

Prevalence



There are an estimated* **3,415** opiate and/or crack users in Northamptonshire, equivalent to 7.5 per 1,000 adult population. In 2016/17, an estimated **46.6%** of opiate users (**1,354 individuals**) weren't accessing specialist treatment services.



National survey results[^] show that amongst respondents aged 16-59:

- **34.6%** had ever used drugs.
- **9.0%** had used drugs in the last year.
- **2.1%** had used drugs at least once a month in the past year, equivalent to **8,785** individuals in Northamptonshire.



In a 2019 survey of **secondary school** pupils in Northamptonshire⁺⁺

- **5%** of respondents in Year 8 reported having used drugs rising to **18%** of Year 10 respondents.
- **71%** of respondents reported none or just a few of people their age had taken cannabis in the last week.

Costs

In 2018/19, the total budget for substance misuse services (combined drugs and alcohol) is **£7 million**, which includes:

- **£5.5 million** for structured treatment services including detox and specialist prescribing
- **£800k** for holistic recovery services supporting housing, employment, wellbeing and social integration
- **£380k** for young people's treatment and prevention services.
- **£160k** for services to support families affected by substance misuse.
- **£155k** for drug and alcohol awareness training aimed at professionals and workplaces



According to the NDTMS 2016/17 Social Return on Investment Tool, structured treatment for drug use in Northamptonshire has provided **£5.7 million** in benefits to the NHS, social care and housing services, and prevented **£12.2 million** in crime related costs.

Health Burden



In 2015/16-17/18, **314** young people aged 15 to 24 were hospitalised due to substance misuse.



In 2017/18, there were **615** hospital admissions for drug related mental and behavioural issues.⁺



In 2017/18, there **355** hospital admissions for illicit drug poisoning.⁺



In 2016-18, there were **93** registered deaths due to substance misuse.**



Local data shows that in 2018/19, there were **175** referrals to the Acute Substance Misuse Liaison Service at Northampton and Kettering General Hospitals for drug use.

Treatment

Adult structured treatment figures Dec 17-Nov 18:

- **1,485** opiate users treated, of which **8.1%** successfully completed treatment and did not return to services within 6 months, compared to the national average of 5.9%.
- **588** non-opiate users treated, of which **34.9%** successfully completed and did not return to services within 6 months (national average 34.9%).



In 2016/17, **26.9%** of Northamptonshire adults in treatment for drug misuse were also in contact with mental health services. A 2015/16 survey of patients in local drug services found that **53.3%** had a current mental health need.

Local data shows that in 2017/18, **young people's substance misuse services** provided support to **302** under 18s drug misuse issues, with **61.8%** of those exiting having successfully completed treatment.

Risk Factors

A local study of Adverse Childhood Experiences (ACEs) found that **48.7%** of people in the county experienced at least one ACE, and **10.6%** had 4+ ACEs.

Compared to people with no ACEs, those with 4+ ACEs were **4.7** times more likely to have used cannabis, and **6.6** times more likely to have used heroin or crack.



National survey results (2017/18 CSEW) show that men are roughly **twice** as likely as women to have used drugs in the last year.



In 2017, **5.8%** of 16 and 17 year olds were not in employment, education or training (NEET).



In 2017/18, **12.3%** of GP patients aged 18+ were recorded as having depression.



In 2017/18, the rate of domestic abuse related crime reported to the police was **26.8 per 1,000** population.

Vision: Our vision is to prevent, treat and reduce the health and social related harms caused by drug misuse to individuals, families and communities in Northamptonshire. We want to ensure the best use of resources to meet the needs of the population, whilst enabling a high functioning system.

Our Priorities/Objectives

Whole system approach

Preventing and tackling drug use requires good partnership working across the system to understand the potential causes and minimize barriers people face in successful recovery.

Achieved through:

- Developing a strategy and establishing a county partnership for substance misuse.
- Developing a person centred co-produced service that meets patient needs.

Widening access to services

Reducing the barriers for those with a mental health and substance misuse problem (dual diagnosis) accessing treatment. Ensuring that those from the whole population are able to access service regardless of geography or any of the protected characteristics. Harm reduction for people using drugs who are not in treatment.

Achieved through:

- Working with service providers to ensure that there is regular monitoring of access.
- Working with NHS to minimize barriers in relation to dual diagnosis. Reducing overdoses.

Behavioural approaches

Improvement in treatment outcomes for people within the treatment service, reducing drug deaths in ageing population of drug users, increasing the number of people in treatment.

Achieved through:

- Ensuring that Recovery sustains a drug free lifestyle through, employment, accommodation and drug free social networks.
- Ensuring that patients are discharged when recovered.

Evidence Based Approach

We will ensure that the service continues to utilise the most up to date guidance and research. There will also be regular engagement with service users.

Achieved through:

- Take account of the key feedback from service user forums.
- Carry out and publish research to improve the treatment system in Northamptonshire.

Our Commitment / Enablers

Reducing inequalities: services which mitigate inequalities and work to overcome- by location, approach, policy.

System partnerships: engage and co produce with partners and stakeholders e.g. NHS, local government, schools, workplaces and prisons.

Continued investment in prevention, better access to target populations and promoting MECC*.

Engagement and co-production of research: aligning with evidence. Evaluation to monitor and assure service delivery and quality.

Embed Health in All Policies: - a common way of analysing the health impact of drugs; creating places which support and generate good health; governance/policy ideas based on collaboration.

Measures of Success

- Successful completion of drug treatment for non-opiate users to be above 37%.
- Reduction in the rate of deaths from drug misuse to below 4 per 100,000.
- Increase in Successful completion of drug treatment for opiate users to above 9%.
- An increase in the proportion of adults with substance misuse treatment need who successfully engage in community-based structured treatment following release from prison to be above 30%.

*Making every contact count