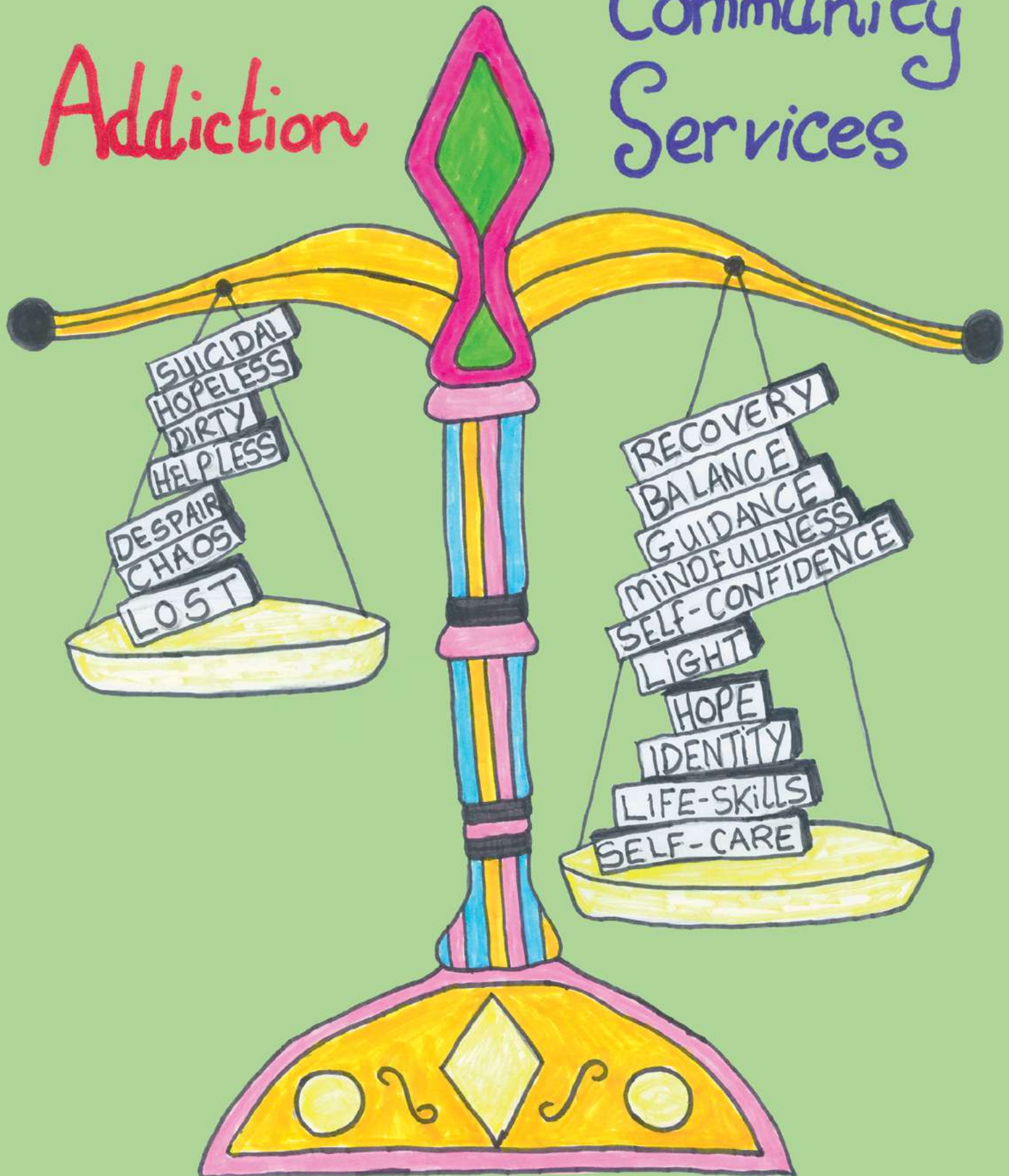


BRASS MUNKIE

Issue 39 | Winter 2021

Addiction

Community
Services



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Thanks to Nicholas for sharing his personal story with us and for being a great advocate!

Thanks to Gerry O.G, Suzanne, and Paddy for the amazing poetry.

Especial thanks to the talented BYAP craft group for creating the amazing cover: Margaret Keenan, Sarah Jane Murphy, Stephen Bannock, Helen McSherry, Cecelia Crabbe, Valerie Jenkins, Catherine Hyland, Lyndah Mulholland and the group organiser Mary Fitzpatrick.

WELCOME BACK READERS!

Another December, another Brass Munkie winter special!

We are really happy to write to all of you again.

First of all, we want to thank you for all the kind words and the warm welcome you gave to our summer edition. As you know, our team works really hard to put together this magazine so it's great to hear that you all liked it.

Since you like it so much, we decided to keep some of the pieces we had on the previous one – the Needle Exchange and Harm Reduction Supplies list, the "What's on the Street" list, our Naloxone Training update and more, but of course, we wanted to include brand new content for all of you.

In this issue you'll find some updates about the work that we've been doing (on top of all the Naloxone Training!) – we are finalising our Strategic Plan (coming up early 2022!), we set up a Gardening group with ALDP, we are working with researchers to involve peers in studies, and much more. We also feature great content from amazing services: HIV Ireland wrote about their Peer Programme, Ana Liffey gave us an update about their Mobile Harm Reduction Unit – VanaLiffey, SAOL told us everything about their new DAVINA project, the Irish Red Cross wrote about their Community Based Health



Maria Otero and Lynn Jefferys

and First Aid Programme, we interviewed Bernard West about his role as a Hep C Peer Support Worker... We also got amazing content from BYAP (including the cover!), BCAT, FAST, SSDP, updates about the Buvidal pilot and, of course, the cornerstone of this magazine: personal stories and poems from peers!

We hope you enjoy reading about all the work we've been doing since the summer and the amazing services that support our community.

**HAPPY READING AND
HAPPY NEW YEAR!**

- María Otero Vázquez

Do you want to provide content for the next edition of Brass Munkie?

Contact us:

Call: 01 555 4693

Email: admin@myuisce.org

Send your stories to:

8 Cabra Road, Phibsborough,
D07T1W2

UISCE

Advocacy for People who use Drugs

DUAL DIAGNOSIS IN IRELAND: NICHOLAS' STORY



NICHOLAS
UISCE PEER VOLUNTEER

“Having a dual diagnosis in Ireland is an up-hill battle which patients are expected to deal with by themselves.”

At the end of June 2020, I was diagnosed with Emotionally Unstable Personality Disorder also known as BPD. I also had Anxiety & Depression and an opioid dependence. I have since been diagnosed with PTSD & Benzodiazepines dependence.

My local mental health team was extremely biased and prejudiced towards me due to my opioid dependency. They used it as a weapon to refuse treatment and medications and to also prolong and delay therapies. At first, I was told I must deal with the addiction first but when finally on methadone, I was told to get off it as fast as possible.

There was absolutely zero communication between the Mental Health Team and my Addiction Centre which is a HSE-lead clinic. The addiction clinic blamed my lack of improvement on the mental health team. Instead of seeking the advice and information of the mental health team. My time to begin treatment was delayed and prolonged as the

GP Coordinator for South Dublin wanted a psychiatrist's report. I had to wait for the addiction clinic's psychiatrist who only comes one morning a month instead of contacting my actual psychiatrist of the local mental health team. I was told that due to my complex mental health and pharmaceutical opioid dependency, that these were the reasons it took over a month to begin treatment.

I was told by the clinic nurse that it would be easier and quicker if I was on heroin to start treatment. I was also subjected to 4 urine tests a week for 4 weeks before starting treatment 6 weeks later.

During this time and the time on methadone I had a tumultuous experience in the mental health clinic who persisted the same dialogue, whom told me no medications would be prescribed because "You would just get addicted to those as well". A completely biased and prejudice remark with no scientific evidence to back it up.

It was only 6 weeks on methadone when I chose to stop as my time at the addiction clinic was traumatic. Waiting hours outside in the pouring rain with 30-40 other people daily to eventually get 10mls of methadone. It was a horrifying experience which I never wanted to go back to. My feelings about the mental health clinic were the same. I had no choice other than not to work as I was mandated to attend daily to receive the methadone. When I stopped methadone, I returned to work.

I was earning money and made the wise choice to take out a €1,000 loan to see a private psychiatrist and possibly private addiction treatment as the public service was humiliating leaving the patient with no dignity. Treated like criminals and the methadone being "liquid-handcuffs".

I found my current psychiatrist and they told me that my story is not uncommon and the barbaric treatment by local mental health teams is a common story

told by patients, especially when they have a substance disorder.

I also searched for a private addiction specialist, they offered to see me in their public clinic for free as OST (Opioid Substitution Treatment) is free in Ireland. Thankfully after this investment, I received the treatment I needed by both the Psychiatrist and Addiction Specialist. I am on Suboxone now. It allows me to work and I am seen on an appointment-like basis. I am also on Diazepam for benzodiazepine dependence alongside other psychiatric medications for my mental health. The benzodiazepine dependence was also completely overlooked and ignored by the public clinic. I would guess that it is a 'don't ask, don't tell' situation.

Although there is a lot of work to be done, I am in a very lucky position where I was able to get a loan to seek the proper treatment and care. We should not have to be in debt to receive the appropriate care and treatment. The mental health teams often like to try to use the substance as an excuse to prevent diagnoses and treatment instead of treating their patients accordingly.

As you can see, having a dual diagnosis in Ireland is an up-hill battle which patients are expected to deal with by themselves instead of a multidisciplinary



approach that would normally take place for other medical conditions. Communication between services and clinicians is a major downfall after the lack of simple education. I believe Ireland is improving but not near as fast as required as there is a high demand for both specialties. Creating dedicated staff and programmes for dual diagnosis patients is essential.

My experiences have shown me that GP's and doctors in hospitals are extremely uneducated about substances and the treatments for them. There has been a common attitude by clinicians in the hospital setting, when they are presented with substance related medication or treatment, they will often try to use it as a scape-goat instead of admitting that they aren't edu-

cated about the medication or treatment. In my opinion, as a patient and a fellow healthcare professional, there needs to be a nation-wide campaign to educate healthcare workers and allied professionals about substance use and the pharmacology of the medications used to treat them.




Today, I am studying Applied Addiction Studies and Community Development and I volunteer for many addiction related services. I have been trained in Naloxone administration (the reversal for opioids) and I am also a trainer now too, thanks to UISCE. I really enjoy using my own experiences as well as the experiences of others to continuously work to better the services for both mental health patients and people with substance dependencies.

“Although there is a lot of work to be done, I am in a very lucky position where I was able to get a loan to seek the proper treatment and care. We should not have to be in debt to receive the appropriate care and treatment.”

MENTAL HEALTH SUPPORTS DURING COVID 19



AWARE

Information and support to anyone over 18.



 Freephone support line
1800 80 48 48
Mon - Sun 10am to 10pm
 supportmail@aware.ie
 aware.ie

IRISH HOSPICE FOUNDATION

A freephone bereavement support line providing information, connection, comfort and support.




 1800 807 077
Mon - Fri from 10am to 1pm.
 hospicefoundation.ie for more information.

EXCHANGE HOUSE IRELAND NATIONAL TRAVELLER MENTAL HEALTH SERVICE

 Call 01 8721094 (press 1)
Mon - Sun 9am to 5pm
 exchangehouse.ie



MENTAL HEALTH IRELAND

Information and support for people who experience mental health difficulties

 01 284 1166
Mon - Fri 9am to 5pm
 mentalhealthireland.ie
 info@mentalhealthireland.ie




BELONG TO YOUTH SERVICES

Support for LGBTI+ young people in Ireland.

 Text LGBTI+ to 086 1800 280 to chat confidentially with a trained crisis volunteer anytime - standard SMS rates may apply.
 belongto.org



GROW MENTAL HEALTH RECOVERY

Six-week guide on coping with COVID19.

 1890 474 474
 grow.ie
 info@grow.ie



ALONE

COVID-19 support line for older people.

 0818 222 024
Mon - Sun
8am to 8pm
 alone.ie

PIETA HOUSE


Telephone and text-based support counselling for people who are suicidal or engaging in self-harm.

 1800 247 247 available 24/7
Text HELP to 51444
- standard message rates apply.
 pieta.ie

**FOR
URGENT
HELP CALL
999 OR 112**



SAMARITANS

Emotional support to anyone in distress or struggling to cope.

 Freephone
116 or 123
available 24/7



SENIORLINE

Confidential listening service for older people.

 Call 1800 804 591
Mon - Fri
10am to 10pm
 thirdageireland.ie



TEXT 50808

A free 24/7 text service, providing everything from a calming chat to immediate support for people going through a mental health or emotional crisis.

 Text HELLO to 50808, anytime day or night.
 www.text50808.ie


MYMIND

Online counselling service

 mymind.org
 hq@mymind.org


YOURMENTALHEALTH

Freephone:


 1800 111 888
available 24/7

TRAVELLER COUNSELLING SERVICE

Go to:


 www.travellercounselling.ie/online-counselling to arrange a counselling session.

If you have a problem linking in, call the counselling support line

 086 308 1476
 info@travellercounselling.ie




DUBLIN SIMON COMMUNITY SURE STEPS COUNSELLING SERVICE

Counselling Distress Line for Clients experiencing Homelessness.

 1 800 844 600
Mon - Fri 8am to 10pm
Sat - Sun 4pm to 10pm

LGBT IRELAND

LGBT+ helpline 1890 929 539 every day




 Gender identity family support line 01 907 3707
Online instant messaging support
Mon - Thurs 6.30pm to 10pm
Fri pm to 10pm
Sat - Sun 4pm to 6pm
 info@lgbt.ie
 lgbt.ie

PAVEE POINT – MENTAL HEALTH TEAM

 01 878 0255
 pa.reilly@pavee.ie
grainne.meehan@pavee.ie
Mon - Fri 9am to 5pm

TURN2ME

Information and support for people who experience mental health difficulties

 Information line 01 284 1166
Mon - Fri 9am to 5pm
 mentalhealthireland.ie
 info@mentalhealthireland.ie

BALLYMUN YOUTH ACTION PROJECT

The Ballymun Youth Action Project (BYAP) is a community response to drug and alcohol misuse. It was founded in 1981 after three young people from Ballymun had died from drugs-related causes. As a response that has come from within the community of Ballymun, we strive to reduce the negative impact of drug and alcohol use on the lives of individuals and families, and on this community.

Women's Café is an informal group which takes place on a Thursday morning from 11am to 1pm. The Café offers female service users a space to drop in, have a tea/coffee, a light snack, chat, openly discuss, share and explore issues, concerns, and receive support.

We have just relaunched the café! So we are all starting a new journey together!

YAP run an **Open Access** service where people who use substances can drop in without an appointment and engage with

keyworkers. We offer harm reduction services, such as crack pipes, tinfoil and harm reduction information regarding the use of drugs and alcohol (as well as safety information for anyone who may use drugs and engage in sex work). We also offer showers and food to the client group that access the drop in centre.

We can support service users to link in with doctors, clinics, probation workers, homeless services and/or mental health services.

For service users seeking continued support and a bit of structure, we offer weekly one-to-one key-working where we explore motivation, change and goal setting. From here we can support service users to engage with some of the other services in YAP or in the community, including preparation for and referral to respite, stabilisation, detox, treatment and/or day programmes, courses or work.

What Services does BYAP offer?

- Aftercare
- Infant/parent mental health support
- Programmes– SMART, Recovery support group, Reduce the Use
- Social Night, Womens Café
- GP partnership service
- Open Access– Drop in service
- Holistics
- URRÚS
- Prison Programme
- Outreach services



BYAP team

Outreach services include targeted outreach where we carry out welfare checks with people in the area who are rough sleeping. We also carry out home visits to service users who may for whatever reason find it difficult to come to us.

If our service provision does not meet the current need of a presenting service user, we will signpost or make appropriate referrals.

URRÚS provides a range of training and education opportunities which are directed towards facilitating more effective responses to the challenges of drug and alcohol use as they impact on individuals, families, and communities. Delivery also includes training for professionals, and accreditation up to Level 7 within QQI. URRÚS/ BYAP have also established a Research Alliance with the UCD School of Social Policy, Social Work and Social Justice

The Aftercare Team provide ongoing support for people in recovery, or those who have made significant positive changes in respect of their drug

or alcohol use. There are a lot of one to one counselling sessions where people seek help to look at all kinds of issues, some from childhood, or simply learning how to cope in the world without substances.

The Day Programme assists individuals in achieving increased stability and making positive changes in their lives. These courses are developed based on the emerging needs of those accessing the service. Current programmes include SMART recovery meetings, Relapse Prevention Programme and a Recovery Support Group.

The Infant Parent Support Project works with parents who are experiencing issues with drug and alcohol use in order to improve outcomes for them and their children, improve antenatal/post-natal health and care for mother and baby from an infant mental health perspective, assisting the bonding process which is important to the baby's healthy social and emotional development.

We work closely with the maternity hospitals and other services providers in the area.

What hours/days are you open?

- Monday-Friday 10am-5pm

After hours:

- Monday 5:30-7:30pm (Social Night and 1-1 counselling)
- Tuesday-5:30-7:30pm (SMART meeting and 1-1 counselling)

CA and NA meetings also take place in BYAP

Holistics – Staff of the Project also deliver auricular acupuncture, either as a stand-alone provision, or to complement existing counselling and support services within BYAP. We also offer massage and reiki, when available.

The Social Night takes place on a Monday evening from 5:30-7:30pm in the drop-in area. The night is open to both male and female.

The social night offers participants who are engaging in the change process and/or maintaining abstinence to socialise in a safe and supportive environment.



BYAP team



BYAP Drop in centre

IRISH RED CROSS: COMMUNITY BASED HEALTH AND FIRST AID PROGRAMME

The Irish Red Cross Community Based Health and First Aid (CBHFA) Programme is a health promotion programme operating in all 13 prisons in Ireland. The programme is a partnership between the Irish Red Cross, the Irish Prison Service and the Education and Training Board. Inmates are recruited as Irish Red Cross volunteers and are taught how to assess their prison community to identify various health issues to ensure healthy prison environments.

The classroom learning provides volunteers with the opportunity to improve their communication, leadership, and teambuilding skills. The material covered falls under Health Topics, Non-Communicable Diseases, Social Inclusion, Infection Control and Mental Health. The volunteers determine what the biggest concerns are through their community assessment and create peer-led project work around these topics. These can include poster and awareness campaigns, handwashing demonstrations, and other related projects.

COVID-19

Irish Red Cross volunteers played a critical role in the prisons throughout the pandemic, with a particular focus in Infection Control and Mental Health. Volunteers learned about the symptoms of the coronavirus before it landed in Ireland and

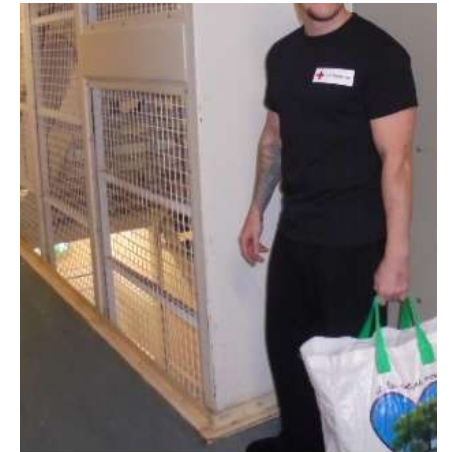
used this knowledge to peer educate the rest of their prison community. This allowed for each prison population to prepare and apply effective infection control measures in their daily routines. As the virus became more serious and the country went into lockdown, supports that the volunteers would usually have (such as teachers, psychologists, chaplains and addiction counsellors) were no longer able to enter the prisons. Therefore, the Irish Red Cross inmate volunteers took a very strong leadership role to assist the Irish Prison Service staff with the challeng-

es of COVID-19. Volunteers continued to educate their peers in effective infection control measures, spoke to inmates facing mental health challenges, assisted with addressing concerns around vaccine hesitancy, distributed information and education packs, and did their best to keep up positive morale throughout each of the prisons.

The activities of the Irish Red Cross inmate volunteers helped to contribute to zero positive cases amongst prisoners across the country for more than six months.



Irish Red Cross inmate volunteers demonstrating proper handwashing techniques with use of a glow box. These demonstrations allow the prison community to further understand the importance of the infection control measures in place.



VOLUNTEER TESTIMONIALS:

'What does being a Red Cross Volunteer mean to you?'

Part of a group of people trying to make every prisoner's life better while in jail. Trying to learn more myself and use that knowledge to better my own life as well as others. Using skills I have and developing more.

I just naturally enjoy helping other prisoners and people. I'm motivated to make choices in the prison system to benefit prisoners. To help others who struggle to adapt to prison life.

I am very proud to be a Red Cross volunteer. It's great to know or believe I can or could be of great help or service to someone and to try make life easier for that person or people. There is a lot I learn from it.

To do good in life and help them that can't help themselves.

I like to be involved in the Red Cross because I get to help people, especially with COVID-19. It's nice to help people at this hard time. I also got to meet some lovely people and I love the work we do.

I love coming to the Red Cross because I know I'm making a difference in my community by helping anybody if need be. I'm also after making a massive change in my own life because of the Red Cross and what I've seen. I will put everything I'm learning into my community and my kids and family members. Thank you.

*For more information on the programme, please visit www.redcross.ie/cbhfa
Alternatively, email Carrie McGowan (CBHFA Programme Manager) at cmcgowan@redcross.ie*

FAST FINGLAS ADDICTION SUPPORT TEAM

Finglas Addiction support Team (FAST) is providing addiction support services in Finglas for over 17 years. The service specifically targets problematic drug and alcohol users at various stages of drug use and recovery – actively using, stabilised, drug free and those family members affected.

Our services include:

- Assertive Outreach
- Social Inclusion outreach work – working with Travellers and new communities
- Street work - engaging with and providing supports to homeless people and people on the streets of Finglas and
- Cabra with problematic drug / alcohol use
 - Initial contact & Assessment
 - Treatment referrals and signposting
 - Key working & case management
 - Counselling
- Group support:
 - Treatment options group
 - Information & Assessment Drop in
 - Recovery Pathways day programme
 - Alcohol & Cocaine support group
 - Aftercare group
 - Family Support

If you or anyone you know is seeking support with problematic drug and/or alcohol use or you are a loved one/ family member seeking support you can get in touch with FAST by calling (01) 811 0595 or 083 081 1894.

FAST Does Recovery Month 2021

Recovery Month is an annual international celebration of Recovery. Celebrated across the globe in the month of September. It aims to promote awareness and understanding around recovery from alcohol and drug addiction. Additionally, it seeks to challenge stigma and create a more positive community and societal view of people in recovery and celebrate individuals from all walks of life who have managed to carry out a successful recovery. FAST sup-

ported The Recovery Academy of Ireland (RAI), Dublin City Council, Dublin Northwest Area Partnership, Feed our Homeless, Finglas Tidy Towns, the Finglas Cabra Drug and Alcohol Task force, An Gardaí Síochána and local projects participated in the Finglas Cabra Recovery Month campaign 2021. As such we delivered initiatives to create a positive message and space across the community of Finglas, Cabra and Dublin North West to talk about the positive impact and stories of Recovery while promoting social inclusivity of people in the Community.

Activities specific to FAST included:

- Our Recovery Journey' FAST Family Support Evening of Stories
- Health Promotion & Wellbeing information Day – An interagency event including, Marie Keating Foundation, D(Dental) care international (MobileVan), Hep C fibrosis screening by the Mater hospital and info on accessing services for travellers by Pavee Point.
- Recovery Month Football Tournament- attended by 10 team selected from addiction services across Dublin
- Recovery Café with the Recovery Academy Ireland
- Dublin North West Does Recovery "Building Recovery Communities" – A Recovery Route Walk 2021 in partnership with Ballymun Recovery and Finglas Cabra Recovery Month. Those from Finglas started at FAST and walked to Poppintree Park, Ballymun' and those from Ballymun walked from Coultry Park Ballymun meeting Finglas at Poppintree to celebrate Recovery.
- Recovery Self-care evening
- A Webinar in partnership with Ruhama on supporting women in recovery who experience sexual violence and exploitation.
- SMART Recovery Workshop

- 100 years of Recovery - An evening of shared experiences of Recovery with speakers collectively in recovery over a century.
- Recovery Hike up Djouce Mountain
- Stress Management Workshop
- 5K fun Run in Tolka Valley Park
- Light a light on event to celebrate International Recovery Day, lighting up our Building Purple to join the global campaign to make Recovery Visible

FAST would like to extend their thank you to all the participants and services that took part in any of the Recovery Month activities.



FAST Recover month

PEER PARTNERSHIP FOR CHANGE

UISCE STRATEGIC PLAN 2022-2025

UISCE

Advocacy for People who use Drugs

Check out our website &
social media for updates
about our Strategic Plan:

www.myuisce.org

[@myuisce](https://www.facebook.com/myuisce)

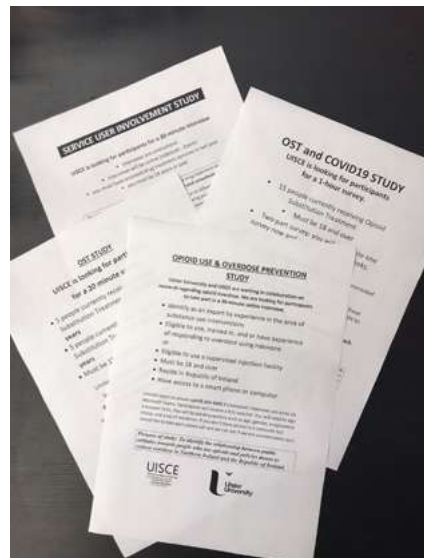
[@myuisce](https://twitter.com/myuisce)

[@uiscegram](https://www.instagram.com/uiscegram)

We wanted to give you a quick update on the development UISCE's Strategic Plan 2022-2025.

It's called Peer Partnership for Change and it sets out a framework for how UISCE, as an organization that works for and with People Who Uses Drugs can engage with people, increase their participation and influence in UISCE and decision-making structures and platforms that impact on their lives. PWUD's are the experts, and we are committed to creating the conditions for their living experience to shape what we do, and what happens when and where decisions about them are made. So hopefully we can get as many of you as possible engaged with the strategy, the organisation and leading out on some change.

We will link in with peers on how and when to launch the SP in the new year, so keep your ear to the ground and we hope to chat to you soon!



DO YOU WANT TO PARTICIPATE IN RESEARCH?

As we told you in the last issue of the magazine, we've been collaborating in different studies that focus on the experiences of people who use drugs. In 2021 we collaborated with the Health Information and Quality Authority, the Royal College of Surgeons in Ireland, the Health Research Board among others to promote peer engagement in research.

Our peer volunteers have been invited to participate in research, share their experiences (with treatment, accessing services, OAT, etc.) and get compensated for their time and their expertise.

This is a way for you to have your voice heard and promote change, and you can always count on us for support during the process. If you want to participate in research, give us a call (01 555 4693) or email (info@myuisce.org) for more information.



SUPPORTING YOU IN YOUR COMMUNITY

*Are you concerned about your own
or a loved one's substance use?*

We can help.

CONTACT THE LOFT

OPENING HOURS:

Monday - Wednesday 9am to 5pm

Thursday 9am to 8pm

Friday 9am to 4pm

67 Dowth Avenue, Cabra, Dublin7

T: 01 838 4377 | M: 085 767 2169

info@theloft.ie

www.theloft.ie

Follow us on: [f](https://www.facebook.com/theloft.ie) [i](https://www.instagram.com/theloft.ie) [t](https://twitter.com/theloft.ie)

HIV IRELAND'S NATIONAL HIV PEER SUPPORT PROGRAMME

HIV Ireland, Positive Life Northern Ireland, and Positive Now (The All-Ireland Network of People Living with HIV), have come together to develop and pilot a National HIV Peer Support Pilot Programme based on international best practice, with facilitation and research support from Quality Matters.

This programme aims to be a national, community-led, and inclusive volunteer peer support service which meets the needs of people living with HIV on the island of Ireland today. The all-Ireland programme has been informed, in part, by similar services which have ran successfully in the UK and has benefitted greatly from consulting people who have completed training in the programmes there.

At many stages during the development, consultation was sought from several representative groups, organisations, and service providers. This included people who are living with HIV, representative members from HIV Ireland, Positive Life NI, and Positive Now, support workers in 6 HIV related NGOs, their CEO's, medical social workers, and other key stakeholders.

People living with HIV can face numerous challenges during their lives. While these challenges may be practical problems, such as with managing mental and physical health, they can often be related to loneliness, isolation, and lack

of social support. Factors like these can take a large toll on the wellbeing of people living with HIV, and so the purpose of this peer support programme is to provide friendly and community-led support to people who need it.

While other peer support programmes can provide more formal mentorship and guidance, this programme does not. Instead, this programme provides a more casual form of social and emotional support, where both people involved are treated as equals. In our programme, peer support workers will be an empathetic, compassionate, and friendly source of support that is centred around the needs of the person who is seeking support.

What the volunteer peer worker role requires

Peer support workers are people who have had similar experiences, and who can understand and empathise with people who have requested peer support. Peer support workers are well informed, authentic, compassionate, can connect with people,

and express warmth and affection. In this programme, the role of the peer support worker, first and foremost, is to be a stable, reliable, and safe source of emotional and social support for someone living with HIV.

Each peer worker has been issued a manual that provides a detailed outline of the HIV Peer Support Programme: information about the service and its principles, as well as an overview of their role, rights, and responsibilities.

The Profile of Peer Support Workers

We currently have 19 trained Peer Support Workers (13 males and 11 females) based in the Republic of Ireland, and a further 5 in Northern Ireland. Peer Support Workers reside in 10 counties: Carlow, Cavan, Clare, Cork, Down, Dublin, Limerick, Sligo, Tipperary, and Wexford.

The group of 24 volunteers is highly diverse, with peers from Brazil, Chile, India, Republic of Ireland, Northern Ireland, Malawi, Nigeria, South Africa, and Zimbabwe!

“People living with HIV can face numerous challenges during their lives. While other peer support programmes can provide more formal mentorship and guidance, this programme provides a casual form of social and emotional support, where both people involved are treated as equals.”

How to Access HIV Peer Support

People looking for HIV peer support can contact peersupport@hivireland.ie or call 01-873 3799.

On registering their interest, people looking for support will be provided with a paper form, or directed to an on-line form, to complete. This form gives participants the opportunity

to state the profile of a person they would like to be matched with (for example, someone may want to speak to someone else of the same gender, sexuality, or in the same age range, or speak to someone who speaks their native language). Once the form is completed, the person seeking support will be matched with a peer support worker.

For further information please contact Dr Erin Nugent (Programme Manager) at:
erin.nugent@hivireland.ie
or at 083-088 3047





Visit: www.hivireland.ie/peersupport

Living with HIV?

You are not alone.

Talk in confidence to someone living with HIV too.

Email: peersupport@hivireland.ie

Tel: 01-8733 799



HIV IRELAND
NATIONAL PEER
SUPPORT
PROGRAMME

In conjunction
with



STUDENTS FOR SENSIBLE DRUG POLICY

WHO WE ARE

Trinity College Dublin Students for Sensible Drug Policy (TCD SSDP) was set up in 2019. We are a chapter of the global youth-led group Students for Sensible Drug Policy. Students for Sensible Drug Policy is a grassroots activist group that aims to end the war on drugs and bring positive change to the lives of people who use drugs.

WHAT WE HAVE DONE

Over the past three years, TCD SSDP has worked with advocacy organizations, student groups and other Students for Sensible Drug Policy chapters across Ireland.

We have:

- Campaigned for a Drug Policy in Trinity College and contributed to its publishing
- Received Naloxone training for our members
- Worked on harm reduction information campaigns with Trinity's Student Union
- Given realistic harm reduction information about taking drugs to students

WHAT'S HAPPENING NOW

Now that there are more events happening again across Dublin, TCD SSDP will supply useful and accessible drug information to as many people as possible. This will be done through our social media accounts, our new website and our QR code. Scan our QR with your smartphone's camera and it will take you to our website.

On the website you will find:

- Helpful harm reduction tips
- The legal status of each drug in Ireland
- The legal status of using each drug in Ireland
- Info about the short and long-term effects of each drug

WHAT'S NEXT

Looking ahead to 2022, we hope to keep working with UISCE, who have done Naloxone Training for many of our members. TCD SSDP will work with student groups across Trinity College and Ireland to get better supports for students who use drugs. We also hope to launch the use of drug testing kits at student nightlife events in Ireland.

Scan the QR Code
to learn how to stay
safe at this event!



Naloxone Training with SSDP members

**For more information
about TCD SSDP
follow us on social
media or visit our
website:**

Facebook:
[Facebook.com/trinityssdp](https://www.facebook.com/trinityssdp)

Twitter: @SSDP_TCD

Instagram: ssdptrinity

Website:
www.trinitySSDP.com

BUVIDAL

A NEW OPTION FOR OPIOID AGONIST TREATMENT

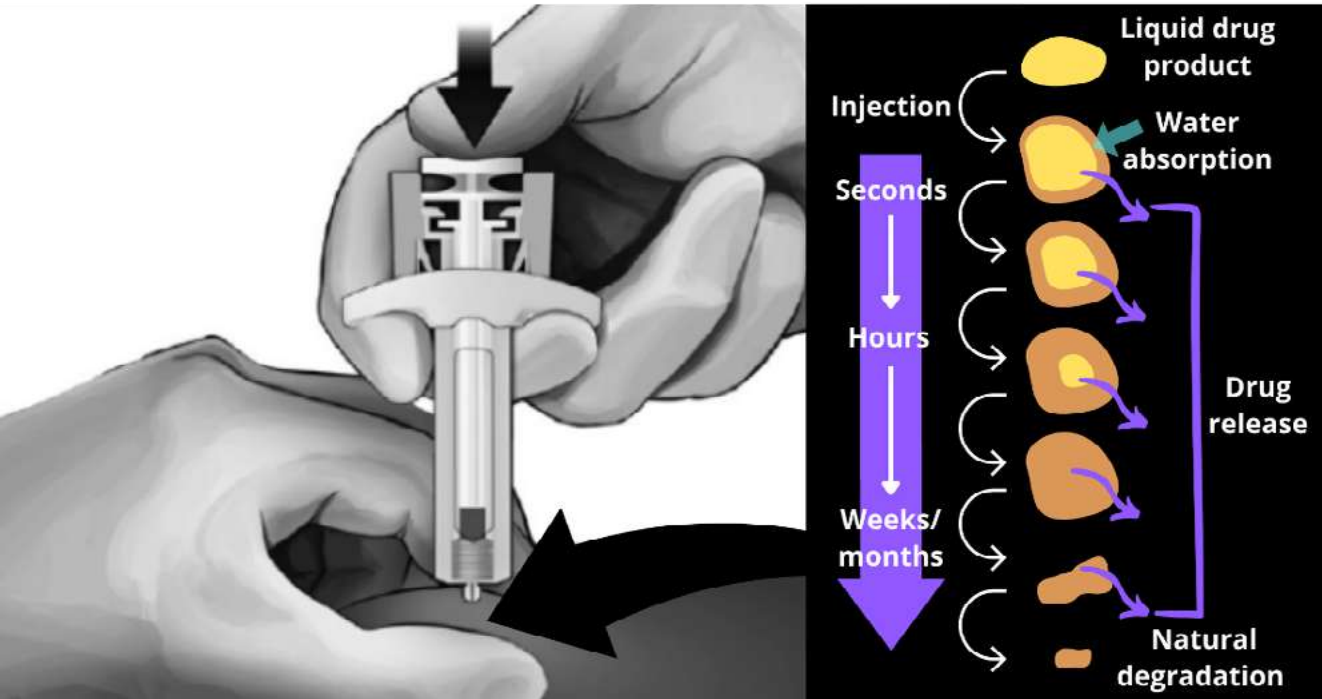
WHAT IS BUVIDAL?

Buvidal is used for the treatment of opioid dependence. It is given as a long-acting injection under the skin. Buvidal contains Buprenorphine, which is also the main active ingredient in Suboxone.

Buvidal is available in several doses:

- Weekly Buvidal comes in doses of 8 mg, 16 mg, 24 mg and 32 mg.
- Monthly Buvidal comes in doses of 64 mg, 96 mg and 128 mg.

Once injected, Buvidal stays in the tissue and is slowly absorbed. Its flexible dosing allows people to switch easily from other opioids.



Withdrawal can occur when Buvidal replaces other opioids (e.g. methadone) in the body. Therefore, a person should wait for a recommended washout period after taking other opioids to minimise withdrawal symptoms when Buvidal is initiated – 24 hours if possible, for long-acting opioids (methadone), and 6 hours at least for short-acting opioids (e.g. heroin)

With Buvidal, people no longer need to make daily visits to the pharmacy for their opioid substitution treatment. This can be very liberating both physically and psychologically.

People report that for the first time in many years, they feel less defined by their addiction. With once-monthly administration, they can focus on other areas of their lives, including relationships, childcare, education, and work.

PEOPLE'S EXPERIENCES WITH BUVIDAL

In May 2021, Camurus, the pharmaceutical company that launched Buvidal published the results of a 24-week trial comparing the outcome of people treated with Buvidal versus daily buprenorphine. The results showed that people’s treatment satisfaction significantly increased in the Buvidal group, with reported improvement in treatment burden and quality of life. In Glasgow, treatment with Buvidal has proven to be effective and many people are now prescribed the injection. Six months after the pilot, all 14 individuals involved were still engaging in structured activity which helped improve their health and wellbeing.

In Dublin, a pilot Buvidal programme started in December 2020 at 2 drug treatment sites: the National Drug Treatment Centre (Pearse St) and Tolco Clinic.

	No. of people initiated	No. of people remaining (Nov 2021)	No. of people that switched from other OST		No. of people that switched from heroin
			Suboxone	Methadone	
Data from Tolco	20	14	14	3	3
Data from NDTC	19	15	15	3	1

Twenty people have been started on Buvidal injection in Tolco as part of the pilot and there has been an overall positive response to this treatment.

One person reporting the first time being off heroin for 20 years. He said: “It’s like heroin was never invented”.

Another claimed that, with Buvidal, you can “get and forget”, and get on with your daily life until the next injection is due.

One person also said that she gained “more energy and clarity since starting on Buvidal injection”.

Clare McCague, one of the pharmacists directly involved with the pilot, said: “the overarching response to Buvidal has been excellent. People accessing services report that for the first time in many years, they feel less defined by their addiction. With once-monthly administration, they can focus on other areas of their lives, including relationships, childcare, education, and work.”

Buvidal has proven to be a new promising treatment option for people. Both pilot sites are currently collecting data for evaluation, and analysis will be ongoing to look at future rollout.

Thanks to Linh Nguyen – Pharmacy Intern HSE Addiction Services – for providing this information.

BRAY COMMUNITY ADDICTION TEAM



We met the incredible folks from Bray Community Addiction Team earlier this year and we loved the amazing work they've been doing in the area. We wanted them to tell all our readers some of the services that they offer for the community and what new projects they are planning for the future. This is what they told us:

Here in Bray, we work in partnership with all the agencies in the town and county who work and support our client group, whether they be Voluntary, Community or Statutory. Unlike urban centres, Bray has fewer options for people in terms of dealing with their drug use, so we need to offer a range of services to the community, under one roof so to speak.

We offer the following services:

- One to one key working sessions for Adults/Under 18's dealing with problem drug and/or alcohol use
- One to one key working sessions for Families living with a loved one in problem drug and/or alcohol use
- Community Prison Links Worker who works in the Prisons with Service Users from Bray, as well as a Community Peer Worker when the Service User has been released and is back living in the community
- Needle Exchange/Harm Reduction Service (Boghall Rd Office), which gives people who inject drugs new sterile works, harm reduction advice and sign posting to other services as required. We also give out crack pipes and foil. We carry a supply on Naloxone in each of our building and also our Outreach Worker always has it!
- SMART recovery peer support groups both online and in person 3 times per week.

- NVR (non-violent resistance) Group programmes 1-2 times per year for Families.
- Assertive Street Outreach Worker. This worker will be out and about in the town engaging with hard to reach drug/alcohol users in the town trying to encourage them to link in but also offering advice and sign posting them to service available to them. This worker also helps out at the SafetyNet Mobile Clinic when they come to the town once a month.
- Open access Drop In Service – This provides not only support with your drug/alcohol use but a meal/beverage, shower and laundry facilities 6 days per week.

We have a few new initiatives coming on stream soon, such as a Court Referral Programme and a possible new Aftercare Group. We are participating in a multi-agency Stabilisation Programme pilot at the minute, the first one of its kind in Co. Wicklow (non-CE/DSP funded programme). We hope this will be the precursor for a permanent Programme for the area in 2022.

BCAT Laundry room



Peer Involvement

We have had Service User Reps in the past and held Service User meetings once a month. We have not been able to do that over the last 18 months due to COVID restrictions, however we have had one to one consultation with peers and we also conducted a survey through both using forms in our offices and by ringing them directly. We also post regular updates on points they made or local activities on our notice boards or using social media.

Something important about our project is that, we try not, to and have succeeded in not having anyone on a waiting list. We have come close in recent months but have managed not to go there. We feel this is a barrier to anyone linking in to a project but we totally get that we are fortunate to have the resources not to have to do this – we acknowledge we are somewhat unique in the range of different services we do offer.



BCAT Susan Sargent, Team Leader and Gavin Earls, Social Care Worker

And what about COVID?

COVID had a huge impact on our service. We had to literally change how we deliver our services to the community. We had to go online/over the phone for one to ones initially, with the exception of crisis interventions. We met peers outside for a walk or a coffee. We had to get screens for both our buildings and furniture which could be easily cleaned. There was an impact on the Drop In service, initially we could only offer take away food and drinks. After we got screens in and put in some fairly onerous restrictions, we could allow Drop In Clients to enter the building once more. Peers we had not seen in years began to come back into the service. They cited anxiety, stress, and isolation as the 3 main factors which triggered their need for our support once more, some of them had relapsed, all said they felt the pandemic had been the cause. This put pressure on our capacity, and it was all hands on deck to deal with the demand. This is still an issue as we are

still dealing with the pandemic and its consequences.

This last 18 months has been a challenge for sure for BCAT. However, it has to be said that everyone pulled together and displayed great community spirit and support, be that the Staff Team, Community at large and not least people accessing our services themselves in supporting each other.

CONTACT BCAT

- Call 01 276 4692
- email info@bcat.ie
More information - www.bcat.ie

Opening hours

Mon-Fri 10am-6pm
Sat 12:30-2:30pm (Drop in)

Follow BCAT

Facebook @braycommunityaddictionteam
Instagram @bcatbray
Twitter @addiction Bray



BCAT offices in Dublin Road, Bray

NEEDLE EXCHANGE AND

HARM REDUCTION SUPPLIES

DUBLIN 1
Summerhill Hub
 Tues 2pm – 4.30pm
North Strand Health Centre
 Fri 2pm – 4.30pm
Dublin Simon Outreach
 Mon-Fri 8.30pm - 10.30pm,
 Sat 10am - 10:30pm, Sun
 4pm – 10.30pm
 01 8720185
Ana Liffey Drug Project
 Tuesday & Thursday
 Mornings at Granby Clinic
 Vanaliffey (Mobile Service)
 Tues & Thurs Afternoons,
 all day Friday
 0877127059

DUBLIN 2
HSE Outreach
 Thurs 10am - 12pm
 Loretta 086 6041013
 Clodagh 086 6041029
 Call for out of hours

DUBLIN 5
Kilbarrack Health Centre
 Mon (except bank hols)
 2:15pm-4:30pm
 John 086 6057181

DUBLIN 7
HSE Outreach
 Pam Whelan 086 6057205

DUBLIN 8
MQI Riverbank
 Mon-Fri 8am-9pm
 Sun 9am-1pm
 01 5240160

DUBLIN 9
Ballymun Healthcare Facility (entrance Shangan Road)
 Tues 6pm–8:30pm
 Robert 087 9676304

DUBLIN 10
Ballyfermot Advance Project
Static NEX - Mon-Fri 9:30-1pm, 2pm-5pm - 01 6238001
Outreach for the same hours for people who can't access static - 087 4319921
Out of hours NSP team - 3 evenings per week (vary each week) - 0873618422

DUBLIN 11
Wellmount Primary Care Centre – Finglas
 Mon 2pm – 4:30pm
Ballymun Youth Action Project (BYAP)
 Mon-Fri 10am-1pm, 2pm-5pm
 Pipes only

DUBLIN 12
Inchicore/Crumlin/Rialto HSE Outreach
 Mon 11am-4pm
 Derek/Paul 086 6041014

DUBLIN 13
HSE Outreach
 Mon-Fri 9am-5pm
 John Kelly 086 6057181

DUBLIN 15
Corduff Primary Care Centre – Blanchardstown
 Thurs 5pm-7pm
 Catriona 086 854 3770
HSE 37a Coolmine Industrial Estate
 Mon & Fri 11.00am – 1.00pm
 Catriona 086 854 3770

DUBLIN 17
Darndale Needle Exchange
 Belcamp Lane, Darndale
 Thurs 2pm-4pm

DUBLIN 18
HSE Dun Laoghaire
Mobile service – Tues 10am–4pm
Serves the greater Dun Laoghaire area – Sandyford, Shankill etc.
 Marlena 086 6057149

DUBLIN 22
CASP
Just after Fonthill retail park, big green and white building
 Monday-Friday 9.30am-1pm, 2pm-3pm
 01 6166750

Clondalkin Tus Nua
 Mon 10am-12pm, 2pm – 4pm;
 Tues, Weds, Thurs 2pm - 4pm;
 Fri 10am-12pm, 2pm-3pm
New Nangor Road, Clondalkin Dublin 22
 01 4572938

Clondalkin/Lucan Clinic CLAC
St Lomans Road
 Monday – Friday 9am-5pm
 Peter Homen 087 7980175

DUBLIN 24
HSE Outreach
 Mon-Fri 9am–5pm
 Nicola 086 8065014
 Debbie 086 8590733
St. Aengus Centre
Castletymon, Tymon North, Tallaght
 Monday - Friday 10am-2pm
 Mick 087 2865570
(can contact out hours/emergency)
JADD Jobstown, Tallaght
 Mon - Fri 9am - 5pm
 Sat & Sun 9:30am–11:30am
 085 7816183 / 01 4597756
CARP Killinarden CLG
Tallaght – 2 buildings up from Killinarden Pub
 Mon – Fri 9am–4:30pm
 01 462 6082

NORTH COUNTY DUBLIN
HSE Harm Reduction Health Promotion Van
Confidential Mobile Service serving: Skerries, Lusk, Rush, Balbriggan, Baldoyle, Sutton, Howth, Swords
 John Kelly Outreach - 086 6057181
 Catriona Brady 086 854 3770
 Call between Mon - Fri 9am-5pm

CARLOW
ARDU
 059 917 8050 / 1890464600

CORK
Cork City Outreach
 Mon - Fri 9am – 5pm
 Frank Horgan 086 0255410

KILDARE
ARAS HSE Outreach team
Main Street, Newbridge
 Tues 11am-1pm, Thurs 2pm-4pm
 045 488 670 / 045 446 350
Outside of hours:
 Suzanne 086 8065013
 Wynne 087 6172517
 Des 086 6041015

KILDARE
ARDU
 056 778 4638 / 1890464600

LAOIS
MQI DATS Outreach
 Barry 0872925727

LIMERICK
Ana Liffey Drug Project Mid-West Assertive Outreach Team
Limerick City
 Mon-Fri 9:30am-5:30pm
 Trish 085 753 7073

LONGFORD
MQI DATS Outreach
 Mon-Fri 8:45-5:15pm
 Derek 086 4113628

OFFALY
MQI DATS Outreach
 Mon - Fri 8:45am-5:15pm
 Lauren 087 9148782

WATERFORD
St. Otteran's Hospital John's Hill
 Mon – Fri 9am-5pm
 051 848658

WESTMEATH
MQI DATS Outreach
 Mon - Fri 8:45am-5:15pm
 Angela 087 9150329

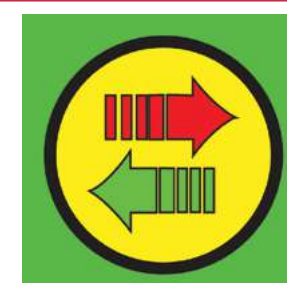
WEXFORD
 Appointment based
 Monday - Friday
 053 925 9825

WICKLOW
HSE Arklow Addiction Centre
9a Upper Main Street, Arklow
 Mon & Thurs 1:30pm – 3:30pm
 Marlena 086 6057149

Bray Community Addiction Team
37 Beechwood Close, Boghall Road, Bray
 Mon - Fri, 9am – 5pm
 01 2764692

Bray Mobile
 Weds 10am – 5pm
 Sean Maguidhir
 086 6057150

The Pharmacy Needle Exchange Programme is carried out in more than 100 pharmacies nationwide. Community pharmacy-based needle exchange allows patients to pick up sterile injecting equipment and return used items. Patients can identify pharmacies taking part by the international needle exchange logo on their shopfronts.



These locations have been confirmed as of 06/10/2021 by UISCE Advocacy for People Who Use Drugs. To be added to this mailing list or for updates or corrections please contact info@myuisce.org.

THE VANA LIFFEY

ANA LIFFEY'S MOBILE HARM REDUCTION UNIT

Q: *How is this service different from static needle exchange sites? Why is it important to have both static & mobile service?*

A: It is important to have a static needle exchange site as people will know where to go if they need to, the beauty of the mobile one is that the service provider can go to the client. The same ultimate aim but the mobile service is more flexible, discreet and less crowded which suits some people better.



ALDP team

Q: *Why is the service important?*

A: Because we will go and meet people where they are at and this should help break down barriers to people accessing harm reduction and support.

Helping break down barriers to people accessing harm reduction and support.

Q: *How did the team start? What's its origin?*

A: We have always done needle exchange/harm reduction on an outreach basis, this was mainly done on foot by two project workers.

Q: *What services and supplies do you provide?*

- A:**
- Needle and syringe program
 - Naloxone training and product
 - Overdose prevention and management training for PWUD including stimulant overdose.
 - Safer injecting interventions and education
 - Safer drug use interventions including polysubstance use
 - Safer alcohol use interventions
 - Safer PIEDS use interventions
 - Safer disposal of drug paraphernalia – training and disposal facilities.
 - Proactive referral to OST programs such as methadone and suboxone.
 - Proactive referral to medical services based on issues presenting at the NSP e.g. abscesses.
 - Information and education on viruses affecting PWUD including but not limited to HIV, Hepatitis A, B and C and COVID-19.
 - Vaccination against hepatitis A and B.
 - Tests for HIV, HBV, HCV / pre and post-test support and referral.

Q: *Can people call you if they find discarded syringes, unsafe disposals?*

A: Yes, they can call 0877127059 and we will take care of it either ourselves or by alerting Dublin City Council Waste Management section.

Q: *What kind of work was the team doing before Covid, and now that restrictions are easing will it affect your services overall?*

- A:** Prior to the pandemic we offered the below services:
- Open Access – Drop in
 - Assertive outreach
 - NSP
 - Medical Services
 - Group work
 - Key working and Case Management
 - Prison In reach
 - Community Detox

Due to Covid we have had to change the way we interact with our clients and we meet them where they are at now. Hence we do a greater amount of outreach on the streets and in reach in the PEA's.

Q: *How does mobile needle exchange help create links with people?*

A: A lot of our clients may not like to go to certain areas or sites due to stigma etc. to collect their provisions. We offer a safe place where we can talk to the client about different aspects of harm reduction. We can also create relationships with people through this work and help them to progress in their lives, if that is what they want from us.

Q: *Does anyone else in Ireland offer similar service?*

A: In the Midwest, Ana Liffey have cars that go out and offer all of the same interventions we offer in the VanaLiffey. They cover Limerick, Clare and North Tipperary. You can contact them on 0851559158. We are not aware of any other services in Ireland like this but there are similar services offered on a mobile basis such as a Sexual Health mobile unit in Cork.

Q: *What initiatives would you like to see for the future of harm reduction in Ireland?*

A: We would like to see naloxone more easily available to people, we are working on this with the HSE and other partners like UISCE who want the same thing.

Q: *What are your hours/days?*

A: Right now, 4 times a week: Tuesday Afternoons, Thursday Afternoon, Friday morning and afternoon

Q: *What areas do you cover?*

A: At present anywhere between the Canals, D1, D2, D7 and D8

Q: *Can people call you for equipment drop-offs?*

A: They can, the number to call is 087 712 7059

Q: *Do you offer naloxone training and overdose awareness to folks?*

A: We do offer naloxone training on the Harm reduction unit, this can be done on a one to one basis where the training is private. Just call or text 087 712 7059 and we can set that up for you!



ANA LIFFEY
DRUG PROJECT



ANA LIFFEY

DRUG PROJECT

Ana Liffey Drug Project is running an 8 week, community based, Stabilisation programme. The programme is based on Reduce the Use and the principles of low threshold - harm reduction. It aims to offer a supportive environment for individuals wishing to address their substance use.

When: Tuesday, Wednesday & Thursday afternoons 2pm to 4pm

Where: City Centre location, near Granby Centre

Please send referrals to referrals@aldp.ie. Alternatively, please call Rebecca on 0858742952 or Rory on 0852540472.



WHAT'S ON THE STREET???

DECEMBER 2021

2CB

Hallucinogenic similar to LSD and MDMA.

Harm reduction advice:

- **DOSING:** If you have powder 2C-B, always weigh your dose with a scale. A 15mg dose will produce a very different experience to a 30mg dose.
- **MOOD:** If you're feeling worried/anxious/depressed or you're not in a nice environment its best to save your drugs for another day when you're more likely to have a fun experience. If you have bad trip, remind yourself that the effects will wear off soon.
- **SNORTING:** 2C-B is incredibly painful and damaging to your nose, it can cause immediate nosebleeds. Best to consume by swallowing.
- **WATER:** 2C-B has some stimulant properties so make sure you hydrate!



PREGABLIN

AKA LYRICA

Harm Reduction for Pregabalin:

- **DOSING:** Someone who has no tolerance will achieve a mild buzz from 25-75mg orally, using more can be unpleasant and dangerous. Capsules can be opened up for more accuracy when dosing. Keep parts of the capsule so you can put unused powder back in it or later use. Overdoses have been reported from doses at and above 600mg.
- **TIME TO EFFECT:** Swallowed Pregabalin is active in the body for at least 12 hours. Wait 2 hours before redosing! This will allow the peak effects to taper off.
- **MIXING:** Using any benzodiazepine, any opioid or alcohol together with Pregabalin increases the risk of accidental overdose. Use less of each substance if mixing and be mindful of your tolerance with each one.
- **COME DOWN:** Using Pregabalin to help with a comedown from stimulants (like speed, crack, meth, etc) can be risky. For example taking stimulants, then diazepam and Pregabalin. Cannabis is a safer comedown drug, but obviously not totally risk free.
- **DON'T STOP SUDDENLY, TAPER OFF:** Stabilize your daily dose, then gradually reduce by 50mg each week and reach out for support from a service.



TEST YOUR DRUGS!

If you live in Northern Ireland you can post to WEDINOS, a drug checking service in Wales. The service is discreet and anonymous and your results get put up on the website within a couple weeks.

Check out more info at their website: wedinos.org

CATHINONES IN PILLS

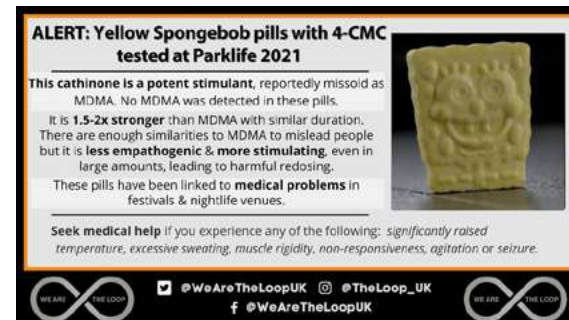
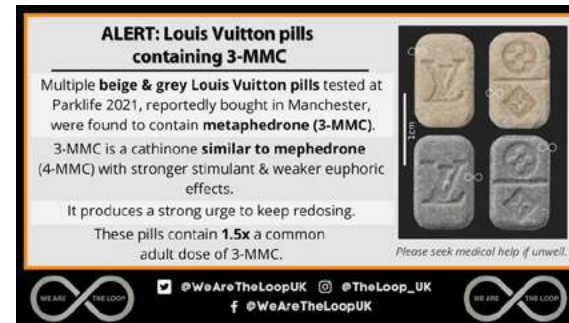
Pills being sold as MDMA are being tested positive for synthetic and non synthetic cathinones (aka bath salts, snow blow, khat, etc) Cathinones produce strong short-acting stimulant effects but less 'empathogenic' (less calm feeling) compared to MDMA. They also higher risk for feelings of increased paranoid, insomnia and anxiety.

The different types of cathinones that have been detected include, but aren't limited to:

- **3-MMC – similar to mephedrone, 'magic'**
- **4-CMC**
- **EUTYLONE (bk-EBDP)**
- **Pentylone (N-Ethylpentylone)**

Harm reduction for Cathinones:

- Eat something before taking & stay hydrated
- **START LOW, GO SLOW:** we don't know what's in the pills we buy because we don't yet have access to public drug checking. If it's a new dealer or a pill off a friend, try a little bit first, and wait 45 minutes - 2 hours before redosing.
- Increased mental health concerns could be due to the CATHINONES. Even a day or two after. Reach out to someone for help. You don't have to disclose what you've taken but it's always better if you do.
- **MIXING** can increase the effects and be higher risk for overamping or overdose.
- Give yourself space if you start to feel overwhelmed. Try taking deep breaths and focusing on 5 things you can hear, see, smell (grounding exercise)



THC vape liquid containing MDMB-4en-PINACA ("Spice")

CANNABIS VS. SPICE

What substances have been found in cannabis products in Ireland?

Through Forensic Science Ireland who analyse drug seizures, we are aware of the below substances appearing in Ireland in 2021.

- **MDMB-4en-PINACA** (29 cases), this substance has been found in plant material, liquid and vape products.
- **ADB-BUTINACA** (10 cases), this substance has been found in sweets, plant material and liquids.
- **5F-EDMB-PICA** (15 cases), this substance has been found in plant material and some sweets.
- **4F-MDMB-BUTINACA** (16 cases), this substance has mainly been found in plant material and in some liquid.

WHITE VALIUMS

Tested positive for **FLUALPRAZOLAM**



BLUE VALIUMS

Tested positive for **FLUALPRAZOLAM** (stronger than regular Valium/Diazepam)



FAKE XANAX STICKS

Containing no Xanax at all! Sample analysed as pure **MELATONIN** a natural mild sedative



FLUALPRAZOLAM

- Sedative like other tablets (like xanax), but higher potency and acts quicker
- Higher risk of overdose / stronger effect on the brain
- In Ireland, has been found in fake xanax sticks, as a 'cutting agent'

Information on this resource is thanks to the following organizations:

www.drugs.ie
www.wedinos.org
www.wearetheloop.org
www.extern.org



NALOXONE TRAINING UPDATE

UISCE
Advocacy for People who use Drugs

In our last issue we highlighted the peer 2 peer training we did for Support Don't Punish 2021 in June and International Overdose Awareness Day in August.

For International Overdose Awareness Day 2021 we went to a few different spots! First was down south of Dublin City to Bray Community Action Team, and then up to Ballymun to train folks at Ballymun Youth Action Project, with one of our peer volunteers. Both of them have pieces elsewhere in this issue of the magazine, and if you are someone accessing services in either Bray or Ballymun, ask them about naloxone!

The 3rd place we went was Jobstown Assisting Drug Dependency (JADD) where our staff trained staff and participants and learned about the great wraparound services they are offering there.

International Overdose Awareness Day (IOAD) is a day for the community to remember those we have lost, but it is also a day to highlight how we fight for



María, Lynn, Richie and Yvonne from SUDS

the living, and one of the ways we do this.

We were happy to continue on and traveled to Clondalkin for early September to train Service Users Developing Solidarity (SUDS) who had a piece in our last issue. It was a great time and we even got a short piece in a local paper, the Clondalkin Echo, about the training.

Next, we went to visit Coolmine Lodge, a treatment centre that has been around since the 1970s, and delivered the training to a few folks who were part of the Reintegration group.

We are continuing our training until mid-December where we will be closed for the Xmas break.

If you are person who uses drugs who would like to be trained and carry naloxone, contact us –

If you are a service provider and would like training for your staff in how to administer naloxone, contact us!

Email info@myuisce.org or call **01 555 4693** for more information.



Trainees from Coolmine Lodge

UISCE PEER VOLUNTEER PROGRAMME

Role Description

- Are you actively using drugs or have a recent history of substance use?
- Are you aware of stigma faced by people who use drugs?
- Are you open to learning?
- Can you show tolerance, empathy and understanding for others?
- Are you okay with using your own experience to help others?

Peer Outreach Volunteer's Main Tasks

- Conduct street outreach and in-reach to services as needed
- Have conversations with people about their situations
- Improve communication in the community
- Note any new drugs and trends emerging
- Provide overdose awareness and harm reduction information
- Take part in forums and focus groups
- Link with other peer-led teams
- Focus on skills building

Benefits To The Peer Volunteer

- Learn new skills and gain experience which you can add to your CV
- Training & certification in naloxone and overdose awareness
- Travel and lunch stipend €20 per four-hour shift covered.
- Use your lived experience to help others

Time Commitment

- Phone call screening by the Peer Support Worker
- Day of training at our office in Dublin
- Shadow shifts with the Peer Support Worker
- Shifts are four hours each
- Must be available for one shift a month minimum

Applications are taken ongoing depending on need

Please return the form overleaf to: peersupport@myuisce.org, or **8 Cabra Road, (between St.Peter's Church & Phibsborough Luas Stop)** Or give us a call! **01 555 4693**

We will then give you a call to have a quick chat about outreach and the volunteer role.

Peer Led Outreach Volunteer – Application Form

Name		
Mobile Number		How should we contact you?
Email address		
How did you hear about us?		
Why are you interested in this volunteer role?		
What would make you a good peer outreach volunteer?		

Reference - Please provide the name of someone who know you well and their contact details. This should be someone you are happy to give as a referee.

Name:
Job Title:
Phone number:
Email Address:

AN INTERVIEW WITH – HEP C PEER SUPPORT WORKER



BERNARD WEST
HEP C PEER SUPPORT WORKER –
THE MATER HOSPITAL

Q: *What is your role as a Hep C peer support worker?*

A: I work as a Hep C Peer Support Worker at the Mater Hospital. I go out into the community and carry out information about Hep C, infection (or reinfection for people that have already completed the treatment), testing and treatment. I talk to people about the treatment and the side effects, and I support people that are going through the treatment by attending appointments with them and phone or in person support.

Q: *How do you link with people at risk?*

A: I link with people at places like the Granby Clinic, Ana Liffey, stabilisation programs, homeless services, drug residential programs etc. I am not restricted to one area so I can travel to services in other regions. For example, I work with services like The Red Door Project in Drogheda and services in Kildare. I am grateful that I can access these services and areas outside Dublin city because I think there is less awareness and access to information about Hep C so this job is really important.

Q: *How do you support people that want to access testing?*

A: When I go into a service I do an “information day” about Hep C: the testing, the treatment and the reinfection. I also do an oral swab, and I get results in 15 min. The oral test tells me if the person is negative or positive for the antibody, in other words, if person has ever been exposed to Hepatitis C.
If a person tests positive, I can support them with a referral to the hospital to get some blood work done. The blood work is important to identify if there is hepatitis C active in the body. If the blood work shows active hepatitis C in the body, then they do a Fibroscan. Then we wait the results to come back, and we can start people on the treatment.

Q: What does treatment look like and how do you support people going through it?

A: The treatment takes from 8 to 12 weeks. The first 3 weeks you would need to collect your medication from the Hospital pharmacy. After that, we try to accommodate to people. If a person is going to a clinic for their OAT (methadone) we call them to ask if they can also provide this medication there.

Four weeks after starting the treatment we get the person in again to get more blood work to check if the hepatitis c viral load has gone down, and again after another 4 weeks. This shows us if the treatment is working. I link with people going through the treatment on a weekly basis to talk about how the treatment is going for them, if they are experiencing side effects, if they need information, etc.

I meet people at their appointments, I am available over the phone to answer questions, I follow up with people and remind them about their appointments, I discuss side effects, and whatever people need.

Q: I don't know my Hep C status. What should I do?

A: You can go to a local GP to ask for testing or you can contact me at 083-399-4782 or email bernard.west@eril.ie I can meet you to access testing. If you are in Dublin, you can also access testing at Ana Liffey every second week on a Thursday morning with the Hep C Community Nurse and I am at the Granby Clinic on Tuesday mornings doing testing as well.

Q: What do you think are the biggest challenges for people who are living with HepC at the moment?

A: Stigma is a challenge for people living the Hep C. There is a lot of misinformation about Hep C and people are worried about asking for testing or treatment because of stigma. Also, people don't know that treatment has changed a lot in the last few years. The old treatment used to be really invasive and had quite severe side effects, so people did not want to go through it. The current treatment is not at all like that – it comes in a tablet form that people take every day, and the side effects are minimal: some people may experience headaches, dry skin, diarrhoea or constipation. I am always available if people need support to deal with side effects

Another challenge for some patients is accessing the appointments. I know that people are really busy and sometimes turning up to an hospital appointment can be a lot. Also, there are a lot of people that do not turn up to appointments because of fear. They don't know what type of testing they'll get done, they don't know what the treatment looks like. I hope that by reading this and talking to me people's minds are at ease about testing and treatment.

A Fibroscan is an ultrasound machine for your liver. It identifies any scarring by measuring the stiffness of your liver.



Fibroscan machine

After 3 months there is a follow up appointment to check that the person is cured of Hep C and discharge them. This is the most important appointment of all, and it's called the SVR or Sustained Virological response. This is a fancy way of saying the virus is no longer found in your blood.

Q: Why is it important to have Hep C Peer Support Workers in communities?

A: I believe the Mater Hospital is the first Hospital in Ireland to have a Hep C Peer Support Worker and I think this is a really important role. I am here to answer everybody's questions about the testing and the treatment and provide as much information as possible. I also follow up with people on their appointments, I'll call them the morning of the appointment to remind them, and I go to the appointments with them. Also, I can help with rescheduling if necessary.

Having gone through the treatment myself with the help of a Peer Support Worker, I understand how important it is to have that a person there that can answer all the questions and that has gone through what you are going through. It was really important for me to have a supportive familiar face through the 8 – 12 weeks for the treatment and I hope I can be that for other people now.

I am here to answer everybody's questions about testing and treatment and provide as much information as possible.

Are you living with Hepatitis C or think you may need to be tested?

If SO, would you like:

- To access testing and treatment, if needed?
- To link with a peer support worker who has gone through Hepatitis C treatment?
- Someone to Support You before, during and after the treatment process?

A Peer Support Worker can remind you of appointment and accompany you to the clinic if needed

For more information contact

Bernard West – Hep C Peer Support Worker, Mater Hospital
083 399 4782 bernard.west@eril.ie

HEPATITIS C

CAN'T

WAIT!

**HEPATITIS C
IS CURABLE**

Hepatitis C is an infection of the liver caused by the Hepatitis C virus. Sharing equipment used to snort or inject drugs, having HIV, spending time in prison & having tattoos or piercings in an unsterile setting can put you at risk.



www.hepcpartnership.ie
Call or message us on whatsapp
Mobile No. 083 011 6110



POEMS

MY LITTLE BROTHER (BEFORE, THEN AND AFTER)

by Suzanne

He once held my hand when we walked down the street
He was loved by everyone that he'd meet
I helped him to write and I helped him to read
And sometimes I'd even help with his feed

He was always so lively, so chatty and sweet
I watched his first steps on his so tiny feet
I would always protect him, because I was strong
I'm still trying to figure out where it went wrong

With his curly hair and his lovely blue eyes
If you say him today you would not recognise
That beautiful boy, I still love like no other
It's hard to believe that he's my little brother

That boy I once knew I so dearly miss
I never thought it would end up like this
So I hope and I pray and I beg till I crack
Now that little boy has finally come back

I loved him so much despite all this stuff
But I knew in my heart that enough is enough
Now my little brother is precious and sweet
One of the kindest that you'd ever meet

So all of that bad stuff I certainly don't miss
I just want to hold him and give him a kiss
So this war with drugs, it finally ends
Now my brother and I are very best friends



HEARTBREAK HOTEL

by Gerry O.G

I live in a place full of
broken souls, shadows of a
life gone by,

Believe it or not I live
in such a place, where
laughter has come to die.

It's filled with people from
18 to 80 who go through
life so sad.

Now you're thinking to
yourself there's no possible
way all those people could
mess up so bad.

I swear on my life, I may
be struck by lightning if
what I am saying is a lie.

But then again I'm broken
and alone, so if I'm lying I
won't really mind.

I messed up so badly I
lost all my family, friends,
career and home, but the
worst thing I lost was love
from my life. It left me with
a broken soul.

Next goes respect, then
goes trust. By then you
have messed up so badly,
at this stage now you're a
shadow of yourself barely
recognisable.

Drink and drugs were my
destruction of choice, It
started at a very young
age.

It became my answer to
everything good or bad, so
my whole life I was numb
from real pain.

When family died, when
friends died I'd feel the pain
of their loss, but with the
drink and drugs to numb
the pain I never really
appreciated true remorse.

This is going to be the
strangest thing that I am
probably going to say, but
losing every single person
and thing in my life was the
best thing that happened to
me.

When you hit rock bottom
and by Jesus you do,
people say the only way
is up, and you know what
it's true, but it can still
go wrong, as I found out
pretty soon.

On my way back up I slept
on the streets.

I thought it couldn't get any
worse, but out of the blue
I was struck with pain, and
realized I was paralyzed
too.

After going through the
motions the doctors told
me I had a piece of bone
sticking in my spine,
terrified I asked, would I
walk again and the answer
was maybe in time.

I spent the next year in
the hospital, step by step
learning to walk again.

Horrendous pain but also
determined to have a life
again.

I made a friend working
in the hospital, she's the
saviour of my life. I also
met a friend while on
the street who honestly
changed my life. because
without them both, I
thought about the rope and
would have said adiós to
this life.

Two years later I'm well on
my way, I'm walking with
an aid.

I am hitting the gym, losing
the pounds, and life is far
from grim.

Talking to some of my
family, trying to make
amends.

It's a heartbreaking
process, I destroyed their
lives, I guess only time will
tell.

The past few years I've
been punished, deservedly
for the lives I ruined.

But I'm not even close to
repaying them, maybe
my death when the clock
strikes noon.

I broke the hearts of my
loved ones, in my dreams
I can hear them crack.
knowing they will go
through the rest of their
lives with a heart with some
missing parts.

Now here comes the last
piece, and I am afraid it's
the worst part of all, as you
will have to live with your
demons always there at a
moment's call.

A song, a memory, a face
from your past is all the
trigger it needs, then
you go to your darkness
of places where the light
becomes a shade.

If you let your demons beat
you, then you're alone with
them in the dark, and that's
when they have you again
and just like that you've
relapsed.

Keep yourself busy, and
occupied, surround yourself
with loved ones too, as
this is the way to keep the
demons away and stay out
of the dark and stay true.

The heartbreak Hotel's filled
with sadness, addiction,
loss and regret but from
time to time, our demons
are blind and we escape to
a second chance at life.

MY DEMONS

by Paddy

My journey in my recovery has been the toughest thing
I have ever come through, apart from the death of the
mammy of my children. Since Feb 2019 I have been
through Coolmine Rehab and I graduated on Monday
the 28th of September 2020.

Every day I am fighting my demons. I know my life
is a bit better since I've become drug-free and been
able to rebuild a proper relationship with my children
and things that I am getting back in my life that I'm
so grateful for. I just wish after everything I have gone
through and everything I'm doing to change my life,
my biggest fear is being homeless and being left to the
curb; no home for me or my children to go and be a
proper family, to be a good father and stay on the right
path in life, never going back down the road I've been
on in the past with drugs, crime and horrible stuff I am
not proud of what I done.

I really like the person I am today and being able to do
good by others. I am just so afraid of being homeless
and ending up losing everything in the blink of an eye.
I am so proud of the way I am graduating, but on top
of that the fear of losing everything keeps popping
up. I am not looking for pity or that. I just want the
opportunity in life like everyone else to be a good
person and stay doing the right thing in life, not only
for myself but for my family, friends and any others
that I can help along the way.

RECOVERY DISCOVERY

by Gerry O.G

"I never expected" it would be me one day, saying
excuse me sir, could you spare some change!

Sitting on the cold ground, embarrassed and ashamed.

I am reduced to nothing, not even a name.

Addiction was my best friend, yet destroyed my life.

It helped me push away my family, my children, my wife.

Sadly I was blind to the heartache and pain, I thought
everyone was crazy, I'm the one who's sane.

Bit by bit my life fell apart, everyone I loved, I took a
shard of their heart.

The hearts that I broke, shattered with pain, they will
never, ever be whole again.

Over time, I became all alone, nobody left, no one
to phone.

Nowhere to go, nowhere to sleep, this is my home now,
the Dublin streets.

As time goes by, you learn the way of the streets, where
to clean your clothes, shower and eat.

Every evening, hearts of gold come along, with hot food
and tea, and smiling faces so warm.

These amazing people come night after night.

Hail, rain or snow or a hot summer night.

They look you in the eye, have a chat with a smile,
and make you feel like a person, even for a short while.

But as time goes by, you have to start trying.

You gotta get busy living or get busy dying.

It's Time to make a choice, by only you alone, to rebuild
your life and rebuild your home.

WANTS AND NEEDS

by Paddy

I want a house anywhere
in Ireland just to have my
children back. I don't really
care what the house looks
like once it's liveable and I
can do my own few things
with it.

I want not to do drugs
again and to be able to
control my temper.

I want to help people not
go down the same road as
I did.

If I could wake up
tomorrow to any life, I just
want peace of mind.

I want to be a proud father
with a home for us and
food on the table.

I want to be able to leave
most of my past life in the
past, to keep on my road to
recovery and rebuild my life.

I want to improve a lot
more in my education
and work with others and
hopefully help them, like
others helped me.

I want to go on the right
track in life.

I don't want to be rich,
or nothing, I just want to
be happy and be the best
by my family, friends and
others.

I want to be a good person
not just to others but
myself as well.

Most of all, I want to make
my children so proud of
their Daddy.



It is an exciting time for people as
nightlife reopens after COVID-19
restrictions in Ireland.

**For more information go to
drugs.ie/afterlockdown**

#IfYouGoGoSlow

Remember to continue looking after
yourself and caring for others. It's safer
not to use drugs at all, but if you go,
go slow to help you reduce the
harms to your health.

DRUGS.ie
Drug and Alcohol Information and Support



Plan to take less: Your tolerance could have changed

If you stop using drugs for a while, your tolerance to the drug may have changed. If you take the same amount (dose) as you used to before you stopped, you could be at risk of an overdose.

Check in with yourself: You could be in a different headspace

Avoid using drugs if you feel low, anxious, depressed or have mental health concerns. Using could make your feelings worse.

Drug market changes: Know before you go

We're concerned about the content and purity of drugs at the moment. Club drugs such as MDMA and cocaine have been increasing in strength throughout Europe and can increase the risk of overdose.

New substances could appear in pills, powders and crystals. Synthetic cannabinoids have been found in herbal mixtures, vape and edible products in Ireland. These increase your risk of unwanted effects, becoming unwell and overdose.

Think about the setting: Where are you and who are you with?

Using in new settings or settings you have not been in for a while can impact on how you react to drugs. Be with people you trust.

If you're concerned about your own or someone else's use, call the HSE Drug and Alcohol Helpline on 1800 459 459 Monday – Friday 9:30 am – 5:30 pm or email helpline@hse.ie

Use one drug at a time: Mixing drugs increases the risks

Mixing drugs, including alcohol and prescription medication can lead to unwanted and unpredictable effects and increases your risk of overdose. Learn about drug combinations and interactions on [drugs.ie](https://www.drugs.ie).

Take a test dose: Start low and go very slow

Pace yourself and take a small amount. With high strength and new drugs in circulation, it is important to start with smaller amounts. If you don't feel as expected, consider binning it.

Keep cool and stay hydrated: But don't drink over a pint of water an hour.

MDMA can confuse your body temperature, you feel warm, thirsty and urination is difficult. Drinking too much water to cool down or to try urinating can be dangerous. Too much water may lead to 'water intoxication' that can dilute your blood and flush out essential electrolytes that keep your brain and body working.

Know the signs of a club drug overdose

Temperature, hot flushed or sweaty skin, chest pain, rigid muscles, muscle pain or spasms, difficulty breathing, confusion, headache and seizures can all be signs of a medical emergency.

Don't be afraid to get medical help

Get help immediately at a venue or by calling 999/112. If in doubt about someone's physical or mental health, don't delay getting help.

Stay with the person until help arrives

Always be honest about what you think was taken. Emergency services are there to help.

GARDENING GROUP

At UISCE, we are always trying to create spaces for people who use drugs to come together in groups, share and explore their experience, talk about the issues, and look at what type of things could be done better.

We have recently teamed up with Ana Liffey to set up a group on Thursdays. The group will be doing a bit of gardening and chatting about what's happening on the street. If you are free on Thursdays from 2-4pm come hang out!

We will be doing this, and other groups over the next year so if you're interested in getting together and taking part in something that allows you to have a voice and improve your health give us a shout!

For more information about this group call **015554693** or email **info@myuisce.org**.



Gardening Group Andy, Colin, Claire and Jason





Davina Co-Ordinator Rachel Fayne with Lord Mayor Alison Gilliland

DAVINA PROJECT

Domestic Abuse
Violence Is Never
Acceptable

Q: How did the DAVINA project come about?

A: DAVINA came about when staff noticed that there were a lot of women who come to SAOL that have experienced or who are currently experiencing domestic violence. Many of the women who would talk about domestic violence with their keyworkers didn't want to go to specific services for domestic abuse such as women aid. They were scared of the Gardaí and scared of Tusla and didn't want to go to courts so it was difficult for them to get help. Staff also noticed that many of the women didn't understand the new laws around coercive control and that it is also seen as domestic violence. SAOL considered how much more difficult it is to experience domestic violence when there is also substance use involved as there is even more discrimination and stigma, and it can be very difficult to access refuges and safe houses.

Q: Why is this service important?

A: Davina is important as it highlights the needs of women who are experiencing domestic abuse, who are also substance dependent, as a way of coping. DAVINA is hoping to help services to understand the importance of providing support for both those issues rather than just being sent from one agency to the other. I don't know of any other programme out there that deals with both issues, and the fact that SAOL is working together with SONAS is great. There has been a need for a service like DAVINA for a long time and looking at younger generations DAVINA will hopefully have a ripple affect; if they grow up in more stable environments, then they will have a better life. It has to start somewhere and it's here now.

By working with people who have been through it and come out the other side, they can help other women do the same.

Q: What is DAVINA?

A: DAVINA is a new project within SAOL to address the needs of women who have an experience of Domestic violence and also use substances. It does two things; firstly there is a worker who can offer support and education around Domestic Violence. Secondly it is developing a course for women to learn to spot the signs of abuse, understand the dynamics of abusive relationships, and learn how and where to get help.



Davina Co-Ordinator Rachel Fayne with SAOL Director Gary Broderick

Q: What is the role of peers in this project?

A: The Peers are working using knowledge from their life experience to develop a course for people who have substance use issues and also experience Domestic Abuse. The course will be completely designed by the peers and will be published in a manual that other services can then take up. But it's more than that, by working with the people who have been there and done that, have been through it and come out the other side and had moved forward in their lives they can share and give-back and help other women do the same.



Q: Who can I call if I need support right now?

A: Just because you use substances doesn't mean that services are not open to you; if you need support you can call Women Aid on 1800 341 900. Alternatively if you would like to receive support from DAVINA call SAOL on 01 8553391 and ask for Rachel.



LTR: Karen Galligan (Rethink Ireland) Davina Peers: Jess, Marie, Jacqui, Erica, Davina Co-Ordinator Rachel Fayne, Lord Mayor Alison Gilliland, Davina Peers: Teresa and Sarah.

Developing a course for women to learn to spot the signs of abuse, understand the dynamics of abusive relationships, and learn how and where to get help.

Q: How can people get involved with DAVINA?

A: We will be advertising peer worker positions over the coming year, but if you or your organization would like to become involved in the pilot of the course please contact Rachel at davina@saolproject.ie or 019883391.



SAOL Sisters LTR: Sabrina, Sandra, Shirley, Tracy, Linda, Ray and Caoimhe

UISCE

Advocacy for People who use Drugs

www.myuisce.org

Email: info@myuisce.org

Phone: 01 555 4693