



Comprehensive Spending Review 2021 Representation

Joint Response from Adfam, Alcohol Change UK, the Alcohol Health Alliance, Collective Voice, and the NHS Addictions Provider Alliance

Who we are

Adfam is the only national charity tackling the effects of alcohol, drug use or gambling on family members and friends. Adfam does this by empowering families and friends to get the support they need; building the confidence, capacity and capability of frontline practitioners to provide effective services; and influencing decision-makers to understand the needs of thousands of people coping with a family member or friend's drink, drug or gambling problem.

Alcohol Change UK is a leading UK alcohol charity. With a vision of a society that is free from serious alcohol harm, we work towards five key changes: improved knowledge, better policies and regulation, shifted cultural norms, improved drinking behaviours, and more and better support and treatment. We are a research funder, we deliver the annual Dry January campaign and we provide training to client-facing professionals.

The **Alcohol Health Alliance UK (AHA)** is an alliance of more than 60 non-governmental organisations working together to promote evidence-based policies to reduce the harm caused by alcohol. Members include medical royal colleges, charities and treatment service providers.

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.

The **NHS Addictions Provider Alliance** is a network of 16 NHS trusts and the Greater Manchester Health and Social Care Partnership who provide drug and alcohol treatment services in the community and prisons across England. We believe that individuals, families and communities affected by drugs and alcohol should have parity of access to treatment and support as one would expect for any health condition.

Our ask of the 2021 Comprehensive Spending Review

- **It is imperative that Dame Carol Black’s long-term vision of rebuilding this country’s treatment and recovery system is funded.ⁱ Dame Carol’s policy programme is projected to save the lives of over 3,000 opiate users, bring 95,000 new people into recovery, prevent 2.8 million crimes (stopping the victimisation of hundreds of thousands of citizens) and save many billions of public money. We urge the Government to fully fund it to the levels specified by its author.**
- **The government must ensure any financial settlement is a multi-year commitment to provide frontline services with the security they need to plan effectively for the future.**
- **At a minimum, the Public Health Grant should be restored to its 2015/16 level. The Health Foundation estimates this would amount to an additional £1b annually.ⁱⁱ**

Our representation

Eighteen months on from the beginning of the Covid-19 pandemic, the significant economic and health inequalities which plague our society are abundantly clear, manifest across almost all aspects of life, from housing to employment to rates of cardiovascular disease and cancer. Covid-19 itself presented unequally, with associated hospital admission rates 2.9 times higher in the most deprived parts of England compared with the least deprived, and a mortality rate 2.4 times higherⁱⁱⁱ.

Covid has illuminated the existing weaknesses and inequalities in our systems of care. Even before the pandemic hit the UK, local public health services were struggling to keep up with growing demand and health inequalities were widening^{iv}. We therefore welcome the Health Secretary’s recent commitment to tackle, in his words, the “disease of disparity” and his recognition of the link between poverty and health.^v Improving and sustaining the health and wellbeing of our citizens and levelling up health experiences and outcomes must now become a core priority for the UK Government.

In his speech at the Grange Community Centre in Blackpool, the Health Secretary also recognised the record levels of people dying from harmful drug and alcohol use, and the unequal burden of substance misuse on our most deprived communities.

Substance misuse services – a decade of decline

The recovery enabled by drug and alcohol services preserves life, reunites families, heals communities and supports hundreds of thousands of people each year towards more active involvement in their communities and society. Treatment and recovery delivers on reducing health inequalities, improving health, and keeping our communities safer – all while making significant savings to the public purse.

The drug and alcohol field’s ability to deliver this has been severely hampered. The first part of the Black Review found an average decrease of 14% in funding for treatment services, with considerable regional variation – some areas experiencing cuts of 40%^{vi}. The overall Public Health Grant, from which treatment budgets are drawn, is now £850 million lower than in 2015/16, representing a 24% cut in real terms per head since that year^{vii}. In the words of Dame Carol’s report, “A prolonged shortage of funding has resulted in a loss of skills, expertise and capacity from this sector.”

Following almost a decade of disinvestment, the government now has in part two of Dame Carol's Independent Review of Drugs a roadmap towards a world-class and highly effective drug treatment system. The investment Dame Carol has called for to realise the ambition of a whole-system approach is significant but necessary, and represents excellent value over the medium to long term.

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.

While Dame Carol's Review laid bare the problems facing those in need of drug treatment, the significant harms to people and communities created by alcohol use continue to be overlooked. Since 2013, the number of people entering alcohol treatment has declined by a fifth, piling more pressure on already over-stretched acute health settings, with alcohol-related hospital admissions on the rise.^{viii} Expenditure on alcohol treatment services specifically was cut by 8% between 2016 and 2018,^{ix} a period when two-thirds of local authorities in England reduced their alcohol treatment budgets, with 17 of them imposing cuts of more than 50%.^x PHE estimates just one in five people with an alcohol dependency issue are getting the help they need.^{xi}

The case for a new financial settlement

The human case for supporting people with drug and alcohol problems is obvious – deaths resulting from drug and alcohol use are at a record high.^{xii} This rise in deaths correlates with the disinvestment in treatment and recovery services described above and has occurred in a decade of wider austerity measures that have stripped away support in allied fields such as mental health, criminal justice and domestic abuse.

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^{xiii}.

Investment in services that support family members of people experiencing substance misuse have also been shown to create savings for the state. A 2011 Social Return on Investment study carried out by Adfam 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^{xiv}.

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^{xv}.

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- At a minimum, the Public Health Grant should be restored to its 2015/16 level. The Health Foundation estimates this would amount to an additional £1b annually.^{xvii}

ⁱ <https://www.gov.uk/government/publications/review-of-drugs-phase-two-report/review-of-drugs-part-two-prevention-treatment-and-recovery>

ⁱⁱ <https://www.health.org.uk/news-and-comment/news/public-health-grant-allocations-represent-a-24-percent-1bn-cut>

ⁱⁱⁱ 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

^{iv} 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>

^v <https://www.gov.uk/government/speeches/the-hidden-costs-of-covid-19-the-social-backlog>

^{vi} 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

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

^{viii} Roberts, E., Hotopf, M. and Drummond, C. (2020) The relationship between alcohol related hospital admission and specialist alcohol treatment provision across local authorities in England since passage of the Health and Social Care Act 2012 in *The British Journal of Psychiatry*

^{ix} Ministry of Housing, Communities and Local Government (2020) Local authority revenue expenditure and financing

^x Alcohol Change UK (2018) *The Alcohol Treatment Levy*

^{xi} 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>

^{xii} <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deaths-relatedtodrugpoisoninginenglandandwales/2020>; <https://www.gov.uk/government/publications/alcohol-consumption-and-harm-during-the-covid-19-pandemic>

^{xiii} 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>

^{xiv} 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

^{xv} 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>

^{xvi} <https://www.gov.uk/government/publications/review-of-drugs-phase-two-report/review-of-drugs-part-two-prevention-treatment-and-recovery>

^{xvii} <https://www.health.org.uk/news-and-comment/news/public-health-grant-allocations-represent-a-24-percent-1bn-cut>