The International Background to Ireland’s drugs problem...

The global production of illicit drugs is booming, with record figures for both opium and cocaine.

Total global opium production jumped by 65% from 2016 to 2017, the highest estimate ever recorded by UNODC.

Global cocaine manufacture rose by 56% during the period 2013-2016, reaching its highest level ever in 2016.

At the same time as the traditional illicit drugs like opium and cocaine are booming, new drugs are also emerging as a major problem.

Non-medical use of opiate-based prescription drugs is becoming a major threat around the world, with fentanyl driving an unprecedented number of overdose deaths in North America, heroin remaining as the main opiate of concern in Europe.

The European (EMCDDA) Early Warning System for new drugs monitored 670 NPS (New Psychoactive Substances) by the end of 2017, up from 300 in 2013.

Cannabis remains the world’s most commonly used drug, with 192 million people using it in the past year. Data collected from 28 EU member states show a significant increase in the average potency of cannabis resin from 8.14 per cent THC content in 2006 to 17.22 per cent in 2016.

In the EU over 92 million people have used illicit drugs.

Drug markets continue to be the most important illegal market in the EU. Over 33% of organised criminal groups (OCGs) have participated in the production, trafficking and supply of illicit drugs, resulting in extensive profits that fund a range of illegal activities.

So, what’s happening in Ireland?

How many people use drugs in Ireland?

Over 26% (more than 1 in 4) of the Irish population have used illicit drugs with cannabis the most widely used illicit drug.

- **Cannabis**

2015 figures show 14% of young adults (15-34) used cannabis in the previous year and the ESPAD school survey for 2015 showed almost 19% of 15 to 16 year olds had used cannabis during their lifetime.

- **Opiates**

In the most recent study in 2014, estimated opiate users showed a range from 18,720 to 21,454, with an estimate of 13,458 in Dublin.
Poly drug use

Our communities are now coping with an increasingly complex and chaotic drug problem that includes a mix of:

➢ Prescription drugs including painkillers, sedatives and tranquilizers: (benzos e.g. Valium, Xanax, Dalmane, Tamazepan, Zs e.g. Zimovane)

➢ Illegal drugs, including heroin, cocaine, amphetamines, ecstasy/MDMA, mephedrone.

➢ New psycho-active substances (NPS), are often sourced on the internet

➢ High-strength cannabis which is now having a significant impact, particularly on young people and their mental health, not identified with cannabis use in previous generations.

➢ Crack cocaine is now a significant problem in specific areas in Dublin, with the risk for users of a rapid decline in both physical and mental health

➢ GHB and GBL (Gs), crystal meth and ketamine are associated with chemsex

➢ Widespread availability and misuse of alcohol continues to be a core part of the polydrug problem

Drug Related Intimidation

As well as drug misuse, the impact of the drugs trade is having a devastating effect on our communities...

● Murders, attempted murders and violent attacks by and between members of criminal gangs related to control of the drugs trade are now the most visible features of drug-related violence and intimidation in Ireland. This violent crime has also brought to light the role of Irish criminal gangs in the European and International drugs trade.

● What remains hidden is the insidious, ongoing, day-to-day drug-related intimidation that is experienced in our communities - in our 2016 study less than 10% of people experiencing intimidation reported it to Gardai for fear of reprisal. Figures from the NFSN/Garda National Intimidation Reporting Programme show that in 2016 only 4 charges relating to intimidation were pending across all Garda divisions and in 2017 only 1 case was under investigation.

Drug Related Deaths

695 people died from Drug Related causes in 2015

61% Increase in Drug Related Deaths between 2004 – 2015, a total figure of 7,422

Drug-related deaths are 3.5 times higher than road deaths

2 out of 3 poisoning deaths involved poly drugs with on average 4 different drugs involved

https://www.drugsandalcohol.ie/deaths-data/index.html

Possession of drugs for personal use

In 2017, 72% of convictions for drug offences in Ireland were for possession of drugs for personal use.

The UK’s National Treatment Agency (NTA) estimates that every £1 spent on drug treatment saves society £9.50 through crime reduction, economic and social reintegration and reduced health expenditure

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How is our National Drugs Strategy (NDS) responding?

1. Funding for Drug and Alcohol Task Forces/Community Drug Projects

The Programme for Government 2016 states “We support the expansion of local Drug Taskforce projects” and the NDS recognises the central role of Drug and Alcohol Task Forces (DATFs) in co-ordinating the delivery of the Strategy at local and regional level. During austerity years the DATFs and Projects were hit by cumulative cuts of up to 37% and they continue to be left behind.

There were no budget increases during 2015, 2016, 2017 or 2018, despite an additional allocation of 6.5m to the Dept. of Health for drug-related actions in 2018.

While some short-term and once-off funding was allocated in 2018, there has been no restoration of overall Task Force budgets which remain, at the start of 2019, at the levels they were reduced to during the years of austerity.

Minister Catherine Byrne has stated that in 2019 ‘the intention is to prioritise funding for Community Drug and Alcohol projects in Task Force areas, with the allocation set out in the HSE 2019 National Service Plan’.

The 2019 HSE Plan shows a figure of an additional 1.9m for overall social inclusion activities, with addiction services one of the five service areas to be covered. With the wide range of priorities that needs to be addressed under the Social Inclusion heading, we do not have an indication of any increase in resources being available for Task Forces and Projects during 2019.

Action 1
Implement the commitment in the Programme for Government through the immediate allocation of an Emerging Needs Fund to the Task Forces to support Community Drug Projects in the delivery of services that can respond to current and emerging service gaps in our communities.

2. Whole-of- government approach

The NDS commits to addressing the drugs issue with An Integrated approach through Inter-agency partnership and we need strong co-ordination and co-operation in delivering NDS actions involving 17 different departments, agencies and sectors. The National NDS Committees (National Oversight Committee & Standing Sub Committee) need to be reinforced by strong leadership from the Taoiseach’s Department so that they can deliver the co-ordination and co-operation that is required.

Action 2
The Taoiseach’s Department to appoint a senior official to the NDS National structures to ensure direct accountability of all agencies at national, regional and local level for their active participation in implementing the new NDS.

3. Drugs and Alcohol

The new NDS commits to delivering an integrated public health approach to drugs and alcohol as a key priority and, while we continue to highlight that services are not being adequately funded to do this, the passing into law of the Public Health (Alcohol) Bill after many delays is an important step.

Action 3
Government to commit to a clear timetable for prompt implementation of the provisions of Public Health (Alcohol) Act and proceed without further delays.
4. **Drug-related Intimidation**

Drug-related intimidation represents a serious threat to our local communities and there is an urgent need to bring together a High-level Group including senior Justice and Garda personnel, community representatives and other relevant stakeholders, to come up with an action plan to address the problem and its impact in communities. We also need to see immediate action i.e. expansion of Asset Profilers to give our communities some sense of hope.

**Action 4**

The current work of the Garda Asset Profilers to be accelerated with a focus on targeting people making very significant sums of money from the drugs trade while living in their local areas.

5. **Young People**

The increase in the strength of cannabis is leading to growing concern about the impact on young people’s mental health and Community Youth Projects are also reporting a significant increase in benzo use by young people. The Greentown Study shows how young people are being recruited into criminal gangs and research soon to be published by Citywide shows how drug debt is leading young people into involvement in the trade. We need to provide relevant and effective services for our young people to reduce their risks of problem drug use and of engagement in the drugs trade.

**Action 5**

Ensure that the new scheme proposed in the NDS for young people is developed through a partnership approach involving youth services, (in particular those involved in YPFSF), schools and community drug projects and that young people from the target group are directly involved in the design and development of the new scheme.

6. **Decriminalisation**

The NDS commitment to a health-led rather than a justice approach provides an appropriate policy framework for the removal of criminal sanctions for possession of drugs for personal use. A person would no longer be deemed a criminal because he/she uses a drug, while possession for sale or supply remains a criminal offence and the drugs are still illegal. This approach is not about minimising in any way the potential and actual harms caused by drugs, with which our communities are all too familiar, it is about addressing those harms in a better way by referring people to treatment and support services rather than into the criminal justice system.

**Action 6**

Conclude the work of the Working Group on Alternative Approaches to Criminalisation without any further delays and end criminalisation of possession for personal use.

7. **Community Participation**

The worst impact of the drugs problem continues to be in the poorest communities where the drugs problem has become chronic, deep-rooted and embedded, impacting negatively on all aspects of community life. People are struggling to keep going and must be actively supported and resourced to ensure that they can continue to engage in driving the response that is needed.

**Action 7**

Make an immediate investment in Community Leadership and Participation programmes with a view to strengthening the community voice across all levels of the NDS.