

THE HARM REDUCTION MODEL AS A TOOL TO ENHANCE HEALTH CARE FOR PEOPLE WHO USE DRUGS (PUD): THE EXPERIENCE OF AN OUTREACH TEAM WORKING WITH PEOPLE WHO EXPERIENCE HOMELESSNESS (PWEH)

Authors:

Castro T¹, Coelho M¹, Correia M¹, Oliveira F¹, Pinto Ferreira A¹

¹SER+, Portuguese Association for AIDS Challenge and Prevention

Background:

The project “Cascais Sai à Rua” (CSR) aims to constitute a multidisciplinary team (2 social workers, 1 psychologist, 2 occupational therapists, 1 peer), specialized in the intervention with PWEH. The project’s goal was to facilitate clients’ access to social rights and health and community services.

Description of model of care/intervention:

CSR accompanied 48 clients from 10/2020-01/2022. 20/48 are PUD and 4/20 were diagnosed with HVC by SER+ screening team.

Our intervention is based in the harm reduction model: we focus on having a relationship of proximity with the clients, flexibility, minimizing the bureaucracies of the intervention to the minimum, and not to limit ourselves to our physical offices - in order to reach these populations, who usually do not access traditional services or have several barriers in this access.

Effectiveness:

- 4 clients diagnosed with HVC were linked to care and are currently in treatment
- 8/20 clients entered therapeutic communities
- 7/20 clients started OST: 3/7 methadone; 4/7 buprenorphine
- 6/20 clients initiated accompaniment in a Specialized Technical Treatment Team (ET - ambulatory treatment for people with alcohol, drugs and gambling problems)
- 19/20 clients are not in a “roofless” condition.

Conclusion and next steps:

PUD have a greater risk of HCV infection, and it is necessary to reduce their vulnerabilities.

We believe that the professionals from this field must guide their intervention by collaborative and participative approaches, centred in solutions and potentialities, instead of the traditional models, centred in problems. Harm reduction means to “meet people where they are at” and to do “nothing about them without them”. This is also why it is important to have a peer in a multidisciplinary team: someone from the community, seen by the clients as “one of them”.

In order to increase PUD’s commitment to health care, the services should be the ones to adapt to their specific needs and characteristics.

Disclosure of Interest Statement:

No grants of any kind were received in the development of this study/abstract.