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

Dr Catriona Matheson
Freelance Health Research Consultant
Honorary Professor, University of Stirling

Emma Hamilton, Jason Wallace, Dave Liddell
Scottish Drugs Forum
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 25th April-27th 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

- Grampian n=27
- Tayside n=22
- Fife n=20
- Lothian n=15

- GG&C n=39
<table>
<thead>
<tr>
<th></th>
<th>Male (n=93)</th>
<th>Female (n=30)</th>
</tr>
</thead>
<tbody>
<tr>
<td>age range</td>
<td>35-55 years</td>
<td>35-57 years</td>
</tr>
<tr>
<td>Median</td>
<td>41 years</td>
<td>41 years</td>
</tr>
<tr>
<td>Areas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glasgow</td>
<td>33</td>
<td>6</td>
</tr>
<tr>
<td>Edinburgh</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Fife</td>
<td>14</td>
<td>6</td>
</tr>
<tr>
<td>Tayside/Dundee</td>
<td>16</td>
<td>6</td>
</tr>
<tr>
<td>Grampian</td>
<td>22</td>
<td>5</td>
</tr>
</tbody>
</table>
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
<table>
<thead>
<tr>
<th>Self Reported Health Conditions</th>
<th>number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>117</td>
<td>95.1</td>
</tr>
<tr>
<td>Anxiety</td>
<td>109</td>
<td>88.6</td>
</tr>
<tr>
<td>Chronic pain</td>
<td>65</td>
<td>52.8</td>
</tr>
<tr>
<td>Other mental health</td>
<td>64</td>
<td>52.0</td>
</tr>
<tr>
<td>Heartburn/reflux</td>
<td>62</td>
<td>50.4</td>
</tr>
<tr>
<td>Constipation</td>
<td>47</td>
<td>38.2</td>
</tr>
<tr>
<td>Asthma</td>
<td>34</td>
<td>27.6</td>
</tr>
<tr>
<td>Arthritis</td>
<td>30</td>
<td>24.4</td>
</tr>
<tr>
<td>High blood pressure</td>
<td>26</td>
<td>21.1</td>
</tr>
<tr>
<td>Bronchitis</td>
<td>20</td>
<td>16.3</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>20</td>
<td>16.3</td>
</tr>
<tr>
<td>COPD</td>
<td>18</td>
<td>14.6</td>
</tr>
<tr>
<td>Heart disease</td>
<td>15</td>
<td>12.2</td>
</tr>
<tr>
<td>Other respiratory disease</td>
<td>10</td>
<td>8.1</td>
</tr>
<tr>
<td>Other digestive problem</td>
<td>5</td>
<td>4.1</td>
</tr>
<tr>
<td>Obesity</td>
<td>1</td>
<td>0.8</td>
</tr>
</tbody>
</table>

79.7% had ever spend time in hospital as an inpatient
HOW IMPORTANT ARE THE FOLLOWING FOR YOU?

- PROBLEMS WITH MENTAL HEALTH
  - very imp: 5.7%
  - quite imp: 11.4%
  - less imp: 12.2%
  - not imp: 6.5%

- PROBLEMS WITH PHYSICAL HEALTH
  - very imp: 2.4%
  - quite imp: 3.3%
  - less imp: 13.8%
  - not imp: 13%

- HOUSING PROBLEMS
  - very imp: 54.5%
  - quite imp: 26%
  - less imp: 13%
  - not imp: 17.1%

- FINANCIAL PROBLEMS
  - very imp: 12.2%
  - quite imp: 28.5%
  - less imp: 11.4%
  - not imp: 23.6%

- INDEPENDENT LIVING
  - very imp: 25.2%
  - quite imp: 28.5%
  - less imp: 11.4%
  - not imp: 38.2%

- SOCIAL PROBLEMS
  - very imp: 17.1%
  - quite imp: 19.5%
  - less imp: 13.8%
  - not imp: 11.4%
Which treatment and support services might you use in the future? (% of 123)

- Wound management
- Residential rehab
- Employability
- Fitness
- Independent living advice
- Legal advice
- Detoxification
- Community activities e.g. gardening, art
- Community based drug service
- Hepatitis C treatment
- Counselling
- General health support
- Welfare & benefit support
- Substitute prescribing
- Mental health support
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 of like, well, it’s not worth really doing anything now, cos you’re never gonnae change”

female, 57 years
“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.
Acknowledgements

The team at the SDF: Jason Wallace, Emma Hamilton, Pauline Farrow, Louise Aitken, Jean Hamilton and Lea Anne Smith

The services who were very helpful at helping to identify people at fairly short notice.

The participants who gave their time to share their experiences with us.

Scottish Drug Policy Unit for funding this work.