

Co-producing understanding around access to mental health and substance use services for people experiencing homelessness



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Full paper is available open access
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Andy's Story



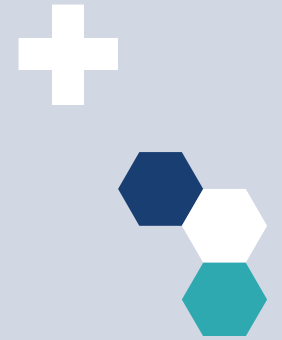
Disclaimer:

Andy's story is not based on any one person's lived experience and is an illustrative story for this presentation

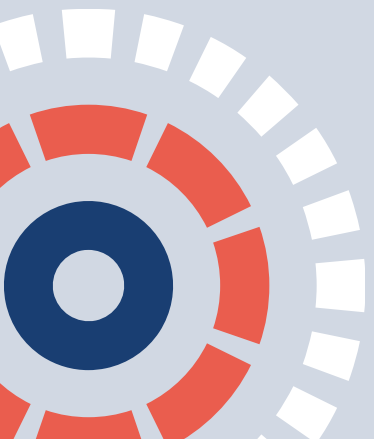
Aim

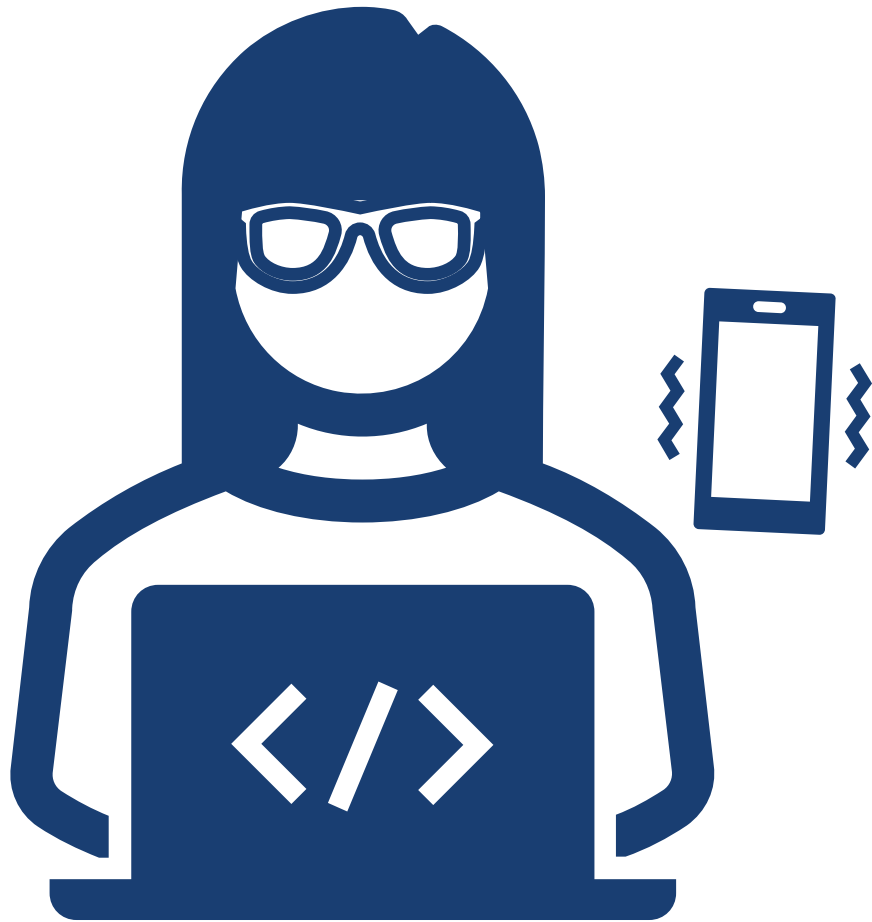
- To explore and understand access to community mental health, drinking, and drugs support within Newcastle and Gateshead from the perspective of both people experiencing homelessness and staff during the pandemic





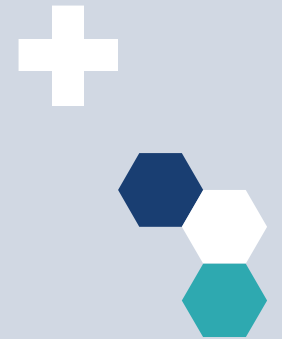
How did we do this?



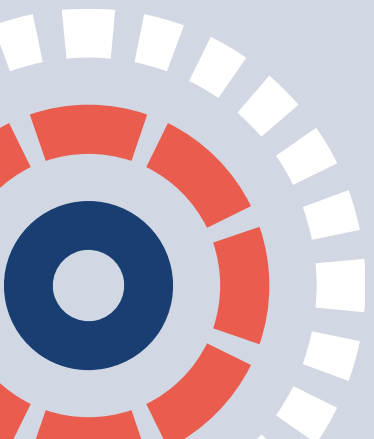


26 telephone interviews with
people who experience(d)
homelessness

Co-production



What did we learn?




Themes



Inadvertent
exclusion



Barriers to
recovery



A system
responsive
to need

Inadvertent exclusion

- Mental health isn't 9 to 5
- Digital exclusion
- Awareness of what support is out there

Inadvertent exclusion

- Mental health isn't 9 to 5



Aye, it should be open when you are feeling the worst. Sometimes when you are feeling your worst it is very late. Ya know, it's dark, and it's that's when you feel your most loneliness. Like after 10 o'clock at night ya know, when there is no one around.

Inadvertent exclusion

- Mental health isn't 9 to 5
- Digital exclusion
- Awareness of what support is out there

Barriers to recovery

- Lack of space for recovery
- Disjointed care and repetition of recovery stories
- Not ready for recovery
- Prioritisation when resources are scarce

Barriers to recovery

- Lack of space for recovery



[treatment location] it's not a nice place to go when you're trying to recover from drugs. They're trying to sell you things outside, and inside the building to be honest.

Barriers to recovery

- Lack of space for recovery
- Disjointed care and repetition of recovery stories
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- Prioritisation when resources are scarce

Barriers to recovery

- Prioritisation when resources are scarce

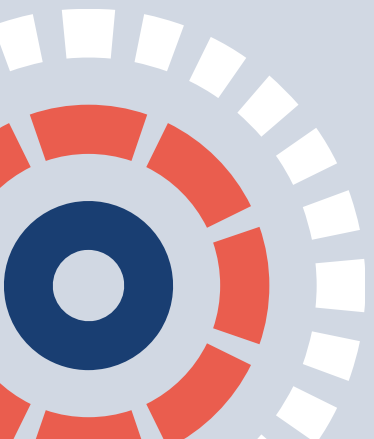
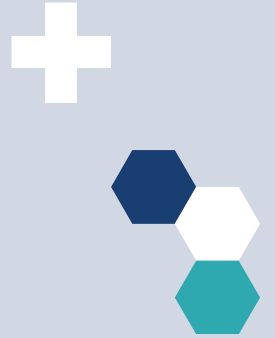


I rung the Crisis team a lot. I was on the phone to them nine times in one night before they actually came out. [. . . later explains] the Crisis team is pretty much the wrong name for them I would say.

Building a system responsive to need

- Disconnect between service provision and needs
- Choice and an active voice

Why does this matter?



ACCESS to Community based MENTAL HEALTH, DRUGS and ALCOHOL SUPPORT in North East, England
for people experiencing **HOMELESSNESS** during the COVID-19 Pandemic



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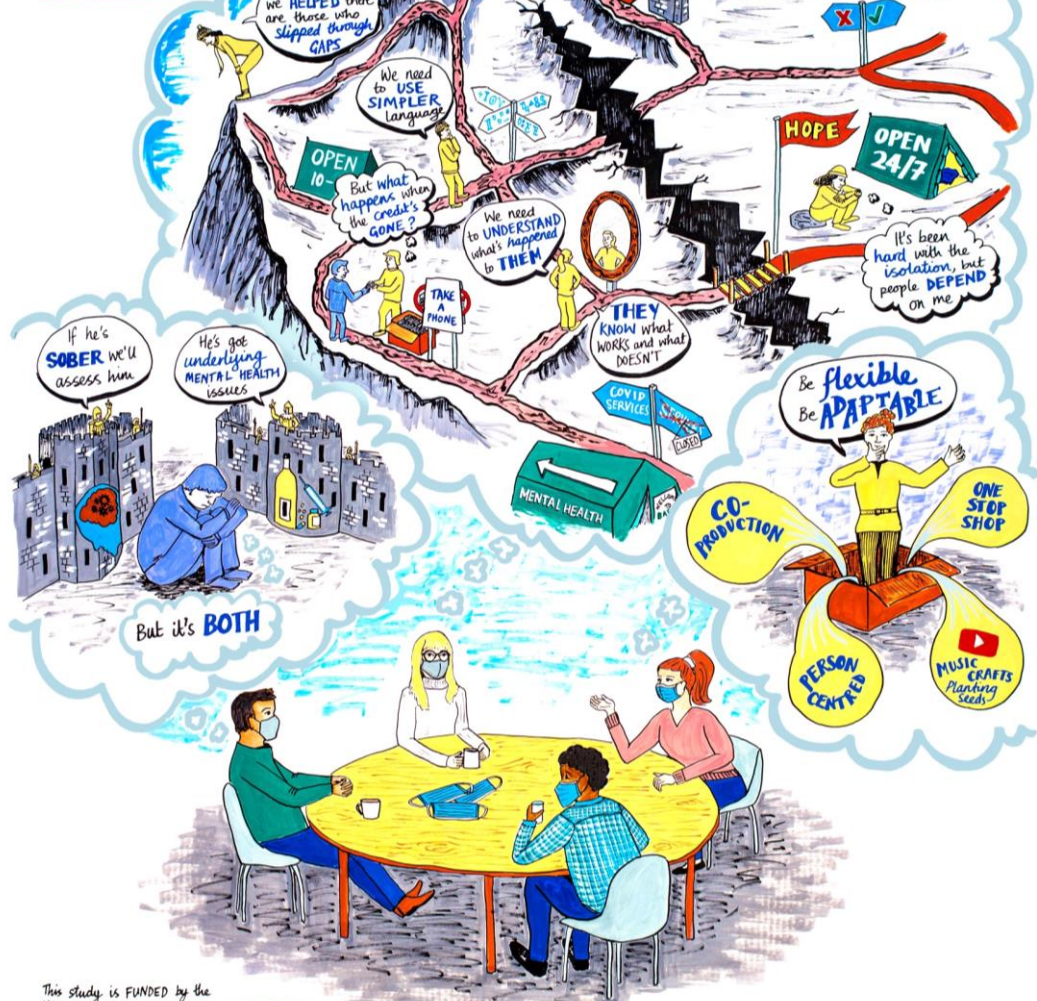
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Scan me to visit the study site and see a full list of outputs



Perspectives of those who PROVIDE SUPPORT and those experiencing HOMELESSNESS on ACCESS to Community MENTAL HEALTH, DRUG and ALCOHOL SUPPORT during COVID-19



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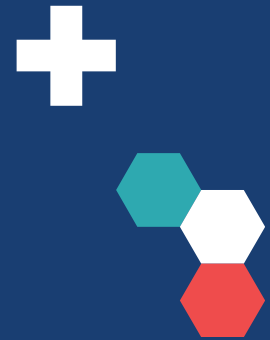
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Thank you for listening



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