



## EMCDDA DOCUMENTATION CENTRE INFORMATION BULLETIN

### **CORONAVIRUS, 19 February 2021**

#### **GREY LITERATURE**

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##### **Kinship carers during coronavirus**

Hall, J; Ashley, C; Johnston, J; Martin, S  
Family Rights Group  
London: 2021

Ten months into the pandemic, and the impact on children, families and communities has been dramatic. Many kinship carer households in particular were already facing significant challenges. In April 2020, during the first UK wide lockdown, the Parliamentary Taskforce on Kinship Care commissioned a survey, conducted by the Family Rights Group, into the views and experiences of kinship care households. The study revealed that the pandemic was increasing the pressure on kinship care families and made a series of recommendations to Government for immediate action. Following the reintroduction of lockdown measures across the countries of the UK in late December 2020 and early January 2021, Family Rights Group and the Parliamentary Taskforce undertook a new survey to find out how kinship care households are coping in the latest stage of the pandemic. 605 kinship carers raising 889 kinship children responded to the survey and we are very grateful for their time and feedback. More than half the kinship carers cited parental drug or alcohol misuse and four in ten kinship carers cited parental mental ill health as the main reasons why the children were unable to live with parents.

This report is an analysis of the survey data and includes a number of recommendations for immediate action for the UK Government and the Scottish and Welsh Governments to consider. It will inform the work of Family Rights Group, the Parliamentary Taskforce, and the Kinship Care Alliance. We hope that it will also influence the kinship care policies, practices and services of local authorities and other public agencies. We also aim to raise awareness of kinship care amongst the public.  
[https://www.frg.org.uk/images/Cross\\_party\\_PT\\_on\\_KC/KinshipcareDuringCoronavirus\\_Report\\_Jan\\_2021.pdf](https://www.frg.org.uk/images/Cross_party_PT_on_KC/KinshipcareDuringCoronavirus_Report_Jan_2021.pdf)

##### **Mental health and substance use during COVID-19: summary report**

Canadian Centre on Substance Use and Addiction (CCSA)  
Ottawa: 2021

The mental health and substance use impacts of the pandemic have been greater for people living with, or at risk of, mental health and substance use disorders.  
<https://www.mentalhealthcommission.ca/English/media/4430>

### **Civil society involvement in harm reduction drug policy: reflections on the past, expectations for the future**

O’Gorman, A; Schatz, E  
Harm Reduction Journal, 2021, 18, 17

#### **Background**

A range of civil society organisations (CSOs) such as drug user groups, non-governmental/third sector organisations and networks of existing organisations, seek to shape the development of drugs policy at national and international levels. However, their capacity to do so is shaped by the contexts in which they operate nationally and internationally. The aim of this paper is to explore the lived experience of civil society participation in these contexts, both from the perspective of CSOs engaged in harm reduction advocacy, and the institutions they engage with, in order to inform future policy development.

#### **Methods**

This paper is based on the presentations and discussions from a workshop on ‘Civil Society Involvement in Drug Policy’ hosted by the Correlation - European Harm Reduction Network at the International Society for the Study of Drugs Policy (ISSDP) annual conference in Paris, 2019. In the aftermath of the workshop, the authors analysed the papers and discussions and identified the key themes arising to inform CSI in developing future harm reduction policy and practice.

#### **Results**

Civil society involvement (CSI) in policy decision-making and implementation is acknowledged as an important benefit to representative democracy. Yet, the accounts of CSOs demonstrate the challenges they experience in seeking to shape the contested field of drug policy. Negotiating the complex workings of political institutions, often in adversarial and heavily bureaucratic environments, proved difficult. Nonetheless, an increase in structures which formalised and resourced CSI enabled more meaningful participation at different levels and at different stages of policy making.

#### **Conclusions**

Civil society spaces are colonised by a broad range of civil society actors lobbying from different ideological standpoints including those advocating for a ‘drug free world’ and those advocating for harm reduction. In these competitive arena, it may be difficult for harm reduction orientated CSOs to influence the policy process. However, the current COVID-19 public health crisis clearly demonstrates the benefits of partnership between CSOs and political institutions to address the harm reduction needs of people who use drugs. The lessons drawn from our workshop serve to inform all partners on this pathway.

### **Virtual reality for behavioral health workforce development in the era of COVID-19**

Cross-Technology Transfer Center (TTC) Workgroup on Virtual Learning  
Journal of Substance Abuse Treatment, 2021, 121, 108157

The coronavirus 2019 disease (COVID-19) pandemic emerged at a time of substantial investment in the United States substance use service infrastructure. A key component of this fiscal investment was funding for training and technical assistance (TA) from the Substance Abuse and Mental Health Services Administration (SAMHSA) to newly configured Technology Transfer Centers (TTCs), including the Addiction TTCs (ATTTC Network), Prevention TTCs (PTTC Network), and the Mental Health TTCs (MHTTC Network). SAMHSA charges TTCs with building the capacity of the behavioral health workforce to provide evidence-based interventions via locally and culturally responsive training and TA. This commentary describes how, in the wake of the COVID-19 pandemic, TTCs rapidly adapted to ensure that the behavioral health workforce had continuous access to remote training and technical assistance. TTCs use a conceptual framework that differentiates among three types of technical assistance: basic, targeted, and intensive. We define each of these types of TA and provide case examples to describe novel strategies that the TTCs used to shift an entire continuum of capacity building activities to remote platforms. Examples of innovations include online listening sessions, virtual process walkthroughs, and remote "live" supervision. Ongoing evaluation is needed to determine whether virtual TA delivery is as effective as face-to-face delivery or whether a mix of virtual and face-to-face delivery is optimal. The TTCs will need to carefully balance the benefits and challenges associated with rapid virtualization of TA services to design the ideal hybrid delivery model following the pandemic.

## **COVID-19 and youth substance use: we need more than good intentions**

Ingoglia, C

Journal of Behavioral Health Services & Research, 2021, 48, 1, 1-3

## **Overview of tertiary addictions services response to opioid dependence during the COVID-19 pandemic**

Hennigan, K; Corrigan, E; Killeen, N; et al

Irish Journal of Psychological Medicine, 15 February 2021 - DOI: 10.1017/ipm.2021.8

The emergence of the COVID-19 pandemic has presented the addiction services with an unprecedented set of challenges. Opioid users are particularly vulnerable because of their high level of pre-existing health problems and lifestyle factors. In order to minimise their risks to self and to others in the current Covid-19 crisis, the service has sought to urgently identify vulnerable individuals, and induct them into OST treatment promptly. Additionally, several guidelines have been created and regularly updated by the HSE for any healthcare staff working with opioid users. These include guidance documents, to facilitate prompt induction of patients onto the OST programme, the prescribing of naloxone to all patients at risk of overdose, eConsultation, medication management for those in self-isolation, and the delivery of injecting equipment. The guidance documents and resources will provide a template for a new way of working for the sector during these challenging times and into the future.

## **COVID-19 and people who use drugs; seizing opportunity in times of chaos**

Burke-Shyne, N; Southwell, M

International Journal of Drug Policy, 2021, 90, 103097

## **Convenience and comfort: reasons reported for using drugs alone among clients of harm reduction sites in British Columbia, Canada**

Papamihali K; Yoon, M; Graham, B; et al

Harm Reduction Journal 2020 17 :1 Article Number 90

### **Background:**

North American communities are severely impacted by the overdose crisis, particularly in British Columbia (BC), which has the highest toxic drug overdose death rate in Canada. Most fatal overdoses in BC occurred among individuals using alone and in private residences. This study aimed to assess prevalence and reasons for using drugs alone among people accessing harm reduction services in BC.

### **Methods:**

We recruited harm reduction supply distribution site clients from 22 communities across BC.

Descriptive statistics and multivariable logistic regression were used to describe factors associated with using alone. Thematic analysis of free-text responses providing reasons for using alone were grouped with survey data and additional themes identified.

### **Results:**

Overall, 75.8% (n = 314) of the study sample (N = 414) reported using drugs alone within the last week. Those that reported using alone did not differ from those that did not by gender, age, urbanicity, or preferred drug use method. Among those that used alone, 73.2% (n = 230) used opioids, 76.8% (n = 241) used crystal meth, 41.4% (n = 130) used crack/cocaine, and 44.6% (n = 140) used alcohol in the past week. Polysubstance use involving stimulants, opioids, and/or benzodiazepines was reported by 68.5% (n = 215) of those that used alone. Additionally, 22.9% (n = 72) of those that used alone had experienced an opioid and/or stimulant overdose in the past 6 months. In a multivariable logistic regression model, having no regular housing and past week crack/cocaine use were associated with using alone (adjusted odds ratio (AOR): 2.27; 95% CI 1.20–4.27 and AOR: 2.10; 95% CI 1.15–3.82, respectively). The most common reason reported for using alone was convenience and comfort of using alone (44.3%). Additional reasons included: stigma/hiding drug use (14.0%); having no one around (11.7%); safety (9.6%); and not wanting to share drugs with others (8.6%).

### **Conclusions:**

Using drugs alone, particularly for convenience and comfort, is ubiquitous among people accessing harm reduction services. Overdose prevention measures that go beyond individual behaviour changes, including providing a safer supply of drugs and eliminating stigma, are paramount to mitigate harms. These interventions are especially necessary as emergence of coronavirus disease may further exacerbate unpredictability of illicit drug content and overdose risk.

## **Addressing racial & socioeconomic disparities in access to medications for opioid use disorder amid COVID-19**

**Preliminary indications of the burden of COVID-19 among people who inject drugs in England and Northern Ireland and the impact on access to health and harm reduction services**

Croxford, S; Emanuel, E; Ibitoye, A; et al

Public Health

192, p.8-11, 2021

**Objective**

The aim of the study was to describe the impact of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pandemic on people who inject drugs (PWID) in England, Wales and Northern Ireland.

**Study design**

This is a cross-sectional Unlinked Anonymous Monitoring (UAM) Survey of PWID.

**Methods**

People who had ever injected psychoactive drugs were recruited to the UAM Survey by specialist drug/alcohol services in England, Wales and Northern Ireland. From June 2020, in addition to providing a dried blood spot sample and completing the UAM behavioural questionnaire, participants were asked to complete an enhanced coronavirus disease 2019 (COVID-19) questionnaire.

Preliminary data are presented to the end of October and were compared with data from the 2019 UAM Survey, where possible.

**Results**

Between June and October, 288 PWID were recruited from England and Northern Ireland. One in nine (11%; 29/260) PWID reported testing positive for SARS-CoV-2 or experiencing COVID-19 symptoms. Fifteen percent (26/169) reported injecting more frequently in 2020 than in 2019; cocaine injection in the preceding four weeks increased from 17% (242/1456) to 25% (33/130). One in five PWID (19%; 35/188) reported difficulties in accessing HIV and hepatitis testing, and one in four (26%; 47/179) reported difficulties in accessing equipment for safer injecting.

**Conclusions**

Our preliminary findings suggest that PWID have experienced negative impacts on health, behaviours and access to essential harm reduction, testing and treatment services owing to the COVID-19 pandemic. Continued monitoring through surveillance and research is needed to understand the subsequent impact of COVID-19 on blood-borne virus transmission in this population and on health inequalities.

**COVID-19: How lockdown is taking its toll on millions caught in battle with addiction**

The Action on Addiction charity says it saw an 86% rise in the number of people seeking help this January compared with last year | Sky News, UK

<https://news.sky.com/story/covid-19-how-lockdown-is-taking-its-toll-on-millions-caught-in-battle-with-addiction-12216562>

**Drug overdose crisis worsens in shadow of COVID-19 pandemic**

<https://thehill.com/policy/healthcare/538706-drug-overdose-crisis-worsens-in-shadow-of-covid-19-pandemic>

**Overdose deaths 'worst on record' during COVID-19 pandemic: 'She wasn't ready to go. She wanted to live.'**

<https://www.wtvr.com/rebound/you-are-not-alone/overdose-deaths-soar-during-pandemic>

**A grim measure of Covid's toll: life expectancy drops sharply in US**

["Life conditions" (including drug use and overdose) are to blame]

<https://www.nytimes.com/2021/02/18/us/covid-life-expectancy.html>

**DEA agents break up major meth lab in The Bronx; NYC's top drug enforcement agent says pandemic exacerbated opioid crisis in city**

<https://newyork.cbslocal.com/2021/02/18/nyc-opioid-crisis-meth-fentanyl-drug-bust/>