

In this issue

Our first regular issue of 2019 includes a spread of topics which illustrate the many aspects of the drug and alcohol field – mortality, consumers (of drugs and alcohol, and of treatment services) and identities.

In their order of printing, we begin with an account by Bergamo, Parisi and Jarre of a drug consumption room/safer injection facility in Italy, established and run by drug users. In common with other DCRs in Europe, its operations have contributed to improved health amongst the drug-using population it serves and there have been no overdose deaths. McPhee, Sheridan and O’Rawe writing on drug-related deaths in Scotland question the focus on an ageing drug-using population as lying behind the increased death rate. The paper assesses the impact of the UK’s Misuse of Drugs Act and how its misconceived focus on abstinence at a time of increasing poverty and deprivation contributed to an increase in drug-related deaths.

Leigh and MacLean point to another striking inadequacy of the 2017 UK Drug Strategy: no mention of volatile substance abuse (VSA). Using an ONS report, the paper shows how VSA is not combined with other substances, most notably alcohol. The authors raise the question of the linkage between VSA and social deprivation with a sharp rise in of VSA incidence amongst the 11–15 age group. The role of social deprivation is also explored by McPhee *et al.*

Two papers look at patient (or user or consumer) involvement in and with drug and alcohol treatment services. From Australia, Goodhew Stein-Farbury and Dawson conducted a literature review on “consumer” participation in treatment and its contribution to treatment outcomes. Morton and O’Reilly present a case study which examines practitioners’ understandings of challenges, user involvement, relationship building and outcomes in a community-based low-threshold treatment service in Dublin. It includes the notion of safe space. The Australian piece uses the terminology of “consumer” in its text, a further indication that politicians and decision makers are not always willing or able to recognise and respond to drug and alcohol use as being a well-established market, with all the implications that have for consumer rights, information sharing, product quality and safety, and the role of regulation, acknowledge or denied. In the UK context, it is significant that “official” terminology persist in referring to “service user involvement or voice”, this seemingly denying the potential value and role of user voice. This in itself might be part explanation of the increasing irrelevance of UK Government strategies to the realities and extent of the use of currently illegal drugs – “nothing about us without us” as the activists say. The two papers also raise the question of whether shared involvement in service provision, users and providers also implies shared responsibility for treatment outcomes.

Savonon’s paper on media representations of polysubstance use in Finland tracks the changes in approach and language regarding polysubstance use in one Finnish newspaper between 1990 and 2016. This historical approach also shows the change in polysubstance use in Finland, from principally alcohol and medications to a wider range of substances as they emerged. McPhee, Holligan, McLean and Deuchar present their findings from research amongst a small sample of competent clandestine users of drugs to show the heterogeneity of drug use and users, and the extent of knowledge of the contexts and implications of their use existing amongst most users. The fact that this knowledge and use is mostly hidden is ascribed to generally negative attitudes and stigmatisation amongst the wider population, leading to identity concealment. A similar message emerges from Kiepek’s paper which looks at the use of illegal drugs amongst a group of Canadian social workers.

While this collection of papers encompasses a range of geographically and demographically specific situations, it is clear that there are also wider, more universal lessons and conclusions to be drawn from each of them. The editors' own work, experience and reading have found us in several situations where decision makers have been reluctant to accept such conclusions because the study or research in question did not take place in X or involve study of group Y, a response which might be seen as contributing to a refusal or inability to acknowledge that all is not well with drug and alcohol policy in many jurisdictions. A recurrent example of this was most recently expressed in an October 2018 House of Commons debate on drug consumption rooms when the minister replying to the debate misrepresented the INCB position on DCRs in order to justify governmental inertia on this issue.

The editors are gratified to see the number of nations represented by the papers, both by the geographical settings and the authors. The collection of topics and studies and the careful exposition of settings and implications are valuable and significant, and an encouragement to the editors to continue to encourage and promote such variety.