



Extract from the report to the
Public Accounts Committee on
the management of the measures
to reduce drug abuse

January
2012

revision
revision
revision

I. Introduction and conclusion

1. This report is about the measures of the Ministry of Health and Prevention (the Ministry of Health) and the Ministry of Social Affairs and Integration (the Ministry of Social Affairs) to reduce drug abuse. Rigsrevisionen initiated the examination in November 2010.

2. The Ministry of Health and the Ministry of Social Affairs are performing different tasks in the field of drug abuse treatment; the Ministry of Health has the overall responsibility for the medical drug abuse treatment and the Ministry of Social Affairs has the overall responsibility for the psychosocial drug abuse treatment. The latter is also responsible for the administrative case work performed by the local authorities, including whether the local authorities provide access to treatment within the guaranteed time limit, and offer to work out action plans for the clients. The local authorities are responsible for organising and implementing the treatment.

3. Drug abuse has wide-reaching personal consequences for both the problem drug users and their relatives, and imposes direct costs to society (e.g. costs of treatment and social costs) and indirect costs (e.g. lost capacity for work and interrupted education). To this should be added that in recent years, the media and professional journals have on several occasions reported on inadequate treatment of drug mis-users. Rigsrevisionen therefore considered it important to examine whether the Ministry of Health and the Ministry of Social Affairs support the drug abuse treatment provided by the local authorities. Rigsrevisionen examination looks into the objectives and supporting initiatives of both ministries, and the supervision performed by the Ministry of Social Affairs.

4. The purpose of the examination is to assess whether the Ministry of Health and the Ministry of Social Affairs have supported the local authorities' drug abuse treatment efforts. The report answers the following questions:

- Have the Ministry of Health and the Ministry of Social Affairs set targets for the outcome of the drug abuse treatment and introduced supporting initiatives?
- Has the Ministry of Social Affairs' supervision of the local authorities' compliance with the legislation governing drug abuse treatment been satisfactory?

Medical treatment may include examination for and medical treatment of drug abuse with, e.g. methadone or medically prescribed heroin.

Psychosocial treatment may include cognitive therapy, conversation therapy and practical exercises. The intensity of treatment programmes varies from inpatient and day treatment to outpatient treatment.

MAIN CONCLUSION

The estimated number of problem drug users in Denmark has increased by one third in the past ten years, and public expenditure for drug abuse treatment has gone up with the increasing number of individuals seeking treatment. In 2010, approximately 14,600 persons received drug abuse treatment, and the public expenditure for treatment totalled just under DKK 900 million.

Overall the Ministry of Health and the Ministry of Social Affairs support the local authorities' drug abuse treatment efforts. Yet, Rigsrevisionen is of the opinion that the performance management of the ministries should to a larger extent be based on good practice for effective management. The targets set should therefore be re-defined to govern more effectively the work performed by the local authorities and to enable the ministries to follow up on the results nationally.

Rigsrevisionen also finds that the Ministry of Health has taken steps to implement new medical forms of treatment and improve harm reduction. The Ministry of Social Affairs has mainly taken steps that support the local authorities in their case work and has only to a lesser extent taken steps to support the quality of the social aspects of drug abuse treatment. The Ministry of Social Affairs should therefore continue its efforts to develop and enhance the quality of the psychosocial drug abuse treatment.

The main conclusion is based on the following audit findings:

Have the Ministry of Health and the Ministry of Social Affairs set targets for the outcome of the drug abuse treatment and introduced supporting initiatives?

The ministries have set four targets for the drug abuse treatment. All four targets are open-ended and three of the targets are neither specific nor measurable, which makes it difficult, for instance, to follow up on the results nationally. Rigsrevisionen finds that the ministries should set targets in compliance with the generally accepted good practice for formulation of performance targets.

The ministries have introduced a number of supporting initiatives. The initiatives introduced by the Ministry of Health are directed at the medical treatment. The initiatives introduced by the Ministry of Social Affairs are directed at the psychosocial treatment and the administrative case work performed by the local authorities. Rigsrevisionen is of the opinion that the Ministry of Social Affairs has only to a lesser extent taken steps to support enhancement of the quality of the psychosocial treatment.

Has the Ministry of Social Affairs' supervision of the local authorities' compliance with the legislation governing drug abuse treatment been satisfactory?

The Ministry of Social Affairs has supervised and followed up on the local authorities' compliance with the legislation governing drug abuse treatment in a satisfactory manner. Yet, Rigsrevisionen's audit findings show that the local authorities failed to provide drug abuse treatment within the guaranteed time limit for 13 per cent of the individuals who wanted to access a drug treatment programme in 2010, that the local authorities have not to the extent required worked out action plans for the clients, and finally that 25 municipalities have not yet published a quality standard for the psychosocial drug abuse treatment. Rigsrevisionen is of the opinion that the Ministry of Social Affairs should assess the need for additional measures on an on-going basis to ensure that the local authorities comply with the rules.