

Street policing of problem drug users

Findings
Informing change

November 2007

Street policing involves policing personnel having frequent contact with problem drug users. Although many in this group are considered to be prolific offenders, little is known about the nature, processes and outcomes of their routine interactions with police. This study aims to fill that gap.

Key points

- Street policing involved personnel from public and private agencies but problem drug users associated the coercive use of authority with police officers.
- Policing encounters with problem drug users aimed to manage a 'risky' population and were seldom initiated in response to a specific crime. Consequently, problem drug users often experienced policing attention as hassle which they felt was unjust and intrusive.
- Encounters between public police and problem drug users rarely involved formal use of police powers. Rather, they usually involved running name checks, enquiring about their presence and behaviour and moving them elsewhere.
- Police officers said the value of these encounters was not only in the information about people and places gained – they also communicated to problem drug users that their everyday activities were being routinely monitored.
- Welfare-oriented activities (for example, referrals to drug treatment services) were not a core part of routine encounters between problem drug users and police officers.
- Police officers said discretion would be used if they found evidence of Class A drug use (such as needles) while searching someone, but actual possession would usually result in arrest. The outcome of arrests, whether 'no further action', caution or charge, varied between and within the three research sites.
- Regular low-level uses of police authority, such as name checks, had a compounding effect on problem drug users, sometimes fostering antagonism and resentment.
- Street policing was perceived by problem drug users to be an 'occupational hazard'. While they used many strategies to minimise the threat of unwanted policing attention, it was not a deterrent to involvement in drugs and/or crime.
- To avoid contact with police, problem drug users sometimes went 'underground' or moved to different areas, making it difficult for support agencies to contact them and offer help.

The research

By Stuart Lister and Emma Wincup, University of Leeds, and Toby Seddon, University of Manchester.

Background

Tackling Drugs to Build a Better Britain, a ten-year strategy published in 1998, focused strongly on tackling drug-related crime. The police were expected to become a key player, combining the curbing of drugs supply with the potentially contradictory role of channelling drug-using offenders into treatment. The strategy provided little direction in terms of the street policing of problem drug users. Instead, this was shaped by wider developments in the organisation and delivery of policing. Prioritising 'volume crime', the removal of institutional targets for drug offences and the greater emphasis on reassurance-based street patrols have diluted the extent to which problem drug use is the focus of law enforcement agendas.

Since 1998, a series of policy and legislative developments have informed the street policing of problem drug users:

- The *Updated Drug Strategy 2002* included a tougher focus on Class A drugs and expanded opportunities in the criminal justice process for drug-using offenders to access treatment.
- The *Drug Interventions Programme (2003)* aimed to get drug-misusing offenders out of crime and into treatment and other support.
- In 2004, an amendment to *The Misuse of Drugs Act 1971* reclassified cannabis as a Class C drug (from Class B), potentially allowing the police to prioritise action on Class A drugs.
- The *Prolific and Other Priority Offender Programme*, established in 2004 as a multi-agency initiative, focused on the 0.5 per cent of offenders responsible for committing 10 per cent of offences. In 2007, it was aligned more closely with the Drug Interventions Programme.
- The *Anti-Social Behaviour Strategy (2002)* led to new policies and powers designed to help police and community safety partners tackle low-level crime and disorder.
- The *Police Reform Act 2002* introduced police community support officers to address public demands for a greater, more visible police presence on the streets.

- The *Neighbourhood Policing Programme*, rolled out nationally in 2005-6, established the institutional arrangements for a more community-focused and 'customer-responsive' method of delivering policing.

Key issues

Organisation of street policing

Across the three research sites, street policing of problem drug users took a variety of forms and involved the police working alongside personnel employed by other statutory and private sector organisations. On city centre public streets, the police received information about problem drug users from CCTV operators and municipal wardens. On quasi-private streets within shopping centres and retail parks, private security guards took the lead role in policing.

Police officers rarely specialised in the policing of problem drug users, although some focused on particular groups (for example, beggars, rough sleepers and prolific offenders) which brought frequent contact with them. More typically, police officers encountered problem drug users whilst conducting generic policing activities, such as patrolling neighbourhoods, undertaking routine enquiries and responding to calls for assistance.

Managing problem drug users

Street encounters between problem drug users and police personnel were often unplanned and did not involve formal use of police powers. Police, especially those engaged in neighbourhood policing, often approached problem drug users but not in response to a specific crime. Instead, they made judgements about which individuals to approach on the basis of their knowledge about past behaviour and judgements of their current behaviour, circumstances and appearance.

These encounters aimed to show problem drug users they were being monitored in the hope it would encourage them to regulate their future behaviour to escape further police attention. The location of problem drug users was influential, whether in an area thought to be a 'hotspot' for drugs or an area police wanted to keep free from drugs. Police officers also said they used these encounters to obtain information, such as where to find someone with an outstanding warrant for their arrest or the name of an individual wanted for a crime.

In some instances, formal use of police powers was necessary, sometimes following checks with CCTV and police control rooms and most commonly included:

- stop and account;
- stop and search; and

- exclusionary strategies to displace problem drug users.

Arrests were rare. Police officers in all three sites said the usual response to an individual found in possession of Class A drugs was to arrest, but the outcome of these arrests was inconsistent within and between the research sites. If evidence of drug use (i.e. paraphernalia) but not drugs was found, discretion was used about whether to arrest. Arresting a problem drug user allowed them to access drug treatment, if they met certain criteria which suggested that their offence was drug-related. Indeed, police officers sometimes justified their decisions to arrest on this basis. In contrast, if police used their discretion and issued a Penalty Notice for Disorder, drug users would not be provided with such support.

Problem drug users' experiences of policing

Problem drug users' experiences of street policing varied in accordance with the breadth of policing duties undertaken on the streets. Mostly their experiences were as the recipients of unwanted policing attention, whether overt or covert surveillance, informal cursory questions about their circumstances or actions, or the formal use of police powers. As a consequence, interactions between problem drug users and police were often adversarial.

Within these encounters, the way authority was dispensed greatly influenced their experience of being policed. Many problem drug users felt police tended to define them in terms of their drug use and criminal behaviour. This labelling process often had a demoralising effect on those subjected to it. Former problem drug users who were abstaining or undergoing treatment programmes often continued receiving regular policing attention because policing profiles were constructed from information and knowledge of past behaviours. Potentially, this can impede a drug user's attempts to establish an identity unrelated to drug use and offending and to reintegrate themselves into mainstream society.

The subjective experience of being policed was also affected by the amount of attention received. Some individuals were systematically targeted as they went about their routine business; others had only intermittent and fairly superficial dealings with police. Those who regularly received coercive forms of policing described their experience as 'hassle', suggesting that the regular use of authority can have a compounding effect so that even minimal policing actions can give rise to friction and resentment. As many of these encounters were preventative in nature and so unrelated to a specific crime incident, they were often seen to be unwarranted.

The implications of street policing

Street policing attention was widely viewed by problem drug users as an 'occupational hazard' to be managed rather than as an effective deterrent to involvement in drugs and/or crime. For example, experiencing arrest and detention was thought to 'come with the territory'. For problem drug users, managing the threat of drug withdrawal largely outweighed concerns about attracting policing attention and criminal justice sanctions.

In order to reduce the threat posed by forms of street policing, problem drug users tried to manage relations with police. This led most to limit their contact with them by avoiding certain times and places they associated with high levels of policing and surveillance, using drugs in secluded places shortly after purchasing them and concealing drugs on their person or in their body

Some problem drug users sought to manage policing and other criminal justice interventions by moving to a different police force area. In so doing, they risked severing relationships with locally-tied treatment agencies and other support structures. The same outcomes sometimes arose from policing strategies which deliberately 'pushed' problem drug users out of one area and into another. For example, a street outreach worker employed by the local council at one site suggested that policing activity focused on begging and rough sleeping had led many of his regular clients 'to go missing'.

The desire of many problem drug users to minimise their contact with police had two important consequences. Firstly, it reduced the extent to which problem drug users passed crime-related information to police. Secondly, it made it less likely that they would report offences to police, either as victims or witnesses of crime. This has implications for police and problem drug users, not least because the latter are a highly victimised group.

Conclusions and policy implications

The street policing of problem drug users, while typically not the focus of specialist activity, nevertheless is an important strand in a range of generic policing work stretching across the extended policing family. It is, in other words, a *mainstream* policing issue.

Policing of problem drug users in the study focused mainly on managing the 'problem' without formal use of police powers. Operating in a preventative manner, it was problem drug users rather than drug offences which were the main focus of street policing. The way this 'risky' population was managed by policing

personnel had implications for policing and support agencies as well as for problem drug users.

For some problem drug users, street encounters with policing personnel were frequent. Whilst this could be a source of friction and antagonism, the regularity of this contact could be used constructively for more than the purposes of regulation and control. But for a few exceptions, this potential appeared to be under-utilised in the research sites. Possibilities include police providing telephone numbers or referrals to agencies offering support and advice. In addition to drugs, these interactions could cover benefits, housing and employment.

Displacement and exclusion were central to policing strategies towards problem drug users. If police officers judged it inappropriate to make formal use of their powers, there were limited options available to them. Moving problem drug users elsewhere in a piecemeal manner is unlikely to address their problems. It is also likely to have repercussions for residents and policing and support agencies in the area drug users are moved into. Consideration should therefore be given to planning where drug users might go when moved on or excluded. A multi-agency approach to managed displacement should be considered to provide strategic oversight and coordination of effort.

Community-based drug treatment agencies are a place where police can readily locate problem drug users. Although this type of targeted street policing activity was not a common feature in the research sites, any visible policing activity within the vicinity of drug agencies risks eroding the trust of users who view those services as 'safe spaces'. The relationship between policing agencies and treatment agencies needs to be carefully and actively managed. At one research site, a protocol was established between the police and drug agencies and this may provide a model of good practice.

A further example of the need to manage the relationship between the police and drug agencies relates to police officers finding individuals in possession of drug paraphernalia. Sometimes this would be confiscated and at other times drug users would be allowed to keep it. These inconsistent police responses led some drug users to avoid carrying paraphernalia. Further guidance could help to ensure police practices do not undermine the harm reduction efforts of drug services.

The recent growth of summary forms of justice has given policing personnel new powers to issue 'street fines' for a range of low-level offences. Penalty Notices for Disorder in particular have potential implications for problem drug users. Individuals who receive these disposals circumvent the processes of arrest and charge which can trigger involvement in treatment interventions. Therefore, any expansion in the use of these fines, whether planned or otherwise, should be monitored in light of their potential to undermine the significant investment in treatment tied to criminal justice processes.

About the project

The study was conducted over an 18-month period in three police force areas in England and Wales and focused on one division in each. The main sources of data were interviews with 42 police officers and 62 problem drug users and over 100 hours of observation accompanying policing personnel in street contexts. The experiences of other policing personnel (for example, street wardens and security guards) were obtained through a small number of focus groups and interviews. In addition, researchers interviewed professionals working in a range of organisations, including drug agencies and local councils, who had frequent contact with problem drug users. Key contributors to policy and practice debates were also interviewed. Fieldwork data was supplemented by administrative data supplied by the three police forces.

For further information

The full report, **Street policing of problem drug users** by Stuart Lister, Emma Wincup, Toby Seddon, Sam Barrett and Peter Traynor, will be published by the Joseph Rowntree Foundation in early 2008.

It will be available as a free download from www.jrf.org.uk

Published by the Joseph Rowntree Foundation, The Homestead, 40 Water End, York YO30 6WP. This project is part of the JRF's research and development programme. These findings, however, are those of the authors and not necessarily those of the Foundation. ISSN 0958-3084

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Multiple stigmas Problem drug users frequently report suffering from other stigmas: being black, female, Hepatitis C or HIV positive, disabled or suffering from a mental disorder. A general public are needed. Volunteering may be one fertile area. The police need to reflect on their practice in policing problem drug users at street level. Users should always be treated with respect. 10. Start studying Policing the Drug Problem. Learn vocabulary, terms and more with flashcards, games and other study tools. Sought to develop strategies for countering street-level drug distribution and associated disorder problems. There are three stages to the drug market analysis program. Planning stage Implementation stage Maintenance stage. how were drug hotspots located. using computer mapping of existing police records, emergency narcotic-related calls for service, and local officer intelligence. The planning stage requires what. Officers gathered intelligence, met with local businesses and residents, identified specific areas within the hot spot to target, and drew up case files on main individuals involved in local illicit drug sales. the implementation phase. an observer on patrol with OPP forces during the summer of 1985, and in extensive, open-ended interviews with community members, drug users, drug treatment personnel, police administrators, and rank-and-file police officers from the Lower East Side. Several presidential commissions appointed to study the crime problem consistently pointed to police reform as an important component of any crime-reduction package. Police scholars called for increased professionalism (Saunders, 1970; President's Commission, 1967b), greater utilization of scientific and technological advances (Clark, 1970; President's Commission, 1967c), and improvements in police response time. Street-level dealers are a fluid group, made up primarily of drug users who sell to... Street Drugs: Know the Facts and Risks. Share on Facebook Share on Twitter Share on Pinterest Save Email Print. In this Article. These designer drugs came on the scene fairly recently and became popular fast. That may be because they were easy to get and used to be hard to detect in drug tests. They're highly addictive, and they come in a crystalline powder that users swallow, inhale, or inject. This drug comes in different forms. A user can snort the powder type through their nose or inject it into their bloodstream. Crack is a crystal form of the drug that's smoked and absorbed into the bloodstream through the lungs. What else it's called: Blow, Bump, C, Candy, Charlie, Coke, Crack, Flake, Rock, Snow, or Toot. What type of drug is it? Street policing involves policing personnel having frequent contact with problem drug users. Although many in this group are considered to be prolific offenders, little is known about the nature, processes and outcomes of their routine interactions with police. This study aims to fill that gap. Key points. Street policing involved personnel from public and private agencies but problem drug users associated the coercive use of authority with police officers. Policing encounters with problem drug users aimed to manage a 'risky' population and were seldom initiated in response to a specific crime. Consequently, problem drug users often experienced policing attention as hassle which they felt was unjust and intrusive.