

House of Commons

Northern Ireland Affairs

Committee

The Illegal Drugs Trade and Drug Culture in Northern Ireland: Interim Report on Cannabis

Sixth Report of Session 2002–03

Volume I



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Report, together with formal minutes

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The Northern Ireland Affairs Committee

The Northern Ireland Affairs is appointed by the House of Commons to examine the expenditure, administration, and policy of the Northern Ireland Office (but excluding individual cases and advice given by the Crown Solicitor); and other matters within the responsibilities of the Secretary of State for Northern Ireland (but excluding the expenditure, administration and policy of the Office of the Director of Public Prosecutions, Northern Ireland and the drafting of legislation by the Office of the Legislative Counsel).

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A list of Reports of the Committee in the present Parliament is at the back of this volume.

Committee staff

The current staff of the Committee are Elizabeth Hunt (Clerk), Tony Catinella (Committee Assistant), Camilla Brace (Secretary).

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1 Introduction

- 1. The situation in Northern Ireland in relation to drugs has developed more slowly than that in Great Britain. For many years, a variety of cultural and historical factors enabled Northern Ireland to resist the blandishments of the drugs trade. It was only in the 1990s—following the arrival of ecstasy—that Northern Ireland was recognised as having a definable drug culture. Even today, the drug of choice for the majority of drug users in Northern Ireland remains cannabis, rather than the class A drugs such as heroin, cocaine and/or crack cocaine which are increasingly prevalent in parts of Great Britain.
- 2. The fact that cannabis remains the drug of choice in Northern Ireland is the reason for this interim report. While we have not yet finished taking oral evidence, we have received a considerable amount of information relevant to the debate on cannabis which we believe should be available to the House when it comes to consider the Government's proposal to reclassify the drug.
- 3. The drugs trade is, of course, a sensitive issue and we have been given some information in confidence. Consequently we are unable to report some of the information we have received. We are grateful to all who have helped us, formally and informally, with our inquiry since it began in January. We are publishing the formal evidence we have received to date in a separate volume, together with memoranda we have received.

2 The proposed reclassification of cannabis

- 4. The Government first took steps towards the reclassification of cannabis in October 2001. Following recommendations from the Advisory Council for the Misuse of Drugs (ACMD) and the Home Affairs Committee, the Home Secretary confirmed in July 2002 that cannabis would be reclassified under the Misuse of Drugs Act 1971 from Class B to Class C, by July 2003.
- 5. All controlled drugs are controlled because they are harmful. Within the controlled group, drugs are classified under the 1971 Act according to their relative harmfulness: those in Class A—such as heroin and cocaine—are the most harmful. Cannabis is currently classified as a Class B drug. The ACMD's recommendation was that the classification of cannabis was "disproportionate in relation both to its inherent toxicity, and to that of other substances (such as amphetamines) that are currently within Class B". The classification should therefore be changed to Class C.¹
- 6. To this argument the Government added others. Home Office Minister Bob Ainsworth MP told the Home Affairs Committee that exaggerating the toxicity of cannabis to young people damaged the credibility of the wider message concerning the dangers of controlled drugs. Reclassification of cannabis to Class C would also mean that possession of cannabis

¹ The Government Reply to the Third Report from the Home Affairs Committee Session 2001–2002, The Government's Drugs Policy: Is It Working?, Cm 5573 p3

would cease to be an arrestable offence. Consequently, police forces would be able to "direct ... resources a little more towards Class A drugs where the most damage was being done".²

7. We recognise the arguments for sending a clear and credible message to young people about the harmfulness of controlled drugs. We also acknowledge that there is in Great Britain a serious problem with Class A drugs, and a concentration of police resources upon that problem will be widely welcomed. Nonetheless, it should be remembered that the change in the classification of cannabis will affect the whole of the United Kingdom. Our concern here is to highlight the ways in which Northern Ireland's experience differs from Great Britain's, and to draw attention to the possible consequences of reclassification in that context.

3 Cannabis use in Northern Ireland

8. Since the early 1990s a number of surveys have testified to the prevalence of cannabis use in Northern Ireland relative to other drugs. The 1998 Northern Ireland Crime Survey established that 18% of respondents aged 16–59 had taken cannabis at some point. A survey of young people (aged 16–25) in 2000 produced an equivalent figure of 33%.³ Evidence pointing to the widespread availability of cannabis is provided by police statistics. The Police Service of Northern Ireland (PSNI) told us that cannabis accounted for 66% of all seizures of controlled drugs in 2001. The second most seized drug in Northern Ireland—ecstasy—accounted for only 16%. While the street prices for a number of drugs in Belfast are reported to have fallen in recent times, only cannabis had a street price (£60–70/oz) which was broadly comparable with prices on the mainland in April 2002.⁴

9. Opinions as to the significance of these facts will inevitably be divided. We recognise that there are many who will not find the widespread use of cannabis exceptionable. While the 'gateway' theory—that use of cannabis encourages experimentation with, and addiction to, more harmful drugs—has been widely discussed, we have been told that research has failed to establish a link.⁵ Community workers dealing with problematic drug use by individuals in Belfast and Ballymena told us that their over-riding concern was with the high-risk behaviour of injecting heroin addicts, who thus exposed themselves to blood-borne viruses such as HIV and Hepatitis C. By comparison, the use of cannabis generally caused less harm and only rarely led individuals into formal treatment programmes.⁶

10. Equally, however, some have expressed concerns about the effects of cannabis. Mr Mark Gordon, a community worker from Kilcooley Community Forum, agreed with his colleagues that cannabis use did not automatically lead to drug addiction, but reported that an increasing number of young people admitted to psychiatric care for drug induced

² Third Report from the Home Affairs Committee, The Government's Drugs Policy: Is it Working?, HC318–I (2001–02) Paras 117–122; Q1234.

³ Appendix 4 paras 37-39

⁴ Memorandum printed with oral evidence taken on 12 February 2003

⁵ The theory is also discussed in the Home Affairs Committee's Third Report, The Government's Drugs Policy: Is it Working?, HC318–I (2001–02) Paras 100–105

⁶ See in particular QQ195–199

psychosis attributed their problems to cannabis. Dr Don MacFarlane confirmed that cannabis psychosis was an increasing problem, particularly among young males, while Dr Dominic Connolly told us that users heavily dependent on cannabis often experienced depression and became reclusive. Although the long-term effects of cannabis use remain unproven, it was suggested to us elsewhere that the likelihood of long term effects may be increased where users fail to take account of the fact that cannabis today tends to be a much purer and stronger drug than the cannabis associated with the hippie culture of the 1960s.

11. The arguments about the harmfulness of cannabis are universal, and are unlikely to be finally resolved for some time to come. More important, in view of the apparently greater acceptance and use of cannabis than other drugs in Northern Ireland, is the effect which reclassification may have upon the market in terms of demand and supply.

Demand and supply

- 12. Statistics such as street price and numbers of seizures (cited in paragraph 8 above) are indicative both of supply and demand. The same survey which, in 2000, found that a third of young people in Northern Ireland had tried cannabis also found that nearly two thirds (62%) of young people thought that they could obtain the drug very or fairly easily.⁸ It seems highly probable that the reclassification of cannabis will confirm young people in the belief, already prevalent,⁹ that cannabis use is mostly harmless, and socially acceptable. It would be surprising if, when people feel able to use cannabis more freely and openly—and particularly if people mistakenly believe it to be legal—use does not grow. If it grows, the market will find ways to meet the increased demand.
- 13. The Government has already anticipated that drug traffickers may seek to increase the supply of cannabis. It has taken steps to address the problem by increasing the maximum penalty for supply of Class C drugs from 5 years to 14 years. Nonetheless we are aware that the Police Service of Northern Ireland continues to be concerned about the market in cannabis. In spite of the new deterrent provided by the increased penalty for supply, we believe that the consequences of reclassification may prove challenging for the enforcement agencies in Northern Ireland.
- 14. The drugs market in Northern Ireland is supplied by both individuals and criminal gangs. The most frequently used routes of supply are from the Netherlands and Spain via Great Britain and/or the Republic of Ireland.¹⁰ The methods used by traffickers are many and varied, and the size of consignments—particularly in the case of cannabis—can vary from a few ounces carried by a person through an airport to tons concealed in a vehicle.¹¹ Those involved in the drugs trade are increasingly likely to treat drugs as a commodity like any other, and to combine drug trafficking with other trades, both legal—such as food imports—and illegal—such as the smuggling of alcohol and tobacco.

⁷ Q201; Q292; Q297

⁸ Appendix 4 para 84

⁹ QQ34; 207

¹⁰ Q147

¹¹ Q107

The involvement of organised crime

15. What is special and worrying for Northern Ireland is the problem faced from serious and organised criminal gangs. The scale and nature of the problem, which is linked to terrorism, is unique within the United Kingdom.

16. The Organised Crime Threat Assessment for 2002 estimated that "nearly half" of the gangs identified in Northern Ireland continued to be "associated with or controlled by" paramilitary organisations. While paramilitary groups on both sides of the community divide distance themselves publicly from the drugs trade there is little doubt that paramilitary organisations and individuals within them are willing to sanction drugs trading by their affiliates, or in areas they consider their own, provided they can profit from it directly or indirectly. ¹³

17. In this context, any increase in demand for cannabis in Northern Ireland is likely to be seized upon by serious, organised and possibly paramilitary gangs as an easy means to profit. The profits, in turn, may be used not only to fund lavish criminal lifestyles but also to finance the development of a Northern Ireland market in hard drugs such as heroin, and to sustain paramilitary organisations.¹⁴

The problem of enforcement

18. While intelligence-led policing has led to some notable successes in tackling the drugs trade in recent years, the task faced by police and Customs in dealing with determined and experienced criminals should not be underestimated. As the Northern Ireland Office acknowledges, those criminals who have connections with the paramilitary organisations, in particular, are able to call upon many years of experience in avoiding detection.¹⁵ The situation is further complicated by the presence of a land border with over 300 crossing points, and the continuing difficulties of policing in the border area.¹⁶

19. All of the UK enforcement authorities—both local police forces and national organisations such as HM Customs & Excise—are set priorities for their allocation of resources. The reclassification of cannabis, although it may be logical from the point of view of harm to the user, poses problems for enforcement. The Minister, addressing the Home Affairs Committee, made it clear that the change provided a useful opportunity to focus police attention more closely on Class A drugs (see paragraph 6 above); HMCE's national priorities are Class A drugs, tobacco smuggling and oils fraud.¹⁷ By comparison, a Class C drug must come some way down the line. While we have been assured of the authorities' full commitment to tackling the problem of cannabis in Northern Ireland, we

¹² The Threat: Assessment 2002, the Organised Crime Task Force, p2

¹³ See, for example, The Financing of Terrorism in Northern Ireland, Fourth Report by the Committee Session 2001–02 HC978–I paragraph 37; Appendix 4 paragraphs 47–49; "Drink, Drugs and Rock'n'Roll: Financing Loyalist Terrorism in Northern Ireland – Part Two", Andrew Silke, Studies in Conflict and Terrorism 23: 107–127, 2000; "Young 'foot soldiers' face double murder threat as Mad Dog's henchmen flee to Spanish village", Newsletter, 5 February 2003

¹⁴ Q126

¹⁵ Appendix 4 paragraph 49

¹⁶ Northern Ireland Affairs Committee Fourth Report 2001–02, The Financing of Terrorism in Northern Ireland, HC 978; First Report 2002–03, Impact in Northern Ireland of Cross-Border Road Fuel Price Differentials: Three Years On HC 105

¹⁷ Q40

can foresee that the dedication of resources to cannabis will become increasingly difficult to justify in the face of national priorities, and national policy.

- 20. The international dimension must also be considered. The drugs trade operates across, and exploits, boundaries. International co-operation between enforcement agencies is therefore highly important and, we are told, is currently very good. We would be very concerned if requests for international assistance from Northern Ireland's enforcement agencies, in respect of the cannabis trade, were to lose credibility because national policy dictates that other drugs take priority.
- 21. We do not question the arguments for the reclassification of cannabis, in terms of its relative standing in the schedule of controlled drugs under the Misuse of Drugs Act 1971. However, it is essential that the Government recognises the message sent by the reclassification, not only to the individual user but also to the drug trafficker and to enforcement agencies nationally and internationally.
- 22. Cannabis remains overwhelmingly the most widely available controlled drug in Northern Ireland. The demand for it is exploited by organised criminals and paramilitaries who use the profits from the trade to sustain their other criminal activities. While we welcome the increase in the penalty for supply of Class C drugs, it is unlikely that this action alone will be a sufficient counterbalance to the opportunities for extending criminal activity which the reclassification may provide.
- 23. Northern Ireland is different from Great Britain, both in its choice of controlled drugs and in the problems associated with its drugs trade. It has a relatively small population and at present it does not have a large scale of hard drug abuse. The Government must keep this in mind and monitor closely what happens in Northern Ireland following the reclassification of cannabis. We call on the Government to reaffirm, clearly and publicly, that the supply of cannabis remains a high priority for law enforcement in Northern Ireland. It must support the enforcement authorities fully in tackling this trade.

Other issues

Education

24. It is, of course, as important to manage demand as it is to tackle supply. Although the Government made a commitment in its response to the Home Affairs Committee to launch a campaign to educate the public about the reclassification of cannabis, ¹⁸ there is considerable confusion over its new status. We have been told, on more than one occasion, that cannabis is now being smoked openly on the streets, and in pubs and clubs in Northern Ireland. ¹⁹ Medical practitioners Dr C E Cassidy and Dr Dominic Connolly told us that they had encountered the perception that cannabis is legal amongst users, and that it had made the task of counselling and treating such individuals more difficult. ²⁰

¹⁸ The Government Reply to the Third Report from the Home Affairs Committee Session 2001–2002, The Government's Drugs Policy: Is It Working?, Cm 5573 p14

¹⁹ See for example Q208

²⁰ O287

25. Rob Phipps of the Health Promotion Agency told us that the Agency was planning to issue a leaflet to the general public "informing them of the changes but also again of the actual dangers associated with cannabis", following the expected change in its status.²¹ In view of the evidence we have received, clarification would seem to be urgently needed. It is essential that such information is made widely available to the general public, but particularly to parents, schools and all those working with young people. The Government, and the Northern Ireland Executive, must intensify their efforts to communicate the fact that the use of cannabis remains illegal, and harmful.

Drug driving

26. One example of the ways in which cannabis can be harmful is found in the link between the use of drugs, and driving offences. The police do not currently have specialised equipment to conduct roadside tests for drugs, as they do for alcohol, when an individual is stopped for erratic driving. However, Assistant Chief Constable Albiston of the Police Service of Northern Ireland told us that additional blood tests were carried out in about 150 of the 1200 cases handled by the PSNI in 2002, because drug use was suspected. Of these 150, over two thirds tested positive for drugs, in the majority of cases cannabis.²²

- 27. There were 56 deaths on Northern Ireland's roads in the first four months of this year.²³ From the evidence presented by ACC Albiston there would appear to be a strong possibility that some of these accidents may have been influenced by cannabis.
- 28. The NIO has recently proposed that the maximum penalty for driving while under the influence of drink or drugs should be increased from 10 to 14 years. We welcome this proposal. We note that research into the techniques for testing field impairment—whether a driver is unfit to drive because of the influence of drugs—is due to conclude shortly.²⁴ We urge the Government to implement any recommendations arising from this research as soon as possible.

²¹ Q36

²² QQ171-172

²³ www.psni.police.uk/stats/fatalities.shtml

²⁴ The Government Reply to the Third Report from the Home Affairs Committee Session 2001–2002, The Government's Drugs Policy: Is It Working?, Cm 5573 pp 11–12

Conclusions and recommendations

- 1. We do not question the arguments for the reclassification of cannabis, in terms of its relative standing in the schedule of controlled drugs under the Misuse of Drugs Act 1971. However, it is essential that the Government recognises the message sent by the reclassification, not only to the individual user but also to the drug trafficker and to enforcement agencies nationally and internationally. (Paragraph 21)
- 2. Cannabis remains overwhelmingly the most widely available controlled drug in Northern Ireland. The demand for it is exploited by organised criminals and paramilitaries who use the profits from the trade to sustain their other criminal activities. While we welcome the increase in the penalty for supply of Class C drugs, it is unlikely that this action alone will be a sufficient counterbalance to the opportunities for extending criminal activity which the reclassification may provide. (Paragraph 22)
- 3. Northern Ireland is different from Great Britain, both in its choice of controlled drugs and in the problems associated with its drugs trade. It has a relatively small population and at present it does not have a large scale of hard drug abuse. The Government must keep this in mind and monitor closely what happens in Northern Ireland following the reclassification of cannabis. We call on the Government to reaffirm, clearly and publicly, that the supply of cannabis remains a high priority for law enforcement in Northern Ireland. It must support the enforcement authorities fully in tackling this trade. (Paragraph 23)
- 4. The Government, and the Northern Ireland Executive, must intensify their efforts to communicate the fact that the use of cannabis remains illegal, and harmful. (Paragraph 25)
- 5. The NIO has recently proposed that the maximum penalty for driving while under the influence of drink or drugs should be increased from 10 to 14 years. We welcome this proposal. We note that research into the techniques for testing field impairment—whether a driver is unfit to drive because of the influence of drugs—is due to conclude shortly. We urge the Government to implement any recommendations arising from this research as soon as possible. (Paragraph 28)

Formal minutes

Wednesday 7 May 2003

Members present:

Mr Michael Mates, in the Chair

Mr Harry Barnes Rev Martin Smyth
Mr Roy Beggs Mr Hugo Swire
Mr Tony Clarke Mr Mark Tami

The Committee deliberated.

Draft Report (The Illegal Drugs Trade and Drug Culture in Northern Ireland: Interim Report on Cannabis), proposed by the Chairman, brought up and read.

Ordered, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 28 read and agreed to.

Resolved, That the Report be the Sixth Report of the Committee to the House.

Ordered, That the Chairman do make the Report to the House.

Ordered, That the provisions of Standing Order 134 (Select Committees (reports)) be applied to the Report.—(*The Chairman*)

Several papers were ordered to be appended to the Minutes of Evidence.

Ordered, That the Appendices to the Minutes of Evidence taken before the Committee be reported to the House.—(*The Chairman*)

[Adjourned till Wednesday 21 May at 3.15 pm