

# **Southampton Strategic Assessment (JSNA)**

**Drugs page content**

*Last updated February 2025*

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## 1. Drugs Overview



If you are worried about your, or someone else's use of drugs, help is at hand. [Drug and alcohol advice](#) details the advice, help and support available.

Drug use can cause significant physical and psychological harm to the individual as well as friends, families, and communities of those affected.

Drug use is a significant cause of premature mortality in England. Analysis in the [Global Burden of Disease](#) study (2019) shows that drug use disorders are now the third highest ranked cause of death in the 15 to 49 age group in England.

In Southampton between 2021 and 2023 there were 59 drug-related deaths, equivalent to 1,598 years of life lost, a greater loss of life years than that caused by lung cancer (329 deaths and 1,318 years of life lost).

People will begin using drugs before they can fully understand or judge the immediate and long-term risks. Drugs can seem like they make you feel better, particularly when feeling stressed, tired, shy or lonely. However, they can make you feel worse through cravings, low mood and/or anxiety.

For many people with drug dependence, they don't choose to use, it is a symptom of other problems such as mental ill health, abuse, grief, loss, and other trauma. This can also make it difficult to limit, reduce or stop using without help and sometimes even with help. Many people who have drug related issues are ashamed of their use or the associated problems. It can take courage to seek help and compassion and self-compassion are effective in improving engagement in services and outcomes. Judgement from others can put people off seeking support.

More information can be found in the drugs dashboard below and in the resources section.

[Drugs dashboard](#)

## 2. Southampton's risk factors

In 2023/24, England figures suggest 1 in 11 adults (8.8%) aged 16 to 59 have taken a drug in the past year. Particular characteristics of Southampton suggest that this could have the potential to be higher in the city. More information is available from the [Office for National Statistics](#).

- Southampton is a port city:
  - o Drug use has shown to be higher in urban areas
- Southampton has slightly more men than women living in the city:

- 10.7% of men used a drug in the last 12 months compared to 7.0% of women in England
- Southampton is a young city:
  - In England, 1 in 6 (16.5%) 16 to 24 year olds have taken a drug within the last year. This age group are also more likely to be frequent drug users (defined as taking any drug more than once a month) at 2.5%, 1.3 times higher when compared to people ages 16 to 59 years. However, the rate for 16 to 24 year olds has decreased 47.8% from the previous year. Frequent drug use is not a proxy measure for drug dependence
- Southampton has a higher proportion of private renters than observed across England:
  - Private renters are more likely to have used drugs in the last year
- Over 45% of Southampton's population live in neighbourhoods within the 30% most deprived areas in England:
  - Those in the lowest total household income bands were more likely to have taken any drug. Although, cocaine usage was higher in higher income households.

More information can be found in the drugs dashboard below and in the resources section.

[Drugs dashboard](#)

### 3. Hospital admissions related to drug use

In England, admission differ by age band and deprivation. Hospital admission rates for drug-related mental and behavioural disorders, are highest amongst 25 to 34 year olds. For admission for drug poisoning, the highest is amongst 35 to 44 year olds. Despite this, the 55 to 64 years old category has seen the largest percentage increase in both drug admission types since 2012/13. Admissions for drug poisoning were almost 5 times more likely in the most deprived areas compared to the least and for drug-related mental and behavioural disorder admissions, this was 8 times more likely in the most deprived ([NHS Digital- hospital admissions](#)).

For Southampton, hospital admissions due to substance use is only available for young people aged 15 to 24. Up until 2013/14 to 2015/16, Southampton has been statistically similar to England and had been steadily rising at a similar rate. Southampton reached its peak rate per 100,000 of 113.0 in 2015/16 to 2017/18 and was significantly higher than England (87.2 per 100,000). Southampton has since been decreasing in line with England's trend however remaining significantly higher than England. In 2020/21 to 2022/23, Southampton's rate was 83.9 per 100,000, the lowest it's been since 2011/12 to 2013/14.

At sub-city level, Freemantle ward has the highest admissions with a rate of 247.6 per 100,000 in 2020/21 to 2022/23, significantly higher than the Southampton average of 67.4 per 100,000. By England deprivation the 20% most deprived areas of Southampton have the highest rate of admissions (94.1 per 100,000).

For drug poisoning admissions, Southampton in 2022/23 is the second highest amongst ONS comparators with a rate of 31.0 per 100,000, also higher than England (17.0). At a sub-city level, Freemantle has the highest admissions with a rate of 70.9 per 100,000, significantly higher than the Southampton average of 33.4 per 100,000 during the period of 2020/21 to 2022/23.

Counts relating to admissions for drug-related mental and behavioural disorders at local authority are no longer published. Local analysis at sub city level using previous data in 2019/20 to 2021/22 shows Bevois has the highest rate of admission episodes with a primary or secondary diagnosis of drug related mental and behavioural disorders (587.3 per 100,000), significantly higher than the Southampton average (272.6 per 100,000). By England deprivation, there is a correlation between the admission rate and deprivation quintiles. The 20% most deprived areas of the city had a rate of 442.6 per 100,000, 5 times higher than the 20% least deprived areas of the city (86.2 per 100,000).

More information can be found in the drugs dashboard below and in the resources section.

[Drugs dashboard](#)

#### 4. Mortality and years of life lost

'Drug use deaths' are a subset of 'drug poisoning deaths' but for some deaths by drug types, only the deaths from drugs that are classed as a 'controlled drug' are included.

In Southampton during 2021-23, 8.6 per 100,000 people died from drug poisoning, with men just over 1.5 times as likely to die than women. Since 2018-20, the female rate has more than doubled from 3.2 to 6.6 per 100,000. Slightly fewer deaths occurred from drug use with a rate of 4.2 people and has decreased -36.4% since 2015-17 (from 6.6 per 100,000) ([Deaths related to drug poisoning](#)).

In Southampton, drug related deaths accounted for 5.1% of all years of life lost (1,598 years) in 2021-23 (pooled). There were 59 drug-related deaths in the same period, 0.5% of total deaths in Southampton.

More information can be found in the drugs dashboard below and in the resources section.

[Drugs dashboard](#)

## 5. Care, treatment and policy

Of all individuals in contact with services in Southampton, 99% were seen within three weeks. It is estimated that almost half (48.5%) of opiate and/or crack cocaine users aged 18 and over were not in contact with drug treatment services in 2023/24, showing a high level of unmet need. The number of adults in treatment at specialist drug use services in Southampton equated to 5 in every 1,000 adults, higher when compared to the England average of 4 in 1,000 (2020/21). In 2023, of those non-opioid users accessing treatment, 28.9% successfully completed the program and did not re-present within 6 months, a slight increase from 24.9% in 2022 and now statistically similar to England (29.5%). For opioid users, 6.7% successfully completed the program, significantly higher than England (5.1%).

Across England in 2023/24, more than two-thirds of people in treatment were men (68% men to 32% women). This proportion varies greatly by substance group. The age of those entering treatment has been increasing, with the median age of those in treatment for problems with non-opiates currently at 32 years old, increasing to 44 for those in treatment for problems involving opiates.

Data for Southampton from the [National Drug Treatment Monitoring System](#) (NDTMS), noted that the most common referral source in 2023/24, were self-referrals (58%), which could have been following advice from a healthcare professional or were referred by family and friends. Second were referrals from the criminal justice system (19%), the main sources were from arrest referral, prison or probation. The third were from health and social care services (17%), including referrals from hospitals, GPs and social services. For both drugs and alcohol, self-referral is the most common referral method, but likely due to the legality of alcohol, the last two methods (health and social care service referrals and criminal justice referrals) are in reversed positions for referrals for alcohol only. For England, self-referrals were also the most common referral source (57%), followed by health and social care services (20%) and then criminal justice system referrals (15%).

There were 25 recorded deaths in treatment in 2023 to 2024 in Southampton, which was 1.4% of all people in treatment and 2.9% of treatment exits. Compared to 2022 to 2023, there was no change in the number of deaths and is a decrease in the proportion of people in treatment dying (from 1.5%) and in the proportion of treatment exits (from 3.6%). People with opiate problems accounted for 40% of the deaths. For England, there were 4,022 recorded deaths in treatment, 1.3% of all people in treatment and 2.9% of treatment exits, similar to Southampton. Opiate problems accounted for 63% of deaths, higher than Southampton.

More information can be found in the drugs dashboard below and in the resources section.

[Drugs dashboard](#)

## 6. Drug related crime

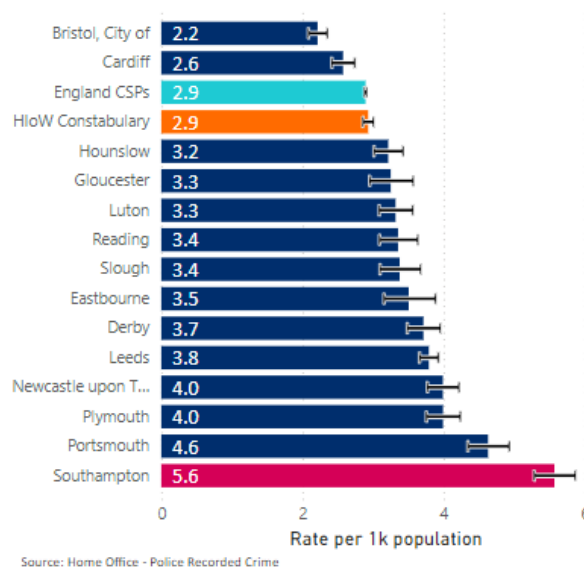
The connection between illicit drug use and crime is reflected in several different types of crime, these include: the illicit possession, use, or sale of controlled substances; crimes committed to get money to buy drugs; crimes committed whilst under the influence of drugs; and organised criminal activities to support the drug trade.

Southampton had a drug offence rate of 5.6 offences per 1k population in 2023/24, significantly higher than the England average of 2.9 offences per 1k population. The number of drug offences in Southampton increased by +17.5% over the last year, with Hampshire and Isle of Wight Constabulary (+8.0%) and England (+1.6%) also experiencing increases, albeit to a lower extent. 1,241 drug affected crimes were recorded in Southampton during 2023/24, slightly higher (+2.2%) than the previous year (1,214 drug affected crimes).

The number of drug offences recorded by the police is heavily dependent on police activities and priorities. Over the last year there has been a notable increase in stop checks in Southampton, with 2,216 stop checks conducted in 2022/23 compared with 2,834 in 2023/24, an increase of +27.9%. The above increase in stop check activity in Southampton aligns with the increase seen in drug offences (+17.5%).

In 2023/24, the drug offence rate was 4 times higher in the most deprived neighbourhoods in the city compared to the least deprived; having been 3 times higher in 2022/23 and 4.9 times higher in 2021/22. Similar to the previous year, the highest rate of drug offences was again recorded across neighbourhoods in the second deprivation quintile (6.6 per 1k population) in 2023/24. Although, this is not significantly higher than the rate in the 20% most deprived neighbourhoods in Southampton.

Police Recorded Drug offences (rate per 1k population)  
Southampton and iQuanta Comparator Community Safety  
Partnerships: 2023/24



For more information on crime in Southampton, see the [Safe City Strategic Assessment](#) page.

## 7. Resources

### 7.1 Alcohol dashboard

This dashboard shows key alcohol related data for Southampton, England and other comparator cities. Data in this dashboard has been compiled from a range of publicly available sources including the Office for Health Improvement and Disparities (OHID).

[Alcohol dashboard](#)

### 7.2 Tobacco, Alcohol and Drugs Strategy (TAD)

This data set is the key performance indicators for the Southampton City Council Tobacco, Alcohol and Drugs Strategy 2023-2028. The strategy is available from the Key strategies, plans and policies link below. The related TAD dashboard is also available below.

[Tobacco, Alcohol and Drugs Strategy \(TAD\) dashboard](#)

### 7.3 Drugs dashboard

This dashboard shows key drug related data for Southampton, England and other comparator cities. Data in this dashboard has been compiled from a range of publicly available sources including the Office for Health Improvement and Disparities (OHID).

[Drugs dashboard](#)

### 7.4 Community safety dashboard

Dashboard combining a variety of community safety and crime related data to provide intelligence on community safety in Southampton from publicly available data sources.

[Community safety dashboard](#)

### 7.5 Tobacco, Alcohol and Drugs (TAD)

- [Tobacco, Alcohol and Drugs Dashboard \(TAD\)](#)
- [Tobacco, Alcohol and Drugs Strategy](#)



## 7.6 Southampton Reducing Drug Harm Partnership - Drugs Needs Assessment

Compilation of existing intelligence to inform local delivery plan of the Reducing Drug Harm Partnership for Southampton.

[Southampton Reducing Drug Harm Partnership - Drugs Needs Assessment](#)

## 7.7 Other data sources

OHID - [Adult substance misuse treatment statistics \(2023/24\)](#)

ONS - [Drug misuse in England and Wales: year ending March 2024](#)

ONS - [Deaths related to drug poisoning in England and Wales: 2023 registrations](#)

NHS England - [Statistics on Public Health, England 2023](#)

NDTMS – [National Drug Treatment Monitoring System statistics](#)

## 7.8 Drug and alcohol advice

If you are worried about your, or someone else's use of drugs, help is at hand. Please follow this link for details of the advice, help and support available

[Drug and alcohol advice](#)