### **Citywide Drugs Crisis Campaign**

## Response to the programme for government, 'Government for National Recovery 2011-2016'

Citywide welcomes the inclusion of the section on drugs in the recently published programme for government. We believe this indicates an important public commitment by the government to tackling the drugs issue. While noting that the drug section is under Justice & Law Reform, we would urge the government to clarify which department will take responsibility for the National Drugs Strategy.

We are assuming the National Addiction Strategy referred to in the programme for government is the original National Drug Strategy 20009-2016 plus the alcohol strategy 'National Substance Misuse Strategy'.

We welcome the government 'providing renewed impetus' to tackling the drugs crisis. In recent years CityWide has campaigned to have the drug crisis a political priority. The government's commitment will of course need to be backed up with actions and resources.

Below are the commitments give in the programme for government followed by a comment from CityWide.

• expand rehabilitation services at local level in line with need and subject to available resources;

We welcome the commitment to 'expand rehabilitation services at local level' again this is an indication that local services are best placed to meet the needs of local communities.

• integrate drug and alcohol abuse strategies at local level; strengthen the supply reduction effort and criminal assets seizures, particularly at local level;

The commitment to 'integrate drug and alcohol abuse strategies at local level', is welcomed by CityWide and we hope that the incoming government continues to build on the good work done by the National Substance Misuse Working Group. The introduction of structures that deliver on this strategy is very important.

 develop compulsory as well as voluntary rehabilitation programmes; reduce the flow of drugs to prisons;

We take as a negative view of the commitment to 'develop compulsory as well as voluntary rehabilitation programmes'. Rehabilitation programmes needs to be evidence based. CityWide would encourage the government to ensure that the 'voluntary' rehabilitation programmes receive the full and adequate resources they need before scarce resources are diverted into 'compulsory' programmes that will have limited success.

The commitment to 'reduce the flow of drugs into prisons' which may appear commendable in reality has serious consequences. People who are in prison who have a drug use problem need either drugs or adequate services which will encourage treatment & rehabilitation. To cut off the supply will require extra resources to be made available to the IPS and to the medical services that operate within our prisons. Even today not all prisons have access to treatment & rehabilitation. This situation needs to change as a matter of urgency if the drugs problem in Ireland's penal system is to be fully addressed.

• ensure every Government Department, Agency or task force responsible for implementing elements of the National Addiction Strategy will be required to account to the Minister for their budget annually and to demonstrate progress on achieving targets;

The government's commitment to 'ensure every Government Department, Agency or task force responsible for implementing elements of the National Addiction Strategy will be required to account to the Minister for their budget annually and to demonstrate progress on achieving targets', needs serious clarification. Which Minister is being referred to, is it a Minister with responsibility for the National Drug Strategy or is it the Minister for Finance. Government departments, statutory agencies, community & voluntary sectors had all been collectively accountable when the National Drug Strategy Team was in place. We would welcome a return to this structure as it played a very positive role and could once again bring focus and accountability to the National Drug Strategy.

• work with Local and Regional Drug Task Forces to implement effective programmes aimed at preventing addiction in schools;

The commitment by government to 'work with Local & Regional Drug Task Forces to implement programmes aimed at preventing addiction in schools' is positive and clearly shows that this partnership structure continues to be the most effective means of delivering the National Drug Strategy. But the role of Task Forces goes far beyond simply delivering 'prevention addiction in schools'. The vision that saw the establishment of Local Drug Task Forces (LDTF's) must be built on, 'to ensure a fully integrated response to the drug problem in the worst hit areas which takes account of specific needs of those areas. Of equal importance, the Task Force process allows local communities - the people most affected by the problem - to work with the State Agencies and voluntary organisations in designing and delivering that response" (Introduction to LDTF handbook).

A commitment to building on the success of Task Forces and to strengthening the partnership element would have been very welcome, especially at a time when Department of Education have withdrawn from local structures and whereby the outgoing government's moratorium is having a negative effect on statutory participation on Local & Regional Drug Task Forces.

• require all local and regional drugs taskforces to build on the success of Education Prevention Units in other taskforces;

While the programme for government requires Task Forces to 'build on the success of Education Prevention Units in other taskforces.' There appears to be confusion where these Education Prevention Units are actually situated.

• update the out-dated drugs awareness programmes in schools to reflect current attitudes and reality of recreational drug use amongst teens;

CityWide welcomes the commitment to 'update outdated drugs awareness programmes in schools to reflect current attitudes and reality of recreational drug use amongst teens'. Done properly these awareness programmes could serve to massively reduce the harm done by drugs.

• target resources to increasing the number of needle exchange programmes and rehabilitation places across the country where it is needed most;

Equally welcome is the commitment to, 'target resources to increase the number of needle exchange programmes and rehabilitation places across the country where it is needed most'. For too long the proposed needle exchange programme has stalled, agreement on payment to IPU needs to reached as a matter of urgency. Outside Dublin there is a dearth of rehabilitation services, a commitment to reverse this is very welcome.

• assist drug users in rehabilitation through participation in suitable local community employment schemes.

The commitment to, 'assist drug users in rehabilitation through participation in suitable local community employment schemes', is welcome. But again clarification is needed, will these 'community employment schemes' come under the jurisdiction of Special CE Schemes or does the government intend to introduce a new scheme.

# We also note that the issue of drugs is dealt with under several other sections including:

#### **Reforming local government**

We will move many of the functions currently being performed by agencies – such as community employment and enterprise supports – back to local government and ensure that all property-related revenues are part of the income stream of local government. **P27** 

Clarification is needed, what agencies are they referring to & will this include Special CE Rehab Schemes?

#### **Health Service Reform**

The Health Service Executive will cease to exist over time. Its functions will return to the Minister for Health and the Department of Health and Children; or be taken over by the Universal Health Insurance system. Staff will be deployed accordingly. **P32** 

The HSE are the single greatest funder of community & voluntary based drug projects. If the HSE no longer exists who will become the funding channel?

#### **Health Administration**

The Minister for Health and the Department of Health will be responsible for policy and spending.

The HSE will cease to exist as its functions are given to other bodies during this process of reform.**P36** 

Again, where will the funding for community based projects come from?

#### **Criminal Law Reform**

We will introduce x-ray scanners to all prisons to screen people and goods entering prisons to stop the flow of drugs and mobile telephones into prisons. **P47** 

With added resources being put in to supply reduction we hope the government will be putting equal resources into treatment & rehabilitation in prisons

#### **Criminal Law Reform**

We will ensure better coordination between the Irish Prison Service and the Probation Service to create an integrated offender management programme.

A review will be conducted of the working of mandatory sentencing laws in the context of an overall review of drugs policy. **P47** 

There is already a commitment in the National Drug Strategy, action 43, to through care for prisoners with a drug misuse problem. This commitment, as it reads, needs to include the community sector.

CityWide welcomes the commitment to reviewing 'mandatory sentencing' as it would appear it has not had the desired effect.