

# Treatment and Care of People with Drug Misuse Disorders in Contact with the CJS: Alternatives to Conviction or Punishment



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# Appropriate measures at a pre-trial stage: England & Wales

- Context - Police in E&W issued penalties for drug possession arrests to ~148,000 people during 2013-14:
  - 43% received a ***cannabis warning***
  - 21% received a ***caution***
  - 10% received a **fine/FPN**
  - 26% sentenced at court
  - 0.8% imprisoned
- A range of other pre-trial options available in E&W:
  - Arrest referral (voluntary)
  - Mandatory drug testing on arrest and compulsory assessment (*‘Tough Choices’*)
  - Restrictions on bail
  - Prolific & Other Priority (PPO) schemes.

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## 1. Which authorities get involved?

- Police and Crime Commissioners (publically elected)
- Police
- Courts
- Probation service
- Prison service
- Voluntary and statutory treatment providers

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## 2. Any cooperation between justice & health?

- Arrangements established on a formal footing (but considerable scope for discretion in their use).
- Legislation (establishes and articulates programme objectives – i.e. crime reduction).
- Funding and commissioning arrangements in place (e.g. via PCC held CSF, 'payment by results').
- Policy and procedural documents (outlining roles and responsibilities of partners).
- But scope and capacity for joint working eroded by austerity measures.

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## **3. At what stage of the criminal procedure are referrals to treatment possible?**

- Upon arrest, charge and/or bail by police.

## **4. What are the conditions for the referral of a person to treatment?**

- Offence type, (compulsory) drug test outcome, self-disclosure by suspect/defendant, judgement of police.

## **5. Methods of assessment of person being referred.**

- Some standard assessment instruments developed centrally (e.g. drug interventions record), but at provider discretion.



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## **6. Impacts, outcomes, evaluation data - as available.**

- No published evidence for warnings, cautions and fines.
- Equivocal, methodologically weak and often limited to piloting & early stages of implementation for others.
- More contemporary evidence – using matched comparison groups – shows no impact (i.e. treatment uptake, rate & volume of reoffending) (MoJ, 2016)

## **7. What is considered a satisfactory outcome?**

- Engagement and retention in treatment
- Reduced drug use and improved ‘social functioning’
- Reduction in ‘drug-related’ crime.