

# Homeless not Hopeless

## Supporting I.V. drug users who are homeless in Belfast

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# Traditional Trends in Drug Use in The Homeless Sector

- Alcohol
- Cannabis
- Prescribed Medication (benzodiazepines, Codeine preparations)
- Heroin

Historically alcohol has been the most problematic substance misused among those who are homeless.

# Drug Use - Issues

People who are homeless tend towards either depressive or stimulant drug use, or combinations of both. Drug use has lead to a number of issues.

- Poor mental health
- Repeat homelessness
- Difficulty in accessing traditional treatment options
- Social and family isolation.
- Debt
- Poor physical health.
- Use of emergency services.

*These continue to be pertinent issues currently but are now exacerbated by new drug use.*

# Changes In IV drug Use

- The Rise of NPS use – injectable substances.
- Increase in I.V. drug use – physical damage.
- Combinations of drug use – cocktail of NPS and other drugs.

**NPS use hasn't replaced traditional drug use but added a dangerous dimension to the menu of drugs available.**

# *The Drug Accommodation Support Project*

- This is a bespoke project which clearly highlights the benefits of multi-agency co-operation and working.
- The projects aim is to support I.V. drug users who are homeless to access temporary housing, stabilise and reduce use and find long term permanent accommodation.
- It was accepted that this group faced particular problems when accessing accommodation – stigma, legal issues, fear among providers, significant risks. (Homeless Strategy 2012)

# Development

- A multiagency project group worked for a number of years to develop the project and the protocol which oversees it.
- The agencies involved were PHA, CHNI, Extern Salvation Army, Belfast Trust, NIHE, PSNI, PPS.
- PHA fund a specific worker to assess potential service users, liaise with all agencies, and support hostel staff.

# Aims

- The aim of the project is to facilitate access to temporary accommodation for chaotic drug users who are homeless. Two hostels in Belfast provide beds for this service user group. They are supported by the DASP worker and work within the protocol which addresses the legal aspects of the project. Extensive training for staff is also on going.

# Service users

IV drug users who are homeless often have a number of specific issues which prevent them from accessing and remaining in hostel accommodation

- Stigma
- Continued drug use
- Associated behaviours to sustain drug use.
- Staff fear around BBV, overdose, legal issues.
- Attitude of other people who are homeless
- Attitude of communities.

*There are a number of gender specific issues which also make it very difficult for females to sustain placements in the homeless sector.*



# The Service User Journey

## **Common Issues faced by IV drug users who are homeless**

- Street homeless or sofa surfing.
- Long history of transient lifestyle.
- Poor engagement with services
- Poor family and social supports
- Chaotic drug use in poor surroundings
- Fear of disclosing IV drug use.

The aim is to assess the individual around drug use, housing status, physical and mental health issues and risk – harm reduction. Secure a bed and work with the individual and staff to ensure that risks are managed and a clear support plan is in place

Contact statutory addiction agencies re: treatment and support.

Maximise housing options.

Look at life skills and supports to sustain long term accommodation.

Work with all associated agencies to provide a holistic approach to the

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- Since 2009 65 IV drug users have been supported in DASP beds.
- 37 successfully resettled into their own permanent accommodation.
- 55 accessed or remained on substitution treatment.
- The reduction in harm is hard to measure but significant work has reduced both poor physical and mental ill health.
- Joined up working and training has meant the sector are much more aware of the IV users needs and how to manage risk.

# Future Work/ Challenges

- To increase the number of beds available for this marginalised service user group.
- To continue to work to ensure access to services.
- To roll out naloxone, needle exchange etc and raise awareness.
- To promote the positives of such initiatives in improving lives.
- To address the stigma and fears around drug use and increase access to treatment and support.
- Address the impact of NPS use, heroin use and risks – public health issue.