



Drug & Alcohol Today 2013

Thursday 21st February marked the Drug & Alcohol Today Conference 2013. The event was held in Manchester and focussed on developments in the North of the country, with the Southern equivalent taking place in Brighton this May. As ever, ILLY Systems were at the event soaking up as much useful information as possible. We've **summarised all the talks** we attended in this document, so I hope you enjoy reading this summary of the day and that you find it useful.

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The Exhibition...

Thanks to everyone who stopped by our stand, we really learnt a lot on the day which will help us achieve our aim of making a difference in the sector.



We talked to people from a variety of different backgrounds about their involvement in drug & alcohol treatment, from prison workers to recovery champions it was great to hear your stories.

Public Health and drugs & alcohol strategies – a new dawn?

Plenary

Inevitably, one of the main talking points throughout the day was the changeover to Public Health England (PHE). The plenary brought forward many interesting points about the future of drug treatment: -

1. PHE knows about long term trends and how to affect change
2. The corporatisation of the sector is a risk for the recovery agenda as providers are starting to talk about making profit before delivering effective treatment
3. Housing and training services for drug and alcohol clients is key
4. Social networks and peer-led help will become more important
5. There is still a real risk of disinvestment as the Drug & Alcohol budget previously ring fenced by the NTA is almost a third of the entire new Public Health budget and is now one of 17 PHE responsibilities.

LINKS CarePath and LINKS Families

As well as meeting loads of interesting people, we brought with us full working versions of a couple of our case management and reporting systems. **LINKS Families**, our most recent development, is a KPI focused Case Management System enabling a collaborative approach for Troubled Families.





The importance of community assets in enabling recovery

**Debbie Nash, Strategic Manager, PHE
Finance & Commissioning**

This inspiring talk focused on the importance of using community assets to support long-term recovery. These assets are anything that enables people to recover, such as peer mentors, personal attributes and community services. By taking a 'glass half full' approach services must:

1. Focus on the individual, not the substance to avoid stereotypes and engage service users.
2. Identify drivers and secondary drivers, such as boredom, depression and isolation.
3. Accommodate and build varying strands of social, cultural, human and physical capital.

Debbie concluded the talk by focusing on how to embed community assets into commissioning. Suggestions included varied hours of access, actively listening to service users for feedback and direction, making recovery visible, achievable and celebrated and insist staff profiles include recoverees.

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Changing perceptions – Parents, Children & Alcohol

**Viv Evans, Chief Executive, Adfam
Catherine Johnson, Alcohol Concern**

There were two salient messages here. Firstly, each organisation's research highlighted how parental alcohol misuse can impinge upon a child's emotional and physical development. Importantly, this is not just about addiction but also hazardous drinking.



Secondly, for effective, long-term recovery there is a need for greater multi-agency working between substance misuse and other key partners, such as housing. **Troubled Families** is one way to address this but there is also a gap where not all of these families will have substance misuse problems and visa-versa.

The five year forecast – what lies ahead? Plenary

The recurring trend was that the move to the Mental Health and Social Wellbeing remit within PHE will likely increase the focus on social relationships and networks. The likely consequence of this is that Peer Mentoring will gain prominence and demand will increase drastically. However, there was also a palpable concern over the impact of welfare reform and reduced public spending. It is possible this may impact in several ways:

1. Housing benefit could spark major relocation as households seek to avoid debt.
2. Social stabilisers and community assets, such as children centres, libraries and others that are points of contact, are likely to be closed or digitised.
3. NHS efficiency savings will impact Drug and Alcohol services.

Other talking points were localism and whether it will remain beyond 2015; the importance of tackling stigma and how the rise of psycho-stimulants, which have strong adverse health effects, is likely to increase the focus on abstinence based treatment.