1.9 Arrest referral cost-effective way to cut drugrelated offending

Findings Evaluators of arrest referral schemes in Brighton, Derby and Southwark have produced a synthesis of their findings with practice recommendations. All three were 'proactive' schemes in

which drug workers initiate contact with arrestees, usually in police stations after they have been identified by police as potentially having a drug problem.

128 respondents were interviewed six to eight months after contact with the schemes, about a fifth of the caseload. They were predominantly white men injecting illicit opiates (and often using other drugs) with long criminal histories; for 43% this was their first

contact with a drug service. Of the 90 contacted at arrest, 66 were

referred to services, 53 contacted them, and 41 received help.

Further analysis concentrates on the 80 contacted at arrest who were not subsequently imprisoned.

Compared with the month before their arrest, six to eight months later most had moderated their drug use and/or injecting or stopped altogether (eg, 33 of the 70 using illicit opiates had stopped doing so and 36 of the 49 using cocaine). A typical pre-contact spend of £400 a week on drugs had fallen to £70 and an average 125 acquisitive

crimes a month had dropped to 28.

In context Throughput rates for proactive schemes are far more satisfactory than when arrestees contact services on their own

initiative. Another type of scheme offers inducements (eg, caution rather than prosecution) to self-confessed offenders to encourage them into treatment. These also achieve good throughput but are applicable only in the case of relatively minor offences.

Proactive schemes seem to offer the best prospect of engaging the broadest range of drug-related offenders. Clients of the studied schemes committed on average four acquisitive crimes a day, well over ten times the rate seen in a national treatment entry sample (► Nuggets 1.3).

Despite methodological reservations (to do with sampling, problems in attributing outcomes to the schemes, and the clients' recall of their activities), there seems little doubt that the schemes reduced offending and drug use. The researchers estimate they would break even by preventing just four crimes per successful referral. The main limitation is the capacity of the treatment system to absorb such referrals.

Practice implications Where drug-related crime is common, proactive arrest referral is a cost-effective way to contact high-rate offenders and moderate their drug use and criminality. Schemes

require workers who can quickly establish rapport with offenders and maintain good relations with police, supported by consistent funding which recognises their casework as well as their referral roles. Suitable and accessible services to refer on to are essential and may need to be secured through special contracts or funding initiatives. Recent Home Office guidance suggesting that about 1% of police budgets be devoted to anti-drug partnership work could help

irces Edmunds M., May T., Hearnden I., et al. Arrest referral: emerging lessons from research. Central Drugs Prevention Unit, Home Office, 1998. Copies: Drugs Prevention Advisory Service, Home Office, phone 0171 217 8055. Contact Mark Edmunds, Criminal Policy Research Unit, South Bank University, Erlang House, 103 Borough Road, London SE1 0AA.

in this respect.

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