

CRACK AND COCAINE

Changing patterns of use and supply

In our two surveys on the supply and use of crack cocaine in Nottingham, funded by the Home Office and conducted over a period from 1989, we found a number of disturbing features. However, if the picture in Nottingham is similar to that nationwide there was nothing to suggest Britain will be swamped by a cocaine epidemic. Problems exist to be sure but not of the kind predicted in the late 1980s. Our data suggests Britain will not follow the American pattern nor will be dominated by the use of one drug, cocaine. The patterns of use in Britain are more complicated with rapid fluctuations in the type of drugs used and which are in turn as much dominated by fashion as by supply.

Our first survey was conducted in 1989 and the second was 2 years later. In the first we had little or no information on which to base the research. There was of course a vast amount of American literature but that was often written in an evangelical way depicting the evils of cocaine, exaggerating its impact and aimed at justifying the American control system. In Britain there were two recent studies, although it has to be remembered that cocaine has been a favoured drug in Britain for five or six decades. These studies showed that crack use had increased throughout the 1980s but users were not presenting themselves for treatment at the traditional treatment agencies.

Our research was concerned with patterns of use and the structure of the supply systems. The method to be used was 'snowballing'. Snowballing of course does not provide a representative sample of users; it produces groups of users tending to cluster according to the initial referral source. Even so our main problem was being able to make the first contact, or getting into the drug system as it were, and this took nearly 2½ months of our 6 months project. We interviewed about 40 users, mostly male, mostly white, covering a wide age range and wide social class distribution.

Our data showed that there were a number of different groups of users. Firstly, there were the typical street junkies who were poly drug users where

crack/cocaine was part of their pattern of prolific drug use. Secondly, there were the prostitutes who seemed to constitute a separate group. It was only later incidentally that we began to understand why prostitutes were regular crack users. In part it was because they had a good credit rating having ready access to cash. Thirdly, there was a small group of young middle class professionals spending about £1,000 to £2,000 per week on cocaine. Finally, there were other users, sometimes regular users but more often than not casual or experimental users who had begun taking crack/cocaine over the last year or so. Although they have been classified here as a distinct group they were more a residual category of users who had in common only that they had taken crack/cocaine.

Patterns of supply

When we looked at the supply patterns we found a rather haphazard system, often amateurish, except for the middle class users, who purchased their drugs from London in the form of cocaine hydrochloride and themselves turned it into crack. For the rest, Nottingham was a satellite delivery town where crack/cocaine was brought into the city from London, Birmingham or Liverpool alongside other drugs to be sold by a number of dealers - we thought there were about 5 such dealers regularly supplying Nottingham. A small amount of cocaine came direct from the West Indies by couriers using body wraps who came to Britain via Heathrow. Our conclusion in this first study was that, if nothing else, the current supply system could not sustain or increase in use; a new system would have to develop. This linked to the relatively small number of users - who incidentally were all users of other drugs such as cannabis and amphetamines and therefore already part of the drug culture - suggested Britain was a long way from experiencing an epidemic of crack/cocaine use.

When we conducted the second study two years later we found that changes had occurred. There were no middle class crack users to be found - perhaps for the very obvious reasons that they had run out of money. Moreover the small number of casual users found earlier had increased and become a much larger group

with the biggest increase occurring among the black (Afro Caribbean) community. On the other hand the street junkies continued to take crack as before but most had also moved on to take ecstasy by now and anyway this group were being quickly marginalised and more socially isolated from the other drug cultures. Similarly crack was still taken by prostitutes but by now this group could no longer be seen as a separate group being more like other regular users in terms of their patterns of use. What we found then was an increase in use, where although the largest numbers of users were white there was a large and therefore disproportionate amount of black users.

New forms of organisation

The supply system had also changed. The new system was more organised and consequently able to move quite large quantities of cocaine. There was a sophisticated delivery system where runners were contacted by vodaphone and crack was delivered throughout the city. The price had, if anything, fallen, providing a further indication of an increase in supply. The whole system had moved far away from that of two years earlier: large scale suppliers had appeared, protected by their 'mindors' or 'soldiers' as they were called, ready and willing to use violence if it was thought necessary. Indeed it was the amount of violence, and especially the presence of firearms, that was the most worrying feature of the new system. Clearly a new phase had occurred and with it a new type of professional drug dealer.

What is interesting about this change is that it was not matched by an increase in rates of prosecution - the dealers seemed more concerned about other dealers than about the police. And what was worrying about the results of the second study was not that there was an increase in use but the effect this was having on the black community - a point repeatedly made by black community leaders. Hopefully we shall soon be able to conduct a third study - this time to try and find out what can be done about the problem. The time has now come where I think we must begin to seek solutions.

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