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Legal aid limits

It was a relief to read Niamh Eastwood’s article in the latest *DDN*, highlighting yet more government cutbacks in legal services to vulnerable members of our society (*DDN*, 10 September, page 14).

As the former court worker for my local DIP, I was dismayed when the Criminal Defence Service Act came into force in October 2006. As Niamh mentioned, it limited legal aid to those on benefit or earning extremely low sums of money, and also cases where it was deemed that it would not be in the ‘interests of justice’ for a defendant to be granted a free solicitor. This excluded people who were not signing on and people whose cases were not deemed ‘complicated enough’, as well as those earning over a certain amount of money. The financial bar set to those receiving legal aid was also set at a very low level: those earning less than £11,590 will automatically qualify, those earning above £20,740 will automatically be disqualified, those earning in between must have less than £3,156 annual disposable income in order to qualify. The average drugs worker (those greedy fat-cats...)

would probably be disqualified.

Solicitors in my area, as a form of industrial action, refused to defend any of their potential clients until they were granted legal aid. They refused to help them fill out the lengthy application (not helpful for the illiterate). Many went before benches, unrepresented, facing the real possibility of custody. Perhaps unsurprisingly, the CPS [Crown Prosecution Service] remand rate increased.

With a government wanting to appear ‘tough on crime’ while simultaneously having to deal with overflowing prisons, this could only add yet more confusion to the mix. The most surprising thing about all of this was the almost blanket lack of coverage it received in the national press.

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Stephen, by email

Professional bias

It isn’t often I find myself in agreement with Transform, but it is impossible to dispute their condemnation of Government drugs policies over the last decade (Consultation an ‘exercise in propaganda’, *DDN*, 10 September, page 5).

Nor can one fault Kushlick’s lodging of an official complaint on the government’s contempt for the consultation process. But unfortunately in blaming the government he is aiming at the wrong target, and, in mounting such an attack, he exposes Transform as an organisation with a campaigning agenda which belies their ‘think tank’ label.

The people to blame are those biased ‘professionals’ upon whom successive governments have been duped into totally relying for information and guidance on drugs policies.

The continuous promotion of the assumption that addiction is a medical problem treatable only with psycho-pharmaceutical habit ‘management’ continues to obscure a true view of alternative non psychiatric policies which have proved far more effective in numerous other countries.

UK governments have for too long

been provided with blindfolds and earplugs by the PR machines of the psycho-pharmaceutical industries, and until they are exposed for the often ruthless profiteering industries they are, government will regrettably go on following the advice of these so-called ‘professionals’, who would of course just love to see Transform’s goal of ‘legalisation’ realised, as this would place the currently illegal market into their ‘ethical’ hands.

Yes, the policies of the last ten years have been a total failure. Yes, there are very definite grounds for complaint. But the answer is not, and never will be, any form of decriminalisation or legalisation.

The solution is simply for the government to get behind effective prevention and effective treatment. Such programmes do exist in 42 other countries, and lead to a drug-free society.

‘Oh, how naïve’ will sneer those whose own ‘drug education’ and treatments are ineffective, but if we don’t start using ways of stopping new users from starting, and ways of turning existing users onto comfortable lifelong abstinence, we will inevitably arrive at a bio-chemical society peopled by zombies addicted to illegal, licensed

and prescription drugs.

And that is much more cause for complaint.

Kenneth Eckersley, former magistrate, retired justice of the peace, founder and chief executive officer of CEPTA.

Baby... bath water

I read with interest Kevin Flemen's letter 'alternative charlatans' (*DDN*, 10 September, page 8) in which he expressed concern about gaps in the regulatory framework for drug services and asked, 'what is the point of the standards and accreditation processes encapsulated by DANOS if the snake-oil sellers are allowed to practise unchecked outside the closed shop wall?'

I have to say that FDAP shares Kevin's concerns about gaps in regulation and agrees that these need to be closed, but I must take issue with some particular points he makes.

The first is that when Kevin raised the matter with us and drew attention to a particular clinic he was concerned about, FDAP 'didn't feel it was their concern as the clinic wasn't one of their members'. This is just not true.

Kevin sent us an email about this on 16 August. I responded 18 minutes later.

I did say that we had neither the resources nor the right to investigate the activities of services that are not members of FDAP – as we are a charity and have no statutory regulatory function. However, I also contacted the Healthcare Commission, which is the statutory regulator of healthcare services, to draw their attention to the matter. As I explained in my response to Kevin, they explained that their writ extends only to services falling within a tightly bound definition of healthcare and that the service in question fell outside this – so I suggested he might approach the Department of Health to see whether they could help.

The other point I must take issue with is Kevin's suggestion that the gaps in the framework make the drive to improve standards pointless.

There is at present no regulation at

all of counselling and psychotherapy, but would he really want to argue that this means there is no value in counsellors and psychotherapists getting trained or qualified?

And if that's true for counselling and psychotherapy, why should the drugs and alcohol field be any different? DANOS may not help in the case he identifies, but let's not throw the proverbial baby out with the proverbial bath water.

Simon Shepherd, chief executive, FDAP

Consultation consultation

There's been plenty of discussion on the drug strategy consultation in *DDN* recently. This week Turning Point launches its blog site. One of the most popular entries has been a blog started by the Home Secretary, asking for people's views on the consultation that is currently taking place over the next drug strategy. (The government's current strategy comes to an end in 2008.)

Replies to the blog have included calls for alcohol to be considered in the same strategy as drugs, through to a suggestion that, currently, there is not an adequate agenda for tackling the problems associated with prescription drugs.

The blog has also seen a number of service users kindly give us their thoughts, like Ken who says that blogging for Turning Point has been part of his recovery. Ken is going to be a regular blogger and when he last posted an entry it was his second drug-free day in 30 years.

We hope the blog will be very diverse: Other entries have, for instance, featured Audrey, a chef from one of our Manchester services who met Diana, Princess of Wales in the 1990s, through to last week's publication of the Dual Diagnosis Good Practice Handbook.

If you want to contribute to the drug strategy consultation, or reply to any of the blogs on the site, then do go to www.turning-point.co.uk/blog
Nick David, Turning Point e-communications officer

Comment

Fatal attraction

It's time for supermarkets to face up to their social responsibilities and stop the irresistible 'pile 'em high, sell 'em cheap' booze promotions, says **Jack Law**, chief executive of Alcohol Focus Scotland.

The Scottish government's intention to extend the Licensing (Scotland) Act 2005 to ban irresponsible promotions and pricing in off-sales is a very positive step forward in tackling Scotland's drinking culture.

The measures announced by the Justice Secretary Kenny MacAskill will outlaw promotions that provide alcohol for free or at a reduced price on the purchase of one or more of the product or another product. We argue that such offers encourage people to buy more alcohol than they intend. Instead of buying the four cans of beer the person actually wants, they leave with a case because it was so deeply discounted, so heavily promoted and displayed at the entrance to the store that they find it difficult to resist.

Mr MacAskill also announced that mandatory conditions will require shops to have separate display areas to help challenge the perception that alcohol is no ordinary commodity. I believe this is also a positive move which will remind customers that they're buying a product which is licensed for very good reason – because it has the potential to cause a great deal of health and social harm when misused.

It's not surprising that we've witnessed such a shift in sales between the on and off-trade in recent years when beer is being offered for as little as 35p per can if customers buy in bulk at all the leading supermarkets. This is seven or eight times cheaper than the average pint of beer in a pub. It's clear that in many cases supermarkets are using alcohol as a loss leader to get customers into the store to then spend money on lines which they do make bigger profits on. This practice of below cost selling cannot be allowed to continue; the floor price of alcohol has become ridiculously low.

The Scottish government is now showing its commitment to addressing this issue, but I also want to see a commitment from the supermarkets, or at least an admission that they are contributing to the problem. To date, they appear to be in denial that the vast quantities of alcohol they sell at rock-bottom prices has a link to the growing number of people suffering from alcohol-related conditions like cirrhosis of the liver.

Putting profit before public health is unacceptable. It's time for supermarkets to go beyond their legal responsibilities and face up to their social responsibilities. When asked about responsible alcohol retailing, supermarkets always state that they are committed to preventing underage sales. That should be a given. Responsible retailing of alcohol means much more. Just because the drinking is done off-premises, doesn't mean supermarkets should stick their heads in the sand. The consequences of their irresponsible practices are being felt by their employees, friends and family members.

Tackling alcohol misuse requires a whole range of actions, but the worldwide evidence indicates that ending cheap price promotions is one of the actions most likely to be effective in reducing consumption and harm.

We welcome your letters

Please email letters to the editor, claire@cjwellings.com or post them to the DDN address on page 3. Letters may be edited for reasons of space or clarity – please limit length to 350 words.