MEDIA RELEASE

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New analysis explains increase and inequality in drugs deaths

Today sees the release of new analysis which shows that the risk of drug-related deaths increased in Scotland from 1990s for those born between 1960 and 1980, especially within deprived areas. The increase is likely to be the result of exposure to the social, economic and political contexts of the 1980s.

The research has been released to coincide with the meeting of senior leaders in health being convened today by the Scottish Government to discuss the future of drugs policy.

The analysis, conducted by NHS Health Scotland and the University of Glasgow, found a cohort effect within 'Generation X' (those born between 1960 and 1980). The increased risk of drug-related deaths for this cohort from 1990 onwards is consistent with the hypothesis that economic and other policy decisions during the 1980s created rising income inequality, the erosion of hope amongst those who were least resilient and able to adjust, and resulted in a delayed negative health impact. Young adults in Generation X would have been exposed to high unemployment levels and diminishing support. People living in more deprived areas experienced these setbacks earlier and more profoundly.

Dr Andrew Fraser, Director of Public Health Science at NHS Health Scotland, said:

"Drug-related deaths rates have continued to increase in Scotland. This work suggests this is likely to be the result of a cohort of people who are at higher risk of drug-related deaths. The full impact of excess mortality in these cohorts with high drug-related deaths is unlikely to be known for some time. It already represents the deaths of hundreds of people prematurely. As the cohort of people at greatest risk of drug-related deaths continues to age, drugs services will need to adapt to their needs as co-morbidities from chronic conditions

associated with ageing and drug use become more prevalent. We are pleased that the findings of this research are being highlighted today at the Scottish Government's event on *Drugs through a Health Lens.* We are hopeful that the findings will be useful in informing current and future policy to help prevent the creation of further cohorts at greater risk of drug-related deaths in Scotland."

Dr Jon Minton, report author and Quantitative Research Associate at the University of Glasgow, said:

"The same kind of pattern we have observed and reported on previously regarding the risk of suicide in vulnerable cohorts in deprived areas in Scotland is repeated, and even more clearly visible, when looking at trends in drug-related death risk. For people born in 1960s and 70s, the risk of drug-related deaths throughout the life course was much increased, and gender and area inequalities in these risks increased even more. For these cohorts, and in every year, men tended to be two to three times as likely to die due to drugs than women, and people in the most deprived areas were two to three times as likely to die due to drugs each year as people in less deprived areas. These additional risk factors - of being male, and of living in a poor neighbourhood - weren't just additive, but multiplicative, meaning men living in the poorest neighbourhoods had up to a ten-fold greater risk of a drug related death each year than women of the same age living in more affluent neighbourhoods. The similarity in trends in both suicide and drug-related deaths suggests a common underlying cause."

The findings within this analysis entitled 'Drug-related deaths in Scotland 1979-2013: evidence of a vulnerable cohort of young men living in deprived areas' are consistent with the major report on excess mortality published last year. *'History, politics and vulnerability: explaining excess mortality in Scotland and Glasgow'*, a collaboration with the Glasgow Centre of Population Health, NHS Health Scotland, the University of the West of Scotland and University College London. The study explored why mortality rates are higher in Scotland relative to England and Wales, even after accounting for deprivation. This 'excess' mortality, defined as higher mortality in Scotland compared with elsewhere in Britain over and above that explained by socioeconomic deprivation, was found to be partly due to higher mortality from alcohol- and drug-related deaths, violence and suicide (particularly in young adults).

-ENDS-

Contact
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Notes to Editors:

1. 'Drug-related deaths in Scotland 1979-2013: evidence of a vulnerable cohort of young men living in deprived areas' can be accessed https://osf.io/ecbpn/

2. The Glasgow Centre of Population Health, NHS Health Scotland, the University of the West of Scotland and University College London published History, politics and vulnerability: explaining excess mortality in Scotland and Glasgow on 15th May 2016.

   This identified the most likely underlying causes of Scotland's and Glasgow's levels of 'excess' mortality. It reaffirmed that the principal explanation for poor health in Glasgow and Scotland (as in other societies) relates to the well understood effects of poverty and deprivation (and related factors such as deindustrialisation). And the evidence shows that the additional, excess, levels of mortality observed among the Scottish population are best explained by a greater vulnerability to those factors, caused by a series of historical decisions and processes. It showed that economic policies matter for population health.

3. Scottish Government national drug strategy: The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem http://www.gov.scot/Publications/2008/05/22161610/0

4. Know the score website for the facts on drug use http://knowthescore.info/

5. ScotPHO http://www.scotpho.org.uk/behaviour/drugs/introduction