

Essex Drug & Alcohol Partnership



Drugs Market Profile Essex September 2009



Key Findings

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- The number of drug users in treatment has increased by 6% (251) in the last financial year.
- FY 2009-2010 is projected to see between a 35% (6,500) and 40% (6,800) increase in drug related incidents reported to Essex Police compared to 2008-2009.
- Based on available data Southend (Unitary Authority) appears to be the drug use hotspot for Essex.
- Purity levels of seized heroin, crack and cocaine over the past financial year have decreased.
- Purity levels during the financial year of seized drugs ranged between 1% and 95% pure.
- Drug supply is most commonly linked with dedicated dealers and buying from friends. Cocaine and ecstasy are linked to the night time economy. Ecstasy is the only drug not linked to telephone deals by any respondent to EDAAT questionnaires.
- Whilst cocaine and ecstasy can be sold in open and closed markets, heroin and crack are more commonly sold within closed markets.
- Cocaine use appears to be on the increase due to greater availability and popularity.
- The use of ecstasy also increased and it has been suggested there has been a move away from ecstasy in tablet form towards MDMA powder.
- Drug dealers entering the county from London are likely to be a factor in the development of local markets in parts of Essex.
- There is an increasing trend (across the UK) for poly drug use. Decreasing purity of drugs may be a factor in this.
- EDAAT questionnaires show more negative attitudes towards heroin and crack amongst clients. Attitudes towards cocaine and ecstasy were generally positive.
- The cost of crime due to problematic drug use within Essex during 2008-2009 is estimated at £91,000,000.
- The Eastern Region of England has among the lowest prevalence of drug use in the country.

Estimates of Drugs Users

DAAT	Financial Year				Change	
	2007 - 2008		2008 - 2009		PDUs in Treatment	All in Treatment
	PDUs in Treatment	All in treatment	PDUs In Treatment	All in treatment		
Essex	1,607	2,491	1,709	2,704	6%	8%
Southend UA	559	783	606	807	8%	3%
Thurrock UA	202	412	207	426	2%	3%
Essex Combined	2,368	3,686	2,522	3,937	6%	6%

Figure 1 - Levels of Drug Users in Treatment by Financial Year¹

The levels of problematic drug users (PDUs)² and non PDUs in treatment increased by 251 (6%) in FY 2008-2009 compared to 2007-2008. This does not necessarily suggest an increase in drugs use and may simply indicate more successful drugs interventions.

District	"Glasgow" PDU'S Per 1,000 Head of Population
Southend	6.9
Thurrock	2.8
Maldon	2.8
Harlow	2.7
Tendring	2.6
Colchester	2.6
Epping Forest	2.5
Rochford	2.5
Chelmsford	2.5
Braintree	2.5
Basildon	2.5
Brentwood	2.4
Uttlesford	2.4
Castle Point	2.3

Figure 2 - "Glasgow" PDU's by District

The most recent estimate for the number of "Glasgow" PDUs³ within Essex as a whole is 5,021, with 1,110 of these falling within Southend Unitary Authority (UA) and 425 within Thurrock (UA). As can be seen from the table above, Southend UA has more than twice the estimated number of "Glasgow" PDU's than any other district in the county.

¹ Obtained from National Drug Treatment Monitoring System

² Defined as those who use opiates and/or crack cocaine.

³ "Glasgow" PDUs a prevalence estimate of the total amount of PDU's within Essex County Council and Unitary Authorities as established by The Centre for Drug Misuse Research, University of Glasgow, taken from NTDMS website. There are no time periods for Glasgow estimates however these figures are the latest update.

Price

The table below gives the current national prices as defined by SOCA⁴ and Essex street prices from Colchester, Southend and Basildon⁵.

Commodity	SOCA National Street Price Per Gram	Essex Street Price Per Gram
Cocaine	£30 to £50	£40 to £50
Crack Cocaine	£50 to £80	£50 to £60
Heroin	£40 to £50	£40 to £50
Opium	£10	Unknown
Ecstasy Tablets	£2 to £5	£1 to £4
Amphetamine	£10	£5 to £10
Cannabis Resin	£6	£3
Cannabis Skunk	£12	£6
Cannabis Herbal	£6	£3
LSD	£3	£3

Figure 3 - Drugs Prices - Street Level

It should be noted that the Essex street price per gram has been obtained from data kept regarding Essex Police drugs seizures.

The fact that prices for cannabis resin, skunk and herbal are all lower than the national average suggests that there is a greater availability of cannabis in Essex.

Purity

DrugScope⁶ suggests the purity of drugs across the country has dropped. This may be due to a longer chain between importer and street dealer⁷. DrugScope also reports there may be a longer term trend of people taking a variety of substances together or separately and with a more varied "menu" of drugs users are less concerned about quality. Research based on the BCS showed that in the 2007 and 2008 there was an increase in the reported use of cocaine, ecstasy, tranquilisers, anabolic steroids and ketamine, supporting the findings of DrugScope.

Seizures by Essex Police in FY 2008-2009 show a downward trend in the purity of heroin, cocaine and crack, which is consistent across the Eastern Region. In some cases purity has been as low as 1% and as high as 95%. However Essex has seen slightly higher average purity of cocaine (30%) than the rest of the Eastern Region (23%).

⁴ Data taken from SOCA Expert Evidence Department. Produced January 2009

⁵ These were the three locations chosen for data to be sent to SOCA to compile the SOCA National Drugs Prices.

⁶ <http://news.bbc.co.uk/1/hi/8249574.stm>

⁷ Quote from Gary Sutton, Head of Drug Services at Release.

Increased hospital admissions due to poisoning⁸ are a likely possible consequence of a drop in purity and may have an effect on the level of acquisitive crime as users are required to take more to get the same effect. It is also possible that if cocaine is generally of higher purity in Essex than in the rest of the Eastern Region, drug users outside Essex may travel into the county to buy their drugs. A reduction in heroin purity has also been linked to increase alcohol consumption by EDAAT questionnaires.

Seizures

Cocaine seizures have increased in Essex year on year since 2001, including a very large increase between 2004 and 2008 (approximately four thousand extra seizures year on year). In contrast the weight of cocaine seizures has dropped. It is possible that police activity has shifted to target street dealers and/or users rather than traffickers. Alternatively this could suggest an increase in cocaine use and prevalence of people carrying small amounts of cocaine (probably for personal use) being arrested and having their drugs seized.

Between 1st April 2008 and 31st March 2009 FSS Data shows there were 780 seizures of crack, heroin, cocaine, or MDMA in Essex⁹. This accounted for 38% of the total seizures in Eastern Region during the time period. Since Essex is one of six counties in the region, this is a disproportionate amount. Drugs seized in Essex were most commonly heroin (43%), followed by crack (31%). Approximately a quarter of seizures were cocaine. Braintree and Harlow BCUs saw the most seizures. It should be noted that on the whole seizures are indicative of Police activity rather than any trends in drugs use.

Supply

EDAAT questionnaires suggest that cocaine and ecstasy are often supplied from open markets and closed markets. Heroin and crack are more commonly sold in closed markets.

The distribution of all drugs was most commonly from dedicated dealers, or from friends. However there was less information about heroin and crack distribution (due to lack of exposure to users by respondents). Cocaine and ecstasy were also linked to the night time economy – likely due to users buying drugs to take during a night out. Heroin, crack, cocaine and cannabis were all linked to telephone deals, whereas ecstasy was not. This suggests ecstasy is often bought during a night out, rather than beforehand. This is confirmed by a number of EDAAT questionnaires linking purchase of cocaine and ecstasy to pubs and clubs.

Individual respondents gave the following information on factors contributing to local markets;

⁸ At this time data does not distinguish between illicit drugs and other poisonings

⁹ Based on FSS figures for Eastern Region drug seizures April 2008 – August 2009

- Markets are often centred around supported housing and as such can be a source of all drugs.
- Cocaine is now as available as cannabis.
- Heroin is being supplied from London, possibly by organised gangs.
- When heroin distribution is rare or drugs are of low purity, alcohol use increases.
- Pubs and clubs are seen as an easy way to access cocaine.

The consumption of drugs was believed to be near to the point of purchase – possibly influenced by purchasing drugs from friends and then using drugs within a “social” situation.

Analytical work has suggested a link between a number of Vietnamese illegal immigrants / asylum seekers and the cultivation of cannabis¹⁰. It may be possible to use the Failed Asylum Seekers database to establish the address of people likely to be drawn into this criminality and therefore make predictions on the location of cannabis farms.

Intelligence Gaps:

- Responses on EDAAT questionnaires were not always clear and questions were not fully tailored to writing a Market Profile.
- Further intelligence is required to establish the location of cannabis farms or premises where drugs are being supplied (such as pubs, clubs, schools). What technology or intelligence sources can be used to gain this intelligence?
- At present there is limited ability to predict increases in the sale of cannabis, the levels of yield of current crops and its quality.

Trends in Drug Use

The DrugScope research suggests an increasing trend of poly drug use across the UK. Research based on the 2008-2009 BCS suggests that the following are all factors which increase the chances of poly drug use;

- Frequent visits to night clubs
- Being single

¹⁰ 1213-08FB Immigration Crime CPA.

- Frequent visits to pubs
- Being young
- Being male
- Being the victim of crime in the last 12 months
- Being in the White ethnic group.

BCS research suggests that non-PDUs are more likely to be poly drugs users. This increase is less likely to affect levels of acquisitive crime as non-PDUs are less likely to be associated with committing these offences to fund a drug dependency.

Whilst heroin and crack use has remained relatively stable there has been an increase in the use of cocaine and, to a lesser extent, ecstasy. Where ecstasy has increased some respondents have suggested this is in the form of MDMA. It was also suggested that cocaine use is currently on the increase due to greater availability and popularity. These increases could also be linked to changes in the licensing laws creating longer drinking hours and extending the night time economy.

Heroin and crack were generally considered negatively by their clients – often being referred to as being “dirty” drugs. In contrast cocaine and cannabis were both considered positively.

The Cost of Crime

EDAAT questionnaires suggest theft or acquisitive crime in general was the most common consequence of the lifestyle drug users fall into, followed by begging, impact on education and violence.

It is estimated¹¹ that during the FY 2008-2009 the value of property Essex PDUs needed to steal to fund drugs habits was; £91,000,000. The estimated cost of criminality (which includes the cost of crime itself as well as; cost to NHS, social services, DAAT, County Council, police, prison etc.) was; £136,000,000.

The total amount stolen in acquisitive crime within Essex during FY 2008-2009 was; £79,000,000. It is likely that a proportion of the crime committed by drug users occurs in surrounding counties and London. This suggests that a large proportion of acquisitive crime within Essex is likely to be attributable to PDUs.

¹¹ Using the NCIS Drugs Consumption Model Calculation and based on the estimates of “Glasgow” PDUs in Essex, daily consumption of drugs obtained from EDAAT questionnaires and the lowest retail price of heroin.

Reported Incidents

FY 2008 – 2009 South Eastern Division¹² saw the most reported incidents (almost 25%). Hotspot mapping shows Southend District as the hotspot for Essex, with the three wards making up Southend Central Neighbourhood all being in the top four. Since the estimate of “Glasgow” PDUs in Southend Unitary Authority is almost a quarter of the total in Essex this suggests that Southend has more problematic drug use than other areas in Essex.

Reported incidents increased through FY 2008-2009 and into the current financial year. Incidents are projected to increase between 35% and 40% by March 2010 compared with FY 2008-2009. Reported incidents do not necessarily mean an increase in drug use. It is possible this increase is due to heightened awareness, changing attitudes to drugs use amongst the general public or an increase in policing activity regarding this criminality.

ACORN¹³ Data

Analysis of reported incidents and ACORN categories in the county suggests that Moderate Means or Hard Pressed areas are more likely to report drug related incidents. Of particular ACORN types Low Income Singles – Small Rented Flats reported the most incidents (which is actually within the Urban Prosperity category). The majority of the incidents reported by this ACORN type were within Southend District. Furthermore, all over-represented ACORN types included people living in flats.

The Regional Picture

Whilst evidence suggests that Essex has more PDUs and non-PDUs than other counties in the Eastern region, Association of Public Health Observatories research from 2007 shows that the Eastern Region of England and the South East of England have the lowest levels of PDUs, crack cocaine use, “last month”¹⁴ cocaine, cannabis, amphetamine and ecstasy use in the country. In contrast London had amongst the highest rates of all of these attributes in the country. This suggests that London is likely to be the hub for drug activity in the South and East of England, and those areas bordering London are likely to see a higher prevalence of drug use than others. Although Southend is the hotspot for drug use rather than other areas closer to London this may be because Southend, being a coastal town with historic links to London may have a busier night time economy than other areas within Essex.

Eastern Region Public Health Observatory figures for 2001-2006 figures show that the levels of drug related deaths in Essex remain relatively stable around thirty per year. Hospital admissions between 2006–2007 show that Essex Primary Care Trusts (PCTs) saw less than half the national average admissions for poisoning by drugs, and less than the average admissions for the Eastern Region. This was also the case with admissions where there was a primary or

¹² Covering Southend-On-Sea, Castlepoint and Rochford districts

¹³ A Classification of Residential Neighbourhoods

¹⁴ Users who have taken the drug type within the last month.

secondary diagnoses of drug related mental health or behavioural issues¹⁵. Since these figures are two years old it is not possible to establish how the recent drop in purity of drugs has affected the levels of drug related deaths. However if hospital admissions can be taken as an indicator of the level of drug use, these figures reinforce the evidence that Essex has a lower than average “drugs problem” than most of the rest of England.

Intelligence Gaps

- How has the recent drop in purity effected hospital admissions?
- Hospital admissions do not distinguish between non-controlled and controlled substance.

Recommendations

Intelligence

- Develop a local register of the Price and Purity of all illegal substances purchased via test purchase operations in order to track changes through an indicators and warning matrix.
- Make use of FLIR (Forward Looking Infra Red) Camera (Available for loan from partnership) for confirming intelligence on Cannabis Production
- Ensure that plants seized from commercial cannabis farms are subjected to DNA identification testing to link cannabis cultivation scenes to harvested cannabis seizures.
- Take part in the LGC Forensics cannabis DNA project.
- Support and make use of the LGC Forensics UK wide database of cannabis STR profiles for intelligence and evidential purposes.
- Use Ion Track Itemised for intelligence gathering purposes to provide an objective basis on which reasonable grounds can be made for search powers under Section 23 MDA 1971 for intelligence gather purposes with particular reference to;
 - Pubs/Clubs – highlighting specific problems to licensees.
 - Workplaces/Schools – lockers, desks and workstations

¹⁵ It should be noted that these figures do no distinguish between non-controlled and controlled substances.

- Implement FSS guidance on the Examination of Cannabis Cultivation Scenes in Force Policy to ensure that sufficient information is captured in order to make;
 - An evaluation of the scene as a commercial or semi-commercial enterprise.
 - An estimation of yield and quality.
 - An estimation of potential yield.
 - Scene to scene links to be made.
 - People to scene links.
- Develop a powder cocaine problem profile with special reference to the 16-25 year old age group.
- Work with the Regional Environment Agency intelligence around drugs.

Enforcement

- Implement local multi-partnership (Trading Standards, Fire, DAAT and Licensing) visits to local licensed premises.
- Develop and implement a co-ordinated plan with partners (Trading Standards, Fire, DAAT and Licensing) to visit local licensed premises.
- Use the “Questions to ask suspects” section in the FSS guidance on the Examination of Cannabis Cultivation Scenes as the basis for intelligence interviews.
- Make better use of FIT legislation and how positive results can be better disposed of in partnership with EDAP and/or explore the deployment of a “Drugalyser” in a pilot area.
- Incorporate “Operation Twister” – Partnership approach to tackling drugs in schools.
- Work with Partners to make better use of “Crack House Closure” orders, especially in areas where community confidence is low.
- Implement multi-agency proactive working to maximise the disruption to OCG’s (e.g. HMRC Criminal Taxes Unit).



Reassurance

- Work with EDAP around communications campaigns around SLU operations with regards to “Operation Hawk” as a model of good practice.
- Engage EDAP to deliver Drugs Awareness training to NPT staff on a wider drugs agenda in Essex, providing awareness on drugs litter, treatment, itemiser, FLIR etc).
- Where appropriate include EDAP commissioned Criminal Justice service in Tasking Coordination meetings and specific Operational briefings.
- Promote the use of Financial Investigators and POCA powers at all levels of the criminal chain with a view to redistributing some funds via EDAP directly to communities.
- Promote awareness “Drugs in the Workplace” to major employers in Essex in partnership with EDAP and local CDRPs.
- Develop the expert witness scheme for officers who will be involved in drugs investigations (This is a successful course developed and run by Sgt Howard Chandler in Kent).
- Organise visits for officers to licensed cannabis production farms to increase awareness and understanding.

Organisational

- Develop further the Essex Police Drugs Strategy in partnership with EDAP and the EDAP Availabilities Strategic Group.
- Develop a Tasking Coordination group to sit under the EDAP Availabilities group as an operation clearing house for Essex Police, UKBA (Stansted), HMP Chelmsford and any other relevant group.
- Develop a communications campaign around POCA seizures benefiting the local community.
- Develop the Force Corporate Knowledge around drugs in the community and street level by moving towards Drugs Liaison officers in districts (this is the Model that Kent Police use very successfully).
- Engage with EDAP around to co-ordinate Communications campaigns in relation ‘Operation Hawk’ conducted by Merseyside Police and the Wirral DAP which is regarded as a model of good practice.