

# A Public Health approach to Illicit drug use and multiple personal vulnerabilities

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# The Public Health and Epidemiologic model

Identifies 3 possible points of intervention in any public health issue:

1. The Agent
2. The Host and
3. The Environment

Subsequently reworked in relation to drugs to become:

1. The Drug
2. The Set and
3. The Setting

[Zinberg N. E. (1984) New Haven, Yale University Press]

# Interaction between illicit drug use and multiple personal vulnerabilities?

- Lack of skills
- Lack of employment
- Housing problems
- Engagement in criminal activities
- Incarceration
- Poor health status

Two way and cyclical

Increasingly hard to disentangle over time

# Ways forward

Need to address the following interacting components.

1. The drug itself
2. The individuals and communities involved and
3. The social, cultural, physical, legal & economic environment

Community-based, integrated ('one-stop-shop') primary health care service delivery models are well-placed to comprehensively address the complex range of health and psychosocial issues among people who use illicit drugs may have.

# To achieve lifestyle 'stability'

## Need to address

- **Unstable** accommodation and income situation as a first order priority
- **'Out-of-control'** drug (and alcohol) use and
- **Associated health issues**  
e.g. HIV, HBV, HCV, STIs  
reproductive health/'child protection' issues  
nutrition, personal hygiene  
IRID, dermatological and respiratory problems  
chronic pain issues

# Drug dependence treatment

- Opioid agonist pharmacotherapies (OAPs), such as methadone and buprenorphine shown to reduce illicit opioid use and improve the physical, psychological and social stability of opioid-dependent IDUs when provided as maintenance treatment.
- Increasing role of substitution therapy to treat psychostimulant dependence e.g. Dexamphetamine and Modafinil
- Outcomes are improved by a case management approach involving multidisciplinary team of medical, nursing and counselling practitioners.

# Dual, triple, quadruple therapy?

- The supervised administration of pharmacotherapies also provides the opportunity to directly observe the concomitant administration of other treatments (e.g. antibiotics, HIV & HCV Rx, psych meds) and the early detection of drug interactions and side effects, thereby also maximising treatment adherence among people with multiple personal vulnerabilities.

# Other relevant services

- General health
- Public health: HIV, hepatitis B & C prevention
- Sexual and reproductive health
- Infant and maternal health
- Mental health
- Outreach

Also need to incorporate the capacity to evaluate and monitor the impact of these services

The Kirketon Road Centre (KRC) in Sydney's Kings Cross is an example of an integrated primary health care service model that aims to meet the complex health and social welfare needs of

- ❑ 'at risk' young people
- ❑ injecting drug users and
- ❑ sex workers.

# KRC service model

- Population (not disease) focused, consistent with public health approach to public health issues
- Holistic, recognising that “health” encompasses physical, emotional and social wellbeing
- Anonymous and confidential (no Medicare)
- Free-of-charge (including limited pharmacy)
- Drop-in (or appointment)
- Provided by a multi-disciplinary team, with blurring and extension of roles, working under “professional” model
- Regular client evaluation of service appropriateness.



# Primary health care philosophy

- » Acceptable
- » Accessible
- » Affordable
- » Equitable

WHO, Alma Ata 1978

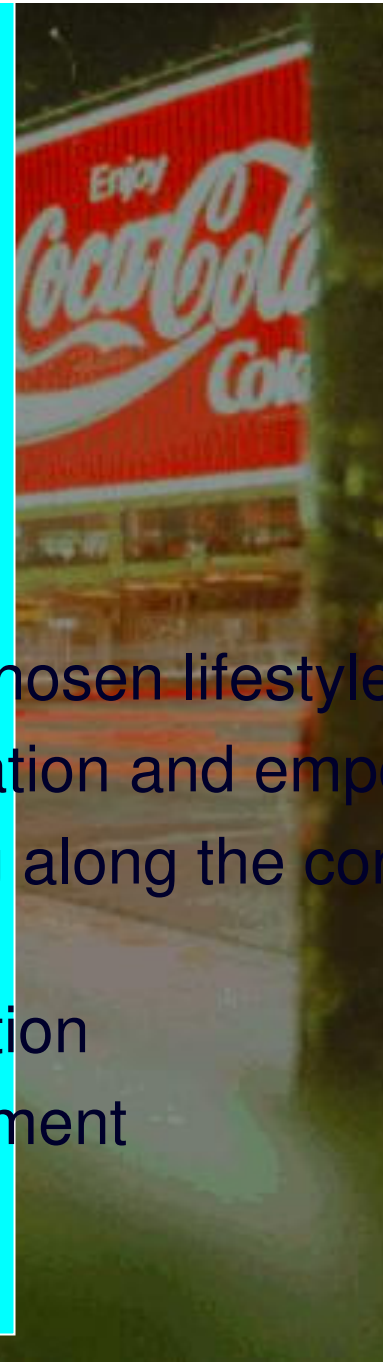




Health for All

# Harm reduction continuum of care framework

- Non-judgemental, respectful of clients' chosen lifestyles
- Client-focused, promoting self-determination and empowerment
- Eclectic and flexible approach, operating along the continuum from harm reduction to abstinence
- Committed to principles of health promotion (Ottawa Charter) and community development



# KRC services - 2009

- General medical care
- HIV, hepatitis A,B, and C testing
- Hepatitis A and B vaccination; Hepatitis C Specialist Clinic
- HIV/AIDS treatment and care
- STI screening/treatment and sex worker check ups
- Pap smears, contraception, pregnancy testing and advice
- Drug and alcohol counselling, assessment and referral
- Methadone access program: low threshold
- Client groups and health promotion activities
- Housing, social security and welfare assistance
- Needle syringe program and needle cleanup service
- Outreach program: bus, van, on-foot and youth clinics
- Special projects e.g. POTTI project



# Advantages of the integrated, primary health care service model

- Client-focused
- Holistic and comprehensive
- Less vulnerable to stigmatization
- Robust and versatile
- Professionally challenging and satisfying, but significant training implications
- Efficient and effective

# and finally...

The Public Health advocacy role is crucial at both community and political levels

- to ensure sustainability of current efforts at the local level and
- to effect public policy changes at state and national level.