

ABSTRACT

Background: Substance abuse is usually associated with young people, but occurs also among elderly for whom the abuse of alcohol and other substances poses an increased risk of a whole range of health and social harms. The current system of addictological care in the Czech Republic is not systematically focused on the target group of elderly and this target group is rather at the edge of attention. Nevertheless, in the Czech Republic there are social services, residential social care centres with special regime for elderly people with a dependency problem. These programs are similar to the nursing homes for aging drug users known from abroad.

Aims: The aim of this work is to describe the characteristics of residential social care centres with special regime for substance abusers and persons at risk of substance use in the Czech Republic in the areas of clients of the facilities, methods of work with the target group, personnel and funding of the facilities.

Methods: An on-line cross-sectional questionnaire study and descriptive data analysis were conducted. According to the Registry of Social Service Providers in the Czech Republic there is 16 residential social care centres with special regime for substance abusers and persons at risk of substance use, all of them were chosen for the study.

Results: Out of 16 addressed residential social care centres with special regime, 14 facilities provided information on provision of care to this target group and in 2016 in real terms 6 facilities provided the care to this target group. The most frequent age group was 60-69 years of age; clients were alcohol users, often with a comorbid psychiatric problem, especially dementia or other organic brain syndrome. Abstinence as a condition was reported by 3 facilities, on the other hand 2 facilities set rules allowing alcohol consumption outside the facility and 1 facility stated a possibility of control the supply of alcohol by personnel. Psychological interventions were mostly not provided, the psychiatrist was in all facilities, most often externally. Funding is ensured by subsidies from the Ministry of Labour and Social Affairs and the client's charges, as well as from municipalities and health insurance.

Conclusion: Comparing to similar foreign residential facilities for aging substance abusers, there is different attitude to abstinence in residential social care centres with special regime. Foreign facilities allow substance use inside the facility, as well as administration or control of consumed alcohol. However, it is clear that safe and stable housing and satisfaction of other basic needs is a basic prerequisite for addressing the social and health problems of elderly people with dependency problems and integrated, multidisciplinary and innovative approach is required.

KEYWORDS: residential social care centres with special regime, aging, substance abusers and persons at risk of substance use, substance abuse, elderly