

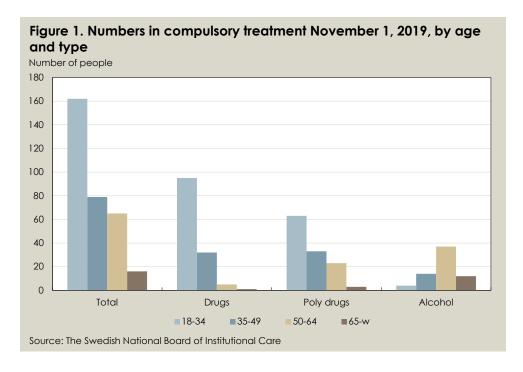
# Statistics on social service for adults with addiction and dependence 2019

The number of people who were treated non-voluntarily increased in 2019 compared with the previous year. The number of Social services interventions related to substance abuse was rather stable over time, while an increasing number of people were treated for substance abuse within health care. Social services interventions linked to gaming addiction increased and 626 people received attention during 2019.

# Compulsory care

### Drugs are most common

On November 1, 2019, there were 322 people treated under the Act on the Care of Abusers (Special Provisions) (1988: 870) LVM, of which 33 percent were women. This was an increase of six percent of the number of people who were put in an institution compared to the same date in 2018. The number of people discharged in 2019 also increased compared to 2018.



The majority of those treated according to LVM indicated problems in form of drug abuse, including poly drug use. Among the people who were treated on November 1, 2019, there were 41 percent treated for drug abuse and 38 percent had

substance abuse problems that included alcohol, drugs, solvents and new psychoactive substances. The remaining 21 percent had alcohol problems as indication.

Figure 1 shows the distribution of different types of abuse by age. The picture is clear in that narcotic drugs was over-represented among the younger age groups, while alcohol as the only indication was uncommon among the younger age groups. Conversely, alcohol abuse was most common in the 50–64 age group. Substance abuse was most common in the youngest age group and then decreased with increasing age.

# Voluntary care according to the Social Services Act

## Compulsive gambling

In 2018, a change was introduced in the Social Services Act (SoL 2001: 453), which meant that the social services has an obligation to provide assistance to people who have a compulsive gambling problem (applies to games about money). In 2018, 497 people received interventions for compulsive gambling. The following year, 2019, the number of people reported by the municipalities had received corresponding interventions increased to 626, of which 23 percent were women.

When new statistics are collected, there is always some uncertainty with respect to quality initially. This may be about unawareness of the change among local staff, or that the systems have not been fully adapted to register new types of interventions. This issue should be taken into account when interpreting the increase between 2018 and 2019. The number of municipalities that reported interventions for people with compulsive gambling in 2018 was 101. In 2019, 114 municipalities responded that they have provided such interventions. This means that 176 municipalities, or about 60 per cent, did not report any intervention linked to compulsive gambling. Whether the increase is due to an increasing population of compulsive gamblers, or that the increased awareness towards this client group cannot be determined at present.

## Out-client care and housing assistance increases

Out-client care, that is individually means-tested interventions and housing assistance increased slightly, while round-the-clock care declined in 2019 compared to 2018. In voluntary care, individually means-tested interventions were the most common on November 1, 2019. Almost 11,800 people received some form of out-client intervention and two-thirds of these were men. More than 1,900 people received round-the-clock care, of which three-quarters were men. This was a decrease of seven percent compared to 2018. At the same time, housing assistance reached just over 6,300 people with various forms of substance abuse; with approximately the same gender distribution as for other round-the-clock care (see Table 1).

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Table 1. All voluntary forms of care and support for people with addictions, November 1, 2019

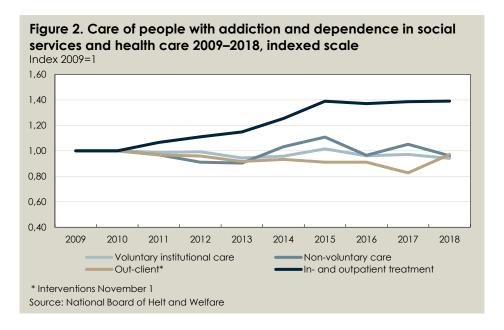
Number and proportion of women and men 21 years and older

Type of care or support	Women	%	Men	%	Total	%
Housing assistance	1 516	24	4 798	76	6 314	100
Out-client, individually meanstested interventions	3 722	32	8 037	68	11 759	100
Round-the-clock care, of which	486	26	1 415	74	1 901	100
Voluntary institutional care	438	25	1 301	75	1 739	100
Care in private homes	48	30	114	70	162	100

Source: National Board of Health and Welfare

# Small decrease in social service interventions

There has been an increase in the care of people with substance abuse problems in inpatient care and specialized outpatient care during the period 2009–2018. At the same time, the number of caretakers within social services voluntary care (institutional and out-client) was stable or decreasing. The decrease was not noticeably large, but still evident as it occurred successively over time. However, during the last year in the graph (2018), out-client interventions took an upward leap (Figure 2).



The clearest change was in the case of people diagnosed with diagnoses of addiction or dependence in the healthcare sector, where the increase was close to 50 percent during the period. The increase was largely driven by a specific diagnosis; mental and behavioral disorders due to multiple drug use and use of other psychoactive substances (ICD-code F19). The diagnosis includes various forms

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of substance combinations, and substance abuse that cannot easily be attributed to a particular substance.

#### **About the statistics**

The statistics deal with efforts made by people who abuse alcohol, drugs, , solvents or games of money. The statistics are partly cross-sectional data on November 1 and annual data.

Compulsory care according to the Act on the Care of Abusers (Special Provisions) (1988: 870), is given to persons 18 years and older. Statistics on voluntary measures under the Social Services Act (SoL 2001: 453) refer to people who are 21 years of age and older.

The non-response rate has increased in 2018–2019. In 2019, 9 per cent of the municipalities did not provide any information.

#### More information

You can find more tables, graphs and information in the following Excel file (in Swedish, but with English list of terms): https://www.socialstyrelsen.se/en/statistics-and-data/statistics/

If you wish to use our statistical database (in Swedish): https://sdb.socialstyrelsen.se/if mis/val.aspx

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