

Scottish National Research Framework for Problem Drug Use and Recovery

October 2015

Introduction

Problem drug use, the associated harms and an individual's journey to recovery impact on many aspects of Scottish life. It is essential that high quality research, with relevance to Scotland's challenges, is undertaken and used to inform not just government policies but also the work of Scotland's Alcohol and Drug Partnerships (ADPs) and the multitude of services supporting those affected that operate around the country.

To help define the most important current research priorities, the Scottish Government, in collaboration with leading academics in the drugs field, nationally commissioned organisations, NHS Health Scotland and ISD Scotland have developed this research framework document. Its aim is to further progress research into problem drug use, the common comorbidities encountered with it and how individuals can recover from problem drug use, while also addressing the associated wider issues.

Purpose

The purpose of this document is to frame a number of high level priorities for research into the challenges and questions associated with problem drug use and recovery in Scotland.

Identified by stakeholders from the sector, these priorities aim to encourage and stimulate the research community in Scotland and guide a range of research, evaluation, data collection, analysis and quality improvement activities. Research design needs to ensure relevance and application, while research dissemination activities should seek to maximise opportunities to inform policy makers and practitioners. Through research, a strengthened evidence base can help improve policy development and practice at national and local levels to address challenges more effectively.

Background

In August 2013, the Drugs Strategy Delivery Commission (DSDC) published their Independent Expert Review of Opioid Replacement Therapies in Scotland (DSDC, 2013). This document highlighted a need in Scotland to address long standing gaps in terms of the availability of effective information systems and relevant research into problem drug use and recovery.

Following up on this recommendation, a steering group was convened to progress this work and a set of themes, under which key research priorities could be set out, was produced. These themes were identified as: **Families; Harms; Prevention and Recovery.**

Going forward:

- A research steering group was convened to progress the DSDC recommendation
- The steering group contacted Scottish academics to ask for an opinion on research gaps and priorities
- The steering group met to agree the key themes
- A reference paper was produced and circulated which attempted to summarise a number of previous publications which had identified research gaps or areas which should be prioritised in the drugs field
- Scottish Government hosted a workshop with wider stakeholders and academics to address each theme and identify specific gaps in knowledge for each
- The steering group produced a draft framework, based on the workshop discussion, to share with stakeholders for consultation
- Feedback from the consultation then informed this final document

Additional information about the work of the steering group and the development of these themes and priorities is included at Annex A. Details about the membership of the steering group, and of those involved in the workshop discussion with wider stakeholders, is included in Annex B.

Under each theme a key aim has been included, followed by a number of objectives which will deliver this aim, the research priorities are then set out below these.

These aims have been informed by the driver diagram developed by the Scottish Government's Drugs Policy Unit, in conversation with stakeholders, and will continue to develop over time. A copy of the driver diagram is included in Annex C.

Likewise, this document attempts to set out what are the current research priorities under these themes, over time these will evolve and change and the framework will need to be able to adapt accordingly.

Themes

Cross-cutting aspects

A number of the issues identified by the steering group and by stakeholders during the consultation process relate to more than one of the key themes. These are grouped below but are also referred to under each theme.

Headline messages relating to the overall research needs for the addictions field in Scotland were:

- Research to better our understanding of the unique Scottish dimension and its associated challenges – in particular, research into the associations between problem drug use, an individual's recovery journey and deprivation and inequality, is a priority as this will provide a platform to design and evaluate more effective interventions of relevance to Scotland.
- There is a need for enhanced national data collection, and access to these data for research, alongside making better use of the data already gathered
- There is a clear need to synthesise and disseminate research findings better, to establish a strong evidence base that can be used to inform planning, practice and delivery of services across Scotland
- We need a clearer understanding of what the positive, and potential negative, impacts of specific interventions/services are, and what factors/context may influence their effectiveness, including cost effectiveness, that can support assessment of what works, or not, and why, and inform intervention, improvement, implementation and delivery

Additional areas which require attention include:

- Research to address the impact of both problem drug use and treatment processes on different subgroups of society and in different settings
- Research into trauma in early or later life - the impact this has on an individual's development of problem drug use and broader life choices
- The needs of older drug users – the health and treatment issues associated with this group
- The visible evidence of recovery (both individuals and community) and the impact on prevention
- It was felt to be helpful to articulate research activity in a way that uses a 'life span approach' – thinking about the evidence base in terms of different populations and across the lifespan
- The need for research into treatment options – why do some individuals drop-out of treatment and how can services adapt to fit the needs of these harder to reach individuals? Also, what are the needs of those who do not engage with services at all?
- Research on ways to improve the effectiveness of psychosocial treatments for addictive disorders

Families

The role of families is a key theme for improved evidence in Scotland. The wider potential impact on the health and lives of close familial contacts of an individual with problematic drug use may be substantial with repercussions in both the short and longer-term. There are also unexplored areas around recovery and the family that would benefit from further research.

A better understanding is needed to identify and assess the scale of the problems that can arise and to design effective prevention and treatment interventions to mitigate these problems. It was felt that a “lifespan” and “whole family approach” would best address the issues identified.

Aim

- To investigate the wider effects of problem drug use on all family members, carers and communities

Objectives

- To improve the well-being of children and families affected by problem drug use and the associated recovery process
- To identify and assess the scale of the problems which can arise within families affected by problem drug use and recovery from problem drug use

Priorities

- To better understand the wider effects of problem drug use on all family members and at all stages of a parent’s recovery pathway. This should include research into: the impact on children of a parent’s problematic drug use, and of their recovery; the impacts of consequent child removal on a parent or family unit; and the welfare of removed children and impact of their own subsequent substance use
- Examine the needs of vulnerable children affected by problem drug use and the impact this can have at different stages of a child’s development
- Research into the relationship between childhood experiences/trauma and subsequent drug use
- Research into the trans-generational transfer of addictions (and recovery)
- There is a useful research evidence-base addressing some aspects of this theme already in place - some generated in association with Scottish partners. There is a need, however, to better disseminate this evidence to ADPs, commissioners and practitioners to influence local practice

Additional areas which require attention include:

- Gendered recovery - women can have a very different experience of, and pathway through, addiction and recovery. Evidence suggests that there are stark differences in the recovery from problem drug use between men and women, however, the factors that influence this are not well understood. Research is required to understand these factors better in order to inform more effective intervention strategies and services. There is also a need for additional research into parenting capacity, including fathers, as much of the current evidence focusses on pregnant women, mothers and mothering
- The relationship between LGBT clients with addiction issues and associated stigma and family impact. With the knowledge that LGBT groups have higher

substance misuse problems, does stigma result in lower engagement with services?

Cross-cutting themes

- Understanding the size of the problem - there is a need for better local and national data on the prevalence, and characteristics of, families affected by problem drug use. This will enable better monitoring and assessment of the challenges and impact of services and interventions
- There is a need for further research into effective interventions for families affected by problematic drug use, examining what interventions/service configurations work, or not, and why. This can then inform intervention/service design, improvement and implementation
- The relationships between problem drug use and untreated trauma, mental health and family function (e.g. domestic abuse) are poorly understood. Further research in this area is required to better understand the causes and allow for more effective prevention or treatment of problematic drug use

Harms

Reducing drug-related harm, not just those health related harms but also those associated with crime, remains a national priority for Scotland. There is on-going Scottish research considering some of these areas – including drug death and injection-related blood borne virus (BBV) risk. However, these remain major unresolved challenges in Scotland, where drug death rates are one of the highest worldwide.

Aim

- To explore and test how to reduce the range of harms associated with problem drug use

Objectives

- To reduce the level of drug related deaths
- To reduce the harms associated with injecting drug use (injuries/infections etc.)
- Reduce the level of non-health related harms affecting the life opportunities of individuals and their families

Priorities

- The need for a coordinated research dissemination programme around drug related deaths to ensure evidence is effectively disseminated and appropriately put into practice across the country, but also to capitalise on new approaches aimed specifically at reducing our drug death rate
- Capitalise on opportunities to link with on-going Scottish BBV (hepatitis and HIV) research programmes – to ensure that people who inject drugs can consistently access evidence-based prevention and treatment opportunities across Scotland
- Research into the effects of long term ORT use and the alternatives to methadone

- Research into the problems faced by the older drug taking cohort and associated co-morbidities
- Non-health harms affecting the life opportunities of individuals and their families (relating to the family/community, training or employment, housing or criminal activity) must be more robustly researched – requiring closer collaboration across the field. There should be consideration of how to use data-linkage opportunities, capitalising on existing Scottish initiatives in this area may provide opportunities to better understand the wider harms of problematic drug use

Additional areas which require attention include:

- What are the long term effects of different forms of drug use and also of the treatments received?
- What are the effects of drugs on young people and adolescent brains?
- Do we sufficiently understand the needs of problematic drug users across the age range?
- Better monitor and understand the emergence of new drugs in addition to the changes in the ways drugs are used (e.g. NPS, anabolic steroids, chem sex)
- Research into healthcare delivery in a range of justice settings is needed
- The relationship between mental ill health and drug use – both as a causative factor and as a symptom of problem drug use

Cross-cutting themes

- The Scottish Effect – why, when compared with other countries, does Scotland experience worse health impacts, more deaths etc.?
- What are the effects of early life trauma on (risky) decision making?

Prevention

Increased prevention of drug use was a key aim of the Road to Recovery strategy. It was acknowledged that there is inconclusive evidence on the potential impact of much of the prevention activity delivered, particularly for young people in schools.

Aim

- To explore and test how people will be less likely to develop a substance misuse problem

Objectives

- Reduce vulnerabilities of our most at risk populations
- Reduce prevalence of problem drug use

Priorities

- There is an international move towards more generic delivery of prevention techniques, addressing multi-risk behaviours and resilience in prevention efforts. Research programmes are required to determine what - if any – of these approaches are effective in the Scottish context
- Investigate the links between socio-economic disadvantage, deprivation, health inequalities and the progression towards problem drug use

- Develop research to better understand the impacts of prevention techniques within, and outwith, schools. Which aspects of these interventions had a specific impact?

Additional areas which require attention include:

- The approach used to progress our knowledge in this area is likely to be crucial. There is a need to consider 'bottom up' solutions rather than have a "one size fits all" intervention imposed in all areas (different needs for different backgrounds)
- The need to understand current prevention activity within Scotland
- Secondary prevention, such as those focussed on prevention of BBV, should also be considered within this theme.

Cross-cutting themes

- Research the impact of visible recovery (both individuals and communities) on prevention

Recovery

Since the publication in 2008 of 'The Road to Recovery' Scotland has been one of the leading countries in the world in this area. However, there remain many unanswered questions in a Scottish context relating to long-term changes to sustained recovery, the role of treatment and other forms of community intervention and engagement.

Those working in the recovery field have also highlighted the need for a shift in focus with regards the research around recovery. Placing an emphasis on examining the reasons why an individual got better, rather than on how they got ill, will assist others to get better.

Aim

- To explore and test how people receive support which helps them to recover from problem drug use

Objectives

- Increase the number of people attaining recovery from problem drug use
- Better understand what individuals want from treatment and what the best methods are to achieve this
- Reduce the stigma associated with problem drug use and people's recovery from it

Priorities

- Investigate the role of peer-based recovery support – what impact is it having and how can treatment and support services best capitalise on it
- Research into how many people seek to be abstinent from drug use and what factors help to achieve it
- Research into how communities work to promote recovery
- Investigate what are effective interventions at different stages of an individual's recovery journey

- What is the natural history of progression of problematic drug use? How do different factors impact on an individual's use of drugs? Why do some develop problems and what impacts on the outcome of their recovery process?

Additional areas which require attention include:

- How can we better engage people with their recovery process and how do we help them maintain their progress?
- Research into effectiveness of community and residential rehabilitation
- There is a need for robust Scottish research which identifies opportunities to intervene to prevent progression towards problematic drug use, develop resilience and promote personal recovery and prevent relapse

Cross-cutting themes

- How to reduce the stigma (in the media and public perceptions) attached to drug use and recovery from problem drug use?
- The role of the family in recovery – what is the role of mutual aid in family support? How many treatment services are inclusive, provide support or look at the treatment of the client and their recovery holistically as a whole family phenomenon?

Context within new Scottish drugs landscape

The development of this research framework coincides with the refreshing of the Scottish drugs advisory landscape, following the dissolution of the Drug Strategy Delivery Commission (DSDC) in November 2014. With a focus on a collaborative way of working between Government, sponsored organisations, academics, ADPs and drug services, the priorities identified within this document will inform the new groups making up the advisory landscape, articulate a clear direction of travel for those working in the drugs field and directly influence Government policy.

While the delivery of the research highlighted in this document will sit with all of those involved in the drugs field in Scotland, a number of potential approaches are being actively developed to facilitate this. These include:

Scottish Addictions Research Network

The creation of a dedicated collaborative research infrastructure for drug use research in Scotland would help create an environment within which local ADPs, national drugs organisations and academic institutions could more effectively develop, deliver and disseminate programmes of research to improve outcomes in Scotland. Such an approach could also increase opportunities for links and collaborations with UK and international partners and increase the likelihood of access to national programme funding streams.

Work is also underway to provide Scotland with a seat at the European Research Area Network on Illicit Drugs (ERANID) which would allow Scottish researchers to bid for larger pan-European research projects which would be of benefit to Scotland and wider European partners.

The creation of a dedicated National Coordinator post to facilitate this collaborative approach is being scoped.

Student PhD's/internships

Potential co-funded PhDs in the area of problem drug use research. These PhDs would be delivered in Scottish academic institutions but would be delivered in a collaborative way, involving partners, to achieve the best outcome in terms of academic impact likely to affect outcomes in Scotland as well as building Scottish research potential in the field. The National Coordinator post could have responsibility for identifying potential PhD opportunities and act as the liaison between the hosting academic institution and Government while identifying suitable funding streams to support these posts.

Peer research

Specific, planned research projects could be undertaken by individuals with lived experience with support from Scottish Drugs Forum (SDF) and others. This would be an example of the involvement of service users in the design and conduct of research. This approach is widely held to be a useful and innovative method of research, for example many NHS funding sources now require service user involvement as a precondition of funding. This would be another method to increase and develop research capacity within Scotland whilst supporting the employability journey for those in recovery.

DEVELOPMENT PROCESS

The Drugs Strategy Delivery Commission's (DSDC) Independent Expert Review of Opioid Replacement Therapies in Scotland (DSDC, 2013) made recommendations to the Scottish Government to address long standing deficits in terms of the availability of effective information systems and relevant research to inform drug policy in Scotland. Recommendation 10 stated:

“The Chief Medical Officer should task the Chief Scientist to consult with the academic community in Scotland and bring forward robust plans to develop a Scottish National Research Programme addressing the key substance use questions for Scotland. The aim should be to support and facilitate the delivery of efficient, high quality research into both the natural history of substance use – its development and progression – as well as the effectiveness of a broad range of treatment approaches – including psychological and social approaches as well as novel treatments”

A Research Steering Group was convened to progress the work. The steering group agreed the following broad principles regarding the form and scope of a collaborative national response:

- Scottish academics and a range of stakeholders should be involved in shaping the national research framework.
- The research priorities identified through an inclusive consultation process should be grouped under the broad themes of: **Prevention; Harms; Progress (recovery) and Families.**
- While Scottish academics and stakeholders should lead development of the research framework for Scotland, expertise from outwith Scotland should also be drawn upon when required.

Research gaps and priorities in Scotland

Initially, the steering group contacted academics who were active in the field in Scotland asking for an opinion regarding potential research gaps and priorities. A limited number of responses were received and these did not adequately address the wider strategic issues. Consequently, a number of invited stakeholders took part in a facilitated discussion with the steering group. Participants included university based academics as well as those involved in the field at many levels with the aim of having a balance of “top-down” and “bottom-up” perspectives. The discussion addressed each theme and focussed on research evidence gaps and what topics should be considered for inclusion on a list of research priorities. Wider research themes were also considered, for example the work undertaken at European level to identify common research priorities by the European Research Area Network on Illicit Drugs (ERANID).

The steering group agreed that the next step in this process would be to share a draft version of this research framework with a wide group of stakeholders for consultation.

Over 30 responses were received to the consultation exercise with some of the suggested changes reflected in this final document.

MEMBERSHIP OF RESEARCH STEERING GROUP

Members of the steering group were:

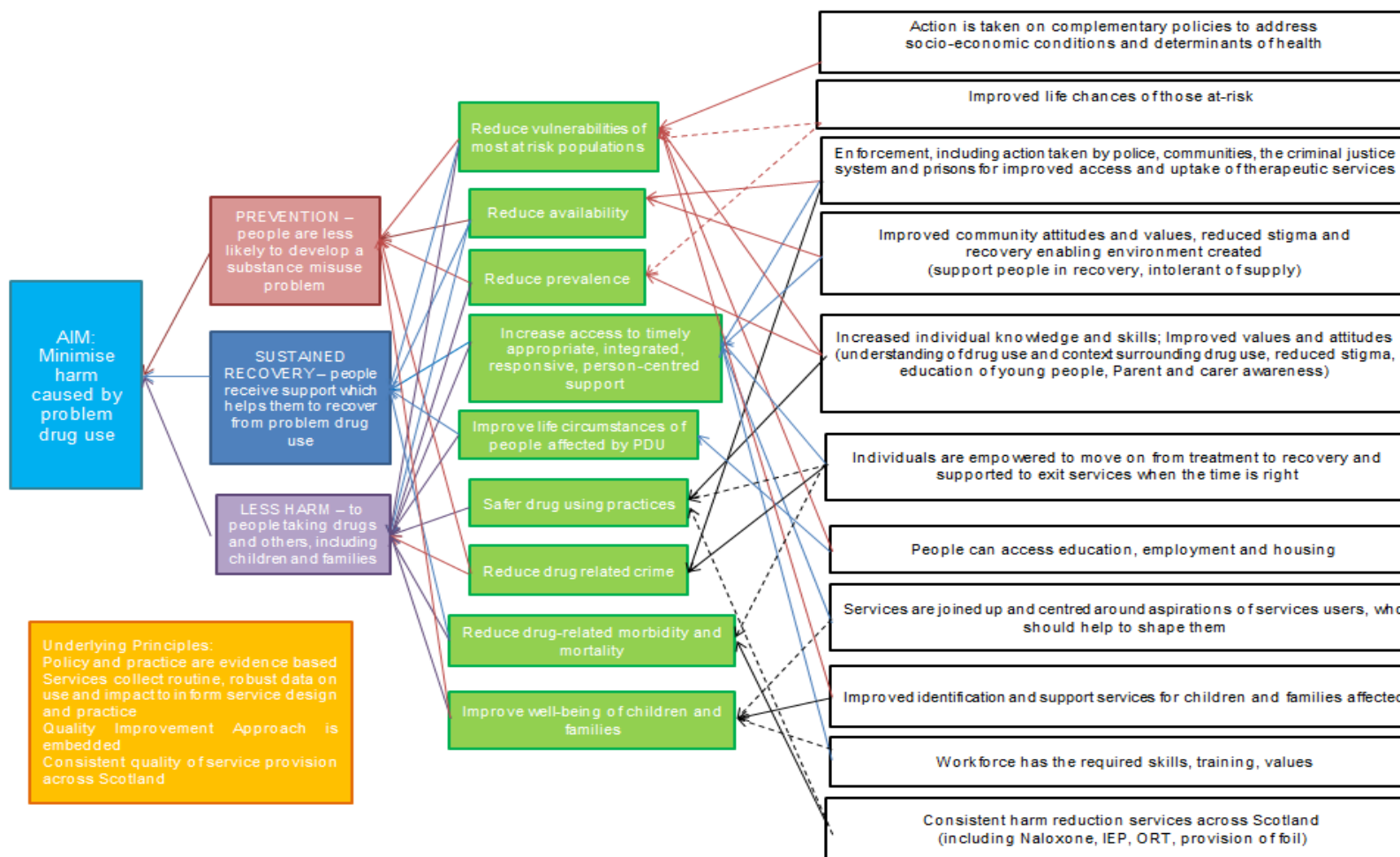
Dr Brian Kidd – University of Dundee
Professor John Davies – University of Strathclyde
Professor Sharon Hutchinson – Glasgow Caledonian University, Health Protection Scotland
Professor Avril Taylor – University of West of Scotland
Dr Alison Munro – University of West of Scotland
Andrew McAuley – NHS Health Scotland
Elinor Dickie – NHS Health Scotland
Lee Barnsdale – ISD Scotland
Dr Lesley Graham – ISD Scotland
Dave Liddell – Scottish Drugs Forum
Dr Tom Barlow – Chief Scientists Office, Scottish Government
Fiona Fraser – Scottish Government
Fran Warren – Scottish Government
Michael Crook – Scottish Government
Ross Mackintosh – Scottish Government

ATTENDEES AT WIDER STAKEHOLDER DISCUSSION

Those invited to attend the discussion event were:

Mr Tom Wood – previous Deputy Chief Constable, Lothian and Borders Police
Dr Amy Chandler – University of Edinburgh
Ms Joy Barlow – Former Head of STRADA
Ms Christine Duncan – Chief Executive, Scottish Families Affected by Alcohol and Drugs
Dr Anne Whittaker - Edinburgh Napier University
Professor Mathew Hickman – University of Bristol
Professor John Marsden - Institute of Psychiatry, Psychology and Neuroscience, Kings College London
Professor Harry Sumnall – Liverpool John Moores University
Dr Richard Stevenson – Glasgow Western Infirmary
Dr Alex Baldacchino – University of Dundee
Professor Roy Robertson – University of Edinburgh
Dr Charles Lind - Ayrshire and Arran Primary Care Trust
Professor Nick Heather - Northumbria University
Mr Andy Rome - McMillan Rome Ltd
Dr Tessa Parkes - Scottish Graduate School of Social Science
Professor John Strang - Institute of Psychiatry, Psychology & Neuroscience, Kings College London
Dr Jenny Svanberg - Stirling Community Hospital
Professor Harry Burns – University of Strathclyde
Professor Derek Heim – Edge Hill University
Dr Ambrose Melson – University of Glasgow

SCOTTISH GOVERNMENT DRUGS DRIVER DIAGRAM





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