

**[Inquiry into alcohol and substance misuse](#) / [Ymchwiliad i gamddefnyddio alcohol a sylweddau](#)**

**Evidence from Betsi Cadwaladr University Health Board – ASM(Q) 26 / Tystiolaeth gan Bwrdd Iechyd Prifysgol Betsi Cadwaladr – ASM(Q) 26**

## **Inquiry into alcohol and substance misuse**

### **Survey Consultation Response**

**Organisation: Jill Timmins Head of Programme Substance Misuse Services, Betsi Cadwalader University Health Board**

#### **Questionnaire**

01. Which client group(s) do you work with? (For example, under 18s, older persons, homeless, or female only)

*BCUHB provides a range of health interventions specific to substance misuse. It also provides and commissions a wide range of other primary and secondary care services for the population of North Wales, spanning all age groups, where the impact of alcohol is evident e.g. GP's, Midwifery, Mental Health, Emergency Departments, Community Pharmacy, Health Visiting and School Nursing, Medical and Surgical wards.*

02. What are the main reasons why your clients take drugs or drink excessively? Please tick all that apply.

If you work with more than one client group or you feel that there are other reasons as to why your clients take drugs or drink excessively, please comment in the box below.

- *Peer pressure;*
- *A way to deal with stress;*
- *Client(s) already substance reliant;*
- *Mental Health;*
- *Boost confidence;*
- *Relieve social anxiety;*



- *Environmental factors (for example – excessive drinking and/or drugs normalised in the home/community)*
- *Relationship problems;*
- *Financial concerns;*
- *Self-medication;*
- *Escapism.*

## Comments

*Loss and bereavement, to self-medicate an existing mental health diagnosis.*

03. Are there certain groups of people who are more likely to be affected by drugs and excessive drinking? If so, which groups might they be?

*Alcohol issues span all ages and socio economic groups as identified in the previous tick. However there is clear evidence to link increased substance misuse linked to both deprivation and childhood trauma.*

*Emerging themes show increased levels of alcohol use in female professionals, older persons following loss and those self-medicating low levels of anxiety and depression.*

04. Does a particular stage of your clients' lives influence their likelihood of taking drugs or drinking excessively? If so, what stage might that be? (i.e. age, relationship breakdown, unemployment etc.)

- *See points 2 and 3 above.*

05. What barriers exist for your client(s) when trying to access support and services?

*Social stigma, capacity of services.*

06. What barriers exist for services when trying to access support for client(s)?

*Currently the volume of alcohol related referrals can place a significant pressure on services. In addition wrap around and move on services are not adequately replicated in every locality resulting in tier 3 specialist services holding on to cases longer than necessary post*



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*detoxification. Over the last ten years expansion in substance misuse services had predominantly focused on increasing capacity in drug treatment - however with the emergence of Area Planning Boards the focus is shifting with the North Wales APB clearly stating alcohol is the main priority area.*

07. What do you consider to be barriers for staff and frontline services in working with your client group(s), or substance misuse generally?

*There is often a lack of knowledge and confidence in addressing this issue amongst different disciplines of staff. Increased education is required for all non-substance misuse specialist health staff across all disciplines in relation to screening tools, assessment, and evidence based treatment. This is pre- registration across all disciplines and post-graduation - the time spent on substance misuse issues for Nurses, Doctors and Allied Health Professionals in training is very limited yet we are aware this is a growing problem that all staff will face irrespective of their final placement of work or speciality.*

08. Where do you think efforts should be targeted to address the issue of alcohol and substance misuse in Wales?

*Prevention and education in schools to impact on culture, however the emphasis on education needs to also include families so the message is impactive on the whole family unit.*

*The evidence base and numbers to treat for brief intervention with alcohol is very strong and if there was a proactive training programme across Wales where individuals interface with any health professional the impact could be significant.*

*Minimum pricing has some strong evidence and should be pursued.*

09. In which local authority area do you work? If you work outside of Wales, please write your local authority area below.

*Denbighshire*

## Contact Details



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