

# Understanding and responding to illicit drug markets – towards a partnership approach



# What do we know about drug markets and drug-related crime ?

- Of great public concern but very poorly understood
  - **NACD Community study** (Loughran & McCann 2006)
  - **HRB Overview 2** (Connolly 2005)
  - **Crack cocaine study** (Connolly *et al* 2008)
  - **NACD, HRB Drug market study** (Connolly, Donovan 2011)
- International, middle and local markets
  - Can be open or closed (familiar/strangers – on/off street – clubs, bars, mobile phone) local impact & policing & treatment response
- Local markets
  - Develop in poorer areas
  - Cause massive disruption (intimidation, fear, undermines community/agency cooperation & intelligence led efforts)
  - Can be integrated economically with local community
  - Many in 'community' benefit from them
  - 80% people first introduced to drugs by friend/family, myth of the dealer at the school gates
- Drug-related crime - **HRB Overview 3** (Goldstein 1985, Connolly 2006)



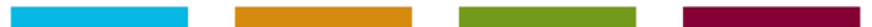
# What do we know about supply control in Ireland?

- Very heavily resourced (Customs, police, courts, prison etc) but very poorly understood (data limitations, research)
- Police interventions seek to disrupt dealer activities, reduce and deter dealing and thereby reduce supply
- Try to reduce novice drug use by making purchase more difficult and risky
- Community seeks action against open street level markets - anti-drug marches/ fear
- Community seeks evictions and convictions



# Is supply control working?

- Drug strategy measured by seizure number and volumes
  - A measure of police activity not necessarily availability
  - Could be due to greater availability and use of drugs (survey prevalence and treatment data)
  - Prices continue to fall
  - NDS seeks development of further indicators
- Arrest, offence and conviction data
  - Approx 60-70% for cannabis possession & use
  - Evidence of disruption & displacement of market activity
  - Most of those imprisoned for drug-related crime, due to addiction and for short prison terms
- Is community reassured?
  - Difficult to measure but community studies and anecdotal evidence don't inspire optimism





# Getting real about supply control

- Third biggest market globally after oil and arms
  - Global value \$94 billion, \$24 billion wine/beer \$21.6 billion tobacco
  - Street prices far higher so massive profits to be made
  - Retail value four times higher than the wholesale value
- Little evidence supply control long-lasting impact on dealing levels – some evidence of containment/ displacement
  - Estimated that seizure of 10–20 per cent of the drugs in circulation
  - Amount undetected means long-term impact will be minimal
  - UK study suggests that 80% need to be seized to have real effect
  - Drug distribution systems adapt quickly, arrested dealers replaced
  - Demand inelastic for problematic drug users, relative to moderate or recreational users, increased prices = increased crime
  - Containment? Slán survey: Last year use Alcohol 81%/Tobacco 29%/Drugs 6%





# Supply control & harm reduction

- Traditional approaches unsustainable, generally unmeasurable and often counter-productive
- Need to re-examine rationale of street level policing
  - Intensive enforcement can increase risk of harm to users
  - Some police activity can discourage treatment
  - Some community demands can increase harms (eg evictions can increase social problems)
- Supply reduction and demand reduction can contribute to overall harm reduction



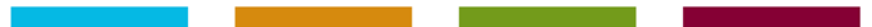
# Towards evidence-based law enforcement

- Effective strategies combine attempts to disrupt local markets, with attempts to divert users into treatment
- Can reduce drug-related harms to individuals and communities
- Police enforcement & treatment can be targetted at defined geographical market or group of offenders (eg travellers/ persistent offenders)
- Police sensitivity to drug service provision
- Drug service sensitivity to law enforcement
- Police arrest referral can work if treatment is provided
  - Depends on available places (3 weeks in UK)



# The Dublin crack market

- Background to study
- North-inner city original crack market in Dublin – now more widespread
- Many crack markets are closed markets
- Many users believed that non-Irish dealers prepared higher quality crack
- Price relatively stable and uniform and is being sold in €50 or €100 quantities or ‘rocks’
- Drug dealing strategies
- ‘Crack houses’ – not typical





# Treating crack use – the challenges ahead

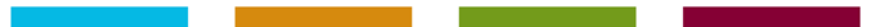
- Current treatment responses evolved from responses to problematic powder cocaine use
- Some services reported lack of knowledge about treating clients for crack use
- Widespread perception in Dublin that addiction services are methadone-dispensing only
- Some service providers and crack users seek separate facilities to address cocaine use
- Most crack users are polydrug users
- Some crack users lifestyles' too chaotic to allow regular attendance at treatment
- Some crack users in treatment (for opiates) did not report crack use due to fear of sanctions





# Towards a crack cocaine strategy – treatment issues

- Crack can be treated
- Successful approaches are psychosocial interventions
- User must be attracted to and retained in treatment
- Immediate needs of the user must be addressed
- Incentives needed to encourage users into treatment
- Complimentary therapies and personal development programmes required
- Possible need for more all-encompassing services involving outreach and psychosocial treatment with the addition of medical interventions





# Supply control challenges

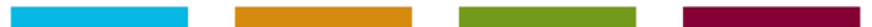
- Crack markets appear resilient and adaptable
- Intensive enforcement activity can, on its own, lead to market displacement
- Dealer risk-management strategies
- ‘Crack houses’ make street-level activity less visible
- High prices and stigma a possible disincentive to crack use





# Policing drug-related crime

- Concentrated law enforcement to prevent or disrupt emerging markets
- Combination of drug market disruption with diversion to treatment
- Data from National Drug Treatment Reporting System suggests low rate of referrals from criminal justice agencies to health services
- International evidence - partnership working most sustainable method of responding to street-level drug markets





# Building consensus

- Between Monitoring systems/ research community and law enforcement
- Between quantitative and qualitative research approaches
- Between demand and supply indicators
- Overcoming obstacles to partnership & communication between law enforcement, health & social services

