Opiate-dependent service-users’ knowledge and attitudes towards Supervised Injecting Facilities

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Introduction

Supervised Injecting Facilities (SIFs) are professionally supervised healthcare facilities where drug users can inject pre-obtained illicit drugs under medical supervision in a safer, hygienic environment. The establishment of a SIF in Ireland is currently in progress as part of the National Drug Strategy: Reducing Harm, Supporting Recovery 2017-2025. There are many health care related and public safety issues associated with public drug injecting including; socio-economic deprivation, homelessness or particularly precarious housing and elevated drug related morbidity and mortality. By establishing contact with difficult-to-reach populations of drug users, SIFs aim to reduce public drug use, improve public amenities near urban drug markets, reduce the morbidity and mortality risks associated with drug use including the risks of HIV/HCV/HBV and overdose and promote drug users’ access to other social, health and drug treatment services.

There is consistent evidence that SIF use is associated with reductions in injecting risk behaviour such as syringe sharing, and in public drug use. The use of the facilities is also associated with increased uptake of detoxification and treatment services. Since 1986, more than 90 SIFs have been established in Switzerland, the Netherlands, Germany, Spain, Luxembourg, Norway, Canada and Australia. These SIFs provide clean injecting equipment, good lighting, clean surfaces and sharps disposal. They facilitate individually tailored health education, and promote access to healthcare and drug treatment. Staff are trained to provide assistance and emergency care in cases of overdose.

Objectives

The purpose of this study was to explore the attitudes and knowledge of opiate-dependent service users in Dublin towards Supervised Injecting Facilities.

Methods

84 opiate-dependent service users on methadone maintenance, who attend the NDT for Opiate Substitution treatment participated in an interviewer administered questionnaire, from March 2017 to July 2017.

The following data were collected: basic demographics, pattern of drug use including injection practices and location of injection episodes, knowledge of SIFs, willingness to use SIFs, attitudes towards proposed SIF rules. Descriptive analyses were carried out.

Ethical approval was granted on 15/3/17 by the Primary Care Research Committee.

Results

- 39.4% of those surveyed were active intra-venous drug users (injected in last 6 months)
- Among active IVDUs there was no association between type of accommodation and willingness to use a Supervised Injecting Facility, p=0.36
- 94.4% (67) of service users with a history of injecting reported they would be willing to use a SIF, if they were going to participate in IVDU.
- Of the active users 90% reported that they would use a SIF.
- Of the active users 46.7% admitted to injecting drugs in public places such as streets, public bathrooms, parks etc; with 13 (43.3%) of these injecting in more than one public place.
- 53.3% of service users reported to only injecting drugs in their home.

Table 1: Service user attitudes towards possible SIF rules

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<thead>
<tr>
<th>Staff Supervision</th>
<th>Neutral (%)</th>
<th>Acceptable (%)</th>
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| 83%
| 100
| 90%
| 100
| 83%
| 86.7
| 3%
| 67.6
| 70
| 79.7
| 83.3
| 76.7
| 76.7
| 23.3

Conclusions

This survey confirms the desire amongst service users for Supervised Injecting Facilities in Dublin. The majority of service users would be willing to use a SIF. Potential SIF users would find it acceptable to comply with the rules outlined for the provision of a SIF. Interestingly, the majority of service users would find it unacceptable for pregnant women and under 18’s to use the facility. Although the majority of service users were aware that a SIF is a space to inject in safety, many were unaware of the other services the SIF could potentially provide. This underlines that there is an ongoing need to educate service users regarding SIFs. This study highlights the need to collaborate with, and consult service users when planning the introduction of a SIF in Dublin.

References