

Drug checking Project: Brief summary and FAQs

Project Summary

This two-year project (ending in March 2023) aims to build an evidence base for, and facilitate the development of, drug checking services in Scotland across three cities: Glasgow, Aberdeen, and Dundee. It is funded by Scottish Government/Corra Foundation/Drug Deaths Taskforce. The project comprises of two main elements: the research output; and working closely with relevant national and local stakeholders to inform implementation.

Research output

The research team will produce two primary pieces of research. The first will be based on analysis of interviews with key stakeholders across the three cities. Interviews were conducted with three groups: 11 people with lived experience of drug use; five affected family members of those who use drugs; and 27 key professional stakeholders (including relevant third sector and NHS staff). The interviews provided insight into the acceptability, feasibility, challenges, and benefits of developing drug checking services in Scotland. They focused on key elements of drug checking services including location, waiting time, whether participants would use the services, and a range of other key considerations. The second piece of research is a 'realist' literature review of international evidence concerning drug checking services. This review will address key issues around design, implementation, and effectiveness of drug checking.

The research outputs will be published in open access journals. Additionally, internal briefing papers will be produced to feed into key decisions in each local area around the implementation of drug checking.

Working with key stakeholders to inform implementation

The project will work closely with key stakeholders in Glasgow, Aberdeen, and Dundee, as well as with a range of national stakeholders. The three cities were chosen as there is a keen interest among stakeholders in developing local drug checking services in these areas. More than one implementation site was also chosen as there is a pressing need for drug checking services as a public health intervention throughout Scotland.

As part of this project, the research team will:

- Work closely with local and national stakeholders to share information and facilitate engagement and discussion.
- Work closely with partnership groups within each city, who will make decisions regarding how to design and implement drug checking services in their local area.
- Help to inform these decisions by sharing research findings, to ensure implementation is based on the best available evidence.
- Assist local stakeholders with applying for Home Office licensing.

Whilst the aim of the project will be to facilitate the implementation of drug checking services in each of these three cities, it should be noted that the role of the research team will be confined to developing the evidence base, facilitating local and national discussions, and guiding

implementation plans. The key operational decisions regarding implementation will be the preserve of the local partnership groups and stakeholders.

What is the rationale for this project?

Scotland has the highest rate of drug related deaths (DRDs) in Europe, and amongst the highest levels globally. The level of DRDs in Scotland has risen substantially in recent years and is now at the highest recorded levels. This has led to the House of Commons Scottish Affairs Committee to call on the UK Government to declare a 'public health emergency'. Due to this concerning situation, there is a pressing need to identify, and implement, evidence-based interventions which can help reduce drug-related harms and fatalities in Scotland.

Drug checking is a service which allows people to confidentially hand in a sample of drugs, to be tested by professionals. Service users receive feedback such as the substances detected, their potency and purity, and the presence of any adulterants. This provides an opportunity for service users to either dispose of their drugs or use them in a more informed manner - reducing the risk of serious harm, including overdose. Additionally, as discussed further below, drug checking services can link service users with a wide range of other supports and services, which further reduces the risks of drug related harms.

Drug checking services are growing in number globally and are increasingly recognised as an important component of wider drug harm reduction strategies. Drug checking services in Europe have traditionally been aimed at more 'recreational' use associated with the nightlife and party scenes. Recent developments in Canada have utilised drug checking as a means of reducing deaths and other harms in the context of an ongoing opioid overdose epidemic.

As discussed in the FAQ below, there have been a small number of pilots of community-based drug checking in England, which have produced promising results and been well received by stakeholders. Additionally, drug checking has been available at some UK festivals since 2016. The Welsh Emerging Drugs and Identification of Novel Psychoactive Substances Project (WEDINOS) was established in 2009. WEDINOS operates a postal drug checking service, where results of drug checking are provided on their website. Manchester Drug Analysis Knowledge Exchange (MANDRAKE), established in 2016, is a city-based testing service which works in partnership with a range of key stakeholders, offering public health warnings about substances of concern.

There is a growing body of evidence suggesting that drug checking can be an important public health intervention to reduce drug-related harms in the context of a wider harm reduction strategy.

FAQs

What is drug checking?

Drug checking is a service which allows people to confidentially hand in a sample of drugs, which can then be tested by professionals. Service users can receive feedback on the contents of their drugs and be provided with other information such as potency and the presence of adulterants. Drug checking is often known by a number of terms including a pill testing, multi-agency safety testing, street drug analysis and drug checking. This document will use the term drug checking throughout.

Why is drug checking an important public health intervention?

Scotland has the highest rates of drug related deaths (DRDs) in Europe, and amongst the highest levels globally. This is, in part, driven by the unregulated nature of illicit drugs, which can contain unexpected and dangerous contents. The aim of drug checking is to provide people with accurate information about the content of their drugs, so that they can make more informed choices about their use. These choices may include: disposing of their drugs in the event of dangerous contents being revealed; taking less of a drug; reducing poly-drug use (use of a number of drugs at once); and engaging with support for their substance use. An important benefit of drug checking is that it can connect those who use drugs with relevant supports and services to help them stop using drugs, or reduce the harm experienced from using drugs. It can act as a linking point to substance use, housing, harm reduction and a range of other services.

Drug checking can also provide important benefits which extend beyond those who use the service. It provides opportunities for public health bodies to get a clearer picture of the drugs market, and to tailor public health messages and approaches accordingly. In the event where particularly dangerous substances are detected, health warnings can be communicated to people who use drugs - both directly and via services working with them. Drug checking services would increase Scotland's capacity to identify dangerous substances in circulation and provide targeted warnings.

Do drug checking services operate in other countries?

Drug checking services are increasingly viewed as an important public health intervention. A global review in 2018 found 31 drug checking services across 20 countries. 23 of these services are in Europe, with others in South and North America, and Australasia. Drug checking services in Europe have been in operation since the 1990's, with the longest standing of these, DIMS, established in 1992. More recently, drug checking services have been implemented in Canada and the USA. Research on these services highlights generally high levels of engagement and a range of positive outcomes.

In the UK, the 'Welsh Emerging Drugs and Identification of Novel Psychoactive Substances Project' (WEDINOS) was established in 2009. WEDINOS operates a postal drug checking service, where results of drug checking are provided on their website. There have been a small number of drug checking pilots for in-person drug checking in England, both at festivals and in community settings. All of these pilots were well received by both service users and wider stakeholders, including police. Results from the pilots were promising and showed a range of positive outcomes. These included: people disposing of their drugs in the event of an unexpected result; people communicating results to their wider social networks; people reporting intent to use less of a substance; and people being referred onto substance use support services. In Scotland there are currently no drug checking services and there have been no pilot projects.

What kinds of substances can be tested by drug checking and how accurate is it?

Drug checking services can test a wide range of illicit substances including many Novel Psychoactive Substances (NPS). However, as the number of NPS continues to grow rapidly, drug checking may struggle to identify some newer substances. Drug checking technologies, and their ability to test for NPS, is a continually evolving area of research – and new technological innovations will continue to emerge.

Drug checking can provide different kinds of information, depending on the technologies being used. Qualitative testing means that drug checking will typically be able to identify what drugs or cutting agents are in a sample, but not the amount of each substance identified. Quantitative testing means that drug checking will be able to tell a service user both what drugs (or other substances) are in a sample, and the quantity of each substance present. Quantitative testing technologies are widely used in drug checking services. For such testing, samples usually need to be transported 'off-site' to a local laboratory and tested by experts. This means that waiting times for results can be up to 1 week, although some services may provide results significantly faster than this. Many services also offer 'on the spot' testing, meaning that service users can receive information about the content of their drugs in a timescale ranging between a few minutes and 1 hour. Such techniques rely on less sophisticated technology. In some cases, such testing will be able to provide approximate information about quantities. However, it's common for 'on the spot' testing to be able to provide qualitative information only. Staff providing 'on the spot' testing may still be able to provide information about the typical quantities of substances observed in various drugs, and to discuss the risks attached to ingesting different substances, even in reasonably small quantities.

Some substances are easier to test 'on the spot' than others – it may be difficult to provide completely accurate quantitative and/or qualitative results for all substances in all cases. However, 'on the spot' testing is still an important technique. Some service users may not be willing or able to wait a number of days for their results. Providing them with some information about the contents of their drug, and discussing the associated risks, is still safer than providing them with no information. The provision of qualitative information, alongside further discussion about the risks associated with drug use, has shown to be effective in encouraging 'risk reducing' behaviors among service users.

Staff will be trained in interpreting results and will communicate to service users very clearly where results may be inconclusive or there are any doubts about reliability of testing.

What is the legal status of drug checking services?

A drug checking service in Scotland would operate under explicit legal exemption, granted by the UK Home Office. Relevant criminal justice bodies, including the police, would be aware that such services were operating within a legal framework, and it is anticipated that they would work co-operatively with drug checking.

Does drug checking condone or encourage the use of drugs?

Drug checking neither condones nor encourages people to use drugs. Drug checking services are clear that the most effective way to reduce the risk of harms from drug use is to not use drugs. However, they operate under the understanding, backed up by rigorous evidence, that not all people are willing or able to stop using drugs. As this is the case, it is important to provide those who will continue to use drugs with information about the contents of their drugs, to reduce the risk of serious harm - including death. At drug checking services, individuals are offered the opportunity to hand over the rest of their drugs to a member of staff for safe disposal or dispose of them via an 'amnesty box'.

Drug checking services typically operate within a 'brief health intervention' framework. This means that when the results of drug checking are communicated to service users, individuals are engaged in discussion about the risks of drug use and how to reduce them. This discussion can cover a range of risks and harms, as well as whether the service user feels they need further support and services. If the service users indicate that they would like more support, drug checking services can discuss a range of available services and provide help to the service user to engage with them. Research on drug checking has shown that it can facilitate engagement with groups of drug users typically 'hidden' to mainstream support services. It can do so by offering non-judgemental, tailored, and relevant information, support, and advice to those who use drugs. Additionally, the 'brief health intervention' framework through which drug checking results are communicated has preventative potential. It engages people who would not otherwise seek support, and who may be in the early stages of their drug use, in conversations about risks and harms.

Do drug checking services tell people if their drugs are 'safe'?

Drug checking services will never tell a service user that their drugs are 'safe' to take. Taking illicit substances always carries a risk of harm, and this is made clear. Services will communicate the results of the drug checking process and provide advice on how to reduce risk of harm (for example, by using smaller quantities, or by not mixing drugs). Both short term and long-term risks and harms will be communicated to individuals using the service. These conversations will focus on ways to reduce harm to service users but will state clearly that the risk of such harms cannot be completely eradicated if an individual continues to use illicit drugs.

Are drug samples returned to service users?

Drug samples which are submitted for testing are not returned to service users. The samples required are usually relatively small amounts, although this may differ by the drug and the kind of information required.

Will these services increase drug use, drug dealing, and crime in the local area?

As discussed above, drug checking services operate in a number of countries in Europe and elsewhere. There is no evidence that such services increase drug use, drug dealing or crime in the areas in which they operate. Drug checking services have been in operation for over two decades in some European countries, and levels of drug use and related harms in these countries have remained low relative to many others. It is very evident that drug checking services have not caused an increase in drug related harms or deaths in any country in which they operate. Additionally, such jurisdictions have not noted any concerns about an increase in drug dealing, crime, or anti-social behaviour in the areas around drug checking facilities. As also noted above, a long-term goal of drug checking is to reduce both levels of drug use, and related harms, by enabling service users to engage with substance use support services. This has the potential to lead to reductions in the negative social behaviours sometimes associated with more 'problematic' drug use.

Would such services be expensive to operate?

Setting up drug checking services will incur start-up and ongoing operational costs associated with staffing, premises, and drug checking equipment. However, emerging evidence points to a number of cost-saving benefits of drug checking in different areas. Evidence demonstrates that those using drug checking services are likely to use 'harm reduction' techniques such as disposing of their drugs in the event of an unexpected result, using less of their drug, or mixing drugs less.

Additionally, drug checking can offer a non-judgemental space for service users to discuss a range of issues around substance use and health. The support and advice offered at drug checking services, including linking individuals to wider support services, can have a substantial positive effect on service user's health and wellbeing. Benefits which may accrue to service users include: reduced contact with emergency services; reduced incidence of overdose; increased health; and increased engagement with support in housing, substance use and harm reduction services. Such benefits have the potential to reduce costs for criminal justice, healthcare, and emergency services.

It should be noted that such benefits will largely not be evident immediately but will likely be medium to long-term changes. It's also important to note that drug checking can only affect change as part of a wider suite of harm reduction measures aimed at tackling Scotland's rate of DRDs. Measuring outcomes and benefits of drug checking will be an important consideration and area of work as drug checking services are implemented in each locality.