

# Role of Law Enforcement in a Public Health approach to Drugs: international data & implications for Scotland



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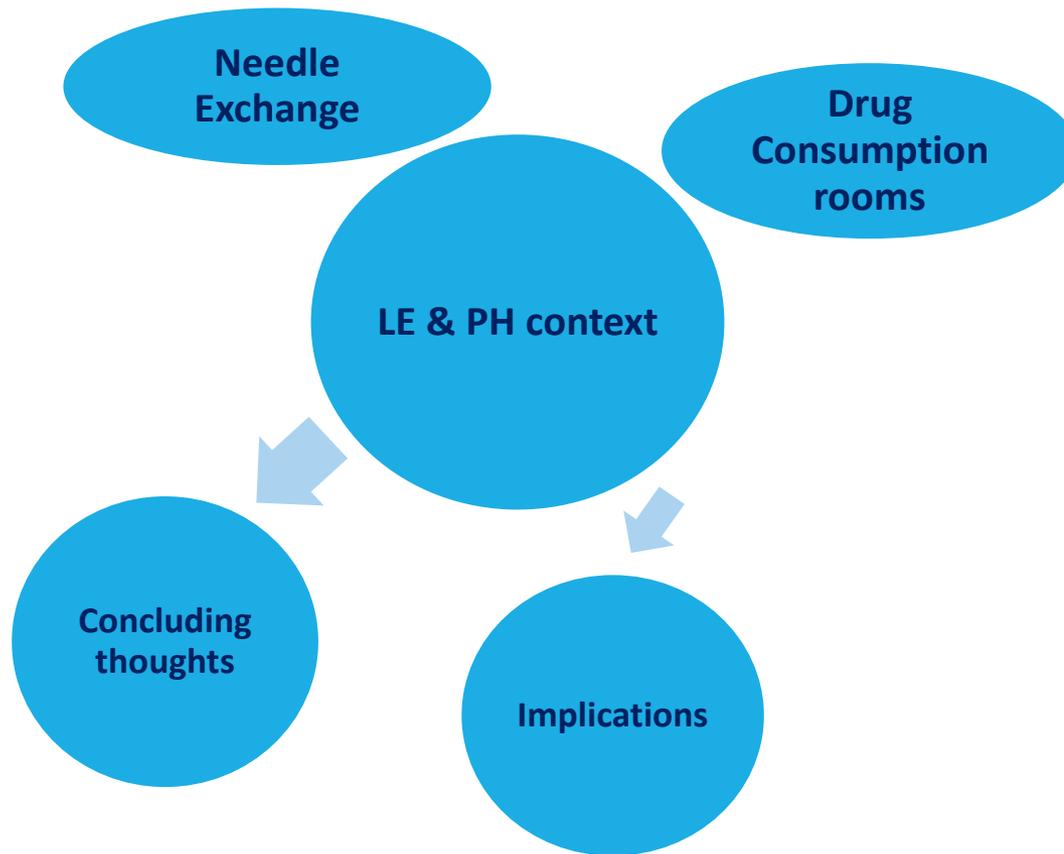
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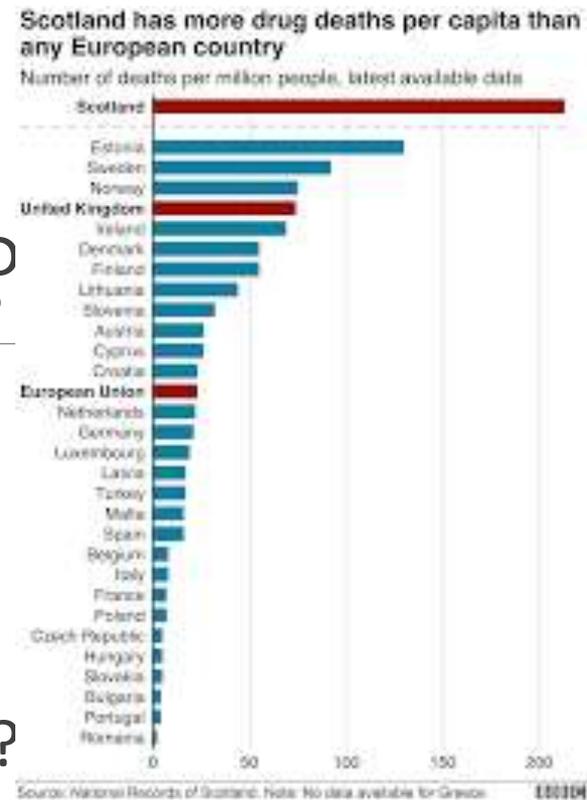
# Law Enforcement in a Public Health approach to Drugs: OUTLINE

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# CONTEXT: Health & Justice?

- Drug related death epidemic in Scotland
- Drug Task Force
- Justice and Health Collaboration
- Policy context: harm reduction /recovery?
  - *Rights, Respect & Recovery* (Scottish Government, 2018)
- Legal context: Misuse of Drugs Act 1971
- ‘Whole systems’ approach & diversion of young people, (but rhetoric /policy Vs practice –Morrison 2019)



# *Functions of the police?*

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- ▶ Enforce law and bring offenders to justice (gateway to CJS)
- ▶ Crime reduction /prevention
- ▶ Order maintenance
- ▶ 'secret social service' (Punch 1979)
- ▶ To enhance wellbeing and safety of communities (Police and Fire Reform Scotland Act, 2012)

# How is policing done?



- ▶ Police powers: ‘core competence’ is the capacity to use force (Bittner, 1970)
- ▶ Discretion
- ▶ Stop & Search: 60-70% for drugs
- ▶ Enforcement & Engagement methods & public confidence (Hail et al. 2018); legitimacy, co-operation, compliance and policing by consent
- ▶ *Collaboration* with partners & *engagement* with communities (PFRS Act 2012)



# Needle Exchange facilities

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- HIV Epidemic... NE now well established in UK
- Police role: street policing can make or 'break' effectiveness of public health measures
- Arrests of drug users in areas surrounding NSPs in Russian cities (Sarang et al., 2010)... fear of police contact as a reason for not accessing programs
- Police role tied to creation & shaping of risk environment
  - i.e. physical, social, economic and policy aspects of the micro and macro environment that influence risk reduction practices all of which are exogenous to the individual (Rhodes, 2005)

# Risk Environment -Rhodes (2005)

<https://www.bmj.com/content/331/7510/220.short>

**Table 1** Simple model of HIV risk environment in the context of transition<sup>5</sup>

	<b>Micro-environment</b>	<b>Macro-environment</b>
Physical	<ul style="list-style-type: none"> <li>Drug injecting sites</li> <li>Sex work sites</li> <li>Prisons and detention centres</li> <li>Refugee collecting and dispersal centres</li> </ul>	<ul style="list-style-type: none"> <li>Trade and trafficking routes (drugs, sex, humans)</li> <li>Labour mobility, urban and economic migration</li> <li>Geographical dispersal of population</li> </ul>
Social	<ul style="list-style-type: none"> <li>Peer and social norms</li> <li>Community attitudes</li> <li>Local policing practices</li> <li>Community health and welfare services</li> </ul>	<ul style="list-style-type: none"> <li>Social and cultural norms and values</li> <li>National and cultural identity and nationalism</li> <li>Gender and social inequalities</li> <li>Stigmatisation and marginalisation of social groups</li> <li>Civil society and societal infrastructure</li> </ul>
Economic	<ul style="list-style-type: none"> <li>Cost of living and health care</li> <li>Income generation</li> <li>Informal local economies</li> <li>Economic enterprise</li> </ul>	<ul style="list-style-type: none"> <li>Economic regulation and development</li> <li>Public and health service revenue and spend</li> <li>Employment norms and practices</li> </ul>
Policy	<ul style="list-style-type: none"> <li>Distribution of syringes</li> <li>Distribution of condoms</li> <li>City regulations</li> </ul>	<ul style="list-style-type: none"> <li>Policies governing trade, trafficking, and migration</li> <li>Laws governing drug use and syringe exchange</li> <li>Laws governing sex and consent</li> <li>Laws governing health, welfare, and citizen rights</li> </ul>

## Risk Environment: street level policing & injecting equipment

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- Street level policing practices - carriage of injecting equipment and place of injection Miller et al. (2008) - Mexico
- McAuley & Aston (2018) NESI, stop search & Naloxone?
- Crackdown on drug markets as 'success' of policing practices but negative public health consequences (Maher & Dixon 1999) -Australia
- Police officers as agents of change *OR* contributors to structural violence which diminish access to health services & safer drug use

# Drug Consumption Rooms



80 drug consumption facilities in Europe

Aims e.g. contact, access to treatment, reduce morbidity and mortality, reduce drug use in public & improve surrounding areas

	↓	↓	↓	↓
<b>Outcome objectives</b>	<p>To establish contact with hard-to-reach populations</p> <p>To identify and refer clients needing medical care</p>	<p>To reduce immediate risks related to drug consumption</p> <p>To reduce morbidity and mortality</p> <p>To stabilise and promote clients' health</p> <p>To reduce public nuisance</p>		<p>To increase client awareness of treatment options and promote clients' service access</p> <p>To increase chances that client will accept a referral to treatment</p>
	↓	↓		↓
	<p>Survival</p> <p>Increased social integration</p>			

- Effective? Referral to treatment, mortality & morbidity
- Impact on communities & implications for street level policing?



## DCRs: Public injecting & used syringes?

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- Consistent use of supervised injecting facility... safe disposal & less public injecting (Stoltx et al. 2007) -Canada
- Consumption room card holders use drugs less often in public (van der Poel et al. 2003) -Netherlands
- Supervised consumption rooms as 'most frequent location' for drug use (Zurhold et al. 2001) -Hamburg
- People who use DCRs tend to be people who would otherwise inject in public
- Fourfold decrease in number of discarded syringes in Barcelona (EMCDDA 2018)

# DCRs: Drug-related property & violent crime?

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- No evidence led to increase in theft or 'drug-related' loitering (Freeman et al. 2005) –Australia
- No marked increase in drug trafficking, assaults and robbery (Wood et al. 2006) –Vancouver
- Did not affect level of crime (Benninghoff et al. 2003) – Geneva
- Five Dutch studies showed positive effects on reducing public nuisance (Biesma et al. 1999; Biesma & Bielemann 1998a, 1998b, 1998c; Warner, 1997)
- DCRs & public crack smoking, encounters with police & reduction of public disorder (DeBeck 2011) -Canada

# DCRs & police?

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- Role of police in **introduction** of DCRS: to reduce public nuisance in Netherlands (Hendrick, 2004); responding to complaints re public drug use in Germany
- **How** facilities are run: medical & *exempt from police intervention* in Switzerland; possession tolerated in DCR e.g. Netherlands –*work with police* to prevent criminal offences in vicinity? *Regular patrols* to keep nuisance levels low?
- **Way** DCRS are used and accessed: *police controls can dramatically reduce access* to DCR (Jacob et al. 1999 –Hannover); Crackdowns & nuisance problems & police action (Poschadel et al., 2003)
- **Effectiveness** of DCRs & **community perceptions**: *regular patrols*; police perception & businesses *felt safer* inner city area & prevent open drug scene (Spreyermann & Willen, 2002)

# Implications for policing

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- Reduce Risk Environment
- In NE /DCR context increase patrols but reduce enforcement in surrounding area [But Heroin Assisted Treatment preferable?]
- Short-term: consider research evidence? mediate negative impacts? RPWs? Facilitate diversion?
- Medium term: engage frontline officers and communities in discussions? Drive forward change with partners?

# Within the current context....

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*‘Harm reduction policing engages communities in a manner that builds trust, addresses the needs of individuals using drugs, and reduces adverse effects of drugs and drug enforcement. This involves recognizing that people unable or unwilling to abstain from illicit drug use can still make positive choices to protect their own health, the health of their families, or their communities; and that police can work with other community or health actors to help facilitate this outcome and advance public safety.’*

Open Society Foundations, 2018

# Concluding thoughts

- Public safety and wellbeing; police powers & human rights of PWUD
- ‘This drug thing, this ain’t police work.....’ (The Wire)
- Enforcement of drug laws as iatrogenic?
- Policing challenges:
  - legal context
  - political independence
- Collaborative Leadership (partners -including Crown Office)
- Informed public debate
- Alternative policy context: Decriminalisation? Legalisation?

# However...brave(r) decisions have bigger impact

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## ➤ Drug Use Decriminalisation

- Portugal: number incarcerated for drug offences fallen by 43%, 3,863 1999, 2,208 2016 (DPA, 2018); DRD=38 (10M population)
- Cannabis decriminalisation/ legalisation [5 US States] (Hall and Lynskey 2016) substantial declines in marijuana possession arrests. Unexpected drops in marijuana felony arrests in all states with data
- Marijuana decriminalization in California has not resulted in harmful consequences for teenagers e.g. crime, drug overdose, driving under the influence, or school dropout. Showed improvements in all risk areas
- To change practice/culture not just policy use organizational justice (Aston et al. 2019)

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### ANY QUESTIONS?

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