

Our free monthly update with the latest comment, reports, resources, policy and parliamentary news on families, drugs and alcohol.

POLICY BRIEFING

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Editorial

Since the general election in May, much has been written in the media about reform in the criminal justice system. The new justice secretary Michael Gove has with the chancellor unveiled a programme for prison reform, which includes [closing Victorian prisons](#) and building new, larger prisons, with the dual aims of making savings and modernising the prison estate. While [there are concerns](#) that this move won't tackle the important issue of high prison populations, [many have been pleased](#) by this embrace of reformist rhetoric.

In his [speech at the Conservative party conference](#) Gove argued that “We should not treat prisoners as society's liabilities who we keep warehoused – out of sight and out of mind... Prison should offer offenders the chance to get the skills and qualifications which they need to make a success of life on the outside.” This approach is viewed by many as a welcome departure from the tough stance of his predecessor Chris Grayling. The reversal of a number of Grayling's policies are encouraging – lifting the ban on sending books to prisoners, and axing the criminal courts charge, which required people convicted of a crime to pay £150-1200 towards the cost of their case. [One example provided by the Howard League](#) is of a homeless woman in Warwickshire who was convicted in her absence of begging and was ordered to pay £150. [Commentators have cautioned](#) that only time will tell whether reality will truly match up to Gove's reformist intentions.

At a time when criminal justice is in the spotlight, it is vital that the families of prisoners are not forgotten. Like families affected by drugs and alcohol, people with a loved one in prison may experience stigma and isolation as well as financial difficulties. When families are affected by both substance use and imprisonment these effects can be compounded; support is crucial. [Research](#) has also shown that family members can be influential in encouraging people who use substances to access help.

It is for these reasons that Adfam has, for the last three years, been working on a project in partnership with Journeys2Recovery – a drug and alcohol service run by [RAPt](#) in Feltham Young Offenders Institution, to support families of young offenders affected by drugs and alcohol. The family members attended two day-long workshops to help them make sense of drug and alcohol use and its effects on family life, and understand how families can cope. A final workshop brought together the young men with their family members, to address 'family flashpoints' and help them to build bridges and make plans for the future. These were important and emotional opportunities for families to reconnect. The families taking part in the project were also given a personalised pack which informed them of locally available services. One participant said “the workshops helped me understand that not everything my son does is my fault”. Another commented that “it's amazing the way family members came together to support their loved ones in their recovery”. The project has now drawn to a close and evaluation is underway, and Adfam will soon be publishing a short report discussing the project in greater detail. We hope it has had a lasting impact on all those who took part.

Lauren Garland

Policy Officer (Recovery Partnership)

Parliamentary roundup

[Liam Byrne MP](#) sponsored an Early Day Motion on government support for children of alcoholics, and called for greater awareness of the needs of the 2.6 million children of hazardous drinkers in the UK. The Early Day Motion has so far been signed by 24 MPs. Liam Byrne also spoke at a [Westminster Hall debate](#) on the issue, as well as [speaking to the press](#) about his own experiences with his father's drinking.

[Luciana Berger MP](#), the Shadow Minister for Mental Health, secured an opposition day debate on mental health. Many other parliamentarians also spoke in detail about the issue, including Jeremy Hunt MP, the Secretary of State for Health, and Norman Lamb MP, the Liberal Democrat spokesperson on health. The topics discussed included dual diagnosis – co-occurring substance use and mental illness, as well as the impact of mental illness on families.

Resources

Families, drugs and alcohol

[Adult substance misuse statistics from the National Drug Treatment Monitoring System](#) (pdf) – Public Health England

This report covers the latest information and statistics, from April 2014 until March 2015, on the over 295,000 people in treatment for alcohol and drug problems in the UK. The statistics show the continuing rise in age profile of the cohort of heroin users – 44% of the more than 150,000 people in treatment for opiate use are 40 years old and over. The number of young people aged 18-24 presenting to treatment services has fallen by 33% since 2009/10, with the main substances involved for young people being cannabis (52%) and cocaine (23%). The number of younger opiate users has fallen by 60% since 2009/10. [Alcohol Policy UK](#) have produced an analysis of the alcohol treatment figures.

[Understanding the whole person – Part One](#) – Revolving Doors Agency

This paper, the first in a series of literature reviews on severe and multiple disadvantage, looks at journeys of personal change and the common concepts for recovery and desistance in mental health, substance misuse and criminology. The importance of the role that families play comes up repeatedly, including the effectiveness of family support, and the need for interpersonal networks and wider social inclusion.

[Collective Voice briefing ahead of the Comprehensive Spending Review](#) (pdf) – Collective Voice

Collective Voice, a partnership between eight drug and alcohol treatment providers, has produced this briefing arguing for the protection of investment in the treatment system. The briefing makes three key arguments, characterised as political, financial and moral. The political argument is that cuts in treatment budgets breaks Government promises to protect frontline health services, the financial that the savings that treatment provides by reducing health and crime related costs will be lost, and the moral that drug and alcohol related deaths are likely to rise if treatment budgets fall. For more from Collective Voice, see [this article in DDN, Leaner and keener - in a climate of austerity the new drug strategy must grow from our successes](#).

[Smoking, drinking and drug use amongst young people in England](#) (pdf) – Health & Social Care Information Centre

This document summarises responses to the recent consultation on changes to the smoking, drinking and drug use among young people (SDD) survey. The consultation found significant demand for the survey across a range of organisations, who used the information gained to examine trends and behaviour, inform policy, and plan services. Respondents identified areas the survey did not yet cover including e-cigarettes, new psychoactive substances, alcohol marketing and injecting drug use.

[Sentencing of mothers: Improving the sentencing process and outcomes for women with dependent children](#) (pdf) – Prison Reform Trust

This discussion paper asks how we can improve outcomes for women in the criminal justice system with dependent children – including the two-thirds of imprisoned women who are mothers to under 18s. The paper notes the serious negative impact on children of maternal imprisonment, and calls for a whole government approach to improving outcomes for mothers, including a review of sentencing policy to ensure recognition of and provision for people's caring responsibilities.

[Monitoring poverty and social exclusion 2015](#) – Joseph Rowntree Foundation

The annual report from the Joseph Rowntree Foundation examines poverty in the UK, finding in particular that the next generation is facing worse life chances than their parents – with 400,000 more young people aged 16-24 now living in poverty than a decade ago. More 16-24 year olds now live in poverty than over 65s, and they are four times more likely (16% versus 4%) to be unemployed than the average for the working age population. Of the total 13 million people in the UK living in poverty after accounting for housing costs, 3.7 million are children. More than half of all those in poverty live in a household with at least one adult in work.

Your organisation

[Governance as the true site of third sector innovation](#) (pdf) – Lifeline

In this paper, drug and alcohol treatment provider Lifeline's CEO, Ian Wardle, examines the issue of governance in the charity and voluntary (or third) sector. Given that the third sector is now the primary provider of drug and alcohol treatment in the UK, and the uncertain financial position of many organisations in both the public and third sectors, the role of governance is more important than ever – involving not just compliance with regulation and social responsibility, but also strategy, sustainability and survival.

Featured issue

[Medications in Drug Treatment: Tackling the risks to children – one year on](#) – Adfam

Adfam has published a new research report on the risks of opioid substitution therapy (OST) medications to children. Our research has revealed that far more children than previously thought are dying and being hospitalised after ingesting medications prescribed to treat their parents' drug addiction.

In the ten years to 2013, at least 110 children and teenagers aged 18 and under in the UK died from the toxic effects of opioid substitution therapy (OST) medications used primarily to help people overcome heroin addiction. In this time, at least 328 children in England were hospitalised and diagnosed with methadone poisoning. Of the 73 deaths in England and Wales, only seven resulted in Serious Case Reviews.

Since Adfam first reported on this tragic phenomenon in 2014, these cases have continued to occur, with at least three new Serious Case Reviews in the last year. Whilst in many cases children consumed the medications accidentally, some were deliberately given them by their parents in a misguided attempt to help soothe or send them to sleep. The mortality statistics also show the majority of fatal poisonings involve older, rather than younger children – but little is known about how or why these incidents occur.

Adfam is calling for all incidents involving a child's ingestion of these medications to be fully investigated and recorded – and analysed centrally by government, with the learning shared with local services. The wide range of professionals who come into contact with parents and carers prescribed OST medications including drugs workers, social services, GPs, pharmacists, midwives, school nurses, the police and probation staff must be trained about the potential harm these medications pose to children, and services must work together and share information more effectively to minimise risk. Gaps in knowledge remain including the number of parents allowed to take these medications home, and little research has been conducted into how many parents are administering their substitute medications to children. Parents prescribed these medications must also be educated about their potentially fatal risk to children, and given a secure box to store their medications.

To read the research and our policy and practice recommendations to reduce risk, see here:

[Download the full report](#) (pdf)

[Download the executive summary](#) (pdf)