



SUMMARY

Centre for
Mental Health



Realising a better future

A label for exclusion

Support for alcohol-misusing offenders

The development of alcohol interventions for offenders is a challenging area with implications for both health and criminal justice agencies. Effective responses are complicated by the fact that, unlike drugs, the use of alcohol is both legal and widely socially sanctioned and that there are complex links between alcohol misuse and offending. Nevertheless, the misuse of alcohol has major implications for public health, mental wellbeing, community safety and reoffending, as well as costs to wider society.

A Label for Exclusion identifies areas and practical examples of how, in a changing and uncertain policy and commissioning landscape, the joint commissioning and delivery of alcohol interventions for offenders in the community might be productively developed. It is intended to be read by all who are responsible for the commissioning or delivery of alcohol services. The paper was produced in partnership with the Department of Health South West and based on extensive interviews and focus groups with input from central policy leads within relevant government departments and other specialist national agencies.

Key Points

We have identified a number of key issues and challenges relating to the joint commissioning and provision of alcohol interventions.

Under-resourcing of alcohol provision. Demand for all types of intervention and treatment exceed supply across all four Models of Care for Alcohol Misusers (MoCAM) tiers in both general health care and in offender-specific settings.

Variations in joint commissioning practice.

Responsibility for the development of local offender alcohol strategies and the commissioning of alcohol interventions to offenders vary from area to area and are contested in some cases.

Misalignment between the objectives and targets of health and criminal justice commissioners.

Despite the expectation that health and criminal justice agencies will work collaboratively to commission and provide alcohol and other offender health services, there are significant barriers to this taking place in practice.

Concerns about the sustainability of services.

Many health and criminal justice commissioners observe that the funding for general and offender-specific alcohol services is precarious and often 'kept afloat' by the extraordinary efforts of highly committed commissioners and front line staff. The current absence of joint DH/ NOMS commissioning guidance about alcohol interventions was identified as a particular obstacle to securing the sustainability of services.

Lack of equivalence between alcohol and drug commissioning.

Although drug treatment has been prioritised and commissioned in a standardised manner for several years via the Drug Interventions Programme (DIP) in the community and the Integrated Drug Treatment System (IDTS) in prisons, there is not an equivalent arrangement for alcohol even though the latter is generally considered to be the larger problem in terms of both health and offending. Further, the requirement, often quoted by the National Treatment Agency for Substance Misuse (NTA), that no monies designated for drug misuse via the pooled treatment budget can be invested for

alcohol interventions (where there is primary alcohol need) is considered to present a significant obstacle to improved provision.

Recommendations

A variety of ways to improve and develop offender alcohol interventions have been identified and we have developed the following 10 recommendations for commissioners, agencies and practitioners.

1. As the process for commissioning alcohol interventions for offenders remains unclear and contested, commissioners from different sectors need to respond pragmatically and creatively to improve services.
2. The evidence base for offender alcohol interventions needs to be developed.
3. Service users should be involved in the commissioning and review of interventions.
4. Preventive interventions form a vital component of any local alcohol strategy.
5. All front line staff need basic alcohol awareness and some professionals require specific training.
6. All front-line agencies should provide Identification and Brief Advice (IBA).
7. Alcohol misuse should not be a label for exclusion.
8. Appropriate alcohol interventions should be provided at all stages of the criminal justice pathway.
9. Services should be responsive to a number of key groups.
10. Charitable and voluntary sector agencies add value and expertise.

With resource concerns paramount, it is clear that a primary focus of future development in alcohol and criminal justice must not simply be about creating more services (as important as this is), but improved evidencing of need at both individual and population level coupled with improved joint commissioning and outcome measurement, and more effective service delivery. An important aspect for future development needs to be that of improving wider workforce alcohol awareness within health, criminal justice and allied agencies.

Taking into account the global costs of alcohol misuse within society, and the evidence base for population level interventions, there is a very strong case for health, criminal justice and other agencies collaborating to commission preventive and early interventions. From a public health perspective, better and earlier education about harm and a focused aim to challenge wider norms and values in relation to alcohol are also needed to limit the demand for services and ultimately to reduce alcohol related harm and offending within society.

Get a copy of *A Label for Exclusion*

A Label for Exclusion: Support for alcohol-misusing offenders was written by Rob Fitzpatrick and Laura Thorne.



To download a free copy, visit our website at www.centreformentalhealth.org.uk/publications/label_for_exclusion.aspx?ID=625

Published: January 2011

Centre for Mental Health
Maya House, 134–138 Borough High Street,
London SE1 1LB

020 7827 8300
www.centreformentalhealth.org.uk

Charity registration no. 10911 56.
A Company limited by guarantee registered
in England and Wales no. 4373019.