

# Keeping the lid on: policing drug related crime

**Howard Parker** charts the impact of competing Government agendas and targets on policing drugs since the 1990s.

The Police Service role in drugs enforcement has been significantly modified over the past decade. Importantly, this has not been in response to reductions in the scale of drugs supplying, dealing or related organized crime but as a consequence of the 'modernisation' of the policing agenda in general and target setting in particular. Essentially policing drugs has been downgraded by the prioritisation of volume crime targets, and become more reactive at the expense of previous pro-active and on-going scrutiny and operational activity against Level 1 (community) and Level 2 (regional/national) drug markets. There are exceptions to this given some forces still have well resourced drugs squads and continue to utilise intelligence led on-going operational activity against heroin-crack markets. Overall however, drug related 'results' are no longer critical performance measures or a top priority. Where the police have become more energetic and involved is in partnership work around the Drugs Interventions Programme, the Prolific and Other Priority Offenders Programme (with NOMS) and now with 'test on arrest'. There has been a switch from policing drugs to policing drug users who are also acquisitive offenders. The police are critical players in this controversial coercive drugs-crime – treatment agenda. This is the latest and probably last 'big idea' available to the Blair led drugs-crime crusade.

## Hard outcome targets abandoned

Back in 1998 when New Labour's first drug strategy Tackling Drugs to Build a Better Britain was launched it would have been professional treachery and political naivety for any police force to question whether stemming the supply of drugs should be a top priority. Police force aspirational goals framed and hung on the wall invariably involved tackling drugs through continuous enforcement. In those days the ACPO Drugs Committee was top of the tree and endlessly newsworthy. In the 1998 strategy, targets were critical – to reduce the availability Class A drugs by 25% by 2005 and 50% by 2008; to reduce repeat offending by drug misusing offenders by 25% by 2005 and 50% by 2008. The crucial secondary goal was to protect communities from drugs and enhance community security by tackling drug markets.

Some of us argued, at the time, that these goals were so unrealistic as to be counter-productive, being in danger of stimulating cynicism on the ground. In due course the lack of any progress in achieving these targets led New Labour to quietly abandon them with its Updated Drugs Strategy, discretely launched in December 2002. From an English context this revised New Labour strategy was the seminal shift from the 'war on drugs' to today's pragmatic managerialism. No longer was preventing all drug use an aspirational goal. Normalisation of recreational drug use was implicitly accepted and the more realistic goal of trying to prevent become problem

drug use was introduced. All talk of eliminating the supply of drugs was abandoned and with outcome targets removed this is probably the point at which policing drugs became set for some relegation. New words like 'stifling' and 'disrupting' were introduced into government speak. The most depressing feature of the Updated Drugs Strategy was the political slight of hand that set process outcomes and outputs as the new goals and targets. With a massive increase in resources for drugs treatment in general and targeting drug-using offenders through the criminal justice system in particular, the updated strategy set outputs as goals which could hardly not be achieved. The discourse about the success of the drugs strategy currently being rolled out in England by the Home Office, Tackling Drugs, Changing Lives, is built on this spin. The doubling of drugs treatment places is indeed a very welcome achievement, but given the scale of investment, if this were not going to happen, heads would have to roll.

## A flat performance

Despite currently spending £380 million a year on supply disruption efforts to stem cultivation and global trafficking, no progress has been made. The Afghanistan agenda of reducing opium harvests continues to go backwards and similar problems remain negotiating any reduction in coca production. Consequently, the flow of heroin and cocaine-crack into England, Scotland and Wales is extremely strong. Prices have been falling annually – a clear indication of supply actually outstripping demand in many parts of Great Britain. Hard drugs are readily available everywhere, outside Northern Ireland (Parker, 2005), for those who need to find them. And along with highly competitive markets and marketeers riding crack sales on the back of heroin dealerships, has come more organised crime, violent crime and more guns, as cities like Liverpool, Manchester and Nottingham know only too well. Quietly letting crack dealers shoot each other was not very intelligent policing, as some forces have now come to realise. It seems unlikely that the creation of the new Serious Organised Crime Agency will be able to rescue the situation (see Bowling, this issue).

Although the mainstream performance targets set for the police have relegated drugs policing, reactive enforcement has been maintained. This explains the 'flat' performance in relation to drug seizures, which peaked in 2001, and a similar plateau in respect of the total number of drugs offences (e.g. possession, intent to supply) in England and Wales that have shown little change for several years. What has been impressive is the recent reduction in cannabis possession cases proceeded against and an increase in Class A disposals, in line with the re-classifying of cannabis and a clear expectation to focus on the drugs which cause most harm.

Julie Grogan photo; police training at Peel Centre, Hendon.



Essentially police forces now do what they have to, to 'keep the lid on' drugs issues but, because of their targets to reduce recorded crime, are loath to record more crime through pro-active resource greedy enforcement operations against Level 1 or 2 drug markets. Pragmatism rules in a contrary world of performance indicators. Buffeted by multiple but often contradictory targets from sections of the Home Office, local Crime and Disorder Reduction Partnerships and the Office of Criminal Justice Reform demanding a focus on those offence cases which have the best prospects of being 'brought to justice', drug related crime like domestic violence scores poorly.

### Targeting problem drug user offenders in the custody suite

Where a legitimate claim for enforcement progress can be made is with the Drugs Interventions Programme (DIP). With £447 million spent between 2002-05 on DIP, now settling at £170 million for England alone, the police have become critical partners in identifying problem drug-using offenders through custody suite activity via arrest referral, compulsory drug testing and now 'test on arrest'. Over 33,000 drug misusing offenders have been pushed into drugs treatment since 2003. This programme theoretically supports the drive to reduce volume crime. For the police this is potentially added value from additional ring-fenced DIP resources.

Officially this programme is a success because the new targets are outputs – the goal of getting this prolific offending population into treatment is the outcome achieved. However, the attached mantra 'treatment works' is a dangerous one. In reality less than 10% of heroin and crack users achieve abstinence with over two thirds dropping out of treatment (Egginton and Parker 2006, McVeigh et al. 2003). In practice we have a revolving door with problem drug users moving in and out of treatment via a 10-15 year drugs 'career'. There is evidence of some crime reduction

for those retained in treatment particularly via methadone maintenance. There is also some evidence that treatment gains slowly aggregate as problem users repeatedly return to treatment. The conundrum however is whether the massive investment in both DIP and mainstream drugs treatment (£1.5 billion in 2006-07) is cost effective in respect of crime reduction in the time scales politicians work to. Whilst many would argue that there are multiple gains from treatment in terms of the health of problem drug users, reductions in risk behaviour, overdose deaths and the containment of blood borne virus diseases like Hepatitis/HIV to justify the investment – this is not why New Labour is committing mega resources.

The last shake of the dice to ensure continued priority with these criminal justice interventions is drug testing on arrest 'stimulated' by a very extensive list of trigger offences. We are seeing between 30-55% positives for opiates and cocaine products through drug testing, confirming the extensive use of heroin-cocaine and crack amongst a high proportion of low level offenders. Test on arrest is picking up far more cocaine-crack users with no treatment experience (Egginton and Parker 2006) who will be coerced into treatment. If we can improve treatment outcomes then political support to maintain current investment may survive. As noted earlier however, this is not likely. Indeed there is indicative evidence that stimulant users and those identified and coerced into treatment drop out even sooner.

The police were initially generally enthusiastic partners in the 'DIP' adventure, seeing pathways into treatment via custody suite activity as consistent with volume crime reduction goals. However 'DIP' offender-clients are part of the revolving door process and we must predict that initial enthusiasm will return to more routine scepticism as too many heroin and crack using offenders return from consecutive,

*Continued on page 38*

unsuccessful, treatment episodes. With ringfenced investment for this programme finishing in 2007 it seems highly unlikely that the current 'luxury' levels of investment will continue. More likely, DIP-type work will bed down at a lower level but probably as an institutionalised element of local crime-disorder partnership plans to police drugs.

## Conclusions

The strategic changes and about-turns so evident in a decade of dealing with the country's drug problem are primarily a product of realisation. The war on drugs rhetoric and eradication targets are long gone as we have come to realise we can only manage UK drugs 'around the edges' to reduce harm and contain problems.

From an enforcement perspective, the inability to stem supply and permanently close hard drug dealerships and markets has been a long, hard lesson merely softened by occasional operational victories (Parker and Egginton, 2004). On top of this have come competing demands and volume crime targets which make it impossible to continue to prioritise policing drugs whilst meeting official performance indicators and satisfying local partnership expectations. We have probably found an appropriate level of enforcement to 'keep the lid on' internal drug supplying and dealing of hard drugs. Whilst hardly a politically attractive and publicly digestible goal, this is a necessary and realistic approach. Most police forces privately understand this and continue, with variable degrees of commitment, to respond to local community concern especially about open drug markets and local dealers taking liberties or using intimidation or violence. This deterrence policing should be allowed to continue without being penalised by competing and contrary performance indicators.

Drugs interventions via the custody suite and the Drugs Interventions Programme will find their level and place in this pragmatic managerialism dependent on our ability to improve retention and treatment outcomes over the next few years via the National Treatment Agency's stewardship. This approach will not be the cost effective panacea New Labour hopes for however. With 500,000 problem drug users in England alone, the majority of whom are also sometime offenders, the DIP adventure will have only limited impact. Indeed non-compliance to attend a drugs assessment after a positive test will create an additional burden of activity.

Finally, from an epidemiological perspective there is room for optimism in the longer run. Problem drug users are getting older and behind them are age cohorts of young people who despite availability are, broadly speaking, not taking up heroin and crack cocaine. This 'cycle' is well known to drug epidemiologists. Whilst we can never be sure another problematic drug (like methamphetamine) won't take off in the UK, it seems likely that the scale of problem drug use will slowly diminish at varying regional speeds and with it associated supplying, dealing and acquisitive crime. In the meantime we should keep the lid on as best we can.



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## References

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