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Costas T. Lambrew Research Retreat 2021

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2021

### Facilitators and Barriers to Accessing Harm Reduction Services in a Rural State

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#### Recommended Citation

Thakarar, Kinna; Kohut, Michael; Burris, Deb; Loeb, Hannah; Hutchinson, Rebecca; and Fairfield, Kathleen, "Facilitators and Barriers to Accessing Harm Reduction Services in a Rural State" (2021). *Costas T. Lambrew Research Retreat 2021*. 11.

<https://knowledgeconnection.mainehealth.org/lambrew-retreat-2021/11>

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# Facilitators and Barriers to Accessing Harm Reduction Services in a Rural State

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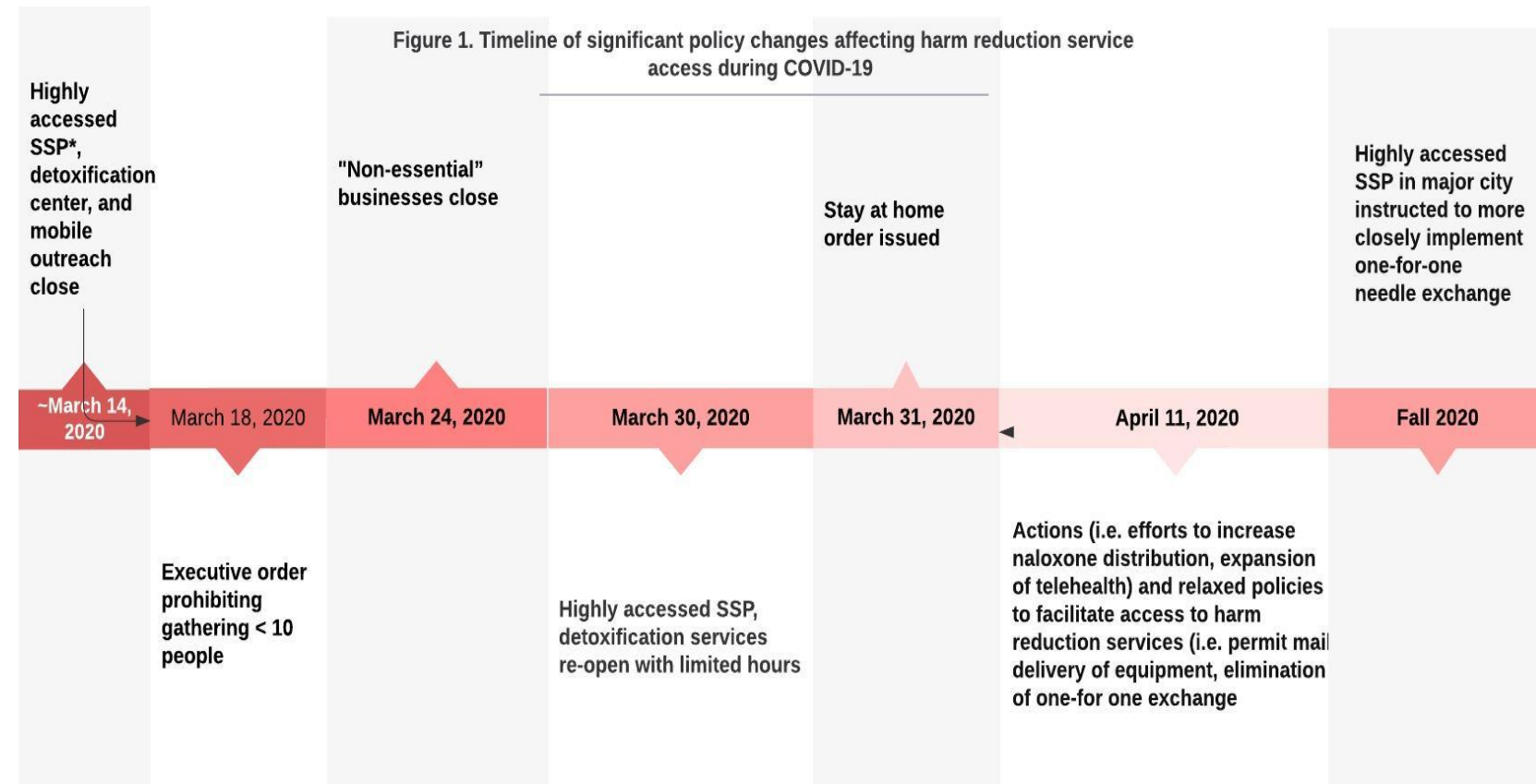
## INTRODUCTION

- The impact of social distancing policies during the COVID-19 pandemic on people who inject drugs (PWID) is not known.
- We aimed to describe the impact of the pandemic on PWID access to harm reduction services in Maine

## METHODS

- N=36 semi-structured interviews were conducted with rural & urban PWID, community partners, and providers in Maine
- Interviews focused on facilitators and barriers & service changes during COVID-19
- Four analysts read and open-coded transcripts, then two analysts used framework method, identifying facilitators and barriers to different dimensions of service access

Figure 1. Timeline of significant policy changes affecting harm reduction service access during COVID-19



# Changes during COVID-19 restricted access to harm reduction services.

Mail delivery, eliminating one-for-one needle exchange, and mobile outreach were community-driven responses that facilitated service access.

## RESULTS

Dimension of Access	What facilitated access?	What restricted access?
Accessibility	<b>Outreach</b> Outdoor services <b>Mailing equipment</b>	Screening for COVID-19 No cell coverage Inclement weather
Availability	<b>Eliminating 1-for-1 exchange</b> Collaboration/ SSPs* sharing supplies	Changing locations <b>Not adhering to relaxed policies</b> Lack of safe disposal Increased drug use
Acceptability	Face to face outreach	Masking (triggers trauma) Stigma Lack of trust Law enforcement
Adequacy	Community resilience COVID -19 screening reassuring	Limited hours Unable to enter building
Affordability	<b>Eliminating 1:1 needle exchange</b>	Unemployment (less \$ for transport) Higher drug costs
Awareness	Trust in outreach	Miscommunication around policies Stigma (obtaining naloxone outside of SSP)

\*SSP = Syringe Service Program

### Representative Quotes

#### Mail Delivery

*"I don't know exactly who they are. **They only deal through text message, but they mail you a box of stuff....every time I go, the pharmacies are trying to say they don't have needles, and blah, blah, blah, and it's just like, you all can't be out ."***  
 (Person who injects drugs)

#### Eliminate 1-for-1 exchange

*"...going from a hundred or so needles down to 10 puts the individual in a position where they have to make some choices. And if they don't have ready access to a pharmacy...or don't have the money to go purchase syringes, then they're forced in a position of making a risky choice. Do they reuse? Do they try and borrow some from somebody else? **It's just a situation that doesn't need to happen.**"*

(Community partner, SSP\*)

### Mobile outreach

***"it seems there's been this real shift that has been really effective. People have been really accessing services that way. I think partly just because there's more anonymity. You can show up. You're in, you're out"*** (Community partner, SSP\*)

### Conclusions

- Changes resulting from the COVID-19 pandemic have impacted access to harm reduction services among PWID
- We identified several facilitators and barriers around accessing services.
- Our results can inform policies in order to mitigate the negative impacts on PWID

Take a photo to download the full poster.

