Health and Sport Committee

Preventative Agenda – Substance Misuse

Written Submission

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- To what extent do you believe the Scottish Government’s national drugs strategy, The Road to Recovery, and the approach by Integration Authorities and NHS Boards are preventative?

- Is the approach adequate or is more action needed?

- What evaluation has been done of interventions?

- Are the services and national drugs strategy being measured and evaluated in terms of cost and benefit?

Preventative

Preventative work could be greatly improved. During period of strategy drug related hospital admissions from people within 2% most deprived areas in Scotland have increased significantly, whereas other four quintiles have stayed the same.

Very little emphasis is placed with drugs and the environment, the research evidence used within the strategy is based in the United Kingdom, and dates from the mid-1990s.

Drugs and the Environment

The strategy is focuses on abstinence, however what if a person wishes to continue using substances… is that classed a failure… paradox of advocating, whilst saying people at centre of care.

The partnership action on drugs is a missed opportunity. All members bar one is from a statutory provider. The recovery sub group is not headed up by a recovery agency but a person unrelated to the area of recovery… why? Are people in recovery not as valued, informed, able to input to policy at the highest level. Reliance of US research has not been helpful… More research from a Scottish context is required.

The formation of an alcohol and drug strategy is a bad move. Two different cohorts, different norms and behaviours. Society views these two groups differently.

Cost and Benefit

The Road to recovery has still not had an agreed measurement of recovery, the implementation of the DAISY Tool is not until 2018, the end of the strategy. No
uniform way to measure service user outcomes. The Scottish Government advocate four measures. How can outcomes be measured when no uniform measure. Cost of drug use per year has risen from 2.8 billion to 3.8 billion per year during lifetime of strategy.

Evaluation of Interventions
Project Match… no intervention is better than the other. It is the relationship between worker and person, and their motivation.

The race to the bottom in terms of commissioning is devaluing service provision. The use of recovery communities is placing still vulnerable people at risk... Should be clear guidelines about people being peer whatever...

Drug deaths will rise in course of next strategy…. older drug users will die.

There must be a greater emphasis on shared budgets between drugs services and homeless services. ADPs, HSCP, and housing providers must work better. Focus cannot be solely on housing first models.

Not a lot has changed, addiction services still focus on the symptoms and not the causes.

Statutory services must improve...

Need to address the issue of Misuse of Drugs Act… to have safe injecting facilities. Need to address set up of ADPs…. same organisation cannot hold poor performing organisations to account… no clear purchaser provider relationship.