

PRESS BRIEFING



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Prison risks doing more harm than good for the rehabilitation of drug users, says UK Drug Policy Commission

A report published today by the UK Drug Policy Commission raises serious concerns about the current ability of many prisons to address problem drug use and recommends that community orders addressing drug-use and offending behaviour should be used instead of short prison sentences for less serious offences.

The report, "**Reducing drug use, reducing reoffending**", is the first comprehensive independent review and analysis of programmes in the UK for problem drug-using offenders in the criminal justice system (CJS) and examines whether they are supported by the evidence.

Dame Ruth Runciman, chair of the Commission, said:

"Two striking findings emerge from our review. First, community sentences are likely to be more beneficial than short prison sentences for the treatment and rehabilitation of problem drug-using offenders. Second, despite some welcome improvements and an increase in investment, the standard of healthcare and support for prisoners with drug problems falls well below acceptable minimum standards in too many prisons. The evidence overall suggests that following a focus on getting numbers into programmes, equal attention should now be given to ensuring programmes are of a consistent and high quality."

"The review we have carried out demonstrates just how far the prison system needs to travel if it is to deliver a standard of health care and support for prisoners which is sufficient to make a sustained impact on offenders problem drug use once they leave. We understand that the National Treatment Agency which is responsible for treatment standards in the community will become more involved in the delivery of prison drug treatment."

The Commissions' review of the various UK governments' efforts to address problem drug use amongst offenders looked at the international evidence and heard from drug users, professionals and policy experts from across the UK.

The Commissions' **key conclusions** are:

Following a period of expansion and a focus on quantity, attention should now focus on quality.

- There is a need for a wider range of services to meet the differing needs of individual drug-using offenders, for example more so-called 'wraparound' services such as support for finding stable housing and employment.
- The multiplicity of programmes, funding streams and commissioning processes hampers the delivery of care packages that address the wide range of needs of problem drug-using offenders. Attention should now be given to developing simplified and integrated commissioning, funding and management systems.

"Net-widening" to include additional groups of drug-using offenders in CJS-based interventions may have negative consequences.

- Current evidence suggests that widening the net (for instance by testing on arrest for a wider range of drugs than heroin, crack and cocaine) to include offenders with less problematic drug use that is not linked to their offending is likely to be inefficient and could be harmful.
- Schemes that divert offenders in the early stages of their offending and problem drug-using careers from prosecution on condition that they address their substance use and other problems may merit expansion.

Community punishments are likely to be more beneficial than imprisonment for most problem drug-using offenders.

- Maximising the use and effectiveness of community sentences is likely to be more beneficial than imprisonment of problem drug-using offenders for less serious acquisitive crimes and drug possession offences. This is likely to lead more sustainable outcomes for the wider community and the individual.

Prison drug services frequently fall short of even minimum standards.

- Key concerns include the process for identifying problem drug users on reception, the adherence to best practice clinical guidance and standards and the effectiveness of continuity of care within the prison system and with community services before prison and after release.

Given the sizeable investment in CJS interventions for drug-dependent offenders, we know remarkably little about what works and for whom.

- Answers to even basic questions regarding throughput and output are not freely available and we simply do not know enough about which programmes work best for whom.
- In looking closely at the evidence to support the numerous initiatives and interventions generated by the Government over the past few years the Commission found:

(a) *There is reasonable evidence to support:*

- Specialist drug courts; community sentences including Drug Treatment & Testing Orders and Drug Rehabilitation Requirement, prison-based therapeutic communities; opioid detoxification and methadone maintenance programmes

within prisons and the community; and an abstinence-based prison-based programme (delivered by RAPt).

(b) *There are no evaluations of the effectiveness of:*

- Counselling Assessment Referral Advice & Through-care (CARAT) interventions; prison drug-free wings; programmes based on cognitive behavioural therapy such as short-duration programmes and Addressing Substance Related Offending (ASRO) programmes; police conditional cautions and Intervention Orders.

(c) *There is mixed evidence for:*

- Criminal Justice Integrated Teams in prisons; police and court Restrictions on Bail; and the added value of drug testing as part of a community order sentence.

ENDS

For more information, interview requests with the Chair Dame Ruth Runciman and Chief Executive Roger Howard or to confirm your attendance at the **media launch on Monday 17 March , 9.30am at Addaction Brent, 97 Cobbold Road, Willesden NW10 9SU** please contact Ben Lynam (Head of Communications) on 020 7297 4752, 07988 054241, blynam@ukdpc.org.uk.

Addaction Brent location map:

<http://www.streetmap.co.uk/newmap.srf?x=521657&y=184627&z=0&sv=NW10+9SU&st=2&pc=NW10+9SU&mapp=newmap.srf&searchp=newsearch.srf>

Notes to editors

- The UK Drug Policy Commission commenced its three year programme in April 2007. It is an independent specialist "think-tank" funded by the Esmee Fairbairn Foundation and aims to provide objective analysis of 'what works' to tackle drug problems and encourage a more informed public debate.
- The UKDPC is formed of 12 Commissioners who bring together a broad range of expertise from the fields of drug treatment, medical research, policing, public policy and the media. For more information on the UKDPC and its commissioners please visit www.ukdpc.org.uk
- The new 10-year UK Government drug strategy was launched on 27 February and promises to continue to prioritise drug misusing offenders. New strategies for Scotland and Wales are planned later this year.
- The UK strategy aims for "prison clinical drug treatment to be brought to at least a minimum evidence-based standard across all prisons" in England by 2011.
- Last week (11 March) it was announced that David Blakey CBE QPM, a Commissioner for the UKDPC, has been commissioned by the Prison Service to conduct a review of the effectiveness of measures to disrupt the supply of illicit drugs into prison.
- Addaction is Britain's biggest specialist drug and alcohol treatment charity, supporting over 26,000 people with drug and alcohol problems. They have over 70 services in England and Scotland for individuals and their families, including nine dedicated services supporting young people and their families affected by problem drug and alcohol use.

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