



Comprehensive Spending Review 2020 Representation

Collective Voice, September 2020

Who we are

Collective Voice is the national alliance of drug and alcohol treatment charities.

We believe that anyone in England with a drug or alcohol problem should be able to access effective, evidence-based and person-centred support. We know that treatment and wider support has a transformative power for people with drug or alcohol issues, their families and communities. Drawing on the strengths of our members, we:

1. Tirelessly advocate for the needs of people who use drugs and alcohol by influencing partners in central and local government, the media, and allied organisations.
2. Coordinate and lead campaigns and alliances within our sector and with wider partners.
3. Promote the value brought by the voluntary sector to treatment and wider support.

Our representation

As so clearly demonstrated by the disproportionate impacts of Covid-19, health and socio-economic inequalities exist across a wide range of areas, from employment to housing, community engagement to levels of access to the full spectrum of state support. As well as the inevitable human price, these inequalities cost the state a significant amount of money, particularly when services that drive long-term change are underfunded, leaving health problems to worsen to the point that more costly interventions are required.

Even before the COVID-19 pandemic hit the UK, local public health services were struggling to keep up with growing demand and health inequalities were wideningⁱ. With the continued focus on responding to and recovering from COVID-19, improving and sustaining the health and wellbeing of our population and levelling up health experiences and outcomes must be a core priority for the UK Government.

Drug and alcohol misuse is an area of support that delivers across a broad array of health and wellbeing outcomes, supporting individuals towards healthier lives and more active involvement in their communities and society. Although this Spending Review comes at a time of considerable uncertainty, making it understandably difficult to shape multi-year financial allocations we believe it is imperative that a healthy and resilient treatment system consisting of community support, treatment programmes in prisons, residential rehabilitation, in-patient detox and peer support/mutual aid is funded through both an increased public health grant and additional ring-fenced funding streams targeted specifically at addiction and recovery.

The funding of addiction and recovery services to date

Since 2013, commissioning drug and alcohol treatment has been the sole responsibility of local authorities as part of their wider remit for public health, with funding distributed from the ring-fenced Public Health Grant allocated to local authorities each year by the Department of Health and Social Care. As with many other fields supporting our most vulnerable citizens, drug and alcohol misuse services have been forced to weather the storm of year-on-year disinvestment. The Public Health Grant is now £850 million lower than in 2015/16, representing a 24% cut in real terms per head since that yearⁱⁱ. Many local public health commissioners, responsible for commissioning community drug and alcohol treatment services in their areas, have been faced with the unenviable position of dwindling resources and expanding portfolios of work.

In some areas drug and alcohol treatment has not fared particularly well, even setting aside the challenges outlined above. Support for drug and alcohol users is unlikely to be a top priority for local politicians who have a huge say in spending priorities. Treatment may not be a natural priority for local Directors of Public Health who may prefer, not unreasonably, to invest scarce resources in the big population-level causes of ill-health and early death: smoking, obesity, and non-dependent alcohol use.

Unsurprisingly support has suffered as a result. In the first part of her landmark Review of Drugs Dame Carol Black found an average decrease of 14% in funding for treatment services, with considerable regional variation – some areas experiencing cuts of 40%ⁱⁱⁱ. In the words of the report, “A prolonged shortage of funding has resulted in a loss of skills, expertise and capacity from this sector.” The landscape for family support has been similarly eroded, with some services ceasing to exist altogether, while others have been forced to significantly scale back their offer, creating a limited patchwork of availability across the country.

The need for significant investment

Meanwhile, the need for an effective and robust treatment system is only increasing. Drug-related deaths, surely the more critical indicator of need, have risen to a record high since 1993 of 4,359 in 2018^{iv}. This rise in deaths correlates with the disinvestment in treatment and recovery services described above and occurs against the backdrop of a decade of wider austerity measures that have stripped away support in allied fields such as mental health, criminal justice and domestic abuse. Particularly disturbing is the fact that the UK has been recognised as a global leader on drug and alcohol support, with a world-class treatment evidence-base.

But drug-related deaths are not the only measure. Recent years have seen worrying increases in substance misuse among younger people, increased numbers of people using opiates or crack cocaine (following a decade of substantial decline), and greater complexity in the lives of people in treatment. The unmet needs of people with problematic relationships with alcohol are particularly concerning – PHE estimates just one in five people are getting the help they need^v. For opiate users that figure is over 50%^{vi}.

In the context of illicit drugs, The Black Review sets out the stark financial costs of the situation as it stands. Harms related to illegal drug use in 2018/19 cost almost £20 billion, with drug-related deaths alone creating £6.3 billion of costs. In comparison, substance misuse treatment costs represent just over three per cent of the overall costs.

The financial impact on other parts of our social care network is staggering. The review estimated that over £4 billion is lost each year because of unemployment that flows from drug misuse. Meanwhile, the harms associated with drug-related social care are estimated at £630 million and the total cost of all harms associated with partially drug-related hospital admissions are estimated at £156m^{vii}.

A well-funded treatment system is vital to keep people out of costly acute health and care settings, which often do not have the specialist expertise many drug and alcohol users need.

The value substance misuse treatment offers

The human case for supporting people with drug and alcohol problems is obvious. The financial case for substance misuse treatment services is also well-established. Providing well-funded drug and alcohol services represents good value for money because it keeps people alive, cuts crime, improves health, and supports individuals and families along the road to recovery. Alcohol treatment reflects a return on investment of £3 for every £1 invested, which increases to £26 over 10 years, while drug treatment reflects a return on investment of £4 for every £1 invested, which increases to £21 over 10 years. And specialist interventions for young people potentially save even more: £5-8 for every £1 invested, mainly in health and crime benefits. Treatment is proven to improve health and wellbeing, reduce harm, support people into employment, reduce anti-social behaviour, decrease contact with the criminal justice system and reduce pressure on other public services, particularly acute healthcare settings^{viii}.

Investment in services that support family members of people experiencing substance misuse have also been shown to create cost savings for the state. A 2011 Social Return on Investment study carried out by Adfam (the national charity working to improve life for families affected by drug or alcohol use) found properly supporting family members leads in turn to improved outcomes for their drug- or alcohol-using loved one, resulting in a 26% reduction in involvement of NHS and criminal justice agencies. Family support creates a return of £4.70 social value for every £1 invested^{ix}.

Substance misuse and multiple disadvantage:

Effective treatment and recovery services meet a range of harms and can create significant savings for the public purse across all of them, from employment to housing, from contact with the criminal justice system to children being taken into care. For people experiencing chaotic lives with a significant number of multiple and complex needs, the potential to create lasting change and cut costs accrued in allied systems is therefore substantial.

Treatment, for instance, results in a 44% reduction in the number of individuals re-offending in the two years after starting treatment for dependency, with a 33% decrease in the number of offences committed^x.

The impacts of Covid-19

The Black Review gave a comprehensive overview of the harms and costs of drug misuse in February 2020. The onset of Covid-19 has only served to reinforce the Review's findings, sharpening the need

for a new financial settlement. Existing health inequalities have been brought into focus by the pandemic, and a possible economic downturn will only serve to exacerbate them^{xi}.

There are already signs of Covid-19 leading to an uptick in mental health problems and demand for services^{xii xiii} as well as a worrying increase in levels of harmful drinking. We echo the Royal College of Psychiatrists' concerns about this reported surge – analysis shows over 8.4 million people are now drinking at higher risk, up from just 4.8 million in February^{xiv}.

What are the opportunities ahead for substance misuse treatment?

Public health and prevention services delivered by local authorities play a vital role in tackling health inequalities and 'levelling up' health and wellbeing experiences and outcomes across the population. High quality drug and alcohol treatment services must play a vital role within that, not only helping to meet the wave of new harms caused by Covid-19 but also delivering financial dividends for the state across a number of political agendas and to a number of government departments, from the Ministry of Justice to the Home Office, the Department for Work and Pensions and the Department for Health and Social Care.

With the second part of The Black Review due to be published by the end of the year, and the government committed to an Addictions Strategy early next year, we believe it is essential that a substantial settlement is made both for public health services in general and to support essential new treatment and recovery initiatives.

ⁱ Marmot M. et al., 2020, *Health Equity in England: The Marmot Review 10 Years On*. Available online: <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on>

ⁱⁱ The Health Foundation, 2019, *Creating healthy lives*. Available online: <https://www.health.org.uk/sites/default/files/upload/publications/2019/Creating%20healthy%20lives.pdf>

ⁱⁱⁱ Dame Carol Black, 2020, *Review of Drugs: Executive Summary, 2020*. Available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/897786/2SummaryPhaseOne+foreword200219.pdf

^{iv} ONS, 2019, *Deaths related to drug poisoning in England and Wales: 2018 registrations*. Available online: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deaths-related-to-drug-poisoning-in-england-and-wales/2018-registrations>

^v Public Health England, 2018, *PHE inquiry into the fall in numbers of people in alcohol treatment: findings*. Available online: <https://www.gov.uk/government/publications/alcohol-treatment-inquiry-summary-of-findings/phe-inquiry-into-the-fall-in-numbers-of-people-in-alcohol-treatment-findings>

^{vi} Public Health England, 2019, *Opiate and crack cocaine use: prevalence estimates by local area*. Available online: <https://www.gov.uk/government/publications/opiate-and-crack-cocaine-use-prevalence-estimates-for-local-populations> and PHE, 2017, *Substance misuse treatment for adults: statistics 2016 to 2017*. Available online: <https://www.gov.uk/government/statistics/substance-misuse-and-treatment-in-adults-statistics-2016-to-2017>

^{vii} Dame Carol Black, 2020, *Review of Drugs: Executive Summary, 2020*. Available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/897786/2SummaryPhaseOne+foreword200219.pdf

^{viii} Public Health England, 2018, *Alcohol and drug prevention, treatment and recovery: why invest?*. Available online: <https://www.gov.uk/government/publications/alcohol-and-drug-prevention-treatment-and-recovery-why-invest/alcohol-and-drug-prevention-treatment-and-recovery-why-invest>

^{ix} Adfam, 2011, *Adfam's Social Return on Investment study, including the methodology and data is available here*: https://adfam.org.uk/files/docs/Adfam_SROI_report.pdf

^x Ministry of Justice and Public Health England, 2017, *The impact of community-based drug and alcohol treatment on re-offending*. Available online: <https://www.gov.uk/government/publications/the-effect-of-drug-and-alcohol-treatment-on-re-offending>

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- ^{xi} Public Health England, 2020, *Disparities in the risk and outcomes of COVID-19*. Available online: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/Disparities_in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf
- ^{xii} ONS, 2020, *Coronavirus and depression in adults, Great Britain: June 2020*. Available online: <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/coronavirusanddepressioninadultsgreatbritain/june2020>
- ^{xiii} BMA, 2020, *COVID on our minds – the pandemic has placed even more strain on mental health services*. Available online: <https://www.bma.org.uk/news-and-opinion/covid-on-our-minds-the-pandemic-has-placed-even-more-strain-on-mental-health-services>
- ^{xiv} Royal College of Psychiatrists, 2020, *Addiction services not equipped to treat the 8 million people drinking at high risk during pandemic, warns Royal College*. Available online: <https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2020/09/14/addiction-services-not-equipped-to-treat-the-8-million-people-drinking-at-high-risk-during-pandemic-warns-royal-college>