

Annual Review 2017/18



www.sdf.org.uk





Scottish Drugs Forum is a membership organisation and was established in 1986 to represent the drugs sector and to improve Scotland's response to problem drug use.

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Chair's Report

Jim Stephen

SDF Chair

We remain committed to working with partners to help reduce the tragic toll of drug related deaths in Scotland.

I have served on the Board of Scottish Drugs Forum since 2011 and was delighted to be elected Chair earlier this year.

The Board ensures good governance and oversees the strategic direction of the organisation. We are grateful to my predecessor, George Allan, who in his five years as Chair, initiated and oversaw substantial changes that improved both the governance and internal operations at SDF.

This is a time of considerable change in the drugs field. Perhaps it is always thus; but it is apparent in the Board's ongoing work on a new three year strategic plan.

We remain committed to working with partners across the field to help reduce the tragic and largely preventable toll of drug-related deaths in Scotland. Our work on people aged over 35 with a drug prob-

lem has shown that the challenges are significant and rooted in wider and long-standing societal issues.

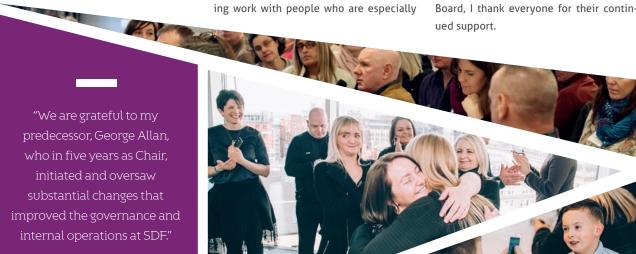
The fundamental choice we face is to invest resources in "picking up the pieces" e.g accident and emergency, unscheduled hospital admissions and stays, the criminal justice system, or whether we shift the focus of policy and spending towards high quality and person-centred treatment, health, housing and employability options for people with a drug problem. We believe that recovery, in terms of addressing the multiple and complex issues which many people face, is only attainable if people with a drug problem receive their share of support from mainstream services, working in conjunction with specialist drug services.

SDF will continue to support necessary improvements to service delivery, including work with people who are especially

vulnerable. We have been encouraged to receive endorsement for our work on sexual health and blood borne viruses. We are, therefore, expanding the range of this work to include vulnerable young people, vulnerable injectors, people involved in prostitution who use drugs, people using image and performance enhancing drugs, and drug use and sexual behaviour among men who have sex with men.

We will work with existing and new partners to take forward these new and expanded tasks. The Board will support the continued delivery of high quality of work across the SDF which continues to be recognised by our range of funders and other stakeholders.

All this challenging work and SDF's unique approach would be impossible without our membership, volunteers and staff, as well as our funders. On behalf of the Board, I thank everyone for their continued support.



CEO's Report

David Liddell

SDF Chief Executive Officer

The focus must be on narrowing the gap between those in need of services and those who make the key decisions

The range and reach of SDF's work continues to develop and grow which is a tribute to the work of the staff team, the quality of the work delivered and the trust that funders continue to place in

This year, an example of this was the re-tendering by the Scottish Government of work around the Sexual Health and Blood Borne Virus Framework. The tender panel chose to continue to support us and indeed allow us to translate developmental work into more consolidated activity around issues affecting vulnerable young people, people who use drugs and are involved in prostitution, men who have sex with men and are involved in chemsex and people who use image and performance enhancing drugs. This is an acknowledgement of both the quality of the work we have delivered in the last seven years and of SDF's potential for addressing areas of emerging concern.

In all of our work the focus must be on narrowing the gap between those in need of services and those who make the key decisions regarding policy and practice.

SDF pioneered peer research as an effective means of ensuring that the experiences and opinions of the most vulnerable and marginalised people in



Scotland are heard in the most empowered settings. No other method brings these collective voices directly to the tables around which decisions on the design and development of services, budgeting and commissioning, are made. This agenda is now shared and research projects now insist on Patient Participant Involvement. SDF is now working closely with the Drug Research Network Scotland which has the potential to provide greater peer involvement and participation which, in turn, should impact on policy and practice; improving the quality and range of our interventions.

Many of SDF's peer research studies have highlighted stigma. SDF first raised the issue of stigma in a 2008 national conference. The damage done to people with a drug problem as a result of stigma is incalculable and this is perhaps the most fundamental challenge we face. I am delighted that this issue has become something of a priority and that SDF have contributed to this. SDF stigma training - offered free to ADPs for delivery in their area - is key to raising awareness of this issue and beginning to address it. Frontline staff in mainstream services need

time and a safe

others' attitudes and beliefs, the impact on the people they work with and ways in which they may challenge stigma and others' attitudes.

space to think through their own and

Internally, I am pleased to report, we have consolidated our volunteering capacity and overhauled our processes in recruiting and supporting volunteers. This is a solid foundation on which to further develop opportunities for people to contribute to SDF's work and to develop their own skills and knowledge. Working with people who bring their own experiences and insights informs much of our day-to-day work.

Once again, I thank the Board and staff for their work and support in the last year and SDF's membership for their continued support and participation.

The range and depth of SDF's work in the last year cannot be fully accounted for here but this is an opportunity to outline some of that work and thank the people and organisations



Peer Involvement

and Volunteering



boosted its capacity to provide high quality volunteering experiences

SDF continues to champion volunteering and has expanded the range of opportunities available over the last year. This has involved recruiting and training 45 volunteers with lived experience of problem substance use.

There has been a growing focus and demand for peer involvement over 2017/18, enabling the expansion of our existing projects, in East Ayrshire, Fife and East Dunbartonshire, through work in partnership with Alcohol and Drug Partnerships, BBV Managed Care Networks, Universities and Health Boards. Our projects continue to build, support and embed peer involvement as well as carry out service evaluations and peer research.

Recent examples of peer involvement work in these areas include; client satisfaction surveys of blood borne virus services, a study on adherence to the Quality Principles in addiction services, understanding the service needs of patients living with hepatitis C and an evaluation of trauma informed practices.

Other SDF volunteers trained in peer research have supported a number of projects; including an evaluation of injecting equipment provision services in partnership with NHS Tayside, an analysis on the impact of minimum unit pricing in partnership with the University of Glasgow, as well as the National Institute

for Health Research EPIToPE study on the eradication of Hepatitis C.

Due to our volunteers often unique and valuable insight, they have been asked to consult on research materials for various projects including HIV PreP (pre-exposure prophylaxis) feasibility research being conducted by **Glasgow Caledonian University** and also on the 'Ready, Steady, Baby' **NHS Scotland** resource.

Although peer research is a key aspect of volunteering at SDF, there have been a multitude of opportunities to be involved beyond this focus. These include presenting at SDF and external events, creation of campaign materials and informing **Scottish Government** representatives on the value of peer research and volunteering

There has been a wealth of work achievements, as well as opportunities to celebrate these achievements together. Our bi-annual all-volunteer meetings have been attended by volunteers from across the country and are occasions to recognise the hard work and contributions made by everyone who has taken part.

SDF are making steady progress towards an **Investing in Volunteers** award to ensure we meet the UK quality standard for good practice in volunteer management.







"Over the time volunteering with SDF my confidence, self-esteem and purpose in life has all changed for the better

- Peer Research Volunteer (Tayside)



The AWTP enjoys continued success with nearly all of the 26 trainees recruited having achieved their SVQ qualifications in Social Services and Healthcare and graduated from the project. John Finnie MSP and Alison Thewlis MP presented completion awards to graduating trainees at celebration events held in Edinburgh and Glasgow. A further 23 trainees were swiftly recruited in 2017 and are now nearing conclusion of their course of spe-

cialist and vocational learning and supported

work placements.

In April 2017, AWTP reached the finals of the prestigious National Lottery Awards - one of only seven Scottish projects to do so. More than 1,300 organisations entered before being whittled down to a final public vote. Through a targeted campaign, AWTP amassed over 2,000 votes – exposing the work of the project, to a wide audience and raising the profile of the project significantly.

In May 2017, the work of AWTP was represented in a study visit to the Netherlands as part of the Employability Public Social Partnership Elevate Glasgow in partnership with the Dutch Foundation of Innovation in Welfare 2 Work and Light on the Path, funded by Erasmus+ the European Union programme for education, training, youth and sport. The visit focussed on the opportunities available to people who have experienced multiple barriers to employment and provided food for thought on how AWTP can continue to develop to deliver the ambitions of people in recovery in Scotland.

December 2017 saw the work of AWTP show-cased at two events in **Dundee** and **Glasgow**. The events attracted a national audience and discussed international, national and local perspectives on employment as a means to support recovery and reduce stigma. Practical and innovative means to create opportunities for marginalised groups were discussed with AWTP highlighted as a good practice model.

Following new investment to the project from the Henry Smith Charity in 2016, AWTP has recently secured a grant from the Bank of Scotland Foundation to promoting financial awareness and further enhance the life-skills of our trainees. The SDF team continue to work hard to attract funding for AWTP so that as many people as possible can benefit from the life changing opportunities the project provides.

Funding secured for 2018/19 has enabled us to recruit a further 23 people to AWTP from Glasgow, South Lanarkshire, North Lanarkshire, Inverclyde, East Ayrshire, Edinburgh, West Lothian and Fife.











Bacterial, Viral Infection

And Emergency

Response



enhanced as outbreak among people who inject drugs continues

The outbreak of HIV amongst people who use drugs has been ongoing since 2015. Although originally identified in Glasgow, there is now onward transmission in surrounding areas.

SDF have been involved in the response to the outbreak since 2015, and have had a key role in raising awareness of HIV, evidencedbased prevention methods and treatment among staff and service users as well as those not currently engaged in services. The key messages at present remain; speak about HIV and reinforce harm reduction messages around using sterile injecting equipment and condoms, and encourage and support people to access testing and regular testing if they continue to be at risk. For those who are now living with HIV; encourage and support them to access treatment. Workers also need to be able to reassure people by reinforcing information about routes of HIV transmission so as people can protect themselves and others and talk positively about living with HIV which, of course, should not necessarily be a life limiting condition.

Bacterial Infection and Drug Use training has been delivered nationally since 2014. This training has been delivered to frontline staff working with people who use drugs and continues to be sought after and well received. To respond to some of the challenges of some sectors being unable to access face-to-face training, a new 'Bacterial Infection and Drug Use' e-learning course will be launched this summer. This e-learning has been developed and peer reviewed by experts in the field, including microbiologists, nursing lecturers and harm reduction workers. We are grateful for their input.

Following discussions throughout the training, as well as at the **Scottish Needle Exchange Workers Forum**, it was highlighted that the workforce feel less than confident in knowing how to respond to various wounds and what the signs of infection are.

SDF and partners have developed and piloted a new one day training 'Injecting Injuries and Infections' which aims to give front line staff an overview of the skin and its functions, damage caused by injecting to the skin and underlying tissues, and how to manage simple wounds. The training also supports staff to have confidence in recognising signs of infection and when to refer onwards for treatment. The training is suitable for all individuals who come into contact with people who inject drugs.

2015
HIV outbreak
ongoing





"I didn't have much knowledge of drug infection before this training course; now I'm more aware of the infections that service users may come across and so my discussions around hygiene with them will be more prevalent"

Hepatitis Scotland



A picture can paint a thousand words - patients living with

hepatitis C tackle stigma through the medium of art

A key focus for Hepatitis Scotland in 2017 was to highlight the stigma that is often experienced by those living with hepatitis C.

For World Hepatitis Day, Hepatitis Scotland - working within the HepCScot partnership - planned an arts and photography project and competition 'Hepatitis See', through which people affected by hepatitis C were invited to express how they experienced attitudes of others towards them and, importantly, how they viewed themselves. By using art as a medium, the project aimed to visualise identity and stigma and how these affect people living with viral hepatitis in Scotland.

Over 40 pieces of artwork were produced through a series of free community art workshops, led by experienced artists, which took place in Ayrshire and Arran, Forth Valley, Glasgow, Lanarkshire, Lothian and Tayside. At these workshops, people affected by hepatitis C were supported to explore key themes and express their ideas through a variety of artistic medium. In many areas, NHS boards were key contributors and provided organisational and logistical support, while local support organisations and groups put in a lot of work

to support people affected by viral hepatitis. An exhibition of work and public engagement event was held at the **Gallery of Modern Art (GoMA)** in Glasgow city centre on 18 and 19 July, with art and photography workshops, decoration of large model 'C's, and a public/ supervised injecting installation taking place.

An additional exhibition took place at GoMA on World Hepatitis Day on 28 July, with a prize ceremony for the art and photography sections of the project. Prizes included Scotland bus tours courtesy of Rabbies Tours, Art on a Postcard artworks, and £250 worth of digital photography vouchers donated by the late Alex Murray, a keen photographer and founding member of The National Hepatitis C Patient Forum.

The HepCScot partnership would like to thank all of the artists who participated for their great work and who made Hepatitis See a success, as well as all of the organisations and individuals who supported the project.

Visit **hepcscot.org/hepatitissee** to view photos, videos and other information about Hepatitis See.









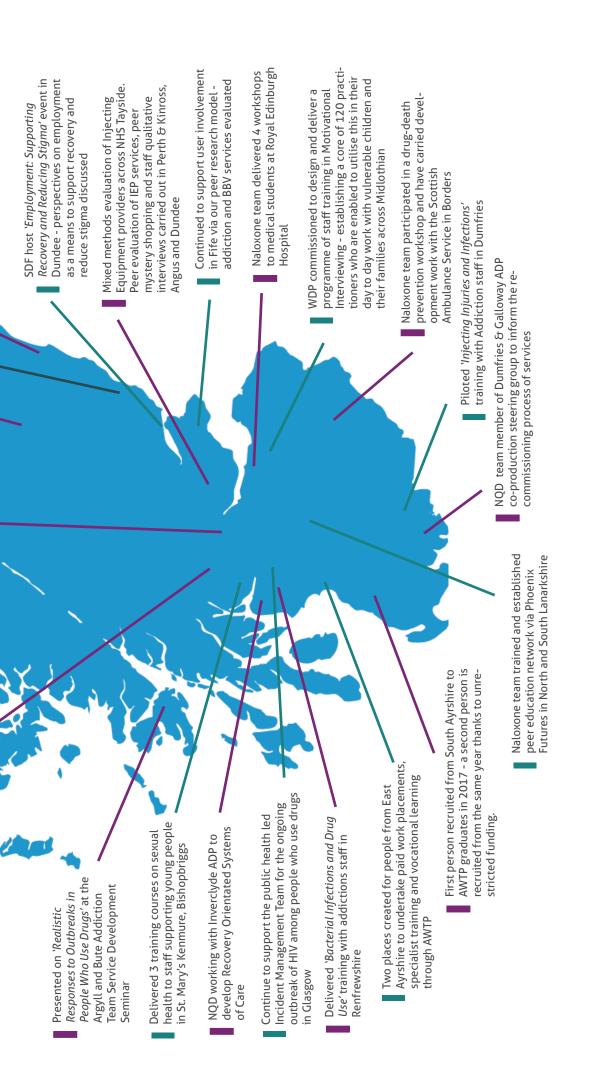






SDF - Active across Scotland

training in the processes and practice of Motivational Interviewing for Penumbra Aberdeen Workforce Development team commissioned to design and deliver a programme of staff WDP delivered 'Listening and Responding to Children Affected by Parental Substance Use' training to range of staff working in substance use and 'Introduction to Trauma' training alongside work WDP delivered "Older and Wiser' training and ■ National Quality Development working with Aberdeenshire ADP to evaluate 3 children's services in Arbroath development day for Moray ADP NQD designed and facilitated local community forums with Orkney ADP members dren Affected by Parental Substance Misuse' to Delivered 'Listening and Responding to Chil-Delivered 8-week 'Mindfulness Based Relapse Prevention' course to staff based in Stirling staff in Lerwick Delivered 'Bacterial Infection and Drug Use' and 'Tooting versus Shooting' training for staff who work with people who use drugs in Highland WDP - Workforce Development Programme AWTP - Addiction Worker Training Project working in substance use services in Recovery' training to range of staff NQD - National Quality Development WDP delivered 'ROSC: Unlocking ADP - Alochol and Drug Partnership iEP - Injecting Equipment Provision becula for GPs and their staff people in rural areas on topteams on supporting LGBTI ics related to drug use and Delivered training in Ben-UI - User Involvement Forth Valley sexual health



A sample of some of Scottish Drugs Forum's work across Scotland over the past year

Interested in finding out more? www.sdf.org.uk

National Naloxone

Programme



The pioneering National Naloxone Programme continues to

innovate with the UK's first peer training and supply group

The Scottish National Naloxone Programme has been at the forefront of innovation; being the first national programme of its kind in the world when it was launched in 2010.

Naloxone should be readily available to those who are most likely to witness an overdose. In 2015, new regulations were introduced which allow the supply of naloxone to be made without the need for a prescription by anyone employed by or engaged in drug services. This has allowed the development of peer supply networks with volunteers.

SDF's naloxone team has been instrumental in assisting with the introduction of the first ever naloxone peer training and supply network in the UK. Alongside partners, we have developed a framework that enables the supply of naloxone by peer educators.

Naloxone Peer Educators, who are trained and supported by SDF, make direct supplies of naloxone to eligible individuals that they have trained using the Alcohol & Drug Recovery Services City Wide Naloxone Peer Volunteers Take Home Naloxone Supply Framework.

This aims to contribute to increasing the availability of naloxone within the community, contribute to a reduction in opioid-related deaths and to provide additional skills and opportunities for Peer Educators.

SDF will continue to support and develop the peer supply model and is currently supporting other areas in Scotland to adopt a similar model for the supply of naloxone through peer educators.

In the first six months, SDF-supported peers trained in excess of 650 people and supplied nearly 800 naloxone kits; this model has really shown one of the strengths of using peer educators to deliver an initiative like this in the community.

We would like to take this opportunity to thank all the volunteers and other partners involved in making the group and model such a resounding success.







"The peer supply model has helped to support my own recovery. The close support provided to us by Scottish Drugs Forum has really been beneficial in allowing us to build our own confidence at our own pace"

- Naloxone Peer Educator



Without effective services and staff, maximising recovery with an individual is significantly diminished.

Over the past year, the National Quality Development (NQD) team has undertaken significant work with Aberdeenshire, Argyll and Bute, Dumfries and Galloway, Inverclyde and Moray Alcohol and Drug Partnerships (ADPs), with negotiations underway for future work with additional ADPs.

In Argyll and Bute, NQD has been supporting Recovery Oriented Systems of Care (ROSC) development by piloting work in two localities. A ROSC is a co-ordinated network of all services and supports that build on the strengths and resilience of individuals, families, and communities to improve the health and quality of life of people with alcohol and drug problems. This work involved a mapping exercise, a local ROSC development event and partnership development work. Significant progress has been made in developing joint and inter-agency working and the ADP will now take this forward with SDF's role nearing completion.

NQD has also conducted a quality assessment against the **Quality Principles**, following on from the **Care Inspectorate** work in 2016. This included use of surveys and focus groups with staff and service users in two major services in Argyll and Bute.

In Dumfries and Galloway, NQD designed, delivered and supported work to develop a strategic approach to service user involvement and quality. A toolkit is currently in development based on this work, which will be published later in 2018. This resource will then be available for NQD to use with ADPs across Scotland.

In Moray, NQD designed and facilitated an ADP members' development day which produced a work plan aimed at improving understanding and insight regarding roles and responsibilities within the ADP.

As well as strategic level input, the team have also worked with seven individual services across Scotland to support evaluation work. Within prisons, we are working with the Scottish Prison Service and NHS to develop a ROSC approach.

We have continued to chair and provide support to the National Practitioner Forum for User Involvement, which is now in its 8th year. In March 2017, the Forum hosted a national conference on user involvement and service quality, attended by over 100 delegates.

NQD continues with representation at the Partnership for Action on Drugs in Scotland (PADS) Quality and Consistency sub-group and the Children Affected by Parental Substance Misuse group.

"I just wanted to say that I have really appreciated all the work that you have undertaken for Argyll & Bute ADP over the last few years.

I hope that we can continue to call on your support and guidance as we move forward."

- Argyll & Bute ADP





Workforce Development

and Training



skills to meet the needs of people affected by problem drug use

Last year, SDF's Workforce Development (WFD) team again delivered training in every ADP area in Scotland.

This included 130 days of training funded by the **Scottish Government** as well as Recovery Outcomes training in 11 ADP areas. In total 3000 people attended WFD training and provided overwhelmingly positive feedback.

WFD designed, piloted and delivered five new courses, which can be made available free to participants. Along with Drug Awareness and Alcohol Awareness, available courses include -

- Understanding Stigma promoting inclusive attitudes and practice
- Staying Alive preventing drug-related deaths
- Older and Wiser? working with people who use substances as they age
- Essential skills for working with people who use substances.

Four new courses are available for commission, having been developed in response to demand from across the drugs field –

- Opioids and Commonly Prescribed Medications to People who use Drugs
- Benzodiazepines
- · Cocaine and psychostimulants
- · Overdose prevention.

In response to demand, a modular Motivational Interviewing course has been developed, enabling a more flexible delivery to a wider range of frontline staff.

WFD has also developed e-learning courses on Recovery Outcomes and on new psychoactive substances which are free to access to stakeholders across the drugs field in Scotland.

SDF remains committed to ensuring that staff in services across the drugs field and beyond have the knowledge and skills to provide an effective service to people affected by a drug problem.

Visit www.sdfworkforcedevelopment.org.uk to view what training is currently available in your area and to access our flexible e-learning courses.



Training days delivered with ADPs in Scotland





"I really enjoyed the course, in fact, it was one of the best courses I have been on over the years. Really enjoyed the learning and delivery methods that were used."

Sexual and Reproductive Health



'Training for Trainers' project comes to a close after the sustainable

growth of knowledge networks across the country

The sexual and reproductive health (S&RH) of people with a drug problem can often be overlooked by the services that support them. As a result, it has been a key focus of SDF's work to improve the confidence and capability of service staff in this area through providing training.

This year, 260 people attended training with SDF, delivered from Dunfermline to Benbecula with participants travelling from across Scotland. Training covered legal issues; the impact of drug use on sexual health; blood borne viruses; sexually transmitted infections; contraception (including condom use); LGBT issues and harm reduction.

Last year, work also began with staff from St Mary's Kenmure; a secure facility for the care and education of 24 young people referred from the Courts and Children's Hearing system throughout Scotland. Three two-day courses were delivered to improve the sexual and reproductive health knowledge of 30 staff.

Last year also saw the final sessions of our 'Training for Trainers' initiative, which trained and supported trainers throughout Scotland to provide S&RH training. This has involved 30

staff from all over the country. A comprehensive training pack was produced and provided to each participant.

Key learning from this has been that;

- the sharing of learning and experiences across sectors encouraged the development of working relationships between staff working in drug services and in sexual health services and so improved joint working between agencies.
- using participative training methods throughout the project encouraged participants to develop training that will involve their audience in the training process.
- providing ongoing support to participants over a three year period allowed them to gain confidence in their delivery of sexual and reproductive health training.

All of this learning will inform and benefit SDF's future work around people who inject drugs, people involved in prostitution, men who have sex with men involved in chemsex, people who use image and performance enhancing drugs and vulnerable young people.

2 6 0 people trained





"Probably the most beneficial element of the training for trainers was getting to try out ideas and practice on our peers. This really helped me to think about how to develop ideas and feel more confident delivering them." People over thirty five with drug problems
research

The publication of two SDF reports has brought some

In 2010, Scottish Drugs Forum completed the Scottish element of an international research project on older drug users. Financed by the EU and working along with partners in Austria, Poland and Germany, we sought to describe the lived and service experience of people who were older and who had long-term drug problems.

progress at policy level this year

The funding dictated that we define older drug users as being over 35 years old. A later analysis of drug related deaths in Scotland confirmed that being over 35 was significant in that the rise in deaths over the past decade or more is accounted for largely by a rise in deaths of people over 35.

SDF's more recent work on older drug users brought together an Expert Group who were able to commission further research. This consisted of a literature review, interviews with people over 35 with a drug problem and a statistical analysis undertaken by the Information Services Division of the NHS. The aim was to make recommendations for future service development to respond to the needs of this group.

The group's final reports Older People with

Drug Problems in Scotland: A Mixed Methods Study Exploring Health and Social Support Needs and Older People with Drug Problems in Scotland: Addressing the Needs of an Ageing Population were published last year and are available on the SDF website.

These two reports contribute to the background to A Nation with Ambition – The Government's Programme for Scotland 2017-18 in which the Government say they 'have begun an overhaul of our drug strategy, guided by a principle of ensuring the best health outcomes for people who are, or have been, drug users, our aim being to seek, keep and treat those who need our help.'

A focus on individuals' health rather than their drug use or behaviours has the potential to transform the lives of people whose involvement with the state is punitive. This was central to the approach recommended by the Expert Group.

Also, it is heartening that Housing First, also an Expert Group recommendation, has made significant progress in the last year as the Government accepted the recommendations of the Rough Sleeping Action Group.









"I don't trust nobody... I keep myself to myself unless they ask anything but apart from that I feel isolated. Put it [this way], If I was deid, nobody would miss me, that's how bad it is"



Image and Performance Enhancing Drugs (IPEDs)

Gaps in knowledge and understanding of IPED use across Scotland

a key focus for future work

The emerging use of image and performance enhancing drugs (IPEDs) is the focus of some concern and interest. In March 2017, SDF organised and hosted a national seminar with presentations from experts across the UK.

At this event, it became clear that there were significant gaps in knowledge and understanding and that much of the expertise within Scotland was regionally based or focussed on a specific perspective.

On the day, there was a demand that Scotland's experts should convene and describe, where possible, the land-scape of IPED use in Scotland and identify where gaps in knowledge could be addressed. It was also clear that both adequate resourcing and a lack of understanding of appropriate good practice models are a significant issue across much, if not all, of Scotland.

An expert group was organised and hosted by SDF. The group includes people undertaking frontline work with people using IPEDs in Highland, Grampian, Lothian and Greater Glasgow and Clyde as well as academic and Scottish Government staff. An initial draft scoping report was produced in the spring on 2018. The group intends to undertake more work in describing appropriate practices in terms of injecting equipment provision and other harm reduction approaches and in terms of how mainstream health services may respond to the health impacts and consequences of some IPED use.

SDF is now funded under the **Scottish Government Blood Borne Virus Framework** to undertake work on IPED use including research and training on IPED use and sexual health. This work begins in early summer 2018 and will be informed by the work of the expert group.

The Road to Recovery - Ten years on

Austin Smith, SDF's Policy Officer, reflects on the 'refresh' of

Scotland's 10 year old drug policy

Last July, SDF organised a national conference, Drug Policy Through a Health Lens, with the **Scottish Government** at which The Minister for Public Health and Sport announced plans to 'refresh' **The Road To Recovery**. An 'overhaul' was confirmed by the First Minister when she announced The Programme For Government – Scotland: A Nation With Ambition in September.

In November and December, SDF organised events in Aberdeen, Dundee, Glasgow and Edinburgh to consult with members on their views and experiences of the decade of recovery-focussed policy. There was a mix of experiences and opinions and a clear desire for change – to build on the positive work of the last decade and refocus on new challenges in Scotland's approach.

In the last decade, Scotland and England have both adopted recovery strategies in response to problem drug use.

These have changed some of the language and some of the perspectives on drug issues. It is clear that the world has moved on since 2008 and there have been positive changes and yet... back then there were concerns at record annual levels of overdose deaths which stood at 574; now they are approaching 1000. In 2009/10 the number of people with a drug problem was estimated at around 60 000 and that figure is unchanged.

The challenges the new strategy must address are deep-seated and long-term. There is perhaps an emerging consensus that these challenges require a response from Scottish society and from a broader range of services and agencies. Scottish Drugs Forum will continue to promote evidence-based policy and practice and work jointly with stakeholders across the drugs field to improve the lives and circumstances of people vulnerable to or affected by problem drug use.

Staying Alive in Scotland



Interview with Kirsten Horsburgh

Strategy Coordinator (Drug-Death Prevention)

Can you describe your new role at SDF?

Firstly, don't panic! I will still be responsible for the coordination of the national naloxone programme but this new role takes into consideration drug-death prevention which is much broader than ensuring people are provided with, and aware of, this life-saving medication.

As Strategy Coordinator (drug-death prevention) my work relates to the 'Staying Alive in Scotland, strategies to combat drug-related deaths' report.

I still have my colleague Jason Wallace in my team, whose work will continue to develop peer naloxone networks across Scotland. I also retain my position as chair of the Scottish Naloxone Network.

What is the background to your new role?

In August 2014, a joint Ministerial letter encouraged Alcohol and Drug Partnerships to work with SDF to develop evidenced, strategic priorities that will reduce the tragic number of drug-related deaths.

SDF, with Hepatitis Scotland, developed the Staying Alive report which identifies key initiatives that are being undertaken at a local level and examines other evidence-based solutions that could be introduced. The report provides clear strategies that can reduce the number of drug-related deaths in Scotland.

SDF's work depends on you working with other stakeholders - who would you hope to be working with?

My former colleague, who previously led on this work, has engaged with ADPs across the country, so my work will be picking up on this. Because of their broad memberships, ADPs are well placed to address a

multitude of issues, such as those often implicated in drug-related deaths.

We will continue to engage with people who use(d) drugs, Scottish Government, Police Scotland, Scottish Prison Service, National Prisoner Healthcare Network and the Scottish Ambulance Service among others.

What would you hope to achieve in the next year?

My head is absolutely buzzing with ideas and I'm excited to see them come to fruition. We will be making contact with ADPs to support them with their *Staying Alive* action plans as a starting point.

We'd like to explore the idea of a national forum for ADPs and others to connect regarding this work, share good practice and explore national and international evidence. Another area I am particularly keen to develop is a network for nurses working in substance use services. This will be explored in more detail with delegates at the 'Working Together to prevent DRDs' conference in August.

I envisage a couple of exciting naloxone pilots this year (watch this space) and in addition there is also a national naloxone e-learning programme under development which will also be ready in the summer and available to all.

Ultimately, our goal for the future is for people who use drugs to have access to services that best meet their needs and that we all work together to prevent drug-related deaths.

Staying alive in Scotland is everyone's responsibility.





Staff and Board Members

SDF Staff

At June 2018

Adelle Still
Adrienne Hannah
Alan McRobbie
Alex Murray
Andrew McCourt
Andy Coffey
Austin Smith
Bruce Thomson
Carissa Chan
Cat Forrest
Chris Messenger
David Liddell
Emma Hamilton

George Waddell
Graham Mackintosh
Jason Wallace
Jen Upson
Joan Currie
John Honey
Karolina Kuczynska
Katerina Vourlakos
Katharine Ronald
Katy MacLeod
Ken Butler
Kirsten Horsburgh
Leon Wylie

Lesley Bon
Lisa Bradley
Louise Bowman
Marie Breslin
Marie Meechan
Michael Griffin
Neil Stewart
Rebekah Moore
Richard Bloodworth
Susan Weir
Suzanne Davidson
Tricia McCabe

SDF Board Members

At June 2018

Jim Stephen - Chair Louise Aitken
Ali Gilmour - Treasurer John Budd
Aileen O'Gorman Mark McCann
April Adam Mary Hepburn
George Thomson Peter Kelly
George Webster Stephanie Morrison
Hazel Robertson Trish Tougher

Addiction Worker Training Project Graduates

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