



EXECUTIVE SUMMARY

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Understanding the organisation, scale, nature and dynamics of illicit drug markets is a critical requirement for effective policy-making and for interventions designed to disrupt their operation and to minimise the associated harms. Through in-depth research with people involved in the illicit drug market in Ireland, as drug users or sellers, as professionals responding to it or as residents affected by it, this research fills a significant knowledge gap in this important area of Irish drug policy.

The study objectives were to:

- Examine the various factors that can influence the development of local drug markets.
- Examine the nature, organisation and structure of Irish drug markets.
- Examine the impact of drug-dealing and drug markets on local communities.
- Describe and assess interventions in drug markets with a view to identifying what further interventions are needed.

Site profiles

The research was carried out in four locations: two sites in urban areas, one in a suburban area and one in a rural area. These sites varied considerably in terms of population and geographic location. The basic selection criteria were that the areas should be sufficiently varied to provide a cross section of illicit drug markets in Ireland. The electoral divisions (ED) within the study sites chosen were those where deprivation levels were high (based on proportion of over-15s unemployed, proportion of population in social class 5 [Semi-skilled] or 6 [Unskilled], proportion of households with no car and proportion of rented or local authority housing).¹ Data on the proportion of residents who had served prison sentences for drug offences were also used as an indicator. The identities of these sites have been concealed so as not to consolidate their reputation as illicit drug market locations. Site A is located within a suburban satellite town with a population of approximately 40,000. Site B is a rural site encompassing just two EDs – one representing the town, with a small population of 2,000–3,000 and the second representing the population of the rural hinterland, with a population of 10,000–11,000. Site C is an urban site, encompassing 20 EDs, with a population of 30,000. Site D is an urban site encompassing 19 EDs with a population of some 60,000.

Methodology

This exploratory study was conducted over a 36-month period (from 2008 to 2010) using a mixed-methodological approach. This involved:

- individual, face-to-face, in-depth interviews with both former and active drug users and street sellers;
- interviews with individuals serving prison sentences of more than seven years for drugs supply;
- interviews with experienced members of dedicated Garda drug units in the four study sites and with senior members of the Garda National Drugs Unit (GNDU);
- interviews with drug-treatment workers and a public health specialist;
- a street survey of 816 local residents and people working in the area (approximately 200 respondents in each location).

Criminal justice data analysed included drug offence data for the period 1 October 2008 to 31 March 2009 obtained from the Garda Síochána PULSE Information Technology system (Police Using Leading Systems Effectively). PULSE includes information on the number of drug seizures, the profile of offenders and the circumstances of arrest. Data on over 1,200 cases were analysed from 12 Garda stations throughout the four study sites.

¹ See Central Statistics Office for full social class categorisation at: cso.ie

Forensic analysis of drug seizures in the study sites between 1 September 2008 and 28 February 2009 was conducted by the Forensic Science Laboratory (FSL). Qualitative analysis was performed to identify the presence of illicit substances. Quantitative analysis (drug purity) was then performed on powders and tablets containing specific drugs, namely amphetamine, cocaine, diamorphine (heroin) and MDMA, to determine the levels of purity of the illicit substances present. The analysis also identified other substances or adulterants present in the samples, giving an indication of the typical bulking agents being used within the illicit drug market.

Analysis of data on nationwide seizures made by Customs Drugs Law Enforcement (CDLE) was collected by CDLE from 18 stations over a six-month period (January–June 2009).

Main findings

Factors which can influence the development of local drug markets

Senior experienced members of the GNDU describe the illicit drug market in Ireland as involving a series of sometimes overlapping markets for different substances that have evolved in waves or phases since the 1980s, with the heroin market, for example, beginning in the centre of Dublin and gradually spreading throughout the rest of the country. Most survey respondents highlighted social issues as the main reasons for local drug use. The primary factors identified were: the absence of facilities for young people; high unemployment; boredom; poor parental supervision; and drug availability. Additional factors identified through in-depth interviews included the relocation of people from deprived urban centres to suburban and rural areas and, in one location, the influence of a local prison where people had developed addictions and/or met people who had subsequently introduced them to drug-dealing. The arrival of people, both national and non-national, in specific locations were contributory factors in the development of markets for drugs such as herbal cannabis, heroin and crack cocaine.

The cannabis market is described as geographically dispersed and continuously growing, while the MDMA (ecstasy) market is distinctive in that it emerged in the early 1990s and spread throughout the country very rapidly over an 18-month period. Previously, cocaine use was generally regarded as being confined to specific sectors of the population and specific locations, possibly given the higher prices associated with it. However, the period of rapid economic growth since the early 2000s has seen cocaine use spread widely throughout the country. Crack cocaine is a relatively recent phenomenon, which emerged in north Dublin inner city and has now spread throughout the capital and beyond.

The nature, organisation and structure of Irish drug markets

There is no simple way to describe the organisational nature of the various drug markets examined as they differed widely in terms of their levels of structure and organisation throughout all four study sites. Site D, for example, was referred to as highly structured with regard to the distribution of heroin, cocaine and cannabis and involved three to four levels of distribution. Several high-level suppliers were involved in drug importation and distribution over a very wide area. The middle market in this location was reportedly heavily populated by individuals and groups or 'gangs' supplying drugs in volumes of kilograms or more. Site D also had several highly visible open street-level markets where heroin, crack cocaine and prescription drugs could be purchased. Although crack cocaine had originated with West Africans, it now involved more Irish sellers. Closed markets in pubs and flat complexes were also reported. Site A also had a visible and busy open street-level market for crack cocaine, where dealers took turns to sell drugs to buyers who often came from outside the area. Here, a large number of individuals performed roles on behalf of higher-level suppliers, including the dilution or preparation of drugs. Those involved in the storage and transport of drugs were generally relatively minor participants in the drug supply chain, either earning drugs for their own use or trying to pay off a drug debt.

While site B also attracted non-local buyers to purchase heroin, street-level distribution was closed. Transactions were made over the phone, deliveries made to people's homes and contacts formed through trusted third-party introductions. The heroin supply here was regarded as having originated within families but to have involved more recently a looser network of individuals. Heroin was not imported directly but sourced from the major cities of Dublin and Limerick. Cocaine distribution in this market was more structured and lucrative and dominated by a particular group of individuals who used legitimate businesses as a means of transporting drugs throughout the region. Although this was a large urban area, there was no open street market reported in site C, with drug transactions arranged via mobile phone and at pre-arranged locations. Here, the distribution of drugs such as cannabis and cocaine was concentrated among a small number of established families. Heroin distributors were described as non-local, both Irish and non-Irish, who had arrived in the area with an addiction. The heroin market was also described as less structured and easier to penetrate from a law-enforcement perspective.

Young people played a substantial role in drug distribution at street level in site A. Storing or running drugs was a financially lucrative option for teenagers. Indeed, PULSE data revealed that, over a six-month period, one-fifth of suspected supply offenders were aged 18 or under. Many of these young people were reportedly from unstable home environments. The profile of runners was different in site B. They were often older heroin addicts running drugs in return for a personal supply. Non-drug-using young people (aged under 18) were not reported as playing a significant role in drug distribution. Similarly, in site C, although runners did exist, there was little evidence to suggest the involvement of very young people (aged 16 and under). It was reported that this would not have been tolerated locally by residents. By contrast, in site D, young people (aged under 16) were reported to be heavily involved in running drugs.

The impact of drug-dealing and drug markets on local communities

The majority of respondents surveyed in all four sites considered illegal drugs to be a big problem in their area – ranging from 67% of respondents in site C to 90% of respondents in site A. However, residents' direct exposure to drug problems, whether through witnessing drug-using behaviour or seeing discarded syringes in their neighbourhoods, differed across the four sites. In site A, of the 60% of respondents who had observed drug use in their area directly, 89% had observed people smoking drugs and almost 50% had seen discarded syringes in their neighbourhood. In site B, 31% of respondents had observed drug use directly: of these, 75% had seen people smoking drugs and 22% had seen discarded needles in the 12 months prior to the study. In site C, again, 31% of respondents had observed drug use directly. Of these, 90% had seen people smoking, but just 9% had seen discarded needles. In site D, which, like site A, had a deeply embedded and thriving open drug market, 55% of respondents had observed drug use directly: of these, almost 90% had witnessed people smoking drugs, and 50% had seen discarded needles in their neighbourhoods.

Open drug markets impacted on local communities by curtailing residents' freedom of movement. In site A, almost two-thirds of respondents avoided certain areas at certain times, primarily because of people hanging around in groups taking drugs. Sixteen per cent cited open drug-dealing as a concern. Over half of site B respondents avoided certain areas at certain times, mostly because of people taking drugs and consuming alcohol. In site C, 40% of respondents avoided specific areas at particular times – mainly because of people hanging around in groups. Of the 41 respondents who gave reasons for their avoidance of certain areas, 10 specifically cited the incidence of people hanging around taking drugs. In site D almost half of respondents avoided certain areas at certain times, with 44% of those doing so because of people in the area taking drugs. This loss of communal space can contribute to a further deterioration in community quality of life. Irish and international research has shown that the detachment of ordinary residents from the place in which they spend their daily lives can create a sense of disempowerment, which further undermines attempts to address this decline in the quality of life in a community. The literature also shows that this cycle of alienation and decline can operate as a catalyst for progressive criminal behaviour, thereby intensifying the grip of local drug markets.

Description of interventions in drug markets

This study provides the first comprehensive picture of the role, resources, strategies and activities of the principal drug-law-enforcement agencies in the State, Revenue Customs Service and the Garda Síochána.

Revenue Customs Service is responsible for the surveillance of the frontiers of the state, including the maritime frontiers, territorial waters and contiguous zones, and for enforcing customs and excise legislation. Many drug seizures result from profiling techniques based on risk analysis. The air mail unit (Dublin), Athlone mail centre and Dublin airport passenger terminal accounted for most of the drug seizures made by Customs Drugs Law Enforcement (CDLE) during the research period. The drugs seized are generally en route from source/transit locations such as Amsterdam, South Africa or South America. Mail stations such as Portlaoise report a high rate of low-volume seizures of substances such as cannabis, and the illicit supply of prescribed medication such as benzodiazepines. Customs reported a number of successful operations during the period of the research. Of the 1,378 seizures of illegal or controlled drugs between January and June 2009, 90% were of cannabis herb or resin. The vast majority of these seizures (90%) weighed less than 28g and were most likely for personal use. In the same period, 52 seizures were made by CDLE of illegal substances that weighed 1kg or more (4% of total seizures). Cocaine and cannabis herb accounted for 89% of these seizures. It is not possible to determine accurately the proportion of these drugs that were destined for the Irish market or whether these seizures had a significant impact on drug availability in Ireland.

GNDU strategic operations focus on dismantling and disrupting international and national drug supply networks and organisations and also working with divisional and district Garda drug units to dismantle local networks. The GNDU also co-operates with CDLE and with international organisations. The GNDU also has a role in co-ordinating Garda policy on demand-reduction initiatives. Drug importation and distribution is an unpredictable business, with its success, from the perspective of the drug supplier, contingent on a range of variables. For the Gardaí to mount a successful policing operation, their approach must be cognisant of and sensitive to the various factors affecting the suppliers' activities on a continuous basis. Consequently, as investigations against organised crime groups are complex and time consuming, there can be a number of policing operations ongoing and overlapping at any one time.

The gathering and collation of reliable intelligence is central to the success of the GNDU's work. Unlike other areas of policing, such as robbery or murder, investigations cannot always begin from a crime scene but must depend on intelligence. The recent establishment of the Central Human Intelligence System (CHIS) provides a structure whereby all intelligence is now centralised within a specific unit. The GNDU also manages undercover test purchase operations, to penetrate closed retail markets or recreational markets such as nightclubs where people are less likely to deal drugs to strangers. In all research sites Garda drug unit strategy involved a combination of activity targeting both street-dealing and higher-level suppliers. Intelligence was generally acquired through developing relationships with offenders working in the lower levels of distribution.

Assessment of interventions

In the previous and current National Drugs Strategies, the main performance indicators outlined under the supply-reduction pillar focus on increasing supply detections and drug-seizure volumes. Both CDLE and the Garda Síochána have surpassed their required targets in this respect, reporting a number of successful operations during the period of this research. However, one challenge from a law-enforcement perspective highlighted in this study relates to the difficulty of identifying any clear link between supply-reduction activity and drug availability and use. The absence of reliable evidence of a straightforward link between supply-reduction initiatives and sustained reductions in drug availability has been highlighted in the international literature and was also identified as an important issue during the preparation of the current National Drugs Strategy (NDS). The development of new indicators in this area is currently

the focus of attention of the European Commission, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and Europol.

Despite the difficulties associated with policing drug markets, research and evidence suggest that supply-reduction activities can contribute to the containment of drug markets and frustrate the expansion of new markets. Nevertheless, the public demand for illegal drugs and the profits that can be earned from drug-dealing ensure that international and Irish drug markets remain resilient and adaptable to law-enforcement interventions. Across all four study sites, supply offences accounted for between 17% and 33% of all drug offences. The largest proportions of supply offences were in sites A and D, which had a number of open drug markets. Most supply offences related to heroin, cocaine and crack cocaine. On the one hand, this reflects the intelligence-led and focused nature of activity by individual Garda drug units. On the other, it reflects the greater availability of drugs in these areas. In all four sites, most prosecutions were for simple possession of cannabis. Most of these relate to stop and search activities by Garda members, and the amounts seized were valued at between €10 and €20.

Although some drug sellers acknowledged the importance of being wary of Garda activity, there is no evidence from the study that general drug availability was affected significantly for any period by law enforcement. Local community tolerance of cannabis use was highlighted by Garda members and by treatment workers in a number of sites. In sites A and D, the Gardaí had initiated several targeted operations. Despite this, Gardaí acknowledged that, although their activities led to the disruption of the market, the impact was generally of short duration as markets adapted quickly. Again, this is consistent with findings from international research. The limitations of such Garda crackdowns in busy hotspots were also highlighted by local drug sellers, who explained that they would disperse quickly when Gardaí approached and resume when they left the area. Drug sellers also adapted to drug law enforcement by managing risk exposure. Rather than keeping drugs on their person, they were kept in a separate location. Consignments might be divided up and buried at a series of locations, where buyers could collect them. Higher-level sellers often used others to transport drugs for them, either children or people who were in debt to them, or heroin users who did it in return for drugs for their own consumption. Drug sellers also reported using people as decoys, giving them a small amount of drugs and then informing the Gardaí so as to distract the latter from a larger drug deal happening simultaneously. Although relations with communities and other agencies, including treatment agencies, were stronger in some locations than others, in general inter-agency and community links were underdeveloped and often informal. However, formalised community and inter-agency partnerships, where they existed, were regarded as beneficial both in terms of developing responses and reassuring community residents.

Impact on drug price and purity

Other relevant supply-reduction indicators are drug price and purity levels. Interviews suggested that heroin and cocaine had become cheaper to buy in all four sites and at all market levels. However, crack cocaine prices remained high and steady in the markets where it was available. Crack also returned the highest profit margins. Depending on the unit size that they were willing to sell at, sellers could make from 2 to 400% profit on their initial stake or investment. The amount of profit was affected by whether or not the seller was a drug user, thereby consuming part of their own supply. Although there are a number of factors that can affect drug prices in an illicit market, there was no indication from this study that drug law enforcement was having any effect on price levels or profitability. Heroin purity levels varied within markets, but average purity remained fairly consistent across drug markets at around 45%. This suggests that heroin markets, both urban and rural, were relatively stable, with purity levels remaining constant. What this finding probably reflects is the reality that heroin is no longer a Dublin-based phenomenon but has spread countrywide.

Cocaine purity levels were generally very low and averaged at 14% across sites A, C and D. It is unclear why this was the case. One assumption might be that low purity levels are an indicator of a decrease in availability, but other information sources (such as survey data and treatment figures), do not suggest that there was a decline in cocaine use at the time of the study. An important feature of the purity data in this study relates to the adulterants used when mixing or diluting cocaine. The presence of lignocaine and phenacetin in most cocaine seizures throughout all study sites suggest either the wide availability of such substances or, the more likely scenario, that cocaine is most often

adulterated at a higher stage of the market or prior to being imported. The presence of such substances also has important health implications.

Community perspectives

In site A, only one-third of survey respondents believed the Gardaí to be effective or very effective in dealing with crime. Just over a quarter of residents knew a Garda member by name. In site B over half of survey respondents believed the Gardaí to be effective/very effective in dealing with crime in their area. More than half of the residents surveyed knew a Garda by name and 42% had spoken to a Garda about their area. In site C almost half of survey respondents believed the Gardaí to be effective/very effective in dealing with local crime. More than a third of respondents knew a Garda member by name and/or had spoken to them about the area. In site D, just under half of respondents believed the Gardaí to be effective/very effective in dealing with crime. Just one-quarter of respondents knew a Garda member by name and/or had spoken to them about the area. These findings suggest that there may be a link between perceptions of Gardaí effectiveness and positive engagement with individual Garda members working in the community. Sites A and D also had visible open street level markets and this could have an effect on community perspectives of Garda effectiveness. In all four sites, the most prevalent reason for not reporting information about drug-related activity to Gardaí related to fear of reprisal from those involved in drug-related crime.

Unintended consequences of law enforcement

In all four sites, Gardaí highlighted the importance of using informants for the purposes of intelligence-gathering. However, this could also have unintended consequences. The use of informants by the Gardaí was regarded by sellers as a major source of suspicion which often led to violence in drug markets. It was also pointed out by the GNDU that some of the violence in drug markets that was associated with Garda seizures or arrests arose as a result of paranoia among drug suppliers. In all four sites, most of the violence that occurred related to unpaid drug debts. Drug debts were acquired through people consuming their own supply or as a result of Garda seizures. Where Gardaí seized drugs, debts remained outstanding and still had to be paid. This may be described as an unintended negative consequence of drug law enforcement, whereby effective supply-reduction activities can contribute indirectly to greater levels of drug-related violence. Another unintended effect of law enforcement identified in the literature is the tensions that can arise between law-enforcement and public-health goals. For example, where drug markets develop in close proximity to drug-treatment centres, law-enforcement responses need to be carefully managed. Sensitivities in relation to this issue were acknowledged both by health workers and by Garda members interviewed in one study location, and the Gardaí adopted a pragmatic approach when dealing with dependent drug users seeking treatment. This highlights the importance of nurturing and sustaining effective partnerships between criminal justice, health and social agencies.

Policy implications

Preventing the emergence and growth of illicit drug markets

Future approaches to illicit drug markets and drug-related crime need to address the various environmental, social and economic factors that contribute to the emergence and growth of illicit drug markets in the first place. These factors should be considered in relation to different market levels: import, middle-market and retail level. At a global level, preventative approaches should involve collaboration with international partners in countries where the drugs are sourced. At a national level, environmental crime-prevention measures should be incorporated into housing planning, for example. In seeking to prevent young people from becoming involved in gang formation and local drug markets in the future, international best practice approaches need to be investigated and delivered through the education system. In responding to illicit drug markets, it is important to consider what interventions are seeking to achieve and how specific market structures and forms of organisation can impact on these interventions. Policing responses, whether street patrols or intelligence-led initiatives of a more covert nature, strive to disrupt markets and thus reduce or control supply. On the other hand, demand-reduction strategies attempt to target users and divert

them into drug treatment, by means of arrest referral schemes, for example. It is important that supply-reduction and demand-reduction initiatives are complementary.

The international literature also suggests that time in prison may contribute to future involvement in illicit drug markets. Although this issue was not the focus of this research, a number of interviewees in particular sites referred to the fact that the prison setting had afforded them the opportunity to make friends/acquaintances with people with whom they subsequently, upon release, engaged in drug-dealing. These interviewees were often dependent drug users whose original imprisonment was drug related. This reaffirms the desirability of diverting people away from imprisonment, where appropriate, and into treatment. The increased use of arrest referral and of alternatives to imprisonment such as the Drug Treatment Court provide a more humane, effective and sustainable approach. In addition, this issue highlights the importance of supporting further efforts in the provision of treatment while in prison.

Directing responses towards the specific characteristics of the illicit market to focus on the individuals and markets that cause greatest harm

When asked what was needed to reduce drugs and crime in the area, the majority of respondents to the street survey across all four sites called for more Gardaí patrolling on the streets. Visible policing can help alleviate some of the fears associated with local drug markets. Regular police patrolling can also disrupt open drug markets and cause them to move continuously so that they do not gain a permanent visible presence. This can make the markets less accessible to people who may wish to experiment with drug use and it can alleviate the corrosive effect that open drug scenes can have on local community morale and local businesses. A regular visible police presence is also very important in fostering interaction between the Gardaí and the local community, as community members become familiar with individual Garda members. Formalised meetings between the Gardaí and local residents can benefit from such interaction.

The main newly emerging drugs identified in specific study locations were crack cocaine, cannabis herb and benzodiazepines. Each of these drugs raises different issues from a legal regulation and law-enforcement perspective and also in terms of the harms associated with it. Clearly, the open dealing of crack cocaine and heroin that was identified in this study in sites A and D is especially damaging to the local communities. Public displays of drug-market violence and the involvement of young people in drug distribution are also particularly harmful consequences of some of the drug markets studied here. The deployment of law enforcement and other resources towards addressing and alleviating these most harmful drug markets, and the limitations in available resources, imply, necessarily, the strategic use of such resources.

A similar sense of perspective should also inform criminal justice responses to those involved in the operation of illicit drug markets. This study highlights that drug-dealing enterprises are dependent on the participation of numerous individuals performing different roles. These include people exploited by high-level drug-dealers to hold or transport drugs, such as children, dependent drug users or non-nationals from low-income countries. Although the ultimate harm to society arising from the supply of those drugs may be the same regardless of the motivation of the individual involved, effective prevention policies need to address the circumstances that lead people to become involved in illicit drug markets in the first place. Similarly, consideration needs to be given to cases in which individuals are found in possession of only a small quantity of drugs, but where other evidence suggests that they are dedicated high-level drug-dealers.

For example, the issue of sentencing, although not covered in detail in this study, did arise – particularly in relation to the imposition of the mandatory minimum sentence of 10 years provided for in the Criminal Justice Act 1999. In deciding whether or not to impose the mandatory sentence for drug possession as provided for in this legislation, the courts must consider and respond to many complex issues arising as a consequence of the operational dynamics of illicit drug markets. Further information about the nature of these issues and their broader societal and criminal justice implications would be of value. The Irish Sentencing Information System that was piloted in 2009 by the Courts

Service could be a useful source of further information about sentencing for drug-related offences. Ultimately, the importance of developing successful interventions at the highest levels of the illicit drug market should remain a core focus of policy. Recent legislative changes introduced in response to organised crime and the development of a more formalised system of managing Garda informants have potential in this respect.

Building community confidence and partnership responses

There is growing evidence, both internationally and in Ireland, that partnership approaches involving local communities, state agencies and other stakeholders offer the most effective method of responding to many drug problems, including illicit drug markets. Community engagement in partnership approaches is often contingent, however, on the extent to which community concerns are understood and acted upon. In trying to develop the capacity of communities to take positive action against drug markets, it is important to appreciate the limited or constrained choices that are open to many community residents. In particular, the fear and intimidation associated with drug-related crime clearly undermines the willingness of the public to engage with initiatives aimed at disrupting such markets. Consequently, successful approaches depend upon the building of community confidence through initiatives that are locally relevant, that are tangible and that are consistent over time. Such a response can best be delivered through formal inter-agency and community-based structures such as local policing fora, as provided for in the National Drugs Strategy 2009–2016. The Dial-to-Stop Drug Dealing and Intimidation scheme, which has recently been extended, originally emerged from such a locally based policing initiative. The prioritisation of community issues, the implementation of responses with community support and the engagement and fostering of more effective relations between agencies can help ensure that public and human resources are used to their maximum effect.

Investigating drug markets and monitoring drug market interventions

It is necessary to continue to develop methods to improve our knowledge about illicit drug markets, supply-reduction activities and drug-related crime in line with international best practice. Despite Irish research indicating clearly that many arrested and imprisoned offenders are dependent drug users, the absence of accurate indicators to assist us in measuring the proportion of crime committed as a consequence of drug use is a major gap in knowledge and undermines the development of evidence-based responses to drug-related crime.

This study has shown that regular compilation of drug market data, including data on arrests, seizures, price and purity, and adulterants, can assist in explaining both the operational dynamic of illicit drug markets, and can be useful in monitoring and informing both criminal justice and public health responses to them. The regular compilations of such data at different market levels and for different drug types will further enhance this picture. However, a more comprehensive understanding of drug markets, drug-related crime and supply-reduction responses requires such data to be complemented by other data sources and further research. The full impact of supply-reduction activities, for example, cannot be fully assessed by measuring arrests and seizures alone or through proxy measurements such as price and purity. A fuller picture needs to incorporate demand reduction, social, health and community welfare indicators. Although this exploratory study has sought to develop our understanding of illicit drug markets in Ireland, as with most research it has also identified areas where further investigation is warranted. The pathways that lead young people into drug-dealing and drug-related gangs, developing our understanding of higher-level drug markets in association with international partners, and recreational drug markets which are less likely to come to police attention are just some potential areas for further research.

Conclusion

The complete removal of illicit drug markets through drug law enforcement is not an achievable goal in the foreseeable future. It needs also to be recognised, however, that not all drug markets are equally harmful in terms of the effect they can have on individuals and local communities. For example, some are more violent than others and open markets cause more disruption to communities than closed ones. Some involve the exploitation of young people and other vulnerable groups. Future law-enforcement interventions, in partnership with communities and other agencies, need to evolve to address the complexities and particular harms associated with Irish drug markets. It is suggested that such an approach requires a more pragmatic use, co-ordination and streamlining of existing resources and the targeting of those resources at the most harmful aspects of Irish drug markets. Law-enforcement interventions that focus on the particular harms associated with an individual market have the potential to have an impact on those harms and they may also lead to a more effective use of public resources. Further, approaches that seek to divert problematic drug users into treatment and that prioritise local community perspectives, and those that occur in collaboration with other relevant agencies, are more likely to be sustainable over time and to win public support. Finally, it is necessary to develop our understanding of illicit drug markets and drug-related crime and of the interventions made in response to them through an integrated approach, by promoting research and monitoring systems that can enable us to analyse such phenomena and activities across both state and community sectors.

NACDA RECOMMENDATIONS ARISING FROM THE REPORT ON ILLICIT DRUG MARKETS IN IRELAND

The Illicit Drug Markets Study was commissioned by the National Advisory Committee on Drugs and Alcohol (NACDA) in an effort to inform the National Drugs Strategy and to provide information on the drugs market situation in Ireland at a moment in time. The Study is therefore an aid to the work of the NACDA and while many of the issues raised by the Study are being addressed by the current National Drugs Strategy, the findings of the Study will inform further work.

1. Address at-risk youth involvement in gang formation and local drug markets based on best practice

The report supports the need to fully implement the range of initiatives relating to the prevention of drug use and the problem of people's involvement in drug trade as set out in the National Drugs Strategy (interim) 2009-2016.

In addition, the NACDA recommends that research and programme evaluations are assessed to establish the extent to which youth diversion initiatives, such as the Garda Youth Diversion Projects, are associated with a reduction in drug use among young people participating in these initiatives. Consultation with the Irish Youth Justice Service would be an essential undertaking for this review work.

2. Responses to new drug markets crack cocaine, herbal cannabis, prescription drugs and drug adulterants

The report supports the need to fully implement the range of initiatives relating to the prevention of the emergence of new markets and the expansion of existing markets for illicit drugs as set out in the National Drugs Strategy (interim) 2009-2016.

The report also highlights the need to investigate sources of and develop responses to licit prescribed drugs. The Health Products Regulatory Authority, in conjunction the Revenue's Customs Service and An Garda Síochána co-operate closely and effectively to monitor and investigate instances of illegal supply of medicinal products coming into Ireland via the postal system.

Action 15 of the National Drug Strategy (2009-2016) calls for drugs-related legislation to be kept under continuous review and the NACDA notes that this is underway in relation to prescribed drugs.

In accordance with Action 54 of the National Drugs Strategy (2009-2016) the NACDA recommends that consideration is given to the further development of systems monitoring changing drug trends in line with the EU Early Warning System.

To strengthen the Committee's capacity to respond to emerging drug trends, the NACDA recommends that consideration be given to implementing the Drug Trends Monitoring System (NACD 2007), a model of data/information collection developed to facilitate an information flow for the purpose of detecting and monitoring emerging drug use problems and the consequences thereof*.

* A pilot study (NACD 2007) suggested two indicators that could be successful: 1. A network of trend monitors consisting of frontline workers from around the country to complete a twice-yearly trend questionnaire on the drug situation in their area, and notify the DTMS when new trends arise; and 2. A series of focus groups with drug users to assess latest drug trends.

3. Addressing fear and intimidation caused by drug markets in communities

The report highlights the need to build on the approaches set out in the National Drugs Strategy (interim) 2009-2016. Specifically it supports

- Action 5 of the NDS to develop a framework to provide an appropriate response to drug-related intimidation in the community; and
- Action 7 of the NDS to develop an initiative to target adults involved in the drug trade who are using young children to engage in illegal activities associated with the drugs trade.

This dual approach in response to open drug dealing and intimidation in communities is recommended.

Violence and intimidation are strategies employed to protect a customer base at all market levels and more visible policing of communal spaces in tandem with an intelligence led approach needs to be promoted to help develop confidence within the community.

4. Develop methods to improve our knowledge about illicit drug markets, supply reduction activities and drug related crime

The NACD recommends the development of indicators to identify and measure drug supply activity and markets in line with EU proposals for the development of supply indicators. The PULSE system could be developed to facilitate enhanced information on drug related offences. There is a need to ensure regular compilation of drug market data including arrest data, seizures, price and purity and drug adulterants at different market levels and for different drugs.

5. Sentencing drug related crime

The report highlights the need to further work in relation to Action 6 of the National Drugs Strategy (interim) 2009-2016 – putting in place an integrated system to provide information on progression of offenders with drug related offences through the criminal justice system.

While progress has been made in the provision generally of sentencing information through projects such as the Irish Sentencing Information System, efforts must continue on the provision of information in relation to sentences imposed for drug offences.
