

Niamh Eastwood – Statement to the Oireachtas Committee on Drugs

I am Executive Director of Release, a charity established in 1967 and the UK's centre of expertise on drugs and drug laws. I am also an Associate Member of the Drug and Alcohol Research Centre, Middlesex University, a member of the Expert Reference Group for the London Commission on Drugs, and currently a technical adviser to the Global Commission on Drugs.

My organisation provides legal and expert drugs services to over 1000 people every year, addressing issues such as drug law offences, homelessness, housing insecurity, financial insecurity and problems people may have with treatment services. We also publish research on the impact of the criminal law on people who use drugs and communities who are over policed on the basis of drug laws, as well as research on harm reduction interventions. In 2012 we published the first global overview of models of decriminalisation adopted by jurisdictions across the world, which I co-authored, we have subsequently updated that publication and Release are considered experts on this topic. We have provided technical assistance to governments on issues of drug policy and decriminalisation, which is what I will discuss today.

Decriminalisation essentially ends the criminalisation of people who use drugs. Practically, this means the removal of criminal sanctions for the use and possession of drugs. Some jurisdictions replace criminal sanctions with civil sanctions, but some implement a no punishment model. For example, Spain, Germany, Uruguay and the Netherlands apply no sanctions for possession or use.

When we first started to examine the global state of decriminalisation in 2012 there were 21 countries that had taken this approach, by 2024 this had grown to nearly 40 countries and dozens of state-level jurisdictions in the US, Australia and Canada.

It is worth noting that the majority of countries that have taken this approach have applied it all substances, not just cannabis.

Many Governments wrongly believe that decriminalising drug possession will lead to an increase in prevalence, this is not the case. Research by the EMCDDA and leading academics, including Professor Stevens, have shown that decriminalisation is not linked to an increase in drug use.

However, when effectively implemented, when coupled with support for harm reduction and treatment, decriminalising people who use drugs can have profound and positive outcomes across health, social and economic indicators.

This is why decriminalisation as a policy position is supported by the Chief Executive Board of the United Nations which represents all 33 UN agencies, including UNODC. It is why decriminalisation has been described by UNAIDs, WHO and other UN agencies as a critical enabler in accessing health services for key populations. It is why the 2023 OHCHR report describes decriminalisation 'as a powerful instrument to ensure that the rights of people who use drugs are protected'

Without decriminalising people who use drugs we cannot attain the highest standard of health and protect fundamental rights.

Portugal is probably the most researched of all the examples, it decriminalised possession of all drugs in 2001 since then they have experienced significant decreases in HIV transmission; a 40% reduction in injecting drug use, and a 62% increase in the number of people accessing treatment.

In 2021, Portugal's drug related death was 9 per million of the population, in the USA it was 321 per million of the population – 36 times higher, and whilst the high rates in North America are linked to the toxic drug supply, States still implement a criminal justice response to deal with drug use deterring people from accessing support. The situation is so bad in the US it is resulting in a decline in life expectancy at a population level.

Every country in Europe that has ended criminal sanctions for drug possession, has significantly lower drug related death rates than those countries in the region that adopt criminal justice responses who have the highest rates. This includes Ireland, who as you know, has the highest rates of deaths amongst the EU member states at 92 per million of the population.

The chilling effect of criminalisation on health is persuasively reflected in a UK Higher Education Policy Institute report from 2022 that found nearly 1 in 5 students did not seek emergency help when they found themselves in a “scary situation” with drugs for fear of punishment. And in the opioid related deaths rate in England and Wales where 50% of people who die have not been in contact with treatment services for at least 5 years.

Punitive policies are killing people.