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Drug Demand Profile - Arun

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Public Health and Social Research Unit

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Contents

Local Context	3
Population and geography	3
Population demographics.....	4
Age distribution	4
Ethnicity and nationality distribution	6
Multiple Deprivation and local inequalities	9
Index of Multiple Deprivation (IMD2019)	9
Prevalence	10
Criminal activity and Drug offences	10
British Transport Police – Drug related incidents.....	12
Impacts in the community.....	14
Multiple disadvantage Audit	14
Housing and support needs.....	18
Housing and homelessness support providers.....	20
Employment and economic inactivity	23
Early Help.....	24
Children’s Social Care	27
School exclusions and suspensions	31
CGL - Referrals from Education for Under 18s	32
Exploitation.....	34
Cuckooed Properties	35
Youth Justice Therapeutic and Family Interventions	35
Probation Services.....	37
CGL – People in structured treatment and Naloxone provisions.....	40
Impacts on health.....	47
Accident and Emergency attendances	47
Ambulance attendances.....	52
Deaths related to substance misuse	54
Community Engagement	56
Professionals’ Survey.....	56
Residents’ Survey	65
CGL – Service Users’ Survey.....	72
‘Serious Violence in West Sussex’ School Survey.....	78
Dissemination Plan	82

Local Context

In 2021 the UK Government published a 10-year drugs strategy “From harm to hope: A 10 year drugs plan to cut crime and save lives”. As a result of the new strategy, it was required that every local authority have a strong partnership that brings together all the relevant organisations and key individuals. The West Sussex Drug and Alcohol Partnership (WSDAP) was created with a statutory duty to follow the new national drug strategy: breaking drug supply chains, delivering a world-class treatment and recovery system and achieving a generational shift in the demand for drugs.

The WSDAP understand that to reduce local demand for drugs, it is necessary to work with local partnerships to conduct research activities to create local area profiles of resilience and risk factors of substance misuse for the diverse local geographies across the county, with the ambition to assign partnership leads to the identified priority areas of work resulting from such profiles.

For a better understanding of the results in this report, it is important to have a clear picture of Arun population characteristics and its community. Once we know the local context of the study, it should help us to describe and explain some of the analysis and conclusions on this report.

To understand Arun local context we need to focus on:

- Population and geography
- Population demographics
- Multiple Deprivation and local inequalities

Population and geography

Arun is on the South coast of England and is a local government district council in West Sussex. It is bordering with Horsham to the North, Worthing to the East and Chichester to the West. It is well connected to London and other neighbouring areas by road and rail lines. Brighton and Hove are to the East, and Portsmouth and Southampton to the West. London is 90 minutes away by direct rail line.

Arun has an area of 221 Km² with 164,892 people with a density of 746 people per square kilometre, the 32nd most densely populated of the South East's 64 local authority areas.

Arun has two areas considered Urban around the towns of Bognor Regis and Littlehampton and the rest made of rural towns and villages.

In Arun, 2% of the population can access a hospital within 30 minutes by public transport, nearly all the population have access to the hospital within 30min by car. To access the GP, 1% of the population will need to travel over 30 minutes by public transport or by walking, the majority of those, are situated on the outskirts of Littlehampton between Arundel and Worthing¹.

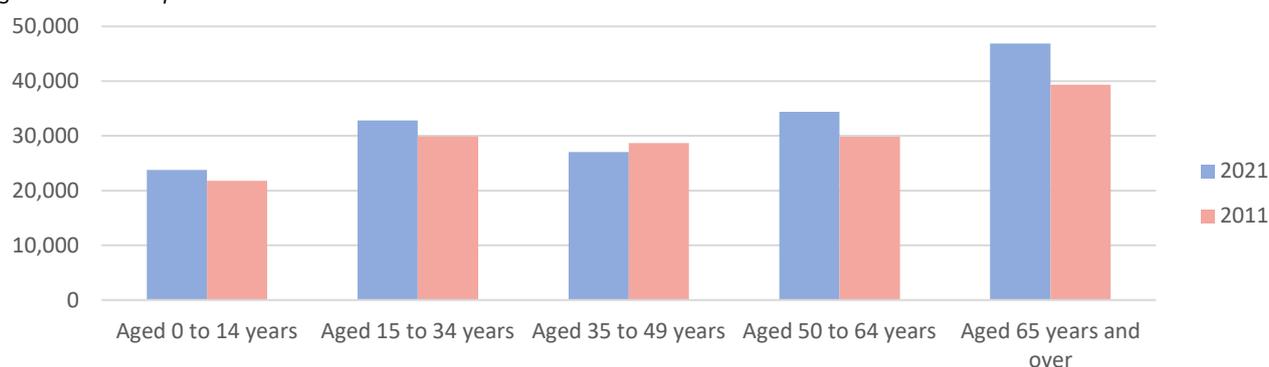
At the time of the 2021 Census, 882,700 people² lived in West Sussex of which 165,000 lived in Arun. Between 2011 and 2021, the population in Arun increased by 10.3% this was higher than the South East growth (7.5%). The median age was 49 years, an increase by 2 years compared to 2011 census; the biggest increase in population has been for the groups of age 50 and over (Figure 1), while the group aged 35 to 49 has reduced.

¹ Source: [SHAPE - Shape \(shapeatlas.net\)](https://shapeatlas.net)

² Source: ONS, UK Census 2021

The life expectancy at birth for males is 79.6 years and in females is 83.7, below to West Sussex figures (80.8 and 84.1 respectively)³.

Figure 1: Arun - Population in 2021 and 2011



Source: ONS, UK Census 2011, 2021

Population demographics

This profile uses a variety of information only available from the Census, such as data on ethnicity, language, so have used the last figures from the 2021 UK census, which are still relevant for the purpose of our analysis.

There are approximately 164,892 people in Arun, an increased by 10.3% compared with 2011 UK census. The average growth for the South East has been 7.5% and 9.4% for West Sussex.

Table 1: West Sussex 2021 population by districts and boroughs

Population	Adur	Arun	Chichester	Crawley	Horsham	Mid Sussex	Worthing	West Sussex	South East	England
2011	61,182	149,518	113,794	106,597	131,301	139,860	104,640	806,892	8,634,750	53,012,456
2021	64,544	164,892	124,068	118,493	146,778	152,566	111,338	882,676	9,278,065	56,490,048
Change	3,362	15,374	10,274	11,896	15,477	12,706	6,698	75,784	643,315	3,477,592
% Change	5.5%	10.3%	9.0%	11.2%	11.8%	9.1%	6.4%	9.4%	7.5%	6.6%

Source: ONS, UK Census 2011, 2021

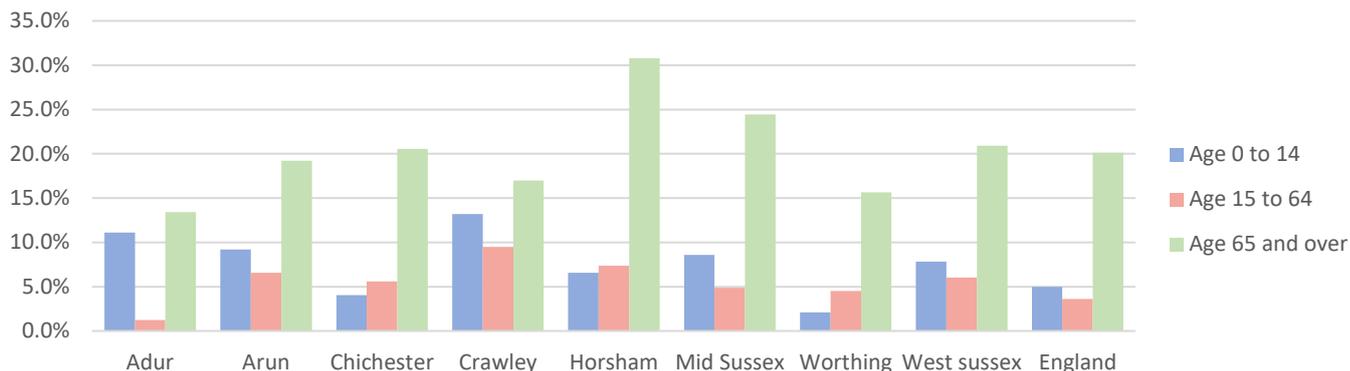
If we compare Arun with other areas in West Sussex, the population has increased more in Arun than Adur and Worthing, with 5.5% and 6.4% respectively. On the other hand, the population in Horsham and Crawley have increased more with 11.8% and 11.2%.

Age distribution

In West Sussex context, Adur, Arun, Crawley, Horsham and Mid Sussex districts have all seen increases in those aged under 15 years, above the England average of 5.0%, with Arun at 9.2%.

³ Source: <https://fingertips.phe.org.uk>

Figure 2: 2011-2021 Population Percentage Change by Age Group West Sussex

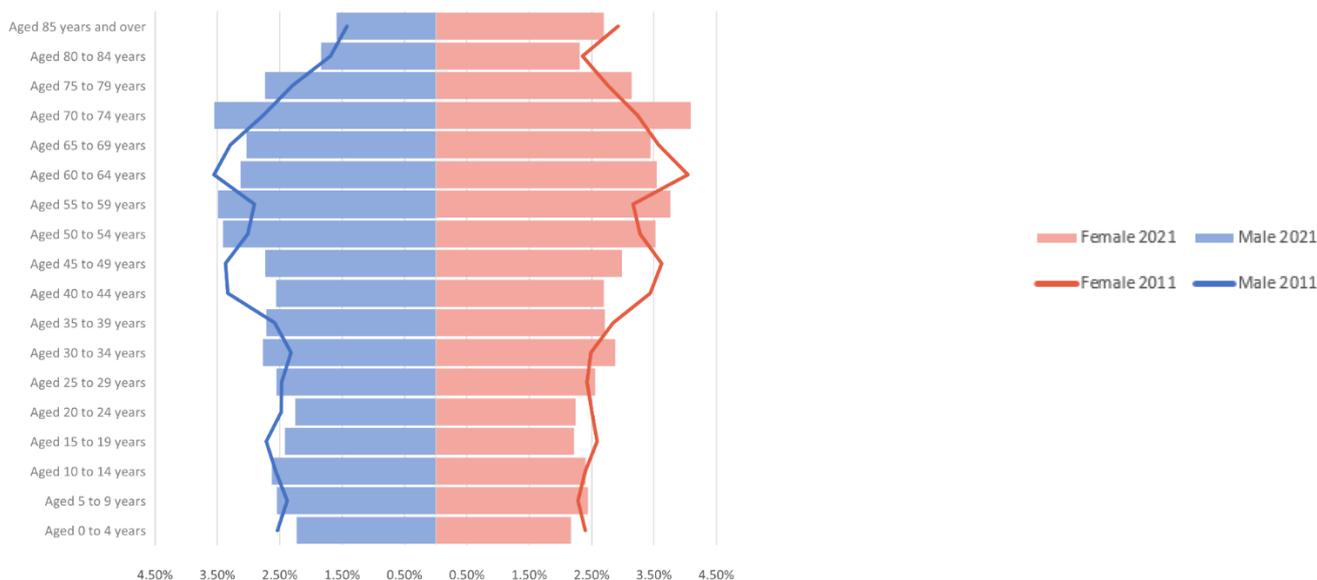


Source: ONS, UK Census 2011, 2021

It is also important to note that in Arun the age group of 65 years or over has grown by nearly 20%, similar to the overall growth in West Sussex and England. The group with lowest increase was the 15 to 64 year group with just 6.6% growth.

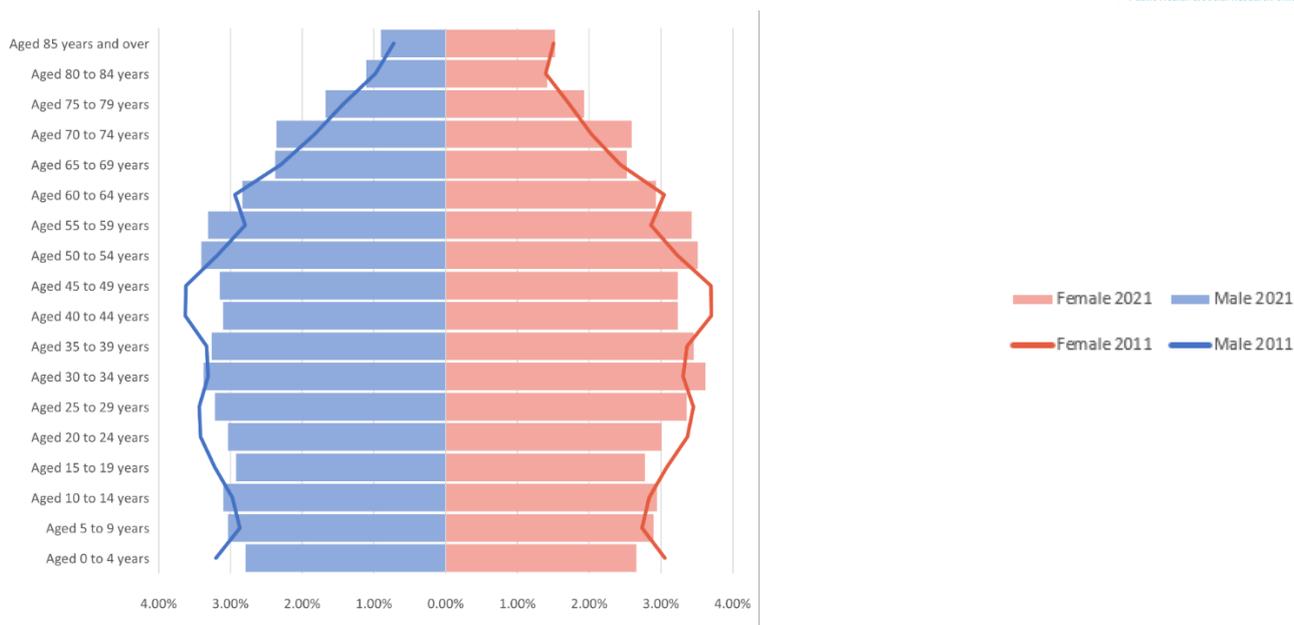
If we compare the data from the 2011 Census with the 2021 Census (Figure 3), we can see how the population has changed. In recent years we can see how the population is aging at higher rate than new births. We also can see that as life expectancy for women is higher than men, the proportion of the population of women aged 85 years or over is 2.7% compared to men 1.6%.

Figure 3: 2011-2021 Arun Population by Age



Source: ONS, UK Census 2011, 2021

Figure 4: 2011-2021 Population Percentage Change by Age England

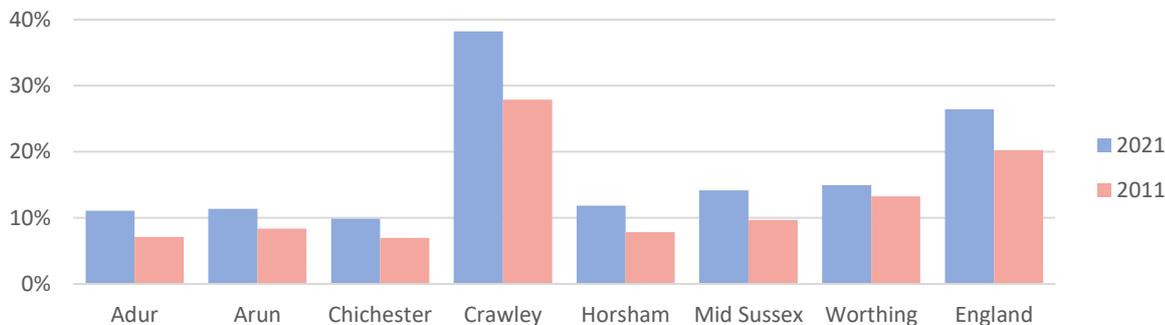


Source: ONS, UK Census 2011, 2021

If we compare the population pyramids between Arun and England (Figure 3 and 4), we can see that Arun has an older population. In Arun the proportion of population from 65 is bigger than England, 28.4% and 18.4% respectively, while the proportion of young people from 15 to 39 is smaller, 25.3% and 32%.

Ethnicity and nationality distribution

Figure 5: West Sussex - BAME composition 2011 - 2021 (Includes 'White Irish', 'Gypsy/Traveller', 'Roma' and 'Other white').

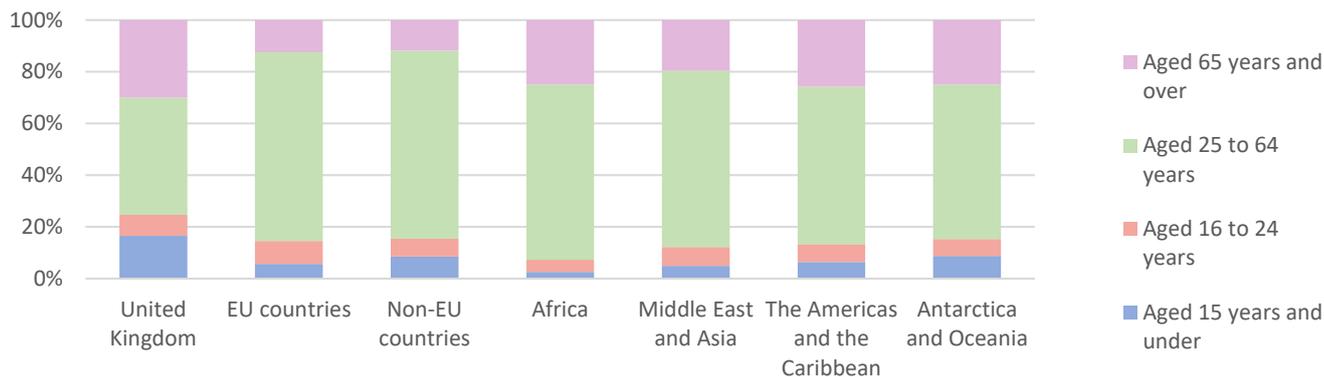


Source: ONS, UK Census 2011, 2021

Minority ethnic communities in West Sussex are increasing across all seven districts and boroughs, of note Crawley, the percentage of the population from an ethnic minority has increased by over 10% in the last 10 years (Figure 5). In Arun, minority groups have increased from 8.3% of the population in 2011 to 11.3% in 2021. All the minority groups have seen their population grow, but the group that has seen highest increase is 'Other White non UK ethnicity' which represent 6.6% of Arun population.

If we analyse the population by country of birth, nearly 11% of the population was born outside the UK, the majority from EU countries (6.7%). From people born outside the UK, the vast majority are aged between 25 and 64 years (Figure 6).

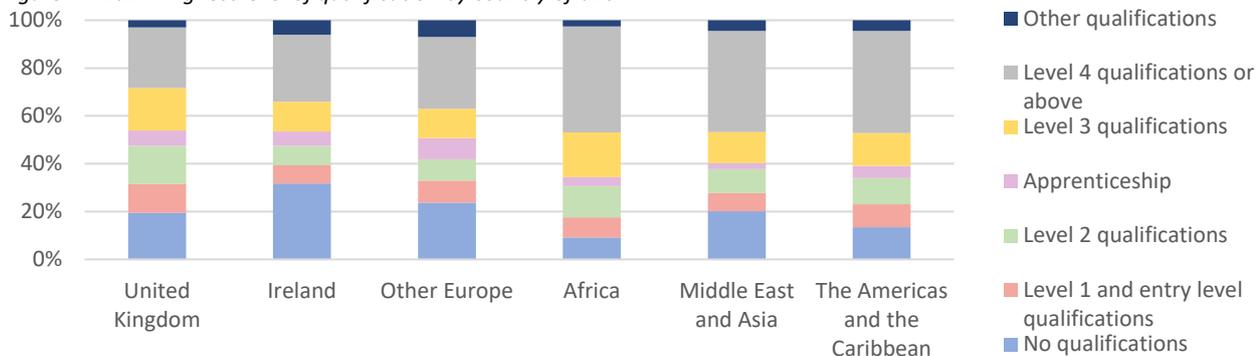
Figure 6: Arun – Age population by country of birth



Source: ONS, UK Census 2011, 2021

Analysing the level of education of those born outside the UK (Figure 7) we can see the proportion with Level 4 (e.g., university education) or above is higher than the population born in UK, especially people born in Africa, Middle East and Asia and the Americas and the Caribbean.

Figure 7: Arun – Highest level of qualification by country of birth



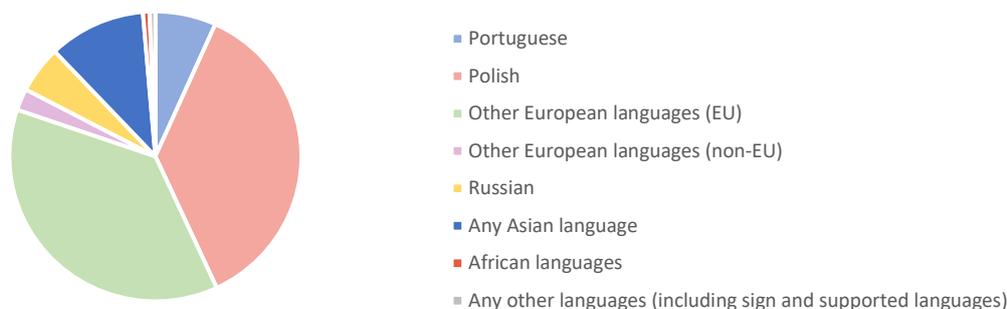
Source: ONS, UK Census 2011, 2021

People living in Arun coming from outside the UK are more likely to be between 25 to 64 years old, with a higher level of education.

First language

In Arun there are a variety of main languages spoken and 6% of the population do not have English as their main language. Polish is the main language of 2.6% of Arun’s population (over 3,000 people).

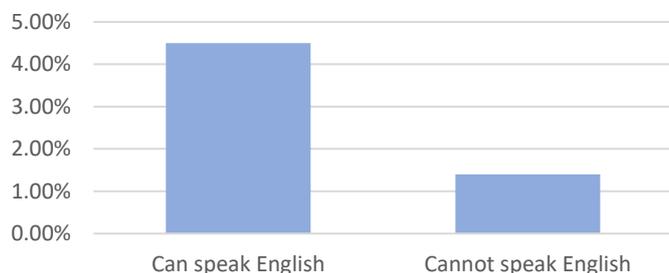
Figure 8: Arun – Main language spoken rather than English.



Source: ONS, UK Census 2011, 2021

In the figure below we can see the proficiency in English in Arun. English is the main language for the 94% of the population. From all of those with a different main language, 24% cannot speak English which represents 1.4% overall population.

Figure 9: Arun – Percentage of population with English as a second language



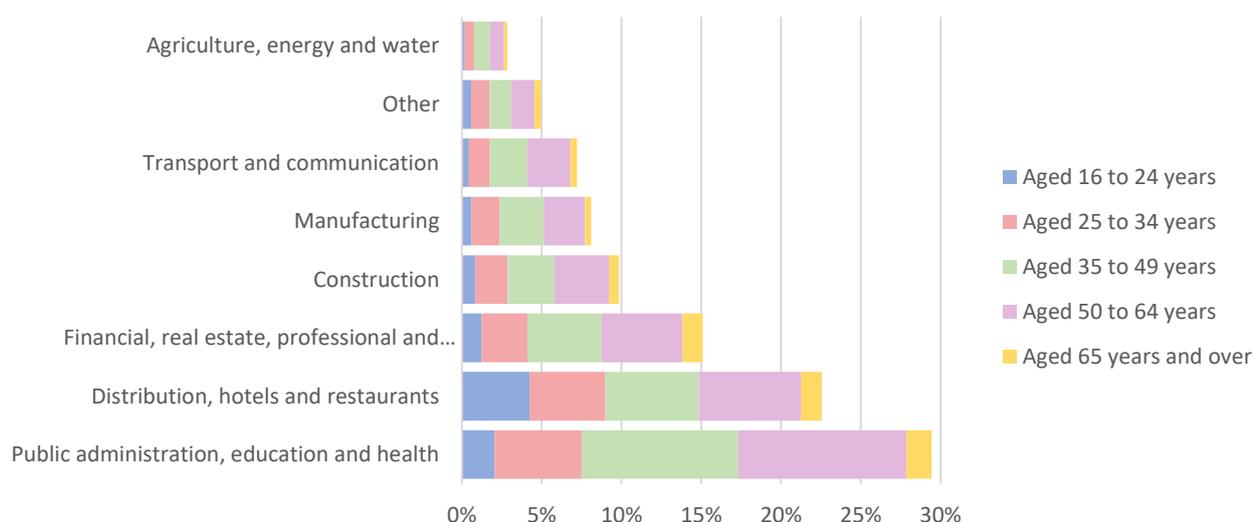
Source: ONS, UK Census 2011, 2021

Economy in the area

The distribution of Arun economic activity is similar to the other Districts and Borough of West Sussex. In Arun the main economic activities are those relevant to public administration, education and health. The second and third most important industries are hospitality and financial, real estate and administrative activities.

If we analyse the economic activities by age, most of the population in employment aged 16 to 24 are working in hospitality and distribution while those aged between 35 and 65 are working in public administration, education and health. See figure 10.

Figure 10: Arun – Economic Industry by Age



Source: ONS, UK Census 2011, 2021

Multiple Deprivation and local inequalities

There are different social factors that have an impact in substance misuse, from housing and employment to mental health and access to different services and living in a deprived area. By analysing the context of deprivation in local communities we can understand these wider determinants of inequality.

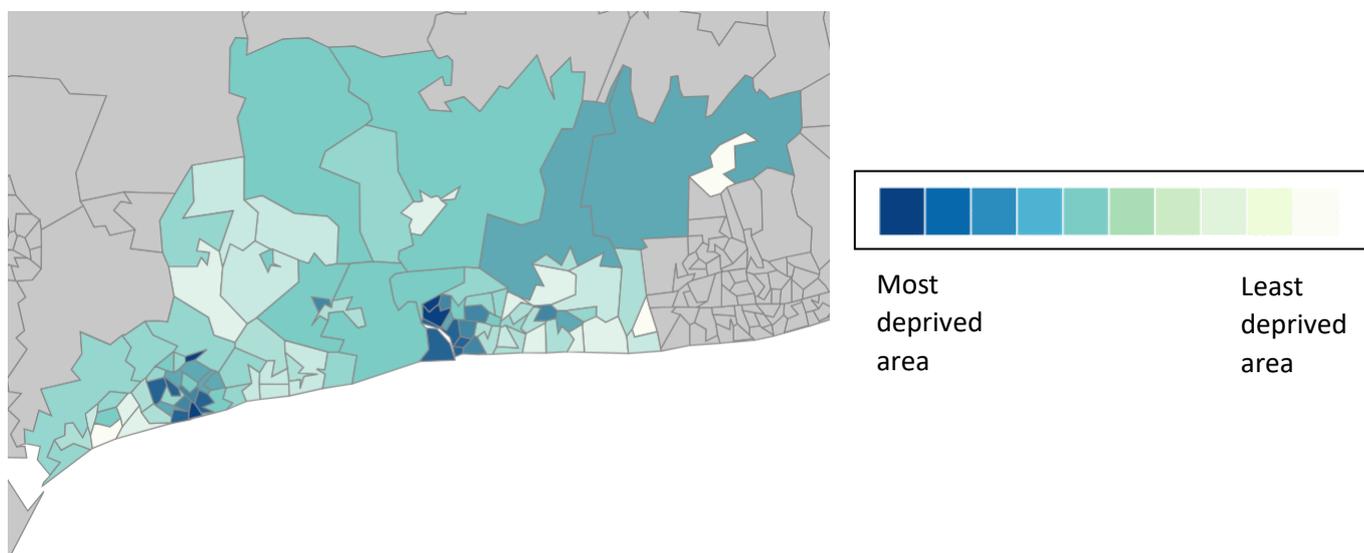
Index of Multiple Deprivation (IMD2019)⁴

The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation in England. It is based in 39 separate indicators, organised across 7 domains of deprivation which are combined and weighted to calculate the Index of Multiple Deprivation. The result is an overall measure of multiple deprivation experienced by people living in an area and is calculated for every neighbourhood area in England.

IMD divides England into small areas (called Lower Super Output Areas referred to as LSOAs) of approximately 1500 people and each area is ranked with a value between 1st (most deprived area) to 32844th (least deprived area). The map below shade areas according to decile grouping, with the most deprived 10% of neighbourhoods shaded dark blue, the least deprived 10% shaded light yellow.

Arun has 94 LSOAs, and the most deprived area in Arun ranked nationally as the 1891st most deprived area in England.

Figure 11: Arun – IMD areas⁵.



In total Arun has 4 LSOAs within the 10% most deprived neighbourhoods in England. These are in Bognor and Littlehampton

When analysing the four most deprived areas across the seven domains of deprivation, these areas have scored poorly in relation to Education and Health with all four areas ranked in the decile 1, Income and Employment have also received a poor score between 1 and 2 deciles.

⁴ Source: [English indices of deprivation 2019 - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

⁵ Source: [Microsoft Power BI](#)

Looking across all the various domains of deprivation, it is clear that deprived areas in Arun ranked poorly on education and barriers to housing and services. The areas ranked better on issues such as crime and environment.

Prevalence

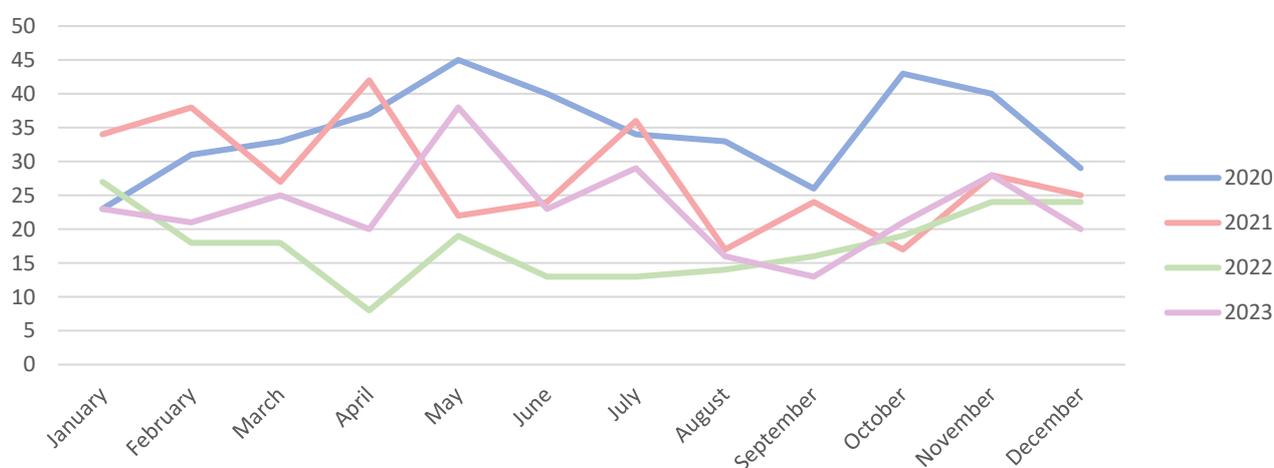
The following data will aim to describe the scale of drug activity in Arun.

Criminal activity and Drug offences

Below we can find the drug related crime recorded by Sussex Police from January 2020 to December 2023 in Arun. Arun has been compared with other areas in West Sussex.

During the period analysed, there were 1,238 offences recorded as drug crime by Sussex Police. 2020 was the most active year while 2022 was the least active. The number of offences varies by month, as seen in the figure below.

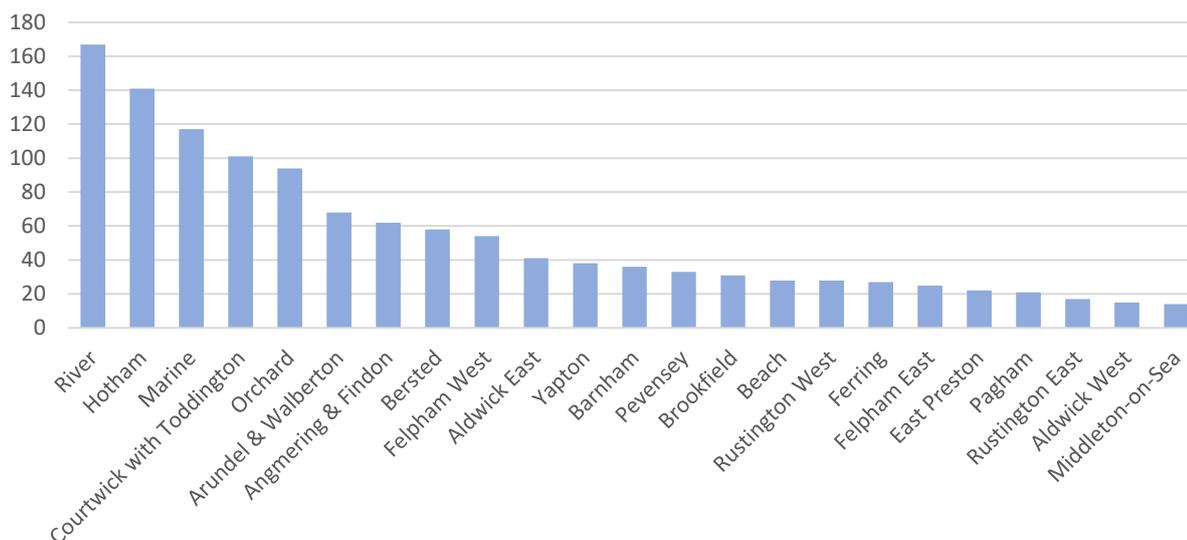
Figure 12: Offences recorded as “drug crime” by Sussex Police 2020-2023



Source: data.police.uk/data/

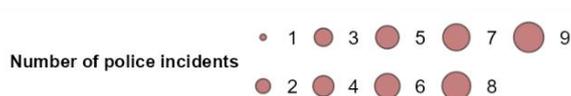
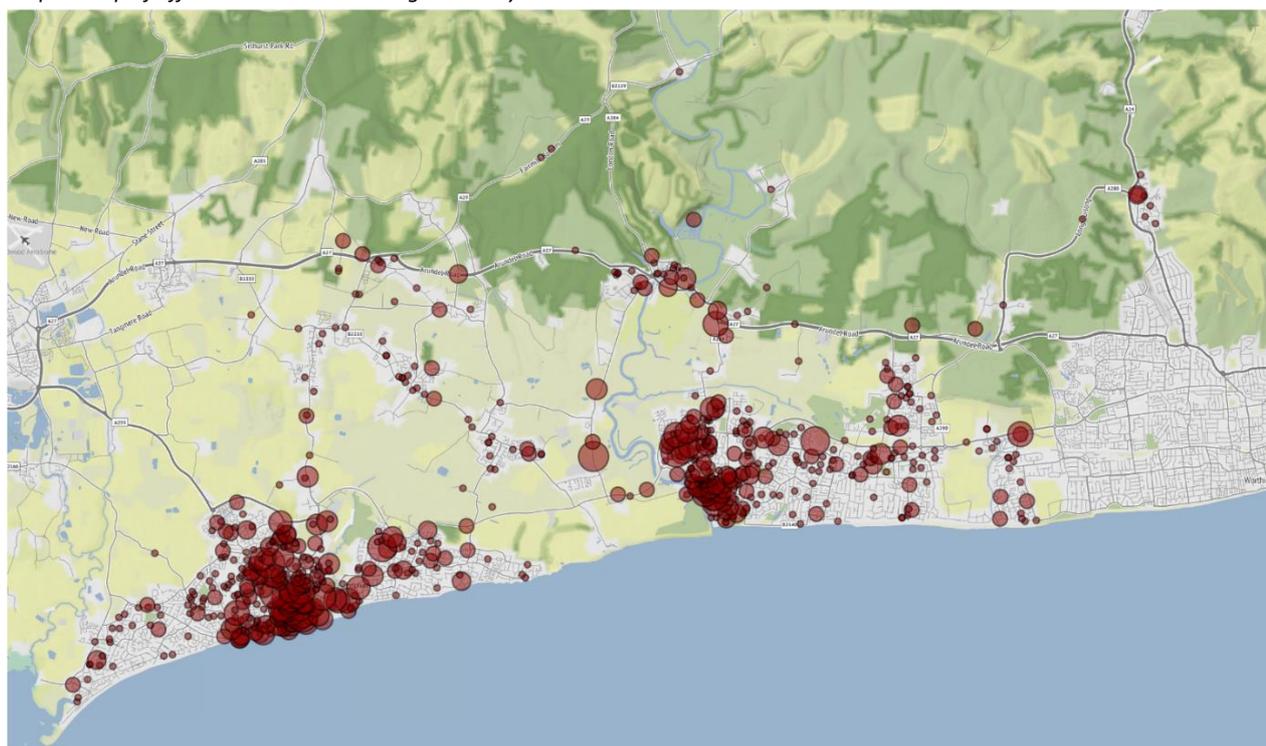
The wards with the highest number of offences recorded as “drug crime” were River and Hotham.

Figure 13: Offences recorded as “drug crime” by Wards 2020-2023



Source: data.police.uk/data/

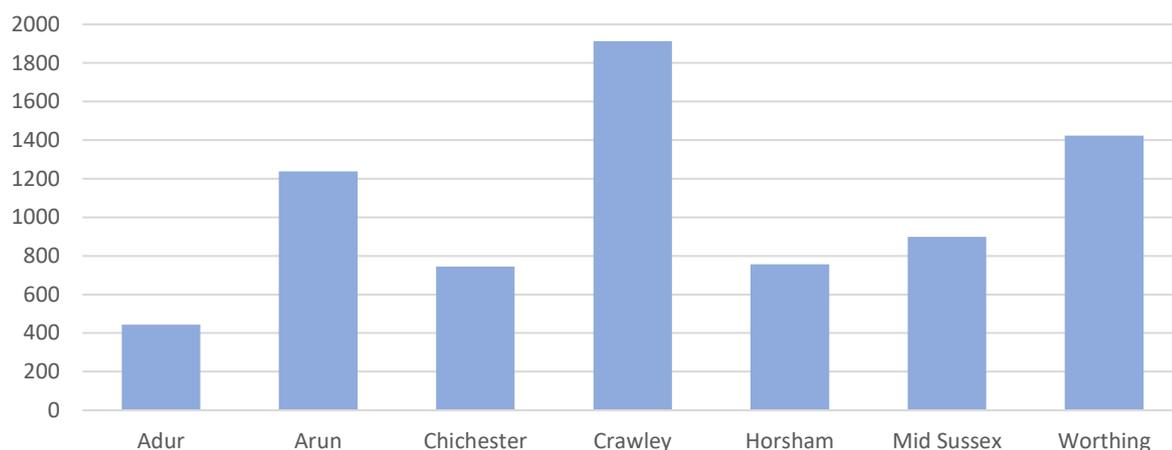
Map 1: Map of offences recorded as “drug crime” by Sussex Police 2020-2023



Source: data.police.uk/data/

If we compared the drug offences from Arun with the rest of West Sussex, Arun is the third area with more drug offences overall. Crawley stands out as the locality with the highest number of offences. It should be noted that higher levels could reflect specific local programmes and initiatives, such as the “Clear, Hold, Build” programme in Crawley.

Figure 14: Drug offences – West Sussex 2020-2023



Source: data.police.uk/data/

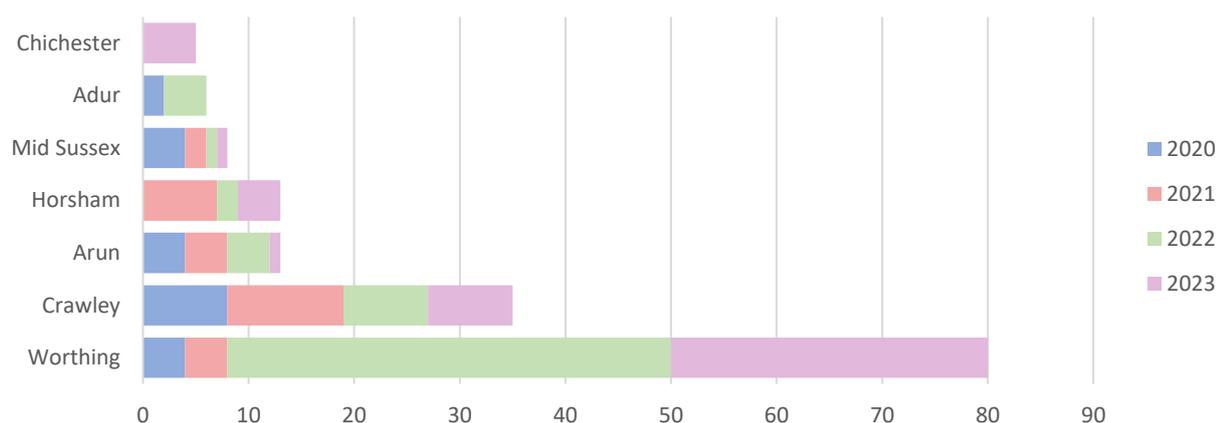
British Transport Police – Drug related incidents

In addition to the information from Sussex Police, it is helpful to understand drug related offences recorded by British Transport Police (BTP). Train lines are used to transport drugs, including as a method of transport used by county lines.

British Transport Police (BTP) have provided information of drug related incidents for the period 1st January 2020 to 31st December 2023.

Over the period analysed, BTP has 160 drug related incidents in West Sussex. 2022 was the year with more incidents, twice as many cases than 2021. From 2022 to 2023 drug incidents reduced by 20%. In this period, Arun had 13 offences which just one was in 2023.

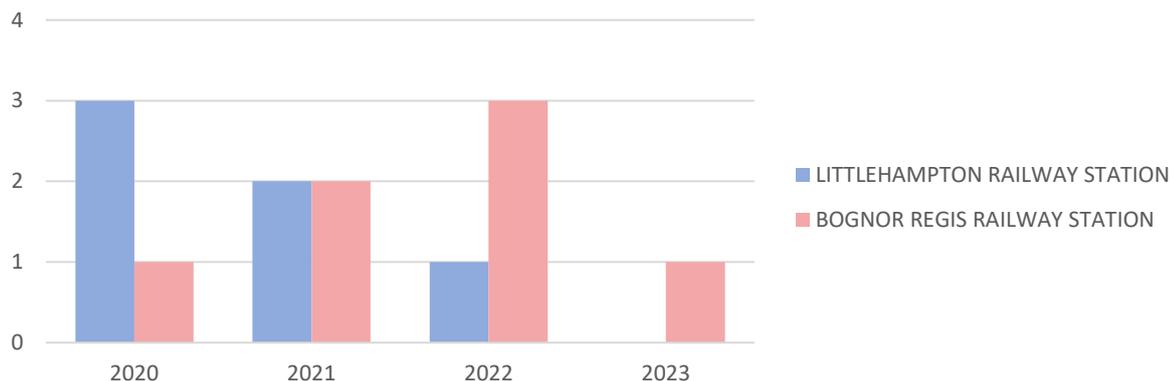
Figure 15: BTP – Drug related incidents West Sussex 2020 - 2023



Source: BTP

From the incidents recorded in Arun, there are two main train stations identified, Littlehampton and Bognor Regis with a similar number of incidents over the period. In 2020, 2021 and 2022 there were four incidents, in 2023 one.

Figure 16: BTP – Drug related incidents Arun 2020 – 2023



Source: BTP

Cannabis (in the form of resin or sativa) was recorded in 10 incidents, the other incidents BTP referred as “Suspected Class B”, “Amphetamines – non injection” or is unknown; similar to West Sussex where cannabis (and derivatives) represents 71% of incidents.

Offences – by Demographic Background

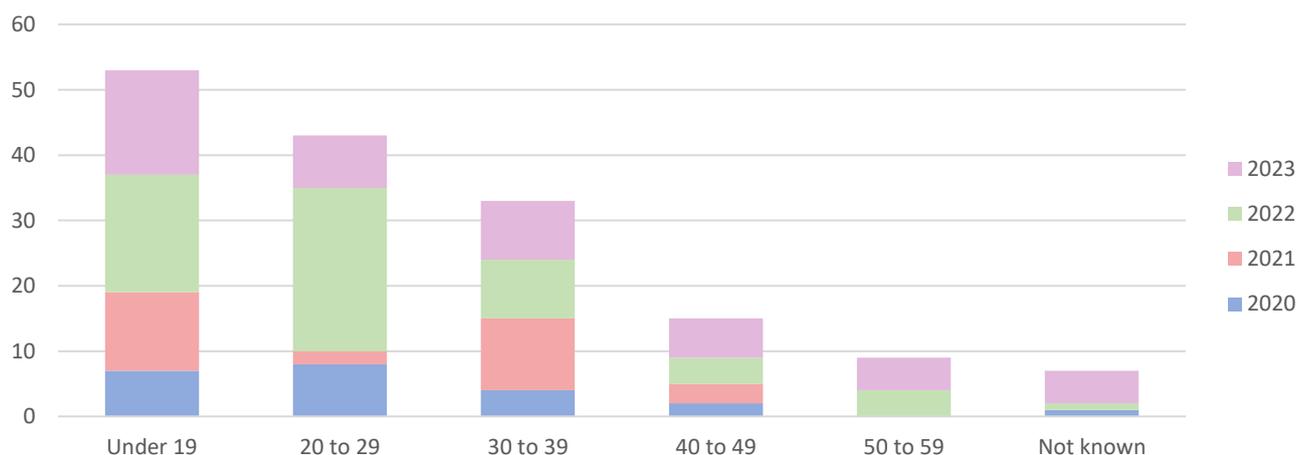
Note : Due to small numbers for reasons of confidentiality, we have received the data for West Sussex overall and not by district and borough.

By age, on the figure below, we can see how the younger people account for most of the drug incidents.

The age band under 19 gather most incidents over the period, 2022 was the year with more incidents (18) but 2021 the year with higher proportion (42%).

The age band 20 to 29 has the most incidents recorded in 2022 (25 incidents and 41% of incidents on that year).

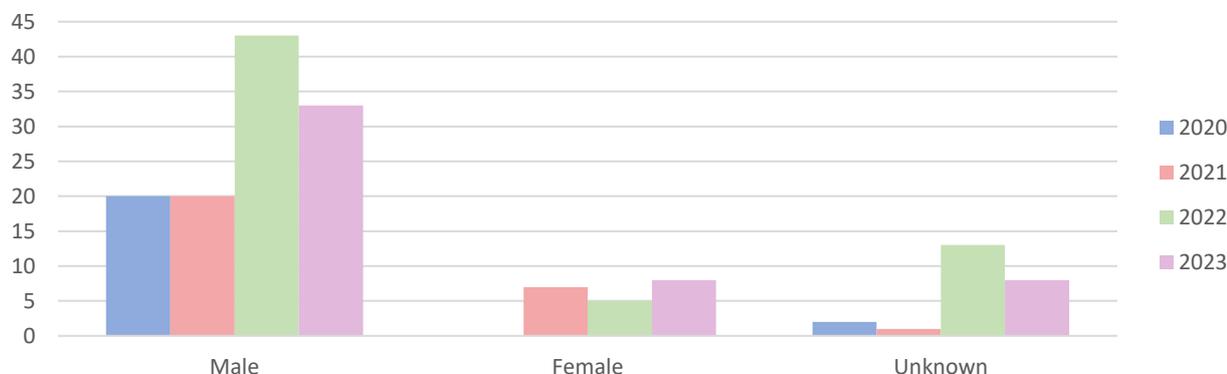
Figure 17: BTP – Drug related incidents by age West Sussex 2020 - 2023



Source: BTP

By gender, males represent the 72.5% of all drug related incidents, females are the 12.5% and the rest are unknown. From 2022, despite the number of incidents for males increasing, the percentage of males on drug incidents are reducing due to females and unknown raising.

Figure 18: BTP – Drug related incidents by gender West Sussex 2020 - 2023



Source: BTP

Key points:

- From January 2020 to December 2023 there were 1,238 offences recorded as drug crime by Sussex Police in Arun. The wards with the highest number of offences recorded as “drug crime” were River and Hotham.
- British Transport Police recorded 13 drug related incidents in Arun between 2020 to 2023, Littlehampton railway station and Bognor Regis railway station are the two main stations reported. Bognor Regis had higher activity in the last two years compared with Littlehampton. *(Although note small numbers)*
- Cannabis (and derivatives) were recorded in 10 incidents.
- Using data at a West Sussex level, we know that young males account for most incidents.

Impacts in the community

Multiple disadvantage Audit

A multiple disadvantages audit is completed each quarter by West Sussex housing support teams, the local housing authority as well as homelessness and housing service providers capture information about co-occurring needs alongside housing situation/ homelessness.

From April 2021 until December 2023, West Sussex housing support team received a total of 6,085 clients data returns from local housing authority, homelessness, and housing service providers. *(Note: Some clients would have been included in multiple quarterly reports, as they were still engaging with housing support services).*

In the table below we can see the data returns and of note, how many had substance misuse recorded as a need and how they compared to West Sussex.

Table 2: Clients' returns with substance misuse received by changing futures

		West Sussex			Arun		
		Substance Misuse	%	Total Clients	Substance Misuse	%	Total Clients
2021	April - June	295	56.2%	525	77	46.1%	167
	July - Sep	331	59.0%	561	91	50.3%	181
2022	Jan - Mar	410	70.9%	578	136	60.7%	224
	April - June	386	59.6%	648	124	55.4%	224
	July - Sep	385	61.6%	625	122	58.9%	207
	Oct - Dec	191	61.0%	313	32	54.2%	59
2023	Jan - Mar	361	57.2%	631	105	54.1%	194
	April - June	370	58.9%	628	113	63.5%	178
	July - Sep	406	55.5%	731	125	53.0%	236
	Oct - Dec	461	54.6%	845	170	52.5%	324
Grand Total		3596	59.1%	6085	1095	54.9%	1994

Source: Changing Futures

At the beginning of the period analysed, the multiple disadvantage audit shows that Arun had a smaller percentage of returns which noted a substance misuse problem, but over the period this percentage has been increasing and in 2023 was similar to West Sussex.

From all returns received by the programme without substance misuse, 80% are from males and 19.4% from females, with substance misuse, 82.6% are from males and 17% from females.

If we focus just on the clients with a substance misuse need identified we can see that over the period, for West Sussex, the percentage of clients known to treatment services has been relatively stable and neither has improved the percentage of clients engaging with treatment. In Arun, clients were less likely to have a substance misuse need, and of those who have a substance misuse need they were more likely to be known to treatment services and to be in treatment.

Table 3: Clients with substance misuse received by changing futures known or engaged to treatment services

		West Sussex				Arun			
		Substance Misuse	% Known to services	% Engaging with treatment	% Opiate substitution prescription	Substance Misuse	% Known to services	% Engaging with treatment	% Opiate substitution prescription
2021	April - June	295	n/a	35.93%	20.00%	77	75.32%	49.35%	16.88%
	July - Sep	331	n/a	39.88%	22.36%	91	65.93%	48.35%	19.78%
2022	Jan - Mar	410	60.24%	36.34%	21.46%	136	50.74%	37.50%	16.91%
	April - June	386	63.21%	30.05%	22.02%	124	58.87%	34.68%	19.35%
	July - Sep	385	54.29%	34.29%	24.68%	122	64.75%	42.62%	20.49%
	Oct - Dec	191	57.07%	35.08%	24.08%	32	46.88%	37.50%	18.75%
2023	Jan - Mar	361	50.42%	34.90%	22.44%	105	68.57%	47.62%	20.00%
	April - June	370	51.35%	35.95%	21.35%	113	72.57%	53.10%	15.93%
	July - Sep	406	68.23%	33.50%	20.94%	125	72.80%	43.20%	15.20%
	Oct - Dec	461	63.77%	31.02%	19.31%	170	68.24%	35.88%	15.88%
Grand Total		3596	58.99%	34.48%	21.72%	1095	65.30%	42.47%	17.72%

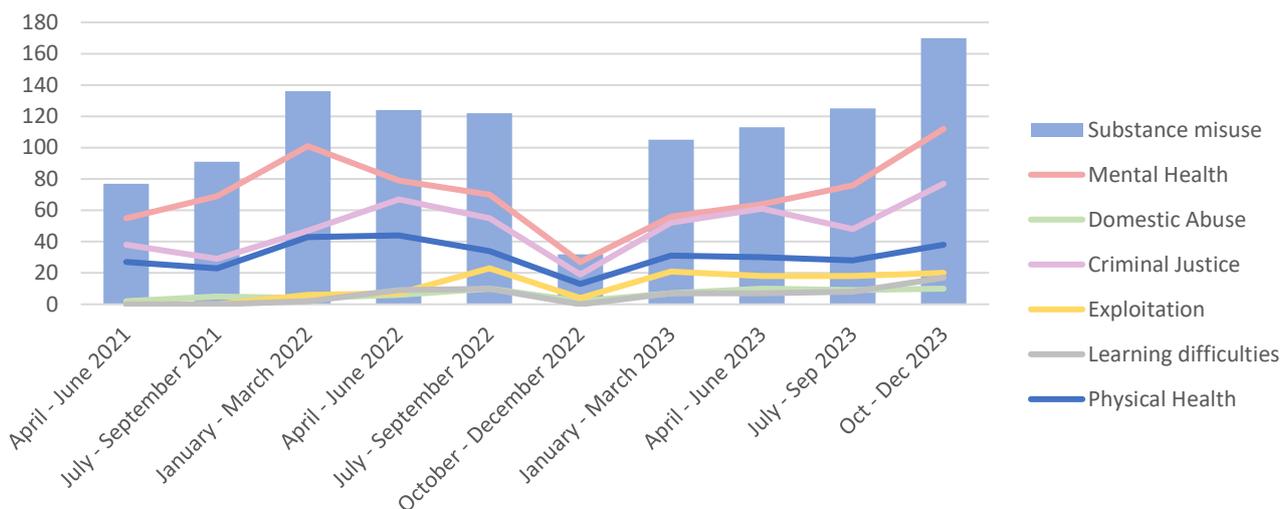
Source: Changing Futures

71.5% of females with substance misuse in Arun are known to treatment services, while for males the percentage drops to 64%, (West Sussex females 74.1% and males 61.8%)

Multiple disadvantage

In the graph below, we can see what other disadvantages people with housing problems and substance misuse are facing. Mental health issues were identified in 64.7% of returns of people with substance misuse, lower than West Sussex (76.8%). The second biggest issue identified was having a history of offending (45% of returns). Exploitation is affected on 10.7% of returns for Arun, while for the rest of West Sussex exploitation is affected on 16.7% of returns (with substance misuse).

Figure 19: Arun - returns with multiple needs



Source: Changing Futures

There were 709 returns from clients with substance misuse and mental health problems, of those, just 27.3% of returns were having treatment for both issues at the same time, and 18% of returns are not getting any treatment for mental health or substance misuse.

47% of returns are from people who are in treatment for just one issue.

Table 4: Arun - returns with substance misuse and mental health - treatment

Age	Mental health issues and Substance misuse	Solely in receipt of Substance Misuse treatment	Solely in receipt of in specialist Mental Health services	Both	Neither	Unknown MH or SM treatment
18-24	31	1	19	8	1	2
25-40	308	30	104	86	58	30
41-60	342	36	128	94	63	21
61-79	28	2	12	6	6	2
Grand Total	709	69 (10%)	263 (37%)	194 (27%)	128 (18%)	55 (8%)

Source: Changing Futures

Changing Futures

Changing Futures is a programme carried out in Sussex with the objective of improving the lives of those experiencing multiple disadvantages in Sussex. Multiple disadvantage or multiple complex/compound needs is defined by the programme as people who experience three or more of:

- homelessness,
- current or historical offending,
- substance misuse,
- domestic abuse
- and mental ill health.

As of August 2024, there have been a total of 226 clients nominated for support from the Changing Futures Programme, and of those, 132 were accepted to received support, unfortunately we do not have the information by local area.

The most common combination of compounding needs for individuals accepted onto the Changing Futures caseload were Housing issues, Substance misuse, Mental health issues with histories of Offending behaviour and Domestic violence (27%).

Table 5: Matrix of compounding needs for individuals accepted onto Changing Futures caseload Nov '22 – Aug '24

Mental Health issues	Domestic Violence	Substance Use issues	Offending Behaviour	Homelessness or Housing issues	Individuals	% of all referrals
MH	DV	SU	OB	HH	36	27.3%
MH		SU		HH	24	18.2%
MH		SU	OB	HH	20	15.2%
MH	DV	SU		HH	19	14.4%
MH	DV			HH	12	9.1%
MH	DV	SU			5	3.8%
MH	DV	SU	OB		5	3.8%
	DV	SU		HH	3	2.3%
MH			OB	HH	<3	n/a
MH	DV		OB	HH	<3	n/a
MH				HH	<3	n/a
	DV	SU	OB	HH	<3	n/a
		SU	OB	HH	<3	n/a
	DV	SU			<3	n/a
n = 126	n = 84	n = 115	n = 67	n = 121	132	100.0%

Source: Changing Futures

95% of people who were accepted experienced poor mental health as a need at the time of nomination, 92% were experiencing homelessness, 87% had a substance use need, 64% were experiencing domestic violence and/or abuse and 51% of all clients nominated had current/historical contact with the criminal justice system.

Housing and support needs

The Department for Levelling up, Housing and Communities (now the Ministry for Housing, Communities and Local Government) publish returns from local housing authorities (districts and boroughs) on the number of households owed a homelessness duty under the Homelessness Reduction Act 2017, this information can be further broken down by the support needs of households.

In Arun there were 2,258 households owed a duty between 2020/21 to 2022/23. *Some households owed a duty in one year could have represented in a subsequent year.*

Overall, 1,141 were recorded as having support needs (50%). Drug dependency needs were recorded in 10% of these households over the whole period.

Table 6: Number of households owed a homelessness duty

Total number of households assessed	2020-21	2021-22	2022-23
Total households assessed as owed a duty	579	830	849
Total households with support need(s) owed a duty	261	420	460
Percentage of assessed households having support needs	45%	51%	54%
(Total number of support needs for those owed a duty)	381	690	838
Drug dependency needs (%)	27 (10%)	34 (8%)	52 (11%)

Source: Department for Levelling Up, Housing & Communities

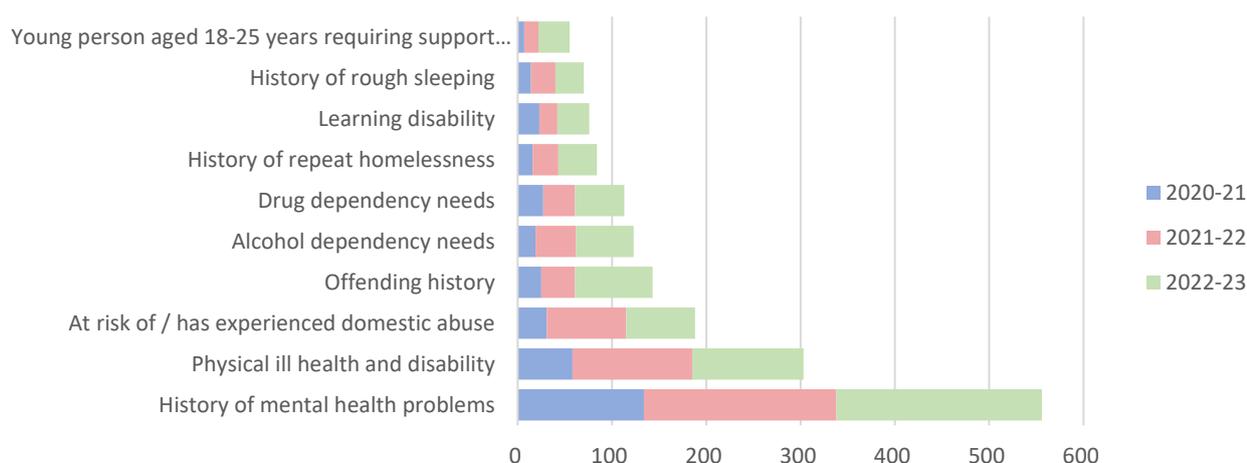
In the figure below we can see how drug dependency needs are the sixth highest need recorded over the period, for households owed a duty. 2022-23 was the year with the highest number of needs recorded and drug dependency needs were recorded in 11% of households.

Other needs recorded over the period were:

- history of mental health problems (49%),
- physical ill health disability (27%),
- at risk or history of domestic abuse (16%),
- history of offending (13%),
- alcohol dependency need (11%).

Overall, 692 households had one recorded need (61%), 263 households had two needs (23%), and 186 households had three or more needs (16%).

Figure 20: Number of households owed a homelessness duty with support needs (10th most recorded needs)



Source: Department for Levelling Up, Housing & Communities

Housing and homelessness support providers

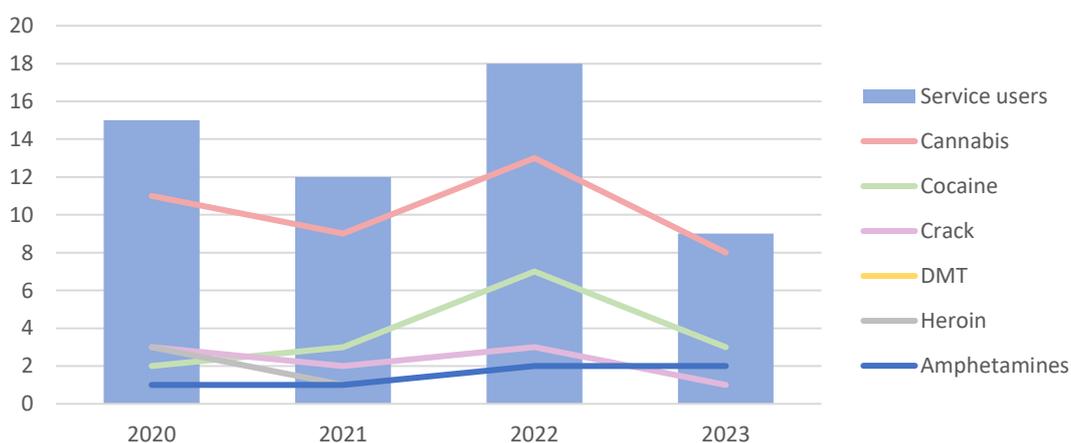
Bognor Housing Trust is a housing support provider operating in Bognor Regis. From January 2020 to December 2023 they supported a total of 34 people with substance misuse needs.

They offer low-medium housing related support with aim to:

- Provide high quality short-term, supporting housing for single homeless people;
- Support client to access mainstream social and economic activity;
- Support clients to move on to more independent, suitable accommodation;
- Support clients to access local services.

The number of service users with substance misuse supported varies year by year. 2022 was the year with highest number of service users with substance misuse and 2023 there was a reduction of 50% of these service users. The proportion of people consuming cannabis is higher in 2023 than any other year (89%). In 2022 there was an increase in service users consuming cocaine compared to previous years (40%) and heroin was only recorded as consumed by their service users in 2020 (3) and 2021 (1).

Figure 21: Substances consumed by people supported by Bognor Housing Trust 2020-2023



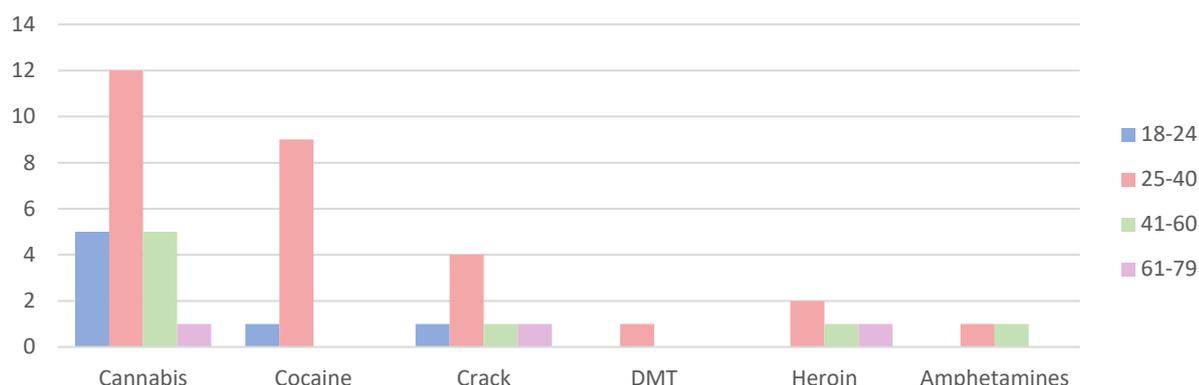
Source: Bognor Housing Trust

During the period analysed two were females compared to 32 males.

The majority of people supported with substance misuse needs were aged between 25 to 40 (62%). Most people noted as using cannabis (68%) and the second substance most used being cocaine (29%). Most people were consuming one or two substances.

Cocaine was used by the younger service users (below 41 years old) while cannabis and other substances were used across all ages.

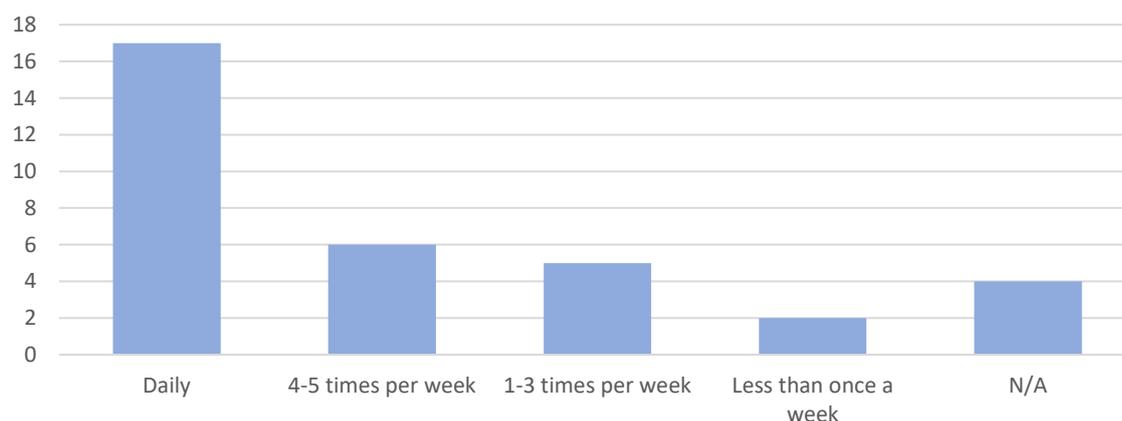
Figure 22: Substances consumed by people supported by Bognor Housing Trust 2020-2023 by age



Source: Bognor Housing Trust

Regarding the frequency of drug consumption, out of the service users who provided information, 17 service users do so daily, six do so between 4 to 5 times a week, 5 do so 1 to 3 times a week and two with less frequency than once a week.

Figure 23: Frequency of drug consumption by people supported by Bognor Housing Trust 2020-2023



Source: Bognor Housing Trust

Sometimes it was recorded how service users funded their drug use. This was not recorded for all. Some people will use more than one way to fund their drug use.

Receiving benefits was recorded most times with 40% of records.

Receiving wages by working (in one instance was specifically mentioned as “cash in hand work”) was mentioned as equally as people funding drug use by drug dealing.

Other ways to fund drug use were increasing one’s debt (2 people), by illegal activities (2 people), running for county lines (1 client) and also by prostitution (1 client, female between 25 and 40).

Regarding if these clients were under CGL treatment or known to the service, just 8 cases were recorded as being referred or under treatment with CGL, all of these cases are from service users supported by Bognor Housing Trust at some point during 2020.

Turning Tides provides a range of homeless support services covering Adur, Worthing, Littlehampton, Horsham and Mid Sussex and is one of the main housing support services operating in West Sussex.

As of January 2024, 360 individuals engaged with Turning Tides reported having a current or historic drug or alcohol misuse issue, where 156 were using said substance every/almost every day, and a further 39 using substances multiple times a week.

Most commonly taken were: alcohol (77 individuals using daily); crack/cocaine (40 individuals using daily); cannabis (40 individuals using daily); and heroin (33 individuals using daily).

Forty-six of these individuals were polysubstance users, particularly being heroin, crack, and alcohol.

Table 7: Substances used and frequency of use amongst clients

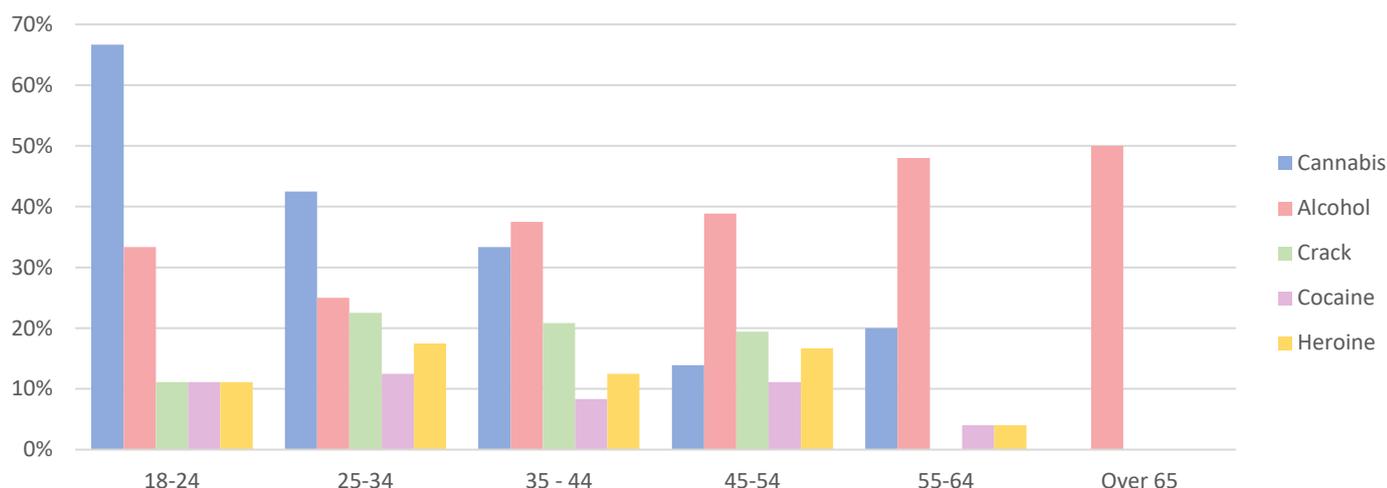
	Every day / almost every day	Frequently each week	Once or twice a month	Once every couple of months	Once or twice a year	Unknown / no data	Current use total	All historic use
Alcohol	77	19	12	8	8	5	129	152
Crack / cocaine	40	12	13	8	3	11	87	106
Cannabis	40	12	7	0	3	10	72	81
Heroin	33	4	5	3	3	6	54	71
Amphetamines / speed	<3	0	3	0	0	0	5	5
Benzodiazepines	3	<3	0	0	0	0	5	5
Ketamine	3	0	0	0	0	0	3	3
New psychoactive subs	<3	0	<3	0	0	0	<3	<3
Crystal Meth	0	0	0	0	0	0	0	<3
Mushrooms	0	0	<3	0	0	0	<3	<3
Prescription drugs	5	<3	0	0	0	<3	9	10

Source: Turning Tides

Stonepillow offers homelessness support services in Chichester, Bognor Regis and Littlehampton. From January 2020 to December 2023 they have supported around 700 people with historic or current drug or alcohol misuse. Alcohol and Cannabis were the substances most frequently mentioned, Alcohol was consumed by 37% of people and Cannabis by 31%.

By age group, cannabis is the main substance used from 18 until 34 years old, while people of age 35 to 44 the main substance was alcohol, at the age between 45 and 54 the amount of people consuming alcohol doubles cannabis.

Figure 24: Substances currently consumed by service users when engaging with homelessness support provider



Source: Stonepillow

By gender, females were 22% of their service users and they were more affected by alcohol than males, 41% of females and 36% of males. Females were also more affected by crack use, 23% whilst males are 13%.

Employment and economic inactivity

Job Centre Plus are responsible for managing claims and payment of Jobseeker's Allowance, Incapacity Benefit, Employment and Support Allowance and Income Support.

It is not currently possible to assess numbers of individuals with substance misuse or housing issues within the data, but unemployment and Job Centre Plus activity may be indicative of underlying vulnerabilities in the community.

As August 2023, Arun had a total of 205 Job seeker's allowance claimants, of which 19% were of the duration of 5 years and over.

Table 8: Job seeker's allowance claimants and duration of current claim (Aug 2023)

Duration of Current Claim	Up to 3 months	3 months up to 6 months	6 months up to 1 year	1 year and up to 2 years	2 years and up to 5 years	5 years and over	All JSA claims
Adur	43	8	8	-	-	29	81
Arun	98	25	25	6	18	40	205
Chichester	38	27	6	-	8	38	123
Crawley	80	22	12	6	14	54	186
Horsham	59	30	13	5	5	12	115
Mid Sussex	73	18	14	8	12	6	130
Worthing	48	16	7	6	5	30	111
West Sussex	439	146	85	31	62	200	951

Source: JCP Performance data

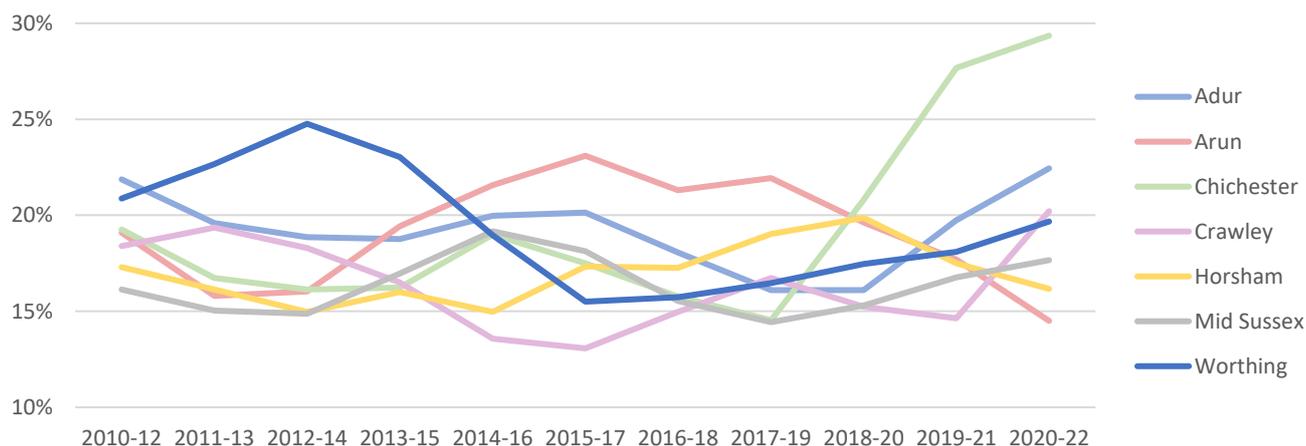
The Office for National Statistics estimate **local unemployment rates**, by examining the proportion of economically active people aged 16 years and over without a job, who have been actively seeking work within the last four weeks and are available to start work within the next two weeks.

Locally, unemployment has been running steady between three and four percent over the past several years, similar to the rest of West Sussex.

Economic inactivity is a measure of the proportion of people aged between 16 and 64 years who are not in employment but do not meet the internationally accepted definition of unemployment because they have not been seeking work within the last four weeks or they are unable to start work in the next two weeks.

Over the county, this typically ranged from between 15% to 25%. The Arun inactivity rate has reduced in recent years and in the last three-year average 2020/22 was 15%, better than the rest of West Sussex.

Figure 25: Economic inactivity rate (3 year rolling averages)



Source: ONS data

Early Help

Early Help is a service provided by WSCC designed to assess families with children under 18, the assessments are for the whole family and not for individual households, as it would also include parents not living with children in the same household. The objective of those assessments is to identify needs and offer support at the early stage before issues may escalate.

Between the 1st January 2020 and 31st December 2023 West Sussex received a total of 8,894 family assessments (initial assessments could have been done years before 2020) of those, 1,285 family assessments were affected by substance misuse (drug or alcohol) by parents, children or both.

The table below show the number of families receiving support from Early Help with substance misuse mentioned by adults or children, for Arun and West Sussex by year (some families may have been receiving support for more than one year, so we have counted them every year they received support).

Table 9: Families receiving Early Help support by year

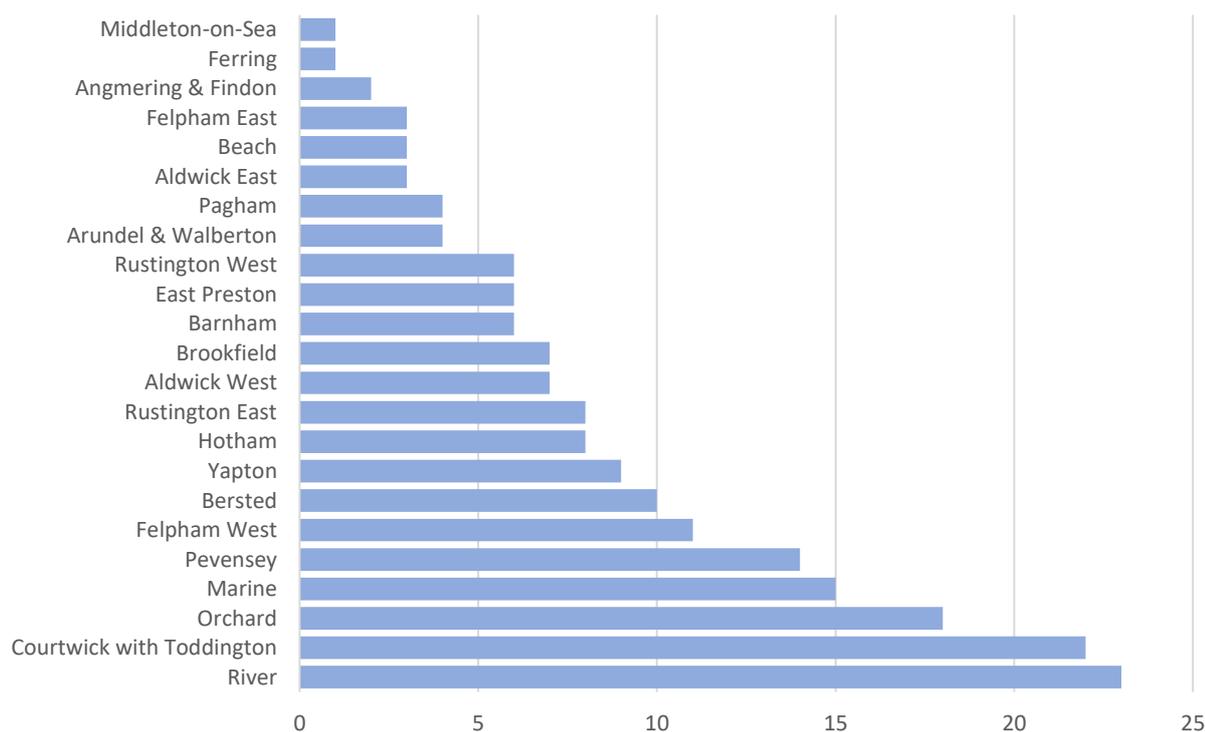
		Adult substance misuse mentioned		Child substance misuse mentioned		Adult AND Child substance misuse mentioned		All Early Help assessments
2020	Arun	90	11.48%	46	5.87%	8	1.02%	784
	West Sussex	402	10.73%	180	4.81%	27	0.72%	3,743
2021	Arun	70	10.95%	40	6.26%	5	0.78%	639
	West Sussex	360	11.41%	151	4.79%	26	0.82%	3,155
2022	Arun	61	10.70%	31	5.44%	4	0.70%	570
	West Sussex	331	11.49%	159	5.52%	27	0.94%	2,882
2023	Arun	45	9.07%	36	7.26%	2	0.4%	496
	West Sussex	321	11.64%	162	5.87%	20	0.73%	2,758

Source: Early Help

Overall, in Arun adult and children with substance misuse mentioned as part of an assessment has been decreasing over the period, both in terms of incidence and percentage of all assessments completed.

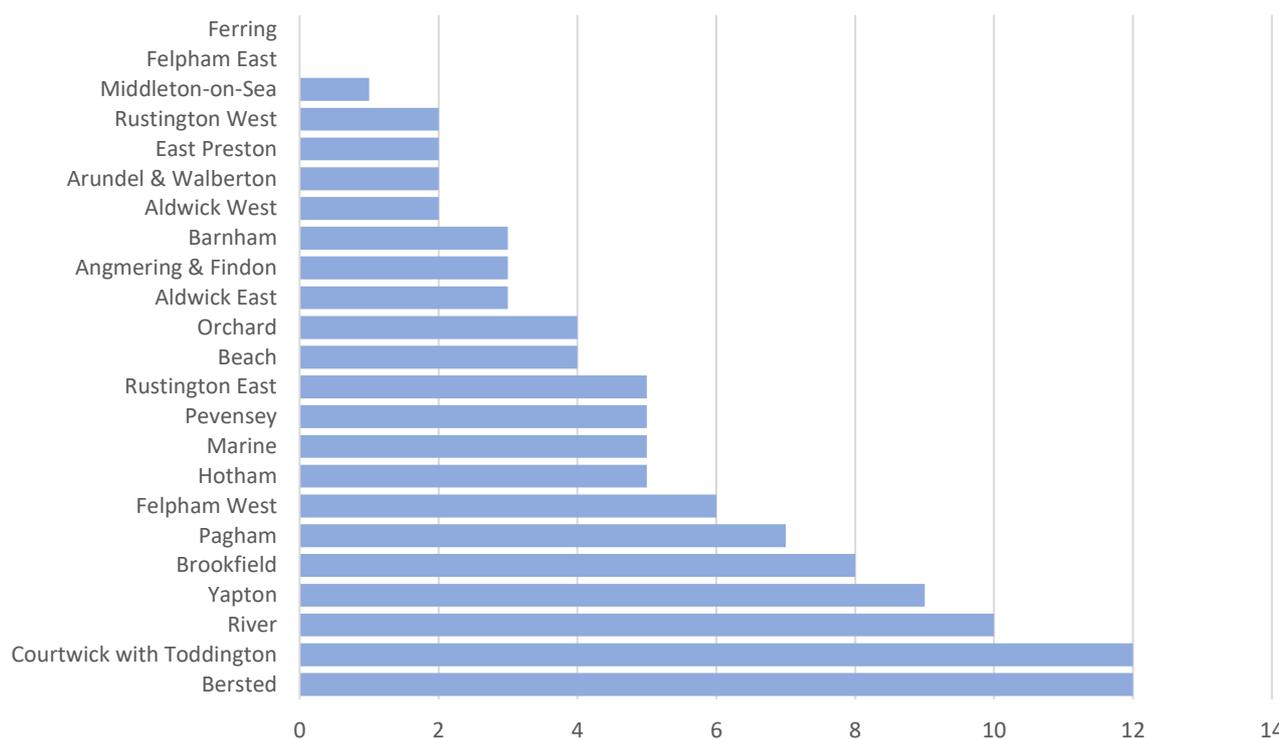
By ward, River, Courtwick with Toddington and Orchard had the highest number of support plans which mentioned adult substance misuse. The wards with the highest number of support plans which mention child substance misuse are Bersted, Courtwick with Toddington.

Figure 26: Families receiving Early Help support with Adult substance misuse



Source: Early Help

Figure 27: Families receiving Early Help support with Children substance misuse

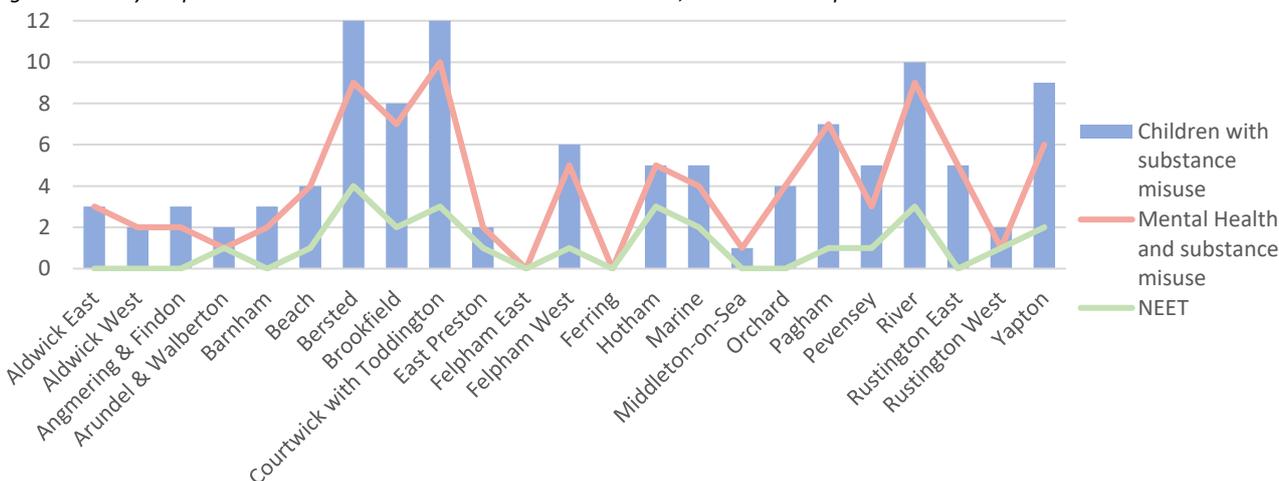


Source: Early Help

With a new framework introduced in Oct 2022, Early Help assessments can also identify other needs facing families with adults or children affected by substance misuse, such as mental health needs (adult and children), homelessness (adults and young persons), adults in the family that are workless, young person NEET (not in education, employment or training). Unfortunately, for some of the needs (adult mental health and young person excluded or at risk of exclusion from the family home) could not be extracted from the old system for the period of interest.

We looked at how many early help assessments with children with substance misuse also identify a mental health problem. And as we can see in the figure below, most of the assessments identifying child substance misuse, also identify children with mental health problems.

Figure 28: Early Help assessments with children with substance misuse, mental health problems and NEET



Source: Early Help

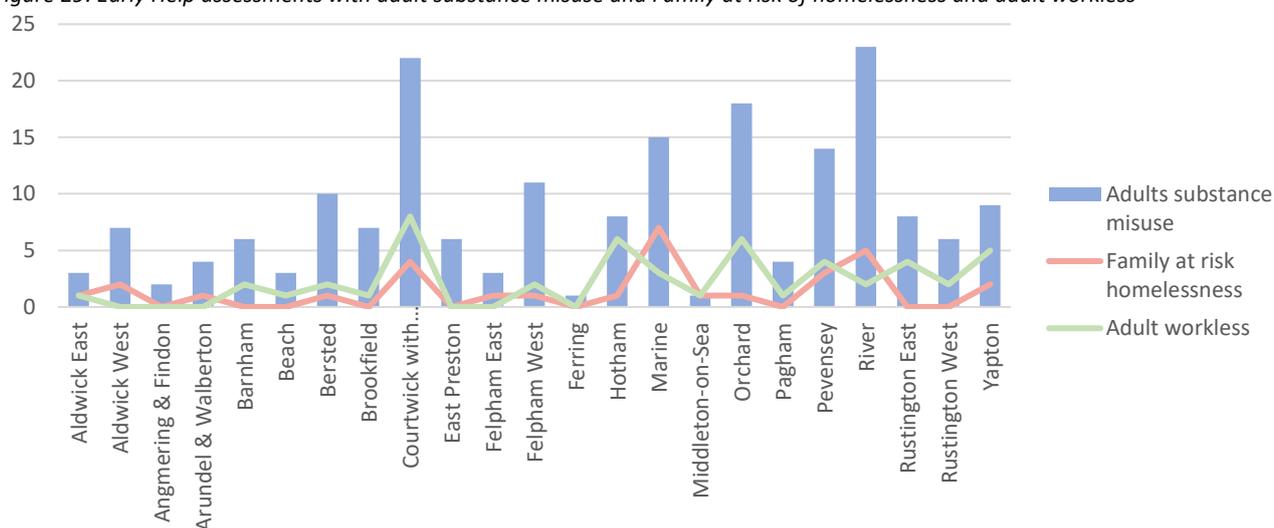
From the early help assessments:

- 83.6% of children identified as having a substance misuse problem also suffer from Mental health problems, dropping to 68% when children don't have substance misuse identified.
- 23.6% of children with substance misuse identified are also NEET,
- while just 5.1% of children who don't have substance misuse identified are also NEET.

In the figure below, the risk of homelessness was similar in households where substance misuse by adults was identified compared with households where no adult substance misuse was noted. 16% of households where adult substance misuse was noted were also at risk of being homeless, compared with 14.6% of households where substance misuse was not identified.

There was a greater difference observed in relation to worklessness. A higher percentage of workless families also had adult substance misuse (26.7%) compared with 9.8% of families where no adult substance misuse was recorded.

Figure 29: Early Help assessments with adult substance misuse and Family at risk of homelessness and adult workless



Source: Early Help

Regarding adults' mental health needs, if we consider only the new assessments from 2023, 84% of assessments with adult substance misuse mentioned also identified adult mental health needs, in the case of adults with no mention of substance misuse, mental health need drops to 53.5%.

Children's Social Care

As part of our research, we requested data from Children's Social Care to obtain information for the period between January 2020 to December 2023 to know how many children were affected by parents using drugs and also, how many children were identified with drug use and their age. Each assessment is for one child, (e.g., if in a family there are three children affected by parents' drug use, it would be three assessments, one for each child). Due to a change in the data recording system, we have focused on data for 2022 and 2023.

For the period analysed, Arun has a total of 258 cases of children affected by parents with drug use and 105 cases where child drug used is mentioned. In total, there were 340 children's assessments with parents and/or

child drug use mentioned, 23 of those, with both parent and child with drug use. In 2023 number of assessments affected by parent with drug use have increased from 6% in 2022 to 8% in 2023.

Table 10: Drug use mentioned on CSC assessments.

		Parent drug use mentioned		Child drug use mentioned		All CSC assessments
2022	Arun	119	6.0%	51	2.6%	1,986
	West Sussex	600	6.0%	176	1.7%	10,067
2023	Arun	139	8.0%	54	3.1%	1,731
	West Sussex	613	6.6%	222	2.4%	9,254

Source: Children social care performance data

Table 11: Drug use mentioned on CSC assessments.

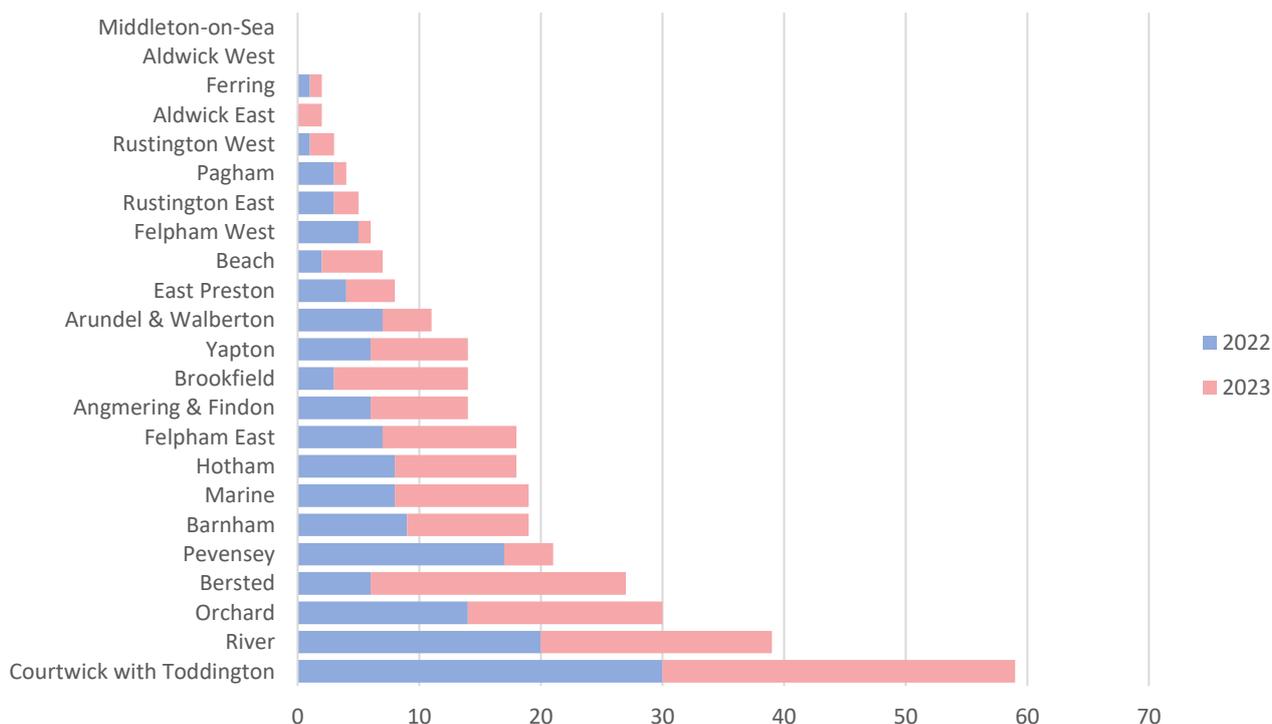
		Parent AND/OR Child drug use mentioned		Parent AND Child drug use mentioned		All CSC assessments
2022	Arun	160	8.1%	10	0.5%	1,986
	West Sussex	743	7.4%	33	0.3%	10,067
2023	Arun	180	10.4%	13	0.7%	1,731
	West Sussex	785	8.5%	50	0.5%	9,254

Source: Children’s social care performance data

9.1% of 3,717 assessments in Arun were identified with drug use, either by the parent, child or both, similar to 7.9% of 19,321 assessments for West Sussex.

By wards, if we analyse the data by the number of assessments with parent and/or child drug use mentioned, Courtwick with Toddington is the area with highest number of incidents.

Figure 30: Number of assessments with parent AND/OR Child drug use mentioned by Wards (some families could have more than one assessment)



Source: Children’s Social Care performance data

It is worth mentioning, that Felpham East, despite having just 18 assessments with a parent and/or child drug use, 19% of CSC assessments are affected by drug use due to the small number of assessments received (compared to other areas).

Table 12: Number of assessment with parent AND/OR child drug use mentioned by Wards

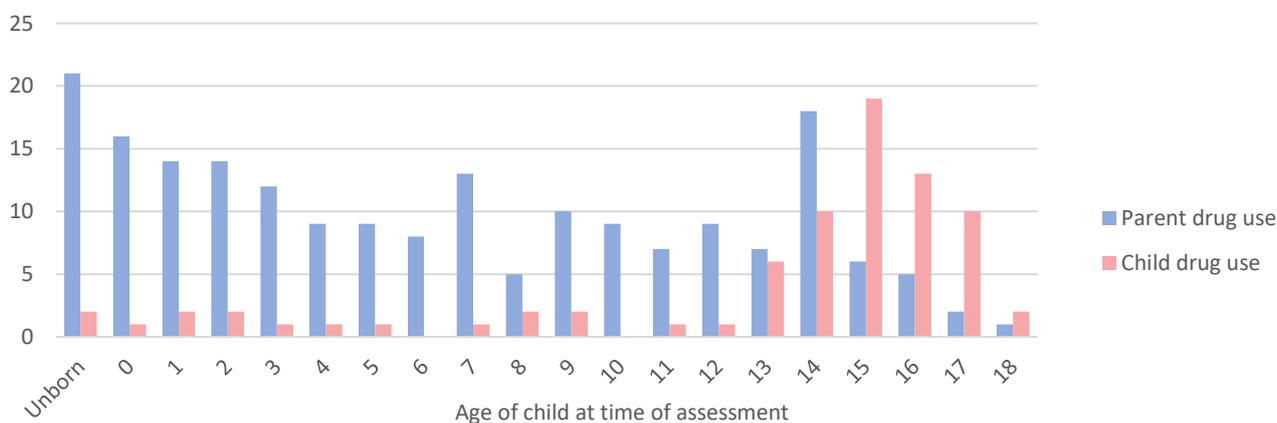
Wards	Count of parent and/or child mentioned	% of all assessments	CSC Total assessments
Courtwick with Toddington	59	10.63%	555
River	39	12.23%	319
Orchard	30	13.64%	220
Bersted	27	9.09%	297
Pevensey	21	7.34%	286
Barnham	19	10.86%	175
Marine	19	11.18%	170
Hotham	18	10.34%	174
Felpham East	18	19.35%	93
Angmering & Findon	14	7.53%	186
Brookfield	14	9.33%	150
Yapton	14	8.09%	173
Arundel & Walberton	11	9.57%	115
East Preston	8	9.41%	85
Beach	7	8.05%	87
Felpham West	6	4.44%	135
Rustington East	5	4.95%	101
Pagham	4	8.70%	46
Rustington West	3	2.44%	123
Aldwick East	2	4.88%	41
Ferring	2	4.88%	41
Aldwick West	0	0.00%	91
Middleton-on-Sea	0	0.00%	54

Source: Children’s Social Care performance data

The next figure shows the age of children when the parent or child had drug uses mentioned in their CSC assessment, we can see how at the age of 13 the CSC assessments start to record an increase of incidents with child drug use.

When the children are 14, assessments with mentions of parents drug use is very high, and mentions to child drug use start to increase. At the age of 15 most of the CSC assessment with parents and/or child drug use would come from the child drug use.

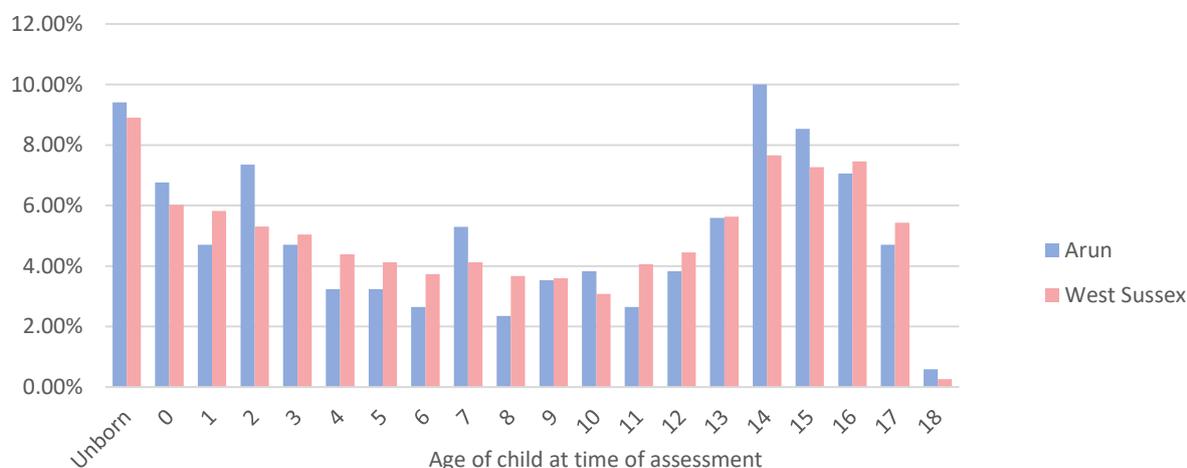
Figure 31: Age distribution of children in Arun mentioning parent and/or child drug use (total values)



Source: Children’s social care performance data

Arun has very similar age distribution to West Sussex, though varies when the children are 14 and 15, where Arun shows a higher rate.

Figure 32: Age distribution of children in Arun mentioning parent and/or child drug use compared to West Sussex (% within each area)



Source: Children’s social care performance data

Some children are under the care of the local authority, known as Children We Care For or CWCF, 6% of CWCF in West Sussex for the full year preceding March 2023 had been identified as having a substance misuse issue. Most of these children with substance misuse issues identified do not accept the offer of further support. As we can see in the table below, Arun had five children identified with substance misuse and they did not accept support.

Table 13: Children We Care For (CWCF) for 12 months or more, as of 31st March 2023.

	Adur	Arun	Chichester	Crawley	Horsham	Mid Sussex	Worthing	West Sussex
All CWCF	37	75	32	60	25	33	105	367
Identified with substance misuse	1	5	1	4	0	0	12	23
Intervention received	0	0	0	3	0	0	5	8
Offered but not accepted	1	5	1	1	0	0	7	15
% Children, identified with substance misuse	2.7%	6.7%	3.1%	6.7%	0.0%	0.0%	11.4%	6.3%
% Identified, who received intervention	0%	0%	0%	75%	n/a	n/a	42%	35%
% Identified, offered but not accepted	100%	100%	100%	25%	n/a	n/a	58%	65%

Source: Children’s social care performance data

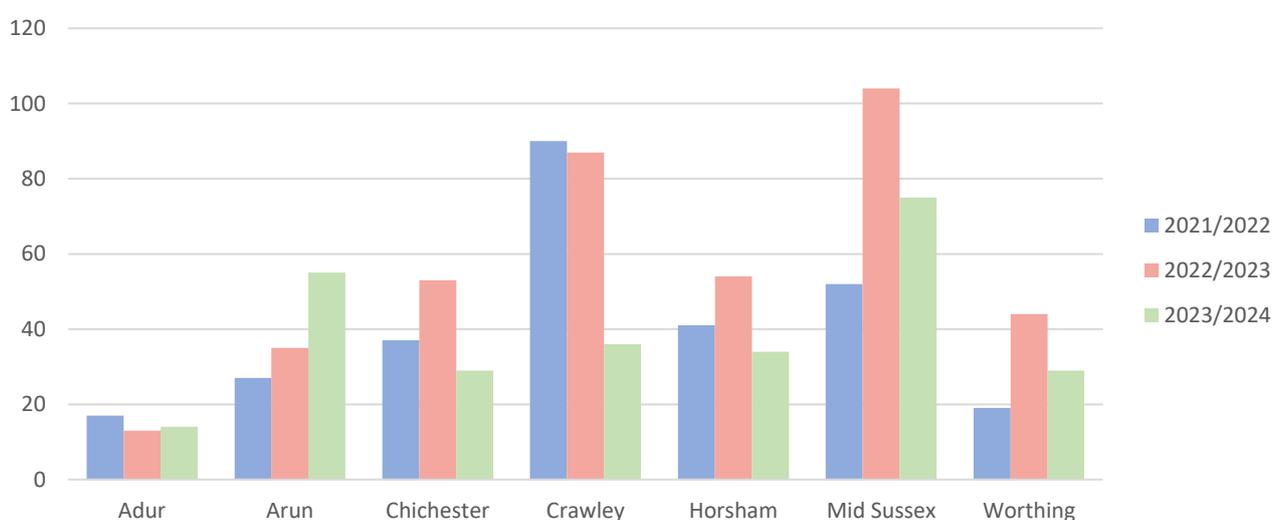
School exclusions and suspensions

We have analysed drug and alcohol related school exclusions for the last 3 academic years (2021/22, 2022/23 and 2023/24 up to May 2024).

Note: Fixed period exclusions (up to 45 school days in a school year) are referred to as suspensions and when permanent we refer to them as exclusions.

In West Sussex, from 2021/2022 there have been over 1,200 episodes of drug and alcohol related suspensions in schools with a total of over 2,500 school days missed. In 2022/2023 academic year there was an increase of 50% on drug and alcohol related suspensions compared to the previous year. This increase was accounted for by, in the main, by exclusion of boys.

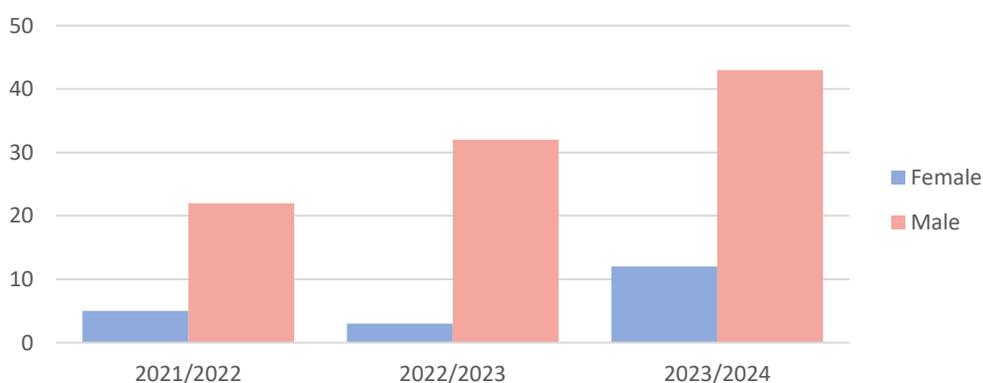
Figure 33: Drug and alcohol related school suspensions in West Sussex



Source: Children's Services Data and Performance

Over the period analysed, Arun had 117 drug and alcohol related suspensions with a total loss of 359 school days and a total of 8 exclusions. Males in Arun represent a higher rate than the average for West Sussex (83% males in Arun compared to 65% males in West Sussex).

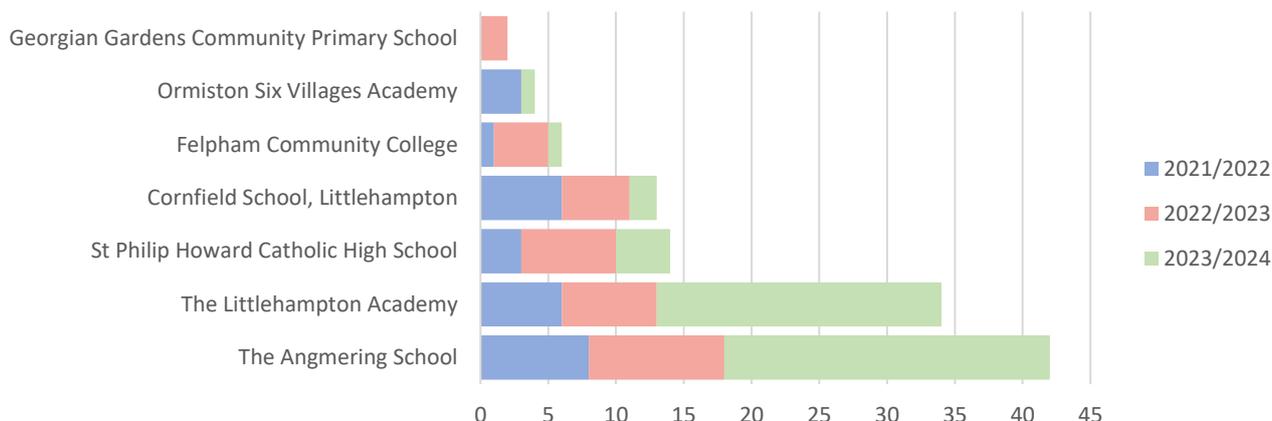
Figure 34: Drug and alcohol related school suspensions in Arun by gender



Source: Children's Services Data and Performance

The Angmering school and The Littlehampton Academy, had the highest number of suspensions, especially for 2023/2024.

Figure 35: Drug and alcohol related school suspensions in Arun



Source: Children’s Services Data and Performance

If we have a look at the exclusions, Arun has a total of 8 drug and alcohol related school exclusions, 4 of them were in 2021/2022 academic year and is one of the areas with more exclusions.

Figure 36: Drug and alcohol related school exclusions in West Sussex



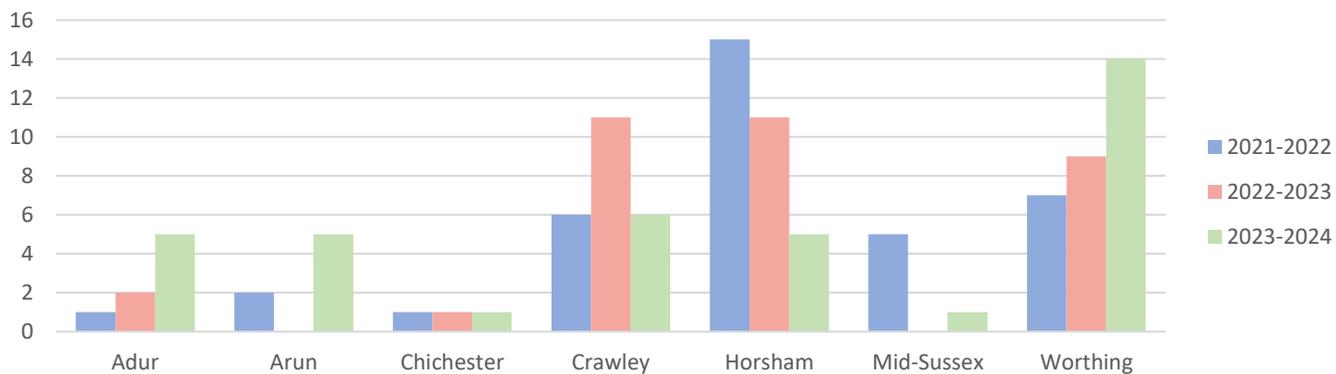
Source: Children’s Services Data and Performance

CGL - Referrals from Education for Under 18s

Young people can get referred to CGL services via their education setting. From financial year 2021/2022 to 2023/2024 CGL received 108 education referrals (in relation to drugs and alcohol) for under 18s in West Sussex.

In the figure below, we can see the distribution of the referrals across West Sussex by financial years.

Figure 37: Drug and alcohol CGL education referrals – Under 18's



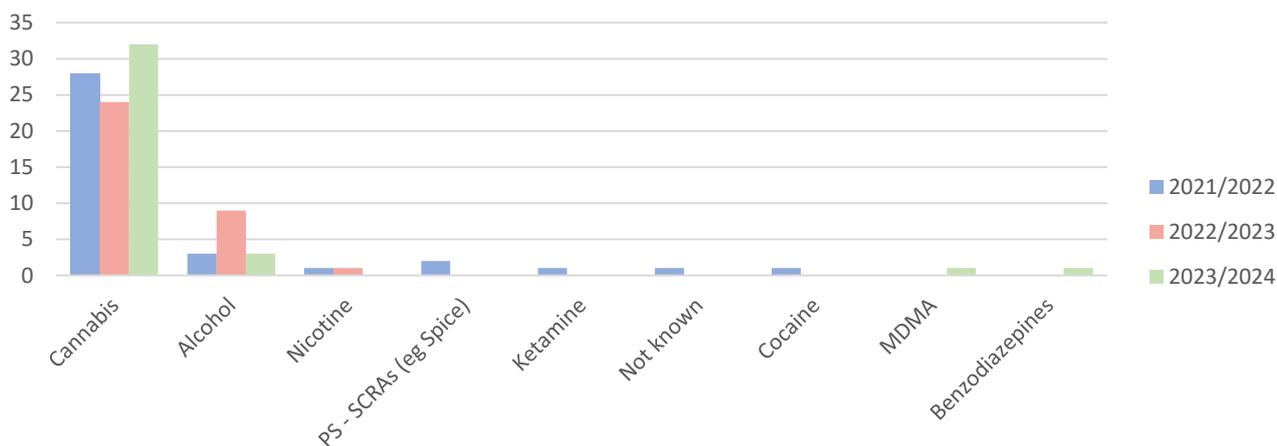
Source: CGL performance data

Arun, has low education referrals compared to other areas in West Sussex.

During this period, the substances most mentioned in referrals have been cannabis and alcohol.

Cannabis is the main substance, mentioned in 78% of referrals.

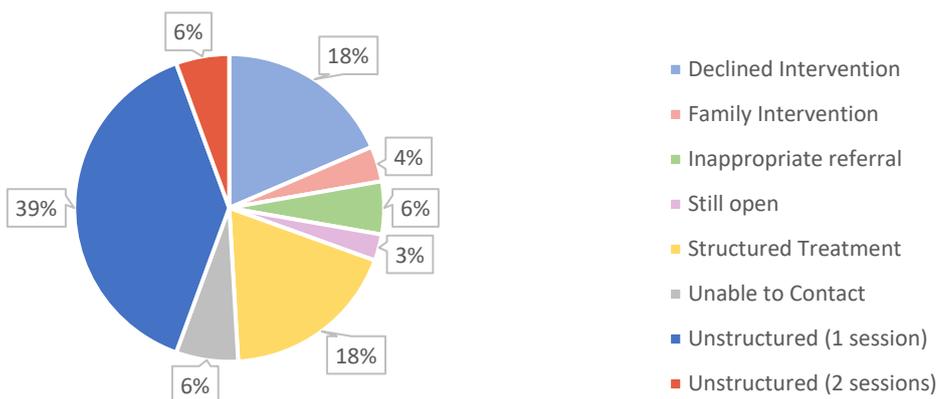
Figure 38: Drug and alcohol CGL education referrals – main substance



Source: CGL performance data

68% of the total referrals had some kind of intervention. 18% of young people referred declined further intervention.

Figure 39: Drug and alcohol CGL education referrals – Interventions



Source: CGL performance data

Exploitation

In July 2023 Multi Agency Child Exploitation (MACE) was introduced, prior that, only children open to CSC were included in the data set. Between July and December 2023, 145 children were triaged at local Multi Agency Child Exploitation (MACE) reviews.

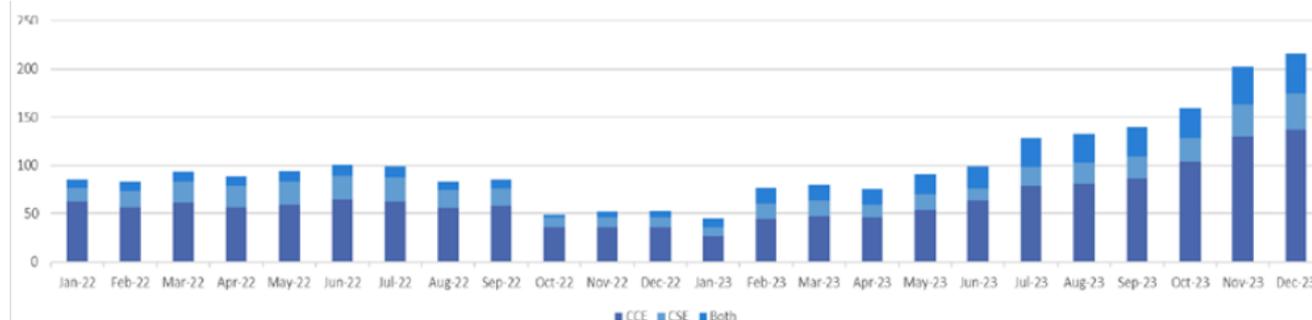
Where the risk type was known:

- at least 64% of these children were Criminally Exploited (CCE),
- 22% were exploited sexually (CSE)
- and 14% were a victim of both criminal and sexual exploitation.

In 32% of cases the risk was unknown.

- Almost 75% of the exploited children were aged 14-16 years.
- Half of the cohort were children in need (CIN), 17% open to Early Help and 16% on a Children Protection Plan (CPP).
- 61% were boys, with data suggesting a gendered response to exploitation, as girls identified a higher risk of sexual exploitation and boys of criminal exploitation.

Figure 40: Child exploitation in West Sussex by exploitation type (CCE, CSE or Both)



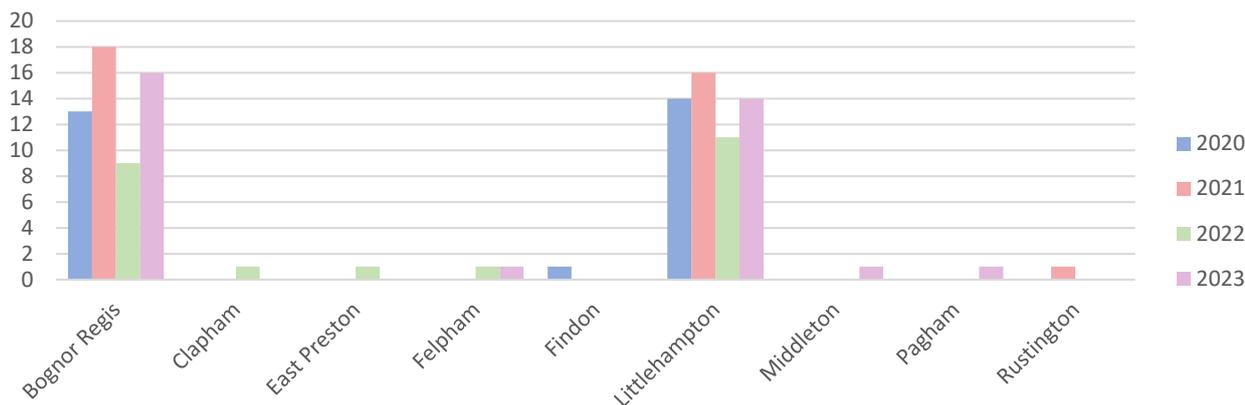
Source: West Sussex County Council Child Exploitation Team

Cuckooed Properties

Cuckooed properties are used by organised criminal groups (OCGs) to protect the county lines exploiting vulnerable people by using their homes as a base for dealing drugs. OCGs often use a high level of violence and intimidation and target people who are lonely, isolated or have addiction issues.

In Arun, in the past 4 years, has been at least 119 cuckooed properties. These have been concentrated in Bognor Regis and Littlehampton town centre.

Figure 41: Cuckooed properties Arun 2020-2023



Source: Arun District Council

Cuckooed properties in Littlehampton are predominantly clustered within River & Courtwick with Toddington wards, cuckooed properties in Bognor are predominantly close to the town centre and the Bersted area with dense clustering of cuckooed properties in the vicinity of Bognor Town Centre. This area is typically characterised by flats and smaller properties in close proximity to each other.

Properties within the hotspots identified are within easy walking distance of the train station (and buses) and shopping areas.

Around 40% of these cuckooed properties involved vulnerable people.

Youth Justice Therapeutic and Family Interventions

Children and young people identified by the WSCC Youth Justice Service receive focused interventions via the Therapeutic & Family Intervention Team to address underlying issues, to support a movement to a stable lifestyle and preparing young people for adulthood.

Some of the young people supported are also identified as having a substance misuse problem.

Service leads report that roughly 60% of the children and young people that they support have some level of drug or alcohol misuse issues which require interventions, data systems are being developed to capture these issues more consistently.

In West Sussex there were a total of 321 interventions cases closed in 2023/24 from 258 children (some children had more than one intervention). Of these, 40 individuals were recorded as having a substance misuse problem at the start of their intervention and 66 recording substance misuse at some point during their

intervention. These were typically aged between 14 and 18 years by intervention end, though some were as young as 12 years. Roughly one third of these were female.

From the 78 interventions in Arun, 33% were from individuals with substance misuse recorded, 14% with substance misuse recorded prior to start the intervention and 19% recorded at some point during the intervention. 24% of interventions in West Sussex with substance misuse recorded are from individuals living in Arun.

Table 14: Therapeutic & Family Intervention Team cases closed in 2023/24, by local geography

	Adur & Worthing	Arun	Chichester	Crawley	Horsham	Mid Sussex	Out Of County	Total
Substance misuse record starting prior to intervention	9	11	5	8	1	1	5	40
Substance misuse record starting during intervention	23	15	2	10	5	5	6	66
All interventions	79	78	24	55	21	28	36	321

Source: Children Services Data & Performance Team

Table 15: Therapeutic & Family Intervention Team cases closed in 2023/24, by age and substance need

Age of individual at end of intervention	Substance misuse record starting prior to intervention	Substance misuse record starting during intervention	All individuals supported
10 years	0	0	3
11 years	0	0	1
12 years	1	0	15
13 years	0	2	35
14 years	5	10	43
15 years	8	17	65
16 years	12	16	71
17 years	8	14	60
18 years	6	7	27
19 years	0	0	1
Total	40	66	321

Source: Children Services Data & Performance Team

The majority of interventions lasted between 4-6 months, with 5% lasting up to a year or beyond. Those young people who recorded substance misuse prior to, or during intervention tended to have longer intervention lengths than those without substance misuse reported, with nearly twice as many receiving their intervention for seven months or longer.

Of the 42 children and young people assessed for the substance misuse intervention programme, six were for alcohol only, and two more for alcohol and class A substances. Twenty-one were for cannabis use, with two more for cannabis and Xanax, and another one for cannabis and 'polydrug use'.

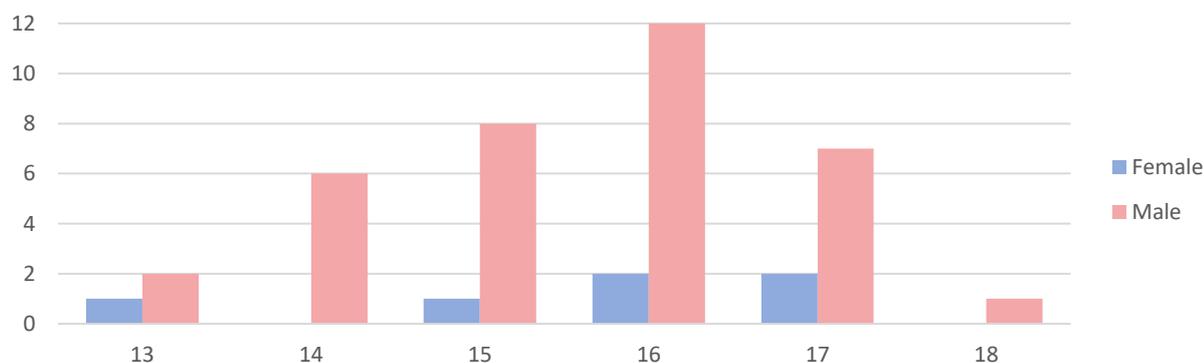
Table 16: Numbers of individuals in programme, by sex and main substance need (2023/24)

Substance need	Female	Male	All individuals
Alcohol only	5	1	6
Cannabis only		21	21
Alcohol and Cannabis	1	9	10
Alcohol and benzodiazepines		1	1
Alcohol, Crack and Heroin		1	1
Cannabis and Xanax		2	2
Cannabis and polydrug use		1	1
All substances	6	36	42

Source: Youth Justice Intensive Interventions teams

Six were females, aged 13 to 17, and thirty-six were males, aged 13 to 18, with a peak around the age of 16. Of the twenty-one individuals who completed their full programme of support, five were entirely 'drug-free', and sixteen reported 'occasional use'. Eleven of the twenty-one were deemed to need further support moving forwards, and ten needed no further support.

Figure 42: Numbers of individuals in substance misuse programme, by sex and age (2023/24)



Source: Youth Justice Intensive Interventions teams

Arun district and Worthing borough amounted for half of the children and young people assessed by the programme. In Arun, eight of the eleven were from the Bognor Regis area.

Table 17: Numbers of individuals in programme, by sex and district/borough (2023/24)

	Adur	Arun	Chichester	Crawley	Horsham	Mid Sussex	Worthing	West Sussex
Female		1		1	2		2	6
Male	4	10	3	5	3	2	9	36

Source: Youth Justice Intensive Interventions teams

Probation Services

The Probation Service is a statutory criminal justice service that supervises offenders serving community sentences or released into the community from prison. Their responsibilities are also to provide advice to courts on sentencing, deliver community payback and behavioural programmes, and provide information to

victims of serious offences. They are responsible for sentence management in both England and Wales, along with Accredited Programmes, Unpaid Work, and Structured Interventions.

In West Sussex there are 3 geographical teams (based in Crawley, Littlehampton and Worthing) and 2 additional teams, 1 for Unpaid Work Standalone Orders (this are Orders where the only active requirement is Unpaid Work) and a team of Trainee Probation Officer (PQIP).

As of the 1st of February 2024, West Sussex probation teams were managing 1,319 Community and Licence Cases.

The table below shows the West Sussex Community and Licence Caseload, and the associated Offender Assessment System (OASys) needs identified.

As of the 1st of February 2024, West Sussex probation teams were managing 1,319 Community and Licence Cases.

Of the needs recorded “relationships” is the highest OASys Need (68%) among the caseload, followed by Lifestyle (61%). Drug needs account for 34% of the cohort, and alcohol 29%.

Table 18: West Sussex – Probation Community/Licence Caseload with OASys Needs (Note people may have multiple needs recorded).

West Sussex Team	Crawley	Littlehampton	Worthing	PQIP	Unpaid Work Standalone	Total Community /Licence Caseload	% of OASys Need
Community/Licence Caseload	555	436	246	74	8	1,319	-
OASys Accommodation is a Need	178	168	93	35	2	476	36.1%
OASys ETE is a Need	166	166	89	26	1	448	34.0%
OASys Finance is a Need	191	158	89	25	-	463	35.1%
OASys Relationships is a Need	345	313	184	56	3	901	68.3%
OASys Lifestyle is a Need	321	271	171	42	1	806	61.1%
OASys Drugs is a Need	179	161	87	24	2	453	34.3%
OASys Alcohol is a Need	162	118	73	24	1	378	28.7%
OASys Emotional Well-Being is a Need	321	266	164	49	3	803	60.9%
OASys Thinking & Behaviour is a Need	318	264	162	49	3	796	60.4%
OASys Attitudes is a Need	282	250	136	43	3	714	54.1%

Source: HM Prison and probation service – West Sussex performance data

The table below shows the Community sentences in West Sussex. Community sentences are alternatives to prison sentences and can carry requirements to engage in treatment or support services.

From January 2021 to January 2024 there were 149 Alcohol treatment Requirements, 118 Drug Rehabilitation Requirements, and 11 Mental Health Treatment Requirements. These have been imposed as alternatives to custodial sentences. Numbers have moderately increased over this time.

A new scheme in 2024 is to separate Mental Health Treatment Requirements into Primary Mental Health and Secondary Mental Health. Primary Mental Health will not require a formal diagnosis and is believed this will increase Treatment requirements for mental health needs in future.

Table 19: West Sussex ATR/DRR/MHTR Sentences.

Sentence Year	Sentenced - Alcohol Treatment Requirement	Sentenced - Drug Rehabilitation Requirement	Sentenced – Mental Health Treatment Requirement
2021 Total	48	33	3
2022 Total	40	35	3
2023 Total	56	42	4
2024* January only	5	8	1
Total	149	118	11

Source: HM Prison and probation service – West Sussex performance data

The table below shows the Commissioned Rehabilitative Service (CRS) referrals made between June 2021 (when CRS provision started) and 3rd February 2024. The majority of referrals were made by the Crawley team, and the highest number of referrals was for an Accommodation Service, followed by Personal Wellbeing.

Table 20: West Sussex Commissioned Rehabilitative Service (CRS) Referrals (2021-24)

CRS Contract Type	Referral Year	Crawley	Littlehampton	Worthing	PQIP	UPW Standalone	Total CRS Referrals
Accommodation Service	Jun-Dec 2021	69	52	35	1	2	159
	Jan-Dec 2022	138	101	68	4	2	313
	Jan-Dec 2023	189	95	110	29	-	423
	Jan- 3rd Feb 2024	12	9	14	7	-	42
ACC Total		408	257	227	41	4	937
Dependency and Recovery Service	Jan-Dec 2022	29	25	7	2	-	63
	Jan-Dec 2023	147	67	53	10	-	277
	Jan- 3rd Feb 2024	16	8	5	3	-	32
D&R Total		192	100	65	15	-	372
Education, training and Employment	Jun-Dec 2021	38	29	20	-	2	89
	Jan-Dec 2022	75	67	30	4	3	179
	Jan-Dec 2023	81	41	38	17	-	177
ETE Total		194	137	88	21	5	445
Personal Wellbeing Service	Jun-Dec 2021	26	31	13	-	-	70
	Jan-Dec 2022	116	60	40	6	1	223
	Jan-Dec 2023	157	88	71	12	-	328
	Jan- 3rd Feb 2024	14	4	9	4	-	31
PWB Total		313	183	133	22	1	652
Women Services	Jun-Dec 2021	15	7	3	1	-	26
	Jan-Dec 2022	48	34	21	9	1	113
	Jan-Dec 2023	45	23	32	3	-	103
	Jan- 3rd Feb 2024	9	2	3	4	-	18
WOS Total		117	66	59	17	1	260

Source: HM Prison and probation service – West Sussex performance data

CGL – People in structured treatment and Naloxone provisions

In West Sussex people who need treatment for their substance misuse can be referred, or can self-refer to CGL (Change, Grow, Live), the locally commissioned treatment provider.

Records of referral for structured treatment were provided by CGL for financial year 2020/2021 onwards and include different variables age, sex at birth, housing need, mental health need, employment status, drug category (as NDMTS⁶) and discharge time and reason.

In Arun, from 2020/2021 up to 2023/24 Q3 1,196 people received treatment from CGL. This includes 278 people who began treatment at some point during 2016/2017 to 2019/2020. Over the period analysed there were a total of 1,271 episodes.

- The total number of people in treatment was similar in years 2020/21 and 2021/22, despite the number of new triages having increased by 44% in 2021/22.
- 2022/23 had an increase of 42% in the total number of people in treatment and the number of new triages increased in 68% compared to the previous year.
- 2023/24 presumably when Q4 is added will have an increased in both total people in treatment and new triages.

Figure 43: Total individuals in treatment and new triages



Source: CGL performance data

From 2018/2019, alcohol treatment is the main reason to engage with CGL.

From 2018/2020 the number of new triages due to “any opiates” was very similar to “non-opiate and alcohol” but in the last couple of years the new triages for “any opiates” are higher than “non-opiates and alcohol” and is the second reason to engage with CGL.

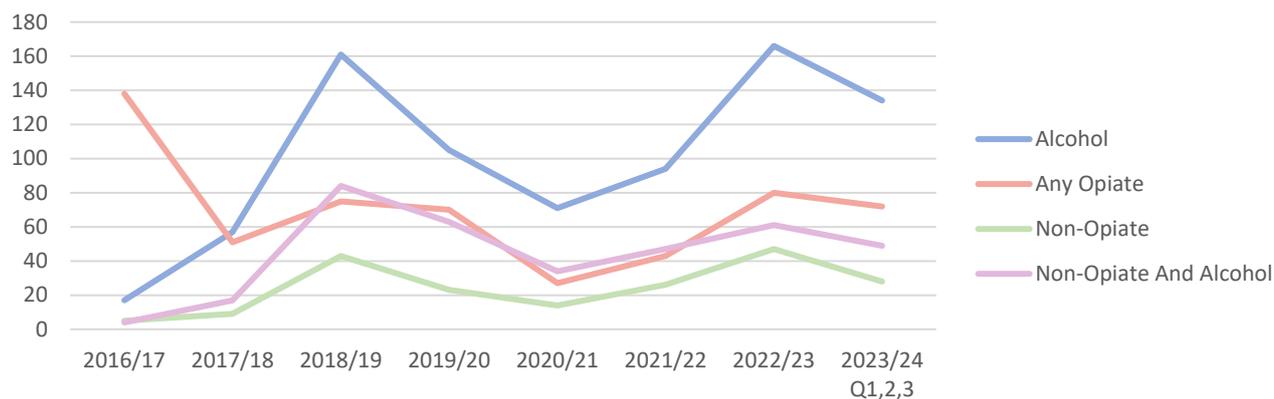
⁶ Any mention of opiate use would result in the person being categorised as **opiate**.

People who present with non-opiate substances (without opiates or alcohol) will be classified as **non-opiate**.

People who present with a non-opiate substance and problematic alcohol use will be classified as **non-opiate and alcohol**.

People who present with alcohol and no other substances will be categorised as **alcohol**.

Figure 44: Main substance treatment CGL referrals



Source: CGL performance data

For the period analysed, self-referral is the most common referral source, 66% of total referrals, followed by GP/hospital or health care provider 11% of total referrals.

Table 21: Referral source by year

Referral Source	2020/21	2021/22	2022/23	2023/24 Q 1,2,3	Grand Total
Self	96	132	239	185	652
GP/ Hospital/ Health care provider	14	29	36	27	106
Criminal Justice	6	12	27	34	79
Other treatment provider	6	13	8	17	44
Housing/homelessness service		10	18		36
Social Services	4	7	13	5	29
Other	9	3	3	3	18
Relative/peer/ concerned other	1	3	7	3	14
Domestic abuse service			2	1	3
Outreach	1	1			2
Employment/education service		1			1
Adult mental health services					0
Children and family services					0
Grand Total	137	211	353	283	984

Source: CGL performance data

The number of successful completions has not increased at the same rate as the increase in referrals; in 2020/21, successful completions were 39% of discharges, while in 2022/23 successful completion are 37% and 32% for 2023/24 (up to Q3).

Table 22: Discharges by year

Discharge reason	2020/21	2021/22	2022/23	2023/24 Q1,2,3	Grand Total
Client Died	4	7	11	5	27
Dropped out - disengaged	104	83	175	164	526
Retained in prison		1	1	1	3
Successful completion	74	69	118	94	355
Transferred to another service	3	7	6	9	25
Transferred to prison	3	4	5	17	29
Treatment declined	1		2		3
Grand Total	189	171	318	290	968

Source: CGL performance data

From 2020/21 until 2023/24 (Q3), females represent 36% of the total referrals.

If we have a look at the main substance people are seeking treatment for, females are proportionally more likely to be seeking help for alcohol misuse (57% of females affected by alcohol alone compared with 41% of males).

The second category females need treatment for is “Any opiates”.

Table 23: New referrals- Main substance by gender

Gender	Alcohol	Any Opiate	Non – Opiate	Non – Opiate and Alcohol
Female	202	74	38	43
Male	254	146	73	146
Grand total	456	220	111	189

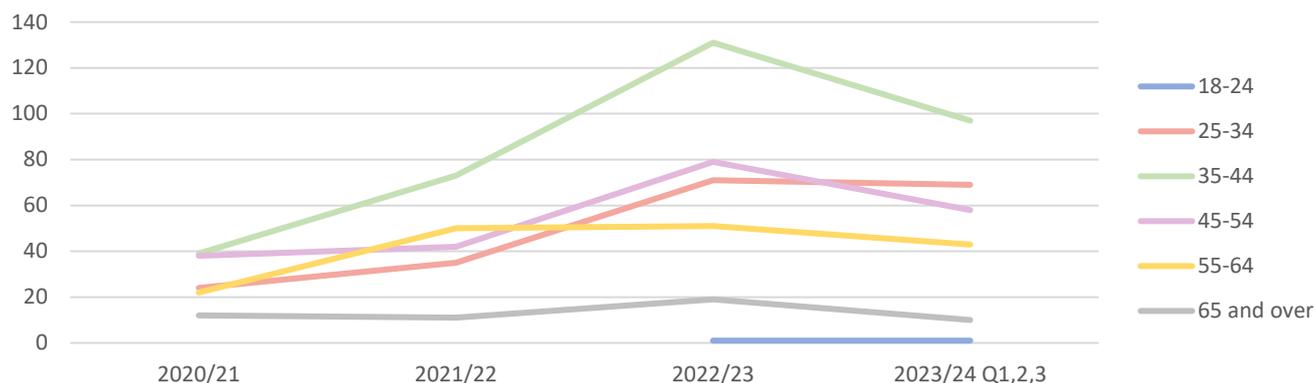
Source: CGL performance data

By age, the group 35-44 years old is the age band that has increased the most over the period, in 2020/21 this group was the 28% of total referrals and in 2022/23 they represented the 37% over all referrals.

In 2022/23 all age groups saw an increase in the number of referrals.

The second group with biggest increase is the age band 25-34 years old, the number of referrals in 2022/23 is nearly 3 times more than in 2020/21. This change may be the result of decreased activity during Covid-related lockdowns.

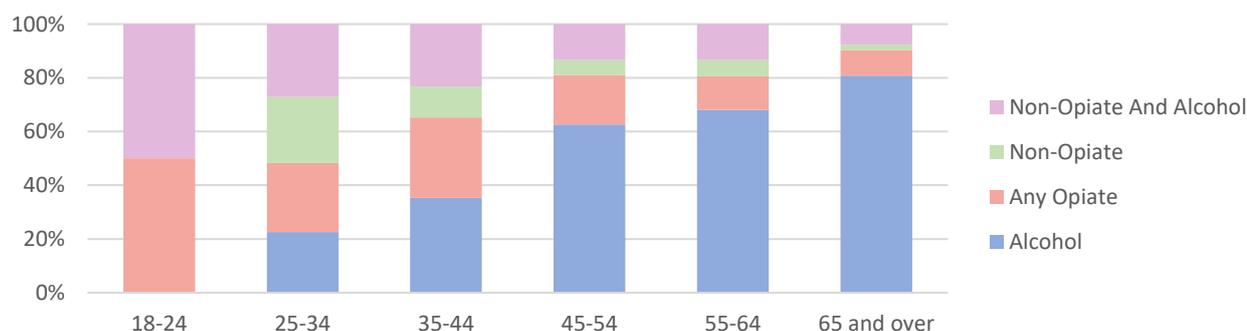
Figure 45: CGL referrals by age group



Source: CGL performance data

If we look by age group at the main substance they need treatment for, we see how individuals seeking alcohol treatment increases with the age and non-opiate and alcohol decreases with age. More people are seeking non-opiate treatment between the ages of 25-34, whereas more people are seeking opiate treatment between the ages of 35 and 44.

Figure 46: CGL referrals – main substance treatment



Source: CGL performance data

Multiple needs

- 25.7% of new referrals to CGL from 2020/21 to 2023/24 (Q3) have a housing problem, experience homelessness or are living in temporary accommodation. The age band most affected by housing needs is 25-34 years old, 39% would not have settled accommodation.
- 75% of people referred to CGL over the period analysed, were recorded as having mental health issues. Of those, 77% were engaging with some support to address their mental health issues, leaving 23% with mental health needs but not treatment, 3% of them declined treatment.
- 40% of new referrals over the period analysed were from people unemployed, of those, 70% were not looking for employment.

Naloxone provisions

Naloxone is a medicine that can rapidly reverse the effects of an overdose due to opioids. Its provision in the community is an essential programme to prevent deaths of those vulnerable to substance overdoses. Since 2020/21 the rollout has increased significantly, and naloxone provision has nearly tripled between 2022/23

and 2023/24 (to Dec 2023) partly due to issuing additional kits to high-risk users in light of the contaminated opiate supply.

Table 24: Naloxone kits dispensed in the community (including replacements for used, lost and expired kits. 2023-24 includes the supply of Naloxone and Nyxoid).

Naloxone provision	2019-20	2020-21	2021-22	2022-23	2023-24 Dec	Total
Adur	12	19	19	29	42	121
Arun	80	99	105	118	208	610
Chichester	48	74	69	56	121	368
Crawley	73	99	96	112	179	559
Horsham	42	39	27	35	72	215
Mid Sussex	35	31	35	28	79	208
Worthing	86	113	82	103	172	556
Pharmacies	17	26	25	17	84	169
Naloxone Project	0	46	186	218	881	1,331
West Sussex HARP	0	17	0	0	0	17
Total Issued	393	563	644	716	1,838	4,154

Source: CGL performance data

From 2019-20, service users in Arun have received 610 Naloxone kits and the distribution in the last couple of years has increased significantly.

Arun is the area in West Sussex with the highest number of Naloxone kits distributed.

Impacts in the community – Key points:

- From April 2021 to December 2023, the multiple disadvantage audit shows that at the beginning, Arun had a smaller percentage of returns with substance misuse problem, but over the period this percentage has been increasing and is now similar to West Sussex.
- In Arun, the percentage of housing support clients known to treatment services is higher than West Sussex and the percentage of clients engaging with treatment has not improved but has remained higher than West Sussex. In Arun, there is a lower percentage of returns from people having opiate substitution prescription.
- In Arun, 65% of returns from people with housing problems and substance misuse are also affected by mental health issues as shown in the multiple disadvantage audit (lower than West Sussex, 77%), and 27% of them will be in treatment for both conditions, being the locality in West Sussex with the highest percentage of people getting treatment for both issues at the same time.
- In Arun there were 2,258 households owed a homelessness duty between 2020/21 to 2022/23. Of these, 1,141 were recorded as having support needs (50%). Drug dependency needs were recorded in 10% of these households over the period, one of the highest percentages in West Sussex. Drug dependency needs are the sixth most common needs recorded.
- Bognor Housing Trust is a housing support provider operating in Bognor Regis. From January 2020 to December 2023 they supported a total of 34 people with a substance misuse problem, the majority were aged between 25 to 40 (62%). 68% of people were using cannabis and 29% cocaine. Most people were consuming one or two substances. 50% of service users were consuming drugs every day and 30% of service users were funding their drug use receiving benefits.
- In Arun 19% of JSA claims are for a duration of 5 years and over. The level of unemployment has been steady for the last few years at 3%.
- The rate of economically inactive population has been decreasing in the last few years and in 2020/22 was 15%, better than the rest of West Sussex. However, it is not currently possible to assess numbers of individuals with substance misuse.
- Each year, around 16% of families receiving Early Help support are affected by substance misuse by parents, children or both. Courtwick with Toddington, River and Orchard are the areas more affected by parental substance misuse and Bersted, Courtwick with Toddington by substance misuse of children and young people.
- 83.6% of children receiving Early help support with substance misuse as an identified problem also suffer from mental health problems.
- 23.6% of children receiving Early Help support with substance misuse identified as a problem were not in education, employment or training (NEET), compared with a NEET rate of 5.1% when substance misuse is not recorded.

- 26.7% of families where substance misuse was identified as a problem in adults, were also impacted by worklessness, compared to 9.8% when substance misuse is not mentioned.
- In 2023, 84% of Early help assessments with adult with substance misuse mentioned, also identify an adult with mental health needs, in the case of adults with no substance misuse mentioned, mental health needs drop to 53.5%.
- 9.6% of CSC assessments in Arun identified with drug use in the assessment, 6.7% of CWCF in Arun have been identified with substance misuse but they refused intervention when offered.
- In the last three academic years, Arun had 117 drug and alcohol related suspensions, and this has been increasing year on year. Males in Arun represent a higher rate than the average for West Sussex (83% males in Arun compared to 65% males in West Sussex).
- The data available showed that the schools with highest number of drug and alcohol related suspensions were The Angmering school (42 suspensions) and The Littlehampton Academy (34 suspensions). Over the period, Arun had 8 drug and alcohol related exclusions.
- CGL education referrals (under 18) increased in 2023/24 going from no referrals in 2022/23 to 5 in the last academic year. For West Sussex, cannabis has been the main reason for a referral to CGL.
- Arun has two main hotspots of cuckooed properties, in Bognor Regis and Littlehampton, the properties identified were within easy walking distance of the train station (and buses) and shopping areas.
- Arun received 78 interventions from Youth Justice Therapeutic and Family intervention of which 33% were from individuals with substance misuse records, 14% with substance misuse recorded prior to start the intervention and 19% recorded at some point during the intervention. 24% of interventions in West Sussex with substance misuse recorded are from individuals living in Arun.
- As of the 1st of February 2024, West Sussex probation teams were managing 1,319 Community and Licence Cases. Additional needs relating to drugs account for 34% of the cohort, and 29% for alcohol.
- In West Sussex, from January 2021 to January 2024, 149 Alcohol treatment Requirements, 118 Drug Rehabilitation Requirements, and 11 Mental Health Treatment Requirements have been imposed as alternatives to custodial sentences, and numbers have moderately increased over this time.

- The number of adults referred to CGL for treatment has been increasing from 2020/21, alcohol is the main referral reason, “any opiates” is the second substance driving referrals. Self-referral is the main method to contact CGL, 66% of all cases are self-referrals.
- Females are, proportionally, more affected by alcohol than males. The second main substance in females is “any opiate” while in males is “any opiates” and “non-opiate and alcohol” at the same level.
- Relatively more people seek non-opiate drug treatment between the ages of 25-34, which reduces with age, whereas relatively more people seek opiate treatment between the ages of 35-44.
- 75% of new referrals made to CGL are for people who has a mental health problem. 26% have a housing problem and 40% for people with an unemployment situation.
- Arun has received 610 Naloxone kits and the distribution in the last couple of years has increased significantly. Arun is the area in West Sussex with the highest number of Naloxone kits distributed.

Impacts on health

Accident and Emergency attendances

To understand the impact of drug use on health we requested local hospitals to provide data from 2020 to 2023.

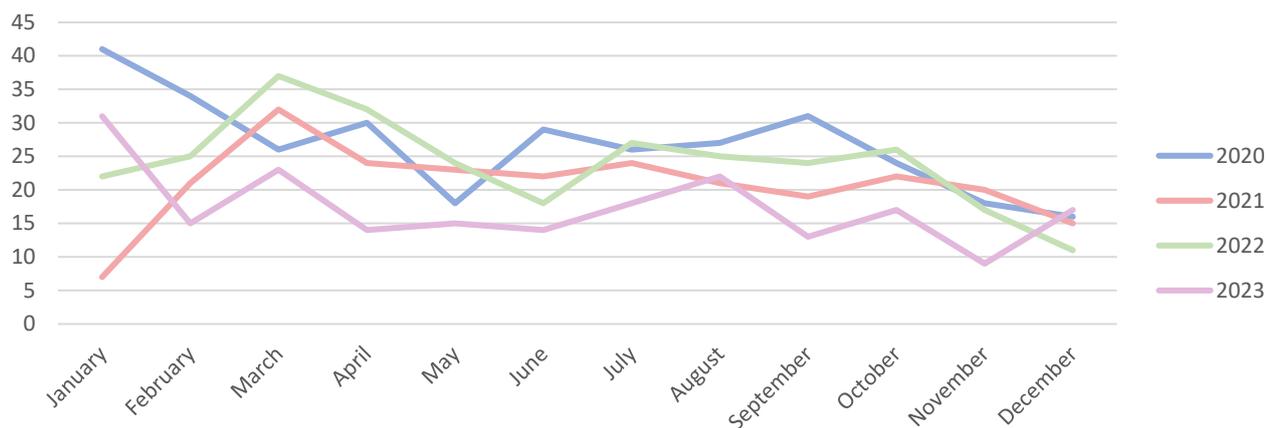
For the four-year period, there were a total of 1,066 A&E attendances where drug use was recorded from people living in post codes related to Arun.

2020 was the year with a higher number of attendances with a reduction of 22% of attendances in 2021.

Since then, attendance has fluctuated, but in 2023 attendances were 65% lower than in 2020.

By month, the number of attendances varied for each year, but May-June and November-December held lower attendances in recent years.

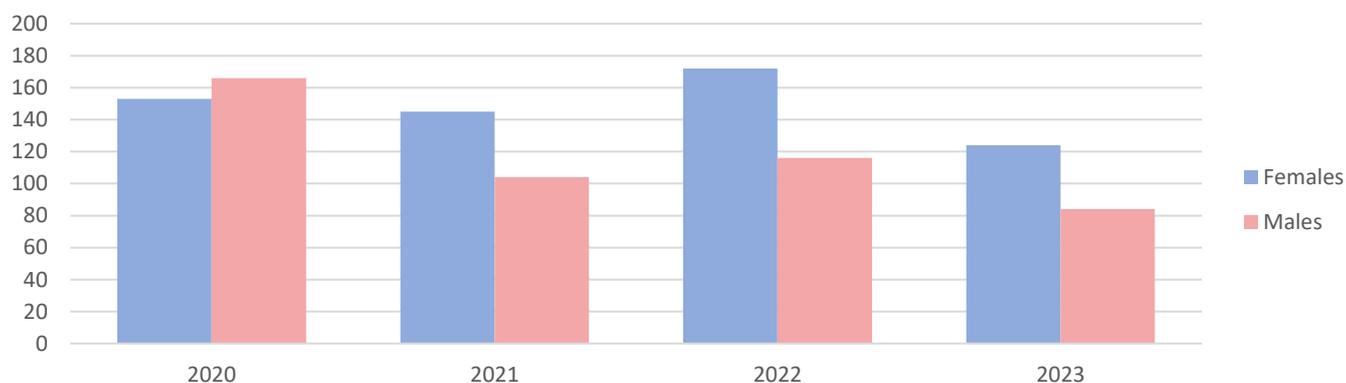
Figure 47: A&E Attendances from people living in Arun related post code where illicit drug was recorded.



Source: University Hospitals Sussex NHSFT

In 2021, 2022 and 2023 there have been more female A&E attendance than male.

Figure 48: A&E Attendances by gender

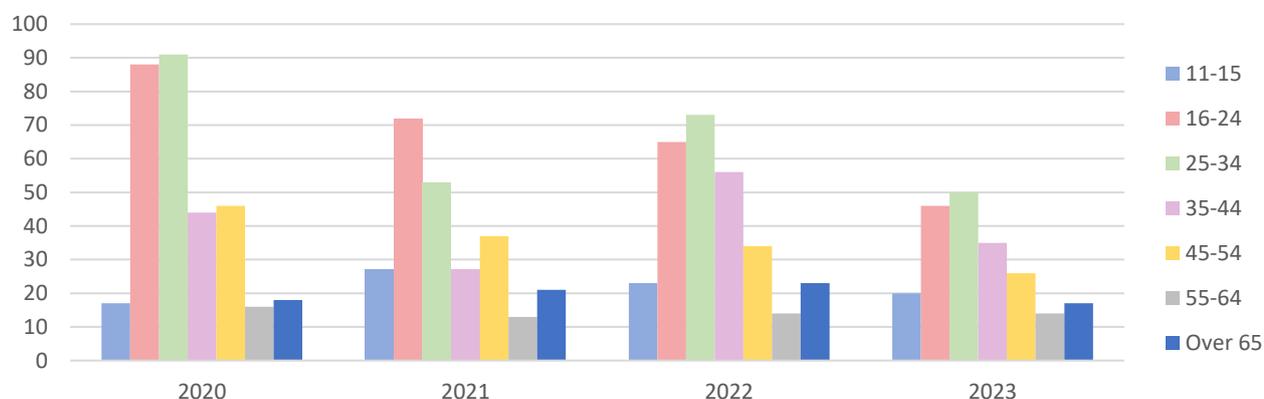


Source: University Hospitals Sussex NHSFT

The age groups with the highest attendance are 16-24 and 25-34 (in all years).

The age bracket 55-64 is the most constant over the years, with a similar number of attendances each year.

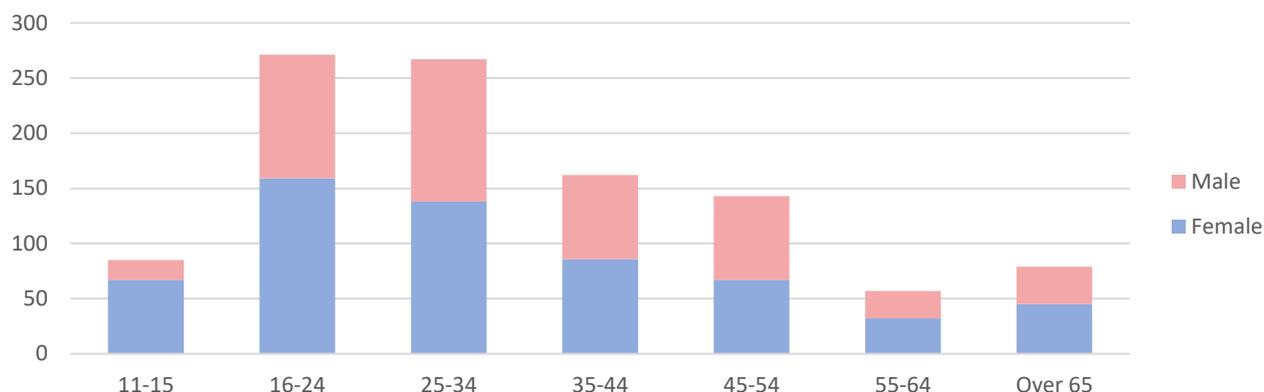
Figure 49: A&E attendances by age bracket. (*attendances under 11 have not been consider for our analysis)



Source: University Hospitals Sussex NHSFT

The age 11-15 years age group, females represent 77% of attendances.

Figure 50: A&E attendances by age bracket and gender (*attendances under 11 have not been consider for our analysis)



Source: University Hospitals Sussex NHSFT

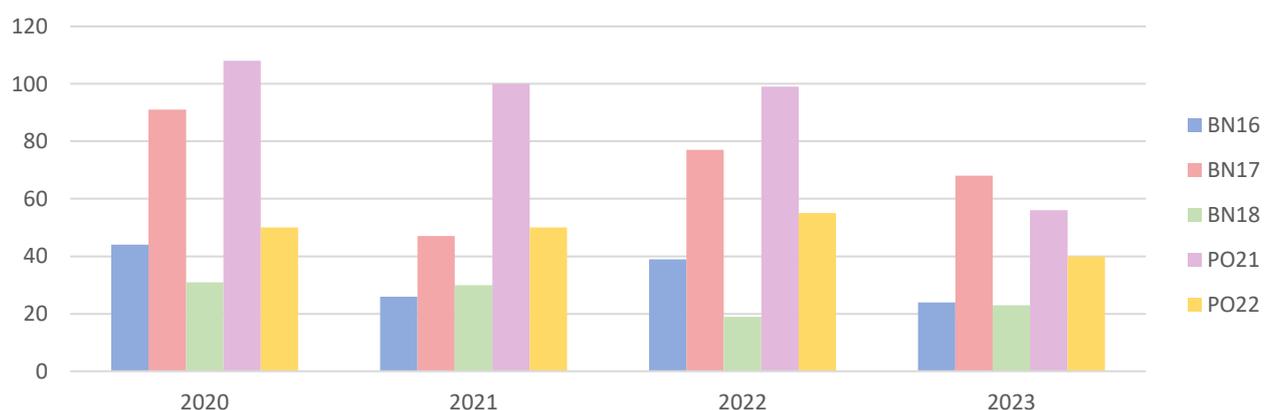
Unfortunately, we could not access the full post code so ward level analysis is not possible.

Over the period analysed, the postcode PO21 (which refer to wards: Pagham, Aldwick West, Bersted, Aldwick East, Pevensey, Marine, Hotham and Orchard) had the highest number of attendances with 34% of A&E attendances.

The second postcode with higher rate is BN17 (wards: Beach, Brookfield, River, Courtwick with Toddington) and the one with less attendances is BN18 (Yapton, Arundel and Walberton) with 10% of attendances over the period.

All post codes except BN18 have reduced the number of attendances in 2023 compared to 2022, especially PO21 with a reduction of 43% in 2023.

Figure 51: A&E attendances by postcode and year (*attendances under 11 years have not been included)



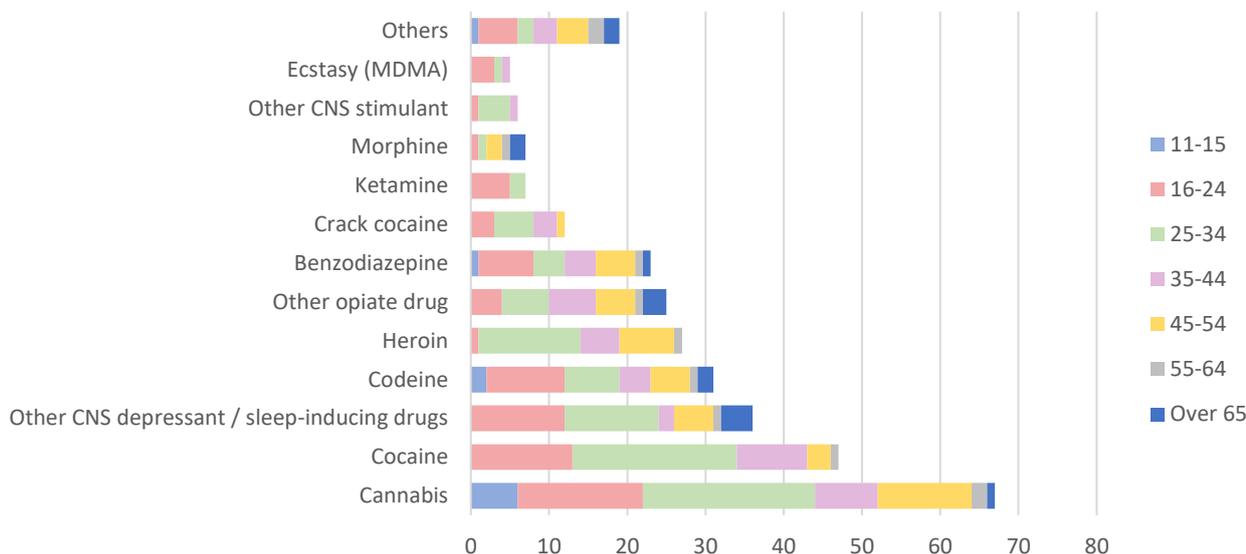
Source: University Hospitals Sussex NHSFT

The type of drug was recorded as unknown/other for over 70% of attendances. In total there were 23 substances mentioned in A&E reports; the most known drug with 67 attendances (6.3%) was cannabis, with cocaine being second with 47 attendances (4.4%).

Excluding “unknown drug” records, by age, most of A&E attendance with Cannabis recorded is for the age bracket 25-34, also the case for Cocaine. For the age bracket 11 to 15 the most known drug has been Cannabis.

48% of attendances with known drug as heroin has been on the age group 25-34, nearly double the attendances for the age group 45-54 with Heroin. Benzodiazepine, Ketamine and Ecstasy are most recorded on the age group 16-24. The most recorded substance for over 65 has been Other CNS depressant/ sleep-inducing drugs and Other opiate drugs.

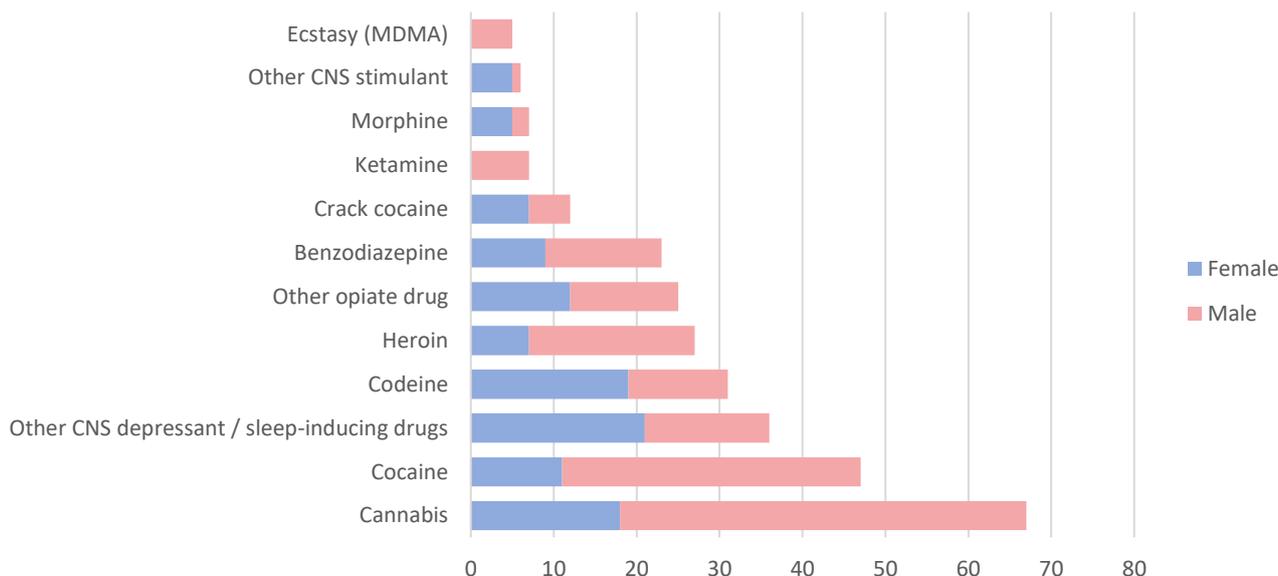
Figure 52: A&E attendances by type of drug and age (*attendances under 11 have not been consider for our analysis)



Source: University Hospitals Sussex NHSFT

The biggest difference on attendances by type of drugs and gender, is that 77% of cocaine, 74% of heroin and 73% of cannabis attendances are from males, and all the attendances with Ketamine and Ecstasy records. In the case of Other CNS stimulant, 83% of A&E attendances are from females and 71% of A&E attendances with morphine recorded are also from females.

Figure 53: A&E attendances by type of drug and gender (*attendances under 11 have not been consider for our analysis)

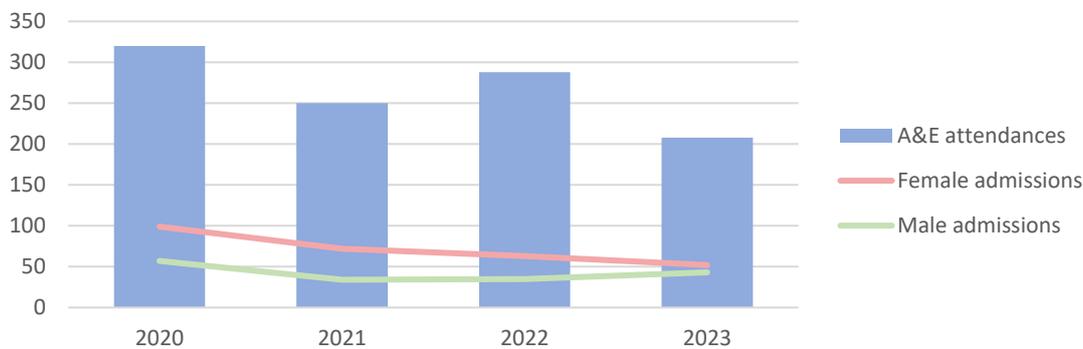


Source: University Hospitals Sussex NHSFT

The number of incidences of A&E attendances that end up in hospital admissions has decreased over the period at similar rate to the number of A&E attendances. In 2020, 65% of females attending A&E would be

admitted to hospital, while for males was 34%. In 2023, the gap between gender has reduced and while the proportion of females attending to A&E with hospital admission reduced to 42%, males increased to 51%.

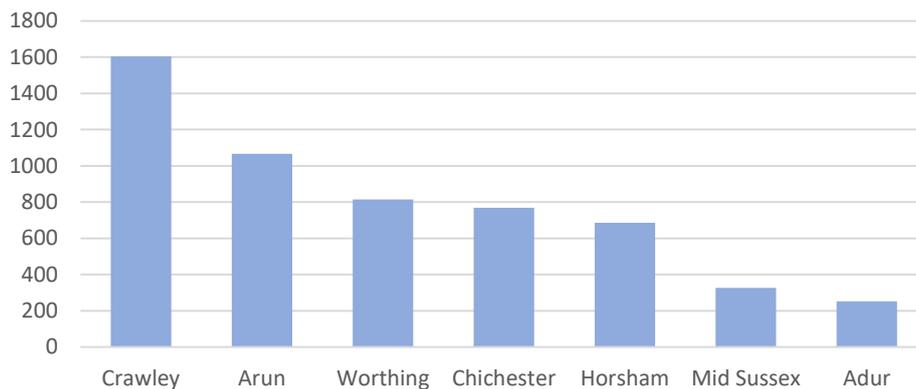
Figure 54: A&E attendances and hospital admissions by gender (*attendances under 9 have not been consider for our analysis)



Source: University Hospitals Sussex NHSFT

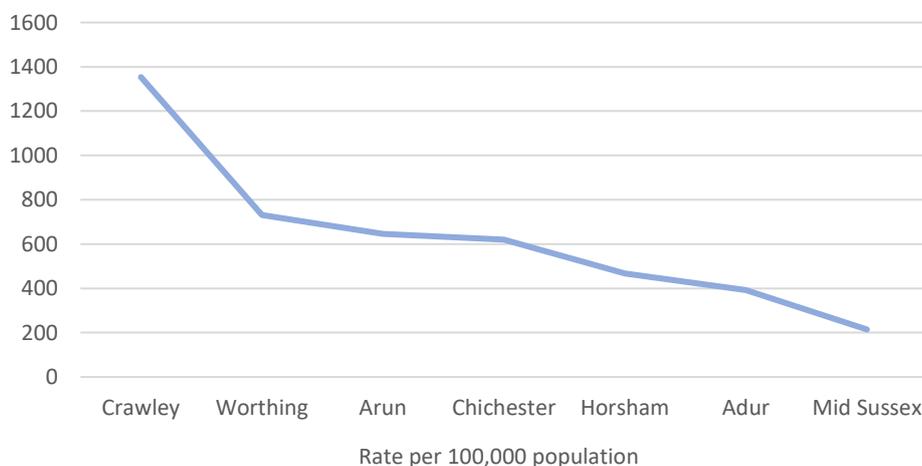
If we compare the A&E attendances from Arun with the rest of West Sussex over the period analysed, Arun is the second locality in number of attendances but when we look at the rate per 100,000 population, Arun is the third locality in West Sussex with 646 A&E attendances per 100,00 population.

Figure 55: A&E attendances by locality (*attendances under 9 have not been consider for our analysis)



Source: University Hospital Sussex and Surrey and Sussex Healthcare

Figure 56: A&E attendances 2020-2023 rate per 100,000 population (*attendances under 9 have not been consider for our analysis)



Source: University Hospital Sussex and Surrey and Sussex Healthcare

Ambulance attendances

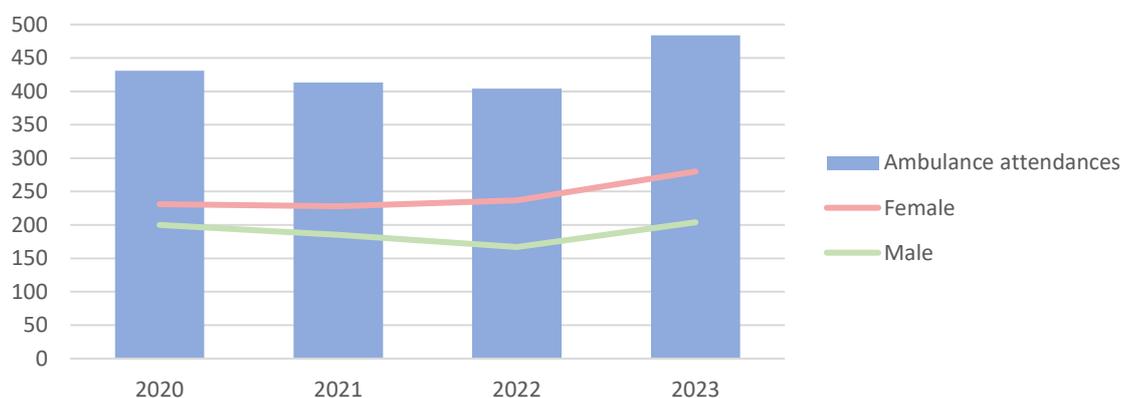
As part of our analysis and to understand the health impacts of drug use we have asked SECAMB (South East Coast Ambulance Service) for the ambulance attendances due to drug use in the area from January 2020 to December 2023.

Counts include all substance related incidents, not just illegal substances, since the drug cannot always be reliably determined.

During the period analysed (Jan 2020 to Dec 2023), Arun had a total of 1,732 ambulance attendances. There were more attendances to females compared with males.

The overall number of attendances fell between 2020 and 2022 and then increase between 2022 and 2023. But when looking at the gender, attendances to woman have remained stable while attendances to men have dropped until 2022. In 2023 ambulance incidents have increased around 20% for both females and males in the same proportion.

Figure 57: Ambulance attendances due to drug use 2020-2023 by gender



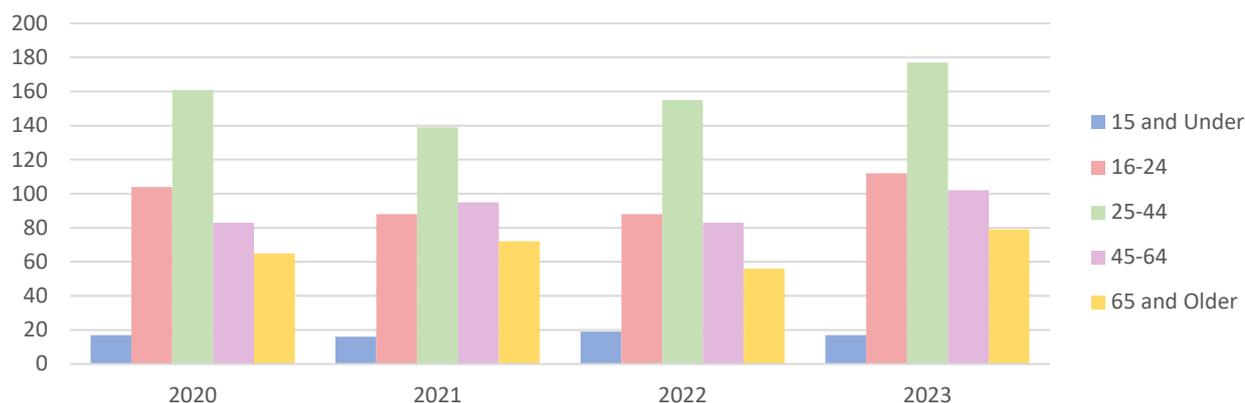
Source: SECAMB

By age, each year the 25-44 age band has the highest number of ambulance attendances (between 33% and 38%).

The second age band with the highest number of incidents is 16 – 24 (21% - 23%).

In 2023 the group 65 and older had 23 more attendances than 2022.

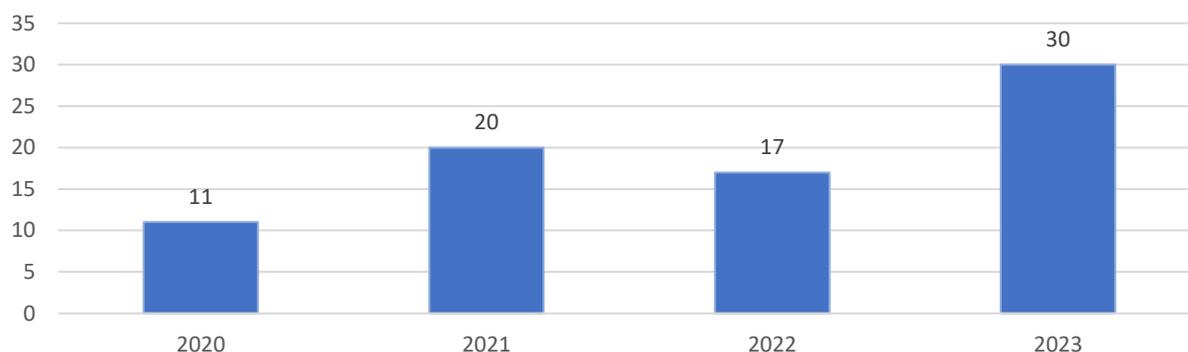
Figure 58: Ambulance attendances 2020-2023 by age



Source: SECAMB

Naloxone usage - Ambulance services use Naloxone in opiates drug incidences to rapidly reverse the effects of an opioid overdose. Since 2020 the use of naloxone has increased and in 2023 ambulance services have used naloxone nearly 3 times more than in 2020.

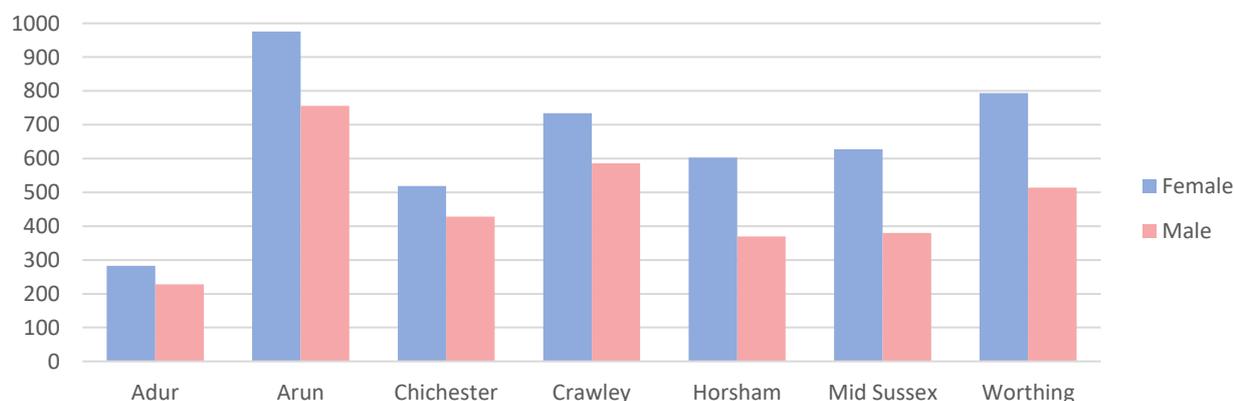
Figure 59: Times Naloxone has been used in drug incidents. 2020-2023



Source: SECAMB

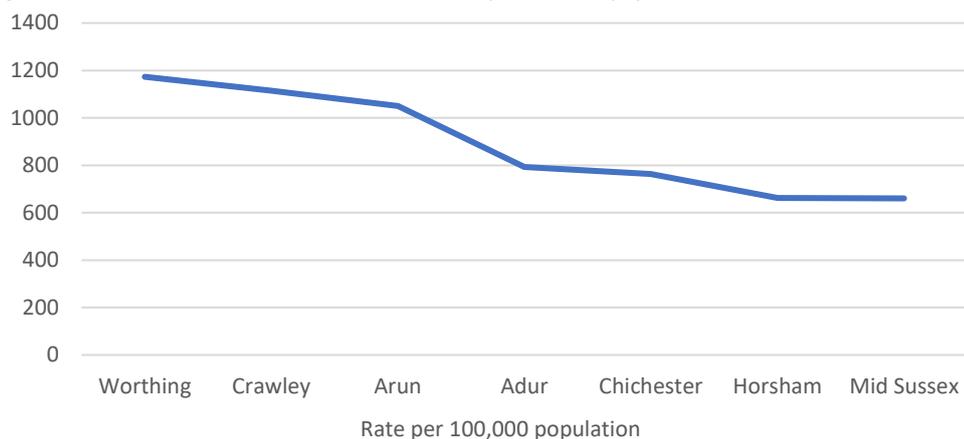
Arun has the largest population of all the West Sussex lower tier local authorities and has the highest number of ambulance attendances for substance misuse and when looking at rates per 100,000 population, is the third locality in West Sussex with the highest rate. In Arun, like the rest of West Sussex, females attendances are higher than males (55% - 62%).

Figure 60: Ambulance attendances due to drug use 2020-2023 in West Sussex



Source: SECAMB

Figure 61: Ambulance attendances 2020-2023 rate per 100,000 population



Source: SECAMB

Deaths related to substance misuse

Each year the Office for National Statistics (ONS) releases information on the number of deaths related to drug misuse by local authority. For the three years 2020 – 2022 there were 15 substance misuse related deaths in Arun.

Table 25: Substance misuse deaths related – West Sussex 2020-2022

	2020	2021	2022	Grand Total	Rate per 100,000 population
Adur	1	2	1	4	N/a
Arun	3	4	8	15	3.2
Chichester	7	2	2	11	3.2
Crawley	6	1	3	10	2.9
Horsham	3	4	3	10	2.5
Mid Sussex	1	1	8	10	2.3
Worthing	1	4	5	10	3.2
West Sussex	22	18	30	70	2.8
(SOUTH EAST)	354	364	402	1,120	4.1
(ENGLAND)	2,830	2,846	2,906	8,582	5.2

Source: ONS

Given the relatively small number of deaths at a local authority level deaths over a three year period are compared. For the past two periods, West Sussex has had significantly fewer deaths from substance misuse (per 100,000) than the South East and England).

- The overall decrease in West Sussex is attributable to males, with rates of 5.1 deaths per 100,000 residents in 2017-19 falling to 3.5 deaths per 100,000 in 2020-22.
- Rates for females, whilst lower overall, have been slowly rising at 1.8 deaths per 100,000 in 2017-19 to 2.1 deaths per 100,000 in 2020-22.

Impacts on health – Key points:

- Between January 2020 and December 2023, there were 1,066 A&E attendances where illicit drugs were recorded by people living in Arun. In recent years, female attendances have been higher than males, 60% of all attendances. The age band with the most attendances were 16-24 and 25-34.
- 34% of local A&E attendances were from people living in the post code PO21 (which refer to the following wards: Pagham, Aldwick West, Bersted, Aldwick East, Pevensey, Marine, Hotham and Orchard).
- The type of drug was recorded as “unknown/other” for over 70% of attendances. Where recorded, in total, 23 substances were mentioned in A&E reports; the most frequently mentioned drug with 67 attendances (6.3%) was cannabis, cocaine was second with 47 attendances (4.4%).
- Most of A&E attendances with cocaine or cannabis recorded were for the 25-34 age group. 48% of attendances where the known drug was recorded as heroin were for the 25-34 age group, nearly double the attendances of the age group 45-54. The most recorded substance for people aged 65 years or over was “Other CNS depressant/ sleep-inducing” and “Other opiate”.
- There are differences between men and women. 77% of cocaine and 73% of cannabis attendances are from males and all the attendances with Ecstasy recorded. In the case of Other CNS stimulant, 83% of A&E attendances are from females.
- 43% of A&E attendances result in Hospital admissions.
- From 2020 to 2023 SECAMB had 1,732 drug related attendances in Arun. Attendance to females were higher than males. The 25-44 age band had a higher number of ambulance attendances, accounting for a third or more of attendances. In 2023 the number of attendances to people aged 65 years or over increased by 20%.
- Ambulance services use Naloxone in opiate drug incidences to reverse and block the effects of an opioid overdose. Since 2020 the use of naloxone has increased and in 2023 ambulance services had used naloxone nearly 3 times more than in 2020.
- If we compare Arun with the rest of West Sussex, Arun is the locality with more drug related ambulance incidents, but due to its large population, Arun is the third locality with 1,050 ambulance incidents by 100,000 residents.
- From 2020 to 2022 there were 15 substance misuse related deaths in Arun, when we compare the rates per 100,000 habitants, Arun, Chichester and Worthing have the same rate.

Community Engagement

As part of our report and to understand the issues the community is facing regarding drug use and related harms, four surveys were developed targeting different parts of the community; residents, professionals and volunteers working with people affected by drug use and people in treatment.

Surveys for residents and professionals were available to be completed for 8 weeks during April and May and CGL service users survey was available for 6 weeks in April and May.

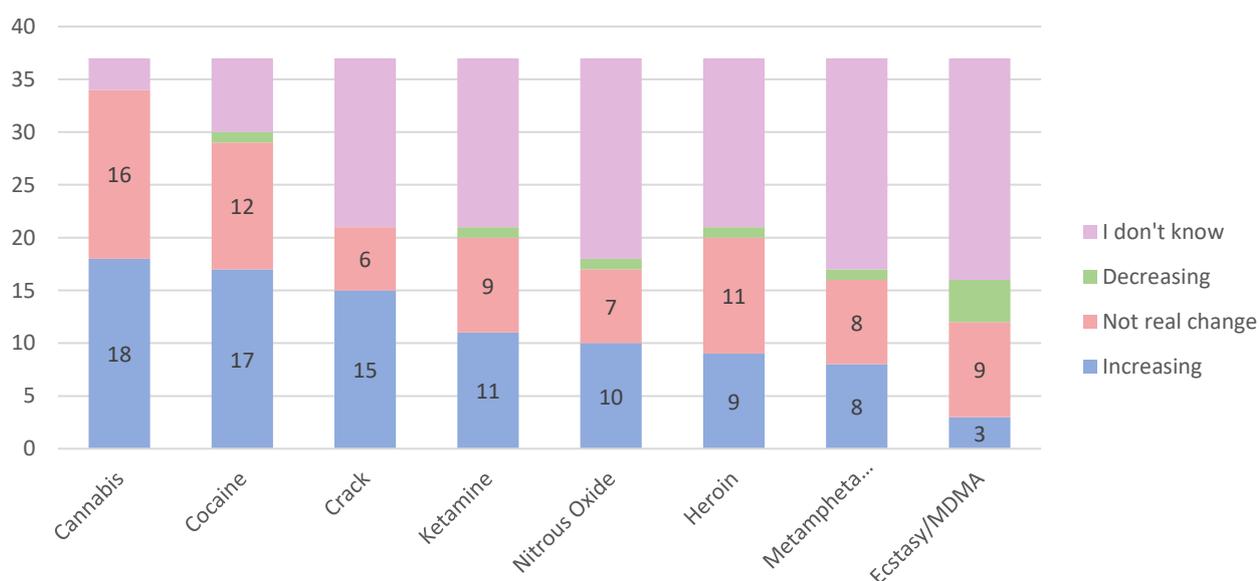
All surveys were available through a link provided for each target audience. The residents' survey link was shared in West Sussex County Council social media platforms and Social Media channels used by Arun District Council. The professionals survey link was shared directly with targeted professionals identified by the working group and also in a West Sussex County Council internal newsletter. The CGL Service users survey was shared internally to CGL service users through their email.

We received a total of 101 responses from residents living in Arun, 77 responses from professionals in West Sussex (37 were working in Arun) and 46 responses from CGL service users (in West Sussex). All responses from the surveys were analysed and summarised in the following sections.

Professionals' Survey

37 professionals working in Arun answered the survey. They were asked what their experience was regarding the level of drug use in the community. They were also asked about the use of specific drugs in their area.

Figure 62: Professionals' perception of drug use in the community



Source: Understanding drug use and harm in West Sussex, Professionals' Survey

For cannabis, cocaine, crack and ketamine a majority of professional thought that there was no change in use or use had been increasing.

Funding drug use

Professionals were asked how people funded their drug use beyond any regular employment.

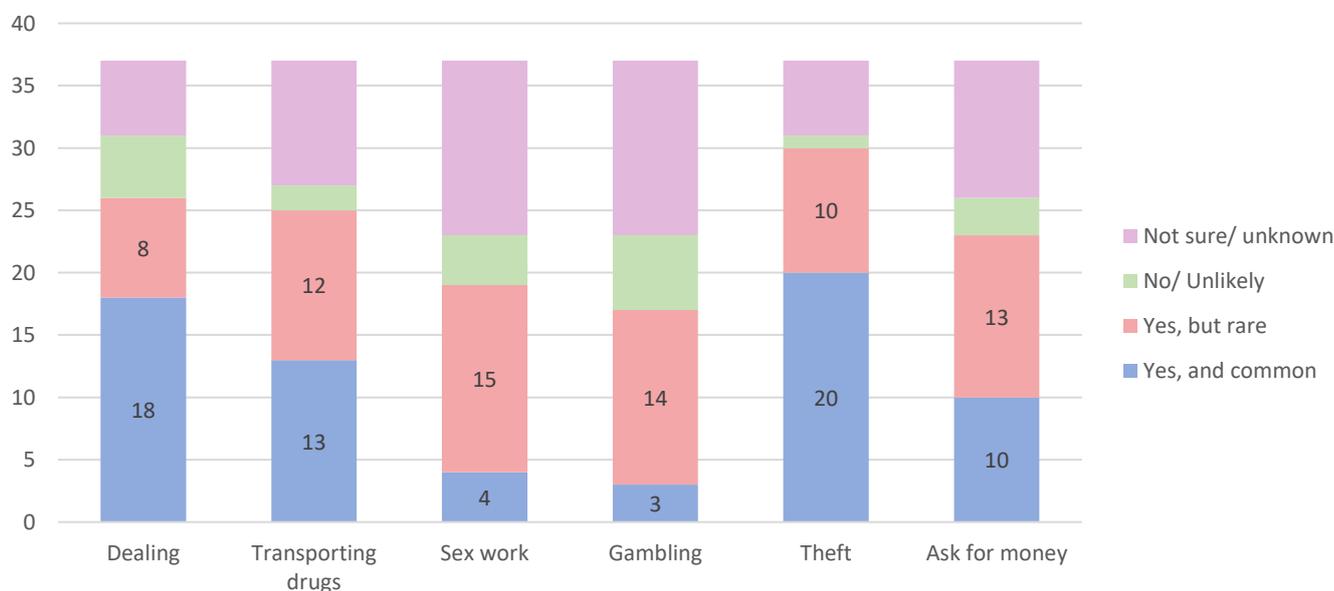
Responses were given and respondents rated their answers as “Yes, common”; “Yes, rare” or “No, unlikely”.

- 30 respondents believed that theft was a way to fund drug use with 20 believing it was common.
- The second activity considered common to fund drug use was dealing, with 26 positive responses, 18 professionals thinking this was common.
- Asking for money and transporting drugs were also seen as methods used to fund drug use. Transporting drugs cited more frequently by professionals working with young people and asking for money by people working in homeless charities.
- Sex work and gambling were considered by the professionals surveyed as the least common ways to fund drug use.

A few professionals mentioned that these issues are not often explored or discussed in their sessions, and because some young people will not recognise exploitation or share their circumstances with professionals.

One professional mentioned that most drug users would fund their drug use generally from their benefits, but some people with mental health problems and heroin/crack users would fund drug use through begging and shoplifting. Another professional mentioned ‘survival sex’ as a way to obtain food or rent. Also, some people will get into debt.

Figure 63: Professionals’ perception of how drug users fund their drug use



Source: Understanding drug use and harm in West Sussex, Professionals’ Survey

Exposure to violence and safety concerns:

Professionals were asked if people they supported had been exposed to violence due to their involvement with drugs and if they had concerns for their safety.

Many professionals said they had seen how many of their service users engaging with drugs were suffering from violence and even fear for their lives, as well as being threatened by drug dealers due to unpaid drug debts. Many people will not report this to the police, due to fear of consequences from the perpetrators and because the victims often see the perpetrators as their friends. Also, many professionals have seen cuckooed clients due to their vulnerability and some victims were unable to seek help, sometimes the perpetrators use drugs as a way to control the victim.

Some clients do not feel safe at home due to dealers knowing where they live and fears that they will wait for them at home or vandalise their home to the point that some victims will hide or even consider moving out of the area of risk. Professionals said that housing services are over-stretched and moving people to alternative properties is more difficult now than ever before; sometimes people have to be placed in temporary accommodation where there may be further issues with drugs and people said still felt unsafe.

Professionals working with young people mentioned domestic abuse as a source of violence for their clients and said some used drugs as a coping mechanism.

Violence amongst the homeless has been cited by some professionals, a homeless charity worker also mentioned that there is a risk of being exploited by “friends” when a client secures accommodation.

Life and wellbeing in the community:

Professionals were asked how drug use impacted the life or quality of life of their clients

Professionals said that some of their clients with more chaotic drug use, will use all their money on substances and increase debt and neglect every other area of need. They can then become homeless, become involved with the criminal justice system, family relationships will be affected, losing contact with their family and partners and, for some, their children. Job losses and the impact on, mental health made clients more depressed, anxious and more psychotic.

Losing family support and feeling isolated with an increase interaction with other drug users could reinforce this cycle of drug use and decline.

Mental health issues and becoming homeless was mentioned frequently and losing the capacity to find or hold down jobs reducing their motivation for positive activities and being stuck in a loop which they are unable to escape from.

Professional said children are affected in similar ways, from school exclusion, lack qualifications which reduces job opportunities, getting into debt, turning to crime, getting a police criminal record and in some cases with impact on their liberty. Family or home relationships become very difficult with volatile groups of friends which makes engaging with the community and professionals very difficult. Some children will suffer from mental health issues and physical health problems.

Physical health impacts:

Respondents were asked about the physical health impacts of drug use.

Professionals mentioned infections, amputations, loss of mobility, bruises and hard veins as a result of complications from injecting. People self-neglect and may not seek professional help.

Professionals also cited cuts, bruises and broken bones as a result of physical injuries when under the influence of substances.

Lungs, kidney and liver problems due to damage from overdoses were among the most mentioned physical impacts.

Oral health and dental problems/deformities, bad skin and malnutrition with vitamins deficiency, brain injuries and increased epileptic seizures were also mentioned by professionals.

Mental Health impacts:

Anxiety, depression and psychosis were issues mentioned most frequently by professionals.

Other issues mentioned (frequently) were paranoia, sleep problems and stress.

Many professionals pointed out that some patients with mental health problems use drugs as a way of self-medicating to cope with trauma and life stresses, drug use then exacerbates their negative mental health leaving the patient in a continuous vicious cycle, some even have suicidal thoughts.

One professional mentioned that some patients use cannabis as self-medication (despite being advised of the negative impact on their mental health) to help them relax and sleep and said there was a lack of services to provide alternative resources to assist.

Also, mentioned but less frequently: panic attacks, complex post-traumatic stress disorder, personality disorders, lack of motivation, low mood and irritation, becoming aggressive over small issues and reduced capacity of understanding which affects their decision making, suicidal thoughts and self-injury.

Many professionals said that the relationship between mental health and drug use is a blurred line, often hard to determine if the drug use is used as a form of self-medication for undiagnosed or untreated mental health issues or if the mental health issues are a result of the drug use and lifestyle.

Access to hospital services:

The main reason that professionals said their clients go to hospital was due to an overdose (accidental or intentional).

The second reason noted was injuries caused while being under the effect of substances or caused by others (stabblings, assaults, etc) or due to infections due to injection complications.

Other professionals mentioned people would also go to hospital due to a mental health crisis.

Less frequently mentioned were lung and heart problems, loss of limbs.

Vulnerabilities to habitual drug use:

The respondents were asked from their professional experience, what made people more vulnerable to habitual drug use.

Having mental health problems was stated as one of the main reasons by professionals and that sometimes access to mental health services takes time and some people will use drugs as self-medication or as a coping mechanism for their trauma or circumstances (domestic abuse, exploitation).

In general, professional stated that poverty was a contributory factor to people's vulnerabilities to drug use along with lack of housing, lack of employment and feeling that there is no hope of improvement.

Professionals also said that their clients may feel isolated in the community as a result of lack of services or poor engagement with them and also lack of family support with unstable home environments, especially if there is drug use within the family, creating major vulnerabilities.

If children are not attending school reducing lack of positive social contacts and they feel pressure by their social environment or friendship group. Also, some professionals think that the lack of hobbies and interests in young people leads to boredom and drug use.

Professional said that people with disabilities or learning needs are more vulnerable to exploitation and county lines.

How could we reduce people's vulnerabilities to drug use:

Professionals were asked how partnership work could reduce people's vulnerabilities they mentioned before.

Many professionals cited the importance of family/ young people interventions through education with schools and youth groups, some examples of these interventions mentioned:

- Offering support after school for families on low incomes where there are socio-economic vulnerabilities that pre-dispose families to higher risk of drug use.
- Educate children and young people about the implications of being involved with drugs (drug use, exploitation, etc.), introduce life experience chat to school children.
- Work on resilience, especially for young people, empowering them to say no.
- Supporting the school as place to identify children and young people with issues, with professionals, to support those at risk.
- Have more places for young people to hang out that are safe, youth clubs where children can have positive experiences and have the benefit of engagement with caring adults.
- Parental support with groups discussing issues such as drugs, teen life etc, and teach parents how to have conversations with their children when they suspect drug use or experience problems. Focus of family and ensure children have positive attachments and appropriate care within the home.
- More preventative work for vulnerable families around the risks of exploitation and county lines.
- Drug and alcohol workshops

Improving services visibility through communications and engagement:

- Help people to understand who they can talk to, how they can help and ultimately how they can refer themselves into that support.

- Professionals to have the resources and capacity to go to clients, not an expectation that clients come to services to engage and get relevant support.
- Increasing profile across social Media platforms of issues/help/resources. Local events.
- Access to support being within the community, such as in shopping centres/town centres or areas where drug users may be concentrated. Access within the GP environment to reduce stigma.
- Flexible support, offering holistic support with one person designated to contact all services needed.

Increasing mental health support was seen as one of the most important ways to reduce vulnerabilities, and it was outlined in different ways:

- Reducing waiting times, easier access to services, teaching mental health techniques.
- Focusing more time and resources on working with young people that are known to experience neglect and trauma to try and prevent them going into adulthood where they can turn to drug use as a coping mechanism.
- Preventative work looking to the next generations emotional wellbeing and resilience being better able to adapt and cope with life.

Improving housing solutions and employment opportunities:

- Housing first approach.
- Don't give benefits to those who can work, make them work for their money to give them a sense of purpose and improve self esteem
- More affordable supported housing and appropriate housing for care leavers, people with dual diagnosis and for those who have disabilities where they can feel settled and get the support that they need.
- Accommodation in rural locations away from temptations

Increasing services:

- More support around debt help, financial advice
- Safer injecting spaces need to be considered.
- Gym memberships for drug affected (used in a group only) so those motivated can get fit and feel the benefits while recovering.

Joint work between services: improving communication and relationships between services.

More police presence in the streets and reduce county lines, more CCTV cameras.

Barriers that can prevent people from accessing help/support:

Professionals were asked what barriers may prevent people from accessing the support they need.

Professional said that the main barrier to seeking support for a substance misuse problem is not feeling ready for a change or not identifying substance misuse as a problem needed to be resolved.

Also, some said that service users often feel the stigma with negative attitudes from staff and they feel judged and embarrassed. They are concerned with being labelled.

Some professional said that if people are trying to get help and organisations do not have capacity or resources to meet their need, they may believe they have been let down and gaining trust when they try to reach out again with services/professionals is very hard.

Also, people fear the consequences of admitting drug use, from children thinking they may lose their place at school, to parents thinking they may lose their children to social care. They fear the police and legal consequences. Sometimes this fear comes from the pressure from drug dealers or their exploited situation.

Some professional said that some barriers come from services and the way they work, with some professionals mentioning the long waiting list to access services, complicated referral processes, chaotic lifestyles not fitting into the rigid expectations of services where they have to make appointments instead of drop ins. Also, travel expenses to make the appointments was seen as a barrier to seek and maintain support.

Some professionals said when people are working with a lot of professionals, they do not want to have to repeat their personal story to new people all the time and this becomes a barrier. When staff turnover is high, service users may meet a support worker they open up to and when that support worker leaves, they would have to start again have to start again. Some people will not know what support is available for them and not know how to access the service or who to ask.

Professionals Survey – Key points

- Cocaine and Crack, Cannabis were all seen as staying the same or increasing by the majority of professionals.
- In relation to how drug use was funded, professionals said that theft was the most common way to fund drug use followed by dealing. Asking for money and transporting drugs are also seen as an option used to fund drug use, transporting drugs is seen more often by professionals working with young people while asking for money is cited by people working in homelessness charities. Some professionals pointed out that young people would not recognise the exploitation and would not share their circumstances with professionals.
- Many professionals said that many of their service users suffered from violence and are even fear for their lives. One of the main reasons given was being threatened by drug dealers due to unpaid drug debts. Many victims will not report to the police due to fear of consequences from the perpetrators.
- Sometimes the exposure to violence in young people comes from domestic abuse, with some using drugs as a coping mechanism.
- Some professional said some homeless people could be exploited by “friends” when they get secure accommodation.
- Professionals said that clients with the most chaotic drug use, use all their money on drugs and increase their debt risking their family, their house and their jobs, some lose family relationships and children with impacts on their mental health.
- Professional said that losing family support and feeling isolated with an increase interaction with other drug users would reinforce this vicious cycle of drug and destruction.
- Children were cited as being excluded from school, lacking qualifications, reducing their job opportunities, getting into debt, turning to crime and ultimately getting a police criminal record. Family or home relationships become very difficult with volatile groups of friends, which makes engaging with community and professionals very difficult.
- Regarding physical health impacts of drug use, professionals have referred to infections, amputations, loss of mobility, bruises and hard veins as a result of complications from injecting and that people self-neglect and do not seek professional help when needed.
- Anxiety, depression and psychosis are the most mental health issues mentioned by professionals. Other issues also mentioned frequently are paranoia, sleep problems and stress.
- Many professionals have pointed out that some patients with mental health problems use drugs as a way to self-medicate to cope with their trauma and life stresses.

- Professional said the main reason for hospital admission by service users was due to an overdose (accidental or intentional), followed by injuries caused while been under the effect of substances or caused by others (stabblings, assaults, etc) or due to infections. Some people will have a mental health crisis.
- Professionals said that people are more vulnerable to drug use if they have a mental health problem, and said drugs are used for self-medication purposes. Also, that drugs are used as a coping mechanism for their traumas or circumstances (domestic abuse, exploitation).
- Another factor that increases vulnerability to drug use is poverty, lack of housing and employment, people feel trapped with no hope of improvement. And so is a lack of positive social interactions for both adult and children.
- People with disabilities or learning needs are cited as being more vulnerable to exploitation and county lines.
- To reduce some of the vulnerabilities mentioned, professionals proposed more interventions for family/young people through education and youth groups: offering support, education, working on resilience and in social positive interactions with the community. Increasing service visibility through communication and engagement reducing stigma and judgement.
- It was also considered very important to increase mental health support services to reduce waiting times and focus on young people's traumas, enabling them to go into adulthood with coping mechanisms resulting in more resilience individuals. Improving housing solutions and creating employment opportunities.
- Joint work between services: improve communication and relationship between services.
- The main barriers that prevent people from accessing support is not feeling ready for a change or not identifying their substance misuse as a problem they need to resolve. Also fear, the fear of being judged by professionals, fear of losing their children if they admit to drug use, the fear of getting the police involved and having legal consequences, the fear of drug dealers that are exploiting them.
- Other barriers coming from services setting were mentioned: long waiting list to access services and the complicated referral processes, chaotic lifestyles not fitting into the rigid expectations of services where they must make appointments instead of drop ins. Also, the travel expenses to make to the appointments was seen as a barrier to seek and maintain support. When the staff rotation is very high within service providers, service users feel they must repeat and start over again which can be discouraging. Some people will not know what support is available for them, not knowing how to access the service or who to ask.

Residents' Survey

This survey was designed to understand the issues that are affecting the community regarding drug use and had two sections: all residents, and residents who have children between 11 and 25 years old. The survey was divided into two sections:

- the first section the aim was to understand the residents' perception of drug use in the community and what issues from drug use causes concern in the community, at the same time if people in the community know where to access help and the role of social media regarding drug use/distribution.
- The second section was designed to understand if parents are aware of their children using drugs and how they communicate the risk of drug use to their children and if they are aware of what their children access online.

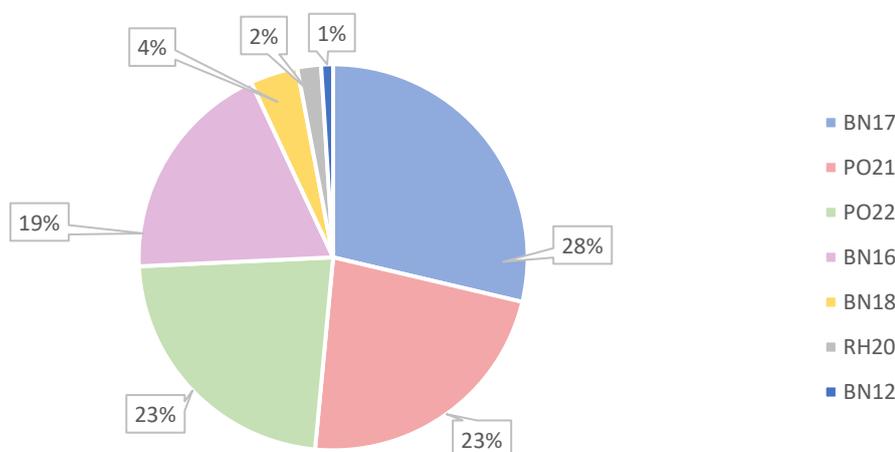
101 people living in Arun responded to the survey.

The majority of respondents were females (70%) and by age most people (55%) were between 45 and 64 years old.

Most people were homeowners and either employed/self-employed (50%) or retired (20%).

29 people were living within the postcode BN17 (Littlehampton), 23 in PO21 (Bognor Regis) and PO22 (Barnham/Bognor Regis) and 19 in BN16 (Rustington/Angmering).

Figure 64: Residents' post codes

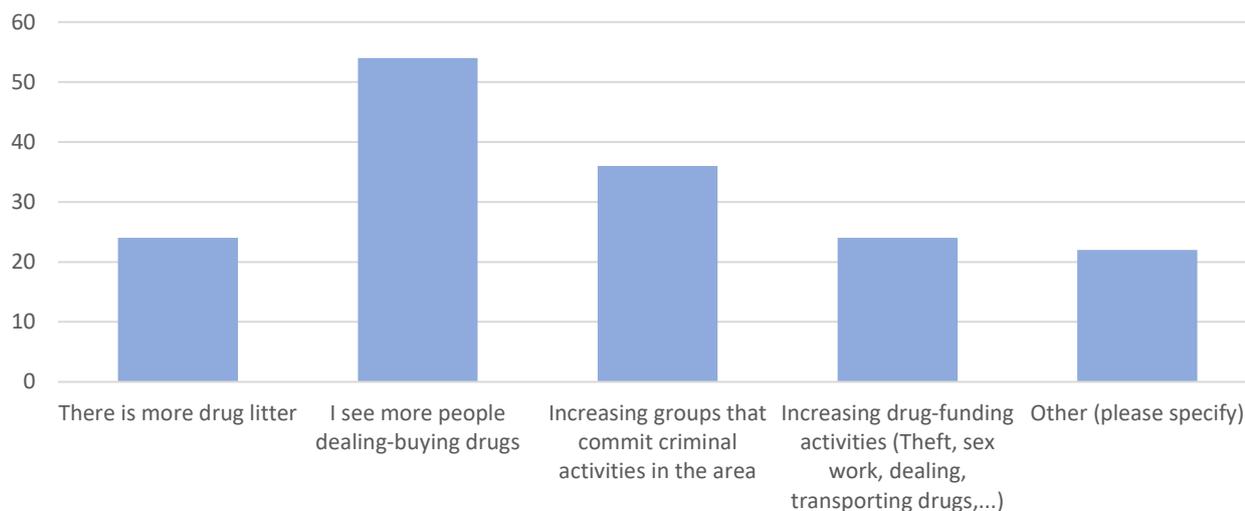


Source: Understanding drug use and harm in West Sussex, Residents' Survey

Drug use in the community

80% of respondents considered that drug use is increasing in the community and the reasons that make them believe drug use is increasing is due to "I see more people dealing and buying drugs" (67%) followed by "increasing groups that commit criminal activity" (44%).

Figure 65: Residents’ reasons to believe drug use is increasing (respondents could select more than one answer)



Source: Understanding drug use and harm in West Sussex, Residents’ Survey

Due to the limitations of extracting the information from the survey, the category “Other (please specify)” couldn’t be analysed by district/borough, the information has been analysed for West Sussex.

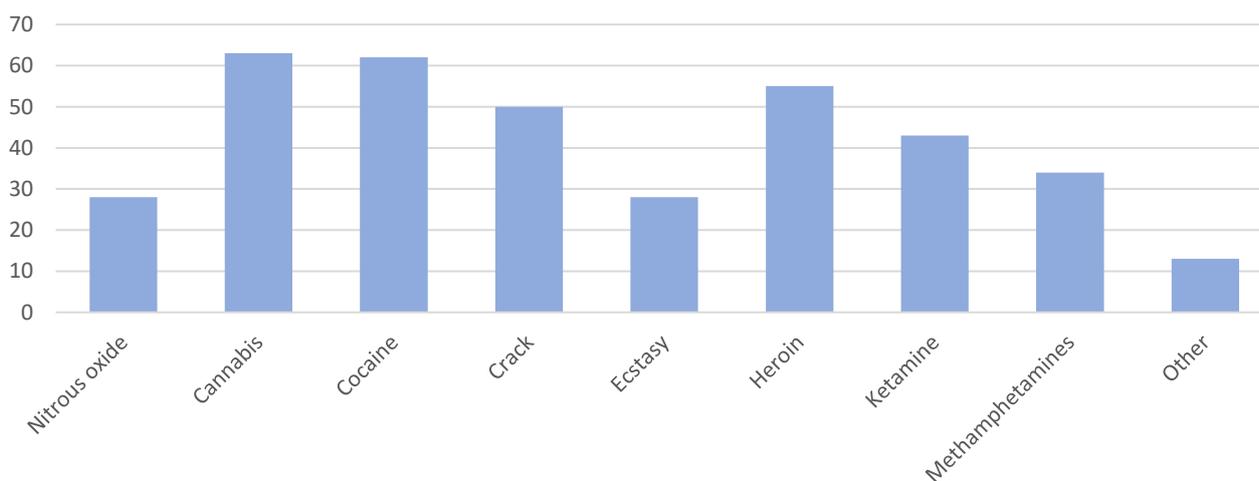
Across all West Sussex, people complained of “cannabis smell” especially in town centres and “seeing more people doing drugs”, people’s perception is that drug users do not hide anymore and are happy to do it in front of others.

Regarding what drug use concerned them the most in the local community, cannabis and cocaine were the drugs with more mentions, followed by heroin and crack.

The drugs that caused the least concern to residents were ecstasy and nitrous oxide.

There are no major differences if we analyse the information by age.

Figure 66: Residents – drugs that causes more concern in the local community

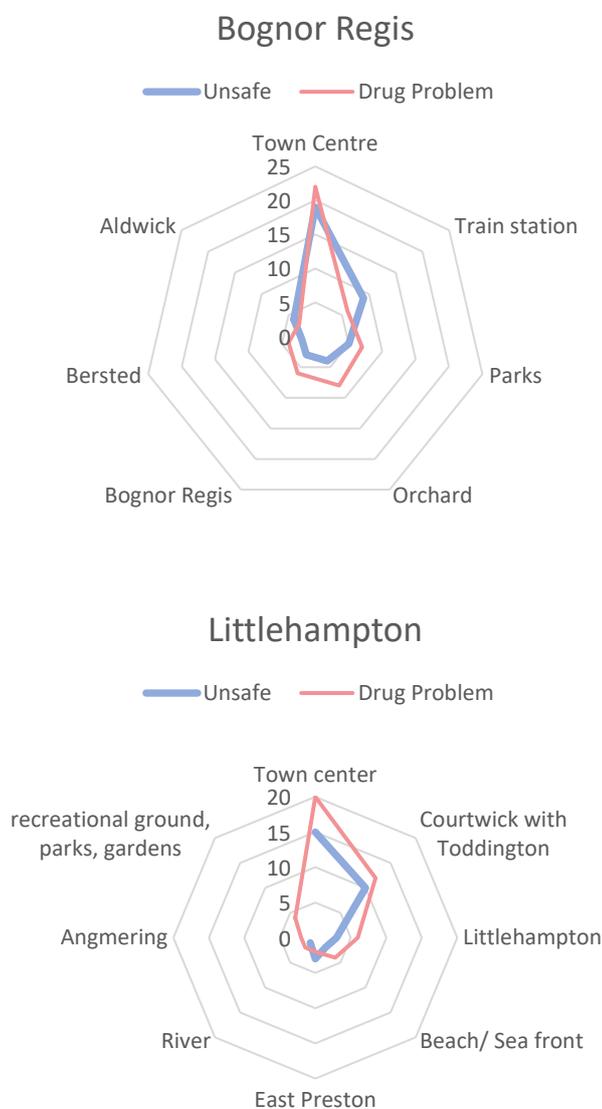


Source: Understanding drug use and harm in West Sussex, Residents’ Survey

We asked residents what areas have higher drug use in the community and in the answers given we could identify two main hotspots, Bognor Regis and Littlehampton, so we have divided the answers between the two.

- In Littlehampton, the main areas mentioned with the highest drug use was the town centre, followed by Courtwick with Toddington. In Bognor Regis, the town centre was also identified as the main area with drug use followed by train stations, parks and the ward that was cited the most due to drug problem was Orchard. Regarding where they feel unsafe, the same areas were identified.

Figure 67: Residents' perception of areas more affected by drug use and unsafe feeling



Source: Understanding drug use and harm in West Sussex, Residents' Survey

Drugs harms

We asked residents what harm they thought occasional/recreational drug use caused the community and/or at an individual level.

Most people (80%) said that it causes harm to both the individual and at a community level.

At an individual level, the residents identified health risks, addiction, and the negative impact on family relationships.

The community harms identified more often were ASB, crime and normalising drugs socially.

Table 26: Residents' – harms of recreational drug use

Harms on the individual	Mentions
Physical health risks	23
Leads to addiction/ Increase the problem	15
Family relationships	10
Exploitation	5
Mental health risks	4
Financial risk	2

Harms on the community	Mentions
ASB	38
Crime	30
Negative - normalise	16
Violence	8
Drugged driving	8
Community - cost	8
Drug litter	3
County Lines	2

Source: Understanding drug use and harm in West Sussex, Residents' Survey

Where to get support

Residents were asked if they knew where to get help in case of addiction or if they were pressured to commit crime to understand if they are aware of services available in the community.

63% of residents responded that they knew where to get help for addiction and 66% if pressured to commit crime.

These percentages improved when respondents were parents of children of age between 11 and 25, as 71% of parents knew where to get help for addiction or if being pressured to commit crime.

Personal drug use

Six residents responded that they have taken drugs recently.

One said they took drugs on rare occasions, and 4 said they were regular users.

2 of them access to drugs buying them directly from the dealer and two others also use alternative ways including text/social media.

Three of them have seen drugs advertised on social media.

One person said they did not know where to get help for addiction and all of them know where to get help if pressured to commit crime. 5 were males and 1 female. 4 of them are aged between 24 and 44 years old, one is between 45 and 65 and one over 65.

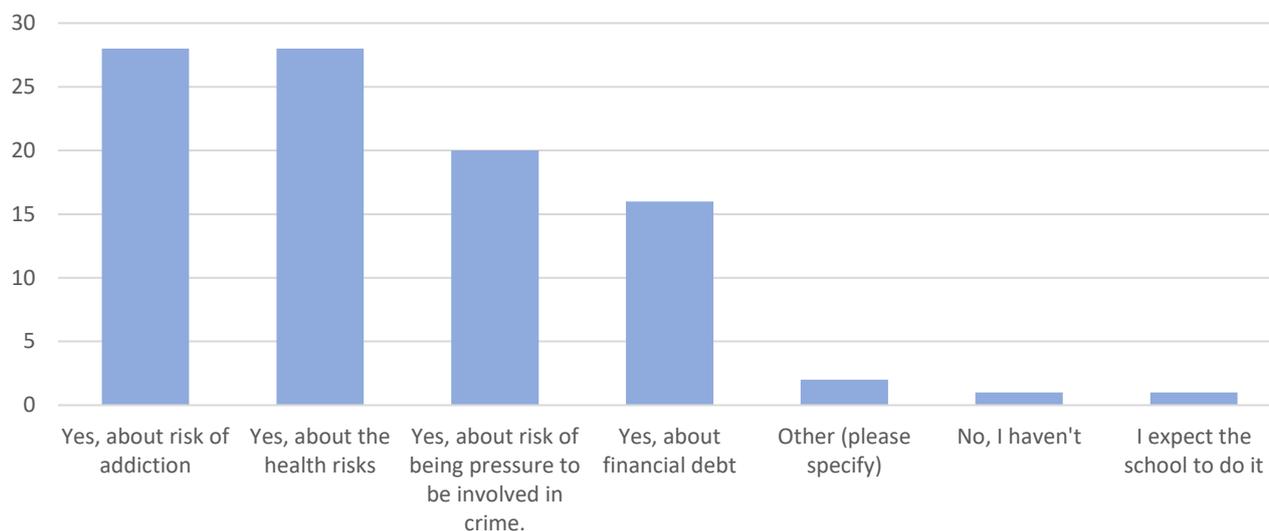
Parents

31 respondents had children between 11 and 25 years old and 71% (22 parents) are concerned about drug use in the local community.

Most parents said they have talked to their children about the risks of addiction or the health risk caused by drug use.

64% of parents (20) have talked to their children about risk of being pressured to commit crime, 52% (16 parents) would have talked about financial debt due to drug use.

Figure 68 : Residents – Parents: talking about drug risks to their children

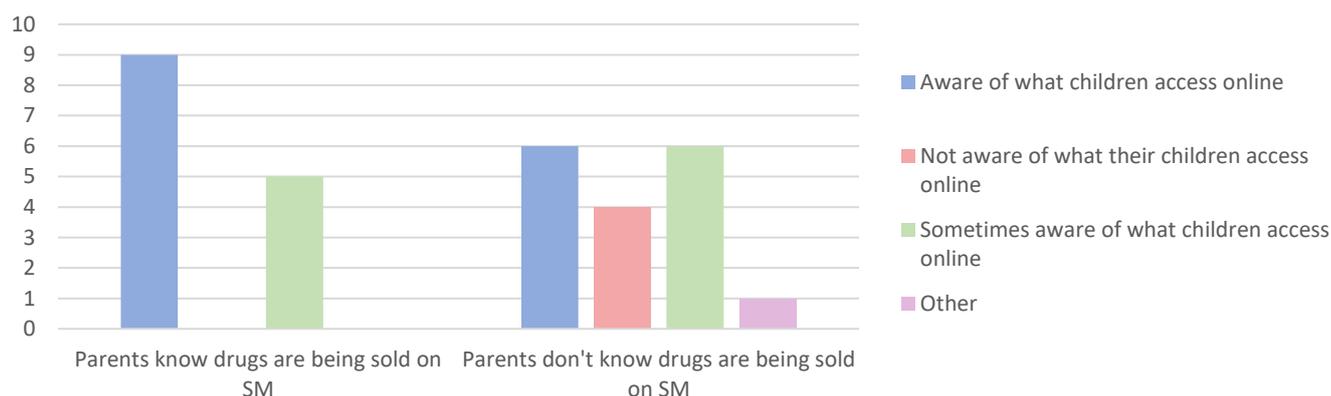


Source: Understanding drug use and harm in West Sussex, Residents' Survey

55% of parents said they did not know drugs are being sold using social media channels, of those who are aware, 64% would know what their children access online on a regular basis and 36% sometimes.

The parents who don't know that drugs are been sold on Social Media, were also less likely to know what their children access online.

Figure 69: Residents – Parents Social media knowledge



Source: Understanding drug use and harm in West Sussex, Residents' Survey

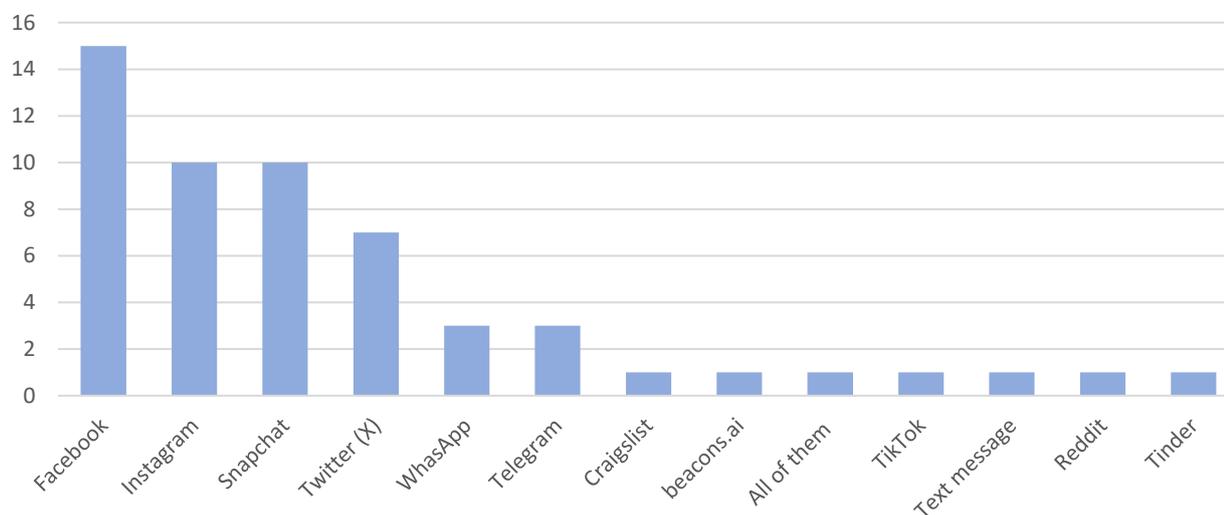
Seventeen parents (55%) know that their children have been offered drugs and nine of them said they were certain that their children have taken drugs.

In total, 12 parents said that are aware that their children have taken drugs, with one child taking drugs regularly, 5 do it sometimes and 6 rarely. 75% of those parents would know where to get help for addiction and just 50% would know where to get help if pressured to commit crime. Just two parents have asked for help from professionals regarding their children using drugs.

Social Media

In West Sussex there have been 50 respondents (11 in Arun) who have seen drug advertisements on social media. Facebook is the platform where more people have seen drug adverts.

Figure 70: Social Media platform where residents have seen drug adverts



Source: Understanding drug use and harm in West Sussex, Residents' Survey

Residents Survey – Key points

- 80% of respondents considered that drug use is increasing in the community and the reasons for this is due to “I see more people dealing and buying drugs” (67%) followed by “increasing groups that commit criminal activity” (44%). People’s perception is that drug users do not hide anymore and are happy to do it in front of others.
- Regarding what drug use concerned them the most, cannabis and cocaine were the drugs with more mentions, followed by heroin and crack. The drugs that cause the least concern to residents were ecstasy and nitrous oxide.
- There were 2 hotspot areas identified with higher drug use, Bognor Regis and Littlehampton. In Littlehampton, the main areas mentioned with the highest drug use were the town centre followed by Courtwick with Toddington. In Bognor Regis, the town centre was also identified as the main area with drug use followed by train stations and parks.
- 80% of respondents said that recreational drug use causes harm to both the community and on an individual level. As individual harms, residents identified health risks, the risk to become addicted, and the negative impact in family relationships. The community harms identified more often were ASB, crime and normalising drugs socially.
- 63% of residents knew where to get help for addiction and 66% if pressured to commit crime. These percentages increased to 71% when respondents were parents.
- 71% of parents are concerned about drug use in the local community. Most parents have talked to their children about the risks of addiction or the health risk caused by drug use. 64% of parents have talked to their children about risk of being pressure to commit crime and 52% have talked about financial debt due to drug use.
- 55% of parents did not know drugs are being sold using social media channels, of those who were aware, 64% would know what their children access online in regular basis and 36% sometimes. The parents who don’t know that drugs are been sold on Social Media, are less likely to know what their children access online.
- 50 respondents in West Sussex (11 in Arun) have seen drug advertisements on social media.

CGL – Service Users’ Survey

This survey was designed for people with drug use engaged with CGL (Alcohol and Drug treatment provider) to understand the vulnerabilities that lead to drug use, what the barriers to seek for help and support are, and if people are aware of this support when they need it. We also wanted to understand what is important in the recovery journey.

In total, 46 responses were submitted in West Sussex, more responses from men than women and by age, largest number of responses from people aged 45 to 64 years.

over 50% of respondents said they were unemployed and not seeking employment and 11% were unemployed and seeking employment. 6% of respondents were working, or in education or training.

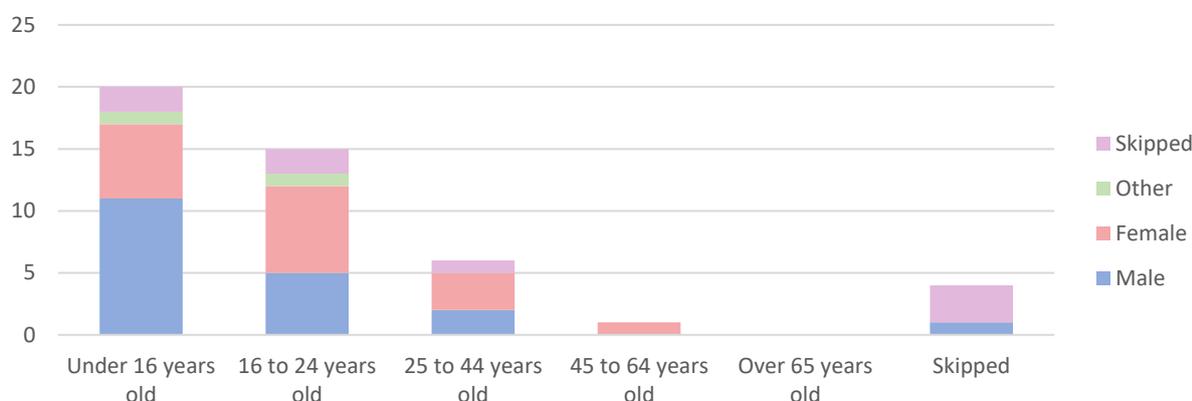
37% of respondents are living in social housing accommodation; 13% are living in private renting and 6% are homeowners, 6% are homeless or living in emergency accommodation.

First time drug use

To understand the first experiences with drugs, we asked respondents how old they were when they tried drugs for first time, the circumstances and which drugs they used.

Most people (76%) tried drugs for first time when they were under 25 years old, 43% of people when they were under 16 and 33% between 16 and 24 years old, males seem to try drugs younger than females.

Figure 71: People’s age when they try drug for first time



Source: Understanding drug use and harm in West Sussex, CGL Service Users’ Survey

Regarding the circumstances around the first time they tried drugs, 26% of respondents answered it was due to curiosity, especially people who tried drugs when they were under 16 years old.

The second reason given (21%) was “My friends/family were doing it, I feel I have to”.

The only respondent who said they had tried drugs for first time at the age of over 45 did it as an alternative for prescribed medicines. This respondent said heroin was the first drug they had tried.

Among the answers given in the “Other” category are: leading by friends, trauma and depression, to lose weight, fun at school and prescribed.

74% of people mentioned that cannabis was one of the first drugs used.

Nitrous oxide was mentioned by people who tried drugs when they were under 16.

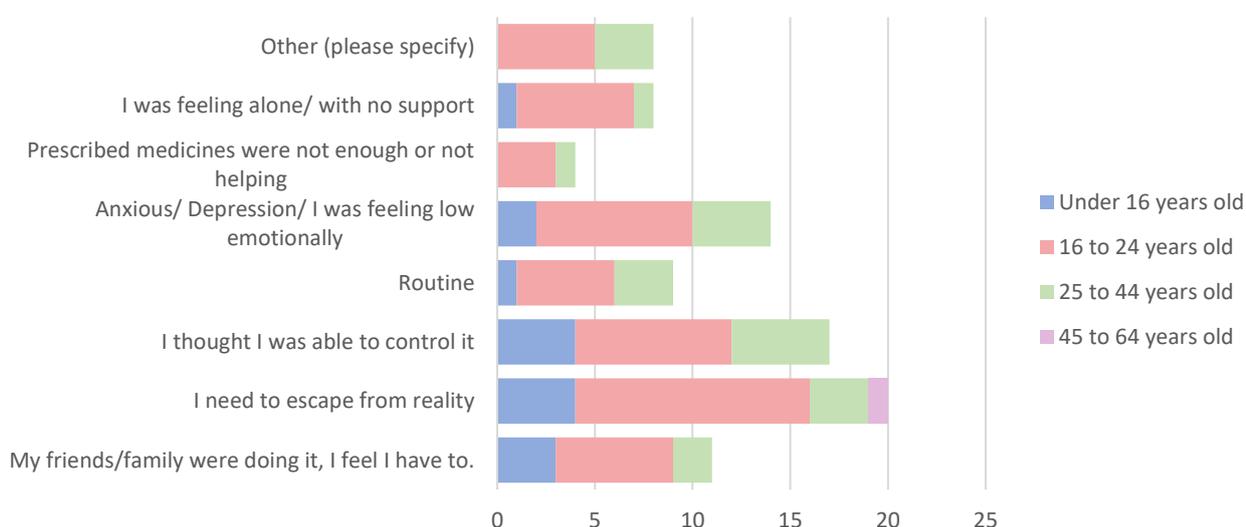
46% of respondents considered that when they tried drugs for first time they were healthy and 28% mentioned they had some kind of mental health problem, including anxiety and depression (two of those due to body weight concern).

Regular drug use

We asked respondents when they started to use drugs regularly and their circumstances.

Most people (54%) started to use drugs regularly between 16 and 24 years, among the main factors given were “to escape from reality” (48%), due to some mental health issue like anxiety, depression or feeling low emotionally (32%) or thinking they were able to control it (32%).

Figure 72: Factors for regular drug use



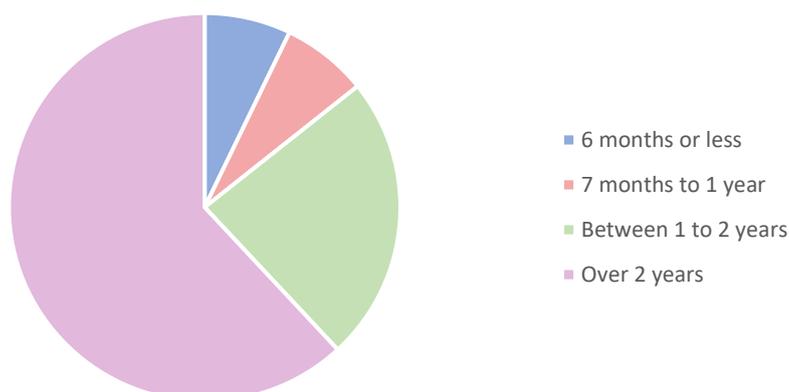
Source: Understanding drug use and harm in West Sussex, Residents’ Survey

22% of people started to have regular drug use between 25 and 44 years old and the main reasons given were thinking they were able to control it (50%) or due to anxiety, depression or feeling low emotionally (40%).

Cannabis and heroin were the drugs most frequently cited by respondents, 32 people consumed cannabis regularly and 27 of those did it twice or more a week the second drug most consumed was heroin consumed regularly by 22 people, 15 of those did it twice or more a week.

We also asked respondents when they decided they needed help. 62% of people said they were living with regular drug use for over 2 years before they decided they needed help or support for their drug use.

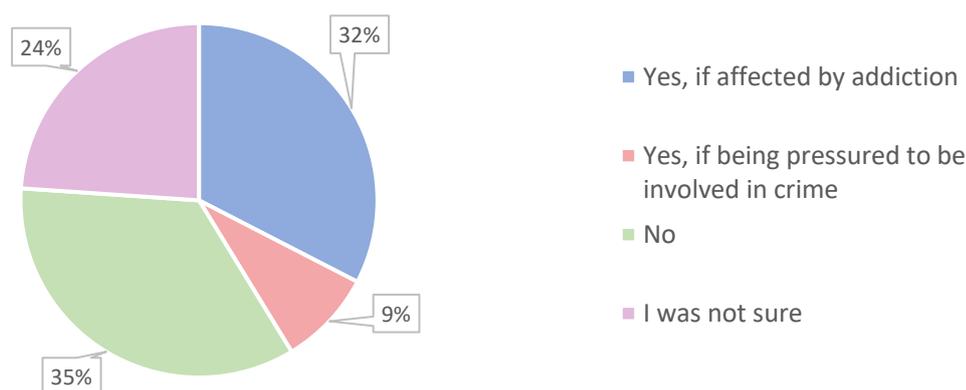
Figure 73: When people realised they needed help/ support



Source: Understanding drug use and harm in West Sussex, Residents' Survey

Unfortunately, deciding they needed help didn't mean they knew where to get help, just 33% of respondents said they knew where to get help for addiction and 9% where to get help when being pressured to be involved in crime.

Figure 74: People knowledge where to get support



Impacts of drug use

To understand the vulnerabilities of people with regular drug use, we asked respondents how drug use has impacted their life.

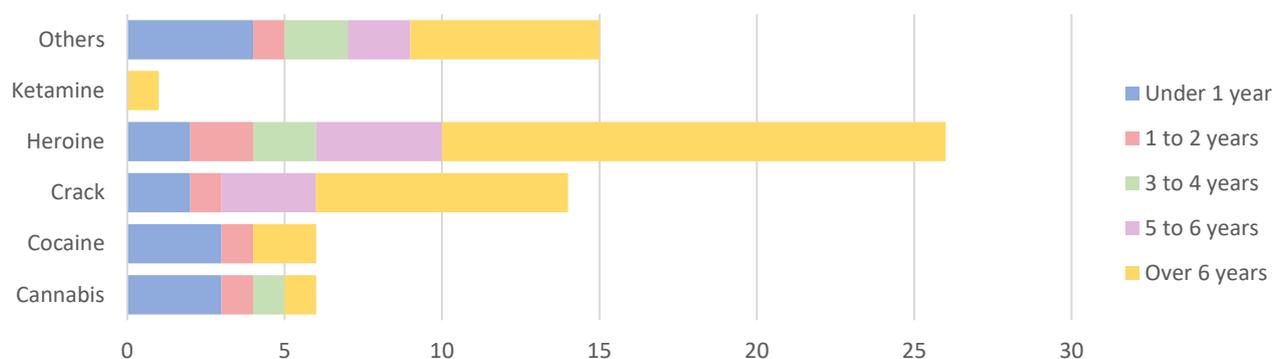
Drug use affects people in multiple ways, most people said that drug use has affected their mental and physical health (67-72% of respondents), negatively impacted social and family life (54-65%), loss of employment and accommodation (37-54%), negatively impacted economically (50%) and even involvement with criminal justice (43%).

We also asked respondents if they have been asked to deal/transport drugs to fund their drug use, 20 people (37%) said they have been asked to transport drugs (17% didn't answer the question). Of those who have been asked to transport drugs, 17 (85%) have agreed to do it. Of those who agreed to transport drugs, 10 (59%) were concerned for their safety due to their involvement with drugs.

Treatment

Most of the respondents (56%) said they were getting treatment for at least Heroin, the second substance cited was Crack with 33% of respondents getting treatment. For both substances, most respondents have been in treatment for over 6 years.

Figure 75: Length in treatment by substances

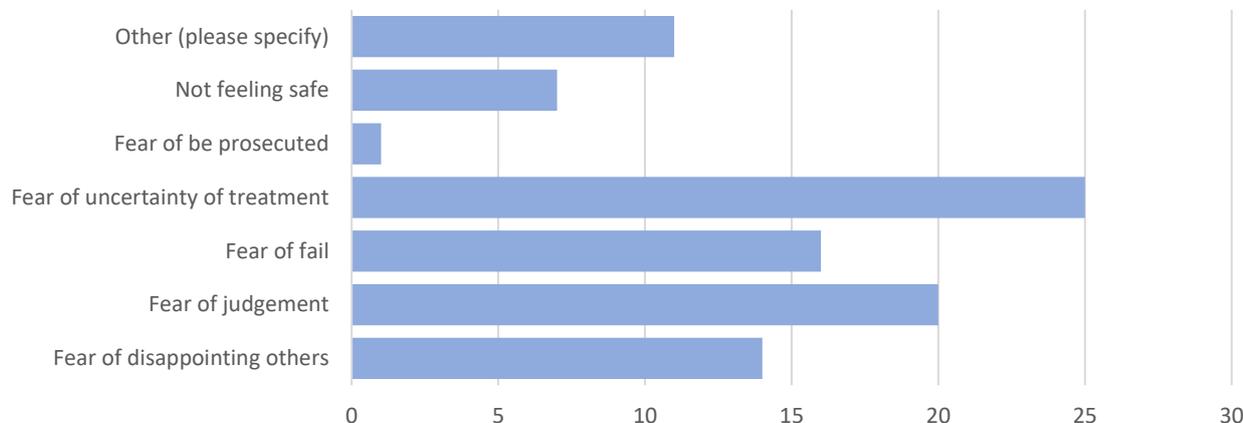


Source: Understanding drug use and harm in West Sussex, Residents' Survey

We have asked respondents what reasons make them seek support to control their drug use.

Most people said "to control my life again" (83%). Other reasons were "to improve my mental health" (61%) and to improve physical health (50%).

Figure 76: Fear to start treatment



Source: Understanding drug use and harm in West Sussex, Residents' Survey

Many people said they have experienced fear to start treatment especially people getting heroin and crack treatment. The main reason mentioned by respondents were fear of uncertainty of treatment and fear of judgements by others followed by fear to fail and fear of disappointing others.

Among the reasons to seek help, the main reason from all the different drugs users have been "to control my life again" (83%) followed by "to improve my mental health" (61%) and "to improve my physical health" (50%). Family and friends persuasion is as important as "to control my life again" when people are getting cocaine treatment.

74% of people in treatment said they have been able to stop or reduce their substance misuse.

7 respondents (15%) have not been able to reduce or stop their drug use and 3 of them have been in treatment for over 6 years.

The important factors people mentioned that helped them improve were- access to treatment and having mental health support. The third most important factor mentioned depended on age, physical help support being more important for respondents between 45 and 64 years old, while secure accommodation for respondents aged between 25 and 44 years.

CGL Service Users' Survey – Key points

- 43% of people said they tried drugs for first time when they were under 16 and 33% between 16 and 24 years old. Males said they started at a younger age than females. 26% tried drugs due to curiosity, especially when they were under 16 years old, the second reason was “My friends/family were doing it, I feel I have to”. The only respondent who tried drugs for the first time at the age of over 45 said they did so as an alternative to prescribed medicines.
- 74% of people mentioned that cannabis was one of the first drugs used. Nitrous oxide was only mentioned by people who tried drugs when they were under 16. The respondent who tried drugs for first time at the age between 45 and 64 years old used heroin.
- 28% said they had a mental health problem, including anxiety and depression.
- Most people (54%) started regular drug use between 16 and 24 years, among the main factors given were “to escape from reality” (48%), due to some mental health issue like anxiety, depression or feeling low emotionally (32%) or thinking they were able to control it (32%).
- 22% of people said they became regular drug users between 25 and 44 years old. Main reasons given were thinking they were able to control it (50%) or due to anxiety, depression or feeling low emotionally (40%).
- Cannabis and heroin were the drugs consumed the most regularly. 62% of people were living with regular drug use for over 2 years before they decided they needed help or support, but just 33% of respondents knew where to get help for addiction.
- 37% have been asked to transport drugs, of those, 85% accepted to do so. Of those who agreed to transport drugs, 59% said they were concerned for their safety due to their involvement with drugs but just 10% knew where to get help if they felt they had been pressured to commit crime.
- Among the reasons to seek support, most people have answered “to control my life again” (83%). Other reasons were “to improve my mental health” (61%) and to improve physical health (50%).
- Many people said they were fearful to start treatment; fear of uncertainty of treatment and fear of judgements by others followed by fear to fail and fear of disappointing others.
- 74% of people in treatment said they were able to stop or reduce their substance misuse. The important factors people mentioned that helped them were access to treatment and having mental health support. The third most important factor depended on age, physical help support is more important for respondents between 45 and 64 years old while secure accommodation for respondents aged between 25 and 44 years old.

‘Serious Violence in West Sussex’ School Survey

As part of our engagement exercise, we wanted to survey children and young children, to know what they have already experienced and their thoughts about drug use. An existing survey was already planned as part of work for the West Sussex Violence Reduction Partnership.

The “Serious Violence in West Sussex” survey was designed by Crest Advisory and West Sussex County Council. Fortunately, due to the theme of the survey and the drug market being a crime driver and the drug links to violence and exploitation, it was possible to add some questions regarding child drug use.

The survey was disseminated to children and young people via schools. In total, the survey was completed by 5,242 young people and after excluding some responses for quality purposes 5,091 responses were analysed.

Adur, Crawley Horsham, Mid Sussex and Worthing had good engagement, Arun and Chichester had a limited number of responses.

In this report, we have included some results from the survey relevant to our analysis. These results are for West Sussex overall. As with all voluntary surveys there is selection bias, responses reflect the views and experiences of those who responded.

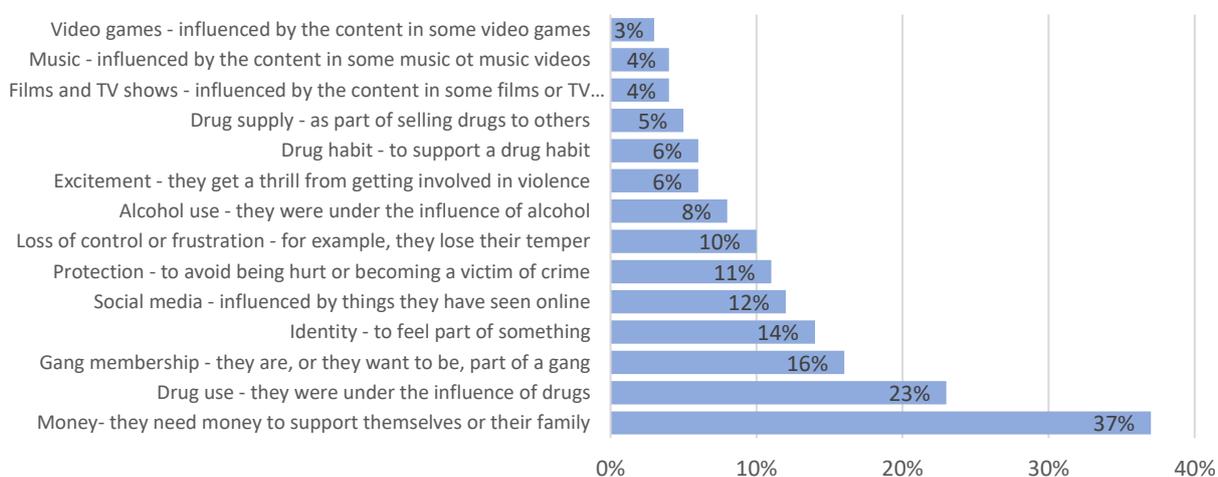
Within the survey, respondents also listed specific locations for each district and borough in West Sussex that they felt were unsafe with concerns raised about areas that were seen as secluded or frequented by dangerous individuals or groups. This included local alleyways, town centres and parks. From the open-text responses it’s clear that there is an awareness among young people about violent incidents that have taken place in their area, and concerns about the presence of gangs and drugs.

Drugs and violence

Most respondents said they thought violent crime had increased over the last year. Children between 14 and 18 years old were more likely to think that violent crime was increasing in their local area than younger pupils.

To be under the influence of drugs, supporting drug habit or selling drugs were mentioned by 34% of young people as the main reasons why some young people commit crime.

Figure 77: Main factor why some young people commit acts of violence



Source: Serious Violence in West Sussex

Also, young people were 7 times more likely to have joined a gang when they had been the victim of a crime and 11 times more likely to have carried a weapon.

Drug use

The majority of young people said they had not taken illegal substances in the last twelve months.

Illegal drugs were used by 2% (100 children) in the last year, of those, 2 in 5 (40 children) would have used drugs at least once a month and 1 in 5 (20 children) have done it every day or almost every day.

Most children, who said they used drugs, said they had started using drugs between the age of 12 and 14.

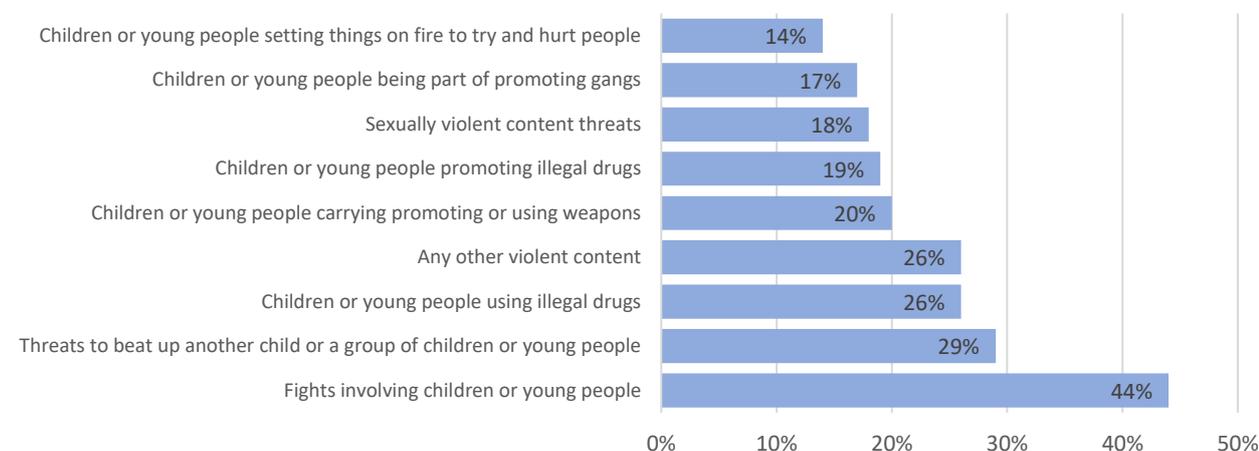
Other than cannabis/weed, children and young people surveyed mentioned cocaine/crack cocaine, LSD, PCP, heroin, nicotine, ketamine, cigarettes, and vapes as substances they have taken.

Young people who said they suffered from crime victimisation were 3 times more likely to consume alcohol, 14 times more likely to use cannabis and 7 times more likely to use any other illegal substance than children who had not experienced victimisation. They were also at higher risk of using drugs daily or almost every day (28%); 3 times more likely than those who had not experience victimisation.

Drugs and social media

60% of children said they had seen violent content on social media in the last year. Some demographic groups (including girls and Black children) were more likely than others to have seen violent content on social media.

Figure 78: Type of violent content children and young people reported seeing on social media



Source: Serious Violence in West Sussex

In the figure above we can see how “Children or young people using illegal drugs” was cited as the third type of violent content children reported seeing on social media (seen by 26% of respondents), “Children or young people promoting illegal drugs” (19%) and “Children or young people being part of promoting gangs” (17%).

Safety concerns

School, at home, in entertainment venues (cinema/restaurants), and the homes of family and friends were locations mentioned by young people as being where they felt safe.

The locations where most young people said they felt unsafe were: secluded alleys, paths, underpasses and town centres. When asked for specific locations, they mentioned local parks, woods and other recreational spaces.

Arun – Hotspot analysis

51 children and young people responded that they spent most of their time in Arun.

*Due to the small sample size of respondents, unable to segment this analysis into localised hotspots.

Of the survey respondents, a higher percentage of respondents in Arun (77%) said they were concerned about people using or dealing drugs compared with West Sussex overall (68%).

Respondents raised concerns over crime, substance misuse and a lack of opportunities in their local area.

Respondents were particularly concerned about their safety in their local town centres, important given their general concerns about night time entertainment venues, crime and substance abuse.

36% of respondents from Arun felt unsafe in their local town/neighbourhood, centre Littlehampton and Courtwick with Toddington being specifically noted.

A quarter of respondents in Arun would identify a local park, forest or recreation ground as a place that they felt was unsafe.

How safety can be improved (suggestions made by children and young people)

49% of respondents proposed measures like “more street lights”; “more security cameras”; and “less alleyways” in order to improve community safety. Other themes mentioned were: increasing and improving policing, stopping gangs, stopping possession and use of weapons, strengthening accountability for perpetrators of crime, and online safety.

“More youth clubs” and “more safe places for [young] people to socialise” were mentioned as a way that would help to address challenges they face as well as “more activities and things to do”.

Also some respondents said there should be increased support from charities, mental health professionals and schools, with suggestions on education to prevent judgement, change attitudes and stop bullying and anti-social behaviour. Some young people also mentioned they could benefit from financial support and reduced costs to be able to overcome challenges.

30% of young people raised issues regarding drug use, alcohol, vaping and smoking, and for 23% of respondents it was a priority addressing the use and access to drugs and alcohol.

Young People stated they had concerns about social media, but were unsure about how this could be tackled.

Serious Violence in West Sussex's Survey – Key points

- Most young people surveyed said that they thought violent crime has increased over the last year, and 34% think that the main reason some young people committed violence was due to; be under the influence of drugs, supporting a drug habit or selling drugs.
- Young people surveyed who said they had been a victim of a crime in the last 12 months were 7 times more likely to have joined a gang and were 11 times more likely to have carried a weapon, compared to those who had not been a victim.
- 2% of respondents said they had used an illegal drug in the last 12 months. Consumption of drugs (and alcohol) was strongly linked to other vulnerabilities, especially crime victimisation,
- A high proportion of children said they had seen violent content on social media, 26% have seen “Children or young people using illegal drugs”, 19% “Children or young people promoting illegal drugs” and 17% “Children or young people being part of promoting gangs”.
- Regarding ways to improve their safety, 6% of children and young people mentioned stopping gangs. 16% identified a need for more support from charities, mental health professionals, and schools.
- Addressing the use of and access to drugs and alcohol was a priority for 23% of respondents.

Dissemination Plan

Once Arun Drug Demand profile is signed off, the document will be shared with the working group who help to create the document to discuss the results.

In terms of wider dissemination this document will be used to inform the work of and shared with the Arun Community Safety Partnership - Safer Arun Partnership (SAP). SAP has adopted a three-year strategic partnership plan. One of the priorities for SAP is to reduce drug and alcohol related harm. This will be shared with members on the understanding that it is not circulated more widely.

The profile will also be shared as necessary with the Arun District Council Housing and Wellbeing Committee given that this is the council body that oversees SAP and related community safety activity. Papers and meetings for this group are public.

While the report will be shared internally within Arun District Council to relevant departments such as housing and homelessness, it is supplied to ADC on the understanding that it is not to be shared with / used by any other partnership groups.