Supporting people experiencing homelessness in the UK

Chris Rintoul, Head of Harm Reduction at Cranstoun 21st May 2024





Inverse Care Law – Hart (1971)

- Those with the most significant healthcare needs are the least likely to have them met
- In the context of drug treatment this law explains why those with the most problematic relationships with drugs aren't in treatment
- We must do the things we used to do well before recovery mania took hold and treatment budgets were slashed





So where are these folks?

- Prisons
- Hostels/HMOs
- Streets

"I don't want your poxy 50mls of methadone!"



The Common People and their common issues



POVERTY

TRAUMA



DRDs and the 'aging cohort'

- Doesn't account for the different rates of DRD in the UK compared to other European countries with similar levels of drug use — 'inequality on stilts'?
- Chronological age bears no resemblance to the age of the body which has accumulated multiple health problems by 40
- But in NI it's the 25–34-year-olds age group who are dying 'the ceasefire babies' why?



The blame game



Failure to engage?
Or a failure to be engaging?



Failure to benefit?
Or a failure to provide beneficial options?



Into the void......

- DEMO 'Dynamic-Evolving Model of Outreach' in Sandwell:
 - Boots on the ground
 - Mapping the area
 - Finding the people
- Nurse-led has advantages e.g. same day non-medical prescribing, and assessment of a range of conditions
- Housing issues, OST and severe (sometimes life-threatening)
 health problems (e.g. sepsis)
- No expectation to engage with the wider service



The quantum leap

'From the bushes to the van.'







Tolerated use in Supported Accommodation

- Misuse of Drugs Act (1971) opium & cannabis
- Wintercomfort Case 1999-2001 supply
- Criminal Law Act NI (1967) in theory
- Deaths in Belfast hostel plummeted, successfully reversed ODs jumped – despite 18+ months waiting list for OST at one point!
- Wearable tech



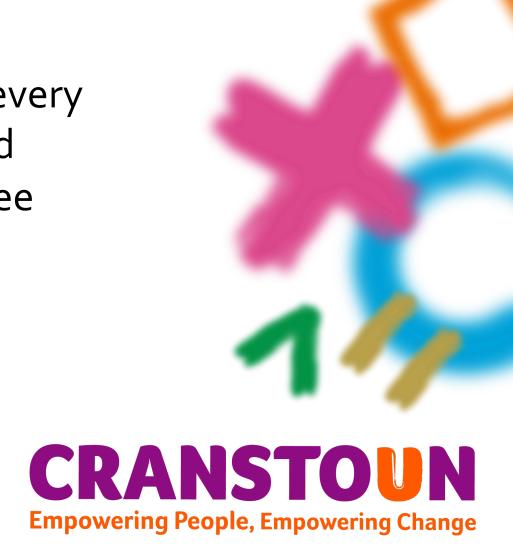
Emerging concerns

- Nitazenes
- Xylazine wounds & overdoses



Nitazenes threat

We're not taking it seriously enough until every worker in every treatment service have and keep 2 thoughts in mind every time they see someone......



Thought 1

 How can I be sure this person will come back to see me?



Thought 2

 How can I ensure that they remain alive to come back to see me?



Stayin' Alive



