

# Drug policy – getting the strategy right for the long term

The Government intends to publish a new Drug Strategy in early December 2010. This presents an opportunity to mark the beginning of a fresh approach to the problem of illicit use of controlled drugs. This briefing sets out the key considerations for policymakers looking to find sustainable solutions to reducing drug harm.

Illicit drug use affects individuals, families and communities in every part of the UK, often with tragic costs and consequences. The costs to society – for treatment, ongoing healthcare, sanctions through the criminal justice system, and benefits and support if dependency has made working impossible – are considerable.

As an MP, you will doubtless have seen at first hand the impacts of drugs on the families and communities you represent. Like anyone with a desire to help young people succeed, to boost employment, to cut crime and to improve public health, you will be keen to ensure that policy in this area makes the most effective contribution possible.

The forthcoming Drug Strategy will not, and cannot be expected to, solve all of the problems associated with drugs. Many of these will take significant cultural and economic shifts to change, which might only be realised over the course of a generation. The economic realities mean also that there will be limited room to manoeuvre in the short term.

So this briefing, from the independent UK Drug Policy Commission, aims to give a realistic, practical and above all evidence-based assessment of the options and priorities for both the Drug Strategy and for longer term policy development.

## Five priorities for an effective drug strategy for the long term

### 1: Ensure enforcement efforts focus on harms to individuals, communities and society

**Why?** The primary focus of any strategy for drugs must be to protect people from harm. Better use of intelligence and improvements in policing have led to successes with some aspects of enforcement, although robust evidence of what has worked and why is limited. The UK drug market is a large source of criminal income and innovation, and often well-intentioned enforcement efforts fail to make a sustained impact and, ironically, can themselves have harmful unintended consequences. New thinking is needed. The evidence suggests approaches to enforcement that actively involve local communities, alongside intelligence-led criminal investigation may be more likely to reduce harm when focused on the drug markets that cause most damage. However, success cannot be demonstrated by the numbers of arrests or drug seizures, but rather should be measured by assessing the reduction in the harms experienced by communities.

#### *Did you know?*

- The UK market for illicit drugs is worth over £5 billion a year, with the wider economic costs of Class A drugs (e.g. heroin, cocaine, crack) estimated at £15.7 billion.
- The price of drugs in Britain has declined over the past decade and the National Audit Office found little evidence that enforcement is succeeding in making drugs less accessible.

## **What can be done?**

**In the short term:** An essential first step is to improve joined-up working between agencies and within communities. A series of partnership-based trial projects tackling harmful aspects of drug markets should be set up to test what works; a commitment to robust assessment of the impact and effectiveness of each project should be a key plank of the enforcement strategy.

**In the longer term:** The outcomes from the trial projects should be used to improve understanding of the scale and nature of drug harms and of which enforcement approaches are likely to work. Ultimately, this will lead to measures that are more effective and will give the best outcomes for the whole community.

*For more information: See the UKDPC reports on refocusing drug-related law enforcement to address harms,*

[www.ukdpc.org.uk/publications.shtml#hre\\_report](http://www.ukdpc.org.uk/publications.shtml#hre_report)

## **2: Help former drug users to re-establish their lives, get back to work and stay there**

**Why?** Everyone would agree that we should aspire to create policy that helps bring former drug users back into economic activity, and to help them rebuild their lives. However, treatment on its own is often not enough to sustain recovery. Opportunities also need to be available to allow former users to hold down jobs and stable housing. Employers and others need to be supported and encouraged to offer training and work to former users. In the current economic climate, this will not be easy. But as the economy recovers and jobs and training opportunities are created, we need to ensure that a greater proportion of employers have the confidence to recruit someone with a known history of problem drug use. Our research shows that most employers are reluctant to do so. With more support and encouragement, and concerted action to shift attitudes and challenge stigma, recovering drug users can improve their chances of obtaining a job and making a sustained positive contribution to society.

### *Did you know?*

- Two-thirds of employers who responded to a survey said they would refuse to employ a former heroin or crack cocaine user, even if they were otherwise suitable for the job.
- More than 85,000 Incapacity Benefit claimants are thought to be problem drug users.

## **What can be done?**

**In the short term:** The forthcoming Drug Strategy must recognise the need to provide more support, advice and incentives to employers and training institutions to help create employment opportunities for recovering former users.

**In the longer term:** A concerted effort needs to be made – through the media, education and public discourse – to challenge the stigma associated with drug dependency and addiction.

*For more information: See the UKDPC reports on working towards recovery and getting problem drug users into jobs, [www.ukdpc.org.uk/publications.shtml#Employment\\_report](http://www.ukdpc.org.uk/publications.shtml#Employment_report), and on the stigmatisation of problem drug users, [www.ukdpc.org.uk/publications.shtml#Stigma\\_commentary](http://www.ukdpc.org.uk/publications.shtml#Stigma_commentary)*

## **3: Help break the cycle of addicted offenders going in and out of jail without recovering**

**Why?** The scale of reoffending committed by drug users who have been in prison but who have not managed to achieve successful rehabilitation represents a major cost to communities – and to the taxpayer. All the evidence says that prison is not the solution to all drug-related crime. It does not offer the most appropriate environment in which to provide effective, sustainable drug treatment and recovery, and the cost of keeping large numbers of people in prison on short-term sentences for drug-related crimes is very high. Even when treatment in custody is successful, changes made in prison are often not sustained on release; and relapse can have significant consequences for the individual and those around them. In this context, there is a strong case for greater use of community sentences for non-violent drug-dependent offenders.

### *Did you know?*

- Over half of the 85,000 people in prison (annual turnover 135,000) are thought to have serious drug problems, with even higher rates among short-term prisoners.
- Community sentences can work because they combine punishment with opportunities that help offenders to turn away from crime and straighten out their lives.

## **What can be done?**

**In the short term:** The Drug Strategy and criminal justice Green Paper, both expected in December 2010, present new opportunities. These should include commitments to more treatment options for offenders on community sentences and in prison, and access to support, opportunities for volunteering, peer mentoring and supported housing when people come out of prison.

**In the longer term:** The impending review of sentencing needs to look at whether drug-dependent offenders, including those with a long history of drug-related offences, might better tackle their underlying drug problems without the prospect of being sent to prison. There needs to be a stronger emphasis on tailored packages of support to sustain recovery.

*For more information: See the UKDPC report on reducing drug use and reducing reoffending, [www.ukdpc.org.uk/publications.shtml#RDURR\\_report](http://www.ukdpc.org.uk/publications.shtml#RDURR_report)*

## **4: Ensure that money spent on prevention is invested in programmes that are proven to be effective**

**Why?** Preventing drug misuse is important. The challenge is to identify what is actually effective and what are the measures of success. This is possibly the most complex area for drug policy, and some popular and appealing interventions have been found not to be effective. For example, the evidence suggests that universal prevention programmes aimed at school children have only a small impact at best. Targeted interventions aimed at vulnerable young people might deliver better results, particularly when they involve the whole family. A further significant challenge is the need for clarity about the overall aim of the intervention. Much evidence suggests that the most realistic, practical and effective approach to prevention might be to focus on reducing the various harms to those who use drugs. The fundamental challenge must be to look to broader improvements in family well-being, wider cultural norms and social and economic circumstances.

### *Did you know?*

- One in three adults has taken an illicit controlled drug, most often cannabis, but fewer than one in ten report use in the past year.
- The use of cannabis among children and young people has reduced by more than a third since 2000.
- While drug use is spread throughout social groups and all localities, drug dependency is concentrated in disadvantaged communities.

## **What can be done?**

**In the short term:** The Drug Strategy should prioritise more targeted interventions with vulnerable young people at risk, such as working with the wider family, and commit resources to robust evaluation of their impacts.

**In the longer term:** Seeking behavioural change through innovative approaches to influencing social norms among young people should be tried and evaluated. To address deeper problems of drug dependency will require major economic and social improvements among the most disadvantaged groups.

*For more information: See the chapter on prevention in the UKDPC report *An Analysis of UK Drug Policy*, [www.ukdpc.org.uk/publications.shtml#Analysis\\_Drug\\_Policy](http://www.ukdpc.org.uk/publications.shtml#Analysis_Drug_Policy)*

## **5: Improve our system for controlling drugs and strengthen the way that drug policy is developed in the future**

**Why?** The discussion of drug control is bound up with consideration of enforcement, sanctions and the assessment of harm for classification. Approaches to control need to look at all of these together and not in isolation. As the marketing of new substances becomes more sophisticated through the internet and other channels, the existing systems of drug control need to be rethought. This means refreshing the system of classification, and rethinking sentencing provisions, enforcement actions and the broader way that policy is developed. There are many different interests involved in the implementation and oversight of this complex area of policy. The communities you represent want to see the various players work together and make effective use of robust evidence to set policy that protects the public from harm. Since Parliament passed the Misuse of Drugs Act 40 years ago the world and the challenges have changed and so the way we respond to them needs to change too.

#### *Did you know?*

- Cannabis was downgraded to Class C in 2004 and subsequently upgraded back to Class B in 2009 –without any obvious effect on the continuing reduction in use seen since 2000.
- There are now over 650 substances controlled under the Misuse of Drugs Act, and new substances are being identified with increasing frequency.

#### **What can be done?**

**In the short term:** The Drug Strategy should confirm the introduction of temporary powers to control potentially harmful substances, so that their harms can be assessed by the Government's expert advisers.

**In the longer term:** It will be necessary to consider taking a more flexible approach to the control of new drugs. A fundamental review is required of how controls over psychoactive drugs that are prone to misuse can be integrated with controls over other harmful substances, such as medicines, alcohol and hazardous industrial substances.

#### **What else can you do as an MP?**

- You can find out more about evidence to support effective drug policy on our website [www.ukdpc.org.uk](http://www.ukdpc.org.uk).
- You can talk to the drug service providers within your constituencies to find out what evidence they have for which interventions are most effective.
- You can urge your colleagues and Ministers to commit to developing policy that is based on robust evidence and so will reduce the harm to individuals, families and communities arising from the illicit use of drugs.

We hope you have found this briefing useful. If you require further copies, please contact Roderick Montgomery (RMontgomery@ukdpc.org.uk), or if you would like to talk to UKDPC's chief executive, Roger Howard, please call us on 020 7812 3790.

#### **About the UK Drug Policy Commission**

The UK Drug Policy Commission (UKDPC) brings together senior figures from policing, public policy and the media along with leading experts from the drug treatment and medical research fields.

UKDPC is funded by the Esmée Fairbairn Foundation. Consequently, UKDPC is independent of government and any special interests.

UKDPC's aim is to encourage a transparent and evidence-led UK drug policy. UKDPC believes that we need to find new ways of dealing with drugs that minimise harm to people and communities. UKDPC is working with many expert partners to help shape a new policy framework so that good decisions – about drug control, prevention, enforcement and treatment – can be made consistently and with the best use of the evidence available. To find out more, visit [www.ukdpc.org.uk](http://www.ukdpc.org.uk)