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Tackling Drugs  
in Scotland

# Action in Partnership



Scotland's objectives  
& action priorities



THE SCOTTISH OFFICE



# Scotland's objectives and action priorities

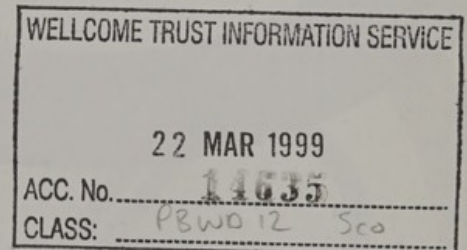


Scotland - like other countries round the world - faces a serious drug problem. The Government are determined to tackle it hard and head-on.

Organised crime demands an organised response. Communities under stress need immediate relief from drug dealers, and help with the poor conditions on which drug misuse thrives. People sucked deeply into drug misuse need help to mend their lives, and treatment that works.

Steps already in train will challenge the drugs culture. Steps in drugs information and education, community safety and social inclusion, rehabilitation programmes, testing and treatment, cutting prison drug use. A committed drive that will take us nearer the day when fewer young people start and keep taking drugs, the day when drug deaths, drugs crime and drug-borne illness fall.

The strategy is set against the background of the UK Drugs White Paper, *Tackling Drugs to Build a Better Britain*. It builds on the Ministerial Drugs Task Force report of 1994, which attracted



broad support, and the steps taken since 1997 to understand and tackle Scotland's drug problems more effectively. The Government's vision is of a Scotland whose people choose healthy lifestyles free from the harm of drug misuse. The strategy is underpinned by four key principles:

**Inclusion** Drug misuse occurs throughout society, but flourishes where individuals and communities feel marginalised from society and life choices are limited as a result of disadvantage. Deprivation is not the sole cause of drug misuse, but it is an important contributor. Tackling Scotland's drug problem has to be integrated with tackling social exclusion.

**Partnership** Co-ordinated and collective work on drug misuse achieves far more than independent and fragmented activity. The strategy recognises the benefits of partnership and encourages involvement at every level of implementation through suitable mechanisms and unifying action.

**Understanding** Scotland needs to base its anti-drugs work on well targeted and accurate research and information, which drives policies and programmes.

**Accountability** The strategy is clear about what results are required, and who should be charged with achieving them through a process of evaluation. The accountability structures are not ends but means to make a strong impact on Scotland's drugs problem.

Implementation will require patience and resolve. The goals are long term, like those set out for the UK in *Tackling Drugs to Build a Better Britain*. Drugs do not respect national boundaries any more than postcodes, so work in Scotland has to mesh with the other countries of the UK, and international efforts.

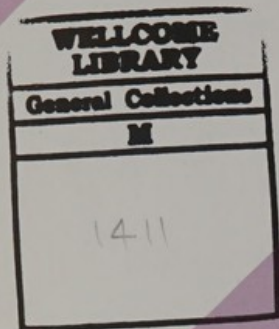
### Where are we now?

Drug misuse in Scotland is a complex and growing problem, involving both legal and illegal drugs. Drug misuse affects individuals, families, communities and every corner of society. The involvement of children and young people, the recent rise in the availability and misuse of heroin, the spread of hepatitis C, the untimely death of people using drugs and the associations with crime are of particular concern in Scotland.

There are, of course, inextricable links between drug misuse, smoking and alcohol misuse, which is recognised in Government action in these areas. The strategy focuses primarily on the misuse of illicit drugs.

### What's been done?

The Drugs Task Force report of 1994 provides an important part of the framework for tackling drug misuse in Scotland, advocating a multi-agency and multi-disciplinary approach to the problem with co-ordinated action at both national and local level. The recommendations in the report have been substantially implemented, including the establishment of Drug Action Teams (DATs) to act as focal points for local action. Action on implementation continues.



Since coming to office the Government have moved to strengthen the structures of the Task Force by improving accountability, and information is being made more readily available. A policy evaluation of DATs has been carried out and findings from the evaluation have been taken into account in framing the strategy.

Comprehensive drugs specific action is underway in all service areas - through school and community drug education and health promotion; treatment and care services (NHS, social work and the voluntary sector); alternatives to prosecution (criminal justice social work services); significant action by the police and other enforcement agencies; and specific work in Scottish prisons.

In addition more than £2 billion has already been committed to initiatives promoting social inclusion, which should impact on the drug misuse problem.

### What more needs to be done?

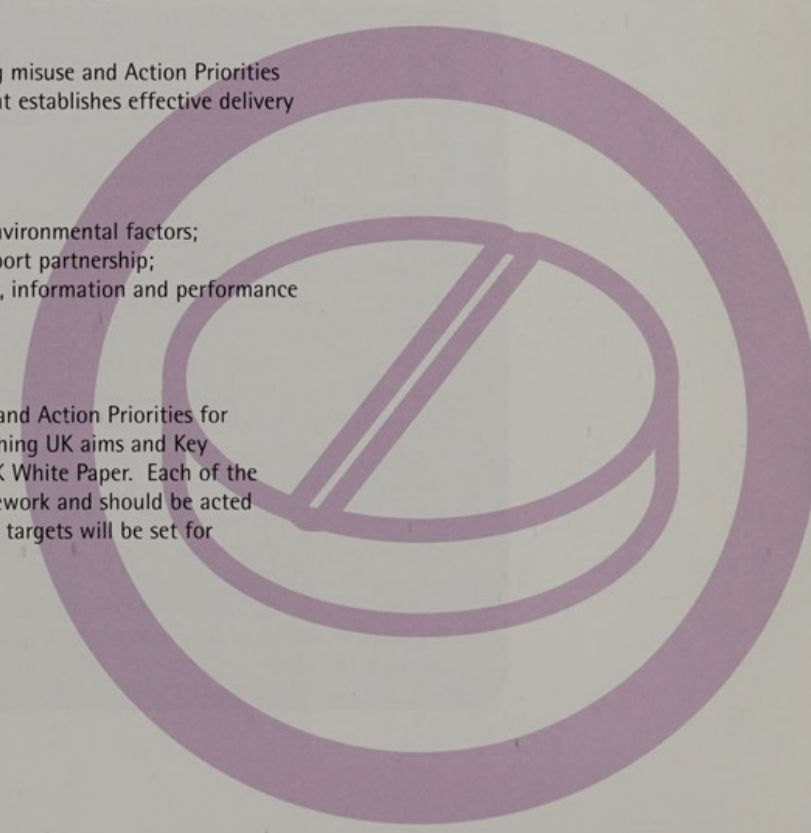
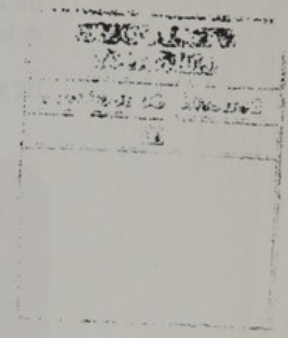
The Government have looked at Scotland's drug strategy against the new UK framework set out in Tackling Drugs to Build a Better Britain. The document *Tackling Drugs in Scotland: Action in Partnership* is the outcome. It draws together the themes of the Drugs Task Force, recent Scottish experience of the drug issue and the areas for further action described in the UK White Paper. The result - an enhanced drugs strategy for Scotland - is also Scotland's contribution to further development of the UK strategy by the UK Anti-Drugs Co-ordinator.

The document sets out Scotland's Objectives in tackling drug misuse and Action Priorities required to assist in meeting them. In addition, the document establishes effective delivery mechanisms which will:

- focus on results;
- monitor progress;
- treat drug misuse together with other social and environmental factors;
- make structural and accountability changes to support partnership;
- be long term; and bring together common research, information and performance bases.

### What the Government want to achieve

The Government have set the following national Objectives and Action Priorities for Scotland. The Objectives are aligned under the four overarching UK aims and Key Objectives agreed by Ministers in all four countries in the UK White Paper. Each of the four UK aims are embraced within Scotland's strategic framework and should be acted upon in the same way as Scotland's own Objectives. Specific targets will be set for agencies against each of the Objectives.





UK Aim (i) : Young People - To help young people resist drug misuse in order to achieve their full potential in society

UK Key Objective : Reduce proportion of people under 25 reporting use of illegal drugs in the last month and previous year

#### Scotland's Objectives

- Establish a consistent, co-ordinated, evidence-based approach to drug education, prevention and harm reduction which takes account of individual and community needs.
- Implement education strategies and initiatives and provide public information which increase knowledge and promote avoidance of drug misuse.
- Reduce the acceptability and incidence of drugs misuse among children and young people.
- Ensure that every school pupil in Scotland has effective drug education including accurate and up-to-date information on the consequences of drug misuse.
- Reduce the harm arising from drug misuse and in particular by encouraging positive alternative lifestyles.
- Increase access to information and services for vulnerable groups - including school excludees, truants, looked after children, young offenders, young homeless, very young children at risk of drug misuse and children of drug misusing parents.

#### Scotland's Action Priorities

- Develop a co-ordinated approach, involving local authorities, health boards, DATs and AMCCs, parents, community and young people themselves.
  - Every school to provide appropriate drug education for all pupils in line with national and education authority advice.\*
  - Every school and community education provider to have an effective welfare policy on the management of incidents of drug misuse.\*
  - Effective training of teachers and other professionals working with young people.
  - Further develop drug education using the mass media and in a range of settings including schools, the community and voluntary sector.
  - Ensure that health education has a secure place in all educational establishments and in revised advice on the curriculum and reflects good topical evidence of the most effective approaches.
  - Support the more general development of health promoting institutions, settings and sectors.
  - Promote the availability of attractive alternatives to drug misuse.
  - Support for children and young people in vulnerable situations, which includes assessment of the needs of children of drug misusing families, and ensuring that - where needed - services are provided to safeguard their welfare.
- \* The implementation of the recommendations to be made by the Schools Drug Safety Team will be a key step.

UK Aim (ii) : Communities - To protect our communities from drug related anti-social and criminal behaviour

UK Key Objective : Reduce levels of repeat offending amongst drug misusing offenders

#### Scotland's Objectives

- Strengthen and protect communities from drug related crime and the fear of drug related crime.
- Reduce the level of drug misuse in prisons.
- Develop constructive alternatives to prosecution and imprisonment for offences related to drug misuse problems.
- Support partnerships between professionals, local people and businesses in the development of local initiatives for tackling drug misuse.
- Promote drug awareness and the development of drug policies and health promotion within the workplace.
- Ensure that drug misuse is addressed within the wider context of area regeneration and social inclusion.

#### Scotland's Action Priorities

- Ensure cohesion between community planning, community safety partnerships, community care plans, children's service plans and input from Drug Action Teams.
- Increase the detection of drug related crime and refer offenders to specialist agencies (piloting of Drug Treatment and Testing Orders).
- Maximise community and multi-agency partnerships to highlight and tackle localised problems: identify drug dealers and take action to disrupt their activities and reduce the threat to communities.
- Continue development of alternatives to custody through measures - like Drug Treatment and Testing Orders - which provide access to assessment, information, and appropriate treatment programmes to stabilise drug use and reduce offending behaviour.
- Develop liaison and joint working between the prisons and community based services to ensure appropriate throughcare and integration of services for prisoners with drug related problems and their families.
- Enhance the detection of drivers under the influence of drugs, and underline the social unacceptability of such behaviour.
- Obtain clearer information about the link between drug use and crime and about the effectiveness of different enforcement strategies.

**UK Aim (iii) : Treatment - To enable people with drug problems to overcome them and live healthy and crime-free lives**

**UK Key Objective : Increase participation of problem drug misusers, including prisoners, in drug treatment programmes which have a positive impact on health and crime**

#### **Scotland's Objectives**

- Reduce the health risks to individuals and communities from drug misuse, and reduce related infectious diseases.
- Increase the number of drug misusers becoming and remaining drug free, and promote their inclusion in society.
- Reduce the incidence of injecting, sharing and polydrug misuse among drug misusers.
- Reduce the number of drug related deaths.
- Increase the proportion of drug misusers in contact with services, including those in prison, through the development of good, accessible, responsive and effective services.
- Reduce the numbers of drug misusers who have no quick access to appropriate treatment.

#### **Scotland's Action Priorities**

- Provide effective shared care arrangements and integrated drug misuse services, to include substitute prescribing of oral methadone, with proper project management linking together a comprehensive range of services and taking into account the views of users.
- Improve the range and quality of drug services for young people, particularly under 16s, and including, where appropriate, integrated services to assist early intervention with young misusers, particularly those with serious and sustained drug misuse problems.
- Support problem drug misusers in reviewing and changing their behaviour towards more positive lifestyles – linking them to appropriate accommodation, education and employment services.
- Provide a range of services to meet the assessed needs of drug misusers and their families, including improved and appropriately targeted services for women.
- Extend and develop detached and outreach work to help services make contact with people at an early stage in their drug misuse, taking account of young peoples' views, and improve prevention work aimed at vulnerable young people.
- Consider measures in place locally to prevent the spread of hepatitis C among drug injectors and prepare an agreed action plan embracing prevention, education and treatment, with the provision of needle exchanges and appropriately targeted information a central feature. Maintain efforts to contain the spread of HIV and hepatitis B viruses.
- Provide appropriate treatment for substance misuse withdrawal to all dependent drug misusers on their admission to hospital as an in-patient or when detained in prison (including treatment of withdrawal symptoms to improve retention in treatment programmes).
- Improve services to people with dual diagnosis of substance misuse and mental health problems, including an integrated psychiatric service for patients at serious risk of chronic self harm who also have a co-existing drug problem.
- Ensure that throughcare and aftercare arrangements for drug misusing prisoners are coherent, focused and tied in with community provision.

UK Aim (iv) : Availability - To stifle the availability of illegal drugs on our streets

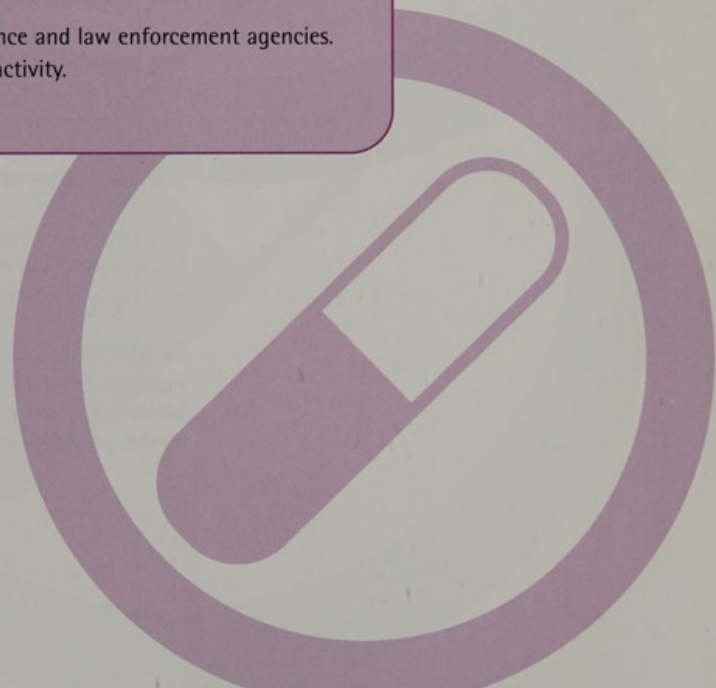
UK Key Objective : Reduce access to drugs amongst 5-16 year olds

#### Scotland's Objectives

- Reduce access to drugs amongst all age groups.
- Enforcement agencies to continue to identify, investigate and obtain evidence for the prosecution of persons engaged in drug trafficking and supply.
- Reduce the amount of drugs entering Scotland by targeting distribution networks and dismantling organised trafficking.
- Support constructive community involvement in reducing the availability of drugs locally.
- Reduce the availability of drugs in prisons.

#### Scotland's Action Priorities

- Reduce the growth, manufacture, importation and distribution of drugs for illicit use in Scotland, supporting international efforts to stem the flow of drugs into the UK.
- Reduce availability of drugs in the community, through enforcement activity to disrupt and arrest those involved in their supply and trafficking.
- Create an environment for communities to confidently and safely identify to the police those involved in the supply of illegal drugs.
- Ensure information and best practice are shared between intelligence and law enforcement agencies.
- Maximise the confiscation of assets associated with drug dealing activity.
- Develop arrest referral and drug diversion schemes.



## Partnership in delivering the strategy

The Government recognise that partnership driving forward the strategy is the key to its success. That partnership encompasses Government and agencies with an organisational interest in tackling drug misuse, but it should also involve those affected by its wide-spread consequences including parents, young people, business and users. Other agencies not specifically charged with tackling drug misuse are also substantially involved in Government initiatives which have a bearing on the drugs problem. All of these partners need to work together and contribute to the delivery of the overall vision, Scotland's Objectives and the strategy as a whole though their individual tasks.

The main mechanism for drawing together this work will be the Scottish Advisory Committee on Drug Misuse (SACDM), which is chaired by the Drugs Minister. SACDM will be the focus for co-ordination of the work and the key strategic tool for engaging Government departments and agencies in the implementation of the strategy.

SACDM will be supported in this work by a new operations sub-committee to monitor implementation of the strategy. This will co-ordinate action across agencies in support of implementation of the strategy, identify what individual agencies can bring to the table, oversee annual monitoring and encourage joint resourcing. The sub-committee will be the focal point for exchanges between the centre and DATs on progress in implementation of the strategy.

Support from the centre will be provided to DATs and individual agencies through a range of national organisations.

## Understanding – The role of information and research

Understanding is fundamental to effective action on drugs. The right information and research is the key.

The Government have taken steps to improve information on drugs. The Scottish Drug Misuse Information Strategy, launched in April 1998, establishes a structure for the long term availability of appropriate information in support of evidence based decision taking.

Research commissioned and undertaken so far has provided valuable information to support local and national efforts to tackle drug misuse. Future research effort should now be focused on the information needs of the drug strategy.

The core of the Government's research strategy for drugs will be an Annual Drug Misuse Research Programme, developed by a sub-committee of SACDM. The sub-committee will identify research priorities by reviewing existing work and by consulting DATs, ISD, local service providers and the research community.

## Paying for the strategy

Not enough is known about drugs spend. Whereas drug specific spending is relatively easy to identify, the generic resources used to support work by police officers, social workers, teachers and others are more difficult to pin down. The Government intend to map out just how much is being spent and by whom, especially by the key agencies which operate through the DATs at local level. DATs and individual agencies are expected to direct resources from budgets they influence towards drugs specific partnership work.

This work will be taken forward urgently, in consultation with the DAT Association, as part of the implementation of the strategy. The purpose is to provide a reliable basis on which the resources available for drug misuse work can be identified. The eventual aim should be for each DAT to assemble a Corporate Budget drawing on the resources available.

Each DAT partner is expected to include a costed plan for drugs within their service plans and this should be an important part of corporate planning by the DATs.

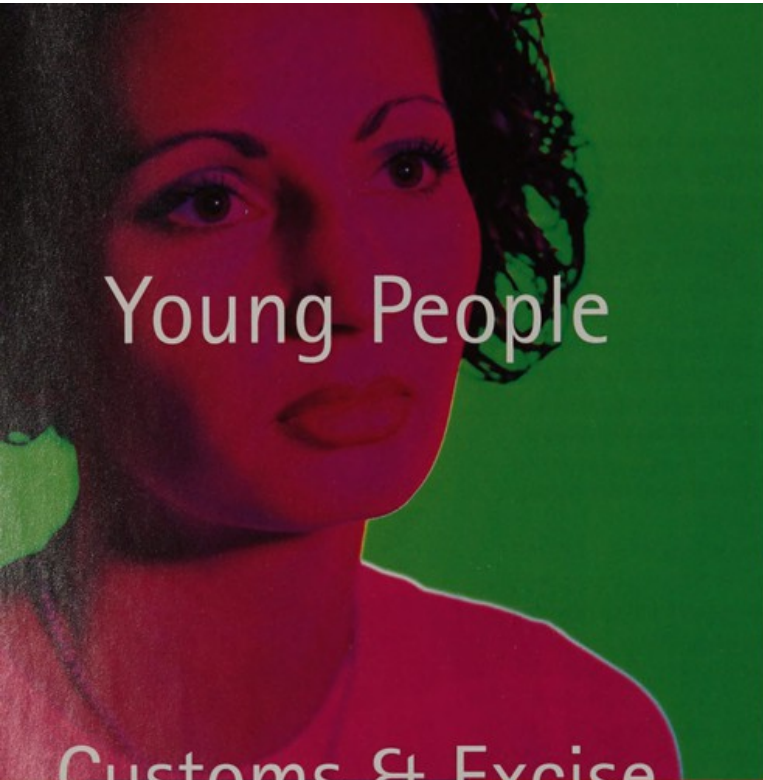
## Delivering the strategy

DATs are the focal point for local action on drug misuse. The Government look to them to lead effective joint working between Health Boards, local authorities, and the many other key agencies planning and providing services aimed at drug misuse.

DATs will be expected to prepare Annual Corporate Action Plans as an integral part of their strategic planning arrangements. The Plans should fully reflect and dovetail with other local planning arrangements and should be the basis for allocating resources locally in support of implementation of the strategy.

DATs and individual agencies should also set local objectives drawn down from the national objectives. These should be regarded as the key planning tool for binding together the efforts of all the local agencies towards the necessary achievement of precise outcomes.

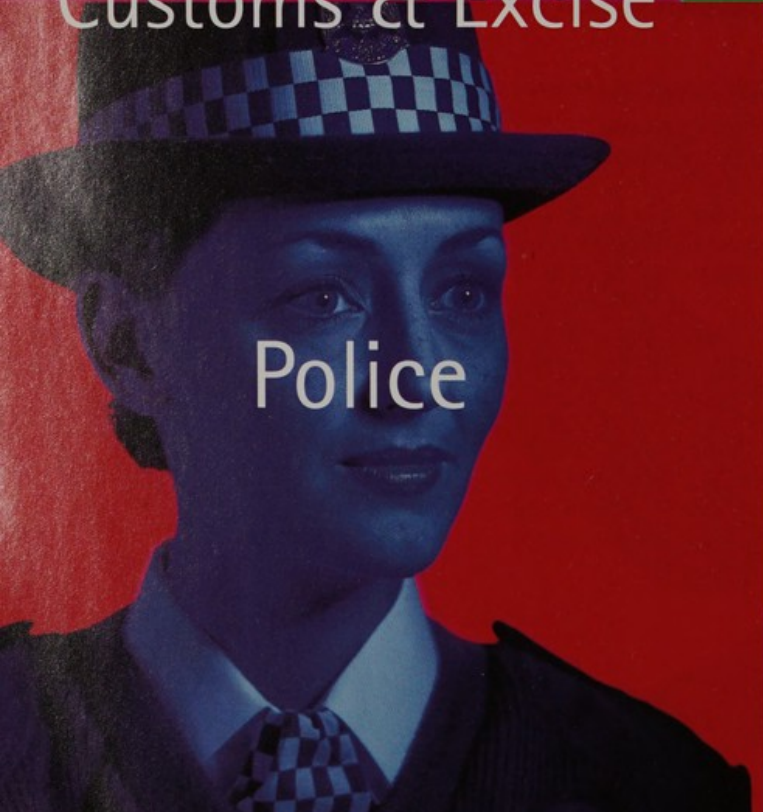
These arrangements will be driven forward through an Annual Drug Misuse Planning Cycle which will provide a structured basis for planning and monitoring implementation of the strategy, overseen by SACDM, and for approval by Ministers.



Young People



Voluntary Agencies



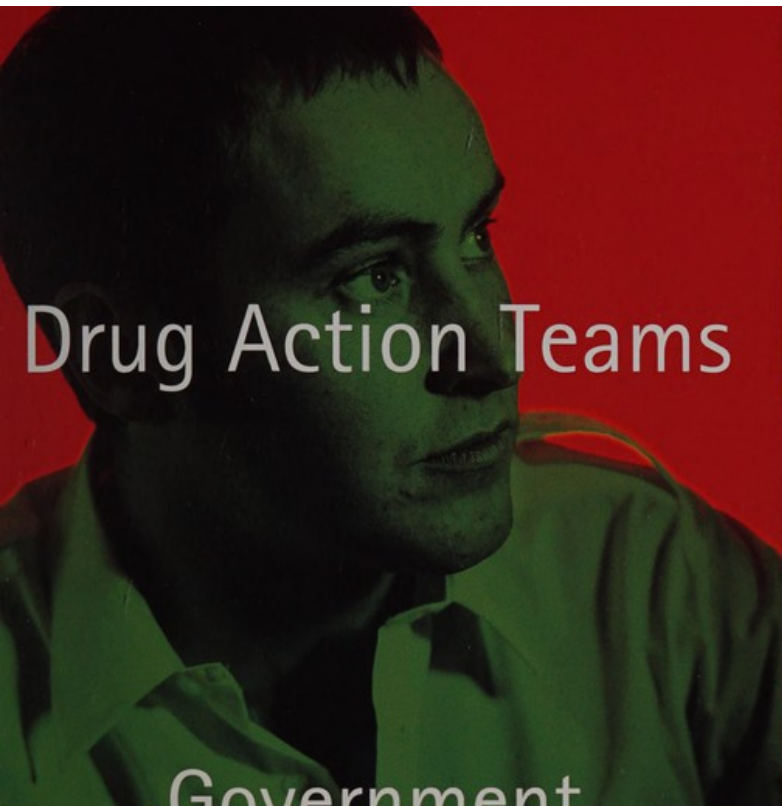
Customs & Excise

Police



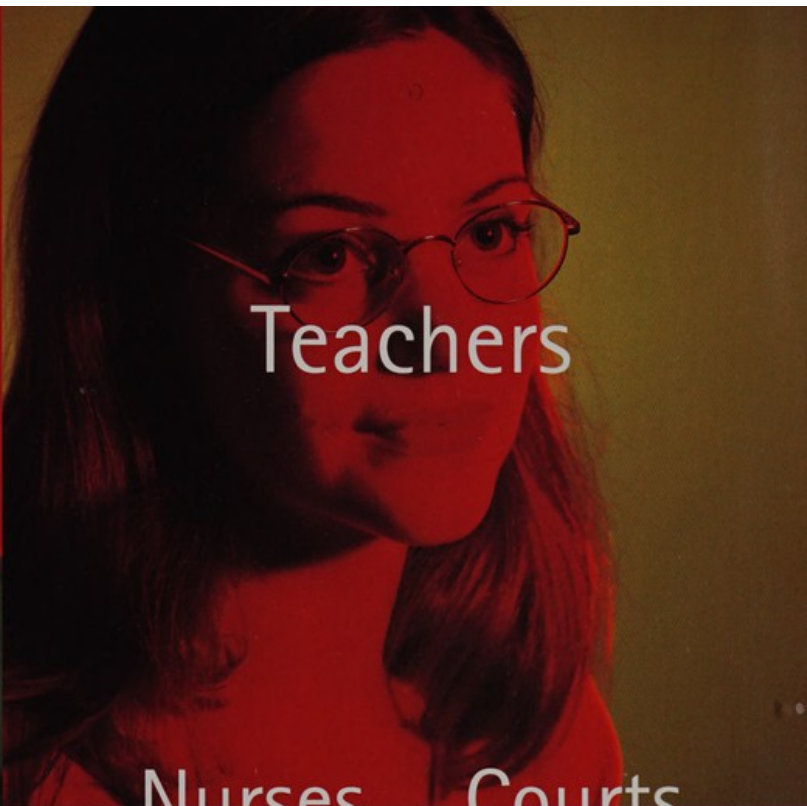
NHS Communities

Doctors



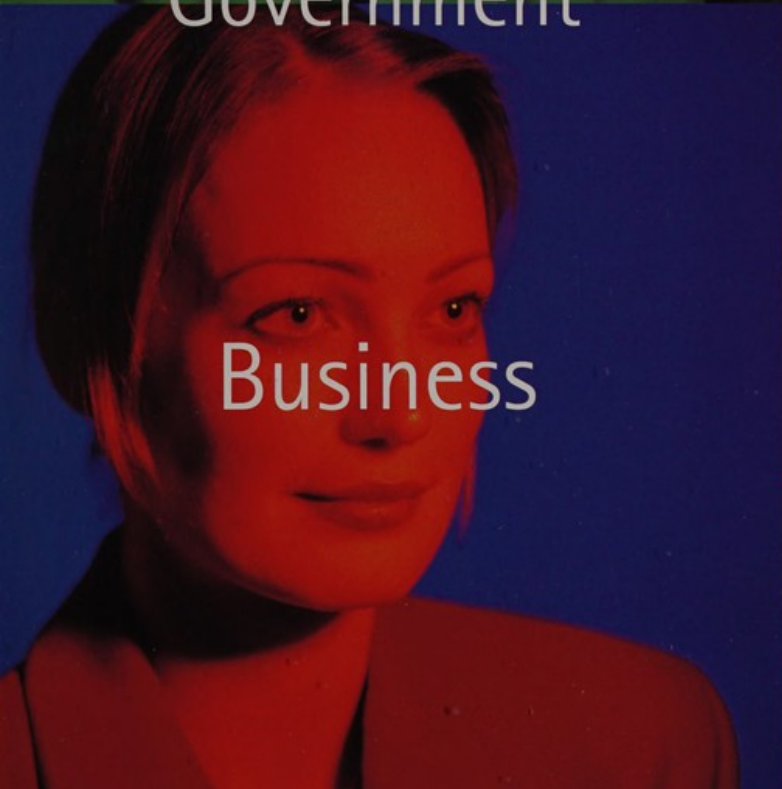
Drug Action Teams

Government

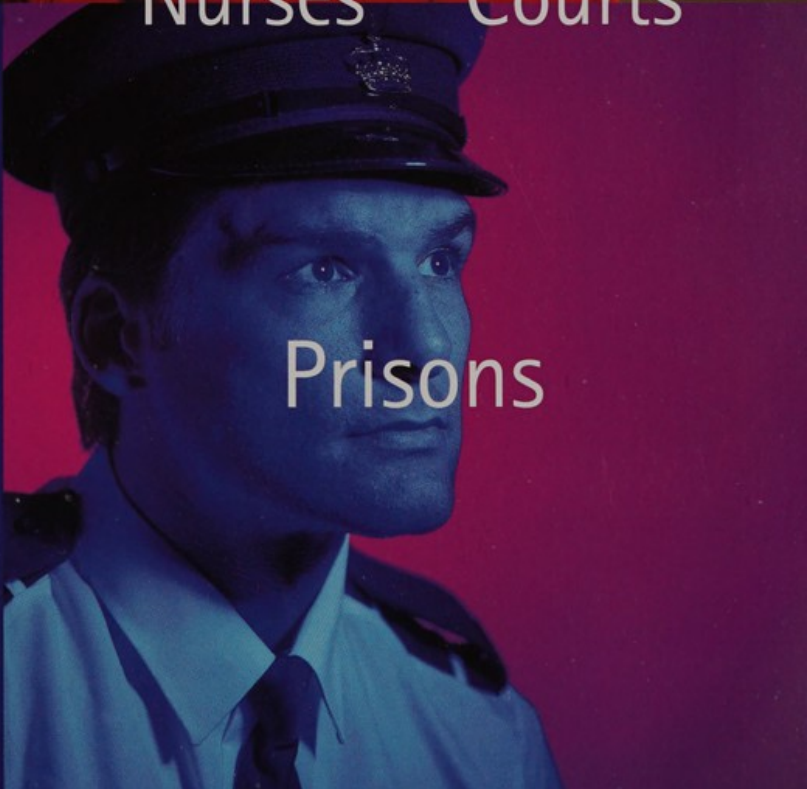


Teachers

Nurses Courts



Business



Prisons



