

THE RELATIONSHIP BETWEEN NEEDLE AND SYRINGE PROGRAM OPERATING HOURS AND TIME OF DRUG USE: EFFECTS ON INDIVIDUAL-LEVEL NEEDLE AND SYRINGE COVERAGE.

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Background:

Most Victorian needle and syringe programs (NSPs) operate during standard business hours (Monday-Friday, 9am-5pm). However, illegal drug purchasing and injecting drug use often occur outside of these hours. Consequently, those using illegal drugs outside of NSP operating hours may be unable to acquire sterile injecting equipment and therefore have lower levels of needle and syringe coverage. This paper will explore the associations between in-hours/out-of-hours drug use and individual-level coverage.

Methods:

The Melbourne injecting drug user cohort study began in 2008; 757 PWID were recruited. Approximately annual interviews record information about the last instance of illicit drug purchase and use; including, day of week, and time of day the drugs were used. We classified drug use according to the opening hours of harm reduction services (either in-hours or out-of-hours). Syringe acquisition and injecting frequency variables defined coverage as either sufficient ($\geq 100\%$ of injecting episodes covered by a sterile needle/syringe) or insufficient ($< 100\%$).

Results:

Twenty-six percent of interviews with valid data reported out-of-hours drug use. Twenty-six percent of interviews with valid data reported insufficient coverage.

In logistic regression analysis, males had increased odds of out-of-hours drug use (AOR: 1.73), whilst those employed had reduced odds (AOR: 0.49). There was no significant association between time of drug use and coverage levels.

Discussion and conclusion:

A substantial proportion of participants experienced insufficient individual-level coverage. Many participants also reported purchasing and injecting drugs outside of NSP operating hours. Understanding the impact of NSP opening hours upon coverage is important for improving national harm reduction efforts.

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