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DRUG STRATEGY 2010-2015

On 8 December the government launched its new drug strategy.

**Reducing Demand, Restricting
Supply, Building Recovery :
*Supporting People to Live a Drug Free Life***



The strategy sets out two high level ambitions:

1. To reduce illicit and other harmful drug use, and
2. To increase the numbers of individuals recovering from their dependency on drugs or alcohol.

These ambitions will be achieved through activity across three themes –

- » **Reducing demand**
- » **Restricting supply &**
- » **Building recovery.**



Alongside a holistic approach to supporting people to overcome their dependency, the strategy also addresses:

- Reducing the demand for drugs,
- Taking an uncompromising drive to crack down on those involved in the drugs trade, and
- Shifting power and accountability to local areas to tackle the damage that drugs and alcohol dependence cause communities.



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Reducing Demand:

- Establishing a whole-life approach to prevention and breaking inter-generational paths to dependence.
- Early years prevention.
- Education and information for all.
- Schools have a clear role to play in preventing drug and alcohol misuse as part of their pastoral responsibilities to pupils.
- Sure Start will be refocused on its original purpose of improving the life chances of disadvantaged children
- Early years education from 2yrs of age.
- Sure Start will be refocused on its original purpose.



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Reducing Demand:

- Through the FRANK service, everyone, at any age, will have accurate and reliable information on the effects and harms of drugs, including new substances.
- Early intervention for young people and families, including the creation of a single Early Intervention Grant, worth around £2 billion by 2014–15.
- Family Nurse Partnerships to work with potentially vulnerable families.
- Directors of Public Health and Directors of Children's Services to determine how best to use their resources to prevent and tackle drug and alcohol misuse.



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Reducing Demand:

- Intensive support for young people whose drug or alcohol misuse has already started to cause harm, or who are at risk of becoming dependent.
- Ensuring that offenders are encouraged to seek treatment and recovery at every opportunity in their contact with the criminal justice system (CJS).
- Wing-based, abstinence focused, drug recovery services in prisons for adults.
- The Department of Health will assume responsibility for funding all drug treatment in prison and the community and, with the Home Office, will contribute towards DIP.



Reducing Demand: Implementation

We have made good progress in this area, including:

- Activation of Early Intervention Grant (worth £2bn by 2014/15) with simplified funding for local authority children and young people's services
- Review and refresh of the FRANK website (launch 17th October) led by the Home Office supported by a £1m campaign
- Awarding Voluntary and Community Service grants
- The development of the Home Office Choices Programme (£4m funding in 2011-12)
- Home Office funding of £10m for the Positive Futures programme



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Restricting Supply:

- Reduce drug-related crime, drug trafficking and organised crime's involvement in the drugs trade.
- The introduction of Police and Crime Commissioners (PCCs) to represent their community's policing needs.
- The first elections for PCCs will be held in November 2012.



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Restricting Supply:

- The NCA will lead the fight against organised crime and together with the UKBA will enhance the security of our borders.
- Reduce the number of mobile phones entering prisons, to find phones that get in and to disrupt mobile phones that cannot be found.
- Intelligence sharing across police forces, NCA, UKBA and others.
- Integrated Offender Management (IOM) will reach out to other voluntary and private sector providers and engage the public in creating and delivering solutions.



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Restricting Supply:

- Introducing technology at the borders to identify these new types of drugs.
- Increase action against the estimated £2 billion of recoverable proceeds of crime, a substantial proportion of which is generated annually by the illegal drugs trade in the UK, by increasing cash seizures and asset forfeitures.
- Increase the costs and risks to drug traffickers.
- Working together with our international partners, to encourage coordinated responses to the illicit drugs trade and unlock international resources to support our priorities.



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Restricting Supply: Implementation

- In 2010/11, DIP managed 62,830 adult Class A drug misusing offenders into drug treatment.
- In April 2011, the Home Office extended the authorisation for drug testing on arrest in police custody across England and Wales
- The Home Office is providing £4.5 million in 2011/12 as a contribution to the non-ring fenced Youth Justice Grant to Youth Offending Teams across England and Wales
- Drug recovery wings have been launched as a pilot in five prisons



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Restricting Supply – new psychoactive substances

This is a dynamic and fast paced drugs market, particularly with the role of the internet. We needed to look at ways to tackle this threat and keep pace with the manufacturers.

In the UK, we are:

- introducing new legislation so that we can act swiftly to bring any new and emerging substance which is potentially harmful under our drug laws while we investigate further with our advisers;
- using world leading generic legislation that captures not only the substance encountered, but also the family of related compounds. This ensures that we can keep pace with manufacturers who will 'tweak a molecule' with the intention of falling outside of drug controls; and
- establishing a forensic early warning system (FEWS). Under this we have a co-ordinated UK-wide approach to laboratory testing and analysis of law enforcement seizures so that we can quickly identify new psychoactive.



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Building Recovery – Drug Strategy Principles

- Each recovery journey will be **different**
- Need to put the **individual** at the heart of system so they can take the recovery journey that is right for them
- This requires a range of services to ensure a tailored package of care
- Abstinence is the aspiration of the vast majority
- Substitute prescribing has its place & medically assisted recovery can & does happen
- Want to have a greater ambition for all to achieve sustained recovery



Building Recovery:

- Building a recovery-led system.
- The individual will be placed at the heart of the system with personalised services providing appropriate support.
- The recovery system will be locally-led and owned.
- Public Health England.
- Directors of Public Health to work with a range of local partners and Health and Wellbeing Boards.



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Building Recovery:

- Support communities to build networks of ‘Recovery Champions’ who will spread the message that recovery is worth aspiring to and help those starting their journey.
- Work with the National Skills Consortium to develop a skills framework which supports the recovery agenda.
- ‘Models of Care’ to be replaced with a more up to date evidence base and a holistic and recovery focused model.
- Patient placement criteria will be developed to deliver better clinical outcomes, increase value for money, and most importantly to help an individual find the right treatment.



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Building Recovery:

- Benefit claimants who are dependent on drugs or alcohol given a choice between rigorous enforcement and sanctions or appropriately tailored conditionality.
- Continue to work with the homelessness sector and other local providers to facilitate better joint working with drug treatment organisations and promote good practice.
- We are keen to explore how we can incentivise the system to deliver on recovery outcomes.
- Six pilots to explore how Payment by Results (PBR) can work for drugs recovery for adults.



Building Recovery: Implementation

- The introduction of Public Health England has been postponed until 2013 but it will exist in shadow form from April 2012.
- Launch of 8 drug and alcohol recovery Payment by Results pilots
- Commissioned research into tracking what happens to recovering/recovered substance misusers who enter the work system.
- Committed £400m until 2014 to tackle homelessness and this will pick up a specific group of substance misusers.
- Creation of the Recovery committee and the Recovery Partnership



Building Recovery: Implementation

- Focused on outcomes such as:
 - Free of drug(s) of dependence (including alcohol)
 - Prevention of drug related deaths & blood borne viruses
 - Reduction in crime & re-offending
 - Sustained employment
 - Ability to access & sustain suitable accommodation
 - Improvement in mental & physical health & wellbeing
 - Improved relationships with family members & friends
 - Capacity to be an effective & caring parent



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Next Steps:

- Promote the sharing and dissemination of effective practice.
- Enable local areas and key partners to work up their plans for implementation and delivery of the prevention, early intervention, enforcement and recovery approaches set out in the strategy
- Promote partnership working.
- Measure the impact of the strategy.



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Thank you for listening...

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