

DTTO Personas



Ian

Age
29 years

Gender
Male

Ethnicity
White

Area
Edinburgh

Employment Status
Unemployed and never worked

Number of DTTOs
1 and been on CPO's

Background

Ian is care-experienced as his family had addiction issues themselves. He was physically and mentally abused at home and also whilst in the care system and so has little trust in people/authority. He has lost custody of his 4 year old child from a past relationship when he was convicted of domestic abuse.

Experience with services / treatment

Historical

- Care system
- School reach out services
- Criminal Justice Social Work

Prior to DTTO

- Criminal Justice

During DTTO

- Criminal Justice

Substance Use, Mental & Physical Health

- Cannabis addiction
- Benzodiazepine addiction
- Alcohol addiction
- Opioids
- Anxiety, depression and other mental health issues - has visited GP practice and been given medication but has accessed no other services.

Criminal Behaviour

- Ian drug use has fueled his criminal behaviour
- He has been under the influence of drugs when arrested
- He also committed crime because he needed money for the habit
- He has been convicted of domestic abuse

Family & Community Health

- Has little family support and lacks stable housing
- Has lost custody of child due to domestic abuse
- Has a 4 year old child and follows a parenting time schedule
- so he finds it hard to find the strength to change

Considerations when designing services for Ian

- Trust issues** as feels all services have let him down
- Tends to **self-medicate** with substances as did not have access to medication for a long time
- Has a 4 year old child and follows a parenting time schedule
- Substance use usually connected to **criminal behaviour**
- Literacy problems** meaning he has difficulties in understanding written communication



Michael

Age
35 years

Gender
Male

Ethnicity
White

Area
Edinburgh

Employment Status
Currently unemployed

Number of DTTOs
3 DTTO's

Background

Michael was homeless as a teenager and has been in hostels where they try to help with housing and addiction but felt that the underlying problem - ADHD - was never acknowledged nor treated as wasn't diagnosed until 33 years old despite asking for tests since was 11 years old.

Experience with services / treatment

Historical

- Juvenile Justice
- Prior to DTTO
- Homelessness services
- GP recommended medication treatment for ADHD. Disrupted treatment in Criminal Justice.

During DTTO

- Mental Health community services

Substance Use, Mental & Physical Health

- As he was only recently diagnosed nor give medication for his ADHD symptoms, Michael has relied on drugs as a coping strategy.
- Opioids addiction
- Cannabis addiction
- Regularly takes street valium
- He has been illegally gambling in the streets since a young age and finds it difficult to fight the compulsion to gamble. He has accumulated more debt than he can afford to pay.

Criminal Behaviour

- Committed crimes as a young adult because he needed the money for the habit
- Minor crimes under the influence of drugs

Family & Community Health

- He was expelled from primary school aged 9 as had 'behavioural problems' and continued to have so as no one asked for a diagnosis and instead referred to him as 'badly behaved'.
- Finds it difficult to maintain relationships with people and commit to services

Considerations when designing services for Michael

- To have an **understanding of ADHD** and how it can impact behaviour
- Previously **pawned his mobile phone**, several times, so difficult to call - try to arrange appointments face to face
- Mostly moving between hostels and sofa surfing**, changing addresses - making it difficult to reach



Jim

Age
51 years

Gender
Male

Ethnicity
White

Area
Edinburgh

Employment Status
Disability benefit (as a result of substance use)

Number of DTTOs
4 DTTO's

Background

Jim began dealing drugs as part of a gang, and became addicted to cocaine and benzodiazepines in his early 20's. Due to drug dealing and fraud, Jim has been institutionalised for approximately 30 years as feels comfortable in prison and does not know how to function outside of this environment.

Experience with services / treatment

Historical

- Not registered at the GP

Prior to DTTO

- Jim is already registered with a substance use service but will have to leave to begin the DTTO (similar to around 66% of those entering a DTTO).

During DTTO

- Criminal Justice

Substance Use, Mental & Physical Health

- Alcohol addiction
- Opioids addiction
- Moderate anxiety and depression - no services approached

Criminal Behaviour

- Charge with possession with intent to supply drugs
- Multiple burglaries and thefts

Family & Community Health

- Neglected from peer groups and family outside of prison, meaning he has no support network
- Jim only learned to read a few years ago as was not part of the education system and was able to get by
- Has difficulties socialising and finds it difficult to engage in conversations

Considerations when designing services for Jim

- Literacy problems** meaning he has difficulties in understanding written communication
- He may not open letters** posted to him regarding appointments - make other arrangements
- As Jim feels comfortable in prison, any **transition** for him will be extremely difficult



Sarah

Age
38 years

Gender
Female

Ethnicity
White

Area
Edinburgh

Employment Status
Currently unemployed

Number of DTTOs
1 DTTO

Background

Sarah used alcohol and drugs socially as a teenager and became addicted to opioids around 19 years old as was in a relationship with someone who sold drugs. Sarah states this was a violent relationship and was controlled through by being given substances, from where she has a 5 year old child.

Experience with services / treatment

Historical

- Sarah had a social worker whilst pregnant to try and help with her addiction and prepare for the baby arriving
- Women's Aid also tried to refer Sarah to a safe house when had her child as partner continued to be violent but as it did not have addiction services within the service it was not suitable

Prior to DTTO

- Prepare (service for pregnant women)

During

- Children Social Work services

Substance Use, Mental & Physical Health

- Opioids addiction
- Sleeping pills
- Postnatal depression
- Suicide attempt

Criminal Behaviour

- Shoplifting
- Breach of peace

Family & Community Health

- Has lost custody of child due to addiction and risk behaviours
- Relationships tend to be with violent men who control Sarah with drug use
- Sarah has lost her self-confidence and has a fear of being alone
- She has lost trust in people following abusive relationships

Considerations when designing services for Sarah

- Sarah has a **fear of being alone** and so will live in any squat that has other occupants, rather than be housed alone
- Sarah's main focus is her child** and so if that could be acknowledged alongside recovery, this would probably be the best kind of approach to consider



Dave

Age
36 years

Gender
Male

Ethnicity
White

Area
Edinburgh

Employment Status
Disability benefit

Number of DTTOs
2 DTTOs

Background

From a young age Dave has had feelings of worthlessness, anxiety and depression. He felt uncomfortable around people, alienated and different. He was introduced to alcohol and opioids at 13 years old which made him feel more sociable and pain-free. He dropped out of college at 18 and has been living in hostels and temporary accommodation since.

Experience with services / treatment

Historical

- GP prescribed antidepressants and referral to Cognitive Behavioural Therapy (CBT) which he only attended once
- Social Work services
- School reach out services
- Mental Health services

Prior to DTTO

- Homelessness services

During DTTO

- Mental Health services
- 3rd sector organisations

Substance Use, Mental & Physical Health

- Alcohol addiction - no services approached
- Opioids addiction
- Street valium addiction
- Anxiety, depression and other mental health issues

Criminal Behaviour

- Minor crimes under the influence of drugs

Family & Community Health

- Has difficulties socialising and finds it difficult to engage in conversations
- Has little family support
- Lacks stable housing

Considerations when designing services for Dave

- To have an **understanding of anxiety and depression** and how it can impact behaviour
- He may not open letters** posted to him regarding appointments due to anxiety
- Mostly moving between hostels and sofa surfing**, changing addresses - making it difficult to reach