The impact of COVID-19 restrictions on Needle and Syringe Programme provision and coverage in England

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Background:

The restrictions

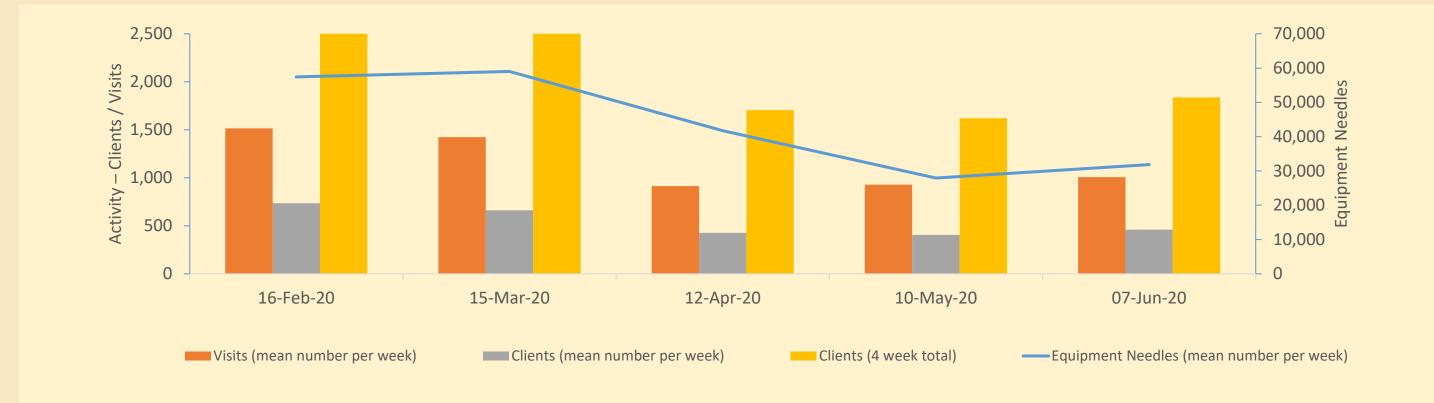
introduced in response to COVID-19 presented many challenges,

particularly for vulnerable and marginalised populations. These included maintaining access to Needle and Syringe Programmes (NSPs) to reduce the harms associated with injecting drugs. NSP effectiveness is coverage dependent, but lockdowns and social distancing during 2020/2021 limited NSP access and availability. Cheshire and Merseyside, a sub-region in the northwest of England has had NSP surveillance in place via the Integrated Monitoring System for three decades which allows for the counting of individuals attending, visits and equipment distributed.

Results:

The restrictions resulted in the number of NSP clients decreasing by 36%. NSP coverage for those injecting psychoactive drugs halved, declining from 14 needles per-week during the 4-weeks to 15th March 2020 to 7 needles per-week by mid-April. While activity was substantially down for most of the succeeding year, it recovered during 2021 and by March 2022 was at 96% of the pre-pandemic level for individuals using psychoactive substances, although there were still 26% fewer individuals using NSP for steroids and other IPEDs.





Methodology:

Data was compared during five four-year periods centred on the implementation of restrictions in the UK in mid-March 2020. Weekly averages were compared to allow for public holidays and weekly variation in activity. This data was subsequently compared with activity levels at the end of March 2022, by which time most pandemic restrictions had been lifted.

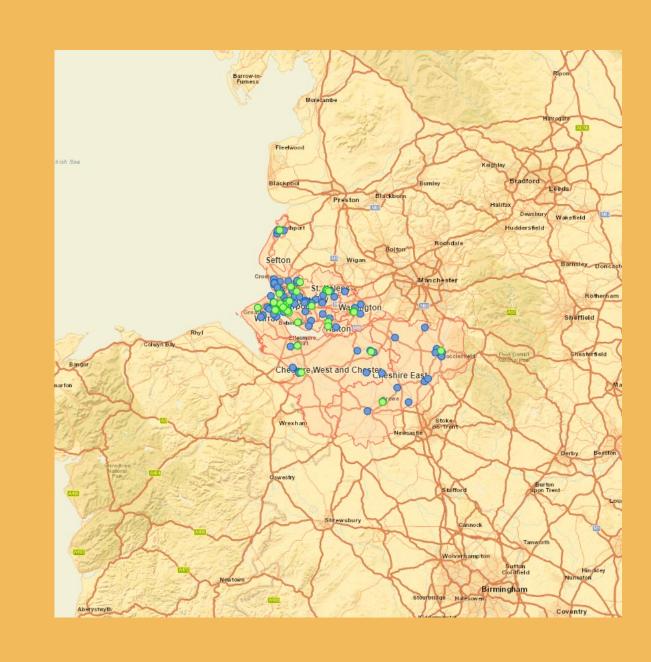


Conclusion:

Though it is unclear if there has been a decline in injecting, the decline in NSP coverage during the early months of the pandemic was so marked that it almost certainly reflects decreased utilisation among those in need, indicating increased equipment reuse and risk. While activity has recovered for the psychoactive injecting population, the reasons for its slower recovery among the steroid and IPED injecting population warrants further investigation.



The Integrated Monitoring System (IMS) is commissioned by nine local authority areas across Cheshire and Merseyside in the North West of England, for the monitoring of Needle and Syringe Programme (NSP) coverage.

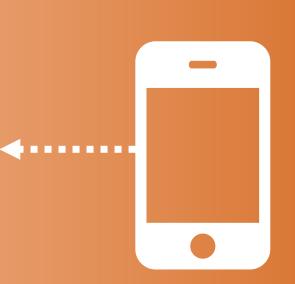


NSP provision is available from over 100 sites across the area, these are predominately drug treatment services and pharmacy locations. In response to restrictions during the COVID-19 pandemic, several areas instigated new methods of NSP delivery including via hostels and homeless services, and implementation of a direct delivery postal service.



IMS captures data on number of NSP visits, and amount of equipment collected or returned. Clients are requested to (optionally) give their initials and date of birth which allows for monitoring the number of unique individuals accessing NSP sites across the area.





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