

Hull Alcohol and Drug Strategic Partnership Progress Report 2025

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2-Page Summary

Hull Alcohol and Drug Strategic Partnership – Progress Summary (2025)

Background

The national drugs strategy *From Harm to Hope* requires local authorities to form a Combating Drugs Partnership (CDP) to reduce drug and alcohol-related harm. Hull's Alcohol and Drugs Strategic Partnership (ADSP) fulfils this role, coordinating prevention, treatment, recovery, and enforcement efforts.

Local Context

- Hull is the **4th most deprived local authority in England**, with high levels of drug and alcohol harm.
 - **Drug misuse mortality rate**: 10.1 per 100,000 (almost double England's rate).
 - **Alcohol dependency**: ~4,125 adults; hospital admissions for alcoholic liver disease are more than double the national average.
 - **Young people trends**: Cannabis is the most common drug among pupils; alcohol use rises sharply by Year 11.
 - **Crime links**: 9.8% of violent crimes and 14% of domestic abuse cases involve alcohol/drugs.
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Strategic Plan 2022–2025

Priorities:

1. **Prevention & Early Intervention**
 2. **Targeted Support for At-Risk Groups**
 3. **Integrated Mental Health & Substance Misuse Services**
 4. **Reducing Stigma**
 5. **Community Assets for Recovery**
 6. **Harm Reduction**
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Key Progress Highlights

- **Training & Awareness**: Over 5,000 professionals trained; 8,000+ community interactions annually.
- **Young People's Engagement**: ReFRESH delivered 4,500 interventions; embedded workers in safeguarding and Youth Justice.

- **Criminal Justice:** Interventions as part of community sentences doubled; prison-to-community treatment engagement rose from 34% to 60%.
 - **Mental Health Integration:** Specialist provision developed; trauma-informed training for 250+ staff.
 - **Stigma Reduction:** Co-production with Lived Experience Collective; award-winning podcast *Believe in People*.
 - **Community Recovery:** IPS employment support enabled 69 job starts; activities include allotments, sports, and social prescribing.
 - **Harm Reduction:** Naloxone coverage at 85%; Hospital liaison team in HRI; drug testing via Humberside Police.
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National Outcomes Framework – Hull Performance

- **Treatment Engagement:** Adults in treatment rose from 2,850 (2021/22) to 3,205 (2023/24); young people from 60 to 110.
 - **Recovery Outcomes:** Successful exits increased from 360 to 550; 89% in effective treatment.
 - **Drug-Related Deaths:** 77 deaths (2021–23), up from 67.
 - **Hospital Admissions:** Drug-related admissions remain above national average; alcohol-specific admissions rising.
 - **Crime & Supply:** Drug trafficking offences increasing; strong partnership with police for harm alerts.
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Future Plans

- Develop **Strategic Plan 2026–2029** with lived experience input.
- Launch **Inclusive Recovery City** initiative to promote visible recovery and challenge stigma.
- Co-produce **women's health stream** within treatment services.
- Strengthen multi-agency work to address housing, mental health, and criminal justice factors disrupting engagement and recovery.

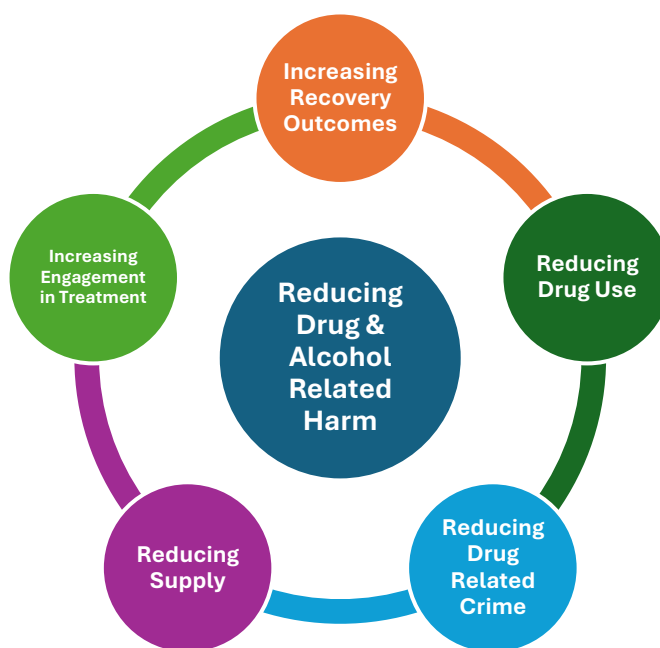
Contact: publichealthadmin@Hullcc.gov.uk

Full Report

Background

The national drugs strategy, From Harm to Hope, asked every local authority across England to form a Combating Drugs Partnership (CDP).

The partnerships are intended to bring together a range of local partners - including enforcement, treatment, recovery, and prevention – and provide a single setting for understanding and addressing shared challenges related to alcohol and/or drug-related harm, based on local context and need. The national strategy sets out the following aims:



In Hull the Alcohol and Drugs Strategic Partnership (ADSP) was already in place to support and coordinate local action to address drug and alcohol related harm. The ADSP fulfils the function of the combatting drugs partnership.

Hull Alcohol and Drug Strategic Partnership

Hull Alcohol and Drug Strategic Partnership is Chaired by Hull Council's Director of Public Health and Humberside Police Force's Strategic Drugs Lead.

The Partnership meets on a quarterly basis. Its term of reference set out the following roles and responsibilities:

- Oversight on delivering outcomes in line with alcohol and drugs strategic priorities.
- Develop and implement delivery plans for the national and local strategies.
- Agree and implement an effective governance structure.
- Agree and use a local performance framework to monitor the implementation and impact of the strategy delivery plans.
- Monitor progress of the alcohol and drugs delivery plan and identify items for escalation to other boards / groups in line with the governance structure.

- Set up and oversee the activity of strategy delivery groups.
- Advocate for approaches and interventions to tackle stigma and reduce alcohol and drugs related inequalities.
- Ensure local alcohol and drug priorities are aligned with other plans and business development plans across the partnership (and vice versa), including commissioning arrangements and outcomes frameworks.
- Seek new and innovative ways of working across partnerships to commission and develop increasingly co-ordinated and cost-effective services.
- Inform investment and commissioning decisions around alcohol and drugs services.
- Undertake annual reviews of the of strategy delivery plan and set actions for future plans.
- Develop effective collaborative working arrangements with other local alcohol and drugs strategic partnerships, including Hull and East Riding Combatting Drugs Alliance.

This includes working jointly with neighbouring ‘combatting drugs partnerships’ within the Humber area on issues/opportunities that can be addressed more effectively across a bigger footprint.

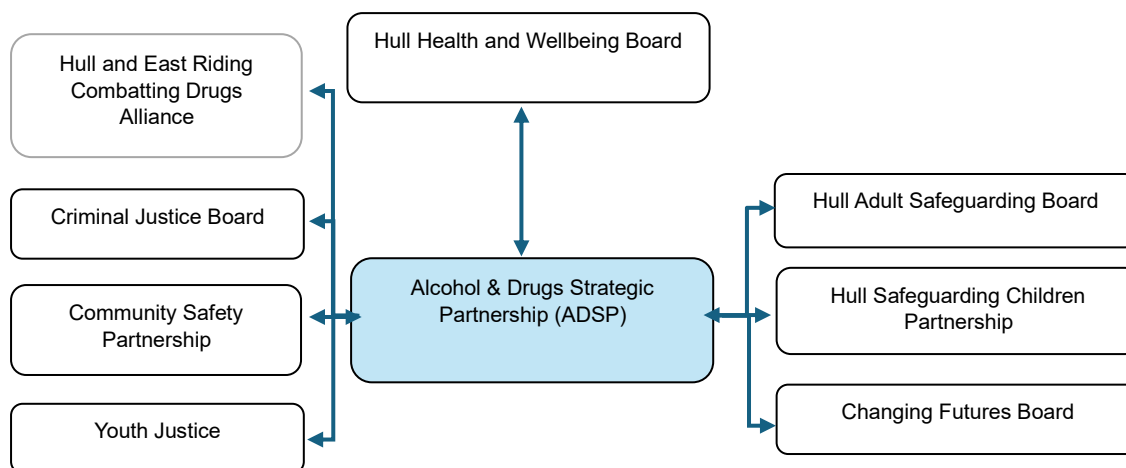
Membership

The Alcohol and Drug Strategic Partnership is made up of strategic decision makers across key partner organisations involved in addressing the challenges of drug related harm. These include:

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|--|---|
| • Public Health - Hull City Council | • Public Protection - Hull City Council |
| • Humberside Police | • Forum CIO |
| • Hull City Council – Elected Members | • CYPF Services - Hull City Council |
| • Hull Health and Care Partnership | • Adult Social Care - Hull City Council |
| • Office of Health Improvement and Disparities (OHID) | • Department for Work and Pensions |
| • Housing and Neighbourhoods - Hull City Council | • Humber Local Pharmaceutical Committee |
| • Hull University Teaching Hospitals NHS Trust | • Yorkshire Ambulance Service |
| • Hull & East Riding Probation Delivery Unit | • Renew, CGL |
| • Community Safety Partnership | • Refresh - Hull City Council |
| • Humber NHS Foundation Trust - Mental Health Services | • Hull Primary Care Addictions Service |
| • Humberside Police and Crime Commissioner | • University of Hull |
| • HM Prison Hull | |

Governance

Nationally, Combatting Drugs Partnerships provide assurance into the government's Joint Combatting Drugs Unit which coordinates delivery of the national drug strategy. In Hull, the Alcohol and Drug Strategic Partnership reports to the Hull Health and Wellbeing Board. The partnership also links in with, and provides updates as required, to the boards and groups shown in the chart below.



Alcohol and Drugs in Hull

Hull's Drug and Alcohol Joint Needs Assessment [Hull's Joint Strategic Needs Assessment \(JSNA\)](#) includes detailed analysis of alcohol and drug use and related issues for adults and young people. The JSNA is regularly updated and uses data taken directly from government published sources.

There are clear links between deprivation and poor physical health and mental wellbeing. Drug and alcohol related harms tend to be higher in areas with higher levels of poverty and deprivation. In 2024 an additional needs assessment was included in the JSNA for people with multiple unmet needs [Multiple Unmet Needs](#).

Relevant findings from the JSNA and additional local data:

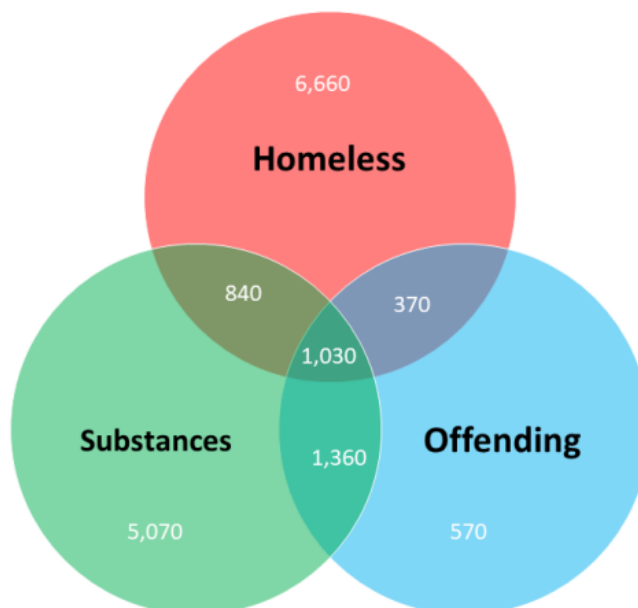
- Based on the Index of Multiple Deprivation 2019, Hull is the fourth most deprived local authority in England (out of 317). Half of Hull's geographical areas are in the most deprived fifth nationally.
- 2019/20 estimates indicate that there were more than twice as many opiate and/or crack users in Hull compared to England (22.2 versus 9.5 persons per 1,000 population with a total of 3,799 people aged 15-64 years who used opiates and/or crack cocaine).
- In Hull's Health and Wellbeing Survey, 1.5% of respondents stated they used drugs other than those required for medical reasons weekly and 2.2% of respondents, every day. 85% stated they had never used drugs other than those required for medical reasons. However, there was a substantial difference by age and gender with 11.4% of men aged 16-24 years stating they used such drugs weekly.

- The mortality rate from drug misuse was almost twice as high in Hull compared to England for 2021-23 (10.1 versus 5.5 deaths per 100,000 population).
- Latest estimates indicate that there are about 4,125 adults who are dependent on alcohol in Hull with nearly four times as many men as women dependent.
- For alcoholic liver disease, the hospital admission rate in Hull is more than double the rate for England for 2022/23. It is almost triple the rate among men and approaching double the rate for women.
- The premature mortality rate from alcoholic liver disease was significantly higher in Hull compared to England for men for deaths registered during 2021-23, but mortality rates were comparable for women.
- 22% of residents aged 16+ years in Hull never drink alcohol. Women, people aged 75+ years and people living in the most deprived areas of Hull were the most likely to never drink alcohol. More people in Hull never drink alcohol compared to England (22% versus 18%).
- On average in 2023/24 9.8% of Violence against the Person in Hull offences recorded in Hull were linked to alcohol and 2.3% were linked to drugs.
- Over the same period 14% of domestic abuse offences that were recorded included the key words drugs and/or alcohol.
- The local Young People Health and Wellbeing survey suggests that fewer than 5% of year 7 and 8 pupils had ever used or tried drugs. Around 6% of year 9 pupils, 17% of year 10 and 21% of year 11 pupils.
- Among pupils in school years 9 to 11, Cannabis was by far the most common drug that they reported having used, with 15% of girls and 10% of boys stating they had used it at some point.
- The hospital admission rate due to substance misuse for 15-14-year-olds is higher in Hull than in England (57.7 per 100,000 versus 47.4).
- From the local Health and Wellbeing Survey 2024, 18% of pupils overall reported that they regularly or sometimes drink alcohol, with percentages slightly higher among girls than boys. Percentages by year rose from 6% among pupils in year 7 to 28% among year 11 boys and 31% among year 11 girls.
- Under 18 hospital admission rates for alcohol-specific conditions is 18.3 per 100,000, which is slightly lower than the rate for England.
- A 'Deep-Dive' review by Hull Youth Justice Service of young people in their reoffending cohort identified that substance misuse was a feature in 100% of the cases examined. 85% had experienced domestic violence in their household and concerns around exploitation were recorded in 85% of the cases.

The Breaking the Cycle report into multiple unmet need highlighted the overlaps between substance use, homelessness and involvement with the criminal justice system. The diagram below shows an estimated 8,900 people experiencing harmful substance use in Hull of whom 840 experience homelessness and 1,360 experience involvement with the criminal justice system, with a further 1,030 experiencing both homelessness and involvement with the criminal justice system.

Figure 4: Estimated number of people in Hull experiencing multiple unmet needs based on local analyses and estimating the overlap between groups based on the Hard Edges modelling (Source: local analyses and Hard Edges 2015 report)

The sum of each 'circle' within the Venn diagram equates to 8,300 individuals experiencing harmful substance use, 8,900 individuals experiencing homelessness, and 3,330 individuals involved with the criminal justice system.



In 2024 a survey was conducted based on the local Evening and Nighttime Economy (ENTE). Of those responding who had spent time in the city centre in the previous year, 12.7% said that they had experienced drugs being sold or taken and 52.1% said that they had witnessed this. For problematic drinking 21.2% of respondents had experienced this and 71.7% had witnessed this happening. 61.9% reported that they had witnessed antisocial behaviour.

Hull's Alcohol & Drug Strategic Plan 2022-2025

The partnership's strategic plan 2022-25 was produced in collaboration with members of the partnership and informed by the Needs Assessment and the lived experience of service users and those impacted by alcohol and drug harms. The plan was initially developed prior to the publication of the national drug strategy and the additional investment that has been made available through a range of annual grants.


A refreshed Strategic Plan for 2026-2029 is being developed in consultation with the partnership and other stakeholders including people with lived and living experience of drug- and alcohol-related harms

The 2022-25 plan identified the following strategic priorities for Hull:


- 1. Developing a Prevention and Early Intervention approach across the partnership**
- 2. Implementing a more targeted approach to support at-risk groups**
- 3. Improving services to effectively support young people and adults with co-existing mental illness and substance misuse, and/or with multiple and complex needs**
- 4. Tackling alcohol/drug related stigma to ensure people have equitable access to services and resources**
- 5. Developing community assets to achieve and sustain recovery**
- 6. Reducing the risks associated with alcohol/drug use by utilising a harm reduction approach**

The tables below show our progress towards the priorities and the objectives that were set.

Progress


Priority 1	Objectives	Progress
	<ul style="list-style-type: none"> • Alcohol and drugs awareness and brief intervention training across agencies and in the community to prevent alcohol/drugs harm and improve early identification. • Take into consideration the impact of trauma on individuals. • Improve alcohol/drugs education in schools and maximise opportunities to engage with children and young people. • Consideration of how to increase opportunities to engage with community groups. • Improved alcohol and drugs screening at the point of registration and subsequent reviews in Primary Care and other healthcare settings. • More collaboration and collective action to reduce alcohol availability, specifically in the most deprived and problematic areas. • A greater role for local leaders, agencies and communities to challenge the social acceptance of excessive alcohol consumption and challenge physical and cultural conditions that promote alcohol/drug related harm. • Support the promotion of sensible drinking, continued promotion of the Low Ale Trail (NoLo), and consideration to schemes such as Best Bar None, Pub Watch and Purple Flag, all contributing to improve night-time economy and promote safer spaces. 	<ul style="list-style-type: none"> • Since 2022 our main adult community treatment provider, ReNew, has delivered alcohol and drug training to more than 5,000 professionals and members of the public in Hull. • In addition, accredited drug and alcohol awareness training was commissioned for around 100 frontline housing and housing support workers. • Screening and brief advice on drugs and alcohol are offered at key community events such as Pearson Park Summer Sports & Games Fest, Pride in Hull and Hull College and University Freshers' Week, with over 8,000 interactions with the public each year. • Our young peoples' service, ReFRESH, provides education-based sessions in schools, PRU's, colleges focusing on drug education, peer pressure, understanding why drugs and alcohol can become problematic and the risks associated. • Last year, ReFRESH engaged with people across the city to provide more than 4,500 brief interventions and advice with a presence at community events such as ZebFest and Pride. • A specialist worker is embedded in the early help and safeguarding hub to enable early identification and support for parents and young people experiencing issues with drug and/or alcohol use. • An alcohol matrix is provided by public health for each alcohol license application considered by the Responsible Authority Group. This covers data on deprivation, alcohol related health, crime and antisocial behaviour in the locality of the application. • As one of Hull's largest employers, a bespoke training package has been produced for Hull City Council managers and supervisors on managing alcohol & drug use in the workplace. • Hull's Low Ale Trail continues to promote an inclusive opportunity for people to enjoy the City's pubs and bars ‘A cultural shift’: drinkers hit Hull’s Low Ale Trail for alcohol-free options Hull The Guardian.


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Priority 2	Objectives	Progress
	<ul style="list-style-type: none"> • More wrap-around support for young people and adults at risk of alcohol/drugs problematic use or dependence as early as possible. • Review of the current transition arrangements for young people into adulthood. • Implementation of programmes to divert people with problematic use of alcohol and drugs away from the criminal justice system and into community services. • Introduction of a peer support approach for both adults and young people in contact with alcohol/drug and other community services. • More targeted support and motivational interventions for young people, especially those at risk of harm but not engaged with statutory services. • Improved referrals from Primary Care to community drug/alcohol services. • Alcohol/drug services to be provided across a range of different settings to improve accessibility. 	<ul style="list-style-type: none"> • ReFresh Young People's service includes a worker to support young adults with housing support needs, with a particular focus on care leavers. It also has staff working directly within Youth Justice to identify and offer interventions to young people involved with the criminal justice system. • A new transitional team has been introduced to provide age-appropriate support to young adults. • Adult services are embedded with the criminal justice system with direct involvement in integrated offender management. The number of people receiving drug and/or alcohol interventions as part of community sentences has doubled between 2022/23 and 2024/25. • Continuity of care for those leaving prison with a substance misuse need has increased from 34% in 2022 to over 60%. • Specialist staff are based in Hull Royal Infirmary to support identification and early interventions for people admitted to hospital and those accessing accident and emergency. • ReNew's Assertive Alcohol Outreach Team provides intensive support for people identified in the hospital with alcohol-related conditions who have not benefitted from other community-based interventions. • ReNew works closely with homeless and housing teams. This includes specialist staff working alongside outreach teams and area housing teams in the city. Last year 160 people were supported by our dedicated homeless drug and alcohol team. Our joint work with Changing Futures, which focuses on people with multiple unmet needs including homelessness and mental health, has a drug and alcohol worker embedded in the team. • ReNew has staff working within Domestic Abuse services in Hull to provide direct drug and alcohol support to those affected by domestic violence. • Funding has also been made available for an innovative programme for people who are perpetrators of domestic violence associated with their alcohol and/or drug use to reduce the cycle of abusive behaviour and violence towards women and girls.

Priority 3	Objectives	Progress
<div data-bbox="185 320 282 1246"> <p>Improving services to effectively support young people and adults with co-existing mental illness and substance misuse, and/or with multiple and complex needs</p> </div>	<ul style="list-style-type: none"> • A more joined-up approach delivered in both specialist mental health and alcohol/drug services to ensure the effective development and implementation of a “no wrong door approach”. • Agree protocols to implement a co-ordinated response to levels of complexity of need. • Assertive Outreach approach to engage and ensure intensive/regular contact with people using substances requiring additional health and social support outside treatment settings. • Multi-agency training to improve understanding of trauma and complex needs. • Better interface between alcohol/drugs community services and Primary Care to share information about treatment updates and coordinate support needed by patients. • Improved access to inpatient detoxification and residential rehabilitation placements. 	<ul style="list-style-type: none"> • Over the past two years, specialist mental health provision has been developed within ReNew for those with co-occurring mental health and substance use issues. This is led by a consultant psychologist and includes mental health nurses employed by mainstream mental health services to improve joint working. • Humber Teaching Hospital NHS Foundation Trust has ratified clinical guidelines for providing care to people with co-occurring mental health and substance use. • We have worked with the University of Hull to evaluate a pilot Assertive Alcohol Outreach model to provide intensive community support for people admitted to hospital with alcohol-related conditions who have not engaged in, or benefited from, more traditional alcohol treatment and support provision. • We work closely with Changing Futures programme to support adults experiencing multiple unmet needs, including an embedded drug and alcohol worker within the team. • As part of Hull’s aim to be a Trauma Informed City, more than 250 individuals across 34 organisations and departments have participated in Trauma Informed Awareness training sessions. • Joint working between our community drug and alcohol service (ReNew) and our primary care/share care service (Hull Primary Care Addictions Service) has been strengthened with staff attending joint clinics. • Access to inpatient detoxification and residential rehabilitation are regularly reviewed and pathways are in place via community treatment. The proportion of people accessing inpatient detoxification is slightly higher in Hull than in England overall and the region. In addition, ReNew have increased the number of people who are supported in community detoxification and offer a structured community rehabilitation programme for people who are drug/alcohol free.

Priority 4	Objectives	Progress
<p>Tackling alcohol/drug related stigma to ensure people have equitable access to services and resources</p>	<ul style="list-style-type: none"> • Developing an advocacy and support group/network for people with problematic alcohol/drug use or dependence to facilitate dialogue with healthcare and community services, and communities • Develop a public health approach to address alcohol/drug related harm in Hull, to mitigate the impact of stigma and criminalisation on population at risk and prevent multiple trauma. • More focus on successful stories on overcoming addiction to be identified and shared across the partnership. • More training and awareness raising to address social and structural stigma (i.e. workplaces, healthcare). • Developing a non-judgemental approach when discussing alcohol/drugs harm with young people disclosing use. • Delivering treatment services in non-stigmatising sites (co-location in GP practices and other community settings, and drop-ins among others). 	<ul style="list-style-type: none"> • We have built excellent links with the Lived Experience Collective and funded the development of co-production training for those working in related fields and for people with lived and living experience. • Whilst it remains an area for further development, the Partnership has made a commitment to work with lived experience networks and groups towards our ambition to become an Inclusive Recovery City. • The Lived Experience Collective has played an integral role in work with the Alcohol Care Team based in Hull Royal Infirmary to raise awareness of stigma and the way in which professionals work with people with multiple needs. • The co-production community of practice, which includes those with lived, living and learned experience of drugs, alcohol and related issues, is currently working on a training video aimed at health professionals highlighting the way in which stigma can impact on people accessing services. • Community drug and alcohol services deliver support and interventions in venues and settings within the community as well as in treatment and recovery hubs. • Our adult and young peoples' services, in collaboration with the Council's Neighbourhood Coordinators provide 'pop-up clinics' in community settings that include advice and screening around drug and alcohol issues. • Adult and young peoples' services are working collaboratively to provide stalls and information in colleges and providing targeted drop-ins at youth centres, children's homes, and pupil referral units. • The highly successful Podcast "<i>Believe in People: Addiction, Recovery & Stigma</i>" is produced in Hull by members of the ReNew team. This has been national recognised, winning a Silver in the British Podcast awards in 2024. It has been nominated in two categories this year.

Priority 5	Objectives	Progress
	<ul style="list-style-type: none"> • Maximise opportunities for people with alcohol/drug problematic use or addiction to participate in community activities. • More work with businesses to review corporate social responsibility and how they can contribute to prevent and reduce alcohol/drug related harm in the city. • Consider opportunities for utilising community organisations to provide recovery coaching to service users completing treatment. • Explore opportunities to deliver intensive employment support and opportunities in collaboration with DWP and treatment service providers. • Special consideration to reducing loneliness and isolation among people with alcohol/drugs problematic use or dependence. • Extend the reach of alcohol/drug treatment services into the community, integrating community resources into treatment. • Review treatment-community relationship and opportunities to develop and mobilise community resources as part of service models that aim to support long-term recovery of service users. 	<ul style="list-style-type: none"> • Staff, volunteers and service users at ReNew coordinate a range of regular activities in community settings. These include an allotment, sporting activities, fishing, a coffee morning at Hull Minster and 'walk & talk' events. • Our services have developed stronger links with Social Prescribing to support greater inclusion. • There are well established links between our commissioned services and local Mutual Aid groups. New contracts include Facilitated Access to Mutual Aid as part of routine support planning. • Employment support is delivered through our Individual Placement and Support (IPS) service which works closely with those accessing treatment. The service has built good relationships with prospective employers and also links in with DWP and their peer mentors. To date the service has supported 69 first job starts. • We are in the process of mapping the significant range of community groups and individuals that offer support for those with problematic drug/alcohol use. We hope to offer a forum for these groups to share experience and work collaboratively. This will contribute to our aim of becoming an inclusive recovery city • Hull's Low Ale Trail continues to promote an inclusive opportunity for people to enjoy the City's pubs and bars ‘A cultural shift’: drinkers hit Hull's Low Ale Trail for alcohol-free options Hull The Guardian.

Priority 6	Objectives	Progress
	<ul style="list-style-type: none"> • Development of an Overdose Response Pathway in A&E, aiming at reducing A&E re-presentations, emergency hospital re-admissions and drug related deaths. • Flexible and fast testing of substances to allow timely identification of dangerous and adulterated drugs. • Training for general practitioners in addiction to prescription drugs. Consideration to be given to the development of a prescription drug addiction service, separated from the local alcohol/drug service. • More awareness around risks of polysubstance misuse and addiction to prescription medication to be raised among users and staff working with people using substances. • Improve medicines optimisation and patient-focus approach to medicines use. • Review local needle exchange provision and opportunities to engage with people not accessing healthcare services and treatment in the community. • More harm reduction campaigns, messages and resources to young people to prevent risky behaviours and enable alcohol/drug safety measures. 	<ul style="list-style-type: none"> • ReNew's Hospital Liaison Team works closely with the hospital and the Emergency Department (ED) to identify and support people identified attending ED and admitted to hospital with drug and alcohol related conditions. • We have funded a drug analyser that is used to identify substances and potential contaminants that may have been found in cases of fatal and non-fatal overdoses. This is deployed by Humberside Police in Hull and results are shared with Public Health. • Our shared care/primary care service (HPCAS) offers specific support and interventions for people addicted to prescription medication, as well as guidance for GPs on safely reducing prescribed medications. • Naloxone is a drug that reverses the effects of opiate overdose. This is made available to everyone accessing specialist treatment, with around 85% coverage. Naloxone is also available in hostels and supported accommodation and Probation Offices. Community Police officers have also been trained in its use and carry Naloxone. • Advice and testing for blood-borne viruses (hepatitis B and C and HIV) is routinely offered through our drug services with hepatitis B vaccination offered to all service users who are at risk. • Hepatitis C treatment is delivered to appropriate clients accessing our main treatment hub with pathways to hepatology in place for those with higher levels of health needs • We closely monitor reports of overdoses and adverse reactions to illicit substances and have robust processes in place to share warnings and alerts to partners to support harm reduction messaging. • We have a multi-agency drug related incident preparedness plan to respond to any novel substances and/or clusters of overdoses that may be connected. Learning from our response to an incident in December was used to produce our latest iteration and has been shared nationally. The work of Hull and other Humberside CDPs was cited in the latest Synthetic Opioid Preparedness Guidance produced by National Government.

National Combatting Drugs Outcomes Framework

Progress of the Partnership is measured against the 'National Combatting Drugs Outcomes Framework' which is the mechanism for monitoring progress across central government and in local areas. These are summarised below:

Reducing drug use	Prevalence of opiate and/or crack cocaine use Proportion of people reporting drug use
Increasing engagement in drug and alcohol treatment	Numbers in drug and alcohol treatment The proportion of those leaving prison drug and alcohol services who engage in community drug and alcohol services
Improving recovery outcomes	Drug and alcohol treatment progress In both drug and mental health treatment where needed
Reducing drug and alcohol related harm	Deaths related to drug misuse Hospital admissions related to drug misuse Hospital admissions related to alcohol misuse
Reducing drug related crime	Number homicides that have been related to drugs in any way Number of all neighbourhood crimes determined to be related to drugs
Reducing drug supply	Number of County Lines closed Organised crime gang disruptions - activity carried out to counter the threat of organised crime

The Partnership also receives regular updates on measures linked to national outcomes as well as some additional local activity and measures that contribute to our locally agreed strategic outcomes. This enables the Partnership to monitor the delivery of local objectives and the national drug strategy in Hull. A large amount of the data used by the partnership is restricted data that is made available to support our oversight of the delivery prior to official release.

An overview of the progress against these measures, where data can be shared, is provided below:

Reducing drug use

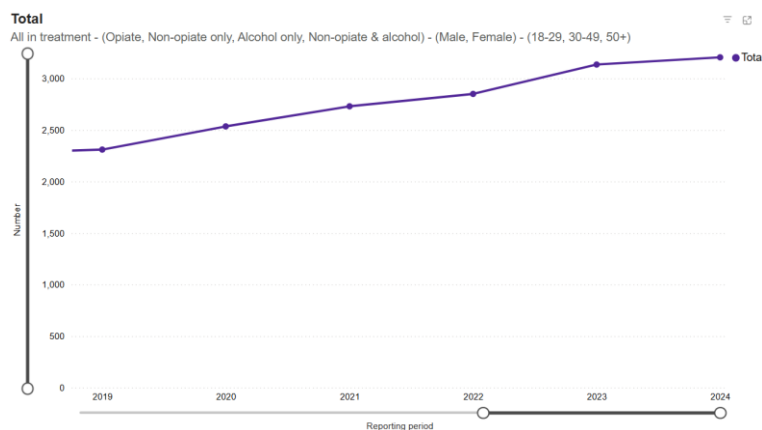
Estimates of the number of opiate and/or crack cocaine users are provided through national research. The latest estimates available are from 2019/2020. These suggest that there are approximately 3,800 opiate and crack cocaine users in Hull. The data also indicates that there are about 4,125 people in Hull who are dependent on alcohol.

Local analysis published in the Breaking the Cycle report suggests that there are 8,300 people in Hull experiencing harmful substance (drugs and/or alcohol) use.

Increasing engagement in drug treatment

The number of adults in treatment have continued to increase significantly. In 2021/22 2,850 adults accessed treatment and this increased to 3,205 in 2023/24 (an increase of 12%). The upward trend has continued through this year.

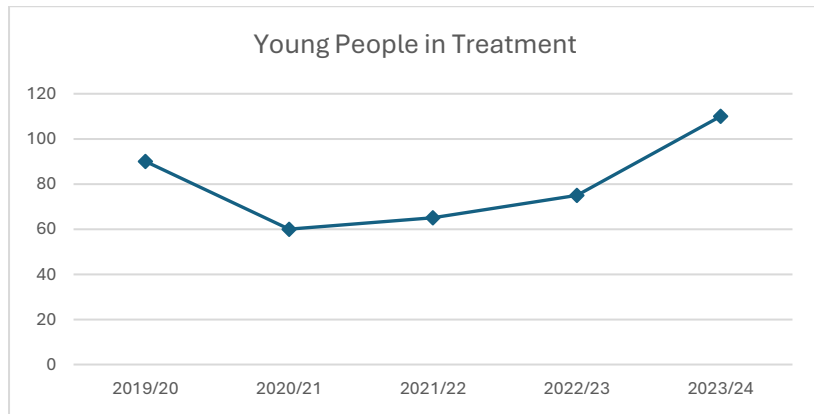
The graph below shows the number of adults in treatment from 2019 to 2024.



The data suggests that around 46% of opiate and/or crack users and 30% of dependent drinkers accessed treatment services in 2024.

Since 2021/22 the number of young people (under 18) accessing our specialist children and young people's drug and alcohol service has increased from 60 to 110.

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In Hull, the proportion of prison leavers with substance misuse issues who successfully engaged in treatment after leaving prison has increased substantially from 34% to 59% between 2021/2022 and 2023/2024.

Improving drug recovery outcomes

The number of people exiting treatment successfully has increased in Hull from 360 in 2021/22 to 550 in 2023/24, as shown below. This represents around 42% of those in treatment.



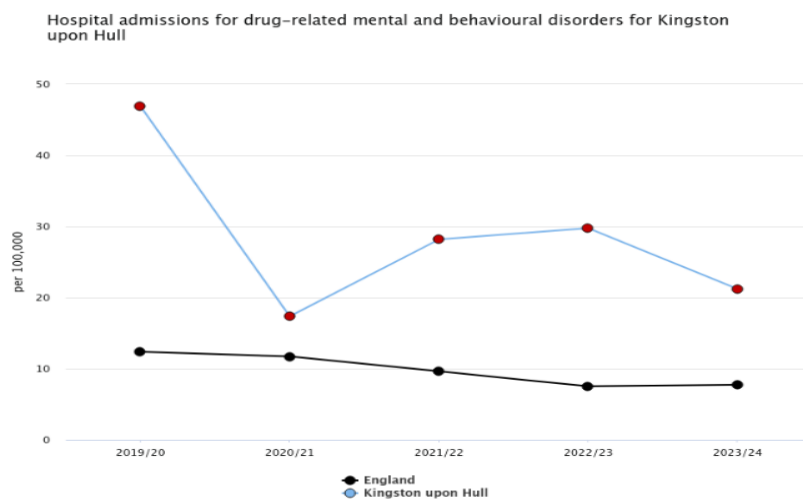
Statistics are also available for the proportion of those in treatment who either remain in treatment for 12 weeks or more, or successfully complete treatment. This is referred to as “Effective Treatment”. The latest published data indicates that 89% of people accessing treatment in Hull are regarded as being in effective treatment.

Reducing drug related deaths and harm

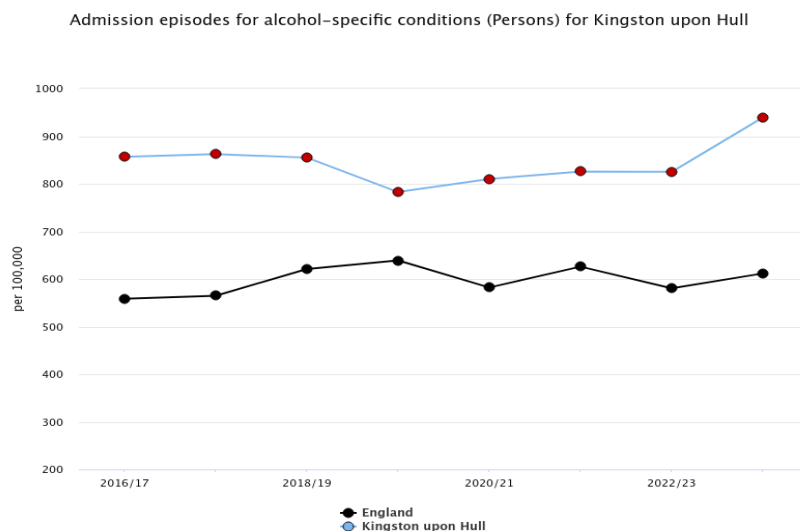
There were 77 deaths from drug misuse registered in Hull in the two-year period 2021-23 which is an increase from 67 in the two-years 2020-22. The mortality rate for drug misuse registered in Hull for 2021-23 was 10.1 per 100,000 people. This is significantly higher than the rate for England (5.5 per 100,00).

Hospital admissions are shown as the rate per 100,000 population in the following charts with comparisons to the rate for England overall.

Hospital admissions for drug-related disorders are higher than the national rate although there has been a reduction in the rate since 2021-22.

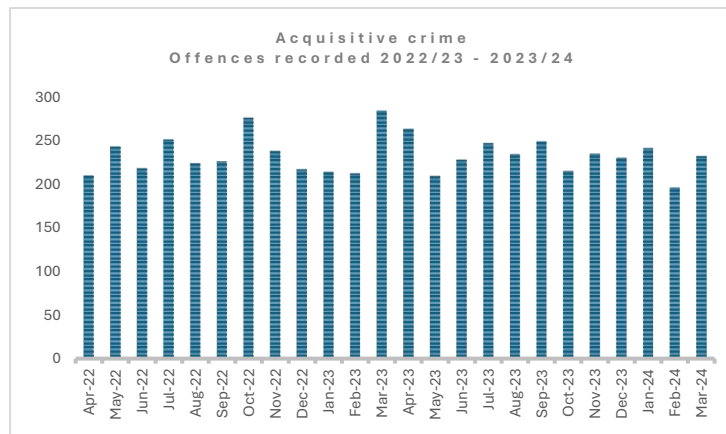
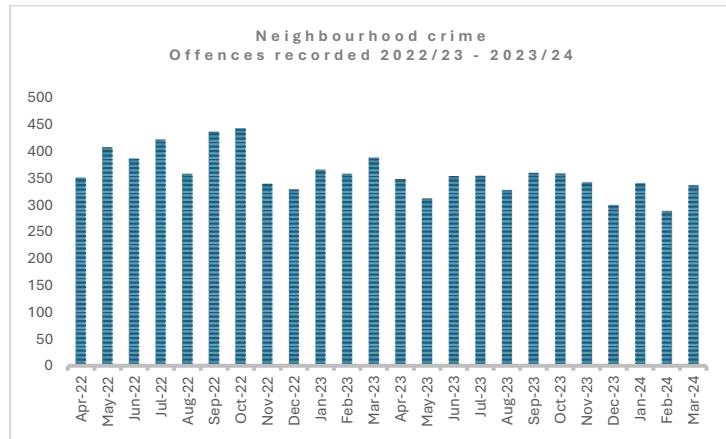


There was an increase in hospital admissions for alcohol-specific conditions from 2022/23 to 2023/24



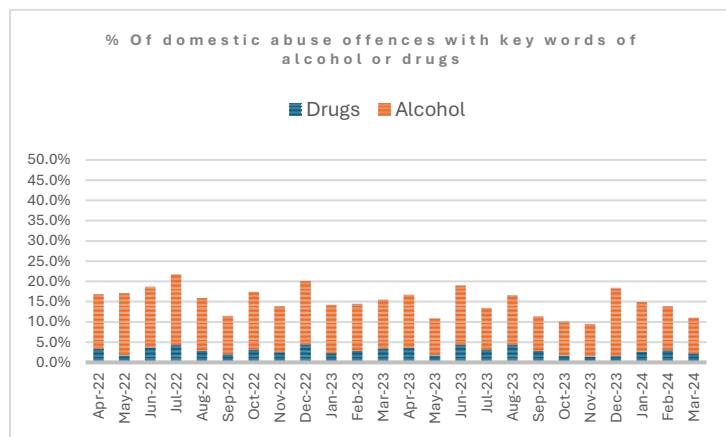
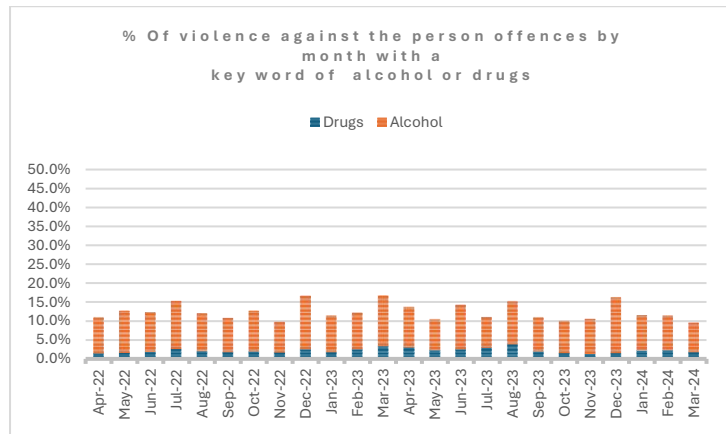
Reducing drug related crime

The charts below show the number of neighbourhood crime and acquisitive crime offences recorded by Humberside Police in Hull by month from April 2022 to March 2024.



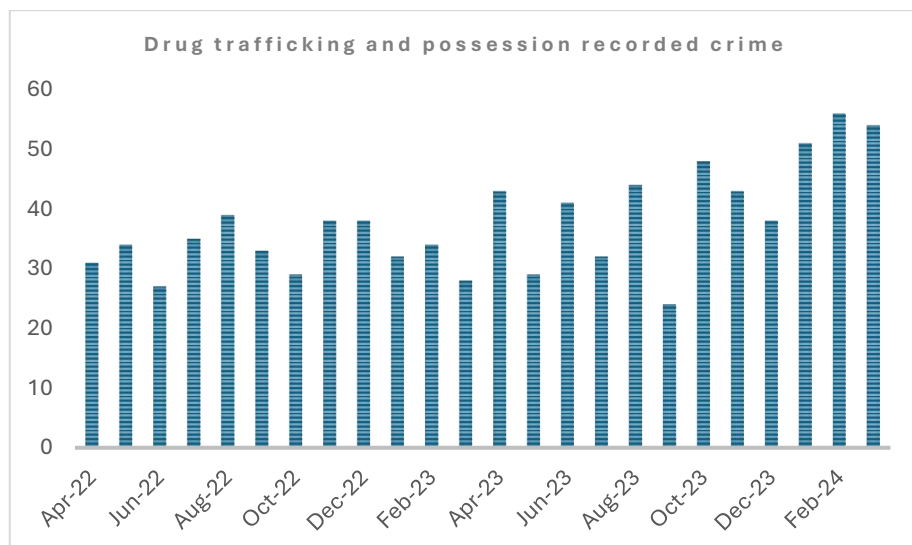
The charts below show the percentage of violent crimes against the person and domestic abuse offences where alcohol or drugs was a factor.

Hull Alcohol and Drugs Strategic Partnership Progress Report – December 2025



Reducing drug supply

The charts below show the number of drug trafficking and possession offences recorded by Humberside Police in Hull by month from April 2022 to March 2024.



Future Plans and Priorities

We are updating our local strategic plan and reviewing our priorities for the coming year. The Partnership has benefitted from the involvement of people with lived experience of drug and alcohol related harms and multiple unmet needs, and we are keen to continue to engage with as many groups and individuals as possible to shape the ongoing development of our work.

Over the coming year ReNew will work with the recovery community to co-produce an inclusive women's health stream within the local treatment and recovery system.

The Partnership has endorsed our ambition to become an Inclusive Recovery City. A recovery city is a place which promotes visible recovery, challenges stigmatising and discriminatory attitudes and champions multiple pathways to addiction recovery. It is also based on the idea that, through doing this, the whole city will grow and benefit. Crucially, people with lived and living experience of addiction should be at the core of this initiative. We will work to bring together the groups and individuals who already contribute to, and participate in, the recovery agenda in Hull to facilitate mutual support and develop a shared focus.

We also recognise that we need to work collectively to maximise positive outcomes for those who engage in the structured treatment commissioned by Public Health on behalf of the Partnership. For many individuals, structured treatment for addiction to drugs and/or alcohol is a vital step towards their recovery.

There are many factors that can affect people's engagement and continuation of structured treatment such as: stable and secure housing and homelessness; mental health issues that are not addressed; involvement in the criminal justice system.

These factors can result in unplanned exits from treatment and disrupted treatment and recovery journeys. This can have a damaging impact on the individuals involved and undermine their motivation and ability to work towards recovery.

Addressing the issues that disrupt treatment and recovery requires a strong joined-up approach involving many partners both within and outside the council.

If you like to know more about the partnership or to provide feedback, please contact:

publichealthadmin@Hullcc.gov.uk
