

True Stories Real Value

NORCAS Social Impact Study – Summary Report

The social impact of three **NORCAS** programmes



Commissioned by NORCAS
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Introduction

In a time of increased competition for resources and a greater focus on the outcomes of commissioned services it is increasingly important that organisations like **NORCAS** are able to evidence the difference they make. Not just the number of people they reach, or the innovative character of their services, but the real difference they make to people's lives and to society as a whole.

This report summarises the findings of 18 months of enquiry into the real impact of three programmes delivered by **NORCAS** during 2011 and 2012. It combines both qualitative and quantitative evidence to illuminate outcomes not just in medical or health terms, but in the contribution the programmes make to community safety, a healthy economy, community cohesion and to the lives of families and friends, employers and landlords of **NORCAS** clients.

This is just the first step. **NORCAS** plans to revisit some of these findings in 12 and 24 months to find out what changed for clients in the years following their participation in a **NORCAS** programme.

It is important to emphasise that, although this report talks in terms of the experience for the 'average' client' each client has a very different story behind their addictive behaviour so the outcomes for clients very enormously.

This report summarises the findings of the study which are detailed the two previous reports on this study. Both of these are available from **NORCAS**.

An explanation of the research methodology and the assumptions made in determining the social value of the services is given at the end of this report with further information in the two earlier reports.

Acknowledgments

Thanks are due to all who have contributed to this project including the clients who participated in focus groups and discussion workshops and responded to the survey and to the key workers who supported the data collection. Also to the representatives of sector stakeholders who attended workshops and gave interviews and particularly to Isabel Pollock, Head of Service Delivery & Quality and Information at **NORCAS** who provided invaluable support throughout the project.

The three programmes included in the study are...

Structured Day Programme

The Structured Day Programme works to benefit people in Norfolk with problematic drug and alcohol use. It is a fixed term programme where clients attend as a group on 3 days a week for 8 weeks providing a mix of support including:

- A structured routine
- Workshops on health, life skills, etc
- CBT based therapies
- Harm reduction advice
- Alcohol and Drugs awareness

In 2010–11 nine SDP programmes were delivered involving close to 60 participants.

Enhanced Support (Hostels)

The Enhanced Support (Hostels) programme provides expert one to one support for people living in supported housing who are at risk of losing their accommodation due to their drug or alcohol use. Support provided includes

- Psychosocial interventions
- Social engagement and support
- Liaison with clinical treatment providers
- Alcohol and substance awareness
- Support with meeting financial, emotional, educational, housing and other challenges

In 2010–11 the Enhanced Support (Hostels) programme supported 64 clients in Lowestoft and Bury St Edmunds.

Over 50s Outreach

The Over 50s Outreach programme has been developed in recognition of an increasing need among this age group and also their reluctance to engage with some mainstream programmes. It mostly benefits people over 50 who have difficulties with prescription drugs or with alcohol. It offers:

- Drop in facilities in appropriate locations
- Alcohol and drugs education and awareness
- Referral to **NORCAS's** other programmes
- A programme of one to one support

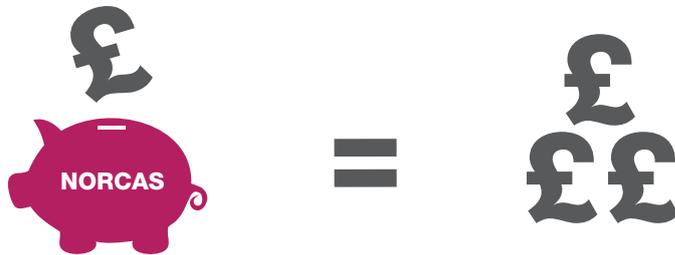
In 2010–11 **NORCAS** provided one to one support to 51 individuals through the 50 plus programme.

Social return

Every pound invested in the services pays back many times in terms of the social value it produces. Although the social dividend for Over 50s and Enhanced Support are similar, the ratio differs significantly because the inputs for Enhanced Support are lower.

SDP

Social dividend per client £2,620
Every £1 invested generates £3 of social value



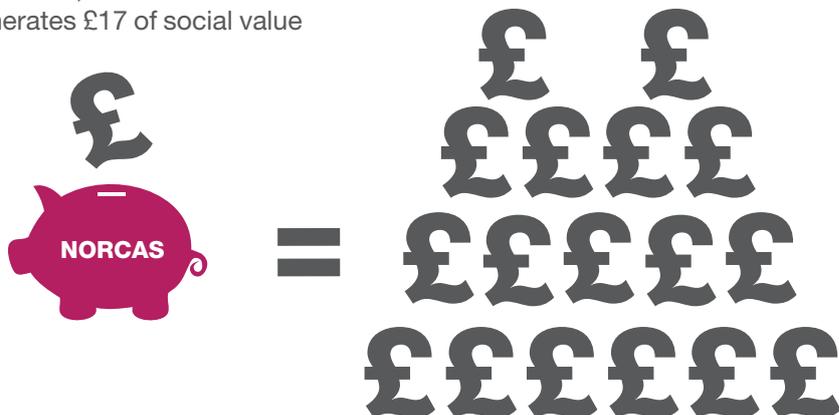
Over 50s

Social dividend per client £8,780
Every £1 invested generates £7 of social value



Enhanced support (Hostels)

Social dividend per client £8,811
Every £1 invested generates £17 of social value



Improved general health

MODEL OF CHANGE: Reduction in substance misuse and improved eating and sleeping patterns lead to better general health, fewer falls and fewer medical complications. Conditions such as Hepatitis can be addressed and medicines are generally more effective.

Almost all clients report improved general physical health as an outcome of their **NORCAS** programme. Indeed, during the course of this research, several clients said that they think they would have been dead by now were it not for the support they receive from **NORCAS**.

“There was a time a couple of years ago when I would be in hospital once a month!”

Lowestoft Enhanced Support (Hostels) client

Clients say they now take more exercise and give much greater attention to eating more healthily. For some this means starting the day with breakfast instead of a drink. For others it is about learning to give priority to shopping for food before their money is spent on alcohol or drugs.

For some clients, no longer waking-up shaking is a significant health gain whilst others find that a reduction in alcohol or substance misuse means they can now digest food more easily. Many clients note that people they know comment on how much more healthy they look.

“I haven’t seen my family for quite a few months but they have seen photos of me and they say. ‘Cor! He is looking a lot better’”.

Lowestoft Enhanced Support (Hostels) client

Improved sleeping habits and higher energy levels are important to better physical health though some clients find it harder to sleep now they are no longer using. A few clients who were previously frequent users of emergency ambulance services note that this is no longer an issue or is much reduced.

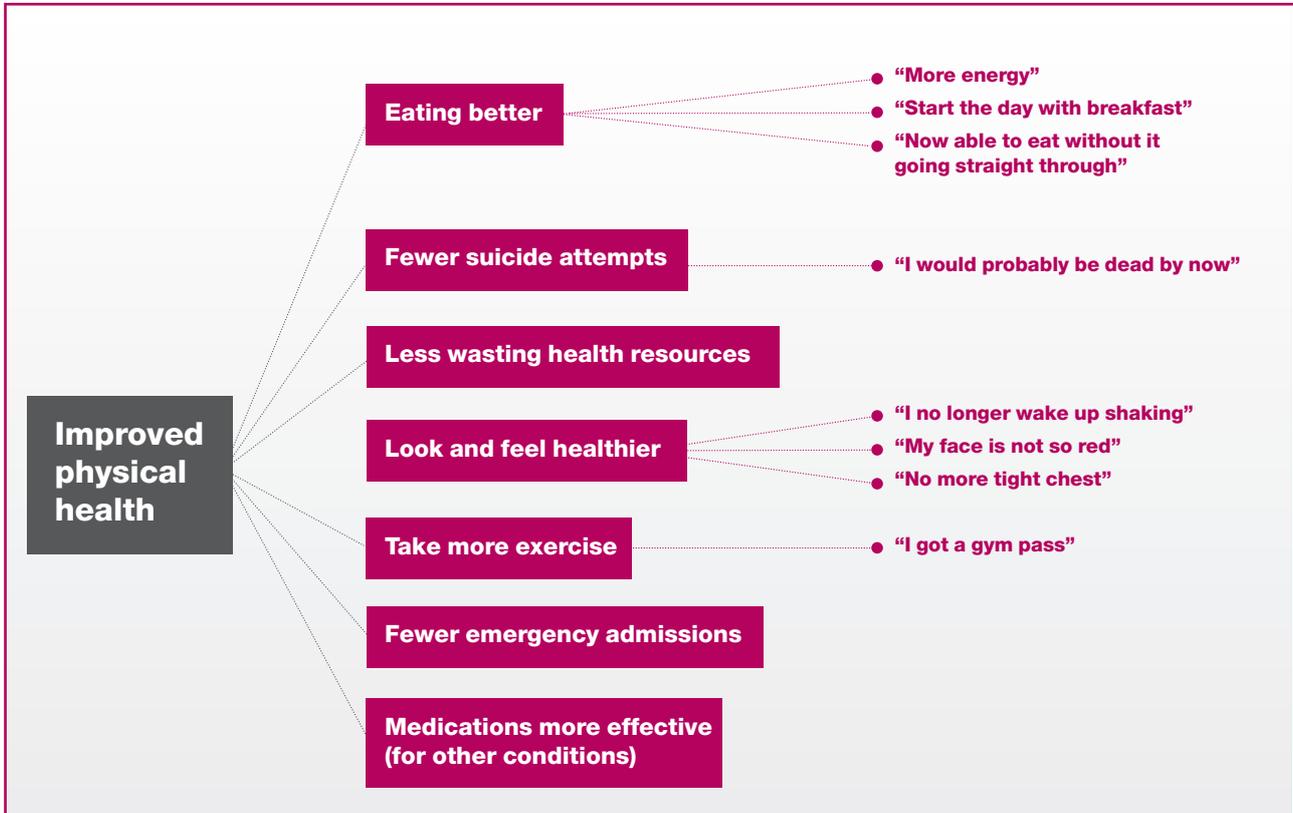
Many clients express embarrassment at the financial burden they place on health and emergency services and value the reduction in the demands they place on such resources as their health improves.

Quite a number of clients also note that their medicines are much more effective now that their alcohol or substance misuse is reduced. This can be because alcohol or substances impede the efficacy of medicines or because clients are less likely to forget to take medicines at the right time and in the prescribed quantity.

Around 1 in 16 of all hospital admissions in England and Wales are for alcohol-related causes.

In 2008 an estimate was made of the costs of alcohol harm to the NHS in England. The total figure was £2.7 billion at 2006/7 prices. (Institute of Alcohol Studies, 2006)

It is estimated that in England there are around 332,000 problem drug users and that there are approximately 1,500 drug-related deaths each year. (NHS East Lancashire, 2010)



The outcomes survey found:

- People were 44% more likely to say ‘You look well nowadays’ to clients following the Over 50s programme and rated ‘Taking good care of own health’ as improved by 44%. This was reflected in an average reduction of a projected 4 hospital admissions in the first year and 4 fewer GP visits.
- Clients on the SDP programme ranked ‘Shopping for food’ as improved by 9% and were more likely to ‘Go to bed and get up at relatively normal times’ by 12%.
- On the Enhanced Support (Hostels) programme clients rated ‘Prioritise shopping for food’ as improved by 26% and felt that they were 23% more likely to ‘Eat as well as most people’. For this group emergency ambulance call-outs were reduced by an average of 1 per year and their better health led to a projected 6 fewer GP visits in the first year.

The social value to the average client arising from improved physical health in 2011–12:

SDP £600

Over 50s £1,669

Enhances Support (Hostels) £1,216

Increased self respect and improved mental wellbeing

MODEL OF CHANGE: More time clean and sober means clients take better care of themselves have a greater pride in their appearance, are able to hold more normal conversations and have greater respect for others. Improved support and strategies lead to increased wellbeing, improved self confidence and more stable emotions. Medicines are taken more regularly and are therefore more effective

“Now I can talk to anybody. I don’t have to walk down the street saying ‘Oh, sorry mate! Oh, sorry mate!’ as if I have got in their way. I used to feel guilty all the time. I don’t feel guilty anymore”

Norwich SDP client

Improved self respect was one of the most commonly shared outcomes and this may reflect values that society attributes to addiction that it does not to other illnesses.

“The good news is you get your feelings back. The bad news is that you get your feelings back”

Norwich SDP client

For many clients, improved emotional and mental health is a major outcome. Many say that they experience fewer incidence of depression and that their symptoms are less severe. They quote lower levels of anxiety, reduced anger levels and improved assertiveness. Some say they are less quick to judge others and themselves, that they talk instead of shouting, they experience less fear and are more honest with themselves and others.

Improved sleeping patterns resulting from reduced anxiety are beneficial to both physical and mental health. A reduction in isolation was also common.

“I don’t spend so much time alone in my room. 8 months ago I wouldn’t have walked up to the town due to being scared of having to socialise.”

Lowestoft Enhanced Support (Hostels) client

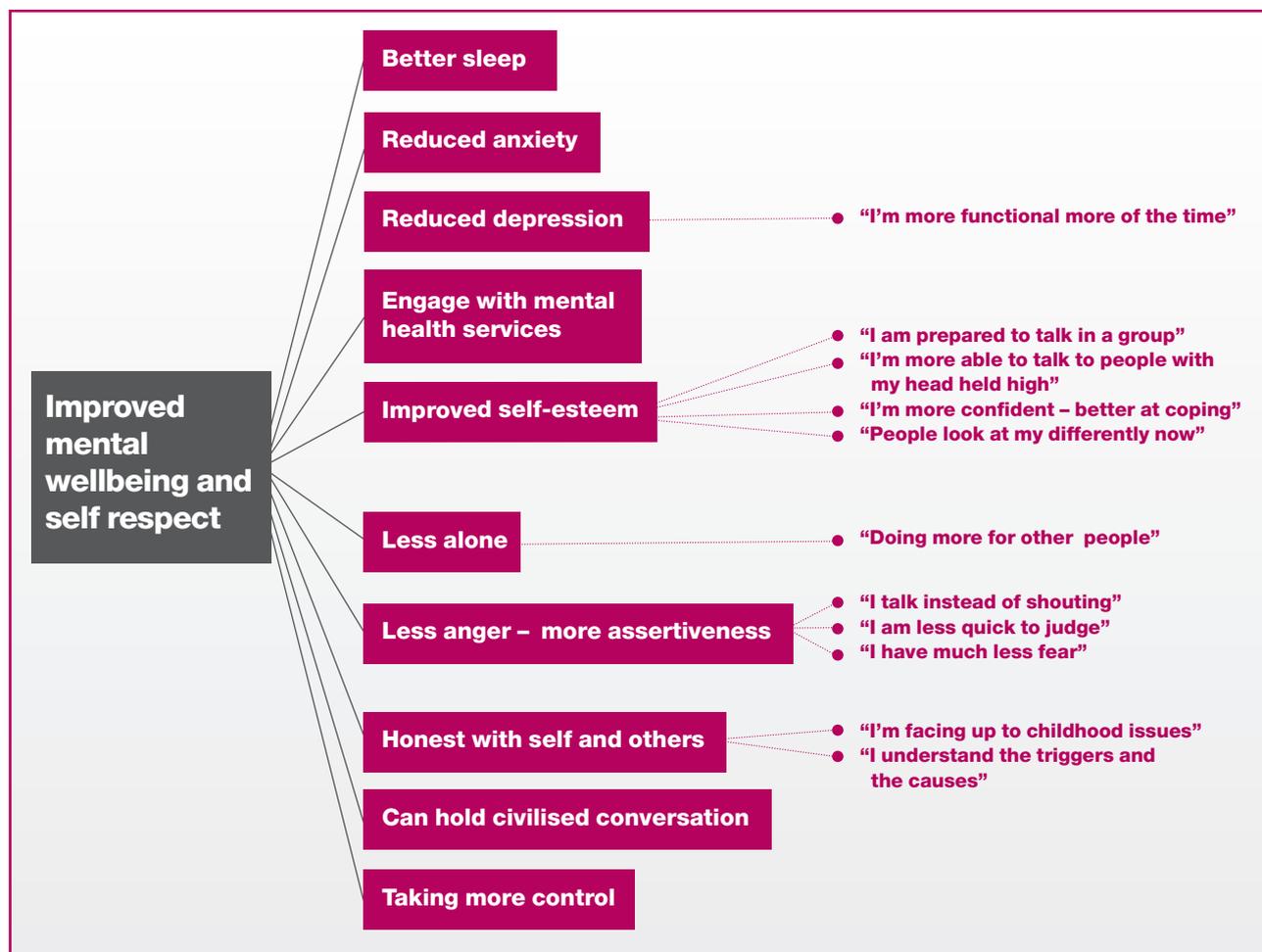
One consequence of poor mental health can be suicide. It is not uncommon for **NORCAS** clients to have made an attempt on their own life and several in the course of this study reported this.

“You’ve got peace of mind. I thought I just can’t stand it no more. I think I would have exploded”

Great Yarmouth Over 50s client

Approximately 10 million people in the UK experience mental health issues at any one time. The cost of this is estimated to be £8bn in health and social services, £4bn to individuals and carers and £15bn in lost output. (Joy I, 2006)

Much work has been done on estimating the financial cost to society of a single successful suicide. In England in 2009 this was estimated to be £1.45m. This includes direct costs such as medical costs, emergency service and coroner costs, as well as indirect costs such as time lost from work and the human costs of pain and grief experienced by family and friends. (Knapp M, 2011)



Findings from the outcome survey:

- Clients who complete the SDP programme feel almost 20% more able to ‘Plan for the future’ and are 15% more likely to ‘Feel positive about the future’
- People who have participated in the Over 50s programme rate themselves as 30% more ‘Confident when out in public’
- For Over 50s ‘Behaviour in presence of others that would later cause regret or embarrassment’ is reduced by 5 incidents per year whilst Enhanced Support (Hostels) clients reduce their embarrassing incidents by 12 per year.

The social value to clients of improved self respect and mental wellbeing in 2011–12 was:

SDP £299

Over 50s £708

Enhanced Support (Hostels) £611

Improved relationships with family and friends

MODEL OF CHANGE: More time clean or sober leads to more positive and more stable relationships with family, friends and neighbours. Clients learn to distinguish positive relationships from destructive ones and new friendships are formed.

The strain that prolonged substance or alcohol misuse places on relationships with family and friends is clear. Several clients have spoken of how, to the addict, the drug of choice becomes ‘more important’ than any relationship.

From the perspective of the client it is the validation, trust and support of the people that love them and know them well, that has the greatest value. The feeling that they are putting right some of the hurt that has been a consequence of their addictive behaviour has great value to them.

Many clients noted a significant improvement in their relationships with those around them. This could extend from becoming less reclusive and having increased trust in others, “I am no longer scared to have relationships” to now mixing with ‘straight’ people unrelated to drinking or substance misuse subcultures.

More significant perhaps were the relationships with their children or other members of the family. Prolonged alcohol or substance misuse often leads to family estrangement sometimes by order of a court.

“I can see the light at the end of the tunnel. I have seen my daughter again”.

Lowestoft Enhanced Support (Hostels) client

The breakdown of trust which is such a routine consequence of addictive behaviour carries a significant cost to the client as well as the affected other.

“My parents wouldn’t even talk to me when I was in active addiction. Now they trust me. They will leave their wallet around. Normally they would have grabbed it when I walk in the room and that would make me feel shit. Now they welcome me in their house. They phone up and ask me when I am coming round, not dreading the phone call from me to say I am coming round”

Bury St Edmunds Enhanced Support (Hostels) client

“We couldn’t invite him to anything. To family or social gatherings”

Family member of Great Yarmouth Over 50s client

One mother described the relief she feels now that her children can worry about normal childhood matters rather than worrying whether they would come home from school to find Mum unconscious on the kitchen floor.

“My children are proud of me”

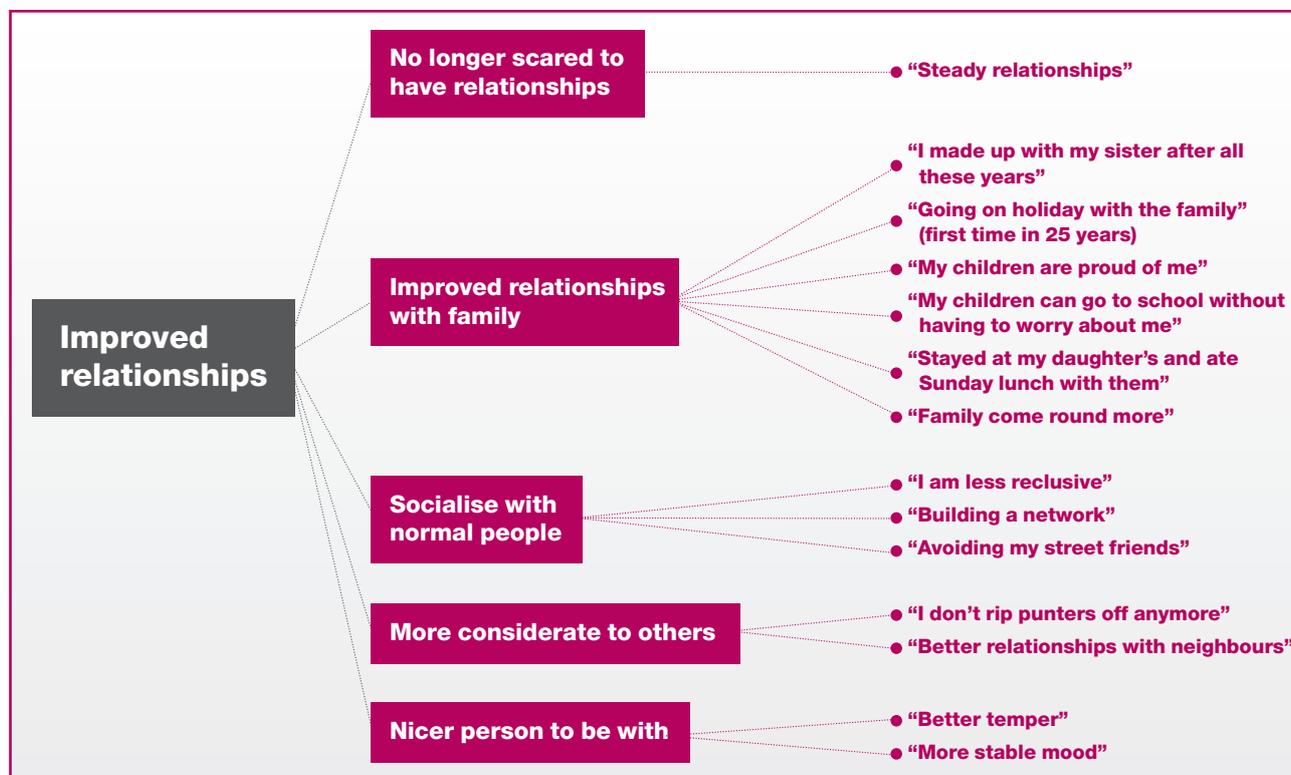
Norwich SDP client

“When she is drinking he [client’s son] is quite disrespectful. When she is not drinking he responds much more positively.”

Partner of Great Yarmouth 50+ client

As with all changes, rebuilding relationships is an incremental process. In many cases Affected Others have seen improvement before only to see it slide backwards if the addictive behaviour returns.

A number of sources calculate that the direct annual cost of family breakdown in the UK exceeds £20 billion, whilst including indirect costs (such as loss of working hours, long term impact on children, etc) boosts this figure to more than £100 billion per year.



Findings from the outcome survey:

- SDP clients rate their relationships with ‘Those around them’ as 9% improved but relationships with those closest to them improve by only 5%
- The Over 50s gives a real boost to the client’s relationship with their partners which they say improves by 24%
- The most striking finding for clients on Enhanced Support (Hostels) is the 19% increase in how they rate their relationship with their children. Clients who are living in a hostel setting will generally not be living with their children so this finding suggests an improved level of access or at least an improved positive regard between children and parent.

The estimated social value to an average client arising from improved relationship with family and friends as a result of participation in NORCAS programmes in 2011–12 was:

SDP £338

Over 50s £1,934

Enhances Support (Hostels) £344

Progress towards education, training or work

MODEL OF CHANGE: More time clean and sober leads to a more ordered way of life which enables participation in education and training courses or increased readiness for employment.

“Because I am not zonked out of my nut all the time I have been able to attend courses and see them through.”

Lowestoft Enhanced Support (Hostels) client

Many clients are able to give examples of how, through their involvement with **NORCAS**, they had moved from a position of no hope to being able to have realistic aspirations for the future.

This is often made up of many small things that most people take for granted but which together contribute to a life sufficiently organised for people to be able to consider their future in a positive light.

“I can actually enjoy watching the TV now because can follow it. I can read a book and remember it. I enjoy remembering stuff, if I have gone out for a meal or something I can actually remember it.”

Norwich SDP client

This outcome includes important matters such as improved personal hygiene, taking the trouble to iron and wash clothes as well as factors such as “sleeping in a bed”, “keeping normal hours” or “remembering to buy Christmas cards for friends and family”.

Taking greater responsibility was apparent in small but important matters such as opening the mail and paying bills on time.

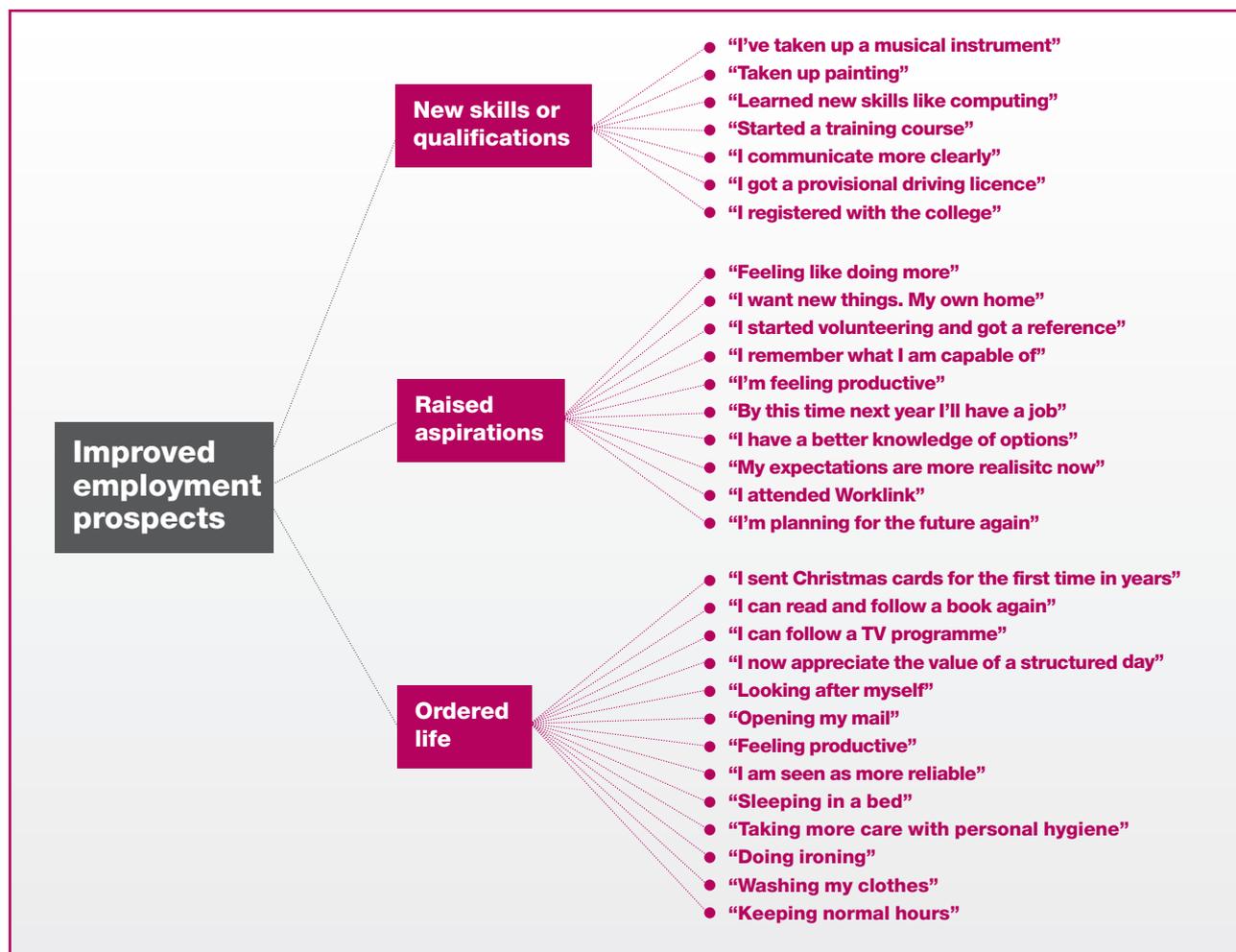
The value to the State of moving one person from unemployment to employment is approximately £8,000 per year in benefit savings and increased tax revenue. This figure includes not only savings from benefits but gains from new tax revenues.

“It’s hard. You are talking to them [street friends] and they are putting things in your head. They look on you as if you are an informant or something but then you see what you used to be like!”

Bury St Edmunds Enhanced Support (Hostels) client

Progress in these areas contributed to raised aspirations and the ability to make realistic plans for the future. Many clients said they had acquired new skills or taken up a new activity such as painting, or playing a musical instrument. A few had started volunteer work, or started a training course.

The **NORCAS** programmes rarely lead directly to reemployment. That is not what they are designed to do. However, taken as a whole, these small changes contribute to building an ordered life of the kind which is necessary before people can consider contributing to society through work or training.



Findings from the outcome survey:

- SDP clients gain a significant improvement in readiness for work with a 13% increase in ‘Rarely miss an important appointment’ and a 10% increase in ‘Keeping clean and presentable’
- The equivalent of one in ten Over 50s clients travel the full distance from complete unreadiness for work to participating in paid or unpaid work. For every 3 clients there is an increase of one additional activity such as participation in community or group activities.
- The equivalent of one in five Enhanced Support clients travel the full distance from complete unreadiness for work to participating in paid or unpaid work.

The social value to an average client of progress towards education, training or work as a result of participation in **NORCAS** programmes in 2011–12 was:

SDP £262

Over 50s £486

Enhances Support (Hostels) £620

Greater financial stability

MODEL OF CHANGE: Savings are made on the cost of alcohol and drugs. A more ordered life means that benefits are less frequently cut, debts are no longer ignored, and financial planning becomes viable

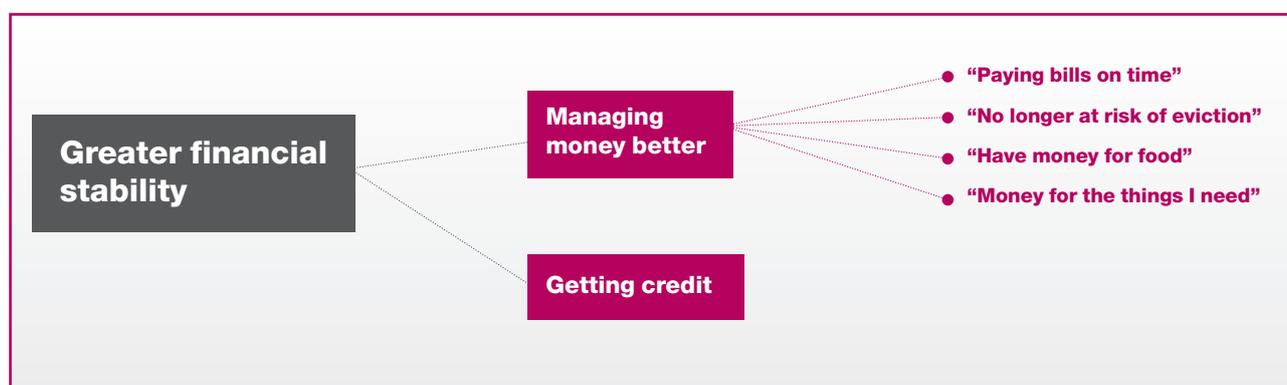
Improved control of finances is a key factor for many. Through years of addiction, clients frequently forget how to manage money well. Managing money is a prerequisite for planning for the future. Several clients speak of renewed aspirations for ‘having nice things’ which entails a commitment to priorities beyond drugs and alcohol.

“**NORCAS** has shown me that there are more positive things to do and spend my money on in order to have something to show for it”

Norwich SDP client

An ability to manage money means that clients are better able to ensure they eat properly and take care of themselves. Clearing debt makes them less vulnerable to people who want to exploit their situation. Paying bills on time contributes to a secure home from which to build a new life.

Excluding mortgages, the average UK household owes £8,076. UK banks write off loans to individuals at a rate of £20m per day whilst interest on personal loans amounts to £178m every day. (Credit Action, 2011)



Findings from the outcome survey:

- The Over 50s clients experience the greatest improvement in feeling secure in their financial position. Although changes can be small, over a period of time they can have a significant effect.

The social value to clients of improved financial stability in 2011–12 was:

SDP £188

Over 50s £486

Enhances Support (Hostels) £411

Reduction in criminal or anti-social behaviour

MODEL OF CHANGE: More time clean or sober, understanding triggers and developing new strategies helps clients to inhibit their behaviour leading to less street drinking, fewer incidence of public disorder and reduces motivation for acquisitive crime

The definition of anti-social behaviour is broad. Examples of anti-social behaviour that might be a consequence of alcohol or substance misuse include rowdy, noisy behaviour in otherwise quiet neighbourhoods, threatening, drunken or 'yobbish' behaviour or vandalism, dealing or buying drugs on the street and drinking in the street. (Home Office)

Criminal behaviours might typically include shoplifting, burglary, drunk driving and assault.

This outcome occurs most frequently for Enhanced Support (Hostels) clients and to a lesser extent SDP and Over 50s clients. Specific examples range from just having fewer rowdy parties to being stopped on the street by the police less frequently or turning up at court on time and thereby avoiding an escalation in offences.

“ I have been arrested at least 4 times for being drunk and disorderly and once the Sergeant said I actually tried to strike the Policeman”

Lowestoft Enhanced Support (Hostels) client

For the client, the benefit of this outcome is associated primarily with increased self respect, a reduction in involvement with the criminal justice system, the avoidance of a return to prison and progress towards an ordered life which can lead to work and security. The greater impact to society is discussed below under 'Local Authorities' and 'Criminal Justice System'.

Preventing a drug offender from recommitting a similar offence in 2007 produced savings of £88,500. (Matrix Knowledge Group, 2007)



Findings from the outcome survey:

- SDP clients reported significant reductions in the frequency of alcohol consumption or substance misuse in a public place reducing these by an average of 12 occasions per year.
- As might be expected, Over 50s clients experienced very little change against this outcome however this outcome was very significant for clients of the Enhanced Support (Hostels) programme who experienced not only reduced frequency of street drinking and substance misuse in a public place but also reduction of an average 17 occasions per year of behaviour that would later cause embarrassment or regret.

The value arising from a reduction in anti-social or criminal behaviour as a result of participation in **NORCAS** programmes in 2011–12 was:

SDP £1,282

Over 50s £513

Enhances Support (Hostels) £2,725

A more secure home

MODEL OF CHANGE: More time clean and sober reduces incidences that can lead to eviction and more stable finances mean fewer missed or late rent payments.

This is an outcome that is most applicable to the Enhanced Support (Hostels) Service but has relevance to SDP and the Over 50s support programme. Some clients have previously lost or come close to losing their home due to financial problems. Others can come close to being evicted from rented accommodation because of anti-social behaviour or failure to pay rent on time.

“Having a stable place to live meant I didn’t breach my license and go back to prison for another year.”

Bury St Edmunds Enhanced Support (Hostels) client

Many of the problems associated with addictive behaviours are compounded by homelessness making it much harder to achieve recovery. For those on parole, having a secure place to live may make the difference between complying with license conditions or being returned to prison.

In terms of full outcome equivalent, for every 10 clients the SDP programme turns one client from losing their home to a fully secure home situation. The threat of losing their tenancy due to alcohol or substance misuse is a common factor for almost all clients of the Enhanced Support (Hostels) so this outcome is fundamental to them.

The government estimates that ex-offenders living in stable accommodation are up to 20% less likely to re-offend.

(eviction-direct.com, 2011)

Acute hospital services have been found to be eight times greater for a homeless person than those of an equivalent housed person. This arises not just from more frequent admission but from longer stays and a greater severity of illness. (Health, 2010)

The value of having a more secure home following participation in **NORCAS** programmes in 2011–12 was:

SDP £168

Over 50s £289

Enhances Support (Hostels) £205

Outcomes for Public Services

Whilst the greatest direct benefit of goes to the clients, there are significant benefits to public services such as health, criminal justice and local authorities.

Health Sector

These services not only contribute to addressing the aims of health services in terms of health related outcomes but also in reducing demand for medical services, missed appointments and unnecessary emergency ambulance call-outs.

The consequences of the misuse of alcohol and drugs for the health service are far reaching. They can range from patients with Type 2 diabetes, high levels of hypertension, or people injured from falling over in the street drunk on a Friday or Saturday night. They also include a steady burden on GP services.

“I don’t think we grasp the full costs that alcohol and drugs place on the services we commission. It is a problem that people are recorded as having ‘fallen’ rather than having ‘fallen because they were drunk”

Allison Chaplin, Great Yarmouth and Waveney PCT

Equally significant is the impact on mental health services. Alcohol and substance misuse can be both a trigger of enduring mental illness and a symptom of it.

The Great Yarmouth and Waveney Primary Care Trust has noted a significant and increasing number of people admitted to hospital as a consequence of long term alcohol or drug misuse who have never previously engaged with any services. It is here that services such as the Over 50s service can play such an important role by seeking to address issues before they reach such a medically advanced stage.

“We find people ending up on the wards who are a little bit older and don’t have a previous history of engaging with services.”

Allison Chaplin, Great Yarmouth and Waveney PCT

The frequent use of emergency ambulance services resulting from the misuse of alcohol and drugs is a clear problem.

“There is a difference between the hazardous and harmful drinkers and the dependent drinkers. We can’t refer absolutely everybody into treatment services but there maybe work that can be done to prevent them actually coming into treatment.”

Allison Chaplin, Great Yarmouth and Waveney PCT

One important outcome from the three **NORCAS** programmes is that prescription drugs are found to be more effective not only because clients are more likely to take them in accordance with instructions but because the absence of intoxication by alcohol or non-prescription drugs, makes it easier to get prescriptions right for the best medical outcome.



The value to the health services from the three **NORCAS** services in 2011–12 was:

SDP £313 per client

Over 50s £4121 per client

Enhanced Support (Hostels) £1927 per client

Criminal Justice

“Everything points to ‘that person needs help’. You can cost it at £1000 for putting someone through custody for an 8hr interaction and then there is the court process and at the end of that process they might get a nominal fine that achieves nothing.”

Acting Assistant Chief Constable Sara Hamblin, Norfolk Constabulary

It is the police services that are often on the frontline of dealing with the consequences of the misuse of alcohol and substances but the tools they have at their disposal are designed to address criminal actions not addictive illness.

“It is all well and good me as a copper going along and picking up their bottle of drink and tipping it in the river but actually all I do is cause them to go out and nick another bottle of beer because actually they are in so much pain that that is all they can do because they have no other way of managing it.”

Acting Assistant Chief Constable Sara Hamblin, Norfolk Constabulary

Although use of illegal drugs brings many people into contact with the Police and Probation Services, it is the misuse of alcohol that presents the most widespread problem creating a considerable workload.

“The point is that it creates a cycle of fear in the community and that starts calls coming into us and very often for one person in a park we might get 10-20 calls so it takes up a lot of our time. Then you have the response we have to divert an officer who might be dealing with something else.

“They might start by taking the person back to a hostel but then it keeps happening and it can cost thousands of pounds. It costs us over £1000 just for a very minor offence to go through court.”

Acting Assistant Chief Constable Sara Hamblin, Norfolk Constabulary

When an offender first attends the probation services, whether as part of a community requirement, or coming out of prison on a custodial license, the probation service conducts an assessment which includes an alcohol and a drug assessment.

“It may be just to look at what part alcohol plays in your life or we might say let’s do an alcohol awareness session. It depends upon where the offender is at that time.”

Nicky Jay, Norfolk and Suffolk Probation Trust

It is the chaotic lifestyles of people who have alcohol and drug issues that impact most significantly on the work of the probation service. Missed appointments or attending in an intoxicated state result in a failure to meet the terms of a Court order and can result in a costly return to custody for those on license.

“Alcohol is one of our prime issues. Evidence shows it is an issue right across the age range from young people binge drinking at the weekends to people who have a long term ingrained issue. Often the issues are multifaceted so it can be hard to determine whether it is a mental health issue or a drug or alcohol issue.”

Nicky Jay, Norfolk and Suffolk Probation Trust

The probation service uses other agencies to address specific issues. For instance if someone is a very heavy drinker they might need a detox so will ask an agency like **NORCAS** to support them to provide this because it is a health rather than a straightforward criminal justice issue.

“One of the benefits which an organisation like **NORCAS** brings is independence. To someone on a statutory order, the probation service represents authority. An organisation like **NORCAS** does not.”

Nicky Jay, Norfolk and Suffolk Probation Trust

The Enhanced Support (Hostels) service in particular plays a significant role in helping support people released from prison on license and preventing a return to prison brought about by alcohol or drug use.

“If they lose their accommodation we would assess the risk as rising because with no accommodation, benefits will probably become an issue. Starting to drink more heavily creates a downward spiral and this creates the risk of further criminality. After a particular process we would consider having them recalled to prison.”

Nicky Jay, Norfolk and Suffolk Probation Trust



The value to the Criminal Justice System in 2011–12:

SDP £188

Over 50s £0

Enhances Support (Hostels) £823

Local authorities

The three programmes impact on the work of local authorities in very diverse ways. For the most part it impacts on the work of district councils which have greatest responsibility for issues such as housing and town centre management. However, County Councils are soon to take additional responsibility for Public Health so the impact for County Councils is likely to become more significant in the future.

Drug and alcohol use impacts on the work of local authorities in respect of drug litter, public disorder, street drinking, alcohol licensing and the management of social housing.

“I think drugs and alcohol actually affect most Departments in the Council.”

**Moira Wellham, Substance Misuse Officer
Ipswich Borough Council**

Alcohol and drug related problems for housing departments arise from issues such as vandalism, clients losing house keys, flats being taken over for drug use, neighbour disputes, non-payment of rent and cleanliness.

“Quite often within Housing and Environmental Services you will find flats that really aren’t looked after or cleaned as they should be because people are trapped in that cycle of addiction so the cost is just tremendous.”

**Moira Wellham, Substance Misuse Officer
Ipswich Borough Council**

Local Authorities such as Ipswich Borough Council are the first to acknowledge that problems arising from the misuse of drugs and alcohol often have their roots in much deeper problems and that simply addressing the symptoms is not enough.

“We go to great lengths to understand who is street drinking and why. One thing that is clear about **NORCAS** is the fact they do it for the client group... it is very easy to be a bit precious about your service but I have found that **NORCAS** have always been very willing to embrace anything that can improve the service that clients can get.”

**Moira Wellham, Substance Misuse Officer
Ipswich Borough Council**

Enhanced Support (Hostels) specifically addresses housing issues whilst each programme contributes to addressing street drinking, drug litter and the other issues that drug and alcohol misuse create for local authorities.



The value to local authorities arising from the three programmes in 2011–12:

SDP £435

Over 50s £84

Enhances Support (Hostels) £486

Research methodology

The study used a mix-method approach drawing on some of the principals of SROI.

Fundamental to the approach was the principal that outcomes should be defined by stakeholders. To this end extensive consultation was conducted with clients of the services and the different communities that experience outcomes from the services.

This included 8 focus groups and 6 semi-structured face to face interviews with clients. We also conducted a focus group with people close to the clients who are affected by their addictive behaviour and a further three focus groups with clients to explore the value of the outcomes to the clients.

Semi-structured face to face interviews were conducted with representatives of the sector stakeholders including the probation service, social housing providers, local authorities, primary care trusts and the police.

An outcomes survey was developed, trialled and introduced in May 2011. It sampled clients near the beginning of their programme at the end and three months afterwards.

The outcomes survey used a 'basket' of indicators to measure change. It is this 'basket' of indicators which, taken together, was used as a measure of each outcome.

It is important to exercise caution in extrapolating these findings to a wider population of **NORCAS** clients. Each programme is very different. Whilst there is often considerable commonality in the outcomes the extent to which they occur varies significantly between each programme. It is also important to remember that the individual history of addictive behaviour is quite different for each client and this is reflected in the mix and level of outcomes they experience.

Overall 66 clients submitted at least one response. The challenge with a longitudinal study is to achieve consistent responses over time. This is a particular challenge when researching a population that has an erratic lifestyle or may wish to move on from a difficult period in their life.

To be included in the study we needed two fully complete responses and ideally a third at a further three month sample point. This had the effect of reducing the effective sample size to 53 with 21 of these completing a series of three responses.

During the sample period there were 36 Enhanced Support (Hostels) clients of which 25% submitted full responses. There were 116 Over 50s clients of which 12% submitted full set of responses and 35 SDP clients on the programmes included of which 80% submitted responses.

The responses were largely self-completion and many questions relied upon a subjective self-evaluation of how clients are feeling and behaving 'nowadays'. This carries the danger that clients having a particularly bad or good day will be unduly influenced. As the responses are pooled and averaged one can hope that the positive days balance the negative.

More information about methodology can be derived from the two full reports.

Valuations

The following approach was used in estimating the social value of the inputs and outcomes.

Value of inputs

Inputs are the money and resources that are devoted to delivering the programmes. They include items such as the cost of providing sessions and the cost to them of attending the sessions such as childcare and travel. We did not include the value of the client's time in attending the sessions.

Value of Outcomes

The assumptions made were:

Deadweight

Given the nature of addiction we have assumed that without any intervention there would have been no change.

Attribution

Some **NORCAS** clients receive support from other agencies or take initiatives themselves. Each client estimated the amount of change attributable to **NORCAS**. We have used their figure in adjusting our impact figures i.e. SDP 77%. Over 50s 76%, Enhanced Support 76%.

Displacement

Sometimes interventions have the effect of moving a problem elsewhere for instance new street lighting to reduce street prostitution in one area might simply mean that the problem moves to another area. We could not identify any outcomes where displacement occurs so there was no adjustment for displacement.

Drop off

For some clients, the gains they make last a lifetime but the nature of addiction is that some find themselves back where they started 12 months later. The survey told us that changes are mostly sustained 3 months after the programme but it is difficult to know what proportion are still present 5 or 10 years later.

Also, the value that can be attributed only to **NORCAS** reduces over time as other influences occur.

In order to account for drop off in value attributable to **NORCAS** we assumed the following:

Year 1	100% of attributable value
Year 2	50% of attributable value
Year 3	25% of attributable value
Year 4 +	0% of attributable value

Negative outcomes

The qualitative research with clients identified a number of negative outcomes such as a potential temporary reduction in confidence when clients can no longer use alcohol to give them a boost.

Because most of these are associated with measures relating to how people feel which were included in the survey and then averaged, we are satisfied that these negative outcomes are accounted for in the estimation of impact.

Proxy values

The best available means of valuing the intangible changes produced for stakeholders is to use a proxy for that change based on how people actually behave. The ideal proxy relates the type of benefit that is created for the stakeholder to a value arrived at on the open market.

Although we don't know the market value to someone of a boost in confidence a proxy may be found for it in the amount that people are prepared to pay for an assertiveness course that has the effect of boosting their confidence. This equates to what people are actually prepared to pay for that outcome.

Proxies for client stakeholders

Indicator	Proxy Description	£ Value year 1	Source
People say you 'look well nowadays'	Ave women's spending on weight loss products	485	Research by Engage Mutual 2010
Prioritise shopping for food	Years added to life by leading a healthy life (diet and exercise) approx 7.5yrs estimate. Assume 25% due to diet. 1.6 quality life years at £30k per year (eat well for a year to gain 1 week worth £576)	1153	7.5 yrs from 'The Spirit Level' Wilkinson & Pickett ONS Ave Life expectancy 81
Go to bed and get up at relatively normal times	Price of an eight week programme with the London Sleep School	799	thesleepschool.org
Eat 'as well as most people'	Difference between spending on food in 2008 for a single pensioner £38.93 compared to single of working age £44.73	438	Joseph Rowntree Foundation min income standard / ONS 'Family Spending' 2010,
Reduced emergency hospital admissions	Estimated cost of disruption to family life, loss of earnings, taxi fares, etc for one emergency admission	60	Estimate
Taking 'good care' of own health	Cost of annual gym membership	442	Research by Sainsbury's quoted by Consumer Association Jan 2011

Proxies for client stakeholders (continued)

Indicator	Proxy Description	£ Value year 1	Source
Feeling positive about the future	12 sessions of life coaching	480	The Life Coaching Company 2012
Open all mail and respond to the issues it brings	30 min / day spent on life admin at min wage £6.08	1016	Estimate x minimum wage for people aged 21+
Keeping clean and presentable	Average annual amount spent on personal hygiene and grooming products	216	Mintel 2010
Making plans for the future	Aver spend per player on national lottery £3 per player per week	156	Camelot
Feel confident when out in public	12 sessions of life coaching	480	The Life Coaching Company 2012
Behaviour in presence of others that would later cause regret or embarrassment	Cost of meal for 2 to make up £60 / incident	60	estimate
Relationship with partner	Ave cost of divorce (for Enhanced Support this valuation is not appropriate so relationship with children valuation used instead) /2	7,300	Daily Telegraph 2010
Relationship with children	Spend by a parent per child at Christmas £168 * 2 children	336	Idealo.co.uk
Relationship with rest of family	Visiting family 3 times per year at average drive there and back 200 miles at 40p per mile as allowed by HMRC	240	Estimate
Relationship with other people around them	Maintenance and repair of house in 2011 £698 say 10% is to protect reputation	69.8	ONS Family Spending
Other behaviour which most people would consider anti-social	Full value to sector stakeholder	0	
Stopped in street by police less often	Premium (above cost of fine) paid by drivers for Speed awareness course to avoid points on license / incident	30	AA

Proxies for client stakeholders (continued)

Indicator	Proxy Description	£ Value year 1	Source
Number occasions police called to home reduced	Premium (above cost of fine) paid by drivers for Speed awareness course to avoid points on license / per incident	30	AA
Number of arrests	Cost of two hours solicitor time at £200 per hr	400	Estimate
Risk to housing situation from alcohol or substance misuse	Cost of moving home from realymoving.com removal company for basic package	600	Per move
Participate in paid or unpaid work	Ave spending on finding a job (graduates £835) reduced by 50%	417	Research by Maestro reported in The Guardian 2005
Participation in 'community or group activities including volunteering	Average spend on games and hobbies per annum	93.6	Family Spending 2009 ONS
Participate in organised training or education	Earnings increase gained by moving from no qualification to at least Level 2 qualification (as a percentage of income)	28	Department for Children, Schools and Families
Rarely miss an 'important appointment'	Cost of 1 day Time Management Course with Reed Training	684	Reed Training
Go to bed and get up at relatively normal times	Price of an eight week programme with the London Sleep School	799	thesleepschool.org
Finances are under control	Interest on ave household debt (excluding mortgages)	740	Zopa, Moderate risk borrowers. April 2012
Paying rent on time	Cost of delivering Face to Face debt advice by CAB in 2008	548	CAB
Open all mail and respond to the issues it brings	30 min / day spent on life admin at min wage £6.08	1106	Department for Work and Pensions Minimum Wage figures

Formula and example

Our formula for valuing the services was as follows. A worked example of the value of ‘People say you look well nowadays’ for SDP clients is included

$$\begin{array}{|c|} \hline \text{Social Value} \\ \hline \text{£110} \\ \hline \end{array} = \left(\begin{array}{|c|} \hline \text{Proxy Value} \\ \hline \text{(Yr1 £485)} \\ \hline \text{(Yr2 £243)} \\ \hline \text{(Yr3 £121)} \\ \hline \end{array} - \begin{array}{|c|} \hline \text{Deadweight \&} \\ \hline \text{Displacement} \\ \hline \text{£0} \\ \hline \end{array} \right) \times \begin{array}{|c|} \hline \text{Attributable} \\ \hline \text{Change} \\ \hline \text{13\%} \\ \hline \end{array}$$

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