

ABERDEEN CITY

ADP

alcohol & drugs partnership

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Aberdeen City Alcohol, Drug & Blood-Borne Virus Forum

Report to the ADP Meeting of 19th November 2016

Introduction

The Aberdeen City Alcohol, Drug & BBV Forum (ADBBVF) aims to co-ordinate the views of service users, service providers and communities within Aberdeen with regards to all aspects of the substance misuse agenda. The forum is chaired by the Chief Executive of Alcohol & Drugs Action and a multi-agency planning group meet outwith each event to plan the forum events. We are grateful to assistance from Police Scotland who provided the anonymous case study which was the focus of the event.

Forum event – 31st August 2016 Life Matters: Your role in preventing drug related deaths

Taking place on International Overdose Awareness day, the forum event facilitated discussions on how we can work together to prevent drug deaths in Aberdeen.

The event was attended by around 60 attendees from a range of interested members of the community including representatives from; people with lived experience, family members affected, Police Scotland, Scottish Prison Service, NHS, RGU, Aberdeen University, SHMU, the Foyer, Barnados, Alcohol & Drugs Action, Penumbra, ACC Social Work, Red Cross, Scottish Fire and Rescue Service and ADP colleagues.

The format was conversation café style and conversations were focussed on discussing an anonymised case study, known as Rachel, based on an actual drug death in Aberdeen.

Feedback from the event participants was very positive, with 93% rating the event as 'good' or 'very good'. The case study was highlighted as a powerful way of focussing discussions.

The case study was explored, going back to the person's childhood and exploring all events which led up to her death. Rachel's life story was widely seen as representative of many local people experiencing problems with substances.

Forum conversation – Identified Themes: What can we do to prevent deaths?

Isolation, exclusion and stigma which Rachel had experienced throughout her life had a major bearing on her identity, sense of self-worth and ultimately was seen as a strong contributing factor in her death.

Rachel's poor mental wellbeing and her general vulnerability were seen as a key factor in her death. A consistent theme which arose was that Rachel's situation at her death was a pattern of difficulties and challenges which were present throughout the course of her life. There is a need to ensure children at risk are identified and protected so they are prevented from developing problems with substances in the future.

There was feedback that services need to do more to address root causes/understand what has led people like Rachel to develop harmful behaviours and relationships as an adult, rather than just address presenting issues.

It seemed that Rachel did not have a sense of aspiration/hope for a more positive future. It was noted that services being recovery focussed may help and peer/mentoring support would have benefited Rachel.

Wider themes (not exclusive to 'Rachel' case study):

- The importance of using opportunities whilst in custody/prison to begin to address core issues and reduce risk of overdose after release.
- Hospitalisation – poor physical health of substance users means that hospital episodes could be opportunities for change/addressing risk
- Pain management issues – there were links noted between mismanagement of opioids as an analgesic and overdose. Also, it was noted that there is a need to provide appropriate pain management for people who are in receipt of substitute prescribing.

Conclusions from the event

There was a strong feeling that people present at the event could take action from the event which could lead to preventing deaths occurring through all partners reviewing their activities in relation to preventing deaths. This will be taken forward

by individual organisations and also via the ADP work-stream for this topic. Specific ideas for developing were:

- ✓ Can we create an easy to use risk chart for generic workers to use to identify who may be at risk from overdose? This would enable vulnerability to be identified and addressed quickly.
- ✓ Information sharing / Consent – organisations represented were to review their policies and procedures to ensure they enable vulnerable people to access timely support.
- ✓ Counteracting stigma is a core action required to reduce isolation and to ensure vulnerable people have support networks in their communities. We can do more to challenge stigma through sharing the real recovery stories across our communities.
- ✓ Pain management for people with a history of substance use problems needs to be reviewed.
- ✓ Recognising underlying mental and physical health needs driving substance use is important to ensure people who have experienced trauma are appropriately supported and protected. We need to develop more trauma focussed supports for people with substance use issues.
- ✓ Use of positive peer support / recovery activities and recovery focussed services were seen as important in protecting people from overdose. We can do more to promote the availability of these supports.
- ✓ We need to make better use of Primary Care, Pharmacy, ARI, Ambulance service, Prison, the custody setting, Police contacts and the Community Safety hub as opportunities to identify and engage with people at risk from overdose.
- ✓ There is a need to introduce assertive follow up post closure from treatment services, to help people engage with appropriate support to manage lapse situations.

Details of Next Event

Feedback from the event from participants was that future events should focus on: Mental Health / Dual Diagnosis (12), Stigma (8), Childhood/Early Intervention/Resilience (5) and Alcohol (5). The next forum event will take place in a local Aberdeen community, ensuring those who can't travel to the city centre have the opportunity to be involved. Venue and topic will be agreed in early 2017.

Luan Grugeon, Forum Chair
3rd November 2016