A COMPREHENSIVE APPROACH TO THE HOMELESS PEOPLE WITH ADDICTIONS IN AN EMERGENCY SHELTER IN LISBON

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Background:

The Municipality of Lisbon implemented several Emergency Shelters, during the pandemic, to provide answers for the increasing number of homeless people. Since September 2021, the Emergency Shelter CAEM Sta Bárbara has implemented a housing structure, for the homeless with active drug and alcohol abuse. An assisted consumption room (ECAD), under the scope of harm reduction strategies, was set at CAEM.

The present work reports on the results for 2022 of infectious diseases (ID) screening.

Methods:

This was an observational study based on epidemiological data, screening for IDs, and substance use records, available at the users' medical records based on CAEM's routine practice. All the users provided written signed informed consent forms.

Results:

In 2022, a total of 478 homeless were housed in CAEM, 317 new residents were screened in 2022 for ID, 23 tested positive for HIV, 53 for HBV, and 24 for HCV. Out of the total, 234 received medication for chronic conditions and 12 HCV-positive users initiated treatment.

Out of the total of 478, 39 residents maintained specialized HIV consultations, 89 were linked to a drug substitution program, and 13 were included in a therapeutic community.

Overall, 224 residents used the ECAD, with a daily average of 90 consumptions and a monthly average of 2835. Most daily consumers (n = 47) were smoked drug users, while 12 were PWID and 31 were alcohol users.

Conclusion:

The harm reduction strategies - low-threshold approach- at the CAEM keep providing valuable outcomes due to the high substance use of most homeless at the shelter, unsuitable to other services. The number of screening and diagnoses, treatment initiation, and referrals keeps increasing. The CAEM continued screening and diagnosis efforts not only improve individual health outcomes but also promote public health and decrease the burden on public healthcare facilities.

Disclosure of Interest Statement:

The authors declare no conflicts of interest