Scottish Drug Policy Reform: keeping vulnerable people safer by putting health first

We all want a fairer, healthier Scotland that protects the young and the vulnerable. But a better Scotland cannot exist while we have the highest drug death rates in Europe combined with entirely preventable outbreaks of HIV infection within our most vulnerable communities. The criminalisation and stigmatisation of people who use drugs prevents them from leading healthy lives. But the UK government has said it will not change its drugs policy – regardless of the evidence.

The Scottish Government has a unique opportunity to deliver innovative drug policy that would transform Scotland from the drug-death capital of Europe, to a beacon of compassionate, effective approaches.

A deadly snapshot - change is needed

- At a record 867 drug deaths in 2016, and 247 deaths per million people, Scotland has the highest drug death rate in Europe: 12 times the EU average, 42 times Portugal’s rate, and 4 times the rate in England and Wales.
- There is an HIV epidemic. Among Glasgow’s 500 street injecting population alone, there have been over 100 infections since 2015. In the 10 years prior to that, there were 10 infections per year in this group.
- This is a financial time-bomb - lifetime treatment costs for someone with HIV are £360k.

Scots are dying unnecessarily. They are being seen as collateral damage while successive UK Governments posture as ‘tough on drugs.’ Theresa May even says she wants more ‘War on Drugs,’ while the Home Secretary (Amber Rudd) echoes Richard Nixon by saying she aims to deliver a ‘drug-free society.’ This unachievable goal shows that she is not interested in evidence based policy. In fact, the Home Office’s own evaluations show record drug-related deaths, use not falling, and that enforcement generates violence, harms the vulnerable and their families, and doesn’t restrict supply.

An opportunity for Scotland to lead the way

Approaches to drugs are best tailored to the local situation, with decision-making transferred down to those who understand what is required. But whoever is in charge, drugs should be treated as a health not a criminal justice issue. Many aspects of Health are already devolved, but to make the changes in Scotland necessary to deliver a genuinely health-based approach, relevant drug policy powers under the Misuse of Drugs Act would need to be devolved to Holyrood.

However, there would be little point transferring powers unless the Scottish Government offers a progressive alternative, genuinely based on evidence of what works, including:

A comprehensive review

Immediately carry out a comprehensive review to ensure drugs are treated as a public health issue. This should include exploring innovative approaches taken in other countries such as decriminalising people who use drugs, and strict legal regulation. This wider review cannot wait until powers over drug policy are transferred to Holyrood. People are dying now.

Other Measures

In addition to fully funding treatment and harm reduction measures, the UK Government’s official Advisory Council on the Misuse of Drugs (ACMD) has recommended Drug Consumption Rooms, Heroin Assisted Treatment and Diversion as cost effective ways to save and improve lives and communities. But the UK Government has rejected, or refused to fund them.
Safer Drug Consumption Rooms (DCRs)

There are over 100 DCRs worldwide where people use their own illegal drugs under medical supervision. And the research - including from NHS Scotland - shows they prevent fatal overdoses, reduce blood borne infections and other health problems. They also reduce drug litter, street injecting and save money. The NHS in Glasgow has said it will not proceed with its proposed DCR without a firm legal foundation, to prevent it being open to challenge. The Lord Advocate said he could not provide a ‘prosecution waiver’. As a result, the relevant powers need to be devolved to Scotland, or the law changed at the UK level (something the UK Prime Minister has said will not happen).

Fund Heroin Assisted Treatment (HAT)

In a range of countries (most famously Switzerland), injectable heroin is legally prescribed for supervised use in clinics. Only people for whom other treatments haven’t worked are eligible. It reduces overdose deaths, HIV infections, use of illicit heroin, acquisitive crime and street dealing to fund use, stabilises users’ lives and improves communities, without increasing the number of people who use. UK trials found crimes per user fell from 40 to 13 per month, and switching heavy users of heroin to legal supplies cuts income for organised crime. It is backed by the UK Government - but they refuse to fund it.

This chart shows what has happened to drug deaths in Switzerland (pop. 10.3 million), compared with Scotland (pop. 5.3 million).

Diversion from the Criminal Justice System

The Home Office’s 2014 ‘International Comparators’ report found there was no link between severity of enforcement and use - i.e. criminalising people doesn’t stop them using drugs. Scotland already has ‘diversion from prosecution’ schemes, but far more could be done. Police Scotland should develop a formalised system that ‘diverts’ people caught with any drug for their own use, into education, treatment or other measures instead of prosecuting them. These schemes, already in place in parts of England, reduce reoffending, save police time, increase engagement with treatment, and don’t damage people’s life chances with a criminal record.

... what Scotland could deliver if Holyrood gets full drug policy powers

Proper Portuguese Style Decriminalisation

Portugal was suffering the kind of drug death rates, HIV infections, and open-street injecting found in Scotland. It changed the law to fully decriminalise people who use drugs (but not production or supply). People caught with drugs for their own use are sent to a ‘dissuasion committee’ that can suggest treatment, though most face no further action. Portugal ring fenced part of the money saved from not arresting or prosecuting people for education, prevention and treatment. Treating drug use as a health issue reduced the stigma preventing people seeking help. Youth drug use dropped, and people who use drugs became productive members of their community.

This chart shows what happened to HIV infections.

No Portuguese political party - right or left - now opposes these reforms.

Legal Regulation of Cannabis

A number of US states and Uruguay have legalised cannabis for recreational use. In the Netherlands no market for more dangerous synthetic cannabis products (‘Spice’) developed because people can buy cannabis. Canada’s Government-run cannabis outlets will open in 2018 with a specific aim of reducing access and harm to children, and depriving organised crime of money and power, while raising tax revenue for treatment and prevention. In future, Scotland could follow suit, and also deliver evidence-based medical cannabis, and look at legal regulation of other drugs.

For a fully referenced version please contact info@tdpf.org.uk