

Expenditure of compensation from legal claims in an opiate dependent population

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Abstract

This study examined the expenditure of compensation received from legal claims by service users attending an outpatient methadone programme in Dublin. Most claims (n = 62) were as a result of road traffic accidents (74%) or personal injury (15%). There were 28 reports of claims resulting in payment of compensation totalling €912,871. Of the compensation not placed in trust (€477,871), almost 40% was spent on drugs and 8% on alcohol. Of those who reported no drug misuse at the time of the compensation being paid, seven out of 11 (64%) reported subsequently spending a significant amount on substance misuse.

The risks of receiving large amounts of money in this population are substantial and include initiation and exacerbation of substance misuse, and risk of overdose. Alternative ways of managing the payment of compensation should be considered for this vulnerable population.

Key words: Opiate dependence; Compensation; Substance abuse.

Introduction

Considerable debate exists over the place in the causal chain of receipt of welfare assistance and subsequent substance misuse,¹ with some evidence that receipt of welfare assistance is associated substance misuse.² Little attention has been paid to the receipt of other sums of money in the substance misusing population, such as compensation for legal claims.

There is clear evidence that psychoactive substance misuse results in accidents,³ largely as a result of intoxication, or being in the power of others who are also likely to be intoxicated.

In Ireland, research has shown that over 15% of drivers suspected of driving under the influence of an intoxicant, and consequently apprehended by the police tested positive for one or more of the relevant drugs in that study (amphetamines, methamphetamines, benzodiazepines, cannabinoids, cocaine, opiates and methadone).

Interestingly, among drivers who had minimal blood alcohol levels, 67.9% were taking at least one type of drug⁴

showing that dangerous driving is very common while abusing substances.

Other incidents are also more likely to occur as a result of substance misuse such as personal or work-related injury. Given this increased risk, legal claims and the payment of compensation are also more likely.

This study aimed to determine the number of clients who had been involved in accidents, or who had received compensation for legal claims, and how money received was spent.

Methodology

This study was a retrospective survey of service users from a geographically defined catchment area attending the Drug Treatment Centre Board, an outpatient methadone stabilisation and detoxification programme in central Dublin. The purpose of the study was explained to service users and ethics committee approval was received.

Ninety-one service users from the catchment area agreed to take part in the study from a total of 159 (57%). Only a small number of service users refused to take part in the study (5%). The remainder of service users were not included in the study for various reasons such as non-attendance during the study period or imprisonment, reflecting the mobile nature of the population. All service-users had a DSM-IV diagnosis of opiate dependence syndrome. Information was obtained on demographics, legal claims made and outstanding, amount of compensation received and how it was spent. Regular urinalysis was carried out on all participants.

Results

Regarding demographics, there was no significant difference between recipients and non-recipients of compensation for age, length of attendance at the clinic or duration of drug misuse. Overall, 73% of service users were male, however an even higher percentage of recipients of compensation were male (86%). Types of claims resulting in compensation are outlined in *Table 1*.

A total of 50% of service users involved in making claims admitted that they were abusing substances around the time of the accident. Of those who reported no concurrent drug misuse at the time of the compensation being paid, seven out of 11 (64%) reported subsequently spending a significant amount on substance misuse. Of these claims 28 resulted in the payment of compensation to five service users totalling €912,871. Of this amount 48% (€435,000 from two claims) was placed in trust. Expenditure of the remaining amount (€477,871) is outlined in *Table 2*; almost 50% was spent on substance misuse.

A total of 12 service users had one outstanding claim each, nine of which were for personal injury or road traffic accidents.

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Table 1: Types of claims resulting in compensation

Type of claim	Percentage of claims (n = 62)
Road traffic accidents	74%
Personal injury	15%
Workplace injury	3%
Payout at 18 from childhood accidents or abuse	8%

Discussion

The study is limited by selection bias as some service users, despite reassurance, declined to take part in the study to maintain their privacy about compensation or claims. The high proportion of male claimants reflects the increased likelihood of young males being involved in road traffic accidents.⁵ This study is also limited by recall bias, as the study is retrospective in nature.

The amount of compensation however is likely to be an underestimate in today's terms, as amounts received while converted into euro, were not adjusted for inflation. Similarly, 20% of all compensation could not be accounted for, reflecting problems with recall. However, it is likely that a significant proportion of that money could have also been spent on substance misuse.

This is the first study completed which provides clear evidence that the receipt of substantial amounts of money by those with a history of substance misuse results in further spending on illicit substances and alcohol. Almost 48% of compensation not in trust was spent on substance misuse. This places the recipient at increased risk of intoxication and consequently further accidents and overdose.

Worryingly, of those who reported no concurrent drug misuse at the time of the compensation being paid, seven out of 11 (64%) reported subsequently spending a significant amount on substance misuse. This suggests that the payment of compensation leads directly to relapse or even to first time drug misuse.

As a result of the belief that welfare assistance is associated with subsequent substance misuse, many states in America will only pay welfare benefits on condition that the recipient attends compulsory treatment programmes.² The

Table 2: Expenditure of compensation

Expenditure	Percentage (Total amount = €477,871)
Drugs	40
Alcohol	8
Material goods	25
Gambling	3
Saved	2
Gave away	2
Unaccounted/ Could not recall	20

benefit of this approach is complex and debatable.¹ Similarly, discussing payment of large sums of money to those at risk of or engaged in substance misuse requires consideration of confidentiality, an individual's rights, the possible increased risk of substance misuse and the risk to society.

It is likely that most people would not want to reveal any substance misuse history for reasons of confidentiality and potential impact on their case, and clearly individuals are entitled to maintain their privacy.

However, ordinary members of the public may be at further risk of being the innocent victim of potential accidents, once payment is made, given the high number of service-users who admitted abusing substances around the time of the accident (50%) or after it (64%).

These findings suggest that alternative ways of managing payment of compensation should be considered in this vulnerable population.

Declaration of Interest: None

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