

# Older People with Drug Problems in Scotland: A Mixed Methods Study Exploring Health and Social Support Needs

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# Study aim

To identify and explore the health care and social support needs of OPDP (>35 years) in a cross sectional sample across Scotland.

To inform the work of a government working group on OPDP.

# Research Questions

1. What are the drug use characteristics of older people with drug problems (OPDP)?
2. What are the demographic characteristics of OPDP?
3. Which services OPDP have used?
4. What health conditions do OPDP have?
5. What medicines (prescribed/ over the counter/other supply) do OPDP take?
6. Are their health and social care needs being met by services and if not, how should services be developed to meet their needs?
7. Are there any gender specific issues that affect service engagement?
8. Have recent changes in welfare affected them, and if so in what way?

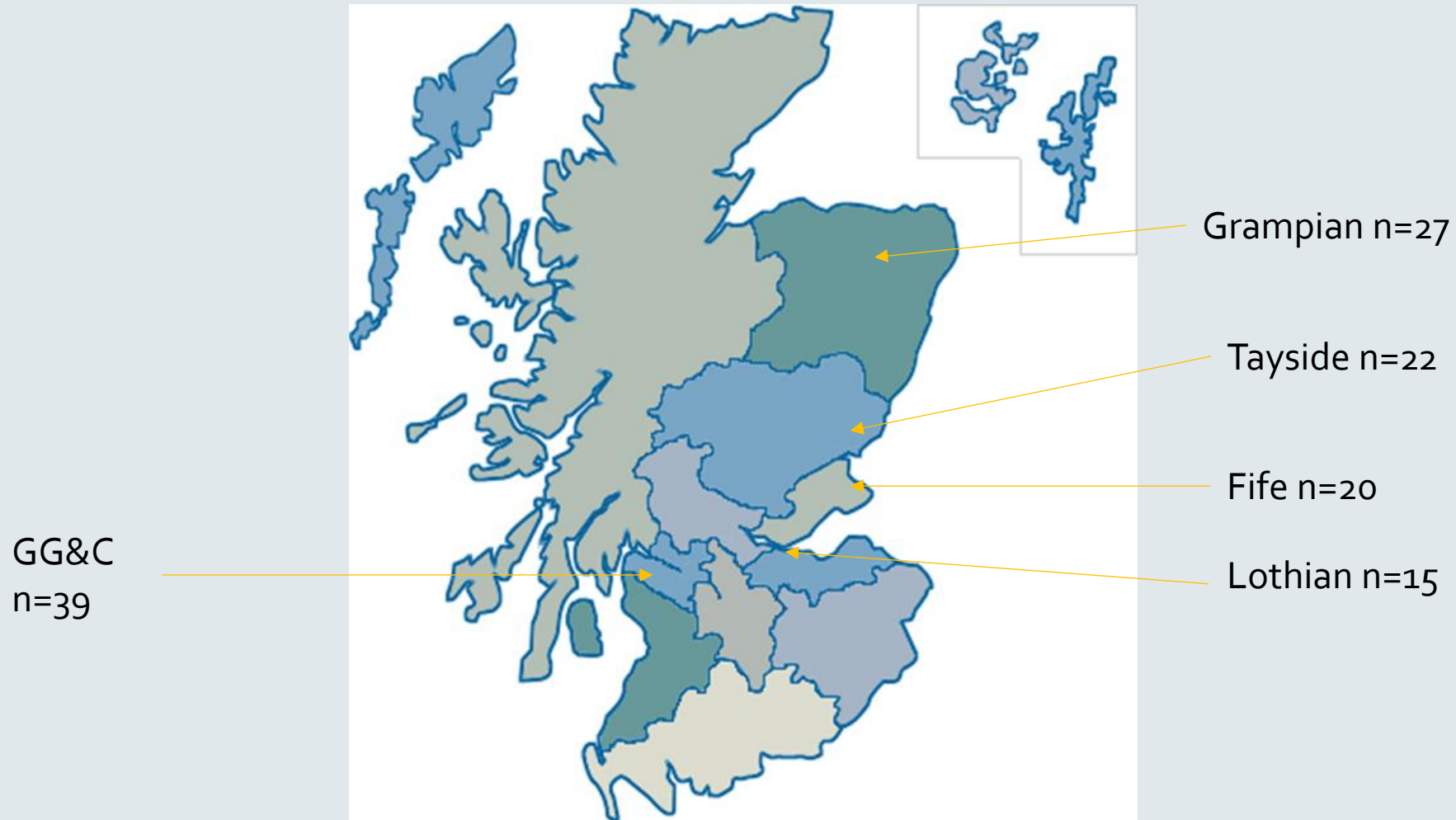
# Methods

- Mixed method approach
- Face to face interviews with a structured (quantitative) and qualitative component
- £10 voucher given to participants
- Interviews conducted by four **peer researchers**
- Data collected in non NHS services and agencies in:  
    Greater Glasgow/ Lothian/Fife/Tayside/Grampian
- Data collection from 25<sup>th</sup> April-27<sup>th</sup> May 2016
- A purposive sample selected for in depth qualitative analysis

# Inclusion Criteria

- Over 35 years old and no upper age limit
- Male or female
- Primarily current heroin injectors or those who have stopped daily heroin use in the last 12 months
- Stratified sample by age, gender and area.

# Participation Across Areas



	Male (n=93)	Female (n=30)
age range	35-55 years	35-57 years
Median	41 years	41 years
Areas		
Glasgow	33	6
Edinburgh	8	7
Fife	14	6
Tayside/Dundee	16	6
Grampian	22	5

# Profile of OPDP (n=123)

- 85% were single
- 98.1% UK national
- 78.9% lived alone (5% alone with children, 5.7% with partner, 2.4% with partner and children)
- 66.7% unemployed, 30.9% disabled/unfit for work
  - Only 3 individuals in employment
- 95.1% welfare benefits
- 95.9% had convictions for any offences
- 83.7% had ever been in prison
- 91.1% had ever been homeless



# Injecting drug use and overdose

75.6% considered their drug use problematic

45.5% (n=56) were still injecting

>3 times per day 12.5%

2-3 times per day 30.4%

Once daily 7%

1-3 times weekly 9%

Occasionally 39.3%

71.5% (n=88) had ever overdosed

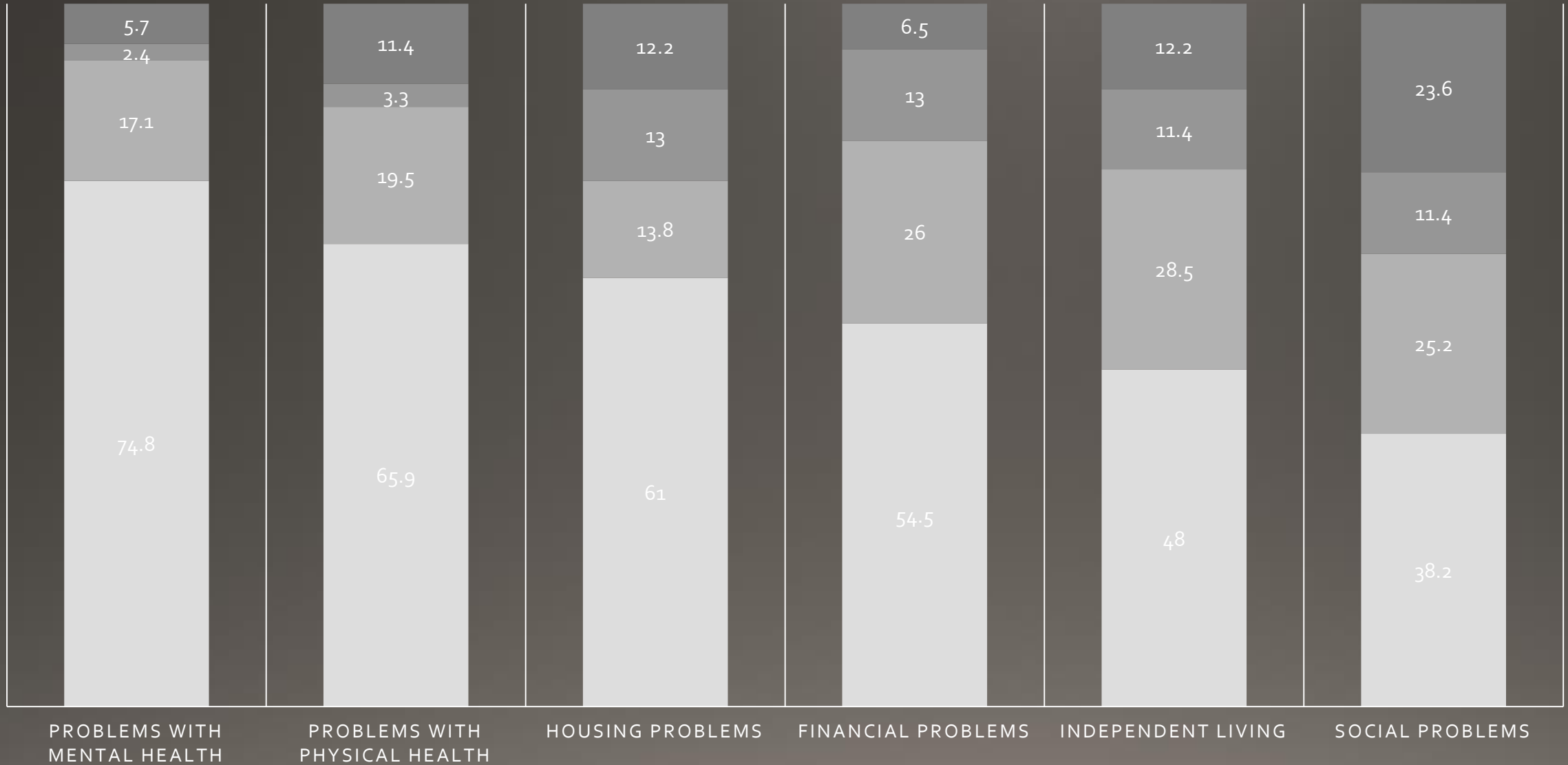
Range 1->100, Mode 2 overdoses, Median 3 overdoses

Self Reported Health Conditions	number	%
Depression	117	95.1
Anxiety	109	88.6
Chronic pain	65	52.8
Other mental health	64	52.0
Heartburn/reflux	62	50.4
Constipation	47	38.2
Asthma	34	27.6
Arthritis	30	24.4
High blood pressure	26	21.1
Bronchitis	20	16.3
Diarrhoea	20	16.3
COPD	18	14.6
Heart disease	15	12.2
Other respiratory disease	10	8.1
Other digestive problem	5	4.1
Obesity	1	0.8

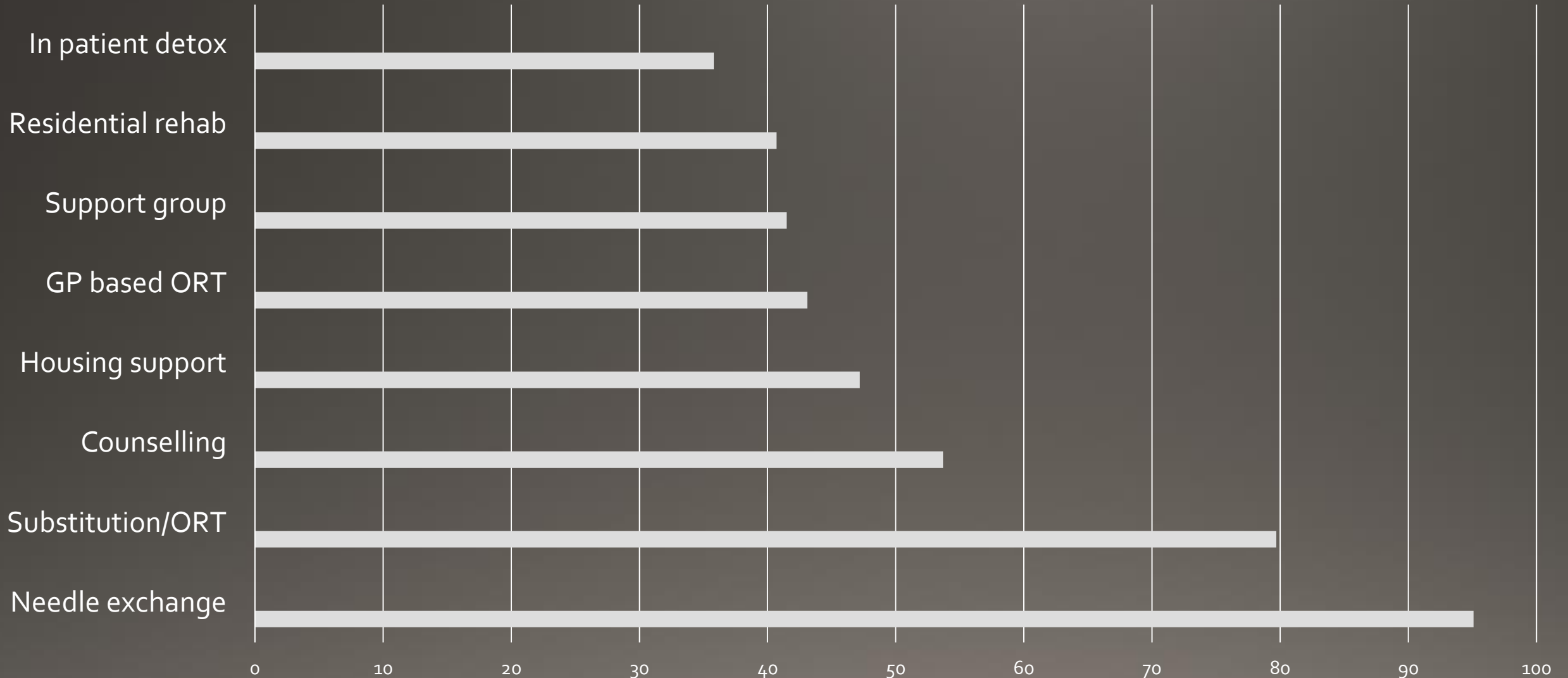
79.7% had ever spend time in hospital as an inpatient

# HOW IMPORTANT ARE THE FOLLOWING FOR YOU?

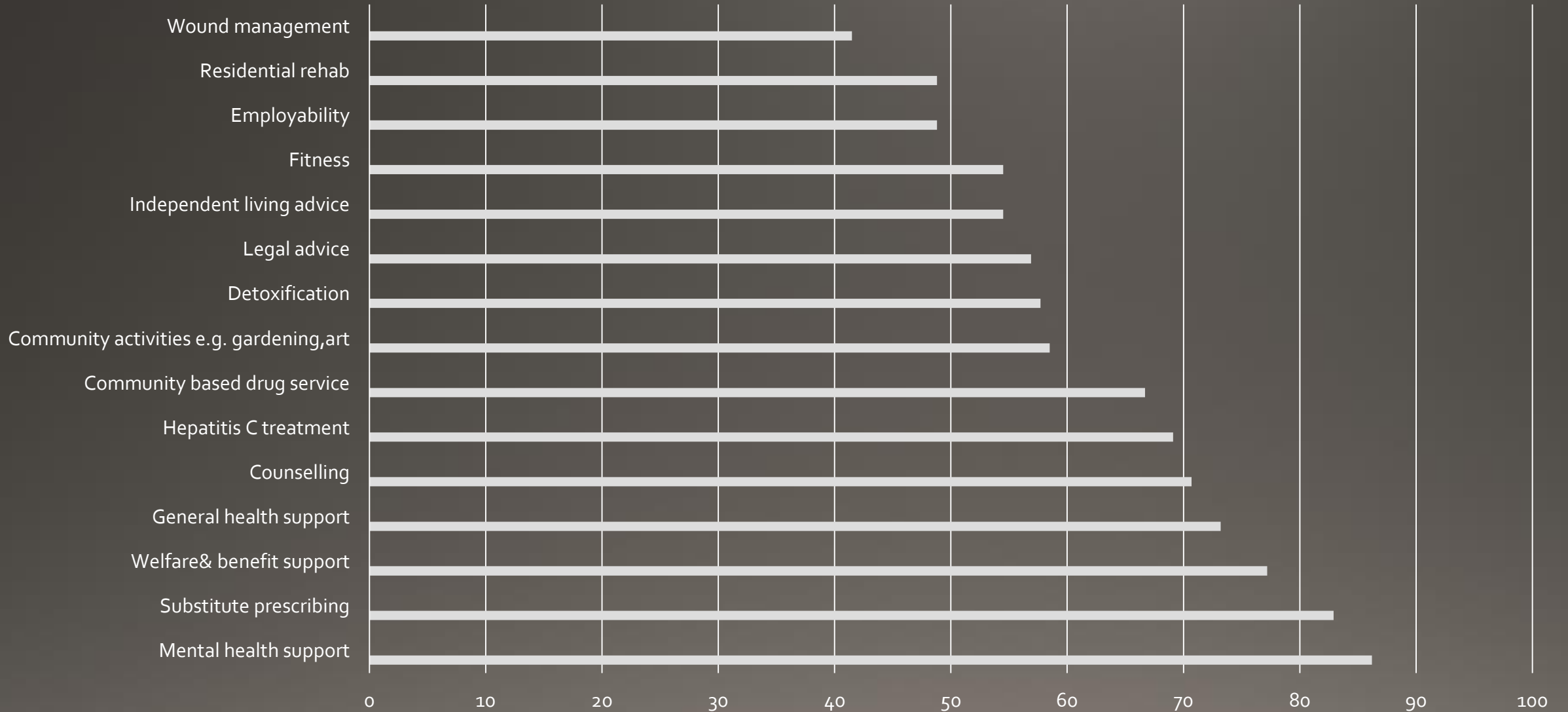
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# Past Service Use (%)



# Which treatment and support services might you use in the future? (% of 123)



# Qualitative data: emerging themes

- OPDP could feel '*forgotten about*' in treatment
- *stigma,*
- *isolation and loneliness,*
- *the need to talk and*
- *being older and wiser* were recurring themes.

# Forgotten about in treatment

*"Well I think, maybe people kind of look at it like once you're past a certain age, it's kind o like, well, it's not worth really doing anything now, cos you're never gonnae change"*

female, 57 years

# Stigma

*“I ask to get referred to places but I feel because I’m a drug addict that I don’t get taken seriously. I know this has been said a few time but... I feel like a second class citizen”*

male, 41 years



# Isolation and Loneliness

*"If I didn't have support today, I would be at the chemist, I'd go home and that would be me in all day"*

female, 39 years

*"Well somewhere you can go, sit, talk to other people, other users, see how everyone's getting on"*

male, 48 years

# Areas to focus on?

- Mental health including support services
- Physical health
- Housing
- Treatment -unintended stigmatisation?
- Overdose prevention – risk increased by isolation
- Using OPDP experience - positively

# Conclusion

This is a vulnerable, ageing cohort, at high risk of premature mortality if multi-morbidity is not addressed.

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