Statistics on drug misuse

England, 2018 (November update)
Key Facts

Key facts cover the latest year of data available:
• Admissions – 2017/18
• Deaths (England & Wales) – 2017
• Adult drug use (England & Wales) – 2017/18

This report also includes information on:
• Prevalence of illicit drug use amongst children.
• Drug dependence.
• Persons in treatment for substance misuse.
• Drugs seizures.

<table>
<thead>
<tr>
<th>Hospital Admissions</th>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug misuse</td>
<td>7,258</td>
<td>17,031</td>
</tr>
<tr>
<td>Mental and behavioural disorders</td>
<td>7,258</td>
<td>A fall of 16% over 2 years, from 8,621 in 2015/16, but up 9% from 6,678 in 2007/08.</td>
</tr>
<tr>
<td>Poisoning by drug misuse</td>
<td>17,031</td>
<td>Similar to the previous year, but 6% lower than in 2015/16 (18,128).</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Deaths</th>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>Poisoning by drug misuse</td>
<td>2,503</td>
<td>Similar to the previous year, but 38% higher than in 2007.</td>
</tr>
<tr>
<td>Drug misuse</td>
<td>9.0%</td>
<td>19.8% of young adults (16-24) had taken an illicit drug in the last year.</td>
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</table>

<table>
<thead>
<tr>
<th>Prevalence</th>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>Illicit drug use</td>
<td>9.0%</td>
<td>19.8% of young adults (16-24) had taken an illicit drug in the last year.</td>
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</table>
National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value. All official statistics should comply with all aspects of the Code of Practice for Official Statistics. They are awarded National Statistics status following an assessment by the Authority’s regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is NHS Digital’s responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.


This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.
This statistical report presents a range of information on drug use by adults and children drawn together from a variety of sources. It focuses on England only where possible although some statistics are only readily available at GB or UK level or for England and Wales combined. Some of this is new information whilst some has been published previously.

More detail can be found in the source publications which contain a wider range of data and analysis.

Note: The previous update to this report was published in February 2018. This update has been published earlier than is usual to make more timely use of NHS Digital hospital admissions data for 2017/18. Where other data sources have not been subject to an update, this is stated in the relevant section.

Newly published data includes:
• Analyses from NHS Digital Hospital Episode Statistics (HES).

The latest information from already published sources includes data from:
• The Office for National Statistics (ONS) on deaths related to drug misuse.
• National drug treatment monitoring system (NDTMS).
• Crime survey for England and Wales (CSEW).
• Adult Psychiatric Morbidity Survey (APMS),
• Smoking, Drinking and Drug Use (SDD).

Most figures quoted in this report have been rounded to the nearest whole number. Unrounded data may be found in related data sources. Financial year data (e.g. 2017/18) covers the period 1st April to 31st March.

1. Statistics on Drug Misuse, 2018
Part 1: Hospital admissions related to drug misuse

This part presents information on the number of hospital admissions (inpatient settings only) for diseases, injuries and conditions related to drug misuse.

Three measures for the number of drug related hospital admissions have been calculated using Hospital Episode Statistics (HES) data:

• Measure 1 – hospital admissions with a primary diagnosis of drug-related mental and behavioural disorders – referred to as admissions for drug related mental and behavioural disorders;

• Measure 2 – hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders – referred to as admissions where drug related mental and behavioural disorders were a factor;

• Measure 3 – hospital admissions with a primary diagnosis of poisoning by drugs, that are listed as controlled under the Misuse of Drugs Act 1971 (includes both intentional and unintentional poisoning) – referred to as admissions for poisoning by drug misuse.

More detail on the methods used to calculate these measures is provided in Appendix B.

1. The primary diagnosis provides the main reason why the patient was admitted to hospital.  2. A secondary diagnosis does not necessarily indicate drug-related mental and behavioural disorders was a contributing factor for the admission, but may instead indicate that it is relevant to a patient’s episode of care.
3. The data quality of secondary procedures has increased over time so increases in admissions compared to 10 years ago may partly reflect an improvement in data quality as well as an increase in activity.
Hospital admissions for drug misuse

Admissions by year\(^1\)

In 2017/18 there were 7,258 admissions for drug related mental and behavioural disorders, a fall of 16% over 2 years, from 8,621 in 2015/16. This follows a period of mostly increases; the current level is still 9% higher than 2007/08 (6,675).

In 2017/18 there were 17,031 admissions for poisoning by drug misuse\(^2\), a similar level to 2016/17. This is 6% lower than 2 years ago in 2015/16 (18,128), but still 9% higher than 2012/13 (15,580).

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1. Time series data is also available as a rate per 100,000 population in the accompanying data tables at the link below, and shows similar trends.
2. This data has been subject to a methodological change.

For more information: Tables 1.1 and 3.1 of Statistics on drug misuse, England, 2018 (November update)
Hospital admissions for drug misuse

Admissions by sex
More men than women were admitted for admissions for drug related mental and behavioural disorders (74% male), but equal proportions for admissions for poisoning by drug misuse.

Admissions by age
There were similar age profiles for admissions for drug related mental and behavioural disorders, and for poisoning by drug misuse, with higher levels for younger people¹.

For more information: Tables 1.1,1.2, 3.1 and 3.2 of Statistics on drug misuse, England, 2018 (November update) (based on 2017/18 HES)

¹. Analysis of data per head of population shows a similar profile.
Hospital admissions for drug misuse

**Change in admissions by age**

Though admissions amongst older people are lower (see previous page), these have been the age groups that have seen the largest percentage increases over the last 5 to 10 years.

Admissions for drug related mental and behavioural disorders have increased by 85% in those aged 45 and over since 2007/08 (from 638 to 1,182), compared with only a 1% increase for those aged under 45.

Admissions for poisoning by drug misuse have increased 32% in those aged 55 and over since 2012/13¹ (from 2,091 to 2,764), compared with a 6% increase for those under 55.

¹. No comparable data is available before 2012/13.

**For more information:** Tables 1.1 and 3.1 of Statistics on drug misuse, England, 2018 (November update) (based on 2017/18 HES)
Hospital admissions for drug misuse

An additional visualisation of this data, including time series, is available at the following link: Drug misuse related admissions data visualisation tool

**Admissions by Local Authority** (per 100,000 population)

**Drug related mental and behavioural disorders**

Blackpool had the highest admission rate with 61 per 100,000 population. 4 of the 5 lowest rates (all below 3) were in London boroughs.

**Poisoning by drug misuse**

Blackpool had the highest admission rate with 101 per 100,000 population. 9 of the 10 lowest rates (all below 12) were in London boroughs.

For more information: Table 1.3 and 3.3 of Statistics on drug misuse, England, 2018 (November update) (based on 2017/18 HES)
Hospital admissions where drug-related mental and behavioural disorders were a factor

Admissions
There were 86,966 admissions with a primary or secondary diagnosis of drug related mental and behavioural disorders. This is an increase of 6% on 2016/17, when there were 82,135 admissions. A breakdown of these admissions by primary diagnosis can be seen in table 2.2.

Admissions by age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>0</th>
<th>10</th>
<th>20</th>
<th>30</th>
</tr>
</thead>
<tbody>
<tr>
<td>75 and over</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>65 to 74</td>
<td></td>
<td></td>
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<tr>
<td>55 to 64</td>
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<td></td>
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<tr>
<td>45 to 54</td>
<td></td>
<td></td>
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<tr>
<td>35 to 44</td>
<td></td>
<td></td>
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<tr>
<td>25 to 34</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 to 24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 16</td>
<td></td>
<td></td>
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</tbody>
</table>

More men than women were admitted. In total, 69% of the patients were male.

56% of patients were aged between 25 and 44.

For more information: Tables 2.1 and 2.2 of Statistics on drug misuse, England, 2018 (November update) (based on 2017/18 HES)
Hospital admissions related to drug misuse in other parts of the UK

Scotland and Wales reported increases (to varying extents) in drug related admissions in recent years, and in particular increases in admissions involving older age groups, similar to the trend seen in England.

**Scotland**

The rate of drug-related general acute stays increased steadily from 41 to 162 stays per 100,000 population between 1996/97 and 2016/17. After a lengthy period of stability, the rate of drug-related psychiatric stays increased from 29 to 36 stays per 100,000 population between 2014/15 and 2015/16.

Stays among individuals aged 35 and over increased over time. For general acute stays among 45-49 year olds, there was a greater than eighteen-fold increase from 11 to 203 patients per 100,000 population between 1996/97 and 2016/17.

**Wales**

The overall number of hospital admissions for poisonings with named illicit drugs has increased by 3.6% from 6,290 in 2015/16 to 6,518 in 2016/17 and by 21% in the five-year period since 2012/13. Admissions for persons aged 50 and over were 26.5% higher than in 2007/08.

1. Definitions vary between countries. See source publications at the links below for further details.

For more information: Scotland: [Drug misuse and health harm: The Scottish Public Health Observatory](https://www.scottishhealth.gov.uk/healthtopics/drugmisuse), Wales: [The Annual Profile for Substance Misuse 2016-17: Public Health Wales](https://wales-publichealth.wales.nhs.uk/annual-profile-2016-17/).
Part 2: Deaths related to poisoning by drug misuse

Drug misuse and drug dependence are known causes of premature mortality. Drug-related deaths occur in a variety of circumstances, each with different social and policy implications. Consequently, there is considerable political, media and public interest in these figures.

This section presents information on the number of deaths that can be attributed to poisoning by drug misuse. Deaths were included where the underlying cause was due to drug poisoning and where a drug controlled under the Misuse of Drugs Act 1971 was mentioned on the death certificate.

The data source is the Office for National Statistics (ONS) who provide further details on the definition of a drug misuse death.

The figures presented here are for deaths registered each year, rather than deaths occurring each year. Almost all drug-related deaths are certified by a coroner. Due to the length of time it takes a coroner to complete an inquest, about half of drug-related deaths registered in a particular year will have actually occurred prior to that year.

Nevertheless, general trends in drug-related deaths are broadly equivalent, regardless of whether the data is analysed by year of occurrence or year of registration.

The data presented in this report covers England and Wales combined. The number of deaths for England only is available from the ONS source data. However as all breakdowns in the ONS data are for England and Wales combined this report uses the overall England and Wales figure for consistency.

1. Misuse of Drugs Act 1971
2. Deaths Related to Drug Poisoning in England and Wales Statistical bulletins
Deaths related to poisoning by drug misuse

Deaths by year
In 2017 there were 2,503 registered deaths in England and Wales related to poisoning by drug misuse. This is similar to 2016 (2,596), but 38% higher than in 2007 (1,809). This represents 0.5% of all deaths.

Deaths by sex
There were substantially more deaths amongst men. In total, 72% of the deaths were males.

Deaths by age
Around 1 in 3 (32%) of registered deaths were for people aged between 40 and 49.

For more information: Tables 1 and 2 of Deaths related to drug poisoning in England and Wales: 2017, Office for National Statistics
Deaths related to poisoning by drug misuse

Deaths by underlying cause of death

In 2017, 80% (1,995) of deaths related to illegal drug misuse were due to accidental poisoning by drugs, medicaments and biological substances. There were 389 suicides related to illegal drug misuse.

For more information: Table 1 of Deaths related to drug poisoning in England and Wales: 2017, Office for National Statistics
Part 3: Drug use among adults

This section presents a range of information on drug use among adults including the prevalence of drug use, the number of people receiving treatment for drug addiction, comparisons across European countries and information on new psychoactive substances (previously known as legal highs).

The main source of data for drug use among adults is the *Drug misuse: findings from the Crime Survey for England and Wales* published by the Home Office. This is an annual publication covering the prevalence and trends of illicit drug use among 16 to 59 year olds including separate analysis on young adults (16 to 24). Illicit drug use excludes new psychoactive substances (previously known as legal highs), and nitrous oxide from the drug use prevalence figures, but these are covered separately in the survey.

Information on drug dependence is taken from the NHS Digital *Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England*. This survey has been run every 7 years since 1993, with the last one having taken place in 2014.

Information on treatment for drug use is taken from Public Health England’s *National Drug Treatment Monitoring System (NDTMS)*.

Comparisons of drug use prevalence across European countries is taken from the *European Drug Report – Trends and Developments*, published by the European Monitoring Centre for Drugs and Drug Addiction.
Prevalence of illicit drug use among adults

Drug use amongst 16-59 year olds
9.0% of adults aged 16 to 59 had taken a drug in the last year. The trend has been relatively flat since the 2009/10 survey.
3.5% had taken a Class A drug in the last year. This has increased compared with the previous year and a decade ago (2007/08; both 3.0%).

Drug use amongst 16-24 year olds
19.8% of adults aged 16 to 24 had taken a drug in the last year, more than double that of the wider age group. This was similar to 2016/17 (19.2%).
Class A drug use has increased from 6.2% in 2011/12, to 8.4% in 2017/18. This is mainly driven by an increase in powder cocaine and ecstasy use.

1. Covers England and Wales 2. Charts are on different scales so not comparable.
For more information: Tables 1.02 and 1.06 of Drug Misuse: Findings from the 2017/18 Crime Survey for England and Wales, Home Office
Men were nearly twice as likely to report using cannabis in the last year than women (9.5% compared with 4.8%). Men were more than twice as likely to report using powder cocaine than women (3.7% compared with 1.6%), and twice as likely to report using ecstasy (2.2% compared with 1.1%).

As in previous years, cannabis was the most commonly used drug, with 7.2% of adults aged 16 to 59 having used it in the last year. This was the highest estimate in nine years, although the increase from 2016/17 (6.6%) was not statistically significant.
Prevalence of illicit drug use among adults

New psychoactive substance (NPS) use in the last year

16 to 59 year olds

0.4% of adults had used an NPS in the last year. This was the same level as in 2016/17, but lower than 2015/16 (0.7%).

Men were more than twice as likely to have used an NPS in the last year than women (0.5% compared with 0.2%).

16 to 24 year olds

Around half of all NPS users were aged 16 to 24. 1.2% of young adults took an NPS in the last year which is the same as 2016/17, but lower than in 2015/16 (2.6%).

Among men aged 16 to 24, 1.5% had used an NPS in the last year compared to 0.8% of young women.
Levels of lifetime use of cannabis differ considerably between European countries, from 41% of adults in France and 38% in Denmark, to 4% in Malta and less than 1% in Turkey.

30% of adults in England and Wales had used cannabis, which was above the EU average (26%).

1. Lifetime usage for adults (15-64). Age range and year of survey varies by country – E&W figure is taken from 2016/17 CSEW. See footnotes in source report table for further details.

For more information: Table A5, European Drug Report, Trends and Developments, 2018, European Monitoring Centre for Drugs and Drug Addiction
Prevalence of cocaine use among adults - international comparisons

Levels of lifetime use of cocaine differ considerably between countries. Prevalence was almost 10% in England and Wales, the highest across the European countries included. It was less than 1% in Malta, Lithuania, Romania, Slovakia, and Bulgaria.

1. Lifetime usage for adults (15-64). Age range and year of survey varies by country – E&W figure is taken from 2016/17 CSEW. See footnotes in source report table for further details.

For more information: Table A2, European Drug Report, Trends and Developments, 2018, European Monitoring Centre for Drugs and Drug Addiction
Prevalence of drug dependence among adults

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Drug dependence by year

Between 1993 and 2000 there was an increase in the proportions of adults (16-64) reporting signs of dependence in the past year.

Since then, the overall level of signs of dependence has remained stable.

Drug dependence by age

Drug dependence decreased with age.

11.8% of men aged 16 to 24 showed signs of dependence.

Drug dependence by sex (adults 16+)

4.3% 1.9%

For more information: Tables 11.5 and 11.6 of the Adult Psychiatric Morbidity Survey, 2014
Prevalence of drug dependence among adults

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Drug dependence by ethnic group
Using age-standardised data, the proportion showing signs of dependence was highest (at 7.5%) among adults in the Black/Black British group. This may be explained by their higher rates of cannabis use, and could reflect reporting of daily use.

Drug dependence by employment status
Among people aged 16–64, the prevalence of drug dependence varied with employment status. In men, signs of drug dependence were most common in those classed as economically inactive (9.6%). For women, the highest prevalence was found in those who were unemployed (4.4%).

1. The ‘economically inactive’ group includes students, and those looking after home, long term sick or disabled, or retired.

For more information: Tables 11.7 and 11.9 of the Adult Psychiatric Morbidity Survey, 2014
Adults receiving help for substance misuse

Reasons for treatment
268,390 individuals were in contact with drug and alcohol services during 2017/18.

People in treatment for opiate dependence made up the largest proportion of the total numbers in treatment (53% or 141,189).

1. Excludes those receiving treatment for both non-opiates and alcohol.

For more information: Table 4.2.1 of Adult substance misuse statistics from the National Drug Treatment Monitoring System, 2017 to 2018
### Adults in a secure setting receiving help for substance misuse

*Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.*

#### Reasons for treatment

59,258 individuals were in contact with drug and alcohol services in secure settings in 2016/17 with the majority being in a prison setting (55,721).

A similar number of people were treated for opiates than the other three categories combined.

#### Individuals in treatment by age

The age profile of opiate users was older than those using only non-opiates\(^1\).

<table>
<thead>
<tr>
<th>Age groups</th>
<th>Opiate</th>
<th>Non-opiate only</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-24</td>
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<td>25-29</td>
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<td>30-39</td>
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<td>40-49</td>
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<tr>
<td>50-59</td>
<td></td>
<td></td>
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<tr>
<td>60+</td>
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</tbody>
</table>

\(^1\) Excludes those receiving treatment for both non-opiates and alcohol.

**For more information:** Tables 4.2.1 and 4.3.1, Secure setting statistics from the National Drug Treatment Monitoring System, 2016 to 2017
Part 4: Drug use among children

This part presents a range of information on drug use among children, including prevalence and frequency of drug use, and attitudes towards drug use. This information has been taken from two publications.

NHS Digital’s *Smoking, Drinking and Drug use among Young People (SDD)* report surveys pupils in secondary schools across England every 2 years, to provide estimates and information on the smoking, drinking and drug use behaviours of young people aged 11 - 15. The next survey is being run in 2018, with results published in 2019.

In addition, information on the treatment of young people is taken from the Public Health England publication *Young people’s substance misuse statistics from the National Drug Treatment Monitoring System (NDTMS).*
Prevalence of drug use among secondary school pupils

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Ever taken drugs, by year

In 2016, 24% of pupils reported they had ever taken drugs\(^1\). This compares to 15% in 2014. Part of the increase since 2014 may be explained by the addition of questions on nitrous oxide (NO) and new psychoactive substances (NPS). After allowing for this however (solid line on chart showing 21% in 2016), it still represents a large increase which has not been observed in other data sources\(^2\). Therefore an estimate from the next survey in 2018 is required before we can be confident that these survey results reflect a genuine trend in the wider population. In the meantime the results for drug taking from this survey should be treated with caution.

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1. This is an estimate and subject to a margin of error: the proportion in the population is likely to be somewhere between 23% and 26%.
2. A comparison with other data sources is given on page 65 of the source publication.

For more information: Table 9.1, Chapter 9, Smoking, drinking and drug use among young people, 2016
Prevalence of drug use among secondary school pupils

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Ever taken drugs, by age

The likelihood of having ever taken drugs increased with age, from 11% of 11 year olds to 37% of 15 year olds.

Ever taken drugs, by sex

Similar proportions of girls and boys said they had ever taken drugs.

For more information: Table 9.5, Chapter 9, Smoking, drinking and drug use among young people, 2016
Prevalence of drug use among secondary school pupils

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Taken drugs in the last year, by year

18% of pupils said that they had taken drugs in the last year.
Excluding new psychoactive substances and nitrous oxide (newly added to the drug prevalence measure in 2016), then 15% said they had taken drugs in the last year, up from 10% in 2014.

The likelihood of having taken drugs in the last year increased with age, from 7% of 11 year olds to 30% of 15 year olds.

Taken drugs in the last year, by sex and age

Girls and boys were equally likely to have taken drugs in the last year.

The likelihood of having taken drugs in the last year increased with age, from 7% of 11 year olds to 30% of 15 year olds.

1. See ‘ever taken drugs’ chart on page 27 for dates of key policy initiatives.
2. This is an estimate and subject to a margin of error: the proportion in the population is likely to be somewhere between 17% and 19%

For more information: Table 9.2, Chapter 9, Smoking, drinking and drug use among young people, 2016
Prevalence of drug use among secondary school pupils

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Drug types taken in last year, by year$^{1,2}$

Cannabis is the drug that pupils are most likely to have taken in the last year, with 8% saying they had done so in 2016; similar to 2014 but well below the 13% reported in 2001.

The proportion saying they had taken volatile substances has been around 3% to 4% since 2010, and class A drug use around 2% to 3% across the same period.

Nitrous oxide and new psychoactive substances were included in the drug prevalence measure for the first time in 2016, with 4% and 2% of pupils respectively saying that they had taken them in the last year.

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1. See ‘ever taken drugs’ chart on page 27 for dates of key policy initiatives.  
2) Only selected drug types are shown. Pupils could state more than one drug type. For the full list see data table 9.6 in source report. See appendix C in source report for inclusions within volatile substances, class A drugs and psychoactive substances.

For more information: Table 9.6, Chapter 9, Smoking, drinking and drug use among young people, 2016
From whom secondary school pupils get drugs

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

**Whom pupils got drugs from on the most recent occasion**

49% of pupils said they had got the drugs from a friend on the most recent occasion, with most of these being from a friend of the same age.

26% of pupils said they got drugs from a dealer.

**Whom pupils got drugs from on the most recent occasion, by age**

Older pupils who use drugs were more likely than younger pupils to have obtained them from a friend or a dealer.

1. Based on pupils who have taken drugs on more than one occasion.  
2. Selected responses only.

For more information: Tables 10.5 to 10.8, Chapter 10, Smoking, drinking and drug use among young people, 2016
Where secondary school pupils get drugs

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Where pupils got drugs on the most recent occasion\(^1\)

52% of pupils said they were in a street, park or other outdoor area when they last obtained drugs. 14% of pupils said they were at school and 14% at someone else’s home.

Where pupils got drugs on the most recent occasion, by age\(^1,2\)

Older pupils were more likely to have obtained drugs in an outdoor area, and less likely to have obtained drugs at school.

\(^1\) Based on pupils who have taken drugs on more than one occasion.  \(^2\) Selected responses only.

For more information: Tables 10.9 to 10.12, Chapter 10, Smoking, drinking and drug use among young people, 2016
Young people attending specialist substance misuse services

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Primary substance use by year
The number of young people attending specialist substance misuse services in 2016/17 was 16,436\(^1\), down 4% from the previous year. In the majority of cases (77%), cannabis was the primary substance that brought the person into treatment.

Primary or adjunctive substance use\(^2,3\)
88% of young people attending substance misuse services in 2016/17 reported either primary or adjunctive cannabis use.

The proportion citing new psychoactive substances (NPS) has decreased from 6% to 4%.

1. Includes those receiving treatment for alcohol only.  
2. Primary substance use - the substance that brought the young person into treatment at the point of triage/initial assessment. Adjunctive substance use - other substances cited by the young person. More than one substance can be reported per person.  
3. Other opiates includes methadone.

For more information: Tables 2.3.1 and 5.2.1 of Young people’s statistics from the National Drug Treatment Monitoring System, 2016/17
Young people in treatment in secure settings

Please note: There has been no update to this data since the Statistics on Drug Misuse February 2018 publication.

Substance use

The most commonly cited substance in 2015/16 was cannabis, reported by 91% of young people in treatment in secure settings. Just over half of young people cited problematic alcohol use, making it the second most cited substance (48%).

Age and gender

Overall, 89% of all young people in treatment in secure settings were male. Females were younger on average, with the most common age being 15, compared to 17+ for males.

For more information: Tables 7.2.1 & 7.4.1 of Secure setting statistics from the National Drug Treatment Monitoring System, 2016/2017
Part 5: Drug seizures in England and Wales

This section presents figures for drug seizures made in 2017/18 in England and Wales by the police (including the British Transport Police) and Border Force, taken from the Home Office publication: Seizures of drugs in England and Wales, financial year ending 2018.

The data relate to all drugs controlled under the Misuse of Drugs Act 1971 (MDA), which divides drugs into three categories (Classes A, B and C) according to the harmfulness they cause to the user or to society when they are misused.

The number of seizures made can be affected by police activity and changes in recording practices, therefore the number of drug seizures each year should not be taken as a measure of drug prevalence in England and Wales.

1. Misuse of Drugs Act
Drug seizures in England and Wales

Number of seizures
Police forces and Border Force made a total of 135,728 drug seizures in England and Wales in 2017/18, a 2% decrease compared with the previous year (139,019). This is the sixth consecutive annual fall.

Class A drug seizures
Cocaine was the most commonly seized Class A drug, with 52% of all Class A seizures involving this substance in 2017/18. There were 15,257 seizures of cocaine, up 2% on the previous year (14,892 seizures).

1. For consistency, drugs are counted in their current classification for the entire time series shown.

For more information: Summary Table 1, Seizures of drugs in England and Wales, 2017/2018, Home Office
Drug seizures in England and Wales

Drug seizures by drug type\(^1\) and authority

A large majority (95%) of drug seizures during 2017/18 were performed by the police. They were responsible for over 95% of cocaine, crack cocaine, heroin, cannabis, and amphetamine seizures.

Drug seizure quantity by drug type\(^1\) and authority

Border Force seized relatively large quantities per seizure compared to the police. They seized more than half of cocaine, ecstasy, amphetamines, herbal cannabis, and cannabis resin quantities.

1. Only drugs with more than 1,000 seizures, and with data available for both the police and Border Force in 2017/18, are shown.

For more information: Summary Tables 1, 2, 4 and 5, Seizures of drugs in England and Wales, 2017/2018, Home Office