Services for People Who Inject or Have Injected Drugs

We spoke to 29 service users across **6 different settings** in order to learn more about the health needs of people who inject or have injected drugs in Edinburgh. We also met with service providers and reviewed a range of data sources to improve our understanding for this project.



What service users told us...



Some of the difficult things about being on treatment are...

- Long waiting times between assessment and starting methadone
- · Coming off methadone
- · Asking for clean works if you are still injecting sometimes
- · Coping with feeling low and depressed
- · Risky times, like coming out of prison
- Missing friends who still inject
- Feeling that some NHS and pharmacy staff treat you as second class

Some of the good things about services are...

- The NHS workers, pharmacy, hub staff and GPs who treat you with respect
- Talking to other people who have been in the same situation, and don't use drugs any more
- Having someone to help you as soon as you get out of prison
- · Linkworkers you can work with and rely on
- Help to cope with not having drugs if you are held in police custody
- Having someone to chum you to a first visit to a new service



We also heard...

- It's not hard to end up being homeless
- It can feel difficult to go and get help with basic health problems, like injection site wounds
- · Help and advice after an overdose needs to be given in the right way



Some things service users would like...



Shorter wait between assessment and treatment, and more help while you wait



Much more help with problems like depression and anxiety, and coping with traumatic events



More support at risky times, like coming out of prison or out of hospital



Appointment slots as well as drop-in sessions at some services



Some GPs to be better informed about harm reduction services for people who inject drugs



More oppportunities to talk to other people who have been in the same situation but who don't inject drugs any more



We will...

- Improve communication between different parts of the NHS and other organisations that work with people currently injecting or who have injected drugs.
- Make it easier for people to get onto a treatment programme
- Ensure the same support, care and information for health and harm reduction is available in all the different places that people go to now for drugs services
- Offer mental health support for people when they need it
- Find better ways to support people with particular problems, for example women who are homeless, people leaving prison, IPED users



