

UISCE MAGAZINE

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HSE Drug Warning



EXTREME RISK

Nitazene-type opioids found in powder form being sold as heroin following recent cases of serious overdose in Dublin.

Ongoing concern

Nitazenes are strong synthetic opioids that can cause serious overdoses, hospitalisation and drug related deaths.

Appearance

Nitazene can be found in pills or powder. Current overdoses linked to powder. Powders may vary in colour.

Recommendation

Treat all substances with caution. You can't be sure of what's in it or its strength. Mind yourself and care for others. Don't be afraid to get medical help if you or a friend feels unwell after using drugs.

We ask you to be extra cautious at the moment and always carry naloxone.

Do not buy:

- new types of drugs
- new batches, or
- from new sources



#ReduceTheHarms

DRUGS.ie

UISCE

Advocacy for People who use Drugs

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WELCOME BACK READERS!

It's been an emotional and productive year in UISCE, and for all the people we know, love and work with it. We have once again had a high level of drug related deaths, and we need to ask ourselves how many of them could have been prevented? We had two Red Alerts issued in Dublin and Cork in the last few months for a synthetic drug called nitazenes which was being sold as heroin. It can be up to 75 times stronger than heroin.

This resulted in a huge number of overdoses and trauma for People who use Drugs, our families and the wider community.

We have seen great work done, with People who use Drugs leading out on finding out what's not working and putting forward solutions to change things. UISCE continues to work with everyone, our partners, services, the state, and anyone

else who is looking to make things better for us all.

We had the Citizen's Assembly on Drugs Use which has some great recommendations that if implemented, we can really get to a place where we live in strong communities with healthy people who are not shamed because of their use of drugs, where they come from and who people 'think' they are.

So, turn the page, tune in, and have a read of what needs changing, and how we are doing it! There are loads in here from us and all the other people and groups working for change.

Have a safe Christmas and if you can try reconnecting with yourself and remember, there is hope and things WILL change if we continue to work together!!

ACKNOWLEDGMENTS

We are very thankful to all our peers who give so much to make UISCE what it is. It's not possible to do this without you, it's also impossible to do it without all the great people and organisations from across our communities and the sector who we work with, you are too many to mention. YOU KNOW WHO YOU ARE!!

Minister Naughton is a big supporter of making sure those who are the most impacted and have the most experience are driving change- she has a special message for you all. Thanks, Minister. We have contributions from Pavee Point, Chrysalis, Recovery College, EuroNpud, Frontline and Jenny Smyth.

We have a special mention to our peers Adele Leahy and Gerard O Keefe for their poetry, and we have a big thank you to our funders in the NICDATF and HSE CHO 9 Social Inclusion. Your continued support through funding and working with us on what's going on is vital.

HEARING THE VOICE OF PEOPLE WITH LIVING AND LIVED EXPERIENCE OF DRUGS, BY HILDEGARDE NAUGHTON TD, MINISTER OF STATE WITH RESPONSIBILITY FOR THE NATIONAL DRUGS STRATEGY.

As Minister with responsibility for the National Drugs Strategy, I look forward to reading the final report of the Citizens' Assembly on Drug Use which is due at the end of this year.

Never before have we had such a meaningful and informed discussion around an issue which affects people in all communities, rich and poor, in all parts of the country, urban and rural. UISCE played an important role in the Assembly's deliberations, through personal testimony, providing expertise to the Lived Experience Group and contributing a series of videos which were shown to members.

The view of the Assembly, set out in a press release issued last October, is clear: "The State needs to take a far more progressive, ambitious, comprehensive and coherent approach to drugs use in Ireland", it said. The report will set out in more detail the rationale for its 36 recommendations, and in 2024 a Dáil committee will further discuss the issue. Ireland, like many other countries across the EU and further afield, has a drug problem.

According to the most recent Healthy Ireland survey, 7% of the population had used illicit drugs in the previous year, with 3% reporting use in the previous month.

The budget to tackle addiction has risen in recent years, with some €145 million spent last year. More than 12,000 people benefited from treatment for problem drug use in 2022, versus just over 9,227 in 2016.

There have been many successes: Very few young people inject heroin or other opioids, and HIV rates have significantly reduced. Lives were undoubtedly saved during the recent spate of overdose cases in Dublin and Cork through use of Naloxone, often administered by family, friends or peers trained in its use. Next year, the first medically-supervised injecting facility will open on Merchants Quay, as will the Dublin Simon Community's medical facility for people who are homeless and with addiction on Usher's Island. But more funding – at least in the short term - is needed to build and expand education programmes to highlight the inherent risks associated with problematic drug use, to getting the treatment capacity right and the various services in place to give people the best chance of recovery.

One of my early engagements after being appointed as minister was with Uisce coordinator Andy O'Hara. During the course of a very useful meeting, Andy explained the work of Uisce, set out some concerns he had and described the attitude of some to people who use drugs (PWUD).

PWUD did not feel listened to, he said, many felt invisible. Others felt available services were not designed to cater for individuals. Mothers grappling with addiction were reluctant to seek help due to stigma and the fear of their children being taken away from them. Others wanted to return to work but didn't have a clear pathway.

The Government understands that addiction is a health issue and is working hard to get people access to the services they need.

Uisce plays an active role in government policy on drugs through its membership of the national oversight committee and its contribution to the strategic action plan for the national drugs strategy. Hearing the voice of people with living and lived experience of drugs ensures that policy is relevant, informed and client-oriented.

Later next year, the Department of Health will begin preparations for the next national drugs strategy. I expect that Uisce and similar organisations representing people with lived experience will play an important role in developing the new strategy.

Uisce also contributes to the delivery of services to hard-to-reach groups, such as training in the administration of naloxone. Uisce has informed the development of the supervised injecting facility and is currently working with MQI to support the delivery of existing and new services for homeless people using drugs.

Central to the Uisce approach is the use of peer workers in the delivery of health services for people who use drugs. Peers bring many strengths to service delivery – trust, understanding, availability and personal contact. There are more and more examples of peer working in the delivery of healthcare services to socially excluded groups which is welcomed.

Since taking responsibility for this area, I have secured additional funding for more treatment episodes, for education and awareness programmes, and for specific measures around recovery.

I know that more is needed, and I will continue to work hard to deliver what is required.

The voice of people with living and lived experience of drugs, expressed through organisations like Uisce, is so important in helping policymakers and politicians ensure that people get the right care, in the right place, at the right time.

My aim is that people who use drugs can access appropriate health services and not feel stigmatised and marginalised. If ever there was a reminder of the need for us all to be careful and to watch out for one another it is the terrible spate of overdoses in Dublin and Cork over recent weeks.

The HSE, emergency services, An Garda Síochána, NGOs and other agencies did superb work in helping people in distress and ensuring that the wider public and PWUD were aware of this dangerous batch of drugs.

But peers deserve enormous credit too. Thanks to your efforts, lives were saved. Family and friends did not have to go through the horrible ordeal of learning about the death of a loved one.

For all your work, thank you.



RECOMMENDATIONS FROM THE CITIZEN'S ASSEMBLY ON DRUGS USE

Hi all,

The Citizen's Assembly on Drug Use has been completed. They have made 36 recommendations. The final report will be published before the end of the year. That will have more detail and give us more specifics on what needs to be done. In the New Year, we will run workshops on what was recommended, what it means, and what we can do to ensure the change happens.

In the meantime, see below:

The Citizens' Assembly has recommended that the State pivots from the status quo to a comprehensive health-led response to drugs, including decriminalisation for people found in possession of drugs for personal use. The details of how decriminalisation can be legislated for is a question that the Oireachtas should determine following detailed legal scrutiny.

The Assembly has identified a number of important questions that the Oireachtas should examine, including how best to balance the objectives of decriminalisation, diversion and dissuasion.

The Assembly has also made a series of recommendations about how drugs services should be better resourced and coordinated, and how drugs policy should be given greater priority by Government.

Commenting on the recommendations, the Chair of the Assembly, Paul Reid, stated: *"The Assembly has stated loud and clear that the State needs to take a much more ambitious and progressive approach to dealing with drugs in Ireland. The Assembly recommendations call for significant change to how drugs issues are dealt with, including by the political system, by the criminal justice and health systems,*

and by the community and voluntary organisations providing supports across the country.

There is no time to waste here. There has been much talk in recent years about the Portuguese approach to drugs. The Citizens' Assembly has now recommended an Irish version of the Portuguese model. The Assembly's final report will be submitted to the Oireachtas on schedule, by the end of this year. The ball will then be firmly in their court."

1. The National Drugs Strategy should prioritise a systemic approach to recovery.
2. The Government should introduce a 'Health in all Policies' approach to policy development.
3. The State should formalise, adopt and resource alternative, health-focussed options for people with a drug addiction within the criminal justice system.
4. The Department of Justice and the Irish Prison Service should develop, and fund enhanced prison-based addiction treatment services.
5. The State should introduce a comprehensive health-led response to possession of drugs for personal use.

Explanatory Narrative: Under a 'Comprehensive health-led' approach, the State would respond to drug use and misuse primarily as a public health issue rather than as a criminal justice issue. While possession of controlled drugs would remain illegal, people found in possession of illicit drugs for personal use would be afforded, first and foremost, extensive opportunities to engage voluntarily with health-led services.

Depending on how the legislation was designed, this approach would minimise, or potentially completely remove, the possibility of criminal conviction and prison sentences for simple possession.

6. Government should give greater political priority, prominence to drugs policy and related issues. A dedicated Cabinet Committee chaired by the Taoiseach, supported by a Senior Officials Group, should consider and publish a detailed annual report on drug trends and emerging risks. The Department of Health must be supported in providing effective leadership and coordination of the work of the National Oversight Committee for the National Drugs Strategy.
7. The State should take urgent, decisive and ambitious action to improve its response to the harmful impacts of drugs use, including implementing necessary legislative changes.
8. Government should prioritise drugs misuse as a policy priority, as part of an overall socio-economic strategy.
9. Government should recognise that an effective national response to drugs-related issues requires whole of government policy coherence, operational cohesion and effective leadership.
10. Government should publish a new iteration of the National Drugs Strategy as a matter of urgency. A first draft should be published by June 2024 for consultation, with the recommendations of the Citizens' Assembly as a key input. The next Strategy should contain annual action plans with measurable targets and objectives, clear designation of responsibilities, and regular reporting on implementation and expenditure.
11. The Government must assign accountability, at the highest level, related to the State's response to problematic drug use, including the implementation and tracking of the progress of the recommendations of the Citizens' Assembly.
12. Government should ensure effective stakeholder involvement in implementing the next iteration of the National Drugs Strategy.
13. Drugs policy should prioritise the needs of vulnerable and marginalised groups and disadvantaged communities.
14. Drugs policy design and implementation should be informed by service users and people who use drugs as well as family members of people affected by drugs, with provision of appropriate supports to enable this involvement.
15. Government should work with key stakeholders to build an effective whole of society response to drugs-related issues.
16. Government should allocate significant additional funding on a multi-annual basis to drugs services across the statutory, community and voluntary sectors, to address existing service gaps, including in the provision



- of community-based and residential treatment services, to support the implementation of the recommendations of the Citizens' Assembly. This funding should ensure geographic equitability in terms of access to statutory services, as well as providing for accountability, transparency and traceability of allocations.
17. The Government should allocate additional resources to fund a significant increase in community-based and residential treatment and recovery services as an alternative to custodial sentences for people with problematic drugs use, where appropriate.
 18. The Government should examine the potential of novel funding sources to support increased drug services within the health and criminal justice systems, and in the community and voluntary sectors. Any novel funding should be secured, tracked and ringfenced for drug services expenditure.
 19. Key stakeholders should publish a joint report on an annual basis detailing total and disaggregated expenditure and channels of funding provided for drug-related services in Ireland, audited by the Comptroller and Auditor General.
 20. The next iteration of the National Drugs Strategy should include a strategic workforce development plan.
 21. A minimum, mandatory basic training should be implemented for personnel across education, health, criminal justice, prison and social care services on trauma-informed and problem-solving responses to addiction, and health-led response options for those presenting with problematic drug use or addiction.
 22. The Government should recognise, value and adequately resource the role of family members and extended support network in supporting people affected by drugs use, and their children. Kinship carers and children should have the same rights as foster carers and foster children, and this should include legal rights and monetary rights on a non means-tested basis.
 23. The next National Drugs Strategy should seek to optimise services to ensure continuity of care and joined-up care for all service users, including people with complex and/or specific needs.
 24. The National Drugs Strategy should continue to prioritise the objective of reducing illicit drugs supply and associated structures, at international, national and local level within communities.
 25. The Government should develop and expand the use of alternative pathways for young people engaged in low-level sale and distribution of drugs. The Assembly recommends that the judiciary adopts the widespread use of restorative justice and diversion initiatives in these cases, with enhanced investment in community-based youth work and community development projects and initiatives.
 26. The National Drugs Strategy should focus on building resilient, sustainable communities through local partnerships in both urban and rural settings, and stronger community policing.
 27. The National Drugs Strategy continue to prioritise the objective of tackling the source and impact of drugs-related intimidation and violence, and take a zero-tolerance approach.
 28. The National Drugs Strategy should use evidence-based approaches to harm reduction, and take measures to reduce the barriers to implementing harm-reduction approaches without undue delay.
 29. The National Drugs Strategy should include a detailed action plan to enhance Ireland's approach to prevention of drugs use.

30. The Department of Health should develop a strategy to enhance resilience, mental health, well-being and prevention capital across the population, including a focus on providing therapeutic supports for children and young people, and for people dealing with trauma and adverse childhood experiences and dual diagnosis.
31. The Departments of Health and Education, in conjunction with the HSE, should design and implement a comprehensive, age-appropriate school-based drug prevention strategy for primary school children, junior and senior cycle secondary students, and wider community settings, as well as their parents/guardians and teachers. Prevention programmes should utilise external experts to deliver to classrooms, supporting teachers, with regular updating by the experts to the schools.
32. The Department of Health should roll out regular national public health information campaigns, focusing on reducing shame and stigmatisation of people who use drugs, prevention, risk mitigation and advertising services.
33. Referral of submissions received by the Citizens Assembly from the general public and stakeholders on Drugs Use to inform the development and implementation of the next National Drugs Strategy.
34. Referral of certain submissions received by the Citizens' Assembly on Drugs Use to appropriate authorities.
35. The next National Drugs Strategy should incentivise and promote evidence-based innovations in service design and delivery, prioritise the evaluation of pilot projects and emphasise the timely mainstreaming of best practice nationally and internationally.
36. The National Drugs Strategy should include a plan to strengthen the national research and data collection systems for drugs to inform evidence-based decision-making.





SITS

BY GERARD O' KEEFFE

SOME MOTHERS CHILD

SITS ON THE BRIDGE

GETTING SOAKED

IN THE POURING RAIN

A LOOK OF DESPAIR IS ON HER FACE

HER EYES ARE FILLED WITH PAIN

HER CHEST HEAVES

FROM A RACKING COUGH

AS PEOPLE HURRY BY

OBLIVIOUS TO MOST

SHE SHIVERS AND SHAKES

NO ONE STOPS TO ASK HER WHY

UNSEEN BY THE CROWD

WE HAVE BECOME IMMUNE

TO THE INJUSTICE IN OUR TOWN

THE HOMELESS ARE FORGOTTEN

AND OUR GOVERNMENT

LETS THEM DOWN

UISCE's Strategic Goals & Actions

Alright folks, we have been flat out implementing all the actions you wanted put into the strategy. So, as you can see from our Goals, we are working away on a lot of the actions we developed. The main thing is we make sure people who are the most impacted and have the most experience on drugs are leading out on deciding what we do, and how we do it.

A lot of the actions are ongoing, so they are a work in progress. We have highlighted the actions we have completed work on, and you can see what that looks like in 'Our Work' and 'How We Do It'.

We will give you a quick rundown of what we have been doing, if you want to know more, or get involved contact us asap!!



Goal 1:

To build a resilient organisation which promotes and develops a high level of participation, inclusion, and meaningful engagement with PWUD.

Actions

To continue to prioritise peer engagement and outreach over the lifetime of the Strategy.

To develop a model of best practice of engagement with PWUD through peer led outreach.

To develop creative tools to engage PWUD in workshops/sessions that allow them to identify the issues and develop collective responses through their lived or living experience which values their role as experts.

To create opportunities to bring together individuals and groups interested in discussing and collaborating on issues for PWUD.

To advocate for, enable and support greater participation of people with lived experience in all relevant matters and at all relevant spaces.

To facilitate the creation of an UISCE Advisory Board of PWUD.

To ensure the full participation and influence of the Advisory Board in all aspects of UISCE's work

UISCE's Strategic Goals & Actions

Goal 2:

To continue to strengthen engagement with PWUD and relevant organisations locally, regionally and nationally.

Actions

To continue to build and strengthen our relationships with Drug and Alcohol Task Forces.

To research and map the current level of participation of PWUD within the networks and to develop models of best practice.

To establish a peer-led National Drugs Network which will create a platform for local and regional task forces and other relevant organisations to promote the participation of PWUD and ensure stronger representation nationally.

To continue to identify and engage with PWUD that experience intersectional discrimination (e.g., Traveller Community, LGBTQ+ community, sex workers, homeless population, prison population, etc.).

To seek participation of PWUD that experience intersectional discrimination as representatives on the peer-led National Network and to foster engagement with these communities.

To continue to support PWUD through advocacy and to empower PWUD by building capacity and providing support, tools and information needed for self-advocacy.

Goal 3:

To enhance and further develop our communications to challenge discrimination and stigmatisation and to foster a greater understanding of the rights of PWUD.

Actions

To continue to identify and engage with PWUD that experience intersectional discrimination (e.g., Traveller Community, LGBTQ+ community, sex workers, homeless population, prison population, etc.).

To ensure UISCE's online presence reflects the direction of this Strategy and the inclusive and participative nature of the organisation.

To continue to challenge negative stereotypes that impact PWUD.

To plan and organise creative workshops each year of the Strategy aimed at empowering PWUD to fully participate in communicating messages relevant to them.

To support PWUD to develop campaigns to highlight issues of concern and to challenge stereotypes that limit their full participation in society.

To collate, evaluate and share information relating to trends and patterns of drug use.

To create platforms for PWUD to have a voice on issues they identify (e.g., podcasts, videos, etc.).

UISCE's Strategic Goals & Actions

Goal 4:

To maintain and further develop strong relationships with relevant services to ensure effective collaboration that seeks to address the inequalities experience by PWUD.

Actions

To continue to support services to improve participation of PWD in decision making processes.

To continue to work collectively with community partners identified in the National Drug Strategy.

To continue to implement the National Drug Strategy key actions in which UISCE has been identified as a relevant stakeholder in conjunction with partner organisations, statutory agencies, and the community of PWUD.

Goal 5:

Promote a health led approach in partnership with PWUD and relevant stakeholders.

Actions

To continue to promote harm reduction information, support and advocate for the geographical availability of harm reduction services, and support PWUD to link with relevant services.

To advocate for harm reduction initiatives, including increased availability and uptake for testing and treatment for blood borne virus infections (Hep C and HIV).

To continue to work with identified partner organisations to advocate for the delivery of the National Drug Strategy commitment to establish a pilot supervised injecting facility.

To develop and share accessible harm reduction resources that are relevant to the community of PWUD.

To continue to advocate for increased access to Naloxone for the wider community at local, regional, and national level.

To continue to facilitate Naloxone training programs and to advocate for peer-led overdose response initiatives.

To continue to work with the HRB and other research bodies to advocate for meaningful engagement with the community of PWUD in all relevant research.

UISCE's Strategic Goals & Actions

Goal 6:

To continue to work with PWUD to promote and support the decriminalisation of drug use and the people who use them.

Actions

To advocate for the meaningful participation of the community of PWUD in all relevant discussions regarding decriminalisation.

To stay informed of research on national and international models of good practice where health led approaches achieved positive outcomes.

To support research which highlights current health led approaches and best practice in relation to drug possession for personal use and the decriminalisation of PWUD.

To develop submissions and recommendations on issues related to the decriminalisation of PWUD and wider drug policy.

Goal 7:

To develop the organisation of UISCE to ensure that the systems, policies and structures in place are effective and capable of delivering on this Strategic Plan.

Actions

To carry out a review of all UISCE policies to ensure that the organisation has clear governance arrangements in place and to ensure compliance with all relevant legislation.

To put in place a process of annual self-assessment of compliance with all relevant legislative and governance obligations.

To conduct a review of the structure and roles in UISCE to ensure that all available resources are appropriately aligned to delivering on this Strategy.

To introduce personal development planning and performance reviews.

To work with our funders to ensure that UISCE is appropriately resourced to deliver initiatives arising from this strategy.

To develop and implement an evaluation plan for the delivery of the strategy.

UISCE - OUR WORK

PEER-LED OUTREACH

In 2023 UISCE delivered 48 outreach sessions, engaging 534 people. The way we work is some of our peers become peer volunteers. A peer is someone like us, who has living and lived experience of using drugs and everything that goes with it. Every six weeks our peer volunteers and staff sit down and make a plan on where we need to go, who we need to engage, what issues are coming up and what we need to do about it.

That means we know our outreach is led by people on the ground and is best placed to know what is going on immediately and try and respond quickly. Some of the stuff coming up is the issues in how people are treated, how there is a lot of stigma and shame. There is massive issues regarding homelessness or homeless accommodation, people are finding it hard to access some services, and treatment. Mental health is an issue for a lot of people, with People say they don't feel comfortable making complaints because they can be punished in some places.

We know the drug trends are a concern for People who use Drugs. A lot of people are using different drugs, and people can't tell what is in them. Across the country people are using opioids, crack, tablets, weed, crystal meth, speed, powder cocaine, ketamine, mdma, among other things. A lot of the drugs are mixed, sometimes with synthetic drugs (made in a lab) and can be homemade so the potency, purity or what's in them can change. It also means the effects can be different or more dangerous.

We had the very worrying overdose crisis in November in Dublin, with the HSE issuing a red alert, it was reported that 57 overdoses happened in Dublin over a 4-day period. We then had a red alert warning in December for Cork City with 13 overdoses as of the 11/12/23. Both were related to traces of nitazene found in what was being sold as heroin. This is a synthetic opioid that is 25 times stronger than fentanyl which is 50 times stronger than heroin.

PEER INFORMED PLAN TO PREPARE AND RESPOND TO SYNTHETIC OPIOIDS

The UISCE Peer Outreach Team have been central to gathering knowledge, sharing harm reduction information, and providing peer-led street training and access to naloxone and the identification of drug trends and behaviours leading up to the first crisis based on an Overdose Prevention Strategy they developed to respond. This was informed by their experience, what they are seeing on the street and what is being done to respond in other jurisdictions. They have developed this a starting point and were hoping we could work together to develop a response with the relevant stakeholders.

NALOXONE

In 2023 UISCE has delivered 34 Naloxone Training sessions, trained 423 people, and dispensed 387 lifesaving kits. We are aware of many peers who have saved a life by administering naloxone. We have five peers who are trained as trainers, so all our training is led by people who have experience of using drugs, have been saved by naloxone and/or have saved a life with naloxone.

ISSUE BASED WORKSHOPS

We continue to make sure our workshops are led by what is going on for our peers, and that they are co-facilitated by people who raise them.

We ran over 57 groups which engaged a total of 91 people engaged in those groups. Some of the highlights were the Citizen's Assembly on Drugs Use workshops, a drama group based on Paulo Freire's Pedagogy of the Oppressed, and the workshop developed by a group of women with lived and living experience of drugs who are engaged with Tulsa and have kids in the care of the state. They wanted to develop a space to see how they could address the power imbalance between themselves social workers and then inform social workers, Tulsa and other stakeholders on how we can improve the system for women, their children, and the wider community.

CAMPAIGNS

It's vital People who use Drugs have the opportunity to challenge stigma, and put forward solutions to current problems. In 2023 UISCE peers ran 3 campaigns- Now You See Me, Support Don't Punish and the UISCE submission to the Citizen's Assembly on Drugs Use- What We Say campaign.

We also had peers speak at 3 different weekends at the Citizen's Assembly, and performed excellently on RTE radio, Upfront with Katie Hannon and Primetime. We are well able to speak for ourselves on drugs and drug policy!

ADVISORY BOARDS

One of the ways we can increase the participation of our peers in decision making is peer-led structures that share power and focus on solutions that can improve outcomes. In 2023 UISCE set up its own Peer-led Advisory Board, it has also supported the peers and management in the National Drug Treatment Centre to set up the NDTC Peer-led Advisory Board, we have worked with peers and the HSE to create the Peer-led Naloxone Advisory Group. We are currently supporting a group of independent Travellers with lived experience who have set up their own independent Peer-led Traveller Advisory Board on Drugs. This is supported by UISCE and Pavee Point Drug and Alcohol Programme, however it is independent of organisations, but seeks to work directly with organisations, services, and policymakers.

Here is a flavour of aims and objectives in some of the Terms of Reference from some of these structures.

AIM

The overall aim of the (Named organisation) Peer Led Advisory Board is to increase the participation of peers in the structures of (organisation) and to work in partnership with the (organisation) to embed a culture of participation from the ground up that can ensure peers can play a lead role in the design, delivery, and evaluation of (organisation) initiatives.

OBJECTIVES

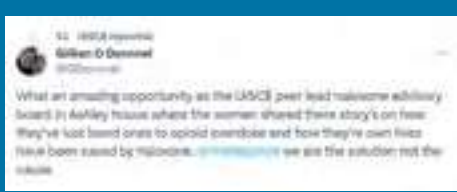
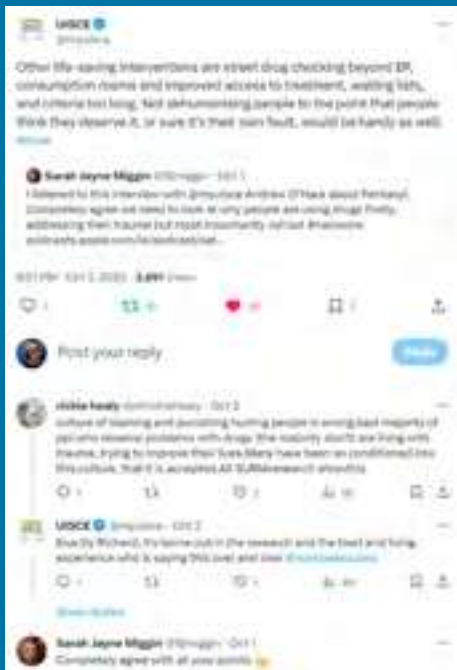
1. To increase the participation of peers in decision making process'
2. To embed a structured approach to the engagement of peers that is set out in the (organisation) policies and procedures.
3. To advise (organisation) on all organisational actions that impact peers who access the service, now or in the future.
4. To assess and evaluate current Policies, Procedures, Protocols and Guidelines (PPPG) relating to patient care.
5. To lead on developing continued engagement methods for peers.
6. To work with the (organisation) to identify and develop peer led training, research and/ or campaigns to de-stigmatise people who use drugs, or address issues experienced.
7. Engage with staff representatives/groups/ management to identify current or emerging issues and develop collective responses.
8. To support the (organisation) to improve outcomes for peers who access the service.
9. To ensure peers have a key role in influencing strategic plans and actions.
10. To discuss broader issues that affect people who use drugs, which directly impact the (organisation) and those who access the service.
11. To increase the skills and opportunities of Advisory Board members.

UISCE

Advocacy for People who use Drugs

'How We Do It'





'How We Do It'

UISCE member
Hilary Naughton @hilarynaughton

Such an insightful meeting with peers at @uisceuk. It is so important that policy is steered by the lived experience. Looking forward to working with the team in the time ahead and seeing them go from strength to strength. [#UISCE](#) [@uisceuk](#) [@uisceukuk](#)

UISCE @uisceuk · May 24
 Great meeting between @hilarynaughton and @lauraculnan @UISCE_UK and peers this afternoon. The peers represented well, with valuable inputs which were taken on board. We look forward to creating change together. [@UISCEuk](#) [@UISCEukuk](#) [@UISCEukuk](#) [@UISCEukuk](#) [@UISCEukuk](#)



UISCE member
Sammy Smyth @sammysmyth

The Peer Led Needle Advisory Group along with UISCE's Community Development Officer participated in naloxone training today demonstrating their capability and ability to increase the awareness and role of naloxone in reducing fatal opioid overdoses through peer intervention.



UISCE member
National Harm Reduction Coalition @nationalharmreduction

"Overdose prevention centers not only prevent fatal overdoses but also support the very people that don't get any other forms of support," Laura Culnan, executive director of @uisceuk said [@uisceukuk](#) "This is a local public health intervention."



UISCE @uisceuk · Oct 2, 2022 · 4,864 views

You Retweeted

Citywide @drugscrisis · 28 Nov
 Delighted to report on a second successful day of our Drugs Task Force community reps training course. Today's inputs were from [@jerry233](#) at @drugscrisis and Andy O'Hara from @myriaduk. Course is hosted by Uruus at @EVAPT28



UISCE @uisceuk

Every day at UISCE. Now you see the Campaign for [@uisceukuk](#) to ensure the voices of women are heard on the CA on Drugs. Video made by @WUPU to create a platform for those with the most experience but most excluded. [#WomenEquatingChange](#)



UISCE @uisceuk · Nov 3, 2022 · 3,487 views

A massive thank you to all the peers who interested with Assembly members today and yesterday. Everyone we spoke to realises people with living experience of the issues must be part of designing new policies, programmes, and approaches. [#UISCEassembly](#) [@uisceuk](#)

Nick O'Connell @nickoconnell · May 18
 Had an absolutely great day attending the @UISCEassembly of lived & living experience @CAonDrugs @CA @UISCE @UISCE @UISCE



Citywide @drugscrisis · 03 Oct
 Listen now to Episode 5 #UnleashStories On Me Da's Shoulders, our activist tells her story of growing up in the North Inner City and the particular impact on women of our current approach to drugs.

link.gokaudplay.com/u/sGQF0NJKQ7QB
podcasts.apple.com/ie/podcast/unleash-stories-on-me-das-shoulders
open.spotify.com/show/D4smqBTVV

“
 Women who use drugs are judged much, much harsher. I remember women waiting till their children were 17, 18 before they reached out for help, because of the fear their children would be taken off them.
”

Episode 5
 On Me Da's Shoulders

1 0 11 437

UISCE @uisceuk

Getting ready for the @UISCEassembly an @UISCEukuk with one of our peer groups. [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#) [@uisceukuk](#)

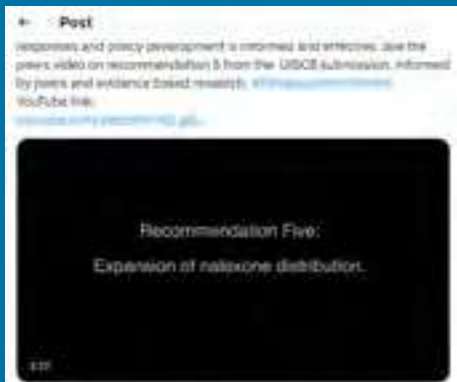


UISCE @myuisce

'Partnership with patients & service users needs to be a cornerstone of how we work across our health system and broader health sector' said [@BernardGloster](#) it is also set out as a priority in the NDS. Current levels are low, which correlates to the outcomes experienced. To address we need an independent national framework developed by peers from the ground up. UISCE set this out in it's strategy [#PeerPartnershipforChange](#). Hopefully the [@CitizAssembly](#) recommends this: youtube.com/watch?v=iu5jwR...

Recommendation One:
 Peer participation and community engagement with People who use Drugs.

Recommendation Six:
 Implementation of safe consumption spaces.



SNOWFLAKES

BY GERARD O' KEEFFE

THE SNOWFLAKES FALLING GENTLY

TURN DUBLIN CITY WHITE

THE TEMPERATURE IS DROPPING FAST

BE WELL BELOW TONIGHT

A SLEEPING BAG IS ALL HE HAS

AGAINST THE ARTIC CHILL

PRAYING HE WILL SEE THE MORN

HE IS NOT TO SURE HE WILL

HE HAS LOST MANY FRIENDS

WHO DIED FROM BEING COLD

HE IS NEARLY 30

NOT EXPECTING TO GROW OLD

IN SUCH A WEALTHY NATION

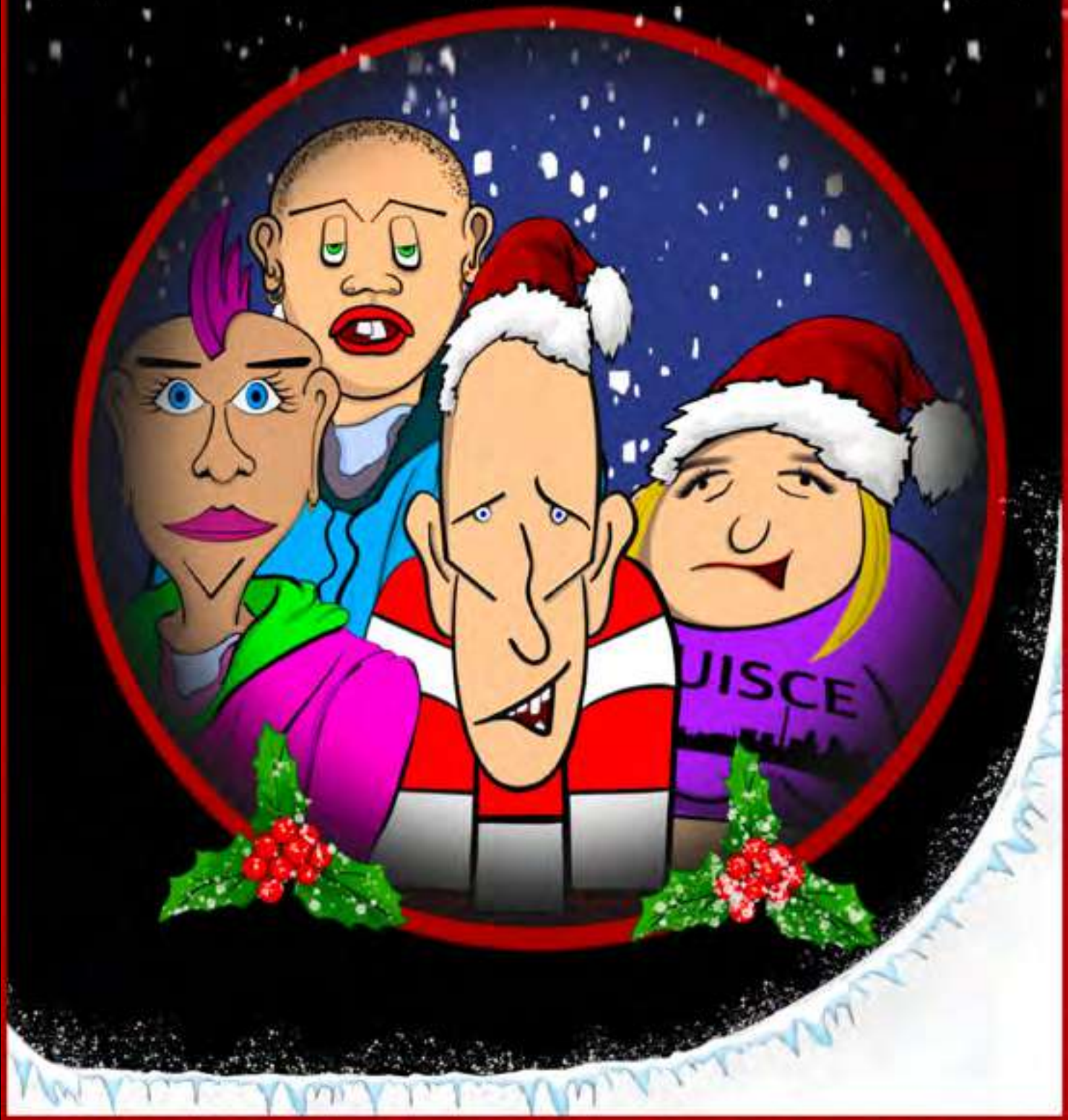
HOW CAN THIS BE

WE ALL SHOULD BE EQUAL

A HOME FOR YOU AND ME

BRASS MUNKIE.

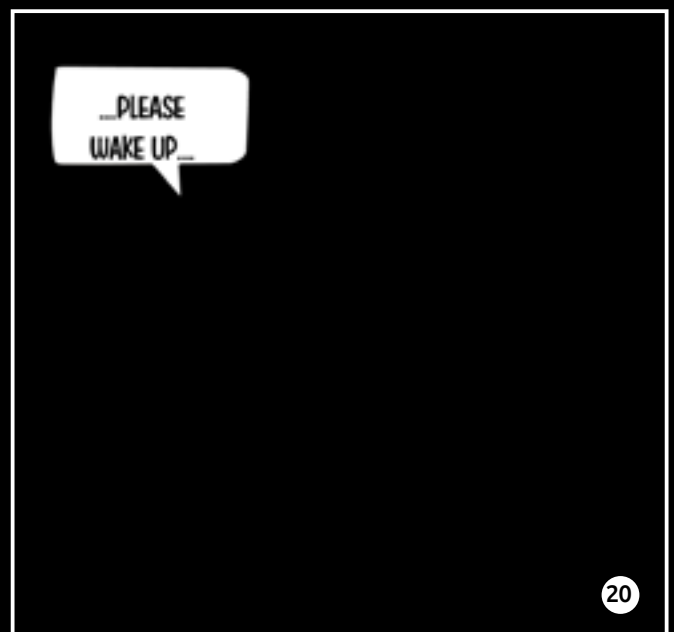
Issue 43 | Christmas 2023



























DRUGS.ie

Drug and Alcohol Information and Support



HSE Drug Warning



EXTREME RISK

Nitazene-type opioids found in powder form being sold as heroin following recent cases of serious overdose in Dublin.

Ongoing concern

Nitazenes are strong synthetic opioids that can cause serious overdoses, hospitalisation and drug related deaths.

Appearance

Nitazene can be found in pills or powder. Current overdoses linked to powder. Powders may vary in colour.

Recommendation

Treat all substances with caution. You can't be sure of what's in it or its strength. Mind yourself and care for others. Don't be afraid to get medical help if you or a friend feels unwell after using drugs.

We ask you to be extra cautious at the moment and always carry naloxone.

Do not buy:

- new types of drugs
- new batches, or
- from new sources



#ReduceTheHarms

DRUGS.ie

UISCE

Advocacy for People who use Drugs

PEER LED OUTREACH VOLUNTEER - APPLICATION FORM

Name	
Mobile No.	
Email address	
How do you prefer to be contacted?	Telephone <input type="checkbox"/> Email <input type="checkbox"/>
How did you hear about us?	
Why are you interested in this Volunteer role?	
What would make you a good Peer Outreach Volunteer?	

TO APPLY FOR THIS POSITION

BY POST: Detach this form and Post to: **UISCE, 8 Cabra Road, Dublin 7, D07 T1W2**

BY EMAIL: Photograph your completed form and email to: info@myuisce.org

CIRCLE: PEER TO PEER OVERDOSE PREVENTION PROGRAMME

Circle is a peer skills and education programme on overdose risks, prevention and management. This peer programme supports people who use drugs to understand overdose risks, take steps to prevent overdose and manage effectively if they are around someone who is overdosing. The programme is accessible to the most marginalised groups such as those with literacy issues, experiencing homelessness, mental health issues or English as a second language.

Circle represents the circle of peers who through shared lived/living experience understand each other and through participating in this peer programme can help increase peer skills, understanding of overdose prevention and management of overdose including peer administration of naloxone if they witness someone overdosing. The Circle programme image is the naloxone programme reverse arrow, a helping hand and a group of peers which makes the circle.

Each Circle programme will be facilitated by two staff members with between six and eight peer participants.

- Peers must be active opioid users or in regular contact with active opioid users.
- Peers are asked to commit to the peer contract contained within the Circle training manual and volunteer in the role of a Peer-to-Peer Overdose Prevention Worker for 6 months.

- Funding has been provided by the HSE NSIO to each service facilitating a Circle programme to pay each peer participant €20 per session for:
- Five one hour 20-minute training sessions – one per week over a five week period
- Six supervision sessions – one per month after completion of the programme



(The Circle Programme is a nationwide rollout of the TOPPLE Programme, which was developed by Novas in 2014).



Circle Peer to Peer Overdose Prevention Programmes

INDEPENDENCE IN THE DRUGS SPACE



Crainn (which means 'tree' in Irish) has been active as a community since some time in 2010. It started as an online platform for Irish drug users to connect with each other in a non-stigmatised space. Crainn aimed to facilitate and encourage a rational conversation around drugs, drug use and the policies surrounding drugs.

By 2021, our group had grown to around 30,000 members. This marked for us the beginning of our ongoing public drug policy reform campaign which is calling for a radical reshaping of Irish drug policy.

Our project revolves around bringing the conversation around drugs to the wider public, representing the under-represented non-problematic drug users, medical cannabis patients and those victims of the criminal justice system.

We have always been an independent organisation. We are in receipt of zero funds, have no employees and run our campaigns on a frugal budget. Our committee is made up of volunteers from diverse backgrounds such as the healthcare sector, the educational sector, business and agriculture.

Our campaign is driven by the lived experience of the drug users that we speak to and engage with on our platforms every day. For example, one of our most successful campaigns was to bring awareness to contaminated cannabis - after we heard first-hand reports from our members about being hospitalised or experiencing emergency situations.

This blend of independence and being interconnected with an active and engaged community has meant that our campaigns stay relevant and informed. This approach also involves trust and is not easy to replicate.

The vast majority of our community is made up of what would be termed as non-problematic or recreational drug users. Official bodies in Ireland consider these drug users 'hard to reach' due to their low admission rates into services.

For us, though, there is nothing 'hard to reach' about our community and we are willing to share information, experiences and views to better Irish drug policy.





With independence comes a certain level of isolation. We are nowhere near the National Oversight Committee and have no ties with the bodies that implement Irish drugs policy.

We have made some strides in informing the ongoing national and political debate, which unfortunately required much strenuous hard work. We have given input to the Oireachtas' Joint Committee on Justice, and many of our recommendations to that committee have made it into their official recommendation to the Government.

Some of these recommendations included the decriminalisation of drug use across the board, the legalisation of home-cultivation of plant based drugs (such as psilocybin mushrooms or cannabis), alongside a number of harm-reduction measures including mobile overdose prevention sites, heroin assisted treatment (HAT) and drug-checking services.

We were invited to make a presentation to the Citizens' Assembly on Drug Use in September of this year (2023). We used the short time available to discuss the developments relating to cannabis policy reform across the world and which of these moves would be best suited for Ireland.

In this sense, despite a level of isolation from the decision making table, we feel that there is a clear role for independent voices in drug policy at the moment. Independent voices are coming from the grassroots and are carried by an active community of people behind them. UISCE is an example of this.

These voices offer fresh perspectives, are not afraid to push the envelope and provide valuable insight into the real-world workings of Ireland's far-reaching drug policy.

PAVEE CELEBRATION OF RECOVERY



Celebrating recovery from addiction was the main theme of our 'Pavee Celebration of Recovery' event this week. (Photo: Speakers John Connors and Ann Marie Sweeney).

Travellers in recovery from addiction gave powerful testimonies of their experiences. Their stories were inspiring, and their experiences showed that trauma was at the root cause of their addiction, but it can be overcome with help and support, and recovery is possible.

Travellers talked about how the shame of being a drug user slowed down their recovery and said there is a need for Travellers to be aware that stigma and lack of knowledge about what causes addiction in the Traveller community has to be addressed so recovery can be possible.

Singer songwriter Trish Reilly described her own and the collective trauma Travellers have

experienced through her powerful songs about forced assimilation, loss of Traveller identity and the recent history of Traveller cultural erosion.

There were many questions from the floor, some tinged with pain as people described the hopeless situation on the ground as families struggle with addiction in their own homes and the wider community, it was great to see the passion and interest from people in how this issue can be progressed.

Figures show that – Travellers make up 2.5% of treatment episodes which 5 times the majority population according to the Health Research Board in 2022.

If you would like any further information on addiction or services appropriate for Travellers please contact our Drug and Alcohol Programme at info@pavee.ie or (01) 878 0255



Who is EuroNPUD?

The European Network of People who use Drugs (EuroNPUD) is the regional drug user rights network in the European Union and its neighbouring countries. We are one of the regional members of the International Network of People who Use Drugs (INPUD).



What do we do? We champion community mobilisation and meaningful participation with people who use drugs through campaigns, development projects, advocacy and partnership work.

Our principles:

- Pro drug user rights
- Pro self-determination
- Pro harm reduction and safer drug use
- Respecting the right of individuals to take drugs
- Anti-prohibitionist
- Pro equality

Some of our projects & teams



Ways for drug user groups & people who use drugs in Ireland to get involved:

- Coordinated country campaigns – team approach, poster, and grant supporting local activity
- DUO-DP – one-off opportunity to build capacity of drug user group or network
- Quarterly Virtual Members Meeting
- Join thematic project teams – Signal groups and Zoom meetings
- Consultants and project managers drawn from community

Email
lynn.jefferys@euronpud.net
 or
 whatsapp / text
 +353834358055

Follow us on social media!



@euronpud_official



@euronpudO

RECOVERY POWER

BY ADELE LEAHY

HAVING HAD OUR MIND IN PIECES
WE NOW CHOOSE PEACE OF MIND
OUR FAITH AND CONFIDENCE INCREASE
AS WE CHOOSE ACCOUNTABILITY AND BEING KIND

WE ARE ON OUR WAY TO CONNECT, CREATE AND PARTICIPATE
WITH MARSEILLE AS OUR INSPIRATION
TO NETWORK, SOCIALISE AND COLLABORATE
AND EXPLORE THE ERASMUS INTEGRATION

MARSEILLE'S STUNNING CUISINE AND ARCHITECTURE
WILL MAKE WORKSHOPPING A TREAT
IN DEBATING AND CREATING, WE ARE PIONEERS
AS IRISH, SCOTTISH, FRENCH, AND DANISH
WE WILL HAVE THE CRAIC AND CELEBRATE

OUR VOICES CHIME WITH HOPE, SURRENDER AND VULNERABILITY
OUR WORTH, SELF-LOVE AND LOVE FOR OTHERS
ALLOW US TO INVESTIGATE SERVICES, POLICY, AND STRATEGIES
AS PEERS WE LEAD AND ENGAGE ONE ANOTHER

WE HAVE COME FROM MENTAL DESTITUTION
TO FIND DISCIPLINE AND RESOLUTION
WE HAVE COME FROM ADVERSITY
TO FIND RESILIENCE AND COMMUNITY

IN SHARING WHERE WE COME FROM
OUR EXPERIENCE AND OUR WORDS
WE WILL ALWAYS BELONG
AND REJOICE IN PAYING IT FORWARD

WITH OUR ATTITUDE OF COLLECTIVE GRATITUDE
WE SEEK FREEDOM FROM MENTAL TYRANNY
WE HAVE THE POWER TO CHOOSE
OUR WELLNESS AND RECOVERY

DUBLIN NORTH, NORTH EAST RECOVERY COLLEGE

Anybody who read the Summer '23 edition of UISCE magazine may recall an article by Dublin North, Northeast Recovery College about the 'Connect, Create, Participate' program. Funded by the EU's Erasmus+, five organisations from across Europe were selected with the task of creating a course that could address the issues of substance use and mental health in the community with the aim of promoting empowerment and recovery. The course was run over three phases, and I was proud to be a part of the Recovery Colleges process.



The second phase gave participants the opportunity to learn, and practice, facilitation skills, volunteer to partake in the facilitation phase, and to name the course. The name chosen for the course to be delivered in phase three was 'Building Personal Worth and Connection'. Two participants were selected to co-facilitate on this third, and final phase – delivering the course in the community. It had the feeling of a course that was created by the people, for the people.

In phase three, members of the community were invited to attend, and the course was held this summer over six three-hour sessions. Some of the topics covered included self-criticism, self-judgement, uses of information for choice, compassion for self and others, empathy, trauma, self-awareness, self-worth, self-belief, helplessness, helpfulness, and coping mechanisms. Participants engaged in an array of learning styles including group work and open dialogue.

Everyone involved worked together to share experiences, ideas, and concepts that helped the entire group to learn new ways of thinking about recovery.





The atmosphere created by the group felt safe, connected, and powerful. For me personally, it was a great experience to have connected with so many people that I would otherwise may never have met and it was a day filled with mixed emotions of triumph and sorrow when it finally ended.

The feedback from participants following the course was positive.

In October of this year all five of the organisations involved gathered over three days in Marseille, France. I attended with the college along with the other four organisations – The Recovery Academy (who are also based in Ireland) and teams from Scotland, Finland, and France to discuss the



findings from each team's process. The meet-up gave teams the opportunity to connect and bond with one another, discuss progress, and discover how the challenges of creating a course were met.

Everyone involved had input at the meetings. Notes were compared and ideas were shared and each of the teams got the opportunity to speak about their progress so far. It was a chance to learn what had, and had not worked in the process from one another, and to take some new ideas back home. Plans were also made to for the five organisations to link-in further in next year to share further developments.

Most recently, the team from the college were invited to host a workshop at the 'Mental Health – Minds in Motion' conference at the 17th annual International Tool Fair which took place in Dunboyne, Co. Meath in November.

This was an opportunity to showcase the learning tools used in the 'Building Personal Worth and Connection' course to people involved in mental health work from across Europe. The workshop was held over three, one and a half hour sessions and delivered a condensed look at the process used to create the course. Initial responses to this have also been positive.

More will be known about how the course may be implemented in the community in the future, but taking initial responses, feedback, and the views from people involved into account, it seems to be on a successful journey.

Robert Hogan



FRONTLINE MAKE CHANGE

Frontline Make Change has been providing addiction support services in the communities of Dublin 8 & 12 for over 20 years. Our services include:

- Addiction Support Service
- Frontline Bikes
- Children's Project

ADDICTION SUPPORT SERVICE

The Addiction Support Service is a free and confidential service that provides addiction information and support to individuals and families who need help overcoming drug and alcohol addiction. This support includes:

- One-to-one key working
- Care planning
- Drop-in service
- Art therapy
- Community Prison Links
- Outreach

Frontline also run a number of groups each year:

- Addiction support group
- Stabilisation group - Connections
- SMART recovery group

Participants in the Connections group recently worked on a group art piece in an art therapy session. The theme of the piece is staying in the green zone of recovery to avoid the danger zone.

FRONTLINE BIKES

Frontline Bikes is our social enterprise and is made up of a bike shop (Inchicore) and a Training & Upcycling Centre (Bluebell). The Training & Upcycling Centre provides training in bike mechanics to people in the community who have been impacted by substance misuse, long-term unemployment and those emerging from custodial sentences. The bikes that are upcycled in the training programme are then sold in our bike shop.

CHILDREN'S PROJECT

The Children's Project service provides a preschool and after school service to children whose parents or family members live with the impact of drug or alcohol misuse. This service facilitates and supports parents to attend appointments with the addiction team and ensures the children who attend get the best start at life.

For more information, contact
info@frontlinemc.ie
 or call 01 4736502.
www.frontlinemakechange.com

A Guide to staying **made green** Zone

'Kindness got me through

MOMENTOUS YEAR AHEAD

YOUR LIFE YOUR RULES

FEARLESS

Happy New Year

IT'S A DREAM COME TRUE

CHANGE



Change your life change the world

Live WELL LIFEBOAT

YOUR SMART CHOICE

DREAMS COME TRUE

EVERYTHING HAS FALLEN INTO PLACE AT THE RIGHT TIME

STILL GOING STRONG

Looking back to move forward

BACK ON TRACK

MAKE THE DAY

ARE YOU READY

THOSE I LOVE

there was real urgency about getting out

A clever way to get your glow back

learned healthier habits

We all need the chance



I'm happy

So ready

ALL FLOWERS GROW THROUGH DIRT

YES YOU CAN

I dared to change my life & feel alive again

Sailing by



FRONTLINE

CHRYSALIS SOCIAL CLUB: A JOURNEY OF RECOVERY, CONNECTION, AND JOY

In the heart of the Chrysalis Community Drug Project, a beacon of hope and camaraderie has emerged — the Chrysalis Social Club. This vibrant initiative, now in its third month, is transforming lives and fostering a sense of belonging among individuals on their path to recovery. It's not just a Social Club; it's a celebration of life, community, and the power of connection.

UNLEASHING THE MAGIC: THE CHRYSALIS SOCIAL CLUB EXPERIENCE

Each month, the Social Club orchestrates a full-day adventure that transcends the ordinary, proving that life in recovery is not only possible but can be filled with laughter, joy, and genuine connections. The Social Club is open not only to past and present Service Users of Chrysalis but also extends a warm invitation to members of the local community.

BREAKING THE CHAINS OF ISOLATION

The Club has become a sanctuary where individuals in recovery can revel in the joy of shared experiences without the crutch of substances. The outings are a testament to the fact that life without drugs or alcohol can be rich, fulfilling, and, most importantly, fun. It's a groundbreaking initiative that stands as a pillar of support for those who often find themselves isolated on their journey to recovery.



CHRYSALIS
COMMUNITY DRUG PROJECT

A GLIMPSE INTO THE MEMORABLE JOURNEYS OCTOBER 2023: A DAY OF ENLIGHTENMENT IN THE BOTANIC GARDENS



Under the Autumn sun's benevolent rays, October brought us to The Botanic Gardens, a haven of tranquillity and natural beauty. The day unfolded with educational visits to the Botanic Garden's museum, followed by a delightful meal at Anne's Bakery in Mary Street. Laughter echoed through the gardens as friendships blossomed, proving that recovery is not just about making changes in substance use but about rediscovering the joy in life.

Testimonial: *"The day out in The Botanic Gardens was educational and made me get out more and helped me make new friends."*

NOVEMBER 2023: COASTAL BLISS IN DUN LAOGHAIRE



November saw us embarking on a coastal adventure to Dun Laoghaire Pier and The People's Park. As we indulged in sandwiches overlooking the harbour, devoured ice cream from Teddy's Ice Cream Shop, and savoured a meal at the Royal Marine Hotel, the sea breeze carried away the weight of the past. Recovery became a journey of not just reclaiming one's life but savouring its sweetest moments.



Testimonial: *"The Social Club outings in Chrysalis helped make my confidence stronger in myself."*

VOICES OF EMPOWERMENT: TESTIMONIALS FROM OUR PARTICIPANTS

"Chrysalis staff that come on the outings with us listen to us and have respect for us; we have mutual respect for them also."

"There is no cliques or gossip in the group."

CHRISTMAS AT CHRYSALIS: A FESTIVE EXTRAVAGANZA

As the holiday season approaches, the Social Club is gearing up for its next spectacular event — "Christmas At Chrysalis" A Service User's Christmas Party awaits, complete with a free raffle, a Christmas Quiz, music that will fill your heart with joy, a cozy Christmas movie via projector, and an abundance of festive food and refreshments. It's not just a party; it's a celebration of resilience and the spirit of togetherness.

JOIN THE JOURNEY: HOW TO BE PART OF THE CHRYSALIS SOCIAL CLUB

Details of upcoming events, including "Christmas At Chrysalis," can be found on Chrysalis CDP's Facebook and Instagram Social Media pages or by contacting Peter at 0863974875. To receive timely updates, interested individuals can leave their phone number with Peter, ensuring they are added to the contact list. Text messages and WhatsApp notifications will be sent out in advance, ensuring no one misses out on the magic.

THE BEST IS YET TO COME: EXCITING PLANS FOR 2024

As the Chrysalis Social Club looks ahead to the new year, the excitement is palpable. With plenty of new ideas for outings on the horizon, the journey of recovery and connection promises to be even more thrilling in 2024. From scenic retreats to cultural experiences, the Social Club is set to elevate its mission of creating a haven where love and belonging reign supreme.

In the heart of Chrysalis, the Social Club beats as a testament to the transformative power of recovery, proving that life after addiction is not just possible — it's extraordinary. Join the movement, embrace the journey, and become a part of the Chrysalis Social Club — where every outing is an adventure, and every moment is a celebration of life, love, and belonging.



KICKING ADDICTION: HOW FOOTBALL SERVES AS A POWERFUL RECOVERY TOOL

Recovery Football is one of many services that Chrysalis Community Drug Project provides. Recovery football happens every Friday in the TUD Grangegorman campus, Dublin 7, from 5pm-6pm. You do not need to be a participant in Chrysalis to take part in recovery football. This free activity welcomes not only individuals actively navigating the path of recovery but also those who may be indirectly impacted by addiction. For more information, please contact Sam 086-0677198.

Chrysalis Recovery Football Team has capped off an incredibly successful year, clinching victories in three prominent football tournaments. Their successes include triumphs at the Sari Football for Unity competition, which showcases football as an educational tool bringing communities together to promote social inclusion.

The team also clinched the Darren Flood Memorial Cup, a touching event hosted by Soilse during recovery month, dedicated to honouring a beloved figure across the recovery community.



Below: Mary Flood (Darrens Mother) presenting Chrysalis with the Darren Flood Memorial trophy.



The pinnacle of their achievements, however, was their own tournament, where they not only secured a win, but also highlighted that football can be used as a recovery tool to bring addiction services across the community together, to promote recovery and creating positive social connections.

THE BENEFITS OF FOOTBALL AS A RECOVERY TOOL

In a game-changing initiative, Chrysalis is proving that football is more than just a sport—it's a powerful tool for recovery.

Offering weekly sessions, the team embraces the unique benefits of football to aid individuals on their recovery journey.

Recovery Football, with its inherent emphasis on teamwork and collaboration, creates a sense of solidarity crucial for those navigating the often-isolating road of recovery.

Chrysalis recognises the structured routine provided by football as a stabilising force, replacing unstructured time that may contribute to addictive behaviours. This approach not only develops discipline but also significantly reduces the risk of relapse.

The physical intensity of the game serves as a stress outlet, teaching valuable coping mechanisms that extend beyond the field into everyday life.

Goal setting in football becomes a source of empowerment, celebrating victories that contribute to enhanced self-esteem. The immersive nature of the sport also acts as a welcome distraction, redirecting attention away from triggers that may lead to relapse.

What sets Chrysalis apart is its dedication to being tournament ready. This unique service ensures that participants not only experience the therapeutic benefits of football but also have the opportunity to compete, fostering a competitive yet supportive environment.

Chrysalis Recovery Team's commitment to utilizing football as a recovery tool goes beyond the field, creating a positive ripple effect in the community.

By providing this unique service, they are not just playing a game—they're scoring big on improving individuals lives who are both directly and indirectly impacted by addiction.

We sat down with John, a participant in recovery football, and asked him a few questions how Recovery Football has affected him.

How has participating in Chrysalis recovery football contributed to your overall wellbeing?

"Being part of the Chrysalis recovery football team has been a game-changer for me. The craic on the pitch has given me a sense of connection that I haven't experienced in years. I started off by playing in goal as I was very anxious about my fitness. After a week or two, I became more confident and realised its just about taking part and getting out of the house and joining in. The

weekend was always such a trigger for me but now I look forward to Fridays and its now become the highlight of my week."

How has being a part of the recovery football group influenced your motivation to stay committed towards your recovery goals?

"The biggest thing it helps me with is practicing consistency. I've always struggled with structure in the past. But by showing up and staying committed it helps me stick to my recovery care plan.

I've always struggled with attending day programmes in the past but since joining the recovery football, I have now started the reduce the use group in Chrysalis twice a week. I've now realised I can still have bad weeks. But now I have the recovery football to unwind with, and it really helps clear my head and ease myself into the weekend."

Lastly, what have you gained since starting in the recovery football team?

"Joining the recovery football team at Chrysalis has been a turning point for me. I've always been anxious about joining new groups. But with the football its different. Everyone is really supportive, especially when you're new to the group.

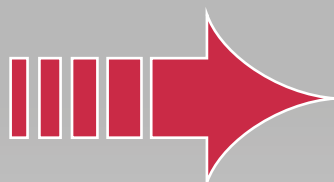
I haven't been part of a group where I feel at ease in a very long time. It helps me to let my guard down and just have fun.

During the year, we won a tournament and I felt so proud of myself. I took photos with the trophy and sent it to all my family. It made me feel proud of myself, which is something I've really struggled with for such a long time.

Stay tuned for an exciting 2024 as Chrysalis gears up for more tournaments, promising even greater moments on the field and a continued celebration of recovery through football."



CHRYSALIS
COMMUNITY DRUG PROJECT



NEEDLE EXCHANGE & HARM REDUCTION

DUBLIN 1

ANA LIFFEY DRUG PROJECT

MON-THURS 2PM-5PM
FRIDAY 9.30-1 & 2PM-5PM

OUTREACH NSP - 087 712 7059

MON-FRI 9-11.30 GRANBY CLINIC

DUBLIN SIMON OUTREACH

MON-FRI 8.30PM-10.30PM
SAT 10AM-10.30PM
SUN 4PM-10.30PM

01 872 0185

DUBLIN 2

HSE OUTREACH

MON-FRI 9AM-4PM

LORETTA: 086 604 1013
CLODAGH: 086 604 1029

COOLMINE HOUSE

MON-FRI 8.30PM-10.30PM
SAT 10AM-10.30PM
SUN 4PM-10.30PM

01 872 0185

DUBLIN 7

HSE OUTREACH

HARM REDUCTION CALL ONLY
MON-FRI 9AM-4PM

PAM: 086 605 7205

DUBLIN 8

MQI RIVERBANK

MON-FRI 8AM-9PM
SUN 9AM-1PM

01-524 0160

DUBLIN 10

BALLYFERMOT ADVANCE PROJECT

MON-FRI 9.30AM-1PM & 2PM-5PM
01 623 8001
087 431 9921

OUT OF HOURS NSP 3 EVENINGS PER WEEK (VARY EACH WEEK)
087 361 8422

DUBLIN 11

WELLMOUNT PRIMARY CARE CENTRE (FINGLAS)

MON 2PM-4.30PM

01 856 7700

BALLYMUN YOUTH ACTION (BYAP)

MON-FRI 10AM-1PM & 2PM-5PM
*PIPES ONLY

01 846 7900

DUBLIN 12

HSE OUTREACH INCHICORE/CRUMLIN/RIALTO

MON-FRI 11AM-4PM

DEREK: 086 604 1014

DUBLIN 13

HSE OUTREACH

MON-FRI 9AM-4PM

JOHN: 086 605 7181

DUBLIN 15

HSE OUTREACH 37A COOLMINE IND ESTATE

MON-FRI 11AM-1PM

CATRIONA: 086 854 3770

DUBLIN 16

HSE OUTREACH

MON-FRI 9AM-4PM

MARY: 086 859 0731

DUBLIN 17

DARNDALE NEEDLE EXCHANGE BELCAMP LANE

THURS 2PM-4PM

01 848 8951

DUBLIN 18

HSE OUTREACH DUN LAOGHAIRE

TUE 9AM-4PM
CALL ON OTHER DAYS CAN BE ARRANGED

SEAN: 086 605 7150

DUBLIN 22

CASP

MON-FRI 9.30-1PM & 2PM-3.30PM
MON & WED 6.30PM-7.45PM

01 616 6750

CLONDALKIN TUS NUA

MON & Fri 10am-12pm & 2-4pm
TUES-THURS 2PM-4PM

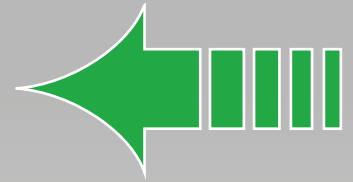
01 457 2938

CLONDALKIN CLINIC CLAC, ST. / LOMANS RD

MON-FRI 9AM-4PM

PETER HOMEN: 087 798 0175

DRUG REDUCTION SUPPLIES



DUBLIN 24

HSE OUTREACH

MON-FRI 9AM-4PM

NICOLA 0868065014
DEBBIE 0868590733

JADD, JOBSTOWN, TALLAGHT

MON-FRI 9AM-5PM
SAT & SUN 9.30AM-11.30AM

085 781 6183 / 01 459 7756

CARP KILLINARDEN TALLAGHT

MON-FRI 9AM-4.30PM

01 462 6082

KILDARE

ARAS NEWBRIDGE CALL HSE OUTREACH FIRST

MON-FRI 9AM-4PM

SUZANNE: 086 806 5013
WYNNE: 087 617 2517
DES: 086 604 1015

KILKENNY

ARDU

CALL HSE OUTREACH FIRST
MON-FRI 9AM-4PM

MEL: 087 984 5014

OFFALY & PORTLAOISE

MQI OUTREACH

MON-FRI 9AM-5PM

LINDA: 086 084 4729

WATERFORD

ST. OTTERAN'S HOSPITAL JOHN'S HILL

MON-FRI 9AM-5PM

051 848 658

WESTMEATH

MQI OUTREACH

MON-FRI 9AM-5PM

ANGELA: 087 915 0329

CARLOW

ARDU

MON-FRI 9AM-5PM

059 917 8050

LAOIS COUNTY

MQI OUTREACH

MON-FRI 9AM-5PM

BARRY: 087 292 5727

WEXFORD & ENNISCORTHY

HSE SUBSTANCE MISUSE TEAM ST. JOHN'S HOSPITAL

CALL FIRST: 053 925 9825

CORK

CORK CITY OUTREACH

MON-FRI 9AM-5PM

FRANK: 086 025 5410

LIMERICK

ANA LIFFEY MID-WEST ASSERTIVE OUTREACH TEAM

MON/WED/FRI 9AM-1PM

NSP: 085 871 0983

WICKLOW

HSE ARKLOW ADDICTION CENTRE

HSE ARKLOW ADDICTION CENTRE
MON-FRI 9AM-4PM

CALL TO ARRANGE
JOHN: 086 859 0734

BRAY HSE MOBILE VAN

MON-FRI 9AM-4PM

SEAN: 086 605 7150

BRAY COMMUNITY ADDICTION TEAM

37 BEECHWOOD CLOSE
MON-FRI 9AM-5PM

01 276 4692

GALWAY

CLEARY'S PHARMACY

MON-FRI 8.30AM-6PM
SAT 9.30AM-6PM

091 562 967

LONGFORD

MQI OUTREACH

MON-FRI 9AM-5PM

DEREK: 086 411 3628

The Pharmacy Needle Exchange Program 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



Harm reduction advice

- **Avoid new batches of drugs**
- **Access Naloxone:** talk to your local service or GP as soon as you can
- **Avoid using alone and make a rescue plan**
- **Take extra care:** start low and go very slow
- **Avoid using with other drugs**
- **Know overdose signs and don't be afraid to get help**

 DRUGS IE

UISCE

Advocacy for People who use Drugs

8 Cabra Road, Dublin 7
D07 T1W2
(Next to the Phibsborough Luas Stop- Green Line)

Phone: 01 555 4693

Phone: 01 515 7253

Email: info@myuisce.org

Web: <https://myuisce.org/>

