



## DrugScope briefing for Safer Future Communities network leads

DrugScope is one of the UK's leading independent centres of expertise on drug use and drug policy and the membership body for the drugs field. DrugScope is also a partner in the Safer Future Communities (SFC) initiative, which supports the voluntary and community sector to engage with Police and Crime Commissioners. Find out more at [www.drugscope.org.uk](http://www.drugscope.org.uk) The SFC webpage is at [www.clinks.org/services/sfc](http://www.clinks.org/services/sfc)

### KEY MESSAGES FOR PCCs

- **Many crimes are linked to drug and alcohol misuse and addiction.**
- **Treating drug and alcohol misuse is therefore a crime reduction priority.**
- **PCCs will inherit money that has supported work with drug dependent offenders.**
- **PCCs will need to be active champions for drug and alcohol services (for example, working with Directors of Public Health and Health and Wellbeing Boards in local authorities).**
- **PCCs should focus 'what works' and reducing impact on communities in policing of local drug markets.**

There are a number of reasons why PCCs should be concerned about drug policy and the development of local drug services:

1. **A minority of people with serious drug dependency problems commit a high proportion of acquisitive crimes.**
2. **Investment in evidence-based drug treatment cuts crime.**
3. **Victims of crime and abuse may have substance misuse problems – for example, women who experience domestic abuse.**
4. **PCCs will need to respond to local concerns about drug use and markets.**
5. **The policing of drug offences involves a significant police resource.**

There are a range of issues around alcohol and offending too, particularly given the links to violent crime. The 2010 Drug Strategy 'recognises that severe alcohol dependence raises similar issues and that treatment providers are often one and the same'. Drugs and alcohol may be consumed together (so-called 'poly drug use').

### Drugs and crime – some key facts and figures

- A typical dependent heroin user spends around £1,400 on drugs each month, two and a half times the average mortgage.

- Heroin, cocaine or crack users commit up to half of all acquisitive crimes (shoplifting, burglary, robbery, car crime, fraud and drug dealing).
- The moment they start treatment, less crime is committed.
- The National Audit Office states that every £1 invested in drug treatment saves £2.50 in subsequent costs to taxpayers, primarily by reducing crime.<sup>1</sup>
- Drug treatment prevented an estimated 4.9 million offences in 2010-11 including 100,000 burglaries and robberies, 75,000 car thefts and break ins, 1,100,000 shoplifting thefts, 350,000 acts of prostitution and 25,000 bag snatches.
- It has been estimated that every £100 invested in drug treatment prevents a crime.

Source: National Treatment Agency (2012), *Treat addiction, cut crime*. This resource includes detailed breakdowns of impact on particular crimes and cost-benefits. It is available at [www.nta.nhs.uk/uploads/vfm-crimepresentationvfinal.pdf](http://www.nta.nhs.uk/uploads/vfm-crimepresentationvfinal.pdf)

### What the public think about drug treatment

- A 2009 opinion poll by DrugScope/ICM found that 77 per cent of the general public agreed that drug treatment is a sensitive use of public money and 88 per cent agreed that drug treatment should be available to anyone with an addiction to drugs who is prepared to address it.
- A 2009 survey by the National Treatment Agency for Substance Misuse found that 66 per cent of the public believe that crime would increase without drug treatment.
- The 2010-11 British Crime Survey reported that 26 per cent of adults believed that anti-social behaviour caused by using or dealing in drugs in their area was a 'very or fairly big problem' and 24% that drunk or rowdy behaviour was a 'very or fairly big problem'.

### What is the PCC role in local drug and alcohol treatment?

Drug treatment cuts crime. PCCs will want to ensure that there is sufficient provision of evidence-based drug and alcohol services in their police authority area, and that these services are working effectively with offenders and those at risk of offending.

From April 2013, following abolition of the National Treatment Agency, control over an estimated £1 billion currently invested in drug and alcohol treatment in England will transfer to Directors of Public Health employed by local authorities.<sup>2</sup> This funding will not be 'ring-fenced' for treatment, although there will be some protections for it.

PCCs will also assume direct control of some budgets linked to drug treatment. The Drug Intervention Programme (DIP) has funded interventions to identify offenders

<sup>1</sup> Research suggests the savings from effective integrated services could be higher still, with research by Oxford Economics of a Turning Point model showing savings of over £4 for every £1 invested.

<sup>2</sup> The NHS Commissioning Board will be responsible for treatment in prisons and Clinical Commissioning Groups will have a role.

with drug problems (including through drug testing) and refer them for assessment and treatment. It has also supported the management of offenders leaving prisons by helping to facilitate transition between prison and community services. The PCCs will inherit around £32 million of the current DIP budget as part of their Community Safety Fund. This is about a third of the current DIP budget, the other two thirds will be incorporated into the public health budget, which will be controlled locally by Directors of Public Health. The Community Safety Fund will also include funding that has supported drug and alcohol services for young people. There is already evidence of disinvestment in services for young people with drug and alcohol problems in some local areas.

**DrugScope recommends that all PCCs:**

- **make drug and alcohol treatment a priority;**
- **pro-actively engage with local authorities to support investment in evidence-based services (for example, Health and Wellbeing Boards);**
- **use their DIP budgets to invest in effective interventions in criminal justice services that can identify people whose offending is linked to a drug or alcohol problem and direct them towards appropriate services.**

**Supporting the reintegration of ex-prisoners**

DIP has also helped to support the re-integration of ex-prisoners. Without integrated offender management at the point of release from prison there is a risk that progress made to tackle substance misuse issues in prison will be lost on release. For example, the Patel Report on drug treatment in prison (2009) reported that in the week following release, prisoners are 37 times more likely to die of a drug overdose than other members of the public. One former prisoner commented on the need for ‘someone to meet you from either the local DIP teams or a trusted person to make sure you aren’t going to slip straight back to your old habits’.

**Supporting victims**

Victims may turn to drink or drugs to cope with their experiences (for example, childhood abuse or domestic violence). Often the lines between offenders and victims are not clear cut (for example, women involved in prostitution with substance misuse problems are often victims of exploitation, violence and abuse). Drink and drug use can put people in situations where they are more vulnerable to crime (for example, many victims of city centre violence are intoxicated).

A UK study showed that 51% of respondents in contact with domestic violence agencies claimed that either themselves or their partners had used drugs, alcohol and/or prescribed medication in problematic ways in the last five years.

Source AVA project. [www.avaproject.org.uk/our-resources/statistics/violence-against-women-and-drugs-and-alcohol.aspx](http://www.avaproject.org.uk/our-resources/statistics/violence-against-women-and-drugs-and-alcohol.aspx)

## Policing and local drug markets

PCCs will want to consider approaches to policing drugs in their Police and Crime Plans. While there is a tendency to distinguish between 'soft' and 'tough' approaches to policing in political debate, it is helpful in practice to focus on identifying the most effective overall policing strategy to meet community concerns, particularly with an anticipated 20% real term reduction in police budgets in the four years to 2014-15.

### Policing and drugs – some key facts and figures

- Nearly 270,000 officer hours were saved in England and Wales in the year after police started issuing street warnings for cannabis possession in 2004, saving over £3.5 million.  
Source: T May et al (2007), Policing cannabis, Joseph Rowntree Foundation
- Research suggests that enforcement alone has limited impact on the availability of drugs – for example, closing down a market in one neighbourhood may result in displacement to another neighbourhood or increase violence as new dealers fight over the vacated territory. However, 'smart' policing approaches involve local communities, focus on the harms that they experience and take a more holistic approach to addressing these harms. These can be effective.  
Source: UK Drug Policy Commission (2009), Moving towards real impact drug enforcement
- A national survey of police forces found in 2011-12 that drug-related policing expenditure and activity was expected to decrease – including activities such as covert surveillance, test purchasing and other intelligence gathering work.  
Source: UK Drug Policy Commission (2012), Charting New Waters

### DrugScope recommends that all PCCs:

- **Focus police priorities on drug enforcement that is effective in tackling harms that impact on local communities (for example, 'open' markets or focusing on the most violent and dangerous drug dealers).**
- **Consult local communities on approaches to policing people in possession of small quantities of drugs, particularly given the pressures on police resources;**
- **Work with local partners to develop approaches that link enforcement to 'demand reduction' by challenging offenders to address drug or alcohol issues.**

## A word on 'legal highs'

This term has been used to refer to drugs that mirror the effects of illegal drugs like ecstasy and amphetamines but have not been controlled under the Misuse of Drugs Act. The Government has introduced temporary banning orders (as well as a 'forensic early warning system'). Media reports on local drug trends can be alarmist, and it is important to act on the basis of reliable and accurate information where new trends are impacting on your local community.

Information on the Government's approach to 'new psychoactive substances' is provided in the Home Office's 2012 review of the 2010 Drug Strategy. DrugScope can provide advice and information.

## Sources of information about drug and alcohol related issues in your own police authority area

These key messages about the nature and extent of drug and alcohol related crime will be relevant to all police authority areas. At the same time, the introduction of elected Police and Crime Commissioners is part of a move towards 'localism', giving more scope to identify and respond to issues within your police authority area. Priorities around drug and alcohol problems and their policing may vary between different areas of the country – for example, they may take a different form in rural than in metropolitan areas.

There are a number of sources of data and information on drug and alcohol issues and the relation to crime in your local area.

You can find out if your Police and Crime Commissioner said anything in his or her election statement about drug use and offending at [www.choosemypcc.org.uk](http://www.choosemypcc.org.uk) Many PCCs will have their own websites which you can track down using a search engine like google.

Safer Future Communities has produced a statistical tool kit with information about crime statistics in your police authority area. This includes a section on substance misuse, where you will find details of recorded drug offences. There is also useful data on drug and alcohol issues in the sections on anti-social behaviour and youth crime.

The SFC toolkit is at [www.clinks.org/services/sfc/sfcreources/sfc-statistical-toolkit](http://www.clinks.org/services/sfc/sfcreources/sfc-statistical-toolkit)

There is regional information about drug use by region in the annual 'Crime Survey for England and Wales: Drug misuse declared', including information about levels of use of particular drugs in different parts of the country (follow the following link and click on table D.10)

[www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/crime-research/drugs-misuse-dec-1112-tabs/illicit-use-tabs?view=Binary](http://www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/crime-research/drugs-misuse-dec-1112-tabs/illicit-use-tabs?view=Binary)

The National Drug Treatment Monitoring System (NDTMS) provides regional data on drug treatment services and their performance at

[www.ndtms.net/viewit/Adult/Viewer.aspx?theme=numbers&shaName=Q36&level=dat&code=H01B&year=7](http://www.ndtms.net/viewit/Adult/Viewer.aspx?theme=numbers&shaName=Q36&level=dat&code=H01B&year=7)

The National Treatment Agency for Substance Misuse (NTA) is supported by nine regional teams in England. You can find contact details for the regional team in your

area as well as other information on the 'regional teams' page on the NTA website, including the adult and young people's treatment plans for local drug and alcohol partnerships. The link is at <http://www.nta.nhs.uk/regional.aspx>

Local authorities conduct joint strategic needs assessments (JSNAs) and Health and Wellbeing Boards in upper tier local authorities will have a responsibility to produce joint Health and Wellbeing Strategies. JSNAs provide an important source of information about local substance misuse trends and issues. They are not gathered in a single place on the internet, but you should be able to track down those that are relevant to your police authority area using a search engine like google.

There are a number of reports on particular issues that provide regional data. A particularly useful set of statistics is provided in 'Estimates of the prevalence of opiate use and/or crack cocaine use 2009-10'.

This is available at [www.nta.nhs.uk/uploads/prevalencestats2009-10fullreport.pdf](http://www.nta.nhs.uk/uploads/prevalencestats2009-10fullreport.pdf)

DrugScope's website includes a searchable database of drug and alcohol services called Helpfinder, which is searchable by region and provides details of drug and alcohol services (including contact numbers) at <http://helpfinder.drugscope.org.uk/> Be warned, however, that with a high volume of re-commissioning, it is not possible to ensure this is fully up-to-date.

**DrugScope's website is at [www.drugscope.org.uk](http://www.drugscope.org.uk) You can contact us by e-mail at [info@drugscope.org.uk](mailto:info@drugscope.org.uk) or telephone 020 7234 9730  
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