

Debate Pack

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Debate on prevention of drugs deaths

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Summary

A Westminster Hall debate has been scheduled for Thursday 27 March on the prevention of drugs deaths. The subject of this debate was chosen by the Backbench Business Committee and the debate will be opened by Jim Shannon MP.

1

Overview

A Westminster Hall debate has been scheduled for Thursday 27 March on the prevention of drugs deaths. The subject of this debate was chosen by the Backbench Business Committee and the debate will be opened by Jim Shannon MP.

This briefing provides information drug use and drug related deaths in the UK, including deaths linked to the use of new synthetic opioid drugs. It also provides background information on UK drug policy and drug treatment services.

2 Drug related mortality

2.1 Drug poisoning mortality

According to [ONS data](#), in 2023, there were 5,448 deaths related to drug poisoning registered in England and Wales. This is the highest number since records began in 1993 and an increase of 11.0% from 4,907 deaths in the previous year, 2022.

The age-standardised mortality rate of drug-poisoning deaths in 2023 (93.0 deaths per million) was twice as high as in 2012 (46.5 deaths per million) when mortality rates were at their lowest since 1994. The rate has increased every year since 2012, after remaining relatively stable over the preceding two decades.

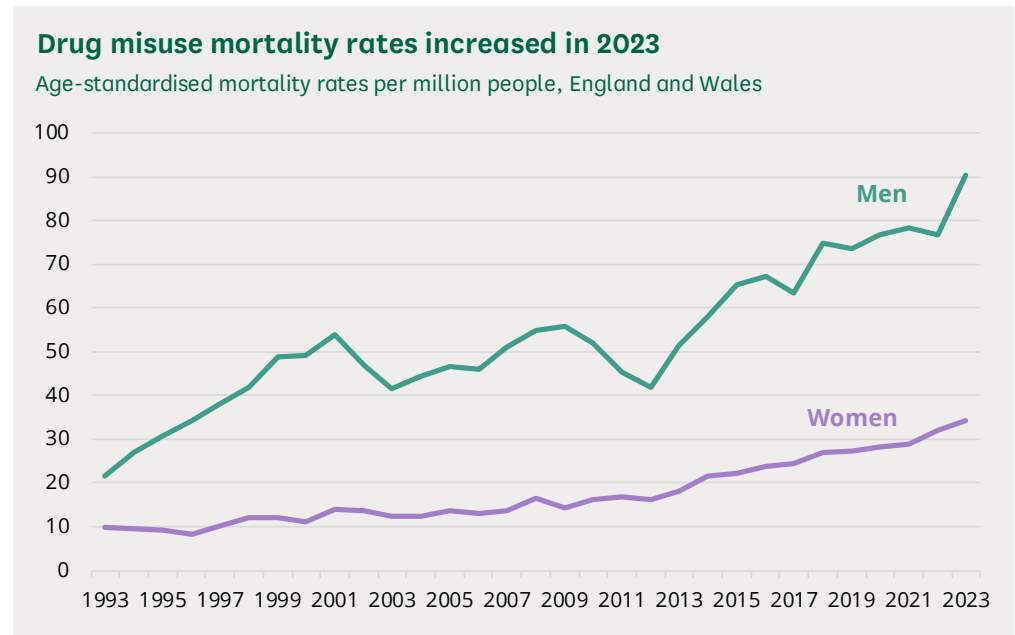
Men accounted for over two-thirds of registered drug poisonings in 2023 (3,645 compared with 1,803 women).

2.2 Drug misuse mortality

Deaths are classified as drug misuse if the underlying cause of the death is drug abuse or drug dependence and/or any of the substances involved are controlled under the [Misuse of Drugs Act 1971](#). Drug misuse deaths are therefore a subset of all drug poisoning deaths.

Because information on the specific drugs involved in a death is not always available, figures on drug misuse deaths are underestimates. The [ONS also advise](#) that the availability of information on the specific drug involved has decreased over time and therefore caution should be taken when interpreting this data.

The chart below shows trends in deaths from drug poisoning and drug misuse between 1993 and 2023.



Source: ONS, [Deaths related to drug poisoning in England and Wales: 2023 registrations](#), 23 October 2024

In 2023, 3,618 drug poisoning deaths were identified as drug misuse. This represents 66.4% of drug poisonings, or 86.1% if we exclude deaths where no information was available on the drugs involved.

In 2023, the rate of drug misuse deaths was 90.4 deaths per million in 2023 (2,586 deaths) for men and was 34.4 deaths per million (1,032 deaths) for women, or 61.8 per million people overall.

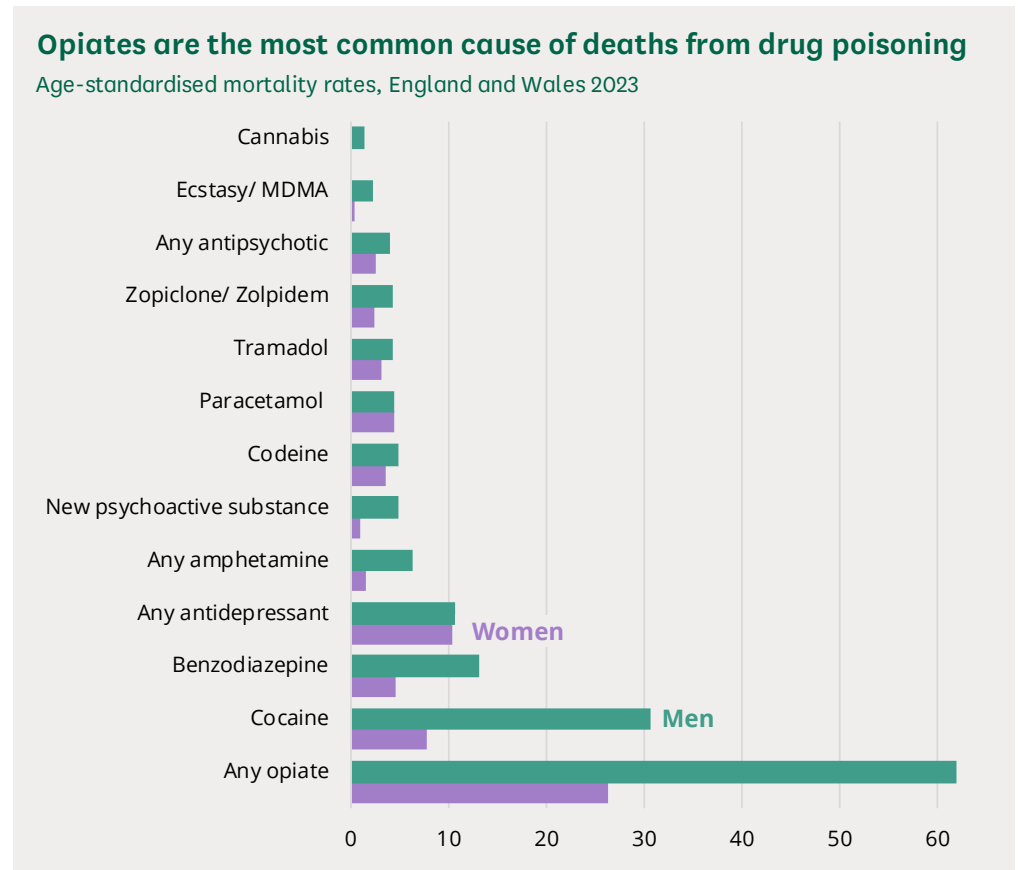
2.3

Deaths from specific substances

In 2023, almost half (46.8%) of deaths from drug poisoning involved opiates. This increases to 60.7% when deaths with no specific drug type recorded on the death certificate are excluded.

The age-standardised mortality rate for opiates was 62.0 per million for men in England and Wales in 2023. This was over twice as high as the rate for women (26.3 per million). Cocaine poisoning carried the second highest mortality rate with 30.7 deaths per million men and 7.8 per million women.

A summary of mortality by specific drugs can be found in the chart below sorted from lowest to highest mortality in men.



Source: ONS, [Deaths related to drug poisoning, England and Wales](#), Table 4, 23 October 2024

2.4 Regional disparities

In 2023, the North East of England had the highest rate of drug-poisoning mortality both among men (240.0 per million) and women (111.6 per million). Overall, lower mortality rates were observed in the South of England compared to the North and Wales, as can be seen in the table below (data is ranked from the highest male mortality rate to the lowest).

Drug poisoning mortality highest in Wales and the North of England

Age-standardised mortality rates per million, 2023

Region	Women	Men
North East	110.6	240.0
Wales	72.7	188.0
North West	84.5	179.7
Yorkshire and the Humber	81.0	158.2
South West	55.6	137.5
East Midlands	55.2	126.5
England	58.8	124.2
West Midlands	61.2	120.6
East	49.6	92.6
South East	46.2	89.4
London	34.0	83.6

Source: ONS, [Deaths related to drug poisoning in England and Wales: 2023 registrations](#), 23 October 2024

The ten local authorities in England and Wales with the highest and lowest drug poisoning mortality rates can be found in the table below. In 2023, Blaenau Gwent in Wales had the highest mortality rate at 237.5 per million population which compares to a mortality of 0.0 per million in South Oxfordshire and the City of London. Please note that these rates are not age-standardised and are therefore not strictly comparable.

Highest and lowest drug poisoning mortality by local authority per million population, England and Wales, 2023

Local authority (highest)	Mortality	Local authority (lowest)	Mortality
Blaenau Gwent	237.5	New Forest	22.8
Folkestone and Hythe	207.2	South Hams	22.0
Carmarthenshire	189.4	Eastleigh	21.3
Lincoln	183.9	Vale of White Horse	20.6
Hyndburn	178.0	Hart	19.7
Burnley	176.3	Melton	18.8
Torfaen / Tor-faen	171.3	North West Leicestershire	18.1
Gateshead	170.7	South Staffordshire	8.8
Chesterfield	162.1	City of London	0.0
St. Helens	161.3	South Oxfordshire	0.0

Note: these mortality rates are not age-standardised

Source: ONS, [Deaths related to drug poisoning by local authority, England and Wales](#), 23 October 2024; ONS, [Estimates of the population for England and Wales, Mid-2023](#), 15 July 2024

2.5

Scotland and Northern Ireland

Different levels of missing data mean that figures for drug poisoning and misuse published by the ONS for England and Wales, NRS for Scotland, and NISRA for Northern Ireland, are not directly comparable.

In 2023, there were 1,172 drug misuse deaths. This was an increase of 11.5% from 1,051 deaths in 2022.¹ At 227 per million, the age-standardised mortality rate of drug poisoning deaths in Scotland was over twice as high as that of the three other UK countries in 2022 (latest available data).

169 drug related deaths were recorded in Northern Ireland in 2023.² Similar to England and Wales, men accounted for around two thirds of drug-related deaths in Northern Ireland.

2.6

Deaths related to new synthetic opioids

There have been recent reports of increasing numbers of deaths related to synthetic opioid drugs in the UK.³ Synthetic opioids like fentanyl and nitazenes are man-made drugs that mimic the effects of natural opioids like heroin.⁴ They have similar [effects on the body](#) as other opioid drugs, but they are much stronger.⁵ A 2024 article in the Lancet reported that nitazenes can be [50 to 500 times more potent than heroin](#).⁶ Synthetic opioid drugs can be substituted for, or mixed with other drugs, increasing the risk of overdose.⁷ The government has introduced new regulations to control new synthetic opioids (see Box 1).

¹ NRS, [Drug-related deaths in Scotland in 2023](#), 20 August 2023

² NISRA, [Drug-related and drug misuse deaths in Northern Ireland, 2023](#), 5 March 2025

³ Office for Health Improvement and Disparities, [Deaths linked to potent synthetic opioids](#), 3 October 2024; Adam Holland and others, [Nitazenes – heralding a second wave for the UK drug-related death crisis?](#) The Lancet Public Health, Vol 9, No 2, February 2024; Limon K Nahar and others, [Deadly nitazenes: a 2024 update](#), British Medical Journal, Vol 387, 25 November 2024

⁴ Frank, [Synthetic opioids](#), no date, accessed 13 March 2025

⁵ Public Health Scotland, [Nitazenes alert 2023](#), 29 March 2023

⁶ Adam Holland and others, [Nitazenes – heralding a second wave for the UK drug-related death crisis?](#) The Lancet Public Health, Vol 9, No 2, February 2024, see table

⁷ Frank, [Synthetic opioids](#), no date, accessed 13 March 2025

1 New regulations to control synthetic opioids

In March 2024, the government announced that [15 new synthetic opioid drugs, including 14 nitazenes, had been categorised as Class A drugs](#) under the Misuse of Drugs Act 2001, via the [Misuse of Drugs Act 1971 \(Amendment\) Order 2024](#).

In May 2024, the government wrote to the Advisory Council on the Misuse of Drugs, the body that advises the government on drugs, to confirm that it accepted its recommendation to introduce [a generic control on nitazenes](#), based on a definition of the drug's chemical properties.

On 2 September 2024, the new government laid the [Misuse of Drugs Act 1971 \(Amendment\) \(No. 2\) Order 2024](#). Article 2(3) of this order amends the Misuse of Drugs Act 1971 to make new nitazenes (other than those already named) Class A drugs. It does this by defining the chemical properties of nitazenes, following the ACMD's advice.

It is not possible to identify deaths involving synthetic opioids from ONS data on drug-related deaths. However, the Office for Health Improvement and Disparities (OHID, part of the Department of Health and Social Care) and the National Crime Agency collect data on deaths involving nitazenes and illegally-manufactured fentanyl. In October 2024, OHID published data on deaths involving synthetic opioid drugs in England.⁸ This data shows that, as of October 2024, laboratory testing had confirmed that there were 179 deaths in involving one or more nitazenes between 1 June 2023 and 31 May 2024.⁹

⁸ Office for Health Improvement and Disparities, [Deaths linked to potent synthetic opioids](#), 3 October 2024

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3

UK drugs policy

The Library briefing [Misuse of drugs: regulation and enforcement](#) explains current UK-wide drug laws and how they are enforced.

The UK Government published a [10-year strategy](#) to reduce the harms of drug use in December 2021.¹⁰ The control of drugs under the [Misuse of Drugs Act 1971](#) is a reserved matter, but the treatment and prevention of drug problems is devolved. The devolved administrations have each published individual strategies addressing drug misuse. More information is set out below.

3.1

UK Government drug strategy

In December 2021, the UK government published [From harm to hope: a 10-year drugs plan to cut crime and save lives](#).¹¹ This document set out the government's strategy to reduce drug-related crime, death, harm and overall drug use. It set out three priorities for the government:

- Break drug supply chains, by preventing drugs from entering the UK, disrupting drug gangs' operations and tackling county lines.
- Deliver a world-class treatment and recovery system, by implementing the key recommendations of in [Dame Carol Black's independent review of drugs](#) (see Box 2): treating addiction as a chronic health condition and "rebuilding" substance misuse services and the professional workforce and supporting people receiving drug treatment to access accommodation and employment.
- Achieve a generational shift in demand for drugs, by changing attitudes and reducing the social acceptability of illegal drug use and imposing more sanctions on the possession of illegal drugs and providing education and early intervention in schools and for young people at risk of substance misuse.¹²

¹⁰ Home Office, Department of Health and Social Care, Ministry of Justice, Department for Work and Pensions, Department for Education and Department for Levelling Up, Housing and Communities, [From harm to hope: A 10-year drugs plan to cut crime and save lives](#), 29 April 2022

¹¹ Home Office, Department of Health and Social Care, Ministry of Justice, Department for Work and Pensions, Department for Education and Department for Levelling Up, Housing and Communities, [From harm to hope: A 10-year drugs plan to cut crime and save lives](#), 29 April 2022

¹² Home Office, Department of Health and Social Care, Ministry of Justice, Department for Work and Pensions, Department for Education and Department for Levelling Up, Housing and Communities, [From harm to hope: A 10-year drugs plan to cut crime and save lives](#), 29 April 2022

2 Dame Carol Black’s independent review

In 2019, Dame Carol Black was appointed to lead an [independent review of drugs in the UK](#). The review’s findings were published in two reports:

- [Phase one focused on the illicit drugs market](#), finding that drug deaths in the UK were at an all-time high and estimating the total cost of drug harms at over £19 billion.
- [Phase two focused on prevention, treatment, and recovery](#). This report made 32 recommendations to the government, including calling for increased funding for treatment and employment and housing support.

The strategy document included specific measures of success. By the end of 2024/2025, it aimed to:

- prevent almost 1,000 drug-related deaths and reverse the upward trend in drug deaths
- expand drug treatment capacity by 20%,
- close over 2,000 county lines, and
- deliver a 20% increase in “major and moderate disruptions” of the activity of organised criminals, as assessed by the National Crime Agency (comprising 6,400 disruptions).

The strategy said that an annual report would be presented to Parliament to monitor its progress.

Progress on the government’s drug strategy

The [first annual report](#) on the government’s strategy was published in February 2024, and covers the period 2022 to 2023.¹³ The report provides an update on the government’s actions and progress in relation to the aims set out in the strategy. The report does not include data on drug deaths (see chapter 3 of this briefing). It reports that, in the financial year 2022 to 2023:

- The number of adult treatment places had remained stable, while local authorities focused on recruiting staff and “building local partnerships and accountability structures”.
- There were 1,300 county lines closures.

¹³ Home Office, [From harm to hope: first annual report 2022 to 2023](#), 27 February 2024

- There were 2,974 major or moderate disruptions to organised criminals involved in drugs supply, and the government has revised and increased its target for disruption to 8,800 by 2024/2025.

Annex A of the report includes further information about the ongoing evaluation of projects funded as part of the drugs strategy, including the pilot Project ADDER (Addiction, Diversion, Disruption, Enforcement and Recovery) which aims to reduce drug-related crime, drug-related crime and drug use.¹⁴

National Audit Office report

In October 2023, the National Audit Office (NAO) published a report on [Reducing the harm from illegal drugs](#).¹⁵ The report found that progress in implementing the strategy had been mixed. It highlighted increasing numbers of county lines closed and that recruitment of new alcohol and drug workers in 2023 to 2024 had exceeded the targets set in the strategy. However, it also noted that there had been a 14% underspend of funding allocated to the strategy, because of delays in implementing projects and disbursing funding.¹⁶

The report also noted that it was difficult to assess how the strategy funding affected target outcomes. It said that the complexity of the issues involved meant that it would be “challenging to determine a causal link” between the strategy and outcomes, including numbers of drug-related deaths.¹⁷

Public Accounts Committee report

In February 2024, the Public Accounts Committee published a [report on the government’s efforts to reduce the harm from illegal drugs](#).¹⁸ The committee highlighted achievements in improving collaboration between government departments and the creation of new partnerships with local areas. It also noted that there had been progress in increasing drug worker recruitment, and in disrupting the supply of illegal drugs.¹⁹

However, the committee said that “progress towards the strategy’s aims of reducing drug use and related harms is less clear”. It said that there had been delays in allocating funding to local authorities, and a continued lack of understanding about what works to prevent people from using drugs.²⁰

¹⁴ Home Office, [From harm to hope: first annual report 2022 to 2023](#), 27 February 2024, Annex A

¹⁵ NAO, [Reducing the harm from illegal drugs](#), 20 October 2023

¹⁶ NAO, [Reducing the harm from illegal drugs – Summary](#) (PDF), 20 October 2023, p2

¹⁷ NAO, [Reducing the harm from illegal drugs – Summary](#) (PDF), 20 October 2023, p11

¹⁸ Public Accounts Committee, [Illegal drugs: Progress mixed on Government harm reduction efforts. PAC report finds](#), 9 February 2024

¹⁹ Public Accounts Committee, [Reducing the harm from illegal drugs – Report Summary](#), 9 February 2024

²⁰ Public Accounts Committee, [Reducing the harm from illegal drugs – Report Summary](#), 9 February 2024

The committee also stated that the government's decision to only provide funding until 2024-25 was "creating uncertainty that could hinder its own strategy."²¹

3.2 Drug strategies in Scotland, Wales and Northern Ireland

The devolved administrations in Scotland, Wales and Northern Ireland have published their own policies on their approaches to reducing drug-related harms.

Scotland

In January 2021, the Scottish Government launched a [national drugs mission](#) to reduce drug related deaths and harms, along with £250 million of funding to cover the period 2021 to 2026.²² This was followed in August 2022 by a detailed strategy document, [National Drugs Mission Plan: 2022 to 2026](#), which set out a vision and priorities to reduce drug deaths and harm. The plan sets out the Scottish Government's vision:

Scotland is a country where "we live long, healthy and active lives regardless of where we come from" and where individuals, families and communities:

- have the right to health and life – free from the harms of alcohol and drugs;
- are treated with dignity and respect;
- are fully supported within communities to find their own type of recovery.²³

The mission plan sets out the outcomes that underpin the design and delivery of its work, and a range of actions to support these.²⁴ They include the development of evidence-based approaches to prevention and the introduction of harm reduction measures, including increasing the availability of naloxone (a medicine that can reverse the effects of opioid overdose) and the introduction of safe drug consumption facilities. The plan also says that people should have access to high quality drug treatment and recovery services, supported by the roll-out of Medication Assisted Treatment (MAT) Standards (see Box 3) and more residential rehabilitation places. Finally, the plan sets out plans to improve quality of life by addressing housing, mental

²¹ Public Accounts Committee, [Reducing the harm from illegal drugs](#) (PDF), 24 January 2024, pg6

²² Scottish Government, [National mission on drugs](#), no date, accessed 20 March 2024

²³ Scottish Government, [National Drugs Mission Plan: 2022-2026: 2. Vision](#), 9 August 2022

²⁴ Scottish Government, [National Drugs Mission Plan: 2022-2026: 5. National Mission: An outcomes focussed approach](#), 9 August 2022

health, physical health and justice issues, and plans to support children, families and communities that are affected by substance use.

1 Medication Assisted Treatment (MAT) Standards

MAT is the use of [medication, alongside psychological and social support](#), in the treatment of people who are experiencing problem drug use, especially involving opioid drugs.

The Scottish Government says that the MAT standards are “[evidence based standards](#) to enable the consistent delivery of safe, accessible, high-quality drug treatment across Scotland”.

There are [ten MAT standards](#) that together focus on improving access to, and supporting people to remain in drug treatment therapy.

The standards apply to all services and organisations involved in drug treatment and recovery in Scotland. Data published by Public Health Scotland shows that [MAT standards 1-5 were assessed as “fully implemented” in 90% of Alcohol and Drug Partnership areas](#) by April 2024.

Policy paper: A caring, compassionate and human rights informed drug policy for Scotland

In July 2023, the Scottish Government published “[A caring, compassionate and human rights informed drug policy for Scotland](#)”. This policy paper set out what it described as a “progressive, evidence-based drugs policy [...] with public health and the reduction of harm as its underlying principles.”²⁵ It also stressed that the Scottish Government lacked the legislative powers to enact such a policy:

This paper outlines what a progressive, evidence-based policy would look like. The legislative powers to achieve this are not currently devolved to Scotland, but there are different routes to delivering the changes we call for: they could be implemented by the Scottish Government through a Section 30 order and the devolution of specific powers to Holyrood (including the Misuse of Drugs Act 1971); or through wider constitutional changes such as Scottish independence. The simplest and quickest way for these policies to be enacted, however, would be for the UK Government to use its existing powers to change its drug laws.²⁶

The paper sets out several proposals that would require reform of UK-wide drug laws, including reviewing the current drug classification system, introducing a statutory framework for the operation of supervised drug

²⁵ Scottish Government, [A caring, compassionate and human rights informed drug policy for Scotland - gov.scot \(www.gov.scot\)](#), July 2023, p1

²⁶ Scottish Government, [A caring, compassionate and human rights informed drug policy for Scotland - gov.scot \(www.gov.scot\)](#), July 2023, p1

consumption facilities, and establishing a drug checking network to check the purity of substances.²⁷

The paper also proposes “decriminalising drugs for personal use” which, it says, would “help and support people rather than criminalise and stigmatise them; freeing individuals from the fear of accessing treatment and support, reducing drug related harms and, ultimately, improving lives”.²⁸

An article in the British Medical Journal noted that the measures were “quickly rejected” by the main political parties in Westminster:

A spokesman for Rishi Sunak, prime minister, said that there were no plans to alter the tough stance on illegal drugs, and Labour’s shadow chancellor, Rachel Reeves, said that the party would not back the proposals.²⁹

There was some support for the policy paper. The UK Faculty of Public Health described the Scottish government’s paper as a “sensible, evidence based approach to drug policy”.³⁰ The International Drug Policy Consortium also published a supportive statement, welcoming the proposals in the report.³¹

Wales

The Welsh Government published a [Substance misuse delivery plan: 2019 to 2022](#) in October 2019.³² This plan was subsequently updated in response to the effects of the covid-19 pandemic, and a revised plan was published in January 2021.³³ The plans set out the Welsh Government’s vision to reduce the harms of substance misuse for individuals and communities in Wales:

Our vision is that everyone in Wales should have longer, healthier lives, free from the potential harms of substance misuse, building personal resilience so they can be active and contribute positively to their communities.³⁴

The strategy outlines a harm reduction approach, to reduce the risks associated with drug and alcohol use and misuse. It sets out fifteen outcomes and specific actions to achieve these. These include actions to help people make informed choices about substance use, to improve the mental and

²⁷ Scottish Government, [A caring, compassionate and human rights informed drug policy for Scotland - gov.scot \(www.gov.scot\)](#), July 2023, p7-8

²⁸ Scottish Government, [A caring, compassionate and human rights informed drug policy for Scotland - gov.scot \(www.gov.scot\)](#), July 2023, p7-8

²⁹ [UK rejects Scottish government’s plan to decriminalise drugs | The BMJ](#), 10 July 2023

³⁰ [UK rejects Scottish government’s plan to decriminalise drugs | The BMJ](#), 10 July 2023

³¹ International Drug Policy Consortium, [IDPC joins NGO coalition’s response to Scottish Government’s report on drug policy reform](#), 7 July 2023

³² Welsh Government, [Substance misuse delivery plan 2019 to 2022](#), 23 October 2019

³³ Welsh Government, [Substance Misuse Delivery Plan 2019-2022, Revised in response to COVID-19](#), 28 January 2021

³⁴ Welsh Government, [Substance misuse delivery plan 2019 to 2022](#), 23 October 2019, p5

physical health of people with substance misuse issues, and to ensure people can access safe and effective health services.³⁵

The plan also identifies a series of priority actions. These include responding to mental health problems that affect people with substance misuse issues, working with housing and homelessness services, addressing substance misuse in prisons, supporting families and carers and improving access to services and treatment.³⁶

The 2021 update to the plan included a set of new actions to be taken in response to the pandemic. These included updating the Welsh Government's [DAN 24/7 website](#), which provides information and a helpline about drugs, monitoring drug-related deaths data throughout the pandemic, and providing additional support for people affected by short-term unemployed people with mental health or substance misuse issues.³⁷

Northern Ireland

In Northern Ireland, the Department of Health published its substance use strategy, [Preventing Harm, Empowering Recovery](#) in September 2021.³⁸ The strategy covers the period 2021 to 2031 and sets out a vision for the prevention and reduction of harm:

People in Northern Ireland are supported in the prevention and reduction of harm and stigma related to the use of alcohol and other drugs, have access to high quality treatment and support services, and will be empowered to maintain recovery.³⁹

The strategy sets out five overall outcomes related to improving services and reducing harms associated with substance use:

1. Through prevention and reduced availability of substances, fewer people will be at risk of harm from the use of alcohol and other drugs.
2. There will be a reduction in the harms caused by substance use.
3. People will have access to high quality treatment and support services.
4. People will be empowered and supported on their recovery journey.

³⁵ Welsh Government, [Substance misuse delivery plan 2019 to 2022](#), 23 October 2019, p16-39

³⁶ Welsh Government, [Substance misuse delivery plan 2019 to 2022](#), 23 October 2019, p12-15

³⁷ Welsh Government, [Substance Misuse Delivery Plan 2019-2022, Revised in response to COVID-19](#), 28 January 2021

³⁸ Department of Health, [Preventing Harm, Empowering Recovery – Substance Use Strategy](#), 7 September 2021

³⁹ Department of Health, [Preventing Harm, Empowering Recovery – Substance Use Strategy](#), 7 September 2021, p25

5. Effective implementation and governance, workforce development and evaluation and research will support the reduction of substance-related harm.⁴⁰

The strategy goes on to set out specific actions to support each of these outcomes.

In addition, in November 2024, the Northern Ireland Health Minister launched a new strategic plan for the provision of substance misuse services.⁴¹ The [Substance Use Strategic Commissioning and Implementation Plan](#) covers the period 2024 to 2028, and sets out underpinning principles and eight priorities for commissioning to support the delivery of the overall substance use strategy.⁴²

⁴⁰ Department of Health, [Preventing Harm, Empowering Recovery – Substance Use Strategy](#), 7 September 2021, p25

⁴¹ Department of Health, [Strategic plan for provision of substance use services launched](#), 26 November 2024

⁴² Department of Health, [Substance use strategic commissioning and implementation plan 2024-2028](#) (PDF), 26 November 2024

4 Drug treatment services

4.1 Delivery of health aspects of drug policy

The [Office for Health Improvement and Disparities](#) (OHID), part of the Department of Health and Social Care (DHSC), is responsible for the development and implementation of policy on drugs and other risk factors for ill-health.

[Local authorities \(upper tier and unitary\)](#) are responsible for commissioning drug and alcohol treatment recovery services as part of their public health responsibilities.

OHID guidance for local authorities on alcohol and drug treatment and recovery systems was published in August 2022 in the form of a national commissioning quality standard (NQS).⁴³ [The commissioning quality standard: alcohol and drug treatment and recovery guidance](#) provides a framework for commissioning harm reduction, treatment and recovery services for local commissioning partnerships.

In July 2024, DHSC and NHS England published a [10-year strategic plan for the drug and alcohol treatment and recovery workforce \(2024-2034\)](#) (pdf). The plan covers the workforce for drug and alcohol treatment and recovery services commissioned by local authorities, residential rehabilitation services and in-patient detoxification services. It sets out priorities to reform, recruit, and train, develop and retain the workforce, and includes a roadmap for delivery.⁴⁴

Further guidance for local partnerships to review their [processes for preventing drug and alcohol deaths](#) to prevent future deaths was published by the OHID in September 2024.

Funding for drug treatment and recovery services

Funding for drug and alcohol treatment services is provided through the [public health grant](#). In February 2023, OHID published information about [extra funding for drug and alcohol treatment to cover the period 2023 to 2025](#). This included additional ring-fenced funding of £154.3 million for local

⁴³ This followed a recommendation in [Dame Carol Black's Review of drugs: phase two report](#), July 2021, that the Department of Health and Social Care develop a national commissioning quality standard for local authorities. The commissioning guidance applies to local authorities in England.

⁴⁴ DHSC, [10-year strategic plan for the drug and alcohol treatment and recovery workforce \(2024-2034\)](#) (PDF), July 2024, at p26.

authorities to improve their treatment and recovery services as part of the cross-government [From harm to hope, 10-year drugs strategy](#).⁴⁵

In December 2024, the Ministry of Housing, Communities and Local Government announced £58.7 million of funding for the [Rough Sleeping Drug and Alcohol Treatment Grant](#) for 2025 to 2026. In the same month, the government said that DHSC had allocated local authorities £267 million to [improve the quality and capacity of drug and alcohol treatment and recovery services](#) and £105 million to improve treatment pathways and recovery, housing and employment schemes. It also confirmed that it would contact each local authority to provide indicative allocations for 2025/2026 to help increase certainty about future funding.⁴⁶

Sources of help and advice

The NHS page [Drug addiction: getting help](#) provides information on getting treatment for drug addiction, including from your GP or a local drug service.

[Talk to FRANK](#) is the government's drug information and advice service. It aims to reduce drug misuse and its harms by increasing awareness.

⁴⁵ Policy paper: [From harm to hope: A 10-year drugs plan to cut crime and save lives](#), 21 December 2021, gov.uk

⁴⁶ [PQ 18284 \[on Alcoholism and Drugs: Rehabilitation\] 11 December 2024](#)

5

Parliamentary material

Commons Urgent Question - [Drones: High-security Prisons](#)

HC Deb 14 January 2025 | Vol 760 cc165-171

- [Alcoholic Drinks and Drugs: Misuse](#)

Asked by: Dhesi, Mr Tanmanjeet Singh

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to raise awareness of the harms of (a) drug and (b) alcohol misuse.

Answering member: Andrew Gwynne | Department: Department of Health and Social Care

Drug-related deaths are tragically at record highs, especially in deprived areas. We are committed to tackling this problem through working across health, policing, and wider public services. For example, we recently took legislative action to expand access to naloxone, meaning more services and professionals are able to supply this life-saving opioid overdose antidote medication.

In addition to the Public Health Grant, the Department allocated local authorities £267 million in 2024/25 to improve the quality and capacity of drug and alcohol treatment and recovery. An additional £105 million from the Department of Health and Social Care, the Department for Work and Pensions, and the Ministry of Housing, Communities and Local Government is improving treatment pathways and recovery, housing, and employment outcomes for people affected by drug and alcohol use. Future targeted funding for drug and alcohol treatment services beyond 2025 will be announced very shortly.

Alcohol-specific deaths are also at the highest rates on record, having increased dramatically during the pandemic. Through our mission-driven Government, we will prioritise actions targeted at reversing this trend. As part of the NHS Long Term Plan, over £30 million of national funding has been invested between 2019 and 2025, on an ambitious programme to establish new, or optimise existing, Alcohol Care Teams (ACTs) in the 25% hospitals with the highest need, which is 47 out of 188 eligible sites in England. ACTs identify people in hospital whose ill health is related to alcohol use, commence treatment for alcohol dependence, and refer to community alcohol treatment on discharge.

The Office for Health Improvement and Disparities (OHID) has an action plan to reduce drug and alcohol-related deaths. In light of the recent data, this

plan will be reviewed to ensure that it is grounded in the latest understanding of the drivers of drug and alcohol related deaths, and is responding to these. In addition, earlier this year the Department published guidance for local authorities and their partnerships on how to review adult drug and alcohol-related deaths and near-fatal overdoses to prevent future deaths. This is available at the following link:

<https://www.gov.uk/government/publications/preventing-drug-and-alcohol-deaths-partnership-review-process>

Through our Health Mission, the Government has committed to prioritising preventative public health measures to support people to live longer, healthier lives. The Department will continue to work across Government to understand how best to reduce alcohol-related harms. The OHID, with the support of partners from the devolved administrations, has developed the first ever United Kingdom clinical guidelines on alcohol treatment, which are expected to be published in the coming months. The aim of the guidelines is to promote and support good practice and improve quality of service provision, resulting in better outcomes.

Education on drug use is an essential part of harm reduction and prevention and is a statutory component of relationship, sex, and health education in England. Lesson plans and other resources to support teachers are being updated, and there will be increased emphasis on the risks of synthetic drugs. The Department has worked with the Personal, Social, Health and Economic Education Association to develop the lesson plans on alcohol and drugs, and has commissioned an update of the resources to be published later this year. The Government also has an alcohol and drug information and advice service called Talk to FRANK, which aims to reduce alcohol and drug use and its harms by providing information and increasing awareness for young people, parents, and concerned others. Further information on Talk to FRANK is available at the following link:

<https://www.talktofrank.com/>

HC Deb 11 December 2024 | PQ 18172

Drugs: Death

Asked by: Lord Kamall

To ask His Majesty's Government what assessment they have made of the success of projects arising from the Reducing Drug Deaths Innovation Challenge; and what plans they have to continue or expand upon these projects.

Answering member: Lord Vallance of Balham | Department: Department for Science, Innovation and Technology

The Reducing Drug Deaths Innovation Challenge funded eleven technologies in its first phase, all of which were completed successfully. Seven projects secured phase 2 funding to advance development of their technologies through testing with relevant populations. The UK Government's Office for Life Sciences, in collaboration with the Chief Scientist Office in Scotland, is monitoring the progress of these projects and will provide guidance to support commercialisation, spread and UK-wide adoption of the technologies to prevent drug overdose deaths. Future funding and initiatives through the Addiction Healthcare Goals programme are being explored to further encourage innovative research and the development of novel technologies to treat drug and alcohol addictions.

HL Deb 10 December 2024 | PQ HL2915

Alcoholism and Drugs: Death

Asked by: Davies, Paul

To ask the Secretary of State for Health and Social Care, what steps his Department is taking to reduce death rates from (a) alcohol, (b) drugs and (c) suicide in (a) the North and (b) coastal regions.

Answering member: Andrew Gwynne | Department: Department of Health and Social Care

A vital part of delivering the Health Mission shift to prevention will be action to reduce the number of deaths due to alcohol and drug use, especially in deprived areas. In England, rates of drug poisoning and drug misuse deaths have a marked north-south divide, with the North East of England having consistently seen the highest rate of drug and alcohol deaths over the previous decade.

The Department is continuing to invest in improvements to local drug and alcohol treatment and recovery services to ensure that those in need can access high quality help and support. The Office for Health Improvement and Disparities has an action plan to reduce drug and alcohol-related deaths, which is being reviewed in light of the recent Office of National Statistics data, to ensure that it is grounded in the latest understanding of the drivers of drug and alcohol related deaths, and is responding to these. Additionally, the Office for Health Improvement and Disparities has published Commissioning quality standard: alcohol and drug services, which provides guidance for local authorities to support them in commissioning effective alcohol and drug treatment and recovery services in their areas. Further information on the guidance is available at the following link:

<https://www.gov.uk/government/publications/commissioning-quality-standard-alcohol-and-drug-services>

The Department continues to work with all local areas to address unmet need and drug and alcohol misuse deaths, and to drive improvements in the continuity of care. This includes the Unmet Need Toolkit which can be used by local areas to assess local need and the causes of mortality, in order to plan to meet it.

Earlier this year the Department published guidance for local authorities and their partnerships on how to review adult drug and alcohol-related deaths and near-fatal overdoses to prevent future deaths. This is available at the following link:

<https://www.gov.uk/government/publications/preventing-drug-and-alcohol-deaths-partnership-review-process/preventing-drug-and-alcohol-deaths-partnership-review-process>

It also published guidance on incident planning and preparedness for the emerging threat of potent synthetic opioids.

As part of the NHS Long Term Plan, over £30 million of national funding has been invested between 2019 and 2025, on an ambitious programme to establish new, or optimise existing, Alcohol Care Teams (ACTs) in the 25% hospitals with the highest need, which is 47 out of 188 eligible sites in England. The ACTs identify people in hospital whose ill health is related to alcohol use, commence treatment for alcohol dependence, and refer to community alcohol treatment on discharge.

The Government has committed to tackling suicide as one of the biggest killers in this country. The 8,500 new mental health workers we will recruit will be specially trained to support people at risk to reduce the lives lost to suicide. The Suicide Prevention Strategy for England, published in September 2023, identifies a number of targeted actions at a national level. We are exploring opportunities to go further.

79 organisations have been allocated funding up to March 2025 from the £10 million Suicide Prevention Grant Fund and are delivering a broad and diverse range of activity that will prevent suicides and save lives including in the North and in coastal areas. Organisations benefitting include Lancaster Men's Hub, Stockton and District Advice and Information Service, and Cornwall Neighbourhoods for Change Ltd.

HC Deb 09 December 2024 | PQ 17439

Lords exchange of questions - [Drug-related Deaths in England and Wales](#)

HL Deb 26 November 2024 | Vol 841 cc593-595

Drugs: Death

Asked by: Rosindell, Andrew

To ask the Secretary of State for the Home Department, what steps she is taking to help reduce the number of drug-related deaths.

Answering member: Dame Diana Johnson | Department: Home Office

Drug-related deaths are tragically at record highs and this government is committed to gripping this problem.

The Department for Health and Social Care (DHSC) is actively working to reduce the number of drug-related deaths and has invested an additional £267 million in drug and alcohol treatment this year, improving the quality and capacity of drug and alcohol treatment services in England.

This is supporting delivery of a national action plan to prevent a greater number of drug and alcohol-related deaths. The plan has five priorities around improving: treatment practice; local systems; toxicology and surveillance; stigma; and poly-drug and alcohol use. Guidance was published in September 2024 [Preventing drug and alcohol deaths: partnership review process - GOV.UK](#) to help local partnerships set up and evaluate their review processes for drug-related deaths, alcohol-related deaths and near-fatal overdoses.

Alongside this, the Home Office is providing funding to law enforcement partners to target the organised crime groups and county lines gangs supplying harmful drugs to our streets.

A further part of our response is addressing the threat from synthetic drugs, including synthetic opioids like nitazenes, as well as synthetic cannabinoids and benzodiazepines, which have been linked to drug related deaths in the UK. The Home Office, DHSC, National Crime Agency, Border Force and the National Police Chiefs Council are working with local partners to proactively monitor the situation, tracking drug related deaths and other intelligence to ensure a quick response to respond to the threat as required. This includes expanding access to naloxone, a life-saving medicine that reverses the effects of an opioid overdose, including synthetic opioids.

Through our mission-driven government, we will continue to work with partners across health, policing, devolved governments and wider public services to coordinate and drive down drug use and build a fairer Britain for all.

HC Deb 05 November 2024 | PQ 11239

Drugs: Scotland

Asked by: McDougall, Blair

To ask the Secretary of State for Health and Social Care, what steps he is taking with the Scottish Government to (a) improve drug addiction treatments and (b) reduce drug-related deaths.

Answering member: Andrew Gwynne | Department: Department of Health and Social Care

As health is a devolved matter, each administration of the United Kingdom takes its own decisions on the provision of treatment and other action to address drug related deaths. Nonetheless, it is important that the four nations work together and share learning to tackle the health harms that drugs pose.

The Department has been working closely with the Scottish Government and the other devolved administrations to expand access to naloxone, a life-saving medicine that reverses the effects of an opioid overdose. The Government laid UK-wide legislation on 29 July 2024, which, subject to passage through Parliament, will enable more services and organisations to provide take-home supplies of naloxone without a prescription. These changes will make it easier for naloxone to be given to a family member or friend of a person who is known to be using opiates, and to professionals working with people who use these drugs, to save lives in the event of an overdose.

We will continue to work together with the Scottish Government and agencies such as Public Health Scotland, to monitor emerging threats posed by drugs, share learning between nations, and prevent drug related deaths across the UK.

HC Deb 05 September 2024 | PQ 3375

Drugs: Misuse

Asked by: Maskell, Rachael

To ask the Secretary of State for Health and Social Care, what steps he plans to take to reduce the number of illicit drug deaths.

Answering member: Andrew Gwynne | Department: Department of Health and Social Care

The Department is actively working to reduce the number of drug-related deaths, investing over £300 million into drug and alcohol treatment this year, which will help prevent drug-related harm and save lives. This includes funding over 50,000 additional treatment places, which we know protects against drug deaths.

We are working to expand access to naloxone, a life-saving medicine that reverses the effects of an opioid overdose. The Government laid legislation on 29 July 2024, which, subject to passage through Parliament, will enable more services and organisations to provide take-home supplies of naloxone without a prescription. These changes will mean naloxone can be given to a family member or friend of a person who is known to be using opiates, and to professionals working with people who use these drugs, to save lives in the event of an overdose.

The Office for Health Improvement and Disparities has an action plan to prevent a greater number of drug and alcohol-related deaths. The plan has five priorities around improving: treatment practice; local systems; toxicology and surveillance; stigma; and poly-drug and alcohol use. Some specific elements include improving the integration of treatment services with mental and physical healthcare, expanded specialist inpatient detoxification, and guidance on drug and alcohol death review processes.

The Office for Life Sciences is also running a £5 million fund to tackle fatal drug deaths across the United Kingdom, which is investing in research projects that are developing technologies aimed at improving detection, response, or intervention in potential drug-related deaths. Further information on this fund is available at the following link:

<https://www.gov.uk/government/news/5-million-fund-to-tackle-fatal-drug-deaths-across-the-uk>

HC Deb 01 August 2024 | PQ 1948

Nitazenes: Misuse

Asked by: Maskell, Rachael

To ask the Secretary of State for the Home Department, what steps she is taking to (a) tackle the use of nitazenes and (b) help ensure that drug users **are safe in the context of trends in the use of those drugs.**

Answering member: Dame Diana Johnson | Department: Home Office

A cross-Government taskforce is co-ordinating the response to the risk synthetic opioids, including nitazenes, pose to the UK. The Taskforce includes officials from the Home Office, Department for Health and Social Care, National Crime Agency, National Police Chiefs' Council and Border Force. Additionally, the NCA, working closely with policing, Border Force and international partners is ensuring that all lines of enquiry are prioritised and vigorously pursued to stem any supply of nitazenes to and within the UK.

High quality drug treatment and recovery services are crucial to the response. Across England, there has been investment in drug treatment and recovery services working to prevent drug-related deaths and harms.

In line with recent advice from the Advisory Council on the Misuse of Drugs, the Government intends to control a group of harmful nitazenes as Class A drugs via a generic definition under the Misuse of Drugs Act 1971, subject to parliamentary approval. The generic definition will control more nitazenes than current legislation does, reducing the opportunity for criminals to circumvent sanctions under the 1971 Act. We will be laying these amendments as a matter of urgency.

The UK's early warning and surveillance system has been enhanced and captures multiple sets of data including ambulance data, post-mortem toxicology, drug seizures and wastewater analysis among other sources. Findings will be shared with law enforcement and public health agencies, at national and local level, meaning that rapid action can be taken in communities where harmful substances such as nitazenes are detected.

We are also working with the NPCC to expand provision of the lifesaving opioid antidote naloxone to police forces to reduce the risk of death from an opioid overdose.

HC Deb 30 July 2024 | PQ 983

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News

Pharmacy Magazine

20 January 2025

[Coroner presses Government for drug-related death solutions after overdose case](#)

Glasgow City Council press release

January 2025

[Glasgow opens UK's first safer drug consumption facility](#)

Social Market Foundation

11 December 2024

[Turning the tide on nitazenes and other dangerous drugs](#)

Guardian

27 October 2024

[Change drug policy or risk more poisoning deaths, UK government warned](#)

Association of Directors of Public Health statement

24 October 2024

[Rise in drug-related deaths](#)

Pharmacy Magazine

24 October 2024

[Drug deaths on the rise in England and Wales – nearly half involved an opiate](#)

BBC News Online

23 October 2024

[Cocaine use fuels record high in drug deaths](#)

Department of Health and Social Care press release

18 October 2024

[Virtual reality and wearable technology pilot to cut drug deaths](#)

The Lancet Public Health

Vol 9 Issue 2, February 2024

[Nitazenes—heralding a second wave for the UK drug-related death crisis?](#)

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