have used medical treatment. As the next figure shows, the percentage of clients who recently visited a doctor's office has increased over the years. This is related to the ageing of the clientele, as older users of consumption spaces have a higher need for medical treatment than younger clients.

Figure 20: clients in medical treatment 2004-2020 (in %)



3.3% of the injection room users specified to be infected with HIV. The HIV infection rate is now about the same as in the previous year (plus 0.6% percentage points). At 4.1%, women are slightly more affected than men (3.2%). The HIV infection rate is lower among new entrants (2.0%) than among the continuers (4.1%).

25% of surveyed consumption room users specified a hepatitis C infection (previous year: 24%), a further 1% also have hepatitis B infection. 1% of the interviewed clients are only affected by a hepatitis B infection, but not by an infection with the hepatitis C virus. Among the continuers, 25% are infected with hepatitis C, and among the newcomers also 25%.

With regard to the health situation described, it must also be taken into account that only some of the clients were interviewed by the staff of the drug consumption rooms. The presentation is based on the client's own information. 34% of HIV tests and 35% of hepatitis tests were carried out in 2020. 51% resp. 49% were carried out in 2019, the remaining tests are older. Comparative values with the results of the "DRUCK" study by the Robert Koch Institute can be found in Chapter 5.7.

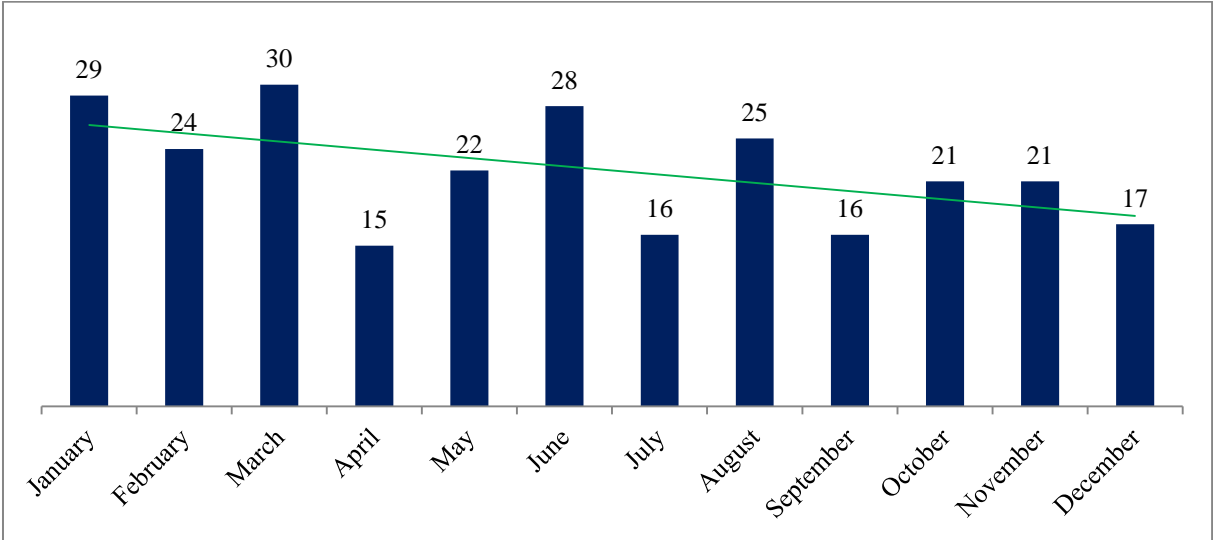
Emergencies

In 2020, **264 emergencies** were documented. This is significantly fewer emergencies than in the previous two years, when there were 386 (year 2019) and 385 emergencies (year 2018). In 2020, there is a **decrease of 32%** compared to the previous year. (cf. chapter 7).

As the following graph shows, the number of emergencies drops to a comparatively low level in the months of April and May, which could be related to the reduced number of consumption places. At the same time as the number of consumption places increases, the number of emergencies also increases in June. However, the reduced number of consumption places cannot explain the other monthly fluctuations; thus, other factors (e.g. possibly the fluctuating quality of the drugs) are involved in the development of the emergency numbers.

Due to the restrictions in the DKR's services, part of the consumption shifted to the public space; it can be assumed that therefore the number of emergencies outside the DKR also increased and not all emergencies that occurred outside were recorded in the DKR's databases. In the course of the year, there is a trend towards fewer documented emergencies, recognizable by the green trend line.

Figure 21: emergencies by month in 2020

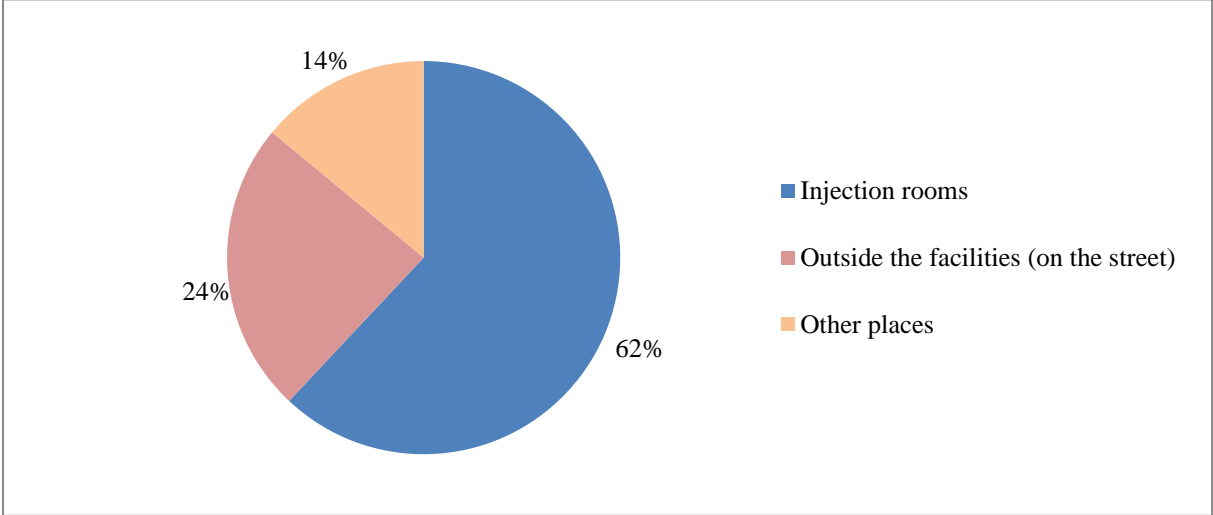


The documented emergencies mostly occurred in the injection rooms (62%). However, the staff also treats emergencies outside the facilities, on the street (24%). In the following chart, "Other places" (14%) includes emergencies that occurred in the facilities but outside the actual drug consumption rooms, and other emergencies for which "Other places" were recorded.

Overall, emergencies outside the facilities have slightly increased in percentage terms. While in the previous year 20% of all emergencies occurred in the surroundings of the facilities, this year it is 24%, which corresponds to an increase of four percentage points. This is due to the fact that due because of the reduction of consumption places, more consumption took place on the street or in public spaces.

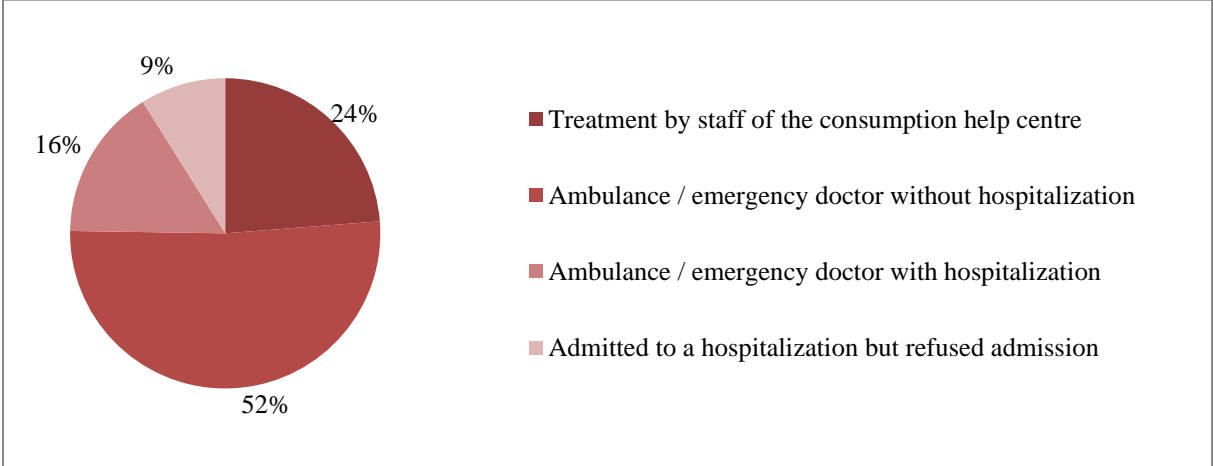
On the other hand, as in the previous year, there were no emergencies in the inhalation rooms of the facilities. This illustrates that inhaled drug use is less risky than intravenous use.

Figure 22: Emergency sites in 2020



About one fourth (24%) of the emergencies could be adequately treated by the staff of the consumption help centre. In about two half (52%) it was necessary to call an ambulance / emergency doctor. 25% of the emergencies were so serious that not only the ambulance came but also hospitalization was necessary; 16% of these clients were admitted and 9% refused admission. The number of serious emergencies with hospitalization has slightly increased compared to the previous year.

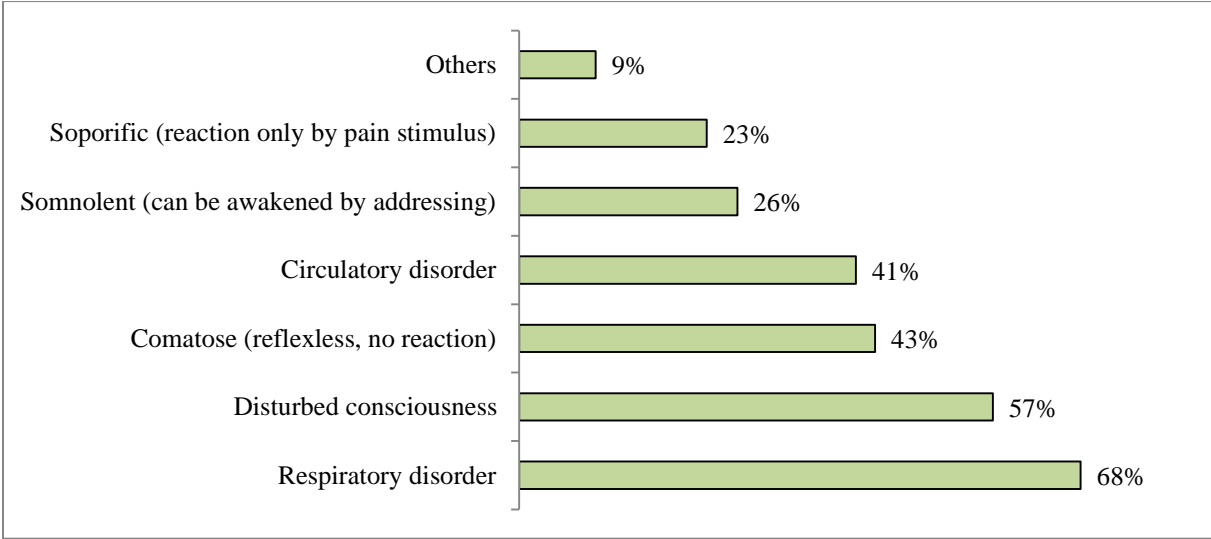
Figure 23: Care of emergency victims in 2020



If the client is known in the facility, the risk factors can be assessed by the team. The risk factors for overdose are known for 84 emergencies in 2020. As in both previous years, the most frequent risk factor is alcohol consumption (42%). A poor physical / psychological condition formed the basis for an overdose in 30% of the emergencies. Also risky is consumption after previous abstinence (e.g. due to a stay in prison, detoxification or therapy), because then the body is weaned and accordingly already reacts to smaller doses. 25% of the emergencies documented here are due to previous abstinence. Previous benzodiazepine use was documented in 23% of the emergencies, use of other drugs in 21% of the emergencies. Sometimes there is overlap and multiple risk factors are present.

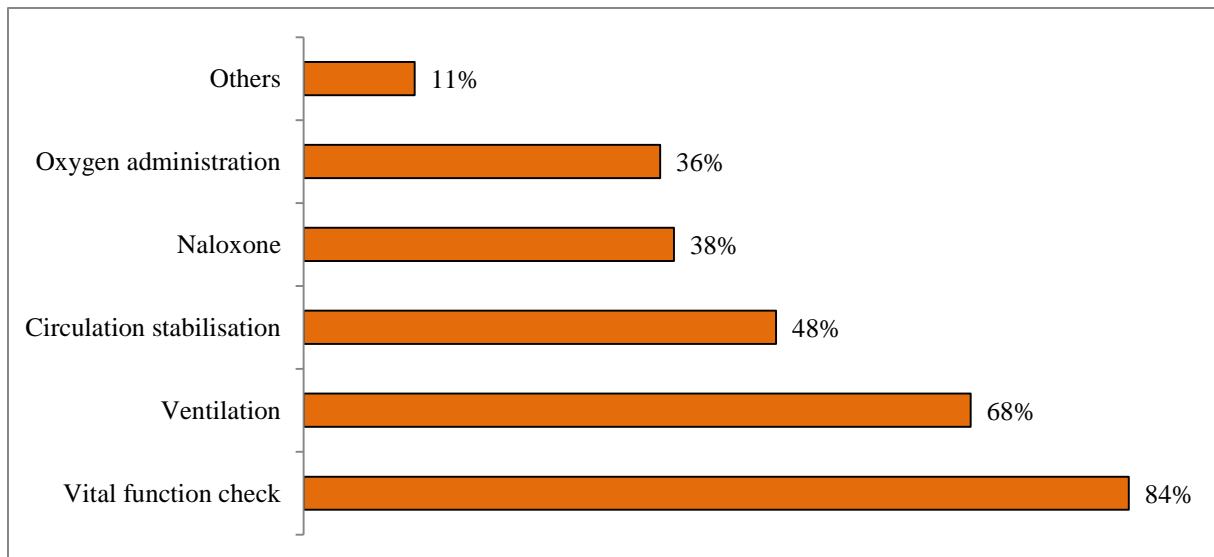
The following symptoms were documented in the emergency victims.

Figure 24: Symptoms of the emergency victims in 2020



All staff members of the drug consumption rooms receive first aid training for drug emergencies. The following measures were carried out by the staff and also by the emergency services called in.

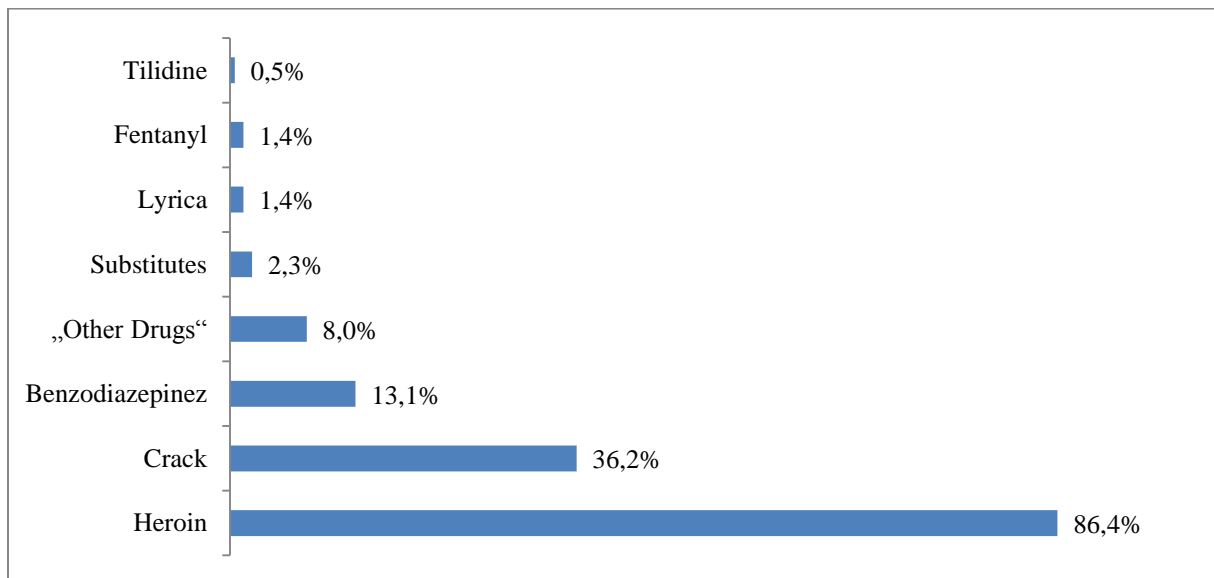
Figure 25: Measures taken by emergency responders in 2020 (multiple answers)



Drug use before emergency

In this analysis, it becomes clear that almost all emergencies (91%) are triggered by the use of opiates or opioids (heroin, fentanyl, tilidine, substitutes) - often in combination with other substances. This result was already evident in the previous year.

Figure 26: Drug use before emergency in 2020 (multiple answers)



Besides heroin, it is mainly two other drugs that lead to an emergency, either alone (as mono-consumption) or together with other substances (as mixed consumption): Crack and benzodiazepines. Various other drugs also play a role. Not all triggering substances are always known, which were consumed before the emergency and possibly already before the visit of the DKR.

57% of the emergencies (previous year: 60%) occur after the consumption of a substance, mostly heroin. In contrast, 43% of the emergencies (previous year: 40%) were due to mixed

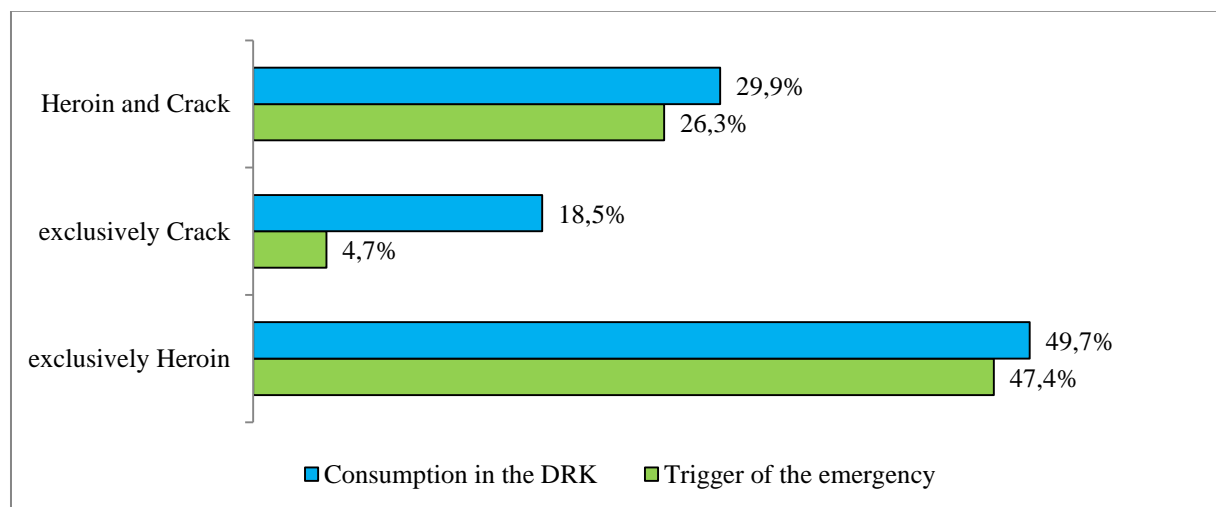
intoxication. A detailed description of all substances and substance combinations can be found in Chapter 7.1.

A comparison of consumption data and emergencies is revealing: Do the substance combinations that are very frequently consumed in the DKR also very frequently lead to emergencies? In the drug consumption rooms, the substance combinations "exclusively heroin", "exclusively crack" and "heroin and crack" are used very often.

This shows that "**exclusively crack**" leads to emergencies comparatively seldom. Thus, crack is exclusively used in about 19% of all consumption processes. However, the exclusive use of crack triggers only 5% of the emergencies. The use of "exclusively crack" is significantly less risky than other substance combinations (Φ 0.014 / $p < 0.001$).

On the other hand, the substance combinations "exclusively heroin" and "heroin and crack" show a stronger correlation: "**Exclusively heroin**" is used in 50% of all consumption events and triggers 47% of all emergencies. The mixture of "**heroin and crack**" is used in 30% of the consumption processes and triggers 26% of the emergencies.

Figure 27: Comparison of consumption data and emergency data: Comparison of the three most important drug combinations in 2020



Frequency of use of consumption rooms

The average frequency of use in 2020 is 43 consumption processes - on average, every client has 43 consumption processes per year. In the previous year the corresponding average value was 45, in the year before 43.

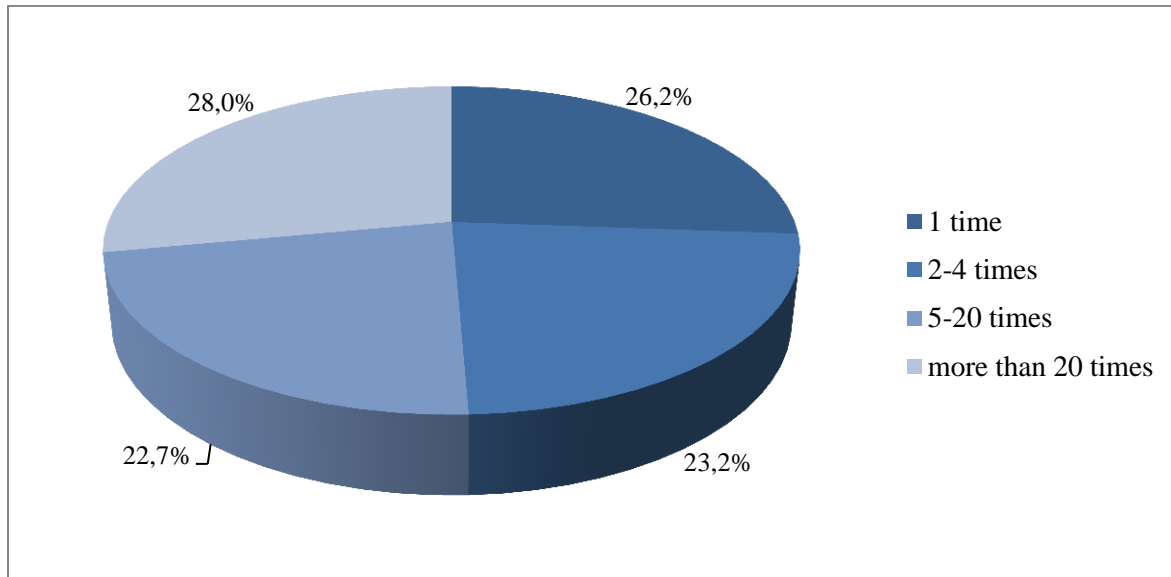
The maximum this year is 1,854 consumption transactions - one client used the facilities 1,854 times in 2020. This corresponds to around five uses per day.

Continuers (Ø 50) use the rooms more frequently on average than new entrants (Ø 9).

To the next graphic: 26% of the consumption room users visited only once one of the Frankfurt consumption rooms ("one-time-users"). Another 23% of the clients undertook two to four consumption procedures. 23% undertook five to twenty consumption transactions.

28% of all clients have made more than 20 consumption transactions during the year. This corresponds roughly to the findings from the seventeen previous years. This result agrees with data from a study on Berlin consumption areas, which also points to a high number of one-time users (Stöver et al. 2015).

Figure 28: All users of consumption rooms by frequency of use of consumption rooms in 2020



If further details are broken down according to the average frequency of use, a differentiated picture of different user groups emerges.

Among the users of consumption rooms with high intensity of use are those who report daily crack use¹ (Ø 109 times per year) or daily heroin use (Ø 98 per year). The frequency of use is similarly high among clients with daily cocaine use (Ø 95). The frequency of use is lower for clients with daily benzodiazepine use (Ø 40), as these clients usually do not visit the DKR for oral consumption of a tablet.

On average, clients from Frankfurt use the consumption rooms much more frequently (Ø 58 times) than clients from Hesse (Ø 44 times) or other federal states (Ø 20 times).

Consumption of psychotropic substances

34% of the interviewed clients state that they have drunk alcohol in the past 30 days - daily, weekly or even occasionally. The majority of the clients do not drink alcohol. A consumption of cannabis is reported by 32%. As in the consumption data of the facilities, the survey also shows that the clients consume heroin (84%) and crack (67%) by far the most.

31% of clients surveyed have used cocaine in the last 30 days and 22% have used benzodiazepines; other psychotropic substances account for 17%. Cocaine use and benzodiazepine use as well as the use of other drugs largely take place outside the facilities, not in the drug consumption rooms; these substances are only very rarely documented in the

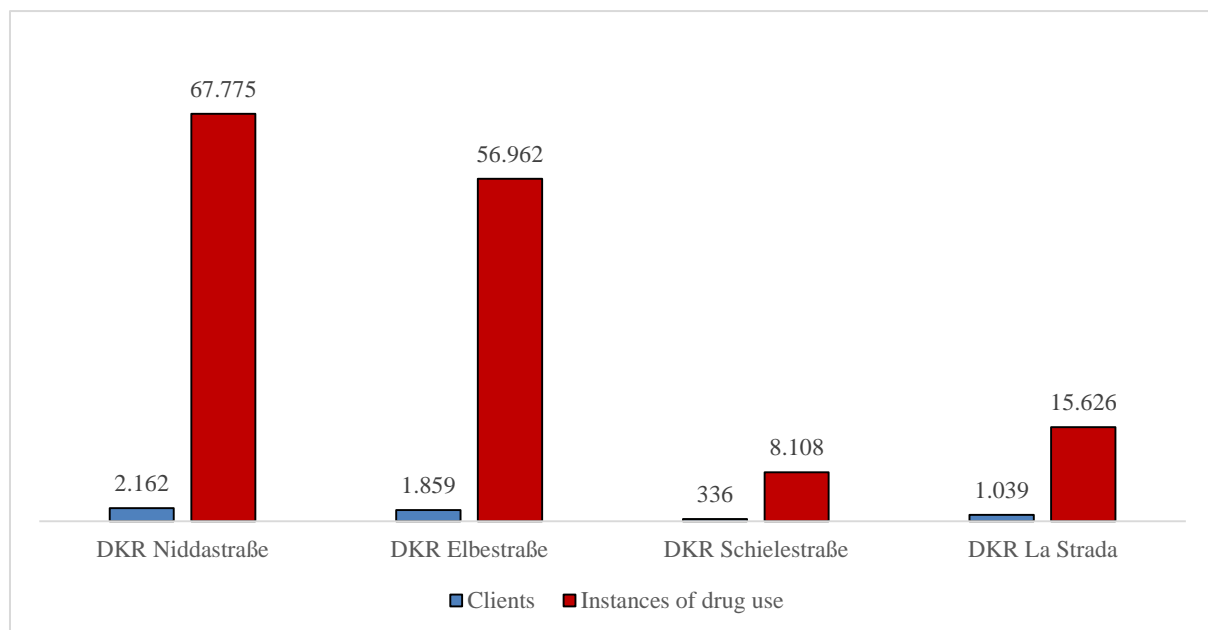
¹ This information on the daily use of crack, heroin, cocaine and benzodiazepines refers to the information in the master data (30-day prevalence).

consumption data. This also applies to the smoking of cannabis, which is only used in rare exceptions in the inhalation rooms.

The four drug consumption facilities

The DKR Niddastraße and the DKR Elbestraße are located in the station district and are run by two different associations ("Integrative Drogenhilfe e.V." and "Drogennotdienst der Jugendberatung und Jugendhilfe e.V."). The DKR La Strada is located at the edge of the station district and is run by the "Aidshilfe Frankfurt e.V.". Another consumption room - the DKR Schielestraße - is located in Frankfurt's Ostend and is part of the largest low-threshold drug help facility in Europe, the "Eastside". It is also run by the "Integrative Drogenhilfe e.V.".

Figure 29: Number of clients and number of consumption processes by facility in 2020*



*Multiple answers for clients who have used several consumption rooms

With regard to drug use, DKR Schielestraße clearly stands out from the other three DKRs. Crack use dominates there. In contrast, heroin use predominates in the other three consumption rooms, which are located near the railway station. This difference also existed in the two previous years.

The DKR Schielestraße and especially the DKR La Strada are often used for non-intravenous consumption. While in DKR La Strada it is mainly heroin that is smoked, in DKR Schielestraße it is mostly crack. In DKR Elbestraße, non-intravenous use is mostly nasal heroin use, in DKR Niddastraße it is heroin smoking.

51% of all emergencies in 2020 were initially treated by DKR Niddastraße, another 27% by DKR Elbestraße. While emergencies in the station district are part of everyday life and several emergencies per week are recorded, 2.5 emergencies per month occur in the Schielestraße consumption room - in Frankfurt's Ostend. DKR La Strada has 2.3 emergencies per month.