MRC/CSO Social and Public Health Sciences Unit

Understanding the health of people with overlapping experiences of homelessness, justice involvement, problem drug use, and psychosis

Lessons from administrative data

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Clinical Lecturer & Honorary Specialty Registrar in Public Health
PHINS seminar – 15th Nov 2022

Introduction

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itvNEWS Your Area Ukraine Coronavirus Politics World Climate Royal Health Entertainment Weather

Glasgow suffers Britain's worst HIV epidemic in over 30 years

HEALTH | HIV | DRUGS | GLASGOW | Tuesday 9 April 2019 at 5:00pm

Peter Smith
Scotland Correspondent

Annual drug-related deaths in Scotland since 1996

How the total number of drug-related deaths has changed over the years. Hover over to see exact numbers.

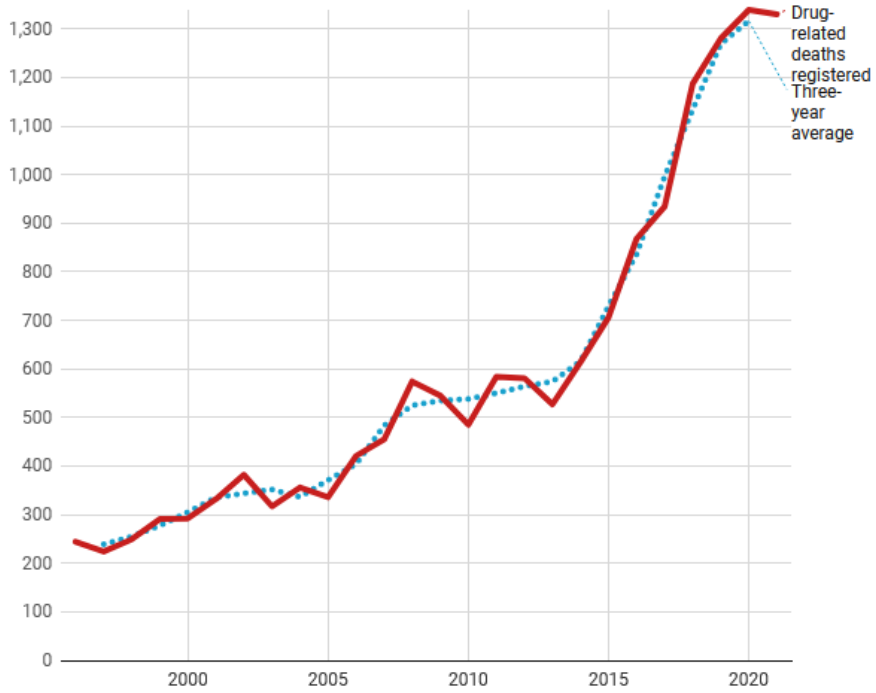


Chart: Herald Scotland (ES) • Source: National Records of Scotland • Created with Datawrapper

mental welfare commission for scotland

Ending the exclusion:

Care, treatment and support for people with mental ill health and problem substance use in Scotland

Crime

Proportion of prisoners in Scotland among highest in Europe

The proportion of people in prison or on probation in Scotland is among the highest in Europe and significantly higher than elsewhere in the UK, figures show.

By The Newsroom
22nd May 2019, 7:00am

THE SCOTSMAN

Wider context

The data available to us shape our research, our practice, our policies, our worldview…

Experiences of interest

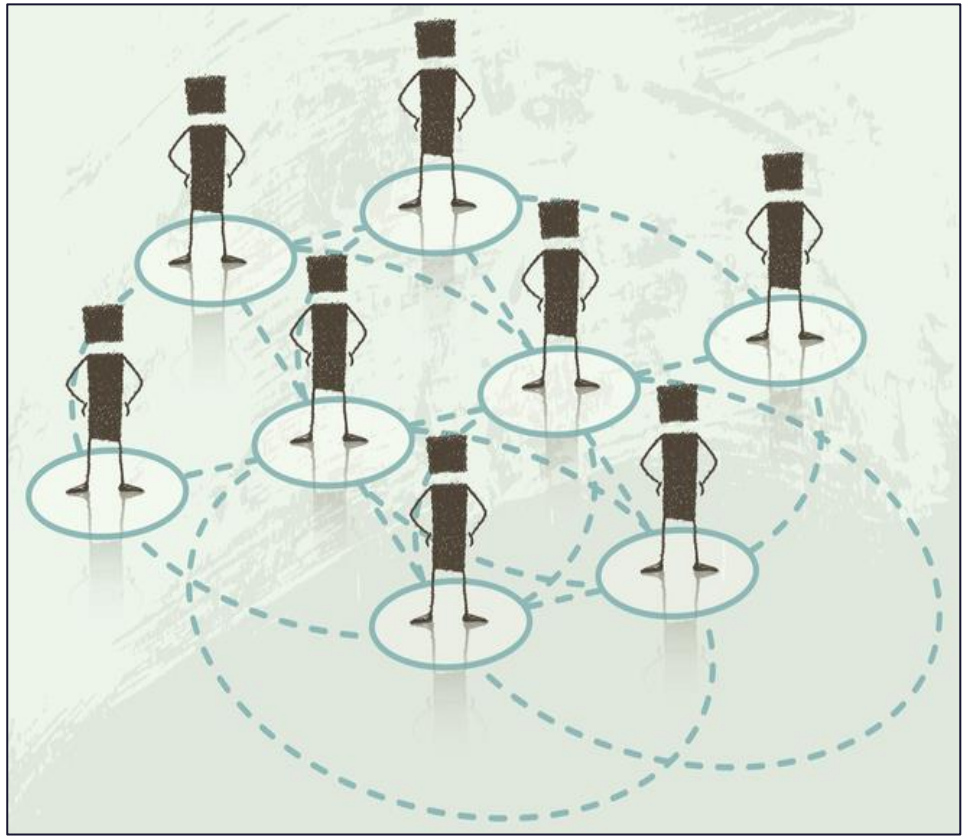
Experiences of interest

Homelessness	Justice involvement	Problem drug use	Severe mental illness

- Each associated with profound health inequalities
- Appear to overlap significantly in the population
- Limited evidence from UK about this, especially health outcomes
- Challenges for research in this area

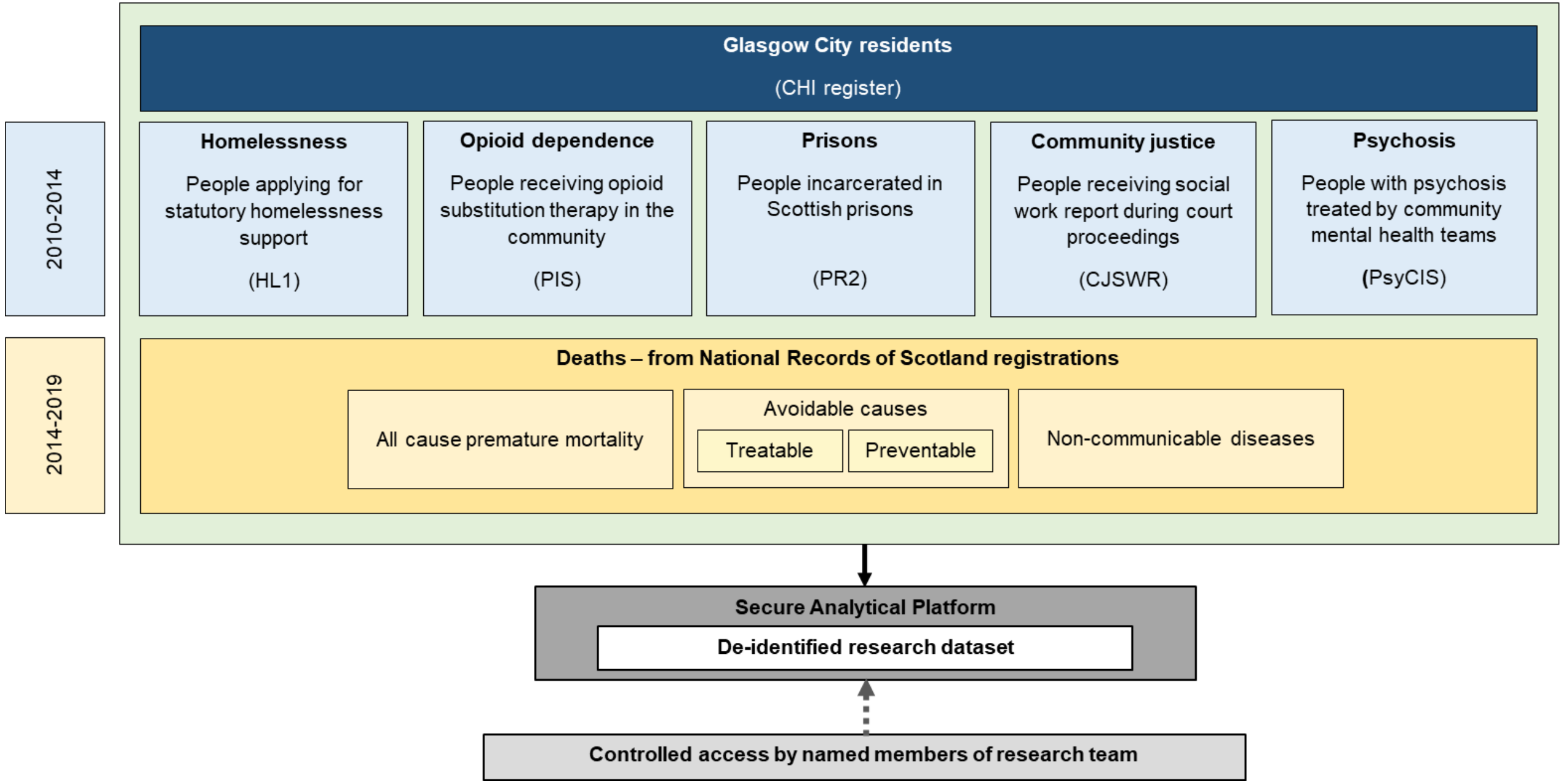
Administrative data

- The ‘data exhaust’ of everyday life
- Can link records between different services & sectors



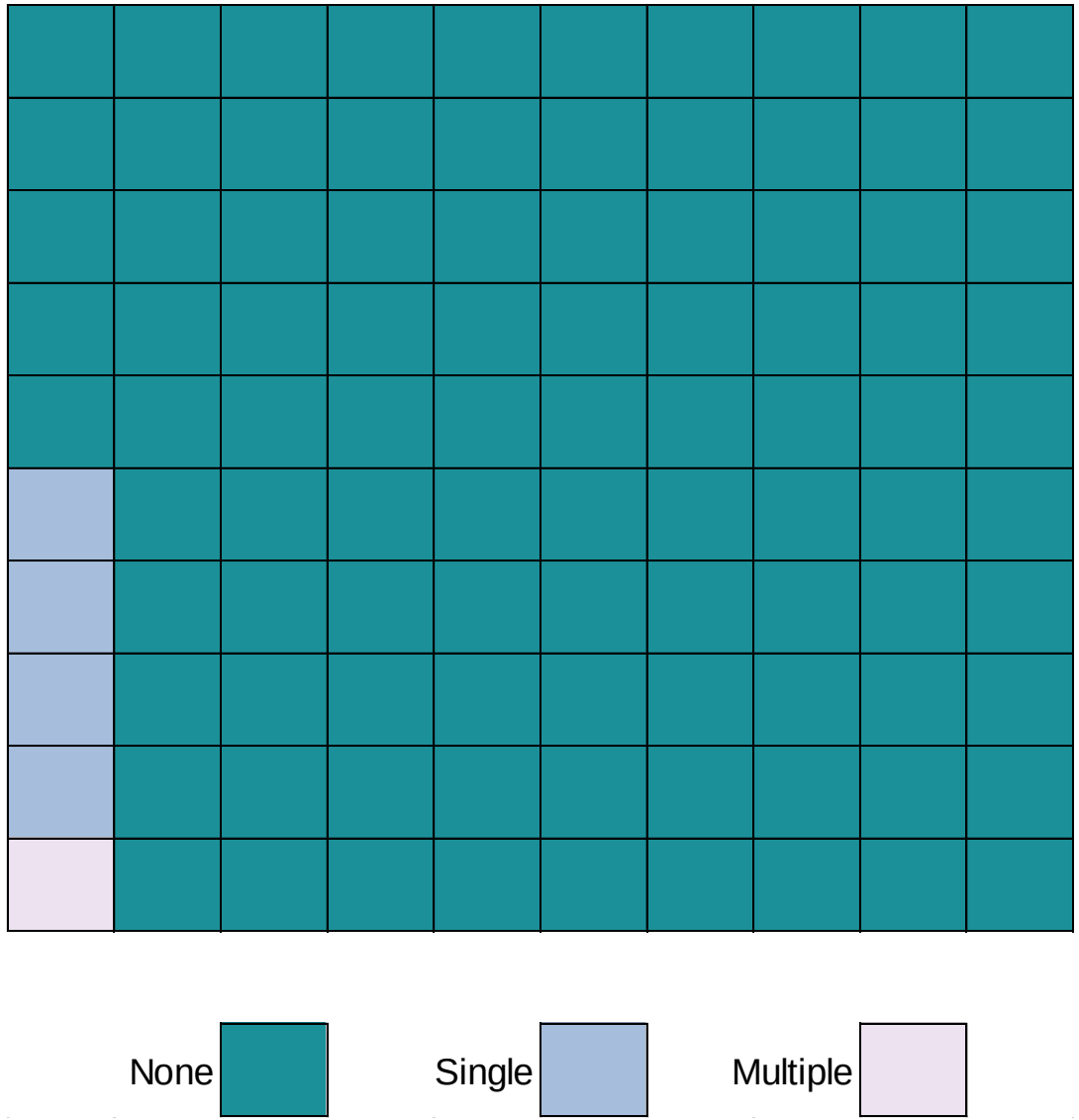
Our question

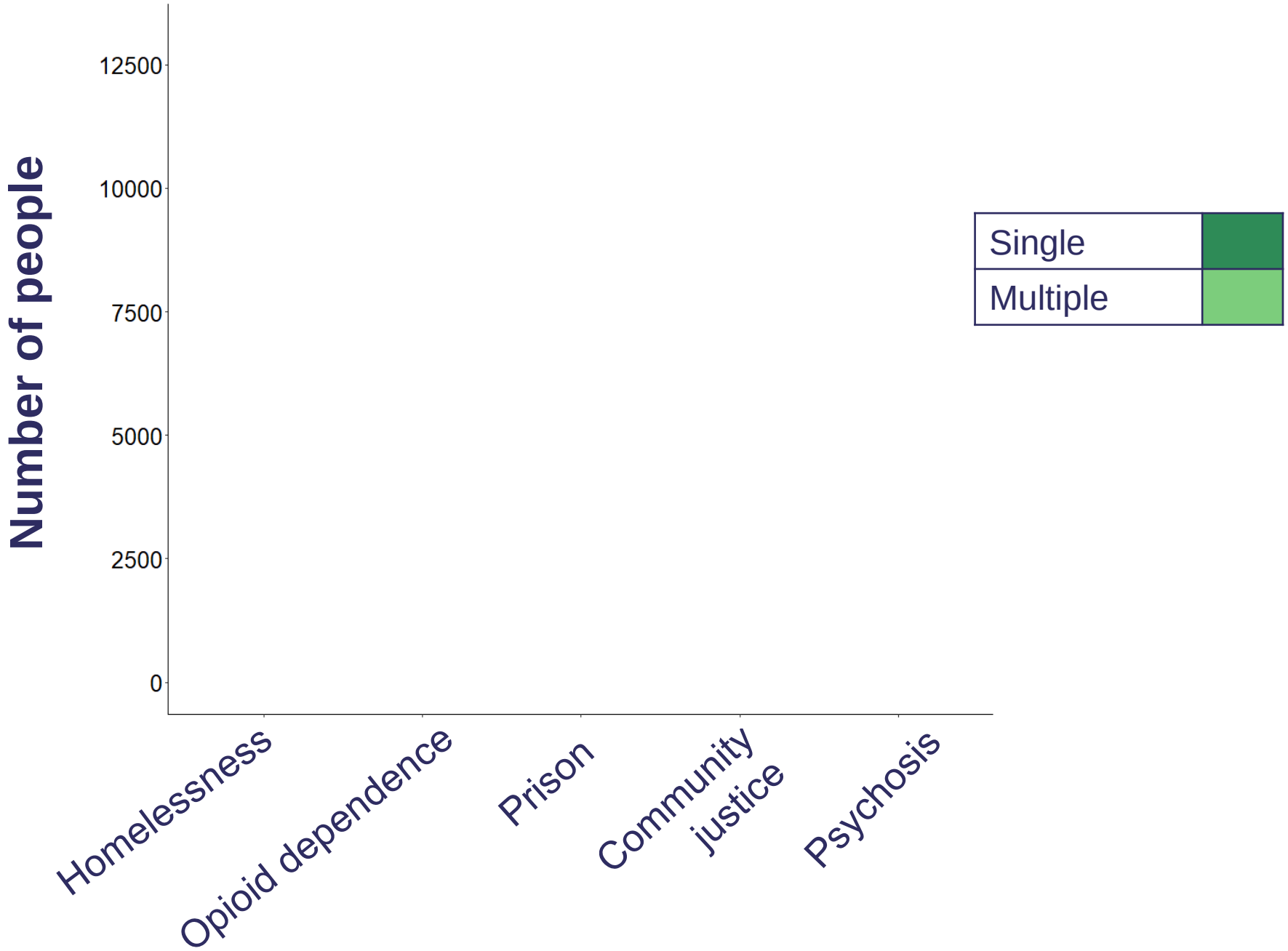
Can we combine existing datasets to better understand the intersections between homelessness, justice involvement, problem drug use, and severe mental illness, and what these intersections mean for health?


Glasgow City residents
(CHI register)
2010-2014
Homelessness
People applying for statutory homelessness support
(HL1)
Opioid dependence
People receiving opioid substitution therapy in the community
(PIS)
Prisons
People incarcerated in Scottish prisons
(PR2)
Community justice
People receiving social work report during court proceedings
(CJSWR)
Psychosis
People with psychosis treated by community mental health teams
(PsyCIS)
2014-2019
Deaths – from National Records of Scotland registrations
All cause premature mortality
Avoidable causes
Treatable
Preventable
Non-communicable diseases
Secure Analytical Platform
De-identified research dataset
Controlled access by named members of research team

Findings

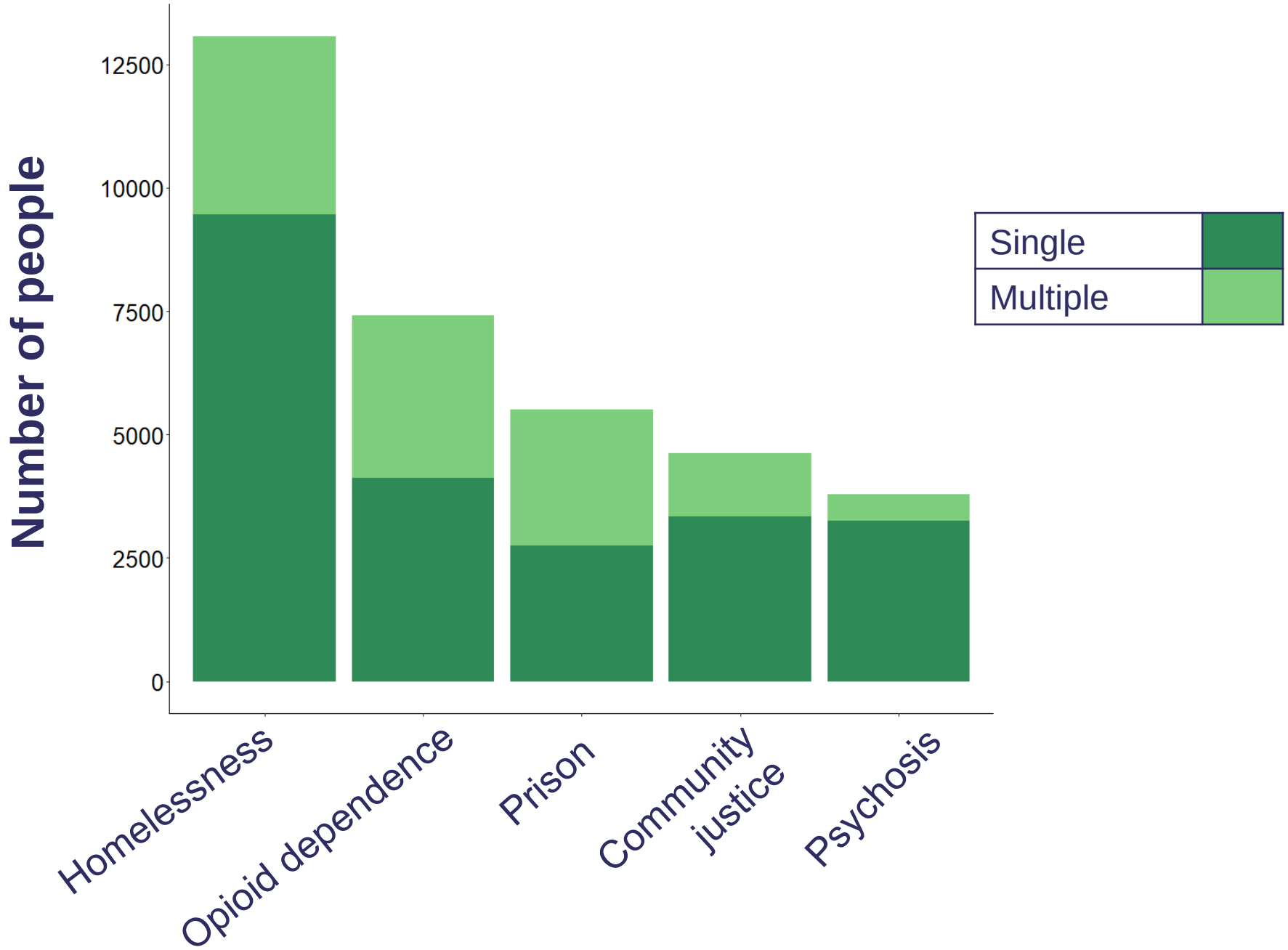
- 536,353 adults in cohort
- 5% had any experiences of interest
- 1% had more than 1





Any exposure

Any exposure



Demographic characteristics

- Most – though not all – experiences show male predominance
- Majority of those affected aged 30-50 years
- More likely to live in most deprived areas of Scotland
- Where ethnicity data available, mostly White Scottish/British

How much more likely are people affected by these experiences to die early, compared to unaffected people?

Each stick figure represents a one-fold increase in the likelihood of dying early compared to unaffected people – e.g., people with any of these experiences are four times more likely to die early than the rest of the population

How much more likely are people affected by these experiences to die early, compared to unaffected people? Each stick figure represents a one-fold increase in the likelihood of dying early compared to unaffected people – e.g., people with any of these experiences are four times more likely to die early than the rest of the population	
Any of the experiences	

How much more likely are people affected by these experiences to die early, compared to unaffected people?

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Any of the experiences below		
	On its own	**Plus other forms of disadvantage**
Homelessness		
Opioid dependence		
Prison		
Community justice		
Psychosis		

Deaths from avoidable causes & NCDs

Substantial burden – especially among those with multiple disadvantage

Implications

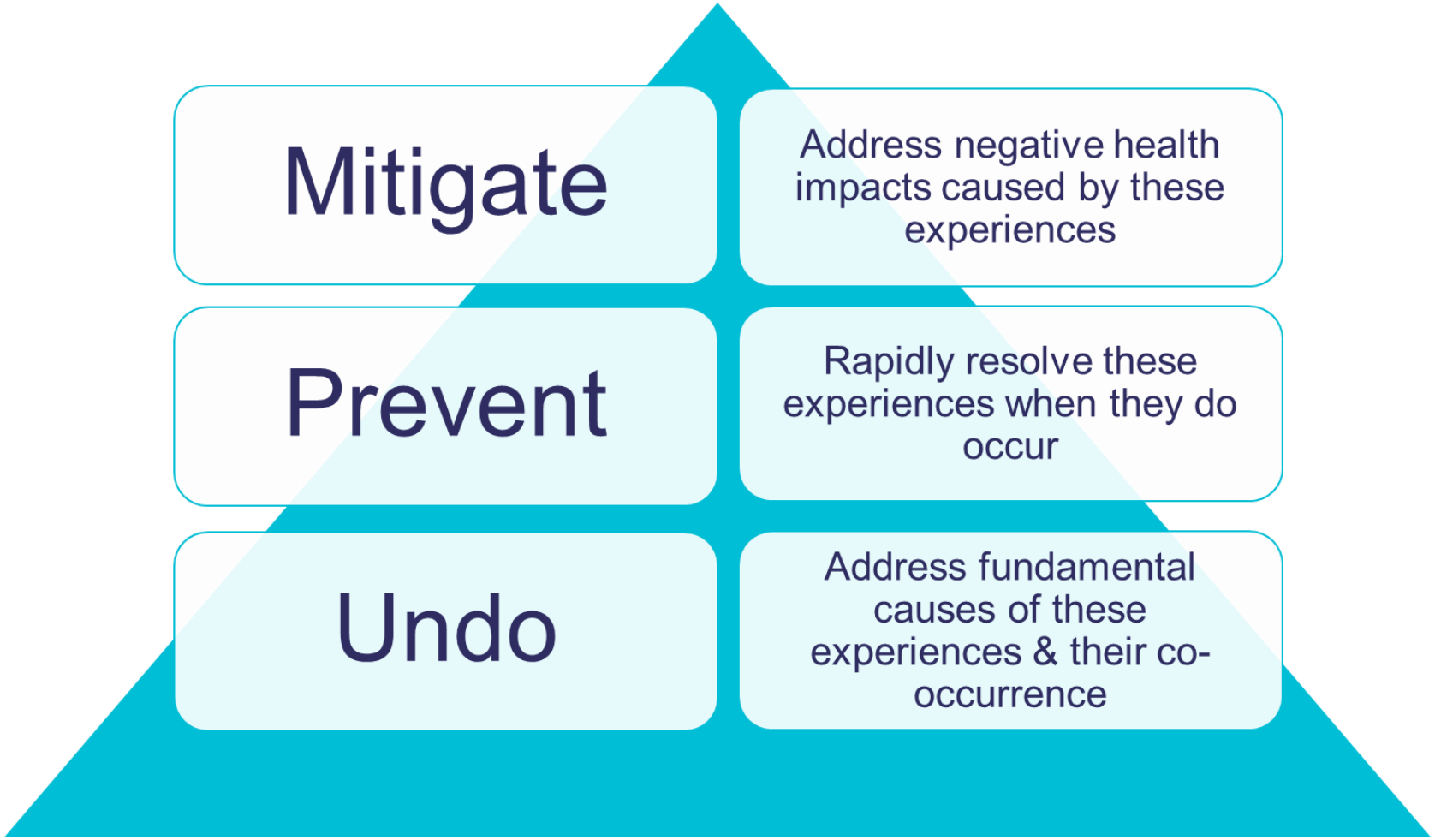
Implications

Making the intersections visible

Data like these can help ensure that our research, services, and policies are better tailored to the populations we serve and the burden of ill-health

Implications

Need action at multiple levels, across different sectors



Implications

Moving beyond description

Opportunities to use datasets like these to evaluate & model the health and inequality impacts of social policies

Implications

Harnessing the potential of routine data

Requires well-resourced &

responsive infrastructure,

and close collaboration with

stakeholders (including the public)

Acknowledgements

This work uses data provided by patients and service users, and collected by the NHS, local authorities, and Scottish Prison Service as part of their care and support

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- Stakeholder advisory group and public engagement participants

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Thank you