Statistics on Drugs Misuse
England, 2016

Appendices

Published 28 July 2016
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Appendix A: Key sources

The statistical sources used in this publication fall into one of three categories: National Statistics; Official Statistics or neither:

National Statistics are produced to high professional standards set out in the Code of Practice for Official Statistics. It is a statutory requirement that National Statistics should observe the Code of Practice for Official Statistics. The United Kingdom Statistics Authority (UKSA) assesses all National Statistics for compliance with the Code of Practice.

Official Statistics should still conform to the Code of Practice for Official Statistics, although this is not a statutory requirement.

Those that are neither National Statistics nor Official Statistics may not conform to the Code of Practice for Official Statistics. However, unless otherwise stated, all sources contained within this publication are considered robust.

Further information on the sources used in this publication is provided below.

1. Sources used in this report

1.1 Deaths Related to Drug Poisoning in England and Wales: 2014 registrations [NS]

The Office for National Statistics (ONS) produces annual statistics on the number of registered deaths that can be attributed to 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\(^a\) was mentioned on the death certificate.


1.2 Drug Misuse: Findings from the 2015/16 Crime Survey for England and Wales [NS]

This is an annual statistical release that examines the extent of, and trends in, illicit drug use among a nationally representative sample of 16 to 59 year olds resident in households in England and Wales.

The release covers the following topics:

- Extent and trends in illicit drug use among adults, including separate analysis of young adults (16 to 24 year olds);
- Frequency of illicit drug use in the last year;
- Illicit drug use by personal, household and area characteristics and lifestyle factors;
- Use of new psychoactive substances (NPS);
- Perceived acceptability of use of and ease of obtaining illicit substances;
- Drug use within generations over time (a pseudo-cohort analysis);


1.3 European drug report – trends and developments, 2016

This is the latest publication from the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and provides an overview and summary of the European drug situation including: drug use, drug problems; drug markets, and information on drug policies and practice. The statistical data reported here relate to 2014 (or the last year available).


1.4 Hospital Episode Statistics (HES)

Hospital Episode Statistics (HES) is a data warehouse containing details of all admissions, outpatient appointments and A&E attendances at NHS hospitals in England. HES processes over 125 million admitted patient, outpatient and accident and emergency records each year.

http://www.hscic.gov.uk/hes

The drug misuse related hospital admissions have been calculated using HES data. Information on methodology is provided in appendix B.

1.5 National Drug Treatment Monitoring System (NDTMS) [NS]

The National Drug Treatment Monitoring System (NDTMS) records information about people receiving Tier 3 or 4 treatment for drug misuse in England (i.e. structured community-based services, or residential inpatient services), in order to monitor and assist the management of progress towards the Government's targets for participation in drug treatment programmes.

Two annual publications, relating to 2014/15, have been referenced in this report: Adult substance misuse statistics from the National Drug Treatment Monitoring System (NDTMS) and Young people’s statistics from the National Drug Treatment Monitoring System (NDTMS).

Reports: https://www.ndtms.net/Publications/AnnualReports.aspx

1.6 Smoking, Drinking and Drug Use among Young People in England [NS]

Smoking, Drinking and Drug Use among Young People in England surveys pupils in secondary schools across England to provide national estimates and information on the smoking, drinking and drug use behaviours of young people aged 11 - 15.

The survey provides estimates at national level with some regional analyses and has been running since 1982.

Information is collected through a questionnaire which is administered at school in exam conditions.

1.7 What About YOUth?
What About YOUth? is a survey aimed specifically at 15 year olds. It was run for the first time in 2014 and it is hoped it will be repeated in the future. The survey included questions about subjects such as their health, diet, exercise, bullying, alcohol, drugs and smoking.

It provides estimates at national, regional and local authority level.

Information was collected through a questionnaire which was posted to the young person’s home address.

http://www.hscic.gov.uk/article/3742/What-About-Youth-Study

2. Other resources on drug use
Readers may also find the following organisations and publications useful resources for further information on drug use:

2.1 Adult Psychiatric Morbidity in England – 2007 [NS]
The Adult Psychiatric Morbidity Survey (APMS) series provides data on the prevalence of both treated and untreated psychiatric disorder in the English adult population (aged 16 and over). Topics covered include drug use and dependency.

This survey was repeated in 2014 and is expected to be published in September 2016.

http://www.hscic.gov.uk/pubs/psychiatricmorbidity07

2.2 Drug Drive
Drug Drive has been set up as part of THINK! road safety, from the Department of Transport, to give 17 to 35 year olds information on how different drugs can impair their driving.

http://think.direct.gov.uk/drug-driving.html

2.3 European School Survey Project on Alcohol and Other Drugs (ESPAD)
ESPAD provides an overview of trends in substance use among 15–16-year-old European students and covers most of the European continent. Data are collected every four years. The most recent report presents the results from data collected in 36 countries during spring 2011.


2.4 United Kingdom Focal Point on Drugs
The United Kingdom (UK) Focal Point on Drugs is based at Public Health England. It is the national partner of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and provides comprehensive information to the Centre on the drug situation in England, Northern Ireland, Scotland and Wales. It also produces an annual report: United Kingdom Drug Situation.
Further information about the UK Focal Point, including previous annual reports can be found on the Focal Point website at http://www.nta.nhs.uk/focalpoint.aspx

2.5 FRANK
FRANK is a national drug education service jointly established by the Department of Health and Home Office in 2003. It is intended to reduce the use of both legal and illegal drugs by educating teenagers and adolescents about the potential effects of drugs and alcohol. It also includes a glossary of names given to different drugs including slang terms. www.talktofrank.com

2.6 A Summary of the Health Harms of Drugs
This Department of Health report offers brief coverage of the health-related harms and effects of drugs most popularly used in the UK. Based upon scientific research and focused largely on the cost to the individual, this article considers a wide range of licit and illicit drugs. Report: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_129624

2.7 National Institute for Health and Clinical Excellence (NICE)
The National Institute for Health and Care Excellence (NICE) provides national guidance and advice to improve health and social care including information on drug misuse. https://www.nice.org.uk/guidance/health-protection/drug-misuse

2.8 National Programme on Substance Abuse Deaths (NPSAD)
The NPSAD produce an annual report which analyses drug-related deaths that have occurred in a calendar year and covers trends and data on illicit and licit drug-related deaths including those from Novel Psychoactive Substances/'legal highs'; demographic data of decedents; and geographical differences in drug-related deaths across the UK. http://www.sgul.ac.uk/research/population-health/our-projects/national-programme-on-substance-abuse-deaths

2.9 Public Health Outcomes Framework
The Public Health Outcomes Framework sets out the range of opportunities to improve and protect health across the life course and to reduce inequalities in health. It provides the context for the system, from local to national level. It was most recently updated in December 2015. https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency

2.10 Seizures of drugs in England and Wales, 2014/15
This annual statistical release presents figures for drug seizures made in 2014/15 in England and Wales by the police (including the British Transport Police) and Border Force. The data relate to all drugs controlled under the Misuse of Drugs Act 1971.
Report:
Appendix B: Technical notes

These notes help to explain some of the measurements used and presented in this report or provide links where appropriate.

Deaths Related to Drug Poisoning

This report uses a subset of the deaths published by ONS. Specifically those referred to as “drug misuse deaths involving illegal drugs” have been used.

ONS provides Quality and Methodology Information (QMI) detailing key qualitative information on the various dimensions of quality as well as providing a summary of methods used to compile the output.

http://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/qmis/deathsrelatedtodrugpoisoninginenglandandwalesqmi

Drug Misuse: Findings from the 2015/16 Crime Survey for England and Wales (CSEW)

As a household survey, the CSEW provides a good and robust way to measure general population prevalence of drug use amongst users contained within the household population. However, estimates from the CSEW must be considered within the context of survey methodology and the operational challenges of obtaining information from respondents on self-declared drug use. Detailed information about the figures included in this release is available in the User Guide to Drug Misuse Statistics.


Drug misuse related hospital admissions

The report presents three measures for the number of drug misuse related hospital admissions:

1. NHS hospital finished admission episodes with a primary diagnosis of drug related mental health and behavioural disorders.
2. NHS hospital finished admission episodes with a primary or secondary diagnosis of drug related mental health and behavioural disorders.
3. NHS hospital finished admission episodes with a primary diagnosis of poisoning by illicit drugs.

The number of admissions is a count of the records meeting the required criteria for the measure.

A finished admission episode is the first period of in-patient care under one consultant within one healthcare provider. Please note that admissions do not represent the number of in-patients, as a person may have more than one admission within the year.

The primary diagnosis is the first of up to 20 diagnosis fields in the Hospital Episode Statistics (HES) dataset and provides the main reason why the patient was in hospital. The secondary diagnosis is one of up to 19 (13 prior to 2007-08) secondary diagnosis fields that show other diagnoses relevant to the episode of care.
HES data are classified using the International Classification of Diseases (ICD). The tenth revision of this classification is currently in use (ICD-10)\(^b\). Details of ICD-10 codes used for each of the three measures are included in the excel table footnotes.

The methodology used to calculate rates per population for hospital admissions has changed from that used in previous reports. Specifically instead of using the latest mid-year population estimates as the denominator, the European standard population has been used. Further details of this can be found at: [http://www.hscic.gov.uk/media/21409/MethChange20160623Drugs-Compendium/pdf/MethChange20160623_Drugs_Compendium.pdf](http://www.hscic.gov.uk/media/21409/MethChange20160623Drugs-Compendium/pdf/MethChange20160623_Drugs_Compendium.pdf)

Measure 3 is designed to cover illegal drugs only and therefore code T40.4 has been excluded from 2012/13 onwards. This has been necessary because from 2012/13 code T40.4 was reclassified to include the legal drug Tramadol. Consequently, comparisons with years prior to 2012/13 should be made with caution for measure 3. This code accounted for 283 cases (2.3%) in 2011/12.

These measures do not include outpatient data which varies at a local level and should be considered when making local level comparisons. Detailed outpatient data is not available.

\(^b\) [http://apps.who.int/classifications/icd10/browse/2016/en](http://apps.who.int/classifications/icd10/browse/2016/en)
Appendix C: Laws and policies

UK drug laws

The Misuse of Drugs Act 1971

Offences under the Act include:

- Possession of a controlled drug unlawfully.
- Possession of a controlled drug with intent to supply it.
- Supplying or offering to supply a controlled drug (even where no charge is made for the drug).
- Allowing premises you occupy or manage to be used unlawfully for the purpose of producing or supplying controlled drugs.


The Drugs Act 2005

This Act came into force on 1st January 2006 and includes the following clauses:

- A reversal of the burden of proof in cases where suspects are found in possession of a quantity of drugs greater than that which would be required for personal use.
- Compulsory drug-testing of arrestees where police have “reasonable grounds” for believing that Class A drugs were involved in the commission of an offence.
- The inclusion of fresh Liberty Cap or “magic” mushrooms in Class A of the Misuse of Drugs Act. Before this Bill, only dried or prepared mushrooms were considered illegal.

The Act has also linked drug legislation with measures to deal with Anti-Social Behaviour so that anyone given an Anti-Social Behaviour Order must undergo compulsory testing and drug treatment.


The Psychoactive Substances Act 2016

This Act came into force on 26 May 2016 and is intended to restrict the production, sale and supply of a new class of psychoactive substances often referred to as “legal highs”.

http://www.legislation.gov.uk/ukpga/2016/2/contents

Policy

Drug strategy 2010

This policy paper, Reducing Demand, Restricting Supply, Building Recovery: Supporting People to Live a Drug Free Life, was published in December 2010 under the 2010 to 2015 Conservative and Liberal Democrat coalition government. While this strategy is still current, a refreshed version is expected in 2016.

Annual review of the 2010 drug strategy

The first annual review of the 2010 drug strategy was published in 2012 and provided a progress update on implementation of the strategy, and included an action plan for tackling the threat from new psychoactive substances.

http://www.homeoffice.gov.uk/publications/alcohol-drugs/drugs/annual-review-drug-strategy-2010/

Related documents:
https://www.gov.uk/government/collections/drugs-strategy-documents

Drug strategy annual review: 2014 to 2015

The third annual review of the drug strategy, A Balanced Approach, updates progress on the 3 strands of the strategy since December 2013.

Appendix D: How are the statistics used?

Users and uses of the report

From our engagement with customers, we have many known users of Statistics on Drug Misuse. However, since this publication is free to access through the HSCIC website, there are also many unknown users of these statistics. We are continually aiming to improve our understanding of who our users are in order to enhance our knowledge on how they use our data. This is carried out via consultations and feedback forms available online.

Since the 2014 publication, a consultation has been carried out to gain feedback on how to make the report more user-friendly and accessible while also producing it in the most cost-effective way. The results of this consultation can be found at the below link and the new format is in direct response to the feedback received.

http://www.hscic.gov.uk/article/6770/Consultation-on-Lifestyles-Compendia-Reports

Below is listed our current understanding of the known users and uses of these statistics. Also included are the methods we use to attempt to engage with the unknown users.

Known Users and Uses

**Department of Health (DH)** - frequently use these statistics to inform policy and planning as shown in Appendix C.

**Public Health England** frequently uses these data for secondary analyses.

**Media** - these data are used to underpin articles in newspapers, journals, etc. For example, the following articles appeared in response to the 2014 version of this report:

- **Gazette Live** - Middlesbrough 'has highest rates of people diagnosed with mental illness connected to illegal drugs'
  
  http://www.gazettelive.co.uk/news/teesside-news/middlesbrough-has-highest-rates-people-8211709

- **Press TV** - “Drug use among British youth raises concerns”
  
  http://www.presstv.ir/detail/2014/12/03/388517/uk-underage-drug-use-raises-concerns/

- **Bradford Telegraph and Argus** - “Almost 250 people admitted to hospital after being poisoned by illicit drugs in Bradford in one year”
  
  http://www.thetelegraphandargus.co.uk/news/11641097.Almost_250_people_admitted_to_hospital_after_being_poisoned_by_illicit_drugs_in_Bradford_in_one_year/

**Public** - all information is accessible for general public use for any particular purpose.

**Academia and Researchers** - a number of academics cite the data from this report in their research papers.

**NHS** - frequently use the reports and tables for analyses, benchmarking and to inform decision making.

**Public Health Campaign Groups** - data are used to inform policy and decision making and to examine trends and behaviours.

**Ad-hoc requests** – the statistics are used by the Health and Social Care Information Centre (HSCIC) to answer Parliamentary Questions (PQs), Freedom of Information (FOI) requests and ad-hoc queries. Ad-hoc requests are received from health professionals; research
companies; public sector organisations, and members of the public, showing the statistics are widely used and not solely within the profession.

**Unknown Users**

This publication is free to access via the HSCIC website [http://www.hscic.gov.uk/lifestyles](http://www.hscic.gov.uk/lifestyles) and consequently the majority of users will access the report without being known to the HSCIC. Therefore, it is important to put mechanisms in place to try to understand how these additional users are using the statistics and also to gain feedback on how we can make these data more useful to them. On the webpage where the publication appears there is a link on the right-hand side to a feedback form which the HSCIC uses to capture feedback for all its reports.

The specific questions asked on the form are:

- How useful did you find the content in this publication?
- How did you find out about this publication?
- What type of organisation do you work for?
- What did you use the report for?
- What information was the most useful?
- Were you happy with the data quality?
- To help us improve our publications, what changes would you like to see (for instance content or timing)?
- Would you like to take part in future consultations on our publications?

Any responses via this form are passed to the team responsible for the report to consider.

We also capture information on the web activity the reports generate, although we are unable to capture who the users are from this. *Statistics on Drugs Misuse 2014* generated approximately 589 unique web downloads (for the report and/or associated files) within 30 days of its publication on 2nd December 2014.