

<b>Report Title:</b>	Drug Use, Support and Enforcement
<b>Meeting for:</b>	Living in Hackney Scrutiny Commission
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## 1. Report Summary

- 1.1. This report outlines the current local context of drug use in the London Borough of Hackney (LBH), alongside discussion of LBH Public Health's response to presenting levels of support need related to this use.
- 1.2. The report further details work undertaken to better coordinate support offers alongside Police and Community Safety Enforcement action to ensure that individuals presenting with support needs arising from drug use are directed into treatment rather than further or disproportionate criminalisation
- 1.3. The final aspect of this report is to outline the role of new governance structures and decision making related to the approaches to drug use in the borough, with a particular focus on the LBH response to Central Government's 10 year drug strategy.

## 2. Introduction

- 2.1. In 2022 nationally approximately 9.2% of all adults aged between 16 and 59 reported using some kind of drug at least once during the previous year, rising to 18.6% of all adults aged 16-24<sup>1</sup>.
- 2.2. Applying these percentages to the resident population of Hackney (as published as part of 2021 census data) we estimate that 16,455 individuals aged between 16 and 59 years old used any drug at some point in the year ending June 2022, and 5535 of these individuals were aged between 16 and 24.

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<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/drugmisuseinenglandandwales/yearendingjune2022>

- 2.3. Frequent drug users, or individuals who use drugs more than once per month, are a much lower percentage of the population. Nationally 2.6% of all individuals aged between 16 and 59 used drugs on a frequent basis, 4.7% of 16-24 year olds however are using drugs frequently.
- 2.4. Applying these figures locally we estimate that 4650 individuals aged 16-59 are frequent drug users, and 1399 of these individuals are aged between 16 and 24.
- 2.5. Our main drug treatment provision, the Hackney Recovery Service, currently works with 1173 individuals using drugs, or around 25% of the number of individuals who use drugs frequently. This data excludes 16-18 year olds, who work with Young Hackney for their drug use support needs.
- 2.6. The estimates provided above are, unfortunately, likely to be an underrepresentation of the true extent of drug usage in the Borough. This is due to the likelihood of increased drug usage in a metropolitan area, the nature of the crime survey leading to under-reporting of drug use and the lack of marginalised groups included in the crime survey (notably individuals experiencing homelessness).
- 2.7. Given this it is likely that the 75% of individuals using drugs frequently and not accessing support is an under representation of the actual level of need in the borough.
- 2.8. This is especially true when looking at both Heroin and Crack Cocaine use, as no crime survey respondents admitted to the use of the former and a particularly low percentage the latter.
- 2.9. For estimates of Heroin and Crack Cocaine use within the borough we look to a prevalence/unmet need study conducted on behalf of Central Government in 2016.
- 2.10. This estimate suggests there are 2,858 individuals resident in the borough who are using Opiates and/or Crack Cocaine. Within this figure there are an estimated 2,231 individuals using Opiates and 1,805 individuals using Crack, indicating a high degree of co-occurring usage of both Opiates and Crack Cocaine.
- 2.11. At present there are 903 individuals receiving treatment for opiate usage within the Hackney Recovery Service, and 673 for Crack Cocaine. This equates to 40% of individuals using Opiates and 37% of individuals using Crack Cocaine within the borough receiving support.

### **3. Public Health Approaches to Substance Use Support**

- 3.1. We currently commission a suite of services to help meet the needs of residents using drugs as effectively as possible. The main service we commission is the Hackney Recovery Service, a multidisciplinary team operated by the national organisation Turning Point.
- 3.2. Within the HRS individuals receive psychosocial support in order to help them move away from harmful drug usage, as well as pharmacological intervention where this is helpful or necessary in relation to their drug use and presentation. HRS also acts as the gateway to residential settings to help people detoxify and rehabilitate from drug use if this is something that they would like to do, or is necessary due to health concerns
- 3.3. Beyond the HRS core service we currently commission a rough sleeping specific service focussed on ensuring individuals sleeping rough are proactively engaged in treatment and support for drug use.
- 3.4. *Support When it Matters* delivers bespoke interventions to individuals who identify as Black, offering a specific programme of support aimed at older black men who use drugs.
- 3.5. We also deliver two employment services specifically for individuals who use drugs, IPS which is delivered by Hackney Works, and a peer led programme delivered by St Giles Trust.
- 3.6. It is the public health team's intention to ensure that anyone resident in LBH is able to easily access or be offered support if they are using drugs. This should help to increase the number of individuals effectively engaged with support, particularly those using in the most harmful ways.

### **4. Working with Enforcement Partners- ADDER Accelerator**

- 4.1. In 2020 we received additional funding from Central Govt as part of their ADDER accelerator initiative. This was primarily focussed on reducing drug related death and decreasing crime related to drug use.
- 4.2. As part of our work as an ADDER accelerator area we have engaged extensively with the police to develop ways of working to more effectively reduce the risks of drugs, both from health and crime related perspectives.
- 4.3. Our ADDER work has led us to understand that police and community safety officers often come into contact with individuals using drugs, many of whom are likely to be the most affected by drug use in harmful ways, and that a number of these individuals are unknown to our services.
- 4.4. Utilising Out of Court Disposals (Appendix 1) , MERLIN reports of vulnerability (Appendix 2) and Drug Testing on Arrest/Required Assessments (Appendix 2) we are working with enforcement partners to remove criminalising

approaches and instead ensure that individuals are properly flagged to treatment

- 4.5. As part of this we have also developed a web based application for referral into Turning Point services, creating specific responses to enforcement referrals from within treatment teams to help ensure that support is offered when people need it

## **5. Drug Strategy and Combating Drugs Partnerships**

- 5.1. As part of our commitment to developing services to ensure the needs of vulnerable residents are met we are engaged in developing new multi-agency governance structures to help monitor our systems related to individuals who use drugs.
- 5.2. This connects to work led by central government as part of their ten year drug strategy (appendix 3) which details the need for 'combating drugs partnerships' in Local areas to make strategic decisions concerning work to reduce harms related to drug use.
- 5.3. Our work in developing these partnerships and structures locally is aimed at producing a universal drug strategy for all connected organisations. This strategy will include top level outcomes directed by Central Government, which are linked to additional funding being made available to increase provision within the borough.
- 5.4. It is our aim to ensure that these top level outcomes are linked to more focussed aims around different presentations of drug usage across the borough, including very specific work around ensuring reduction in the criminalisation of individuals using drugs where this is likely to have an adverse effect on them, their wellbeing and our communities.
- 5.5. Much of this builds on work we have undertaken in the past two years as part of our work as an ADDER accelerator area (appendix 4); we want to capitalise on this work and expand the positive outcomes we have seen across ADDER specific workstreams to the entirety of our treatment and support system.

## **6. Conclusion**

- 6.1. Drug use in the borough amounts to a significant number of residents, with close to 3000 individuals using Opiates and/or crack cocaine
- 6.2. This level of usage is harmful to population health, and impactful to communities as a driver of crime.

- 6.3. Our services currently work with less than 25% of individuals in the borough who use drugs frequently, and 40% or less when looking at individuals using Crack Cocaine/Heroin
- 6.4. We are implementing new governance structures, and using additional funding streams, to help develop our services to provide better and more impactful support to help ensure that individuals are more likely to come into contact with and accept support from our services.
- 6.5. We are working on a multi-agency basis to help monitor and develop our outcomes.
- 6.6. The police and enforcement play a vital role in developing our approaches; they are often the services coming into contact with individuals using drugs and developing how they act as the gateway into support is one of our priorities.
- 6.7. Whilst acting as a gateway into support it is also vital that the police's actions do not overly criminalise individuals who are particularly vulnerable due to their drug use, as this risks disenfranchisement and increases the potential for individuals to be stuck in a cycle of crime and ineffective punishment.
- 6.8. We are working with police and partners to ensure that the right responses are embedded as standard operating procedure.

## **7. Appendices**

### **Appendix 1- Out of Court Disposals (OOCd) overview**

Out of Court Disposals are ways for the Police to address behaviours of an individual who has been caught offending without the need for arrest or any form of trial.

When thinking about individuals who have been apprehended with substances on their person the Central East Borough Command Unit (CE BCU) utilise two forms of OOCd depending on what substance has been found; either a Conditional Caution or a Community Resolution.

Both approaches seek to instruct the individual of the harms of drug use, and ensure that a referral has been made to support services for the individual to address their drug use. Community Resolution does not give an individual any form of criminal record, and is immediately spent after delivery. Conditional Cautions are spent at 3 months since delivery, and requirements to engage in services are mandatory, and can result in different enforcement if there is non-compliance. In Hackney we have not seen any enforcement for non-compliance of Conditional Cautions related to drugs possession.

Further information concerning OOCds, and proposed changes to the overall structure of their usage to simplify/help ensure they are more universally used can be found here:

<https://www.gov.uk/government/publications/police-crime-sentencing-and-courts-bill-2021-equality-statements/reforms-to-the-adult-out-of-court-disposals-framework-in-the-police-crime-sentencing-courts-bill-equalities-impact-assessment>

### **Appendix 2- key terms**

MERLIN - The referral mechanism used by the metropolitan police to highlight vulnerabilities, particularly where there are safeguarding concerns, to a local authority.

Drug Testing on Arrest - where an individual has been arrested for certain 'trigger offences' they can be tested for the presence of drugs in their system.

Required Assessments - where an individual has tested positive as part of a DTOA they are legally required to accept an assessment by the local substance use support service as it is likely their drug usage contributed to the crime they were arrested for.

### **Appendix 3- From harm to hope: central govt ten year drug strategy**

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1079147/From\\_harm\\_to\\_hope\\_PDF.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1079147/From_harm_to_hope_PDF.pdf)