

City Report

Esch-sur-Alzette

Establishing a
drug consumption
room in a
small-scale city

Civil Society Monitoring of
Harm Reduction in Europe 2023

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Introduction

Luxembourg, one of Europe's smallest and least populated countries, stands out as one of the region's most advanced in providing treatment and harm reduction services for people who use drugs¹. Drug policy falls under the joint responsibility of the Ministry of Health, the Ministry of Justice and the Ministry of Internal Security, ensuring that responses to drug-related issues are balanced between the two main pillars of drug demand reduction and drug supply reduction. Since 2001, harm reduction has been included in the national law and has been an important part of drug policy ever since².

At the time of writing (2023), Luxembourg is one of thirteen countries in Western Europe that operates drug consumption rooms (DCRs)³. DCRs have been operating in Europe since 1986, developed as a public health measure to curb the spread of HIV/AIDS among people who inject drugs, and significantly reduce the chances of drug-related overdose deaths. Nowadays, DCRs encompass a range of harm reduction services, including the provision of sterile injection equipment, medical care, psycho-social support, and overdose awareness and prevention training. In some countries such as Luxembourg, services are also adapted to accommodate other routes of administration such as smoking or inhaling drugs. In the 1980s and 1990s, Luxembourg reported some of the highest rates in Europe of high-risk heroin use, drug-related disease and mortality, but a balanced and comprehensive drug strategy has enabled Luxembourg to reduce these rates significantly⁴.

"What really has changed everything on the ground was the opening of the DCRs. And actually, the result of these DCRs is that people can get help; social help or health help, psychological help. Usually what has happened now over the past few years is that these DCRs have functioned as a kind of orientation point. They will try to build a relationship with the [drug] 'user'."

Representative of the Ministry of Health, Luxembourg.

The first DCR in Luxembourg, named Abrigado, opened its doors almost twenty years ago in the country's capital, Luxembourg city. In 2019, Luxembourg reached a significant milestone by opening a second drug consumption facility in Esch-sur-Alzette, a smaller city in the south, close to the French border. Unlike Luxembourg city, which has a population of over 120,000, the city of Esch-sur-Alzette (hereinafter referred to as Esch), is home to less than 40,000 inhabitants. While the establishment of a second DCR in Luxembourg marks a significant milestone, one respondent highlighted that the work does not conclude there.

"I think it doesn't work to say that a national problem can be solved by two drug consumption rooms. I would suggest that it would be better if we had several, small drug consumption rooms instead of two, that have to respond to the requests of the whole country. Because drug use is not a regional problem, it's a national problem. And it has to be invested from all the communities to build up services for 'drug users.'"

Social worker, Contact Esch.

Consequently, this report tells the story of Luxembourg's second drug consumption room in the city of Esch, aiming to provide support for the establishment of future DCRs in other smaller-scale cities in Luxembourg and beyond.

Contact Esch

The DCR in Esch operates within a low-threshold harm reduction facility known as Contact Esch, under the supervision of the Jugend-an-Drogenhëllef Foundation (JDH). As explained by a social worker at Contact Esch, the facility is built upon three fundamental 'pillars': educational, medical and social. Alongside the DCR, Contact Esch provides a range of services including a social café, counselling services, and an infirmary where individuals can access basic medical care. Moreover, representatives from a local hospital

situated in the city centre regularly visit Contact Esch to administer testing and treatment for communicable diseases such as HIV and hepatitis⁵.

A social worker at the facility emphasised the significance of their low-threshold approach, which provides an open space for people to come without an appointment or obligation. The social café, in particular, marked the beginning of their work with service users, especially in trust-building, as many have already experienced disappointment and negative encounters with the wider system⁶.

Like Abrigado, the DCR in Contact Esch offers space for two routes of administration: intravenous drug use as well as smoking/inhalation. In contrast to Luxembourg City which has a fairly 'open' drug scene, the drug scene in Esch is much more hidden. As noted by the C-EHRN focal point for Esch, service users of Contact Esch tend to have a fairly 'stable' social situation in that the majority have both housing and health insurance.



Image 1: The social café at Contact Esch.

According to the latest National Drug Report, 37% of the service users at Contact Esch preferred injection as their route of administration, compared to 61% who favoured inhalation/smoking⁷. This is in contrast to service users at Abrigado in Luxembourg City where the divide between inhalation and injection is a fairly even split (50% and 49% respectively). However, a representative of Contact Esch highlighted that while there used to be a greater distinction between heroin and cocaine use, nowadays many are engaged in polysubstance use.

"In Esch, I think that it highly depends on the offer of the drug market. For example, during the COVID pandemic, it was very hard for people to find heroin, so a lot of them were taking cocaine in order to substitute that. So, it's really not particular to one drug. You can see one person in the injection room and the next day they can be in the blow [inhalation] room."
Social worker, Contact Esch.



Image 2: The drug consumption room within Contact Esch.

Initially, two primary arguments were put forth in support of establishing a DCR in Esch, as recounted by a representative of the Municipality. The first centred around the necessity of ensuring the safety and wellbeing of people who use drugs, offering a safe space for consumption, even for those not necessarily experiencing homelessness⁸. The second argument was grounded in a broader national initiative of the Luxembourg Ministry of Health, aiming to expand and decentralise DCRs beyond Luxembourg City. This sought to mitigate the strain on service demand at Abrigado, aligning with efforts to distribute services more proportionally across the country⁹.

According to insights shared by a social worker, Abrigado's central location near the main train station, coupled with Luxembourg City's 'open' drug scene, historically led to large crowds congregating outside the DCR. Addressing this, the Esch Municipality representative underscored the importance of averting similar situations in the establishment of Contact Esch, recognising that such occurrences in the past had contributed to a negative public perception of DCRs across Luxembourg as a whole¹⁰.

The success of Contact Esch

The reception of Contact Esch has been overwhelmingly positive. Within the first three months of its operation, approximately 40 individuals made daily use of the facility. The

Mayor of Esch, in an interview with a local newspaper, affirmed that neither residents nor the police had complained about the DCR¹¹. In general, neighbouring residents commented that the area had remained quiet, nor had any drug 'paraphernalia' been left on the streets. Interviewees attributed the success of Contact Esch to several key factors, listed below, which could serve as valuable insights for the development of future DCRs in smaller cities and towns.

Local community consultations

Efforts were made by both JDH and the Municipality of Esch to emphasise Contact Esch as 'non-intrusive' to local residents. According to a social worker of Contact Esch, the success of Contact Esch is rooted in the extensive consultation that took place with the local community. From their perspective, it is important to recognise and address any potential initial resistance that local communities may have towards such proposals.

"For me, it's totally human, that at first everybody says, 'Oh no, not in front of my door. Do it somewhere else'. We didn't make the choice of the place where we are. That was decided by the Mayor of Esch. But to be good with the neighbours and to show a good example, you have to be open to answer in the dialogue, to respond to questions, to everything that is possibly going on in their heads, because they have no experience. They don't know what we are doing. They don't know our work."
Social worker, Contact Esch.

In Esch, proactive efforts, such as hosting open-house events, are commonplace to bridge the gap with local residents. These events invite the community to witness the facility's operations firsthand, encouraging an understanding of the work being done, and dispelling preconceived notions rooted in unfamiliarity with issues related to drug consumption. According to insights from the social worker, this understanding has played a central role in ensuring the DCR operates harmoniously within the neighbourhood¹².

Location of services

While maintaining effective consultation with local residents remains a priority, an official from the Esch Municipal government underscored that the successful integration of Contact Esch can also be attributed to its discreet presence.

"I think for the city, at least the best success we had was that it passed under the water, so nobody talked about it. And already now, nobody talks about it. It seems like it doesn't exist for the inhabitants, for the neighbours. So, it's accepted like it is. It doesn't make a lot of noise. It doesn't disturb and so on. It's a real success."
Representative of the Municipality of Esch.

Contact Esch is located in a residential area, approximately 1 kilometre from the city centre. A Municipality representative explained that this strategic placement aims to minimise public nuisance, particularly in reducing the presence of

drug dealers who tend to be more prevalent in the centre of Esch¹³. By situating itself not directly in the city centre but still in close proximity, Contact Esch has effectively sidestepped some of the challenges associated with drug-related activities that are commonly found in more central areas.

The Municipality of Esch also adopts a strategic approach to disperse social institutions across various parts of the city. This entails situating services, such as the social restaurant or the night shelter, in different locations rather than consolidating them in one area. According to a spokesperson for Esch, the goal is to encourage people to move around the city, preventing concentration in a single place¹⁴.

"A lot of social services that work with clients that are either homeless or 'drug users', or both, are often created at the same spot. Sometimes it's like a Bermuda Triangle...When we create all the social services at one spot, it's clear that they will be there. It will cause problems if more people go there."

Social worker, Contact Esch.

Inspiration from neighbouring countries

In preparation for the establishment of Contact Esch, officials from the Municipality of Esch, together with JDH, proactively visited DCRs in Denmark. The goal was to deepen their

understanding and draw comparisons between various service models. The commitment to learning from existing successful, evidence-backed models played a significant role in the accomplishments of Contact Esch.

One notable influence was Odense, Denmark's third-largest city, which played a pivotal role in shaping the design of Contact Esch. The Municipality admired a particular feature of the DCR in Odense—the inclusion of a garden, which was subsequently incorporated into the design of Contact Esch¹⁵. The rationale behind this decision was to minimise public disturbance in front of Contact Esch while providing a pleasant environment for activities such as smoking or enjoying a cup of coffee.



Image 3: The terrace at Contact Esch

"We spoke for a long time about the possibility of Contact Esch. And I only knew the example of Luxembourg City. So, for me, it was very exciting that I had the chance to go to Odense to see the consumption room, and also how it differs from the one in Copenhagen. I think my opinion was very different until this moment. I had a lot of questions on my mind. What will happen? Is it good? Is it not good? I didn't know before this the real concept of a consumption room."
Representative of the Municipality of Esch.

Service rules and regulations

To access the facilities at Contact Esch, service users are required to sign a contract, ensuring compliance with rules and regulations. The staff at Contact Esch also try to promote good practices wherever possible, such as instructing service users not to gather by the door, but to utilise the terrace instead. As reported by the social worker, minimising visibility to passersby is an important factor, explaining that standing in front of the door could attract unwanted attention and potential issues with law enforcement, disrupting the neighbourhood. She emphasised the need to coexist harmoniously with the community, and that service users are encouraged to respect the privacy and peace of other residents¹⁶.



Image 4: A staff meeting taking place at Contact Esch

‘Culture of cooperation’

Many interviewees highlighted the significance of the 'cooperation culture' embraced within different political structures in Luxembourg.

“We try to always promote our cooperation culture and we always try to integrate everyone into talks. Sometimes it takes a lot of time, it can also be fatiguing and draining so to say, but it’s the way to go.”

Representative of the Ministry of Health.

The representative emphasised the importance of regular, multilateral discussions involving diverse stakeholders such as the Municipality, police, civil society organisations, and service providers. Recognising that each stakeholder faces unique challenges, a cooperative culture becomes vital for collaborative efforts, discussion of key issues, and devising collective solutions.

Aside from these fundamental meetings, representatives from the Municipality of Esch actively participate in various other engagements with stakeholders, facilitating communication between on-the-ground teams like JDH and higher authorities in the Municipality, including the Mayor¹⁷. Additionally, employees of the night shelter in Esch convene regularly with the Contact Esch team every two-to-three months, promoting cooperation between homeless services and services for individuals who use drugs, given the frequent overlap in the target population.

Strong political will and a supportive legal environment

Drug policy in Luxembourg benefits from strong political will at the national level to promote and expand harm reduction. According to a spokesperson from the Ministry of Health, the overarching goal is to extend harm reduction services, including DCRs, throughout the country¹⁸. However, the actual implementation rests on the cooperation of local councils. For instance, in Ettelbruck, a town in northern Luxembourg with a population of around 10,000, the Mayor and his Municipal Council have long been opposed to the creation of a drug consumption room in their city¹⁹.

“I think in a lot of towns, if you want to be Mayor the next time, it's not a consumption room that will make the people vote for you. Perhaps this will be a reason why they don't say yes, because it's something that the citizens don't want. You do something only for a small population of your town. And I think it's better for politicians to say - I have opened a school, than I have opened a consumption room.”

Representative of the Municipality of Esch.

At the national level, the Ministry of Health in Luxembourg operates in two facets: the political Ministry of Health and the non-political Directorate of Health, which oversees technical aspects and has the responsibility of providing a budget and other resources to ensure public health standards.

In principle, the placement of DCRs within the Directorate of Health safeguards their existence from potential threats posed by political changes at the national level.

— Cosy and inviting atmosphere

Interviewees highlighted the small size of Contact Esch as a crucial factor contributing to its success. A Municipal representative from Esch contrasted smaller DCRs with larger ones, such as those in Luxembourg City and Copenhagen, emphasising

the more intimate and familiar atmosphere of smaller facilities. While each DCR must respond to the unique circumstances of its area, respondents believed that individuals in smaller DCRs like Contact Esch are more likely to actively engage with services, seek assistance, and form meaningful connections²⁰.



Image 5: Exterior artwork of Contact Esch

Recommendations

Based on the insights derived from this report, the following policy recommendations are proposed. These suggestions are tailored to the specific context of the city of Esch, and to the country of Luxembourg, and are informed by the experiences of the DCR within Contact Esch. While it is hoped that this report can help to inform the implementation of DCRs in smaller cities and towns, it is important to recognise that there is no one-size-fits-all approach for implementing DCRs, and each initiative must carefully consider the distinct needs and circumstances of its local community.

Increased number of DCRs

In line with the overarching Drug Strategy of the Luxembourg Ministry of Health, DCRs should be established in more locations across Luxembourg. Despite the positive impact of Contact Esch, respondents indicated that the service user demand on Abrigado remains high. This reiterates the distinct characteristics and unique needs of different cities, emphasising the importance of tailoring services to specific local contexts. It further underscores the necessity of ensuring that DCRs and other harm reduction interventions are accessible across all regions of the country, not just confined to larger urban areas. The rejection of proposals for establishing a DCR in Ettelbruck, in northern Luxembourg, and the current absence of plans to create additional DCRs in Luxembourg, are matters of concern and advocacy in this area should remain a top priority.

Smaller-scale DCRs

Where possible, it is recommended to opt for multiple smaller-scale DCRs rather than a singular large-scale entity. As noted by respondents, service users in smaller-scale DCRs such as Contact Esch are more likely to actively engage in services, seek assistance, and form meaningful connections. Additionally, smaller-scale facilities help prevent the formation of large crowds, reducing visibility. Prioritising the establishment of smaller-scale DCRs allows policymakers to better address the distinct needs and dynamics of individual neighbourhoods. However, this approach should be assessed on a case-by-case basis, depending on the unique needs of each city or area.

Educational visits

Local policymakers are urged to proactively engage in education and familiarise themselves with the success stories of DCRs in other European cities. Conducting on-site visits is essential to gain firsthand insights into their operational effectiveness and draw inspiration from their models. Emphasis should be placed on studying examples that showcase positive implementation without negatively impacting the local neighbourhood. Recognising that a one-size-fits-all approach may not be suitable, policymakers are encouraged to undertake multiple visits across various countries to explore diverse models.

Culture of co-operation

Establishing a robust 'culture of cooperation' is essential to promote productive relationships among stakeholders. Regular meetings should

include representatives from government ministries, the Municipality, the organisation responsible for the DCR, and community representatives of people who use drugs. Effective collaboration and cooperation among harm reduction services and broader health and social service entities is crucial, such as those providing OAT, homeless shelters and organisations focused on education and employment opportunities. This ensures that service users are not only actively engaged with one service but are also introduced and guided towards accessing a spectrum of harm reduction facilities.

Maintaining positive relations with the local community

Encourage open dialogue with the local community wherever possible, including initiatives such as open days to dispel potential misconceptions about drug use and DCRs. Efforts should also be made to actively build and sustain positive relationships with local media outlets to effectively showcase the positive impact of DCRs on the local community. This can help to ensure accurate and balanced reporting that highlights the benefits of harm reduction initiatives. Through regular communication and transparency with the local media, DCRs can shape a narrative that reinforces their value and underscores the positive influence they exert on the community, while reducing stigma.

Service location

Careful consideration of the DCR's location is essential for successful implementation. Where possible, a location should be chosen that is not directly in the city centre but remains within

close proximity. This ensures accessibility of services, while circumventing challenges commonly associated with central locations, such as public drug and alcohol consumption, and drug dealing. If feasible, harm reduction services ought to be evenly distributed across different areas to prevent the clustering of services in a single location.

Increased opening hours

Interviewees emphasised the need for enhanced opening hours at Contact Esch, recognising that people who use drugs require support beyond typical 'business hours'. The Municipality spokesperson also emphasised that outside of opening hours, service users are inadvertently pushed to engage in 'illegal' activities during closures. Extended weekend hours should therefore be offered wherever possible to provide safer options for high-risk service users who may otherwise consume in public spaces, such as streets, public toilets, or unsupervised in their homes when the DCR is closed.

Methodological remarks

This report is part of Correlation's 'City Reports' series, offering concise harm reduction case studies in five European cities in 2023. Interviews were conducted in English (N=5) with policymakers at the local and national levels, along with representatives from Contact Esch. The interviews were documented through audio recordings and analysed by C-EHRN. To uphold participant confidentiality, details of the respondents have been omitted.

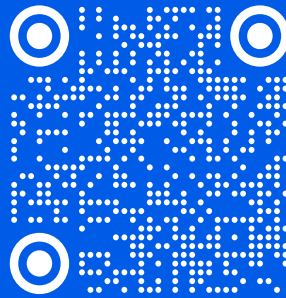
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