SECURING SAFE SUPPLY DURING COVID-19 AND BEYOND: SCOPING REVIEW AND KNOWLEDGE MOBILIZATION

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Background: Safe supply refers to a legal and regulated supply of drugs with mind/body altering properties that traditionally have been accessible only through illegal drug markets. In response to COVID-19 mitigation measures, safe supply interventions are being scaled-up in Canada. We undertook a scoping review to identify key concepts, strategies, and gaps including barriers/facilitators in the evidence with respect to implementing safe supply during public health emergencies.

Methods: We searched five databases for peer-reviewed and grey literature on the provision of regulated, pharmaceutical drugs during public health emergencies from 01/01/2002 to 06/30/2020, and abstracted themes about barriers and facilitators to accessing and/or prescribing safe supply. Themes were coded and analyzed iteratively. Our research team was led by PWUD, academics, medical and legal scholars, and students. Additionally, we established a pan Canadian PWUD expert committee to advise the research.

Results: We screened 9,839 references and included 168 studies, of which 119 articles reported on barriers/facilitators. Few studies (n=24) focused on emergency or pandemic contexts. We identified 35 themes of barriers/facilitators to accessing safe supply. Among the most frequently reported barriers were *restrictive laws or policies* (n= 33; 28%). The most frequently cited facilitator was *temporary regulatory exemptions* (n= 16; 13%). Consultation with prescribers and PWUD identified barriers/facilitators lacking in the reviewed literature, for instance, social and economic inequities among PWUD.

Conclusion: To address the overdose crisis stemming from the poisonous drug supply, efforts are needed to scale-up and concurrently evaluate safe supply initiatives that address the facilitators/barriers identified. With the quality/quantity of the substance assured, PWUD are in a far better position to confront the risks associated with drug use. With few peer-reviewed studies on safe supply models, particularly during emergencies, the expertise of PWUD and prescribers have essential insights that are not reflected in the literature.

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