

# Powder Cocaine & Problematic Drug Users: A comparative study of the characteristics of DIP clients in Merseyside (April 09 – March 10).

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## 1.0 INTRODUCTION

### Drug Interventions Programme

The Drug Interventions Programme (DIP) is an initiative set up by the Home Office in 2003 with an overarching aim to break the cycle of drug misuse, crime and prison and as a result reduce acquisitive crime in communities within England and Wales. DIP is a multi agency initiative incorporating the police, criminal justice system, the crown prosecution service, probation and treatment agencies who unite and direct class A drug misusing offenders towards treatment. DIP plays an important role in the Government's most recent drug strategy, *Drugs: Protecting Families and Communities* (Home Office, 2008) and many of the clients who are assessed for DIP can be some of the most difficult to reach problematic drug users (Home Office, 2010a). It is estimated that more than 1,900 drug misusing offenders are currently entering treatment on a monthly basis through DIP and this is suggested to have contributed to drop of about 55% in drug-related crime between 1997 and 2007 (Home Office, 2010b). It is documented that clients who enter treatment, through routes other than through DIP, can have an overall cost benefit and according to the DTORS report 2009 for every £1 spent on drug treatment, £2.50 at least is saved and this was the case in about 80% of cases within the study (Home Office, 2009a). Although corresponding figures are not available for DIP specifically it does suggest that engaging such clients into treatment can have some cost saving benefits.

There are a wide range of treatments and services available to individuals who go onto DIP which help give them a holistic support system. Such services include harm reduction interventions, overdose management as well as other more generic services relating to housing, health, independent living, managing finances, developing new social support networks and rebuilding relationships with families (Home Office, 2009).

Individuals, who enter DIP for the first time or re-enter after a period of absence, are assessed and the information is recorded using the Drug Interventions Record (DIR). This form details a wide variety of information about each individual including date of birth, gender, ethnicity, offence(s) committed that prompted the assessment, drug use, amount of money spent on drug use, the sharing of drug use equipment, alcohol use, accommodation details, employment status and treatment details. This DIR follows the individual as they progress through DIP in order to ensure efficient and effective continuity of care in the community and prison within England and Wales.



## Cocaine Prevalence

Cocaine, a natural product which is extracted from the leaves of the coca plant (*Erythroxylon coca Lam*), is grown on the Andean ridge in South America and is the only known natural source of cocaine (EMCDDA, 2010a). Today cocaine still remains a global commodity and the United Nations Office on Drugs and Crime (UNODC) highlighted that global production of cocaine was estimated to be 845 tonnes in 2007 with the average purity of cocaine reported to range between 22 – 57% and the mean retail price between €44-88 per gram (UNODC, 2009). The report does indicate that in 2007 about 710 tonnes of cocaine (the equivalent of 412 tonnes of pure cocaine) was seized globally.

Cocaine, a stimulant, is generally consumed in two main forms - powder cocaine (cocaine hydrochloride) and crack cocaine (small rocks or lumps). Powder cocaine is mainly taken by sniffing the powder through the nasal cavity or by injecting, whereas crack cocaine is predominantly smoked but can also be injected (EMCDDA, 2007).

In 2008 the national report by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) highlighted that cocaine was the second most prevalent drug used after cannabis within Europe (EMCDDA, 2008a) and in 2010 a report highlighted that the UK (England and Wales) had the most greatest lifetime prevalence of all adults for cocaine in 08-09 (9.4%) (EMCDDA, 2010b).

According to the 2009/10 British Crime Survey (BSC), cocaine was the second most commonly used illicit drug among 16 to 59 year olds in the UK after cannabis, with 2.4% of adults (0.8 million individuals) having used cocaine in the past year which was a decrease from 3.0% in 2008/9. The 09/10 report also highlighted that opiate use (heroin, methadone etc) in the last year only accounted for 0.2% of this age group but acknowledged that limitations existed when examining drugs with low prevalence in the general population such as opiates (Hoare & Moon, 2010).

## Cocaine, young people and alcohol

There is still a clear trend with regard to the prevalence of young adults using cocaine. The EMCDDA 2009 annual report suggests that among 15–24 year olds in Europe, an estimated 2.2% (1.5 million users) have used cocaine in the last year (EMCDDA, 2009). In addition to this, the British Crime Survey 2009/10, reports that 5.5% (367,000 young adults) of 16-24 year olds in the UK have used cocaine within the last year (Hoare & Moon, 2010). This is a slight decrease from 6.6% in the 08/09 report (Hoare, 2009). Male Class A drug users are

also more likely to use powder cocaine when compared to female users (Hoare, 2009; EMCDDA, 2008a). It is also reported that adults who use powder cocaine were likely to live in urban areas and could be in a high income group receiving earnings of £40,000 - £49,000 (Hoare, 2009).

Powder cocaine can be linked to particular lifestyle patterns; in particular with the night-time economy and alcohol consumption in pubs, clubs and wine bars. The BCS 2008/09 highlighted that 14.2% of 16–24 year olds who reported attending a nightclub on four or more occasions in a month used cocaine, in comparison to a much lower figure of 4.0% of those who did not attend a nightclub during that same time period who had used the drug (Hoare, 2009). A study by Gossop et al (2006) indicated that powder cocaine users who also drank alcohol, were at risk of increasing their alcohol consumption as well as their cocaine intake when the two substances were taken simultaneously. The combination of both cocaine and alcohol is reported to create a greater and longer euphoric experience, however cocaethylene, a cocaine metabolite, can be produced and reports suggest that this chemical can have very harmful physical effects (McCance-Katz et al, 1998; Gossop et al, 2006). In addition to this combining both alcohol and cocaine is also reported to have a pharmacological link to violent behaviours (Fagan, 1993; Chermack & Blow, 2001). However this link is currently still in debate and new evidence suggests that this could more likely be the case for crack cocaine and alcohol than powder cocaine and alcohol (Vaughn et al, 2010).

In 2005, cocaine was reported as being the third most commonly reported drug of use among clients entering drug treatment in the EU, which amounted to 13% of all treatment demands (EMCDDA, 2007b). In the UK, a recent NTA report highlighted that of the 12,354 people who were in treatment for powder cocaine use in 2008/09, 8,491 (68.7%) had entered into treatment that year. The report also indicates that since 2005/06 the proportion of people who have accessed treatment for powder cocaine had increased by 10% and that over a third of presentations in 2008/09 had come from the 18-24 year old age group. Of all individuals who began treatment in 2008/09, 37% had used both cocaine and alcohol and 27% had used cannabis in addition to cocaine and alcohol (NTA, 2010).

## Report

The report focuses on Merseyside residents who have been assessed through DIP in Merseyside between April 2009 and March 2010. The report compares the characteristics of clients by separating them into two groups, powder cocaine and problematic drug user (PDU) clients. As previous evidence reports a high prevalence of powder cocaine use

among the general population as well as DIP clients in Merseyside, the aim of the report is to quantify powder cocaine use within the DIP population in Merseyside and highlight any emerging or changing trends within this drug using population and to indicate any differences in characteristics between the two drug groups. This report supplements the previous report from 08/09 *Powder Cocaine and Problematic Drug Users: A comparative study in the characteristics of DIP clients in Merseyside (April 08 – March 09)* which can be used for comparison of trends. Such information could be helpful to treatment providers in order to gain insight into the requirements of clients entering treatment services and encourage successful treatment outcomes.

## 2.0 METHODOLOGY

The data used for this analysis has been taken from DIR forms which had been completed by DIP staff in Merseyside. The analysis was performed on the basis of which Merseyside D(A)AT the clients were residing in at the time of their assessment by DIP staff in Merseyside between 1<sup>st</sup> April 2009 and 31<sup>st</sup> March 2010. Clients who indicated drug use within the previous month on the DIR form were included in the analysis and those who did not were removed.

Analysis separated the clients into three drug groups:

- Powder Cocaine users - clients who used powder cocaine and did not use crack or opiates but may also have taken other drugs
- Problematic Drug Users (PDU) - clients who used opiates (including prescribed opiates) and/or crack cocaine (potentially in addition to powder cocaine)
- Other - clients who took any of the remaining combinations of drugs.

The definition of PDU here is that used by the NTA (2002) and is not intended to suggest that the powder cocaine group had less of a problem with their drug use than the PDU group. The clients in the 'other' group were not part of the focus of this study and have not been included in the analysis.

By using SPSS, the data from the two drug groups were analysed and categorised to include:

- Drug Groups
- Ethnicity
- Age
- Gender
- Drug use
- Weekly spend on drugs
- Drug treatment
- Injecting status
- Sharing equipment
- Alcohol consumption
- Offences committed
- Accommodation
- Employment status

Each of the five Merseyside D(A)AT areas have been analysed separately as well as Merseyside as a whole. Data from the previous year's report was also included in order to compare the figures and highlight any emerging or changing trends.

It should also be noted that some fields from the DIR are not mandatory and as a result details may not be available for all clients. Where this was the case, these clients were not included for the data analysis on this item and the number that was used is indicated in the table or figure or noted under the figure.

For this year's analysis there is now a separate figure for the clients injecting status which captures the new options from the DIR form since April 2009. The sharing equipment figure now stands alone as a separate figure.

It should be noted that although questions regarding equipment sharing relate to injecting equipment, some teams may have only recently used this interpretation and as a result could have potentially answered such questions to include the sharing of non-injecting related paraphernalia such as bank notes or straws.

Please note that as clients could give details of more than one offence committed, the percentage values in the offending table can add up to over 100%.

The Alcohol Harm Reduction Strategy for England (Cabinet Office, 2004) highlights daily guidelines for sensible drinking, suggesting a maximum intake of 2 – 3 units per day for women and 3 – 4 units per day for men. It defines "binge drinking" as drinking above double these daily recommended guidelines on at least one occasion during the week. On the DIR forms, one question relating to alcohol unit intake refers directly to this definition (6.20) and in this report, where clients have reported having consumed alcohol on at least a weekly basis at or above double the daily guidelines (females: 6 or more units & males: 8 or more units), these are referred to as episodes of "binge drinking".

This document should not be read in isolation but combined with other literature about this drug group population (Howarth et al, 2009, Cuddy et al, 2009; Cuddy et al, 2008; Hurst et al, 2009). Although the report highlights information regarding the characteristics of drug users within the five Merseyside D(A)ATs over two consecutive years, it should also be used to encourage further investigation in order to fully explain emerging trends.

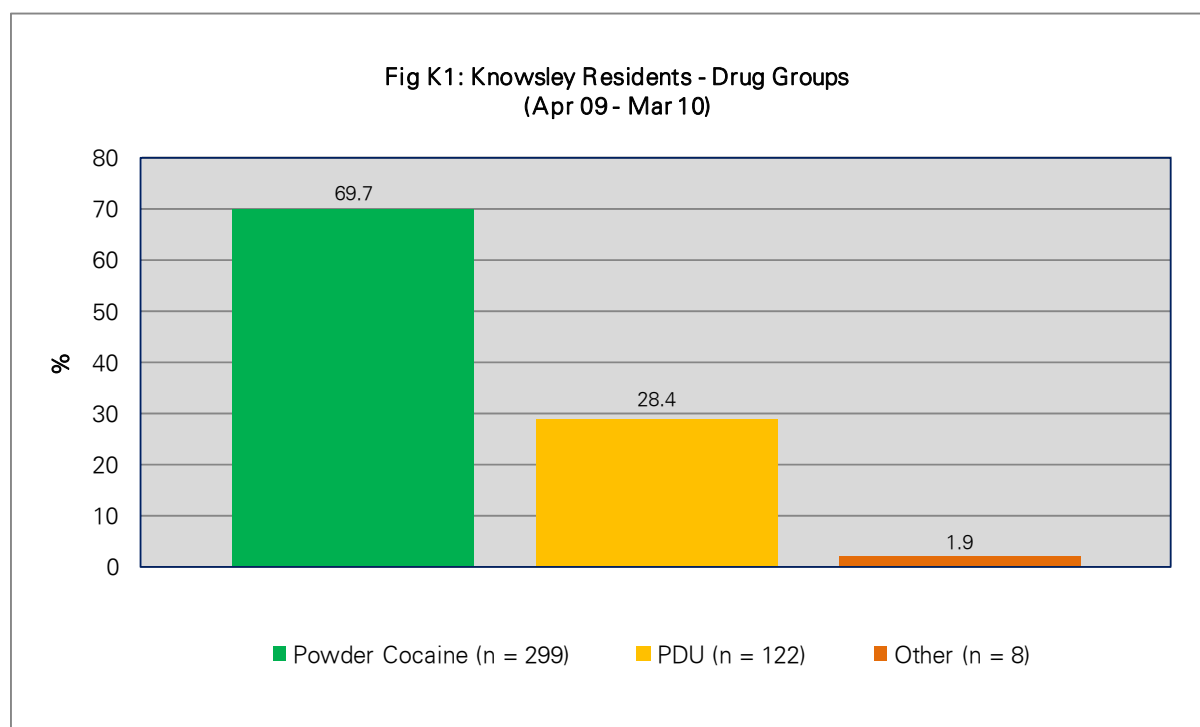
### 3.0 KNOWSLEY – Key Points

- There was more than double the proportion of Knowsley resident powder cocaine users as PDU assessed by DIP across Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of those from this drug group who were under 25 years of age was lower in 09/10 compared to 08/09 and the PDU group reported being older in 09/10 compared to 08/09.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine on a monthly basis and in addition to this cannabis use was also relatively common among this group and was more common than among the PDU group. In contrast, the PDU group tended to use both crack and heroin on a daily basis but they also used a variety of opiates and stimulants in addition to these drugs which included powder cocaine (used mostly weekly or monthly), cannabis (used mostly daily) and benzodiazepines (used mostly daily).
- The weekly rate of expenditure on drugs by the powder cocaine group was much lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years.
- A much greater proportion of the PDU drug group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A similar proportion of clients from both drug groups had ever shared drug using equipment but more powder cocaine users had shared their drug using equipment in the last month than among the PDU group.
- A large proportion of powder cocaine users drank alcohol on a weekly or monthly basis and nearly half of this group reported “binge drinking” on a weekly basis. Although over half the PDU group did not drink any alcohol, a considerable increase on the proportion reported in 08/09, those who did were more likely than powder cocaine users to report potentially problematic daily “binge drinking”. In contrast, the monthly “binge drinking” reported by the PDU group in 09/10 was nearly half that which was reported in 08/09.

- The most commonly committed group of offences for the powder cocaine group was Misuse of Drugs Act (MDA) offences compared to shoplifting being the most common for the PDU group. In addition to this the powder cocaine group also had a much greater prevalence of committing wounding or assault and theft-car compared to the PDU group and the PDU group reported a much greater prevalence of committing begging and burglary compared to the powder cocaine group.
- The vast majority of clients in both drug groups were in settled accommodation although clients in the powder cocaine group were slightly more likely to be in this situation.
- Two thirds of the PDU group were unemployed compared to nearly half of the powder cocaine group.

### 3.1 KNOWSLEY RESIDENTS

#### Drug Groups:



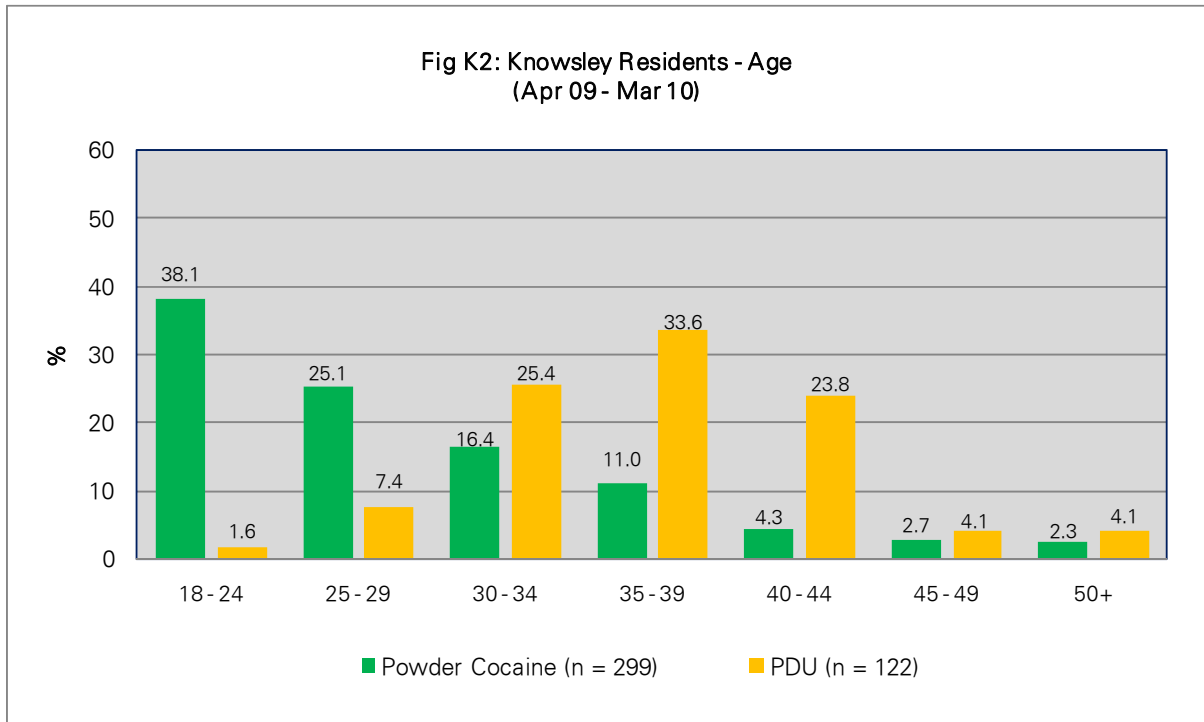
#### Ethnicity:

Table K1: Knowsley Residents - Ethnic background (Apr 09 – Mar 10)

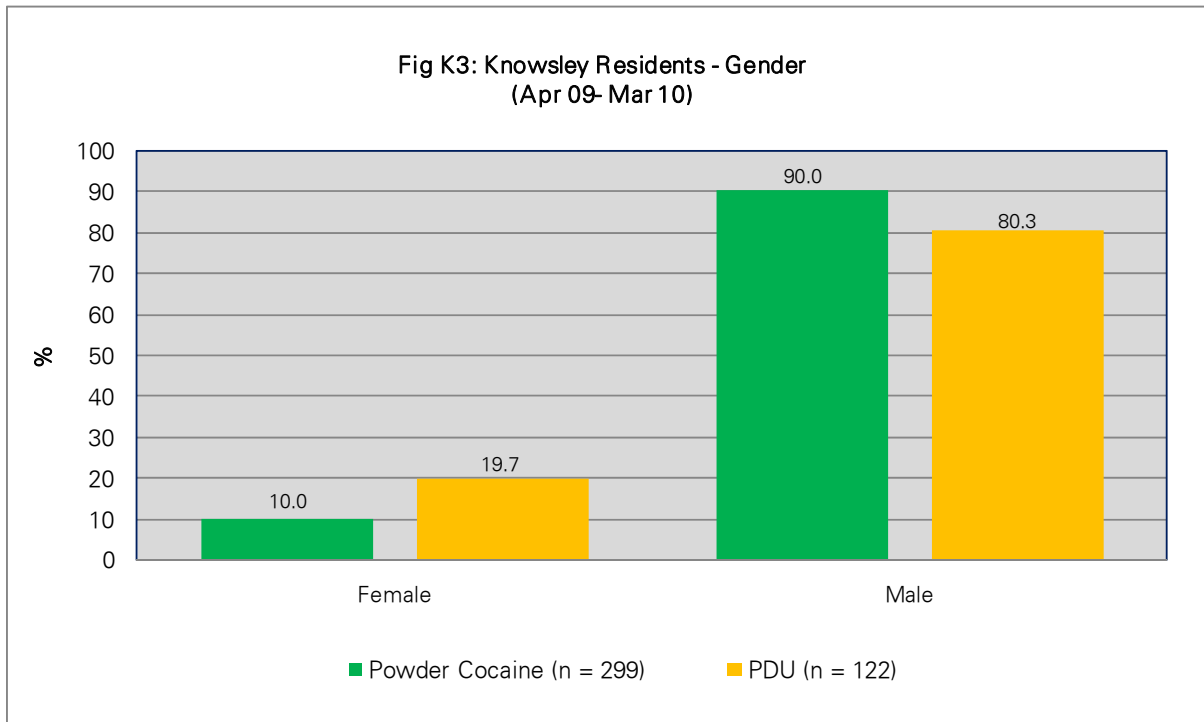
Ethnicity	Powder Cocaine (n = 299)		PDU (n = 122)	
	Number	%	Number	%
Asian or Asian British				
Black or Black British	1	0.3	4	3.3
Chinese or other Ethnic Group				
Mixed	2	0.7	1	0.8
White	294	98.3	117	96.0
Not stated	2	0.7		



Age



Gender



## Drug Use

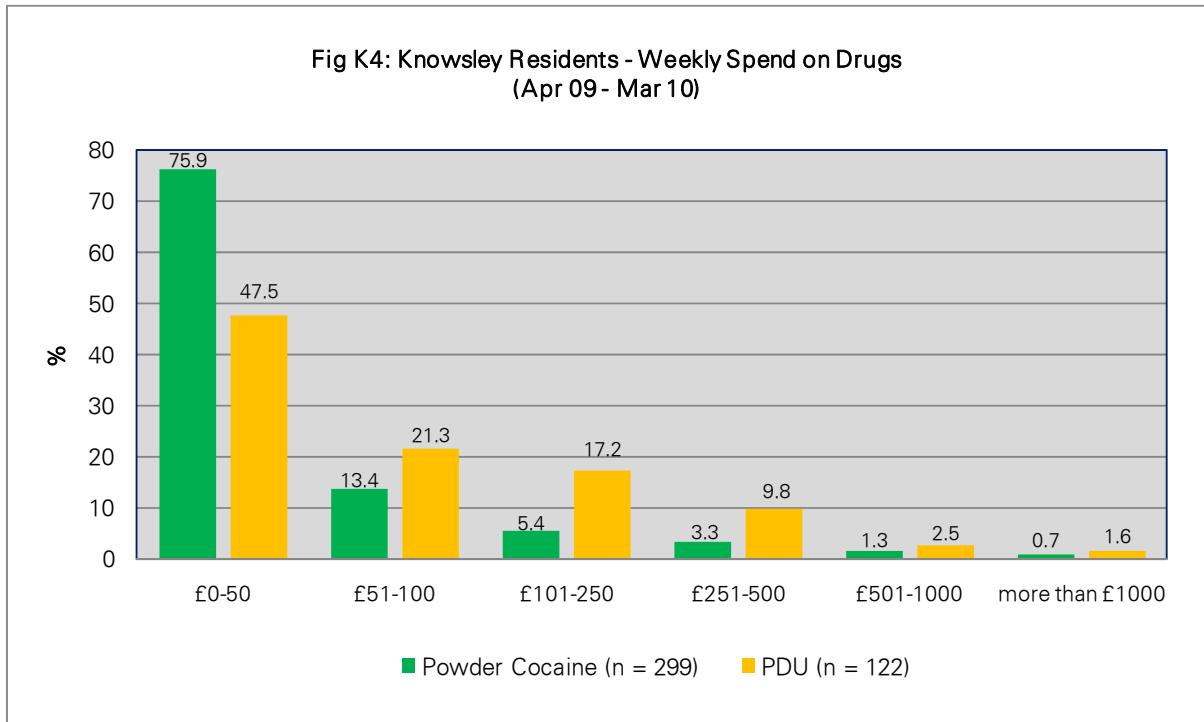
Table K2: Knowsley Residents - Drugs used by the powder cocaine group (Apr 09 – Mar 10)

Drug use by Powder Cocaine group (n = 298)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	20 (6.7%)	96 (32.2%)	182 (61.1%)	<b>298 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	69 (23.2%)	19 (6.4%)	10 (3.4%)	<b>98 (32.9%)</b>
Amphetamines	2 (0.7%)	2 (0.7%)		<b>4 (1.3%)</b>
Benzodiazepines				
Ecstasy	1 (0.3%)	1 (0.3%)	2 (0.7%)	<b>4 (1.3%)</b>
Subutex				
Methamphetamines				

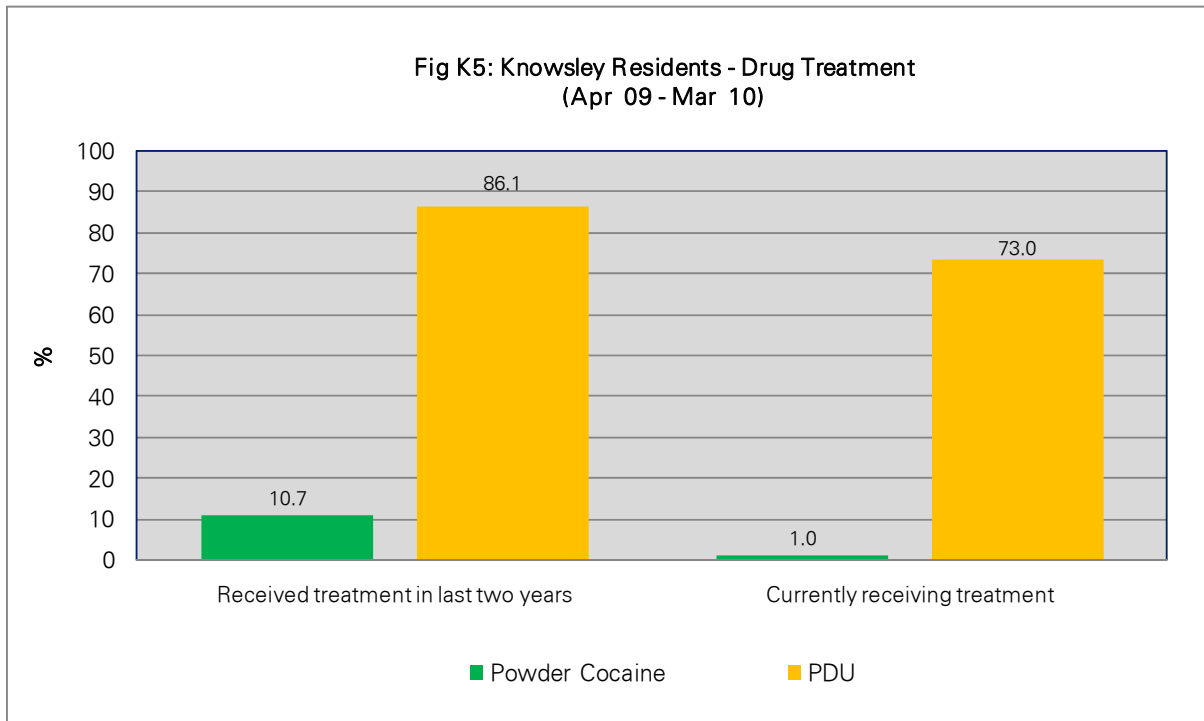
Table K3: Knowsley Residents - Drugs used by the PDU group (Apr 09–Mar 10)

Drug use by PDU group (n =121)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	4 (3.3%)	7 (5.8%)	12 (9.9%)	<b>23 (19.0%)</b>
Crack	43 (34.5%)	27 (22.3%)	8 (6.6%)	<b>78 (64.5%)</b>
Heroin	63 (52.1%)	37 (30.6%)	9 (7.4%)	<b>109 (90.1%)</b>
Methadone	18 (14.9%)	3 (2.5%)		<b>21 (17.4%)</b>
Cannabis	10 (8.3%)	2 (1.7%)		<b>12 (9.9%)</b>
Amphetamines			2 (1.7%)	<b>2 (1.7%)</b>
Benzodiazepines	4 (3.3%)	1 (0.8%)	1 (0.8%)	<b>6 (5.0%)</b>
Ecstasy				
Subutex	1 (0.8%)			<b>1 (0.8%)</b>
Methamphetamines				

Weekly Spend on Drugs

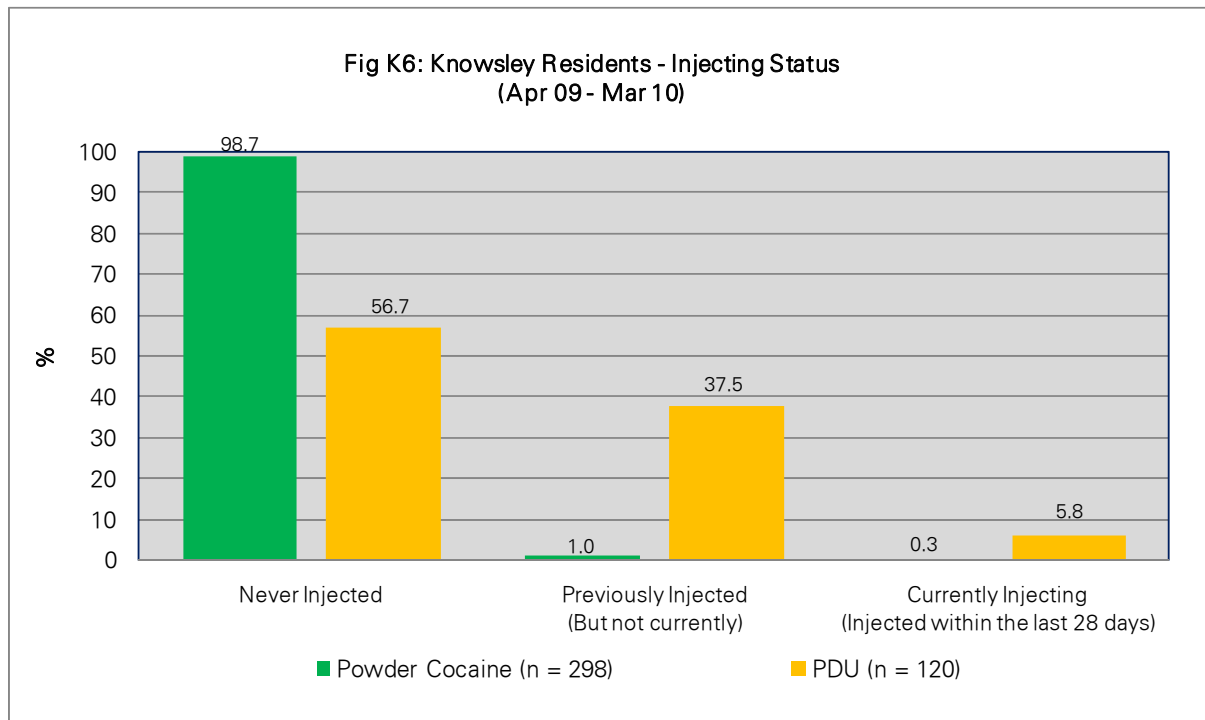


Drug Treatment

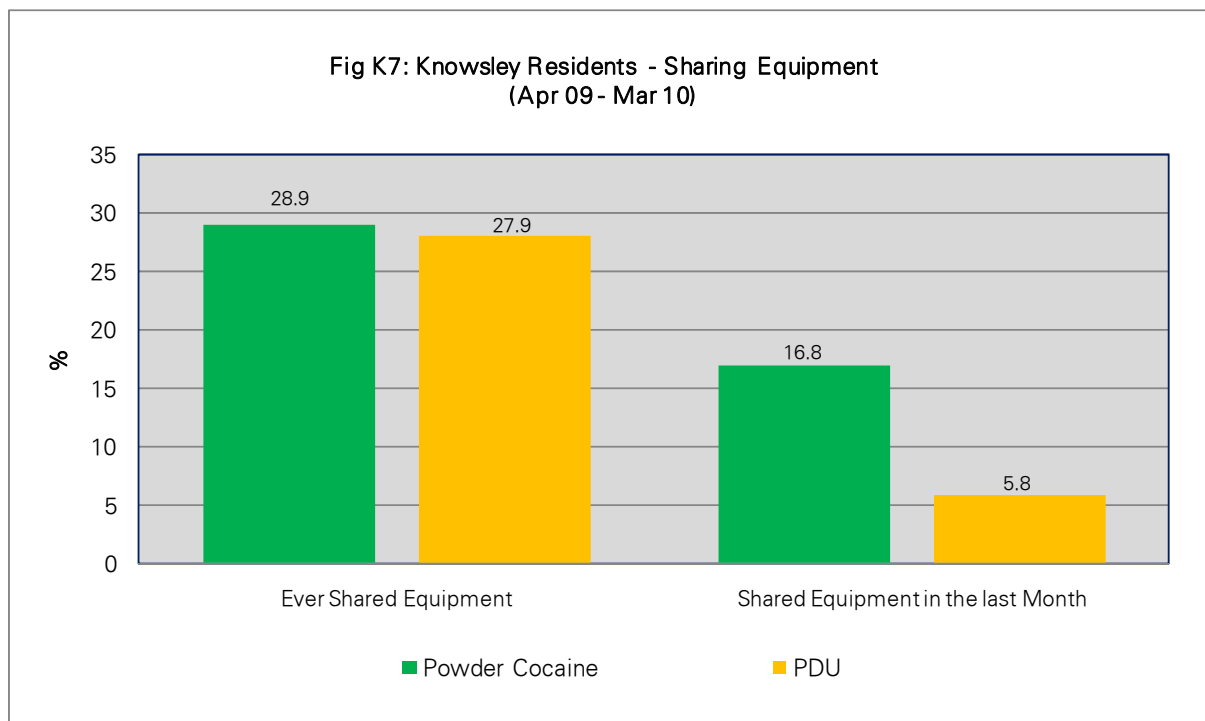


(Note: Three powder cocaine users did not provide information about current treatment.)

## Injecting Status

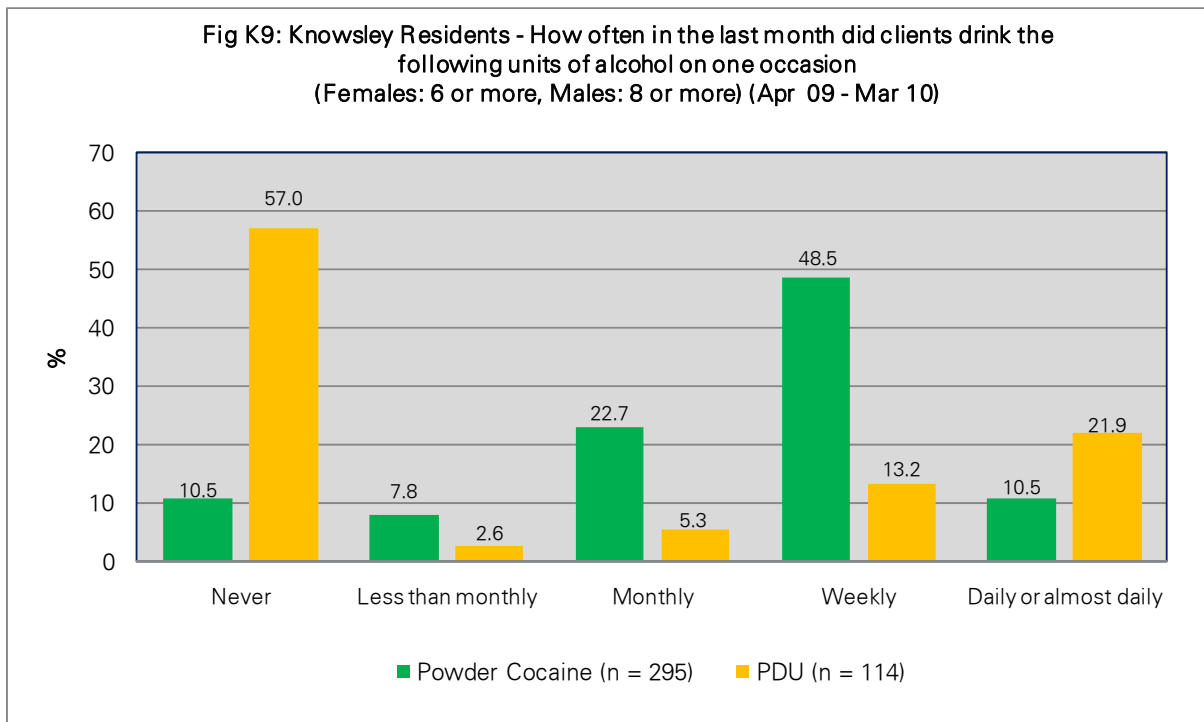
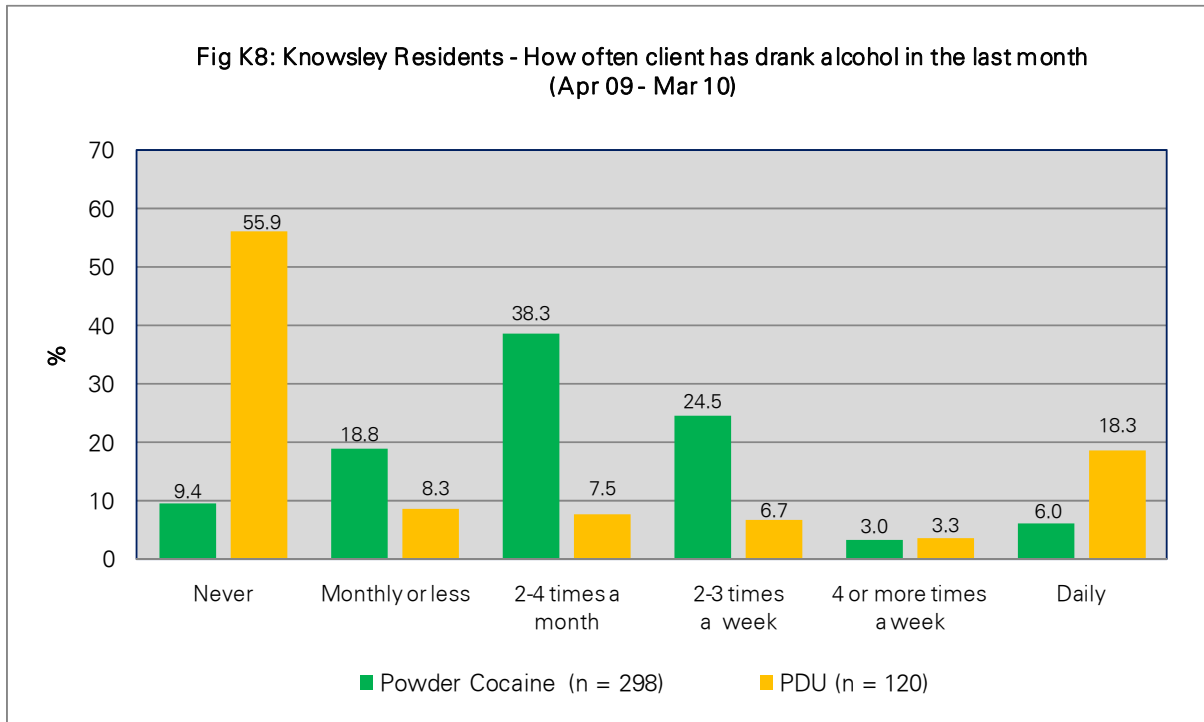


## Sharing Equipment



(Note: One powder cocaine using client did not provide any information for the ever shared equipment analysis and two did not provide any information for the shared equipment in the last month analysis. One PDU client did not provide any information for the shared equipment in the last month analysis.)

Alcohol Consumption

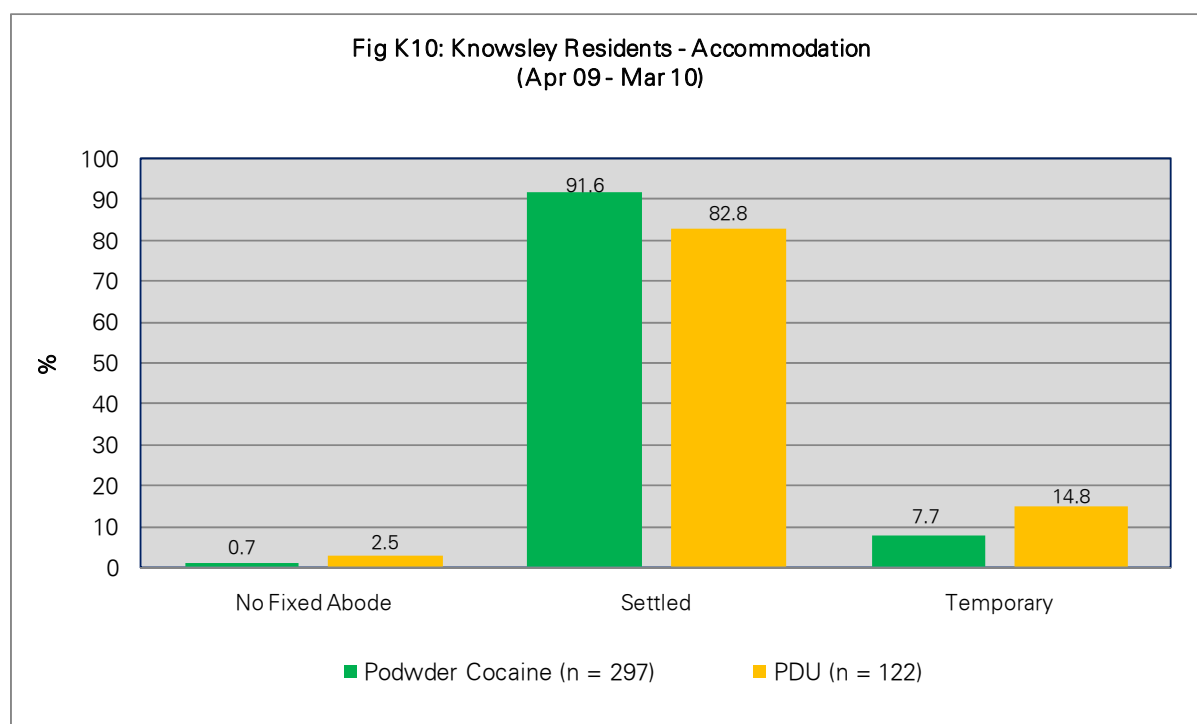


## Offences Committed

Table K4: Knowsley Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offence	Total Offending Powder Cocaine (n= 297)		Total Offending PDU (n= 119)	
	Number	%	Number	%
Begging	1	0.3	8	6.7
Breach	1	0.3		
Burglary	22	7.4	12	10.1
Criminal Damage	8	2.7		
Firearms/Weapons	2	0.7		
Fraud	3	1.0	1	0.8
Going Equipped	4	1.3	2	1.7
Handling	4	1.3	4	3.4
MDA Offences	140	47.1	12	10.1
Motoring Offences	8	2.7		
Soliciting				
Public Order Offences	24	8.1	4	3.4
Robbery	8	2.7	3	2.5
Shoplifting	32	10.8	56	47.1
Theft	15	5.1	7	5.9
Theft-Car	18	6.1	3	2.5
Warrant	1	0.3	2	1.7
Wounding or Assault	24	8.1	4	3.4
Other	4	1.3	4	3.4

## Accommodation



## Employment Status

Table K5: Knowsley Residents - Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n= 297)		PDU (n= 121)	
	Number	%	Number	%
Economically inactive	24	8.1	28	23.1
Pupil/student	3	1.0		
Regular employment	120	40.4	7	5.8
Unemployed	143	48.1	81	66.9
Other	7	2.4	4	3.3
Not known			1	0.8

#### 4.0 LIVERPOOL – Key Points

- There was more than half the proportion of Liverpool resident who were PDU compared to just over four in ten who were powder cocaine users and were assessed by DIP across Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of clients from this drug group who reported being under 25 years old in 09/10 was slightly less than those who reported being in the same age group in 08/09.
- A greater proportion of the powder cocaine drug group were male compared to the PDU group.
- Powder cocaine users tended to use powder cocaine on a monthly basis and in addition to this cannabis use was also relatively common among this group and was more common than among the PDU group. In contrast, the PDU group tended to use both crack and heroin on a daily basis but as a group they also used a greater range of drugs compared to the powder cocaine users including some use of powder cocaine and illicit methadone.
- The weekly rate of expenditure on drugs by the powder cocaine group was much lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years.
- A greater proportion of the PDU drug group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A higher proportion of PDU were more likely to have ever shared their equipment in contrast to the powder cocaine group. In contrast the powder cocaine group were more likely to have shared equipment in the last month compared to the PDU group.
- A large proportion of powder cocaine users drank alcohol on a weekly or monthly basis and over a third reported “binge drinking” on a weekly basis. Although nearly two thirds of the PDU group did not drink any alcohol, those that did were more likely than powder cocaine users to report potentially problematic daily “binge drinking”.
- The most commonly committed group of offences for the powder cocaine group was Misuse of Drugs Act (MDA) offences and public order offences and these were committed by a much lower proportion of the PDU group. The most common offence committed by the PDU group was shoplifting and was committed by a

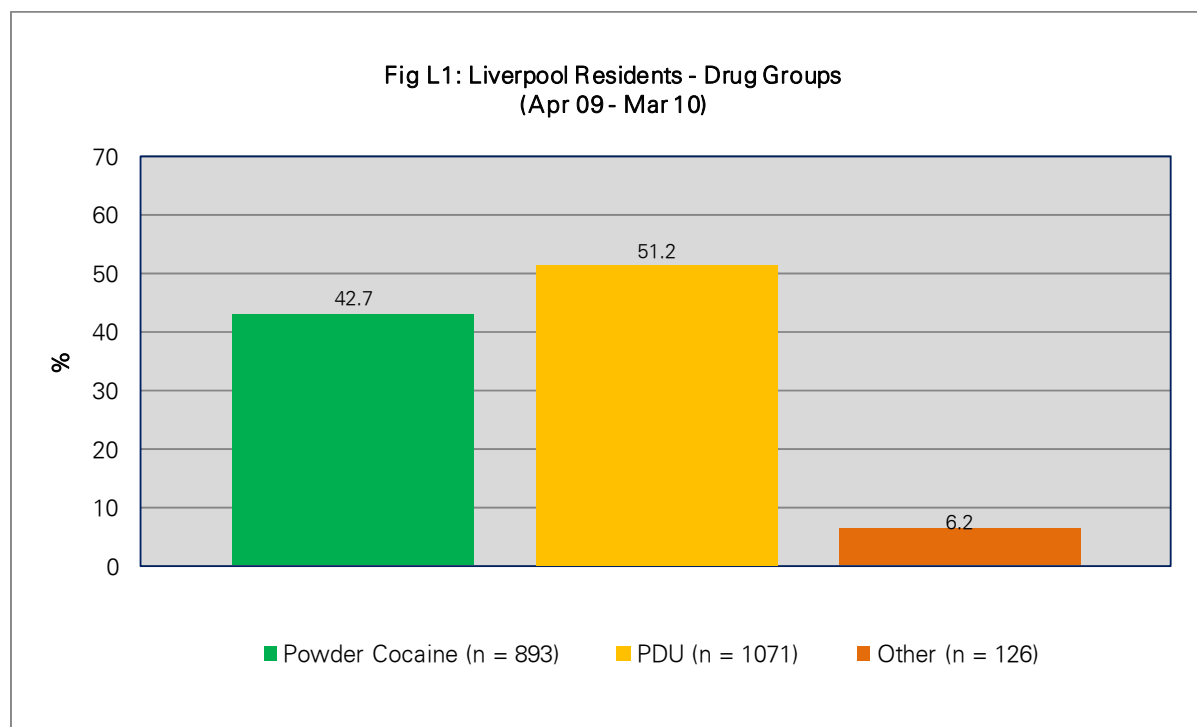


smaller proportion of the powder cocaine group. In addition to this the powder cocaine group also reported a much greater prevalence of wounding or assault offences compared to the PDU group and the PDU group reported a much greater prevalence of begging compared to the powder cocaine group.

- The vast majority of clients in both drug groups were in settled accommodation although clients in the powder cocaine group were slightly more likely to be in this situation.

## 4.1 LIVERPOOL RESIDENTS

### Drug Groups

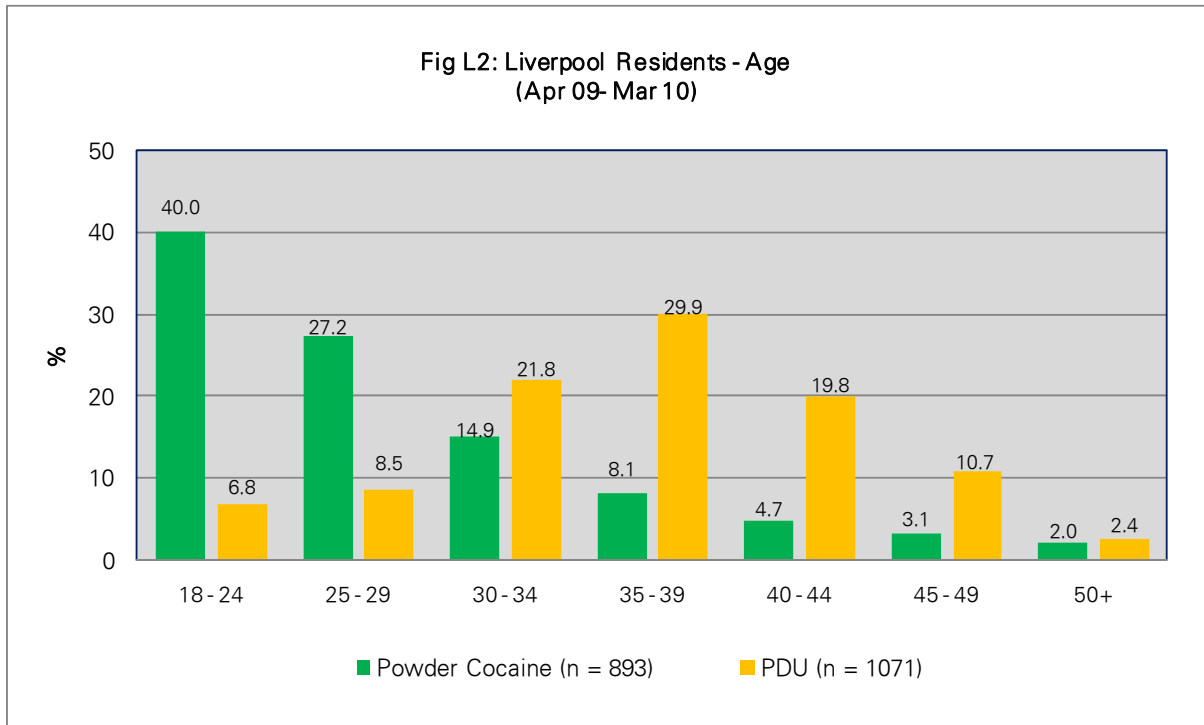


### Ethnicity

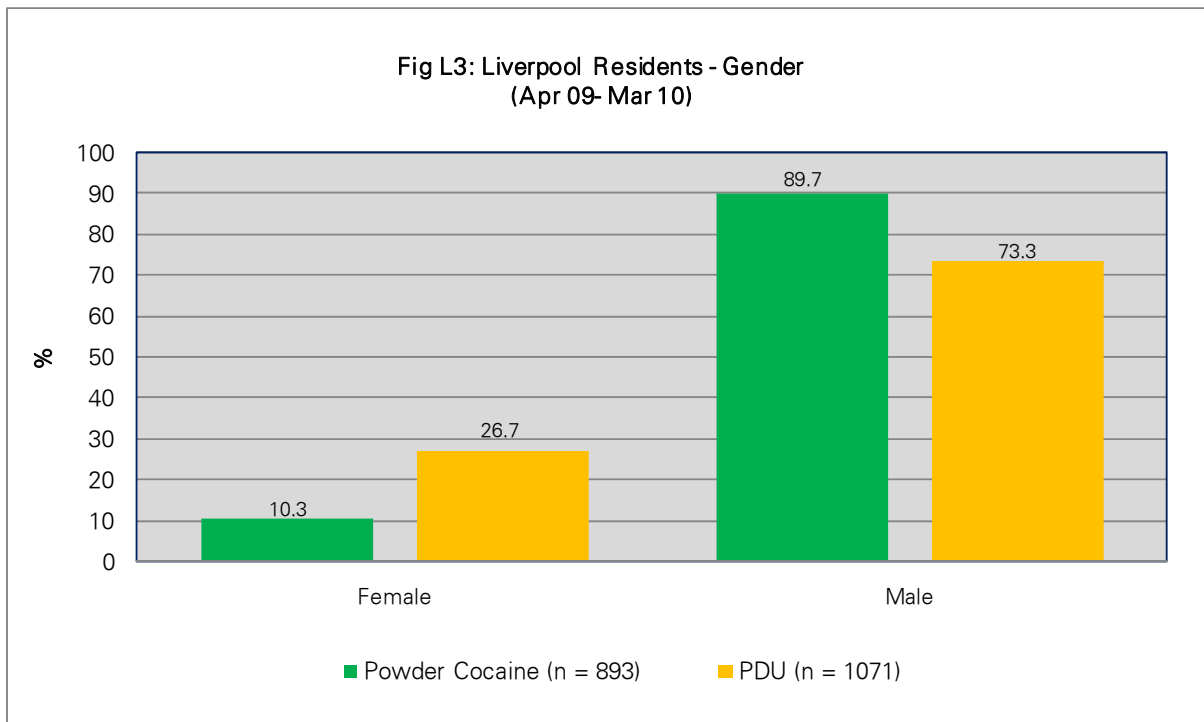
Table L1: Liverpool Residents - Ethnic background (Apr 09 – Mar 10)

Ethnicity	Powder Cocaine (n=892)		PDU (n=1069)	
	Number	%	Number	%
Asian or Asian British			5	0.5
Black or Black British	20	2.2	35	3.3
Chinese or other Ethnic Group	1	0.1	3	0.3
Mixed	19	2.1	24	2.2
White	844	94.6	995	93.1
Not stated	8	0.9	7	0.7

Age



Gender



## Drug Use

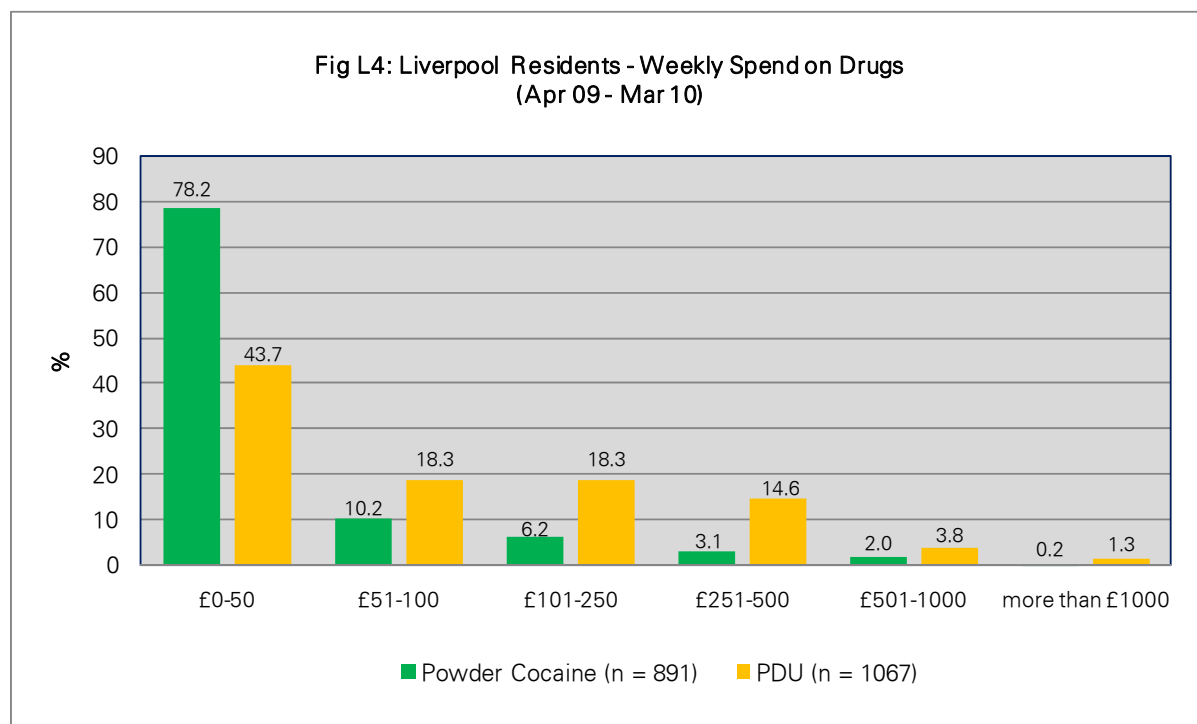
Table L2: Liverpool Residents - Drugs used by the powder cocaine group (Apr 09 – Mar 10)

Drug use by Powder Cocaine group (n=892)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	74 (8.3%)	281 (31.5%)	537 (60.2%)	<b>892 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	133 (14.9%)	40 (4.5%)	16 (1.8%)	<b>189 (21.2%)</b>
Amphetamines			1 (0.1%)	<b>1 (0.1%)</b>
Benzodiazepines				
Ecstasy		2 (0.2%)	7 (0.8%)	<b>9 (1.0%)</b>
Subutex				
Methamphetamines				

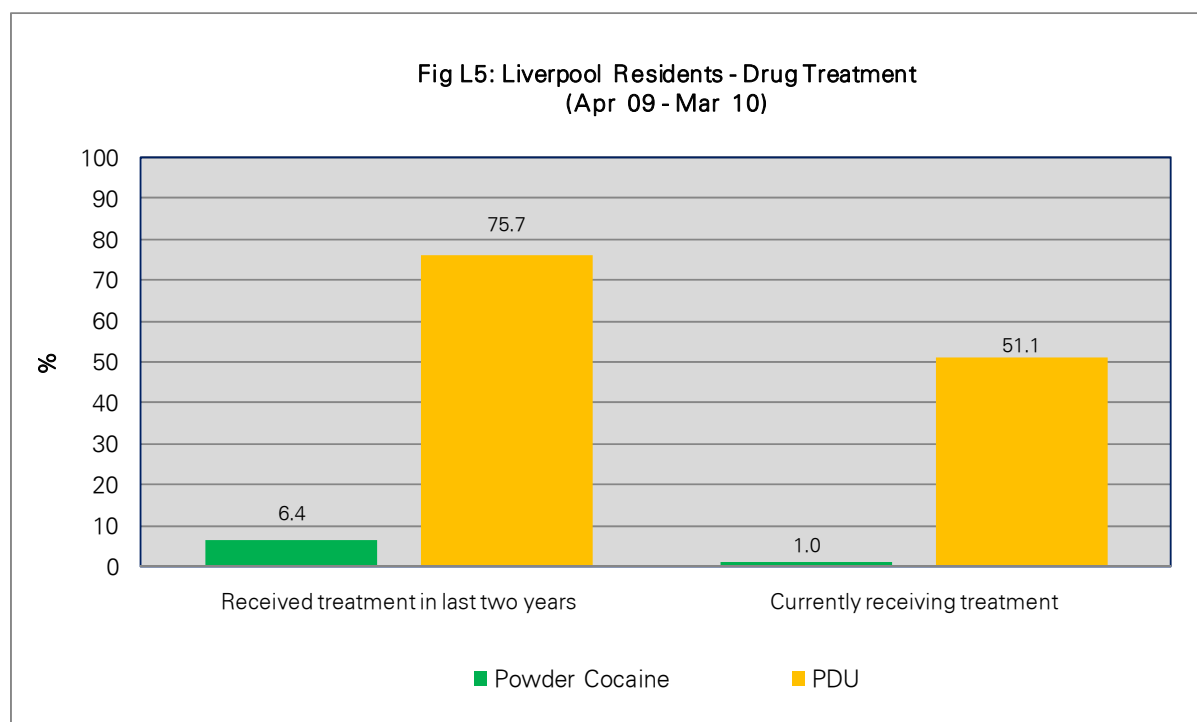
Table L3: Liverpool Residents - Drugs used by the PDU group (Apr 09 – Mar 10)

Drug use by PDU group (n=1070)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	15 (1.4%)	33 (3.1%)	29 (2.7%)	<b>77 (7.2%)</b>
Crack	316 (29.5%)	253 (23.6%)	58 (5.4%)	<b>627 (58.6%)</b>
Heroin	655 (61.2%)	261 (24.4%)	79 (7.4%)	<b>995 (93.0%)</b>
Methadone	75 (7.0%)	7 (0.7%)	5 (0.5%)	<b>87 (8.1%)</b>
Cannabis	31 (2.9%)	9 (0.8%)	4 (0.4%)	<b>44 (4.1%)</b>
Amphetamines	1 (0.1%)			<b>1 (0.1%)</b>
Benzodiazepines	24 (2.2%)	6 (0.6%)	2 (0.2%)	<b>32 (3.0%)</b>
Ecstasy		1 (0.1%)		<b>1 (0.1%)</b>
Subutex	9 (0.8%)			<b>9 (0.8%)</b>
Methamphetamines				

## Weekly Spend on Drugs

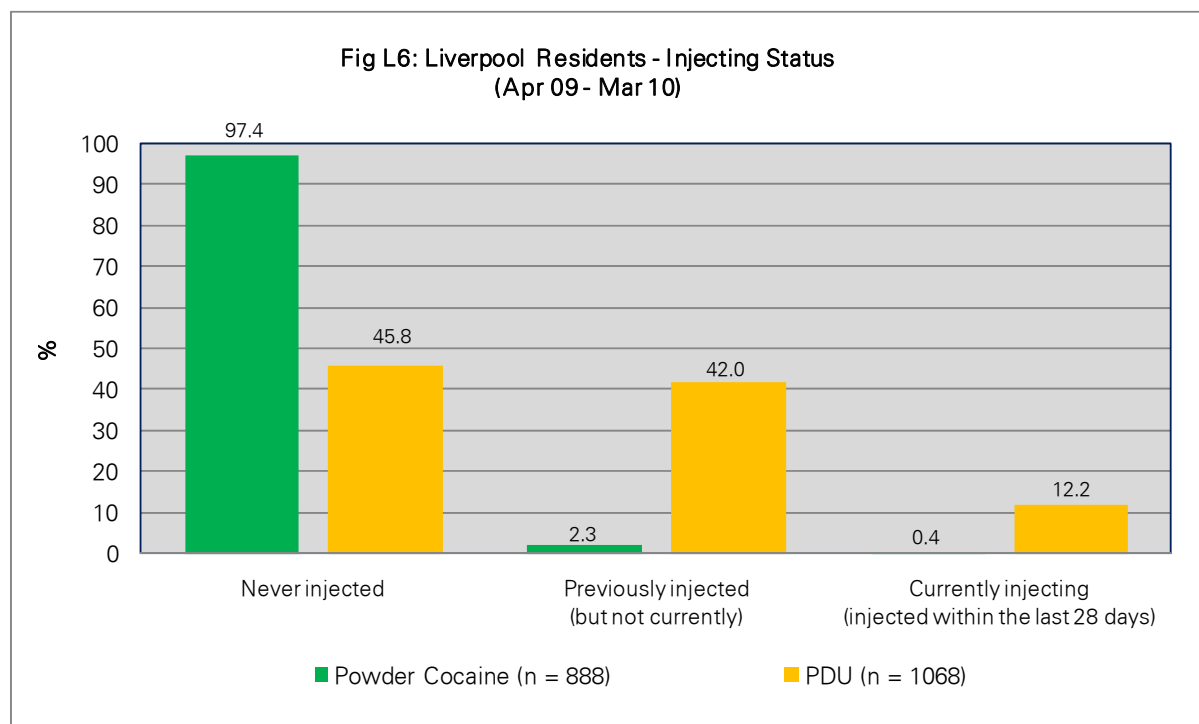


## Drug Treatment

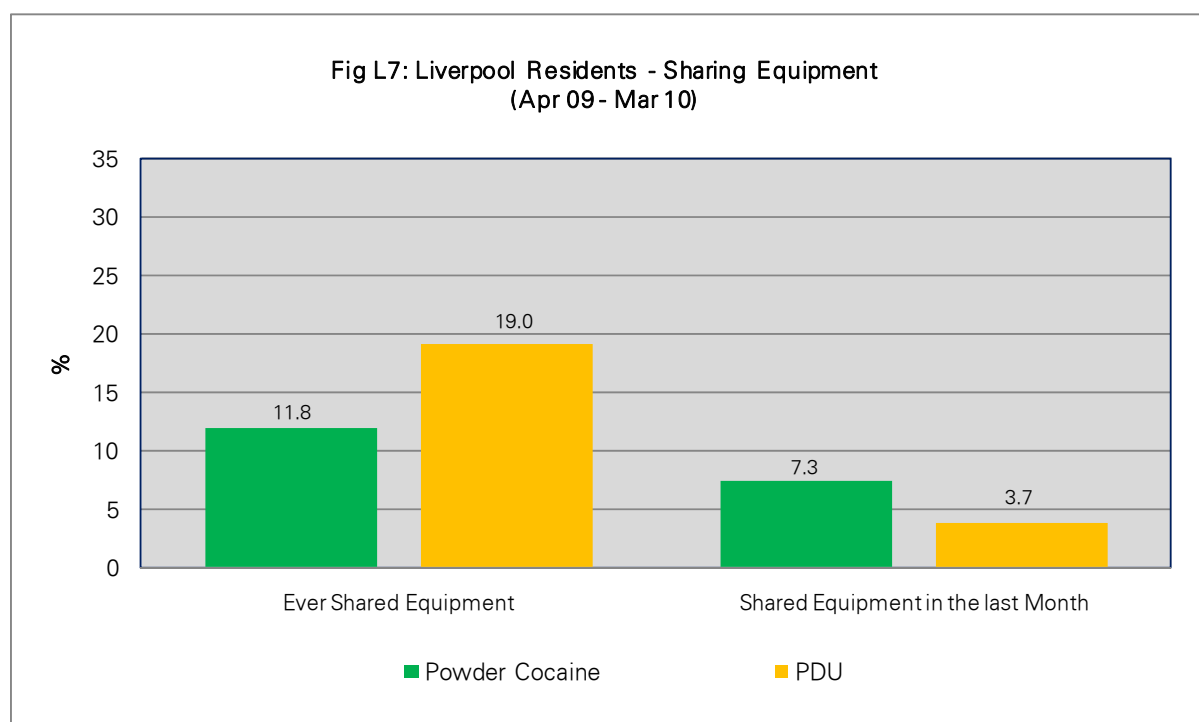


(Note: Two clients from the powder cocaine group did not provide any information for the receiving treatment in the last two years analysis as well as four from the currently receiving treatment analysis. Six PDU clients did not provide any information for the received treatment in the last two years analysis as well as 13 from the currently receiving treatment analysis.)

## Injecting Status

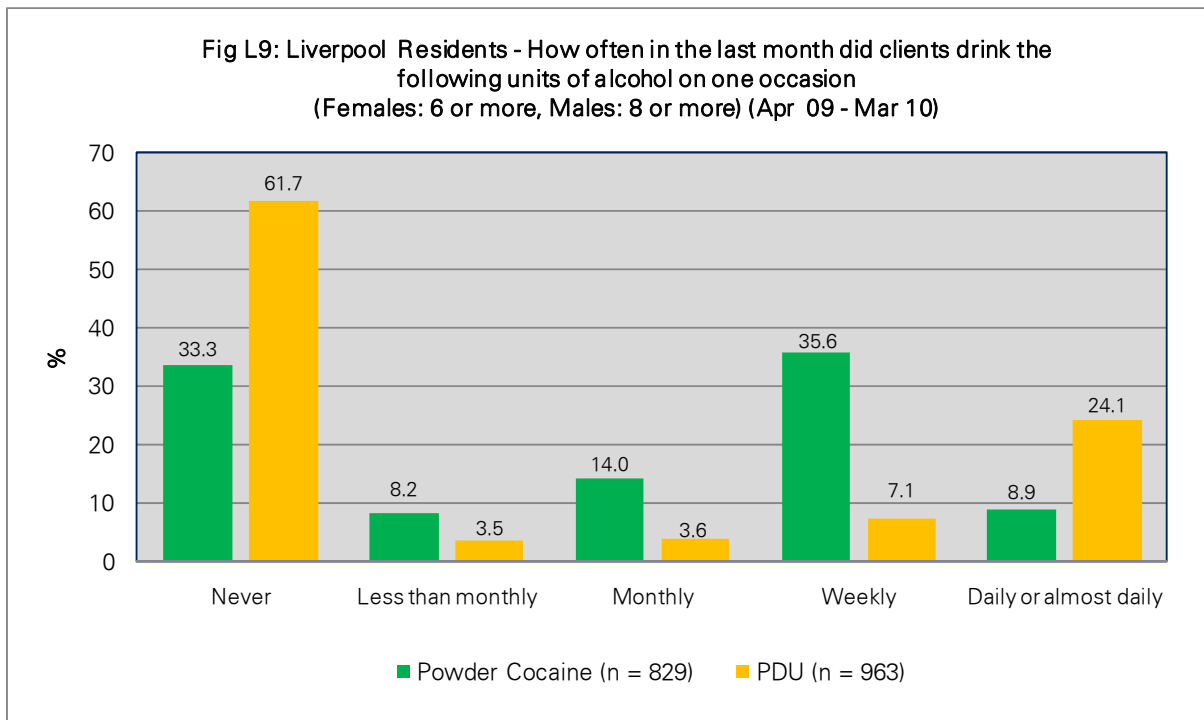
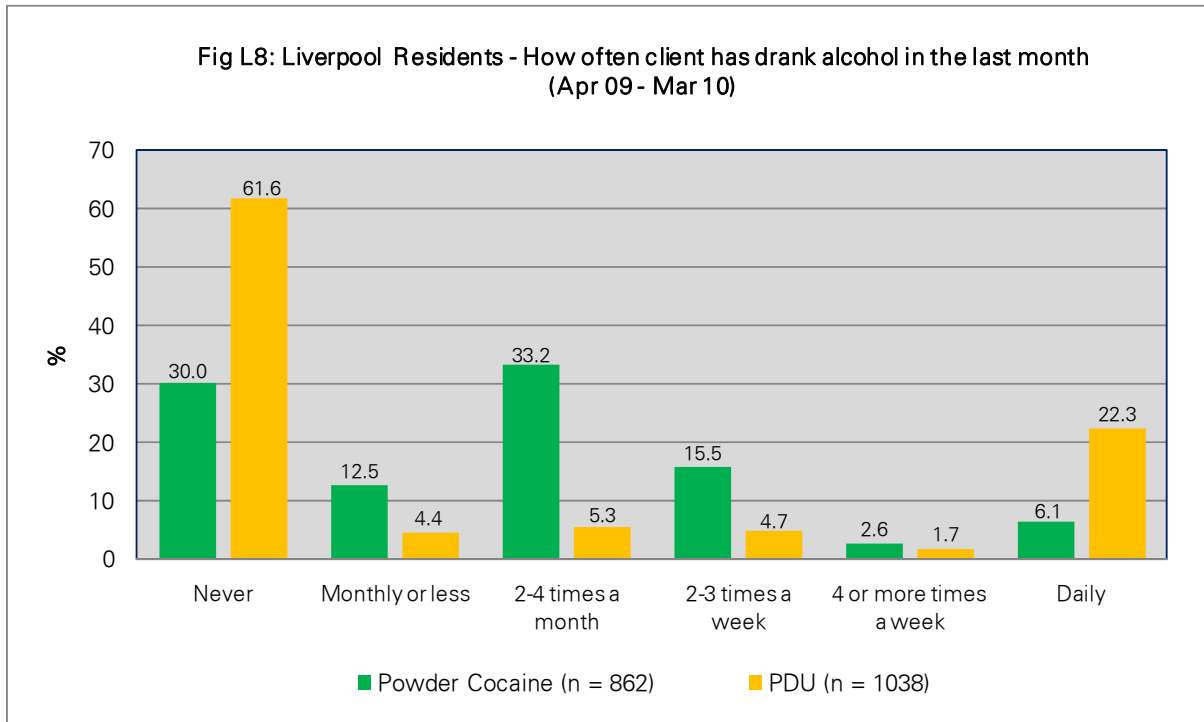


## Sharing Equipment



(Note: One powder cocaine using client did not provide any information for the ever shared equipment analysis and one did not provide any information about for the shared equipment in the last month analysis. Three PDU did not provide any information about for the ever shared equipment analysis as well as four who did not provide any information for the shared equipment in the last month analysis.)

Alcohol Consumption

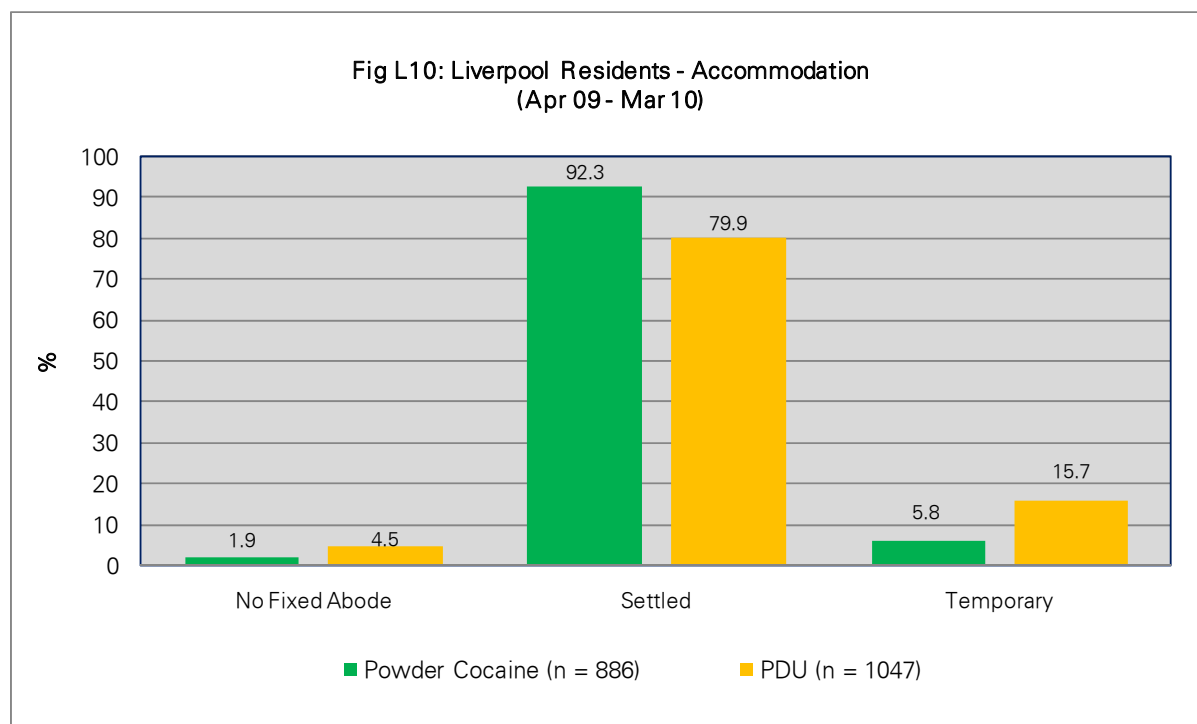


## Offences Committed

Table L4: Liverpool Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offences	Total Offending Powder Cocaine (n=889)		Total Offending PDU (n=1060)	
	Number	%	Number	%
Begging	2	0.2	55	5.2
Breach	14	1.6	50	4.7
Burglary	72	8.1	78	7.4
Criminal Damage	18	2.0	5	0.5
Firearms/Weapons	8	0.9	4	0.4
Fraud	12	1.3	15	1.4
Going Equipped	6	0.7	10	0.9
Handling	6	0.7	14	1.3
MDA Offences	406	45.7	180	17.0
Motoring Offences	17	1.9	6	0.6
Soliciting			11	1.0
Public Order Offences	101	11.4	40	3.8
Robbery	31	3.5	39	3.7
Shoplifting	82	9.2	423	39.9
Theft	45	5.1	72	6.8
Theft-Car	48	5.4	33	3.1
Warrant	5	0.6	27	2.5
Wounding or Assault	66	7.4	33	3.1
Other	13	1.5	22	2.1

## Accommodation





## Employment Status

Table L5: Liverpool Residents - Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n = 889)		PDU (n =1067)	
	Number	%	Number	%
Economically inactive	51	5.7	203	19.0
Pupil/student	26	2.9		
Regular employment	332	37.3	29	2.7
Unemployed	465	52.3	813	76.2
Other	14	1.6	19	1.8
Not known	1	0.1	3	0.3

## 5.0 SEFTON - Key Points

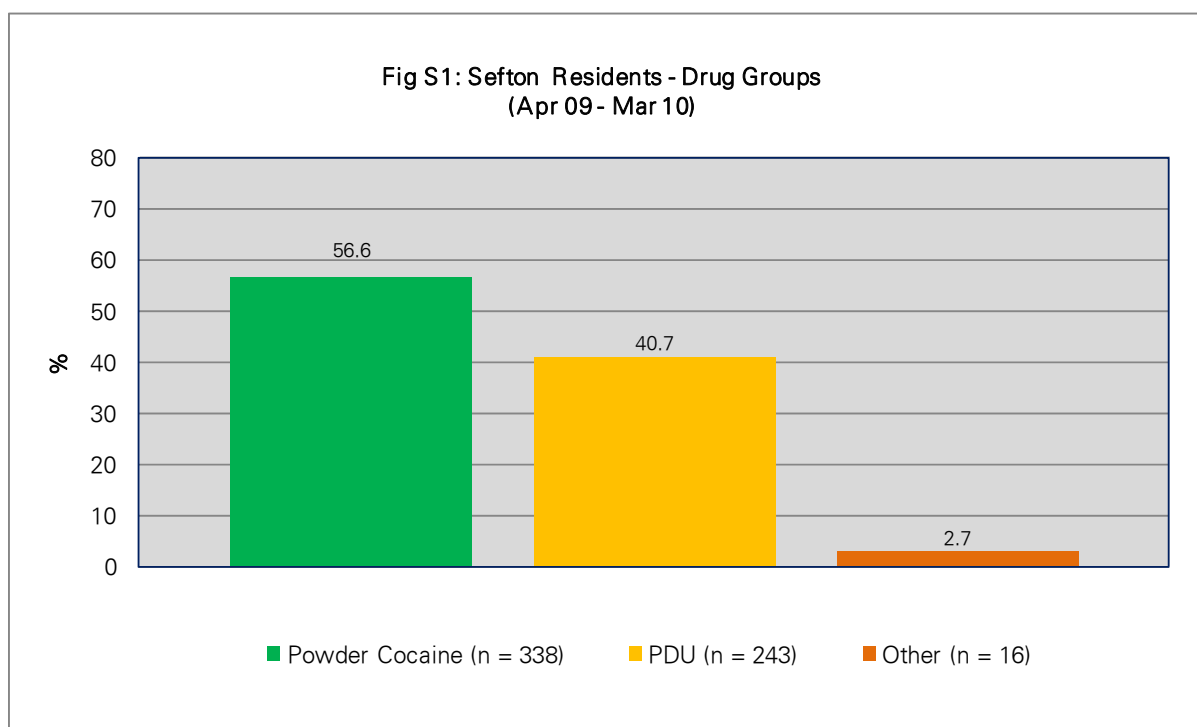
- There was more than half the proportion of Sefton residents who were powder cocaine users compared to just over four in ten who were PDU and were assessed by DIP across Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of clients from the powder cocaine group who reported being less than 25 years in 09/10 was less than that from 08/09. In contrast the proportion of clients from the PDU group reported being older in 09/10 compared to those from the same age group in 08/09.
- A greater proportion of clients from the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine on a monthly basis and in addition to this cannabis use was also relatively common among this group and was more common than among the PDU group. In contrast, the PDU group tended to use both crack and heroin on a daily basis but as a group they also used a greater range of drugs compared to the powder cocaine users including some weekly use of powder cocaine and daily use of illicit methadone.
- The weekly rate of expenditure on drugs by the powder cocaine group was much lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years.
- A greater proportion of the PDU drug group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A similar proportion of clients from both drug groups had ever shared drug using equipment but more powder cocaine users had shared their drug using equipment in the last month than among the PDU group.
- A large proportion of powder cocaine users drank alcohol on a weekly or monthly basis and nearly half of this group reported “binge drinking” on a weekly basis. Although nearly half of the PDU group did not drink any alcohol, an increase from figures reported in 08/09, those that did were more likely than the powder cocaine users to report potentially problematic daily “binge drinking”.
- The most commonly committed group of offences for the powder cocaine group were Misuse of Drugs Act (MDA) offences and theft and these were committed by

a much lower proportion of the PDU group. The most common offence committed by the PDU group was shoplifting and was committed by a much lower proportion of the powder cocaine group. In addition to this the powder cocaine group also reported a much greater prevalence of public order offences, theft – car and wounding or assault offences compared to the PDU group.

- The vast majority of clients from both drug groups were in settled accommodation although clients in the powder cocaine group were slightly more likely to be in this situation.
- Nearly three quarters of the PDU group were unemployed compared to more than four in ten of the powder cocaine group.

## 5.1 SEFTON RESIDENTS

### Drug Groups

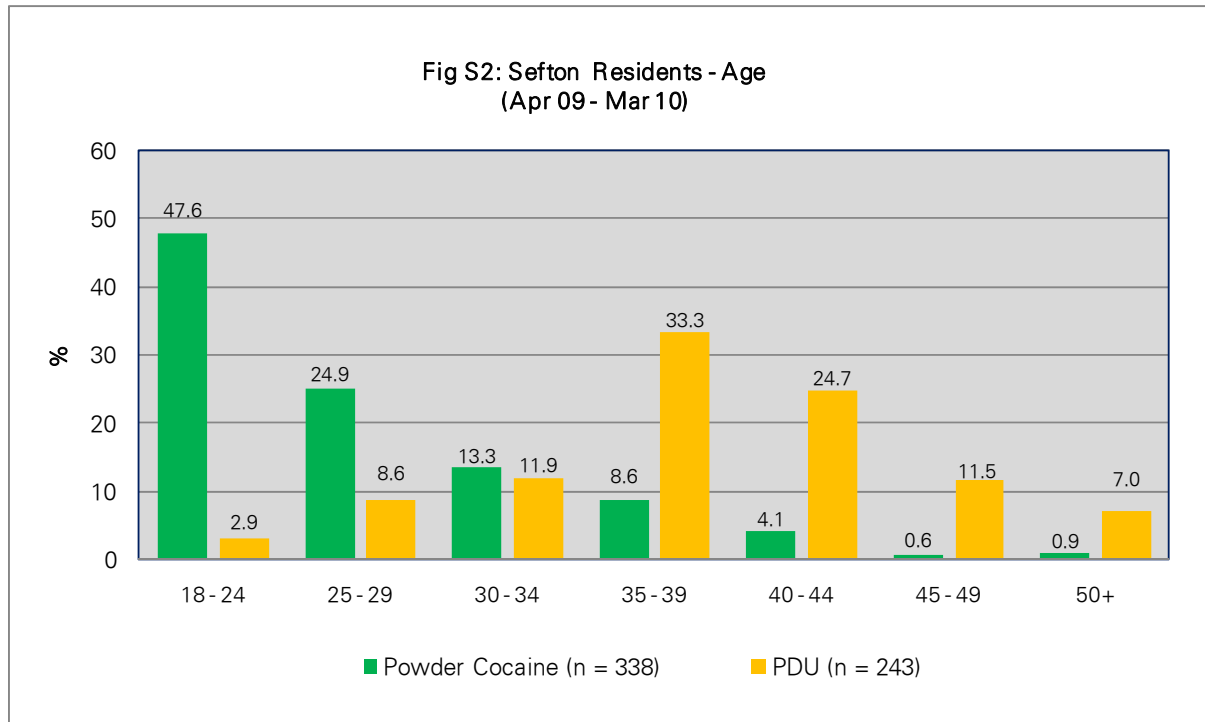


### Ethnicity

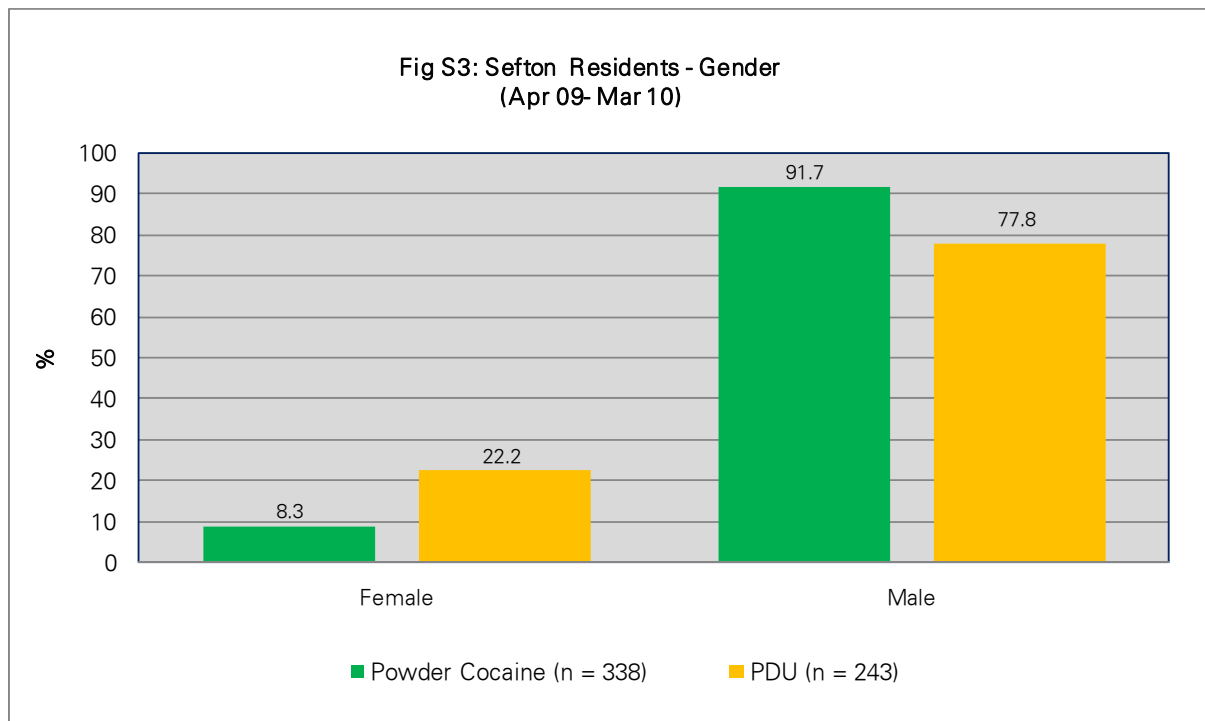
Table S1: Sefton Residents - Ethnic background (Apr 09 – Mar 10)

Ethnicity	Powder Cocaine (n=338)		PDU (n=243)	
	Number	%	Number	%
Asian or Asian British			1	0.4
Black or Black British	2	0.6		
Mixed	6	1.8		
White	330	97.6	242	99.6

## Age



## Gender



## Drug Use

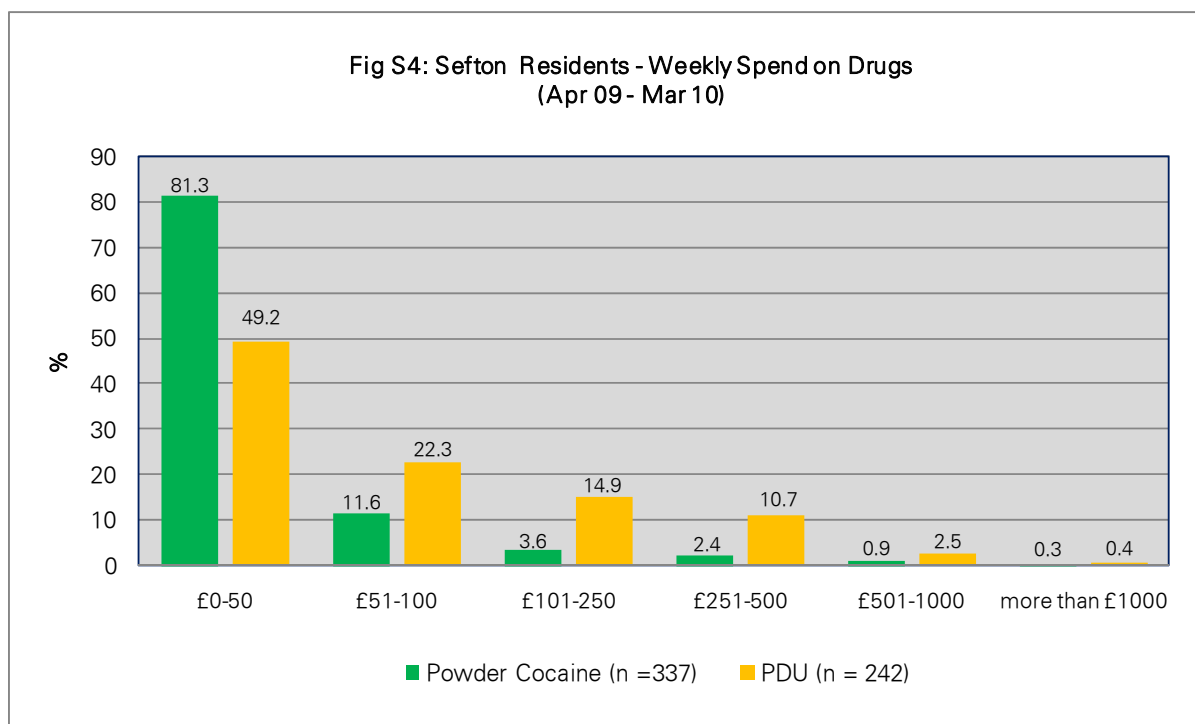
Table S2: Sefton Residents - Drugs used by the powder cocaine group (Apr 09 – Mar 10)

Drug use by Powder Cocaine group (n=338)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	15 (4.4%)	79 (23.4%)	244 (72.2%)	<b>338 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	42 (12.4%)	17 (5.0%)	13 (3.8%)	<b>72 (23.3%)</b>
Amphetamines	1 (0.3%)	1 (0.3%)	2 (0.6%)	<b>4 (1.2%)</b>
Benzodiazepines			1 (0.3%)	<b>1 (0.3%)</b>
Ecstasy			2 (0.6%)	<b>2 (0.6%)</b>
Subutex				
Methamphetamines				

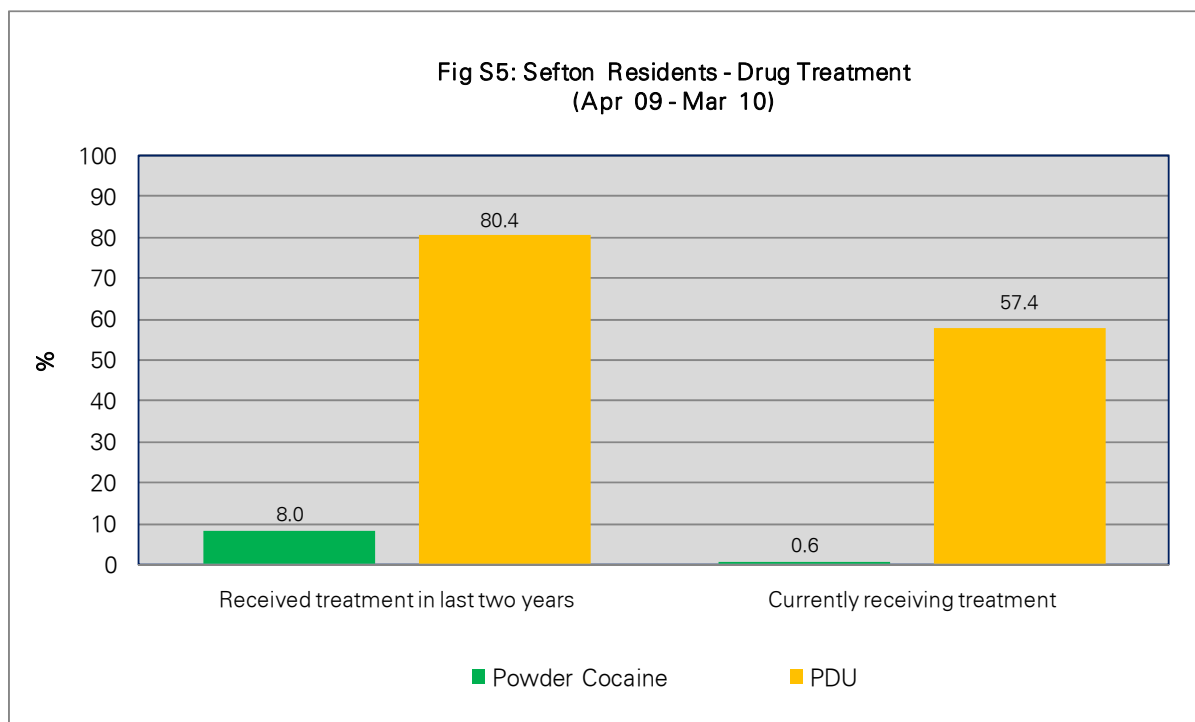
Table S3: Sefton Residents - Drugs used by the PDU group (Apr 09 – Mar 10)

Drug use by PDU group (n= 243)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	3 (1.2%)	10 (4.1%)	4 (1.6%)	<b>17 (7.0%)</b>
Crack	47 (19.3%)	81 (33.3%)	23 (9.5%)	<b>151 (62.1%)</b>
Heroin	136 (56.0%)	72 (29.6%)	17 (7.0%)	<b>225 (92.6%)</b>
Methadone	14 (5.8%)	3 (1.2%)	1 (0.4%)	<b>18 (7.4%)</b>
Cannabis	8 (3.3%)	7 (2.9%)	3 (1.2%)	<b>18 (7.4%)</b>
Amphetamines	1 (0.4%)	1 (0.4%)		<b>2 (0.8%)</b>
Benzodiazepines	12 (4.9%)	8 (3.3%)	2 (0.8%)	<b>22 (9.1%)</b>
Ecstasy				
Subutex	1 (0.4%)			<b>1 (0.4%)</b>
Methamphetamines				

## Weekly Spend on Drugs

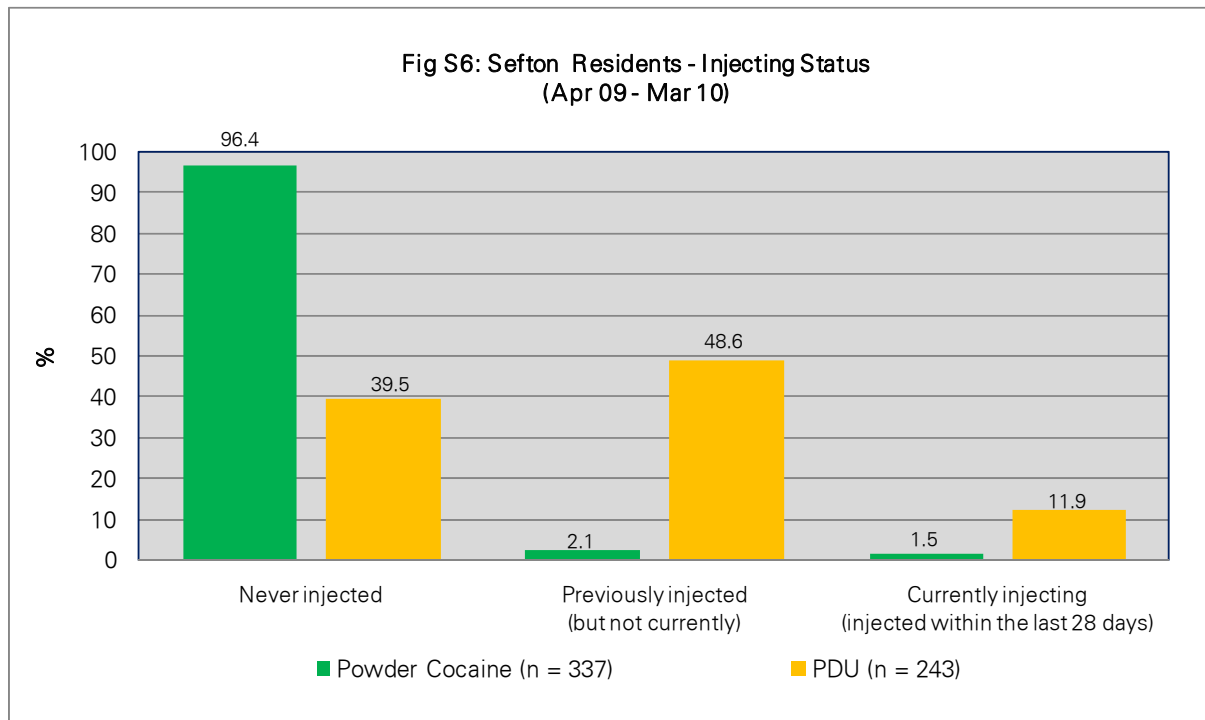


## Drug Treatment

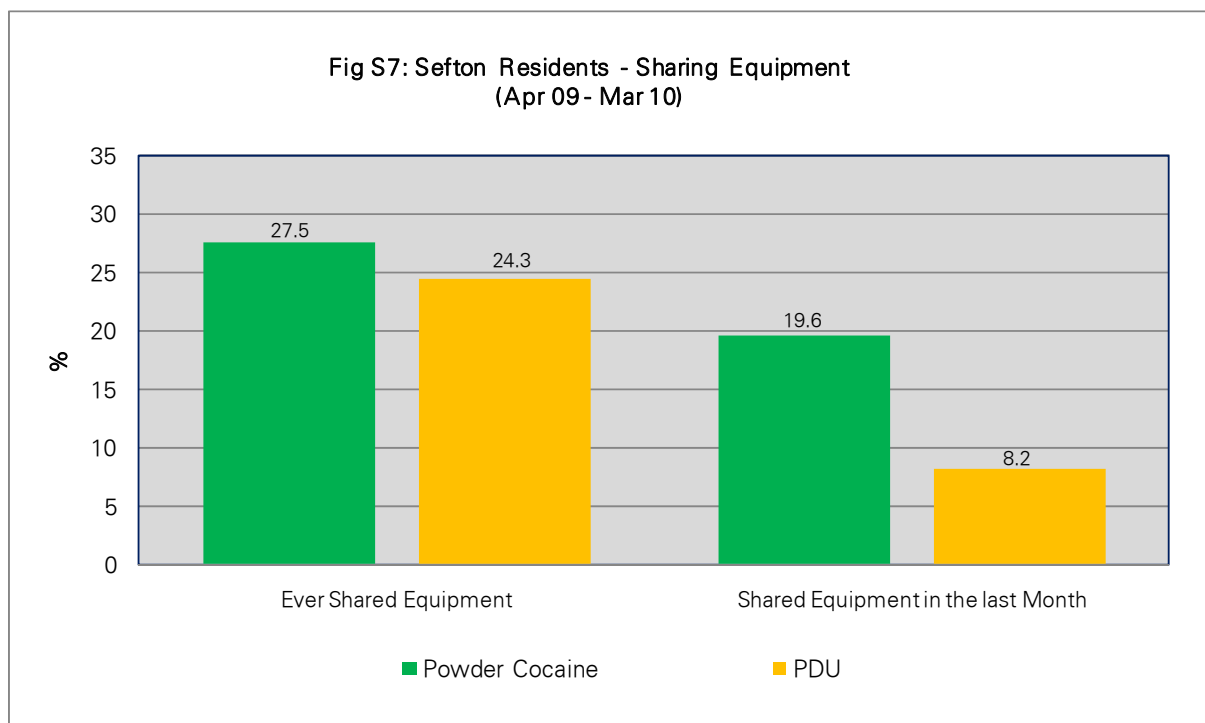


(Note: Four individuals from the powder cocaine group did not provide information for the currently receiving treatment analysis. Three PDU did not provide information for the receiving treatment in the last two years analysis and one PDU did not provide information for the currently receiving treatment analysis.)

## Injecting Status



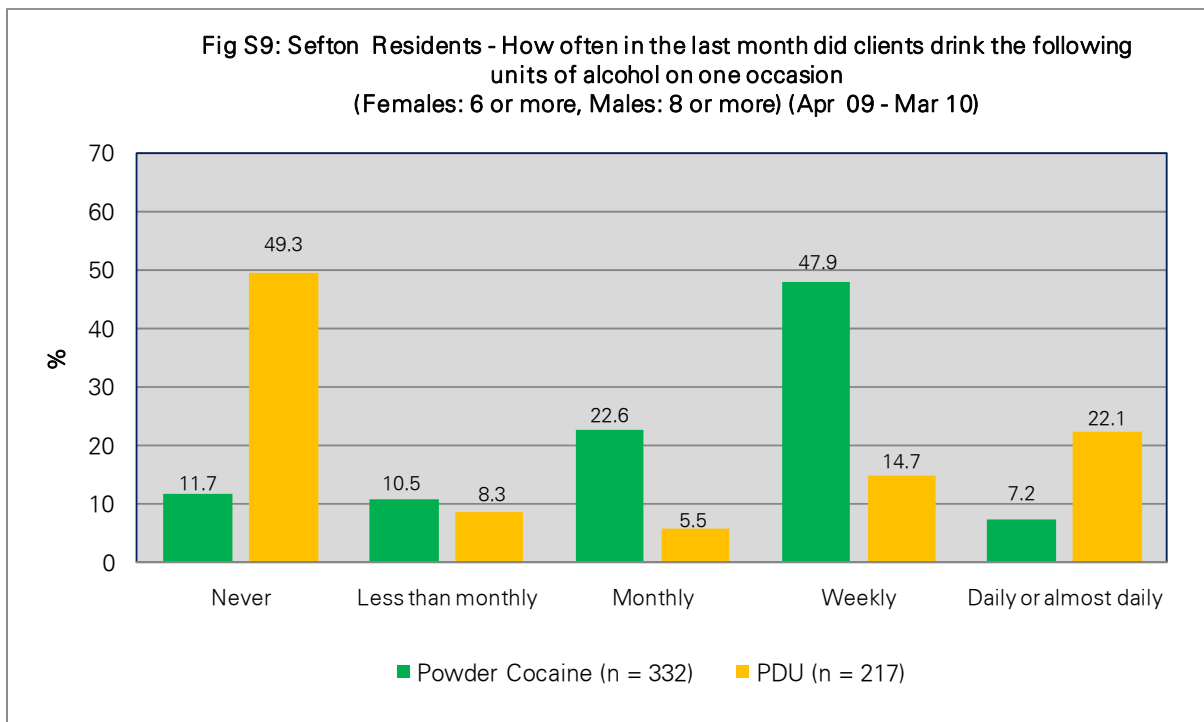
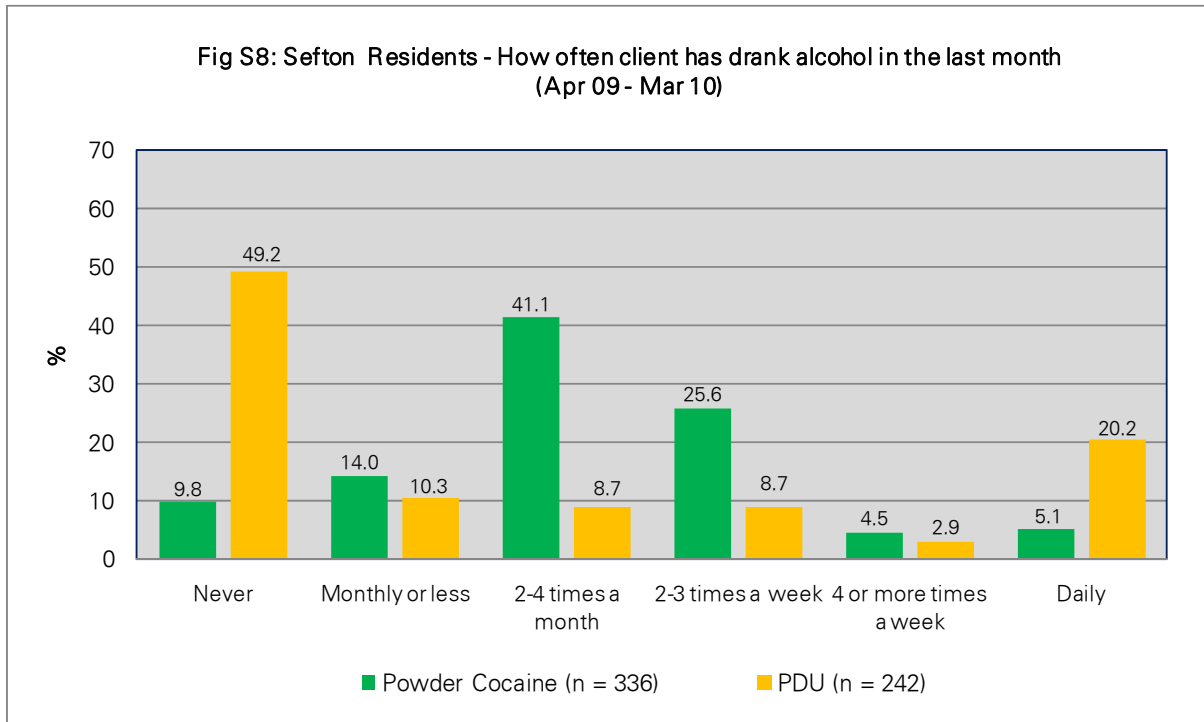
## Sharing Equipment



(Note: One individual from the powder cocaine group did not provide information for the shared equipment in the last month analysis.)



Alcohol Consumption

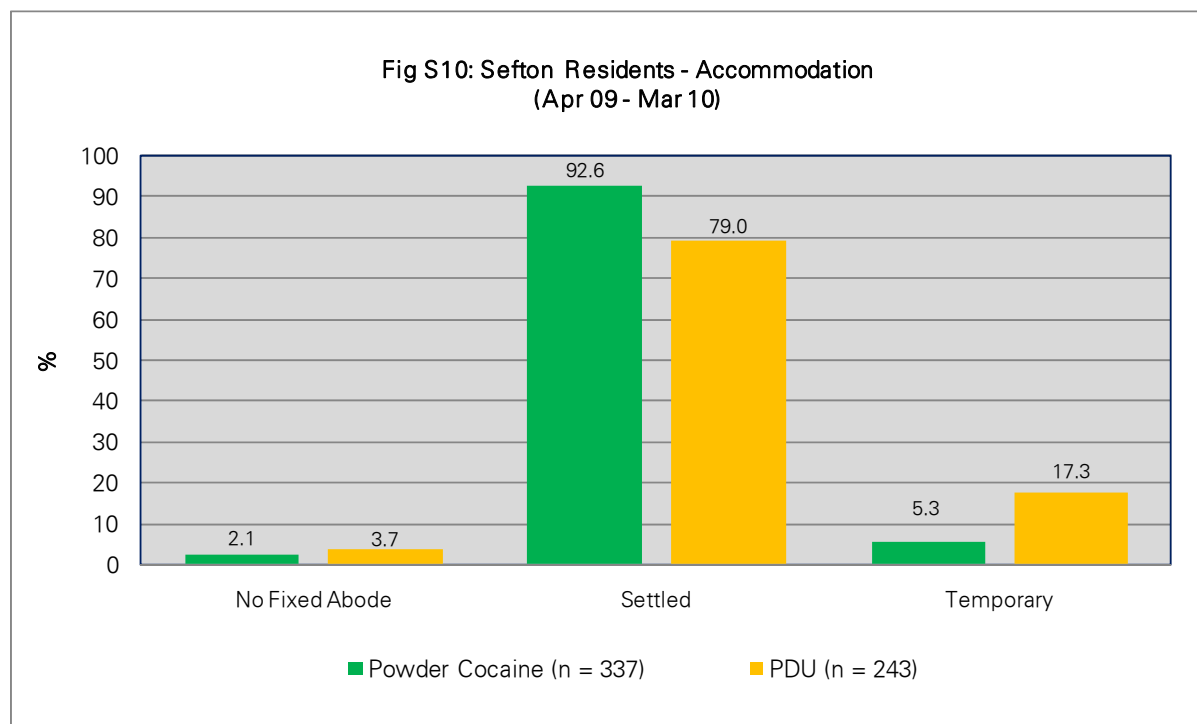


## Offences Committed

Table S4: Sefton Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offence	Total Offending Powder Cocaine (n= 335)		Total Offending PDU (n= 237)	
	Number	%	Number	%
Begging			7	3.0
Breach	1	0.3	3	1.3
Burglary	23	6.9	15	6.3
Criminal Damage	4	1.2	2	0.8
Firearms/Weapons	1	0.3	2	0.8
Fraud	6	1.8	3	1.3
Going Equipped	1	0.3	6	2.5
Handling	5	1.5	2	0.8
MDA Offences	171	51.0	56	23.6
Motoring Offences	8	2.4	2	0.8
Soliciting				
Public Order Offences	29	8.7	5	2.1
Robbery	11	3.3	2	0.8
Shoplifting	18	5.4	108	45.6
Theft	21	6.3	16	6.8
Theft-Car	23	6.9	6	2.5
Warrant			1	0.4
Wounding or Assault	27	8.1	8	3.4
Other	8	2.4	5	2.1

## Accommodation



## Employment Status

Table S5: Sefton Residents - Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n=332)		PDU (n=239)	
	Number	%	Number	%
Economically inactive	15	4.5	44	18.4
Pupil/student	10	3.0		
Regular employment	164	49.4	12	5.0
Unemployed	140	42.2	177	74.1
Other	3	0.9	5	2.1
Not known			1	0.4

## 6.0 ST HELENS – Key Points

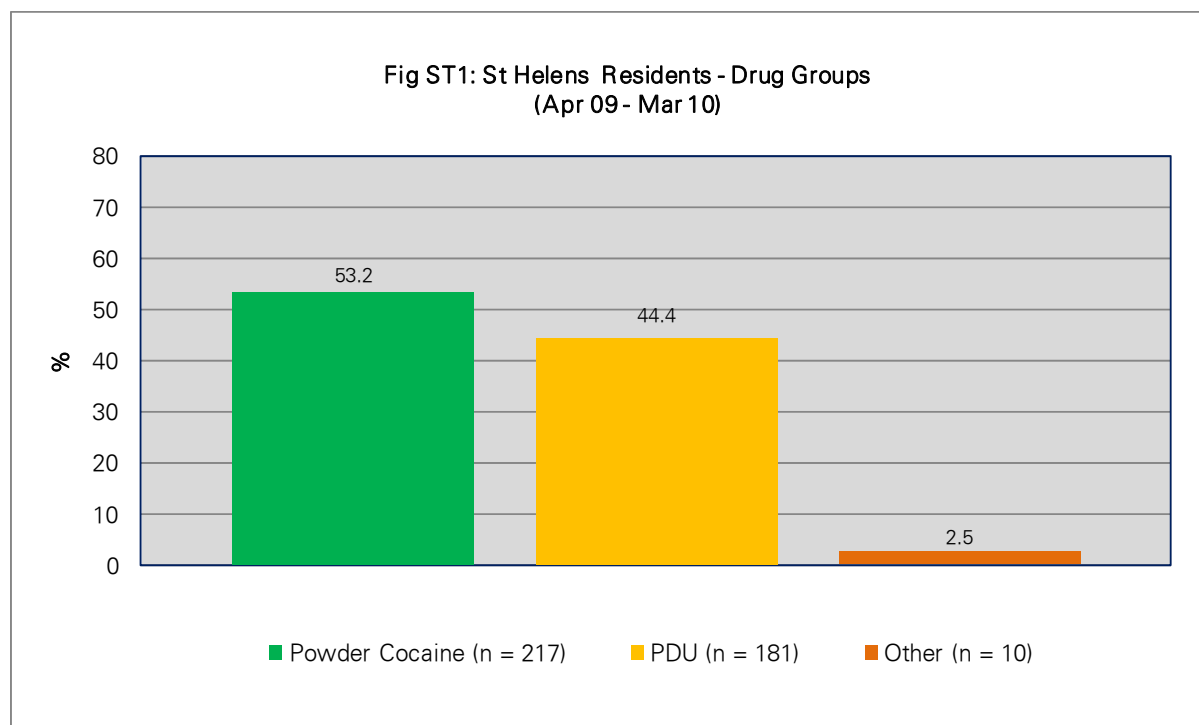
- There was more than half the proportion of St Helens residents who were powder cocaine users compared to more than four in ten who were PDU and were assessed by DIP across Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of clients from the powder cocaine group who reported being less than 25 years in 09/10 was less than those who reported being in the same age group in 08/09.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine on a monthly basis and in addition to this cannabis was also relatively common among this group and more common than among the PDU group. In contrast, the PDU group tended to use both crack and heroin on a daily basis but as a group they also used a greater range of drugs compared to the powder cocaine users including some monthly use of powder cocaine and daily use of illicit methadone.
- The weekly rate of expenditure on drugs by the powder cocaine group was much lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years. None of the powder cocaine group were in treatment at the time of their assessment.
- A greater proportion of the PDU group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A greater proportion of clients from the powder cocaine group had ever shared or had shared their drug taking equipment in the last month compared to the PDU group.
- A large proportion of the powder cocaine group drank alcohol on a weekly or monthly basis and over half of this group reported “binge drinking” on a weekly basis. Although nearly half of the PDU group did not drink any alcohol, an increase on that reported in 08/09, those who did were more likely than powder cocaine users to report potentially problematic daily “binge drinking”.
- The most common groups of offences committed by the powder cocaine group were Misuse of Drugs Act (MDA) offences and wounding or assault. These offences

were committed by a much lower proportion of the PDU group. The most common offence committed by the PDU group was shoplifting while this offence was committed by a smaller proportion of the powder cocaine group. In addition to this the powder cocaine group also reported a much greater prevalence of public order offences compared to the PDU group.

- The vast majority of clients from both drug groups were in settled accommodation although clients in the powder cocaine group were slightly more likely to be in this situation.
- Two thirds of the PDU group were unemployed compared to over a third of the powder cocaine group.

## 6.1 ST HELENS RESIDENTS

### Drug Groups

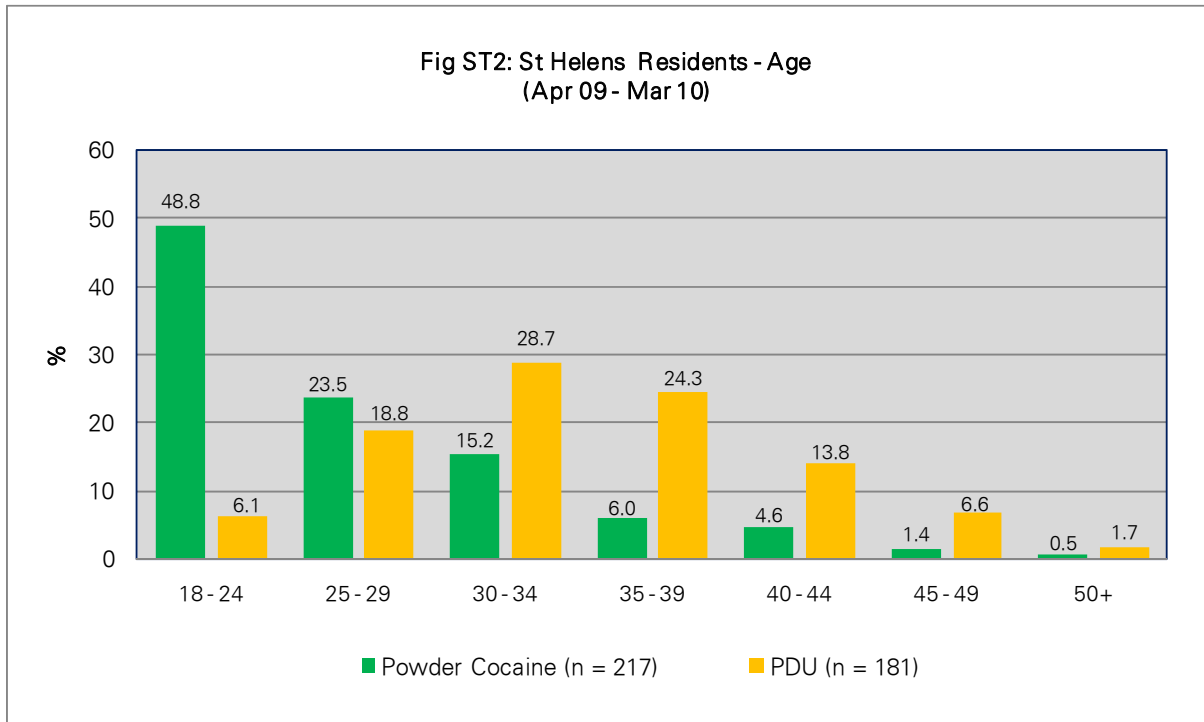


### Ethnicity

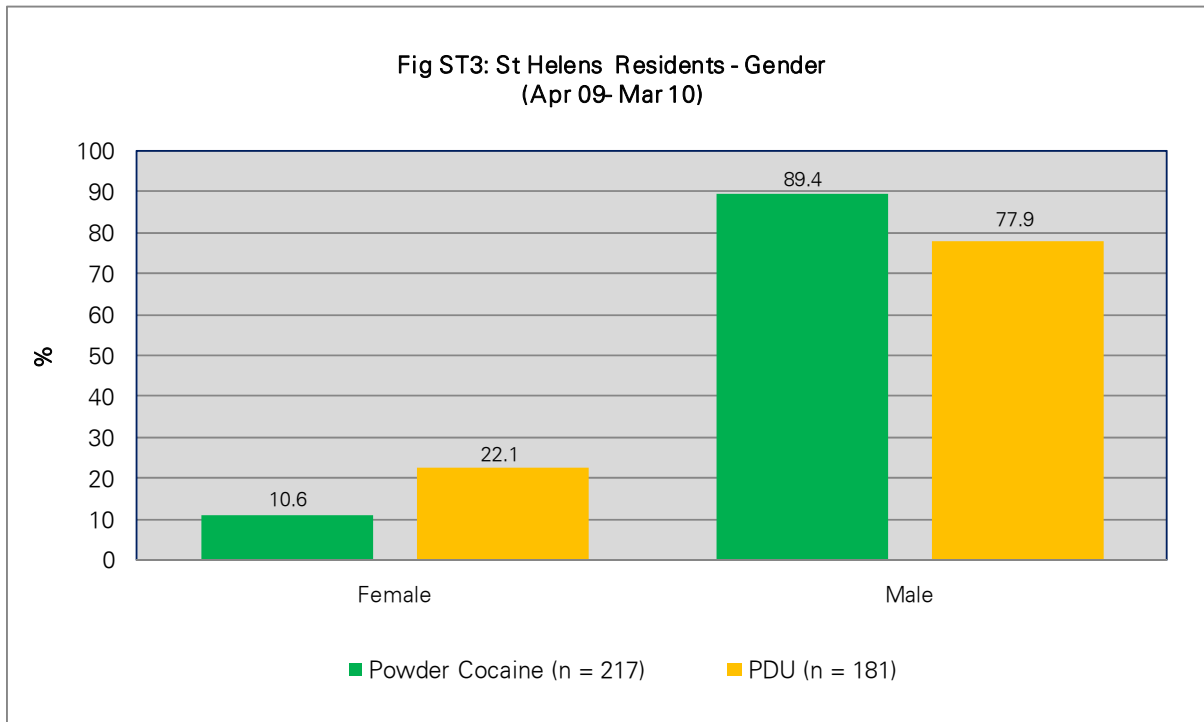
Table ST1: St Helens Residents - Ethnic background (Apr 09 – Mar 10)

Ethnicity	Powder Cocaine (n=217)		PDU (n=181)	
	Number	%	Number	%
Black or Black British	1	0.5		
Mixed			1	0.6
White	216	99.5	180	99.4
Not Stated				

Age



Gender



## Drug Use

Table ST2: St Helens Residents - Drugs used by the powder cocaine group (Apr 09 – Mar 10)

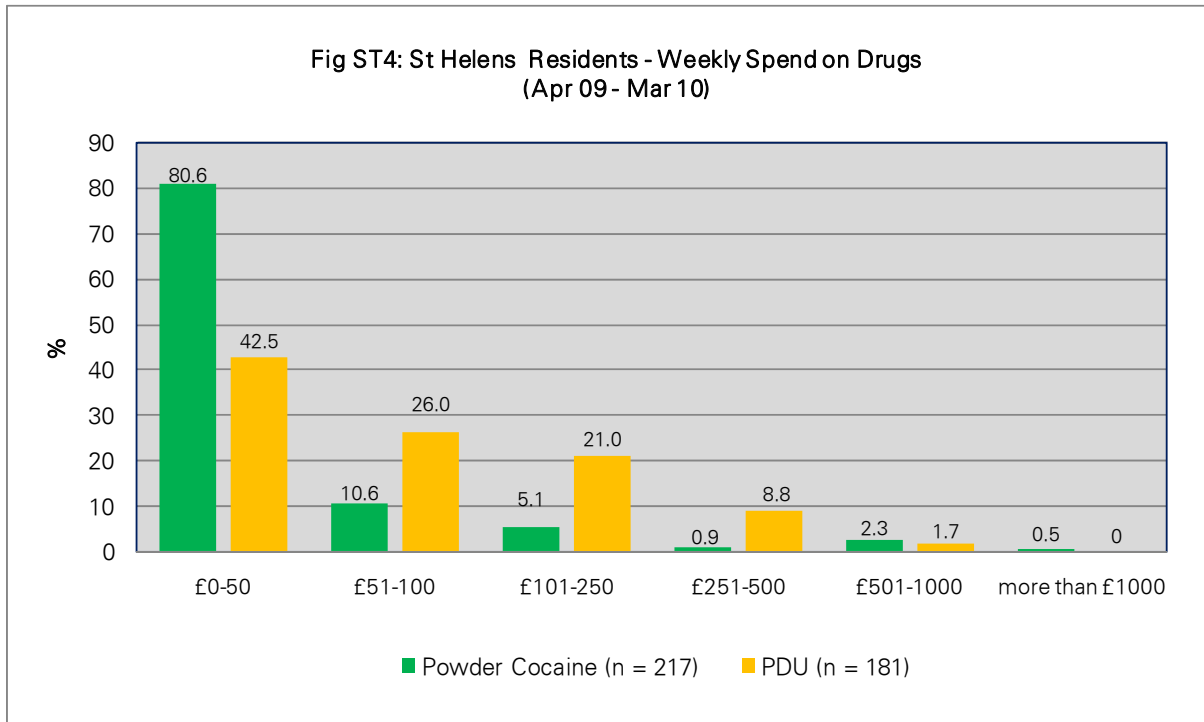
Drug use by Powder Cocaine group (n=217)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	16 (7.4%)	46 (21.2%)	155 (71.4%)	<b>217 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	23 (10.6%)	10 (4.6%)	8 (3.7%)	<b>41 (18.9%)</b>
Amphetamines		1 (0.5%)	1 (0.5%)	<b>2 (0.9%)</b>
Benzodiazepines	1 (0.5%)			<b>1 (0.5%)</b>
Ecstasy		1 (0.5%)	3 (1.4%)	<b>4 (1.8%)</b>
Subutex				
Methamphetamines				

Table ST3: St Helens Residents - Drugs used by the PDU group (Apr 09 – Mar 10)

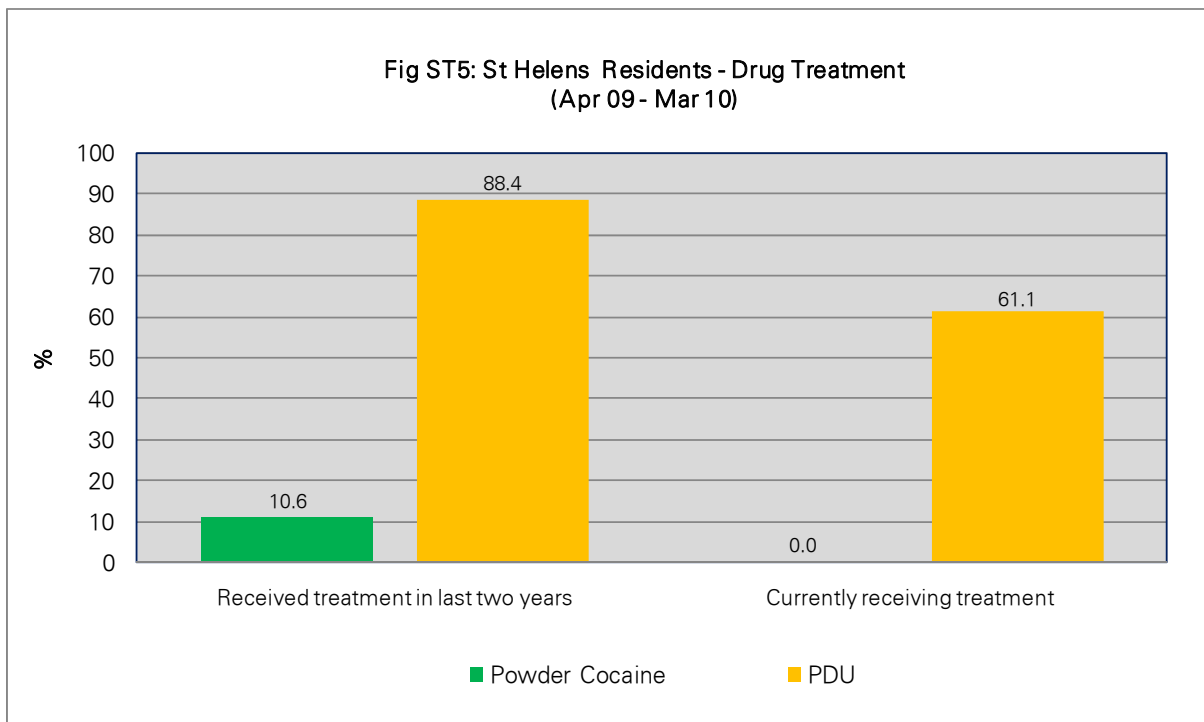
Drug use by PDU group (n=181)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	2 (1.1%)	8 (4.4%)	9 (5.0%)	<b>19 (10.5%)</b>
Crack	22 (12.2%)	37 (20.4%)	12 (6.6%)	<b>71 (39.2%)</b>
Heroin	117 (64.6%)	49 (27.1%)	15 (8.3%)	<b>181 (100%)</b>
Methadone	15 (8.3%)	5 (2.8%)		<b>20 (11.0%)</b>
Cannabis	10 (5.5%)	3 (1.7%)	3 (1.7%)	<b>16 (8.8%)</b>
Amphetamines			2 (1.1%)	<b>2 (1.1%)</b>
Benzodiazepines	14 (7.7%)	2 (1.1%)	2 (1.1%)	<b>18 (9.9%)</b>
Ecstasy				
Subutex				
Methamphetamines				



Weekly Spend on Drugs

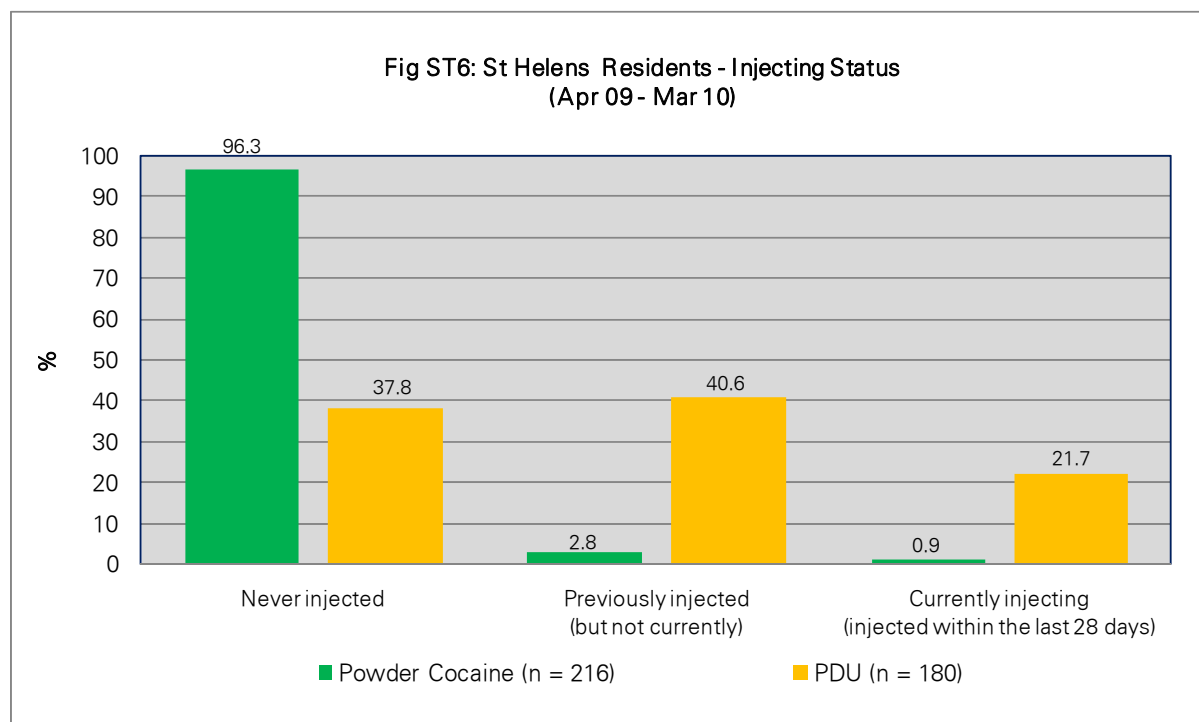


Drug Treatment

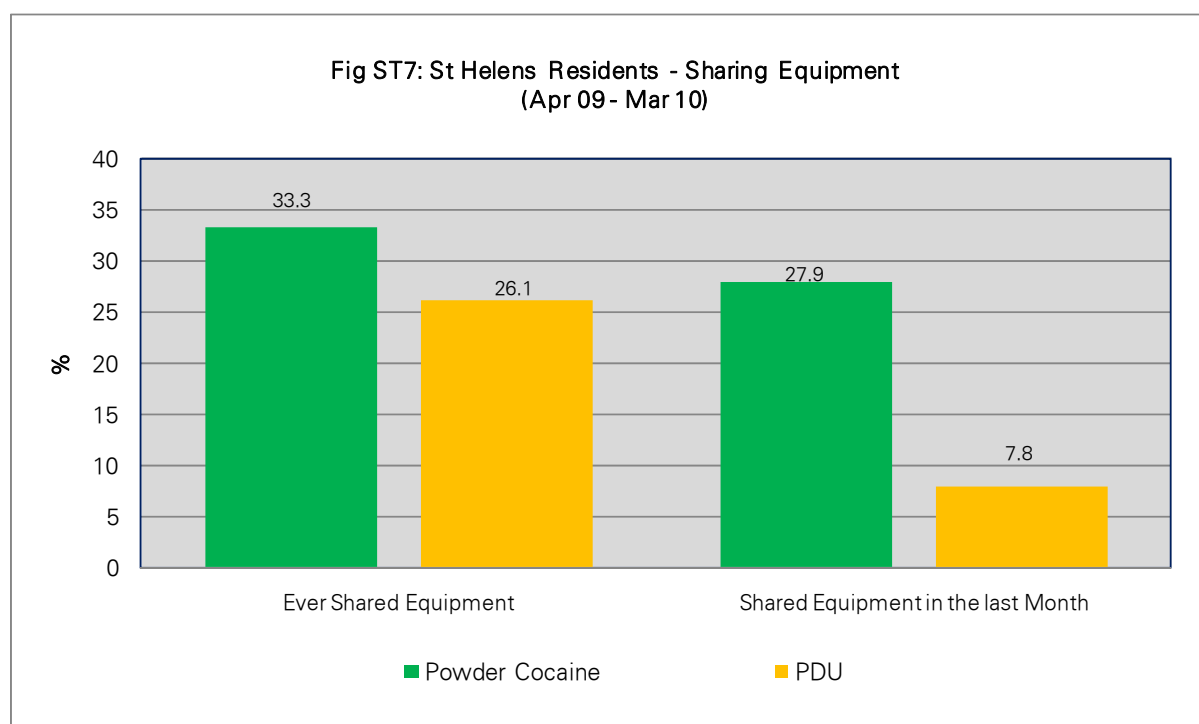


(Note: One individual from the powder cocaine group did not provide information for the currently receiving treatment analysis and one individual from the PDU group did not provide information for the currently receiving treatment analysis).

## Injecting Status

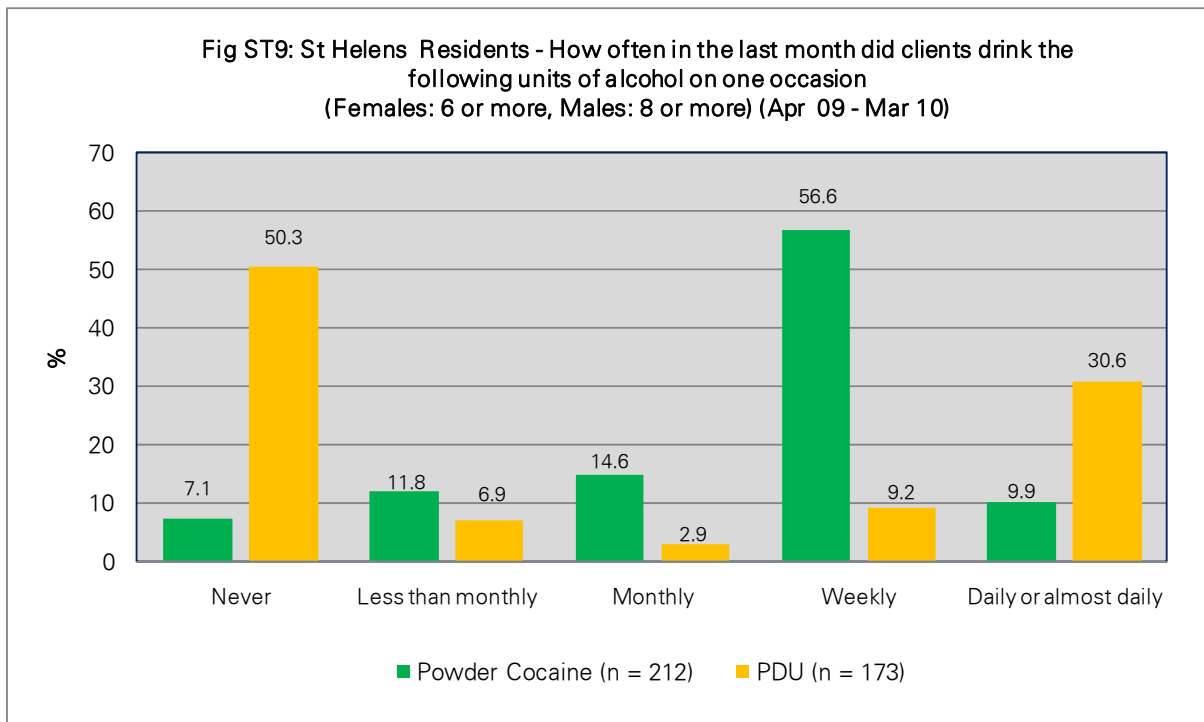
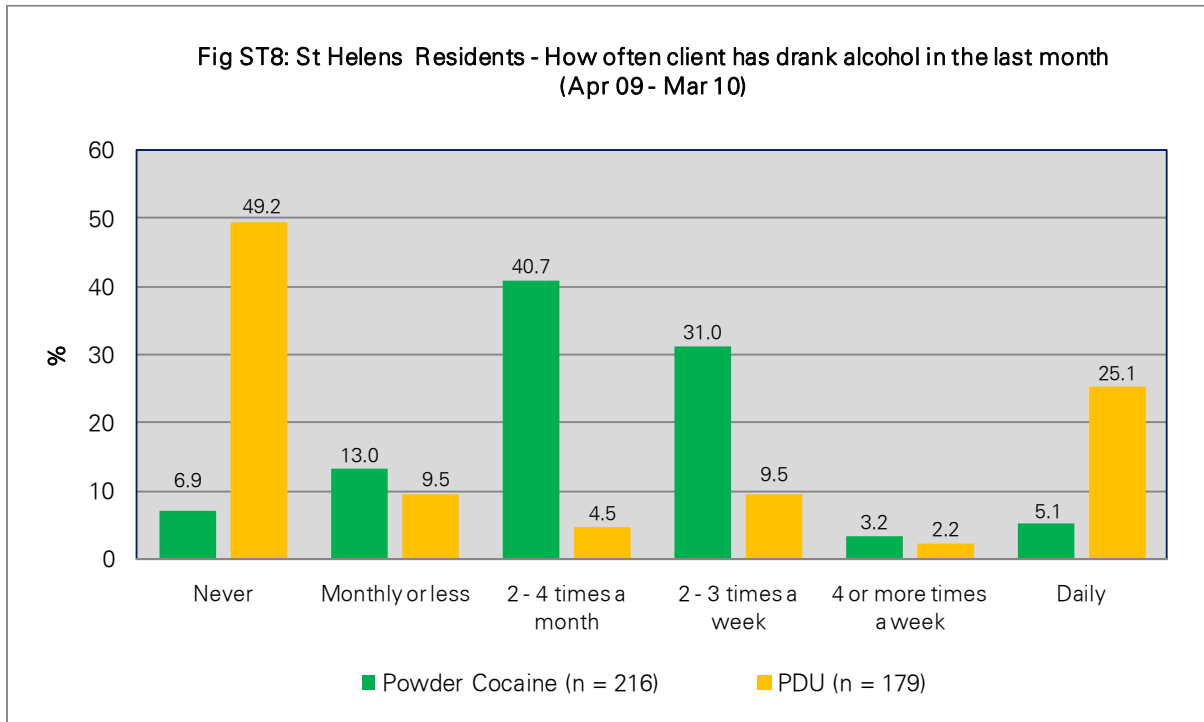


## Sharing Equipment



(Note: One powder cocaine using client did not provide any information for the ever shared equipment analysis and two did not provide any information for the shared equipment in the last month analysis. One PDU did not provide any information for the ever shared equipment analysis and one PDU did not provide any information for the shared equipment in the last month analysis.)

Alcohol Consumption

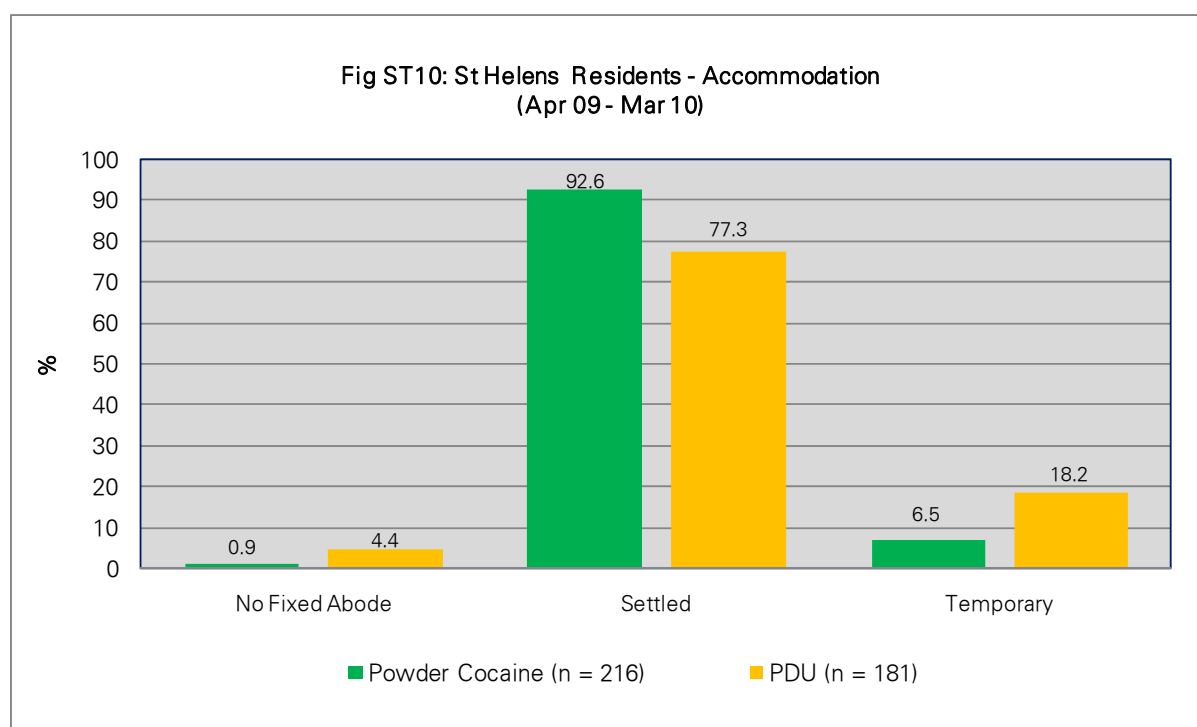


## Offences Committed

Table ST4: St Helens Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offence	Total Offending Powder Cocaine (n=217)		Total Offending PDU (n=180)	
	Number	%	Number	%
Begging			1	0.6
Breach			11	6.1
Burglary	6	2.8	10	5.6
Criminal Damage	3	1.4	3	1.7
Firearms/Weapons	1	0.5		
Fraud				
Going Equipped			1	0.6
Handling	2	0.9	4	2.2
MDA Offences	130	59.9	31	17.2
Motoring Offences	4	1.8	2	1.1
Soliciting				
Public Order Offences	24	11.1	10	5.6
Robbery			4	2.2
Shoplifting	10	4.6	82	45.6
Theft	15	6.9	14	7.8
Theft-Car	6	2.8	5	2.8
Warrant			2	1.1
Wounding or Assault	27	12.4	7	3.9
Other	3	1.4	6	3.3

## Accommodation



## Employment Status

Table ST5: St Helens Residents - Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n=217)		PDU (n=180)	
	Number	%	Number	%
Economically inactive	9	4.1	42	23.3
Pupil/student	5	2.3		
Regular employment	118	54.4	3	1.7
Unemployed	80	36.9	121	67.2
Other	5	2.3	14	7.8

## 7.0 WIRRAL – Key Points

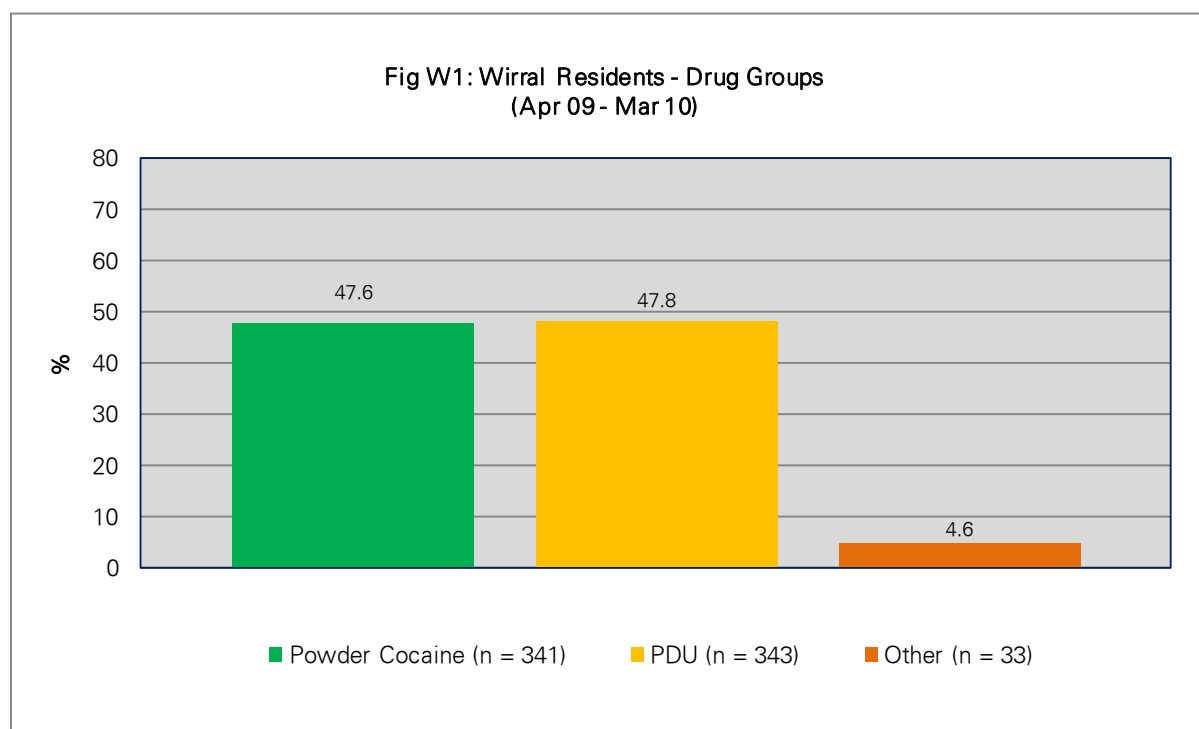
- There were almost equal proportions of Wirral resident powder cocaine users and PDU assessed by DIP across Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of clients from the powder cocaine group who reported being less than 25 years in 09/10 was less than those who reported being in the same age group in 08/09. In contrast the PDU group reported being older in 09/10 than in 08/09.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine mainly on a monthly basis and in addition to this cannabis use was also relatively common among this group and was more common than among the PDU group. In contrast, the PDU group tended to use both crack and heroin on a daily or weekly basis but as a group they also used a greater range of drugs compared to the powder cocaine users including daily use of cannabis, daily use of illicit methadone and monthly use of powder cocaine.
- The weekly rate of expenditure on drugs by the powder cocaine group was lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years.
- A greater proportion of the PDU group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A greater proportion from the powder cocaine group had ever shared or had shared their drug equipment in the last month compared to the PDU group.
- A large proportion of powder cocaine users drank alcohol on a weekly or monthly basis and nearly half of this group reported “binge drinking” on a weekly basis. Although over half of the PDU group did not drink any alcohol, a slight decrease from that reported in 08/09, nearly a quarter of the remaining clients reported problematic daily “binge drinking” a similar proportion to that among the powder cocaine group.
- The most commonly committed group of offences for the powder cocaine group were Misuse of Drugs Act (MDA) offences and public order offences. These offences were committed by a much lower proportion of the PDU group. The most common offence committed by the PDU group was shoplifting and this was

committed by a smaller proportion of the powder cocaine group. In addition to this the PDU group reported a much greater prevalence of theft offences compared to the powder cocaine group.

- The vast majority of clients from both drug groups were in settled accommodation although clients in the powder cocaine group were more likely to be in this situation.
- Over half the PDU group were unemployed compared to more than four in ten of the powder cocaine group.

## 7.1 WIRRAL RESIDENTS

### Drug Groups



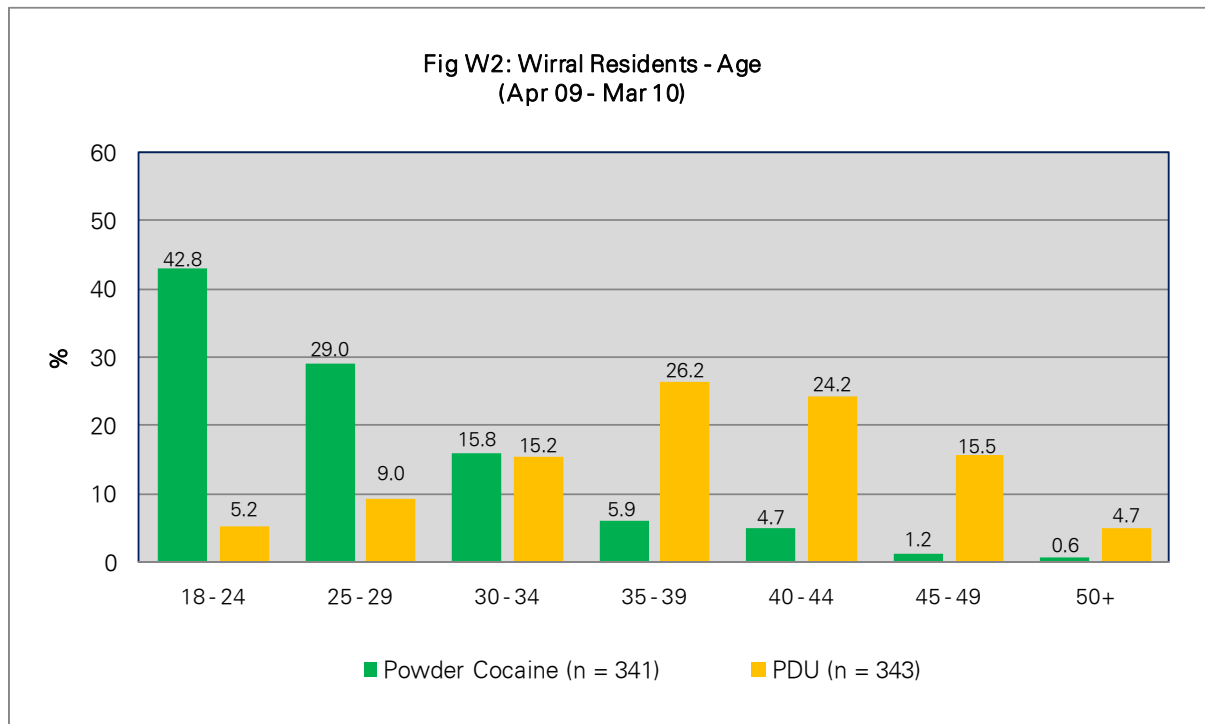
### Ethnicity

Table W1: Wirral Residents - Ethnic background (Apr 09 – Mar 10)

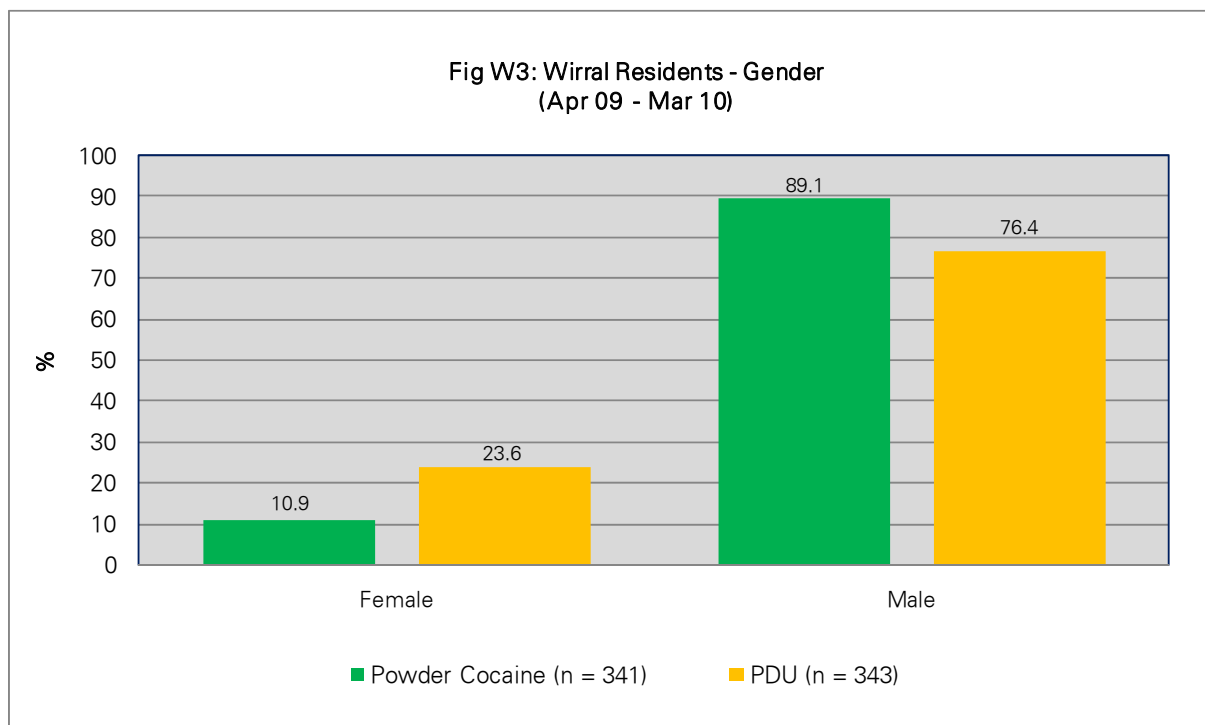
Ethnicity	Powder Cocaine (n=341)		PDU (n=343)	
	Number	%	Number	%
Asian or Asian British	1	0.3	2	0.6
Black or Black British	1	0.3	2	0.6
Mixed	1	0.3	2	0.6
White	338	99.1	337	98.3



## Age



## Gender



## Drug Use

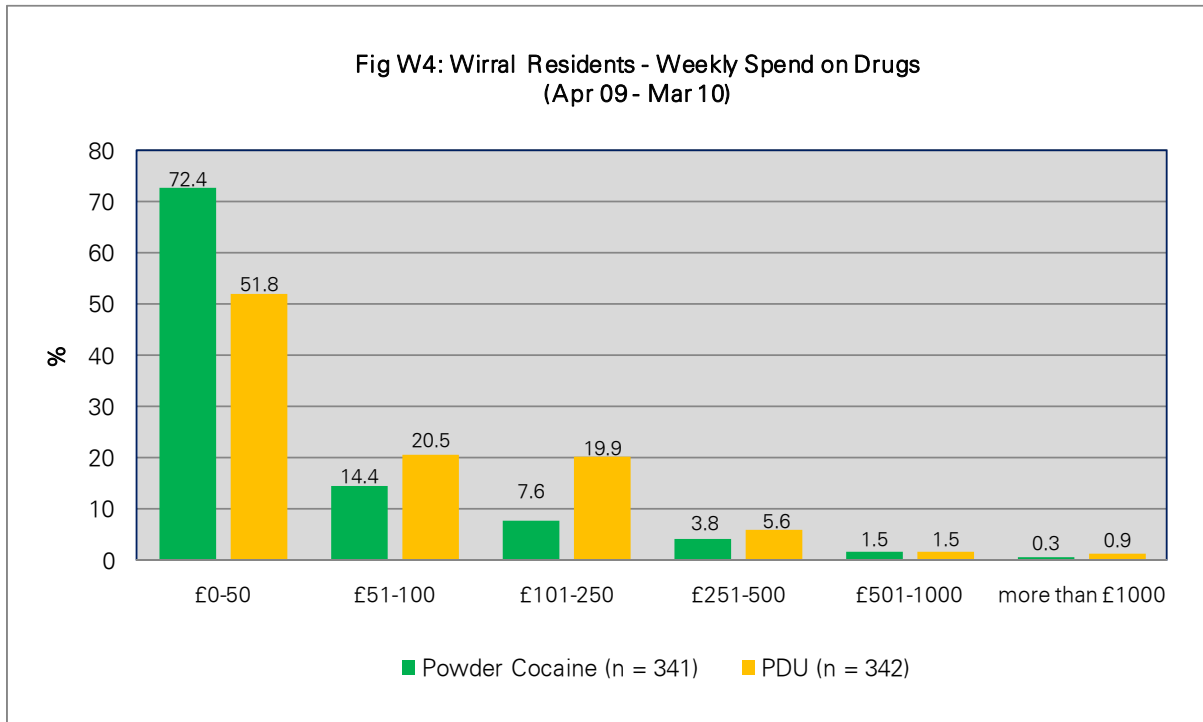
Table W2: Wirral Residents - Drugs used by the powder cocaine group (Apr 09 – Mar 10)

Drug use by Powder Cocaine (n=341)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	23 (6.7%)	80 (23.5%)	238 (69.8%)	<b>341 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	80 (23.5%)	27 (7.9%)	12 (3.5%)	<b>119 (34.9%)</b>
Amphetamines	1 (0.3%)	2 (0.6%)		<b>3 (0.9%)</b>
Benzodiazepines	2 (0.6%)			<b>2 (0.6%)</b>
Ecstasy		2 (0.6%)	11 (3.2%)	<b>13 (3.8%)</b>
Subutex				
Methamphetamines				

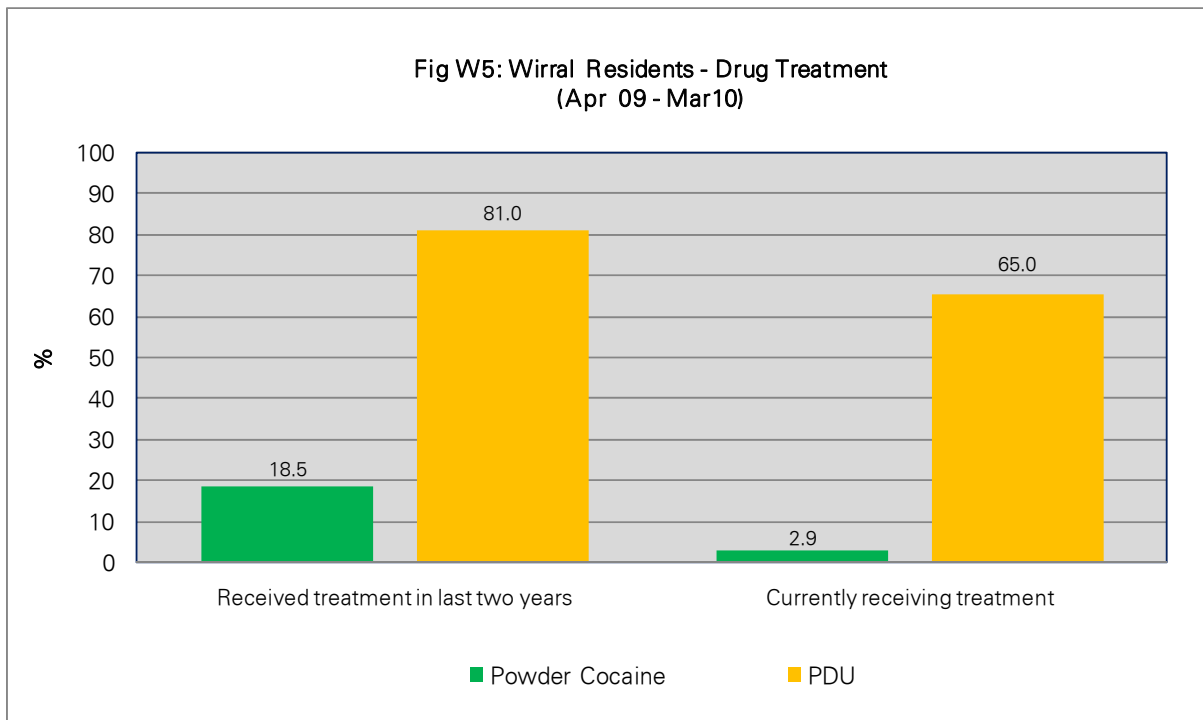
Table W3: Wirral Residents - Drugs used by the PDU group (Apr 09 – Mar 10)

Drug use by PDU group (n=343)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	1 (0.3%)	3 (0.9%)	20 (5.8%)	<b>24 (7.0%)</b>
Crack	32 (9.3%)	53 (15.5%)	40 (11.7%)	<b>125 (36.4%)</b>
Heroin	170 (49.6%)	108 (31.5%)	35 (10.2%)	<b>313 (91.3%)</b>
Methadone	25 (7.3%)	5 (1.5%)	2 (0.6%)	<b>32 (9.3%)</b>
Cannabis	19 (5.5%)	19 (5.5%)	8 (2.3%)	<b>46 (13.4%)</b>
Amphetamines	3 (0.9%)		1 (0.3%)	<b>4 (1.2%)</b>
Benzodiazepines	6 (1.7%)	6 (1.7%)	9 (2.6%)	<b>21 (6.1%)</b>
Ecstasy			1 (0.3%)	<b>1 (0.3%)</b>
Subutex	1 (0.3%)			<b>1 (0.3%)</b>
Methamphetamines				

## Weekly Spend on Drugs

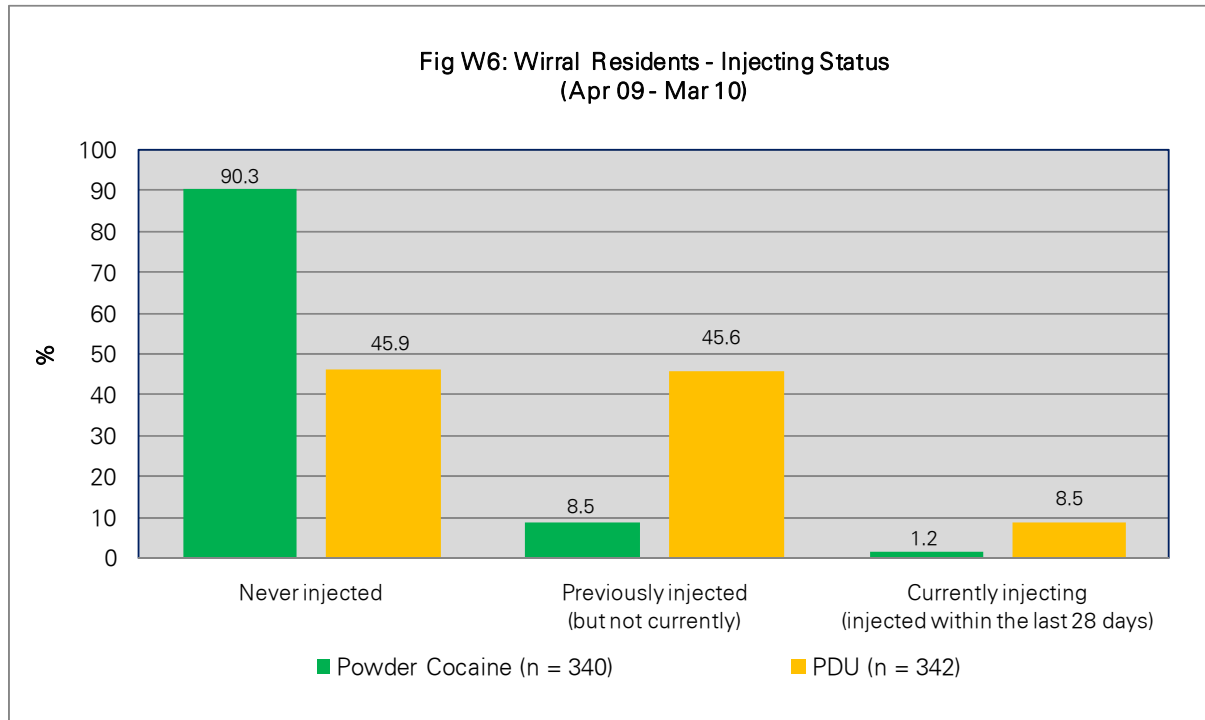


## Drug Treatment

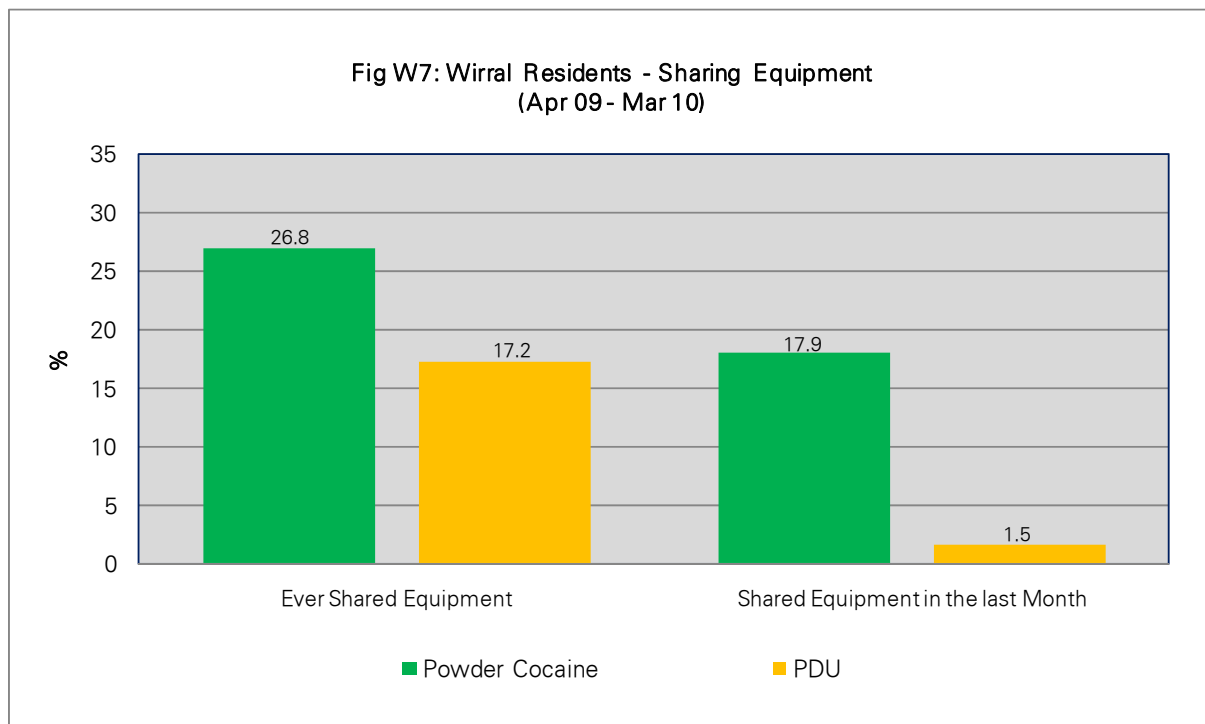


(Note: One individual from the powder cocaine group did not provide any information for the receiving treatment in the last two years analysis and two individual did not provide any information for the currently receiving treatment analysis.)

## Injecting Status

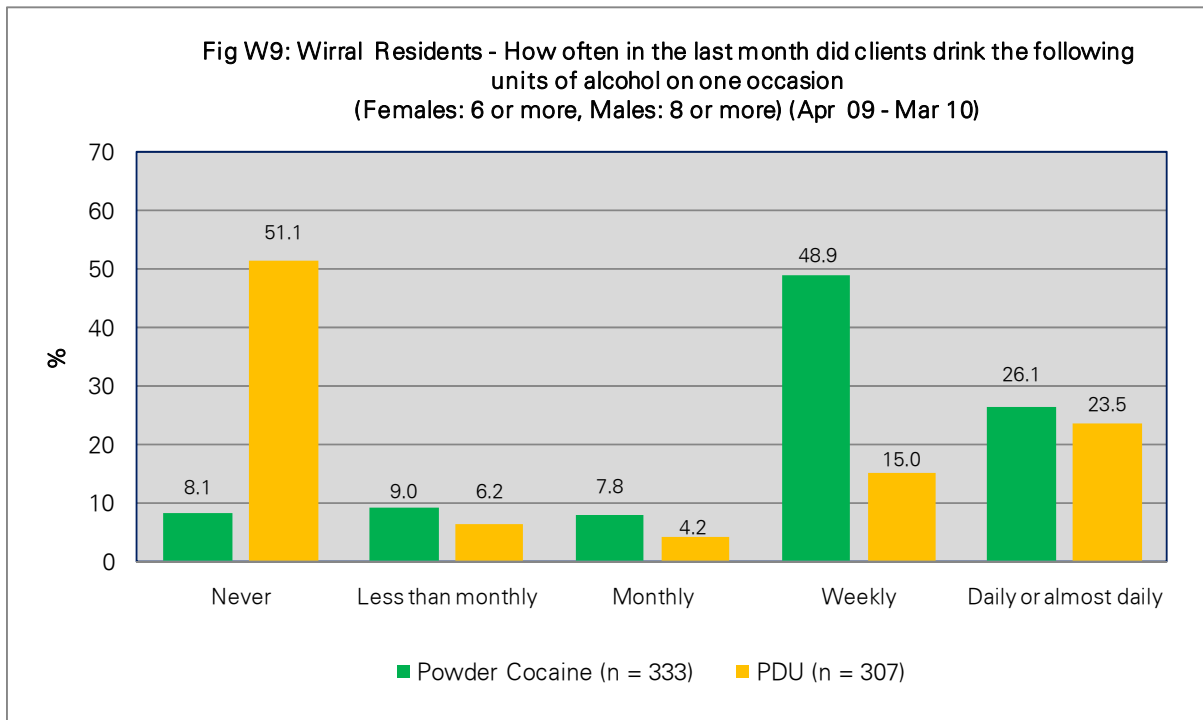
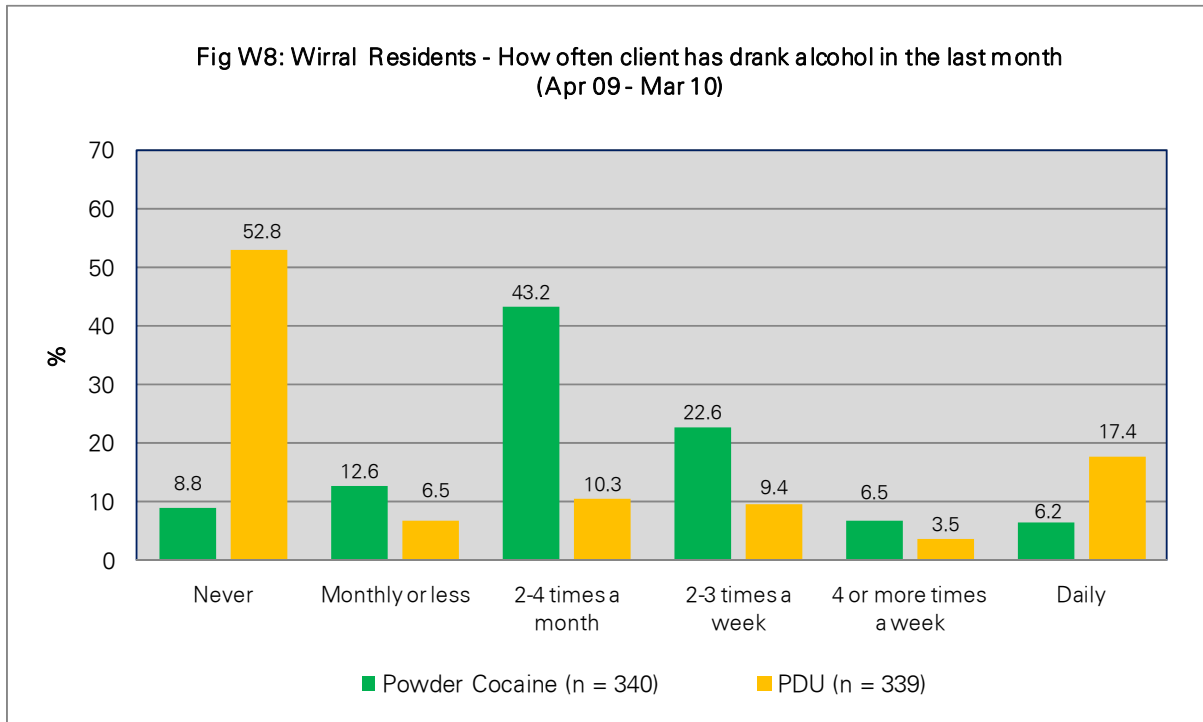


## Sharing Equipment



(Note: One individual from the powder cocaine group did not provide any information for the ever shared equipment analysis and two did not provide any information for the shared equipment in the last month analysis.)

## Alcohol Consumption

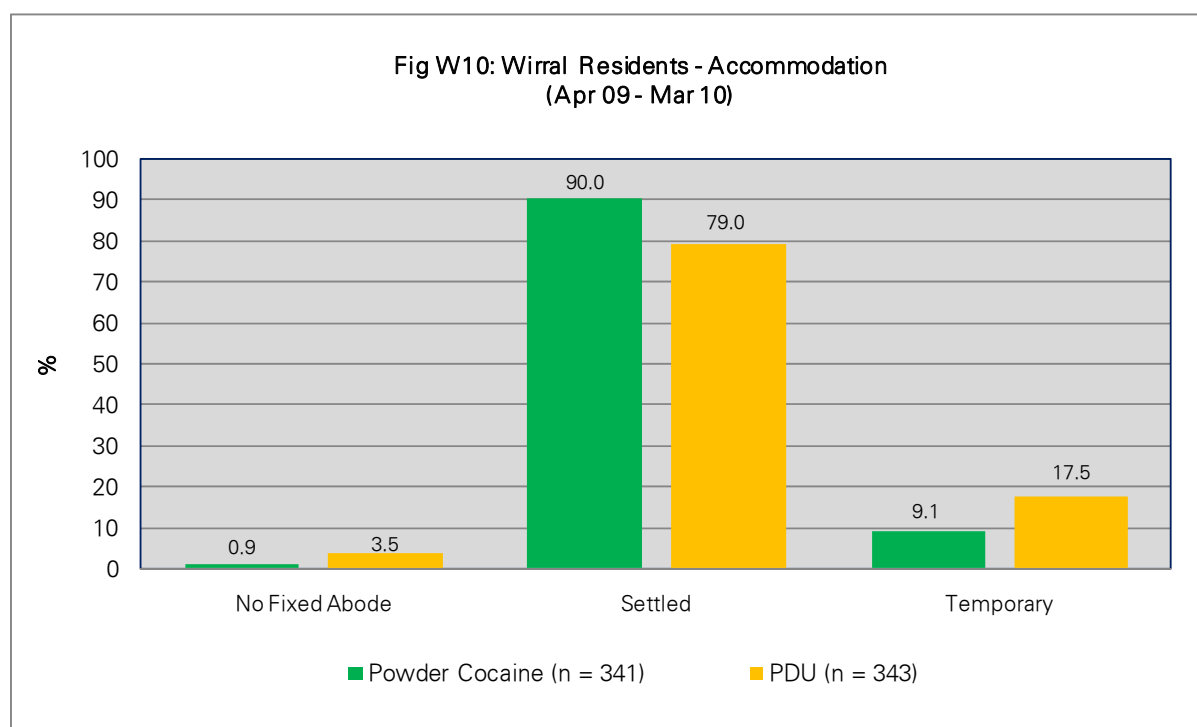


## Offences Committed

Table W4: Wirral Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offences	Total Offending Powder Cocaine (n=338)		Total Offending PDU (n=342)	
	Number	%	Number	%
Begging			5	1.5
Breach	9	2.7	4	1.2
Burglary	30	8.9	33	9.6
Criminal Damage	5	1.5	4	1.2
Firearms/Weapons	2	0.6	2	0.6
Fraud	3	0.9	6	1.8
Going Equipped	1	0.3	8	2.3
Handling	1	0.3	5	1.5
MDA Offences	140	41.4	95	27.8
Motoring Offences	9	2.7	3	0.9
Soliciting				
Public Order Offences	72	21.3	9	2.6
Robbery	5	1.5	4	1.2
Shoplifting	18	5.3	133	38.9
Theft	19	5.6	35	10.2
Theft-Car	20	5.9	7	2.0
Warrant	1	0.3	3	0.9
Wounding or Assault	43	12.7	17	5.0
Other	6	1.8	3	0.9

## Accommodation



## Employment Status

Table W5: Wirral Residents - Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n=340)		PDU (n=340)	
	Number	%	Number	%
Economically inactive	33	9.7	136	40.0
Pupil/student	7	2.1	1	0.3
Regular employment	136	40.0	17	5.0
Unemployed	155	45.6	172	50.6
Other	9	2.6	14	4.1

## 8.0 MERSEYSIDE – Key Points

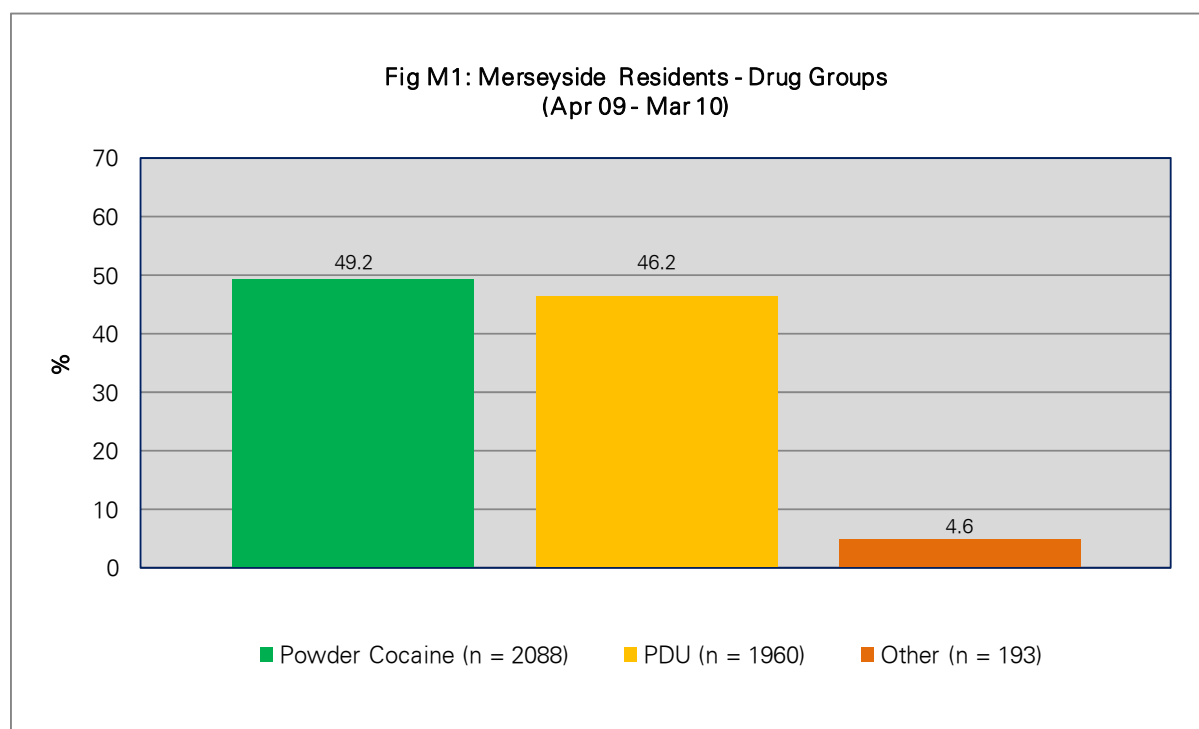
- Overall there was a slightly greater proportion of Merseyside resident powder cocaine users than PDU users assessed by DIP teams in Merseyside in 09/10.
- Clients in the powder cocaine group tended to be much younger than those in the PDU group. However the proportion of the powder cocaine group who reported being less than 25 years in 09/10 was less than those who reported being in the same age group in 08/09. In contrast the PDU group reported being slightly older in 09/10 compared to 08/09.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine on a monthly basis and in addition to this cannabis use was also relatively common among this group and was more common than among the PDU group. In contrast, the PDU drug group tended to use both crack and heroin on a daily basis but as a group they also used small proportions of a greater range of drugs compared to the powder cocaine users including illicit methadone (most often daily use), benzodiazepines (most often daily use) and powder cocaine (most often weekly or monthly use).
- The weekly rate of expenditure on drugs by the powder cocaine group was much lower than that of the PDU group.
- Clients in the PDU group were more likely than their powder cocaine using counterparts to either currently be in treatment or to have received treatment in the past two years.
- A greater proportion of the PDU drug group reported having previously injected as well as being current injectors compared to the powder cocaine group.
- A similar proportion of clients from the drug groups had ever shared their drug taking equipment but a greater proportion of clients from the powder cocaine group had shared their drug taking equipment in the last month than among the PDU group.
- A large proportion of powder cocaine users drank alcohol on a weekly or monthly basis and more than four in ten of this group reported “binge drinking” on a weekly basis. Although over half the PDU group did not drink any alcohol, a slight increase on that reported in 08/09, over a quarter of the remaining clients reported problematic daily “binge drinking” a much higher proportion than among the powder cocaine group.



- The most commonly committed groups of offences for the powder cocaine group were Misuse of Drugs Act (MDA) offences, public order offences and wounding or assault and these were all committed by a much lower proportion of the PDU group. In contrast the most common offence committed by the PDU group was shoplifting and was committed by a smaller proportion of the powder cocaine group.
- The vast majority of clients from both drug groups were in settled accommodation although clients in the powder cocaine group were slightly more likely to be in this situation.
- Over two thirds of the PDU group were unemployed compared to less than half of the powder cocaine group. A large proportion of the powder cocaine group also reported being in regular employment compared to a much smaller proportion of the PDU group.

## 8.1 MERSEYSIDE RESIDENTS

### Drug Groups

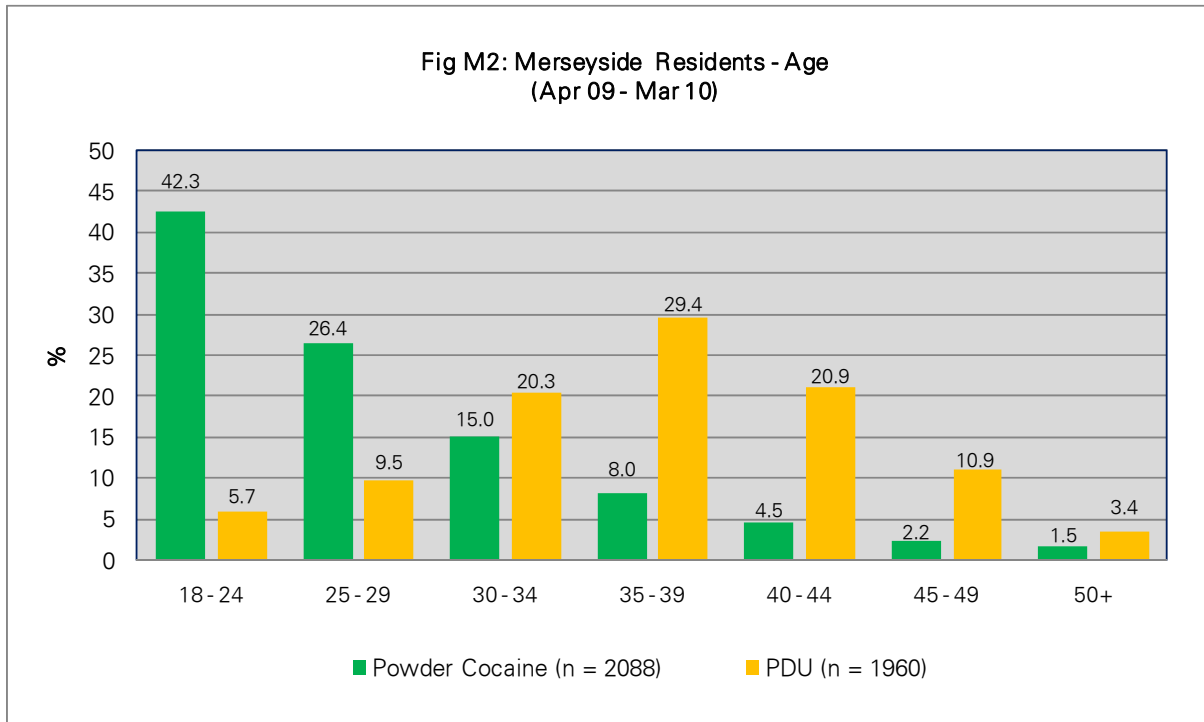


### Ethnicity

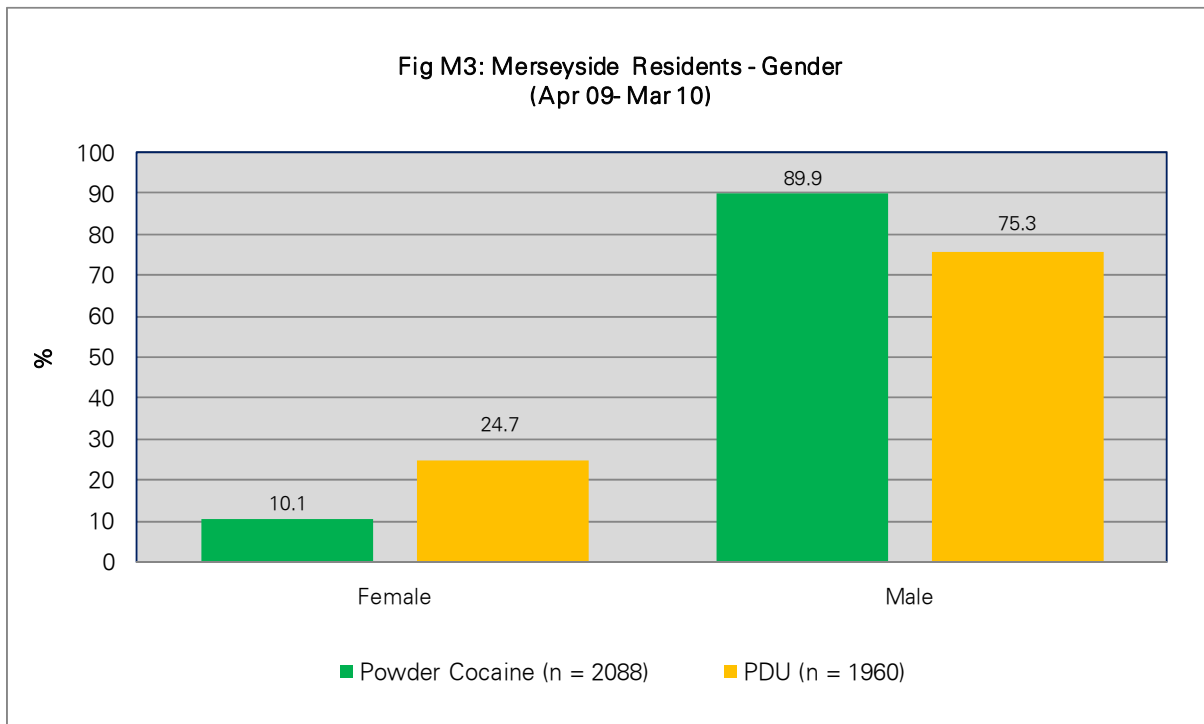
Table M1: Merseyside Residents - Ethnic background (Apr 09 – Mar 10)

Ethnicity	Powder Cocaine (n=2087)		PDU (n=1958)	
	Number	%	Number	%
Asian or Asian British	1	<0.1	8	0.4
Black or Black British	25	1.2	41	2.1
Chinese or Other Ethnic Group	1	<0.1	3	0.2
Mixed	28	1.3	28	1.4
White	2022	96.9	1871	95.6
Not Stated	10	0.5	7	0.4

Age



Gender



## Drug Use

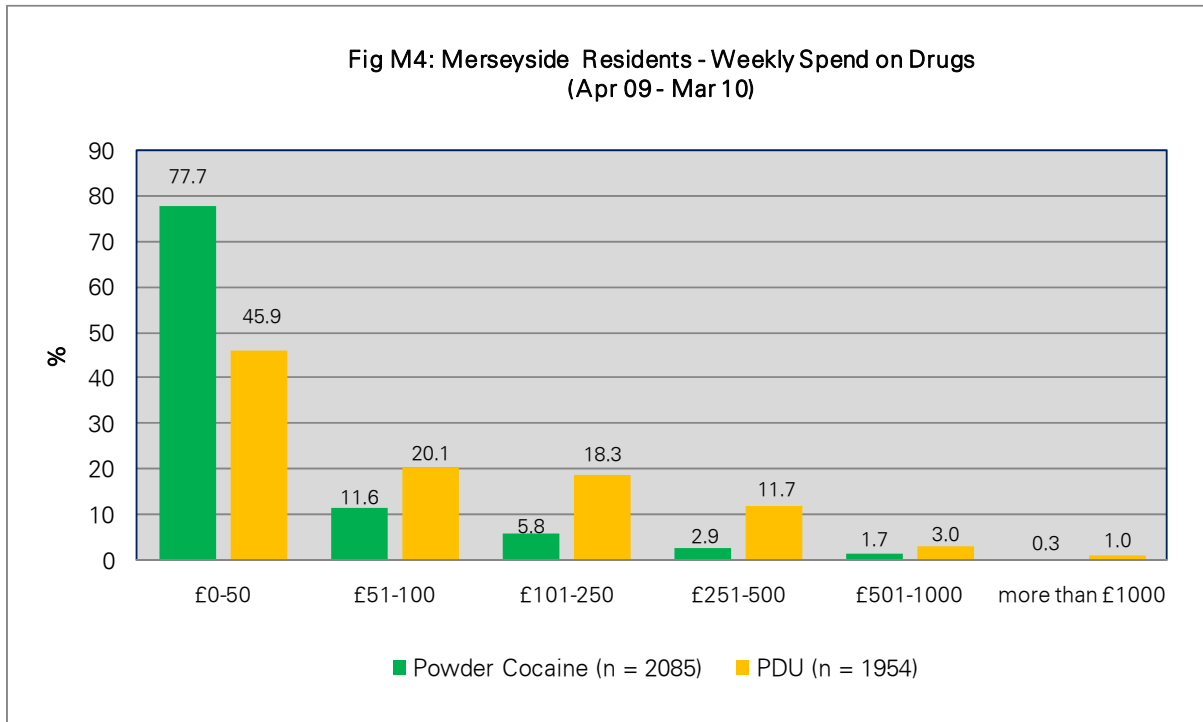
Table M2: Merseyside Residents - Drugs used by the powder Cocaine group (Apr 09 – Mar 10)

Drug use by powder cocaine group (n=2088)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	148 (7.1%)	582 (27.9%)	1358 (65.0%)	<b>2088 (100%)</b>
Crack				
Heroin				
Methadone				
Cannabis	347 (16.6%)	116 (5.6%)	59 (2.8%)	<b>522 (25.0%)</b>
Amphetamines	4 (0.2%)	7 (0.3%)	6 (0.3%)	<b>17 (0.8%)</b>
Benzodiazepines	3 (0.1%)		1 (<0.1%)	<b>4 (0.2%)</b>
Ecstasy	1 (<0.1%)	6 (0.3%)	26 (1.2%)	<b>33 (1.6%)</b>
Subutex				
Methamphetamines				

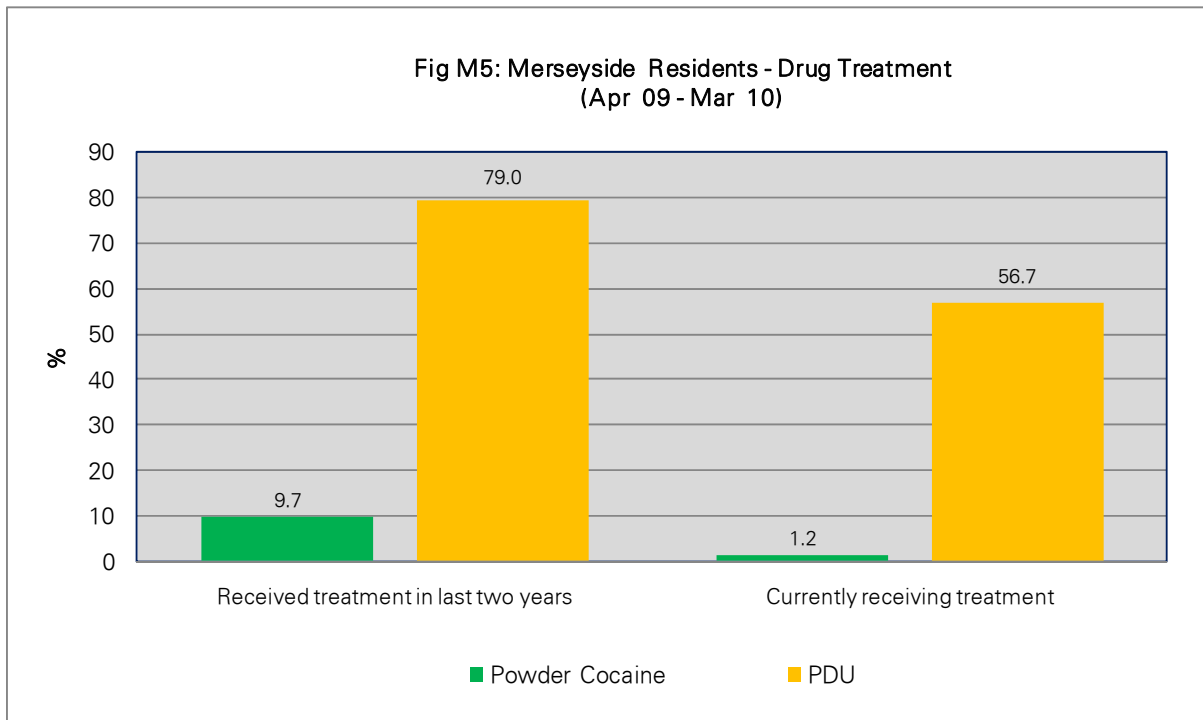
Table M3: Merseyside Residents - Drugs used by the PDU group (Apr 09–Mar 10)

Drug use by PDU group (n=1960)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	25 (1.3%)	61 (3.1%)	74 (3.8%)	<b>160 (8.2%)</b>
Crack	460 (23.5%)	451 (23.0%)	141 (7.2%)	<b>1052 (53.7%)</b>
Heroin	1132 (57.8%)	527 (26.9%)	155 (7.9%)	<b>1814 (92.6%)</b>
Methadone	147 (7.5%)	23 (1.2%)	8 (0.4%)	<b>178 (9.1%)</b>
Cannabis	78 (4.0%)	40 (2.0%)	18 (0.9%)	<b>136 (6.9%)</b>
Amphetamines	4 (0.2%)	1 (0.1%)	6 (0.3%)	<b>11 (0.6%)</b>
Benzodiazepines	60 (3.1%)	23 (1.2%)	16 (0.8%)	<b>99 (5.1%)</b>
Ecstasy		1(0.1%)	1 (0.1%)	<b>2 (0.1%)</b>
Subutex	12 (0.6%)			<b>12 (0.6%)</b>
Methamphetamines				

## Weekly Spend on Drugs

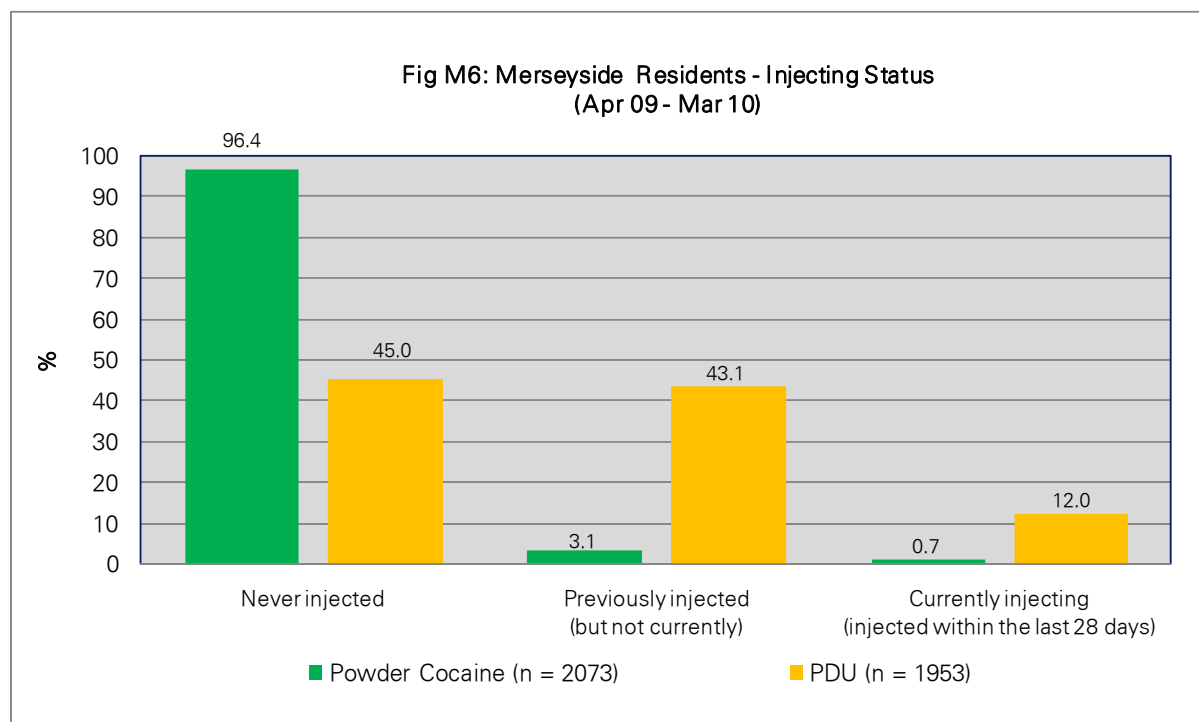


## Drug Treatment

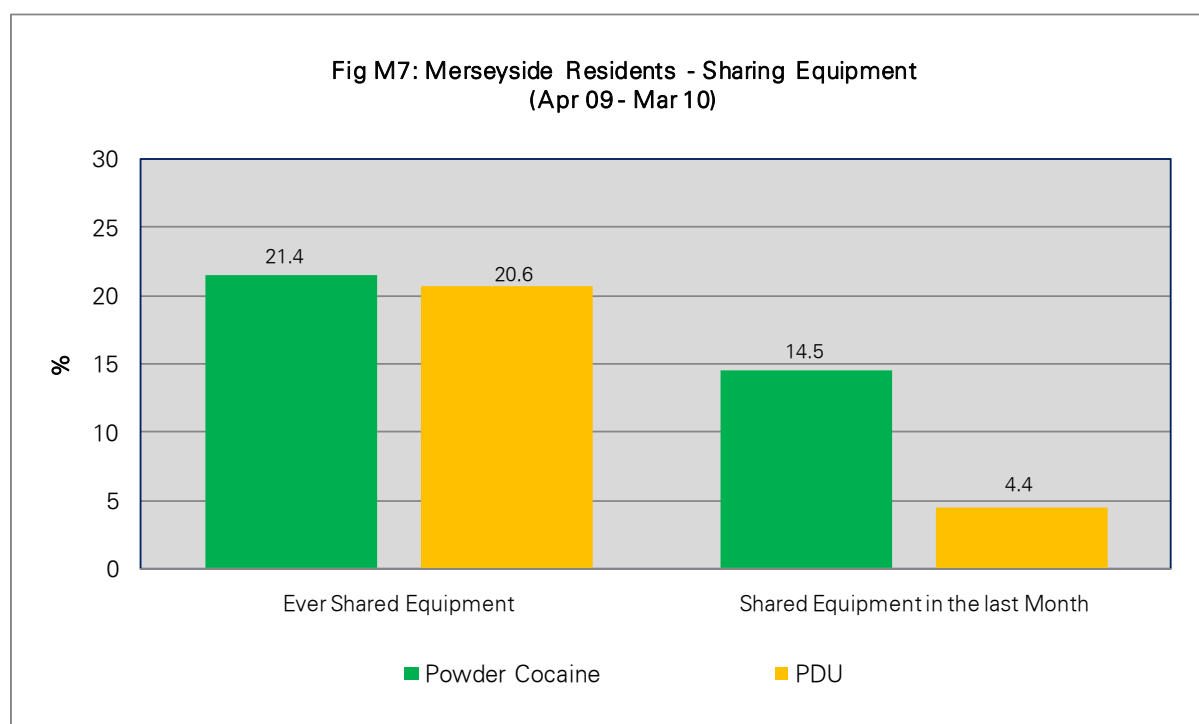


(Note: Three individuals from the powder cocaine group did not provide information for the receiving treatment in the last two years analysis and 14 did not provide information for the currently receiving treatment analysis. Nine PDU did not provide information for the receiving treatment in the last two years analysis and 15 PDU did not provide information for the currently receiving treatment analysis.)

## Injecting Status

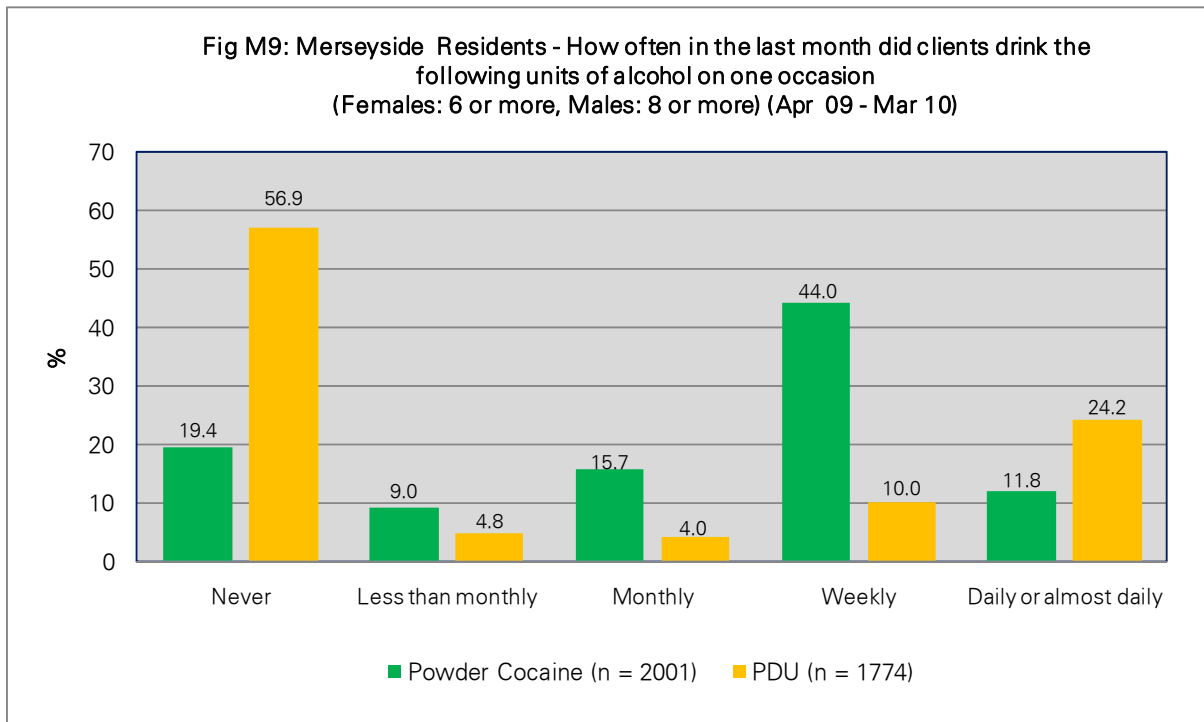
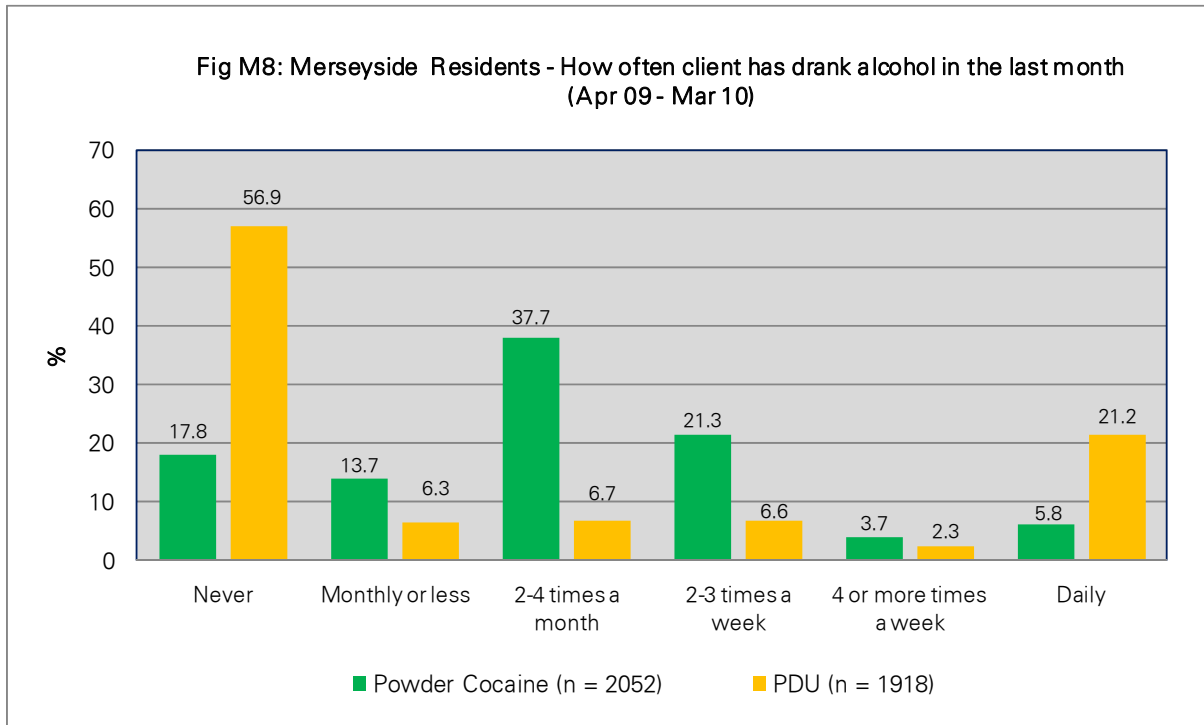


## Sharing Equipment



(Note: Four individuals from the powder cocaine group did not provide information for the ever shared equipment analysis and eight did not provide information for the shared equipment in the last month analysis. Four PDU did not provide information for the ever shared equipment analysis and six PDU did not provide information for the shared equipment in the last month analysis.)

Alcohol Consumption

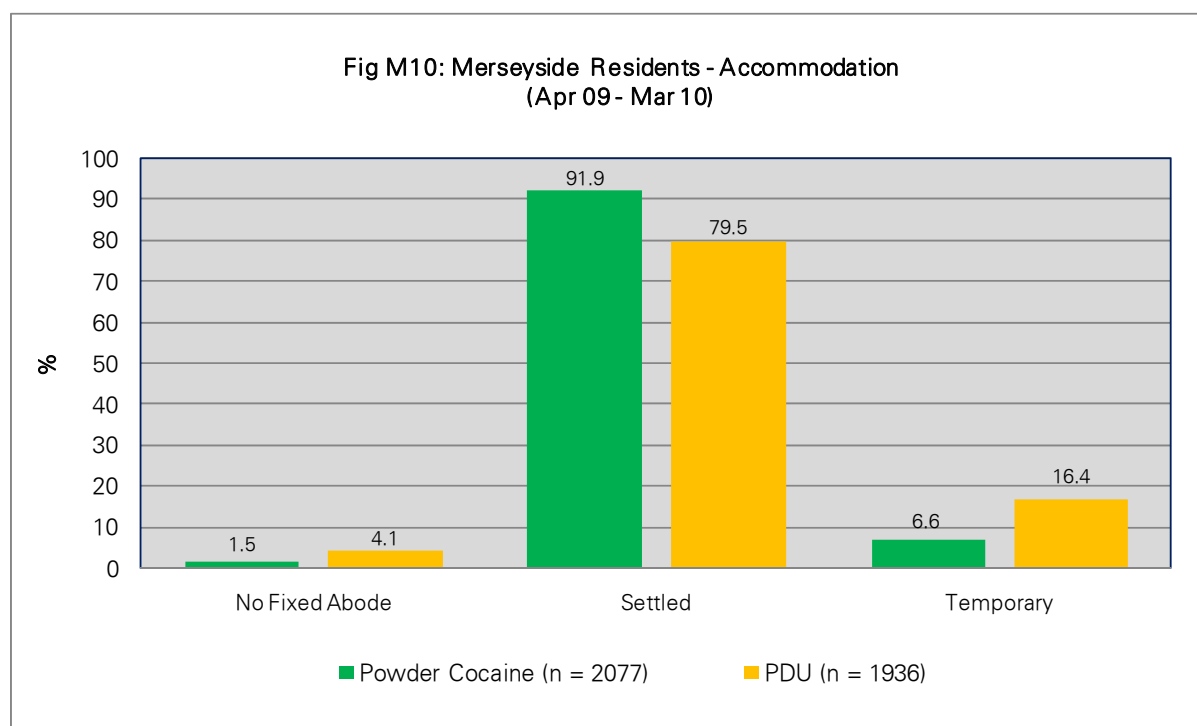


## Offences Committed

Table M3: Merseyside Residents - Offending that lead to contact with DIP (Apr 09 – Mar 10)

Offence	Total Offending Powder Cocaine (n=2076)		Total Offending PDU (n=1938)	
	Number	%	Number	%
Begging	2	0.1	76	3.9
Breach	26	1.3	68	3.5
Burglary	153	7.4	148	7.6
Criminal Damage	38	1.8	14	0.7
Firearms/Weapons	14	0.7	8	0.4
Fraud	24	1.2	25	1.3
Going Equipped	12	0.6	27	1.4
Handling	18	0.9	29	1.5
MDA Offences	987	47.5	374	19.3
Motoring Offences	46	2.2	13	0.7
Prostitution			11	0.6
Public Order Offences	250	12.0	68	3.5
Robbery	55	2.6	52	2.7
Shoplifting	160	7.7	802	41.4
Theft	115	5.5	144	7.4
Theft-Car	115	5.5	54	2.8
Warrant	7	0.3	35	1.8
Wounding or Assault	187	9.0	69	3.6
Other	34	1.6	40	2.1

## Accommodation





## Employment Status

Table M4: Merseyside Residents – Employment status (Apr 09 – Mar 10)

Employment Status	Powder Cocaine (n=2075)		PDU (n=1947)	
	Number	%	Number	%
Economically inactive	132	6.4	453	23.3
Pupil/student	51	2.5	1	0.1
Regular employment	870	41.9	68	3.5
Unemployed	983	47.4	1364	70.1
Other	38	1.8	56	2.9
Not known	1	<0.1	5	0.3

## 9.0 CONCLUSIONS AND RECOMMENDATIONS

The main aim of this report was to compare the characteristics of two different Merseyside resident drug user groups - the powder cocaine group and the PDU group – assessed through DIP in Merseyside between April 09 and March 10. The findings from this report highlight the different profiles of these two groups of clients and also where changing trends have emerged compare patterns in 09/10 to previous figures from the 08/09 report. However, it should be pointed out that for the most part findings in 09/10 replicate those from 08/09.

### Drug Groups

Overall in Merseyside in 09/10, there were similar proportions of clients in the powder cocaine group and in the PDU group compared to the cohort in 08/09. However there were a slightly greater proportion of clients who were in the powder cocaine group compared to the PDU group in 09/10 whereas in the 08/09 cohort the greater proportion of clients were in the PDU group. This was due to all five D(A)AT areas reporting some increase in the proportions of clients who were in the powder cocaine group in 09/10 compared to the cohort in 08/09. This suggests a slight change in the overall pattern of use in Merseyside from more PDU to more powder cocaine clients but this change was only clearly evident in Sefton. In 08/09 Sefton reported that 43.1% of clients assessed were in the powder cocaine group and 53.2% were in the PDU group but this changed to 56.6% and 40.7% respectively in 09/10. This reported increase in the proportion of clients who used powder cocaine may be due to an increase in the proportion of offences committed by this new cohort that may be linked to powder cocaine use, in particular public order offences and wounding or assault and this will be discussed further in the report.

**Recommendation:** Traditionally powder cocaine has not been the focus of DIP due to the lack of evidence connecting it to acquisitive crime. As powder cocaine using clients are beginning to make up greater proportions of clients assessed through DIP teams need to continue to assess the success of attempts to engage this group of clients. In particular they may wish to examine the outcomes achieved with these clients and whether engagement is cost effective. Previous research on DIP clients suggests that a greater proportion of clients who present with cocaine use do not require further intervention through DIP than those who do go on to the DIP caseload (Howarth and Duffy, 2009) If such clients are assessed as being unsuitable for DIP then a clear referral route should be considered, particularly as the actual proportion of clients from the powder cocaine group is quite high.

## Age

There continues to be a clear difference between the two groups in terms of age profile with the nearly half of the powder cocaine group tending to be between 18 and 24 years old and the greatest proportion of the PDU drug group being over 35 years old. These findings are very similar to those from the 08/09 report as well as other research undertaken in Merseyside (Cuddy & Duffy, 2008), the UK (Hoare & Moon, 2010) and Europe (EMCDDA,2009) that demonstrated that under 25 year olds are much more likely to use powder cocaine than their older counterparts.

**Recommendation:** It is important for all areas to continue to understand the age profile of each of these two drug groups in order to provide appropriate services for clients when they present for treatment. This is particularly the case for the large proportion of clients from the powder cocaine group who are under 25 years old and could potentially engage with DIP. Systems should be in place to channel such clients into more appropriate treatment which may need to be different to the treatment provision for the older PDU and non-PDU clients. It is important to take into account the drivers for use among this younger cohort as these may be the key to behaviour change rather simply focusing on their cocaine use.

## Gender

Across all areas in Merseyside clients from the powder cocaine using group continued to be more likely to be male than their PDU counterparts and this was more evident in Liverpool (91.7%) than any of the other areas. These findings also correspond to other recent reports (Hoare, 2009; EMCDDA, 2008a).

**Recommendation:** The DIP teams in Merseyside should continue to be aware that clients accessing services due to their powder cocaine use are more likely to be male than female and would be to a greater extent than is the case among PDU clients. Whilst services must be designed with this gender split in mind it is still important to encourage females from both drug groups to attend treatment and prevent services becoming male dominated which may discourage females from attending. A balance must continue to be struck and provisions made for female clients who may wish to attend at different times to their male counterparts or may not wish to take part in group work sessions that are male dominated.

## Drug Use

In 09/10 similar trends have emerged between the two drug groups with regards to patterns of drug use during the month prior to assessment compared to the cohort in 08/09. The powder cocaine group continued to mainly use the drug on a weekly or monthly basis

but daily use did occur but on a much smaller scale. Liverpool reported having the greatest proportion of clients who used the drug on a daily basis (8.3%), Knowsley had the greatest proportion of clients who had used the drug on a weekly basis (32.3%) and Sefton who had the greatest proportion of clients who had used the drug on a monthly basis (72.2%). There continues to be a substantial minority from all areas that used cannabis, most often on a daily basis, but there was also a slight overall reduction (2.9%) in the proportion of those who use of this drug daily compared to the cohort in the 08/09 report. Clients from the PDU drug group continued to be more likely to use heroin than crack and tended to use both mainly on a daily basis. Although this higher frequency of use suggests that the drug use of this group was more problematic than that of the powder cocaine group outlined previously, there seems to have been a decrease in the frequency of heroin and crack use when compared to the cohort from the previous year. This was particularly the case for crack and clients from Wirral reported the greatest decrease in the proportion of daily use of crack over the two years which decreased from 27.6% in the cohort from 08/09 to 9.3% in 09/10. The greatest reduction of daily heroin use was reported in Liverpool which decreased by 10.6% over the two years. The key factor in the reduction of these two drugs could be linked to such a considerable reduction in crack use which as a result caused a decline in both drugs being reported in 09/10. In all five areas relatively small proportions of PDU continued to report also using powder cocaine.

**Recommendation:** The reduction in frequency of drug use of powder cocaine, crack, heroin and cannabis suggests that the clients who came into contact with DIP in 09/10 may have had slightly less chaotic patterns of drug use than the cohort from the previous year. As most of the clients in the powder cocaine group tended to have used powder cocaine on a monthly basis it still implies that use had not reached problematic levels. For the proportion of the clients who use daily cannabis, it should still be considered whether this frequency of use is an issue for such clients, and if so this should be addressed in treatment interventions. As large proportions of PDU clients still demonstrate stimulant use, services will still need to maintain a focus on the complex issues presented by concurrent opiate and stimulant use.

### **Weekly Spend on Drugs**

As with the cohort from 2008/9, powder cocaine using clients in 09/10 continued to spend considerably less on drugs per week than their PDU counterparts. However the PDU group in 09/10 reported spending less on drugs than the cohort in 08/09 which contributed to a 12%

increase in the proportion of those who reported spending up to £50 a week on drugs (45.9%).

**Recommendation:**

Low expenditure levels demonstrated in both 08/09 and 09/10 combined with less frequent use among the 09/10 cohort than the 08/09 group, would suggest that powder cocaine using clients remain unlikely to need to commit crime specifically to fund their cocaine use. As outlined from the 08/09 report treatment may not have an impact on their offending rate as the links between cocaine use and acquisitive crime or indeed violent crime are still not clear. Other factors are likely to still play as significant a role as drug use in clients' offending and these will still need to be considered as fully as their drug use. Whether a drug treatment programme delivered as part of the DIP process is the most appropriate location for these additional factors to be addressed should continue to be considered and the use of alternative points of referral investigated.

**Drug Treatment**

A large proportion of PDU in Merseyside reported to have previously been in treatment within the last two years (79.0%) as well as currently being in treatment at the time of their assessment (56.7%) in 09/10. Such proportions highlight an increase for this group from the cohort in the 08/09 report with 75.4% and 48.1% respectively being recorded for the cohort of PDUs in that year. PDU from Wirral were more likely to be in treatment compared to any of the other Merseyside areas. The proportion of clients from the powder cocaine group who had either received treatment within the last two years or were currently receiving treatment remained very low in 09/10. Wirral resident powder cocaine users assessed were more likely to have had treatment in the past (18.5%) or be in treatment currently (2.9%) than clients in any other area. This may be due to more established services for cocaine being available to clients in this area of Merseyside.

**Recommendation:** Where clients who are currently in treatment are offending again and returning to DIP due to this, each area needs to establish a process to ensure that the client's current treatment provider is notified of this so that appropriate action can be taken whether that be changes to their care plan with the existing provider, a transfer to DIP or another response.

**Recommendation:** In general there was a low level of clients from the powder cocaine group who had previously been in treatment in 09/10. However, it is still important for service providers to be aware that individuals from this group may still be suitable for DIP and if so services may need to consider that such clients would not have experienced

treatment before and may have pre conceived ideas about services that could act as a barrier to engagement. Unlike PDU they are not likely to be familiar with the process around DIP, they may not wish to access a service with PDU and they will have little concept of what the treatment might involve and how this treatment is tailored for the client. All of these issues should be considered when deciding how to initially engage with these potential clients and when designing a service for them.

### **Injecting Status**

As expected, PDU clients were again more likely to inject compared to their powder cocaine using counterparts in 09/10. Wirral reported the highest proportion of clients who had previously injected (45.6%) and St Helens reported the highest proportion of clients who were currently injecting (21.7%). In contrast the majority of the powder cocaine group (96.4%) in Merseyside reported never having injected in 09/10.

**Recommendation:** The harms of injecting are well documented and although clients from the powder cocaine group indicated low levels of current injecting, a greater proportion had reported having previously injected. This suggests there is potential for these clients to contract Hepatitis C or other blood borne infections related to injecting and these risks should not be ignored. Such clients should be encouraged to get screened for these viruses with information about these procedures being highly visible in drug treatment services.

### **Sharing Equipment**

Overall in Merseyside the proportion of PDU increased for those who had ever shared their equipment in 2009/10 (20.6%) compared to the cohort in 2008/09 (16.7%) but decreased for those who reported sharing their equipment in the last month (4.4% and 6.6% respectively). Clients from the powder cocaine group reported an increase in the proportions of having ever shared equipment in 09/10 (21.4%) and the cohort in 08/09 (11.2%) as well as an increase in the proportion of clients who reported sharing their equipment in the last month from the two cohorts (14.5% and 7.6% respectively). In 09/10 Merseyside residents from the powder cocaine using group (21.4%) were slightly more likely to have ever shared their drug using equipment compared to the PDU group (20.6%). Powder cocaine users assessed by DIP in St Helens' reported the highest proportion of clients who had ever shared their equipment (33.3%). In addition, reports of equipment sharing in the last month within Merseyside were more common among the powder cocaine group (14.5%) than the PDU group (4.4%); again clients in the powder cocaine group in St Helens reported the highest proportion (27.9%). This highlights a difference in the proportion of clients who have

ever shared equipment and those who have shared equipment in the last month for each of the two drug groups. The greatest difference in Merseyside was reported from clients in the PDU group (16.2%) compared to clients from the powder cocaine group (6.9%). It is worth noting that Knowsley residents from the powder cocaine using group did report the greatest difference in the proportions between ever shared equipment and having shared their equipment in the last month (12.1%) and an even greater difference in the proportion from their PDU group (22.1%). These reductions between proportions of clients who have ever shared their equipment and those currently sharing may suggest that harm reduction messages are continuing to have some impact in these two groups, in particular those from the PDU group. With regards to clients in the powder cocaine group, a lack of harm reduction information regarding the link between snorting equipment and blood borne viruses' means there is a lack of clarity for clients in this group around the dangers of use of such equipment. In addition to this recent clarification from the Home Office has indicated that equipment sharing in this question should only refer to injecting equipment, so in future figures will look much different to those currently as the sharing of snorting equipment will not be included.

**Recommendation:** DIP staff need to ensure that they interpret this section of the DIR form to just include injecting equipment.

**Recommendation:** Whilst the risks are currently theoretical it would make sense for teams to ensure that the powder cocaine using clients they see are aware of the potential risk that sharing bank notes and other snorting equipment may bring, particularly as high proportions of clients have reported having shared their equipment in the month prior to their DIP assessment.

### **Alcohol Consumption**

In 09/10, even though a greater proportion of the powder cocaine group still reported high drinking levels compared to the PDU group and relatively high proportions of PDU clients in all areas reported never drinking, those who did drink from the PDU group were much more likely than their powder cocaine using counterparts to "binge drink" on a daily basis potentially indicating problematic alcohol use which could also indicate dependency. This was particularly the case for PDU from St Helens, Liverpool and Wirral. The greatest proportion of "binge drinking" by the powder cocaine group was on a weekly basis which could be detrimental to their health. The greatest proportions of "binge drinking" on this scale were reported in St Helens, Wirral and Knowsley. Such trends with alcohol consumption are similar to those previously reported (NTA, 2010).

**Recommendation:** Service providers need to ensure that they have services in place to address potentially problematic drinking among some PDU and if necessary “binge drinking” among the powder cocaine using group if such clients become engaged in treatment. Problematic drinking could become a substantial barrier to delivering treatment for illicit drug use and workers must have necessary skills to address this or have access to appropriate resources outside the team.

### **Offences Committed**

The powder cocaine group were most likely to have been arrested for Misuse of Drugs Act (MDA) offences but also for public order offences, wounding or assault and theft – car. Generally the offences reported by the powder cocaine group in 09/10 were similar to those from 08/09 however the proportions of clients reporting having committed public order offences increased from 5.6% in 08/09 to 12.0% in 09/10. MDA offences, public order offences and wounding or assault suggest a link with the night time economy as perhaps would be expected given previous research regarding the prevalence of cocaine use among people in bars and clubs (Hoare, 2009; Gossop et al, 2006). As in 08/09 the PDU group remained most likely to have been arrested for shoplifting in 09/10. In addition to this offence, clients also committed other common offences which were all acquisitive apart from the MDA offences and this overall pattern suggests that such clients were offending to fund their drug use.

**Recommendation:** DIP staff need to continue to be aware that these two groups of clients may have different motivating factors for committing crime. These need to continuously be considered and discussed with the client in order to make sure that their specific needs can be catered for and negative impacts for them and the community are reduced. The motivation behind offending among the powder cocaine group is not yet clear and further investigation of the role of cocaine in their offending is required.

### **Employment Status**

In 09/10, as was the case from the cohort in 08/09, Merseyside clients from the powder cocaine group and the PDU group presented with very different employment profiles. This included clients from the powder cocaine group in 09/10 reporting a much higher level of employment (41.9%) compared to the PDU group (3.5%) and the PDU group reporting a much greater proportion of clients who were unemployed (70.1%) compared to clients from the powder cocaine group (47.4%). This highlights that a substantial proportion of clients from the powder cocaine group may also be unemployed as well as employed. St Helens



reported the highest employment rate within the powder cocaine group with Liverpool having the highest unemployment rate among this group.

**Recommendation:** It remains important that treatment services cater for those in regular employment as well as those who are unemployed. This includes services being available outside of the normal working day (9am-5pm), in particular to allow powder cocaine users who are in full time employment to have access to treatment if necessary.

Previous analysis from the 2008/09 report revealed two relatively distinct client profiles between powder cocaine users and PDU. These two groups are still very much evident from the 2009/10 analysis and whilst every client has a unique set of characteristics a typical client from each group is outlined below:

The typical powder cocaine user:

- is a white male on most occasions
- is aged mainly between 18 and 24 years old
- mainly uses powder cocaine only and on a monthly or weekly basis, may also use cannabis on a daily basis
- is likely to spend under £50 a week on drugs
- is unlikely to have had treatment for drug use within the last two years or be receiving treatment currently
- is unlikely to have previously injected but may have previously shared their drug taking equipment and if so are likely to still be doing so.
- is very likely to drink alcohol on a weekly or monthly basis which can be at weekly or daily “binge drinking” levels
- is most likely to be arrested for MDA offences but may be arrested for wounding or assault, theft – car and/or public order offences
- is in settled accommodation and as likely to be unemployed as employed

A typical PDU:

- is a white male on most occasions
- is aged between 30 and 44 years old
- mainly uses heroin and crack on a daily basis but in some cases may also use powder cocaine, illicit methadone, cannabis and benzodiazepines
- can spend more than £100 a week on drugs but is more likely to spend less than this
- is likely to have received treatment for their drug use in the last two years but slightly less likely to currently be receiving treatment

- is as likely to have injected in the past as not, but is unlikely to currently be injecting.
- is unlikely to have, but may have shared drug taking equipment in the past but is very unlikely to currently be doing so
- is quite likely, if they drink, to do so on a daily basis, at potentially problematic levels
- is likely to be arrested for shoplifting
- is most likely in settled accommodation
- is very likely to be unemployed

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