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| Institution: University of Kent | | |
| Unit of Assessment: 20: Social Work and Social Policy | | |
| Title of case study: Changing Drug Policy and Practice to Decriminalise Possession and Prevent Deaths in the UK, Ireland, and Norway | | |
| Period when the underpinning research was undertaken: 2007-2019 | | |
| Details of staff conducting the underpinning research from the submitting unit: | | |
| Name(s): | Role(s) (e.g. job title): | Period(s) employed by submitting HEI: |
| Alex Stevens | Professor in Criminal Justice | 1998-present |
| Period when the claimed impact occurred: 2014-2020 | | |
| Is this case study continued from a case study submitted in 2014? No | | |
| 1. Summary of the impact | | |
| <p>Professor Alex Stevens' research on drug decriminalisation and preventing drug-related deaths has informed changes in drug policies and services in the UK, Ireland, and Norway. It has directly influenced senior politicians, parliamentary committees, statutory advisory councils, national and local policy working groups, and police and practitioners in the field. Stevens' research informed changes in UK political party policies from 2015 to 2019; the provision of evidence-based approaches to prevent drug deaths in the UK from 2016; pre-arrest diversion schemes in the UK from 2017; alternatives to criminalisation for drug possession in Ireland in 2019; and the current formal decriminalisation of drug possession in Norway.</p> <p>Noting the importance of Stevens' research, a 2019 parliamentary motion stated that he has made an 'invaluable contribution' in providing 'high-quality advice in the complex field of drugs' [a]. The director of Release, a leading charity in the field, reports that Stevens' research has 'helped to advance the arguments for a more public health-based response to drugs in the UK and across the world' [b].</p> | | |
| 2. Underpinning research | | |
| <p>The underpinning research is in two streams: 1) on alternatives to criminalisation for drug possession, including decriminalisation; and 2) on the prevention of drug-related deaths.</p> <p>Alternatives to criminalisation for drug possession, including decriminalisation</p> <p>Stevens has been working on this topic since 2007, often in collaboration with Dr Caitlin Hughes of Flinders University. Their joint works on drug policy in Portugal – which expanded public health measures and decriminalised the possession of all drugs for personal use in 2001 – were the first international peer-reviewed publications on this policy [R1, R2]. They found that the Portuguese policy met its aims of improving public health (without leading to the commonly predicted increases in drug use), and could therefore provide lessons for other countries. Specifically, the research showed that Portugal's policy change was followed by substantial and sustained reductions in drug-related deaths and HIV infections. Their 2010 article in the <i>British Journal of Criminology</i> attracted worldwide media attention and large number of citations (156 in Scopus) [R1]. Stevens has been invited to discuss his research on the Portuguese policy in several media outlets, including appearances on Radio 4's <i>Today</i> programme and <i>World at One</i>, as well as on the BBC World Service. Internationally, this research has been reported, among numerous articles, in the <i>LA Times</i>, <i>Sydney Morning Times</i>, <i>Canberra Herald</i>, and the <i>Canadian National Post</i>, as well as several Irish newspapers and the Irish national broadcaster, RTE. Subsequently, this research was</p> | | |

used to support recommendations to adopt the Portuguese model for decriminalisation in several other countries, including the UK, Ireland, and Norway (see below).

The effect of decriminalisation on drug use remains controversial. In **2019**, Stevens published an article in the *International Journal of Drug Policy* that used hierarchical logistic regression of data from over 100,000 teenagers in 38 countries. This showed a lack of correlation between levels of cannabis use and the 'liberalisation' of cannabis policy [R3]. As noted by the director of the UK drug law charity, Release: 'this research was on the front page of the *Guardian* and helps to challenge the narrative that changes to our legal system for drug possession would lead to an increase in use' [b].

Stevens' research has informed his recent work for the Irish Government and as special adviser to the House of Commons Health and Social Care Select Committee [c]. In **2018**, the Irish Department of Justice and Equality commissioned Stevens to carry out a realist review of alternatives to criminalisation for simple drug possession. This review was published by the Irish Government [d], and is also the basis for a peer-reviewed article in the *European Journal of Criminology* [R4]. It provides a programme theory for designing and evaluating alternatives to criminalisation for drug possession. It again shows the absence of effects of decriminalisation in increasing drug use, combined with the possibility to promote health by expanding treatment and harm reduction services. The then chair of the Health and Social Care Committee described Stevens' use of this research within her committee as 'highly effective in communicating ideas and uncertainties' [e].

The prevention of drug-related deaths

Stevens has been working in the field of reducing drug-related harms – including deaths – since 1995. In his **2011** book, *Drugs, Crime and Public Health*, he presented original analyses based on data from the Psychiatric Morbidity Survey, his own ethnographic research, and international sociological studies [R5]. This showed the discrepancy between the relatively even social distribution of illicit drug use, and the concentration of dependence and harms among disadvantaged groups.

Drug-related deaths in the UK have risen dramatically since 2012, with over 4,000 recorded in 2018. This increase has again been concentrated in the most deprived communities. Stevens instigated a working group of the UK Advisory Council on the Misuse of Drugs (ACMD) to report on how these deaths can best be prevented. He co-chaired the working group and was lead author of the ACMD report, published in **2016**, *Reducing Opioid-Related Deaths in the UK* [R6]. This report is recognised in the field as 'one of the most detailed analyses of why the current approach within the UK is exacerbating drug-related deaths, which are the highest since records began' [b]. It provided evidence-based recommendations for the prevention of these deaths, including investment in opioid substitution treatment, funding of heroin-assisted treatment, and the establishment of safer drug consumption rooms in areas with high concentrations of injecting drug use. Stevens has since been interviewed on this topic in many media outlets, including another appearance on the *Today* programme and on the national evening TV news programmes of both the BBC and ITV.

Stevens' work in the field of drug policy and practice includes original peer-reviewed research, published in high-quality criminology and drug policy journals, as well as work that he led for the ACMD. The ACMD is the independent body that has a statutory duty to advise ministers on the reduction of harms related to drugs. Stevens was a member of the ACMD from **2014** to **2019** (when he resigned over his concerns about political vetting of its membership). He was also President of the International Society for the Study of Drug Policy between **2015** and **2019**. He was appointed as special adviser to the House of Commons Health and Social Care Committee for its **2019** inquiry on drug policy [c, e].

3. References to the research

- [R1] Hughes, C., and Stevens, A. (2010). 'What can we learn from the Portuguese decriminalization of illicit drugs?'. *British Journal of Criminology* 50: 999-1022. <http://dx.doi.org/10.1093/bjc/azq038>
- [R2] Hughes, C., and Stevens, A. (2012). 'A resounding success or a disastrous failure: Re-examining the interpretation of evidence on the Portuguese decriminalisation of illicit drugs'. *Drug and Alcohol Review* 31: 101-113. <http://dx.doi.org/10.1111/j.1465-3362.2011.00383.x>
- [R3] Stevens, A. (2019). 'Is policy "liberalization" associated with higher odds of adolescent cannabis use? A re-analysis of data from 38 countries'. *International Journal of Drug Policy* 66: 94-99. <https://doi.org/10.1016/j.drugpo.2019.01.013>
- [R4] Stevens, A., Hughes, C., Hulme, S., and Cassidy, R. (2019). 'Depenalization, diversion and decriminalization: a realist review and programme theory of alternatives to criminalisation for simple drug possession'. *European Journal of Criminology*. <https://doi.org/10.1177/1477370819887514>.
- [R5] Stevens, A. (2011). *Drugs, Crime and Public Health: The Political Economy of Drug Policy*. London: Routledge. <http://www.routledge.com/books/details/9780415491044/>
- [R6] ACMD (2016). *Reducing Opioid-Related Deaths in the UK*. London: Home Office. <https://www.gov.uk/government/publications/reducing-opioid-related-deaths-in-the-uk>

4. Details of the impact

In recognition of Stevens' research on drug policy, he has received a large number of invitations to speak at events, media interviews, write blog pieces, and to advise and appear as a witness to parliamentary committees, including the House of Commons Health and Social Care Committee [c], the Drugs, Alcohol and Justice Cross-Parliamentary Group, and the Scottish Affairs Committee [f]. He was also invited to private meetings with senior politicians and policy working groups in the United Kingdom and overseas. These pathways have led to the following impacts on policy and practice in the UK, Ireland, and Norway since 2014.

United Kingdom

Stevens' research has impacted policy and practice in the UK throughout this REF2021 period. For example, he presented his research on Portuguese decriminalisation in a private meeting with the Deputy Prime Minister in the run-up to the 2015 General Election. For that election, it became the policy of the Liberal Democrats to import and adapt the Portuguese model of decriminalisation to the UK. By the 2019 General Election, the Labour Party, the Scottish National Party, and Green Party were also committed to reviewing decriminalisation of drug possession. These changes in party policy were informed by repeated uses of Stevens' research on decriminalisation; for example, in parliamentary reports that directly cite Stevens [c, f] and in parliamentary debates, such as the intervention by Paul Flynn to Diane Abbot in July 2017 [g], which quoted figures included in Stevens' research [R1]. The Health and Social Care Committee also used this research to recommend decriminalisation [c]. The Committee's chair writes: 'it was especially helpful to be able to draw on his expertise on the public health approach and decriminalisation in Portugal and elsewhere' [e].

Away from national politics, 'at a local level there have been significant reforms by police force areas. Professor Stevens' work has been cited by many of these forces in their implementation of drug diversion schemes – this is essentially de facto decriminalisation' [b]. One of the police leaders of such a scheme reports that he 'relied heavily on the critically balanced research of Prof. Stevens and Dr Hughes which provided a framework for Thames Valley Police's drug diversion scheme' [h].

Stevens' work on preventing drug-related deaths also led to changes in national policy and local practice. Ministers officially accepted all but one of the recommendations of his report for the ACMD [R6]. In a 2017 parliamentary debate on the UK drug strategy, MPs from all sides cited Stevens' ACMD report [g]. It was quoted extensively, for example, by Labour MP Thangam Debbonaire. The relevant minister, Sarah Newton, stated: 'our policy is based on independent evidence, and is informed by the ACMD' [g].

The recommendation to consider opening safer drug consumption rooms [R6] was rejected by ministers, but it was reiterated in recent parliamentary reports that were directly informed by Stevens' research [c, f]. It is the policy of the Scottish National Party to open such clinics across Scotland. One is now operating in Glasgow, through voluntary action in 2020. Several local areas are also planning to establish such services in England and Wales.

At local level, the ACMD report [R6] has also been used widely as a basis for local plans to prevent drug-related deaths. For example, it 'featured extremely heavily to develop Thames Valley Police and the South East regional crime unit drug policy' [h]. This is just one example of how Stevens' ACMD report informed joint working between police and public health agencies to develop services to prevent deaths. This includes the opening in 2019, in Glasgow and Middlesbrough, of heroin-assisted treatment clinics for people for whom first-line opioid substitution therapy has not worked.

Ireland

In Ireland, Stevens' research [R4] was published as an appendix to the report of the Government-appointed committee to advise on alternatives to criminalisation, and was extensively cited in the committee's report [d]. The committee recommended an alternative that draws on those evaluated in Stevens' research [R4]. The Irish Government then accepted these recommendations in a modified form, meaning that people caught in possession of drugs will not be prosecuted for a first or second offence. The Irish minister for drug policy stated in August 2019 that 'the decision to introduce a health diversion for persons in possession of drugs for personal use is a hugely important step in developing a public health approach to drug use in Ireland' [i]. The Adult Cautioning Scheme was implemented in December 2020.

Norway

The Norwegian Parliament voted to decriminalise drug possession in 2017. In September 2019, Stevens was invited to take part in a two-day seminar at Oslo University to present his research on alternatives to criminalisation to members of the commission appointed by the Norwegian Government to develop the new policy. Their 2019 report [j] used his work extensively, with over 35 citations of R1, R2, and R3. It recommended a model of decriminalisation similar to Portugal's [R1, R2]. This report is now being translated into changes to Norwegian law, which are expected to be implemented in 2021.

The overall impact of Stevens' research has led to his being recognised as 'one of the most respected and trusted academics in the field. He is one of those rare academics who not only produces research of exceptional quality, but will use that research to publically advocate for policies that protect and improve the lives of some of the most marginalised in society' (Director of the UK drug law charity, Release) [b].

5. Sources to corroborate the impact (indicative maximum of 10 references)

[a] Early Day Motion Number 1 of 2019 Parliamentary Session: Professor Alex Stevens and the Advisory Council on the Misuse of Drugs. Notes the importance of Stevens' contribution to the work of the ACMD and its role in policy making.

<https://edm.parliament.uk/early-day-motion/53346/professor-alex-stevens-and-the-advisory-council-on-the-misuse-of-drugs>

[b] Letter from the Executive Director of Release. Demonstrates the impact of Stevens' research on drug policy at national and local levels in the UK.

[c] Health and Social Care Committee (2019), Drug Policy: First Report of Session, 2019. Uses Stevens' research to recommend decriminalisation in line with the Portuguese model and implementations of his ACMD recommendations on preventing drug-related deaths (pp. 8 and 21).
<https://publications.parliament.uk/pa/cm201919/cmselect/cmhealth/143/143.pdf>

[d] Department for Equality and Justice, Republic of Ireland (2019). Report of the Working Group to Consider Alternative Approaches to the Possession of Drugs for Personal Use. Uses Stevens' research to recommend alternatives to criminalisation for drug possession in Ireland (pp. 41 and 93).
http://www.justice.ie/en/JELR/Pages/Report_of_the_Working_Group_to_Consider_Alternative_Approaches_to_the_Possession_of_Drugs_for_Personal_Use

[e] Letter from former Chair of the Health and Social Care Select Committee. Describes Stevens' 'key role' in the work of the Committee and its use of his research on decriminalisation and preventing drug deaths.

[f] Scottish Affairs Committee (2019). Problem drug use in Scotland. Uses Stevens' research and his oral evidence to the Committee to recommend decriminalisation of drug possession and implementation of his ACMD recommendations to prevent drug-related deaths (Stevens is referenced at least eleven times on pp. 23, 25, 26, 36, 37, 40, 41, 42, 44, 45, and 72).
<https://publications.parliament.uk/pa/cm201919/cmselect/cmsscota/44/44.pdf>

[g] House of Commons debate on drug policy. Hansard, 18 July 2017. Highlighted sections reference the importance of expert advice from the ACMD and Stevens' research on decriminalisation and preventing drug-related deaths by several MPs and the minister responsible for drug policy.
<https://hansard.parliament.uk/Commons/2017-07-18/debates/733C6229-49D0-4559-8F59-5F1244C2DE13/DrugsPolicy>

[h] Letter from T/Det Chief Inspector, Thames Valley Police. Describes the role of Stevens' research in the development of local practice on *de facto* decriminalisation and preventing drug-related deaths.

[i] Irish Government minister's announcement of changes to policy on drug possession and credited working group report. Announces the implementation of recommendations on alternatives to criminalisation for the Irish Government and credits the report of the Working Group to Consider Alternative Approaches to the Possession of Drugs for Personal Use for the change. Stevens' research is referenced extensively in this report (see pp. 37, 41, 42, 44, 46, 62, and 93).
<http://www.justice.ie/en/JELR/Pages/PR19000211>

[j] Norwegian Government policy committee report: *Rusreform – fra straff til hjelp* [Drug reform – from punishment to help]. This report uses Stevens' research as a basis for recommendations to implement Portugal-style decriminalisation in Norway (see p. 157, n. 325).
<https://www.regjeringen.no/contentassets/dfae684e627f4df29c800352bfc4d768/nou-2019-26-rusreform---fra-straff-til-hjelp.pdf>.