UKDPC

Tackling Drug Markets and Distribution Networks in the UK

A review of the recent literature

Tim McSweeney
Paul J. Turnbull
and Mike Hough

Institute for Criminal Policy Research
School of Law
King's College London

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The UK Drug Policy Commission (UKDPC) is an independent body providing objective analysis of evidence related to UK drug policy. It aims to improve political, media and public understanding of drug policy issues and the options for achieving an effective, evidence-led response to the problems caused by illegal drugs.

The views, interpretations and conclusions set out in this publication are those of the authors and are not necessarily those of the UK Drug Policy Commission.

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ABOUT THIS REVIEW

This summary sets out the main findings from a review of the recent literature on strategies to tackle illicit drug markets and distribution networks in the UK. The report was commissioned by the UK Drug Policy Commission and has been prepared by the Institute for Criminal Policy Research, School of Law, King's College London.

The main literature searches for this review were conducted during late September 2007 using a number of search terms and bibliographic data sources. In drawing together the evidence for this review we aimed to answer four broad questions:

- What is the nature and extent of the problem?
- What are current UK responses?
- What are effective strategies for dealing with these issues?
- Where are the gaps in our knowledge and understanding?

This review restricted itself to domestic measures for tackling the drugs trade. As well as production control (e.g. assisting the Afghan government to implement its National Drug Control Strategy), there are a range of measures as part of the current drug strategy that are aimed at tackling drug markets and distribution networks within the UK's borders. The broad goals of these interventions include:

- supply reduction (e.g. interventions targeting sellers and traffickers, including enforcement and situational prevention);
- demand reduction (e.g. interventions aimed at discouraging use); and
- harm reduction (e.g. forging partnerships with local communities, drug treatment providers and other interventions).

THE NATURE OF ILLICIT DRUG MARKETS AND DISTRIBUTION AND TRAFFICKING NETWORKS

The global trade in illicit drugs has an annual turnover worth billions of pounds. During 2003/04 the size of the UK illicit drug market was estimated to be £5.3 billion. Drug trafficking is considered to be the most profitable sector of transnational criminality and to pose the single greatest organised crime threat to the UK. The size of the UK market means it is extremely lucrative for drug traffickers – both in scale and in terms of the profits that can be made. Estimated lifetime prevalence of cannabis use – globally the most widely consumed illicit drug – is higher in England and Wales than in any other European country. The UK also has a higher proportion of problem drug users within the adult population than any of its European neighbours.

The illicit drugs trade in the UK has far-reaching political, cultural and economic ramifications, and impacts negatively upon prison populations, levels of gun crime, social exclusion, and public health and community safety. These consequences and impacts are experienced disproportionately by the urban poor and minority ethnic groups.

Sources and supply routes

Production and trafficking routes tend to emerge and develop in areas experiencing economic and/or political instability. Most of the world's global supply of cocaine is cultivated in Colombia, Peru and Bolivia, while more than 90 per cent of both the global and UK supply of heroin originates from Afghanistan (mainly from Helmand province). Intelligence assessments indicate that the primary trafficking route for heroin to the UK is overland from Afghanistan to Europe via Iran, Turkey and the Balkans. A significant amount of Afghan heroin seized in the UK arrives directly from Pakistan. There has also been a recent shift whereby traffickers use West Africa as a staging point, using light aircraft and other aeroplanes to transport drugs. Most of the UK's heroin is thought to arrive via sea and air ports in the South East of England. These assessments also indicate that the main entry points for cocaine in Europe are Spain and Holland, typically having arrived on board merchant vessels and yachts from Colombia and Venezuela. Almost all of the ecstasy consumed in the UK is thought to be manufactured in Holland or Belgium. There is growing evidence of intensive hydroponic cultivation of cannabis on a commercial scale throughout parts of the UK, which is thought to account for more than half the cannabis now consumed in England and Wales.

There is some evidence to suggest that kinship and ethnicity continue to play an important role in organising and sustaining market structures along the entire supply chain. Women also play a prominent role in drug trafficking. The evidence collected as part of this review indicates that women (mostly non-UK nationals, though the number of young female UK nationals involved has grown in recent years) are more likely to occupy the higher risk, lower status role of courier and tend to carry more drugs into the UK's ports, both in terms of weight and value, than their male (again predominantly non-UK national) counterparts.

The UK market

While there is no single accepted definition of a drug market, the research literature tends to conceptualise two types of distribution system: a pyramidical one and a more fragmented, non-hierarchical and entrepreneurial free market. However, it is difficult to judge which system is dominant in the UK. There is some research that indicates there has been a shift from historical affiliations and ties with hierarchical structures among some ethnic groups, towards more open and entrepreneurial networks of individuals who lack any formal connections with traditional syndicates.

The market is usually described as having three levels: an international trafficking level, a local retail level, and between these a loosely defined 'middle market' at national/regional level. However, the lines between the different levels in the supply

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chain are far from clear and the various roles within them are often fluid and interchangeable.

The available evidence suggests that dealers and operatives at all levels of the market tend to display a fair degree of adaptability and responsiveness to changing market conditions. Many seem unconcerned about the risks associated with police enforcement activities (with the possible exception of asset recovery and the use of informants). Given the minimal entry barriers to the market, the limited deterrent effect of law enforcement and the sheer scale of the revenues that can be generated, recent research has concluded that dealing and distribution networks have considerable scope for growth within an established and mature UK market which is resilient to enforcement activity.

Markets for cannabis, ecstasy, powder cocaine and heroin are believed to have grown considerably in Northern Ireland following the ceasefires in the mid-1990s; broadly in line with increases in drug prevalence since then. There are a range of factors that are likely to have affected these trends: a gradual erosion of traditional forms of social cohesion, a weakening of informal social control mechanisms and fewer restrictions on mobility. As a consequence organised crime may also have adapted to serve these increased levels of local consumption and, perhaps, to supply growing levels of demand in the Republic of Ireland, too.

Prisons have been described as an environment where drugs are in demand and are valuable as both currency and commodity. The presence of drug markets in prisons is widely considered to be a major cause of violence, intimidation and corruption. Yet there has been very little UK research examining the dynamics and operation of supply routes and markets in a custodial setting. One of the few studies undertaken has noted that prison-based drug markets are structurally similar to those found in the wider community. They too are shaped by complex interactions between demand, supply, security and enforcement, and treatment strategies. Consequently, a careful balance needs to be struck between justice, care and control. Tight or uneven security within prisons coupled with inadequate drug treatment could lead to wider problems and undermine broader efforts aimed at reducing demand.

CURRENT STRATEGIES AND ENFORCEMENT STRUCTURES WITHIN THE UK

The UK government has dedicated about one-quarter of the total cost of delivering the drug strategy to reducing the supply of drugs (£380 million in 2005/06). However, this does not include the wider criminal justice costs of drug-related crime (e.g. detection, prosecution and sentencing), which was estimated to be about £4 billion in 2003/04 for crime associated with Class A drug use.

The Serious Organised Crime Agency (SOCA) leads on higher level UK enforcement operations in partnership with a wide range of other national and international agencies. While there has been no independent assessment of its work, SOCA's first annual report to Parliament describes involvement in a range of activities resulting in some considerable seizures during 2006/07 in which its activity had been a contributory factor (whether through intelligence or a physical seizure). In April 2008

the Asset Recovery Agency's (ARA) asset recovering functions were transferred over to SOCA and ARA's remit for the training and development of financial investigators passed to the National Policing Improvement Agency.

Enforcement initiatives at a local or regional level are usually led by the police, sometimes in partnership with statutory and voluntary sector agencies. While these activities can achieve some considerable success (e.g. in terms of drug seizures and arrests) there is rarely any independent assessment of their impact on how the market functions and operates, on the subsequent availability, price and purity of illicit drugs, or on broader harm reduction outcomes.

EVIDENCE FOR THE EFFECTIVENESS OF DIFFERENT APPROACHES AIMED AT TACKLING THE ILLICIT DRUGS TRADE

Though the situation has improved in recent years, the relationship between the supply of illicit drugs, the demand for them and enforcement activities still remains poorly conceptualised, under-researched and little understood in the UK. While the illicit drugs trade is both global in scope and vast in scale, effective strategies for tackling local drug markets have to be built on a rounded understanding of the relationships between the markets and the communities in which they exist – including constraints on individual and community action.

Supply reduction approaches

The number of Class A drug seizures in England and Wales more than doubled between 1996 and 2005, though most seizures of heroin (74%), crack (70%) and cocaine (61%) in 2005 were less than one gram in weight. The market share (volume) of heroin and cocaine (including crack) seized is estimated to be 12 and 9 per cent respectively. Yet despite significant drug and asset seizures and drug-related convictions in recent years, drug markets have proven to be extremely resilient. They are highly fluid and adapt effectively to government and law enforcement interventions. For example, by altering purity levels traffickers and dealers are able to increase their profit margins to alleviate the effects of increased seizures and/or enforcement action.

While the availability of controlled drugs is restricted by definition, it appears that additional enforcement efforts have had little adverse effect on the availability of illicit drugs in the UK. Since 2000, average street prices in the UK have fallen consistently for heroin, cocaine, ecstasy and cannabis.

Although there is reasonable empirical evidence that drug-law enforcement action can have some localised impacts, any benefits tend to be short-lived and disappear once an intervention is removed or ceases to operate. Recent reviews indicate that geographically targeted problem-oriented policing interventions aimed at drug hotspots and involving partnerships between the police and wider community groups appear to be more effective at reducing problems related to the drug market (such as street-level dealing, crime and other forms of anti-social behaviour) than conventional law enforcement-only approaches. The available evidence indicates then that street-level drug law enforcement efforts should focus on forging productive partnerships with

local residents and community groups in order to identify and tackle the causes and consequences of street-level drug market problems more effectively.

The few systematic reviews that have been undertaken in this area have found that the most effective strategies for tackling drug dealing from residential and commercial properties display the following characteristics:

- an emphasis on improving the built environment;
- multi-agency working involving the police and other stakeholders (e.g. housing management teams);
- not relying solely on police crackdowns; and
- the use of civil law and related interventions (e.g. measures equivalent to anti-social behaviour orders) rather than criminal law.

Much of the proceeds from the illicit drugs trade is thought to enter the legitimate economy. Despite some important successes, and the apparent deterrent effect among some dealers, the overall impact of asset recovery and anti-money laundering operations is also considered to be marginal. Assessments of these measures have tended to identify shortcomings in relation to: take-up by law enforcements agencies; communication between stakeholders; roles and responsibilities; processes and procedures; and ownership of, and accountability for, such regimes.

These observations have led to increasing uncertainty among some commentators about the extent to which drug markets and distribution networks can be effectively controlled and tackled primarily through enforcement of the criminal law.

Demand reduction strategies

Demand reduction strategies such as drug education and treatment have been developed in recognition that supply reduction and enforcement in isolation are insufficient as a response. Law enforcement responses alone are unlikely to be effective at reducing or solving problems related to drug market activity. Instead, enforcement and demand reduction strategies need to be combined in a complementary way.

However, previous reviews of the available international and UK literature conclude that there is little evidence to suggest that drug education and prevention – as currently practiced – has had any significant impact on levels of drug use.

By contrast there is good evidence to support the effectiveness and cost-effectiveness of various drug treatment approaches for those with 'problematic' patterns of illicit drug use, including a range of criminal justice-based interventions. Nevertheless, in the UK, as in many other countries, the effectiveness of drug treatment as a demand reduction measure is undermined by high programme attrition rates and low levels of treatment completion, inconsistencies regarding the quality and availability of different treatment options, and ongoing concerns about its scope for facilitating recovery and reintegration among problem drug users.

One approach to disrupting local drug markets is to deploy 'inconvenience policing' tactics – where buyers are stopped, searched and, where appropriate, arrested. This can be regarded as a form of demand reduction because of its potential deterrent effect and the opportunities this may present for referral to treatment. However, the evidence suggests that this kind of approach can have unintended negative effects on the behaviour of individual users and on broader community relations. For example, inconsistent police responses can lead some drug users to avoid carrying injecting paraphernalia, thus increasing the potential for the sharing of injecting equipment, which in turn has implications for the transmission of blood-borne viruses. Markets can also rapidly adapt to such tactics – though in the process they may become less intrusive, and thus less irksome for local residents and businesses.

Reducing drug-related harms

Supply reduction strategies have an important part to play in harm reduction. However, law enforcement efforts can have a significant negative impact on the nature and extent of harms associated with drugs by (unintentionally) increasing threats to public health and public safety, and by altering both the behaviour of individual drug users and the stability and operation of drug markets (e.g. by displacing dealers and related activity elsewhere or increasing the incidence of violence as displaced dealers clash with established ones). The Australian 'heroin drought' illustrated some of these unintended adverse consequences.

However, the police can and are actively involved in the planning, coordination and implementation of a range of activities that fall within the scope of harm minimisation. In doing so they can fulfil a number of important roles within a broader harm reduction approach by:

- forming partnerships with treatment and other interventions;
- helping to constrain supply;
- exploiting drug markets' inherent adaptability, thus forcing some of them to adapt into less harmful forms, e.g. from open to closed markets.

Nevertheless, there is a dearth of research on the key elements and processes that contribute towards producing these positive outcomes (including the cost-effectiveness of different policing activities and strategies).

Developing multi-agency community responses

There is a broad consensus that effectively tackling drug markets requires cooperation from a range of agencies, including the police and local communities. However, there is very little evidence to guide effective practice aimed at engaging communities in enforcement efforts (largely attributed to conceptual and methodological issues). For example, while qualitative data support the notion that targeted funding and interventions (e.g. Communities Against Drugs) have had some success in disrupting local drug markets by providing an impetus for sustained, coordinated action aimed at reducing drug-related crime and strengthening community resilience against drugs, there have been difficulties in measuring and demonstrating their impact against a range of quantitative outcomes and targets.

One local UK study has identified the need for a range of interrelated approaches to undermine local drug markets and bolster community resilience. In this particular context, the researchers concluded, this could best be achieved by developing strategies to ensure the diversion of young people from the youth justice system (particularly in response to low-level possession offences), promoting more effective multi-agency work between local stakeholders, and adopting a more proactive programme of community engagement and capacity building.

A separate study (of the Derbyshire Drug Market Project) reinforced the notion that local responses should focus on forging productive partnerships with local residents and community groups in order to effectively identify and tackle problems associated with street-level drug markets. This particular evaluation aptly illustrated why policy makers and commissioners should not underestimate the difficulties of establishing effective inter-agency partnership working arrangements. In an attempt to reduce levels of harm and develop community responses, the research identified the need for projects to ensure that:

- effective strategic and operational management systems are in place;
- partnership working and performance management systems are integrated effectively (ideally as a unified strategic operation with an established line management structure and one operational budget); and
- expectations about the impact of police enforcement are realistic (i.e. aiming for containment rather than eradication).

To enhance the chances of success, projects will also need to maximise the benefits of drug treatment by offering a full range of treatment interventions to meet local user needs.

GAPS IN OUR KNOWLEDGE AND UNDERSTANDING

We were unable to locate any comprehensive published UK evidence of the relative effectiveness of different enforcement approaches. Two UK studies that have considered these issues were largely inconclusive due to a lack of reliable data. One notable US study has assessed the relative cost-effectiveness of various supply and demand reduction approaches and concluded that, given the high cost of supply reduction strategies, the provision of drug treatment is likely to be a more cost-effective approach.

We were also not able to identify any published comparative cost–benefit or value-for-money analysis involving these different levels of intervention within the UK.

The findings from this review reinforce the need for future research to:

- conceptualise, describe and map more accurately the nature and extent of local, regional and national market structures;
- establish the long-term effectiveness, cost-effectiveness and value for money offered by the range of interventions aimed at tackling drug markets and distribution networks;

- develop more multidisciplinary models and approaches (e.g. drawing on economic, criminological, behavioural, psychological and ethnographic perspectives) to better understand different aspects of drug markets, distribution and trafficking networks; and
- explore further the potential for new policy insights, ideas and interventions (e.g. engaging local communities and increasing their resilience to drug markets; developing strategies which address the extent of violence and intimidation in some local communities and tackle other constraints on their capacity for action; or assessing the impact of technological advances that could shape how markets and distribution networks operate or influence emerging patterns of drug production and consumption, such as the hydroponic cultivation of cannabis).

We also need to develop our understanding of the extent to which drug trafficking networks are embedded within, or related to, licit business organisations. This should also include a more detailed assessment of the impact of anti-money laundering measures, financial investigation, proceeds of crime and other 'lifestyle incapacitation' strategies contained within the 2005 Serious Organised Crime and Police Act.

In addition to assessing the impact of different enforcement methods and strategies across source, transit and importation routes, and comparative studies of local and regional markets, there is also an established need for more research charting the development of dealer and trafficker 'careers'. This should include: their recruitment, learning and networking, how dealers/traffickers expand their enterprises, the role of imprisonment and other law enforcement efforts in either facilitating or hampering these processes, key turning points and understanding the mechanisms by which people desist from these 'careers'.

IMPLICATIONS FOR FUTURE POLICY

The evidence assembled as part of this review leads us to the following conclusions:

- drug markets are very intractable;
- they demand a range of responses – none of which will individually have dramatic effects; but
- a mix of supply and demand reduction measures may have some impact, or at least ameliorate the harms associated with visible drug markets.

The need to establish the long-term effectiveness, cost-effectiveness and value for money offered by key components of previous and current drug strategies – and in particular of drug law enforcement – should be a prerequisite for developing effective policies and responses in this area. This is not a novel observation, however: these points featured prominently in responses to the Government's recent drug strategy consultation.

At the same time, it needs to be acknowledged that identifying the specific contribution of each different aspect of an overall strategy aimed at reducing supply, demand or harm is by no means a straightforward exercise. While there is an understandable desire and need for more rigorous research, in the context of drug markets and

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distribution networks, this has not always be feasible or possible in the past (because of poor quality data and an underdeveloped conceptual framework). A key priority for policy should be to improve the knowledge base and understanding of how different drug markets, distribution and trafficking networks develop and operate. This includes accurately mapping local markets and measuring intervention effects.

Another key policy issue is to recognise and minimise the unintended consequences of drug law enforcement efforts. The evidence assembled as part of this review demonstrates that law enforcement agencies are actively involved in the planning, coordination and implementation of a range of activities that fall within the scope of harm minimisation. However, as already noted, these activities can have a significant negative impact on the nature and extent of harms associated with drugs by increasing threats to public health and community safety, and by altering both the behaviour of individual drug users and the stability and operation of drug markets. There needs to be a much greater emphasis on establishing measurable outcomes which focus on harm reduction.

Addressing supply and demand

The illegal status of drugs is likely to have contained their availability and use to some extent. However, drug laws do not appear to have direct effects on the prevalence of drug use: 'tougher' enforcement measures have not necessarily deterred use. While the proportion of adults in England and Wales reporting any drug use during the previous year has fallen since 1995 (by 1.8%) and the use of Class A drugs has remained stable (increasing by 0.3%), the use of powder cocaine has increased during this period (by 1.7%). This may be the result of a shift from amphetamine use (Class B), which fell by 2.2 per cent during this time, to powder cocaine on the part of 'recreational' users.

At the same time a number of UK indicators published during the past 18 months also suggest that attempts to increase resilience to illicit drugs at both the community and individual level are being undermined. Examples include the growth in wealth and poverty inequalities, the conclusion that the main strategy against social exclusion is now largely "exhausted" (e.g. there has been no progress in reducing child poverty in recent years and the unemployment rate among the under 25s has been rising since 2004), and the observation that levels of child well-being in the UK compare poorly with other industrialised countries. In addition to the ongoing focus and commitment to production control at source, and the tackling of trafficking and dealing networks closer to home, governments clearly cannot neglect the equally complex causes and drivers of demand in consumer countries.

1. About this review

This report sets out the findings from a review of the recent literature on strategies to tackle illicit drug markets and distribution networks in the UK. The review was commissioned by the UK Drug Policy Commission and prepared by the Institute for Criminal Policy Research, School of Law, King's College London.

The main literature searches for this review were conducted during late September 2007. In the available time it was not possible to mount an exhaustive review of the literature on tackling drug markets and distribution networks within the UK's borders. However, by adopting a quasi-systematic approach we have sought to ensure a high degree of transparency in how the evidence we report on has been identified and assembled. The hope is that someone using the same basic approach and reviewing the same evidence would arrive at similar conclusions.

Where we have not been able to be systematic is in summarising the results of each study into a standardised format. This tends to be possible only in reviewing very homogeneous research literature, such as evaluative trials. However, given the difficulties of undertaking research in this area of drug policy, and so the inevitable prevalence of qualitative research and the use of small purposive samples, the availability of such evaluative evidence (particularly in the UK) is extremely limited (see Coomber, 2007, for a discussion).

Furthermore, others have questioned the appropriateness of synthesising the evidence from such studies using Campbell Collaboration standards for two main reasons: first, not all such interventions are targeted at specific individuals or places and thus amenable to experimental research designs, but instead focus on institutional actors, organisations or law enforcement processes; and second, they often fail to enhance our understanding of how and why a particular intervention or programme works (Kleemans et al., 2007).

Given the constraints and confines of the review it was important for us to be very specific about our search strategy and the terms used to identify material. In drawing together the evidence for this review we aimed to answer four broad questions:

1. What is the nature and extent of the problem?
2. What are current UK responses?
3. What are effective strategies for dealing with these issues?
4. Where are the gaps in our knowledge and understanding?

SEARCH STRATEGY

We used the following seven sources as part of our search strategy:

- DrugScope library
- Embase
- Home Office RDS
- National Criminal Justice Reference Service
- Scottish Executive
- Northern Ireland Office
- Northern Ireland Statistics and Research Agency

Our search terms were as follows:

"drug trafficking", "drug market", "demand reduction", "drug dealing", "seller" and "supply reduction".[1]

Using these terms provided us with 370 'hits' or matches following electronic searches of the DrugScope library (167), Embase (42), the National Criminal Justice Reference Service (147), and a manual trawl of online Home Office RDS (10) and Scottish Executive (4) publications.

INCLUSION/EXCLUSION CRITERIA

In reviewing the recent evidence for strategies to tackle illicit drug markets and distribution networks in the UK we only considered English language literature which had been published between 1995 and 2007 (although a small number of prominent studies conducted before this period were brought to our attention as part of the peer review process). Although the international evidence has been considered, there was a particular emphasis on highlighting lessons from UK evidence and using the results from previously published systematic reviews on the subject. Given the subject matter and our knowledge of previous research, we felt it was inappropriate to attempt to grade the evidence using an instrument such as the Maryland Scientific Methods Scale (see Kleemans et al, 2007, for a discussion). This is because in many studies on this issue it is not always clear what constitutes success, or indeed what outcomes are being measured (for related discussions see Homel and Willis, 2007, Mason and Bucke, 2002 and Dorn, Bucke and Goulden, 2003). It would also be inappropriate for answering those questions (1 and 2 above) that require a more descriptive response.

After filtering for mismatches and duplicate hits, our search strategy yielded over 200 publications that were considered relevant. Most of the literature that we located focused on illicit markets for Class A drugs such as heroin and crack/cocaine and also cannabis. There was limited literature at our disposal specifically examining markets for

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[1] As noted above, given the resource and time constraints imposed on the review it was important for us to be very specific about our search strategy and the search terms used to identify material.

other illicit substances (e.g. Pearson and Hobbs, 2004). There were inevitably many studies that the searches failed to pick up. We have, however, assembled an extensive collection of studies and papers over the years, conducting research on these and related issues. These 'on file' studies were also included for consideration to supplement the results from our searches.

STRUCTURE OF THE REVIEW

The primary focus of this review is on domestic measures for restricting the drug trade.

In Chapter 2 we begin with a brief overview of the global drugs trade. We then summarise what we know about the nature and extent of illicit drug markets and distribution networks in the UK and consider the impact this has on communities.

In Chapter 3 we look at the main local, regional and national strategies within the UK aimed at tackling drug markets and disrupting wider distribution networks. We focus specifically on the new UK drug strategy, the establishment of the Serious Organised Crime Agency (SOCA) and the Assets Recovery Agency (now subsumed within SOCA), and outline the kind of enforcement arrangements currently in place at a local level.

Chapter 4 looks at the evidence for the effectiveness of different strategies aimed at tackling the illicit drugs trade. This includes supply reduction and enforcement, demand reduction strategies and efforts concerned with reducing harms and engaging communities.

In Chapter 5 we consider some of the lessons to emerge from three case studies: the Communities Against Drugs initiative, the Australian 'heroin' drought and the Derbyshire Drug Market Project.

In Chapter 6 we further consider the gaps in our knowledge and understanding in this area.

In Chapter 7 we consider some of the implications of our findings for future policy and practice.

2. The nature of illicit drug markets and distribution networks

KEY POINTS

- The UK illicit drug market is extremely lucrative. Its size has been estimated to be £5.3 billion (using 2003/04 figures). This expenditure is distributed across markets for:
  - crack (28%)
  - heroin (23%)
  - cannabis (20%)
  - cocaine (18%)
  - amphetamines (6%)
  - ecstasy (5%).
- The market is usually described as having three levels: an international trafficking level, a local retail level, and between these a loosely defined 'middle market' operating at national/regional level. However, the lines between these different levels are far from clear and markets tend to be disjointed and fragmented in nature.
- The illicit drugs trade in the UK has far-reaching political, cultural and economic ramifications, and impacts negatively upon prison populations, levels of gun crime, social exclusion, and public health and community safety. These consequences and impacts are experienced disproportionately by the urban poor and minority ethnic groups.

A BRIEF OVERVIEW OF THE GLOBAL DRUGS TRADE

Illicit markets and trafficking routes for drugs such as heroin, cocaine, crack and cannabis exist in many countries throughout the world (see Natarajan and Hough, 2000, and Bean, 2004, for overviews). For example, according to the 2007 *World Drug Report* by the United Nations Office on Drugs and Crime (UNODC), cannabis is grown in at least 172 countries (UNODC, 2007: 7). Based on retail prices, the UNODC has valued the global illicit drugs trade at an estimated US$320 billion.[2] Drug trafficking is

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[2] Reuter and Greenfield (2001) considers most UN estimates to be grossly inaccurate. He has suggested that, because price and purity levels vary considerably across time and space, in trade terms the total market for cocaine, heroin, marijuana and synthetic drugs is more likely to be worth in the region of US$20–25 billion annually.

considered to be the most profitable sector of transnational criminality (UNODC, 2007: 170) and to pose the single greatest organised crime[3] threat to the UK by offering one of the most lucrative markets in the world for drug traffickers – both in scale and in terms of the profits that can be made (SOCA, 2006: 25).

THE UK MARKET: OVERVIEW

Sizing the UK market

The size of the UK illicit drug market in 2003/04 was estimated to be £5.3 billion (Pudney et al., 2006: 46), equivalent to around 33 and 41 per cent by value of the tobacco and alcohol markets respectively. This estimated market expenditure was distributed across six main categories of illicit drug, as illustrated in Figure 2.1.

Figure 2.1: Estimated UK market expenditure by drug
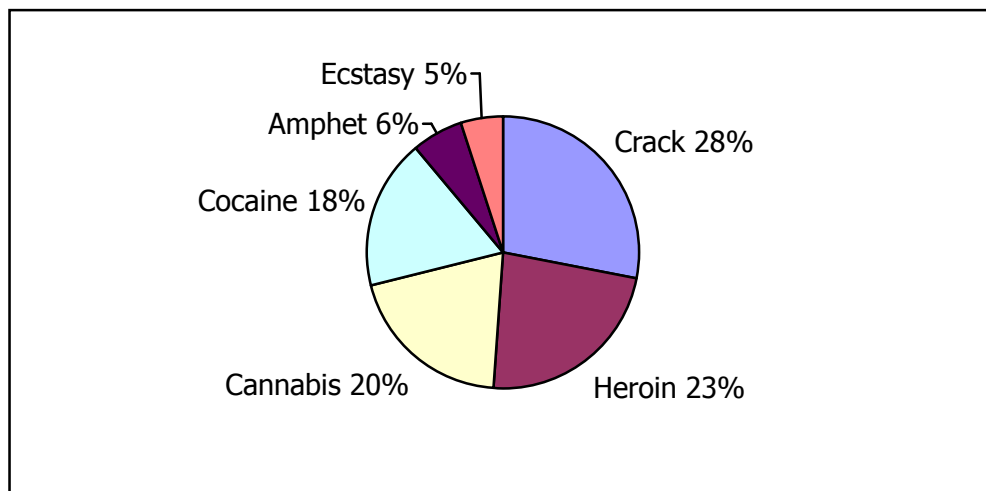
(Data from Pudney et al., 2006: 46)

This most recent figure is lower than the £6.6 billion estimate for the size of the market in 1998 (Bramley-Harker, 2001). This difference is attributed to improved methodology and data sources and a sustained fall in drug prices over this period.

In terms of volume, the estimated UK market for heroin during 2003/04 was sized at 20 tonnes; for powder cocaine it was 18 tonnes, and for crack it was 16 tonnes (Pudney et al., 2006: 76). The figures for cannabis and ecstasy were 412 tonnes and 60 million tablets respectively.

It is worth noting that the estimated lifetime prevalence of cannabis use – globally the most widely consumed illicit drug – is higher in England and Wales than in any other European country (Reuter and Stevens, 2007: 30). The UK also has a higher proportion

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[3] Although as Levi and Maguire note "'organised crime' is a notoriously difficult concept to define and to measure" (2004: 397).

of problem drug users per 1,000 of the adult population than any of its European neighbours (EMCDDA, 2007a).[4]

Overall structure and organisation

The Home Office estimates that there are approximately 300 major importers into the UK, 3,000 wholesalers and 70,000 street dealers (Matrix Knowledge Group, 2007: 2). However, in reviewing the literature in this area Ritter (2006) observed that there is no single working definition of a drug market. May and Hough concluded that it was possible to conceptualise two types of organisational or distribution system: a pyramidical one and a more fragmented, non-hierarchical and entrepreneurial free market. However, it proved difficult to judge which system was dominant in the UK (May and Hough, 2004: 556). The latter is reminiscent of the "loosely interlinked local and regional markets" described by Pearson and Hobbs (2001). The former would involve "large-scale importers and traffickers operating at the apex, filtering down to street dealers who operate on the lowest tier" (May and Hough, 2004: 555). Figure 2.2 illustrates the structure and composition of such a system.

Figure 2.2: A pyramidical market system
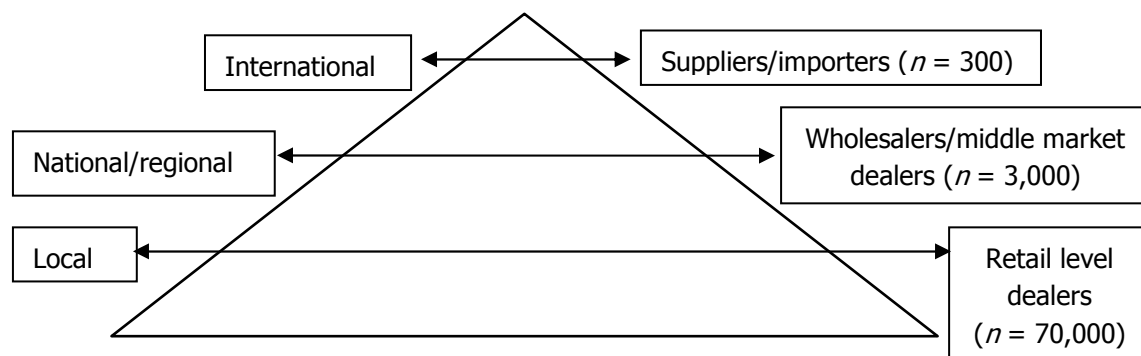
(Data from May and Hough, 2004: 555; Matrix Knowledge Group, 2007: 2)

The Home Office has, in recent years, funded a body of research which has sought to explore in greater detail how the different levels and types of distribution system within the UK market are structured and organised at local, regional, national and international levels (Lupton et al., 2002; Pearson and Hobbs, 2001; Dorn et al., 2005). (For examples of comparable Scottish work, see Cyster and Rowe, 2006, and Coope and Bland, 2004.) Research by Matrix Knowledge Group (2007) described a market of considerable complexity and diversity. Table 2.1 describes the various participants and roles occupied at each stage along the distribution chain by market level. However, these roles and the level at which participants operate within them are not necessarily static, but may be fluid and interchangeable.

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[4] There are, however, concerns about the comparability of such data and the reliability of the estimates provided by many countries.

Table 2.1: Participants and roles occupied at each stage along the distribution chain by market level

Market level	Participants/actors
International	**Wholesaler:** buys drugs outside the UK, oversees them being brought into the UK and sells them on in bulk. **Buyer:** buys drugs outside the UK. **Seller:** brings drugs into the UK and sells in bulk. **Transporter:** transports drugs (e.g. as a mule or haulier).
National/regional	**Wholesaler:** buys and sells in bulk across the UK. **Buyer:** buys drugs in the UK and in bulk in different areas. **Seller:** sells drugs in bulk in the UK and in different areas. **Transporter:** facilitates national transportation within the UK.
Local/retail	**Wholesaler:** buys and sells in one area in bulk. **Buyer:** buys drugs in one area in bulk. **Seller:** sells drugs in one area in bulk. **Transporter:** facilitates local transportation within the UK. **Storer:** holds drugs between purchase and sale. **Retailer:** sells drugs to users (a dealer). **Runner:** delivers drugs to users for a retailer/dealer.

(Data from Matrix Knowledge Group, 2007: 88)

In relation to heroin trafficking, there is some research which indicates that there has indeed been a shift from historical affiliations and ties with hierarchical structures among some groups, towards more open and entrepreneurial networks of individuals who lack any formal connections with traditional syndicates. As Zhang and Chin have observed in relation to Chinese heroin traffickers:

> These enterprising agents have no identifiable organisations, no rigid structure, no clearly defined deviant norms or values. They can conceal their criminal activities through their involvement in lawful business activities. Their participation in criminal activities is sporadic rather than continuous. (Zhang and Chin, 2003: 485)

They concluded that for "policy makers and law enforcement officials, it is disconcerting to fight random numbers of entrepreneurs who somehow find one another for a few sporadic transnational operations" (ibid.: 486). However, the extent to which this shift has been influenced by changes in the organisation and conceptualisation of enforcement and intelligence systems, or even changing fashions in sociological and criminological theory, is unclear (Dorn et al., 2003).

Consistent with these earlier findings (see also Bean, 2004), more recent research suggests that these markets are disjointed and fragmented in nature, and participants at all levels generally have a limited overview of how the wider market functions, or how other participants operate within it (Matrix Knowledge Group, 2007). Indeed, as Pearson and Hobbs have previously observed: "There is not so much a national drugs

market, as a series of loosely interlinked local and regional markets" (2001: vii). This in turn implies considerable diversity in how drug dealing enterprises are structured and organised, with most (80%) described as small or medium-sized operations (Matrix Knowledge Group, 2007: v). The remaining few are thought to run such operations either on their own or as part of a larger, organised collaborative network. Two-thirds of imprisoned dealers interviewed recently reported that they specialised in a single commodity, and it was heroin and cocaine dealers who tended to specialise.

When considering perspectives on organised crime, Levi warned us that the "haphazard development of criminological research in different parts of Europe means that our understanding of the way in which criminals organise themselves is very patchy" (1998: 340). He went on to note that the "lack of a research base on patterns of criminal relationships in most European countries – including, regrettably, the UK – means that we have little information about how domestic criminals meet and decide what to do, let alone how and to what effect/lack of effect Euro-criminals meet" (ibid.).

TRAFFICKING INTO THE UK

Sources and supply routes

Production and trafficking routes tend to emerge and develop in areas experiencing economic and/or political instability. Most of the world's global supply of cocaine – estimated to be 984 tonnes in 2006 – is cultivated in Colombia, Peru and Bolivia, while more than 90 per cent of both the global and UK supply of heroin originates from Afghanistan (UNODC, 2007; SOCA, 2008b). Despite the presence of over 40,000 UN-mandated International Security Assistance Force (ISAF) troops in the latter country, it seems that record opium crop levels – 8,200 tonnes in 2007 – and continued production is most prominent in those areas where the Taliban insurgency is strongest, most notably in Helmand province (*The Economist*, 2007).

The latest UK threat assessment published by the Serious Organised Crime Agency (SOCA) (2008b: 26–34) estimates that most of the supply of heroin to Europe is processed in Turkey. The primary trafficking route to the UK is overland from Afghanistan to Europe via Iran, Turkey and the Balkans. A significant amount of Afghan heroin seized in the UK also arrives directly from Pakistan. In addition, heroin reaches the UK using various air routes and via the Gulf/Middle East, eastern and southern Africa, and southern Asia. There has been a recent shift, involving traffickers using West Africa as a staging point and using light aircraft and other aeroplanes to transport drugs. Figure 2.3 indicates the general directions for the supply of heroin to the UK (based on data from the 2005 UNODC *World Drug Report*), rather than the exact routes followed.

Figure 2.3: Heroin supply routes to the UK

(BBC, 2007)

Most of the UK's heroin is thought to arrive via sea and air ports in the South East of England. Cross-Channel routes are used by predominantly Turkish and white British traffickers who conceal drugs within legitimate loads. In 2005, about half the heroin seized either in or on route to the UK transited Holland, Belgium and France.

Figure 2.4: Cocaine supply routes to the UK
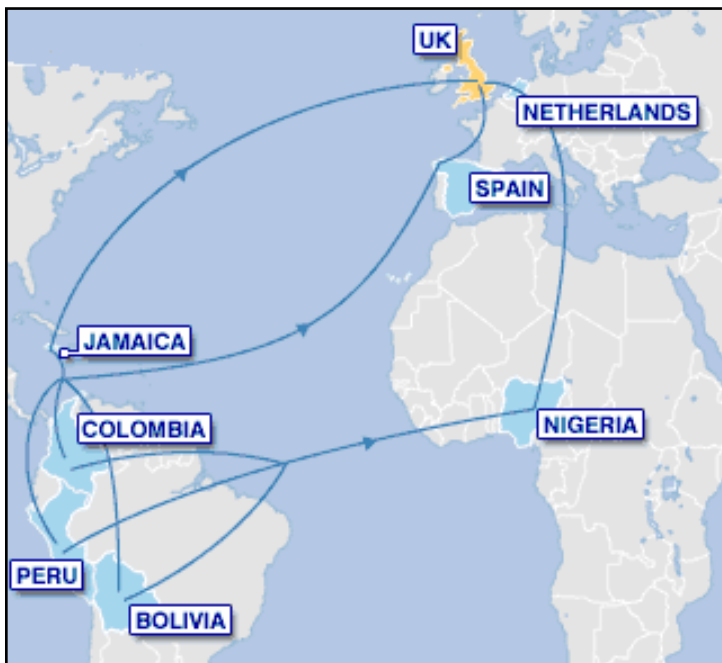
(BBC, 2007)

According to SOCA assessments, the main entry points for cocaine in Europe are Spain and Holland, typically having arrived there on board merchant vessels and yachts from Colombia and Venezuela. Maritime containers, couriers and air flights are also used to move cocaine to the UK and mainland Europe (often travelling via the Caribbean or West Africa). Figure 2.4 indicates the general directions for the supply of cocaine to the

UK (again using data from the 2005 UNODC *World Drug Report*), rather than the exact routes followed.

Almost all of the ecstasy consumed in the UK is considered by SOCA to be manufactured in Holland or Belgium and typically arrives in the UK through three ports: Dover, Felixstowe and Harwich.

Intelligence reports suggest that organised criminal groups are also importing bulk consignments of cannabis cultivated overseas (e.g. in North Africa and the Middle East) from mainland Europe (SOCA, 2008b). However, there is also evidence of intensive hydroponic cultivation of cannabis throughout the UK. Research shows that domestic cultivation of cannabis is on the increase and well over half the cannabis now consumed in England and Wales may be grown here (Hough et al., 2003; ACMD, 2008). This was one of the main reasons for the Association of Chief Police Officers to advise the Advisory Council on the Misuse of Drugs that, in its view, cannabis should revert from Class C to Class B (ACPO, 2008; see also HM Government, 2008a: 18).

There are substantial mark-ups and profit margins along the supply chain (in the region of 15,800 per cent for cocaine and 16,800 per cent for heroin), as illustrated in figure 2.5.

Figure 2.5: Example of prices and mark-ups associated with cocaine and heroin along the supply chain
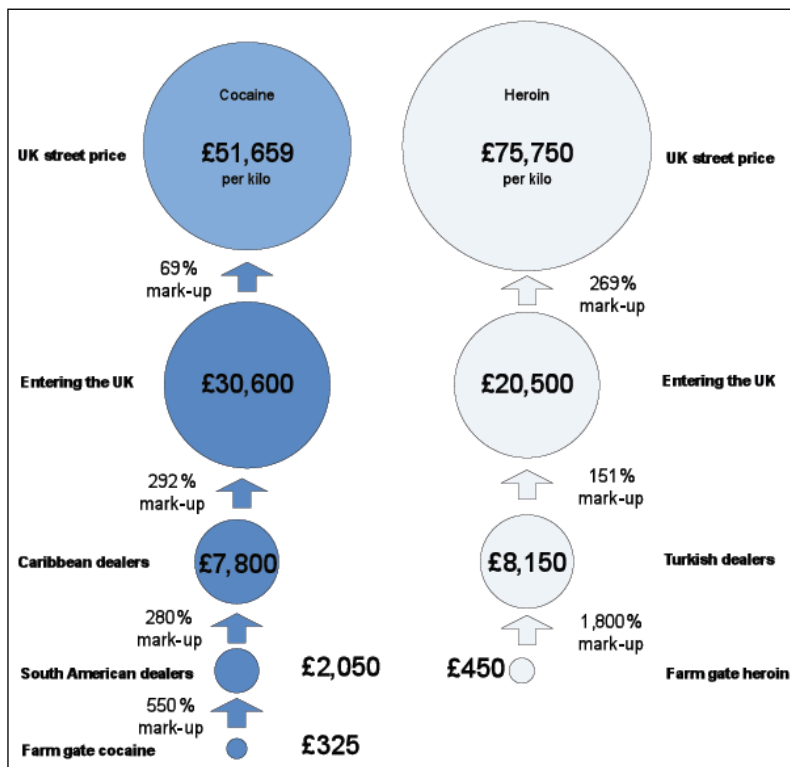
(Wilson and Stevens, 2008: 2)

Organisation and structure

Dorn, Levi and King (2005: 38) have developed the following typologies for upper-level drug traffickers[5] (and described the principal government approaches for disrupting their activities):

- 'Politico-military' traffickers: are insurgent or paramilitary groups in source countries who may impose 'taxes' on traffickers or may involve themselves in trafficking in order to support political or military activities from the revenues raised. They may also be concerned with achieving or maintaining a dominant position within existing political structures. (Against whom the authorities adopt political, anti-insurgency and policing responses.)
- 'Business criminals': are driven by a profit motive and tend to comprise small, socially integrated and skilled business groups. Considered a highly risk-averse group keen to protect the safety of key players and other core assets, they are deemed highly resistant to law enforcement efforts. (Against whom the authorities employ disruption tactics, imprisonment and asset confiscation.)
- 'Adventurers': these are marginal groups and individuals who are active in a variety of dispensable and interchangeable roles. Generally risk-tolerant, they will adopt amateurish and sometimes dangerous short cuts. (Against whom the authorities tend to deploy a mix of deterrence-based enforcement approaches, e.g. imprisonment).

Dorn and colleagues observed an increasing tendency towards reciprocal learning and cooperation within and between these trafficking 'types', with business criminals playing a prominent role in facilitating such links. They also suggest that all trafficker types have specific vulnerabilities to different law enforcement methods. While politically motivated groups are considered the most resilient to intervention, 'adventurers' are comparatively easy to apprehend. At the same time, the varied backgrounds from which this latter type of trafficker is drawn, their sheer numbers and their propensity for risk-taking make deterring them very difficult. As part of a broader political strategy, they conclude, law enforcement efforts need to be intensive, sustained and innovative.

The role of kinship and ethnicity in trafficking

The role of kinship and ethnicity is less clear higher up the chain (for a discussion see Murji, 2007). On the one hand, Dorn et al. (2005: 37) found that at the higher levels of the market, traditional ties along ethnic, national and related lines were becoming less relevant. On the other hand, it seems that "Columbians and Turks [still] operate in this way, looking in effect to control the trade from Columbia or Turkey, and placing their representatives strategically along the supply chain" (SOCA, 2006: 27). At the same

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[5] This study considered those involved in the trafficking of heroin and cocaine at higher levels along the supply chain, including: wholesale distribution (including at source); export; international transit; entry to Europe and the UK; and onward movement to city level (Dorn et al., 2005: iv).

time, "ethnic Turkish traffickers continue to dominate the supply of heroin to the UK, both within the UK itself and further upstream" while "Pakistani traffickers[6] have been involved primarily in trafficking heroin from Pakistan to the UK using direct transport and trade links" (SOCA, 2006: 27). Furthermore, research and intelligence assessments also suggest that:

- Colombian traffickers continue to dominate the supply of cocaine to Europe;
- Spanish criminal groups are involved in the receipt and distribution of cocaine to Europe and the UK;
- White British traffickers source their supplies of cocaine powder from Spain or Holland;
- West Indian traffickers, many of them British-born, are involved in supplying powder cocaine intended for the UK crack cocaine market. They have also become active in selling heroin alongside crack cocaine;
- various Eastern European groups are involved in trafficking heroin to Western Europe;
- the UK synthetic drugs market is dominated by white British, Dutch and Belgian criminals. (Ibid.: 28; see also Paoli and Reuter, 2008)

The emergence of West Africa as a transhipment point is recognised in the latest UK drug strategy. The strategy refers to Operation Westbridge: a joint initiative involving HM Revenue and Customs and the Ghanaian narcotics authorities in an effort to apprehend and significantly reduce the number of people using Accra airport as a trafficking gateway to the UK and other European countries (HM Government, 2008a: 19).

Women and trafficking

Analysis of HM Customs and Excise data over a ten-year period indicates that there has been a growth in the number of young UK nationals apprehended at British air and sea ports for drug trafficking offences (Vale and Kennedy, 2004). Young adolescent females were apprehended importing larger-sized consignments of Class A drugs during this period than males (as illustrated by the recent case involving two 16-year-old British girls convicted of attempting to smuggle cocaine to Britain from Ghana). These findings are consistent with earlier research which considered the demographic and sentencing characteristics of over 1,700 traffickers apprehended at Heathrow airport during a six-year period in the mid 1990s (Harper et al., 2002). The study confirmed that women (in this case mostly non-UK nationals) were significantly more likely to occupy the higher risk, lower status role of courier (see also Maher and Hudson, 2007) and tended to carry more drugs, both in terms of weight and value, than their male (again predominantly non-UK national) counterparts.[7]

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[6] SOCA does not state whether these traffickers are Pakistani-based or of Pakistani origin.

[7] The study did not, however, find any evidence to suggest that women were subsequently sentenced more harshly than males (see also Harper and Murphy, 2000).

THE MIDDLE MARKET

Operating between upper-level dealers and retail markets is the commercial space that has come to be known as the 'middle-market' (Pearson and Hobbs, 2001). This is the zone within the supply chain occupied by "those individuals and serious crime networks who operate somewhere between smugglers and the vast army of retail level dealers who 'serve up' directly to illicit drug consumers" (Pearson and Hobbs, 2004: 566). However, even among law enforcement personnel and the dealers operating within it, there is no clear or agreed definition of what the 'middle-market' is or where it is situated. Instead this market is considered to be "fragmented, fluid and constantly mutating. Roles are exchanged and people come and go" (ibid.: 575).

London, Birmingham and Liverpool are considered to be the main distribution points to all areas of the UK (SOCA, 2008b: 8). Establishing and maintaining effective transportation routes are considered key to the success of any drug-dealing enterprise (Matrix Knowledge Group, 2007: v).

UK RETAIL MARKET

Structure and organisation

May and Hough's (2004) classification of retail markets distinguished between open, semi-open (pub and club-based) and closed markets, as described in Table 2.2. They also commented on the emergence of 'crack houses' or 'dealing houses' and considered the scope for other emerging forms of retail system (e.g. 'closed moving markets' and 'social network markets') which, it seems, are increasingly important for young people's access to supplies of cannabis, for example (see Duffy et al., 2007).

May and Hough also observed how these different markets adapt and respond to situational prevention (which aims to alter behaviour through the management, design and manipulation of the drug market environment), technological developments (mobile phones and CCTV), enforcement action and broader geographic, social and economic factors that might influence both supply and demand (see also Power et al., 1995; Edmunds et al., 1996; May et al., 1999, 2000). For example, they noted how during the 1990s heroin and crack markets evolved from open street-based markets to closed phone-based ones. Also during this time, 'crack/dealing houses' emerged as a prominent form of distribution in many inner cities.

The role of ethnicity in the domestic market

Earlier work by Ruggiero and South (1995) suggested that the UK market was divided along racial lines with much of the more precarious and comparatively poorly paid work being undertaken by young black males at retail level. Pearson and Hobbs (2001) also noted the importance of kinship and ethnicity in sustaining networks at the lower end of the supply chain.

Cannabis 'factories' or 'farms' organised predominantly by Vietnamese criminal groups (often using illegal immigrants, including children, as 'gardeners' to cultivate these

crops) are now an established source of production of cannabis on a commercial scale in parts of the UK (ACMD, 2008).

Table 2.2: Retail level market typologies

Retail level markets	Description
Open market	There are no barriers to access. Someone completely unknown to the seller is able to buy illicit drugs in an open market. These tend to operate in geographically well-defined areas at specific times. This type of market has advantages for buyers (who know where to go to buy the goods they want, trading quality against price) and sellers (who can maximise customer access). Both, however, need to be wary of and avoid police detection.
Semi-open (pub and club-based)	Believed to make up a significant part of drug distribution systems in the UK (in terms of numbers involved rather than expenditure), particularly for club drugs such as ecstasy. Operating in a semi-open capacity, sellers will generally do business without a prior introduction (provided the buyer 'looks the part').
Closed market	Access is limited to known and trusted participants. An unknown buyer needs someone to introduce them or to vouch for them before they can make a purchase. Unlike open and semi-open markets, these are unable to attract passing trade and therefore find it more difficult to maximise their profits. Closed markets are less likely to attract police attention, however.
'Dealing house' market	Sometimes referred to as 'crack houses'. These are a range of properties from which drugs are sold. They can be residential, uninhabited or semi-derelict. They are often only occupied for a short period of time until enforcement action closes them down. The sophistication of these markets is variable: some are highly organised and resilient to enforcement, others less so.
Social network market	These are primarily based around friendship and social networks (gaining access to drugs through older brothers and sisters, or through friends and friends of friends). Participation serves to insulate or distance one from the risks posed by more overtly criminal drug markets. Supply has little to do with commercial gain.

(Data from May et al., 2000: 4; May and Hough, 2004: 550–553; Duffy et al., 2007)

DRUG USE AND MARKETS IN NORTHERN IRELAND

McElrath (2004) has discussed how the nature of the political conflict in Northern Ireland (NI) contributed to low levels of drug use in the province during the 1970s and 1980s. As a consequence, the development of drug markets and distribution networks in NI, and our understanding of them, differ fundamentally compared with the rest of the UK. McElrath describes how the nature of the political conflict created strong social bonds within communities, reduced geographic mobility and encouraged the development of informal social controls (which ostensibly opposed drug use and dealing).

She draws on data from a range of sources to demonstrate how patterns of drug use have changed considerably following the ceasefires in the mid 1990s. Although small in comparison with British markets, cannabis, ecstasy, powder cocaine and heroin markets, in particular, have grown in NI since then; broadly in line with increases in drug prevalence during recent years (NACD and DAIRU, 2008). While it is not clear whether and to what extent social cohesion within communities has been eroded or forms of informal social control weakened since then, it is clear that people in the region now have fewer restrictions on their mobility. Consequently, there will be a lower risk of questioning and search by military and police personnel, a reduction in deterrence and an increase in supplies by both organised and disorganised offenders alike. It is also possible that organised crime may have adapted to serve these increased levels of local consumption and, perhaps, to supply growing levels of demand in the Republic of Ireland also. However, the subcultures of young heroin users that have emerged in some areas of NI, McElrath suggests, may in time approximate those outbreaks which appeared across parts of mainland Britain during the 1980s (McElrath, 2004: 587).

PRISON DRUG MARKETS

The prevalence of substance abuse and dependence is higher among prisoners than the general population: 55 per cent of prisoners report Class A drug use during the previous year compared with 3 per cent of the general population (McSweeney et al., 2008: 18). This highlights the need for efficient supply reduction measures, appropriate screening for substance abuse at reception into prison and effective treatment for those in custody (Fazel et al., 2006). However, it has long been acknowledged that prisons are not always conducive environments for those aspiring to abstain from using illicit drugs. Indeed, for a range of functional reasons – to manage withdrawal and relieve related symptoms or to alleviate boredom – it may actually encourage continued drug use (Swann and James, 1998). Most prisoners report experiencing few difficulties obtaining drugs while in prison (Wilkinson et al., 2003; Penfold et al., 2005). Consequently, persistence of heroin use is common: in one study 70 per cent of those using heroin in the month prior to imprisonment reported continued use while in custody (Strang et al., 2006). These factors conspire to ensure that prisons are "an environment where drugs are in demand and are valuable as both currency and commodity" (Penfold et al., 2005: 27). Yet the research evidence examining the dynamics and operation of supply routes and markets – in contrast to drug use, treatment and related policies – within custodial settings is "almost non-existent" (Crewe, 2006: 348). This is perhaps unsurprising given the lack of research (particularly non-US evidence) on drug markets generally (Coomber, 2007).

Penfold, Turnbull and Webster (2005) recently completed the first systematic study into prison drug markets to have been carried out in the UK. This exploratory qualitative research, which involved interviews with 121 prisoners and ex-prisoners and 37 prison staff, found that the drug markets in six English prisons were shaped by complex interactions between demand, supply, security and enforcement, and treatment strategies. The distribution of drugs within prisons was affected by an interaction of the various actors involved, the prison structure, its particular regime and

its physical environment. They described three types of dealing within the establishments they studied:

- Low-level opportunistic, altruistic or reciprocal supply – "sorting out friends" in exchange for 'canteen'[8] items or a share of other drugs.
- Middle-level dealing – where drugs served as a form of currency to make prison life more comfortable and maintain one's own use.
- Higher level dealing – which was more organised, better resourced, extended beyond the prison walls and was undertaken for profit. This often involved dealers in the community, a continuous supply of drugs, the use of mobile phones and 'employees'.

Drugs were purchased in a number of ways: using 'canteen', outside payments, personal property, swapping for other goods or services, and cash. The presence of drug markets in prison was widely considered to be a major cause of violence, intimidation and corruption, however. There was a broad consensus between the prisoners, ex-prisoners and staff interviewed on the key routes of drug supply into prison. The six main routes identified were:

- social visits
- mail
- new receptions
- prison staff
- over perimeter wall/fence
- reception after court visits.

In the researchers' view, the supply and demand for illicit drugs was driven by two main factors: the impact of security measures on their availability and the efficacy of detoxification programmes in managing withdrawal. It was the interaction between enforcement measures and the treatment facilities that were in place which influenced prisoners' decisions about whether to use drugs while in prison and how to obtain them. Based on their experiences in these six establishments the researchers concluded that "despite the considerable increase in funding for drug treatment in prison, there remains a very long way to go before drug-using prisoners have routine access to good quality detoxification, treatment and aftercare" (ibid.: 32). The researchers also observed how tight or uneven security in some establishments, for instance, coupled with inadequate drug treatment could lead to problematic supply route displacement effects (e.g. where tight security on all external supply routes but poor detoxification provision could lead to an increase in bullying or intimidation for prescribed medication), which ultimately undermines broader efforts to reduce demand. These problems were felt to have been exacerbated by budgetary constraints, overcrowding and a lack of constructive activity.

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[8] This refers to a range of goods which prisoners may be able to order and purchase via a prison canteen (e.g. tobacco, food and toiletries).

In response to a recent Prison Policy Update (Ministry of Justice, 2008), the Ministry of Justice announced in March 2008 a review of the effectiveness of measures to disrupt the supply of illicit drugs in prisons. The review, which reported on its recommendations in July 2008 (Blakey, 2008), examined the effectiveness of current strategies used by the Prison Service to prevent drugs entering prisons. Issues for consideration included the use of drug detection dogs, working arrangements with local police liaison officers and the impact of enhanced searching procedures. The review made ten recommendations about how these systems could be improved and identified further measures that were required. These included:

- more focus on the sharing of best practice and on developing stronger partnership working with the police (e.g. sharing intelligence); and
- further development and use of technology (e.g. for disrupting the use of mobile phones and greater use of searching – of both prisoners and staff).

These recommendations emerge following recent uncertainty about the scope for delivering even minimum standards of care to drug users in custodial settings (PwC, 2007; UKDPC, 2008) and the announcement of £119 million to raise the standard of clinical drug treatment in prisons between 2007/08 and 2010/11. This additional funding will further develop the Integrated Drug Treatment System in a number of prison establishments.[9]

THE IMPACT OF THE ILLICIT DRUGS TRADE

The illicit drugs trade has far-reaching political, cultural, social and economic ramifications. These can take the form of increased rates of drug-related death, disease, conflict, crime and social exclusion. (For a discussion of the negative consequences of the enforcement responses that have been implemented to tackle the drugs trade see Section 4.3.)

Violence and intimidation are strategies employed to protect a customer base at all market levels. Pearson and Hobbs (2001: viii–xi) observed that while many involved in the market often had established reputations for violence, those involved in middle-market distribution systems were more inclined to avoid confrontation than to actively seek it.

The drugs trade is considered to be an important factor behind the growth of gun crime in Britain during recent years. Interviews with 80 adult males imprisoned for Firearms Act offences revealed that "illegal drugs underpin the criminal economy and represent the most important theme in relation to the illegal use of firearms. Firearms

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[9] The Integrated Drug Treatment System (IDTS) aims to facilitate a closer integration of prison clinical services and structured psychosocial CARAT (Counselling, Assessment, Referral, Advice and Throughcare) interventions. Enhanced clinical services have now been implemented in 53 prisons (with enhanced psychological services available in 29 of them). A new phase of IDTS implementation is planned for 2008/09 involving a further 38 prisons. There may also be one or more further phases in subsequent years.

possession was reported in relation to robberies of drug dealers, territorial disputes, personal protection and sanctioning of drug market participants" (Hales et al., 2006: 1). These findings are consistent with earlier research which noted the increased possession and use of firearms by drug sellers (May et al., 2000: v).

The effects of the illicit drugs trade can also have a negative impact on quality of life issues for local communities: undermining community confidence, damaging neighbourhood reputations and hindering regeneration efforts (Lupton et al., 2002). Fear of crime is a prominent theme to emerge from surveys of local communities affected by drug markets (Cyster and Rowe, 2006: 2). Often, though, it can seem that levels of generalised fear of crime across society are not linked to actual experiences, but are instead informed by media stereotypes of drugs users, for example. The 2003/04 British Crime Survey, however, assessed what people's perceptions of local problems were based on, the nature of experiences that informed those perceptions and the impacts for individuals and communities. One in four respondents (25%) reported that drug use and dealing were 'very big' or 'fairly big' problems in their local area. More than half (55%) of those perceiving drug use and dealing as a problem in their local area also had direct experience of the problem during the previous year (Wood, 2004: 3).

It seems that much of the proceeds from drug dealing appear to enter the legitimate economy both here and abroad. According to one recent study, the strategies employed for laundering profits from drug dealing in this way are not always considered to be sophisticated ones and can often involve using family and friends' business accounts (although this is likely to be a characteristic of the assembled sample for this particular study rather than an indication of the sophistication of money laundering approaches more generally) (Matrix Knowledge Group, 2007; cf. van Duyne and Levi, 2005). As the case studies in Table 2.3 illustrate, use of legitimate businesses is most apparent at an international level and can involve the identification of vulnerable businesses and the corruption of professionals in order to facilitate importation into the UK.

Table 2.3 Examples of money laundering approaches

Corruption of legitimate business to facilitate importation (heroin)

One importer arranged to buy the drugs in Europe, import them and sell them on to dealers. He had a range of methods for importing the drugs but talked openly about one he had used most often. His girlfriend worked in a law firm and her boss would be away on business regularly. When he knew the boss was away he would mail what appeared to be a legitimate journal to his girlfriend's law firm address. He sent it by next-day courier and his girlfriend intercepted the package containing drugs on arrival.

Corruption of professions (heroin)

One local wholesaler regularly employed a solicitor to defend his runners. The lawyer would share with him details of other police cases and also specific data on the quality of his client's drugs available from forensic test results.

Identification of vulnerable business (multiple drugs)

One freelance haulier involved in the drugs trade reported that his boss would specifically identify a firm in financial trouble but who still had regular consignments coming into the country. He then went round and offered them a part of a deal so he could use their legitimate consignment as a front to enable drugs importation.

(Matrix Knowledge Group, 2007: 39)

May and colleagues (1999: vi–vii) have also observed how sex markets can play a significant role in the development of drug markets (and vice versa), and that the threats posed by these markets to public order, public health and to vulnerable individuals – especially minors – from rape, assault and robbery can be amplified in these circumstances.

3. Current strategies and enforcement structures within the UK

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KEY POINTS

- The UK government has dedicated about one-quarter of the total cost of delivering the drug strategy to reducing the supply of drugs (£380 million in 2005/06). However, this does not include the wider criminal justice costs of drug-related crime, estimated to be about £4 billion in 2003/04.
- The Serious Organised Crime Agency (SOCA) leads on higher level UK enforcement operations in partnership with a wide range of other agencies. Local enforcement initiatives are usually led by the police, sometimes in partnership with statutory and voluntary sector agencies.

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We now briefly focus on the main elements of the current UK drug strategy (covering the period 2008–2018) that aim to tackle drug markets and distribution networks. We then consider enforcement responsibilities at national, regional and local levels. We focus in particular on two major developments that were intended to complement many of these objectives at national and regional level: the establishment of the Serious Organised Crime Agency and the Assets Recovery Agency. We then outline configurations for enforcement responsibilities at a local level.

THE UK DRUG STRATEGY

The new drug strategy, *Drugs: protecting families and communities* (HM Government, 2008a), sets out the Government's plans to tackle the supply of illicit drugs into and within the UK. The intention is to reduce the prevalence of drugs through the targeting of all levels of trafficking and supply, and through the use of intelligence, effective policing strategies and asset confiscation. The latest strategy aims to protect communities through the use of "robust enforcement action to tackle drug supply" in a number of ways, including:

- using the Neighbourhood Policing approach to identify local drug issues and develop solutions;
- making it easier to seize assets from (arrested) drug dealers;
- establishing asset sharing agreements with priority countries (e.g. the United Arab Emirates in 2008);
- developing improved technology for drug detection in people, freight and post;

- developing partnerships with governments in producer and transit countries and expanding international cooperation against the production and transit of drugs; and
- supporting the Afghan government to implement its National Drug Control Strategy (HM Government, 2008b).

The previous strategy document (Home Office Drugs Strategy Directorate, 2002: 66–70) noted that while the UK government retains responsibility for setting the overall strategy, each devolved administration exercises its delegated powers to shape the strategy in order to address their local needs and circumstances. Accordingly, in May 2008, the Scottish Executive set out its drugs strategy in *The Road to Recovery: A New Approach to Tackling Scotland's Drug Problem*. At the same time the Welsh Assembly Government ended a three-month consultation on its ten-year strategy *Working Together to Reduce Harm*. The Northern Ireland Executive has also approved the joint implementation of its strategy along with one for reducing alcohol-related harm.

The Drug Harm Index (DHI) was also developed to measure progress against the Public Service Agreement targets for 2005–2008 which sought to reduce the harm caused by illegal drugs (including drug-related crime, but not drug crimes, such as possession or dealing, that may largely reflect enforcement activity) and community perceptions of drug problems such as drug markets and drug dealing. While acknowledging the various criticisms that have been levelled at the DHI as being only a partial indicator of drug-related harm (Reuter and Stevens, 2007: 47), the latest data show that the DHI fell from 89.1 in 2004 to 83.8 in 2005 and has fallen year-on-year since 2001 (Goodwin, 2007: 4). The latest falls are attributed to reductions in drug-related crime – particularly domestic and commercial burglaries, theft from a domestic vehicle, shoplifting and other thefts. A reduction in drug-related hepatitis C cases during this period also had a bearing on the downward trajectory of the DHI. However, these benefits were partially offset by an increase in drug-related deaths (from 1,495 to 1,608) and robbery between 2004 and 2005.

In recent years it seems that the UK has achieved greater parity in the proportion of its drug-related public expenditure devoted to law enforcement and treatment (compared with recent estimates which suggest that enforcement spends account for 75 per cent of drug-related public expenditure in the Netherlands and 24 per cent in Finland)[10] (EMCDDA, 2007a: 22). The UK government allocated just under £1.5 billion in order to deliver the aims of the drug strategy in 2005/06.[11] Around a quarter of these funds (£380 million) were dedicated to reducing the supply of drugs, compared with 39 per cent (£573 million) for drug treatment. However, these figures do not include wider enforcement and criminal justice costs (e.g. detection, prosecution and sentencing)

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[10] These figures may need to be interpreted with some caution as what is defined and counted may not be strictly comparable.

[11] This is lower than the indicative estimates for the resources being invested by government departments to enable delivery of the new drug strategy, which are expected to increase from £942 million in 2007/08 to £963 million in 2010/11 (HM Government, 2008a: 66).

arising from drug-related crime. During 2003/04, the broader criminal justice costs arising from Class A drug use were estimated to be in the region of £4 billion (Gordon et al., 2006: 44).

NATIONAL AND REGIONAL STRUCTURES

The Serious Organised Crime Agency

The Serious Organised Crime Agency (SOCA) is an Executive Non-Departmental Public Body sponsored by, but operationally independent from, the Home Office and has a UK-wide remit. It is funded (over £400 million in 2006/07) by the Home Office and reports to the Home Secretary. Its latest annual plan (SOCA, 2008a) describes the organisation as "an intelligence-led law enforcement agency with harm reduction responsibilities. Harm in this context is the damage caused to individuals, communities, society, and the UK as a whole by serious organised crime" (ibid.: 6).

SOCA, which became operational on 1 April 2006, was formed following an amalgamation of the National Crime Squad and the National Criminal Intelligence Service. It also assumed HM Revenue and Customs' responsibility for drugs trafficking and associated criminal finance, together with the remit for organised immigration crime that had formed part of the work previously undertaken by the UK Immigration Service.

In June 2005, the then Home Secretary set out the Government's priorities for SOCA during its first three years of operations. Tackling Class A drug trafficking was deemed its first priority and its board identified a target of directing 40 per cent of the agency's operational efforts to tackling Class A drug trafficking during this period. SOCA conducts its own operations and works with partners in the UK and overseas. It has a significant overseas contingent with a network of 140 liaison officers based in 40 countries worldwide. These officers work on SOCA operations and with local law enforcement and international partners on a range of activities, from capacity building to joint operations. SOCA works bilaterally and multilaterally with international partners, including the Maritime Analysis Operations Centre – Narcotics (MAOC-N). MAOC-N brings together experts from Spain, Portugal, Ireland, France, Italy, the Netherlands and the UK to provide, for the first time, a joint coordination point for European law enforcement to counter the smuggling of cocaine from the Caribbean and Americas towards the Atlantic borders of Europe and West Africa.

In addition to liaison with the Royal Navy, the Foreign and Commonwealth Office, other international agencies and joint investigation teams (e.g. Operation Airbridge – a joint operation between the UK and the government of Jamaica), SOCA conducts enforcement operations across England, Wales, Scotland and Northern Ireland. For example, SOCA works with the Scottish Crime and Drug Enforcement Agency (SCDEA), the Police Service of Northern Ireland and its Organised Crime Taskforce, and the Metropolitan Police's Middle Market Drugs Partnership. SOCA also coordinates the UK Control Strategy for Organised Crime, which acts as a framework for multi-agency cooperation against organised crime.

SOCA's main drugs trafficking programmes include ongoing operations to tackle:

- the 'upstream' heroin and cocaine trade: this aims to reduce the harm caused to the UK by the heroin and cocaine trade, focusing on the main 'upstream' supply sources (e.g. Afghanistan and South America to the European Union (EU));
- drugs trafficking from the EU to the UK, including synthetic drugs, focusing particularly on the Netherlands as the key nexus point; and
- the harm from the illegal drugs trade within the UK. (Ibid.: 20)

SOCA was established with a different remit and mission to its precursor agencies. Although the precursors had enjoyed some tactical success (in terms of arrests and seizures made) there were concerns that drug trafficking activities were increasing. SOCA seeks to have a sustainable impact on distribution networks and associated problems and, in doing so, reduce the harm caused to the UK. A key objective is to understand better the nature of the problem and the market as a whole, and then to act at the most effective points and in the most effective ways. While quantitative targets have not been set for SOCA (with the exception of meeting asset recovery targets), its performance (see Section 4.1 for a discussion) will instead be measured with reference to its ability to:

- identify trends in underlying harms caused by organised crime;
- produce evidence of dislocation of criminal markets, including evidence that criminal groups are finding the UK a less attractive market; and
- nurture growth in its own capacity to make a difference, with particular focus on the quality of our understanding of organised crime. (SOCA, 2008a: 10)

A Serious Organised Crime Taskforce has recently been established in Scotland to provide strategic direction and coordination for all the organisations with a remit around tackling serious organised crime. The group is chaired by the Cabinet Secretary for Justice and includes the Lord Advocate, the Association of Chief Police Officers in Scotland, SCDEA, SOCA, HM Revenue and Customs, the Scottish Prison Service and the Scottish Government (The Scottish Government, 2007).

The Assets Recovery Agency

The Assets Recovery Agency (ARA) was created in February 2003 under the provisions of the Proceeds of Crime Act 2002. In April 2008 its asset recovering functions were transferred over to SOCA and its remit for the training and development of financial investigators to the National Policing Improvement Agency. Additionally, prosecutors now also have civil recovery powers. One of the main aims of the ARA was to "disrupt organised criminal enterprises through the recovery of criminal assets, thereby alleviating the effects of crime on communities" (Assets Recovery Agency, 2007: 7). It took referrals from the wider asset recovery community: agencies such as the police, HM Revenue and Customs, prosecutors and other government departments who are involved in seizing and confiscating the proceeds from crime. It was the only body with civil recovery powers in England, Wales and Northern Ireland. There were five regional asset recovery teams in England and Wales. In Scotland, National Casework Division and Civil Recovery Units work with SCDEA, UK police forces and HM Revenue and Customs in order to fulfil these functions.

Local structures

In addition to isolated localised enforcement initiatives by the police (e.g. around 2,000 cannabis 'farms' were raided in England and Wales during 2007 (ACPO, 2008)), there is continued emphasis on statutory and voluntary sector agencies working together to tackle local drug markets (including prison-based ones). This focuses on the need for establishing and sustaining partnerships between the police, the Prison Service, Crime and Disorder Reduction Partnerships, Drug Action Teams and local authority/council departments (e.g. housing). Clearly the composition of, and arrangements for, these local partnerships will vary considerably from area to area. For example, the 2003 Anti-social Behaviour Act calls for these agencies to work collaboratively to develop the provision of appropriate and timely community drugs education and support services (e.g. drug treatment), alongside police enforcement action to close 'crack houses', as part of a broader strategy to help build community resistance to drug markets (Peters and Walker, 2005). Throughout this report we draw on evidence describing the operation and effectiveness of numerous local initiatives aimed at tackling drug markets (e.g. the Derbyshire Drug Market Project and the Communities Against Drugs initiative, discussed in Chapter 5).

4. Evidence for the effectiveness of different approaches aimed at tackling the illicit drugs trade

KEY POINTS

Interventions aimed at tackling drug markets have the broad goals of reducing supply, reducing demand and/or reducing harm.

Reducing supply

- Despite significant drug and asset seizures and convictions of traffickers and dealers, drug markets have proven to be extremely resilient. They are highly fluid and adapt effectively to government and law enforcement interventions.
- Although the availability of controlled drugs is restricted by definition, it appears that additional enforcement efforts have had little adverse effect on the availability of illicit drugs in the UK.
- Since 2000, average street prices in the UK have fallen consistently for heroin, cocaine, ecstasy and cannabis.

Reducing demand

- The illegal status of drugs is likely to have contained availability and use to some extent. However, drug laws do not appear to have direct effects on the prevalence of drug use: 'tougher' enforcement does not necessarily deter use.
- There is good evidence that drug treatment (including interventions initiated within the criminal justice system) can reduce drug use and reoffending rates.

Reducing harm

- Law enforcement efforts can have a significant negative impact on the nature and extent of harms associated with drugs by (unintentionally) increasing threats to public health and public safety, and by altering both the behaviour of individual drug users and the stability and operation of drug markets.
- However, it is possible to focus enforcement activity on reducing the harm caused by drug markets (particularly new or emerging ones), for example by targeting those dealers who cause the greatest levels of harm and displacing drug markets to less populated areas, or through partnership arrangements which can help ensure rapid access to treatment and increasing awareness of local drug services during police enforcement operations.

> **Local partnerships**
>
> Overall, there is a broad consensus that a partnership involving a range of agencies, including the police and local communities, is more effective that conventional law enforcement-only approaches. However, there is very little evidence to guide effective practice.

The conceptual framework for understanding drug markets (Coomber, 2007), the empirical evidence base for 'what works' in terms of disrupting drug markets and distribution networks, and the value for money and cost-effectiveness of these approaches (Roberts et al., 2004) is extremely limited. However, it is certainly possible to identify a number of general considerations to help inform a more effective response (Webster et al., 2001; Mason and Bucke, 2002; Burgess et al., 2003; Tilley et al., 2004; Harocopos and Hough, 2005).

In reviewing the international research, Coope and Bland (2004) noted the diversity of interventions aimed at tackling drug markets. The broad goals of these interventions were:

- supply reduction
- demand reduction
- harm reduction.

Coope and Bland observed that these goals were not mutually exclusive and that a reduction in supply and demand could be compatible with a broader harm reduction strategy. However, what constituted 'success' or 'effectiveness' within the context of these approaches also varied considerably (for a detailed discussion of the conceptual frameworks for action against drug supply see Dorn et al., 2003).

We now go on to consider the effectiveness of UK enforcement approaches for each of these three goals: supply reduction, demand reduction and harm reduction.

4.1   Supply reduction approaches

Supply-side interventions, those principally concerned with curtailing production and increasing interdiction, are based on the assumption that "disrupted markets will be less able to supply customer demand for their product and therefore, the level of drug use and related problems will be diminished" (Brownstein and Taylor, 2007: s52).

However, we still know very little about whether these supply reduction strategies are effective or how they might impact on levels of use, availability and price (or, indeed, how price is related to demand). It is unclear whether higher prices would encourage consumers to alter their consumption levels in the same way they might be expected to in response to added taxation on tobacco and alcohol, for example (May and Hough, 2004: 559), or if some problem users would merely commit more crime to fund the purchase of even more expensive drugs (Strategy Unit, 2003: 101–102). By contrast, traffickers and dealers are able to increase their profit margins to alleviate the effects of increased seizures and/or enforcement action simply by altering purity levels (Matrix Knowledge Group, 2007; Dorn et al., 2003).

In 2003, British Cabinet Office analysts presented senior Cabinet Ministers with their assessment of the considerable challenges posed by attempts to tackle illicit drug markets and trafficking networks (Strategy Unit, 2003: 56). They concluded that:

- "Interventions to reduce production are complex, time-consuming and expensive to achieve. They often result in displacement of production elsewhere.
- Traffickers have adapted effectively to government interventions. They run highly profitable businesses and can withstand temporary shocks to their profitability. Interventions have been short-lived or have had a negligible impact on the retail market.
- Cash is of critical importance to traffickers, but the money laundering business has become increasingly sophisticated and difficult to disrupt.
- The UK drugs market is highly fluid; dealers manipulate purity and alter weights sold to maintain revenue.
- Even if enforcement did successfully increase prices, the evidence for the impact of interventions is not sufficiently strong to prove that this would reduce harm. However, shortages in local availability when they do occur can influence short-term demand and drive users into treatment."

UK SEIZURE RATES

The number of Class A drug seizures in England and Wales doubled between 1996 (18,694) and 2005 (38,605), but as Figure 4.1 illustrates, seizure rates fluctuate from year to year, particularly for cannabis (increasing by 47%, from 77,482 seizures in 2004 to 114,202 in 2005). The trajectory of seizures for Class B and C drugs in 2004 and 2005 is clearly distorted by the reclassification of cannabis on 29 January 2004 from Class B to Class C. Therefore these data are not directly comparable with trends during earlier years (Reed, 2007: 2).

Figure 4.1: The number of seizures for the main drug types, England and Wales, 1996 to 2005
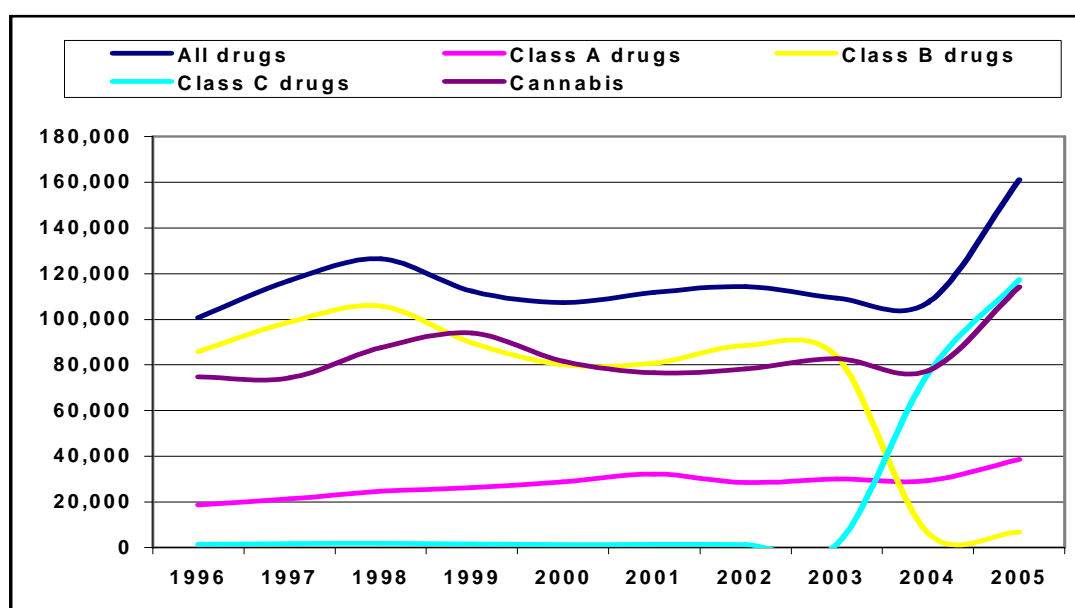
(Data from Reed, 2007)

Police and HM Revenue and Customs made over 160,000 drug seizures in England and Wales during 2005. While this represents a 50 per cent increase in seizures compared with 2004, at least some of the increase can be attributed to the introduction of cannabis warnings from 1 April 2004 (cautions for cannabis possession fell from 37,738 in 2004/05 to 27,570 in 2005/06, while the use of formal warnings increased from 39,256 in 2004/05 to 63,331 in 2005/06) (ibid.: 1). This development is likely to have contributed to increased cannabis seizures during 2005 as police may have been more likely to issue formal warnings for possession offences (in line with ACPO guidance) than to act informally or to take no action, as had sometimes been the case (May et al., 2007a: 33). The increased detection of cannabis 'farms' – around 2,000 of which were raided in England and Wales during 2007 (ACPO, 2008) – will also have contributed to this increase.

The majority of the illicit drug seizures during 2005 were made by local police forces (96%) and involved small quantities of drugs. Most seizures of heroin (74%), crack (70%) and cocaine (61%) were less than one gram in weight. In total, 3.8 tonnes of

cocaine, 1.9 tonnes of heroin and 0.05 tonnes (50 kilograms) of crack were seized in 2005. Officials also seized 2.9 million doses of ecstasy. Using figures for 2003/04, the market share of heroin and cocaine (including crack) seized was estimated by Pudney and colleagues to be 12 and 9 per cent respectively, as illustrated in Figure 4.2 (Pudney et al., 2006: 83).[12]

Figure 4.2: Approximate UK seizure rates (amount seized as a proportion of estimated market size)
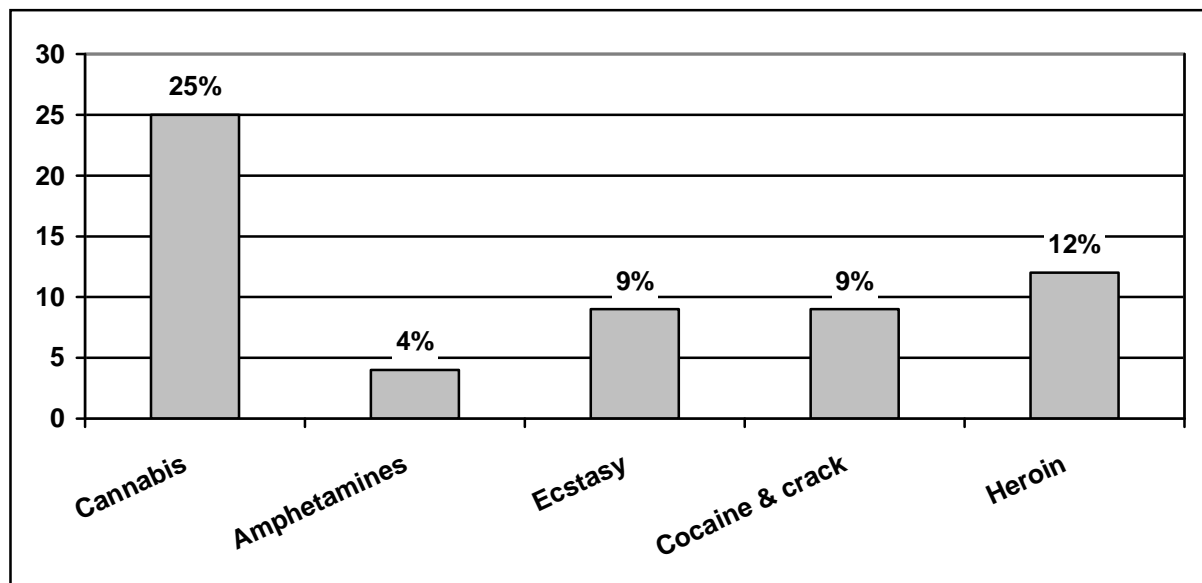
(Data from Pudney et al., 2006: 83)

Cabinet Office analysts had previously suggested that sustained seizure rates of between 60 and 80 per cent would be required to put major traffickers out of business (Strategy Unit, 2003: 73). Seizure rates on this scale have never been achieved, and both attaining and sustaining them would have major logistical and resource implications for law enforcement agencies. This has led to increased uncertainty about the extent to which drug markets and distribution networks can be controlled effectively primarily through enforcement of the criminal law (MacCoun and Reuter, 2001; Roberts et al., 2004; May and Hough, 2004; Rolles et al., 2006; Reuter and Stevens, 2007).

EVIDENCE FOR THE EFFECTIVENESS OF THE SERIOUS ORGANISED CRIME AGENCY

Although there has been no independent assessment of its work, the Serious Organised Crime Agency's (SOCA) first annual report to Parliament describes involvement in a range of activities resulting in some considerable seizures during

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[12] By contrast, the UNODC claims that more than a quarter (26%) of global heroin output and 42 per cent of cocaine production was intercepted and seized by government officials in 2005 (UNODC, 2007: 8). This would appear to suggest that production greatly exceeds demand.

2006/07 (though, as noted in Chapter 3, such quantitative measures were never intended to be the key means of measuring SOCA's success, given the 'harm reduction' focus outlined in its annual plan). While it is not clear what proportion of these seizures can be attributed to SOCA (see Lashmar, 2007, for a discussion), the report describes details of Class A seizures of cocaine (73 tonnes), heroin (1.5 tonnes), opium (260 kilograms) and ecstasy (4.4 million tablets) in which its activity had been a contributory factor (whether through intelligence or a physical seizure) (SOCA, 2007: 22). Despite these achievements some concerns have been raised in the press about SOCA's approach (Lashmar, 2007), although some of this may be due to a misunderstanding of the new organisational arrangements.

ASSET SEIZURE

In April 2008 the Asset Recovery Agency's (ARA) asset recovering functions were transferred over to SOCA and its remit for the training and development of financial investigators to the National Policing Improvement Agency. This followed a report by the National Audit Office (2007) which, among other things, revealed that having cost £60 million to establish, the ARA had only successfully recovered £8.3 million (and frozen another £16 million in assets) from 52 of the 700 cases it had investigated (Summers, 2007; Hencke, 2007).

However, the ARA's annual report for 2006/07 states that since its inception in 2003 the Agency has frozen assets in 274 cases worth £195 million (Assets Recovery Agency, 2007: 3). This is in contrast to the £17.5 million that has been secured through the Scottish courts: £11.9 million in confiscation orders and £5.6 million in civil recovery orders and cash seizures (The Scottish Government, 2007). Undoubtedly some individuals and criminal organisations will have been affected considerably by these seizures. However, it is not clear what proportion of these confiscated assets were drug-related.[13] Even if most were gained from involvement in the drugs trade the figures would still represent only a small proportion of the estimated value of the UK illicit drug market (£5 billion in 2003/04). Consequently, the overall impact of asset recovery and anti-money laundering operations is considered, by some commentators at least, to be marginal (Harvey, 2005; Sproat, 2007).

As Levi and Reuter note: "most crimes for significant gain generate more funds than their perpetrators can spend in cash in the short term, and storing large sums creates risks from law enforcement and from other criminal predators. In that sense laundering (or at least 'hiding', which has become 'laundering' through legal extension of the concept) is an integral part of the serious crime process" (2006: 292). Anti-money laundering strategies have therefore become a significant component of the war on drugs. Yet Levi and Reuter also observed how there is very little research evidence

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[13] When undertaking a content analysis of 414 cases publicised by the Concerted Inter-agency Finances Action Group (which was launched in 2002 as a non-statutory, multi-agency group to coordinate the work of all participants in asset recovery work) between 2003 and 2006, Sproat calculated that 37 per cent involved illegal drugs (2007: 182).

"either on the phenomenon of money laundering or on the controls that deal with it" and "no systematic studies of how criminal offenders turn their incomes into usable assets or of how AML [anti-money laundering] controls affect this" (ibid.: 294). Indeed, their recent review on the subject concluded that:

> The [anti-money laundering] regime does facilitate investigation and prosecution of some criminal participants who would otherwise evade justice, but fewer than expected and hoped for by advocates of 'follow the money' methods. It also permits the readier recovery of funds from core criminals and from financial intermediaries and their transfer to victims and law enforcement agencies. However, although this may make communities feel better, the volume is slight compared with total income or even plausible profits from crime. (Ibid.: 294)

Furthermore, they suggest that "the extent to which this has incapacitated crime networks, reduced the variety of their offending, or reduced the scale of their growth as 'criminal organisations' remains unknown and largely unanalysed" (ibid.: 360). They highlight a number of reasons as to why this might be the case: the fact that enforcement has historically been given less policy attention than the laws and regulations themselves; and that those involved in such activities are only exposed to a modest risk in terms of being detected, apprehended and convicted. For example, an earlier review of suspicion-based reporting in the UK found that the proportion of such reports that led to prosecutions or conviction-based asset recovery was less than 1 per cent (Gold and Levi, 1994).

A suspicious activity report (SAR) is "a piece of information which alerts law enforcement that certain customer activity is in some way suspicious and might indicate money laundering or terrorist financing" (Fleming, 2005: v). In relation to tackling drug trafficking, SARs have existed in one form or another in the UK since the late 1980s, but have only been independently scrutinised in any detail during recent years. These assessments have tended to identify shortcomings in relation to: take-up by law enforcement agencies; communication between stakeholders; roles and responsibilities; processes and procedures; and ownership of, and accountability for, the entire SAR regime (KPMG, 2003; HMIC, 2004; Fleming, 2005). One of the most comprehensive UK reviews (Fleming, 2005) has considered the use and management of SARs by law enforcement agencies (which it concluded were underutilised, despite some important successes). The review identified existing gaps and proposed actions to bridge them in the form of 15 recommendations. Many of these (and other new) recommendations have also been endorsed and proposed by the subsequent Lander Review (2006). A number of these recommendations are currently being incorporated into the work of SOCA.

Nevertheless, more recent research involving dealers at different levels of the market suggests that asset recovery is perceived as a threat by at least some of those involved in the drugs trade: increasing the perceived risk of having one's goods seized may therefore act as a deterrent (Matrix Knowledge Group, 2007: vii). Sproat notes that enforcement action of this sort can impact on the way in which dealers operate by increasing the risks and costs for them; for example, by having to employ either "a

relatively large number of socially unimportant people to launder money in small amounts ('smurfing'), or a few financially important people to use their specialist skills to avoid the vigilance of gatekeepers" (2007: 174). Such enforcement measures can, however, serve to increase the long-term "costs of doing business" (Dorn et al., 2003: 358).

The current UK drug strategy also proposes to increase the scale of assets seized from drug dealers and to make these seizures more visible to local communities through effective local communication strategies (HM Government, 2008a). The intention is to increase the risks to dealers, disrupt their supply networks and ensure that communities see tangible benefits from enforcement action. Even if the evidence is weak, harnessing the local effects of asset confiscation on potential role models for young people is likely to be an important policy issue.

REGIONAL LEVEL ENFORCEMENT

Regional level enforcement action can certainly have some success, too. For example, during the course of Operation Crackdown in 2005 (a three-month joint enforcement campaign by 32 police forces in England and Wales to close crack houses, disrupt local drug markets, seize illegal guns and arrest dealers), it was reported that over 200 kilograms of heroin and cocaine and over 86,000 ecstasy tablets had been seized. A total of 1,471 drug dealers were arrested and charged, 170 crack houses closed down, and £3.2 million in cash assets seized (RSA, 2007: 9). However, unlike similar initiatives in the past, there had been no independent assessment of the impact of these activities on the availability, price and purity of illicit drugs, or on broader harm reduction outcomes.

When the Home Office had earlier allocated £9 million for this kind of sustained enforcement operation back in 2000, research into the impact of one of the earliest forms of Operation Crackdown in London (for which the Metropolitan Police received £800,000 to run the initiative) found that despite the coordinated and intensive nature of the operation, it had a limited effect on the operation of local drug markets and no significant impact on drug-related crime in four London boroughs (Webster et al., 2001). Related research in the capital also found limited evidence that the operation had impacted on the accessibility, price or quality of heroin, cannabis or crack during this time (Best et al., 2001).

Similarly, police officers interviewed by May et al. (2000: vi) in two English sites "felt that current [enforcement] strategies were having little impact on the activities of either sellers or users and were ineffective at disrupting market suppliers or those who operated above street level". Furthermore, the officers interviewed believed that the local community had little confidence in their ability to arrest dealers and tackle the local market effectively.

The evidence of effectiveness gathered by Mason and Bucke (2002) against open street markets was equally pessimistic. Most of the 15 studies reviewed placed a heavy emphasis on enforcement and a reliance on the police as the single intervention

agency, but with mixed results. Success – which was often difficult to define – tended to be short-lived and there was evidence of displacement.

Research also suggests that dealers often expand their enterprises through chance encounters and contacts. The obvious implication for law enforcement is that there may be considerable scope for making greater use of informants (Matrix Knowledge Group, 2007: vii). The potential and scope for using police sources as a means of disrupting closed distribution systems has previously been noted by May and colleagues (2000) (see also Zhang and Chin, 2003). Nearly all of the police officers they interviewed believed that source-led policing and Dedicated Source Units were more effective and also more cost-effective than conventional surveillance operations as a means of gathering intelligence on market structures. As May and Hough later noted: "understanding insider perspectives on the risk management strategies adopted by different types of drug distribution system are crucially important for pin-pointing the key entry points for law enforcement and surveillance initiatives as well as for estimating the potential costs and benefits associated with particular types of market disruption" (2004: 558). Similar observations were made by Dorn and colleagues (2003).

Inevitably, the ability of the police to mount these operations will be determined by available resources. Pearson and Hobbs (2001: xi) observed that the level of intelligence held by law enforcement agencies could support a fivefold increase in activity against heroin dealing in some areas. Despite the importance of using intelligence to inform and direct police activity (Webster et al., 2001; Coope and Bland, 2004), a senior officer from the Metropolitan Police Drugs Directorate has recently acknowledged that the mechanisms for maintaining these intelligence systems and sharing information between local Borough Command Units are underdeveloped (Richards, 2007). Furthermore, the policing of higher level drug trafficking and distribution offences are afforded a low priority because of the considerable cost involved in mounting such operations. In addition, the limited performance management targets for such work can serve as a disincentive to some senior officers (ibid.).

THE IMPACT OF ENFORCEMENT ON AVAILABILITY, PURITY AND PRICES

Street-level drug purity and price are traditionally used as indicators for levels of supply, the assumption being that if supply is reduced then purity levels will drop and/or prices rise.

To date, it seems that seizures and enforcement efforts have had little adverse effect on the availability, purity and price of illicit drugs in the UK. For example, heroin and crack were viewed as always available to a significant majority (75%) of arrestees who had used those drugs and were questioned in the Arrestee Survey during 2005/06 (Boreham et al., 2007: 10). A recent study exploring the dynamics of heroin markets in three Scottish case study areas (Cyster and Rowe, 2006: 1) found that the availability of heroin was considered to be high and geographically widespread with no respondents to the study reporting any significant problems obtaining heroin, given the multiple contacts and options for purchasing the drug in their local areas.

As previously noted, by altering purity levels traffickers and dealers are adept at increasing their profit margins to alleviate the effects of increased seizures and/or enforcement action (Matrix Knowledge Group, 2007). Official statistics indicate that the average purity of drugs seized by police between 2000 and 2005 had been stable for crack (65% in both years) and heroin (46% in 2000 and 47% in 2005). Over the same period, the purity of amphetamines seized by the police had doubled (from 5% to 11%), for cocaine it fell (from 52% to 43%) (Reed, 2007: summary table 6). There is some evidence to suggest that a two-tier market for powder cocaine has emerged in the UK during recent years at both wholesale and street levels (SOCA, 2008b: 33; Daly, 2007b: 8–9). These data suggest that there is now an expanding market for cheaper, heavily adulterated cocaine among young people and students, for example, and that higher purity cocaine is aimed at more affluent buyers. The amount of active ingredient in ecstasy had also fallen, from 100 milligrams per tablet in 2000 to 54 milligrams in 2007 (SOCA, 2008b: 34).

Average UK street prices have fallen consistently for heroin (from £70 a gram in 2000 to £45 in 2007), cocaine powder (from £65 a gram in 2000 to between £30 and £50 in 2007, depending on purity levels) and ecstasy (from £9 in December 2000 to £3 in 2007) (ibid.: 32–34). Between 2000 and 2004 the average price (per ounce) also fell for skunk (from £145 to £121), cannabis resin (from £85 to £61) and herbal cannabis (from £82 to £72) (Pudney et al., 2006: 63).

The UK data on illicit drug prices are broadly consistent with the experience of most European Union (EU) Member States, Turkey and Norway during this period. Data reported by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA, 2007b) show that drug prices at retail level for the major drug types (cannabis, heroin, cocaine, amphetamine, methamphetamine, ecstasy and LSD) fell consistently between 2000 and 2005 in most of these countries.[14] (In the USA, retail prices for heroin and cocaine have reportedly fallen by between 70 and 80 per cent in recent years in some states (Caulkins and MacCoun, 2003).)

Caulkins and Reuter (1998) have observed that the most striking historical features of drug prices are their high levels and extreme variability over time and place. They argue that a greater emphasis on enforcement would have only a limited impact on efforts to increase the price of illicit drugs. So while there is some evidence to suggest that targeted police enforcement can have a marginal impact on illegal drug activity (including purity and prices) during an intervention, these effects tend to be short-lived and disappear once the intervention is removed or ceases to operate (Mason and Bucke, 2002; Aitken et al., 2002; Cohen et al., 2003; Matrix Knowledge Group, 2007; Cyster and Rowe, 2006; Platt, 2007).

As Edmunds and colleagues note, "concepts of dependency or addiction translate into economists' jargon as inelasticity of demand" (1996: 4). They observed that for most

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[14] See indexed trends in EU retail prices for major drug types, adjusted for inflation (2000–2005) at: http://www.emcdda.europa.eu/stats07/pppfig01

forms of illicit drug use (i.e. controlled use) there should be considerable elasticity of demand in response to reductions in supply or price changes. But for drugs of dependency, such as heroin and crack cocaine, there will be greater inelasticity as levels of demand are likely to be less affected by such changes (see Chapter 5 on the Australian 'heroin drought' for an example of this).

This has obvious implications for enforcement-focused interventions, "whose rationale is to add additional costs to the price of illicit goods [because they] will be less successful where elasticity of demand is low" (ibid.: 4). The relative inelasticity of demand among dependent drug users, May and colleagues observe, "means that the markets will be very lucrative, and will adapt to enforcement and transform rather than disappear" (2000: 10). For this reason they argue that it is important to develop parallel strategies that aim to reduce demand – particularly among the smaller number of heavy or dependent users – as well as curtail levels of supply and control price.

One of the more recent contributions to this knowledge drew on data obtained from interviews with 222 convicted drug dealers and traffickers and employed an analytical framework informed by business, economic and social networks perspectives (Matrix Knowledge Group, 2007). This study, which was funded by the Home Office, suggests there is a high and stable demand for illicit drugs across all market levels. Increased competition at all market levels has, at various points in time, contributed to reduced prices. Although there has been an overall decline in prices over time, there can be considerable price variations in different areas of the UK. However, dealers interviewed for this study, at all market levels, again reported being able to maintain their profit margins by passing any fluctuations or increases in purchase price on to their customers or by altering purity levels.

HOW TRAFFICKERS AND DEALERS ADAPT TO SUPPLY ENFORCEMENT ACTIVITY – A RESILIENT MARKET

Cyster and Rowe's study of heroin markets in Scotland concluded that, at best, the response of the police merely contains the size of the illicit market or 'holds the line'; temporarily stagnating the activity and growth within the market. Users and dealers would adapt and alter their method and location of delivery in accordance with the perceived or actual threat of police activity. The police themselves were acutely aware that arresting high-level dealers may affect the supply of drugs to an area temporarily, but that given the nature of the market this void would soon be filled (2006: 3). A similar pattern emerges throughout the UK following even the most resource intensive and successful (in terms of the amount of drugs seized and/or convictions secured) enforcement operations[15] (Daly, 2007a; Platt, 2007). When considering the stages of drug epidemics[16] and the tenacity and resilience of mature drug market structures,

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[15] For example, Operation Wolf in Ipswich.

[16] For Caulkins the notion of a drug epidemic is intended to convey the way in which drug use can be a learned behaviour, transmitted from one person to another. In an epidemic, rates of

Caulkins has observed that supply control programmes may have a unique capacity to disrupt the contagious spread of a new drug, but limited ability to eradicate established markets (such as those for heroin and cannabis) (Caulkins, 2002).

Being able to expand a drug-dealing enterprise seems to be largely dependent upon identifying and developing alternative sources of supply (Matrix Knowledge Group, 2007). Unsurprisingly, those adept at avoiding detection, adapting to changing circumstances and exploiting new opportunities are likely to be more successful. These skills, together with contacts and network formations, are generally considered to be important components of 'successful' criminal careers and organised crime structures (Kleemans and de Poot, 2008). Indeed, Pearson and Hobbs (2001: vii) had previously observed a tendency for some middle-market operatives (i.e. those operating between bulk importation and retail supply levels, linking the two) to establish direct links with wholesalers in mainland Europe and become involved in importation.

Dorn and colleagues have observed how the "shapes of organized crime are largely the result of counter-strategies adopted by criminal organizers in responses to control measures" (1998: 559). They identified two forms of risk to which traffickers are exposed: strategic (to the planner or organiser) and tactical (to the drugs or to persons other than the planner or organiser). While the prospect of asset recovery appears to trouble some dealers, many have described the risk of arrest and imprisonment as either unlikely or as an occupational hazard which did not deter their involvement in the illicit drugs trade (Matrix Knowledge Group, 2007). This is often in stark contrast to the disproportionate risks and rewards experienced by drug transporters, runners and storers. Earlier interviews with drug sellers and users also showed how the police were perceived as posing very little threat, and that many involved in the markets across two case study areas were unconcerned by the risks associated with police enforcement activities (May et al., 2000: vi). Indeed, it seems that many dealers will consider themselves unfortunate to have been caught (Matrix Knowledge Group, 2007: 6). At the same time there is some evidence of complacency and poor decision-making by even experienced and established dealers. Trust is a key factor in deciding who to work with in any market, and trading only with known and trusted associates helps mitigate the serious risks posed by the use of informants (ibid.). These findings are consistent with research by Johnson and colleagues (1986) involving heroin user/dealers in Harlem, New York. They too were adept at avoiding detection, but for all their "entrepreneurial skills" they were nonetheless described as "merely the exploited labourers in the retail drug business".

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initiation (or infection) rise sharply as new users of a drug initiate others. In such a scenario long-term addicts are often socially isolated from new users because they tend to present a rather unappealing picture of the consequences of addiction. In the next stage of an epidemic, initiation declines rapidly as the susceptible population shrinks (e.g. because a particular pool of new users dwindles or because the drug's reputation suffers). The number of dependent users then starts to stabilise and typically begins to decline gradually over time.

Given the minimal entry barriers to the market (most report entering via friends or family already involved in the industry), the limited deterrent effect of law enforcement and the sheer scale of the revenues that can be generated, some have concluded that dealing and distribution networks have considerable scope for growth within the UK (Matrix Knowledge Group, 2007; Lupton et al., 2002). (Similar conclusions were reached by Reuter and Haaga (1989) almost 20 years ago following their exploratory study of the organisation of high level cocaine and marijuana markets in the USA.) These are considered just some of the features that contribute towards making illicit markets so resilient to effective intervention; others include the use of violence to regulate them; the limited legitimate opportunities open to many participants, especially young people; and the impact of family or peer pressure in perpetuating these structures and continued involvement in these markets (May et al., 2005; Bouchard, 2007). (For more discussion on the resilience of communities to drug markets see Section 4.4.)

4.2   Demand reduction strategies

May and Hough note that "a distinction is often made between supply reduction strategies and demand reduction strategies. The former involve enforcement activity designed to disrupt supply, whilst the latter may deploy enforcement or other means to reduce demand" (2004: 559).

The UN General Assembly adopted the Declaration on the Guiding Principles of Demand Reduction in 1998. This in large part reflected the growing acceptance that supply reduction in isolation was an insufficient international response and that demand reduction efforts required far greater prominence (Ghodse, 1999). Prior to this point, the quality and availability of demand reduction activities in the criminal justice systems across the EU, for instance, had been patchy and uneven (Turnbull and Webster, 1998).

In discussing demand reduction strategies, May and Hough (2004: 560) found it useful to follow the public health distinction between primary, secondary and tertiary prevention (sometimes called universal, targeted and indicated prevention). Typically, primary prevention takes the form of education aimed at reducing demand for illicit drugs in the general population. Secondary prevention involves those strategies that target particular groups deemed to be at risk of developing problematic patterns of drug use. These vulnerable groups include: young offenders, excludees, children looked after by local authorities, the homeless and children of parents who misuse drugs (Goulden and Sondhi, 2001). Tertiary prevention involves providing services to people who already have drug problems.

PRIMARY AND SECONDARY PREVENTION

Police officers often take a prominent role in delivering drug education to young people, particularly though school and college visits (ACPO, 2006). In considering the evidence for education-based forms of primary and secondary prevention, Reuter and Stevens note that: "There is little international or UK evidence to suggest that drug education and prevention have had any significant impact on drug use. The international literature consistently indicates that most school-based prevention efforts do little to reduce initiation. Even those programmes that are delivered effectively seem to have very little impact on future drug use" (2007: 10).

TERTIARY PREVENTION

May and colleagues (1999, 2000) have noted that one potentially important demand reduction strategy involves the provision of treatment for those with drug problems. For example, the 2003 Anti-social Behaviour Act calls for procedures to fast-track 'crack house' residents into treatment and to increase awareness of local drug services during police enforcement operations. This involves developing local capacity through the provision of appropriate and timely community drugs education and support services, alongside action to close 'crack houses', as part of a broader strategy to help build community resistance to drug markets (Peters and Walker, 2005). However, limited

local capacity (e.g. treatment options for crack users, methadone prescribing slots for poly-users) and excessive waiting times have in the past consistently undermined the effectiveness of demand reduction strategies (Edmunds et al., 1996; May et al., 2000; Lupton et al., 2002; Parker and Egginton, 2004; Tilley et al., 2004).

A recent thematic review of the evidence by the UKDPC showed that some interventions can be effective in reducing illicit drug use and offending behaviours with some groups (UKDPC, 2008; McSweeney et al., 2008). In terms of identifying the most effective strategies, the strongest evidence emerged for therapeutic communities, criminal justice interventions modelled on the drug court approach (e.g. UK Drug Treatment and Testing Orders; DTTOs) and substitute treatments such as methadone maintenance. Other effective treatments include pharmacotherapies (e.g. heroin, buprenorphine or naltrexone), psychological approaches (e.g. motivational interviewing), 12-step treatments and residential rehabilitation.

As well as drug courts and DTTOs the review concluded that there was reasonable evidence for the effectiveness of a range of criminal justice-based interventions: prison-based therapeutic communities, the RAPt (Rehabilitation for Addicted Prisoners Trust) 12-step abstinence-based programme, and opioid detoxification and methadone maintenance therapy within prisons. There was considered to be mixed UK evidence for Criminal Justice Integrated Teams (those responsible for delivering key elements of the Drug Interventions Programme), provisions for imposing restriction on bail, and the Prolific and other Priority Offender programme. By contrast, there is very little international evidence for the added value of drug testing and the effectiveness of intensive forms of supervision. There is currently no evaluative evidence for the effectiveness of prison-based CARAT (Counselling, Assessment, Referral, Advice and Throughcare) interventions and drug-free wings, community and prison-based programmes founded on cognitive behavioural therapy (e.g. short duration programmes and Addressing Substance Related Offending), conditional cautions, diversion from prosecution schemes (in Scotland) and Intervention Orders.

While there is growing enthusiasm for drug treatment as part of an effective demand reduction strategy, it is important to note that most people fail to complete treatment and some outcomes (like reconviction rates or levels of reintegration) are generally poor. Furthermore, despite the considerable investment and improvements in the UK during recent years, the quality, availability and approach to treatment remains variable and inconsistent. For example, despite evidence demonstrating the effectiveness of residential treatment, such as the British NTORS and DORIS studies, its availability and use remains limited. The evidence gathered as part of this earlier UKDPC review also indicated that these approaches are limited in their capacity to tackle wider social and environmental factors that can undermine an individual's resilience to drug markets and drug use (e.g. by addressing any housing and/or employment needs, and facilitating recovery and reintegration). These factors have previously undermined demand reduction efforts aimed at tackling illicit markets (May et al., 2000; Lupton et al., 2002; Tilley et al., 2004).

ENFORCEMENT AS A DETERRENT TO USE

It is assumed that enforcement efforts can act as a general deterrent, lead to the temporary incapacitation and rehabilitation of users, and increase access (or opportunities for diversion) to treatment (Roberts et al., 2004).

One approach to disrupting local drug markets is to deploy 'inconvenience policing' tactics – where buyers are stopped, searched and, where appropriate, arrested. This can be regarded as a form of demand reduction because of its potential deterrent effect and the opportunities it may present for referral to treatment. However, the evidence suggests that this kind of approach can have unintended negative effects on the behaviour of individual users and on broader community relations. For example, inconsistent police responses can lead some drug users to avoid carrying injecting paraphernalia, thus increasing the potential for the sharing of injecting equipment, which in turn has implications for the transmission of blood-borne viruses. Markets can also rapidly adapt to such tactics – although in the process they may become less intrusive, and thus less irksome for local residents and businesses.

While there may be little evidence to suggest that drug law enforcement has a measurable impact on the availability, price, purity or use of illicit drugs, MacCoun and Reuter (2001) have considered whether and to what extent the predominant enforcement paradigm has contained availability and prevalence of substance use, and whether levels of drug use would increase if current enforcement controls were removed. On this point they observe that: "If cocaine or heroin were to become available to adults generally (i.e. if the relevant drugs laws were relaxed), use and addiction would substantially increase" (ibid.: 10). Clearly this is a complex issue, but the decline (which started around the turn of the century) in the proportion of young people reporting the use of cannabis in England and Wales which has continued following reclassification – from 25 per cent in 2003/04 to 18 per cent in 2007/08 (Jansson et al., 2008: 54) – illustrates how change to drug laws and subsequent enforcement practice does not invariably lead to change in levels of consumption. A review of the international evidence by Reuter and Stevens concluded that drug laws do not have direct effects on the prevalence of drug use (2007: 60-61).

4.3   Reducing drug-related harms

Enforcement activity can be aimed specifically at reducing harm. However, there may also be consequences of enforcement activity that are themselves harmful.

NEGATIVE AND UNINTENDED CONSEQUENCES OF ENFORCEMENT INTERVENTIONS

Following their recent review of UK drug policy, Reuter and Stevens (2007) concluded that law enforcement efforts could have a significant negative impact on the nature and extent of harms associated with drugs by (unintentionally) increasing threats to public health and public safety, and by altering both the behaviour of individual drug users and the stability and operation of drug markets (e.g. by displacing dealers and related activity elsewhere or increasing the incidence of violence as displaced dealers clash with established ones).

As just one example, drugs law enforcement has had a major impact on criminal justice systems and, in particular, prison populations throughout the world (see Roberts et al., 2004, and Bewley-Taylor et al, 2005). In England and Wales during 2003, for example, 110,640 people were convicted or cautioned for drug offences (Mwenda and Kumari, 2005). Most (90%) were possession offences – with cannabis accounting for 70 per cent of these; the remainder (10%) were for dealing offences. Cautions (45%) and fines (26%) were the most common disposals for possession offences, while immediate custody was the most likely sentencing outcome for those convicted for dealing offences (60%). Of the 81,812 people held in prisons in England and Wales during October 2007, 15 per cent (12,400) were there for drugs offences (Ministry of Justice, 2007). These throughputs place increased pressure on an already overstretched criminal justice system.

Reuter and Stevens (2007: 58–59) note that since 1994 both the numbers being sentenced in the UK for 'drug-related' offences and the average length of their sentences have been rising. For the large numbers being cautioned or convicted the imposition of a criminal record has serious implications for future employment prospects. Reuter and Stevens suggest that for those imprisoned, the costs – in terms of loss of liberty, loss of earnings, damage to relationships and family break-up – are likely to be considerable, and they question the efficacy and cost-effectiveness of this approach. (For a broader discussion of the costs and impacts of incarcerating drug offenders, see Bewley-Taylor et al., 2005.) Research has also established the disproportionality of imprisonment rates for drug offences among the urban poor and young ethnic minority males, both in the UK and elsewhere (Reuter and Stevens, 2007; Feilzer and Hood, 2004; Brownsberger, 2000). This, in turn, raises important questions about the enforcement of drugs laws against particular groups and communities (Reuter and Stevens, 2007: 52).

Various state-sponsored agencies have played a role in facilitating and developing production within some source countries, and also in distribution further downstream (see McCoy, 2003, and van Duyne and Levi, 2005, for discussions). In addition, these agencies may have been responsible for further harms, ranging from executions (Lines,

2007) and extrajudicial killings of farmers, dealers and users in countries such as Thailand and Columbia, to the economic and social hardships endured by rural workers in a number of source countries, such as Myanmar (Stevens, 2007: 79). In consumer countries, enforcement activities have also been shown in some instances to have a detrimental effect on human rights, public health, community safety and police–community/user relations (see Barrett et al., 2008, for a discussion).

A three-year study that examined the impact of street-level enforcement on one of Australia's principal heroin markets identified a number of threats to public health and public safety as a result of the geographical, social and illicit drug displacement following police enforcement crackdowns (Maher and Dixon, 1999). An increase in the incidence of hepatitis C among injecting drug users in Sydney has in the past also been attributed, at least in part, to police enforcement crackdowns (Dixon and Maher, 2005). Recent research exploring the impact of a five-month crackdown in New York City studied the ability of 40 illicit drug injectors to practice harm reduction. The research found that frequent police searches and surveillance of public places discouraged the users from carrying sterile injecting equipment and made it difficult for them to inject safely (Cooper et al., 2005; see also Wood et al., 2004). In the UK, a study examining the nature, processes and outcomes of routine interactions between the police and problem drug users has reported that, in their desire to avoid certain times and places linked to high levels of policing and surveillance, users would often use drugs in secluded places shortly after purchasing them. This could potentially increase levels of drug-related harm in a number of ways: for example, in the event of an overdose, the user is unlikely to be found quickly in such a location. Inconsistent police responses also led some drug users to avoid carrying injecting paraphernalia, thus increasing the potential for the sharing of injecting equipment, which in turn has implications for the transmission of blood-borne viruses (Lister et al., 2008).

In examining the evidence, Brownstein and Taylor (2007) highlight numerous examples from the US literature to illustrate how enforcement action can unintentionally alter the stability and operation of drug markets: for example, by encouraging adaptation as open markets become closed (Smith et al., 1992; cf. May et al., 2000), by displacing dealers and related activity elsewhere (Barnett, 1988), or by increasing the incidence of violence as displaced dealers clash with established ones (Benson et al., 1992).

ENFORCEMENT ACTIVITY AIMED AT REDUCING HARMS

The police can and are actively involved in the planning, coordination and implementation of a range of activities that fall within the scope of harm minimisation. In doing so they can fulfil a number of important roles within a broader harm reduction approach by forming partnerships with treatment and other interventions, helping to constrain supply, and by exploiting the inherent adaptability of drug markets, thus forcing some of them to adapt into less harmful forms (e.g. from open to closed markets). Nevertheless, there is a dearth of research on the key elements and processes that contribute towards producing these positive outcomes (including the cost-effectiveness of different policing activities and strategies).

Dixon and Coffin (1999: 483) acknowledge that policing and harm reduction, even when the latter is official policy, can be difficult to reconcile. But they also concede that if drug use and addiction are recognised primarily as health issues, then there is scope for cooperation. Indeed, Caulkins has argued that "the mere fact that law enforcement can be pursued in harm increasing ways does not mean that it cannot be pursued in harm reducing ways" (2002: 9). He identified five specific (and important) roles that law enforcement agencies can play within a broader harm reduction approach. These are:

1. forming partnerships with treatment and other interventions (e.g. drug courts, treatment in prisons or making compliance with treatment a condition of probation/parole);
2. constraining supply (e.g. the contribution of enforcement efforts to the Australian 'heroin drought' described in Chapter 5);
3. time-focused intervention early in an epidemic (e.g. controlling the early stages of a drug epidemic by helping to prevent initiation);
4. reducing control costs and associated harms (e.g. by targeting known dealers identified by the local community as causing the greatest levels of harm); and
5. exploiting the inherent adaptability of drug markets (e.g. by forcing open markets to become closed or by displacing them to less populated areas).

Edmunds and colleagues (1996) had previously acknowledged during their case studies of six London street-level dealing sites that experienced users would adapt their behaviour in response to policing and that dependent users would simply go to greater lengths to avoid detection. However, they argued that dispersal of the market – rather than its elimination – or its adaptation from an open to a closed one was a justifiable outcome for a number of reasons:

- There is unlikely to be 100 per cent displacement.
- Dispersal may reduce the 'collateral damage' suffered by communities.
- The market's reputation is likely to suffer as a result.

As mentioned in Chapter 2, May and colleagues (1999: vi–vii) have also observed how sex markets can play a significant role in the development of drug markets (and vice versa). So great are the levels of harm that can flow from integrated sex and drug markets – including the health risks for drug-dependent sex workers, their clients and their partners – that a coordinated response is required. This, they say, should incorporate:

- primary and secondary prevention (which seeks to prevent the involvement of at-risk groups in sex work);
- tertiary prevention (support aimed at those already involved in sex work); and
- harm reduction (which looks to minimise the individual and social harms arising from integrated sex and drug markets).

In proposing this framework, May and colleagues stress that all three elements of this strategy require effective joint working between health and criminal justice agencies in order to identify at-risk individuals, facilitate referrals to appropriate services and

design strategies that reduce the supply and demand of sexual services in socially harmful settings (e.g. illicit drug markets).

Spooner and colleagues (2004) sought to increase the Australian police's understanding – at policy, planning and operational levels – of the ways in which they could contribute to the outcomes of their national drug strategy. This included objectives to prevent and minimise the impact of drug overdoses and to encourage safer illicit drug-using behaviours. The study included a review of the international evidence to identify best policing practice in meeting these objectives. They concluded that the police are actively involved in the planning, coordination and implementation of a range of activities that fall within the scope of harm minimisation. This work, they suggested, could be further enhanced by the use of different workforce measures, such as policies, protocols, resources, training, monitoring and management support. However, Spooner and colleagues also identified the dearth of research on the key elements and processes that contribute towards producing these positive outcomes (including the cost-effectiveness of police activities and strategies).

Bridge (2007) has discussed how efforts to reduce both the supply and demand for illicit drugs can be consistent with a broader harm reduction strategy. He notes that enforcement agencies such as the police often have contact with drug users when they are at their most vulnerable and therefore they have a key role to play in promoting harm reduction. That the International Harm Reduction Association has identified the 50 best examples of studies examining police involvement in harm reduction is a testament to this. Coope and Bland (2004), for example, have suggested that law enforcement agencies can incorporate harm reduction principles into their day-to-day operations by:

- not targeting clients in the vicinity of drugs services;
- limiting attendance at overdose to exceptional circumstances; and
- systematically collecting and monitoring local data on drug-related harm as well as enforcement-related outcomes as a way of identifying and responding to any counterproductive effects of enforcement activity.

4.4   Developing multi-agency community responses

Historically, conventional enforcement initiatives by the police acting in isolation have been the most common response to dealing with the problems created by local drug markets in much of the UK (Coope and Bland, 2004). By contrast, the use of multi-agency initiatives has tended to be very limited. A recent meta-analytic review by Mazerolle and colleagues (2007) considered 155 studies (again with a US bias) which evaluated 132 separate interventions initiated, managed and/or implemented by the police to reduce or prevent illicit drug use, drug dealing and associated problems. The results showed that geographically targeted problem-oriented policing interventions aimed at drug hotspots, and involving partnerships between the police and wider community groups/agencies, appeared to be more effective at reducing both drug and non-drug problems than conventional law enforcement-only approaches (e.g. geographically unfocused preventive patrols). The authors concluded that street-level drug law enforcement efforts should focus on forging productive partnerships with local residents and community groups in order to identify and tackle more effectively the causes of street-level drug market problems.

The government White Paper *Tackling Drugs Together* (HM Government, 1995) was one of the earliest official endorsements of the view that tackling drug markets effectively requires cooperation between a range of agencies, including the police and local communities. Building and maintaining good links with the local community is now accepted as a prerequisite if multi-agency action to tackle supply and demand is to be effective (May et al., 2000, 2005; Cyster and Rowe, 2006; Parker and Egginton, 2004). This kind of approach can have numerous potential benefits. High visibility community policing, for example, can serve to engage citizens in local initiatives and instil confidence in the community that 'something is being done'. This should form part of a broader strategy to reduce the scale and impact of local markets, while the development of accessible, timely and responsive drug treatment provision can help to tackle demand and minimise the level and extent of collateral harm.

DEVELOPING COMMUNITY RESPONSES — THE EVIDENCE BASE

Webster and Hough (2006) have recently reviewed the evidence on effective practice aimed at engaging communities in enforcement efforts against drug dealing. Despite the extensive US research literature on this issue, they found very little evidence to guide effective practice in this area and were unable to locate any British research examining the impact of community action against drugs. This dearth of research was largely attributed to the lack of a clear conceptual framework for how markets and interventions against them work, and to problems associated with accurately measuring outcomes and employing experimental research designs in this particular field (see also Mason and Bucke, 2002).

They were, however, encouraged by the evidence from many US studies, which suggested that community involvement was likely to be an essential element in

initiatives which succeeded in reducing the negative effects of drug market activity – even in those areas suffering from acute levels of deprivation. As May and colleagues note, it is important to engage with communities "to establish common concerns which outside services can act upon quickly. If ... communities start to see improvements in their area, local residents and the business community are far more likely to want to engage with the council, police and other local services" (2007b: 51). At the same time it is important to establish realistic goals and expectations. Change may not happen straight away or be immediately apparent. This kind of engagement should also be an ongoing process.

Developing strategies that galvanise and sustain the involvement of local residents and enhance the capacity of drug treatment services to ensure they are responsive to the needs of the local drug-using population emerge as critical success factors. However, drug markets are intractable social problems, and in some cases even the most successful community projects may only manage to displace markets to neighbouring areas, and even then for only a limited period of time. For instance, a randomised study from the USA demonstrated how improved liaison and cooperation between the police and landlords to improve the management of properties assisted in solving local community drug-related crime problems. However, the impact of these arrangements eroded after six months (Eck and Wartell, 1999).

RESPONDING TO LOCAL CIRCUMSTANCES, NEEDS AND PRIORITIES

The police can certainly be responsive to community demands but, perhaps unsurprisingly, are more likely to channel their resources towards places and areas where local residents clearly vocalise their desire for police action (Mazerolle et al., 2004). It seems that unless or until a drug market becomes a source of concern for a local community, it is very unlikely to become a policing priority. A recent case study involving drug dealing in an English inner city centre (May et al., 2007b) underlined the importance of tackling local markets energetically and on several fronts. In this instance the authors proposed three interrelated approaches to undermine the local drug market and bolster community resilience. This included a focus on:

- young people and the youth justice system (e.g. developing strategies that promote the diversion of young people away from the formal youth justice system, particularly for relatively minor offences such as cannabis possession, and using existing support networks within local communities to develop positive role model and/or mentoring schemes);
- effective multi-agency work (e.g. ensuring existing local services are adequately resourced and coordinated, and are appropriate, accessible and targeted to the needs of the community – particularly to young people at risk of becoming involved in selling and to adults wanting to exit drug selling); and
- community capacity building (e.g. tackling apathy on the part the community through open and meaningful consultation about what can realistically be achieved and addressing any fears around reprisals which make it difficult to secure community cooperation in tackling local markets). (Ibid.: 47–51)

Similarly, work to assess the impact of measures contained within the 2003 Anti-social Behaviour Act to close 'crack houses' has also identified the need for enhanced partnership working to support vulnerable residents affected by crack houses and their closure (Peters and Walker, 2005). This involves engaging local communities in order to identify the nature of social care provision required in order to meet local treatment needs, and working with Registered Social Landlords on the appropriate use and implementation of these new powers.

The available evidence suggests that drug law enforcement efforts should focus on forging productive partnerships with local residents and community groups in order to identify and tackle more effectively the causes and consequences of street-level drug market problems (Mason and Bucke, 2002; Peters and Walker, 2005; Mazerolle et al., 2007). This process can be facilitated using a number of established conceptual frameworks, such as SARA (Forrest et al., 2005). This involves scanning the issues that need to be addressed, analysing them and their causes, working out a response to the problem, and assessing the effectiveness of that intervention. However, as the experience of initiatives such as the Derbyshire Drug Market Project have shown (see Chapter 5), implementing and delivering even well-resourced and finely planned operations will remain a considerable challenge.

Mason and Bucke (2002) reviewed 15 studies (14 from the USA and one from Australia) describing evaluations of interventions that sought to disrupt drug-dealing activity from both residential and commercial properties, as well as open and street-based markets. They found that the most effective strategies for tackling drug dealing from residential and commercial properties shared the following characteristics:

- an emphasis on improving the built environment;
- multi-agency working involving the police and other stakeholders (e.g. housing management teams);
- not relying solely on police crackdowns; and
- the use of civil law and related interventions (e.g. nuisance abatement strategies in the USA or anti-social behaviour orders in the UK) rather than criminal law.

Harocopos and Hough (2005: 37–42) identified a number of ways in which enforcement and demand reduction strategies can be combined in a complementary way in order to respond more effectively to drug dealing in open-air markets. In doing so they describe how the process is intended to work and the conditions under which it is likely to work best, and identify other factors that will need to be considered before implementing a response. They underline the importance of tailoring responses to local circumstances based on reliable analysis of available data and stress that law enforcement responses alone are unlikely to be effective at reducing or solving problems related to drug market activity.

The responses available include the following:

- Drug law enforcement: the use of high-visibility policing, intensive enforcement, arresting sellers in 'test purchase' operations, using intelligence-led investigative work, confiscating drugs, arresting drug buyers or warning potential buyers.
- Community responses: encouraging community action, operating a telephone hotline, encouraging place managers to be more proactive in discouraging buying and selling, notifying landlords of drug-related problems at their properties, interventions related to sex work, pursuing civil options such as anti-social behaviour orders or seizing assets related to drug dealing.
- Modifying the physical environment: reclaiming public areas, installing CCTV, altering access routes and restricting parking, removing pay phones or securing vacant buildings.
- Demand reduction: improving the range and quality of education, prevention and local drug treatment provision.

MAPPING LOCAL MARKETS AND MEASURING INTERVENTION EFFECTS

May and colleagues (2005: 1) have commented that effective strategies for tackling local drug markets have to be built on a rounded understanding of the relationships between the markets and the communities in which they exist. The ambiguous and complex relationship that some – mainly deprived – communities have with their illicit economies needs to be fully recognised and understood before effective responses can be developed (ibid.: ix; see also Lupton et al., 2002). Following their review of the evidence, Mason and Bucke (2002) stressed that interventionists and evaluators need to better understand the nature of the problem in an area before an intervention is designed and implemented (and before an evaluation specifically designed to measure the effectiveness of that intervention can be appropriately devised).

In order to design a more effective response and better predict the outcome of any intervention or action, Harocopos and Hough (2005) suggest that a number of questions need to be answered. The answers to those questions can then be used as the basis for analysis to inform decisions about the most appropriate responses. The key questions include:

- What is the nature of the drug market (e.g. type of market, drugs available)?
- Who are the market participants (buyers and sellers)?
- What is currently or has previously been tried?
- What effect does the drug market have on the local community?
- What is the nature and extent of local drug treatment provision?
- How might we measure the effectiveness of an intervention?
- How can we monitor the nature and extent of any displacement that might occur as a result of the intervention?

COMMUNITY RESILIENCE TO DRUG MARKETS

A key concern that politicians and policy makers have preoccupied themselves with in responding to the challenges that illicit drug markets present is how to strengthen

communities in order to make them more resistant to the negative effects of drugs. In terms of tackling local drug markets it is important to develop strategies and responses that address the range of factors associated with why local people, including victims and witnesses, are often reluctant to involve themselves in these interventions (e.g. because of apathy, intimidation or fear of reprisals). This also requires an understanding of the processes through which some people become involved in patterns of delinquency such as drug use and drug selling, and, just as importantly, why others do not. Recent work by Dillon and colleagues (2007) identified three interrelated processes that need to be developed and maintained in order to sustain resilience to illicit drug use. These were:

- general resilience to drugs: forming a view that drugs are harmful and not something one wants to engage in;
- self-regulation: seeing drugs as being incompatible with one's future goals and ambitions – an obvious problem for marginalised or excluded young people; and
- self-efficacy: having the social skills and assertiveness to develop and apply the above in one's day-to-day interaction with peers.

Increasing resilience: are there causes for concern?

Low parental monitoring, poor neighbourhood conditions, limited job opportunities, parental substance misuse and high levels of peer group deviance: these are among the most significant factors likely to increase the risks for involvement in drug dealing according to recent US research (Little and Steinburg, 2006). In these cultural and environmental contexts it seems that drug trafficking and dealing can come to be perceived as 'normal' and mundane aspects of everyday life, to the extent that local populations become desensitised to their presence (May et al., 2005; Campbell, 2005). Friedman and colleagues have concluded that "in spite of policies based on imprisoning and stigmatising drug dealers and drug users, both drug dealing and non-hostile views towards it remain fairly prevalent among young adults" in some communities (2003: 261). They propose a range of policies to reduce the allure of a 'career' in the drugs trade and to weaken any tolerance of drug markets within communities: creating sustainable employment opportunities for young people and reducing poverty, social injustice and racial discrimination. For example, it seems that even modest steps to improve the employment opportunities available to young men in the USA can have significant effects on reducing drug dealing in the poorest of neighbourhoods (Ihlanfeldt, 2007, quoted in Reuter and Stevens, 2007: 63).

While the proportion of adults (aged 16 to 59 years) in England and Wales reporting any drug use during the previous year has fallen since 1995 (by 1.8%) and the use of Class A drugs has remained stable (increasing by 0.3%), the use of powder cocaine has increased significantly during this period (by 1.7%). However, this may be the result of a shift from amphetamine use (Class B), which fell by 2.2 per cent during this time, to powder cocaine on the part of 'recreational' users (Jansson et al., 2008: 53).

In addition, recent UK indicators do not bode well for attempts to increase resilience to illicit drugs by addressing the range of interrelated factors noted above. The ability to strengthen family and community resilience will almost certainly have been

undermined by growing levels of inequality in wealth and poverty (Dorling et al., 2007). This assertion is supported a separate report by the Joseph Rowntree Foundation, which concludes that the strategy against poverty and social exclusion pursued since the late 1990s is now largely "exhausted", with there being no measurable progress in reducing child poverty in recent years and the unemployment rate among the under-25s rising since 2004 (Palmer et al., 2007). Efforts to create more opportunities for young people and improve their well-being were dealt a blow following the publication of a UNICEF (2007) report which placed the UK at the bottom of a league table for child well-being across 21 industrialised countries. (Similar concerns were raised by the UK's four Children's Commissioners in their more recent report to the United Nations Committee on the Rights of the Child.) There are also calls to monitor more closely the social impacts of migration and levels of community cohesion for signs of emerging divisions between ethnic groups (CRE, 2007). In addition, a recent report by the Department for Communities and Local Government highlighted the urgent need to raise the aspirations and attainment of young black males. Its report noted that media coverage linking black boys and men with drugs, guns and gangs has had a detrimental effect on aspirations, and stressed the importance of strong, positive adult role models (DCLG, 2007). (The utility of a positive role model scheme was also raised in a study of inner city drug markets (May et al., 2007b).) These are all important developments. As Hough warns, strains between social groups, levels of poverty and the size of income disparities "ought to go hand in hand with high levels of drug and alcohol consumption amongst the 'have nots' in very unequal societies" (2008: 15).

May and colleagues (2005: ix) argue that in trying to develop communities' capacity to take action against drug markets, it is important to appreciate the limited or constrained choices that are open to many residents. The constraints on their capacity for action are associated with:

- the use of violence in drug markets;
- the limited legitimate opportunities open to many residents, especially young people; and
- the impact of family or peer pressure on young people.

Responsibility for developing this capacity needs to be allocated across a number of agencies, and coordinated strategies need to be devised which prevent young people from becoming involved in illicit drug markets in the first place and assist those looking to leave. More broadly, Webster and Hough (2006) also highlighted the need for more rigorous evaluation to be integrated into government-funded work aimed at engaging communities to tackle drug markets and drug-related crime, so that any lessons about effective approaches can be applied elsewhere.

5.   Case studies

CASE STUDY ONE: COMMUNITIES AGAINST DRUGS

> Qualitative data support the notion that targeted funding and interventions can have some success in disrupting local drug markets by providing an impetus for sustained, coordinated action aimed at reducing drug-related crime and strengthening community resilience against drugs. However, as the experience of the Communities Against Drugs initiative demonstrated, there can been difficulties in measuring and demonstrating their impact against a range of quantitative outcomes and targets.

In 2001 the Communities Against Drugs (CAD) initiative was launched in an effort to help communities mobilise against drugs. A total of £220 million was allocated to CAD over three years (£50 million in year one, £70 million during year two and £100 million in year three) and distributed via 376 Crime and Disorder Reduction Partnerships to disrupt and tackle local drug markets. The Building Safer Communities Fund has since superseded CAD. Subject to performance, the Government had pledged at least the same level of funding for 2004/05 and 2005/06 (Home Office, 2003).

Information from a rapid review involving six sites in England offered a qualitative assessment of the impact of CAD based upon the perceptions of those delivering the intervention in these areas (Matrix Research and Consultancy, 2004). While there were no prescriptive conditions as to how this funding was to be spent, there was an expectation that any approaches would be community specific and responsive to local need. It was envisaged that the projects would utilise and develop existing local groups and structures to develop a multi-agency holistic approach to tackling local substance misuse issues. They were intended to supplement and complement mainstream local service delivery. Many CAD projects shared the following elements:

- recruitment of 'facilitators' (e.g. tenancy support, sports diversion and youth outreach workers);
- enforcement action (e.g. covert and overt police operations);
- situational prevention (e.g. environmental and public space redesign);
- primary prevention (e.g. the provision of information and education);
- promotion of treatment (e.g. refining referral, assessment and outreach processes);
- Community development (e.g. facilitating community input into established groups).

On a positive note, CAD funding was considered invaluable by stakeholders to local communities and offered a genuine opportunity to mount sustained enforcement action against drugs activity. Most stakeholders were therefore positive about the impact of CAD in meeting its three national objectives (disrupting drug markets, reducing drug-

related crime and strengthening community action against drugs) and identified a number of additional benefits:

- strengthening local partnerships and communication;
- raising awareness of drugs at the local level;
- improving local environments; and
- enhancing public confidence that action was being taken in relation to drug issues.

While the establishment of CAD was considered well-intentioned, there was insufficient attention to issues relating to programme development and implementation and the targets involved were considered challenging. Aspects of the initiative were also confusing for many stakeholders. In addition there were serious difficulties in measuring and demonstrating the impact of the CAD programme by developing meaningful outcomes and targets.

CASE STUDY TWO: THE AUSTRALIAN 'HEROIN DROUGHT'

> This case study illustrates how markets and networks respond to enforcement, supply and demand reduction activities and demonstrates some of the unintended adverse consequences that can occur as a result of disrupting particular drug markets.

Towards the end of 2000, heroin users in Sydney and other large cities in Australia began reporting sudden and significant reductions in the availability of heroin (Weatherburn et al., 2003). The causes and explanations of these events have been the source of considerable debate and enquiry since then; so too has the role played by supply reduction strategies as a catalyst for what came to be known as the Australian 'heroin drought' and the conclusions that can be derived from this experience.

Some have suggested that the market merely corrected itself following a heroin 'glut', and that the heroin shortage represented a natural correction following a long period of growth and then gradual decline in the heroin market (Dietze and Fitzgerald, 2002). Other commentators suggested that the Australian situation may have been compounded by a range of other factors besides law enforcement. For example, it has been noted that a large seizure of heroin in 1998 (440 kilograms) had no comparable impact on availability. In addition, adverse weather conditions and a failure of crops in producer countries, as well as the diversion of shipments destined for Australia to China to meet growing demand there, may have all been important factors limiting the availability of heroin to the Australian market during this period (Roberts et al., 2004).

Degenhardt and colleagues (2005c) concluded that the Australian heroin shortage in 2001 occurred because of a combination of factors. These included the increased effectiveness of law enforcement efforts to disrupt networks bringing large shipments of heroin from traditional source countries, and decreased capacity or willingness of major traffickers to continue delivering large-scale shipments to Australia. The latter arose following a combination of low profits (the heroin market had grown rapidly in the late 1990s, leading to increased purity and falling prices of heroin around the

country), increased success of law enforcement and reduced supplies from the 'Golden Triangle' (four countries of South East Asia: Myanmar (Burma), Laos, Vietnam and Thailand).

Reuter and Stevens have suggested that the effects of the Australian drought may have been further mediated by "its geographical isolation, a relatively small heroin market that had been flooded in the late 1990s, a limited cocaine market and a well-developed treatment system" (2007: 65).

The general consensus, however, appears to be that the Australian heroin shortage was caused, at least in part, by drug law enforcement following an interception of 606 kilogram of heroin in 2000, during which a major trafficking syndicate was disrupted. By the end of 2000, it seemed that throughout Australia heroin-related deaths had fallen, arrests were in decline, heroin was more expensive to buy (having increased from A$40 to A$300 a gram), harder to obtain and of poorer quality (Roberts et al., 2004). These developments also appeared to have had modest effects upon treatment entry and compliance with drug treatment (Degenhardt et al., 2005a).

But the picture varied slightly across different states and territories. In New South Wales (NSW), Weatherburn and colleagues (2003) observed an increase in the price of heroin, while purity, consumption and expenditure decreased as a result of the shortage. The fall in overall heroin use was accompanied by a significant reduction in the rate of overdose in NSW. However, the health benefits associated with the reduction in overdose may have been partially offset by an increase in use of other drugs (mainly cocaine and amphetamines) following the onset of the heroin shortage. There did not appear to have been any enduring impact on crime rates as a result of the heroin drought in NSW, according to Weatherburn's research. This finding was at odds with the conclusion reached by Degenhardt and colleagues, who reported that NSW had experienced:

> a sustained decrease in theft offences but a temporary increase in robbery offences during the peak period of reduced availability. This appeared to represent a shift in the criminal behaviour of users remaining in the market and was associated with changes in drug-use patterns. Although the motivation behind the offending behaviour remained the same over time, cocaine use was associated with more violent crime. (Degenhardt et al., 2005b: 2)

Across the Australian Capital Territory (ACT), Smithson and colleagues (2004) reported modelled a reduction in heroin purity during the shortage which led to a large decline in heroin-related ambulance callouts and an increase in admissions to methadone treatment programmes. In contrast to NSW, there was little evidence of an increase in negative outcomes due to heroin users switching to other drugs. A reduction in the purity of heroin was also predictive of declines in robbery and burglary rates but not in theft.

It transpired that this disruption to Australia's heroin supply and its impact were short-lived: by 2003 heroin prices had again stabilised and heroin was considered 'easy' to

obtain (Roberts et al., 2004). Based on the reduced supply of heroin experienced in Australia at the turn of the century, Degenhardt and colleagues suggest that this episode serves as a useful example of how "combining initiatives that aim to reduce supply, demand and harm can substantially reduce the harmful effects of injecting heroin use, and minimise the harms that result when some users switch to other drug use. Having said that, there was evidence that the shifts were difficult for treatment and harm reduction services to respond to quickly" (2007: 9). Weatherburn and colleagues (2003) concluded that the experience illustrates how supply reduction strategies have an important part to play in harm reduction; however, the proponents of such strategies need to be mindful of the adverse consequences that might flow from successfully disrupting the market for a particular illegal drug.

Since the heroin shortage there have been further conflicting data on the impact of supply reduction strategies in Australia. For example, Smithson and colleagues (2005) have concluded that large-scale heroin seizures by the Australian Federal Police between 1987 and 2003 could be traced to reduced street-level heroin supplies a year or so later. They suggested their analysis enabled a connection to be made between large-scale heroin seizures by law enforcement agencies and subsequent reductions in street-level supply. This contrasts starkly with the findings from a more recent study exploring the relationship between the price of illicit heroin and purity levels in Australia over a seven-year period (1996–2003). This study concluded that there was no evidence to indicate that enforcement efforts aimed at reducing commercial quantities of illicit drugs were effective, while initiatives aimed at street-level users were deemed ineffective (Prunckun, 2007).

CASE STUDY THREE: THE DERBYSHIRE DRUG MARKET PROJECT

> A study of the Derbyshire Drug Market Project reinforced the notion that local responses should focus on forging productive partnerships with local residents and community groups in order to identify and tackle more effectively problems associated with street-level drug markets. This particular evaluation aptly illustrated why policy makers and commissioners should not underestimate the difficulties of establishing effective inter-agency partnership working arrangements.

An early pioneering example of an approach aimed at delivering effective supply, demand and harm reduction was Operation Welwyn, which was conducted in the King's Cross area of London in the early 1990s. The operation sought to actively engage both the local business and resident communities in tackling local drug markets and related crime and disorder during a period of intensive police enforcement and sustained social and economic regeneration (Lee, 1996). More recently, the Derbyshire Drug Market Project (DDMP) has illustrated some of the challenges of delivering an effective strategy aimed at reducing supply, demand and harm. Operating for three years between 2001 and 2004, this was an ambitious multi-agency initiative that involved the police, drug treatment services, local community stakeholders and professionals, Drug Action Teams and an action research component, all coordinated by a management board. The main strands of the DDMP consisted of:

- police-led enforcement against local dealers;
- immediate access to drug treatment for local problem users; and
- drugs education, prevention and community development to enhance local resistance to drug markets.

The results from the evaluation (Parker and Egginton, 2004) showed that the enforcement element of the project resulted in 200 arrests, 135 convictions and 117 custodial sentences (only one Drug Treatment and Testing Order was made as a result of these arrests). It emerged that many users arrested as part of the operation were already engaged in structured treatment on a voluntary basis at the time of their arrest.

The researchers concluded that it was not possible to disrupt supplies to the market or prevent local users from accessing heroin as a result of the operation. The markets were also able to reconfigure quickly in response to this enforcement action. Despite the large number of arrests the operation did not appear to have an impact on local recorded crime rates.

While there were no adverse health effects reported (e.g. an increase in local overdose rates), the operation did create capacity issues for local treatment and criminal justice agencies because of the increased demands placed upon them – despite the fact that many of the target group were already engaged in treatment. In addition to practical problems such as finding suitable premises, researchers observed how local heroin users expressed a reluctance to engage with treatment services deemed to be working in collaboration with the police. There were also persistent problems securing substitute prescribing slots and commissioning a range of treatment regimes to meet local needs and growing demand.

Although drugs awareness courses were delivered – which were rated positively by those receiving them and constituted low-cost outputs for the project – the operation did not fully deliver its intended community development component. It seems that this particular element of the project was eventually dropped with minimal discussion or debate. This was largely attributed to inappropriate organisational and performance management structures which were not able to monitor or demand improvements in this area. Concerns about the sustainability of such work beyond the life of the project and high staff turnover also hampered effective delivery.

Although less than one-third of the original target number of problem users accessed treatment as a result of the operation, the proportion that did, coupled with the treatment retention rate for this group (60%), is thought to have covered the costs of mounting the operation (over £1.5 million).

The operation was also considered instrumental in developing new knowledge, understanding and estimates for the size of the local drug market. It also helped inform strategic planning and drug service configuration across the area. The evaluators concluded that this ambitious project required sophisticated management, but that the model which had been employed was unable to deliver this. These shortcomings were attributed to both theory (e.g. policy assumptions which

underestimated the difficulties of establishing effective inter-agency partnership working) and implementation (e.g. the adequacy of programme management structures) failure. The authors identified the need for more streamlined and coherent performance and line management structures to successfully deliver a project on this scale in the future. They concluded that similar endeavours should ensure that:

- **Effective strategic and operational management systems are in place.** First, there needs to be sufficient development time built in at the start of a project to integrate different working cultures. A project management board should also be configured at the earliest opportunity with appropriate and experienced personnel to ensure that it operates effectively as a strategic and operational management system. Crucially, protocols and decision-making systems need to be established and implemented at an early stage too, in order to promote effective delivery, accountability, line management, communication and collaboration between strategic partners and commissioned agencies. Procedures should also be implemented to ensure that partner agencies are challenged and performance against targets is regularly reviewed (e.g. by appointing non-executive board members). Accountability for funding and expenditure decisions also needs to be established using a unified system for monitoring expenditure and producing up-to-date accounts.

- **Partnership working and performance are integrated effectively.** Stakeholders reported that the knowledge and understanding they had gained had been extremely beneficial, and the experience had demonstrated that criminal justice and health professionals could work collaboratively while maintaining confidentiality and treating shared information sensitively. This sharing of information and data had helped develop a better knowledge and understanding of local drug problems and led to new information sharing and decision-making systems being implemented locally beyond the life of the project. Yet the evaluators concluded that the DDMP had experienced a degree of tension between partnership and performance. They identified the need for a more unified strategic operation with an established line management structure and one operational budget, and drew comparisons with the Youth Offending Team model as a template for similar initiatives.

- **Expectations about the impact of police enforcement are realistic.** The project illustrated how intelligence on market structures and activity is often partial and that disrupting drug markets is difficult to achieve. They are often displaced, adapt and reconfigure elsewhere. Containment rather than eradication is often the most pragmatic goal. Effective enforcement also requires considerable and sustained resources, which are difficult to secure.

- **The benefits of drug treatment are maximised.** In practice the treatment structure in much of the UK is not sufficiently well developed to ensure this – despite some considerable investment and improvements in recent years. The project encountered a range of problems including recruiting and retaining managers and staff, finding suitable premises and offering a full range of treatment interventions to meet local user needs. (Parker and Egginton, 2004: 69–74)

6. Gaps in our knowledge and understanding

KEY POINTS

- A consistent theme to emerge from the literature is the need to improve our knowledge and understanding of how different drug markets and different distribution and trafficking networks develop and operate.
- We were unable to locate any comprehensive published UK evidence of the relative effectiveness of different law enforcement approaches. Nor could we identify any published comparative cost–benefit or value-for-money analysis.

According to May and Hough (2004: 558) the "relationship between the supply of illicit drugs, the demand for them and enforcement activities remain somewhat poorly conceptualised, under-researched and little understood in this country".

Identifying the specific contribution of enforcement to reducing drug-related harm, supply and/or demand is not a straightforward task (Dorn et al., 2003; Homel and Willis, 2007). As Levi and Maguire (2004) have noted in relation to the broader issue of organised crime, the prevention and reduction of activities such as drug trafficking and distribution can contain two core elements: a focus on harmful acts and/or a focus on harmful actors. There is often uncertainty about which element is being measured and how each should best be measured. Efforts to evaluate these interventions are also often hampered by poor quality data on crime levels and on the structure and organisation of these activities.

In relation to empirical studies on drug supply and trafficking more specifically, Browne and colleagues have argued that those "researching the field are plagued by insufficient evidence on which to base hypotheses or methodology. The field in general has been weighed down with conjecture, misinformation, and limited methodology" (2003: 324). Of the 15 studies reviewed by Mason and Bucke (2002) for example, only four were considered to be 'gold standard' (i.e. where the study used an 'action group' of drug markets that received the intervention and a 'control group' which did not). The authors noted that while there may be a need for more gold-standard evaluations, this is not always feasible or possible. In doing so, they acknowledged "the difficulties of evaluating interventions against phenomena as amorphous and dynamic as drug markets".

A consistent theme to emerge from our review of the evidence on tackling drug markets and distribution networks is that the overall quality of drug law enforcement research is considered to be poor, the range of interventions that have been evaluated is limited and better quality research is needed across a wider range of interventions

(Mazerolle et al., 2005). As Pearson and Hobbs note, "the large amounts of public expenditure devoted to drug enforcement are underpinned by a flimsy evidence base" (2004: 565). These concerns are shared by Reuter and Stevens, who note that "the UK invests remarkably little in independent evaluation of the impact of drug policies, especially enforcement. This needs redressing if policy makers are to be able to identify and introduce effective measures in the future" (2007: 11).

Another prominent theme to emerge from the literature is the need to improve our knowledge of how different drug markets and distribution and trafficking networks develop and operate. Ritter (2006) describes and explains five different disciplinary approaches to studying drug markets. While acknowledging the strengths and limitations inherent within each and the scope for strengthening individual approaches, she identifies the inevitable need for multidisciplinary models and approaches to better understand different aspects of the market (e.g. price data). These approaches include:

- ethnographic and qualitative approaches;
- economic approaches;
- behavioural and psychological research;
- population-based and survey research; and
- criminological and law enforcement evaluation.

While such an approach will undoubtedly create opportunities for developing new methods, concepts and ideas, Ritter notes that an important challenge for such a strategy will be interpreting data from different multidisciplinary sources and reconciling any differences or conflicts that emerge (ibid.: 461; see also Dorn et al., 2003). These recommendations have formed the basis of the Drug Policy Modelling Program (DPMP) in Australia. The DPMP employs an integrative methodology that aims to combine evidence, different disciplinary approaches and a range of perspectives on drug use behaviour and knowledge of policy-making processes in order to explore the potential for new policy insights, ideas and interventions (Ritter et al., 2007).

Levi and Maguire note that "given finite resources and the operational/political need for fire-fighting, there may be a tendency to focus on current threats at the expense of future, developing threats such as the potential harms from cyber-crime" (2004: 401). Their review of the evidence highlighted the "need to 'gear up against crime' as an 'arms race' in which crime reducers and offenders constantly innovate and exploit new technology and changes in social and business practices" (ibid.). The Serious Organised Crime Agency's recent assessment of longer-term trends in serious organised crime describes how "global migration and ever more widespread information and communications technology (particularly the Internet) means that more and more criminals will have the contacts and capabilities to operate without boundaries, and those directing criminal activity find it easier to maintain their anonymity and reduce their risks" (2008b: 25). Browne and colleagues also raise concerns about the Internet as a source of information on the manufacture of synthetic drugs, their transportation and trafficking (2003: 331).

Technological advances and the proliferation in mobile phone ownership, for example, have also assisted and sustained illicit drug markets and distribution networks and changed the way that these enterprises operate. There are also important changes in the technologies of drug production. A notable example is the growth in both the size and sophistication of cannabis 'farming' in the UK during recent years (Bryne, 2008). In particular, there has been a noticeable shift from the importation of cannabis to home-grown forms cultivated using hydroponic systems. To date there has been little research involving technology experts, law enforcement and the research community which focuses on these developments and ways of effectively tackling them (Natarajan et al., 1995).

The implications for UK drug markets and distribution networks from the hydroponic cultivation of cannabis are only starting to become clear. The same cannot be said about effective enforcement strategies for dealing with these developments. Although a range of strategies are currently being adopted by law enforcement agencies (e.g. the use of thermal imaging equipment to detect unusually warm houses or monitoring for high rates of electricity consumption), we were unable to identify any published, reviewable UK evidence about effective approaches aimed at tackling this particular problem. However, as Hough and colleagues have observed, a pragmatic and tailored approach is required since:

> cracking down on dealers, of whom an increasing number will be commercial cultivators, will drive out the risk averse, leaving the distribution system to be peopled by more criminal and risk-tolerant operators. This may bring about a greater convergence of Class A and cannabis markets. By contrast, a pragmatic policy would be to treat cannabis dealers and commercial growers *less* like suppliers of Class A drugs, not *more* like them. (2003: xii; original emphasis)

Pudney and colleagues (2006: 48) have called for improvements to the system of measuring drug markets, including amounts, prices, purities and information about the level of the transaction/seizure. They also identified the need for data sources in Scotland and Northern Ireland to be developed and refined to ensure greater comparability with evidence being collected in England and Wales.

The recent research by the Matrix Knowledge Group established that relatively little is known about the ways in which some drug dealers are able to expand their enterprises. This is considered an important area for future research. These studies will also need to access more robust sources of information for validating the reports and accounts of those involved in drug markets and distribution networks (Matrix Knowledge Group, 2007: vii).

We also need to develop our understanding of the extent to which drug trafficking networks are embedded within, or related to, licit business organisations. This should include a more detailed assessment of the impact of anti-money laundering measures, financial investigation, proceeds of crime and other 'lifestyle incapacitation' strategies contained within the 2005 Serious Organised Crime and Police Act.

Dorn and colleagues (2005: 41) have identified the following possibilities for future research on upper level drug trafficking:

- Charting the development of traffickers' 'careers' (including their recruitment, learning and networking, the role of imprisonment in facilitating these processes, key turning points and understanding the desistance process).
- Assessing the impact of different methods and strategies across source, transit and importation routes.
- Comparing outcomes for 'short strike' and 'long haul' approaches.
- Monitoring the direction and extent of changes in drug prices (at source, transit and retail levels) and their impacts on drug trafficking activities.

Dorn and colleagues, like Ritter (2006), conclude that this programme of research should: be interdisciplinary; use both qualitative and quantitative methodologies; conceptualise trafficking in relation to enforcement; be sensitive to issues around security; and avoid merely recycling practitioners' knowledge of these issues.

As well as calling for more resources for research on markets and trafficking at a general level, Pearson and Hobbs (2001: viii) highlighted the need for more systematic data on price and purity at different stages of the supply chain. Without it, they argued, our understanding of market dynamics, such as profit margins and economic vulnerabilities, will remain limited. In addition, they identified the need for:

- better targeting of research respondents including those operating at strategic points between upper and lower levels along the supply chain;
- comparative studies of local and regional markets;
- exploratory research on the level and quality of links between UK middle-market brokers and European-based warehousing systems; and
- charting the trajectories of individual careers and the dynamics of the illegal enterprise – including the role of imprisonment in developing drug market expertise and networks.

The need to establish the long-term effectiveness, cost-effectiveness and value for money offered by drug law enforcement was consistently referred to in the numerous published responses to the Government's drug strategy consultation. The Advisory Council on the Misuse of Drugs, for example, noted in its response that "analysis of value for money is needed across all strands of the Government's drug strategy including supply and prevention" (2007: 26). Identical points were raised as part of the responses submitted by DrugScope, the UK Drug Policy Commission and the Drugs and Health Alliance (which includes the Beckley Foundation, the International Harm Reduction Association, the Kaleidoscope Project, Release, Transform Drug Policy Foundation and the UK Harm Reduction Alliance).

We were unable to locate any recent comprehensive UK evidence of the relative effectiveness of different enforcement approaches. An early UK attempt to evaluate this concluded that its estimates were "based on an underlying data base which is woefully inadequate for the task in hand" (Wagstaff and Maynard, 1988: 10). A decade later, an assessment by the National Audit Office of the contribution made by HM

Customs and Excise also concluded that a lack of reliable information, coupled with difficulties isolating the Department's contribution from that of other agencies, inhibited an assessment of its impact on the illicit drugs trade (NAO, 1998). One notable study has assessed the relative cost effectiveness of various supply and demand reduction approaches for tackling the high levels of cocaine consumption in the USA during the mid-1990s. This study considered the effectiveness of source-country control measures, border interdiction, domestic enforcement and the provision of treatment for 'heavy' users. Noting the high cost of supply reduction strategies, this report concluded that despite concerns about programme attrition rates, the provision of drug treatment was likely to be a more cost-effective approach (Rydell and Everingham, 1994).

We were also not able to identify any published comparative cost–benefit or value-for-money analysis involving these different levels of intervention within the UK. However, some data on cost-effectiveness have recently been released under the Freedom of Information Act which considered outcomes for respective strands of the previous drug strategy between 1998 and 2001 (*The Economist*, 2008: 35–36; Transform Drug Policy Foundation, 2008: 11–12). This previously unpublished document produced by the Treasury noted that in relation to enforcement efforts "[t]here is little evidence on the cost effectiveness of CJS activities. However, while insufficient to form robust conclusions that little we do have does not offer strong support". In a similar vein, the analysis suggests that "[t]here is little hard evidence on whether tackling the supply chain further up within the UK offers better value". It acknowledges that while HM Revenue and Customs is becoming more effective in terms of seizures and interceptions, price and availability data suggest that these are merely a reflection of "rising *volumes* of drug imports rather than *greatly increased shares*: increased effectiveness being countered by increased sophistication and scale on the trafficker's part" (original emphasis).

7.   Implications for future policy

The evidence assembled as part of this review leads us to the following conclusions:

- drug markets are very intractable;
- they demand a range of responses – none of which will individually have dramatic effects; but
- a mix of supply and demand reduction measures may have some impact, or at least ameliorate the harms associated with visible drug markets.

The need to establish the long-term effectiveness, cost-effectiveness and value for money offered by key components of both previous and current drug strategies – and in particular of drug law enforcement – should be a prerequisite for developing effective policies and responses in this area. This is not a novel observation, however: these points featured prominently in responses to the Government's recent drug strategy consultation.

At the same time it needs to be acknowledged that identifying the specific contribution of different aspects of an overall strategy aimed at reducing supply, demand or harm is by no means a straightforward exercise. While there is an understandable desire and need for more rigorous research, in the context of drug markets and distribution networks, this has not always be feasible or possible in the past (because of poor quality data and an underdeveloped conceptual framework). A key priority for policy should be to improve the knowledge base and understanding of how different drug markets, distribution and trafficking networks develop and operate. This includes accurately mapping local markets and measuring intervention effects.

There is a broad consensus that effectively tackling drug markets requires cooperation from a range of agencies, including the police and local communities. However, there is very little evidence to guide effective practice aimed at engaging communities in enforcement efforts (largely attributed to conceptual and methodological issues) and sustaining viable community partnership approaches.

Another key policy issue is to recognise and minimise the unintended consequences of drug law enforcement efforts. These can have a significant negative impact on the nature and extent of harms associated with drugs by increasing threats to public health and community safety, and by altering both the behaviour of individual drug users and the stability and operation of drug markets (e.g. by displacing dealers and related activity elsewhere or increasing the incidence of violence as displaced dealers clash with established ones). There needs to be a much greater focus on establishing measurable outcomes which focus on harm reduction.

However, as the evidence assembled as part of this review has shown, agencies such as the police can and are actively involved in the planning, coordination and implementation of a range of activities that fall within the scope of harm minimisation. In doing so they can fulfil a number of important roles within a broader harm reduction approach (by forming partnerships with treatment and other interventions, by helping to constrain supply and by exploiting drug markets' inherent adaptability, thus forcing some of them to adapt into less harmful forms, e.g. from open to closed markets). Nevertheless, there is a dearth of research on the key elements and processes that contribute towards producing these positive outcomes (including, of course, the cost-effectiveness of different policing activities and strategies). It is perhaps inevitable that in the pursuit of vested interests (e.g. in order to secure additional or sustained funding), agencies may be inclined to draw on anecdotal evidence and direct experiences to demonstrate effectiveness. This, however, is a poor substitute for independent evaluation and knowledge.

ADDRESSING SUPPLY AND DEMAND

Any policy responses will clearly be challenging and require political, social and economic dimensions, as well as more technical and conventional responses. At one extreme it is widely acknowledged that effectively tackling drug production and distribution at source requires a stable government that has control over its own territory and borders (Schmitz, 2007). But as MacGregor notes, the situation in Afghanistan has "led to social destruction, warlord power, poppy cultivation, rule of the gun and a breakdown of central government power and of law and order" (2008: 346) where over half the country's GDP is derived from opium and one in ten of its citizens is involved in cultivation. In its latest annual report, the European Monitoring Centre for Drugs and Drug Addiction observes that measures to promote crop diversification are constrained by the fact that "farmers' options are limited by high transport costs, poor roads and problems arising from lack of security. In these areas, corruption and insecurity are reducing the opportunities for trading in legal goods and impeding economic growth and efforts to encourage crop diversification, even in areas close to the provincial centres" (2007a: 15). Even the proposal by the Senlis Council to pilot the licensing of Afghan opium production for medical use (drawing comparisons with a similar programme to license opium in Turkey in the early 1970s) has been opposed by much of the international community for a range of practical and political reasons (Schmitz, 2007). The House of Commons Defence Committee has also concluded that given "the absence of a well developed legal and security system ... the Senlis Council's proposals would be inappropriate at this time" (2006: 25). Clearly, there are no short-term solutions to be found here (see Fazey, 2006, for a discussion).

On the other hand, governments cannot neglect the causes and drivers of demand in consumer countries (some of which have been discussed in Section 4.4). A number of UK indicators published during the past 18 months also suggest that attempts to increase resilience to illicit drugs at both community and individual levels are being undermined. Examples include the growth in wealth and poverty inequalities, the conclusion that the main strategy against social exclusion is now largely "exhausted" (e.g. there has been no progress in reducing child poverty in recent years and the unemployment rate among the under 25s has been rising since 2004), and the

observation that levels of child well-being in the UK compare poorly with other industrialised countries.

May and Hough (2004: 560) have called for a better balance between enforcement and prevention strategies and draw on the public health distinction between primary, secondary and tertiary prevention as a model for how this approach might operate in practice. But in doing so they, like others (MacCoun and Reuter, 2001; Reuter and Stevens, 2007; McSweeney et al., 2008), have noted that, on balance, the conclusions from the evidence base demonstrating the effectiveness of demand reduction strategies are less than convincing in some important respects; particularly for some of the principal forms of primary (drug education) and tertiary (drug treatment) prevention (e.g. in terms of preventing future drug use and facilitating recovery and reintegration). It seems that education and drug treatment, even when complemented by more effective enforcement strategies, are unlikely to be a panacea for tackling the broader causes and consequences associated with illicit drug markets and distribution networks (see also Johnson et al., 1995, for a discussion).

The illegal status of drugs is likely to have contained their availability and use to some extent. However, drug laws do not appear to have direct effects on the prevalence of drug use: 'tougher' enforcement measures have not necessarily deterred use. While the proportion of adults (aged 16 to 59 years) in England and Wales reporting any drug use during the previous year has fallen since 1995 (by 1.8%) and the use of Class A drugs has remained fairly stable over this period (increasing by 0.3%), the use of powder cocaine has increased significantly (by 1.7%). This may be the result of a shift from amphetamine use (Class B), which fell by 2.2 per cent during this time, to powder cocaine on the part of 'recreational' users. A similar pattern emerges with young people aged between 16 and 24 years. While there have been significant falls in the use of any drug (8.4%) and Class A drugs (2.4%) between 1995 and 2007/08, the use of powder cocaine has increased significantly (3.7%). It is likely that reductions in the use of cannabis and amphetamines by young people during this period are important factors driving these changes (Jansson et al., 2008: 54).

An important question then is what would be an acceptable level of Class A use were the emphasis on the current enforcement paradigm to be revised? On this issue Caulkins notes that:

> "Prohibition reduces use, but creates high costs of control, including black markets. Legalization eliminates most costs of control, but risks greatly increased use and attendant problems. As Mark Kleiman (1992) puts it, you can choose your drug problem (one of use or one of control), but you can't choose not to have a problem". (2002: 7).

Despite the considerable social and economic costs arising from problematic Class A drug use – an estimated £15 billion in England and Wales during 2003/04 (Gordon et al., 2006) – it is easy to forget that, in terms of prevalence, this is actually a relatively

small problem[17]: less than 1 per cent of the adult population in England and Wales reported using heroin (0.1%) or crack (0.1%) during 2007/08 (Jansson et al, 2008: 53). The most recent estimates for the size of the problem opiate and/or crack cocaine using population in England during 2005/06 (332,090) are equivalent to 9.97 per 1,000 of the population aged 15–64 (Hay et al., 2007: 2), or 1.1 per cent of the country's working age population (31.6 million). But it has been suggested that if demand for illicit drugs – and all its associated costs – were to increase even modestly (see McKeganey et al., 2007, for a discussion) and "markets continue to prove highly resilient in the face of enforcement efforts, then over time, the pressure to re-examine the current legislative structure for controlling drugs will be overwhelming" (May and Hough, 2004: 561). This prospect was also acknowledged following parliamentary consideration of the broader issues arising from the current emphasis on drugs law enforcement as the primary means of tackling drug markets and distribution networks (Home Affairs Select Committee, 2002).

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[17] In making this point it is not our intention to downplay the considerable range of drug-related harms, including overdose, infection (e.g. hepatitis and HIV) and death, to which this group is exposed.

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