

SPODA is a registered charity that works to help families and carers of substance users within Derbyshire

Chesterfield MP Meets Carers at Family Conference



Above: MP Toby Perkins with Vivienne Evan (Adfam) Dot Inger (SPODA) and Grandparents/Carers.

On Friday 10th June we held a joint community consultation conference with Adfam. The aim of the conference was to identify the needs of families affected by drugs and alcohol, with a key focus on the needs of children affected by parental drug and alcohol use and also the Grandparents and Kin Carers that often take on the care of these children. We had a fantastic turn out and some great feedback from the delegates who were SPODA clients, local elected members from DCC, social workers, police & professionals within the field of Substance Misuse.

Some of the comments we received back:

Fantastic day/event, Well done!

Drug misuse affects all the family

Great informative and moving day that will remain in my memory for a long time

Really powerful/compelling personal stories

Families all have specific needs

Amphetamine - What's in it?

This drug comes in a variety of different forms. The most common form is amphetamine sulphate, which is a white or off-white powder. Amphetamine purities are currently between 1% and 12% in Derbyshire.

Amphetamine was invented in the 19th century as a slimming aid. In 1919 a Japanese scientist invented a related product which is called methylamphetamine. This can come as a powder or as a crystalline lump.

In 1980's methylamphetamine powder was widely available locally and, to differentiate between it and amphetamine, it became common practice to add something like pink food dye or "strawberry nesquik" to it. It was then known as "pink champagne".

Nowadays some drug suppliers add those items to ordinary amphetamine, in the hope of convincing customers that they have a better product than they actually do possess. This is partly because it is harder to produce genuine methylamphetamine.

Recent seizures of amphetamine in Derbyshire have also had some 4-fluoro-amphetamine in them. This is a Class A drug. We aren't sure why this is being added, and both users and suppliers may not know it is in the substance that they have bought.

Failure to help drug addicts is costing Britain

NEWS PAGE

Failure to help hundreds of thousands of addicts get free drugs is costing Britain £3.6 billion a year in welfare and prescriptions for methadone, according to a report that came out in June this year.

The report, *Breaking the Habit: Why the State Should Stop Dealing Drugs and Start Doing Rehab*. Some argue that the governments have failed to deliver what they pledged, to get more people off drugs and provide more residential treatment programmes. Yet Methadone remains the most common treatment for addicts, the number of referrals to rehabilitation units has fallen to an all time low of 3,914. there are only 1,872 beds now available at “affordable” levels of around £500-£600 per week, with none on the NHS, and the sector is “in near terminal crisis”, according to the report.

The author of the report. Kathy Gynell, said: “By sponsoring addiction, drug treatment has entrenched a costly dual dependency - on drugs and on welfare”. The cost to the state of maintaining addicts on methadone has doubled since 2003-03 to £730 million a year. Drug users are estimated to receive £1.7 billion in benefits a year, while the welfare costs of looking after the children of drug addicts are estimated at a further £1.2 billion a year.

A Department of Health spokesperson said “Instead of focusing on reducing the harms caused by drug misuse, our approach will be to go much further and offer every support for people to choose recovery as an achievable way out of dependence.”

“There is no ‘one-size-fits-all’ solution,” said Martin Barnes, chief executive of DrugScope. “Access to a range of services and support is vital to supporting recovery, regardless of the types of treatment provided.”

(Article adapted from Independent Sunday 19th June 2011)

Drug users get £1bn a year in jobless benefits alone

Crack cocaine and heroin addicts cost tax payers £1 billion a year in benefits alone, figures have revealed.

Four in five of all those on hard drugs in England - an estimated 270,000 people - claiming out of work benefits.

Every year a further £160 million is given to ex-offenders who go straight on the dole after coming out of prison.

Employment minister Chris Grayling, who disclosed the figures, blames social breakdown for the rising benefit costs. He said “The system we inherited from the previous government is woefully inadequate people walk out of prison and on to benefits, with little support to actually find a job, and we as a nation are paying the price.”

“We believe it should be much more of a priority to get prison leavers into work, to stop them reoffending”.

“Getting them into the Work Programme quickly has the potential to break the cycle of benefit dependency and reoffending”.

Taken from Mail 17th May 2011.



Driving regulations when someone is prescribed methadone or buprenorphine

Methadone and buprenorphine are both synthetic opiates (also called opioids). Methadone and Buprenorphine i.e. subutex are used as opiate substitutes for heroin in the treatment of heroin addiction. Both Methadone and Subutex are manufactured for medical use.

The Road Traffic Act requires holders of a driving licence to inform the DVLA of any disability likely to affect safe driving. DVLA considers drug use, including the use of prescribed drugs, to be a 'disability' in this context.

This responsibility lies with the licence holder to inform the DVLA, and is not the responsibility of the prescribing doctor or drug service.

If a client with a **group 1** driving licence (cars and motorbikes) informs the DVLA that they are receiving an oral methadone prescription, they are then required to have a short (free) independent medical examination. This includes a urine screen for drugs. If there is only methadone metabolites in the urine a licence is normally issued for one year. They will be called back for another medical every year until 3 years after methadone treatment has finished.

If the urine screen carried out for the DVLA medical shows positive for cannabis they will withdraw the licence for 6 months. If it shows positive for any other drug they will withdraw the licence for 12 months. There will be another medical on re-application and every year for the first 3 years after the licence has been returned.

DVLA will not issue a **group 2** (HGV/PSV) licence to anyone receiving methadone treatment.

Insurance companies may also consider a methadone prescription as an additional risk about which they should have been informed, and may contest claims from drivers who are discovered to have been receiving prescribed methadone at the time of an accident.



"Will I lose my driving licence for taking methadone?"



Methadone should be disclosed to the DVLA. If the Methadone is prescribed by a GP, the GP does not have a duty to reveal this information, but they may decide to do so if they feel that there is a risk to the user or others. If a driver is thought to persistently use, or be dependent on, opiates they will be requested to undergo a medical enquiry; if drug misuse is confirmed, the licence will be revoked until the driver can demonstrate that they have not used drugs for at least 1 year.

The requirements are quite strict, if there is any evidence of illicit drug use (including cannabis) in addition to the prescribed methadone, the licence would be revoked. It is advisable to get supporting letters from the prescriber and anyone else involved in the treatment to help make the assessment process as easy as possible. If the licence is revoked, you can appeal at a magistrates' court however legal aid is not available in these cases and private solicitors would have to be sorted out and paid for.

Confidence Self-Help Tips

- **SET** realistic goals. This can boost your self-confidence and self-satisfaction
- **REWARD** and praise yourself when you've done well
- **FOCUS** on your strengths and not your weaknesses
- **ACCEPT** that it's impossible to expect perfection
- **DON'T** attribute success to good luck; instead, give yourself credit for your achievements
- **LEARN** to be assertive, learn to express your feelings, opinions, beliefs and needs directly, openly and honestly, whilst not violating the rights of others
- **MAKE** a list of the major problems in your life. Then work through ways to change them



Methadone Abroad

Methadone Abroad

Advice to pass on to your user who might be going abroad this summer.

They will need to sort out their prescription in plenty of time before travelling. The more notice that is given, the less chance there is that they will have to cancel their plans.

The pharmacist can't dispense a day early because you are going away, nor can they give you methadone that should have been collected yesterday - legally they have to dispense according to the prescription.

Going abroad

To take over 500 mg and/or more than 15 days' supply of methadone abroad, a Home Office licence is required.

Apply for this licence at least 14 working days before travel. A letter from their prescribing doctor must be enclosed, giving their name and address together with the strength, form and amount of methadone they will be taking with them, the daily rate prescribed and their intended dates of departure and return. The address to apply is:

**Home Office, Drugs Licensing Section, Room 315,
Horseferry House, Dean Ryle Street, London
SW1P 2AW**

User/Ex-User SMART Recovery Group

SMART Recovery– Venue SPODA
(104 Saltergate)

- Do u feel it's time to make changes?
- Are u thinking of changing your drug use or drinking?
- Many people help themselves and each other with SMART recovery

What is SMART Recovery?

A self help group for people seeking independence from addictive behaviours.

Held at SPODA each Tuesday 2pm until 3.30pm

For more info contact:

Ann on 07900 695286

Dawn on 07769 687782

Steve on 07876 508476

BIGGEST EVER SURVEY **OF CARERS**

Family Rights Group is aiming for the largest ever response to a survey of family and friends carers – they aim to hear from 500 people. You can take the online survey by going to this page of the Family Rights Group website: http://frg.org.uk/about_family_and_friends_carers.html

http://frg.org.uk/about_family_and_friends_carers.html

- so far 190 people have answered the questions.

Please tell the family and friends of carers about this survey

The more people who reply to this survey, the stronger they can say the data is that they will get from it. They will use the data to inform the campaigns for better support for family and friends carers.



So please do spread the word

Grandparents plus

We champion the wider family who care for children

Please also take a couple of minutes to visit the Grandparents Plus website above and ask your MP to back the campaign to keep families together by:

- **Children who can't live with their parents to be placed with family or friends whenever possible**
- **More support for these carers to keep families together**

They can put pressure on local and national government to give a fairer deal to family and friends carers.

Every email or letter you send is potentially another person who learns how important family and friends carers are!

Thanks so much for your support, for more information contact: Alison Blaxland (Co-ordinator) Grandparents Raising Grandchildren Network

(Monday - Wednesday) Tel: 020 8981 8001

alison.blaxland@grandparentsplus.org.uk www.grandparentsplus.org.uk

Carers Page



Are you a Carer? Do u have access to the Internet?

Carers Community is a downloadable magazine for carers, families and healthcare professionals dealing with drugs, alcohol and mental health problems. Featuring personal and professional stories of those who have helped others to turn their lives around.

Go to www.inexcess.tv and click on the 'Carers & families' link.

WRITE TO YOUR MP:

<http://bit.ly/writetomp>

What is NA? -



The 12 Steps continued from last issue..

The 12 Steps Programme

The core of the Narcotics Anonymous programme is a series of twelve steps, adapted from the recovery programme of Alcoholic Anonymous. These steps include admitting to a drug problem; seeking help; self-appraisal; confidential self-disclosure; making amends when possible, where harm has been done; achieving a spiritual awakening and supporting other drug addicts who want to recover. Narcotics Anonymous is a **non-religious fellowship**, encouraging each member to cultivate an individual understanding, religious or not, of a 'spiritual awakening.

In our last issue we covered **Steps 9 & 10; we now look at Steps 11 & 12.**

Step 11: Make direct amends to such people wherever possible, except when to do so would injure them or others.

Step 12: To take personal inventory and when we are wrong promptly admitted it.

NA Meetings Meetings are held throughout the country including Derby and Nottingham and details of all meetings can be found on the website – www.ukna.org or by calling the NA helpline on Tel: **0300 999 12 12**

Your Voice!

Please let us have any articles/poems that you may have written to publish in our future newsletters.

Refused point blank to go to school, coz hanging out with mates, more cool
 And still obsessed with absent dad, insists now clean—but not. How sad.
 So depressed, forget to eat, trying to move my leaden feet
 Would sob my heart out, if alone, so hard to keep feelings unknown
 Now he's reached his 16th year, police give music to his ear.
 There's nothing more that they can do, just pray that he comes back to you.
 As if life isn't bad enough, finding work is extra tough
 Jobs out there are very few, another reason to feel blue.
 When it seems things can't get worse, he has another wild outburst.
 Swearing, shouting he's all that. And I am just a thick doormat.
 As deeper in despair I sink, I feel like having lots to drink.
 Sometimes over-eating too, when don't know what on earth to do.
 Life still very much on hold, Unsure what future will unfold.
 No help now, to ease the pain, only SPODA keeps me sane.

Support Group Dates

If you would like to attend a support group please call
0800 068 5718 for more information.

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|---------------------------|-----------------------|-----------------|----------------|---------------|
| Chesterfield Group | Wed 6.30 - 8pm | 17th & 31st Aug | 14th 28th Sept | 14th 28th Oct |
| Swadlincote Group | Wed 7 - 8.30pm | 10th Aug | 14 Sept | 12th Oct |
| Belper Group | Wed 6 - 7.30pm | 17th Aug | 21st Sept | 19th Oct |
| Grandparent Group | Mon 12 - 2pm | N/A | 5th Sept | |