

AGEING AND DRUG USE

Harm reduction perspectives





BACKGROUND

AGEING AND DRUG USE

HEALTH ISSUES

SOCIAL ISSUES

SERVICE PROVISION ISSUES

HARM REDUCTION PERSPECTIVES

USER'S VOICES

SOME IDEAS FOR REFLECTION

KEY MESSAGES

READINGS



BACKGROUND

- Context: problem drug use
- Limited data: treatment services, mortality registries
- No standard definition for “older drug user” [+35y, **+40y**, +50y]
- Increase in the proportion of older clients entering treatment services [**1 in 3** are over 40y]
- Ageing factors – demographic changes + harm reduction + HIV treatment

HEALTH ISSUES

- HIV and HCV burden
- Overdoses [26.5% are aged over 40]
- [Trends in mortality] Opioid overdoses, suicides, accidents and violent deaths declined with age; deaths from cardiovascular disease, liver disease and cancer increase
- Vein damage, dental deterioration, respiratory complications
- High rates of mental health problems – depression, anxiety, cognitive impairment

SOCIAL ISSUES

- Poverty, short employment careers, instable housing
- Lack of family and social supports (reduced networks)
- Legal problems
- High levels of stigma and discrimination

SERVICE PROVISION ISSUES

- Lack of drug treatment and care programmes for older users
- Lack of integrated responses addressing multiple health and social conditions
- Difficulty in accessing social benefits (unemployment or disability)
- Abstinence as a requirement to access social support or welfare benefits
- Poor access and adherence to treatment

USER'S VOICES

- 6 people who use/have used drugs (4M, 2W)
- 3 peer workers and 3 HR clients
- Ages ranged from 43 to 57 years
- Long drug careers (> 15 years) with early onset
- 3 are on OST, most are using cannabis, 4 had stopped using heroin and cocaine and 2 are still using
- 2 HIV+, 6 HCV+ (one treated, another in treatment)

USER'S VOICES

HEALTH CONCERNS

- *“A widespread concern of the population who have used or use drugs **are the teeth.**”*
- *“Teeth have a negative visual impact right away that makes life difficult in many areas - difficulty in finding a job, difficulty in social or emotional relationships, difficulty to eat some foods... “*
- *“When you stop using, your concerns are often related with infections associated with drug use such as **HIV, HCV and HBV...**”*

USER'S VOICES

HEALTH CONCERNS

- [about **hepatitis C**] *"I've never been interested about it as I never had any physical symptoms... it was through the HR centre that I learned about it... moreover all it started when you asked me to go to the parliament to protest ... "*
- *"I've never wanted to know for sure the health **consequences of taking methadone** for such a long time [16 years]... I would rather take **prescribed heroin** than Prozac, mood stabilizers, methadone and all the medication I take daily"*

USER'S VOICES

AGEING CONCERNS

- *"I felt too often **near to death** in the past to be able to think in the future, I take a day at a time..."*
- *"A person who did the things I did, is hardly alive with my age"*
- *"Sometimes I feel reborn, I have been so many years like a zombie that despite my age... there are things I feel ... it seems that **only now I'm starting to live...**"*
- *"**We accept better ageing** because we know we are responsible for our own ageing due to drug use and lifestyle"*

USER'S VOICES

AGEING CONCERNS

- *“**Poor health and loneliness** are the two things that concern me“*
- *“After 65, it worries me **being alone, suffering too much** from health issues, and also if I am or not entitled to a **pension.**”*
- *“I don’t want to die very old, I feel it ...”*
[related to the fear of losing **autonomy, mobility**]

USER'S VOICES

SERVICE NEEDS

- *“I think the only way I can protect myself from relapsing is to be with people I can **talk openly about my problems** and who accept me as I am.”*
- *“A good thing about this service [harm reduction centre] is offering **the possibility of people to approach without asking permission** or having to justify themselves”*
- *“The important thing is to create links, **emotional links...**”*
- *“For people who use drugs, services with **very strict rules** only keep us apart...”*
- *“I think there must be a **service addressing social issues** exclusively designed for people who have used drugs for a long time, since we have specific needs...”*

IDEAS FOR REFLECTION

- A community struggling to be a community, still overwhelmed by feelings of guilty, resignation and isolation (and the shift to the “health paradigm” didn’t help too...)
- Failure of the welfare system in addressing the main social issues affecting people with long careers of drug use
- Key health issues remain unsolved – we need to understand better how to improve HCV treatment uptake

KEY MESSAGES

- Better data to inform programme and policy development
- The importance of integrated care services
- The need of tackling stigma and discrimination
- The role of advocacy and harm reduction services

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