MAKING DANGEROUS SAFER.



Annual Review.



### **OUR PURPOSE:**

Transform protects people by bringing about the legal regulation of drugs.

## **OUR GOAL:**

Convince governments, authorities and the public worldwide that regulation can protect lives through – expertise, research, evidence and education.

### REPORT FROM THE CHAIR.

This year we expressed gratitude to Roger Golland, who chaired our board for some years with both determination and diplomacy. I was lucky to take his place during an exciting year for Transform.



There is rapidly growing interest in Transform's policy recommendations – the highlight being advising the Canadian government on cannabis regulation. We expect this work to grow as more countries follow their lead in the coming years. Here in the UK, Transform is assisting police, councils and health services in their development of local schemes to divert problem drug users towards health solutions. It is rewarding to see real change happening on the ground at last that will save lives.

Transform's visibility in the media continues to grow. Anyone's Child plays a major part in this, with powerful testimony from families impacted by current drug law, both here and in Mexico, Kenya, Belgium and Canada. A Newsnight interview with Anne-Marie Cockburn of Anyone's Child, who lost her daughter to ecstasy, got over 10 million Facebook views. We are immensely grateful to all the Anyone's Child members for their determination and courage.

This year we took part in the annual UN Commission on Narcotic Drugs and were commissioned as technical coordinator for a ground-breaking report on regulation by the Global Commission on Drug Policy. This is part of a definite trend – regulating drugs is becoming part of the mainstream policy conversation, not least because of the work of Transform.

Our staff perform miracles on a shoestring, and we are immensely grateful to them. We wouldn't be here without the generosity of individual donors as well as a number of funding agencies, and we send them all our heartfelt thanks.

Jane Hickman.

### ANYONE'S CHILD: FAMILIES FOR SAFER DRUG CONTROL.

Over the past year, Anyone's Child has continued to empower families who have suffered because of failed drug policies, to engage with new audiences and to influence politicians about the urgent need for drug policy reform. The network has grown to include a core group of remarkable families supported by a wider activist community, all of whom are active and committed to campaigning for legal regulation.

Using powerful story-led narratives to win over hearts and minds and challenge the deeply entrenched stigma around drugs, Anyone's Child has proven able to impact the debate at both a grassroots level and in high-level political environments. Highlights from the past year include:

- Anyone's Child was mentioned in two UK Parliamentary debates, with individual stories being used to illustrate how drug policy must change;
- Anyone's Child makes conversations about drug policy reform more accessible to the wider public. We have held moving and memorable public events in Bristol, London, Glasgow, Wrexham, Belfast, The Isle of Man, Edinburgh, Taunton, Worthing and Weston-super-Mare;
- Family members spoke at Police and Crime Commissioner (PCC) conferences and other events, working directly with key stakeholders to support calls for reform;
- The campaign has attracted unprecedented national media attention across the political spectrum from the Daily Mail to the Guardian, Reveal and Closer magazines, Sky News, BBC Newsnight, and Good Morning Britain;
- We trained activists in Bristol and London and many have formed an activist group that meets quarterly and can be mobilised for future events and campaigning;
- We embarked on extensive letter writing campaigns, e.g. more than 100 letters have been sent by activists to their individual MPs, many of which have resulted in replies and positive meetings.





"There can be few laws more gobsmackingly stupid – and scarily dangerous – than our current drugs policy. Like anyone with children, I want to protect mine, which is why I wholeheartedly support Anyone's Child. What they are campaigning for is self-evidently sensible, and the sooner we can help them achieve it the safer all our children will be."

Decca Aitkenhead, The Guardian, Anyone's Child Patron.



### **ANYONE'S CHILD: INTERNATIONAL.**

Anyone's Child: Families for Safer Drug Control now includes four new groups of families in Kenya, Belgium, Canada and Mexico, whose real-life stories illustrate the combined human cost of drug prohibition from production and supply through to use.

Some of these families united to speak at our side-event at the annual UN Commission on Narcotic Drugs. This heart-rending session brought people impacted by current drug policy face-to-face with policymakers, breaking through the dry, policy environment at the UN which is otherwise dehumanised and can seem out of touch with reality.

Anyone's Child Kenya was officially launched at an event in Mombasa. Three families were interviewed, along with a police officer, a bishop in his church, a judge, drug users and human rights advocates. Anyone's Child Mexico – an interactive documentary project - was also launched this year, to great acclaim, as part of a partnership with the University of Bristol. These inspiring international chapters of Anyone's Child offer a unique opportunity to hear from families on the front-line of the drug war in Mexico and Kenya. If we don't listen, we can't hope to understand how people are affected.

Anyone's Child collaborated with LEAP UK and their regular podcast "Stop and Search" to discuss what the UK can learn from Canada. A strong turnout watched Anne-Marie Cockburn and Canadian mother, Donna May, who both explained why they think that legally regulated

drugs would have protected their daughters, and would keep other young people safe.





"I support the Anyone's Child project because all of the policies, papers, acts and decisions only matter if it can be positively translated into real personal stories. Anyone's Child is a project that in my view should reach a very wide audience and that is why we sponsored their side events on the UN grounds and we would like to continue to support them on other occasions."

Jindřich Vobořil, The Czech Republic Drug Tsar, Anyone's Child Patron.





### **UK WORK.**

Our UK work continues in tandem with Anyone's Child, connecting and supporting key stakeholders to deliver worthwhile innovations on a regional level, while changing the national debate. These include Police and Crime Commissioners (PCC), police, local politicians and MPs, health practitioners, treatment groups, festival organisers and other NGOs. Relationships have been strengthened and new partnerships have been formed, as Transform nurtures the ever-growing movement for drug policy reform in the UK. Some highlights include:

### Local Reforms.

- The remarkable Anyone's Child families framed summits and public meetings, providing powerful media cover for politicians. We helped organise Durham PCC's national drug policy symposium including arranging Ruth Dreifuss, ex-president of Switzerland, as keynote speaker, and Rose of Anyone's Child. The Durham PCC has since backed legal regulation of cannabis, and safer drug consumption rooms;
- Transform arranged visits for PCCs (and the BBC) to drug consumption rooms, heroin prescribing clinics and city-centre drug safety testing in Switzerland, where they met with local police. This led to formal reports and recommendations, a flurry of national and local media, joint letters rebutting the Home Office, and steps towards real local reforms in the UK:
- We provided consultancy and connected multiple police forces to develop 'diversion schemes' – a system where those caught with drugs are diverted from prosecution into education or treatment programmes, and don't get a criminal record;
- Much energy has been directed towards stimulating conversation around drug policy reform in Bristol. Transform organised 'Bristol Takes Drugs Seriously,' an exciting week of public events including a theatre production, a book launch, a series of local media stories and a huge mural featuring Anyone's Child family members.



"I support the need to reform our current drug laws to reduce the ever increasing numbers of people dying from drug related reasons. If Transform were not available I would struggle to continue to be an influential advocate for drug policy reform."

Arfon Jones, Police and Crime Commissioner for North Wales.



### **UK WORK CONTINUED.**

### Partnership.

- Transform has been working with the Royal Society for Public Health and was delighted to support and attend a House of Commons event in conjunction with the British Medical Journal and the Faculty of Public Health to call for sign up to a decriminalisation position;
- As prohibitionist drug policies continue to undermine development across the world, Transform has partnered with Health Poverty Action to raise awareness of this issue both in the UK and abroad. This partnership complements the work of both organisations to better protect poor and marginalised people;
- Transform has been forming increasingly positive connections with treatment groups and service providers. Our partnership with Recovering Justice was cemented when we jointly trained their activists on drug policy reform advocacy;
- We also supported the Taxpayers' Alliance and the Institute for Economic Affairs, as they prepared reports calling for cannabis to be legalised and regulated.

### Parliamentary.

- Increasingly, we are meeting with and briefing politicians across parties, including Green, Lib Dem, Labour, Conservatives, Plaid Cymru and SNP;
- Transform is developing positive relationships with a number of supportive MPs. We have been working closely with Thangam Debbonaire MP and Jeff Smith MP in advance of the launch of the Labour Campaign for Drug Policy Reform, and also with Crispin Blunt MP to support reform in the Conservative party;
- When the government debated their refreshed drug strategy Transform was with Anne-Marie Cockburn at the House of Commons;
- We have trained and provide ongoing support to activists to engage with their MPs. As a result, increasing pressure is being put on government from Anyone's Child families and our growing network of dedicated activists, including Transform staff.





"The last few years has seen an extraordinary shift in thinking about this issue with increasingly mainstream figures arguing we should consider legalisation as an alternative to what they regard as the failure of law-enforcement strategy."

Mark Easton, BBC Home Affairs Editor.





Follow

It's high time we decriminalised drugs. Help those with problems rather than make them criminals. Give tax revenue to NHS. Ticketyboo.





### **MEDIA & ONLINE.**

Transform's profile online and in print media has continued to grow during 2017 and 2018, and we retain one of the largest followings of any drug policy organisation in the world. The media relies on both Transform and the Anyone's Child families for expert comment, and we have strengthened our reputation for producing engaging and ground-breaking news stories.

Transform was quoted in over 250 articles, and was the first to break the story that the UK is the biggest exporter of medical cannabis - despite the government saying that it "has no proven medical use". This led to accusations of hypocrisy on the part of the Drugs Minister, Victoria Atkins, who was forced to stop commenting on any cannabis related issues because her husband's company, British Sugar, grows cannabis in the UK for GW Pharmaceuticals to make a drug to treat epilepsy.

Canada's move to legally regulate cannabis and Transform's role as advisor to their government also led to widespread quotes in international media.

Our Anyone's Child campaign continues to reach new audiences and influence the debate through sensitive reporting in mainstream media. Anne-Marie Cockburn's interview on BBC Newsnight has been viewed a staggering 10 million times on Facebook! Anyone's Child events across the country have enabled us to make connections with the local regional press for this first time, and major stories are often then picked up by national media outlets.

Our imaginative and creative use of imagery and infographics continues to underpin our media impact. This is being further boosted by using visually stunning mapping technologies to create "needle maps" of discarded syringes to support our work to encourage reforms at local levels.



# **Mail**Online

Cannabis is set to be legalised in Antigua and Barbuda, as Prime Minister says 'racist' laws that banned it damaged the Rastafarian community



UK is the world's biggest exporter of legal cocaine and heroin, show new figures



# **37,000 Twitter Followers.**

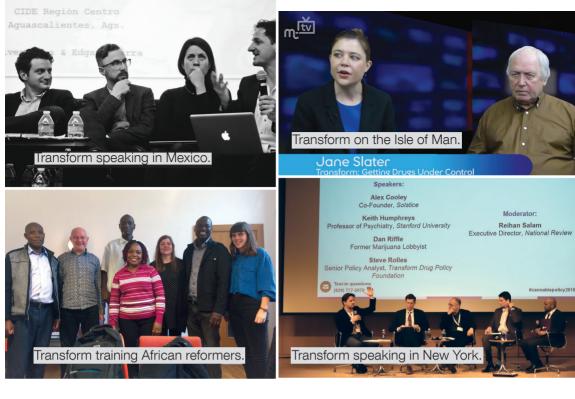
- 2.5 million Facebook users reached.
- +100,000 visits to our blog.



### INTERNATIONAL WORK.

Transform has continued to cement its international reputation as a key voice in the rapidly evolving debate on drug regulation, building on the growing momentum for change around the world as reform becomes a reality. We have continued to produce highly regarded publications, many of which have been translated into multiple languages, and have participated as key speakers in an array of international conferences. When governments are ready to explore reform, Transform's unparalleled experience and expertise is ready to help facilitate the process. Some highlights from this year:

- Building on previous consultations with the Canadian government-appointed taskforce on cannabis regulation, Transform has been working with the Quebec Government and health agencies to help develop their cannabis regulation model;
- We participated in a meeting of international experts in New York with the Social Science Research Council to develop a report on how to better align drug policy evaluation with the Sustainable Development Goals; and at the Center for Research and Teaching in Economics (CIDE) in Mexico, also looking at how to more effectively evaluate drug policy;
- Transform has taken the drug reform agenda around the world; informing moves towards decriminalisation in Ghana, training policy advocates from across West Africa, supporting the push for cannabis regulation in Denmark, giving evidence to parliamentary inquiries in Australia, as well as supporting a range of reform initiatives in countries as diverse as Belgium, Ireland, Norway, Antigua, South Africa and New Zealand.



"The Global Commission on Drug Policy commends the progressive and high quality contributions of Transform to the wider international debate on ending the war on drugs."

The Global Commission on Drug Policy.



### ON THE UN STAGE.

The 2016 UN General Assembly Special Session on drugs proved to be a landmark moment in the international debate. While UN level change can be slow and frustrating, this event signaled a fundamental shift of the international discourse away from repressive zero tolerance thinking towards health, human rights and development based approaches. Work is now focusing on making sure this progress is reflected in the UN High level meeting in 2019, when the next ten year international strategy will be agreed.

As we have now done for over a decade, Transform used its ECOSOC consultative status to take a team to the annual UN Commission on Narcotic Drugs in Vienna to speak, organise events and document the process with the International Drug Policy Consortium.

Our Anyone's Child side event was sponsored by the Czech government and featured speakers from Mexico, Belgium and the Philippines, while our partner MUCD was on the official Mexican delegation. Other side events with Transform participation included the first on drug safety testing at festivals (attended by the Canadian minister of health), various high-level meetings with officials (including an in-depth meeting with the Canadian delegation on UN treaty reform and cannabis legalisation) and a meeting with the US-based Social Science Research Council on their drug policy evaluation/indicators project.



### LATIN AMERICA PROGRAMME.

Transform has continued to partner with México Unido Contra La Delincuencia (MUCD) in Mexico City, as part of a highly successful ongoing knowledge transfer. Transform supports their work by introducing expertise and innovation. We also hosted the MUCD programme coordinator in the UK, where she spoke at a Bristol University event on Latin America.

In return, we have improved our knowledge of Latin America in general and Mexico specifically, and have strong regional partners for disseminating information, convening advocacy and attracting media attention. We have also produced briefings on specific topics of particular use to MUCD, such as decarceration.

Realisation of the power of testimony has seen this partnership extended to include the Anyone's Child Mexico campaign. Given the huge death toll in Mexico's drug wars, we hope that more and more families will speak out using our phoneline, and that policymakers in Mexico will listen and make change a reality. All of the families involved have left their testimonies, out of desperation, to change global drug laws and to prevent others from suffering as they have. The Spanish language version of this project will be launched in partnership with MUCD in Mexico City in the autumn



### **PUBLICATIONS.**

### Local reform briefings.

We have produced a series of two-page briefings supporting our local reform work in direct response to policymakers' requests. These set out our main ideas in an accessible way and are all available as PDFs to download:

- Decriminalisation of people who use drugs: Reducing harm, improving health, helping the vulnerable and releasing resources
- Drug Consumption Rooms: Saving lives, making communities safer
- Heroin Assisted Treatment (HAT): Saving lives, improving health, reducing crime
- Drug Safety Testing: Saving lives, increasing awareness

# Legalising Drugs – The Key To Ending The War.

Transform Senior Policy Analyst, Steve Rolles, authored a book – 'Legalising Drugs – The Key To Ending The War' – that draws heavily on Transform's previous publications – but is published by New Internationalist as part of their popular series on global issues. It explains why we urgently need to legalise drugs, and how to do it.



Transform has continued to participate in the 'Multi Criteria Decision Analysis' project in conjunction with Professor David Nutt's 'DrugScience' committee (of which Steve Rolles is a member). This research considers how different policy models impact on drug-related harms, and is funded by the Norwegian Research Council. A research paper based on the study has been published in the International Journal of Drug Policy. A second paper focusing on the modelling of heroin policy options was presented at an academic conference in Denmark.







## **Drug Consumption Rooms:**Saving lives, making communities safer

"fanter (Necourse DCK) area lines. It brongsts have I UK drug related death rates are among the highest in Europe, and are increasing dramatically - reaching record levels for these years in a row. "Drug Consumption Rooms IDCRs) significantly reduce fast overdoses and needle sharing that can lead to infections including HIV and hepatitis; high risk public



What is a Drug Consumption Roos

heir own pre-obtained drugs, under medical supersision. Many also allow smokling of drugs (including seroin and crack coaine), and so are called illug omouption rooms. They can be in permanent clinics noble ambalance skyle units or temporary structures hey typically provide people who use drugs with:

- sterile injecting equipment a hygienic space to use drugs under medical sup
- vision that they have bought illicitly primary medical care, and emergency care in the event of ovendose connecting services and referral to social and
- The UK government's official advisors the Advisory Council on the Misuse of Drugs (ACMD) - supports the setting up of drug consumption recens.<sup>1</sup>

Where are DCRs in operation?

The first professionally staffed service where drug njection was accepted was in the Netherlands in the



#### re DCRs Effective?

The evidence is clear: DCIs reduce needle sharing, that can lead to transmission of HIV and hapstitis, expected by people, desire in Carada will given the research people, distant in Carada will given the research people, distant in Carada will given the research openion of the research people, and the research openion of the research openion openion of the research openion openion of the research openion openion openion of the research openion openion openion of the research openion openi



#### TRANSFORM

Decriminalisation of people who use drugs: Reducing harm, improving health, helping the vulnerable and releasing resources

"Criminalisation and incarceration for minor, non-violent offences worsen problems to illicit drug use, such as social inequality, violence and infection. Possession and u should be decriminalised and health approaches prioritised."

#### that is "decriminalising people who use drugs"

"Decrinioalloction" rezens removing crinzinal penaltics for people caught possessing lilegal days got their own see, so it no begar leads to a clinical record, but may still carry a civil penalty - e.g. civil fisces, sunsings or treatment or doculation referrals, force call it illnession from the crininal justice system, usually ison a healthbased response. Decrinimalisation can involve changing

with the exception of growing cantable for personal use or sharing drugs among friends without any pools. Where has decriminalisation been implemented? Decriminalisation is permitted under international law but can vary hugely in the detail. Around 30 countries and over 20 US states have decriminalised possession

Decrininalisation is permitted under international line but can vary happig in the detail, Around 30 counties and oner 20 US states have decrininalised passession of sortall quantities of cannoble or all drugs. In the US Dauthans, and Aroun and Someroset police authorities are piloting "diversion acheous" which have a similar effort, as are other forces informally:

gramme' those caught with small amounts of any drug for the first time can choose the criminal justice rosts, or a drug education course. Durham Police: Those on the Checkrodat Pro-

#### Reducing deaths and dise

ments, needle-sharing and risky, rushed i well as making it hander to provide medic measures to reduce harm. This has fueled be deaths and epidemics of HIV and hepatit to.

#### RANSFORM

#### Heroin Assisted Treatment (HAT): Saving lives, improving health, reducing crime

"The Modern Crime Prevention Strategy...highlighted the value of supervised injectable dismosphine/herois in reducing crime... Police and Crime Commissioners and police for es withing to explore issues relating to berois unsisted treatment are encouraged to engage with the relevant local authorities which commission drug and alcohol treatment in their

Prescribing heroin for some dependent users, usually for use in clinics under medical supervision, is called heroin assisted treatment DAT). The gractice is well established, already legal under UK fard international law, and has a long history, including in the U Wetzerland. Commary, the Netherlands and Canada.

resisting this and hequatics, but pink street injectice, fundaming driven acquisition crims and street services and discussion fembers, while increasing their open and relation in the street of the thouse of the street of the thouse of the street of the Contrad government funding should be provided to support MAT for patients for whom

#### What is Heroin Assisted Treatment?

differs from the old "Betäsh System" (will in place for around 100 people in the UK) in that rather than being given 'laite home' herein prescriptions, patients attend a clinic once or twice a day, and use their prescriptions or site, under medical supervision.

The first Swiss pilot HAT clinics opened in 1994. In 1997, the federal government approved a large-scale expansion, aimed at 1956 of the nation featurand 38,000 hersin users, specifically loop-ferm users who had not succeeded with other treatments. Other countries followed sait, with the UK upening three pilot.

Approveding common facility is ben derivated.

HAT drivers the health benefits of prescribed supplyheroin of known strength, fore from contaminants and adulterants, used with clean injecting equipment - but combined with the benefits of supervised use in a safe and hygienic venue. So HAT distins prevent everylate



### **UPCOMING WORK.**

A real sense of change is in the air, energising the reform movement as we edge nearer to the tipping point. In the next year, Transform will be creating some very exciting new work:

### UK work.

Momentum for drug policy reform in the UK is building fast. As a swathe of local reforms are now happening in UK cities, Transform will continue to connect and support stakeholders to deliver these initiatives. For example, city-centre drug safety testing is happening in Bristol for the first time, several police forces plan to start diversion schemes, and a heroin prescribing clinic will soon open in Glasgow.

At the same time, pressure within Parliament is growing, with groups of politicians from all major parties advocating drug policy reform, and with Transform's support, The Labour Campaign for Drug Policy Reform is launching.

### Anyone's Child.

We will continue to build our network of grassroots activists who can speak truth to power, attract positive mainstream media and put pressure on government. We have a number of events in the pipeline which we hope will energise and empower this exceptional group of people. These include a mass lobby of Parliament on UN World Drug Day to demonstrate to MPs that the public supports reform, as well as a number of regional public events.

### International.

Transform will be actively participating in the build up to the UN's review of its ten year drugs strategy in 2019, working closely with an international network of NGOs. Our work in Mexico in collaboration with MUCD continues with the upcoming launch of 'Anyone's Child Mexico', and its accompanying i-doc and phone line to collect personal

testimonies. We will also be in Mexico City for the international launch of the upcoming Global Commission on Drug Policy report on regulation. Transform was commissioned as technical coordinator for this project.

Our advisory work in Canada continues, and a series of events are planned to take the regulation debate beyond cannabis alone. We will also be supporting Canada and any other country looking at national level reform as they negotiate how to do this, given the current UN treaty system.

### Branding/Website.

2018-19 will see the launch of Transform's new website, with a brand new look and the concept of 'Making Dangerous Safer' – regulation being the obvious, tried and tested route to safer products. This will draw our successful campaigns, Anyone's Child and Count the Costs closer together with the main body of Transform's work. The website will be open to all – accessible, participative and positive. After all, we are part of the change we want to see.







### FINANCES.

This table contains reporting of our finances over 2 years (2016/17 and 2017/18)

	Unrestricted 2018.	Restricted 2018.	Total 2018.	Total 2017.
Income grants & donations.	£124,686	£153,862	£278,548	£404,879
Expenditure on charitable objects.	£165,230	£125,237	£290,467	£280,385
Expenditure on Admin & Management *.	£14,323		£14,323	£12,259
Total Expenditure.	£179,553	£125,237	£304,790	£292,644
Less Restricted Funds carried forward.		£73,165	£73,165	£42,826
Net Income/Deficit for the Year.			£(16,689)	£120,407
* as a percentage of total costs %.			4.70%	4.19%
Reserves (according to reserves policy).			£131,000	£110,000

### TRANSFORM FUNDERS.

Transform was delighted to receive funding from the John Ellerman Foundation and the Tudor Trust to support the work of Anyone's Child, and from the Bristol-based Nisbet Trust for our core work. We continue to be extremely grateful to our other funders – both trusts and generous individuals – who place their trust in us and our work:

The Open Society Foundations	Nisbet Trust
The Esmée Fairbairn Foundation	Brigstow Institute
Linnet Trust	Henry and Tim Hoare
Glass House Trust	Anton Bilton
Tudor Trust	Nicholas Lewis
John Ellerman Foundation	Clive Bates

We would also like to thank those who gave support in kind, including our advisory panel, our activists networks, Freddie Fellowes, David Woolway, Halo Media, Sally Hebeler, Jim Price, Lisa Collinson, Matthew Brown and Neil Woods. We are particularly grateful to our Anyone's Child patrons, Decca Aitkenhead, Jindřich Vobořil, Dr Christian Jesson and Dr Miriam Stoppard for their strong public support.

### THE TRANSFORM TEAM.

Nicky Saunter Chief Executive
Emma Caldwell Executive Assistant
Ben Campbell Communications Officer
Danny Kushlick Head of External Affairs
Martin Powell Head of Campaigns
Tania Ramírez Latin American Programme Coordinator
Steve Rolles Senior Policy Analyst
Mary Ryder Anyone's Child Coordinator
Lisa Sánchez Latin American Programme Manager
Jane Slater Head of Operations; Campaign Manager, Anyone's Child:
Families for Safer Drug Control

### TRANSFORM BOARD.

Jane Hickman (Chair) Howard Jacobs Ros Kennedy Claire Wilcox (Treasurer)

### **VOLUNTEERS.**

We've had lots of support from some amazing volunteers this year. Thank you so much to all of you! Extra special thanks to those of you who went out and fundraised for us in your own time – this helps raise awareness too, which is sorely needed still.

Thanks to The Anyone's Child Group and Tessa Rushton, Lily Margaroli, Liliana Spark, Robin Boardman, Jack Patterson, Calum Smith, Joshua Torrance, Lewis Taylor, Alice Chandler, Radhika Jani, and Nick Hodges. Apologies to anyone not named in person. We are so grateful for all your hard work.

A big thank you also to those who served as trustees during this period and gave so much of their time, experience and enthusiasm – John Whitaker, Elizabeth Whitehouse, Clive Bates and Roger Golland.



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