

'Putting Full Recovery First'

Views of UK service users and providers

In 2010, the Coalition Government released its new Drug Strategy, with a focus on 'recovery'. In March 2012, the Government issued a new document entitled 'Putting Full Recovery First'. This is described in the document as: '...the Government's roadmap for building a new treatment system based on recovery'.

The Home Office describes it as the 'Recovery Roadmap'.

A survey of over 500 UK drug service users and providers by the UK Harm Reduction Alliance, the National Users Network and the UK Recovery Federation shows:

- Lack of consultation on Coalition Government's 'Recovery Roadmap'
- Disagreement with the Government that Payment by Results (PbR) and the Recovery Roadmap will mean better value for money; and a fear about cuts in funding for drug services
- Disagreement with Coalition's focus on removing people from Opioid Substitution Therapy (e.g. methadone) and fear about harm to people currently benefitting from substitute medications
- Lack of trust in Coalition's ability to deliver on reducing drug related deaths, blood borne viruses (including HIV), and on improving outcomes for people experiencing drug dependence problems

The results are summarised below – the full results are available at <http://tinyurl.com/bvd3ef3>

Respondents

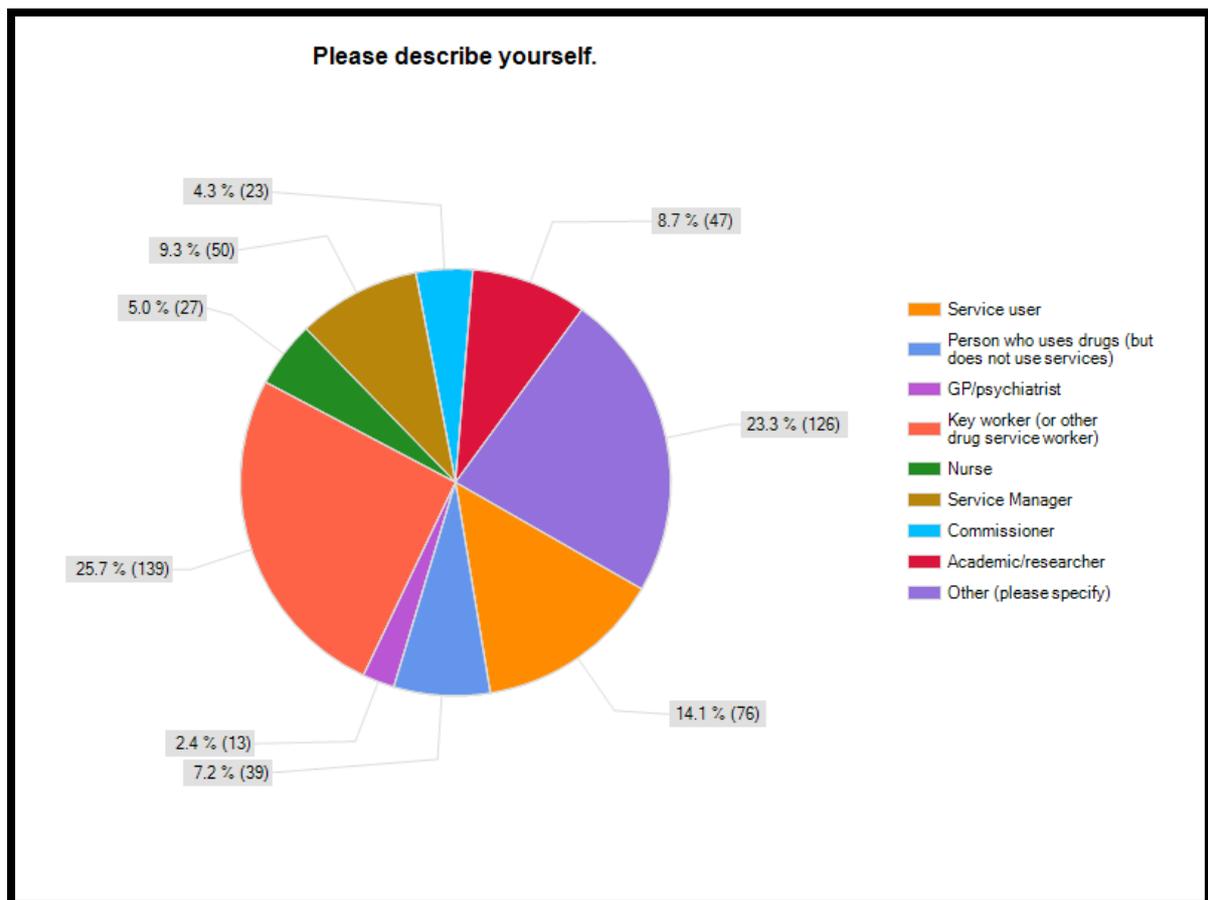
The survey was distributed through UK harm reduction and recovery networks, websites, and social media and advertised on DrugScope's news alert, 'DS Daily'.

540 people took the survey – 396 completed all questions.

Respondents included 126 key workers, 50 service managers and 115 people who use drugs - either in services (76) or not currently using services (39).

67% of all respondents were aware of the Recovery Roadmap document and 64% understood it to be an official government policy document.

92%, however, were neither aware of nor consulted in consultations for its preparation.

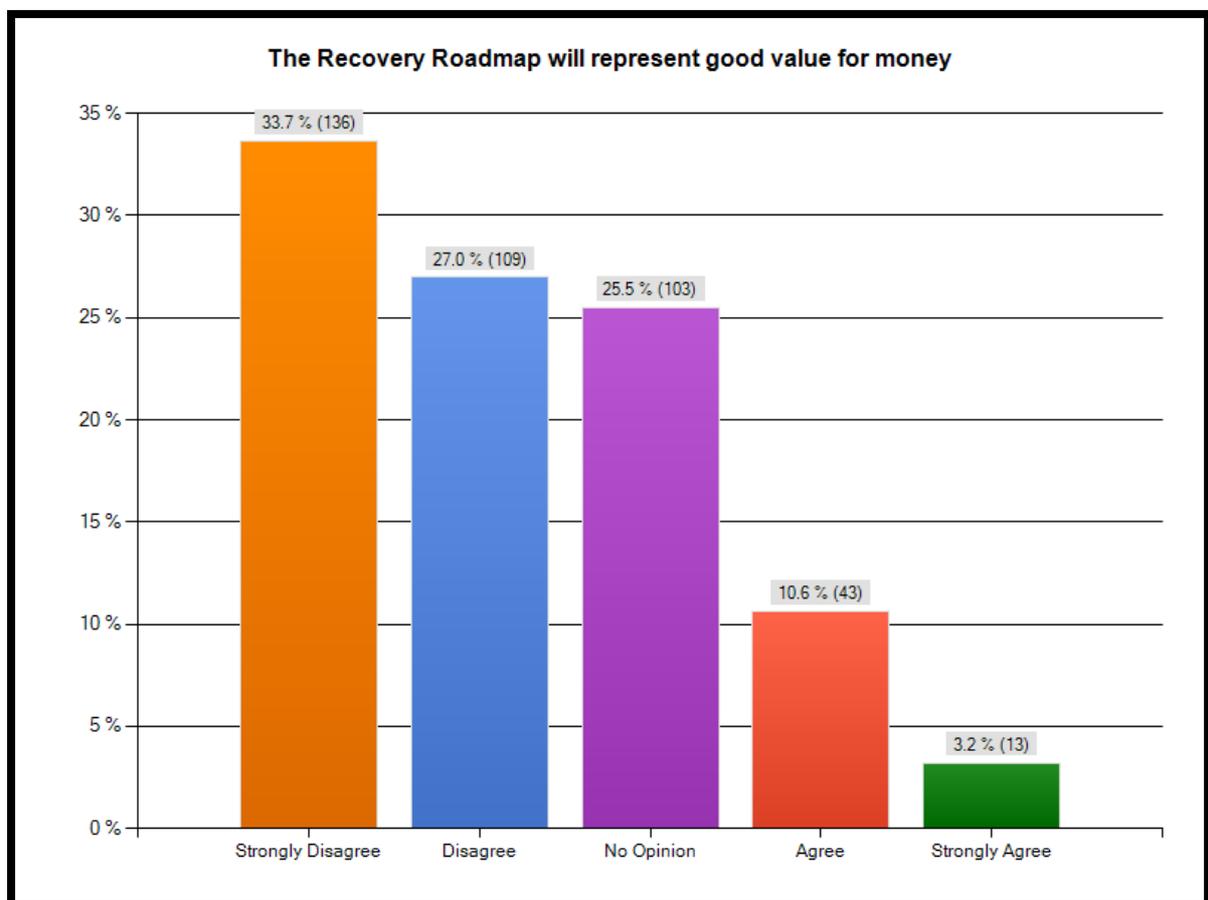


Disagreement with the Government that Payment by Results (PbR) and the Recovery Roadmap will mean better value for money; and a fear about cuts in funding for drug services

40% of respondents agreed that there had been too much 'waste' in the delivery of drug treatment services in the past. 48%, however, disagreed with this.

In addition, over 60% felt the Recovery Roadmap would not represent good value for money and almost 70% (69.3%) did not see Payment by Results as delivering 'clear value for public money' in drug services.

73% believed the Coalition's approach would lead to cuts in funding for services while almost 75% had already witnessed cuts.



Disagreement with Coalition’s focus on removing people from Opioid Substitution Therapy (e.g. methadone) and fear about harm to people currently benefitting from substitute medications

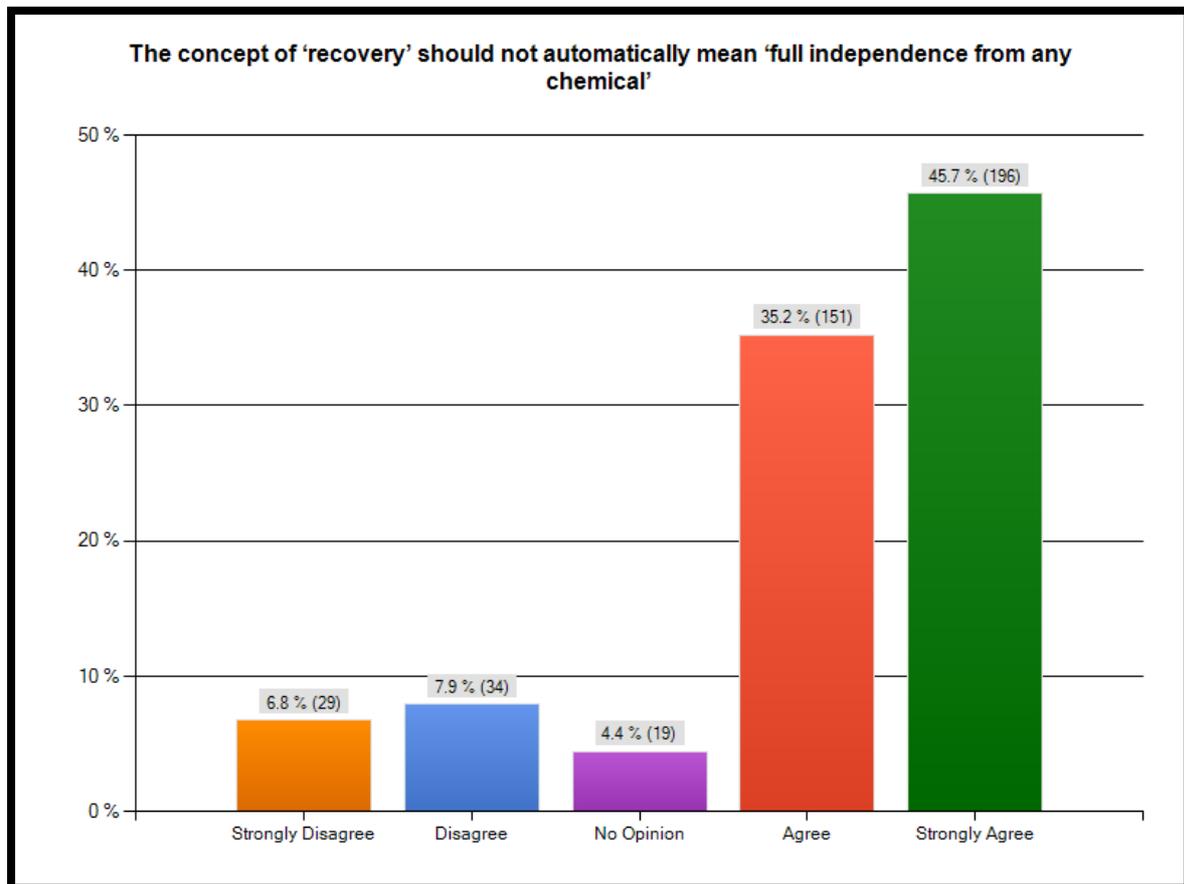
According to the Recovery Roadmap there is a need to ‘bring an urgent end to the current drift of far too many people into indefinite maintenance, which is a replacement of one dependency with another’. Over 50% of respondents disagreed with this statement while 43.5% agreed.

Despite this apparent split in opinion, over 80% disagreed with the Government that ‘recovery’ should mean abstinence from ‘any chemical’ including prescribed substitution medications such as methadone.

Over 80% also disagreed that this concept of ‘recovery’ should form the basis of Payment by Results as stated in the Recovery Roadmap.

Almost 65% felt the Roadmap would have a negative impact on people receiving OST medications.

Less than 10% saw the Recovery Roadmap as being based on the best scientific evidence.



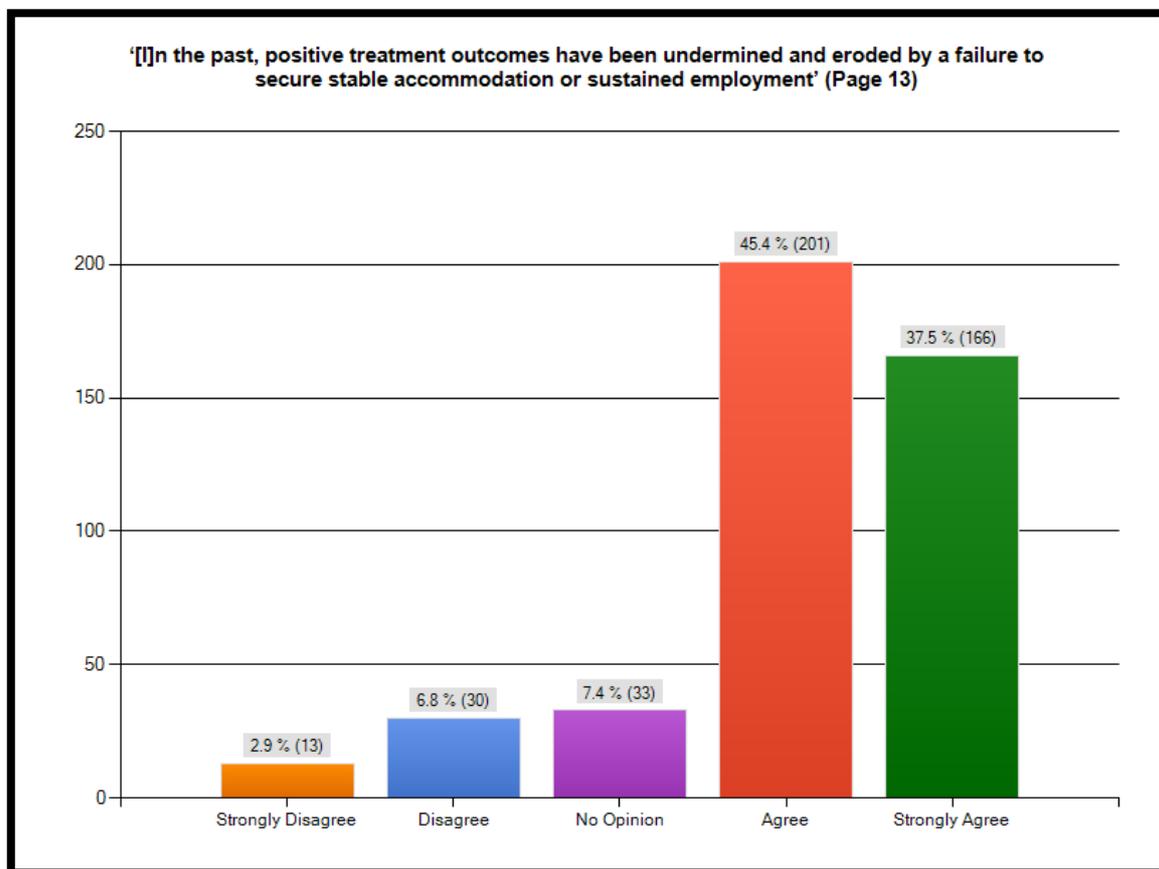
Lack of trust in Coalition’s ability to deliver on reducing drug related deaths, blood borne viruses (including HIV), and on improving outcomes for people experiencing drug dependence problems

The Recovery Roadmap states that it will deliver on reducing blood borne viruses and drug related deaths while improving outcomes for people experiencing drug dependence problems.

58% of respondents disagreed that the Roadmap would lead to improved care for people who use drugs (22.6% agreed).

64% disagreed that the Roadmap would help to reduce drug related deaths, and 60% disagreed with the assertion that ‘It is self-evident that the best protection against blood borne viruses is full recovery’.

While 83% agreed with the Roadmap’s contention that ‘[I]n the past, positive treatment outcomes have been undermined and eroded by a failure to secure stable accommodation or sustained employment’ only 20% were of the view that the Roadmap’s approach would have a ‘positive impact on access to housing and jobs for people who use drugs’.



The Recovery Roadmap will have a positive impact on access to housing and jobs for people who use drugs

