

TITLE OF REPORT: Director of Public Health Gateshead Substance Misuse Strategy

Purpose of the Report

1 To seek views from the Health & Wellbeing Board on the development of the Gateshead Substance Misuse Strategy 2016-2021.

Background

- 2 Our vision is to reduce the harms caused by substance misuse and make Gateshead a safer and healthier place where less alcohol and no substances are consumed, and where:
 - recovery is visible, bringing about enduring change to local communities
 - substances are no longer a driver of crime and disorder
 - professionals are confident and well-equipped to challenge behaviour and support change
 - there is a reduction in the health inequalities between socio-economic groups.
- 3 Gateshead currently has the 7th highest rate of alcohol related admissions to hospital in England. Though recent figures show early indications of a positive downward trend in recent years, with a rate of 927 per 100,000 in 2014/15 a decrease of 3.0% on the previous year.
- 4 However, despite this overall decrease the rate of admissions the rate for women has increased by 30.3% since 2008/09.
- 5 For young people the rate of admissions for under 18's has decreased by 54% to 58.8 per 100,000, since the 2006/07 2008/09 period. However, the rate of admissions is still significantly higher than the England value 36.6 per 100,000.
- 6 Treatment service figures show a notable shift in the main substances that people seek help for. In 2015/16 alcohol was the main reason for treatment (54.1%) compared to 53.2% in 2014/15. In 2015/16 47.1% of clients cited opiates compared to 51.6% in 14/15. 16.8% of people sought help for cannabis in 2015/16.
- 7 The number of people in treatment in Gateshead is increasing, with 1989 clients in treatment in 2015/16 compared to 1826 in 2014/15. The majority, 69.5%, are male.

8 As previously reported to the Board, there has been a spike in drug related deaths in recent years with 17 in 2015 and 15 deaths so far this year. These local figures mirror the national trend.

Proposal

9 This is the first combined strategy for several years. The strategy has joined these two issues due to the many similarities in the actions required to address this agenda. The joint approach is highlighted by the proposed shared aims and objectives below.

REDUCE DEMAND / PREVENTION ACROSS THE LIFE COURSE Aim: To ensure that a coordinated 'whole family' approach is taken for initiatives working with children, young people, working age, older people, individuals, families and communities, protecting those most affected by substance misuse.

REDUCE SUPPLY PROTECTION AND RESPONSIBILITY Aim: To ensure all sections of the trade promote responsible retailing to support a reduction in substance misuse-related harm. To mitigate the role of substance misuse in fueling Crime, Anti-Social Behaviour, Violence and Domestic Abuse.

BUILD RECOVERY / HEALTH AND WELLBEING SERVICES Aim: To ensure an evidence based 'health and wellbeing' focused prevention, treatment and recovery approach is employed to address the needs of service users and their families experiencing alcohol related issues.

- 10 Despite an integrated strategy it is acknowledged that some distinctively different approaches are also required to address drug and alcohol harm. Alcohol requires a population approach to address availability, acceptability and safer use. Substance misuse relates to a more specific client group and has a greater crime and disorder focus. This strategy has two chapters; Alcohol and Drugs, to outline the specific work relating to each area.
- 11 The strategy also identifies the need for high level, strategic action. It is proposed that the work to address these objectives and actions is led by the Health and Wellbeing Board and the Community Safety Board, and activity at both strategic and operational levels is reported at the Substance Misuse Strategy Group.

Recommendations

12 The Health and Wellbeing Board is asked to comment on the attached draft strategy. This is also to be presented to the Community Safety Board and relevant portfolio meetings.

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