

Embargo: 00:01 hrs, Thursday 26 November 2009

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Hidden cost to families of Britain's drug problem is £1.8 billion

At least 1.5 million UK adults, caring for relatives with drug problems, are bearing a huge hidden burden valued at at least £1.8 billion pounds. Their care contribution is not fully recognised and the impact on their lives can be devastating.

- Figures on the number families affected by country (England, Scotland, Wales, Northern Ireland & UK) available from 020 7812 3792

- For case studies contact UKDPC on 020 7812 3792

A new study, published by the UK Drug Policy Commission, estimates, for the first time, the price ordinary families are paying by caring for family members with drug problems – resulting in financial hardship - including debt - loss of employment, breakdown of family relationships and psychological stress.

The Commission stresses that the £1.8 billion costs, and 1.5 million adults affected, are minimum estimates and the actual values 'are likely to be far higher', because the study could only make cost estimates for those families with relatives dependent on heroin and crack. Based on this group alone the potential costs to NHS and Local Authority services - should such support not be available - is valued at £750 million.

The Commission study revealed the UK's drug problem is impacting on a minimum of:

- 610,000 parents
- 575,000 spouses
- 250,000 family members such as grandparents or siblings
- 140,000 family members (living with someone receiving treatment)

The 12-month study found that, of the 1.5 million adults, about 50,000 are living with a crack or heroin addict, 1 million will be helping a loved-one with cannabis problems and nearly 130,000 will be caring for a family member dependent on cocaine. Yet their support needs are too often overlooked.

While all the main political parties pledge more support for parents and carers, the needs of families of drug users have remained a low priority despite their positive role in reducing drug-related harms.

UKDPC Commissioner, Alan Maynard, Professor of Health Economics at the University of York and Specialist Adviser to the House of Commons Select Committee on Health - who oversaw the year long study - said: "Because of the stigma associated with drug dependency and addiction the true impact on families is hidden. This shame and distress associated with relatives' drug use exacerbates the family's stressful experience and can also hinder the useful contribution that families make to the recovery of the drug user.

Our study provides an insight into the large burdens these families face in terms of costs linked to day-to-day care, as well as costs linked to stolen money and property.

Policy needs to catch up with the realities of their life because their contribution as families is filling an important gap.”

UKDPC examined the numbers of families affected by a relative’s drug misuse because until now there has been no comprehensive effort to calculate the number of families involved or the cost saving brought about by families providing care. The report is part of a two phase study with an examination of current provision of services across the UK, and the identification of models of good practice in service provision expected in 2010. Previous research has established that families can be highly influential in helping people with drug problems achieve positive outcomes, especially when drugs users are attempting to change behaviour.

Roger Howard, Chief Executive of the UKDPC said: "Drug dependency places an intolerable strain on families as well on our health and social care system and those pressures will only soar unless we get the right services in place for these families in their own right. Our research shows families’ provide a bedrock of support, and that investment in them is likely to save the state – including the NHS and criminal justice system - money in the longer run.”

Case study

‘When things first started to go wrong with Sarah, there was no one to ask for help’

Vivienne (63) from London says her daughter’s drug misuse has had a devastating effect on her, as well as her two sons and two grandchildren. Vivienne’s daughter Sarah, 42, started taking drugs in 1992. Sarah is currently in a drug programme and receiving treatment. Vivienne has been granted Special Guardianship of Sarah’s two children – Jane 16 and Jack 11 months. She said: “The last seventeen years have been a nightmare and it is only since Sarah had Jack, now 11 months, that I’ve come realise a lot of Sarah’s behaviour was down to drugs. This is because people have sat down with me from a specialist family support group and explained how drugs affect people. Back in the 80s and 90s no one really spoke about drugs and if I knew then, what I know now, things might have been different for Sarah.”

For the research programme UKDPC brought together key national 'caring' organisations to form an Advisory Group that steered the focus of the study. Experts included: Carers UK, Princess Royal Trust for Carers, Adfam, Scottish Network of Families Affected by Drugs (SNFAD), Action on Addiction, SPODA (Derbyshire family support group) and CASA (London). This Advisory Group heard evidence from family members and worked with the devolved administrations in Scotland, NI and Wales.

Vivienne Evans, Chief Executive of Adfam, said: “We welcome this new research and its emphasis on families, as so often their supportive care - and the effects on their lives - are forgotten or ignored. We have seen some progress in national policy over the last couple of years but these new statistics should really make people stand up and take notice at a local service delivery level. We hope that this will encourage more families to access support in their own right.”

The findings come ahead of national Carers Rights Day on 4 December, organised by Carers UK.

Amongst the policy recommendations from the Commission is a call for improved leadership at national and local level to improve the coordination and integration of support available to families, so that the support needs of families, in their own right, are met.

Ends

Notes to editors

For more information including case studies and interview requests contact Victoria Silver on 020 7812 3792, 07866 757 389, vsilver@ukdpc.org.uk

1. Methodology:

The year long research study involved desk research, bringing together published research and statistics, to provide:

- Estimates of the number of family members affected by a relative's drug misuse and a model for improving and developing these estimates further;
- Estimates of the costs borne by families arising from their relative's drug misuse and of the costs that would be incurred by local authorities and health providers should family support not be available;
- A review of the literature on effective interventions to support family members in their own right and ways they can be involved in their relative's drug treatment.

2. About the researchers:

Professor Alex Copello – is a Consultant Clinical Psychologist with Birmingham and Solihull Mental Health Foundation Trust and Professor of addiction research at the University of Birmingham. He has researched extensively on the impact of addictions problems upon families and publishes regularly in academic journals

Lorna Templeton - is Research Manager at the Mental Health Research & Development Unit in Bath (Avon & Wiltshire Mental Health Partnership NHS Trust and the University of Bath) where she undertakes a programme of research focused on addiction and the family. She publishes her work widely and has recently been appointed to the Board of Trustees for Adfam.

Dr Jane Powell – Reader, Health Economics, University of West England,

3. Key research findings include:

- Families play a vital role in the resolution of addiction problems
- More focus is needed in the implementation of family interventions and services
- More training is required for staff in mainstream services so the impact of drug problems on families is understood and basic information or signposting to interventions can be provided
- Recognition of the importance/role of families is not sufficiently widespread in treatment services
- Service provision providing help for families is patchy across the UK and should be improved
- Dr Jane Powell is Reader Health Economics, Centre for Public Health Research, University of the West of England, Bristol. She is one of the editors of the textbook, 'Public Health for the 21st Century' Open University Press.

4. The Commission (UKDPC) launched in April 2007 and is due to run until December 2012. It is an independent, registered charity that provides authoritative, objective analysis of UK drug policies and encourages policy makers to adopt evidence-based drug policies. It is primarily funded by the Esmee Fairbairn Foundation.

5. The UKDPC has 12 Commissioners who bring together a broad range of expertise from the fields of drug treatment, medical research, policy and public policy and the media. For more information on the UKDPC please visit www.ukdpc.org.uk

6. Background facts:

- **The UK has the highest level of dependent drug use and the second highest level of drug related deaths in Europe**
- **The annual socio-economic cost of class A drug use in England and Wales alone has been estimated at over £15 billion**
- **The annual cost of caring generally has been estimated to be £87 billion a year (Carers UK), University of Leeds (2007)**
- The UK lacks a truly independent, objective and rigorous arena for the analysis of drug policy evidence. The Commission fills that gap and hopes thereby to improve political, media and public understanding of the options for achieving a mature, rational and effective policy responses to the problems caused by the supply and the demand for illegal drugs