



Introduction

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Published online: 19 April 2018

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Some background is provided here to orient the readers for this special volume of the *European Journal on Criminal Policy and Research* (EJCPR). To begin, we intend these papers to be research-informed essays that touch upon a range of substance misuse issues, from intervention and treatment approaches to broader counter-narcotic policies. The papers in this volume are neither literature reviews nor reports of new studies that follow the traditional format of research questions, methods, data collection, analysis, and findings. There is a wealth of such literature—much of it is quite useful—but the aim of this collection of papers is different. Papers included here are reflective pieces put forth by established researchers who have spent decades in the field of substance misuse interventions and public policy analysis in Western countries. Specifically, we asked these senior researchers to candidly describe what they learned from their many years of research on substance abuse, and share observations that they might not normally share in conventional research journal papers.

Our rationale for this approach was based on a few important trends. Widespread misuse of illicit substances is expanding in developing countries. Substance misuse has become a global problem, confronting in particular countries with growing economies. Increased wealth and increasingly globalized economy have also brought about unprecedented opportunities for the flow and consumption of illicit substances.

Historically, most countries have relied on the justice system as a primary means to curtail the distribution and consumption of illicit substances. Led by powerful countries such as the United States, the global counter-narcotics efforts were dominated by a demand-reduction focus that emphasized punitive and judicial response strategies. In April of 2016, however, the United Nations General Assembly Special Session on Drugs (UNGASS) witnessed mounting signs of fractures in this global coalition against illicit substance misuse. A growing number of countries have shifted away from the costly and often ineffective punishment-oriented control toward more public-health approaches that focus on harm reduction and treatment of addiction

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as a chronic medical condition. Despite the growing defections from the demand-reduction emphasis in substance abuse policy, many powerful states such as the U.S., Russia, and China remain largely committed to using the penal system as its primary solution.

In 2017, we invited a group of senior researchers with expertise on public health- and justice-based responses to substance misuse to meet and reflect on what we have collectively learned from the years of our own personal research experiences in Western countries. Our main interest was to inform policy-oriented audiences (e.g., government representatives, policy makers, and researchers) in developing countries about the failures as well as successes in various responses to substance misuse and public policy in the West, so that other countries might avoid what we have known to be ineffective and perhaps experiment with (what we believe to be) more promising policies and practices. All of the authors in this collection have decades of experience studying substance misuse intervention strategies and policy analysis, and have accumulated a wealth of knowledge of what has fallen short of expectations and what appears promising. Put simply, we wanted to share some of the lessons learned from decades of our own research so that treatment agency administrators and policy makers may avoid the same mistakes in developing countries with emerging substance misuse problems.

We asked all contributors to write in an easy and accessible language, without following the traditional academic research format. Further, we asked them to draw from their own research experiences and knowledge, as well as that of the broader literature wherever necessary. We believe such reflective pieces are more personable and compelling to policy makers in developing countries than conventional Western research papers, which have been the dominant form of communication of the contributors over their careers.

We start this special issue with a policy overview piece by Caulkins and Kleiman, two veteran policy researchers, who argue that drug policy should try to reduce the sum of harms related to drug consumption, including harms to users, harms to others, and policy-generated harms in the form of illicit markets, enforcement costs, and increased harmfulness of drug-taking due to enforcement. There are trade-offs and consequences by keeping the illicit markets either “thin” or “thick” through harsh penal system response or regulatory and enforcement efforts.

Next Farabee reflects on how our understanding of the biological underpinnings of substance use disorders (SUDs) has led to increased acceptance of pharmacotherapy-based treatments for general populations and, more recently, for individuals under criminal justice supervision. Farabee illustrates some of these medical approaches in treating alcohol- and opioid-use disorders. For lessons learned, Farabee argues that substance misuse and addiction is a medical disorder and therefore should be treated as such, and furthermore, such treatment should be integrated into primary care, and treatment for substance abuse should not be tied to a presumed effect on criminal recidivism.

Zhang and Qiu take a somewhat different approach in their reflection piece by linking specific psychosocial intervention strategies to possible implementation in the Chinese context. Much research has been conducted on in-prison interventions and community rehabilitative programs in the U.S. and many promising findings have been found that can be generalized to countries with emerging substance misuse problems. Drawing from their own research careers and exposure to psychosocial interventions, Zhang and Qin argue against reinventing the wheel and for embracing the basic principles of effective psychosocial interventions established in the West. They further advocate for treatment strategies that promote social reintegration and involve inexpensive but rigorous evaluation strategies to achieve incremental improvement.

Padwa and Kaplan focus on lessons learned from implementation science, citing that much good research knowledge is lost in the translation into field practices. Despite the enormous sums of money and resources invested in developing and testing behavioral and pharmacological treatments for substance use disorders, they argue that evidence-based care is not widely practiced. After an overview of how various factors promote or inhibit the use of evidence-based treatments, the authors highlight three main lessons learned from the U.S. experience: (1) historical and cultural factors impact evidence-based treatment implementation; (2) studies that test both clinical effectiveness and implementation outcomes can enhance implementation; and (3) multi-level implementation approaches are preferred to treatment strategies that target just one level of change.

We conclude this volume with a piece from the United Kingdom. Kalk and her colleagues present six lessons learned from their research careers: (1) using every crisis to advocate for effective treatment strategies, (2) studying drug-related deaths to improve treatment safety, (3) collecting longitudinal data to inform clinical guidelines, (4) guarding against the perception that harm reduction and recovery are in conflict, (5) nurturing the relationship with state sectors, and (6) recognizing the challenge of comorbidity of mental and physical problems among drug users to treatment.

Much has been published on efforts in the U.S. and Western countries to treat people who misuse substances, ranging from medical substitution to talk therapy, shock incarceration, long sentences, and tough love. Much can be learned from their checkered histories and outcomes. Suffice it to say, substance misuse is a complex problem encompassing a multitude of problems—physiological, psychological, and social—none of which have easy solutions. There are social and political costs associated with different intervention strategies. Many strategies have been tried with varied outcomes in the West as all the authors in the special volume can attest. This collection of papers seeks to share lessons learned from these varied efforts with researchers, government officials, and policy makers in countries that are experiencing growing addiction problems. We hope to convey through these articles the mistakes we have made and promising strategies we have observed that others may want to consider when developing their own solutions.