

Fear of police stop and search can deter opioid users from carrying anti-overdose kits

September 12 2018, by Andrew Mcauley And Liz Aston



Naloxone counteracts the effects of an overdose. Credit: Ethypharm

The levels of fatal overdose in the UK are catastrophic. More than 4,500 people <u>died of</u> a drug-related death in 2017 alone. In Scotland, the figure <u>totalled</u> 934, the highest ever annually recorded. Drug mortality rates in Scotland per head of population are roughly two and half times higher



than the UK average, and <u>among the</u> highest in Europe. The vast majority of these deaths continue to involve opioids such as heroin, morphine and methadone.

One of the Scottish government's flagship responses to this drug death crisis <u>has been</u> a national <u>naloxone</u> programme. Naloxone is an antidote that has been used in emergency medicine since the 1970s to treat the effects of opioid overdoses. Scotland began freely supplying naloxone kits to people who use drugs for peer administration in 2011, becoming the first country in the world to do so nationally. It also made them available to drug users' friends and family and to practitioners working in the field.

Wales and Norway have since launched comparable national programmes. Drug users in England <u>have been</u> receiving kits since 2015, but this is at the <u>discretion</u> of local authorities, so availability varies around the country. Other countries, including <u>Australia</u>, <u>Canada</u> and the <u>US</u>, are a similar mixed bag of availability – though in many cases, people have to pay.

In Scotland, around 40,000 naloxone kits <u>have been</u> supplied to date. Mortality rates among those at greatest risk – people recently released from prison – <u>have plummeted</u>, from roughly 10% to 4% in a decade. Yet this is completely overshadowed by the surging figure for drug deaths as a whole, 87% of which were from opioids. One of the only other regions where stats about the impact of naloxone kits are available is British Columbia, which <u>showed that</u> almost 300 people had been saved by their programme since it was rapidly expanded in 2016.

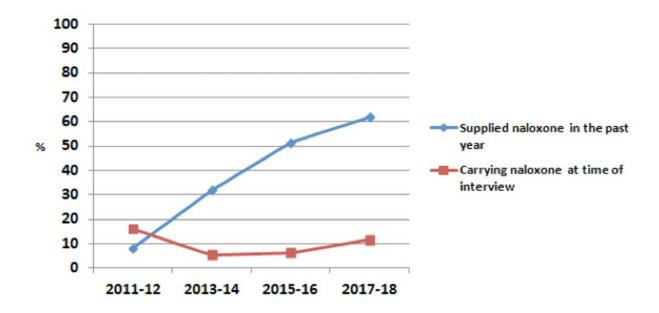
In 2015, we <u>reported Scottish data</u> which highlighted an unusual paradox: naloxone kits were reaching growing numbers of people who inject drugs, but fewer than one in ten kits were being carried around as intended. Our latest data, illustrated in the graph below, suggests this was



not a blip; carriage rates of naloxone remain stubbornly low.

Naloxone kits among people who inject drugs in Scotland, 2011-2018

This issue wouldn't be very important if we could be sure that the majority of drug use was taking place in people's homes, where kits are likely to be accessible. But we know from <u>recent research</u> conducted in Glasgow that many people inject drugs in public places. So why are people who inject drugs not carrying their naloxone kits around with them?



Naloxone counteracts the effects of an overdose. Credit: Ethypharm

Stop and search



To find out, we recently carried out <u>in-depth interviews</u> with a group of people who injected drugs. One key issue that emerged was a perception that police carrying out routine stop and searches would view the kits as drug paraphernalia because a needle is included. Although none of our interviewees were basing this on a real-life account, they feared they would end up getting taken to a police station for a fuller search.

Stop and search <u>has been</u> an issue with policing in England <u>for decades</u>, but only came to the fore in Scotland in 2014. This was thanks to <u>findings</u> that rates were almost four times higher than in England and Wales; and that in most cases, suspects were being asked to "voluntarily" give consent rather than because police believed they may be carrying drugs or a weapon or whatever.

Yet on the back of a huge amount of negative publicity, Police Scotland has gradually clamped down on stop and search in the past five years. It introduced a new <u>code of practice</u> in May 2017, along with <u>significant changes</u> to search policy. Even before these changes, the levels of stop and search <u>had dropped</u> by more than half. Overall, they have reduced dramatically.

It may be that people who inject drugs are not aware of Police Scotland's new approach – or they may still feel at risk of being stopped anyway. The reduction in stop and search rates is certainly likely to have been more marked for people in general than for opioid users. This points to an urgent need for the police to reassure people that no action will be taken if they are found carrying the kits – and more generally to raise awareness around the code of practice.

In many states in the US, among other countries, naloxone is carried by the police as part of their routine kit. Police are often the first responders at drug <u>overdose</u> incidents and equipping them in this way can save lives. One such state is Indiana, where <u>research found</u> attitudes



toward naloxone among officers to be overwhelmingly positive. There have been <u>recent calls</u> for the police in the UK to adopt the same practice. It could send a strong message that the police support naloxone carriage.

In Scotland, police and partners <u>have at least begun</u> raising awareness about <u>naloxone</u> among officers. Given that <u>the purpose</u> of Scottish policing is to improve public well-being and safety, this certainly makes sense. Ensuring that <u>police</u> practices reduce, rather than exacerbate, harms to <u>drug users</u> is an important part of that. Policing is part of the picture; now more than ever, collective action can help reduce <u>drug</u> -related deaths.

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