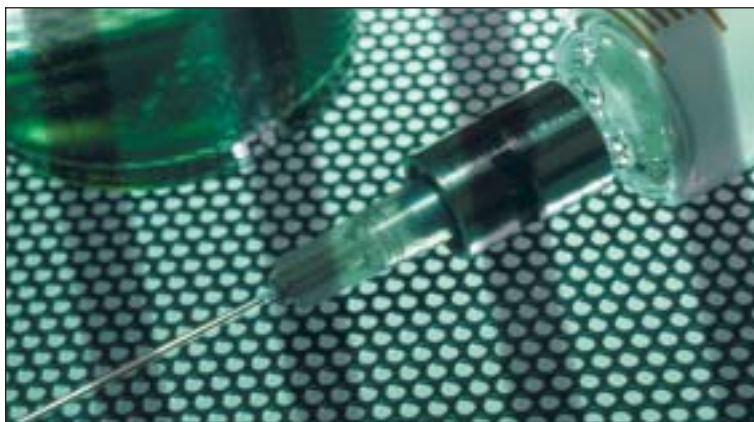


# Comment

## Drugs in Prison: who's controlling who?

Drugs are taking over the prison system and a strategy overhaul is dangerously overdue, suggests Professor Neil McKeganey.



**'There is another solution... you stop sending your addicts to jail in the first place.'**

In the classic nineteen seventies TV series 'Porridge' cigarettes are the common currency exchanged between prisoners, and drugs are not even mentioned at all. If the series were being remade now it would be illegal drugs that were being exchanged between prisoners and the laughs would be a good deal fewer. Drug abuse, in a way that was not even anticipated in the seventies, has virtually taken over our prison system to the point where the system itself is under severe threat.

There are numerous estimates of the number of inmates in Scottish prisons with a drug problem and the number who are actually using illegal drugs within prison. The eighth Scottish Prison Service survey found that out of the 23,206 prisoners admitted in 2005, 62 per cent were referred to addictions services. Some 50 per cent of those with a drug problem had used drugs in prison, with heroin being the second most commonly used drug after cannabis. Alarming as those figures are, the situation in certain prisons may be even worse. In the case of Corntonvale, Scotland's only all women prison, it has been reported that on

occasion, approaching 100 per cent of women prisoners have a serious drug problem. The dangers associated with the extent of drug abuse in Scottish jails are manifest.

First, there is the danger that some individuals will be entering the prison system drug free and acquiring a habit by the time they leave. In this situation the fact of living day by day alongside other prisoners who are using illegal drugs may have led some prisoners to start to use drugs as a way of coping with prison life. Second, there is the danger that individuals who enter the prison system with a low level drug habit find their habit escalating in the face of the sheer availability of drugs in prison. Third, there is the real danger that the growth of the drug economy in prison starts to corrupt the prison system itself. A recent leaked report from the English Prison Service's anti-corruption unit and the Police estimated that there may be as many as 1,000 corrupt officers working within English prisons. Much of that corruption is associated with the trade in illegal drugs and the provision of mobile phones to prisoners. We would be naïve not to

recognise the potential for similar corruption within our own prison system and the very strong likelihood that it is already occurring. Illegal drug use has an unparalleled ability to corrode and corrupt because of the enormous sums of money involved and the capacity to bribe and intimidate those that stand in its way.

The fourth problem when drugs take over, is the fact that a custodial sentence may come to be seen by the addict not as the loss of their individual freedom, but an opportunity to renew old acquaintances and establish new contacts that may assist the individual's drug habit on the outside. Prisons may not become the schools of diverse criminality that many once feared, but the breeding grounds for an escalating drug problem.

If these are the problems, what are the possible solutions? The first thing you need to be able to do is to reduce the flow of drugs into prison. That inevitably means much closer supervision of prison visits as well as prison staff. But what would a prison look like, that carried out such a high level of supervision? It would be immeasurably more unpleasant for the prisoners as well as the staff, and in its own way that much more difficult to manage. There would also almost certainly be much wider use of drug testing of prisoners.

But simply finding out if a prisoner has used illegal drugs is not enough. We also have to ensure that the very best treatment services are available within prison. But if you are going to provide drug treatment in prison you have to be clear about the aims of that treatment. For years methadone was largely unavailable within Scottish prisons because the focus of those prisons was on detoxing prisoners rather than stabilising them. The prison service, however, was criticised for the substantial number of addicts who overdosed when they left prison and resumed their drug habit. Under the pressure of that criticism, the prison service has come to focus more on stabilising addicts than detoxing them, and in that context methadone had

come to be much more widely used. However, stabilising addicts is not going to reduce the scale of the prison population with a drug problem, and if you don't do that you run the real risk of watching the numbers of addicts in prison steadily rising to the point where prison itself becomes the place where you temporarily house your addict population.

There is another solution which is no less controversial – you stop sending your addicts to jail in the first place. This is an understandable response when you consider that much of the crime that addicts commit is to fund their drug habit. The trouble with this solution though is the fact that it leads you down the road of operating a parallel criminal justice system with individuals who commit their crime to fund a drug habit being treated in a different way to those who commit their crime for financial gain.

While this may suit the addict it hardly seems fair to the non-addict, and it actually may send out the entirely wrong message that you are better off committing your crimes to fund a drug habit than for any other reason. While we may come to accept the greater use of non-custodial sentences for those who commit their crimes to fund a drug habit, that acceptance will only last for as long as there is clear evidence that such sentences are indeed reducing the scale of addict criminality.

In the past we used to talk about creating drug free areas in prison. That notion seems now to have been dropped as little more than a chimera. If that is the case, then the problems we face are even more acute than we realise. Tackling illegal drugs in prison may involve an investment in treatment and security well beyond what is currently occurring. However the dangers of failing in this area may be a prison system that starts to be controlled by its drug problem rather than controlling that problem.

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