

BROKEN DREAMS

Between 2004 and 2009, 1.5m people from Eastern Europe came to Britain looking for a better life. But for some, the adventure has ended in unemployment and addiction. Meanwhile, hard hit services brace themselves for a new wave of migrants from two of Europe's poorest countries. Report by **Andrew Craig**

Gathered outside a drab terraced building in Bradford's city centre, a group of young people laugh and shout at each other in Polish, a language that has become the second most widely spoken in Britain. One of them offers up a light for another's cigarette before stepping inside the door, and into Bradford's Day Shelter.

The shelter provides refuge for people who are street homeless or living in poor quality accommodation, offering free meals, hot drinks and laundry facilities. It provides a focal point of contact for those facing other complex problems and is the gateway to the Migration Impact Project, whose substance support team are becoming increasingly stretched as their workload has ballooned since their inception in 2011.

Throughout the recent downturn in Britain's economy, increasing numbers of migrants from Eastern Europe have found themselves out of work, homeless and using drugs or alcohol.

Between 2004 and 2009, when citizens of eight Eastern European countries were given full access to the UK job market, an estimated one and a half million people from Eastern Europe came to the UK. According to the Office for National Statistics, some 669,000 people from the 'A8' Eastern European countries – the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia and Slovenia – were working in the UK as of 2011, with half a million from Poland alone. Although the majority of Eastern

European migrants have settled into life in the U.K. and made a significant contribution to the economy and culture, others have not been as fortunate or have been less able to adapt, and some have engaged in drug and alcohol misuse as a consequence.

Accounts from service users attending the Migration Impact Project show that many have multi drug and alcohol misuse problems. Some having histories of substance abuse and others developed them after arriving in the UK. Problems around trafficking, language difficulties and exploitation in the job and accommodation markets can lead to disillusionment and produce the mindset that makes substance abuse more likely.

Kuba's plight has become an increasingly familiar one among this community. Born in Poland to alcoholic parents, social services removed him from the family home when he was four years old. As a teenager, he returned to live with his mother but began using amphetamines and went on to use most illegal drugs. His use of amphetamines endured into adulthood which, combined with his daily intake of beer and vodka, became problematic. In an attempt to change his life, he started work as a labourer in Poland, before moving to West Yorkshire

Having family in Wakefield, he moved in with his sister and began to look after her child. However, his brother-in-law was also used amphetamines. Kuba

picked up where he had left off and resumed his habit. Even so, he managed to obtain work as a packer on nights in Wakefield and used amphetamines to help keep him awake through the long shifts. Eventually he lost the job, and his family ties were broken as a result of his drug and alcohol use. He was forced to move into private rented accommodation from where he was later evicted due to a drunken attack on his landlord. Now 30, he has recently found accommodation in a hostel in Bradford with the support of the Migration Impact Project but, unable to speak English, he still struggles with life in Britain.

Another service user is Maksim, a 32-year-old Russian, who grew up in Latvia. He began using heroin when he was 18 after mixing with, what he terms, "the wrong crowd" and spent some time in prison as a result. After completing a detox on release, Maksim managed to stop using completely by the age of 23. Over the following years, he led a transient lifestyle and left Latvia in 2007 to seek work in Holland, where he trained to become a mechanic after settling in Rotterdam. During his time there he remained drug free. His life took another turn when he discovered that he had contracted Hepatitis C, leading to him getting depressed and using again. He moved to Paris and then onto England in 2012 after being encouraged to do so by his partner's friends who were living in Bradford.

Maksim immediately found work

in a food manufacturing plant. During his first week there, he worked 50 hours for which he received only £175. Realising he had been cheated, he left the job and has not been able to secure employment since. However, with a heroin and crack habit to fund, he has found himself committing crime and now has two convictions in Britain for shoplifting. Maksim is now temporarily accommodated by a housing association and reducing his methadone. He hopes to become completely drug free and find work as a mechanic once more.

Twenty nine million Bulgarians and Romanians (A2 countries) will gain the right to live and work unrestricted in Britain from the January 1, 2014 under European 'freedom of movement' rules. Some forecasters predict that it could lead to a significant number of new arrivals, as it did when Poland and other Eastern European countries gained these rights in 2004. But the scale of migration from the A2 countries is likely to be high, as the ramifications of Europe's economic difficulties unfold. Bulgaria is the poorest country in the EU, and both countries have falling populations due to emigration – a trend which seems likely to continue for the foreseeable future.

Although available data indicates that the prevalence of illicit drug use is low in Romania compared to other EU Member States, drug use of most substances appears to be on the rise. Studies there indicate an increase in the lifetime use for all types of illicit drugs from 1.7 per cent in 2007 to 4.3 per cent (including new psychoactive substances) in 2010. While the majority of problem drug users are said to use heroin, the proportion of those who inject new psychoactive substances (NPS) has increased and may constitute around a third of all problem drug users. In Bulgaria, estimates provided by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) indicate that there were 31,316 problem drug users in the country in 2010, around 0.6 per cent of the adult population, with amphetamines being the second most widely abused drug after cannabis.

There is anecdotal evidence that stimulant use among Eastern Europeans has increased over recent years as more young people turn their backs on heroin. Again, after cannabis, amphetamines appear to have become the narcotic of choice for Polish drug users. According to the EMCDDA, methamphetamine accounts for two thirds of problematic drug users in the Czech Republic – the highest rates in Europe. The EMCDDA also reports that stimulant use in



HE MANAGED TO OBTAIN WORK AS A PACKER ON NIGHT SHIFTS IN WAKEFIELD AND USED AMPHETAMINES TO HELP KEEP HIM AWAKE

Hungary has led to twice the number of people seeking treatment for addiction over the last decade, while reports from Latvia also indicate high levels of abuse of these drugs.

In addition to drug misuse, drug and alcohol services in the UK are treating increasing numbers of Eastern Europeans with severe alcohol problems.

'Jack' is Polish and has been working in Western Europe since Poland joined the EU in 2004. After a short period driving trucks in Italy, he was invited to England by a friend living in Bradford. He had promised Jack that there was a job waiting for him. Jack travelled from Italy on the train after being told that he would be met at the station. On arrival, and with nobody there to welcome him, he called his friend who then sent someone to meet him. He was introduced to his accommodation, where he was to share with two recent arrivals from Poland, and had money taken from him for rent. The job did not materialise, his friend disappeared and Jack was left to his own devices to find work.

Having started to drink after his marriage broke down in Poland, he had managed to control it while working in Italy. During his initial three months in Bradford, he began drinking more frequently until he was drinking daily. Despite this, he found work in various low-paid roles until 2011, but has been unemployed since then. Jack continued to drink heavily throughout this period and has been in treatment for his alcohol use on and off since 2011. Now 42, he lives alone in council accommodation and with no friends or family, feels completely isolated.

Marzena Peron-Lapinska of the Migration Impact Project is frank in her appraisal of the situation in Bradford. The service was initially established to support Eastern Europeans with non drug-related issues, such as human trafficking, housing and benefits. But the project soon realised that many people in the area were battling drug and alcohol issues, yet were not engaged with treatment services.

"We have many service users that already have addictions when they arrive in this country but some do develop them while they are here. The service has developed and grown to accommodate the increasing number of people we see. We also have clients that are involved in criminality and are on the run from the authorities in their own country. These people are often caught and subsequently deported."

Migrants from Eastern Europe have settled all over the UK, but only certain agencies in some towns have established support services that are sympathetic to their needs. With the predicted influx of more young people from this part of Europe in 2014, it seems likely that demand for drug and alcohol treatment for migrants will grow.

It is clear that people are disadvantaged if they face linguistic or cultural barriers which prevent them from accessing specialist services. But with their budgets being squeezed, many drug and alcohol treatment providers are losing more services than they are gaining and are forced into making uncomfortable decisions when allocating resources. Unless support agencies are provided with funding to offer services tailored to their needs, it is certain that growing numbers of Eastern Europeans will be left to battle their addictions alone – and the social costs of this can only escalate.

■ **Andrew Craig** is a freelance writer and commentator on international drug issues