

DRUG LAW REFORM – LINES OCT 2024

The Scottish Government paper, A Caring, Compassionate and Human Rights Informed Drug Policy for Scotland, was published in July 2023.

- The paper outlines what a progressive, evidence-based drugs policy would look like with public health and the reduction of harm as its underlying principles and is based on evidence of what works around the world.
- Our goal is that no person finds themselves dependent on substances, but that if they do, they should be supported and not criminalised for that health condition.
- Our drug law paper proposes that decriminalisation of all drugs for personal supply should be progressed as part of a wider review of drug laws to help to reduce stigma and remove some barriers to treatment.
- We do not propose immediate changes to how supply is regulated but commit to explore the relative merits of these ideas through citizen engagement and expert assessment.
- The argument that evidence-based harm reduction measures that could be immediately implemented equates to condoning drug use, ignores the evidence available on the positive effects the measures can have on a range of outcomes (including substance use outcomes), and prioritises moral judgements over saving lives.

A criminal justice approach is not just an obstacle to people's recovery but is also less effective than a public health focussed approach at encouraging positive behaviour change.

- The Chief Executives' Board of the UN, representing 31 UN agencies, has adopted a common position on drug policy that endorses alternatives to conviction and punishment, including decriminalisation of drug possession for personal use.
- Decriminalisation supports more people into treatment, reduces criminal justice costs, reduces stigma and the negative impacts a conviction can have on a person.
- There is broad international consensus among leading evidence-based health agencies, including the United Nations and the World Health Organisation, that a public health approach should be adopted to tackle drug harms.
- In the UK, the Royal Society for Public Health and the Faculty of Public Health endorse an approach to drugs policy that includes decriminalisation and diversion from prosecution to provision of treatment and harm reduction interventions.

This is not a silver bullet but a framework to help, treat and support people rather than criminalise, stigmatise and fail them.

- We cannot simply import one model or approach from another country. In implementing any policy, we will learn from other countries to ensure we legislate in a way that optimises public health benefits and minimises unintended consequences.
- The balance of international evidence shows that, while decriminalisation does save and improve lives, it is not enough in itself.
- Strong support and a range of treatment and harm reduction services are needed, and change will take time.

- We continue to firmly support efforts to catch and convict the organised criminals who are in control of so many communities.

We will continue to learn from other countries to ensure we can support policies that optimise public health benefits, while minimising any unintended consequences.

- A Scottish Government report 'International Approaches to Drug Law Reform' (2021), outlines case studies of different approaches countries have taken to decriminalisation. Internationally, there is growing recognition of the harms that punitive drug policies cause, and a movement towards harm minimisation and health efforts instead of traditional criminalisation, law enforcement and abstinence-based responses.
- We must move away from this oversimplified narrative of being either soft on crime or hard on drugs, and have a more informed, educated conversation which more accurately reflects how best to minimise harm based on the evidence.

Portugal decriminalised drugs in 2001 and is an example of where decriminalisation has had an impact on drug deaths, although the country is experiencing an increase in deaths again now.

- In 2001, Portuguese drug death rates were very similar to the EU average. While drug death rates fell in Portugal following reform, they increased across the rest of Europe. From 2011 onwards rates increased across both Portugal and the rest of the EU, however, the gap between the two remains wider than pre-reform (data available up to 2020). Drug death rates in Portugal are much lower than in Scotland and below the European average.
- Decriminalisation came along with a full raft of health-based measures and a prevention strategy. Deaths do not present the whole picture and the health benefits such as the reduction of blood borne viruses.
- International countries have taken a number of different approaches to decriminalisation and a public health response to problem substance use. Examples include the social equity approaches of places like New York; the safe supply of Switzerland; the drug checking of New Zealand; and the many countries that have implemented supervised drug consumption facilities. We are clear that we cannot implement another country's model wholesale in Scotland, but it is vital we learn from countries around the world to understand what may be appropriate and effective in a Scottish context.
- **In February 2021, Oregon became the first state in the U.S. to decriminalize small amounts of drugs for personal use. However, Oregon re-criminalised drugs in August 2024 following an increase in overdose deaths.**
- Since its enactment, however, the policy faced implementation challenges, and addiction treatment capacity did not sufficiently expand to meet the state's needs.
- But much is still to be achieved in reducing stigma and developing health services in Oregon.
- There is also some evidence to suggest that the increase in drug overdoses should not be attributed to drug decriminalisation, and the state's transition to a fentanyl-

based unregulated drug market coinciding with the introduction of this policy could explain the overdose mortality during this time.