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| LONDON BOROUGH OF CAMDEN | WARDS All |
| REPORT TITLE Reducing Drug Related Harm | |
| REPORT OF Director of Health and Wellbeing | |
| FOR SUBMISSION TO Health and Wellbeing Board | DATE 17 th December 2025 |
| SUMMARY OF REPORT <p>This report provides an update on the Health and Wellbeing Board Priority of Reducing Drug Related Harm. It covers the following areas:</p> <ul style="list-style-type: none"> • Data and gaps in intelligence and knowledge • Camden's incident, prevention and strategic response • Challenges and opportunities <p>The report also asks the Board to further identify challenges and opportunities in meeting this priority and asks the Board to consider actions it can take as individuals, teams or organisations.</p> <p>Local Government Act 1972 – Access to Information No documents that require listing have been used in the preparation of this report.</p> <p>Contact Officer: Lisa Luhman Strategic Commissioning Manager London Borough of Camden 5 Pancras Square, London N1C 4AG lisa.luhman@camden.gov.uk Tel. 020 7974 2705</p> | |
| RECOMMENDATIONS <p>The Health and Wellbeing Board is asked to note the report.</p> | |

Signed:



Kirsten Watters
Director of Health and Wellbeing

Date: 5th December 2025

1. Purpose of Report

- 1.1 This report provides an update on the Health and Wellbeing Board Priority – Reducing Drug Related Harm. The report also asks the Board to identify challenges and opportunities in meeting this priority and asks the Board to consider actions it can take as individuals, teams or organisations.

2. Background

- 2.1 Nationally, drug related deaths are at an all-time high, and associated harms have, and continue, to increase in the UK since 2012, with mis-sold drugs, as well as high and variable strength substances, as key contributing factors. In December 2021, the UK government published a 10-year Drug Strategy¹ calling for 'innovation' to help reduce increasing drug harms.
- 2.2 In March 2025, Camden experienced a cluster (34 across 6 days) of non-fatal opiate related overdoses and intelligence is received on a regular basis regarding adulterated (or super strength) drug supply including opioids, MDMA (ecstasy), Ketamine and Benzodiazepines across the region and nationally. Whilst the provision of naloxone can help mitigate against opiate related drug related deaths and harm, consideration should be given to other methods of harm reduction to minimise the harm of illicit drug use and help residents make informed decisions about their drug use (see sections 5 and 6).
- 2.3 Long-term drug use significantly increases the risk of developing a range of serious and chronic health conditions, including blood borne viruses (such as hepatitis and HIV), lung disease, cardiovascular disease, malnutrition, cancer and stroke. Drug use can also contribute to the development or worsening of mental health conditions such as depression, anxiety, psychosis and suicidal thoughts. Stigma towards drug users can act as a barrier to accessing health care services, and this can exacerbate existing conditions.
- 2.4 In 2024, a local Drug and Alcohol Needs Assessment ²was completed by the Health and Wellbeing Department. This work highlighted a number of areas for development in Camden on; unmet need, prevention, data gaps, health and work and co-production (see appendix A for further details). This work has, and will continue to, inform the delivery of this Board priority.

3. Latest Data and Trends

- 3.1 Drug related deaths in Camden
Recent Office of National Statistics (ONS) data suggests drug related deaths have increased in Camden. Rates of deaths due to drug misuse have risen from 6.7 per 100,000 (2021-23) to 9.1 per 100,000 (2022-24). This equates to

¹ <https://www.gov.uk/government/publications/from-harm-to-hope-a-10-year-drugs-plan-to-cut-crime-and-save-lives>

² <https://www.camden.gov.uk/documents/d/guest/drugs-and-alcohol-needs-assessment-final>

an increase from 41 deaths to 53. London's rate also increased in the same period from 3.8 to 4.5 per 100,000.³

- 3.2 A number of factors could contribute to the increase in Camden's drug related death rate including increasing presence of nitazenes and other synthetic opioids in drug supply chains, and a long-standing and significant local drug market.

3.3 Cause of Drug Related Deaths⁴

Due to data restraints, it is not possible to report on the drug implicated in the above deaths. However, nationally, drug-poisoning deaths registered in 2024 were confirmed to involve the following substances: (please note due to the presence of nitazenes in drug supply chains, deaths from them have been recorded since 2020, and have been reported separately from other opioid related deaths)

- Opioids (47.1%, 2621 deaths)
- Nitazene (3.5%, 195), which is almost four times higher compared with 2023.
- cocaine (22.9%, 1,279 deaths) which was 14.4% higher than the previous year (1,118 deaths) and eleven times higher than in 2011 (112 deaths).

3.4 Adulterated and High Strength Supply

An increasing number of nitazene compounds, and other adulterants such as medetomidine, and xylazines (can cause non-healing skin lesions) are being detected in supply chains. This is not limited to opiates, there have been increasing reports of other drug adulterated drug types including benzodiazepines, ketamine and MDMA. Not only is there increased availability of adulterated drug supply, but high strength drug supply is also increasing. More recently this has included MDMA, where an average dose (one tablet) is twice as strong as previous doses.

3.5 Changes in ways drugs are procured

Young people and young adults are increasingly relying on the dark web, messaging apps (such as Telegram and Snapchat), adverts on music download apps (such as Soundcloud) and QR codes on stickers and posters to purchase drugs. These methods allow substances to be delivered to your door.

3.6 Stable price points

Compared to other consumables the cost of illicit drugs has remained fairly stable in recent years, so for some, purchasing illicit drugs is still affordable.

4. Gaps in Intelligence and Knowledge

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<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2024registrations>

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<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsrelatedtodrugpoisoninginenglandandwales/2024registrations>

- 4.1 Officers have access to a wide range of sources of intelligence and data including monthly intelligence reports on drug seizures and drug incidents from other parts of London and England. However, there are still some identified gaps in knowledge:
- 4.2 Non-fatal overdoses
Whilst officers receive data on drug related deaths, notifications are rarely received about non –fatal overdoses. Increasing our understanding of non-fatal overdoses can support in establishing a “baseline” for overdoses but could also be used to target harm reduction interventions.
- 4.3 Information from coroners
Nationally, regionally and locally there is work to undertake to improve information sharing from coroners to local authorities/drug and alcohol services to better understand drug related deaths, and what can be learnt from them.
- 4.4 Circumstances of deaths of residents not known to services
Whilst there are processes in place to review and learn from deaths of residents known to drug and alcohol services, there are limited opportunities to review and better understand the circumstances of deaths of residents that are not known to services.

5. Approach to responding to a drug death or overdose in Camden

- 5.1 Two plans, highlighted below, have been developed and will be implemented in the event of a drug related death.
- Emergency Response Protocol
Officers have developed an emergency response protocol with treatment providers which sets out how services will respond into any drug-related emergency situation including weekend provision.
 - Synthetic Opioid Response Plan
The Office for Health Improvement and Disparities (OHID) have asked all Local Authorities to produce a Synthetic Opioid Response Plan. Camden’s plan sets out roles and responsibilities of the Council, treatment providers and delivery partners in the event of a synthetic opioid incident and will be used in conjunction with the Emergency Response Protocol described above.
- 5.2 Officers are involved in regional discussions including London wide Incident Management Planning. The aim is for all boroughs to manage drug harm incidents consistently. Camden have been a key partner in developing these plans and have been asked to share the learning from the cluster of non-fatal overdose incidents with several regional forums. The regional planning around incident management has been informed by the development of the local synthetic opioid plans mentioned above.

6. Camden's Prevention Response

A number of activities are underway with the aim to prevent drug-related deaths and harm.

6.1 Work with children, young people and families

FWD, Camden's young people's drug and alcohol service, work with young people in schools and other community settings to share information on drug and alcohol use and can also offer harm reduction advice. The service also delivers parent and carer workshops which aim to support parents in having conversations about drug and alcohol use. FWD and Change Grow Live (CGL) (provider of Camden's Integrated Drug and Alcohol Service⁵) are both working alongside Family Hubs to not only support families who may already be affected by drug and alcohol use, but also to provide information, advice and guidance on issues related to drug and alcohol.

6.2 Increasing Numbers of People Accessing Drug and Alcohol Treatment

The recent Needs Assessment includes recommendations on how we can make drug and alcohol support more accessible and attractive to residents who would benefit from structured treatment. Being in contact with treatment services is a recognised protective factor in reducing drug related deaths and harm. Delivery of this recommendation is being overseen by the Drug and Alcohol Partnership Group (DAPG).

6.3 Widening provision of Naloxone

Naloxone is medication that can instantly reverse an opiate overdose. It is a vital intervention in reducing opiate related deaths. A change in legislation in December 2024, now permits a wider range of frontline services to provide naloxone for future use (as opposed to just using it in an emergency). Officers have been working with other commissioners, across and beyond the Council, to include naloxone training and distribution in service specifications including street outreach services and the adult hostel pathway. Recently several ward councillors were also trained to use naloxone and given a take-home kit.

6.4 Needle exchange

A service where people can collect fresh injecting equipment and dispose of used equipment is a key initiative in reducing the risk of contracting blood borne viruses. This service is currently available in 19 pharmacies across the borough. CGL Camden⁶ also have an on-site needle exchange, and InRoads⁷ (Camden's outreach-based drug and alcohol service) can provide a mobile needle exchange service. Very recently a pilot began with Focus (Mental Health Homeless Outreach service) to also offer needle exchange.

6.5 The Loop – Drug Checking Service

⁵ <https://www.changegrowlive.org/service/camden-drug-alcohol/info>

⁶ <https://www.changegrowlive.org/service/camden-drug-alcohol/info>

⁷ <https://www.viaorg.uk/services/camden-inroads/>

Officers have very recently commissioned The Loop to provide a drug checking service in Camden to assess the potency and components of substances. Sessions will start once the Home Office licence has been approved (likely in February/March 2026). These will be held monthly and will be aimed at residents with a drug dependency. The Loop will share intelligence with officers from samples tested to support targeted harm reduction interventions.

6.6 The Loop – Night Time Economy (NTE) Training Programme

The Loop will also be offering training to Camden's Night Time Economy (NTE) workforce. The programme will include how to respond to drug use in the NTE environment. We are hoping to start delivery of this training in the coming months.

6.7 Good Night Out Campaign

Officers have funded an organisation – Good Night Out Campaign - to design and produce a library of harm reduction materials aimed at reaching a broader range of residents (not just those known to treatment services). Materials can be translated into other languages and can be used to either support awareness campaigns/days or in the event of confirmed drug incidents. People with lived and living experience will review the design and content of the materials.

6.8 Camden's Reducing Drug Related Death and Harms Event

In October this year, officers held a well-attended event for partners to come together to learn about emerging issues for people using drugs which are likely to cause harm and for some people, death. At the event, partners were able to access naloxone training and to contribute their own thoughts about the challenges and opportunities for the borough to consider. These will feature in the workplan of the new Drug and Alcohol Partnership Group which is to hold its first meeting in November 2025 (see section 7.1).

7. **Camden's Strategic Response**

7.1 Establishment of Drug and Alcohol Partnership Group

On the 20th November, Health and Wellbeing officers held the first meeting of the Drug and Alcohol Partnership Group (DAPG). The purpose of the DAPG is to bring together relevant partners across the Drug and Alcohol care and support system to provide a multi-agency setting for understanding and addressing shared challenges related to the use of drugs and alcohol in Camden. It will oversee the delivery of the recommendations outlined in the national drug strategy as well as addressing the appropriate challenges outlined in **section 8**, namely

- Reduce the number of people misusing drugs and/or alcohol
- Support people who continue to use drugs and/or alcohol to make safer and more informed choices
- Increase the proportion of people recovering from drug and/or alcohol misuse

- Reduce the impact of health harm from drugs and alcohol on all residents
- Reduce stigma associated with using drugs and/or alcohol and accessing treatment
- Address specific emerging issues – to ensure that we can respond quickly and effectively to new and emerging issues

7.2 Post Overdose Incident Action Plan

After the cluster of non-fatal overdose incidents Camden experienced in March 2025, Officers have developed an action plan which captures the learning and recommendations from the post incident review.

8. **Summary of Challenges and Opportunities**

- 8.1 Delivering robust responses to reducing drug related deaths and harm comes with a series of challenges but also opportunities. The following summary of challenges and opportunities highlights issues raised throughout this report and has been further informed by feedback from stakeholders at the recent Reducing Drug Related Death event. The newly established Drug and Alcohol Partnership Group will be reviewing appropriate challenges and opportunities and can report back to the Board on progress.

Challenges

- Gaps in data and intelligence, and the need to strengthen relationships with the coroner.
- Need for better understanding of frequency of non-fatal overdoses.
- Reaching a wider range of residents with harm reduction messages (not just those known to drug and alcohol services).
- Adulterated supply is quickly becoming the “norm”, and consideration needs to be given to how harm reduction advice should be adapted dependent on adulterants and their effects.
- Need to consider how, if and when drug alerts are issued when there is intelligence about adulterated/high strength supply e.g. limit the risk of diluting harm reduction messaging, also avoiding the creation of the “honey pot” effect (people seeking out adulterated/high strength supply based on information from drug alerts).
- The approach to benzodiazepine prescribing (for people using illicit benzodiazepines). Drug and alcohol services are permitted to prescribe benzodiazepines on a detox/reduction plan only.
- Need to review of current clinical guidelines to ensure that people using fentanyl, nitazenes and other higher strength opioids are given a suitable starting dose of Opiate Substitute Therapy medication.
- Supporting older adults / ageing adults by making sure they are able to access residential and/or nursing care despite having drug and alcohol needs; that services are attractive to these individuals; developing the skills and confidence of people working in older people services to better support older adults who use drugs.
- Supporting people more effectively who have co-occurring mental health and drug and alcohol needs.
- Managing the safety of people living in or visiting encampments.

- Supporting those who are using substances in their sex lives (known as ‘chemsex’) and making sure their needs are featured in this work.

Opportunities

- Widening the provision of naloxone.
- Increasing number of stakeholders signed up to receive drug alerts.
- Increasing local knowledge from intelligence collated via The Loop drug checking service.
- Delivery of action plan from overdose incident review.
- Delivery of recommendations from Adult Drug and Alcohol Needs Assessment.
- Using social media and other channels to share drug harm messages with a broader range of residents.
- Consider provision of overdose prevention centres (OPC). OPCs are hygienic, safe spaces where people are able to take drugs safely under the supervision of trained staff. (noting the need for this to be considered at a London or London sub-regional level)
- A current Safeguarding Adult Review has identified recommendation for North London Foundation NHS Trust to review and update its policy on co-occurring mental health and drug and alcohol needs. The recommendation is clear that the policy should redrafted to ensure a borough position is developed.
- Camden is contributing to Pan-London work on a Chemsex harm reduction mode

9. Considerations for the Health and Wellbeing Board

9.1 Officers would like members of the Board to consider the following:

- Identify any further challenges or opportunities related to supporting the “reducing drug related harm” priority.
- If you haven’t already, consider being trained to administer naloxone.
- Sign up to receive drug alerts, an email can be set to Camden LDIS Camden.LDIS@cgl.org.uk to be added to the circulation list.
- Report all non-fatal overdoses via the LDIS system. This can be achieved by submitting information via an LDIS Alert form and submitting it to the Camden.LDIS@cgl.org.uk inbox. Forms can also be requested from the same inbox.
- Sign up to the Anti-Stigma Network (<https://www.antistigmanetwork.org.uk>) whose aim is to improve understanding of the stigma and discrimination experienced by all people affected by drug and alcohol use.

10. Comments of the Director of Finance

The Director of Finance has been consulted on the contents of the report and has no comments to add.

11. Legal Comments of the Borough Solicitor

Under the National Health Service Act 2006 section 2B the Council is required to act as they consider appropriate to improve the health of people in their area which may include, among other things, services or facilities to promote health living or helping individuals address behaviour that is detrimental to health.

12. Environmental Implications

There are no environmental implications to the contents of this report.

13. Appendices

Appendix A – Recommendations from Camden Drug and Alcohol Needs Assessment (2024)

REPORT ENDS