Caught in the Act: The unintended consequences of drug policy on NPS markets and vulnerable user groups

Dr Rob Ralphs
Substance Use & Addictive Behaviours Research Group
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Underpinning Research

Jan 2016 to June 2016
NPS use in Manchester
Pre-May 2016 Psychoactive Substances Act

Jan 2017 to Nov 2017
Impact of the 2016 PSA

Oct 2017 to June 2018
DRL & NSP
Headshop Observations Pre 2016 Psychoactive Substances Act

Wide range of users

“You’ll be amazed at who comes in for it. It ain’t what you think, your homeless and your teenagers. It’s all sorts, all walks of life. You’re workers, you’re hipsters, students . . . Men in their 50s and 60s . . . We even had a hen party . . . Black, white, Asian … the lot!” (‘Headshop’ Worker)
‘Spice’ the dominant ‘Legal High’

Observations in city centre ‘headshops’ found that over 90 per cent of all sales involved synthetic cannabinoids (aka ‘Spice’)

129 packets of ‘legal highs’ recovered from one approved premises. 124 (96 per cent) of these were synthetic cannabinoids

“I’ve probably got about 40 clients on my caseload at the minute who are street homeless. Of them I’d say about 95 per cent of them use Spice” (Support Worker for Young Street Homeless)
The **2016 Psychoactive Substances Act**

**The main intention of the Act was to shut down shops and websites that sold ‘legal highs’.**

The Act made it an offence to produce, supply or offer to supply any psychoactive substance if the substance is likely to be used for its psychoactive effects and regardless of its potential for harm.
Drug policy experts concerns (Pre-Act)

“What will be the impact of the predicted shift if the police and local authorities focus on closing headshops without simultaneously taking steps to reduce demand, then it is probable that the trade will be displaced to illegal dealers whose sales practices may increase harms.

We are likely to see a merger of the markets for NPS and the more traditional illicit drugs, both on the street and online.

The harms of these markets and of their control will continue to be concentrated among the most vulnerable and disadvantaged groups.” (Stevens et al., 2015: 1169)

Impact of the 2016 PSA
Research findings
Market Shift: From High Street to Street Dealers

“The ban hasn’t changed anything, ... it’s not stopping people from taking it, It’s just changed where people get it from.”

(Homeless Female, late 20s)
The impact of the Act: Changing markets and user profiles

“What we saw when the headshops closed was that slow transition into street dealing . . . we’ve seen a transition from . . . what we called the ‘Spice tourists’ that came in . . . [to] almost all of it is either consumed by people who live on the streets, or people coming out of custodial institutions.” (Neighbourhood Police Officer)

“When the law came in, the recreational users, the kids who were travelling in from various cities and what not, they went. [The Act] made it less desirable to people who thought ‘hey, it’s a legal high, hey it’s legal, let’s go to a party and get stoned.’ We don’t see that anymore.” (City Centre Police Officer)
Market shift = Increase in visibility and aggressiveness of drug market

“A lad yesterday got pepper sprayed in the face by his usual dealer in Piccadilly Gardens. He got a bag of a different dealer round the corner. When his dealer found out he rode past on his bike and sprayed him up.” (23 year old Male Rough Sleeper)
Market shift = Increase in violence

“A guy got stabbed up in his tent last week. A dealer laid on an ounce [28g]. He sold it and didn’t have the money so he sent a young lad – 15/16 year old – to stab him up in his tent.” (Young People’s Homeless Outreach Worker)

“There has been an increase in people getting taxed. You buy it, especially if you by more than a few grams – and then they rob you. That’s happening more and more.” (34 year old Male Rough Sleeper)
Increased vulnerability

“The young dealers are the worst. They take advantage of the vulnerable ones. If they give them a £5 bag [of Spice] when they go back to pay for it they are fucked over for more, they say they bought three and they owe them more money. That kind of thing.” (32 year old Male Rough Sleeper)
Less support from services

“We are finding it hard to get staff to do the homeless outreach. Think about it. We go out the same days and times each week. Staff are concerned that dealers suspect we are working with the police. Some are worried they will get followed [by street dealers].” (Homeless Outreach Worker)
Increased adverse effects & stigmatisation

Manchester police attend 58 spice-linked incidents in one weekend

Officers arrest scores of people suspected of taking or supplying drug and impose 48-hour dispersal order on city centre

Homeless drug users turned into 'zombies' after taking spice

The pale, wasted figures caught in a Spice nightmare that's turning Piccadilly Gardens into hell on earth

Special Report: Jennifer Williams spends an afternoon in Manchester city centre and witnesses first-hand the horrifying human devastation and chaos wreaked by the 'zombie' drug Spice.
Summary of the impact of the Act

Closure of ‘headshops’

Refocused media driven discourse on NPS from the general population (e.g. young people, students) to a homeless problem

Stigmatisation of homeless communities (& Manchester) - ‘Zombies’ ‘Walking dead’ (‘Spicechester’)

Making vulnerable users more vulnerable - more violence, less support, more variable content, increased vulnerable states of unconsciousness
Merging of the NPS, heroin & crack markets

“We have now seen it become more embedded where they [dealers] will sell pretty much anything. … We have come across people who have got Spice, heroin [and] crack and are selling them all.” (City Centre Police Officer)

“I know a lad who sells heroin but he also sells Spice. He realised that his sales of Spice were selling out more than his heroin and he thought, ‘Well, this is the business to be in now because I’m making more money from Spice than I am from H.’ He’s still selling heroin, because there’s good demand for heroin in the City right now, but they [dealers] know they’re losing out on money if they don’t sell Spice, because somebody else will. … It’s the same substance user who’s buying heroin off them and buying Spice, so he’s hitting the two birds with the one stone, isn’t he?” (Homeless Outreach Worker)
Impact of the merging of NPS & traditional drug markets

“Some of the young people that we've been involved with ... have been actively using Spice for however long, [but now] we've seen them move on to using heroin.” (Young Homeless Project Manager)

“There was a girl that we know that started using crack ... and she had previously been using Spice. This was in about August, so not too long after the ban came in.” (Young Persons’ Housing Project Manager)
‘Street Methadone?’

“If it can overpower methadone and stop your withdrawal from methadone, it shows you that it’s a powerful fucking drug.” (35-year old Male, ex-heroin user, Approved Premises)

“People are using it [Spice] to come off the class As. ... It used to be people reducing by using alcohol rather than the class A drug, but now they’re using the Spice as that substitute.” (Supported Housing Manager)
‘Street methadone’: A self-medicating/self-detox substance

“It [Spice] has replaced a lot of other drugs. I’ve had three and a half, four years homeless on the street and a lot of my friends have given up heroin and crack addictions, and they now smoke the Spice. I’m the same. I’ve given up an alcohol, crack and heroin habit and I just smoke Spice. I give [sic] up cannabis as well.” (Male, mid 20s, Supported Housing)

“Crack heads and heroin addicts have come off crack and heroin to smoke Spice, and now they can't stop smoking Spice.” (18-year old Male, Supported Housing)
“My concern . . . is that Spice is kind of taking our eye off the ball of other things. It has overtaken things. Spice isn’t killing people. If you look at the overdose deaths, they have increased again. The North West is the second worst in the country, but it’s opioids killing people, it’s not Spice.” (Rough Sleepers Team)

Not one or the other, but often both . . .
Heroin Substitute

“Maybe it’s because it [Spice] gives them a better high because the heroin isn’t great at the moment. Maybe when that [heroin] starts to get its potency back people will revert more to heroin. It’s changeable isn’t it. I suppose if you’re begging and you’ve had a bad day and you’re only getting a limited amount of money then you’d just buy Spice instead of trying to get a bit more money to try and get some heroin.” (Supported Housing Manager)

“They [users] do want heroin - because it’s been a lifelong habit for them and it’s natural for them and they’re never going to get off it - but I know some lads use Spice now more than they use heroin. For example, they might have missed a hit that day on heroin but they still have Spice. It’s kind of a substitute for heroin. They get back on the heroin the next day when the money comes in, but on that day when they had no money, at least they’ve got Spice.” (Young Persons’ Homeless Outreach Worker)
Interchangeable use of heroin & Spice

“A lot of people use both ... heroin and Spice. Some people ... are using the Spice to get off the gear, and then ... that will change. It [the Spice] will be different quality, or it will be something to do with availability or whatever ... [and] they will go back to the heroin, they will get the heroin habit again. So, it seems to be quite fluid in that sense.” (Rough Sleepers Team)
Policy & practice implications

Our findings point to how dependent users of alcohol, crack cocaine and, in particular, heroin, are using SCRAs to reduce, detox or self-medicate.

This trend has implications for service engagement and recovery journeys when previously they may have sought treatment service support.

Increased risk/susceptibility to opioid overdose?

Knowledge gaps

Lack of clinical guidance, practitioner knowledge & harm reduction advice on the effects of opioid & SCRA use