National Drug Law Enforcement Research Fund

PSYCHO-STIMULANT USE, HEALTH AND CRIMINAL ACTIVITY Among Injecting Heroin Users.

NDLERF MONOGRAPH No. 10

Jones, Weatherburn, Freeman & Matthews (2005).

Plain English summary and implications for police prepared by Roger Nicholas.

Methodology

The researchers interviewed 200 intravenous drug users (IDUs) recruited from needle and syringe program outlets in Sydney, along with a further 96 inmates from two metropolitan prisons who had a history of injecting drug use. The research sought to ascertain: the effect of perceived price, purity and availability of heroin on heroin use and expenditure; the effect of the perceived risk, hassle, and amount of contact with police on heroin use and expenditure; and the differences in terms of adverse health and behavioural outcomes between IDUs who use heroin only and IDUs who use a combination of heroin and psycho-stimulant¹ drugs.

Key findings:

- Before considering the key findings of this research, it is important to be mindful that the research provided a snapshot of a particular group of heroin users at a particular point in time. It is likely that the sample of heroin users involved in this research was unusual, in that they were recruited after a major change in the supply of heroin. This change was associated with dramatic increases in the price of heroin and decreases in its purity. There is evidence that many heroin users. This group was arguably less likely to curtail their consumption of, and expenditure on, heroin in the face of higher prices and lower heroin purity. Equally, they may also have been less likely to curtail their heroin expenditure and use in the face of higher levels of risk and hassle associated with police intervention. Consequently, the findings of this research need to be viewed with some caution in so far as the extent to which they can be generalised to all heroin users.
- For this group of IDUs, most of the factors which are able to be influenced by law enforcement, such as heroin purity, and the perceived risks and hassles associated with purchasing heroin, appeared to have no influence on drug expenditure or drug use.
- The only factor able to be influenced by law enforcement which affected heroin use and expenditure, was the amount of time that users took to acquire their drugs. Specifically, IDUs who took longer to obtain their heroin spent significantly less on the drug and used significantly less of it.
- IDUs who had more contact with police spent more on heroin each week than did those IDUs who had relatively infrequent contact with police. This could be taken to mean that the frequency of contact with police has no effect (or even increases) heroin use. It could also mean

Funded by the Australian Government Department of Health and Ageing as part of its commitment to the National Drug Strategy.

www.ndlerf.gov.au

¹ Psycho-stimulant drugs are those which elevate mood and arousal and include cocaine, methamphetamine and ecstasy.

that those who buy more heroin tend (as a result of their illegal activities) to come into contact with police more often.

- Heroin users who also used psycho-stimulants were more likely to have suffered a range of physical and psychological health problems, and were more likely to have committed a variety of types of crimes, compared with opioid users who had not used any psych-stimulants recently. It is also probable that the heroin users who also used psycho-stimulants were more involved in violent crime than were their non-psycho-stimulant using counterparts.
- Heroin users who were involved in treatment used less heroin and tended to spend about \$270 per week less on heroin each week.

Implications for policing

As is evident, the longer it took the heroin users to obtain their heroin the less they used and spent on heroin. This probably confirms the widely held assumption among police that increasing the non-monetary costs associated with heroin use is an important means by which police can limit heroin consumption and expenditure (although it should be noted that it is equally possible that people who use heroin more frequently have steady and rapid access to it and that this is a major factor which influences the amount of time taken to buy heroin).

The finding that the heroin users who also recently used psycho-stimulants had more health problems and involvement in criminal behaviour has important implications for policing. Specifically, careful consideration needs to be given to the implementation of supply reduction strategies to ensure that drug use is not simply displaced onto other (potentially more harmful drugs). If, for example, heroin users were to increase their cocaine or other psycho-stimulant use as a result of reduced heroin supply, this is likely to increase the health and potentially law enforcement costs associated with illicit drug use. At the very least, health authorities need to be aware of upsurges in cocaine or other psycho-stimulant use so that measures can be put in place to reduce the impact of this.

A further finding, which has implications for street-level policing, is the occupational health and safety risks associated with interactions with psycho-stimulant users. This group is likely to be more difficult and dangerous to deal with than are other groups of illicit drug users. It will therefore be important to ensure that police have the appropriate training and equipment to deal with these potential problems.

Finally, this project has confirmed other research concerning the benefits of treatment for heroin users. This benefit can be measured in terms of less consumption and less expenditure (and therefore presumably less criminal activity). Therefore, any measures which police can introduce or encourage at the strategic or operational levels, to get heroin users into treatment are likely to have broad ranging benefits.

A full copy of this report is available on the NDLERF website at www.ndlerf.gov.au

Funded by the Australian Government Department of Health and Ageing as part of its commitment to the National Drug Strategy.

www.ndlerf.gov.au