



## Quay Services Annual Report 2009 - 2010

*'When I first came to Quay Services I was working on the streets. I even worked on the streets when I was pregnant, which I am so ashamed of now but I needed the money for drugs for me and my partner. He was violent and abusive towards me and would make me go out to work. I had also lost my tenancy due to rent arrears. I did not know how to get myself out of the situation I was in. The workers at the drop in never judged me for what I was doing and the choices I made. Through going to the drop in I realised that I needed to make changes and that I could get counselling. Now, I am stable on my methadone and don't use any drugs. I have my daughter back and we live in our beautiful home. I do not see my ex partner anymore and I am rebuilding relationships with my family, my mum in particular. This service has changed my life totally'.*

Elaine, aged 29, Quay Services client

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## **Section 1:**

### **Service Description**

Drugs Action has provided an outreach service to women involved in street prostitution for the past 15 years. The women the service reaches are perceived to be isolated and vulnerable; do not use traditional services; have limited access to wider services; are at high risk from physical abuse; and are likely to have a wide range of additional problems. This service is the only service in the North East which solely targets women involved in the sex industry, including those who inject drugs and may not be accessing other services. The primary aim of the service is to reduce the harms to the individual and the wider community associated with prostitution and to support positive changes in high risk behaviour and lifestyle.

The service provides a range of support tailored to attracting and retaining sex working women in contact with support services. This includes:

- a) A street outreach service
- b) A night time drop-in service
- c) A follow up/counselling service
- d) Development work with indoor/off-street sex workers

### **Street Outreach Service**

The street outreach service is provided by 2 qualified drugs workers on the street where women are known to sex work, over 2 – 4 evenings per week. This is provided flexibly taking into account changing work patterns of street sex workers. A leased car is used to deliver the service on the street. This ensures that the service is easily recognised by service users and the Police.

All Quay Services (including those delivered on the street, drop-in, daytime follow up and work with off-street sex workers) offer the following:

- Access to free sterile sets of injecting equipment, swabs, disposable bins, sterile citric acid
- Safe disposal of injecting equipment
- Information, advice and practical support on safer sex and 'safer' injecting practices
- Access to free condoms and lube
- A focus on personal safety including street safety advice and the provision of panic alarms
- Advice and support on Sexually Transmitted Infection Testing (STI) including information on the range of sexual health services in Grampian
- Advice, support and information on BBV testing and immunisation
- Quick access to Drugs Action's other services, referrals to other non Drugs Action services, including link into Choose Life initiative
- Information on the range of drug and sexual health services in Aberdeen City

## The Drop-in Service

6 months ago I was working every night, sleeping during the day and had nothing else in my life but drugs. I was homeless and I would have chosen drugs over anything.

The workers kept on offering to get me help but I was never ready to do anything about it. Because the workers keep talking to you about how you can get out of your mess it makes you feel like you can. I think the penny dropped one day and I went to my doctors and he put me on a script. Now I only come out to work now and again. I spoke to my Dr and he agreed to allow my friend that lives with me to register at the same place. I kept telling her this but she would never go along until a Quay Services worker took her along. She now has a script and is doing better. This helps me because it stops her needing to bring drugs into the flat. I think my friend sees me as a good influence, we help each other.

I have been up to the college to see about a course in hair and beauty as this is what I want to do.

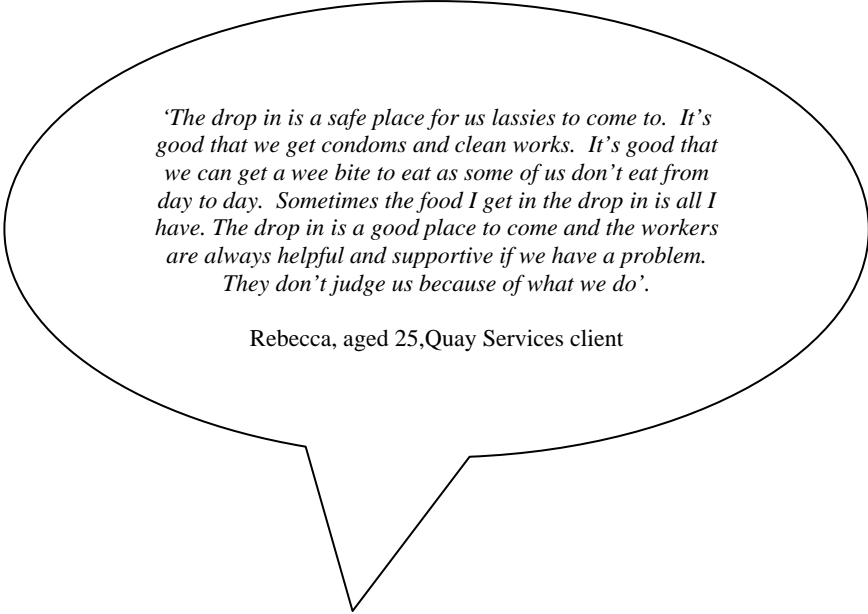
Helen, aged 30 Quay Services client

The drop-in service is delivered from 6 Virginia Street, Aberdeen and is open on Monday, Wednesday, Thursday and Friday evenings of each week for a total of 12 average hours per week. The drop-in is provided by 3 qualified drugs workers and 1 support assistant for 4 evenings per week. The qualified staff are part of the multi-disciplinary team of female staff at Drugs Action who carry out the assessment and interventions with the service users. The support assistant carries out duties which enable the smooth running of the drop-in service.

In addition to what is listed on the previous page, the drop – in service provides greater opportunity to engage with women in more detail and includes a focus on motivating and supporting women to make significant and positive changes in their lives. This specifically includes providing the following:

- Respite from street work, access to refreshments
- A safe discreet space for women to discuss issues of concern relating to prostitution and general lifestyle including drug use

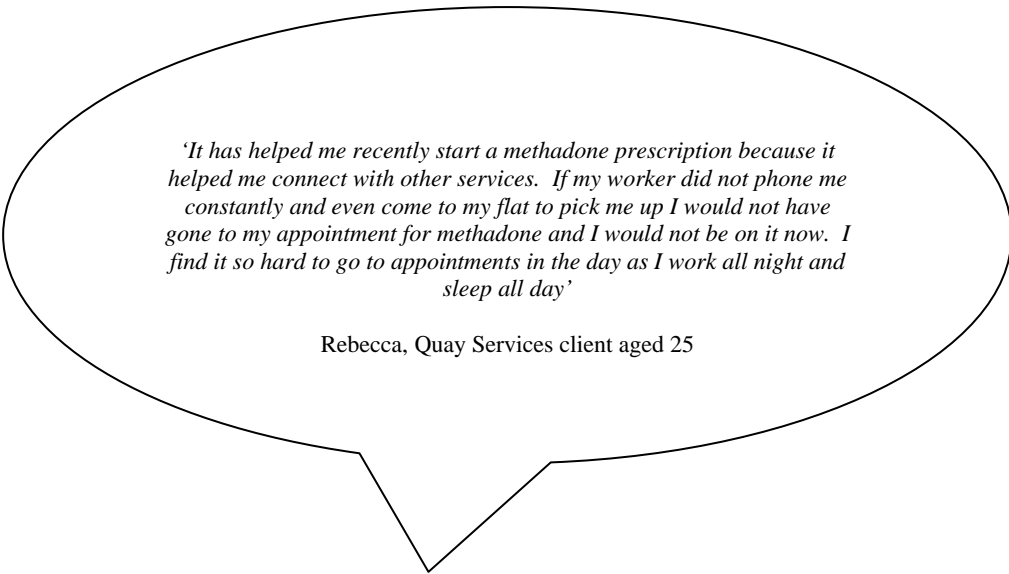
- The opportunity to establish trust and good relationships with staff
- Access to the Dodgy Punters scheme
- Advice, information and practical support on alternatives to injecting drug use, 'safer' injecting practices, the risks of drug use and stabilising/changing/stopping drug use
- Sexual health assessments, pregnancy testing service and self Chlamydia/Gonorrhoea tests;
- Assistance with engaging, appointments and attendance with statutory services including social work, general practices, GUM clinic and practice registration;
- The opportunity and promotion of improved self-esteem, confidence, and development skills needed for significant change in drug use and related lifestyle;
- Consideration of motivational interviewing, aimed at helping women identify aspects of their life they want to change and individual counselling;
- Assessment, care-planning, counselling and support through psychological, and joint working with other services;



*'The drop in is a safe place for us lassies to come to. It's good that we get condoms and clean works. It's good that we can get a wee bite to eat as some of us don't eat from day to day. Sometimes the food I get in the drop in is all I have. The drop in is a good place to come and the workers are always helpful and supportive if we have a problem. They don't judge us because of what we do'.*

Rebecca, aged 25, Quay Services client

## Follow up support/counselling



*'It has helped me recently start a methadone prescription because it helped me connect with other services. If my worker did not phone me constantly and even come to my flat to pick me up I would not have gone to my appointment for methadone and I would not be on it now. I find it so hard to go to appointments in the day as I work all night and sleep all day'*

Rebecca, Quay Services client aged 25

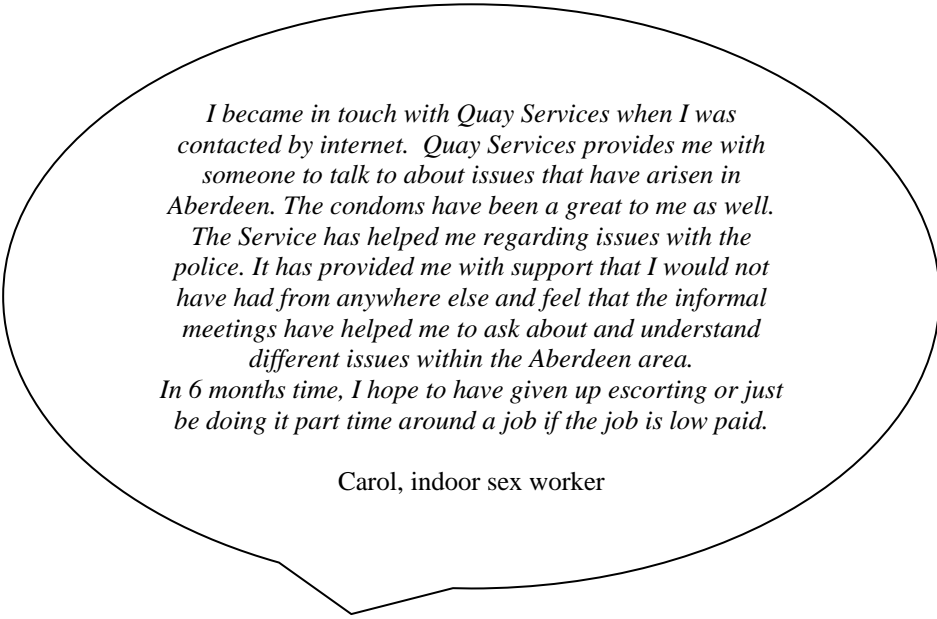
The follow up service is provided to support women who want to make significant changes in their lives including addressing their problematic drug use and their involvement in prostitution. This service is provided by qualified drugs workers and is delivered at times and locations suited to the individual service user. Due to the range of health and inter-related social problems which many women present with, this work involves a great deal of liaison and joint working with other services.

The **follow up service** provides daytime support to assist women in the following ways:

- The service user is supported to identify aspects of her life that she wants to change and make changes to achieve her goals using Motivational Interviewing where appropriate.
- General advice and information are provided to reduce immediate harms from current lifestyle.
- Opportunity is provided to improve the mental health of women involved in prostitution through counselling and support to improved self esteem, self confidence and coping skills using a CBT approach.

- Opportunity is provided to address drug use and underlying issues relating to involvement in prostitution through assessment, care planning and joint working with other services.
- Practical support is provided to help women access other relevant services such as GP, and Sexual health services.

### **Development Work with indoor sex workers**



*I became in touch with Quay Services when I was contacted by internet. Quay Services provides me with someone to talk to about issues that have arisen in Aberdeen. The condoms have been a great to me as well. The Service has helped me regarding issues with the police. It has provided me with support that I would not have had from anywhere else and feel that the informal meetings have helped me to ask about and understand different issues within the Aberdeen area. In 6 months time, I hope to have given up escorting or just be doing it part time around a job if the job is low paid.*

Carol, indoor sex worker

In 2009, feedback from our service users and intelligence from Grampian Police suggested that there was a significant increase in women working from flats, brothels and hotels in Aberdeen city and shire. Whilst we already had some contact with this client group through our existing services, we decided to carry out assertive outreach with this target group in order to raise their awareness of services which are available locally and to assess their health and social needs. This work has included making contact to women via phone text or email advertising on adult websites to make them aware of Quay services and offer face to face support.

## **Section 2: Service Aim and Objectives**

In order for the services to meet its overall aim of reducing the harms to women involved in prostitution and the wider community and to support positive changes in high risk behaviour and lifestyle, the following objective have been identified.

Objectives:

1. To establish effective engagement with women involved in prostitution;
2. To support and promote positive changes in high-risk behaviour and lifestyle (e.g. alcohol/drugs);
3. To improve access to other services (DA and non-DA services);
4. To reduce the harms associated with injecting drug use through provision of easy access to needle exchange facilities, supplies and alternatives to injecting
5. To prevent the transmission of blood borne viruses;
6. To encourage BBV testing and immunisation
7. To improve physical health, including sexual and reproductive health and injection practice;
8. To prevent unwanted pregnancies;
9. To reduce the transmission of sexually transmitted infections;
10. To improve mental health, including confidence and coping skills
11. To improve community safety and to reduce violence on the streets.

### Section 3: Service Activity Data

The following statistical data summarises activity from 1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010 for Quay Services street outreach, drop-in, follow up support and outreach work with indoor sex workers. The final column highlights the main service objectives which are addressed through each activity.

Quay Services Street Outreach Activity Data 1 <sup>st</sup> April 2009 – 31 <sup>st</sup> March 2010			Contributes to Service Objective:
Total number of street contacts	685 255 (service provided) 430 (service offered)		Objective 1
Total number of different women who received a service	84		Objective 1 Objective 2
Of those 84 seen, number who are seen on the street and had not used the drop-in service in the past year	25		
Number who are accessing streets outreach and also the drop-in service	59		
Number of occasions interventions provided by topic:	Harm reduction/BBV advice	29	Obj. 2,5,6
	Motivational advice	66	Obj. 2
	Physical health advice	41	Obj. 7
	Drug use risk reduction	53	Obj. 2
	Sexual health advice	16	Obj. 7,8,9
	Mental wellbeing	18	Obj. 10
	Safer working	84	Obj. 11
	Dodgy punters	13	Obj. 11
	Legal issues	44	Obj. 11,3
	Other	21	Obj. 2
	<b>Total</b>	<b>385</b>	
	Number of needle exchanges provided	117	Obj. 4
	Number of needles distributed	1485	Obj. 4
	Number of citric acid sachets distributed	1331	Obj. 4
	Number of condoms distributed	2369	Obj. 7,8,9
	Number of panic alarms	39	Obj. 11
	Number of occasions women signposted to other services	95	Obj. 3
	Number of direct referrals made to services	26	Obj. 3

<b>Service Data for the Drop-In Service 1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010</b>		<b>Contributes to Service Objective:</b>
<b>Attracting and retaining the target group</b>		
Total number of Quay Service clients accessing the drop-in service	126	Obj. 1
Total number of clients less than 18 years of age	0	
Total number of new clients (those not attending Quay Services in previous 6 months)	46	Obj. 1
Average monthly number of Quay Service clients using the service	45	Obj. 1
Number of visits to the service	1925	Obj. 1
Average monthly number of visits to the service	160	Obj. 1
<b>Moving on from high risk lifestyle and activity related to drug use and prostitution</b>		
Number of clients given BBV/harm reduction info & advice	86	Obj. 2,5,6
Number of clients given drug use risk reduction information	96	Obj. 2,4
Number of clients given prostitution advice and information	91	Obj. 11
Number of clients given motivational interventions to encourage positive changes in lifestyle	107	Obj. 2
Number of dodgy punter reports completed	30	Obj. 11
Number of women reporting attacks directly to the Police	5	
<b>Activity outputs - Needle Exchange</b>		
<b>Number of women accessing the needle exchange</b>	86	Obj. 2,4
Average monthly number of individuals accessing needle exchange:	27	Obj. 2,4
Number of needle exchange visits	838	Obj. 2,4
Number of needles distributed	16485	Obj. 2,4
Percentage return rate	42%	Obj. 4
Number of citric sachets provided	13879	Obj. 2,4
<b>Activity outputs – BBV</b>		
Number of clients given	86	Obj. 2,5,6

BBV/harm reduction info & advice		
Number of clients who have been tested for Hepatitis C	74%	Obj .6
Number of clients who have been tested for Hepatitis B	73%	Obj .6
Number of clients who have been tested for HIV	72%	Obj .6
Number of clients completed Hepatitis B immunisation	54%	Obj .6
Number of clients who report having been at risk of BBV transmission in the last year	36%	Obj. 2,5,6

<b>Activity outputs - Sexual Health</b>			
<b>Number of clients provided with sexual health advice and information</b>	73		Obj. 7,8,9
Number of individual clients accessing condoms	94		Obj. 7,8,9
Number of occasions condoms are distributed	774		Obj. 7,8,9
Number of condoms dispensed	12834		Obj. 7,8,9
Number of Chlamydia and Gonorrhoea kits distributed	45		Obj. 7,9
Number of women using the pregnancy testing service	25		Obj. 8
Number of women sign posted to sexual health services	32		Obj 3,7,8,9
Number of women directly referred to sexual health services	24		Obj 3,7,8,9
<b>Signposting and referrals made to other agencies</b>			
<b>Referral Organisation</b>	<b>Signpost</b>	<b>Liaison/referral</b>	
Well women, sexual health, family planning, maternity services	32	24	Obj. 3
Benefits advice	15	1	Obj. 3
Legal advice	25	11	Obj. 3
Social and mental health issues	23	10	Obj. 3
Homelessness services	52	19	Obj. 3
Primary healthcare	76	26	Obj. 3
Dental care	9	8	Obj. 3
Counselling	5	1	Obj. 3
Emergency Department care	12	9	Obj. 3
Debt advice	7	1	Obj. 3
SMS	14	9	Obj. 3
Children / family services	7	1	Obj. 3
Police	4	10	Obj. 3
<b>Total</b>	<b>281</b>	<b>130</b>	

<b>Follow up / counselling support 1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010</b>		<b>Contributes to Service Objective:</b>
Number of women from the drop-in who engaged in follow up support and agreed to a care plan	58 (46%)	Obj. 2,3,6,7,8,9
Number of repeat attendances for follow up work	229	Obj. 2,3,6,7,8,9

<b>Development work with indoor sex workers (October 2009 – 31<sup>st</sup> March 2010)</b>		<b>Contributes to Service Objective:</b>
Number of women contacted	204	Obj. 1
Number of women engaged in face to face support	6	Obj. 1,2,3,6,8,9,10

## **Section 4: Successes and Challenges in the past 12 months**

### **Effective engagement with women involved in prostitution**

The service has been very successful in attracting and retaining clients in the service with 157 (126 drop-in, 25 street only and 6 indoor) different women using Quay Services in the past year. This is despite the few months of bad weather where the number of visits to the drop-in were very low. The fact that the service continues to maintain contact with so many women is a reflection of the team's ability to effectively engage and retain women involved in prostitution in Quay Services.

This can be partly attributed to the importance placed on providing ongoing training to ensure the staff team remain highly skilled, with a good knowledge and understanding of effective interventions. This is reflected in anonymous feedback in the comments book at the drop-in with all comments on the service being positive. In particular, many women have remarked on the welcoming atmosphere at the drop-in and the non judgemental approach taken by staff. In addition, an anonymous service user questionnaire was provided to drop-in service users in July 2009. 29 women completed the form with all stating they were very happy with the service received.

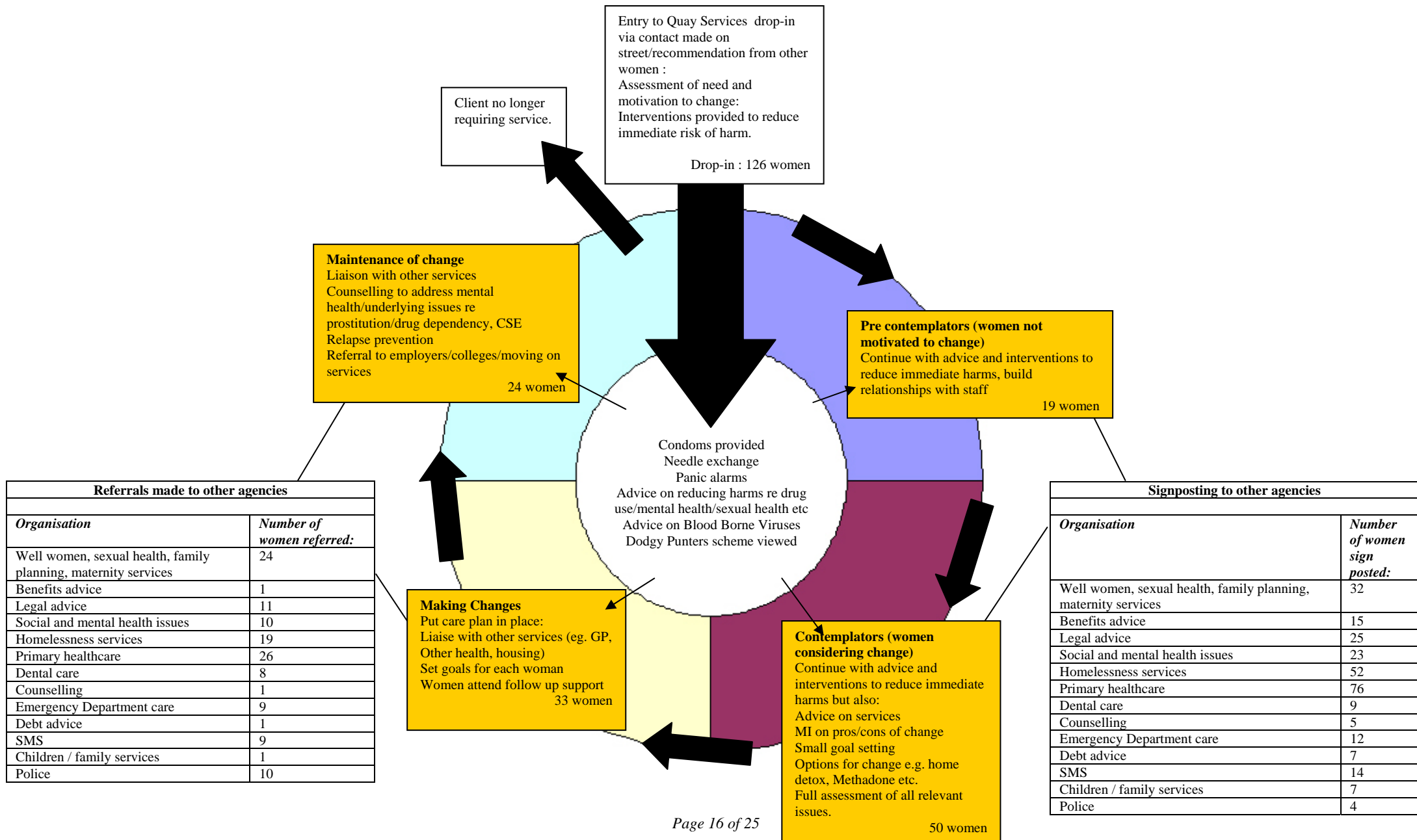
The focus on minimising barriers to access within the service via user friendly opening times and delivering support at times and locations which are convenient to each individual has proven important. The street outreach in particular has a crucial role to play in terms of encouraging women to engage with the service and the activity data evidences the important role of the street outreach service in encouraging use of the drop-in service where more in-depth interventions can be provided to meet the service objectives. It should also be noted that a further 25 women only used the street outreach service and did not access the drop-in service. This highlights role the street outreach service has in reaching the most vulnerable women on the streets who are often not accessing any other help or support in relation to their sex working and drug use.

## **Supporting and maintaining positive changes in high risk behaviour – including drug use, physical and mental health**

The new database has allowed for more detailed reporting on the issues discussed with women in Quay Services. From the data presented in the report, the service works with women holistically, with key topics being physical and mental health, BBV, drug use, sexual health and safety for women. It is also encouraging to note that the most frequent topic for discussion at the drop-in with women were around encouraging women to make significant changes to their lifestyle including support to address drug use, and explore ways out of harmful lifestyles. It is also therefore positive to note that 46% of the women using the drop-in engaged in follow up support to help them move forward with their lives. This focus on recovery is also reflected in the high number of women who have been referred to other services which can support their recovery. This reflects the unique role the service has not only in terms of reducing harms but also in terms of motivating women to change, providing appropriate support and improving access to other services to this group of women who are traditionally hard to reach via mainstream services.

It is also positive to note that recent staging exercise which was carried out in January 2010 focussing on the progress of a small cohort of women showed significant movement through the service for many women, see (appendix a). Whilst this small study has limitations, it does give a strong indication of the positive impact Quay Services can have over time on women's drug use and requirement to work in prostitution. Based on the number of women at different stages of change in this staging exercise and using data available from the new database, the following diagram is a summary of the type of support women received and the motivational stage women were at who used the drop-in over the past 12 months:

# Use of Quay Services drop-in and follow up support 1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010



## **Improving access to other services**

The high number of occasions where women were sign posted (given information on other services) and the significant number who were directly referred to other services reflects the range of problems which women present with and the multi-agency approach taken to address these issues. As well as contacting services on behalf of women, due to the often chaotic nature of women's lives, within the resources available, staff have used some follow up time to take women to appointments with their GP, sexual health services and other organisations required to support women in their recovery. However it is not always possible for Quay Service staff to take women to appointments and the issue of access to treatment and other recovery services remains a barrier to change for many women.

In order to improve understanding of issues faced by women involved in prostitution, Quay Services was involved in the planning and delivery of a Commercial Sexual Exploitation Seminar in Aberdeen in June 2009. The event, which was oversubscribed was very positively evaluated and has built positive links with other partners on the issue of prostitution.

Furthermore, the Quay services newsletter for sex workers is now more widely disseminated to other service providers in Grampian and provides specialist advice and information on a range of health topics including BBV, Hepatitis B vaccinations and as well as information on a range of other services.

## **Addressing Injecting Drug Use**

The needle exchange remains a well used service within the drop-in service with 86 women using this service in the past year, reflecting the strong link which exists between injecting drug use and prostitution. The service also uses each needle exchange episode as an educational opportunity with 86 women receiving advice on safer injecting, BBV prevention and alternatives to injecting whilst at the drop-in. It is significant to note that in the past year

whilst the vast majority of women stated they were involved in street prostitution in order to finance their and often their partners drug dependency, 26 women stated that they smoked or took drugs orally and did not inject, suggesting that the alternatives to injecting message may be having an impact on the drug using behaviour of this client group.

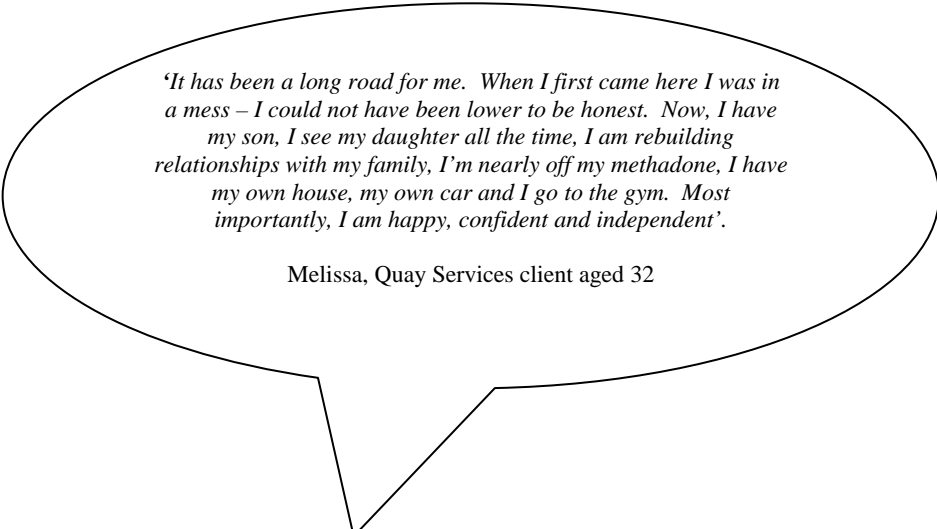
### **Encouraging BBV testing and immunisation**

It is encouraging to note that many women had self reported that they had been tested for BBV's. However, just over half of women screened have completed a Hepatitis B immunisation programme. A focus of the follow up time has therefore been to ensure women attend either their GP or GUM clinic for necessary testing, Hepatitis B vaccination and treatment. This aspect of the work is reflected in the numbers of sign posting and referrals made to Primary Care and to well women services/sexual health services. In addition, a significant proportion of the follow up work carried out with women is focussed on supporting women to access BBV testing and vaccination services. Motivating women on the issues of BBV remains a challenge and with the absence of opportunistic testing and vaccination at the drop-in, the service will continue to support women to overcome barriers to accessing traditional BBV testing and vaccination services.

In relation to the contact made with indoor sex workers, it is of interest to note that of the women who provided information on their ethnicity online, only 27% described themselves as British with 24% coming from other parts of Europe, 27% coming from South America and the remainder coming from elsewhere in the world. This highlights the international element to indoor sex work in Aberdeen which is of significance in terms of the risk to public health with women coming from other countries where BBV prevalence may be higher than in the UK.

## Improving Sexual Health

The sexual health of women involved in prostitution remains a high priority for the service. Feedback from the women suggests that condom use with “purchasers” of sex is the norm, largely due to the approach taken by the service to encourage women to insist on this with every sexual contact. This is reflected in the high numbers of condoms distributed by the service. The issue of respecting themselves and keeping safe in relation to all their sexual partners is a topic which we raise with women individually at the drop-in as well as with women who are exiting prostitution. In addition, a sexual health assessment form has been developed and is now being used at the drop-in service in order to improve women’s awareness of sexual health issues and to encourage the uptake of sexual health services. The focus on sexual health and encouraging access to appropriate services with 32 women being sign posted to sexual health service and a further 1 in 5 women using the drop-in being directly referred to well women/sexual health services.



*‘It has been a long road for me. When I first came here I was in a mess – I could not have been lower to be honest. Now, I have my son, I see my daughter all the time, I am rebuilding relationships with my family, I’m nearly off my methadone, I have my own house, my own car and I go to the gym. Most importantly, I am happy, confident and independent’.*

Melissa, Quay Services client aged 32

## Improving community safety and reducing violence on the streets

In relation to street safety, building on the Dodgy Punters Scheme, a ‘Safety First’ Booklet providing specific advice on all aspects of risk relating to sex working was produced in 2009 by Quay services and has been well received by service users.

An area of concern for the service has been a perception that there has been greater enforcement activity on the streets by Grampian Police in the past

year. This has been problematic for the service in two ways. Firstly, the service on the street has found it increasingly difficult to locate new and potentially vulnerable women on the streets. This is because women are behaving in a furtive/hidden manner in order to avoid detection on the streets by the Police. In addition, due to the perception by women that the Police are there only to charge them for prostitution related offenses, there is often reluctance by women to report incidents of violence to the Police as they do not perceive the Police to be concerned regarding their safety and wellbeing. This is an issue which we will continue to discuss with the Police and with women on the streets as an approach which encourages a better relationship between the women and the Police would be of benefit in terms of women's safety and wellbeing and the safety of the wider community.

In partnership with Grampian Police, we have recently improved our Dodgy Punters reporting system. Grampian Police now have access to all Dodgy Punter reports within 24 hours of being reported to the service. In addition, any reports which are of a serious nature will be reported on the night to the allocated team within Grampian Police.

In relation to the indoor sex workers, the fact that such a high proportion come from outwith the UK suggests that there is a risk that some of these women may be being trafficked into the UK. Whilst we have not had contact with anyone who has been trafficked we will be vigilant as we take forward this area of the service.

## **Section 5: Plans for the future**

The service has demonstrated its success in attracting and retaining this traditionally hard to reach group of women in services. However, the majority of funding for the service is not guaranteed beyond 2011. It is therefore a priority for the organisation to seek to attract new funding for the service to continue to provide support to this highly vulnerable group of women.

In light of the high numbers of women working indoors, the service plans to carry out further outreach work in order to build more links with this diverse and potentially at risk group of women. In order to encourage more of this large hidden population to come forward for support, we have developed a dedicated Quay services website. This website will be launched in the summer of 2010.

The service has evidence of success in terms of supporting women to exit prostitution and recover from the trauma sex working and drug dependency can bring. In 2011, the service will be able to provide additional outcomes on the impact the service makes in this area.

Whilst the service has been successful in terms of assessing BBV risk and discussing their BBV status with women, there still exist barriers to women attending for Hepatitis B vaccinations and BBV testing. We aim to increase the number of women accessing BBV testing, Hepatitis B vaccinations, and sexual health checks by using training resources at the drop-in to engage women on these topics and also further promote the follow up support available to ensure women attend necessary appointments at General Practice or GUM clinic.

Involvement in sex working is extremely dangerous and women are often subject to physical/sexual attacks. Whilst we encourage women to report these attacks directly to Grampian Police, we know that a significant number of women are unwilling to report incidents directly to Grampian Police. By

using evidence of what works from other parts of the UK, we would like to see an increase in the numbers of direct reports being made to Grampian Police.

My worker went to my GP's with me and wrote letters to help me to get onto a script quickly. She also spoke to the housing officer who stopped the eviction order. I paid a chunk of my arrears with the money I got from sex working to keep the roof over my son's head.

My worker has seen me at my worst and knew that I needed help. I couldn't have done it on my own. I don't know of any other agency that would have helped me. I only came for someone to talk to about the drugs, I didn't know the workers did so much to help us with other stuff.

I got to keep my house cause my worker spoke up for me-I didn't know she could do that. She has given me so much help, she's always been there for me. She always gives me a phone when I've not been in touch or missed my appointment.

Now I've been able to go back to my job as a care assistant, that gives me peace of mind. Hopefully I'll never have to work back down the road again. I would worry about getting caught by the police and that would mean I wouldn't be able to do my job (as a care assistant). I feel proud of my work, I feel like I'm giving something back by helping others.

Almost losing my house gave me a great big kick up the backside. Hopefully I'll not let it get to that stage ever again. Now I'm just enjoying doing normal things like other folk. I am now picking up my script twice weekly and I know I'm doing good but I look forward to the day when I don't have to go to the chemist anymore.

Janice, aged 36, Quay Services client

Finally, we would like to thank all the service users who provided comments on the service which has been used in this report and we hope that hearing from service users directly will have helped illustrate more fully the work carried out by Quay Services.

## **Appendix A**

### **Outcomes Stages Pilot**

The purpose of this exercise is to demonstrate movement of women through the service, from making initial contact, building up trust with the service, engaging in health promoting/harm reduction interventions, through to supporting women to make significant changes in their lives including addressing their drug use and stopping sex working.

All women who used the drop-in during June 2009 were included in the sample and women were categorized into 5 different stages reflecting their main use of the service during June 2009. It should be noted that many of the women used the service in different ways over this month and the stage which women have been put in reflects their most consistent use of the service at that time.

For this reporting period, 53 different women used Quay services drop-in, making 203 contacts with the service.

<b>Stage 1</b>	<b>Simple Attendance</b>	<b>3</b>
<b>women</b>		

Stage 1 describes interventions where women's main use of the service was very brief with information provided on the service and a drink or some food provided. Due to the aims and objectives of the service, this type of use of the service is unusual.

<b>Stage 2</b>	<b>Needle exchange/condom distribution</b>	<b>5</b>
<b>women</b>		

Stage 2 describes use of the service which focuses on condom or needle exchange provision. During this intervention basic advice is provided regarding types of condoms available, the importance of condom use, the range of needle exchange available as well as advice regarding safer disposal

of used sets of injecting equipment. Service opening times and the additional support the service can offer are also provided. Women may use the service in this way for several reasons; they may be short of time due to an arrangement to meet a punter/partner or they may be relatively new to the service and be reluctant to disclose many details to the staff member.

**Stage 3: Health promoting interventions 35**  
**women**

This describes the stage where women access the service for condoms/needle exchange but are also engaged in discussions regarding a wide range of health topics. Areas of discussion are dependent upon the concerns identified by the woman as being an issue as well as the health topics which staff proactively raise with women. Topics include advice on safer drug use, sexual health, street safety, overdose prevention, dental health, physical health, and accommodation and relationship issues. These interventions focus on promoting good health and wellbeing as well as building up trust with the service. There is however, overlap with Stage 4 as the agenda for engagement is always to move women forward in their recovery.

**Stage 4 Making significant changes interventions 10**  
**women**

This describes the stage where interventions delivered are centred on supporting women to make significant changes in their lives. This includes the use of motivational interviewing to help women make a decision to make significant changes in their drug use and sex working as well as social skills building, clear goal setting regarding addressing drug use/sex working, specific advice on home detoxing from opiates, managing lapses in positive progress and relapse prevention work.

**Referrals to other services**

Upon analysis of the women using the service, it seems that discussions regarding other services which are available to support the change process are mainly provided to women during stages 3 and 4 and therefore referrals to other services cannot be viewed as a separate stage in itself. Sign posted describes occasions where women have been provided with information on services and encouraged to use these services. Liaison/referral involves Quay services making contact on behalf of women with other services in order to maximize uptake of other services.

**Number of women sign posted to other services: 20**

**Number of women where liaison with other services took place: 14**

**Not using the service after 6 months 11**

All women who were attending the service were followed up on the database to see if they still had contact with the service in December 2009. Due to the voluntary nature of women's contact with the service, it is not possible to routinely recorded reasons for stopping using the service. From our discussions with other sex working women and through meeting former service users in different settings, we know that many of these women will have stopped sex working. However, it should be noted that we cannot rule out the possibility that the number of women no longer engaged with the service may also include women who are in prison or women who have died.

This exercise illustrates the progression through the service which occurs at Quay services. However, a 6 month period is a relatively short period of time and it may be worthwhile following up this group of women at regular intervals over the next 12 - 24 months to fully illustrate women's' use of the service over time.