



## Spotlight on Substance Misuse

Emerging good practice across PCC areas



## Introduction

Through the [Second Generation Project](#), Revolving Doors Agency works with Police and Crime Commissioners (PCCs) across the country to help them to develop better service responses for people in the revolving door of personal crisis and crime and to young adults in contact with the criminal justice services.

This spotlight, the seventh in the series, focuses on substance misuse. Government strategies, such as [Transforming Rehabilitation](#), the [2017 Drug Strategy](#) and the [2012 Alcohol Strategy](#) highlight the association between substance misuse, health risks and offending. Substance use among people sentenced to prison is substantially higher than among the wider population, and a high proportion of new entrants to community substance misuse treatment arrive via a criminal justice system route.

There is strong evidence for the links between deprivation, social inequalities and substance misuse related harms. We also know that substance misuse problems can often be complicated by social issues such as unemployment, indebtedness, homelessness or social isolation, which bring people into repeated contact with the criminal justice system. Addressing these health and social care needs can reduce criminal behaviours and improve community safety.

The complexity of substance misuse and its harms require effective local partnerships to improve life chances and reduce crime. PCCs have a vital role to play in improving outcomes for people with substance misuse needs and preventing people from getting caught in the revolving door of personal crisis and crime. PCCs can offer the vital strategic leadership to address substance misuse needs and reduce health inequalities in their area and use their convening powers to bring health agencies around the table to reduce reoffending by addressing health related drivers of crime.

Our recent [review](#) of PCC police and crime plans from across the country showed that 9 out of 10 PCCs identify substance misuse as a problem in their area, yet only 3 out of 10 have set it as a priority. This spotlight brings together examples of good practice with a view to raising awareness about the link between substance misuse, associated health inequalities and crime and encourage PCCs to develop programmes, which take a public health approach to tackle the root causes of crime.

## Background: Reducing health inequalities, reducing crime

This section brings together the recent evidence for the key health inequalities experienced by people with substance misuse needs, explores some of the associations between substance misuse needs with offending and reoffending behaviour, and looks at the costs of substance misuse across policing and criminal justice sectors.

### Drugs

- Overall, illicit drug use in the UK appears to be decreasing, however, in comparison to the rest of the world it is still relatively high.
- [The latest data](#) on drug misuse indicate that between 2016/17 1 in 12 adults and 1 in 5 young adults had taken an illicit drug in the last year. Similarly, around 1 in 25 had taken an illicit drug in the last month, while around 1 in 11 young people aged 16 to 24 had done so.
- The health consequences of drug use are both [well documented](#) and far reaching. In the past year, there were over [14,000 hospital admissions](#) with a primary diagnosis of poisoning by illicit drugs, and women have only marginally lower rates than men.
- There are strong links between deprivation, inequalities and drug-related harms. The [latest figures](#) show that the drug-related hospital admissions figure is the highest in the North East. Similarly, drug related deaths, which predominantly occur in the lowest socio-economic deciles, have increased by over 58 per cent over the past decade in England and Wales.
- 40 per cent of prisoners report to have used heroin, the drug which causes the most harm. Heroin/crack cocaine users are recognised as the group with the most complex problems and are estimated to commit 45 per cent of acquisitive offences (excluding fraud).
- [The direct cost](#) of the trade in illicit drugs in England and Wales is currently estimated at £10.7 billion per year - with over half of this figure (£6 billion) due to drug-related

acquisitive crime (e.g. burglary, robbery, shoplifting).

### Alcohol

- Recent figures demonstrate that many indicators of alcohol-related harm are on the rise and its impact is cutting across multiple public services and acutely impacting on local 'blue light' services. There are now over [one million hospital admissions](#) relating to alcohol each year, half of which occur the lowest three socioeconomic deciles. [One study estimates](#) that responding to alcohol-related incidences takes up as much as half of frontline police time. As [The Institute of Alcohol Studies](#) evidences, 80 per cent of weekend arrests are alcohol-related, and just over half of violent crime is committed under the influence of alcohol.
- The alcohol-related crimes are not just violent crimes: According to CSEW, one in seven shoplifting incidences involved alcohol in the last year.
- In addition to the direct costs associated with this increased demand on crime and health services, alcohol-related harms also incur indirect costs. Taken all together, estimates show that [the social and economic costs of alcohol-related harm](#) amount to £21.5bn - including costs associated with deaths, the NHS, crime and lost productivity.

### Poly-substance misuse

- Poly-substance misuse is common, and while patterns of consumption are complex and differ between alcohol and drugs, the social and health harms of poly-substance misuse disproportionately affect more deprived communities.
- The intersection between drug and alcohol misuse can result in worsening physical and mental health, as well as other difficulties such as housing problems and unemployment.

### Impact of substance misuse on communities

- The spectrum of substance misuse-related harm ranges from those that are relatively mild, such as drinkers loitering near residential streets, through to those that are severe, including death or lifelong disability. Many of these harms impact upon other people, including relationship partners, children, relatives, friends, co-workers and strangers.
- In 2009, [the UK Drug Policy Commission](#) estimated that at least 1.5 million people in the UK were affected by someone else's drug use. However, this figure only includes

those family members and carers living with someone using drugs, and only when the drug use is at the extreme end of the spectrum.

- [Other estimates](#) based on the assumption that every person who use substances will negatively affect at least two close family members, suggest that the true number is nearer eight million.
- Around [18 per cent of children](#) are affected by alcohol misuse – a primary Adverse Childhood Experience that can have a sustained and detrimental impact on adult life.

## How can PCCs respond to substance misuse needs of people in the revolving door?

Evidence suggests that unemployment, social exclusion, homelessness, difficulties in accessing health services and discrimination are underlying causes of substance misuse. Tackling these underlying causes can be effective in diverting people away from the criminal justice, while reducing crime in local areas. But the complexity of these problems means that no one agency will be able to tackle the underlying causes on their own.

PCCs are ideally placed to use their convening powers to develop partnerships across health and social care services and the voluntary sector to bring the best expertise to support people out of crime.

**Socially excluded groups** are significantly more susceptible to engaging in substance misuse and involvement with the criminal justice system. [The recent official statistics](#) show that 74 per cent of people with experience of homelessness, 67 per cent of those have been in prison, and 13 per cent of people who work in the sex trade are injecting drugs. Hard Edges estimated that over half of people experiencing a combination of substance misuse, homelessness and criminal justice have found that nearly all (92 per cent) had a self-reported mental health problem.

**People with co-occurring mental health and substance misuse:** It is very common for people to experience problems with their mental health and alcohol/drug use at the same time. [Research](#) shows that mental health problems are experienced by the majority of drug (70 per cent) and alcohol (86 per cent) users in community substance misuse treatment. Many police forces across the country would recognise the presentation of mental health and substance misuse issues as part of their safeguarding work to tackle suicide and injuries. [A recent cohort study](#) found that over half of the individuals who were re-detained or admitted following an admission under Section 136 had either a primary or secondary diagnosis of psychoactive substance misuse. This figure highlights the importance of Liaison and Diversion services to identify people with mental health and substance misuse problems at the earliest point after initial contact with the police and the criminal justice system, so that individuals can receive the support and treatment they need.

**Young adults:** Young adults (18-24) are the most likely age group to come into contact with the police, both as victims and as offenders. They are also disproportionately affected by [substance misuse](#). PCCs need to consider that the primary antecedents of suicide in young adults are excessive alcohol use (42 per cent) and illicit drug use (51 per cent). It is important to note that young adults do not engage in substance misuse and crime in isolation. The significant proportion of young adults entering specialist treatment or the criminal justice system are affected by domestic violence, mental health and sexual exploitation – key priorities for police forces across the country.

**Women:** Women in contact with the criminal justice system face particular health inequalities: Research shows that 70 per cent of women in prison require clinical detoxification, and [over half](#) have engaged in crime to support someone else's drug use. As

the [Corston Report](#) set out in 2007, there is a need to take a tailored, gender-specific approach to women's offending and substance misuse. [Evidence](#) shows that support provided by women's centres can offer effective alternative to meeting the needs of women with substance misuse needs and diverting them out of the criminal justice system.

**BAME communities:** In general, [overall drug use](#), including Class A drugs, is lower among minority ethnic groups than among the white population. However, [recent statistics](#) show that black people aged 16 years and over are more likely than other ethnic groups to have a drug dependency, yet 'non-white' ethnic groups make up no more than 1% of [the total treatment population](#). [Black people are more likely](#) to experience stop and search, more likely to be taken to court and are more likely to be fined or imprisoned for drug offences.

## West Midlands PCC: Heroin Assisted Treatment

The PCC for West Midlands, David Jamieson, is taking a radically new approach to tackling drugs, including plans to keep people with substance misuse needs out of criminal courts and provide users heroin in prescription.

The Proceeds of Crime Act 2003 gives police officers the power to seize money linked to criminal conduct (a process commonly known as PoCA seizures). The PCC for West Midlands plans to increase the money generated by PoCA seizures through investing in financial investigators, who will expand the capacity of West Midlands Police to investigate and prosecute criminals involved in organised crime (such as the trafficking and dealing of illegal drugs).

The increased revenue generated by the financial investigators will be re-invested into a variety of substance misuse treatment interventions, including Heroin Assisted Treatment. Heroin Assisted Treatment involves the prescription of heroin within a medical setting to individuals who have not responded well to methadone-based treatment. The health-based intervention is underpinned by evidence-based research and is [supported](#) by the Royal Society for Public Health and the Association of Police and Crime Commissioners.

The Heroin Assisted Treatment is one of the eight drug policy recommendations in a report which looked at the social and economic challenges that the trade in illicit drug poses for West Midlands Police. The estimated annual cost of substance misuse to the West Midlands region is £1.4bn (including drug-related crime, health service use, drug-related death and social care). Half of all burglary, theft, shoplifting and robbery is committed by people who use heroin or cocaine regularly, representing one in five crimes reported to West Midlands Police. Furthermore, every three days a person dies from drug poisoning in the West Midlands area.

The eight drug policy recommendations that the West Midlands OPPC implements include: diverting people away from the criminal justice system, regional drug interventions programme, heroin assisted treatment, drugs early warning programme, safety testing of drugs in night time districts or festivals, naloxone provision, drug consumption rooms and taking money from organised criminals to improve drug services.

## Durham PCC: Checkpoint Diversion Project

The Police, Crime and Victims' Commissioner (PCVC) for Durham, Ron Hogg, is offering eligible people who come into contact with the Criminal Justice System an alternative to prosecution by encouraging them to voluntarily engage with the police and services provided by a number of agencies instead of getting a criminal sanction. The [Checkpoint](#) project aims to reduce reoffending and the number of victims by addressing the underlying causes of offending, improve the health and wellbeing of individuals, and reduce demand on local health and criminal justice services, including the police.

When individuals are arrested, Durham Police carries out an assessment on the seriousness and propensity of the offences. Suitable individuals are then offered a range of support services which will help them address the root causes of their offending, including substance misuse related needs for a duration of four months. For those who agree to take part, Checkpoint appoints a specialist 'navigator', who assesses their needs and agrees an initial support plan and contract with them.

During the next four months, the offence committed is classified as a 'deferred prosecution', and individuals who meet the conditions on their personalised contract can exit the Criminal Justice System with no criminal conviction. These conditions may include:

- Offending Condition: not reoffending over the period of the contract (mandatory)-
- Victims Condition: taking part in a Restorative Approach if the victim wishes (mandatory)
- Pathway Condition: attending services that will help individuals to address the root causes of offending, including substance misuse services
- Community Condition: completing 18-36 hours of voluntary work in the community or wearing a GPS tag.

The project commenced in 2015 with the support of funding provided by the Home Office Police Innovation Fund and at present it is supported by monies allocated by the PCVC and Durham Constabulary.

## Surrey PCC: Partnership approach to high impact drinkers

The PCC for Surrey, David Munro, joined forces with Surrey County Council's Public Health Team to address the pressures faced by the police, health and social care with their innovative approach to provision of substance misuse services.

The High Impact & Complex Drinkers projects supports people who experience drug and alcohol dependency, often alongside homelessness and poor mental health. The project aims to break down social barriers, improve community wellbeing and reduce demand on local services.

The project is delivered by [Catalyst](#), a local substance misuse service provider that has been supporting individuals with multiple needs, including substance misuse for over 30 years. Catalyst will work in collaboration with [Alcohol Concern](#) and other services.

Catalyst provide:

- Dedicated community workers, who will engage, via assertive outreach, with individuals at the point of referral, facilitate

recovery and support their attendance at assessments and appointments

- Personalised needs assessment to identify the barriers which may be impacting on people's ability to engage with services;
- Multi-agency collaboration with other support services (housing, health, social care and mental health) to provide more coordinated support.

Alcohol Concern will deliver training based on their [Blue Light Manual](#) for specialist and non-specialist staff, so that they can identify 'high impact complex drinkers' in the community and improve the system wide response to better meet their needs.

By interviewing early, the Catalyst work with individuals to help tackle wider complex issues such as mental health and homelessness. This has resulted in a reduction in alcohol consumption, alcohol-related offending and improved mental and physical wellbeing of participants and reduced homelessness.

## Derbyshire PCC: Supporting veterans with substance misuse needs

The PCC for Derbyshire, Hardyal Dhindsa, has commissioned an early intervention initiative to divert veterans with alcohol misuse issues away the criminal justice system. The project, [Stand To](#), is based on a pilot study conducted by the Derbyshire OPPCs which looked at the ways to support veterans who experience problems with alcohol. The pilot study identified that veterans often struggle to adjust to civilian life and engage with mainstream services as they felt that the practitioners did not fully understand experiences that are unique to their military background.

Stand to offers brings together highly trained staff, volunteers and peer mentors (most of whom are ex-forces) to address the specific issues veterans and their families may experience. The project works closely with a range of services to identify veterans at risk of committing crime such as: The Police, Probation, local Military Groups, the Local

Authority, Recovery Projects and Fire Community Services. Veterans are then offered a peer support worker with lived experience of armed forces, who supports them to adjust to civilian life and access a range of community support services.

Another project commissioned by the PCC for Derbyshire is [Rhubarb Farm](#), an enterprise which offers volunteering opportunities for people who have substance misuse needs and a history of offending. At the enterprise, volunteers grow fruit and vegetables on a small scale and sell the produce to local customers at a reduced price. Volunteers are involved in every step of the production process and take a hands-on approach to farming whilst being supported by drug and alcohol workers throughout their recovery and desistance journeys. The recovery work taking place at Rhubarb Farm provides volunteers with the skills and confidence to build a new life, with many leaving the farm after finding full-time employment.

## Cumbria PCC: A Mutual Aid Facilitation Programme

In 2016 Cumbria PCC, Peter McCall, commissioned The Well Communities, a local not-for profit community interest company (CIC), to develop a Mutual Aid Facilitation model, shaped by people with lived experience of substance misuse. The combined lived experience of 10 peer-led recovery champions brings real value to the services provided by the Well Communities and means that they can provide high-quality support in a caring, non-judgemental setting.

The peer-led recovery champions act as volunteers who build 'recovery capital' within the local community, linking service users to treatment, prevention and offender services.

The Well Communities' free-to-use services are available 24 hours a day, 365 days a year

for individuals and offer: a structured day-hub (including therapeutic programmes like 12 step and SMART), Mutual Aid Support, emergency support for people who have relapsed, recovery housing, family support, employment skills, social enterprise opportunities, sporting and team events, and a wide range of social activities.

As part of their recovery journey, individuals are encouraged to get involved in their communities through voluntary work or helping others access recovery services. Mutual Aid Facilitation offers a peer-led, holistic and multi-agency alternative to empower individuals to break the cycle of crisis and crime.

## Suffolk PCC: Supporting Families Affected by Substance Misuse

The PCC for Suffolk, Tim Passmore, has commissioned the national charity [Adfam](#) to strengthen local services for families affected by substance misuse. The dual ambitions at the heart of the project are to fortify the support available to vulnerable families and work closely with individuals struggling with drug or alcohol misuse. The project is currently in the early delivery stages and is funded by the Safer Suffolk Fund.

The joint project between Suffolk OPCC and Adfam aims to strengthen and improve local services through:

- Building the capacity of and improving pathways between local services to ensure that family members get access to the support that they need
- Providing training and advice for existing family support and treatment services in the local area

- Providing Peer Supporter training for family members, carers and recovery mentors to enable them to give the best support to others facing similar issues
- Providing support and advice for staff, volunteers and recovery mentors working in carers' agencies and drug/alcohol treatment agencies
- Empowering family members and carers to have their voices heard and influence the local agenda.

This project will help Suffolk OPCC to deliver towards their [police and crime plan](#) objective of Making Suffolk Safer – protecting vulnerable people and communities by preventing, reducing and solving crime and reducing anti-social behaviour.

## Gloucestershire PCC: Supporting young women and girls in rural areas

Gloucestershire PCC, Martin Surl, together with the Summerfield Trust, has commissioned [the Nelson Trust](#), to deliver an early intervention project, supporting young women and girls in rural areas to address a range of risks to their health, promote their wellbeing and divert them away from the criminal justice system.

The outreach was set up amid high concerns about ASB in the local communities of rural Gloucestershire, in an effort to provide support to the young women and girls living in these areas with limited availability of services. From their previous support work, the Nelson Trust have identified that young women and girls are at increasing risk of gang involvement and that female offending is strongly associated with male partners and peers.

The dedicated outreach worker works up to 30 young women and girls per year and

provide them with individual key-working sessions as well as small group work, in order to promote their wellbeing, build resilience and consequently reduce ASB in local areas.

Since its inception in 2014, Rural Outreach has worked with over 84 young women and girls over the lifespan of the project by assessing the multiplicity of their needs and ensuring that they access appropriate support. The majority of women and girls had a combination of needs around substance misuse, poor mental health, housing, domestic violence, and sex work.

As a result of the targeted support offered by Rural Outreach and delivered by the Nelson Trust, young women and girls who engaged with the project have gained permanent employment, enrolled in further education, and continued with their recovery from substance misuse.

## Conclusion

The impact of substance misuse on policing is broad and ranges from relatively minor incidences, such as drinkers loitering near residential streets, through to severe, such as violent crime. Some estimates suggest that alcohol-related incidences take up as much as half of frontline police time. Tackling drug related crimes across the UK costs police forces £1 billion, and £5.8 billion for the rest of the criminal justice system.

PCCs have the commissioning power to invest in what works and have the influence to bring together health, social care and housing sectors to support people and communities affected by substance misuse, to stop people being caught in the revolving door of crisis and crime.

However, as our recent [review](#) of PCC police and crime plans from across the country demonstrated, 9 out of 10 PCCs identify substance misuse as a problem in their area, and yet only 3 out of 10 have set it as a priority.

This spotlight on substance misuse demonstrates what is possible. Many PCCs across the country are reframing substance misuse as a matter of public health, as much as a matter of law enforcement. It is promising to see the local implementation of our recommendations in the [Rebalancing Act](#) which called for strong partnership and collaboration among local agencies to address the health inequalities faced by those in contact with the criminal justice system. We are particularly pleased to see the emergence of initiatives that offer tailored and often peer-led support to individuals with multiple unmet needs, who often fall between service thresholds.

In examining how PCCs have sought to tackle substance misuse, our review has found that the following key themes have emerged as essential for good practice:

**A public health approach to substance misuse:** The PCC for West Midlands plans to increase the money generated by PoCA

seizures and reinvest it into a variety of substance misuse treatment interventions, including prescribing heroin within a medical setting to individuals who have not responded well to methadone-based treatment. The PCC for Durham is offering people who come into contact with the criminal justice system as a result of multiple unmet health needs (including substance misuse) an alternative to prosecution by encouraging them to voluntarily engage with services provided by a number of agencies instead of going to court

**Lived experience:** People with lived experience of substance misuse and criminal justice systems can bring real value to the services by offering non-judgemental and caring support. Cumbria PCC's mutual aid facilitation programme 'The Well Communities' demonstrates how peer-led recovery champions can help individuals and families affected by substance misuse to rebuild their lives. Similarly, the Derbyshire PCC commissioned a project that employs peer mentors who are ex-military to better address the specific issues veterans and their families may experience.

**Adopting a whole-systems approach:** A significant difficulty in tackling the entrenched

disadvantage faced by many people in the revolving door is that their problems cut across different local service systems and budgets. The Surrey PCC's new project brings together public health, social care and homelessness teams across the county to reduce health and justice inequalities.

**Offering women only provision:** Women in contact with the criminal justice system face particular health inequalities, combined with social disadvantages including domestic abuse. The PCC for Gloucestershire has commissioned the Nelson Trust to deliver an early intervention programme supporting young women to in addressing a range of risks to their health and wellbeing and understanding the impact that their behaviour has on their families and the wider community.

**Supporting families affected by substance misuse:** Parental substance misuse can present risks to children and can result in the involvement of social services and, in some cases, children being taken into care. The PCC for Suffolk has recently commissioned Adfam to provide coordinated support to people with substance misuse problems and their families.

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