

DH announces pooled treatment budget

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Drug treatment services across the country will receive an extra 95.2m this year, the Public Health Minister Caroline Flint announced today.

The Department of Health, supported by 22m of funding from the Home Office, will provide Drug Action Teams with 394.6m an increase of over 30% from last year. This funding will be used to invest in personnel, day-to-day running of services, and building and refurbishment of premises.

The aim will be to get more people into treatment and away from a life of drugs and crime.

Drug Action Teams will also be able to bid for a portion of a further 54.9million, for the development of inpatient and residential rehabilitation services in 2007/08.

Caroline Flint said: For every 1 spent on drug treatment, at least 9.50 is saved in crime and health costs. That is why this extra funding is great news for the NHS and the general public, as well as for users of drug treatment services. This funding will help to provide a life away from drugs for the user and a new future for families, friends and communities affected by the impact of drug addiction.

Record amounts of funding have already resulted in record numbers of people entering and staying in treatment. Thousands of people are now free from addiction, and in communities across the country drug-related crime is falling. But there is still room for improvement. We have succeeded in widening access to services, and now we must concentrate on improving the effectiveness of drug treatment. Today's announcement of an increase in funding underlines our commitment to take on this challenge.

Martin Barnes, Chief Executive of DrugScope, said: "DrugScope recognises the competing demands on health spending but investment in drug treatment is proven to be very cost-effective and brings substantial benefits to communities, families and individuals.

There will be disappointment that the increase is less than planned but given the pressures on Department of Health spending the increase, which is still significant, should be welcomed and supported.

Although the headline target for numbers in treatment has been met two years ahead of schedule, the increase will enable more to be done to improve the quality of drug treatment and aftercare support, such as helping former drug users with housing, training and employment. The additional funds for residential rehabilitation services is good news but, as well as increasing the number of places, the systems for funding and referring drug users to rehab centres also need to be improved."

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