

Reducing Drug Risk

Research Summary

Needle exchanges are successful in reducing the harm injecting drug users do to themselves and others through the spread of diseases such as HIV and Hepatitis. New and detailed knowledge of how public injecting sites in Plymouth are used helps drugs workers to better understand the environmental risks facing drug users. It also allows them to ensure their services, including advice on safe injecting and access to treatment as well as clean needles, are reaching the people who need them the most.



Impact

Research by Dr Stephen Parkin has informed Plymouth Drug and Alcohol Team's (DAAT) thinking around service reviews, needs assessment and environmental health policy. It also deepened the understanding of factors that increase risks to drug users. Findings have confirmed that sites with higher environmental risks are more associated with deaths and potential disease transmission. More practically, the research has informed the placement of needle bins and helped the DAAT target those most at risk for Hepatitis vaccination.

The study has shown that users (and some dealers) are concerned about reducing risk to themselves and the public. However, it has also shown that policing can affect risk - in particular the practice of using possession of clean needles as grounds to conduct a search or make an arrest. This can cause people to discard unused needles or carry only very few, thus increasing risks to themselves and the public.

This information is now being used by a Plymouth needle exchange to inform decisions on how needles are distributed to drug-users.

Dr Parkin's work has been particularly well received by Exchange Supplies – an established agency set up by drug workers to develop new products, produce publications and stage conferences. They are now considering collaborating with him on video materials for drug workers on the subject of drug litter.

Funded by an ESRC CASE Studentship as part of a long-standing collaboration between Plymouth Drug and Alcohol Action Team (DAAT) and Plymouth University, the study saw researcher Stephen Parkin walk the streets of the city with drug agency workers and others with direct contact of drug-injecting issues, photographing drug-injecting sites and discussing how the nature of those sites affected their work with users. Two further stages involved interviews with drug users – first at a needle exchange, and then later at injecting

sites where the researcher used video to capture the sites and their settings along with descriptions of how they were used.

In total, over seventy public places were mapped where drug-users go to inject drugs, which he then organised into three categories:

- controlled sites – for example, public toilets which are both supervised and used by members of the public, with the consequence that there is a chance of help being provided in the event of an overdose or related event
- semi-controlled sites – for example, parkland, abandoned buildings and areas used by sex-workers
- uncontrolled sites – for example a doorway or a step, these sites are small, remote, unsanitary, and likely to be used by only one person at a time.

The result is an invaluable database of injecting sites – documented from the points of view of both agency workers and drug users, in both verbal and visual forms.

Further Information

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The Effects of Place on Health Risk – A Qualitative Study of Micro Injecting Environments

ESRC CASE Studentship

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Key Findings

- In the 1980s the UK experienced a rapid increase in the number of people injecting drugs and a lack of agencies which could influence their behaviour or provide equipment to help combat the spread of blood-borne disease.
- This coincided with a collapse in the availability of clean injecting equipment, and saw an escalation in dangerous practice such as sharing needles and other equipment.
- Needle exchange schemes are now a principle harm reduction measure that also provide information on safe practice and act as gateways to treatment and related services.
- Needle exchanges have reduced HIV transmission rates amongst drug users, although those working with users have been encouraged to pay increased attention to the context in which risk behaviours occur and seek to reduce environmental risk factors.

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