

Police Research Series

Paper 133

**Serving Up:
The impact of low-level
police enforcement on
drug markets**

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Policing and Reducing Crime Unit: Police Research Series

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Foreword

Evidence suggests that drug-dealing markets can be disrupted or dispersed through the use of low level police enforcement. However, often such disruption is temporary with drug dealing markets adapting quickly in response to such enforcement and re-emerging to trade again with new dealers in place. Little is know about the dynamics of local drug dealing networks or the true effect policing activity has on them. This study was commissioned to explore the various tools at the disposal of police in tackling street level drug markets.

This study examined the impact of low-level police enforcement on two drug markets, and the adaptations that both sellers and users employed when attempting to avoid detection. The role of police sources in disrupting drug market systems was also examined. The report explores the provision of local treatment facilities for drug users and suggests ways in which services can target local drug using populations and keep them in treatment more effectively. Views of the local community were also elicited.

This paper looks pragmatically at both supply reduction and demand reduction strategies, and underlines the need to combine both. It draws attention to the potential value of police sources as drug markets become more astute in adapting to enforcement techniques and the provision of treatment for those with drug problems. It should prove to be a valuable reference for both the police and Drug Action Teams working at a local level dealing with the problems such markets create.

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Executive summary

This study examined the impact of low-level police enforcement on two drug markets, and the adaptations that both sellers and users employed when attempting to avoid detection. The role of police sources in disrupting drug market systems was also examined. The report explores the provision of local treatment facilities for drug users and suggests ways in which services can target and retain local drug-using populations more effectively. Views of the local community were also elicited.

Case studies of two local drug markets

We conducted two case studies of areas where drug markets existed. Both markets predominantly operated closed market styles of selling (closed markets have limited access, market participants have to be known and trusted by a seller). Interviews were conducted with drug users, sellers, police officers, local drug agency staff, and members of the local community and police sources to build a picture of both markets.

Market 1

At the time of fieldwork drug distribution in Market 1 was conducted through a structured hierarchy which was kept in place by the threat of violence. Low-level police enforcement had previously impacted on the open drug market but sellers had adapted and were now predominantly selling through a closed system. The market was heroin-based although crack cocaine was becoming more widely available and used. It was reported that new sellers trying to break into the market would find it problematic, the view being that the market was a 'closed shop'. Buyers and sellers communicated by mobile phone, although the exchange of drugs and money or goods was generally undertaken in public places. Drug sellers in Market 1 were motivated by money, and earned considerable sums each working week. Sellers in Market 1 appeared to maximise their earning by selling both heroin and crack. All of the sellers reported an increase in the possession and use of firearms.

Market 2

Market 2 operated a fragmented 'free market' drug distribution system with many sellers working independently, selling both heroin and crack cocaine. Previous enforcement efforts had transformed the open crack and heroin markets into closed ones. However, at the time of fieldwork, pharmaceutical drugs were available and traded predominantly through an open street-based market. Modern communications technology (mobile phones) had eased the transition from open to closed markets and nearly all market participants communicated via mobiles. Like Market 1, the sellers in Market 2 reported an increase in the prevalence and use of firearms. Although violence was a feature of the market it did not appear to shape the distribution system.

Policing Markets 7 and 2

In both markets drug sellers and users believed the police posed little threat, and they were unconcerned about the risks associated with police activities. Few interviewees had been disrupted by the police when attempting to purchase drugs and a number of sellers had been distributing drugs for a lengthy period undetected. Policing both markets had become increasingly difficult since the visibility of sellers had declined and the ownership of mobile phones had increased.

Police officers in both markets felt that current 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. A variety of policing methods had been employed in Market 1 but none had disrupted the selling structure above street-level. Police officers in Market 2 felt hindered by the lack of a drug squad and felt they were only able to react to crimes reported rather than set up proactive operations. Officers in both sites felt local communities had little confidence in their ability to successfully arrest drug sellers and make an impact on the market.

A theme that emerged from both sites was the usefulness or potential usefulness of police sources in disrupting closed distribution systems. Nearly all of the police officers we interviewed believed that source-led policing was both cost-effective when compared with surveillance operations, and the most reliable method of gathering intelligence on market structures.

Community concerns

Local community members saw drug selling as a problem but not a primary concern. They felt that community police officers needed to be more visible. However, there was a growing understanding in Market 2 that the police should not be the sole agency responsible for problems relating to drug dealing and use.

Supply reduction strategies

Both markets studied had responded to enforcement efforts and adapted to policing techniques. However, our study suggests that the structure of modern drug markets can serve to insulate the police from gathering the information needed to make arrests. The obvious response is to develop or amplify other information flows. A recurrent theme amongst drug sellers, police sources and officers was that police sources are now best placed to fill this gap. Dedicated Source Units (DSUs) are highly cost-effective. With the increasing professionalisation of sources and the implementation of the Human Rights Act 1998, the management of police sources has also become far more accountable. Specialist units acting upon the information

from DSUs were also perceived by police officers as the best way forward to making inroads into disrupting markets above street-level.

Demand reduction strategies

It is important to combine supply reduction and demand reduction strategies. One potentially important set of demand reduction strategies involves the provision of treatment for those with drug problems. Two strategies that target drug-using offenders in contact with the criminal justice system with the aim of referring or offering treatment are arrest referral schemes and drug treatment and testing orders. Evidence shows that if schemes are properly conceived, funded and supported (by both treatment services, police officers and the courts) they can have a significant impact on both drug use and criminal activity. Another recurring issue during fieldwork was the lack of National Health Service (NHS) methadone prescribing facilities and the unacceptably long waiting lists. Responsive prescribing services tailored to drug users' needs, coupled with tight monitoring and regulation to avoid leakage to the illicit market are needed.

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INTRODUCTION

1. Introduction

This report¹ considers the impact of low-level police enforcement on drug markets. We have taken for granted the need for effective policing of drug markets, not only because drug markets can pose significant risks to market participants but also because of their ability to impact negatively on host communities. The best methods of tackling local drug markets, however, are less obvious. One view is that enforcement efforts should focus on paralysing the supply system. Another view is that reducing the demand for illicit drugs will make the supply network wither and constrict the market.

¹ 'Serving up' is used by both drug users and sellers to refer to selling heroin and crack cocaine.

The impact of many policing strategies is unclear. On the one hand, growing levels of seizures, increasing numbers of problematic drug users and static or falling prices imply that supply is comfortably keeping pace with demand, and may suggest to some that enforcement has had little impact. On the other hand, one can speculate that lower levels of enforcement would have resulted in much greater levels of imports; this might result in higher levels of sales and a spiral of demand, at least for drugs of dependency, and a subsequent spiral in prices. One can sketch alternative scenarios. For example less vigorous policing might result in greater ease of supply unaccompanied by any significant increase in demand, resulting in a collapse in prices, less drug-related crime, and so on.

In developing a better understanding of distribution systems for illicit drugs, three sets of issues need to be addressed:

- How are distribution systems organised, and how responsive are they to market forces?
- To what extent can suppliers adapt to, or circumvent, enforcement strategies?
- To what extent do enforcement strategies have perverse effects?

This study looks in detail at two different market structures and the impact of possible adaptations to, and perverse effects of enforcement strategies.

Methodology

This study involved case studies of two local drug markets. The sites have been anonymised to avoid any risk that the research should consolidate their reputations as areas where drugs are available, and to respect the privacy of the respondents who took part. The two areas were chosen to be similar to each other in terms of economic stability, ethnic diversity, and population size. The research team selected Market 2 and senior police officers selected Market 1.

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All fieldwork was carried out between April 1999 and October 1999. In order to gain a detailed understanding of each market we conducted interviews with those using, supplying, and policing the market. In-depth interviews were also carried out with drug agency professionals. In Market 2, interviews were also conducted with five police sources. In total we interviewed 68 current Class A drug users, eight drug dealers and five registered police sources. Initially drug agencies put us in touch with buyers and sellers, who were accepted for interview if they bought or sold within the market. Respondents then put us in touch with other potential interviewees. Interviews took place in various settings including drug agencies, prisons, semi-public locations and police safe houses. The interview schedules for each group combined structured and semi-structured questions.

We also assessed the impact of the market on the local community. In each site 200 interviews were conducted with local residents or those working in local businesses. Respondents were interviewed either on the street or in their business premises. Quota sampling techniques were used for those interviewed on the street in order to reflect the local population. Respondents were not informed that the questionnaire was part of a drug market study but were told it was about their local area; this was done to avoid response bias.

We carried out twenty-one interviews with police sergeants and constables. Seven informal interviews were conducted with senior police personnel and specialist officers. Custody record data were also collected for a twelve-month period in both sites. These data are presented in Appendix A. In Market 1 these data were collated by researchers; in Market 2 SO11 at New Scotland Yard compiled data via the Crime Reporting Information System (CRIS). The intention was to try and map the number of users in each market. However, we were unable to do this because custody records did not contain all the information that was required.

Reliability, validity and sensitivity

We appreciate that those who engage with illegal economies will often have sufficient social skills to be able to put a self-serving gloss on their current and past lives for the benefit of researchers. With this in mind the questionnaire contained reliability checks. Several questions were repeated in slightly different ways throughout the questionnaire to gauge the reliability of respondent's answers. If answers displayed inconsistencies they were asked to expand or explain their answers and hence their discrepancies. This procedure enabled us to ensure that the interviews were internally consistent. Data were checked against other sources. This process of triangulation allowed us to validate information received in interviews. Drug sellers and runners were the final group to be interviewed in each market. By

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deliberately structuring our interview schedule in this way researchers were able to gain a clear understanding of the markets which equipped us better to spot exaggerations, lack of local knowledge, and limited understanding of price structures and distribution systems. We feel fairly confident that answers given by respondents reflect the nature of the two drug markets studied.

After the questionnaire was piloted certain questions were omitted because they were deemed too sensitive; for example questions asking about makes and types of firearms and the use of firearms.

Terminology

Drug market and policing terminology can be confusing. Although some terms may seem to need no explanation it is worth spelling out the definitions used in this report.

Low-level police enforcement in this report is applied to the policing of street-level drug markets. It refers to the techniques and strategies that are used to police street buyers and sellers and in a limited number of cases those who sell to street dealers.

Suppliers are those who supply a market. They usually deal with a small number of individuals and within our two markets never with 'runners' or many of the smaller dealers/sellers. They can wield considerable influence in structured markets over functions and 'employees', or alternatively they can act in isolation and have little interest in market activities below that of supply level.

The terms *dealer and seller* are used interchangeably within this report. Where the market is structured, a dealer or seller will sell drugs to a 'runner' and will have little contact with individuals who buy drugs for consumption. Where the market is fragmented, dealers or sellers will, more often than not, sell directly to a buyer. In each case, dealers/sellers will have an understanding of retail market operations. However, in a structured market, they are unlikely to have a clear knowledge of supply routes in to the market. Middle level sellers are those who work between the street sellers or runners and those who distribute to the market. If a market is structured, middle level sellers are likely to have a knowledge of the supply system and routes; if the market is fragmented, this is less likely.

Individuals who deliver drugs to drug users for sellers are referred to as runners. We only found runners operating where there was a structured system of distribution in place. What differentiates them from sellers is that they sell for the latter on commission, and do not regard the drugs they sell as their own. It is rare for this

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level of drug market participant to have knowledge of distribution networks or market structures above street level. It would also be unusual to find a runner who had first-hand knowledge of the economics involved above his/her level. They are however central to the workings of a structured market, as they are the connection between those who buy and those who sell.

The term *user-dealer* refers to drug users who finance their use by buying drugs for others, thereby reducing the cost of their own use. They do not consider themselves dealers or sellers, as they are making no cash profit. Some make a conscious decision to finance their use in this way as they are unwilling to commit acquisitive crime. Others find themselves in this situation as they are approached by new users in the market; these may lack the contacts to buy direct from a closed market system, and therefore need an established buyer to act as their go-between until they can be trusted by runners or sellers.

Open markets are ones where there are no barriers to access; someone completely unknown to sellers would be able to buy drugs in an open market. They tend to operate in geographically well-defined areas at specific times. In *closed markets*, 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.

Finally, throughout this report we use the term source. In popular parlance sources are known as police informants. There are two basic levels of police source. Those who are participating sources, (participating in the activity the police are interested in) and those who are tasked sources (individuals who are given specific tasks by the police). These should both be distinguished from those who simply pass information to the police and remain known as informants. The use of police sources has undergone considerable professionalisation in recent years and the term 'source' (used by the police themselves) better describes their function within crime reduction than 'informant'. This report only details interviews with those who were classified as sources.

The structure of this report

Section 2 summarises previous research on drug markets, the low-level enforcement of markets and the perverse effects of enforcement strategies. Sections 3 and 4 present the findings from our interviews with drug users, drug sellers, police officers and drug agency staff. Section 5 presents the findings from interviews with police sources and from officers who work with sources. Section 6 looks at the views of community members from both markets. Finally, Section 7 summarises our findings and suggests recommendations where appropriate.

2. Thinking about drug markets

According to the British Crime Survey, in the region of four million people in England and Wales, largely between the ages of 16 and 30, use illicit drugs each year (Ramsay and Partridge, 1999). Despite the size of the illicit drugs market, little is known about the structure of the distribution process, the way in which the market responds to changes in supply and demand, and the impact of enforcement. This section summarises what can be said on the basis of existing research.

Varieties of user

Whilst a large number of people engage in illicit drug use, most do so in a relatively controlled way. Their use is restricted largely to cannabis, and, to a lesser extent, ecstasy. A minority engage in heavier use of a wider variety of drugs, including heroin and crack cocaine (crack); and a proportion of this minority are chaotic users with serious problems of dependency. We have elsewhere estimated that there may be between 100,000 and 200,000 problem users² in England and Wales (Edmunds et al., 1999). They represent around 3% of all users, but given their levels of use, they may account for around half the expenditure on illicit drugs. The costs arising from problematic drug use could be in the region of £4 billion a year (UKADCU 1999), taking into account the burden on the health and criminal justice systems, and costs imposed on the victims of drug-related crime. As might be expected, different types of user typically use different types of retail market, and these are supported by different types of distribution or supply system.

² Following the *Advisory Council for the Misuse of Drugs* (1982, 1988), we define problem users as those who experience social, psychological, legal or physical problems related to their use.

Varieties of retail market

As with any other type of commodity, illicit drugs are traded within a market through which buyer and seller have to locate one another in order to conduct a transaction. Previous research has described various forms of retail market system. Several studies have documented place-specific markets - usually but not always street-based - in which cannabis, heroin, crack or other drugs are sold to anyone who looks like a plausible buyer (e.g. Edmunds et al., 1996; Lee, 1996). It is helpful to refer to these as open markets; they are open to any buyer, with no need for any prior introduction to the seller, or other similar barriers to access.

For licit transactions, an open market has advantages for both buyers and sellers. Buyers know where to go in order to find the goods they want, and can trade quality against price, sellers are able to maximise customer access. In an illicit market, there are complications. Eck (1995) identified these as a necessity to balance access with security. Not only must buyer and seller be cautious of police activity - both overt and undercover - they must also be aware of their own personal safety. Furthermore, there can rarely be any recompense for buyers if the quality or value of their

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purchase is unsatisfactory. Participants in illicit markets lack the usual legal means for resolving business conflicts, and there is a well-documented tendency for systematic violence to emerge as a dominant mechanism for conflict resolution in high value markets (cf. Goldstein, 1985; Spunt et al., 1990).

The main advantage of an illicit open street market - ease of locating buyers and sellers - is also its major drawback for participants: it renders them vulnerable to policing. In response to the risks of enforcement, open markets tend to be transformed into *closed markets*. These are ones in which sellers will only do business with buyers whom they know, or for whom another trusted person will vouch. The degree to which markets are closed - the barriers to access put in the way of new buyers - will depend largely on the level of threat posed by the police. Intensive policing can quickly transform open markets into closed ones (cf. Edmunds et al., 1996; Mayetal., 1999).

If retail drug markets have always been responsive to policing, their capacity to adapt has been greatly extended by the emergence of mobile phones. Until the mid-1990s, street sellers tended to operate in specific, well-defined, places. This was to allow buyers to locate them with ease. Increasingly contact is now made by the buyer ringing the seller's mobile and making an appointment to meet at an agreed (or pre-specified) place (Edmunds et al., 1996; Chatterton et al., 1995). Mobile phones thus minimise the risks associated with illicit transactions by making police surveillance largely impractical (Natarajan et al., 1996).

It is very unclear what proportion of illicit drugs are bought in open street markets or in the phone-based closed markets that are replacing them. Given the choice, most users would buy from sellers whom they know and trust, doing the transaction in private rather than public space. And most users do have a degree of choice, as their wish to buy drugs is not fuelled by dependency.

Pub- or club-based retail markets, in particular for ecstasy and other drugs used by clubbers, are likely to form a significant part of drug distribution systems. These should probably be thought of as semi-open, in that sellers will generally do business in the absence of any prior introduction - provided that the buyer looks the part. Ruggiero and South (1995) reckoned that most illicit drug buying takes place in private or semi-public places such as pubs and clubs. This may well be true - in the sense that a majority of buyers use such systems. It is more questionable whether the majority of drug expenditure takes place in dealing networks of this sort. Whilst problem users account for a very small minority of the total, they consume drugs at such a rate that they account for a very significant slice of illicit drug sales. It may

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well be that problem users' needs for very regular and dependable supplies of drugs locks them into street markets or phone-based markets serviced by sellers who operate on a full-time basis. Nevertheless, the fact that only a small percentage of drug users buy on the street has implications for enforcement strategies (Lee, 1996).

The structure of distribution systems

Behind any system of retailing must lie a distribution system, which imports or manufactures and then distributes drugs. Traditionally, the structure of drug distribution systems has been viewed as pyramidal, with large-scale importers and traffickers operating at the apex, filtering down to street dealers who operate on the lowest tier (Gilman and Pearson, 1991).

Some studies have uncovered organisations with clear hierarchies and well-defined job functions (cf. Natarajan, in press). However, other research suggests that distribution systems can take widely differing forms. Dorn et al. (1992) found that in the late 1980s at least, domestic supply systems in Britain were not "organised as neat, top-down hierarchies controlled by a 'Mr Big'. ... No cartels; no mafia; no drug barons." Dorn and his colleagues painted a picture of a fragmented, fluid system populated by small groups of opportunistic entrepreneurs who came from a variety of backgrounds - licit businesses with an illicit sideline; career criminals who turn from other 'project' crime such as bank robbery or major fraud to trafficking; people who may to some extent believe in their product; users buying for each other, and so on. Wright et al. (1993) and Murji (1998) reached similar conclusions. However, in more recent research on importation into Britain, Dorn and other colleagues (1998) paint a rather different picture, one more in keeping with media images of 'organised crime'. Perhaps arrangements vary over time, and at different levels of the market.

Supply, demand and enforcement

The relationships between the supply of illicit drugs, the demand for them and enforcement activities are poorly conceptualised, under-researched and little understood. Popular debate about drugs tends to take for granted that illicit drug use is supply-led, and that illicit drug use is best controlled by stopping drugs getting into the country and onto the streets. However, other studies (cf. Parker et al., 1998) suggest that the market for illicit drugs is more demand-led - that supply follows demand, and is a response to it. In reality, there is a dynamic and interactive relationship between supply and demand: with no supply of illicit drugs, no demand would ever evolve; and unless drugs offered users some immediate attractions, there would never be enough demand to consolidate sources of supply.

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A distinction has often been 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. The distinction becomes hard to maintain when one recognises that changes in levels of supply are likely to affect prices, and that changes in prices are likely to affect demand. Except in those rare situations where it is genuinely possible to stifle the supply of illicit drugs, the impact of supply reduction strategies is likely to be mediated through changes in price.

We know very little about the ways in which supply reduction strategies impact on prices, and the ways in which prices are related to demand. Economic theory would lead us to think of interdiction and enforcement strategies as methods of increasing prices. There are two ways in which this could happen. First, the simple process of removing drugs from the distribution system should increase scarcity and thus increase price. Secondly, the increased risks imposed by the police on participants should be translated into higher prices. Either way, the higher prices should encourage consumers to depress their consumption in much the same way that they would respond to added taxation of alcohol and tobacco.

In reality, the prices of most illicit drugs in England have either been stable or falling. For example, cannabis prices have been fairly stable in cash terms for many years, representing a fall in real terms. The cash price per gram of both heroin and cocaine has fallen quite steeply in recent years, even if the unit of purchase remains the same - a £10 wrap of heroin and a £20 rock of crack³. This does not necessarily mean that supply reduction strategies have been without impact. It is quite plausible that the price falls would have been steeper in the absence of these strategies. There is a fairly strong case to be made, however, that supply reduction strategies have been insufficient to maintain or increase prices.

³ The other *variable* to take into account is purity. If the quality of street drugs has declined, there are no grounds for arguing that real prices have *actually fallen*.

There are several possible reasons for this. Some writers (e.g. Rasmussen and Benson, 1994; Kleiman, 1992; Reuter, 1992; Reuter et al., 1990) have focussed on the adaptations which distribution systems make to enforcement, and to the perverse effects which apparently effective enforcement may bring. The main possible adaptation is the replacement of personnel - where others take over the roles and functions of those who have been arrested. Where there is a buyer's market, it is obvious how this process could undercut the impact of enforcement: removing a few sellers from an oversupplied market will not increase scarcity at all; at best it will stop prices from sliding.

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The main possible perverse effect of supply reduction strategies is a complex one: the very act of sustaining prices may actually stimulate the market, by drawing new 'players' into the system. According to this argument enforcement can be successful in sustaining or increasing risks of criminal sanction; these risks are translated into maintained or increased prices; but the net result is to attract more people into the highly lucrative - if risky - drug business. If this argument holds up, successful enforcement strategies contain the seeds of their own failure.

Dependency and inelasticity of demand

Assuming that drug control strategies can have at least a degree of impact on drug prices, it is important to consider how such changes will affect levels of consumption. If most illicit drug use is controlled, there should therefore be considerable elasticity of demand in response to price changes. In principle at least, it should be possible to price controlled drug users out of specific drug markets.

Problem drug users will demonstrate much greater inelasticity (cf. Wagstaff and Maynard, 1988; Thomas, 1992). The extent to which dependency locks people into a state of irresistible demand is open to question (cf. Rasmussen and Benson, 1994; Ditton and Hammersley, 1995). The more it does so, however, the more levels of demand will be insensitive to changes in price. Dependent users with access to large amounts of money will simply spend more. Criminally involved dependent users will spend more of other people's money.

The implications of this are two-fold. First, if it proves possible to maintain or increase prices through supply reduction strategies, the impact will be greater on the large number of moderate users than on the small number of heavy users. Secondly, it is clearly important to find strategies which reduce problem users' demand additional to those, which rely directly or indirectly on price control.

Policing drug markets

Low-level policing methods strive to disrupt markets, making them less predictable for both buyer and seller (Murji, 1998; Lee, 1996). This strategy may well be most effective when combined with attempts to draw drug offenders into treatment services as they pass through the criminal process (cf. Edmunds et al., 1998; South, 1998). Selective policing aims to target dependent users in an attempt to reduce demand within a market. The argument is that by removing regular customers from the market, consumption will decrease resulting in a reduction in price, which in turn would lead to a decline in drug related crime (Kleiman and Smith, 1990). A second principle of low-level enforcement is inconvenience policing which aims to

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increase the drug search time or to otherwise place obstacles in the way of the buying process. Although such measures will probably do little to deter problematic users, the idea is that casual and novice users will be discouraged from buying, therefore constricting the market (Murji, 1998).

It is clear that whatever strategies are employed to tackle the distribution of illicit drugs, those responsible for drug policy must be aware of the unintended consequences such strategies often bring. The relative inelasticity of demand amongst dependant users means that the markets will be very lucrative, and will tend to adapt to enforcement and transform rather than disappear.

3. Market 1

The description of Market 1 is based on interviews with those who were actively involved in the drug market (those buying drugs, buying and selling drugs or selling drugs), a range of police officers and drug treatment agency staff. The questionnaires were slightly different for each group but contained a set of core questions. Findings from the interviews are presented in the following way:

- respondents' drug use;
- a description of the drug market;
- drug distribution within the market;
- the economics of drug dealing; and
- description of enforcement strategies and views of effectiveness.

In presenting our findings in this way we have attempted to provide a description of the distribution system and the impact it has (not only for those who buy within the market but also for enforcement strategies).

The area in which Market 1 is situated has a population of around 13,000. It is in an ethnically diverse inner city area, a short distance from a busy metropolitan centre. Much of the area is run-down with high unemployment. There are few high-street shops and a variety of independent family-run businesses. Housing is both Victorian and post-war, with new estates currently under construction, which have been partly funded through regeneration money. The local authority owns a large amount of the housing stock. Within Market 1 there is an open street sex market and a number of off-street sex establishments.

Profile of drug buyers

Thirty-four drug users were interviewed in Market 1. Table 1 presents some basic demographic information about them.

Users	25
User/dealers	9
Male	20
Female	14
Average age at interview	32 years
White	33
Mixed Race	1

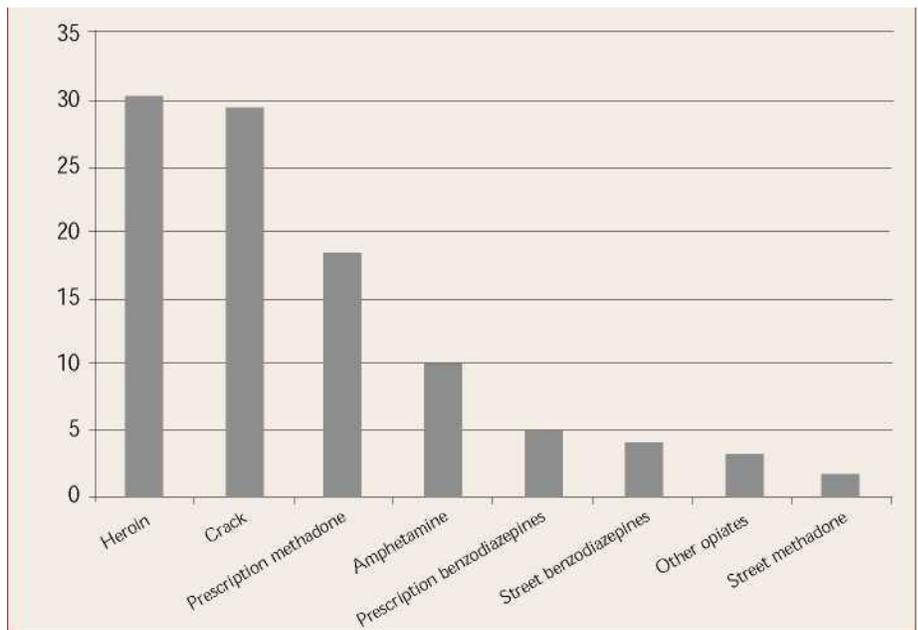
MARKET 1

Drug use

Buyers were asked to identify which drug they used most frequently. For just over half (17) this was heroin⁴. Those who were injecting heroin (26) first began to do so on average at 24 (age range 13 - 43). For those using crack, use began on average four years later at 28 (age range 17 - 43). However most were using a range of drugs (28 were using two or more illicit drugs). Eighteen respondents were prescribed methadone, all of whom were using illicit drugs in addition - mainly heroin and crack.

⁴ Of the remainder five were dual heroin and crack users, three were using amphetamine sulphate, one respondent disclosed crack and the remainder (8) were using various opiate combinations.

Figure 1: Respondents' drug use the month preceding interview



Buyers were spending an average (median) of almost £200 a week on all drugs, although this ranged from £20 to £1400. The relatively low weekly drug spend may reflect the decrease in the price of heroin which has been the trend in recent years, or that many were using methadone and therefore only needed to 'supplement' their prescribed drugs. It could also reflect the fact that some drug users buy collectively (increasing the quantity often reduces the cost) to reduce the cost of their weekly drug bill. Sex workers, however, had an average spend of £550 per week reflecting their high earning capacity in comparison to other drug users. The total drug spend

MARKET 1

of all 34 users in a week was roughly £12,000. This amount was raised in various ways, the three main ones being acquisitive crime, sex work and benefits. A much smaller proportion relied on paid work or casual jobs. Nine of the sample also paid for their own drug use by buying drugs for friends, thus reducing the cost of their own weekly spend.

On average those using heroin reported daily use of just over half a gram. The majority (25) were injecting. Twenty-nine respondents had used crack in the month prior to interview, with just over a quarter using daily. At the time of fieldwork the average price of a gram of heroin was £45. However, when respondents bought in larger quantities the price (of a gram) dropped. One respondent was buying heroin for £200 per half ounce (14 gms), which reduced the cost of a gram to £15. The average cost of a rock of crack (.2gm) was £20; little price variation was reported.

Just over half (19) of respondents were able to obtain credit within Market 1, although the amount was usually very small. Users were asked what their dealer would do if they were unable to pay back the debt they had accrued. Just over half (19) believed violence would be used against them. Seven believed they would either be refused drugs, or refused credit and the remainder thought their dealer would take no action.

"I'd have to get the money. He'd break my legs otherwise".

"He would just not deal to me again, or he would find out who my new dealer was and stop me buying from there".

Users commented that drug sellers would often accept stolen goods in return for drugs, including electrical equipment such as televisions, videos, and laptop computers or items such as jewellery or shop vouchers.

The market

The market is in a contained geographical area. Although there is no fixed open street drug market, most transactions are conducted in public places away from drug sellers' and users' houses. The built environment lends itself particularly well to both drug use and selling. There are many alleys inaccessible to cars and many houses backing onto one another. This creates quiet places to exchange drugs and money. The market has previously experienced competition with neighbouring districts over drug selling and territory. This has at times erupted into violent confrontation.

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Market users, the police and drug workers all described the drug market as extremely busy. No drug buyer said they had difficulty locating drug sellers at any time, and no-one had to wait or look for longer than an hour when wanting to purchase drugs. One respondent (among many) commented: "It is easy to buy - it's 24/7. My dealer always has gear...". The most readily available drugs⁵ in the market were heroin and crack cocaine. Amphetamine sulphate and powder cocaine were also available but fewer buyers said that their dealer sold them.

⁵ Interviewees were not asked about their use or the availability of cannabis.

The majority (32) of buyers interviewed bought their drugs from a closed market system. Just less than two-thirds had been purchasing drugs in this way for over two years. Just over a third had been doing so for longer than five years, perhaps illustrating the stable nature of the distribution system in Market 1. Two new buyers in the market had yet to gain access to the closed market system and therefore described their dealer as operating a semi-closed distribution system. Only three respondents stated that they had no relationship with their dealer at all. Most (21) described their dealer as 'a friend'. All but one buyer said that their dealer was only contactable on a mobile phone. Mobile phones were considered by all market participants as safer for both user and dealer, with many users disclosing that their dealer's mobile number changed on a regular basis. Once contact had been established users were instructed to meet at a particular venue within the market and wait for a 'runner'. No buyer believed that dealers or runners attempted to intercept or poach each other's customers. Again, this may illustrate the controlling nature of the distribution system within Market 1.

Drug distribution

Five drug sellers and runners were interviewed in Market 1. Three described themselves as 'runners' for other drug sellers and two described themselves as drug sellers. All five were male⁶. The three runners felt they had a good working knowledge of the distribution system to drug users, and the two drug sellers had knowledge of the distribution system above street level. The two sellers also had knowledge of nearby markets to which they also distributed drugs. All five respondents were selling heroin and three were also selling rocks of crack cocaine. One was selling cocaine powder to be converted into crack cocaine. All respondents reported that most dealers in the area sold both heroin and crack.

⁶ No interviewee disclosed any knowledge of female sellers within the market.

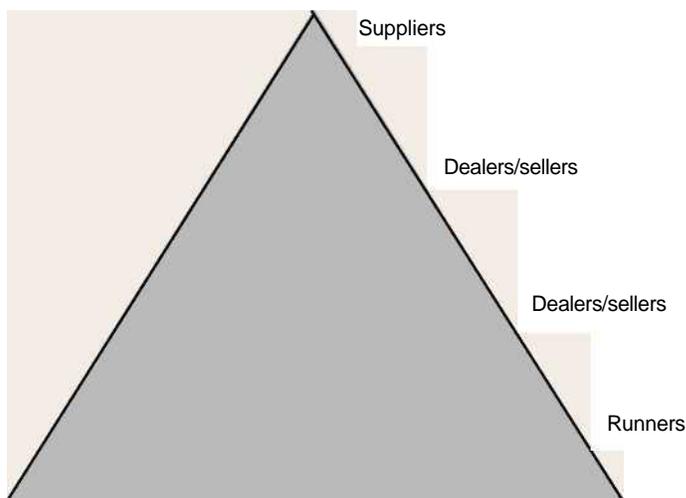
During the interview users and dealers were asked to estimate the number of dealers operating within their market. The average number estimated by users was fourteen. This was spread across all levels of distribution, except runners. The average number estimated by sellers was 17; again this did not include runners; those supplying the market numbered around four. Respondents estimated that there were up to twenty people working as runners.

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Police officers thought that the distribution system was larger and more complex. They believed that drug distribution was based around a structured hierarchy, and were aware that there were four main suppliers within their area. They reported, however, a further three tiers of distribution. At the level of tiers two and three, officers estimated that there were about 25 dealers. Below this level were thought to be a number of runners (on average this was estimated to be 34 different individuals). Estimates of the number of users in the area ranged from 150 to 1,000.

Based on information from a range of sources (users, dealers, police and agency professionals), we believe that the diagram below best illustrates the distribution network within Market 1.

Figure 2: Drug distribution in Market 1



The distribution system in Market 1 was predominantly a top-down hierarchy, controlled by a small handful of suppliers who acted as a loose consortium. All respondents described the dealing structure in Market 1 as operating along the classic pyramid structure, which was prevalent in many drug markets in the early 1980s. The market was described by some as a 'closed shop' in terms of setting up to sell. Outsiders were not welcomed and would undoubtedly be asked to either cease selling or made to sell (probably as a runner) for the already established sellers. We were told that new sellers to the market who agreed to sell for the suppliers of the market had to meet a certain profit margin before any personal money could be

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made. All of the suppliers at the top of the distribution system were described as being 'born and bred' in the area. Two police officers who described the structure stated:

"You don't get people coming in here [Market 7J] to set up. There is definitely control in ... everyone knows his place. It's not like ... [a neighbouring market] which is chaos".

"I think there's definitely a structure. There are various well-known gangs in the area and the [gang name] is one of those and that's based on a drug culture and a drug empire. There are senior members who people are frightened of. They are scared to tread on their toes - and don't. You've certainly got different levels of dealers [in Market 7J]".

Two respondents echoed the police view regarding the structure of the distribution system.

"They have got to be local lads, no-one from outside would be accepted".

"It is a closed dealing system. The men at the top will decide whether you can be in or out".

The system of drug distribution in Market 1 was reported to have changed in the last five years. It was not, however, the structure of the distribution system that had changed but the method of distribution. Previously, open street drug markets were essential in order that buyer and seller could locate one another. However, all five dealers/runners commented that the increased availability of technology such as pagers and mobile phones (in particular 'pay as you go' models) had reduced the need for this open market mode of operation. One of the runners we interviewed had attempted to deal on the streets by intercepting drug users on their way to meet other sellers. He had only been working in this way for two weeks before he was arrested in a test purchase operation - perhaps illustrating the ease with which sellers can be arrested if they attempt to operate in an open street drug market. The remainder of the sellers conducted their businesses using either pagers or mobile phones, which they replaced frequently. Two runners also reported using walkie-talkies and scanners⁷. The walkie-talkies were, however, used to alleviate the boredom of a normal selling day, not to disrupt any policing initiatives.

⁷ Scanners were used to listen into police radios to track the movement of police cars.

None of the respondents in this group sold from their own homes and all kept various amounts of drugs in different locations. Two respondents had safe houses and the remainder kept their drugs in secure places that were easily accessible. Very

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little was actually carried about their person, although one respondent admitted he had become 'lazy' and was carrying greater quantities - up to forty £10 bags of heroin and fifteen rocks of crack.

Ground rules about competition in the market seemed very clear. Two of the runners were unconcerned about competition within the market. They stated that as they were only runners it was not their business to care about the opposition. They also believed that if there was a serious bid to take over the market, the dealers working above them would take the problem in hand as it was within their interest not to have other drug sellers operating in the area⁸. One runner felt strongly about competition but differentiated between those who were from the area and those from outside. He stated that those from other areas would not be tolerated and that those local to the market would receive a 'warning'. One of the sellers commented that all competition was unacceptable: "My punters are mine, they don't buy off anyone else". All five respondents believed that weapons were becoming more of a feature within their market and four of the five carried at least one illegal gun. One other respondent reported that rival sellers from a different market had shot him. Many users described the market as violent. More recently users felt that the market was being ruled by the threat of violence rather than the actuality of violent incidents. Outside of the formal interview several respondents commented about 'being visited by men wearing balaclavas and carrying baseball bats'. Typical respondent comments included:

'As long as you're alright and you pay back If you get a lay-on [credit], It's ok, but It can get very nasty. Give them any shit and you won't just get a slap, you'll get hospitalised. There Is lots of violence, street robberies and stuff like that'.

"[My dealer] whacked me with a pole, he wanted me to buy off him and I didn't want to".

'A few years ago I started scoring somewhere else. They didn't like it because I spend a lot of money, I was visited and told who to score off'.

However, when asked to describe their particular dislikes of buying in Market 1 no-one cited violence as a concern.

The economics of drug dealing

All five respondents stated that their motivation for selling drugs was the money that could be made. All sellers were making a considerable profit. The weekly earnings of sellers ranged from £650 to £50,000⁹. Two of the runners were working

' in the past Market 1 has experienced a considerable amount of (armed) violence with neighbouring drug dealers attempting to take over the area. It has, however, quietened down considerably and rival drug sellers seem to have aborted the idea.

⁸ This amount may seem extremely high but was verified via various other sources.

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almost every week and had been since they began. One runner only sold to afford particular items and hence worked far fewer weeks in the year. The two sellers did not comment on how often they worked or for how many weeks in a year, apart from saying they had no need to work full time¹⁰.

¹⁰ Although desirable we were unable to calculate the total turnover in Market 1 as both sellers and one of the runners also sold in neighbouring markets.

Two of the respondents who described themselves as runners had both started selling whilst in their teens. They were each earning around £800 per day, selling to around 50 customers per day. Their commission or profit almost equalled the money they had to return to their seller; they made just under £700 for each ounce of heroin they sold. The last runner described himself as an opportunistic seller who only sold for short periods of time (and usually) to afford specific items, for example holidays. At the time of fieldwork, however, he was selling about half an ounce of heroin a week and making a profit of £550.

One of the drug sellers usually purchased an ounce of powder cocaine for £900, which he then sold for £1,100 - a 22 per cent profit. Although this may not seem a large profit, powder cocaine was not his primary drug. He was also buying two kilos of heroin for £36,000 and selling this amount on for £44,000. This seller could not be certain how many times a week he would purchase heroin and cocaine.

The other drug seller was running a highly profitable crack and heroin business. He only worked four days a week (these days were not all devoted to buying and selling) and not every week of the year. He would buy three to five kilos of heroin for £15,000 per kilo and sell each kilo for £20,000. However, for each four kilos bought, he was able to sell five kilos by cutting nine ounces of an adulterant into each kilo. His profit was therefore higher than if he had been selling unadulterated heroin. He was also purchasing around nine ounces of crack a week for £9,000 and selling this amount for £18,000. He had been running his business in this way for seven years.

All of the respondents were aware of the current 'three strikes' policy regarding possession with intent to supply and two believed there was a danger of being affected by it. Only one believed that the risks outweighed the benefits of dealing - unsurprisingly it was the temporary runner.

Policing

Policing drug dealing in Market 1 was tackled in a variety of ways. Locally there was a small team of officers who comprised the tactical crime unit. This unit worked covertly in plain clothes when policing known drug dealers, street dealing, premises suspected of dealing or licensed premises dealing. They used intelligence and police sources to put together operations and were, in effect, a local drug squad. Drug

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selling above street level was assigned to the force drug squad who policed drug dealing city-wide. Market 1 also had community police officers who focussed on any street-level activity and used stop and search powers on individuals who were suspected of carrying drugs on them. Despite these various resources, police officers felt they were unable to keep up with the sophisticated technology used by dealers or with the rapid turnover of drug sellers that characterised drug dealing within the area. Officers from the force drug squad were not formally interviewed as no operations had taken place within the market for some time¹¹. Two senior force drug squad officers were, however, informally interviewed.

Tackling drug selling was a complex issue for the police in Market 1. Although all police officers admitted the division had a problem with drug use and drug dealing, they believed that it had become far less visible to the local population in the last couple of years. The result of this reduced visibility meant fewer complaints were received from the public. Operationally this had produced a difficult situation for the police. Whilst they were aware that the drug problem had not been displaced, they were also conscious that officers were needed to police crimes that were of concern to the local population - namely burglary and robbery. However, although drug dealing was not a current problem for the local population, street sex work was. One senior officer commented that he felt drug dealing, using and sex work should be seen as an integrated issue¹², but he lacked the resources to tackle all of these concerns effectively.

Only five of the officers interviewed felt that current enforcement strategies effectively combated dealing. Eight believed that as quickly as drug dealers were arrested they were replaced, perhaps reflecting the level of drug dealer that is arrested within Market 1.

One enforcement strategy adopted by the tactical crime unit was to pose as drug users and attempt to purchase drugs - commonly called test purchases. Once an undercover officer has been sold to three times, the seller will be arrested and in most cases charged with possession with intent to supply. Although this method had proved successful, dealers and runners were aware of this police initiative and were taking measures to cut down the possibility of selling to undercover officers. One seller commented that most dealers in his market were now demanding that unknown "faces" consume the purchased drug in the presence of the dealer. If new buyers refuse, sellers would now assume they are police officers and threaten them. One senior officer commented that although safety is a paramount concern when conducting test purchases, there is always an element of risk when conducting covert operations. One drug seller commented:

¹¹ Towards the end of fieldwork one senior officer disclosed that the force drug squad *were in* the process of mounting an investigation within the policing division of Market!.

¹² At the time of fieldwork senior police personnel and the local council *were* discussing various options to minimise the disturbance to the local community and the risk to sex workers of operating *in* an open street sex market.

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"I would have to have an introduction first and take them out for a smoke [either heroin or crack cocaine]. I would batter them if they won't use".

If this is the case, it has serious implications for the further use of test purchases as a means of combating street dealing.

All officers believed that the local community considered drug use and dealing as a problem. Just over half felt that the community considered them ineffective in responding to drug dealing and drug-related crime.

Few users or dealers were concerned about the police within Market 1. One user commented about the police that:

"I don't feel stressed out at all [by the police]. There are no police so it is easy. I can always get drugs whenever".

However, almost half (16) had been disrupted by the police in some way whilst attempting to purchase drugs. For most of this group (9) the disruption constituted the police driving or walking past them. Others (3) believed the police were following them to discover where they were meeting their dealer. The remainder had been arrested just after purchasing their drugs.

Demand reduction through treatment

We asked drug buyers from Market 1 which treatment services had been of help to them, and what treatment options they felt their area lacked. Respondents in Market 1 had accessed treatment services on average five years after they had started to use their main drug. Over four-fifths (28) had accessed a Community Drug Team (CDT) and over two-thirds remained in contact with this service. Only one respondent had ever been to a residential rehabilitation centre, perhaps indicating the difficulties that can arise with funding applications.

Over half (20) stated that they had reduced their drug use since seeking assistance. Seven directly attributed this reduction to the fact that they were prescribed methadone. We asked respondents what treatment services they would like that were not readily available. Fourteen believed that more responsive prescribing¹³ was necessary and that waiting lists for methadone and other pharmaceutical substitutes were, in most cases, too long. Interviews with agency professionals revealed that few NHS GPs were willing to prescribe methadone and that waiting lists for those who were willing were up to 12 months long. Moreover, a new system of titration¹⁴ had recently been introduced which further complicated access.

¹³ Providing problematic users with a prescribed alternative to their main drug in sufficient quantities.

¹⁴ Titration is a method of tolerance testing. Users attend a clinic in order to receive methadone in measured dosages over a period of hours, until such time that they are thought to have reached a dosage level of sufficient quantity to counteract the effects of their withdrawal from heroin.

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Of the 10 respondents who had used crack cocaine for more than 20 days in the last month, over half (6) reported that their use had either increased or stayed the same. This indicates a need for agencies to incorporate tailor-made treatment responses for stimulant users into existing services.

The predominant service in the market was a drop-in facility through which a needle exchange scheme operated. Limited building space meant that the agency could not expand their services and did not have adequate space to see clients for private counselling or support sessions. Although Market 1 was an ethnically diverse area, members of ethnic minorities were under-represented in treatment services. However, at the time of fieldwork, research made possible through Single Regeneration Budget (SRB) funding was being conducted by the local agency in order to address the problem.

In summary

- Those we interviewed in Market 1 were predominantly heroin users spending on average £200 per week. The most common ways of raising money for drugs were acquisitive crime, sex work and state benefits. Over half were able to obtain drugs on credit.
- The market was described as extremely busy - most buyers reported no difficulty in locating and purchasing drugs.
- We found no open street market. Most buyers bought via a closed market system. Deals were generally arranged via mobile phone.
- The exchange of drugs and money or goods was generally undertaken in public places.
- The distribution system appeared to be a top-down hierarchy, controlled by a small group of suppliers.
- It was reported that new sellers trying to break into the market would find it problematic, the view being that the market was a closed shop.
- Respondents reported the market to be violent with the increasing presence of firearms.
- A variety of policing methods had been used in Market 1 including; covert operations, intelligence gathering and street-level policing. No major police operations had been launched for some time.

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- Police believed the public were more concerned about crimes such as burglary and robbery since drug dealing had become less visible.
- Police personnel believed current enforcement strategies were ineffective and that the market was becoming more difficult to police because of the use of new technology.
- While half of the buyers we spoke with reported police activity had disrupted their activity, only four had been arrested after purchasing drugs.
- Drug users accessed treatment on average five years after they started to use their main drug.
- Over half of those interviewed had reduced their drug use since seeking assistance from a treatment service.
- Both drug users and agency professionals believed waiting lists for methadone prescriptions were unacceptably long.
- Agency professionals believed treatment services in the area needed expanding to meet the needs of all drug users (particularly members of ethnic minorities and stimulant users) within the local community.

4. Market 2

As with Market 1 we interviewed those who were buying drugs, selling drugs or both in Market 2. Due to the highly fragmented nature of the market, we present the findings on drug distribution based on interviews with sellers as case studies.

Market 2 is situated in an ethnically diverse inner city borough adjacent to a main arterial road that leads into the city centre. Housing in the area is privately owned or rented interspersed with local authority estates, some of which have a reputation as 'trouble spots'. Local amenities are poor and the main shopping street is run-down. The area has a selection of voluntary and statutory treatment services, alongside private prescribers. There has been a concerted effort in recent years to eradicate the existing open drug markets in the area. This has largely been achieved by joint work between the police, council officials and local residents. However, there continues to be a visible presence on the main high street of both street drinkers and problematic drug users.

Profile of drug buyers

Thirty-four drug users and three drug sellers were interviewed in Market 2. Table 2 below profiles respondents buying in Market 2.

Users	25
User/dealers	9
Male	24
Female	10
Average age at interview	34 years
White	26
Black	3
Asian	4
Mixed Race	1

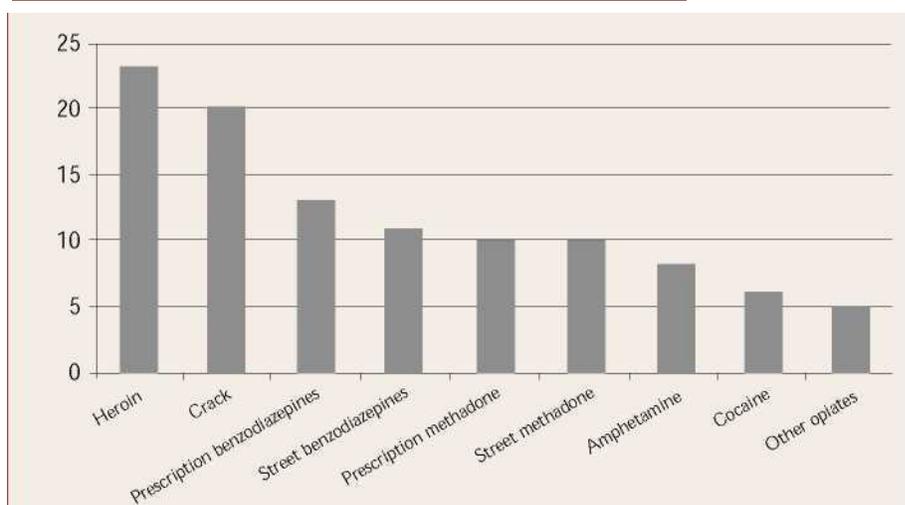
Drug Use

Although buyers in Market 2 were predominantly poly-drug users (only four were single substance users) respondents were asked to state which substance they used most regularly. As illustrated in Figure 3 heroin and crack figured prominently among many respondents. History and patterns of use, however, differed greatly

MARKET 2

within the sample. Of those using heroin (23), use began on average at 20 (age range 12 - 48). Thirteen had begun their use before the age of 18. The average age of first crack use was 24 (age range 17 - 39). Almost four-fifths had injected at least once, with 23 injecting at the time of interview. The average age of first injecting was 25 although again this ranged from 15 to 58.

Figure 3: Drugs used in the month prior to interview in Market 2



Twenty-three respondents had used heroin in the month preceding interview, almost two-thirds every day. The average (median) price for a gram of heroin was £50, although most respondents bought in smaller amounts. The average age of those injecting was 38 - considerably higher than those who were smoking or chasing whose average age was 21. Of the 16 respondents who were injecting heroin, five were also injecting crack.

Average weekly spend on drugs of those in Market 2 was £155 per week. Excluding those in receipt of prescribed drugs, the average weekly spend increased to £225 per week. Those using crack cocaine daily (5) had an average weekly spend of £410, reflecting the compulsive nature of crack cocaine use and the considerable resources needed to sustain daily use. Although only five buyers were using crack daily, 20 respondents reported using it in the month prior to interview.

The Market

Respondents described Market 2 as 'active': drugs could be obtained twenty-four hours a day, seven days a week. Buyers almost always contacted sellers using mobile

MARKET 2

phones. The organisational structure of Market 2 was markedly different to that of Market 1. Unlike Market 1 which operated a structured hierarchical distribution system, Market 2 was described as a 'free market' and sellers worked independently. Buyers also felt there would be little competition or resistance to new sellers setting up in the area¹⁵. Although most buyers bought through a closed heroin and crack market there was also an open, mainly street-based illicit pharmaceutical market. The pharmaceutical market had quietened down in recent years, but it was still visible and had a city-wide reputation. Buyers who bought from this market believed that it was less dangerous than a nearby alternative pharmaceutical market and that a wider choice of drugs was available. All but three buyers within this market had initially contacted their seller through a closed distribution network.

¹⁵ Resistance was spoken of at market supplier level but not at street dealer-level by those who sell to street dealers.

Most buyers (28) lived locally. Only three respondents had first approached their dealer on the street; the remainder (31) were introduced to their dealer through friends, partners or other acquaintances. All but one respondent acquired their drugs through a closed market system and two-thirds (23) had been using the same source for at least a year. For 13 respondents, transactions took place off-street, in either the buyer's or the seller's house - a direct contrast to Market 1. The remainder made the exchange on the street or in the seller's car. The majority (28) suggested that it was still relatively easy to buy from the street, and that strangers to the area would have little problem locating a seller. However, three respondents commented that the risks associated with buying from an open market were high.

"You've got to work your way in. You've got to suffer two or three rip-offs before you get a decent connection."

When asked to describe positive features of their drug market, most (31) buyers stressed the importance of having access to a stable supply. Quality assurance and a feeling of security or safety were also seen by some as a characteristic of this market. Opinion as to whether Market 2 was violent was divided. Sixteen respondents had experienced some form of physical assault, most attributing these attacks to dealers or other drug users.

In most cases there was an element of trust between buyer and seller - buyers could rely on the quality and size of their deal, and just under three-quarters (24) received credit from their dealer. We asked those who received credit what they thought the consequence would be if they could not, or did not repay a debt. Three-quarters believed that nothing would happen; four believed their dealer might refuse to continue selling to them, and only one respondent felt that there might be violent repercussions. To a much greater extent than in Market 1, buyers could expect a degree of 'customer care'. This can perhaps be explained by the volume of dealers

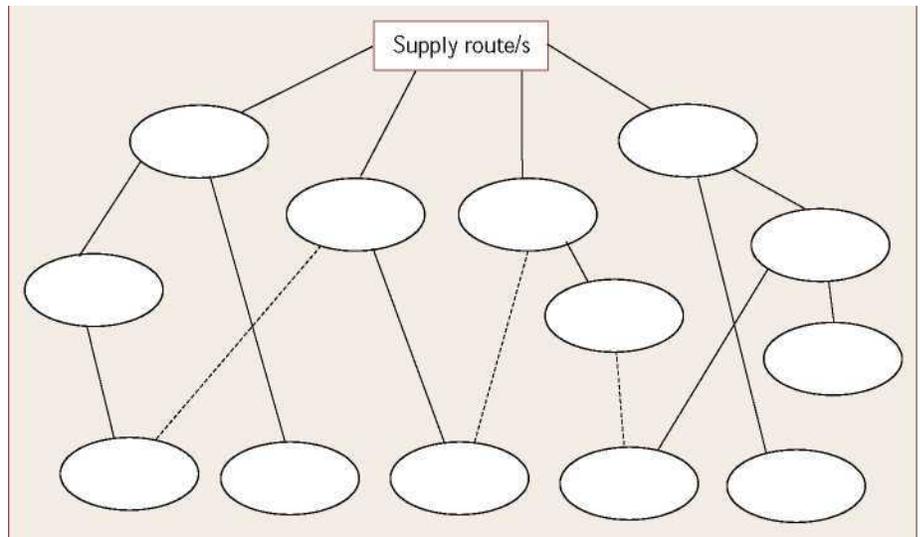
MARKET 2

operating within the market - the average estimated by users was 35. Sellers knew, for example, that if they kept their customers waiting too long or supplied inferior quality drugs, their buyer could, and would, go elsewhere.

Buyers were asked to describe a typical drug transaction. For most (30) initial contact was made by phone. The remaining four reported that they went directly to their dealer's house. Buyers stated what they wanted over the phone using a code, and a meeting place was agreed.

Given the fragmented nature of this market, it is hard to generalise about how dealers operated. The consensus of all those interviewed was that dealing networks in Market 2 were not controlled by a structured hierarchy, but were run by independent entrepreneurs as shown in Figure 4:2. What was less clear was the organisation of the supply routes feeding into the market. We have offered three case studies to illustrate how some sellers operate within the market.

Figure 4: Drug distribution in Market 2



N.B. Dotted lines indicate a less frequent supply route.

Case study one: Bob

At the time of interview, Bob was in his early twenties, single and lived with his family. Although he had a legitimate business which occupied him on a part-time basis, his main form of income came from selling cocaine powder and cannabis through a closed market system. Bob's only criminal involvement was in dealing and he had had little previous contact with the criminal justice system. Bob had never been a dependent or chaotic user.

At the age of 15, Bob started buying cannabis for himself and his friends. Before long, this escalated to buying for friends of friends and had soon developed into a lucrative business. After four years of selling cannabis, he started selling cocaine. Again, this was through a closed market system. On average, Bob was selling to seven customers a day. The beginning of the week was usually quiet, with the volume of trade increasing towards the weekend. Holidays were particularly busy periods, especially Christmas and New Year.

Customers contacted Bob via one of two mobile phones that he owned. Having identified themselves, they stated what they wanted using a prearranged code. In most cases, Bob delivered to his customers. The exchange usually took place in a private or semi-public place. Customers who were considered to be good friends could expect to get a substantial amount of credit - in some cases up to £1,000. However, in order to qualify for this amount a buyer would have to come from a solid financial background. Despite this precaution, Bob had in the past found it necessary to threaten one bad debtor with a gun, although as a rule, he did not carry a weapon.

Bob met with his supplier roughly once a fortnight. They were introduced by a relative of Bob's and had since developed what he considered to be a close relationship. The amount Bob bought depended on several factors, but he would usually purchase at least half a kilo of cocaine and a kilo of cannabis. Occasionally he would do a favour for a friend and buy a kilo of cocaine giving half of it to a friend to sell. Cannabis was usually sold on in 'nine bars' (9oz blocks). Earnings from this illicit business netted him around £1,300 a week, enabling him to maintain a very comfortable life-style. Money was his main motivation for continuing to sell drugs.

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Case study two: Joe

At the time of interview, Joe was in his late forties. He was single and had not worked for some years. Joe had a long involvement with the criminal justice system and was first convicted at the age of 20. He had around twenty previous convictions, including three for possession with intent to supply, and had been to prison on a number of occasions. Joe had been selling drugs for almost thirty years, starting with cannabis. In his late twenties he moved on to selling cocaine powder and then crack cocaine. Although he did not consider himself to be a problematic user, he smoked up to half an ounce of crack cocaine a day. Joe had no intention of ever getting a legitimate job and believed that dealing was his only option for earning a living - 'You've got to live. Dealing and pimping were the only means open to me to make money, but I didn't think I'd make a good pimp - I like women too much.'

Joe had four people working for him and sold from off-street locations through a semi-open market system. Customers would either contact him by phone, or come directly to flats in which he had set up his employees. He sold drugs six days a week to around fifty customers a day. As well as selling from flats, he also conducted transactions on the street although he was never directly involved in the exchange. If a customer approached him, he would signal to one of his 'soldiers' and they would distribute the drugs whilst Joe took the money. Good customers could expect up to £100 credit. Joe believed that the market had become more violent in recent years and carried a knife for protection.

Joe was very secretive about his operation although he did state that he used several different suppliers. Supplies were mostly delivered to him; however, when it was necessary to make the collection himself, he chose to travel by bus rather than by private car or taxi as he believed this was much safer.

Joe was unwilling to say how much he was selling a week, or how much he earned. He firmly believed that the benefits of dealing far outweighed the risks.

Case study three: Harvey

Harvey was an eighteen-year-old crack seller; he was also a dependent crack user. He had been using the drug regularly for about two years and was smoking up to 15 rocks a day. He worked with one other individual who he considered to be "the brains behind the operation". He never referred to his partner by his first name and always called him 'the boss'. Money was not the motivating factor behind Harvey selling drugs - his own crack use was. The quantity he was smoking on a daily basis would have cost a considerable amount of money if he had not been selling. He rarely questioned the decisions his boss made and had no idea where the drugs came from or how much profit his 'partner' was making, but guessed that the split was probably 80/20 in his boss's favour. Although he claimed to know his partner very well he also stated that there was little trust between them.

He sold drugs in the same area that he lived and stated that there was never a shortage of customers. He described the market he worked in as busy and commented that violence was becoming more of a feature. Although Harvey always carried a knife, he had never used it and stated that he would never resort to violence if he had problems with a customer. He claimed that it would be drawing attention to himself, "which is the last thing I need".

Harvey believed that on a good day he was easily able to sell around 200 rocks of crack. The distribution system operated by his boss and himself worked along the lines of a semi-open market. Their operation was based in a flat and they rarely sold on the street. However they had few vetting procedures if individuals unknown to them phoned or turned up at the flat door. The only customer Harvey would consider giving credit to was his mother, who was using crack daily. Harvey accepted money, jewellery, gold and electrical equipment in exchange for drugs. He was concerned to ensure the quality of the drugs he sold and would always smoke it himself first before buying and would also ask a sex worker (whom he trusted) to inject the crack to make sure it was safe for injectors.

Harvey was aware of the three strikes penalty for individuals who were convicted for possession with intent to supply and stated that it was something he would 'mull over' at some point.

MARKET 2

Policing

We interviewed eleven officers in Market 2, two sergeants and nine constables. Just under two-thirds described the market as 'lively', with crack being the predominant drug¹⁶ although heroin, amphetamine sulphate and cocaine powder were also easy to obtain.

¹⁶ Although those we interviewed disclosed slightly more heroin use, crack use appears to be increasing in popularity. Drug agency professionals said that poly-drug use was the norm in their area, stating that it would be difficult to assert with any certainty what illicit substance is used most widely.

The average estimate of the number of users in the market was 220 with a range of 25 to 300. Officers were reluctant to estimate the number of dealers operating in the area, perhaps due to the fragmented nature of the market. Of those who did (5) the average number was 70. Unlike Market 1, officers were unable to distinguish between drug dealers or runners, again illustrating the fragmented nature of the market.

Officers maintained that the level of drug distribution occurring through geographically fixed open markets had decreased. Most believed this was due to sellers changing how they sold their drugs, and felt that transactions were now pre-arranged using mobile phones. Furthermore, the increased use of crack within the market had led to the emergence of several 'crack houses' from which sellers operated. The police commented that as fast as crack houses were closed down others appeared on their division. They did, however, feel they were well informed as to their whereabouts and took immediate action when they discovered premises being used in this way. Sales of illicit pharmaceutical drugs continued to be conducted through an open market.

All officers believed that sellers in the area were primarily independent operators. All but two considered that weapons were a feature of the market, with guns becoming increasingly common. Although the consensus was that violence would be used to resolve disputes between sellers, five officers could only speculate that this would be the case. One officer stated that incidents arising from competition between sellers were not usually reported to the police, making it difficult to comment with certainty.

At the time of interview, most officers (10) were unable to highlight any specific drug enforcement strategy in their division aside from reactive policing. One stated that test purchases were occasionally used, but that this style of operation was dangerous. Street crimes were a priority and at the time of fieldwork units were tasked to deal with both robbery and burglary.

"[Current enforcement strategies are to] *tackle robbery then burglary. No one gives a damn about dealers. They're too much trouble.*"

MARKET 2

Officers believed that the increased use of mobile phones had had an impact on the effectiveness of disruptive policing. High visibility policing continued to have some effect on the market although just over a third of officers conceded that this generally resulted in displacement to another area.

We asked buyers who used the market whether they thought the area was heavily policed. Although just under half (16) believed this to be the case, only 11 respondents had ever been disrupted by the police during the course of a drug transaction. For four this involved the police just driving past. Four had been stopped and searched moments before they bought drugs and three stated that they were known to the police and therefore had to be careful when they were just about to purchase drugs. Just over half (10) of those who believed the market was heavily policed had been arrested for possession of a drug in Market 2; for the majority it had only been the once.

Drug users were divided when expressing an opinion about the police. Eight felt that they had a job to do and that the treatment they received had always been fair. Just under a third (11) of respondents felt that they were unqualified to pass an opinion on the police as they had had little or no contact with them. The remainder held fairly or very negative views regarding the police. Many users felt that the police were ignoring large-scale drug sellers and concentrating on smaller dealers and users.

"I know they've got a job to do, but they're going about things the wrong way. It's no good picking up users".

"I think they spend too much time picking up small dealers and users".

Treatment services within the area were, however, in greater contact with the police than ever before. One worker commented that he had been 'astounded' when two beat officers had turned up at the service to introduce themselves and find out more about the work the service did. They also asked if they could take some agency leaflets to carry around with them.

We asked officers what they thought would improve the situation. Nine emphasised the need for intelligence led policing, an integral part of which is the use of police sources. Over two thirds believed that sources could be utilised more effectively.

"Informants are the crux. We can hit and hope in other ways, but we need to use intelligence led policing as our main weapon".

MARKET 2

In order to make inroads into reducing market transactions officers spoke of the necessity to target sellers more effectively. Although officers were aware of the drug problem in their area, resources and tasking meant that drug sellers were often overlooked in an attempt to combat burglary and robbery. Many officers spoke of the links between drug misuse and acquisitive crime but conceded that to mount investigations into sellers operating above street level would require a restructuring of policing initiatives.

Officers appeared somewhat despondent when discussing their rate of arresting and securing successful convictions against drug dealers. One officer spoke about the problems of 'keeping up' with the technology that drug dealers use and commented that she had been waiting for a trace on a mobile phone for over a month. She was in little doubt that the phone would no longer be in use by the time she received the information she needed.

All officers felt that the local community was adversely affected by drug use and dealing, and most (9) believed that residents were dissatisfied with the way police were tackling the issue. One officer commented that if public confidence in the police was strengthened, residents might be more prepared to go 'out on a limb' for the police in providing them with information.

Demand reduction through treatment

The treatment service we contacted in Market 2 had seen 633 individuals in the preceding year. As in Market 1, we asked drug buyers and two agency professionals to comment on treatment facilities in their area.

Treatment experience

The majority of drug users (30) interviewed in Market 2 had previously accessed treatment services. As with Market 1, this was on average five years after they had first used their main drug. Facilities that had been accessed most frequently were voluntary street agencies and Drug Dependency Units (DDUs). Sixteen respondents reported that they had at one time accessed a self-help group, although only two continued to attend. Other services mentioned included needle exchanges (19), in-patient detoxification units (13) and residential rehabilitation centres (11).

Over half (17) of those who had sought assistance with their drug use felt that their use had reduced or stabilised. As in Market 1, seven attributed this to their methadone prescription. Prescribing services in Market 2 were considerably better than Market 1 - methadone was distributed by a number of services including the

MARKET 2

DDU, NHS doctors and private doctors, hence waiting lists were shorter. However, seven respondents still believed that there was a need for prescribing services to be more responsive. Other suggestions included a greater flexibility with regard to opening times, services aimed at young people and women, and increased services for stimulant users.

The agency professionals we interviewed in Market 2 echoed these needs. Although there were a limited number of projects to which they could refer stimulant users, clients were often lost because of the fact that places were not readily available. Increased funding for residential rehabilitation centres was also considered important. We asked agency professionals what they thought would reduce the incidence of individuals becoming drug dealers. Both believed that issues such as education and social exclusion should be examined in tandem with enforcement strategies.

In summary

- We interviewed poly-drug users who were primarily using heroin and crack. On average they were spending £155 per week.
- Open street drug markets in the area had largely transformed into closed market systems, however, pharmaceutical drugs continued to be predominantly traded through an open street-based market.
- Buyers always contacted sellers by mobile phones and many transactions took place in private homes. Most reported they had established relationships with their sellers.
- There appeared to be no structure to the market, a 'free market' system existed with many sellers working independently.
- Respondents in Market 2 found it difficult to estimate numbers of dealers or distinguish between different 'workers' in the market. This was probably due to the fragmented nature of the market.
- Police officers felt high visibility policing would have little impact on current dealing patterns. At the time of interview officers were unable to identify any specific drug enforcement strategy aside from reactive policing. Intelligence led policing was the main strategy identified by officers as the way to improve enforcement.

MARKET 2

- All officers felt the local community was affected by drug use and dealing and were dissatisfied with police approaches to tackling the problem.
- Only 11 buyers reported being disrupted by police during the course of a drugs transaction. Just over half (10) of those who thought the market was heavily policed had been arrested for possession in the past.
- The most frequently accessed treatment services were voluntary street agencies and drug dependency units.
- Agency professionals believed stimulant services (although available) needed to expand or increase their client capacity due to the increasing number of primary crack users in the market.
- Respondents felt that since seeking treatment their use had either reduced or stabilised.

5. Police sources

Part of this study involved interviews with police sources - or informants, as they are more popularly known. Although police sources have been used for many years, the need to protect their identity has often hindered any meaningful research on their usefulness. Public perceptions on their effectiveness and contribution to crime reduction strategies are therefore still hazy, and are, more often than not, probably shaped by media stereotypes. It was not until 1995, however, that the use and management of sources underwent a radical change. The police now place great significance on the training and recruitment¹⁷ of handlers and controllers, and the importance of working within the parameters of the law.

We interviewed five police sources in Market 2. Police in Market 1 were unable to help with this part of the research as no handlers or controllers felt confident enough to introduce researchers into the relationship with their sources. The protection of sources is of paramount concern to handlers and controllers. Their identity is only known by a few individuals and hence introducing others is a difficult and lengthy process, and one that is understandably not always possible. We did, however, interview officers who handled and controlled sources in both markets.

Sources were interviewed in an attempt to explore the motivation behind becoming a source. They were also asked about their perceptions on what could be done to effectively police local markets, and what effect more traditional policing initiatives (stop and search, Operations Bumblebee and Eagle Eye¹⁸) had on street crime. They were also asked about the relationship they had with the police and if they were being utilised effectively. Officers from Dedicated Source Units (DSUs) were interviewed about policing drug markets and the role that sources play.

All five sources interviewed were men over the age of 35. All had experience of the criminal justice system, although only three had actually served prison sentences. Reasons for becoming a source were often complex and had changed over time. All were initially approached after an arrest. For one motivation stemmed from the belief that criminal activity in general, and drug markets in particular were becoming more violent, and it was not something he wanted to be involved in any more. Another began providing information due to a grudge against a drug dealer but now thought that his motivation was based more on helping to 'clean up the area'.

All five were asked to describe drug markets and the changes they had noted over the last five years. They believed that heroin and crack markets were becoming more violent and the use of firearms had increased. Some attributed this directly to

¹⁷ There are now 'Codes of Practice: Covert Technique Requirement for Trained Handlers', which were published in May 1999.

¹⁸ Operations Bumblebee and Eagle Eye refer to policing operations for burglary and street robbery respectively.

POLICE SOURCES

the growing emergence of crack. All five believed that drug markets were more difficult to police because of the increased use of mobile phones.

Sources were somewhat disparaging when they discussed the effectiveness of traditional policing initiatives. None believed stop and search powers had any impact on drug dealers and one commented that the power was only useful in targeting drug users. Other operations (burglary and robbery initiatives) we asked about were also met with little enthusiasm. There was a general consensus that short-term effects did occur but that the police always failed to follow up on operations and hence they were of little value. One source also commented that advertising campaigns are highly ineffective and only serve as a source of amusement and a waste of police funds. The only effective traditional policing initiative that sources saw any value in was high visibility policing, which one commented was highly irritating for a dealer or runner if they were attempting to arrange a meeting place with a user.

Sources were asked what they considered to be the way forward in policing drug markets. All five believed that current enforcement strategies (at a divisional level) were having little impact on drug sellers working above street level. They felt that the way forward was through intelligence led policing and through the effective management and use of sources. One commented that:

"It [the drug market] is very difficult to police. Most [dealers] think they are untouchable. They never touch the drugs. Informants are invaluable. We have access to places and people that the police would never get access to".

One interviewee commented that he felt there needed to be dedicated teams within police stations to handle the volume of information that was passed regarding drug dealing. Police officers from DSUs confirmed that a sizeable proportion of the information they received relates to drug dealers; however, they felt there was a paucity of officers available to police middle level dealers. These sentiments were echoed by officers in Market 2 who felt their area was in need of drug task forces connected to DSUs. The Pearce Report commented about this dilemma as far back as 1978 emphasising that "intelligence must not be collected for its own sake to be kept in files somewhere but ... must be passed on at all stages to those able to act upon it". (ACPO 1978: para. 10). Although interviewees felt that they should be rewarded only for information that was acted upon, two said that on previous occasions the police had not acted (usually due to a lack of officers) and as a consequence crimes had been missed. The result of this was neither received any money, a frustrating factor for both.

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Officers who worked within DSUs felt that drug distribution systems operating above street level could be effectively policed either by covert operations or by gathering information via tasking. Tasking involves directing individuals to access particular information with the specific aim of filling in gaps in criminal (intelligence) knowledge. The sources we spoke to felt this style of management was in some ways far more effective than just simply being asked to keep their 'eyes and ears open' and stated they would be happy to be tasked.

In order to be successful the relationship between source and handler must be managed on a highly professional basis. Officers we spoke to believed it was necessary to spend time building a relationship based on trust and honesty with their source. Sources believed the same. All stated that the relationship they had with their present handler had not broken down because they felt they were treated with respect and also because they trusted their handler:

"He is honest with me, and I with him. I feel that he uses my information usefully. We respect each other's judgement".

Although only a small number of sources were interviewed, there was a general consensus from sources themselves, specialist officers and uniformed officers that middle-level drug sellers could be more effectively policed by utilising existing sources and recruiting others like them. In summary we found that:

- motivation often changes over time and this must therefore be monitored;
- all believed that most drug markets were now closed, more violent and organised via mobile phones therefore proving far more difficult to police;
- no source felt traditional policing methods were effective, except for high visibility policing;
- the volume of information received on drug dealers is more than present policing structures can cope with. The result is that DSUs are unable to act upon some of the information received;
- all sources interviewed were happy to be tasked by the police; and
- the relationship between the source and handler can be fraught with difficulties and must therefore be managed correctly with adequate support and training provided.

THE VIEWS OF THE COMMUNITY

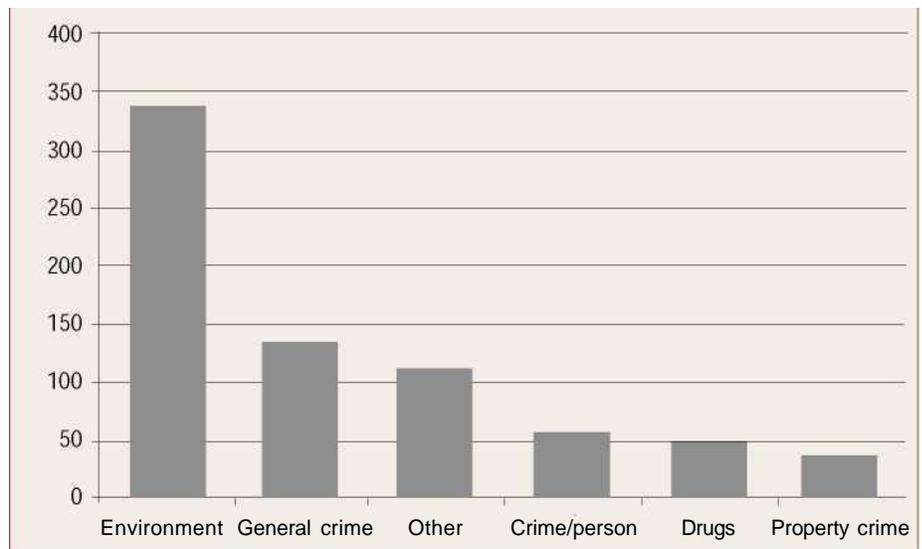
6. The views of the community

In this section we present the views of community members from Markets 1 and 2. We carried out the interviews to assess the impact, if any, of the drug market on those who lived or worked in the area. Respondents were unaware that the answers were to be used in a study specifically on drug markets. If they asked what the survey was for they were told that it was about their local area. This was done to avoid response bias: if we had said that the survey was about drugs, undoubtedly they would have taken their cue from us, and identified drugs as a problem.

We conducted 400 interviews - 200 in each area. These were divided equally between local residents and business employees. The results have been combined, as there was very little difference between the two sub-samples. Only where differences emerged have we presented findings for the two separate markets. Residents were quota-sampled to reflect the local population; however, business residents were sampled until target numbers were reached.

Members of the business community and local residents were asked what three problems in the area they thought should receive attention. Figure 5 illustrates the primary concerns. The most common concerns were related to environmental issues (for example, lack of amenities, pollution and litter). Only a minority identified drugs as a point of concern.

Figure 5: Concerns of local communities



THE VIEWS OF THE COMMUNITY

Respondents were then asked directly if they thought drugs were a problem within their area. Almost 80% (315) believed they were. However, when asked if they were aware of any police activity regarding drugs almost 85% (330) could not recall any publicised activity or local initiatives. This does not, in itself, highlight police inactivity but does point to the fact that few policing policies or successful operations are reaching the attention of the local population.

Just under a third (122) of those interviewed had been the victim of a crime within the previous year. Of the 122 the most frequently reported crime was street robbery (32)¹⁹. In Market 1 nine businesses had been the victim of an armed robbery and a further eight had experienced a robbery where no weapons were used. All of those who had been the victim of an armed robbery had reported the incident to the police although very few felt satisfied with the police response. Respondents from Market 1 felt there was little will on behalf of the police to patrol the area effectively or take criminal activity in the area seriously. Although this may be the perception of respondents within Market 1 the police felt that they addressed the issue of crime very seriously within the area and took time to canvass local opinions of the population.

¹⁸ Although these figures are not directly comparable, reported robbery rates *were* higher than those reported in the British Crime Survey (1998) in which street robbery accounted for only 2% of all reported crimes.

Respondents were asked what action they thought the police should take to tackle drug issues. Almost half of all those interviewed believed that there should be more police officers patrolling the street. We asked respondents about the visibility of uniformed officers in their area. In Market 1, just under two-thirds (128) believed that there had been a decrease in uniformed street patrols in the last six months, compared with 76 individuals in Market 2. Although the figures were small, four times more people in Market 2 than Market 1 stated that the police should concentrate enforcement efforts on suppliers and dealers rather than runners and users. Respondents were asked to concentrate on what they felt the police should be doing. However, a number felt that the issues that surround drug use and dealing were not the sole responsibility of the police. Suggestions that were outside the remit of the police but put forward nevertheless included:

- increasing the penalties for those caught supplying drugs;
- increasing the range and number of treatment services for drug users;
- educating children of all school ages about the risks of dependent use and selling drugs; and
- increasing (or creating) better recreational facilities for young people.

Finally respondents were asked to say whether levels of broad categories of crimes had increased, decreased, or stayed the same²⁰ in the previous six months. In both

²⁰ Respondents *were* also able to answer 'don't know'.

THE VIEWS OF THE COMMUNITY

markets members of the community believed that the incidence of drug dealers and users had increased. Few respondents were able to comment on drug paraphernalia; in both markets over half of all respondents replied 'don't know'. Just under a third of those interviewed in Market 1 believed that the number of sex workers had increased, and almost half of those interviewed in Market 2 thought that street violence had increased.

In summary

Although drug use and dealing were seen as a problem in both markets, many from the local community did not view drugs as a primary concern. However, from the interviews conducted it appeared that community police officers needed to be more visible to the local populations they served. Although only a small percentage in terms of numbers, there was an appreciation among local communities that the police could not be the sole agency responsible for eradicating areas of drug dealing and drug use.

7. Summary and recommendations

This study has looked at the distribution systems of two drug markets and the impact of low-level enforcement upon them. This final chapter summarises our main findings, and draws out the implications for policy.

Summary of main findings

Our findings are based on structured and semi-structured interviews with police officers, agency professionals, police sources, drug users and dealers. We are inevitably tentative about the conclusions we have drawn as some respondents may have had reasons to be less than frank with us, and may have provided partial or incomplete accounts of their involvement in the market. Nevertheless, we have confidence in our main findings, because these were corroborated by different respondents occupying different roles in the relevant market.

The two markets

Market 1 was predominantly a heroin market, although crack distribution and use was becoming more widespread. Market 2 was a dual heroin and crack market. Both markets' clienteles included a significant proportion of dependent users. We cannot say what proportion of turnover in each market was accounted for by problem users. Given their levels of use, however, we would expect it to be a large minority.

Both markets operated closed distribution systems, although alternative selling systems were also present in Market 2. Drug distribution in Market 1 had a clear pyramidal structure, controlled by a small group of suppliers; sellers working at retail level could not operate without the agreement of these suppliers. In contrast, Market 2 had a 'free market' system with most sellers working as independent operators. In both markets most transactions were arranged by mobile phones.

Market 1 was described as violent. Indeed, the control exercised over it by the suppliers was maintained explicitly through the threat of physical violence. Both markets had seen an increase in the use of firearms. The benefits of operating in either market were clearly seen to outweigh the risks: sellers were making considerable profits which could be maximised if they were selling both heroin and crack.

Policing

Few sellers in either market reported being concerned about police activity. Nor had there been a significant number of recent arrests in either site. Whilst conventional policing methods were able to achieve a considerable impact on open street markets, they seemed to have little effect on closed ones in which communication was largely by mobile phone. The police officers we interviewed believed

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intelligence-led policing involving the use of sources might be the most effective way to disrupt market systems. This implied setting up divisional drug task forces; without some such structure it would be impossible to manage and exploit the intelligence drawn from sources.

Police sources felt that high visibility policing had had an effect on drug markets, and community respondents wanted to see more officers patrolling known drug market areas. However, on the whole, local community members, although concerned about drug use and dealing, felt environmental issues were a more immediate problem.

Demand reduction

In Market 1 dependent users had access to limited treatment services; in Market 2, they had a greater choice of service. However, treatment services in both sites were reaching only some parts of the population of problem drug users. White male heroin users in their late twenties and early thirties continued to dominate caseloads. Younger drug users, women, and users from ethnic minorities made up only small proportions. In Market 1 there was a limited and rather inaccessible methadone prescribing service. Treatment providers in both markets felt that prescribing services needed to provide services which were more responsive to drug users. They believed that this would help to reduce the number of current service users who feel the need to supplement their methadone use with illicit street drugs. Moreover, they believed that treatment facilities needed to tailor their services to respond more effectively to stimulant users.

Table 3 'compares and contrasts' the key features of the two markets.

Pointers for policy

Our suggestions about approaches to tackling drug markets fall into three categories. Firstly we examine how police forces can increase arrests of drug sellers. This discussion draws on the views of police officers, sources and drug users. Secondly we look at ways in which the criminal justice system and treatment providers can work together to improve access to services for drug users and improve existing services in an attempt to reduce the turnover of illicit drug markets. Finally, we consider some techniques that could be used to manipulate a drug market environment to make it less amenable to both drug sellers and users.

Drug sellers and enforcement

Both markets we studied had been transformed from open street markets to closed ones. This process coincided with the explosion in ownership of mobile phones.

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Table 3: The markets at a glance

	Market 1	Market 2
Structure of market	Pyramidal	Free market system
Type of Market	Predominantly heroin	Dual heroin/crack cocaine
Type of distribution	Closed	Closed
Buyer/seller contact	Mobile phone	Mobile phone
Spend per week (users)	£200 (range £20 - £1400)	£155 (range £30-£825)
Earnings per week (sellers)	£7,000	
Violence in Market	Controlled by threat of violence	Sporadic violence
Use of firearms	Increased in recent years	Increased in recent years
Police structure	Local and force drug squad	No dedicated unit within police division
Police perception of the impact of current enforcement	Limited impact. Runners replaced soon after an arrest. Sellers quickly adapt to police strategies	Limited impact. Market geographically displaced. Sellers quickly adapt to police strategies
Effect of police activity on market participants	Sellers/users unconcerned by police	Sellers/users unconcerned by police
Treatment services	Access limited and services only reaching particular drug users	Wider choice of services. Drug-using population better represented
Private prescribers	No	Yes
Methadone prescribing	Considered inaccessible and unresponsive to needs of users	Accessible but considered unresponsive to needs of users
Stimulant services	Considered inadequate	Considered inadequate

Changes in communications technology provided the markets with a means of adapting to enforcement strategies targeting open street drug markets. In other words, drug markets can be highly responsive to enforcement efforts, but the form of response is sometimes an adaptation which undercuts the enforcement strategy. Enforcement methods clearly have to keep pace with such changes.

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Our results suggest that few middle-level drug sellers feel threatened by enforcement. Market 1 's hierarchical distribution system was sustained by the threat of violence. Violence served not only to secure compliance within the distribution system, but also to ensure that no-one in a position to provide information to the police actually did so. Many respondents felt that it was this that allowed dealers at the apex of the structure to feel as if they were 'untouchable'.

In Market 2, small fragmented groups of entrepreneurs operated throughout a sizeable geographical area, communicated solely on mobile phones and pagers, and conducted few transactions in public. This group also paid little attention to the threat of arrest or conviction, partly because they felt there was none. Arrest figures for both markets suggest that there is little to fear if a seller's style of operation is closed.

Police sources

²¹ A fuller discussion on police sources can be found in Maguire and John (1996).

Our study²¹ suggests that either communications technology or the threat of violence can serve to insulate the police from gathering the information they need to make arrests within drug distribution systems. The obvious response to this is to develop or amplify other information flows. A recurrent theme amongst those we interviewed was that police sources could fill this gap. DSU officers, uniformed officers, and force drug squad officers all believed that properly tasked sources provided one of the best ways to disrupt the operation of middle-level drug sellers. Surprisingly, some of the sellers we interviewed agreed.

The Audit Commission (1993) found that the use of informants was highly cost-effective. In 1990, for example, the Metropolitan police seized drugs with an estimated street value of £48 million. This amount was recovered through source-led policing that cost the Metropolitan police half a million pounds. Although some of these drugs could have undoubtedly been recovered through other policing methods it is debatable whether they would have been as cost-effective. With the increasing professionalisation of police sources and the wider use of tasking it would appear that this policing method could be more widely used in all areas where closed market systems operate. Senior managers must, however, be mindful of the less positive aspects and unintended consequences of running and managing police sources. Norris and Dunnighan (2000) argue that one of the unintended consequences of sources is that they have the potential to create conflict both with other areas of the criminal justice system and within the police service itself. One main contention is the level of criminal activity that some officers accept from sources which others do not. This is particularly relevant when using sources to infiltrate or provide information on closed drug markets, and one that police

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controllers must be aware of at all times. A further concern of Norris and Dunnighan (2000) which they believe is central to the "folk wisdom surrounding informers" is that of 'the tail wagging the dog'. This involves handlers becoming too close to their source and consequently misplacing their loyalty. However, senior officers concerned with the management of sources/informants can circumvent these issues if appropriate measures are put in place and frequent reviews are conducted. Such safeguards are in place in many forces already.

Senior managers must also be aware of the implications of the Human Rights Act (1998), which incorporated the European Convention on Human Rights (ECHR) in British legislation.²² Article 6, covering the right to a fair trial, will affect some methods of evidence-gathering. Evidence gathered via the use of anonymous witnesses, entrapment, undercover agents or undercover police officers might constitute an unfair trial, if rules and procedures are not strictly adhered to. Where a form of evidence-gathering breaches the Convention, courts will have to decide if evidence can be admissible. Following on from this is the impact of disclosure in criminal proceedings; evidence gathered from police sources will usually be presented to a judge and a request for public interest immunity (PI I) may be made. Under the Human Rights Act, withholding evidence (from the defence lawyer) may constitute a breach of the ECHR, as the defendant has not been granted a fair trial. In essence, when tasking sources or acting upon source-based information, the police must weigh up the risk that their source could eventually be identified. As a result the Human Rights Act may make it harder to present evidence in court as PI I material.

Furthermore Article 8 has relevance for the use of police sources. The Article rules that each individual has the right to respect for private and family life. The police must be aware that in tasking an individual to get to know a suspected criminal subject there may be a breach of Article 8.

Officers from Dedicated Source Units did not view the legislation as a problem. One believed that the new legislation would make handlers and controllers more accountable, which he saw as a positive step. Another said that he felt the legislation would further guard against any corruption. Officers not from dedicated units felt less sure about the legislation. One commented that he felt it was "tying their hands behind their backs". This confirms one of the findings from the work conducted by Norris and Dunnighan (2000) which found over 60% of their police sample who ran sources/informants believed they could not do so in accordance with Home Office guidelines. Work conducted by Innes (2000) has also suggested that any tightening of the legislation will only be partially effective as many officers will still run un-registered sources in an attempt to 'keep them on the books' in an

²² Although Britain signed up to The European Convention on Human Rights in 1951 the *judiciary* have always argued that it does not, *in itself*, have legal effect because it is an international treaty which has not been incorporated into domestic law via an Act of Parliament.

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unofficial capacity. As is often the case, however, new legislation that at first appears daunting may later become viewed as essential. What is clear is that the use of sources will undoubtedly change and all forces should ensure that their handlers and controllers have access to appropriate, and where possible, nationally accredited training.

One issue worth highlighting is the need for both handlers and controllers to be aware that some police sources may manipulate the police with a view to 'taking out' other drug sellers, therefore reducing the competition in the market. Although the police conduct a risk assessment on all registered sources, it would appear prudent for an impartial senior officer to review this at regular intervals.²³ This would protect the handler and provide an impartial view on a source's motivation for continuing an association with the police.

²³ Although many forces already have an impartial officer reviewing risk assessments it may be worth formalising and incorporating into future ACPO guidelines.

Test purchases

Assembling the evidence against retail sellers to secure a conviction for supply has in recent years involved the use of test purchases. Although this method has been successful the current study raises a number of concerns. The safety of police officers must be paramount when conducting covert policing methods. We are not suggesting that senior officers currently adopt a somewhat cavalier attitude to the safety of officers, but sellers are now adapting to this form of enforcement and our results suggest that it is becoming more commonplace for drug sellers to require unknown customers to smoke drugs to establish that they are genuine drug users. Undercover police officers may find themselves placed in this position through no negligence on their part or that of their senior officers. Although police officers are instructed to remain in view of their colleagues when making test purchases, situations have occurred where officers have found themselves out of sight and therefore highly vulnerable.

When conducting test purchase operations police officers should do so with a clear set of objectives. If the aim is to disrupt a market's structure officers must be aware of the likely outcomes of targeting different types of seller. By targeting those who connect drug buyer and seller officers will often be targeting those who are the easiest to replace. They will also be targeting those who have little - if any - knowledge of the wider distribution network(s) above street level or the supply routes into the market.

²⁴ On the basis of information supplied to us by CO23, MPS, from the test purchase database, four out of five of those arrested have previous convictions for offences other than drugs offences.

We are not suggesting that test-purchase operations are valueless. Certainly offenders arrested in this way tend to have substantial criminal records involving a wide range of - often serious - crimes²⁴. If this group comprises of generalist

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persistent offenders who are currently active, then there may be more general preventive payoffs. For this to be so, of course, it has to be established that they are currently involved in crimes other than drug offences. Test purchase operations may also have a deterrent and displacement effect on other sellers. Arguably, too, if mounted for long enough middle-level distributors may possibly be drawn down to retail levels where they are most vulnerable to policing. However, this situation seemed unlikely in either of the markets we studied. For the present, the value of test purchase operations targeted at low level sellers *specifically in terms of disrupting distribution systems* remains to be demonstrated.

Drug task units

One of the clearest findings from this study was the lack of specialist resources that are available to police drug markets above street level. Although Market 1 had a Local Tactical Crime Unit that dealt specifically with drugs, and a force drug squad, the officers we spoke to believed the local unit was unable to tackle sellers above street level. Where specialist units exist senior management should perhaps encourage and provide appropriate training to increase the use and effectiveness of registered police sources. Officers from both the local and the force squads should also be encouraged to create positive links with one another and share relevant information thus maximising their potential effect on drug markets.

Where a specialist unit does not exist, as in the Basic Command Unit (BCU) covering Market 2, there seems a clear case to create divisional drug task units. All of the officers we spoke to in Market 2 felt that if drug task units were available there would be a greater chance of conducting successful operations against mid-level sellers thus disrupting the market for at least a short period of time. As previously mentioned, officers from Dedicated Source Units felt that at times information was not acted upon because of the lack of resources. One senior officer in Market 2 stated that if a dedicated unit was available (to him) which linked to a source unit, inroads could be achieved in disrupting the market above street level.

Other suggestions that were made during the course of the study include:

- utilising community police officers effectively. Community officers can be a valuable resource and employed to act as a bridge between the local community and the police. Their usefulness should not be under-estimated by senior police personnel and they should be encouraged to actively work with all sectors of their own local communities. It is positive community work that will maximise the potential effectiveness of inter-agency partnerships, not only with local services but also local drug action teams.

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- effective use of existing resources. For example, the use of police cars. Police officers in Market 2 commented that covert surveillance was almost impossible as the cars they used were known by most dealers in the local area. If neighbouring areas regularly swapped cars, covert surveillance could be more easily achieved and more successful;
- senior police managers providing operational police officers with a consistent message about priorities relating to the policing of open and closed drug markets in their area;
- on-going drug training for all officers; and
- training handlers and controllers (of sources) to nationally accredited standards.²⁵

²⁵ At present a *handful* of forces have courses which are approved by the National Police Training College.

The long-term effects of enforcement

We argued in Chapter 2 that any enforcement strategy was likely to prompt adaptations, and that some would have perverse effects. Here we have advocated more intensive intelligence-led policing in which local drug task forces make much greater use of police sources. We can speculate about this, but are not in a position to draw clear conclusions.

One likely outcome of the arrest of a middle-level supplier is that s/he is simply replaced. This seems a strong possibility in highly structured and controlled distribution systems such as Market 1, and less likely in the less regulated systems like Market 2. It is only when a significant proportion of the system is removed that a structured market will be disrupted.

Let us assume that the police succeed in making significant inroads into the distribution system. What will happen to the market? In the absence of alternative markets for buyers to use, there should be greater scarcity of drugs - followed either by price increases or by reduced demand or by both. In both our sites, it is more likely that the majority of affected buyers would travel the mile or so to other sites. Other things being equal, sellers and buyers are likely to return to the area when the enforcement pressure is lifted - which must inevitably happen at some stage. The implication of this is to maximise the payoff from enforcement. It is important to:

- co-ordinate enforcement tactics across markets;
- accompany enforcement with tactics to sweep displaced buyers into treatment and;

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- put into place situational prevention measures that "proof" the area against the return of drug dealing.

Co-ordination of enforcement can be achieved by the police alone, but ensuring that enforcement is tied in with both the provision of treatment and the implementation of situational measures will require close partnership with health and local authority services. These are discussed below. It should be stressed that enforcement, treatment and situational prevention are not competing alternatives, but complementary approaches. Each approach requires the other two in order to maximise their overall impact.

Whether sufficient resources are made available to mount effective enforcement action depends on national, force and Basic Command Unit policing priorities. We gained the impression that strategic priorities tended not to feed down to concrete actions "on the ground". The reasons are partly historical: until 1998 there was no explicit national strategy relating to drug distribution. In the course of fieldwork, however, we still found evidence of a considerable lack of clarity about the priority to be attached to work on drug markets. There is obviously a need for senior managers to get across their messages about priorities consistently and clearly.

If tackling drug markets is to remain a policing priority, and if police resources are allocated to this end, there is a need to devise performance indicators (Pis) to help managers assess what progress is being made. It is far from straightforward to develop robust Pis which do not make disproportionate demands in terms of data gathering. But it is important not only for the police but for other local agencies to have adequate intelligence about the operation of retail drug markets in their "patch". Appendix B offers some preliminary ideas about ways in which a suite of Pis might be constructed.

Demand reduction through the *provision of treatment*

The Government's ten year strategy for tackling drugs states that reducing the availability of drugs cannot be achieved by enforcement alone. We agree. For reasons set out in Chapter 2, it is important to combine supply reduction and demand reduction strategies. One potentially important set of demand reduction strategies involves the provision of treatment for those with drug problems.

Two strategies which target drug-using offenders in contact with the criminal justice system with the aim of referring or offering treatment are worthy of mention: arrest referral schemes and Drug Treatment and Testing Orders (DTTOs). If arrest referral schemes have appropriate treatment services to refer individuals to, and there is a

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willingness on the side of police officers to refer individuals, a significant decrease in drug use and criminal activity can be achieved (Edmunds et al, 1999). Tailor-made arrest referral schemes can also be useful for certain groups of drug-using offenders, for example sex workers and young people. Two such schemes are running at present. In Kings Cross, London, a local partnership approach has designed a referral scheme specifically aimed at drug-using sex workers. In Derbyshire a scheme has also been specifically designed for young drug users who have come into contact with the criminal justice system (for a discussion see Newburn and Elliott, 1999)

Similarly DTTOs have begun to achieve some measure of success (Turnbull, 1999). DTTOs were designed as a response to growing evidence of the link between problem drug use and crime. A DTTO strengthens a court's power to make an order which requires an offender to undergo treatment as part of, or in association with, an existing community sentence. One benefit of both arrest referral schemes and DTTOs is that they can put individuals in touch with services with which they have previously never had contact. Services need to be aware, however, that if referral mechanisms are successful the numbers being referred to services will swell and treatment options need to be in place to cope with the potentially diverse population of drug-misusing offenders.

One of the primary issues arising in Market 1 was the lack of NHS (methadone) prescribers. Drug users and agency professionals felt that waiting lists were unacceptably long. Just after fieldwork was completed, however, the local agency set up links with a prescribing service which had agreed to visit on a regular basis in an attempt to reduce the number of clients waiting for a prescription. Although prescribing services in Market 2 were perceived to be better, there were still a significant number who were prescribed and using illicit drugs on top. One strategy is to set up more responsive prescribing tailored to drug users' needs, coupled with tight monitoring and regulation to avoid leakage to the illicit market. This has a two-fold benefit of drawing individuals into treatment and retaining them.

Agency professionals and users in both markets spoke of the need for appropriate stimulant services. The bias in drug agencies towards services for opiate use has been widely recognised, for example by the Effectiveness Review (Task Force 1996). Many drug agencies, however, are now incorporating specialist crack programmes within their agencies, some with greater success than others. The success of specialist treatment facilities within agencies needs thorough evaluation before existing or new services endeavour to seek funding to set up specialist programmes in their own right. It is an issue that all agencies need to address, as the incidence of crack use would appear to be on the increase. One spin-off from the introduction of

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arrest referral schemes in police stations is an improvement in the quality of information about criminally involved problem drug users. This information could substantially help the planning and targeting of services for this group.

Finally, treatment services need to provide a service that recognises the diversity of the local community. In both markets ethnic minorities were felt to be under-represented in treatment services. The local treatment agency in Market 1 had just completed peer-based research²⁶ to examine this very issue so that services could be adapted to take account of the views of all sections within the community. Treatment services must endeavour to discover why ethnic minority populations and other under-represented groups are unwilling to access services and what they need from services. Research similar to that conducted in Market 1 can also serve as an invaluable source of information for local Drug Action Teams who now have to be able to map drug use in their local areas.

²⁶ The research attempted to estimate the number of drug users not *in touch* with services and the reason for non-contact.

Situational crime prevention

Situational crime prevention involves manipulating, designing or managing an environment with the intention of affecting the behaviour of those who use it (Tonry and Farrington, 1995). By definition therefore, situational prevention of drug markets targets locations where drug selling occurs. Although it is largely applicable to markets that have fixed sites, there are some situational measures that could be put in place that would affect drug selling.

It has been shown that CCTV can reduce crime (Brown, 1995; Sarno et al, 1999). Although neither site had CCTV installed, evidence suggests that it could have a marked impact upon drug markets. Indeed, the absence of CCTV in Market 1²⁷ infuriated business residents. CCTV will primarily displace open drug markets. However, where markets are closed (like Markets 1 and 2), but transactions take place on the street, the aim is to discourage sellers from the area. It is hoped that whilst it acts as a deterrent against drug selling it will also help to address the fear of crime that local residents may have. Furthermore CCTV can also have the effect of discouraging street crime. Sarno et al. (1999) found that the introduction of CCTV resulted in a significant decrease in crimes such as street robbery. However, in the same area crimes such as shoplifting increased. This research may indicate that individuals merely adapt their criminal activity with the introduction of new technology, or that improved technology within stores has led to an increase in the number of individuals who are now caught for this offence.

²⁷ After fieldwork had finished Market 1 was reportedly having CCTV installed.

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Situational prevention may well include measures relating to housing. As discussed in Edmunds et al. (1996) one unintended effect of social landlords' housing allocation policies may be the concentration of problem users in specific locations where drugs can readily be bought. This process will serve to consolidate any emerging markets.

There are also more specific actions which can be deployed against 'crack houses'. In Market 2, these were viewed as more of a problem than in Market 1. Outreach workers from the local drug agency and police officers commented that vulnerable individuals had had their houses 'taken over' by drug sellers and users and had subsequently become crack houses. Local authorities and housing associations need to be aware of this and take appropriate action on behalf of tenants who could be at risk. Evidence from our interviews suggested that empty properties in drug markets were also being used as crack houses. Local authorities need to secure empty properties in such a way as to make entry as difficult as possible. Housing associations and local authorities should also avoid placing either known drug users or potentially vulnerable individuals, for example, young people, in drug market areas as these groups are at particular risk from the harms associated with residing in an active drug market.

Table 4 outlines some of the problems local drug markets create and ways in which the police, treatment services and other agencies can tackle them.

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Table 4: Tackling drug markets			
Problem	Police	Treatment services	Other
Closed market systems that use mobile communication technology	Intelligence led policing, task sources	Pursue demand reduction strategies to reduce the volume of sales	
Hierarchical market structure and fear of violent retribution	Intelligence led policing, task sources. Encourage reporting of offences	Encourage victims of assault to report incident to the police	
Increased use of firearms	Intelligence led policing, task sources	Develop protocols to pass information to the police	
Arresting middle level sellers	Intelligence led policing. Act upon information	Increase outreach in the wake of arrests	
Test purchase operations	Consider carefully safety of officers. Target sellers not users.	Inform clients of the risks of purchasing for others (supplying)	
Acquisitive crime	Develop appropriate arrest referral schemes. Target where necessary	Develop links with criminal justice agencies to improve referral rates	DTTOs from court. CCTV in shopping areas
Attracting a diverse range of drug users to services	Identify criminally active users and refer to services	Provide services which recognise the diversity of drug-using populations	
Use of stimulants	On-going drug training in an effort to increase awareness of changing patterns of use	Responsive services for stimulant users	
Linked sex and drug markets	Targeted arrest referral	Specialist services or specialist workers within existing services	
Lack of community support or understanding	Effective use of community police officers. Positive publicity. Work in partnership with drug agencies and local Drug Action Team	Work within schools and local communities. Work in partnership with police	Education programmes within schools on drugs and related issues

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APPENDIX A

Appendix A: Custody record data

Market 1: Custody record data collection

Four months of custody record data were examined in Market 1 from 1998 - 1999. These data were then weighted to represent a twelve-month period. A set of target offences²⁸ was drawn up including acquisitive crimes and drug offences. Individuals were included if:

²⁸ Target offences were: *shoplifting, burglary, robbery, fraud, forgery, deception, soliciting, loitering, theft from or of a motor vehicle, theft, possession of drugs, and possession with intent to supply.*

- they were resident outside Market 1 but arrested for a target offence within Market 1;
- they lived within Market 1 and were arrested for committing a target offence; or
- there was an indication of a drug involvement²⁹ on non-target offences and the detainee lived within Market 1.

²⁸ Drug involvement included arrestees requesting to see the force medical examiner, possessing property such as injecting equipment, or an admission by the *interviewee* to the police that they *were a drug user.*

Nine hundred and twenty-one custody records fitted the criteria from the twelve-month period. Just over three-quarters (705) were male. The average age of detainees was twenty-four (age range 10 - 65). The majority of individuals were white (744).

One hundred and forty-one individuals were arrested for possession with intent to supply. Care should be taken, however, when interpreting the figures, as many (111) were detained attempting to pass drugs to serving prisoners at a local prison. Thirty occurred outside the prison. A drug indication was identified in just under a quarter (204) of the records examined. Just under half (93) disclosed heroin use. For those disclosing heroin use crimes varied, but higher numbers were being arrested on a warrant (15) indicating their previous involvement with the criminal justice system. Burglary (12) was also recorded more frequently for heroin users than many other offences indicating a serious level of acquisitive crime. This not only has the potential for a lengthy prison sentence but also has a considerable effect for those who are victims of such crimes. No detainees were found to be primary crack users.

Market 2: Crime Recording Information System (CRIS)

The force intelligence office collated CRIS data for a twelve-month period for all target offences that we were interested in. The data collected represents persons charged, cautioned or reprimanded. To ascertain if an individual had committed an offence to fund their drug use was, however, problematic. Police officers are now being asked to record from a coding framework if an individual has a drug involvement. Officers admit that the system is not being used for every appropriate case but recording is beginning to become more widespread. There are seven separate codes that can be entered:

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- an individual is found in possession of a drug;
- an individual admits a drug offence;
- an individual is found in possession of drug paraphernalia;
- the force medical examiner is called;
- the individual is arrested with correspondence which indicates a drug involvement;
- the individual has previous convictions for drug offences; and/or
- the individual has a previous caution for a drug offence.

Of the 40 individuals who were charged, cautioned or reprimanded with burglary only six were recorded as having a drug involvement. All six requested to see a force medical examiner but no further information on their drug use was available. None of those charged, cautioned or reprimanded with robbery (n = 37) had a drug indication recorded, and of the 25 charged, cautioned or reprimanded with shoplifting four were recorded as having a drug involvement although the exact drug was not recorded.

A total of 108 individuals were charged, cautioned or reprimanded for possession offences, although three-quarters of these were for cannabis. Only sixteen individuals were charged, cautioned or reprimanded with possession with intent to supply and almost a quarter of these involved cannabis.

Although this particular data collection exercise was somewhat limited in approximating the number of drug users within the market it could provide a useful starting point. Quite frequently the police are in the best position to inform drug action teams (DATs) about the number of arrested users within a market who are criminally active and funding their drug use through crime. One suggestion could be to refine the coding framework and have an appropriate section on all custody records that has to be completed before a detainee is released from custody. These data could then be collated on a monthly basis and be used to inform both policing initiatives and local DAT teams.

APPENDIX B

Appendix B: Targets and performance indicators relating to local retail drug markets

This appendix sets out some preliminary ideas about performance indicators relating to action against local retail drug markets. It is very hard to get robust performance indicators for changes in illicit consensual crimes. This appendix sets out what the authors think is possible. Whether this information can be used in practice to set targets, and to assess performance, remains to be seen. It may be possible to integrate this work with the national "key informant" survey which the Home Office is developing. We have broken the indicators into five types:

- those identifying retail drug markets;
- those assessing how these markets are functioning;
- those assessing the outputs of policing tactics likely to impact on these markets;
- those assessing the outputs of treatment tactics likely to impact on these markets; and,
- those assessing public perceptions and concerns.

Identifying retail markets

We have defined retail drug markets for the purpose of this exercise, as those where heroin or crack can readily be bought i.e. that an experienced drug user coming to the area for the first time would be able to purchase heroin, cocaine (powder or crack) or amphetamine, within an hour or two. This definition includes open and semi-open markets, but does not necessarily cover closed markets or networks. It excludes markets specialising in cannabis, ecstasy and LSD. This is primarily in the interests of simplicity, but it also reflects an assessment of the relative harms caused by the different types of market.

The best way of identifying these markets is for the DAT co-ordinator to ask three or four experienced drug workers to circle areas on a map. They could do this after consultation with experienced local users. (It has been possible to do this successfully in the current research.) The police might seem a better source of information. However, our view is that local police knowledge about retail markets is highly variable, and much less detailed than that of an experienced user. Drug workers are better placed than the police to ask users about their markets. It would however be worth getting local police to confirm the existence of the identified markets. This exercise probably needs to be done once a year.

Assessing how these markets are functioning

Any strategy for tackling retail markets needs to be informed about trends in availability and price. We suggest that DAT co-ordinators ask drug workers to

assemble the following information for crack and heroin (and where appropriate) powder cocaine every six months:

- whether purchases can be made by an experienced user who is new to the area: any time on any day between 10am and 3am/ most times on most days/ some times on some days;
- the price of heroin per gram (when bought by the wrap);
- the smallest deal of heroin that can be bought;
- the price per rock of crack;
- the putative gram weight of rock - now 0.3gm in London.

Assessing the outputs of policing tactics likely to impact on these retail markets

It is important, however, to distinguish between monitoring police activity and setting targets. For example, we believe it is essential to monitor police work such as Section 1 PACE searches; but the fact of monitoring them does not indicate that high levels of search activity are inherently desirable. The reverse will sometimes be the case. It is suggested that every six months the police should supply the DAT co-ordinator with the following statistics for the sector (or defined set of beats) in which each market is located.

- Section 1 PACE searches
- details of test-purchase operations, including arrest rates (by drug type)
- details of purity levels, where available
- arrests for drug offences by drug/offence type (flagging those arising from PACE searches)
- arrest referrals made following arrests in the area

Assessing the outputs of treatment tactics likely to impact on these markets

It is suggested that every six months local drug agencies should supply the DAT co-ordinator with numbers of users identified through outreach work in the market areas, and the number of users referred by arrest referral schemes following arrests in the market area.

Assessing public perceptions and concerns

On an annual basis (or less frequently) it might be worth mounting "dipstick surveys", whereby local residents and people who work in the area are asked how big a concern local drug markets are, and how satisfied they are with performance of the police and others in tackling markets.

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Obviously all these indicators would have to be interpreted sensitively. For example, successful outreach and referral might have a short-term effect of increasing availability and lowering prices - if significant numbers of very heavy users were diverted from the market. It is also important that the intended mechanism underlying any tactic should be specified in advance. For example, the aim of an enforcement operation might be to reduce supply by arresting sellers, or to reduce demand by inconveniencing buyers. The former should theoretically increase prices, and the latter depress them.

We think that responsibility for information for and assembling indicators should lie with DAT co-ordinators. The burden will obviously fall disproportionately on those co-ordinators covering areas with visible retail markets. Collecting data will be seen as yet another irksome imposition from the UKADCU; however, DAT areas supporting retail markets ought to be collecting the information anyway.

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2. **Neighbourhood Warden Schemes: An overview.** Jessica Jacobson and Esther Saville. 2000.
3. **Alcohol and Crime: Taking stock.** Ann Deehan. 1999.
4. (Awaiting publication) However, 12 briefing notes under the general title **Reducing Domestic Violence ... What works?** have been published in advance of this publication. 2000.
5. **RV Snapshot: UK policing and repeat victimisation.** Graham Farrell, Alan Edmunds, Louise Hobbs and Gloria Laycock. 2000.
6. **Not Rocket Science? Problem-solving and crime reduction.** Tim Read and Nick Tilley. 2000.