

CAN INFORMATION AND COMMUNICATION TECHNOLOGIES (ICTS) INCREASE TREATMENT OPPORTUNITIES FOR PEOPLE WHO ARE HOMELESS AND PEOPLE WHO INJECT DRUGS?

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Having access to information and communication technologies (ICTs) is a pre-requisite to meaningful participation in society. People who are homeless (PWAH) and people who inject drugs (PWID) are at increased risk of overdosing and hepatitis C infection. However, they also encounter barriers to accessing treatment and may not have access to, or routinely use, ICTs. This presentation addresses the question: Can ICTs increase treatment opportunities for PWAH and PWID? **Methods:** Data were collected during a qualitative, longitudinal evaluation of a 12-week online drug treatment intervention and comprised 52 semi-structured interviews conducted with 30 PWAH/PWID. Interview data were transcribed, coded, and mapped onto the constructs of 'context', 'mechanisms', and 'outcomes' (c.f. Pawson & Tilley, 1997). **Findings:** Participants reported that they had access to ICTs, used ICTs and wanted to engage with them more. Key barriers to ICT use included cost and participants' limited computing skills and confidence. Use of the online treatment programme was affected by programme-related features (e.g. accessibility, flexibility, interactivity); delivery-related features (e.g. having a private work space, functioning computers, personalised support); and participant-related features (e.g. motivation to address drug use and use the programme). After completing the programme, participants reported limited reductions in their substance use but various other positive outcomes (e.g. improved computing skills and interest in technology, new coping strategies, more productive use of time, pleasure/ enjoyment, improved literacy, and greater ability to plan for the future). **Conclusions:** ICTs can increase treatment opportunities for PWAH and PWID. There is scope to more proactively use ICTs with PWAH and PWID, but new technologies do not replace face-to-face support. Evaluations of online treatments should take into account diverse psychosocial benefits, and not focus solely on reduced substance use or abstinence