

**Human and financial cost of drug addiction. November 22<sup>nd</sup> 2017 - 1027 words**

There is no financial cost that can be attributed to drug addiction that comes close to matching the human cost.

The death of a loved one, the suffering of an addict, the wasted lives and the associated suffering, far out way any amount of money that has been spent fighting the war on drugs. And yet we continue to pour time, effort and money into a system that emphasises criminal prosecution.

Since Mexico intensified its approach to drug law enforcement in 2006 more than 100,000 people have died and another 20,000 are missing.

And the personal testimonies from members of 'Anyone's child' are heartfelt and painful.

'Anyone's child' is calling on government "to regulate drugs to reduce the risk they pose" "legal regulation doesn't mean a free-for-all where drugs are widely available – our current laws have already achieved that".

We need to take control away from the criminal fraternity.

Across the world for over 50 years the war on drugs has killed the innocent and made the guilty rich.

It has destroyed communities and compounded the difficulties faced in addressing addiction problems.

The UK Government spends around £1.6 billion per year on drug law enforcement. In an evaluation of its drug strategy, published this year, the government admitted that:

Enforcement expenditure has **"little impact on availability"**

They also state that **"Illicit drug markets are resilient and can adapt to even significant drug and asset seizures"**

And that contact with the criminal justice system for drug offences can **"bring with it potential unintended consequences including unemployment and harm to families"**

Not only is our drug policy failing to reduce harms, it is directly contributing to worsening harms – and the government knows it.

Last night I attended an event hosted by Addaction. And a man in recovery said “ as humans we judge. It keeps is safe. Before you judge try to see the person”

So what can the government do?

**Safer drug consumption rooms (DCRs)** - are already saving lives in 8 European countries as well as in Canada and Australia. They have been endorsed by the British Medical Association. These facilities reduce the spread of infectious diseases and the risks of public drug use. No one has ever died of an overdose in a DCR, anywhere in the world.

**Heroin assisted treatment** is also being successfully implemented in several European countries, and is endorsed by the British Medical Association. In 2016, the Advisory Council on the Misuse of Drugs stated that “central government funding should be provided to support heroin-assisted treatment for patients for whom other forms of [opioid substitution treatment] have not been effective”, but the government has failed to act on this request.

Specialist **drug checking services** can allow people at nightclubs and festivals to find out what’s in their batch. Data from recent UK trials showed that one in five people found that they did not have the drug they expected. Around 80% of this group then chose to use a smaller quantity, avoid mixing it with other substances, or dispose of their batch altogether.

But if it’s a financial justification that is required rather than a humanitarian one then ...

Researchers in the U.S. Office of National Drug Control Policy found that the economic cost of addiction in **that country** is more than twice that of any other neurological disease.

- They note that for every \$1 that is spent on substance **abuse treatment**,
- \$4 is **saved** in health care costs and
- \$7 is **saved** in law enforcement costs.
- Drug abuse treatment not only saves lives—it saves billions of dollars as well.

While drug use continues across society we must note that addiction can and does affect people from all walks of life.

Ten percent of drug users will develop an addiction and addiction does not respect race, creed, colour, religion, gender or financial standing.

But as is often the case **it is** the poorest that suffer the most.

In 2008, the Scottish Government published the national drugs strategy for Scotland, The Road to Recovery. This set out a new strategic direction for tackling problem drug use, based on treatment services promoting recovery.

The Scottish Government has invested £689 million to tackle problem drug and alcohol use since 2008.

Education has been an important part of the strategy.

And they are reducing the risk of drug-related deaths by supporting the roll-out and embedding of the world's first national naloxone programme into mainstream NHS programmes.

AND they are not stopping there.

Public Health Minister Aileen Campbell has announced a refresh of Scotland's drug strategy, to respond to the changing nature of Scotland's drug problem.

Work is being progressed to develop a "Seek, Keep and Treat" framework. This joint initiative between the Scottish Government and the Scottish Drugs Forum will examine the operational implications of engaging with older drug users, how to encourage them into services and how to keep them in treatment.

And while many classify drugs as heroin, cocaine or cannabis, we must not ignore alcohol.

Alcohol addiction is one of the most damaging forms of drug addiction.

Alcohol misuse is costing Scotland £3.6 billion each year – £900 for every adult.

Last week the SNP's Minimum Unit Pricing of alcohol was ruled by the UK Supreme Court to be legal.

Updated modelling from Sheffield University shows that a Minimum Unit Pricing of 50p is estimated to result in 121 fewer deaths per annum, and a fall in hospital admissions of just over **2,000 per annum** by year 20 of the policy.

But as the world begins to treat addiction as a health issue rather than a criminal justice one, the UK government remains unmoved.

Yet we know there is a link between trauma exposure (including childhood physical/sexual abuse, PTSD) and substance misuse. Current drug policies are criminalising people who have already suffered greatly, thereby exacerbating their trauma.

In conclusion.....

Spending money to address addiction problems as a health issue will not only bring about better results it will prove to be less expensive than our current strategy that criminalises and stigmatises people with addiction problems and casual recreational users.