

Appendix I

Interview Guide for Homeless People



Deloitte

**Research into Homelessness and
Substance Misuse
Interview Guide**

Homelessness and Substance Misuse Research – Interview Guide

Questionnaire No.	_____
Participant Identifier <i>(complete as appropriate e.g K0572F)</i>	_____
	(first initial, month & year of birth, gender)
Interviewer Name	_____
Recruitment Site	_____
Interview Location	_____
Date of Interview	d <input type="text"/> <input type="text"/> m <input type="text"/> <input type="text"/> y <input type="text"/> <input type="text"/>
Start Time of Interview	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
Finish Time of Interview	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>

Homelessness and Substance Misuse Research – Interview Guide

Section A – Biographical Information

Explain that this information is necessary in order to convey a profile of those who participate in the research study

A1	What type of accommodation are you currently living in?
	<i>(Tick as appropriate)</i>
	Night Shelter <input type="checkbox"/> Direct Access Hostel <input type="checkbox"/> B&B <input type="checkbox"/> Move on Accommodation <input type="checkbox"/> With Friends/Relatives <input type="checkbox"/> Sleeping Rough (streets/parks) <input type="checkbox"/> Squat <input type="checkbox"/> Private Rental <input type="checkbox"/> Other <input type="checkbox"/>
A2	How long have you been staying there?
	<i>(Tick as appropriate)</i>
	A few days <input type="checkbox"/> A few weeks <input type="checkbox"/> A few months <input type="checkbox"/> More than 6 months <input type="checkbox"/> A year or more <input type="checkbox"/> Don't know <input type="checkbox"/>
A3	Where is the main place (4 nights or more) you have slept in the past week?
	<i>(Tick as appropriate)</i>
	Hostel/Shelter <input type="checkbox"/> B&B <input type="checkbox"/> With Friends/Relatives <input type="checkbox"/> Sleeping Rough (streets/parks) <input type="checkbox"/> Squat <input type="checkbox"/> Other <input type="checkbox"/>
A4	Do you currently live
	<i>(Tick as appropriate)</i>
	Alone <input type="checkbox"/> Alone with children <input type="checkbox"/> With Partner <input type="checkbox"/> With Partner and Children <input type="checkbox"/>
	Number of Children under eighteen <input type="checkbox"/>
	Are you the head of the household <input type="checkbox"/>

Homelessness and Substance Misuse Research – Interview Guide

A5	Initials _____
A6	Gender 1. Male <input type="checkbox"/> 2. Female <input type="checkbox"/>
A7	Age <input type="text"/> Yrs

Section B – Homelessness

Definition of Homelessness:

Anyone in temporary accommodation or anyone who has slept rough for more than six nights in the last six months

B1	<p>Is this your first experience of being homeless:</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(a) How many times have you been homeless? <input type="text"/> <input type="text"/> times</p> <p>(b) In your opinion, what would be the longest period you have spent homeless?</p> <p>Years <input type="text"/> Months <input type="text"/></p>																																	
B2	<p>In term of your current spell, how long have you been homeless?</p> <p>Years <input type="text"/> Months <input type="text"/></p>																																	
B3	<p>How old were you when you first became homeless? <input type="text"/> Years</p>																																	
B4a	<p>What do you first think were (the main reason/other reasons) for you first becoming homeless?</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 15%; text-align: center;">Main Reason (One response only)</th> <th style="width: 15%; text-align: center;">Other Reasons (Multiple responses allowed)</th> </tr> </thead> <tbody> <tr><td>Family conflict</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Relationship Breakdown</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Money Problems</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Court Order/ Notice to Quit</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Told to go by Landlord</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Asked to leave by family</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Evicted from Private Rented Accommodation</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Pressure from Local Community</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Evicted by NIHE</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Evicted due to anti-social behaviour</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>		Main Reason (One response only)	Other Reasons (Multiple responses allowed)	Family conflict	<input type="checkbox"/>	<input type="checkbox"/>	Relationship Breakdown	<input type="checkbox"/>	<input type="checkbox"/>	Money Problems	<input type="checkbox"/>	<input type="checkbox"/>	Court Order/ Notice to Quit	<input type="checkbox"/>	<input type="checkbox"/>	Told to go by Landlord	<input type="checkbox"/>	<input type="checkbox"/>	Asked to leave by family	<input type="checkbox"/>	<input type="checkbox"/>	Evicted from Private Rented Accommodation	<input type="checkbox"/>	<input type="checkbox"/>	Pressure from Local Community	<input type="checkbox"/>	<input type="checkbox"/>	Evicted by NIHE	<input type="checkbox"/>	<input type="checkbox"/>	Evicted due to anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>
	Main Reason (One response only)	Other Reasons (Multiple responses allowed)																																
Family conflict	<input type="checkbox"/>	<input type="checkbox"/>																																
Relationship Breakdown	<input type="checkbox"/>	<input type="checkbox"/>																																
Money Problems	<input type="checkbox"/>	<input type="checkbox"/>																																
Court Order/ Notice to Quit	<input type="checkbox"/>	<input type="checkbox"/>																																
Told to go by Landlord	<input type="checkbox"/>	<input type="checkbox"/>																																
Asked to leave by family	<input type="checkbox"/>	<input type="checkbox"/>																																
Evicted from Private Rented Accommodation	<input type="checkbox"/>	<input type="checkbox"/>																																
Pressure from Local Community	<input type="checkbox"/>	<input type="checkbox"/>																																
Evicted by NIHE	<input type="checkbox"/>	<input type="checkbox"/>																																
Evicted due to anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>																																

Homelessness and Substance Misuse Research – Interview Guide

C07	<p>Have you been in contact with any of the following drug and alcohol services within the last month?</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Drop in Centres</td><td style="width: 50px; text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">In-patient Detox</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Detox</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Counselling</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Outreach Team</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Addition Teams</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Alcoholics Anonymous</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Dual Diagnosis Teams</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Voluntary Agency Counselling</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Homeless Support Team</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Psychiatric Nurse</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Other (specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <hr/> <hr/> <hr/> <hr/> <hr/>	Drop in Centres	<input type="checkbox"/>	In-patient Detox	<input type="checkbox"/>	Community Detox	<input type="checkbox"/>	Counselling	<input type="checkbox"/>	Outreach Team	<input type="checkbox"/>	Community Addition Teams	<input type="checkbox"/>	Alcoholics Anonymous	<input type="checkbox"/>	Dual Diagnosis Teams	<input type="checkbox"/>	Voluntary Agency Counselling	<input type="checkbox"/>	Homeless Support Team	<input type="checkbox"/>	Community Psychiatric Nurse	<input type="checkbox"/>	Other (specify)	<input type="checkbox"/>
Drop in Centres	<input type="checkbox"/>																								
In-patient Detox	<input type="checkbox"/>																								
Community Detox	<input type="checkbox"/>																								
Counselling	<input type="checkbox"/>																								
Outreach Team	<input type="checkbox"/>																								
Community Addition Teams	<input type="checkbox"/>																								
Alcoholics Anonymous	<input type="checkbox"/>																								
Dual Diagnosis Teams	<input type="checkbox"/>																								
Voluntary Agency Counselling	<input type="checkbox"/>																								
Homeless Support Team	<input type="checkbox"/>																								
Community Psychiatric Nurse	<input type="checkbox"/>																								
Other (specify)	<input type="checkbox"/>																								
C08	<p>Have you experienced any difficulties in accessing these services in general?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, what difficulties?</p> <p style="text-align: right;">Tick all that apply</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Lack of information about the availability of services</td><td style="width: 50px; text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Having no fixed address</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Not being registered with a GP</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Unhelpful response from GP</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Location of services</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Entry/eligibility criteria for services (eg must not be current user of substances)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Inflexible programme design (re: attendance and compliance requirements)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Waiting time to get a place on programmes</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Appointment systems</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Opening hours</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Lack of child care facilities</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Substance misuse services not integrated with other services (eg housing, mental health problems, probation)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>	Lack of information about the availability of services	<input type="checkbox"/>	Having no fixed address	<input type="checkbox"/>	Not being registered with a GP	<input type="checkbox"/>	Unhelpful response from GP	<input type="checkbox"/>	Location of services	<input type="checkbox"/>	Entry/eligibility criteria for services (eg must not be current user of substances)	<input type="checkbox"/>	Inflexible programme design (re: attendance and compliance requirements)	<input type="checkbox"/>	Waiting time to get a place on programmes	<input type="checkbox"/>	Appointment systems	<input type="checkbox"/>	Opening hours	<input type="checkbox"/>	Lack of child care facilities	<input type="checkbox"/>	Substance misuse services not integrated with other services (eg housing, mental health problems, probation)	<input type="checkbox"/>
Lack of information about the availability of services	<input type="checkbox"/>																								
Having no fixed address	<input type="checkbox"/>																								
Not being registered with a GP	<input type="checkbox"/>																								
Unhelpful response from GP	<input type="checkbox"/>																								
Location of services	<input type="checkbox"/>																								
Entry/eligibility criteria for services (eg must not be current user of substances)	<input type="checkbox"/>																								
Inflexible programme design (re: attendance and compliance requirements)	<input type="checkbox"/>																								
Waiting time to get a place on programmes	<input type="checkbox"/>																								
Appointment systems	<input type="checkbox"/>																								
Opening hours	<input type="checkbox"/>																								
Lack of child care facilities	<input type="checkbox"/>																								
Substance misuse services not integrated with other services (eg housing, mental health problems, probation)	<input type="checkbox"/>																								

Homelessness and Substance Misuse Research – Interview Guide

C10	What kind of services would you like to see exist?
C11	What kind of information would you like to receive re alcohol services?

Homelessness and Substance Misuse Research – Interview Guide

C12	<p>Have you had contact with any of the following services/personnel within the last month (a) in relation to your alcohol use and (b) for other reasons?</p>																								
	<table style="margin-left: auto; margin-right: 0;"> <thead> <tr> <th style="padding: 2px 10px;">Alcohol</th> <th style="padding: 2px 10px;">General</th> </tr> </thead> <tbody> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> <tr><td style="width: 50px; height: 15px;"></td><td style="width: 50px; height: 15px;"></td></tr> </tbody> </table>	Alcohol	General																						
Alcohol	General																								
	<p>GP Services</p> <p>General Hospital Clinics</p> <p>Accident and Emergency Services</p> <p>Psychiatric Clinic</p> <p>Community Psychiatric Nurse</p> <p>Multi-disciplinary Team (Dual Diagnosis)</p> <p>Social Worker</p> <p>Local Council</p> <p>PSNI</p> <p>Homelessness District Nurse</p>																								

Homelessness and Substance Misuse Research – Interview Guide

Section D – Drugs

This section will deal with the use of drugs. Mention to the client that any information provided will be treated with confidence and only used for research purposes. Stress also that if the respondent does not want to answer the question, he/she is not compelled to but that any information provided will be very helpful.

IF NEVER USED DRUGS GO TO SECTION E

D1	Have you (ever used/used in the last year/used in the last month) any of the following substances? (Tick as appropriate) – note if prescribed					
		Lifetime Use (Ever)	Recent Use (Last Year)	Current Use (Last Month)	Pres crib ed	
	Cannabis					
	Ecstasy					
	Amphetamines (eg speed)					
	Amyl Nitrate (poppers)					
	Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)					
	Crack					
	Cocaine					
	Heroin					
	Substitute Opiates (methadone, buprenorphine, DF118)					
	Other Opiates (Codeine, dihydrocodeine, morphine, solphadine, co-codamol etc.)					
	Anabolic Steroids					
	Tranquillisers, Benzodiazepines (e.g. valium, temazepam)					
	Solvents (e.g. gas, glue, inhalants)					
Others:						
D2	What is your current preferred substance?					

Homelessness and Substance Misuse Research – Interview Guide

D3	If not currently using drugs –
	(a) When did you stop? _____
	(b) Why did you stop? _____

IF CURRENTLY USES NONE OF THE ABOVE GO TO SECTION E

Homelessness and Substance Misuse Research – Interview Guide

D4	In term of current use of drugs (refer to those mentioned above), what is your main route of administration and frequency of use over last four weeks? (Answer as appropriate)	
	Route of Administration ³	Frequency of Use in last 4 weeks ⁴
	Cannabis	
	Ecstasy	
	Amphetamines (e.g. speed)	
	Amyl Nitrate (poppers)	
	Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)	
	Crack	
	Cocaine	
	Heroin	
	Substitute Opiates (methadone, buprenorphine, DF118)	
	Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)	
	Anabolic Steroids	
	Tranquillisers, Benzodiazepines (e.g. valium, temazepam)	
	Solvents (e.g. gas, glue, inhalants)	
	Others:	
	D05 – D07 ONLY IF CURRENTLY USES (LAST MONTH)	
D5	What was the first drug you ever used? _____	
D6	What age were you when you first started using this drug? _____ years	
D7	Did you start using drugs - Before becoming homeless <input type="checkbox"/> After becoming homeless <input type="checkbox"/>	

- ³
1. Intravenous
 2. Intramuscular
 3. Skin Popping
 4. Smoke
 5. Ingest
 6. Sniff
 7. Don't know
 8. Other

- ⁴
1. 20 days or more
 2. 10-19 days
 3. 4 – 9 days
 4. 1 – 3 days

Homelessness and Substance Misuse Research – Interview Guide

IF STAYING IN EMERGENCY ACCOMMODATION (SHELTERS, HOSTELS, B&Bs)		
ANSWER QUESTIONS		
D8	Are staff aware of your drug use?	Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/>
D9	Have you ever had difficulties in accessing accommodation as a result of your drug use?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes – what difficulties?	
D10	<p>The following questions concern information about your involvement with drugs during the last 12 months (i.e recent or current use).</p> <p>In the statements “drug abuse” refers to:</p> <p style="padding-left: 20px;">The use of prescribed drugs or over the counter drugs in excess of the directions</p> <p style="padding-left: 20px;">Any non-medical drugs (including cannabis, solvents, tranquillisers, barbiturates, cocaine, stimulants, hallucinogens or opiates)</p> <p>Ask the individual every question. If they have difficulties with a statement, then choose the response which the individual indicates is mostly right.</p>	
	(a) Have you used drugs other than those required for medical reasons?	Yes (1) No (1)
	(b) Do you abuse more than one drug at a time?	Yes (1) No (1)
	(c) Are you always able to stop using drugs when you want?	Yes (1) No (1)
	(d) Have you had “blackouts” or “flashback” as a result of drug use?	Yes (1) No (1)
	(e) Do you ever feel bad or guilty about your drug use?	Yes (1) No (1)
	(f) Do those close to you ever complain about your involvement with drugs?	Yes (1) No (1)
	(g) Have you neglected your family because of your use of drugs?	Yes (1) No (1)
	(h) Have you engaged in illegal activities in order to obtain drugs?	Yes (1) No (1)

Homelessness and Substance Misuse Research – Interview Guide

D11	(i) Have you ever experienced withdrawal symptoms (felt sick) when you stopped using drugs?	Yes (1)	No (1)		
	(j) Have you had medical problems as a result of your drug use? (e.g. memory loss, hepatitis, convulsion, bleeding etc.)	Yes (1)	No (1)		
	Total Score				
		Never or Almost Never	Sometimes	Often	Always or Nearly Always
	(a) Did you ever think your use of (drugs) was out of control?	_____	_____	_____	_____
	(b) Did the prospect of missing a smoke/snort/ 'turn' make you very anxious or worried?	_____	_____	_____	_____
		Not at all	A little	Quite a lot	A great deal
	(c) How much did you worry about your use of (drug)?	_____	_____	_____	_____
		Never or Almost Never	Sometimes	Often	Always
	(d) Did you wish you could stop?	_____	_____	_____	_____
	Not Difficult	Quite Difficult	Very Diffi- cult	Imposs- ible	
(e) How difficult would you find it to stop or go without (drug)?	_____	_____	_____	_____	
Have you ever injected drugs?					
Yes <input type="checkbox"/> No <input type="checkbox"/>					

Homelessness and Substance Misuse Research – Interview Guide

IF NEVER INJECTED GO TO SECTION D23 IF EVER INJECTED ASK THE FOLLOWING	
D12	What age were you when you first injected? _____ Years
D13	What was the first drug you ever injected? _____
D14	Have you injected drugs in the last four weeks? Yes <input type="checkbox"/> No <input type="checkbox"/>
IF INJECTED IN THE LAST FOUR WEEKS ASK QUESTIONS D15-D22 IF INTERVIEWEE HAS NOT INJECTED IN THE LAST FOUR WEEKS GO TO SECTION D23E	
D15	Do you usually inject yourself? Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Never <input type="checkbox"/>
D16	What is your most common injecting site (i.e. where on your body) _____
D17	Do you have difficulty in finding an injecting site? Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Never <input type="checkbox"/>
D18	In what place (i.e. location) do you usually inject? Park <input type="checkbox"/> Street <input type="checkbox"/> Hostel <input type="checkbox"/> Home of friends/family <input type="checkbox"/> Public toilet <input type="checkbox"/> Other (please specify) <input type="checkbox"/>
D19	In the last four weeks have you done any of the following? Shared spoons/filters <input type="checkbox"/> Given anyone your injecting equipment <input type="checkbox"/> Used others injecting equipment <input type="checkbox"/>

Homelessness and Substance Misuse Research – Interview Guide

D23	<p>Have you been in contact with any of the following drug and alcohol services within the last month?</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Needle Exchange</td><td style="width: 50px; text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Drop in Centres</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">In-patient Detox</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Detox</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Counselling</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Outreach Team</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Addition Teams</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Residential Drug Programme</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Narcotic Anonymous</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Drug Arrest Schemes</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Dual Diagnosis Teams</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Voluntary Agency Counselling</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Homeless Support Team</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Community Psychiatric Nurse</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Other (specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>	Needle Exchange	<input type="checkbox"/>	Drop in Centres	<input type="checkbox"/>	In-patient Detox	<input type="checkbox"/>	Community Detox	<input type="checkbox"/>	Counselling	<input type="checkbox"/>	Outreach Team	<input type="checkbox"/>	Community Addition Teams	<input type="checkbox"/>	Residential Drug Programme	<input type="checkbox"/>	Narcotic Anonymous	<input type="checkbox"/>	Drug Arrest Schemes	<input type="checkbox"/>	Dual Diagnosis Teams	<input type="checkbox"/>	Voluntary Agency Counselling	<input type="checkbox"/>	Homeless Support Team	<input type="checkbox"/>	Community Psychiatric Nurse	<input type="checkbox"/>	Other (specify)	<input type="checkbox"/>				
Needle Exchange	<input type="checkbox"/>																																		
Drop in Centres	<input type="checkbox"/>																																		
In-patient Detox	<input type="checkbox"/>																																		
Community Detox	<input type="checkbox"/>																																		
Counselling	<input type="checkbox"/>																																		
Outreach Team	<input type="checkbox"/>																																		
Community Addition Teams	<input type="checkbox"/>																																		
Residential Drug Programme	<input type="checkbox"/>																																		
Narcotic Anonymous	<input type="checkbox"/>																																		
Drug Arrest Schemes	<input type="checkbox"/>																																		
Dual Diagnosis Teams	<input type="checkbox"/>																																		
Voluntary Agency Counselling	<input type="checkbox"/>																																		
Homeless Support Team	<input type="checkbox"/>																																		
Community Psychiatric Nurse	<input type="checkbox"/>																																		
Other (specify)	<input type="checkbox"/>																																		
D24	<p>Have you experienced any difficulties in accessing these services in general?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, what difficulties?</p> <p style="text-align: right;">Tick all that apply</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Lack of information about the availability of services</td><td style="width: 50px; text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Having no fixed address</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Not being registered with a GP</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Unhelpful response from GP</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Location of services</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Entry/eligibility criteria for services (eg must not be current user of substances)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Inflexible programme design (re: attendance and compliance requirements)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Waiting time to get a place on programmes</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Appointment systems</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Opening hours</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Lack of child care facilities</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Substance misuse services not integrated with other services (eg housing, mental health problems, probation)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Lack of services tailored for homeless people with substance misuse problems</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Perceived stigma around homelessness</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Lack of confidence in service providers and ‘the system’</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Literacy skills</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td style="padding: 2px;">Disability – Physical</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>	Lack of information about the availability of services	<input type="checkbox"/>	Having no fixed address	<input type="checkbox"/>	Not being registered with a GP	<input type="checkbox"/>	Unhelpful response from GP	<input type="checkbox"/>	Location of services	<input type="checkbox"/>	Entry/eligibility criteria for services (eg must not be current user of substances)	<input type="checkbox"/>	Inflexible programme design (re: attendance and compliance requirements)	<input type="checkbox"/>	Waiting time to get a place on programmes	<input type="checkbox"/>	Appointment systems	<input type="checkbox"/>	Opening hours	<input type="checkbox"/>	Lack of child care facilities	<input type="checkbox"/>	Substance misuse services not integrated with other services (eg housing, mental health problems, probation)	<input type="checkbox"/>	Lack of services tailored for homeless people with substance misuse problems	<input type="checkbox"/>	Perceived stigma around homelessness	<input type="checkbox"/>	Lack of confidence in service providers and ‘the system’	<input type="checkbox"/>	Literacy skills	<input type="checkbox"/>	Disability – Physical	<input type="checkbox"/>
Lack of information about the availability of services	<input type="checkbox"/>																																		
Having no fixed address	<input type="checkbox"/>																																		
Not being registered with a GP	<input type="checkbox"/>																																		
Unhelpful response from GP	<input type="checkbox"/>																																		
Location of services	<input type="checkbox"/>																																		
Entry/eligibility criteria for services (eg must not be current user of substances)	<input type="checkbox"/>																																		
Inflexible programme design (re: attendance and compliance requirements)	<input type="checkbox"/>																																		
Waiting time to get a place on programmes	<input type="checkbox"/>																																		
Appointment systems	<input type="checkbox"/>																																		
Opening hours	<input type="checkbox"/>																																		
Lack of child care facilities	<input type="checkbox"/>																																		
Substance misuse services not integrated with other services (eg housing, mental health problems, probation)	<input type="checkbox"/>																																		
Lack of services tailored for homeless people with substance misuse problems	<input type="checkbox"/>																																		
Perceived stigma around homelessness	<input type="checkbox"/>																																		
Lack of confidence in service providers and ‘the system’	<input type="checkbox"/>																																		
Literacy skills	<input type="checkbox"/>																																		
Disability – Physical	<input type="checkbox"/>																																		

Homelessness and Substance Misuse Research – Interview Guide

D30	<p>Have you had contact with any of the following services/personnel within the last month – in relation to your drug use?</p> <p style="text-align: right;">Tick all that apply</p> <table style="width: 100%; border: none;"> <tr><td style="padding: 2px 5px;">GP Services</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">General Hospital Clinics</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Accident and Emergency Services</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Psychiatric Clinic</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Community Psychiatric Nurse</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Multi-disciplinary Team (Dual Diagnosis)</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Social Worker</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Local Council</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">PSNI</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Homelessness District Nurse</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> </table>	GP Services		General Hospital Clinics		Accident and Emergency Services		Psychiatric Clinic		Community Psychiatric Nurse		Multi-disciplinary Team (Dual Diagnosis)		Social Worker		Local Council		PSNI		Homelessness District Nurse	
GP Services																					
General Hospital Clinics																					
Accident and Emergency Services																					
Psychiatric Clinic																					
Community Psychiatric Nurse																					
Multi-disciplinary Team (Dual Diagnosis)																					
Social Worker																					
Local Council																					
PSNI																					
Homelessness District Nurse																					

Section E – Income

E01	<p>Which of the following sources of income do you have?</p> <p style="text-align: right;">Tick main sources</p> <table style="width: 100%; border: none;"> <tr><td style="padding: 2px 5px;">Regular Employment</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Odd Jobs/Occasional Labour</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Government Benefits/Payments (specify)</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Relatives/Partner/Friends</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Begging</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Criminal Activities</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Other</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> </table>	Regular Employment		Odd Jobs/Occasional Labour		Government Benefits/Payments (specify)		Relatives/Partner/Friends		Begging		Criminal Activities		Other			
Regular Employment																	
Odd Jobs/Occasional Labour																	
Government Benefits/Payments (specify)																	
Relatives/Partner/Friends																	
Begging																	
Criminal Activities																	
Other																	
E02	<p>[If individual has indicated they drink/take drugs]</p> <p>Where do you get money to support your drug and alcohol use?</p> <table style="width: 100%; border: none;"> <tr><td style="padding: 2px 5px;">Regular Employment</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Odd Jobs/Occasional Labour</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Government Benefits/Payments (specify)</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Relatives/Partner/Friends</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Begging</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Criminal Activities</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">By going without (e.g. sacrificing basic needs)</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> <tr><td style="padding: 2px 5px;">Other</td><td style="text-align: center; border: 1px solid black; width: 40px; height: 20px;"></td></tr> </table>	Regular Employment		Odd Jobs/Occasional Labour		Government Benefits/Payments (specify)		Relatives/Partner/Friends		Begging		Criminal Activities		By going without (e.g. sacrificing basic needs)		Other	
Regular Employment																	
Odd Jobs/Occasional Labour																	
Government Benefits/Payments (specify)																	
Relatives/Partner/Friends																	
Begging																	
Criminal Activities																	
By going without (e.g. sacrificing basic needs)																	
Other																	

Homelessness and Substance Misuse Research – Interview Guide

G04	Have you ever been refused access to homelessness services (only ask those who do not use drugs/alcohol)?
	Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes, for what reasons?
G05	How do you think homelessness services could be improved?

Homelessness and Substance Misuse Research – Interview Guide

Section I – Assessment of Current Needs

I01	<p>What would you regard as your main needs at the moment?</p>	Main	Tick all that apply
	Stable Accommodation	<input type="checkbox"/>	<input type="checkbox"/>
	Emergency Accommodation	<input type="checkbox"/>	<input type="checkbox"/>
	Treatment – Drug or Alcohol	<input type="checkbox"/>	<input type="checkbox"/>
	Treatment – Mental Health	<input type="checkbox"/>	<input type="checkbox"/>
	Employment/Training	<input type="checkbox"/>	<input type="checkbox"/>
	Health Care Counselling	<input type="checkbox"/>	<input type="checkbox"/>
	Legal Services	<input type="checkbox"/>	<input type="checkbox"/>
	Support Services	<input type="checkbox"/>	<input type="checkbox"/>
	Inpatient Detox	<input type="checkbox"/>	<input type="checkbox"/>
	Community Detox	<input type="checkbox"/>	<input type="checkbox"/>
	Opiate Detox	<input type="checkbox"/>	<input type="checkbox"/>
	Alcohol Detox	<input type="checkbox"/>	<input type="checkbox"/>
	Benzodiazepine Detox	<input type="checkbox"/>	<input type="checkbox"/>
	Harm Reduction Services	<input type="checkbox"/>	<input type="checkbox"/>
	Others (please specify	<input type="checkbox"/>	<input type="checkbox"/>

Homelessness and Substance Misuse Research – Interview Guide

Section J– Background Information

	Indicate that the following questions are about the individual’s personal background and as before, are optional.	
	FINALLY I WOULD LIKE TO ASK YOU A FEW QUESTIONS ABOUT YOURSELF	
J01	What is your highest level of education?	Tick as appropriate
	Degree level or higher	<input type="checkbox"/>
	BTEC (higher), BEC (higher), TEC (higher), HNC, HND and NVQ level 4	<input type="checkbox"/>
	2 or more ‘A’ levels – including GNVQ Advanced	<input type="checkbox"/>
	1 ‘A’ level	<input type="checkbox"/>
	BTEC (national), BEC (national), TEC (national), ONC, OND and NVQ level 3	<input type="checkbox"/>
	5 or more GCSEs (A*-C grades), including GNVQ Intermediate, NVQ Level 2, ‘O’ level grades A-C and CSE Grade 1	<input type="checkbox"/>
	1-4 GCSEs (A*-C grades), including GNVQ Foundation, ‘O’ level grades A-C and CSE grade 1	<input type="checkbox"/>
	1+ GCSEs (D-G grades) – including ‘O’ level grade D-E and CSE grades 2-5	<input type="checkbox"/>
	Other (please specify)	<input type="checkbox"/>
J02	Have any of the following applied over the past year?	Tick as appropriate
	In Part-Time Employment	<input type="checkbox"/>
	In Full-Time Employment	<input type="checkbox"/>
	On Training Course	<input type="checkbox"/>
	Unemployed	<input type="checkbox"/>
	Unavailable for work/Disability Allowance	<input type="checkbox"/>
	Childcare/Childrearing	<input type="checkbox"/>
	Student	<input type="checkbox"/>
	Others (specify)	<input type="checkbox"/>

Homelessness and Substance Misuse Research – Interview Guide

J03	If unemployed – how long have you been unemployed?
	<div style="display: flex; justify-content: space-between; width: 80%; margin-left: 20px;"> Years Months </div>

J04	Have you any problems with the law at the moment / in the past? Tick as appropriate																																										
	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">Current</th> <th style="width: 10%; text-align: center;">Past</th> </tr> </thead> <tbody> <tr> <td>No legal trouble</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Contact with probation/community services</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>On bail awaiting trial/sentencing</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Outstanding warrants</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Outstanding fines</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Others (specify)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		Current	Past	No legal trouble	<input type="checkbox"/>	<input type="checkbox"/>	Contact with probation/community services	<input type="checkbox"/>	<input type="checkbox"/>	On bail awaiting trial/sentencing	<input type="checkbox"/>	<input type="checkbox"/>	Outstanding warrants	<input type="checkbox"/>	<input type="checkbox"/>	Outstanding fines	<input type="checkbox"/>	<input type="checkbox"/>	Others (specify)	<input type="checkbox"/>	<input type="checkbox"/>																					
	Current	Past																																									
No legal trouble	<input type="checkbox"/>	<input type="checkbox"/>																																									
Contact with probation/community services	<input type="checkbox"/>	<input type="checkbox"/>																																									
On bail awaiting trial/sentencing	<input type="checkbox"/>	<input type="checkbox"/>																																									
Outstanding warrants	<input type="checkbox"/>	<input type="checkbox"/>																																									
Outstanding fines	<input type="checkbox"/>	<input type="checkbox"/>																																									
Others (specify)	<input type="checkbox"/>	<input type="checkbox"/>																																									

J05	Where are you from? <i>(Tick as appropriate)</i>																						
	<table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>Ireland</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Northern Ireland</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>UK England</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>UK Scotland</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>UK Wales</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Other EU Country</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Africa</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Asia</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>USA</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Australia</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Other</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>	Ireland	<input type="checkbox"/>	Northern Ireland	<input type="checkbox"/>	UK England	<input type="checkbox"/>	UK Scotland	<input type="checkbox"/>	UK Wales	<input type="checkbox"/>	Other EU Country	<input type="checkbox"/>	Africa	<input type="checkbox"/>	Asia	<input type="checkbox"/>	USA	<input type="checkbox"/>	Australia	<input type="checkbox"/>	Other	<input type="checkbox"/>
Ireland	<input type="checkbox"/>																						
Northern Ireland	<input type="checkbox"/>																						
UK England	<input type="checkbox"/>																						
UK Scotland	<input type="checkbox"/>																						
UK Wales	<input type="checkbox"/>																						
Other EU Country	<input type="checkbox"/>																						
Africa	<input type="checkbox"/>																						
Asia	<input type="checkbox"/>																						
USA	<input type="checkbox"/>																						
Australia	<input type="checkbox"/>																						
Other	<input type="checkbox"/>																						

J06	What is your community background? Tick as appropriate										
	<table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>Roman Catholic</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Presbyterian</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Church of Ireland</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Methodist Church in Ireland</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Other (record)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>	Roman Catholic	<input type="checkbox"/>	Presbyterian	<input type="checkbox"/>	Church of Ireland	<input type="checkbox"/>	Methodist Church in Ireland	<input type="checkbox"/>	Other (record)	<input type="checkbox"/>
Roman Catholic	<input type="checkbox"/>										
Presbyterian	<input type="checkbox"/>										
Church of Ireland	<input type="checkbox"/>										
Methodist Church in Ireland	<input type="checkbox"/>										
Other (record)	<input type="checkbox"/>										

Homelessness and Substance Misuse Research – Interview Guide

J07	<p>What is your ethnic origin?</p> <p>White <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Chinese <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Irish Traveller <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Indian <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Pakistani <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Bangladeshi <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Black Caribbean <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Black African <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Black Other <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Other ethnic group <input style="width: 40px; height: 15px;" type="checkbox"/></p> <p>Specify</p>
	<p>No Response <input style="width: 40px; height: 15px;" type="checkbox"/></p>
THANK INTERVIEWEE FOR PARTICIPATING IN RESEARCH	

Signatures to confirm that payment (£20) was provided upon completion of interview	
<p>_____ Initials of interviewee</p>	<p>_____ Date</p>
<p>_____ Signature of Fieldworker</p>	<p>_____ Date</p>

Homelessness and Substance Misuse Research – Interview Guide

	<p>Additional Comments/Notes</p>
--	---

Appendix II

Information Provided to Interviewees

1. INFORMATION FOR INTERVIEWEES

1. Background to the Research

The purpose of the research is to:

- try to understand patterns of drug and alcohol use among homeless people;
- seek the views of homeless people on the information and services available to them;
- understand the real needs of homeless people, particularly in relation to alcohol and drug problems; and
- gain information to help service providers and policy makers in planning support that meets the needs of the homeless population.

We will be asking questions about your:

- personal background;
- experience of homelessness;
- health;
- alcohol and drug use;
- experience of accessing services;
- current needs

The research has been commissioned by the Department of Health, Social Services and Public Safety with the support of the NI Housing Executive, Council for the Homeless and the Northern Ireland Community Addiction Service.

2. Our Commitment to Research Participants

We guarantee that:

- all information will be treated in absolute confidence (e.g. we will not discuss anything you say to us with accommodation or treatment service providers);
- no information in the report will be linked, in any way, to any individual participant;
- £20 will be paid to you on completion of the interview;
- we will stop the interview at any point if you request us to;
- you are free to decline to answer particular questions;
- we will try to find appropriate ways for sharing research findings with interviewees;

3. What we require of Research Participants

We would ask the following of interviewees:

- a maximum time commitment of one hour;
- honest answers.

4. Method of Recording

We need to record the points you make during the interview. Which of the following would you prefer:

- written note-taking;
- use of a tape recorder.

5. Clarification

Please let us know if you have any questions on any aspect of our research.

6. Background to the Research

The purpose of the research is to:

- try to understand patterns of drug and alcohol use among homeless people;
- seek the views of homeless people on the information and services available to them;
- understand the real needs of homeless people, particularly in relation to alcohol and drug problems; and
- gain information to help service providers and policy makers in planning support that meets the needs of the homeless population.

We will be asking questions about your:

- personal background;
- experience of homelessness;
- health;
- alcohol and drug use;
- experience of accessing services;
- current needs

The research has been commissioned by the Department of Health, Social Services and Public Safety with the support of the NI Housing Executive, Council for the Homeless and the Northern Ireland Community Addiction Service.

7. Our Commitment to Research Participants

We guarantee that:

- all information will be treated in absolute confidence (e.g. we will not discuss anything you say to us with accommodation or treatment service providers);
- no information in the report will be linked, in any way, to any individual participant;
- a donation of £20 will be paid to the Ormeau Centre on your behalf. They will make sure that you benefit from the donation directly;
- we will stop the interview at any point if you request us to;
- you are free to decline to answer particular questions;
- we will try to find appropriate ways for sharing research findings with interviewees;

8. What we require of Research Participants

We would ask the following of interviewees:

- a maximum time commitment of one hour;
- honest answers.

9. Method of Recording

We need to record the points you make during the interview. Which of the following would you prefer:

- written note-taking;
- use of a tape recorder.

10. Clarification

Please let us know if you have any questions on any aspect of our research

Appendix III

Background Information on Interviewees

BACKGROUND INFORMATION

The following section provides background information on the 154 homeless people interviewed for this research.

1. Gender and Age

	16-17	18-25	26-59	60+	Total
Male	7	21	53	0	81
Female	8	30	31	4	73
Total	15	51	84	4	154

2. Accommodation

Accommodation Type	Number
Direct Access Hostel	70
Move On Accommodation	26
Night Shelter	15
Private Rental	2
Other	41

Other types of accommodation included, probation/bail hostels, referral hostels and temporary accommodation.

3. Education

Education Level	Number	%
None	67	45
1-4 GCSE's (a-c grades)	24	16
5+ GCSE's (a-c grades)	23	16
1+ GCSE (d-g grades)	6	4
BTEC (National) or equivalent	5	3
2+ A Levels or equivalent	5	3
BTEC (Higher) or equivalent	3	2
Degree or higher	2	1
Other	13	9
Total	148	100

Note: 6 interviewees did not provide education details

4. Economic / Educational / Other Activity in the past year

	Number	% (of 154)
Unemployed	99	64
Unavailable for Work / Disability Allowance	55	36
On Training Course	35	23
Childcare / Childrearing	32	21
Full-Time Employment	30	19
Part-Time Employment	29	19
Student	13	8
Other	18	12

Note: total exceeds 154 as multiple answers allowed

Duration of Unemployment	Number	%
0 to 6 months	17	20
7 months to 1 year	13	16
Between 1 and 4 years	27	32
Between 5 and 9 years	13	16
10 years or more	13	16
Total	83	100

Note: 16 interviewees did not provide details

5. Problems with the Law

	Current	Past
No legal trouble	68	46
Contact with probation / community services	24	44
On bail awaiting trial / sentencing	17	36
Outstanding fines	4	19
Outstanding warrants	2	14
Other	11	22

Note: multiple answers allowed

6. Nationality

	Number	%
Northern Ireland	129	84
England	11	7
Ireland	6	4
Scotland	6	4
Wales	1	0.5
Australia	1	0.5
Total	154	100

7. Community Background

	Number	%
Catholic	86	57
Presbyterian	30	20
Church of Ireland	13	8
Methodist	4	3
Other	19	12
Total	152	100

Note: 2 interviewees did not provide community background details

8. Ethnic Origin

	Number	%
White	152	99.5
Irish Traveller	1	0.5
Total	153	100

Note: 1 interviewee did not provide ethnic origin details

9. Income

All 154 interviewees had one or more sources of income.

	Number	% (of 154)
Government Benefits/Payments	144	94
Relatives/Partners/Friends	29	19
Regular Employment	12	8
Odd Jobs/Occasional Labour	8	5
Criminal Activities	7	5
Begging	6	4
Other	11	7

Appendix IV

Recruitment Sites for Interviews with Homeless People

RECRUITMENT SITES AND NUMBERS INTERVIEWED

Site	Number Interviewed	NIHE Area	Wet/Dry/Mixed
Chichester House (Ballymena)	4	North East	Self-contained
Clarendon Street (L'Derry)	3	West	Dry
Clooney Terrace (L'Derry)	5	West	Mixed
Dillon Court (Strabane)	5	West	Dry/Mixed
Dismas House (Belfast)	6	Belfast	Dry
East Belfast Mission	4	Belfast	Mixed
Flax Foyer (Belfast)	4	Belfast	Mixed
Foyle Haven Centre (L'Derry)	3	West	Wet
Grosvenor House (Belfast)	3	Belfast	Dry
Inverary House (Holywood Road, Belfast)	3	Belfast	Mixed
Lee Hestia (Twinbrook)	3	South East	Self-contained
Lee Hestia (Dunclug, Ballymena)	7	North East	Mixed
Life Hostel (Belfast)	2	Belfast	Dry
Linen Court (Armagh)	3	South	Dry
Methodist City Mission (L'Derry)	3	West	Dry
Millhouse (Ballymena)	5	North East	Self-contained
Mount Zion House (Lurgan)	3	South	Self-contained
Must Hostel (Cookstown)	11	West	Dry
NIHE Lisburn	4	South East	Self-contained
NIHE Newtownards	3	South East	Self-contained
Regina Coeli Hostel (Belfast)	7	Belfast	Mixed
Rosemount House (Belfast)	4	Belfast	Dry
Roveville House (Belfast)	8	Belfast	Dry
SATH (Strabane)	3	West	Dry
Simon Hostel (Coleraine)	4	North East	Mixed
Simon Hostel (L'Derry)	6	West	Mixed
Simon Hostel (Newry)	3	South	Mixed
Strand Foyer (L'Derry)	3	West	Mixed
Sydenham House (Belfast)	1	Belfast	Dry
Templemore Hostel (Belfast)	5	Belfast	Mixed
Utility Street (Belfast)	3	Belfast	Dry
Verner Street (Belfast)	18	Belfast	Mixed
W J Thompson House (Belfast)	5	Belfast	Mixed
Total	154		

Appendix V

Questionnaire for Substance Misuse Providers



Survey of Substance Misuse Service Providers

Research into Substance Misuse and Homelessness



Research sponsored by the Research and Information Working Group created under the Model for Joint Implementation of Drug and Alcohol Strategies.

Department of Health, Social Services and Public Safety

Supported by



INTRODUCTION

This research project has been commissioned by the Department of Health, Social Services and Public Safety, through the Research and Information Working Group created under the Model for the Joint Implementation of the Drug and Alcohol Strategies. A team of researchers from Deloitte is carrying out the project in association with the Simon Community. The research aims to provide a detailed account of substance misuse among homeless people in order to inform future policy on prevention and treatment activity.

The objective of this survey of providers of services to homeless people is to:

1. map out patterns of substance misuse among homeless people in Northern Ireland;
2. examine the range of substance misuse information, prevention and treatment services available to homeless people, consider any gaps and identify any access issues.

Questionnaires are being sent to all organisations that provide substance misuse/addiction services. Larger organisations may ask their individual units or teams to complete a questionnaire. There is a space in Section A to show if you are responding for the whole organisation or for a team/unit. There are separate questions for those providing services to families rather than individuals.

We appreciate that you may be involved in a number of research exercises and that this questionnaire asks for a lot of detailed data. However, we would be grateful if you would take the time to participate in this important, policy-shaping research. To help with completing the questionnaire we have provided a list of definitions on the next page. Also, we have indicated, for each question, the minimum amount of information required (in the shaded boxes) and the additional information that we hope you can also provide. To simplify the process, most questions relate to current clients so there is no need to review files of previous clients.

Most of the questions ask for information that can be gathered from your records. For some questions you may need to make estimates or to provide information based on your professional judgement. We have stated where this is the case.

Please be assured that all information provided in response to this questionnaire will be treated confidentially. Only the research team will see individual responses and we will ensure that research report does not attribute comments or findings to individuals or organisations.

If you have any queries about the questionnaire or the research project, please do not hesitate to call either Angela Hodkinson or Kathy Colgan on 028 9032 2861.

DEFINITIONS

HOMELESS - anyone in temporary accommodation or anyone who has slept rough for more than six nights in the last six months

AT RISK OF HOMELESSNESS – anyone in danger of losing their home / permanent accommodation as a result of their substance misuse.

SUBSTANCE - any drug, whether prescribed for an individual or not, including solvents, tranquillisers and alcohol.

LEVEL OF ALCOHOL USE

(As per Health Promotion Agency, Adult Drinking Patterns in NI)

Sensible Drinking – Below recommended number of units per week - Men 21, Women 14.

Risk Drinking – weekly consumption of between 21-50 units for men and 14-35 units for women.

Heavy Drinking – Above 50 units per week for men and above 35 units per week for women.

Binge Drinking – drinking a large quantity of units in one sitting – defined as 10 or more units for men and 7 or more units for women. This category also includes problem drinkers experiencing occasional relapses.

CURRENT CLIENTS – where questions ask for information on CURRENT CLIENTS this should be assumed to be the clients your organisation has registered at the time the questionnaire is received. This is to allow for organisations where client numbers can change on a daily basis.

A – BACKGROUND TO ORGANISATION & SERVICES PROVIDED

A1. (a) Contact name: _____
 (b) Telephone number: _____
 (c) Date you Completed this survey: _____

A2. Organisation you work for: _____

A3. Sector organisation belongs to:
 Statutory
 Voluntary
 Community
 Private

A4. Are you answering this questionnaire on behalf of: The organisation (Go to A6)
 A team/unit (Go to A5)

A5. Name of Team or Unit to which this response applies: _____

A6. Services provided and number of clients. Show the number of clients using each service between 01/04/03 and 30/06/03 and give a breakdown by age and gender if possible. For any service you do not provide write '0'.

Substance Misuse Services:	No. Clients	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Community Addiction Team								
Voluntary Community Treatment Service								
Statutory Residential Treatment Service								
Voluntary Residential Treatment Service								
Statutory Outreach Team								
Voluntary Outreach Team								
Community Advice Group								
Dual Diagnosis Team								
Other (please specify) _____								

B – RECORDING HOUSING STATUS

B1. Do you routinely record information on clients' housing status? Yes No (Go to B3)

B2. How do you routinely gather this information?
(Tick all that apply)

Initial assessment/admission reports?
Other routine statistical monitoring? (e.g. for Drug Misuse Database)
Other? (Please specify)

B3. This research requires information on substance misuse patterns among your *homeless clients only*. What source of information has been used to complete this questionnaire? (Tick all that apply)

Initial assessment/admission reports?
Other routine statistical monitoring?
Case Audit undertaken for this research
Best estimate based on professional knowledge / experience
Other? (Please specify)

NB If you cannot provide information for your homeless clients only please go to **SECTION D**.

C – ESTIMATING THE SCALE OF SUBSTANCE USE

C1. Please fill in the table below to show the housing status of your *current clients* (refer to Definitions on page 2). If possible provide an age and gender breakdown.

	No. Current Clients	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
(a) Not homeless								
(b) Homeless								
(c) At risk of becoming homeless								

NB - Subsequent questions refer to clients in these two groups only – C2-C4 relates to **HOMELESS CLIENTS** and C5-C7 relates to **CLIENTS AT RISK OF HOMELESSNESS**.

HOMELESS CLIENTS

C2. Please indicate the pattern of substance use among your *current homeless clients*. Please provide as much detail as possible using the four tables below:

- Table I. – Summary of substance use by *all current homeless clients*.
- Table II. – Details of homeless clients using *alcohol only*.
- Table III. – Details of homeless clients using both *alcohol and drugs (including solvents)*.
- Table IV. – Details of homeless clients *only using drugs (not alcohol)*.

I. All Homeless Clients

(NB – the total number of clients in this table should match the figure entered for C1b)

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
(a) Alcohol ONLY - no drugs are used (Provide details in Table II)								
(b) Alcohol AND Drugs - both alcohol and other drugs (including solvents) are also used (Provide details in Table III)								
(c) Drugs ONLY - other drugs (including solvents) are used but alcohol is not (Provide details in Table IV)								

II. Homeless Clients Using Alcohol ONLY

(NB – this table relates to the clients in Table I (a))

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2).
Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								

How many are Binge Drinkers?								
------------------------------	--	--	--	--	--	--	--	--

**III. Homeless Clients Using Alcohol AND Drugs
(NB – this table relates to the clients in Table I (b))**

Fill in the drinking patterns of the homeless clients using both alcohol and drugs (refer to Definitions on Page 2). Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								

How many are Binge Drinkers?								
------------------------------	--	--	--	--	--	--	--	--

Fill in the drugs or substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								

**IV. Homeless Clients Using Drugs ONLY (Not Alcohol)
(NB – this table relates to the clients in Table I (c))**

Fill in the drugs or substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								

C4. Provide your best estimate of the number of *current homeless clients* involved in activities related to substance use that put their health and safety at risk. Provide a breakdown of the approximate frequency of these behaviours if possible.

NB – the total number of clients should match the figure entered for C1b.

Risk Behaviour	No. Homeless Clients	Frequency of Behaviour		
		Occasional (Several times per year or less)	Regular (Once or twice a Month)	Constant (At least once a week)
Unsafe Sex				
Intravenous Drug Use				
Sharing Needles				
Self Harm				
Suicidal Behaviour				
Commercial Sex/Prostitution				
Criminal Behaviour				
None of these		<i>Not applicable</i>	<i>Not applicable</i>	<i>Not applicable</i>
Other (Please specify)				

CLIENTS AT RISK OF HOMELESSNESS

C5. Please indicate the pattern of substance use among *your current clients at risk of homelessness*. Please provide as much detail as possible using the four tables below:

- Table I. - Summary of substance use by *all current clients at risk of homelessness*
- Table II. – Details of *clients at risk of homelessness due to their misuse of alcohol (not drugs)*.
- Table III. – Details of *clients at risk of homelessness due to their misuse of alcohol and drugs (including solvents)*.
- Table IV. – Details of *clients at risk of homelessness due to their misuse of drugs only (not alcohol)*.

1. All Clients at Risk of Homelessness
(NB – the total number of clients in this table should match the figure entered for C1c)

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
(a) Alcohol ONLY - no drugs are used (Provide details in Table II)								
(b) Alcohol AND Drugs - both alcohol and other drugs (including solvents) are also used (Provide details in Table III)								
(c) Drugs ONLY - other drugs (including solvents) are used but alcohol is not (Provide details in Table IV)								

II. Clients at Risk of Homelessness Using Alcohol ONLY
(NB – this table relates to the clients in Table I (a))

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2).
 Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								
How many are Binge Drinkers?								

**III. Clients at Risk of Homelessness Using Alcohol AND Drugs
(NB – this table relates to the clients in Table I (b))**

Fill in the drinking patterns of the clients using alcohol (refer to Definitions on Page 2).
Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
How many are:								
Sensible Drinkers?								
Risk Drinkers?								
Heavy Drinkers?								

How many are Binge Drinkers?								
------------------------------	--	--	--	--	--	--	--	--

Fill in the drugs or substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								

**IV. Clients at Risk of Homelessness Using Drugs ONLY (Not Alcohol)
(NB – this table relates to the clients in Table I (c))**

Fill in the drugs or substances used by these clients. Provide an age and gender breakdown if possible.

	Total	Gender		Age				
		Male	Female	16	17	18-25	26-40	40+
Drugs/Substances:								
Cannabis								
Ecstasy								
Amphetamines (e.g. speed)								
Amyl Nitrate (poppers)								
Hallucinogens (e.g. LSD, PCP, Magic Mushrooms, Ketamine)								
Crack								
Cocaine								
Heroin								
Substitute Opiates (methadone, buprenorphine, DF118)								
Other Opiates (Codeine, dihydrocodeine, morphine, solpadine, co-codamol etc.)								
Anabolic Steroids								
Prescription Drugs (e.g. tranquillisers, antidepressants)								
Solvents (e.g. gas, glue, inhalants)								
Others (please specify):								
1. _____								
2. _____								
3. _____								

C6. Provide your best estimate of the number of *current clients at risk of homelessness* involved in activities that put their health and safety at risk. Provide a breakdown of the approximate frequency of these behaviours if possible.

NB – the total number of clients should match the figure entered for C1.

Risk Behaviour	No. Clients at Risk of Homelessness	Frequency of Behaviour		
		Occasional (Several times per year or less)	Regular (Once or twice a Month)	Constant (At least once a week)
Unsafe Sex				
Intravenous Drug Use				
Sharing Needles				
Self Harm				
Suicidal Behaviour				
Commercial Sex/Prostitution				
Criminal Behaviour				
None of these		<i>Not applicable</i>	<i>Not applicable</i>	<i>Not applicable</i>
Other (Please specify) _____				

D - ACCESS TO SUBSTANCE MISUSE SERVICES FOR HOMELESS PEOPLE

D1. Do you think homeless people face barriers in accessing substance misuse services? Yes (Go to D2)
No (Go to D3)

D2. If so, what do you think these barriers are?

Tick all the barriers that you think apply and indicate the five barriers you consider to be the greatest by ranking five of these options from 1 to 5 (where 1 is the greatest barrier).

	Barrier (Tick all that apply)	5 Greatest Barriers (Rank 1-5)
Lack of information about availability of services	<input type="radio"/>	
Having no fixed address	<input type="radio"/>	
Not being registered with a GP	<input type="radio"/>	
Unhelpful response from GP	<input type="radio"/>	
Location of services	<input type="radio"/>	
Entry/eligibility criteria for services (e.g. must not be 'using' to access service)	<input type="radio"/>	
Programme design (e.g. attendance & compliance requirements)	<input type="radio"/>	
Waiting times to get a place on programmes	<input type="radio"/>	
Appointment systems	<input type="radio"/>	
Opening hours	<input type="radio"/>	
Lack of childcare facilities	<input type="radio"/>	
Substance misuse services not integrated with other services (e.g. housing, mental health, probation)	<input type="radio"/>	
Lack of services tailored for homeless people with substance misuse problems	<input type="radio"/>	
Perceived stigma around homelessness	<input type="radio"/>	
Clients' lack of confidence in service providers and 'the system'	<input type="radio"/>	
Client's literacy skills	<input type="radio"/>	
Client's mental health problems	<input type="radio"/>	
Client's learning, physical or sensory disability	<input type="radio"/>	
Fear of social services intervention (e.g. losing custody of children)	<input type="radio"/>	
Fear of partner's response to seeking help (e.g. domestic violence)	<input type="radio"/>	
Policy of 'barring' clients from services	<input type="radio"/>	
Requirement for support worker to accompany client	<input type="radio"/>	
Others (Please specify below):		
1. _____	<input type="radio"/>	
2. _____	<input type="radio"/>	
3. _____	<input type="radio"/>	

D3. To what extent does being homeless have an impact on the success of your clients' substance misuse treatment?

- Being homeless has a major impact on the success of treatment
- Being homeless has some impact on the success of treatment
- Being homeless does not have any impact on the success of treatment (Go to **D5.**)

D4. What impact does being homeless have? Tick all that apply.

	Impact (Tick all that apply)
Transience makes it difficult for service providers to keep in contact with client	<input type="radio"/>
Transience means there is little or no continuity from one treatment episode to the next	<input type="radio"/>
It can be hard for clients to commit to treatment requirements due to chaotic lifestyle	<input type="radio"/>
It can be hard for clients to keep appointments	<input type="radio"/>
Clients present with multiple problems – lack of focus on substance misuse treatment	<input type="radio"/>
Clients present at crisis point with respect to their substance misuse	<input type="radio"/>
Clients are more concerned with addressing housing needs than addressing substance misuse problems	<input type="radio"/>
Living in temporary accommodation with other drug/alcohol users while in treatment is unhelpful	<input type="radio"/>
Having no housing on completion of residential treatment programme may lead to relapse	<input type="radio"/>
Difficulties in establishing a relationship with the individual's accommodation provider	<input type="radio"/>
Others (Please specify)	<input type="radio"/>

D5. Do you think there are gaps in the range of substance use services available to homeless people?

Yes (Go to **D6.**)

No (Go to **D7.**)

D6. If so, what are these gaps?

D7. Do you think people with substance misuse problems who are also homeless face barriers in accessing accommodation services?

Yes
No

D9. If so, what do you think these barriers are?

D9. Do you think there are gaps in the range of homelessness services available for people who also have substance misuse problems? (e.g. mix of dry, wet & damp housing)

Yes (Go to **D10.**)
No (Go to **D11.**)

D10. If so, what are they?

D11. In general, how would you describe working relationships between providers of homeless services and providers of substance misuse services?

Excellent
Good
Average
Poor
Very Poor

D12. In general, do you consider homeless and substance misuse services are adequately integrated/co-ordinated?

Yes
No

D13. What 3 changes would you make to improve integration / co-ordination between homeless and substance misuse services?

1. _____

2. _____

3. _____

Please add any other comments, concerns or suggestions you have regarding current service provision in the space below:

Thank you for taking the time to participate in this research.

Please return this questionnaire in the pre-paid envelope provided by Friday 14 November 2003.

A seminar to present the research findings will be held in Spring of 2004.