

Combating Drugs Partnerships: Advocacy Guide

Version 1.0

Introduction

Getting involved in local advocacy through Combating Drugs Partnerships

All family members affected by substance use will want the best for their loved one but can often feel frustrated that they aren't getting the right care or support and will want to do something about it.

Local advocacy is an important way to represent the views of family members and this resource outlines different ways you can achieve this. It has a particular focus on Combating Drugs Partnerships, local bodies that bring together key stakeholders to discuss issues and agree actions relating to substance use in the community.

The resource outlines what Combating Drugs Partnerships are, their purpose, how you can engage with them along with other local decision-making structures and have your voice heard.

We believe family members have a key role to play in local decision-making, and this resource will equip you with information and knowledge to go about this in your local community.

If you have any questions or would like any further information, please don't hesitate to contact the Adfam team at admin@adfam.org.uk.

What is the context of this resource?



The impact of substance misuse

Substance misuse is the **use of psychoactive substances that is harmful or hazardous to health**. In this resource substance misuse refers to both alcohol and illicit drugs misuse. Substance misuse can have a **devastating effect not only on the individual using substances, but crucially those close to them**, particularly their family and friends. However, this **closeness can also be a source of strength**, as families often play a key role in a person's recovery.



The need for collective action

Drug-related challenges cannot be solved by one person or organisation acting alone; instead, a collective effort is needed. These challenges are complex, affecting multiple areas of society therefore a **coordinated, community-wide response** is needed.



From Harm to Hope initiative

In 2021 the government committed to new investment in drug misuse through the ten-year drugs strategy, 'From Harm to Hope'. This strategy aims to reduce the harms caused by drugs for individuals, families, and communities and to promote rehabilitation and recovery. For additional details on the initiative refer to: [gov.uk](https://www.gov.uk).

A key programme within this framework is the **Combating Drugs Partnership (CDP)** located across England. The CDP brings together a range of organisations to improve the efficiency and effectiveness of drug treatment and recovery. Government guidance emphasises that families of individuals who use drugs are key partners in this work, offering valuable insights as experts by experience.

If you get the opportunity to be involved in a CDP, it can be a daunting prospect – you may not have experience of attending meetings or have knowledge of local CDP structures and their key members. Therefore, this resource aims to provide guidance and enable confident participation in a CDP.

You can also contact [Adfam](https://www.adfam.org) for additional support.



Meaningful progress can only be made if we work together—across organisations and communities. Families with lived experience of drug misuse are an essential part of this effort, and their involvement is vital to improving lives and strengthen communities.

Key take aways

What is the CDP?

- The Combating Drugs Partnership (CDP) is a **coordinated local response to drug-related harms**, implementing the national 'From Harm to Hope' strategy.
- The CDP aims to **disrupt drug distribution, enhance treatment and recovery services, and reduce demand for drugs or alcohol**.
- By focusing on **specific local needs in line with national goals**, the CDP creates **tailored solutions to address the substance misuse-related challenges** in each community.

Who is involved in the CDP?

- CDPs **bring together different professionals** including police representatives, healthcare providers, local government officials, probation services, and charity workers. Leadership comes from the Senior Responsible Owner (SRO), typically a Director of Public Health or Police and Crime Commissioner.
- **People with lived experience may also be involved**, including current and former drug/alcohol users, affected family members, and victims of drug/alcohol-related crime.
- The CDP can also involve **schools, housing associations, employment services, and mental health providers**, creating a widespread network to address all aspects of substance misuse-related harm.

Why get involved?

- Drug misuse has **devastating effects on individuals, families, and communities**, contributing to rising crime, health crises, and societal costs of **£19.3 billion annually** in the UK. In England, among people aged 15 to 49 years, alcohol is the **leading cause of ill-health, disability, and death**.
- Therefore, there is **an urgent need for action against substance misuse**.
- By **sharing lived experiences**, you can **help shape policies that better support affected families** and improve local services. Your involvement offers a chance to **make a meaningful difference** while connecting with others who understand these challenges.
- The collaborative approach in CDPs means their **strategies match community needs**.
- Every voice and experience **contributes to developing more effective solutions** to tackle drug and alcohol-related harms.

Key take aways

How to get involved?

- There are multiple ways to get involved with your local CDP:
 - You can offer to **attend meetings which are scheduled annually** and listed on some council websites (not listed on all).
 - You can contribute by **sharing personal experiences** and by **suggesting agenda items** through the Public Health team.
 - If you are **unable to attend meetings**, other opportunities include **submitting written testimony, engaging with local officials, or participating in community organisations**.
- This means you can participate in a way that works best for you.

Key tips for involvement

- If you are invited to attend a meeting, it is useful to **prepare** so that you are able to **communicate effectively**. Before meetings, **go over any provided materials and identify key points from your experience** to share.
- You can have **most impact** by **concisely telling a story** from your own experience.
- Remember that **change develops gradually**; persistently contributing is the best way to make meaningful, long-term improvements.
- **Adfam** can provide **additional guidance** throughout your advocacy journey.

What is the CDP?

The CDP is made up of individuals that represent a specific group of people; in this case it would be those involved in mitigating drug or alcohol misuse. It is a group formed to implement the Government's national '[From Harm to Hope](#)' strategy.

CDP purpose

Works together **to combat misuse of illegal drugs and alcohol** and the harm caused in the community. CDP provides a single setting to understand and address local challenges and needs relating to drug and alcohol misuse.

CDP priorities



- Break drug supply chains
- Deliver a world-class treatment and recovery system
- Achieve a shift in the demand for drugs

CDP outcomes

- Reduce drug use
- Reduce drug-related crime
- Reduce drug-related deaths and harm
- Reduce drug supply
- Increase engagement in drug treatment
- Improve drug recovery outcomes



The national CDP goals aim to support a safer, healthier, and more productive society by combating illicit substances including drugs and alcohol.

Note: While the CDP does not clearly mention alcohol in its stated goals, alcohol is considered part of its objectives. References to "drugs" in this context include both drugs and alcohol.

What will the CDP do for the local community?

Goals the CDP want to achieve



Reduce drug use

- Proportion of the population reporting drug use in the last year (reported by age)
- Prevalence of opiate and/or crack cocaine use



Reduce drug-related crime

- Number of drug-related homicides
- Number of neighbourhood crimes



Reduce drug-related harm

- Deaths related to drug misuse
- Hospital admissions for drug poisoning and drug-related mental health and behavioural disorders (primary diagnosis of selected drugs)



Solutions

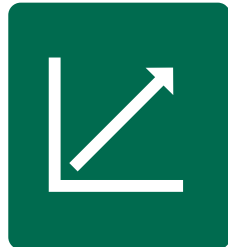
Note: While the CDP does not clearly mention alcohol in its stated goals, alcohol is considered part of its objectives. References to "drugs" in this context include both drugs and alcohol.

How will the CDP help the local community?

How will the CDP deliver for local population



Reducing drug supply



Increasing engagement in drug treatment

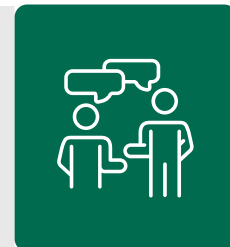


Improving drug recovery outcomes

- Number of county lines close
- Number of moderate and major disruptions against organised criminals



- Number in treatment (both adult and young persons reported by opiate and crack users, other drugs, and alcohol)
- Continuity care - engagement with treatment within three weeks of leaving prison



- Proportion who are in stable accommodation and who have completed treatment, are drug-free in treatment, or have sustained reduction in drug use. Also, components to recovery include housing, mental health, and employment.



How will the CDP measure success?

Note: While the CDP does not clearly mention alcohol in its stated goals, alcohol is considered part of its objectives. References to "drugs" in this context include both drugs and alcohol.

What does the CDP do?

Strategic planning and oversight

- **Keep track of all actions and plans:** Make sure plans are working to improve outcomes.
- **Assess local needs every 3 years:** Review drug-related data and work with partners to understand key issues.
- **Create a shared 3-year plan:** Focus on the three main goals from the national drug strategy.
- **Include alcohol-related harms:** Ensure plans also tackle problems linked to alcohol dependence.

Tracking progress and reporting

- **Set up a system to measure success:** Track how well local plans are being put into action and their impact.
- **Monitor local data:** Spot challenges and opportunities to improve.
- **Report progress yearly:** Share updates with the government on key results.

Working together and community engagement

- **Coordinate with partners:** Help different groups work together to meet national and local goals.
- **Talk to the community:** Keep people informed and involved in reducing drug- and alcohol-related harm.
- **Follow laws and use resources wisely:** Make sure funds and efforts are used effectively.
- **Support discussion:** Allow local and national leaders to share ideas and solutions.
- **Promote teamwork and fairness:** Support an inclusive approach to tackling drug-related issues.

You can contribute by participating as volunteers during meetings to help shape CDP board priorities and initiatives, ensuring strategies are informed by real-world experiences.

Who is involved in the CDP?



Local partners involved in **treatment, recovery, enforcement, prevention, or education** are tasked with setting up CDPs and working together to understand and address shared challenges related to drug/alcohol misuse-related harm.

The local drugs strategy **Senior Responsible Owner (SRO)** is responsible for ensuring the right local partners come together, building strong collective engagement, and designing a shared local plan to deliver against the National CDP framework (as described [here](#)). The SROs tend to be either the Directors of Public Health or Police & Crime Commissioner.

Who is involved in the CDP?



People affected by drug/alcohol –related harm

It is considered essential that people who are directly affected by drugs are included in local CDP board discussions. This includes those who are victims of drug/alcohol-related crime and antisocial behaviour, people who use drugs or alcohol, and the families and friends of people who use drugs or alcohol.

Local authority officials

It is recommended that there is representation at director level – for example director of children’s services. Relevant areas could include substance misuse, housing, employment, education, social care and safeguarding.

NHS strategic lead

Local NHS services are integral to the delivery of the 10-year drugs strategy and play a variety of roles across the life course, including school nursing, health visiting, primary care, community and inpatient mental and physical health care, and substance misuse treatment.

Jobcentre Plus

Meaningful activity such as employment plays a key role in improving substance dependency treatment outcomes. Inclusion of these organisations may help address employment-related needs within the area.

Who is involved in the CDP?



Substance misuse treatment providers

The organisations that provide specialist support for people with a substance use disorder in the local community will be central to achieving the aims of the strategy. The most significant partners will be providers commissioned by local authority public health teams, most likely either NHS or third sector providers.

Police

An assistant (or deputy) chief constable may be an appropriate attendee from the local police force. Their role includes violence reduction, serious and organised crime, neighbourhood policing, or a particular geographical area – attending

Police & Crime Commissioner (PCC)

It is recommended that the PCC attends the partnership. PCCs set police priorities, allocate budgets, and work with various agencies, including local authorities and substance misuse services, to address issues like drug- and alcohol-related harm

Who is involved in the CDP?



National Probation Service

The regional probation director or relevant local manager of the Probation Service should attend partnerships within their area. Regional probation directors can provide a key route to co-ordinate practice and share learning between partnerships in their area.

The secure estate

There are a range of potential roles that could best represent prisons and other secure settings. They may be closely involved in more tactical and operational discussions, and support the flow of relevant information and data to regional and national levels to co-ordinate sharing best practice.

Elected members

There are a number of relevant roles that elected members might hold in relation to substance use. Responsibilities in relation to community safety, housing, health, children and families, safeguarding and social care are all immediately relevant.

Who is involved in the CDP?

The CDP also works with:

Local schools and
other education
providers

Higher education

Further education

Housing associations
and providers of
supported housing and
homelessness
services

Youth offending teams

Voluntary, community,
and social enterprise
(VCSE) and other
community
organisations

Coroner's offices

Fire and rescue
authorities

Office for Health
Improvement and
Disparities regional
team

The membership also includes a Partnership Lead, Public Involvement Lead, and a Data and Digital Lead nominated by the CDP to support the SRO and partnership. Representatives from other agencies/organisations may be invited to attend meetings for specific agenda items.

Who is a lived experience volunteer and what is their role?

Being involved in a CDP can be a daunting prospect, as you may not have experience of being involved in a body such as this, or knowledge of local structures and the people who are involved.

The UK government defines living experience and lived experience as: *“Where people are currently affected by their own or a family member’s problem alcohol or drug use, we describe this as living experience. Where people and families are in recovery from problem alcohol or drug use, we describe this as lived experience. This is distinct from learned experience, which people can get through studying, practicing or exposure. People can, and typically do, have a mixture of both living or lived experience and learned experience.”*

Role description:

- The voices and full involvement of people who have experience of alcohol or drug-related harm are an essential part of the CDP.
- This includes people who use (or have used) drugs or alcohol, their family members, family members of those who have died or been killed as a result of involvement in drugs or alcohol and, more broadly, local residents or businesses affected by alcohol or drug-related harm.
- The role of lived experience volunteers is to work alongside clinical and non-clinical staff, patients, and carers, drawing upon personal experience and expertise to provide insight into the design, improvement, and delivery of the services provided by the CDP.

- It is important to get involved to make sure that the services provided through the CDP are effective, to improve the lives of both the individuals who misuse substances as well as their loved ones.



Adfam recommends:

Involving more than one family member so that you can support each other and provide different views and perspectives to the CDP. In addition to the central group within the CDP, there may also be sub-groups and working groups, focusing on particular issues relating to substance misuse, where family members can get involved.

Why get involved?

Misuse of **illegal drugs** destroy lives, ruin families, and tear apart communities. Use of illegal drugs is a major driver of crime, and the harms from drug misuse cost society in the UK, £19.3 billion per year¹. Drug misuse is rising, and drug-related deaths increased by ~80% between 2012 and 2021².

There were an estimated 589,000 people who are dependent on alcohol in 2020. In England, among people aged 15 to 49 years, **alcohol** is the leading cause of ill-health, disability, and death³. Alcohol misuse is a significant public health problem with major health, social and economic consequences, estimated to cost the UK between £21 and £52 billion a year³.



The effects of substance misuse can be devastating not only for those using substances but also for the people close to them, including family and friends. **First-hand accounts from people affected by substance misuse offer invaluable insights** that can shape policies and practices to be more empathetic and effective.



Combating substance misuse and the harm caused is an issue which **needs action from a range of local partners**. Success relies on these partners working together to understand their population and how drugs are causing harm in their area, any challenges in their local system, and the changes that are needed to address them.



Finally, getting involved offers you **the chance to make a real difference**, using your lived experience to shape better support for families affected by substance misuse. It provides a sense of purpose, the opportunity to connect with others who share similar experiences, and the chance to develop new skills. **Advocacy can be empowering**, helping individuals feel heard while contributing to meaningful change in their communities.

How can you get involved?



The membership of CDP is fluid, i.e. you have the option to engage and attend meetings when the topics that interest you are being discussed. Meetings are held regularly to discuss a range of topics aimed at addressing drug-related issues within communities.

- ✓ Involvement varies by local authority; you can contact the CDP by the email address listed on their website. For authorities that do not provide this information you can contact the local public health team
- ✓ You can also get in touch with the SRO or those organising the CDP in your local area about family members being involved during these meetings
- ✓ Usually meeting dates will be set one calendar year in advance; you can refer to the local council websites for more information on the dates and frequency of the meetings



In some cases, meeting agendas are listed on your local council website. You can get in touch with the SRO or the public health team organising the CDP in your local area. Meeting agendas are usually sent to CDP members **five** working days before each meeting.

How can you add discussion topics to a meeting?

The process to add a topic to the CDP meeting agenda may differ depending on your local area. In most cases, the easiest way is to send an email to the local Public Health team. Here are a few tips:

Check for guidelines

Some local authorities have specific procedures for submitting agenda items.

You may find this information on their website or by asking a CDP representative

Explain the importance of your request

When making your request, briefly explain why the topic is important and how it relates to the group's goals

Provide supporting information

If possible, include relevant data, personal experiences, or community feedback to strengthen your request

Ask about deadlines

Find out if there are specific dates when agenda requests must be submitted

How can you create an impact during a meeting?

Participating in meetings is a valuable opportunity to share your experiences and insights. Making a meaningful contribution in a meeting can be more effective with some preparation, clear communication, and active participation. Here are some ways to make sure your voice is heard in a constructive way:



Take a moment to prepare: Reviewing the meeting agenda beforehand can help you feel more comfortable and ready to contribute.



Use personal experiences and examples: Sharing real-life stories and examples can make your contributions more relatable and impactful.



Speak with confidence: Your voice is important, everyone attending the meeting is trying to achieve the same goal, even if they may have a different perspective on how to get there. Expressing your views in a calm and confident way encourages open dialogue.



Share key points thoughtfully: Expressing your thoughts in a clear and concise way helps ensure your message is understood.



Listen and engage respectfully: Being attentive and responding to others' points helps create an environment for a supportive and productive discussion.



Follow-up if needed: If there's something important you would like to emphasise or clarify, consider sending a follow-up email or sharing additional information with the SRO.

How to share feedback after a meeting?

Discussing feedback in a group setting can help validate shared experiences and strengthen advocacy efforts

Some ways you can share feedback after attending a meeting:

Follow-up conversations

Informal meetings or check-ins after official meetings can allow for more open discussions and reflections on key points.

Sharing meeting highlights

Consider keeping note of key points from meetings to help ensure that important discussions and decisions are written down for future reference. Reflect on the main topics covered, decisions made, and any action points assigned.

Consider recording any follow-up actions, including who is responsible and deadlines where applicable. Keeping a record of discussions can help track progress and ensure lived experience voices continue to shape discussions.

How to get involved outside CDP meetings?

It may not always be possible to attend a CDP meeting but here are some other ways you can involved:



Practical tips: How to engage with the CDP

Engaging with the CDP can be an empowering way to influence change and share your valuable lived experiences. We understand that the process can be overwhelming but know that you have the support needed to navigate this journey.

Express yourself clearly and concisely

When sharing personal experiences or community concerns, focus on the key points you want to get across. Keeping your message brief and to the point can help others understand and engage with what you're saying

Find a communication style that works for you

If speaking in meetings feels challenging, consider writing down your thoughts instead. Sending an email, submitting a written statement, or sharing your experiences in writing can be just as impactful.



Express differing opinions respectfully

It is okay to see things differently. If you disagree with a point, try to share your perspective in a way that encourages discussion rather than conflict. Focus on practical solutions and shared goals rather than personal frustrations. Use phrases like "I understand your view, but my experience has been..." or "Another perspective to consider is...". Show that you value others' viewpoints while sharing your own insights.

Think about the bigger picture

Your personal experiences are valuable, and they can also help illustrate broader community issues. Using phrases like "Many in our community experience..." can help highlight shared concerns.



Adfam offers additional online resources and for more details, please contact: <https://adfam.org.uk/>

Practical tips: Dealing with unexpected outcomes

Not every discussion or decision will go as expected, and that's okay. It's important to stay engaged and find ways to keep contributing to the conversation. Here are some ways to navigate unexpected outcomes.



Stay open and flexible

Change takes time, and progress may not always be immediate. Keep looking for different ways to contribute and share your perspective.



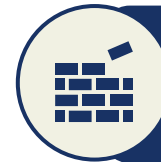
Keep track of conversations

Writing down key points from meetings or decisions can help you reflect and plan for future discussions.



Ask questions

If a decision isn't what you expected, it's okay to ask for more information. Understanding the reasoning behind decisions can help shape future discussions.



Share your thoughts constructively

If something doesn't align with your experience, offer suggestions or alternative ideas to keep the conversation moving forward.



Connect with others

Working together with other advocates, organisations, or community members can help amplify your voice and create a stronger impact.



Take care of yourself

Advocacy work can be emotionally demanding. Lean on support networks like peer groups or community organisations to stay encouraged and motivated.

Checklist: Before attending a CDP meeting

If you are invited to attend a CDP meeting, we would recommend considering the following steps:



1. Familiarise yourself with the **purpose of the meeting**. Knowing the meeting aims can help you prepare for and contribute during the meeting. The meeting agenda will be sent out five working days before each meeting and you can read all CDP papers beforehand.



2. Familiarise yourself with your **role in the meeting**. Lived experience volunteers will work alongside clinical and non-clinical staff, patients, and carers, drawing upon personal experience and expertise to provide insight into the design, improvement and delivery of the services provided by the CDP.



3. Gather **any relevant information about your family member or friend's situation**, this could include challenges they are facing, or support that would be welcomed.



4. Consider **bringing a supportive friend or family member** with you.



5. Remember that **your input and perspective is incredibly valuable**.

References

This resource has been developed using:

- 1) GOV.UK 2021, Government response to the independent review of drugs by Dame Carol Black (<https://www.gov.uk/government/publications/independent-review-of-drugs-by-dame-carol-black-government-response/government-response-to-the-independent-review-of-drugs-by-dame-carol-black>).
- 2) Office for National Statistic, Deaths related to drug poisoning in England and Wales: 2021 registrations, ([https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2021registrations#:~:text=The%20rate%20of%20drug%20poisoning%20deaths%20registered%20in%202021%20\(84.4,\(46.6%20per%20million%20people\).](https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2021registrations#:~:text=The%20rate%20of%20drug%20poisoning%20deaths%20registered%20in%202021%20(84.4,(46.6%20per%20million%20people).)
- 3) GOV.UK 2024, Guidance for local delivery partners (accessible version) (<https://www.gov.uk/government/publications/drugs-strategy-guidance-for-local-delivery-partners/guidance-for-local-delivery-partners-accessible-version>).
- 4) CollectiveVoice 2022, New guidance on local partnerships (<https://www.collectivevoice.org.uk/news/new-guidance-on-local-partnerships/>).
- 5) YHPHN 2025 Combating Drugs Partnerships: An introduction for Yorkshire & Humber Dual Diagnosis forum (https://www.yhphnetwork.co.uk/media/189396/combating-drug-partnerships_-002.pdf).
- 6) GOV.UK 2024, Appendix 3 – Membership of Combating Drugs Partnerships (<https://www.gov.uk/government/publications/drugs-strategy-guidance-for-local-delivery-partners/appendix-3-membership-of-combating-drugs-partnerships-accessible-version>).
- 7) GOV.UK 2025, Part 1: introducing recovery, peer support and lived experience initiatives (<https://www.gov.uk/government/publications/recovery-support-services-and-lived-experience-initiatives/part-1-introducing-recovery-peer-support-and-lived-experience-initiatives#lived-experience-recovery-organisations-principles-processes-and-networks>).
- 8) Edinburgh Alcohol and Drug Partnership 2024, Guidance on developing a Lived and Living Experience Recovery Community Panel in Edinburgh (<https://www.edinburghadp.co.uk/wp-content/uploads/2024/07/Guidance-on-developing-a-Lived-and-Living-Experience-Recovery-Community-Panel-in-Edinburgh-Jan-2024.pdf>).

About this resource

This resource has been developed by **Nexus Values**, a specialist value strategy consultancy passionate about supporting the communication of value in healthcare, as part of a pro bono collaboration through **Passion Partnership**.

