

# **Managing Drug Related Litter in the Community**

# **Executive Summary**

The problem of discarded sharps within public areas in the Scottish Borders was extremely sensitive and required a multi-agency response to provide potential solutions that were both proportionate and effective.

The thoughts of Needle Exchange Service (NEX) users were utilised to provide a simple but very effective solution which proved that education/prevention was not only the best solution, but was also the most sustainable. Service workers found a real desire amongst their clients to provide ideas on how best to both engage with this difficult group, but also in advising of what key messages would be most effective.

The project included providing key advice on NEX packs relating to safe disposal, posters to deter drug misuse and discarded sharps within public toilets, and advice to toilet users should they find a discarded sharp. In addition, the project provided training to staff responsible for the collection and recording of drug related litter, increased police patrols and increased cleaning in identified problem areas.

The project proved extremely successful with a 57% reduction in discarded sharps across the Scottish Borders. This result was seen to be a testament to how effective the intervention had been through the collaboration of key partners and the involvement of the service users. This was community engagement in its truest form, and involved working with the hardest to reach group within our communities.

The hard work and success of the project was rewarded when it won the Better Outcomes for Communities Award at the 2012 Safer Communities Awards.

# **Project Background and Aims**

In 2010/11, 273 clients utilised the Needle Exchange Service (NEX) with an average month seeing an exchange of 4500-5000 needles throughout the Scottish Borders. However, a number of calls were received in April 2011 relating to drug related litter being found in public places in close proximity to NEX services. This was in addition to a stigma already attached to the NEX premises and the real potential of negative media and vigilante type action. To protect the general public from the health and safety risks associated with discarded injecting equipment (including syringes, foil and swabs), swift action was required.

A multi-agency steering group was convened to identify problem premises and areas and consider solutions to reduce the incidences of discarded injecting equipment in the community. The steering group included: Lothian and Borders Police (Safer Communities Team), Scottish Borders Council Managers (Community Wardens and Cleansing), Needle Exchange Services (Pharmacy & Drug Service), NHS Public Health and Alcohol and Drug Partnership. The steering group created an action plan with the following aims:

- NEX service users are aware of their responsibilities and dispose of their equipment safely;
- Staff are competent and confident in the safe collection and disposal of discarded injecting equipment in compliance with local protocols;
- Members of the public are better protected from infection and prevent the possible transmission of blood borne viruses (BBV); and

• Allow service users to play an integral role in the development and promotion of the project.

#### **Activities**

The steering group gathered evidence of good practice to inform an effective response which ensured compliance with UK Guidance (Department for Environment Food and Rural Affairs 2005)<sup>1</sup> and a multiple action plan was agreed.

Initially, solutions were drawn from best practice throughout the country in the form of "blue lighting". These create a light which makes veins in the arms hard to find and as such difficult to inject. However, this was quickly found to be both problematic and non-effective (see later section on lessons learnt and sustainability). Thereafter, decisions to utilise the thoughts of service users proved instrumental in providing a simple but very effective solution. They identified that education/prevention was not only the best solution, but was also the most sustainable. Service workers found a real desire amongst their clients to provide ideas on how best to both engage with this difficult group, but also in advising of what key messages would be most effective.

Advice was provided on NEX pack by attaching a simple sticker to the outside of the packs with key messages regarding the safe disposal of injecting equipment. The stickers themselves were designed by users. In order to deter drug misuse and discarded sharps within public toilets, and also to provide toilet users with help and advice should they find a discarded sharp, posters, designed by service users, were displayed in prominent frames within identified problematic premises.

In addition, staff responsible for the collection and recording of drug related litter were trained on the safe collection of equipment and reporting and extra patrols were carried out by Community Wardens and local Police Officers in target areas. Furthermore, there was regular and targeted cleansing of public toilets.

The project was advertised and publicised via a poster campaign in specified venues, via word of mouth through the drug injecting community by service users of The Big River Project (Turning Point Scotland) and through the dissemination of information at the Scotlish Borders Needle Exchange Network, promoting the return of needles.

#### **Impact**

The incidents of discarded injecting equipment in public areas reduced by 57% overall within the Scottish Borders during the 11 months the project ran. However, the introduction of posters within public toilets at key areas (Galashiels, Hawick and Eyemouth), coupled with the stickers on NEX packs and advice from service providers in the targeted areas, resulted in a 100% reduction at these sites, and a 75% reduction in the recoveries overall at these particular towns. In addition, during the life of the project, no new instances of BBV's were reported.

This reduction is mirrored in a decrease of calls to the police relating to drug activity or ASB at these particular sites, thereby strengthening the case that it has deterred such behaviour. Of equal importance is the overall reduction of 57% throughout the Scottish Borders which evidences the fact that the problem has not merely been displaced, and that users are becoming more responsible.

Training ensured that all staff responsible for the uplift of drug related litter are competent and confident in the safe collection and disposal of discarded injecting equipment in

<sup>&</sup>lt;sup>1</sup> http://archive.defra.gov.uk/environment/quality/local/litter/documents/drugrelatedlitter.pdf

compliance with local protocols and had a greater understanding of hepatitis B, C and HIV and were aware of how to prevent the spread of blood borne viruses (BBV's).

The financial impact of the programme is also evident. The treatment costs for Hepatitis C, the most prevalent of BBV's amongst injecting drug users, is approximately £24,000 per patient per annum and the cost of administering prophylactic medication for needle stick injuries is £600 per patient.

Additional costs that cannot be quantified but can be extremely substantial include:

- Costs of litigation by the general public against the Council for being negligent in maintaining safe public conveniences.
- Undetermined costs of stress/anxiety of those having received needle stick injuries and the detrimental effect it has on their lifestyle and their immediate families.
- Undetermined costs associated with fear from both locals and visitors within the community.

Therefore, the £1,250 spend on the project (excluding staff time) shows an extensive preventative spend result.

# **Monitoring and Evaluation**

In order to evaluate the project, the number of calls to Lothian and Borders police (G Division: Scottish Borders) relating to drug related issues or antisocial behavior regarding discarded sharps were monitored. In addition, the Safer Communities Team (an integrated team consisting of police, council community safety staff and ASB Team) undertook monthly monitoring of incidents of discarded injecting equipment in order to access the level of incidents being reported. This allowed the team to identify hotspot areas and allow targeted interventions to take place. Overall evaluation took into consideration six months pre and post interventions.

# **Lessons Learnt and Sustainability**

Blue strip lights were initially installed within key target sites, however the design of the buildings were such that these were either non effective due to other lighting, or plunged premises into darkness, thereby creating fear. The lights were quickly removed and a different strategy utilising the posters, stickers and advice as a prevention method was adopted.

Seeking the help and support of service users was invaluable. Whilst agencies could draw on practice across the country, simple and effective solutions were provided by local users who knew what would work well in their locality.

Striking the balance of protecting individuals from a public health hazard and not creating fear amongst the community was a very big issue for the action group. In order to achieve this, consultation was undertaken with local elected members and community councils. Reservations were overcome in a diplomatic and sensitive way in order for the project to achieve its objectives.

The monitoring of discarded sharps will continue to be monitored by the Safer Communities Team and where there are areas identified as problematic, the group will reconvene to review the circumstances and use the poster and label resources as required.

#### Resources

Funding:

Total cost: £1250 (excluding staff time) Police prevention funding, local community safety panel, Safer Community funding, Alcohol and Drug Partnership funding and service user contributions.

Partners: Scottish Borders Council, NHS Borders, Alcohol and Drug

Partnership, Lothian and Borders Police, Big River (Turning Point

Scotland)

#### **Outcomes**

National 6: We live longer, healthier lives.

9: We live our lives safe from crime, disorder and danger.

11: We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect

others.

Local Communities and individuals are safe from alcohol and drug

related offending and anti-social behaviour

# **Practice Note Information**

Practice Note Title: Managing Drug Related Litter in the Community

Practice Note No: 40

SCSN Topic Areas: Personal Safety, Public Space Safety, Environment

Safety, Safety of Vulnerable Groups, Partnership Working

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