



turning point

CAP House·9/12 Long Lane·London·EC1A 9HA Tel:(01) 606·3947/9

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BA/TJS/3009

31 May 1985

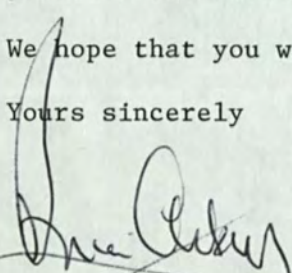
The Rt Hon Margaret Thatcher MP
Prime Minister
10 Downing Street
London SW1

Dear Mrs Thatcher

Further to my letter of 30 May 1985, Dr Mack and I have now put down some considered thoughts on current drugs service policies. We have not attempted to give detailed reasons for our adopting a particular position but would, if you wish, be happy to provide them.

We hope that you will find this useful.

Yours sincerely


Brian Arbery
Chief Executive

RECOMMENDATIONS ON DRUG SERVICE POLICIES

1. There are no easy answers to the current and growing drug problem. We are faced with a situation which is likely to be long term and which requires long term strategies. It must be accepted that we are now a drug using society and changing attitudes towards the problem will take many years. The situation will not be helped if drug users continue to be rejected and ignored by society instead of being offered help.
2. The growth in drug taking is a major threat to the existing structure of society and a drain on national resources.
3. Basic policy determinants should be to reduce availability of drugs and aim towards detoxification and ultimate abstinence among drug users.
4. Increased police and customs activity are of considerable importance but they can never provide a complete solution.
5. A drug using society does not necessarily depend on importation. Drugs can be supplied by either ill advised prescription or the illicit manufacture of synthetic products eg, LSD, amphetamines and potent narcotics (as now being experienced in the USA).
6. There is a considerable need for increased consistency in sentencing policies with regard to drug offences.
7. Provision of treatment and rehabilitation services is and should continue to be shared by the NHS, Social Services and Non Statutory Agencies.
8. Current trends towards a responsibility for the management of addictions being placed within a variety of community settings as opposed to the former medicalisation of the problem must not absolve the NHS from a major treatment responsibility.
9. The following services should be readily available in every health district: advice, counselling, detoxification treatment, after care arrangements and family support groups.
10. Easy access should be possible to in-patient detoxification, day care programmes and various residential rehabilitation programmes where these are appropriate for the individual user.
11. The primary contact and after care services of all types are often more appropriately located in the non statutory sector. These services, however, should meet professional standards and be open to scrutiny.
12. Private medicine provides the best and the worst in drug treatment - the best facilities are extremely expensive and therefore of limited application and the worst amounts to destructive prescribing of drugs. It would be reasonable to restrict the prescribing of drugs to addicts as this often only serves to complicate the drug scene.

13. There is no overall strong directive body co-ordinating the national response to the drug problem. The existing DHSS central staffing is inadequate in numbers and does not have the power to compel others to take action. It is exacerbated by the division of responsibilities between DHSS and Home Office.
14. The establishment of a single national agency to deal with all education, treatment and rehabilitation aspects of substance misuse (including alcohol) is now extremely urgent. This should be under the aegis of the DHSS.
15. This body should be responsible for the overall planning of drugs services and have the power to allocate monies.
16. Consideration should be given to the specific earmarking of funds both within the health service and via rate support grant where local statutory bodies do not undertake the action required of them.
17. The present financing system is unsatisfactory. Three year funding leaves voluntary agencies in particular in a permanently uncertain position. Greater security of funding is extremely important if they are to continue to play a major part in service provision.
18. Some Regional and many District Health Authorities have failed to take on the sense of urgency which central government has been attempting to transmit. Drugs services find themselves competing for resources against a background of prejudice and entrenched existing medical services.
19. Many of the recommendations of the Advisory Council on the Misuse of Drugs report "Treatment and Rehabilitation (1982) have still not been implemented. In particular those relating to District Drug Advisory Committees and Regional and District treatment services have not been taken up. The former is extremely important as a co-ordinating forum for a diverse range of agencies working with the problem eg, police, probation, education, social services, health service and voluntary bodies.
20. The subject of substance abuse needs to be given far higher priority in the qualifying courses for all professionals likely to come into contact with the problem. This matter was addressed in the ACMD report on Prevention but the position has not yet changed.
21. There is a need for the development of specialist diploma level courses in drug studies similar to those currently run for alcohol studies at Paisley College of Technology and the University of Kent.
22. The number of existing workers with drugs service experience is limited. There needs therefore to be much greater attention paid to in-service training. The costs of this must be reflected in grant allocations to both statutory and non statutory bodies. It should extend from trainee medical posts in treatment centres to the preparation of volunteers in advice and counselling agencies.

4. The utility of volunteers is limited. Whilst they can make a major contribution they cannot substitute for the professional fully-trained worker in either statutory or non statutory agencies.

25. The current health education programmes are not likely to be effective. No evidence exists to prove that such approaches have any major impact. There is a risk that warnings may be seen and accepted as a challenge by young people who are already, as a normal part of their development, challenging adult standards. Better results are likely to be achieved by the sensitive introduction of drugs education into school curricula following the appropriate training of school teachers.

Brian K Arbery - Chief Executive, Turning Point
Dr John W Mack - Psychiatrist, Hackney Hospital Drug Dependency Unit;
Member of Council of Management, Turning Point.

31 May 1985



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CAP House 9/12 Long Lane London EC1A 9HA Tel: (01) 606 3947/9

BA/TJS/2990

30 May 1985

The Rt Hon Margaret Thatcher MP
Prime Minister
10 Downing Street
LONDON SW1

Dear Mrs Thatcher

I thought I would write and say how delighted I was to meet you at our Suffolk House project on Tuesday. The staff and residents at the project greatly appreciated your concern and understanding of the problems being faced by drug users. As I mentioned to you, I have no doubt that your interest in this matter will go a considerable way towards increasing public awareness of the difficulties faced by drug users in recovering from their addiction. It is only by visits such as yours that society as a whole will begin to see that drug users are not simply deviant but people desperately in need of help.

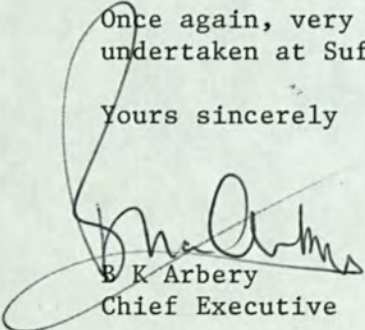
Following your request, Dr John Mack and I will be sending you very shortly a document containing our thoughts on how the drug problem might be dealt with particularly in terms of services for users. We will also be seeking advice from our project staff on this.

We have no doubt that the drugs problem is a major threat to our current society and if we can play some small part in assisting policy makers in combatting the issue we would be only too pleased to do so.

As you may recall, you offered to open the extension to Suffolk House if this goes ahead. I hope that I will be able to remind you of this when that day arrives.

Once again, very many thanks indeed for your interest in the work being undertaken at Suffolk House.

Yours sincerely


B K Arbery
Chief Executive

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