Powder Cocaine and Problematic Drug Users: A comparative study of the characteristics of DIP clients in Merseyside (April 08 - March 09)

Petra Howarth Paul Duffy



Drug Interventions Programme Monitoring and Research Team

Centre for Public Health

Research Directorate

Faculty of Health and Applied Social Sciences

Liverpool John Moores University

Castle House

North Street

Liverpool L3 2AY

t: 0151 231 4544

f: 0151 231 4515

e: p.howarth@ljmu.ac.uk

www.cph.org.uk/dip





Contents

Tables	2
Figures	4
1.0 Introduction	7
2.0 Methodology	10
3.0 Knowsley	12
3.1 Knowsley Summary	22
4.0 Liverpool	24
4.1 Liverpool Summary	34
5.0 Sefton	36
5.1 Sefton Summary	46
6.0 St Helens	48
6.1 St Helens Summary	58
7.0 Wirral	60
7.1 Wirral Summary	70
8.0 Merseyside	72
8.1 Merseyside Summary	82
9.0 Conclusions and Recommendations	84
10.0 References	90

TABLES

Knowsley	
Table K1: Knowsley Residents - Ethnic background (Apr 08 – Mar 09)	12
Table K2: Knowsley Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	14
Table K3: Knowsley Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	15
Table K4: Knowsley Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	20
Table K5: Knowsley Residents - Employment status (Apr 08 – Mar 09)	21
Liverpool	
Table L1: Liverpool Residents - Ethnic background (Apr 08 – Mar 09)	24
Table L2: Liverpool Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	26
Table L3: Liverpool Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	27
Table L4: Liverpool Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	32
Table L5: Liverpool Residents - Employment status (Apr 08 – Mar 09)	33
Sefton	
Table S1: Sefton Residents - Ethnic background (Apr 08 – Mar 09)	36
Table S2: Sefton Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	38
Table S3: Sefton Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	39
Table S4: Sefton Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	44
Table S5: Sefton Residents - Employment status (Apr 08 – Mar 09)	45
St Helens	
Table ST1: St Helens Residents - Ethnic background (Apr 08 – Mar09)	48
Table ST2: St Helens Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	50
Table ST3: St Helens Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	51
Table ST4: St Helens Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	56
Table ST5: St Helens Residents - Employment status (Apr 08 – Mar 09)	57

Wirral

Table W1: Wirral Residents - Ethnic background (Apr 08 – Mar 09)	60
Table W2: Wirral Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	62
Table W3: Wirral Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	63
Table W4: Wirral Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	68
Table W5: Wirral Residents - Employment status (Apr 08 – Mar 09)	69
Merseyside	
Table M1: Merseyside Residents - Ethnic background (Apr 08 – Mar 09)	72
Table M2: Merseyside Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)	74
Table M3: Merseyside Residents - Drugs used by the PDU group (Apr 08 – Mar 09)	75
Table M4: Merseyside Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)	80
Table M5: Mersevside Residents - Employment status DIP (Apr 08 – Mar 09)	81

FIGURES

Fig K1: Knowsley Residents – Drug groups (Apr 08 – Mar 09)	12
Fig K2: Knowsley Residents – Age (Apr 08 – Mar 09)	13
Fig K3: Knowsley Residents – Gender (Apr 08 – Mar 09)	14
Fig K4: Knowsley Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	15
Fig K5: Knowsley Residents – Drug Treatment (Apr 08 – Mar 09)	16
Fig K6: Knowsley Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	17
Fig K7: Knowsley Residents – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	18
Fig K8: Knowsley Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	19
Fig K9: Knowsley Residents –Accommodation (Apr 08 – Mar 09)	21
Liverpool	
Fig L1: Liverpool Residents – Drug groups (Apr 08 – Mar 09)	24
Fig L2: Liverpool Residents – Age (Apr 08 – Mar 09)	25
Fig L3: Liverpool Residents – Gender (Apr 08 – Mar 09)	26
Fig L4: Liverpool Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	27
Fig L5: Liverpool Residents – Drug Treatment (Apr 08 – Mar 09)	28
Fig L6: Liverpool Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	29
Fig L7: Liverpool Residents – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	30
Fig L8: Liverpool Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	31
Fig L9: Liverpool Residents – Accommodation (Apr 08 – Mar 09)	33

Sefton

Fig S1: Sefton Residents – Drug groups (Apr 08 – Mar 09)	36
Fig S2: Sefton Residents – Age (Apr 08 – Mar 09)	37
Fig S3: Sefton Residents – Gender (Apr 08 – Mar 09)	38
Fig S4: Sefton Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	39
Fig S5: Sefton Residents – Drug Treatment (Apr 08 – Mar 09)	40
Fig S6: Sefton Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	41
Fig S7: Sefton Residents – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	42
Fig S8: Sefton Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	43
Fig S9: Sefton Residents – Accommodation (Apr 08 – Mar 09)	45
St Helens	
Fig ST1: St Helens Residents – Drug groups (Apr 08 – Mar 09)	48
Fig ST2: St Helens Residents – Age (Apr 08 – Mar 09)	49
Fig ST3: St Helens Residents – Gender (Apr 08 – Mar 09)	50
Fig ST4: St Helens Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	51
Fig ST5: St Helens Residents – Drug Treatment (Apr 08 – Mar 09)	52
Fig ST6: St Helens Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	53
Fig ST7: St Helens Residents – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	54
Fig ST8: St Helens Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	55
Fig. ST9: St Helens Residents – Accommodation (Apr. 08 – Mar. 09)	56

Wirral	
Fig W1: Wirral Residents – Drug groups (Apr 08 – Mar 09)	60
Fig W2: Wirral Residents – Age (Apr 08 – Mar 09)	61
Fig W3: Wirral Residents – Gender (Apr 08 – Mar 09)	62
Fig W4: Wirral Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	63
Fig W5: Wirral Residents – Drug Treatment (Apr 08 – Mar 09)	64
Fig W6: Wirral Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	65
Fig W7: Wirral Assessments – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	66
Fig W8: Wirral Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	67
Fig W9: Wirral Residents – Accommodation (Apr 08 – Mar 09)	69
Merseyside	
Fig M1: Merseyside Residents – Drug groups (Apr 08 – Mar 09)	72
Fig M2: Merseyside Residents – Age (Apr 08 – Mar 09)	73
Fig M3: Merseyside Residents – Gender (Apr 08 – Mar 09)	74
Fig M4: Merseyside Residents – Weekly Spend on Drugs (Apr 08 – Mar 09)	75
Fig M5: Merseyside Residents – Drug Treatment (Apr 08 – Mar 09)	76
Fig M6: Merseyside Residents – Injecting and Sharing Equipment (Apr 08 – Mar 09)	77
Fig M7: Merseyside Residents – How often client has drank alcohol in the last month	
(Apr 08 – Mar 09)	78
Fig M8: Merseyside Residents – How often in the last month did clients drink the following	
units of alcohol on one session (Females: 6 or more, Males: 8 or more) (Apr 08 – Mar 09)	79
Fig M9: Merseyside Residents – Accommodation (Apr 08 – Mar 09)	81

1.0 INTRODUCTION

Drug Interventions Programme

The Drug Interventions Programme (DIP) is an initiative set up by the Home Office in 2003 with an aim to reduce acquisitive crime in the community and break the cycle of drug use and re-offending in England and Wales. DIP plays an important role in the Government's most recent Drugs Strategy, Drugs: Protecting Families and Communities (Home Office, 2008) and to date, Home Office reports suggest that the scheme has had some success. With an investment of over £900 million since 2003, there has been a reduction in drug-related crime of over one quarter (28%) as well as large numbers of individuals receiving treatment for their drug use (Home Office, 2009a). The Government set a target for DIP to engage 1000 individuals a week into treatment by March 2008. DIP not only achieved this two months ahead of schedule, but also reported engaging over 5000 individuals in the month of July 08 (Home Office, 2009b).

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

Originating from the coca plant in South America, cocaine today is a global commodity that many people seek for a variety of different reasons. It is well documented that cocaine is one of the most trafficked drugs in the world, with world seizures in 2006 amounting to 706 tonnes (EMCDDA, 2008a).

Cocaine is a stimulant and 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).

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) National Report 2008 highlights that cocaine is the second most prevalent drug used after cannabis within

Europe (EMCDDA, 2008a). There is evidence to indicate that the proportions of UK adults (15-64 year olds) who use the drug are within the top 5% in Europe (EMCDDA, 2007).

According to the 2008/9 British Crime survey cocaine was also the second most commonly used illicit drug in the UK and 3.0% of adults (974,000 individuals) had used it in the past year compared to 2.3% in 2007/8. It was also reported that 9.2% of 18 - 59 year olds had used the drug ever in their lifetime, an increase from 7.7% on 07/08 figures (Hoare & Flatley, 2008; Hoare, 2009). In contrast, the BCS 2008/09 also highlighted that opiate use (heroin, methadone, etc) only accounted for 0.1% of this age group from the survey but acknowledged that limitations existed when examining drugs with low prevalence in the general population such as opiates.

Findings from the most recent Merseyside Demographic Report 07/08 indicated that cocaine was used by 45.8% of the clients assessed through DIP across Merseyside for that time period. The greatest proportion of these users reported being assessed in Knowsley (63.5%) and Wirral (57.5%). The two previous Demographic Reports have also illustrated that the number of cocaine using DIP clients across Merseyside has been increasing from 25.7% in 05/06 to 45.4% in 06/07. This increase can be seen across all of the five areas in Merseyside in varying proportions over the last three years. The greatest increase was among clients assessed in Knowsley where proportions of cocaine using clients assessed increased from 21.9% in 05/06 to 63.5% in 07/08 and the second greatest was in St Helens where an increase from 9.9% in 05/06 to 44.1% in 07/08 was seen (Cuddy & Duffy, 2009a; Dewa et al, 2008; Duffy, 2006).

Cocaine, young people and alcohol

There seems to be a clear trend emerging with regard to the prevalence of young adults (15-34 year olds) using cocaine. The EMCDDA annual report 2008 suggests that of the 4 million individuals within Europe who would have used the drug within the last year, over 85% of them would have been within this young adult age group (EMCDDA, 2008a). According to the British Crime Survey 2008/09, 6.6% of 16-24 year olds in the UK used cocaine within the last year (Hoare, 2009). Male Class A drug users are also more likely to use powder cocaine when compared to female users (Hoare, 2009; EMCDDA, 2008). It is also reported that adults who use powder cocaine were likely to live in urban areas and could fall within 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 and had used the drug (Hoare, 2009).

In a study by Vitale and van De Mheen (2005) on emergency room cases, it was shown that illicit substances do not tend to be used independently but in addition to alcohol intake. There is also evidence to suggest that the combined use of alcohol with powder cocaine can lead to cocaine misuse (McCance-Katz et al, 1998). 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 harmful physical effects (McCance-Katz et al, 1998; Gossop et al, 2006). Pennings et al (2002) suggested that the combination of cocaine and alcohol can also increase the probability of violent thoughts and behaviour. However Markowitz (2005) challenges this and suggests that individuals who consume both cocaine and alcohol may already have risk-taking personalities. She indicates that it is this pre-existing behavioural trait that may be the cause of the violence but the cocaine and alcohol can act as a catalyst.

Report

The main focus of this report targets Merseyside residents who have been assessed through DIP in Merseyside between April 2008 and March 2009. The report compares the characteristics of the clients by separating them into two main groups, powder cocaine and problematic drug user (PDU) clients. As previous evidence reports an increase in the 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. 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 following 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 1st April 2008 and 31st March 2009. 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 the clients' D(A)AT of residence, age, gender, ethnicity, offence details, frequency of drug use, weekly spend on drugs, the sharing of any drug using equipment, alcohol use, accommodation information and employment status. Each of the five Merseyside D(A)AT areas have been analysed separately as well as Merseyside as a whole.

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%.

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 were used is indicated in the table or figure or noted under the figure

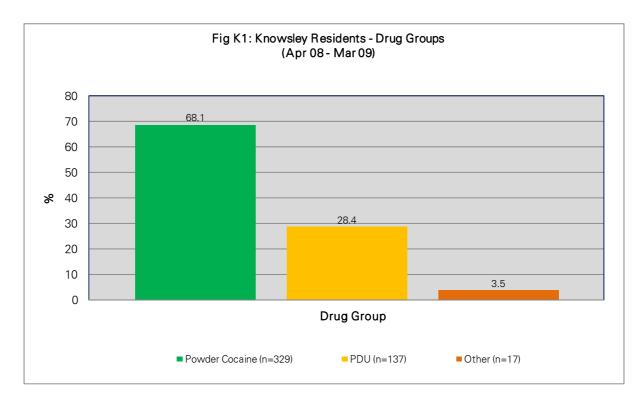
The Alcohol Harm Reduction Strategy for England (Cabinet Office, 2004) highlights daily guidelines for sensible drinking, suggesting a maximum intake of 2 – 3 units per day for

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 (Cuddy et al, 2009a; Cuddy et al, 2009b; 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, it should also be used to encourage further investigation in order to fully explain emerging trends.

3.0 KNOWSLEY RESIDENTS

Drug Groups:



In 08/09, 483 Knowsley residents were assessed through DIP across Merseyside. Over two thirds of these clients (68.1%) indicated that they used powder cocaine and did not use crack or opiates. A little over a quarter (28.6%) reported using crack and opiates. A small proportion of those assessed (3.5%) were considered outside the scope of the report and were not included in any further analysis (Fig K1).

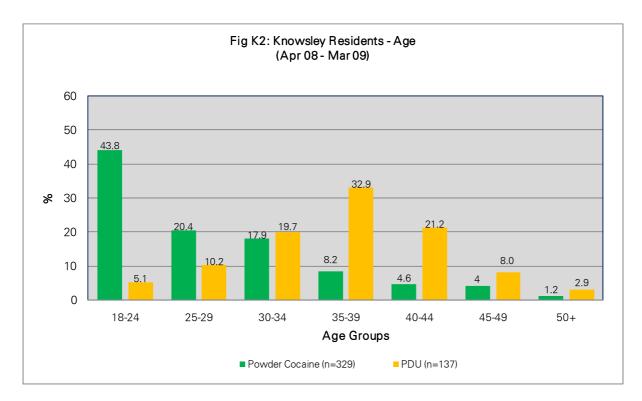
Ethnicity:

Table K1: Knowsley Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Coca	nine (n=329)	PDU (n=137)	
Lumbity	Number	%	Number	%
Black or Black British			2	1.5
Chinese or other Ethnic Group	1	0.3		
Mixed	5	1.5		
White	323	98.2	135	98.5

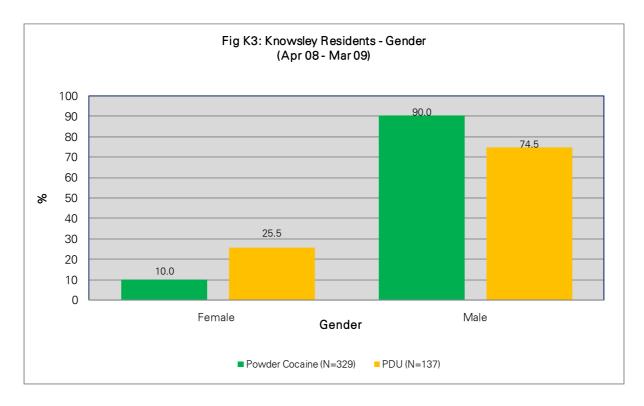
The ethnic profile of the two drug groups was predominantly white - 98.2% of the powder cocaine group and 98.5% of the PDU group (Table K1).

Age



Over four in ten clients from the powder cocaine group were aged between 18 and 24 years old (43.8%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (5.1%). Almost two thirds of clients from the PDU group (65.0%) were aged over 35 years old compared to a much lower proportion from the powder cocaine group (18%) (Fig K2).

Gender



A greater proportion of clients from the powder cocaine group were male (90.0%) compared to the PDU group (74.5%) (Fig K3).

Drug Use

Table K2: Knowsley Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)

Drug use by Powder Cocaine group (n=329)				
Drug	Daily	Monthly	Total	
Cocaine	20 (6.1%)	102 (31.0%)	207 (62.9%)	329 (100%)
Crack				
Heroin				
Methadone				
Cannabis	63 (19.1%)	10 (3.0%)	6 (1.8%)	79 (24.0%)
Amphetamines	1 (0.3%)	1 (0.3%)		2 (0.6%)
Benzodiazepines	1 (0.3%)			1 (0.3%)
Ecstasy	1 (0.3%)	1 (0.3%)	1 (0.3%)	3 (0.9%)
Subutex				
Methamphetamines				

Over six in ten (62.9%) of the powder cocaine group used the drug on a monthly basis with a further three in ten (31.0%) reported using it weekly. Only 6.1% of clients used cocaine on a daily basis. There were a low proportion of clients from this drug group who also used other drugs. Cannabis was the second most commonly used drug with nearly a quarter of

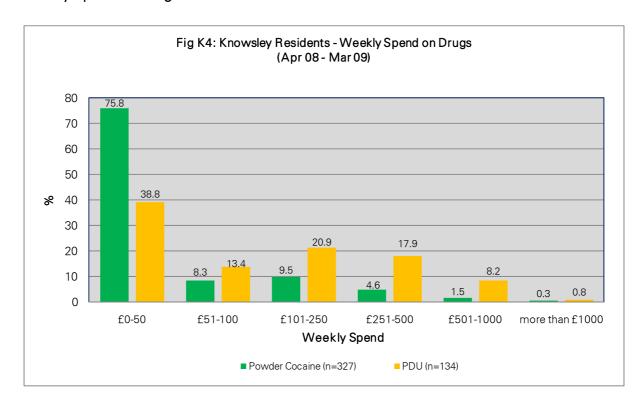
this group using this drug ((24.0%) and the majority of these clients using the drug on a daily basis. (Table K2).

Table K3: Knowsley Residents - Drugs used by the PDU group (Apr 08–Mar 09)

Drug use by PDU group (n=137)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	5 (3.6%)	4 (2.9%)	8 (5.8%)	17 (12.4%)
Crack	72 (52.6%)	23 (16.8%)	10 (7.3%)	105 (76.6%)
Heroin	83 (60.6%)	27 (19.7%)	10 (7.3%)	120 (87.6%)
Methadone	26 (19.0%)	1 (0.7%)	1 (0.7%)	28 (20.4%)
Cannabis	1 (0.7%)	2 (1.5%)	2 (1.5%)	5 (3.7%)
Amphetamines	1 (0.7%)	1 (0.7%)		2 (1.5%)
Benzodiazepines	3 (2.2%)			3 (2.2%)
Ecstasy				
Subutex	7 (5.1%)			7 (5.1%)
Methamphetamines	1 (0.7%)			1 (0.7%)

The PDU group presented a more varied drug use pattern compared to the powder cocaine group, with the greatest proportion of these clients indicating daily use of crack (52.6%) and heroin (60.6%). This drug group also reported using powder cocaine which was the fourth most used drug overall (12.4%) (Table K3).

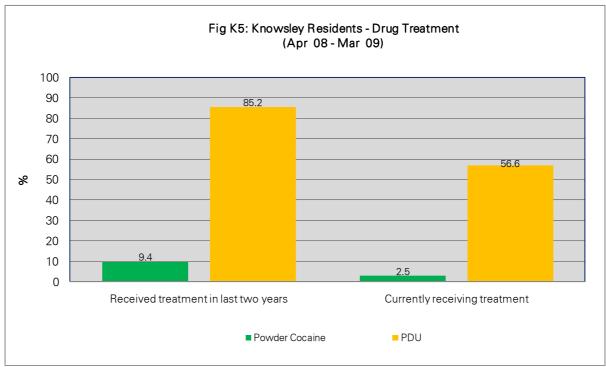
Weekly Spend on Drugs



The greatest proportion of clients in both drug groups indicated that they spent up to £50 on drugs weekly but among the powder cocaine group 75.8% of clients spent up to that

amount compared to just 38.8% of the PDU group. Also, it was reported that almost half (47.8%) of the PDU group spent over £100 a week on drugs compared to a little over a sixth of the powder cocaine group (15.9%) (Fig K4).

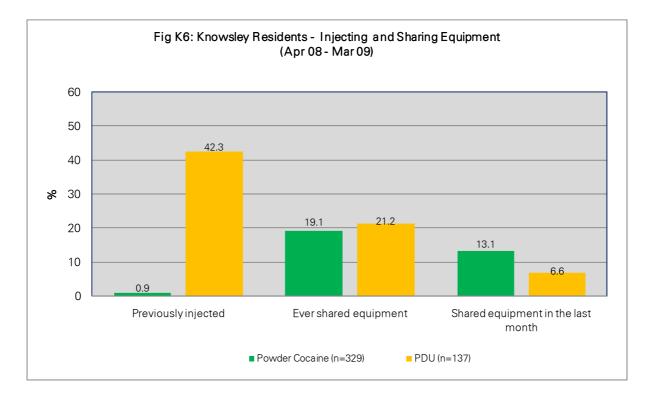
Drug Treatment



(Note: Three powder cocaine users did not provide information about current treatment. Two PDU clients did not provide information regarding drug treatment in the past two years and one PDU did not provide information on current treatment.)

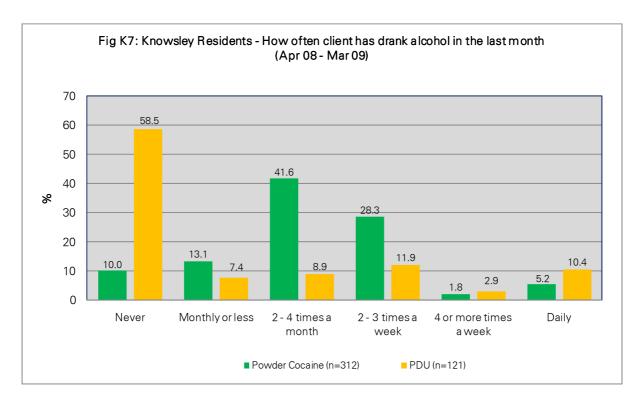
The figure above highlights that a much greater proportion of the PDU group had either received treatment in the previous two years (85.2%) or were currently receiving treatment (56.6%) compared to the powder cocaine group (9.4% and 2.5% respectively) (Fig K5).

Injecting and Sharing Equipment

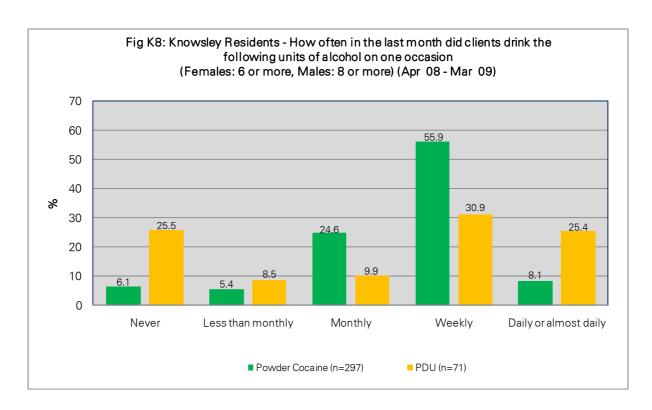


Around four in ten of the PDU drug group (42.3%) reported that they had previously injected compared to a much lower figure from the powder cocaine group (0.9%). Proportions of clients that had ever shared equipment were similar with 19.1% of the powder cocaine group having ever shared compared to 21.2% of the PDU group. It should be noted that a greater proportion of the powder cocaine group had shared equipment in the last month (13.1%) compared to the PDU group (6.6%) (Fig K6).

Alcohol Consumption



Over half of the PDU group indicated that they had never drank alcohol (58.5%) compared to only one in ten of the powder cocaine group (10.0%). Just over one in ten of the PDU group drank alcohol 2-3 times a week (11.9%) in contrast to nearly three in ten (28.3%) of the powder cocaine group. One in ten of the PDU group drank on a daily basis (10.4%) double the proportion of the powder cocaine group (5.2%) (Fig K7).



Of the clients who reported drinking in the past month over half of the powder cocaine group reported "binge drinking" on a weekly basis (55.9%) compared to a third of the PDU group (30.9%). Just over a quarter of the PDU group (25.4%) reported "binge drinking" on a daily or almost daily basis compared to less than one in ten of the powder cocaine group (8.1%) (Fig K8).

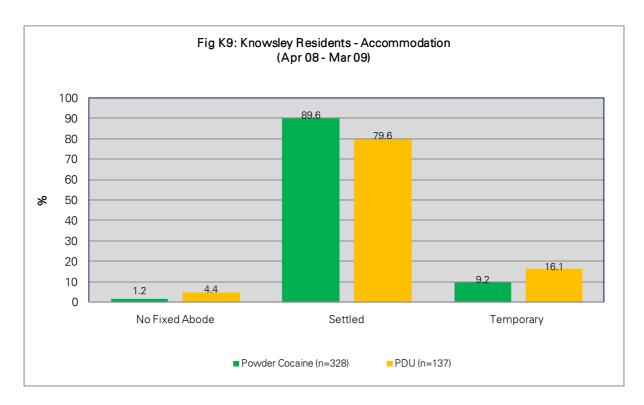
Offences Committed

Table K4: Knowsley Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offence	Total Offending Powder Cocaine (n=325)		Total Offending PDU (n=126)	
	Number	%	Number	%
Begging			2	1.6
Breach	3	0.9	8	6.3
Burglary	29	8.9	11	8.7
Criminal Damage	5	1.5		
Firearms/Weapons	2	0.6	1	0.8
Fraud	7	2.2	1	0.8
Going Equipped			1	0.8
Handling	5	1.5	3	2.4
MDA Offences	171	52.6	17	13.5
Motoring Offences	2	0.6	1	0.8
Other	3	0.9	1	0.8
Soliciting			1	0.8
Public Order Offences	10	3.1	1	0.8
Robbery	8	2.5	4	3.2
Shoplifting	25	8.0	67	53.2
Theft	24	7.4	8	6.3
Theft-Car	22	6.8	9	7.1
Warrant	1	0.3	1	0.8
Wounding or Assault	24	7.4	8	6.3
Other	3	0.9	1	0.8

The most common group of offences committed by the powder cocaine group were MDA related offences (52.6%) and a much lower proportion of the PDU group (13.5%) had committed these types of offences. The most common offence committed by the PDU group was shoplifting (53.2%) but this offence was committed by less than one in ten of the powder cocaine group (8.0%) (Table K4).

Accommodation



There was a slightly greater proportion of clients from the powder cocaine group in settled accommodation (89.5%) compared to the PDU group (79.6%) (Fig K9).

Employment Status

Table K5: Knowsley Residents - Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocaine (n=328)		PDU (n=135)	
Employment Status	Number	%	Number	%
Economically inactive	23	7.0	23	17.0
Pupil/student	9	2.7		
Regular employment	138	42.1	4	2.9
Unemployed	152	46.3	103	76.3
Not known	1	0.3		
Other	5	1.5	5	3.7

Three quarters of PDU (76.3%) were unemployed compared to less than half of the powder cocaine users (46.3%). There was also a greater proportion of the powder cocaine group who were in regular employment (42.1%) compared to the PDU group (2.9%) (Table K5).

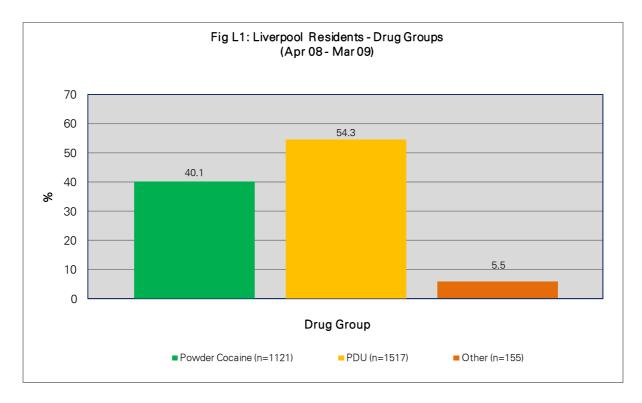
3.1 KNOWSLEY SUMMARY

- > There was nearly double the number of Knowsley resident powder cocaine users as PDU assessed by DIP across Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- The powder cocaine group tended to use powder cocaine only and this drug was mainly taken on a monthly basis. 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. This group may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU drug group reported lifetime injecting compared to the powder cocaine group. A similar proportion from both drug groups had ever shared drug using equipment and 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 over half of this group reported "binge drinking" on a weekly basis. Although over half the PDU group did not drink any alcohol, those who did were more likely than powder cocaine users to report problematic daily "binge drinking".
- > The most commonly committed group of offences for the powder cocaine group was MDA offences compared to shoplifting being the most common for the PDU 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.

> Three quarters of the PDU group were unemployed compared to nearly half of the powder cocaine group. A high proportion of clients from the powder cocaine group also reported being in regular employment.

4.0 LIVERPOOL RESIDENTS

Drug Groups



In 08/09 2,793 Liverpool residents were assessed through DIP across Merseyside. Just over four in ten (40.1%) indicated that they used powder cocaine and did not use crack or opiates. Over half of the clients assessed (54.3%) reported using crack or opiates. A small proportion of those assessed (5.5%) were considered outside the scope of the report and were not included in any further analysis (Fig L1).

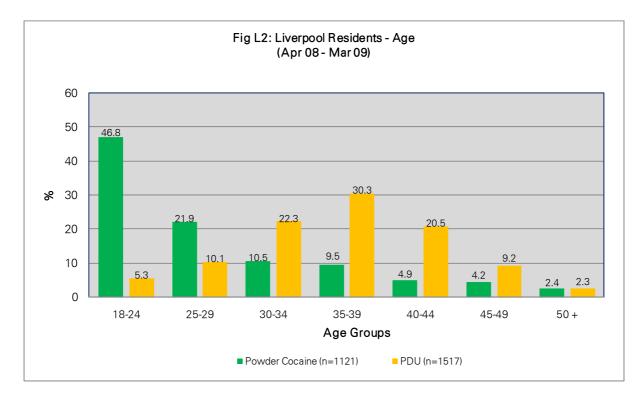
Ethnicity

Table L1: Liverpool Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Cocaine (n=1121)		PDU (n=1517)	
Lumoity	Number	%	Number	%
Asian or Asian British	4	0.4	3	0.2
Black or Black British	38	3.4	59	3.9
Chinese or other Ethnic Group	4	0.4		
Mixed	28	2.5	31	2
White	1042	93.0	1415	93.3
Not stated	5	0.5	9	0.6

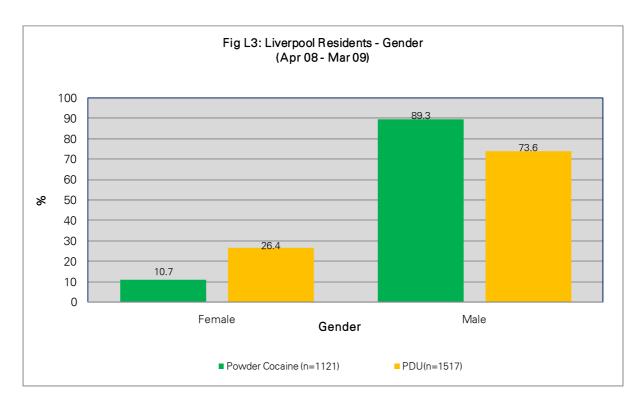
The ethnic profile of the two drug groups was predominantly white – 93.0% of the powder cocaine group and 93.3% of the PDU group (Table L1).

Age



Nearly half of the powder cocaine group were aged between 18 and 24 years old (46.8%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (5.3%). Nearly two thirds of clients from the PDU group (62.3%) were aged over 35 years old compared to a much lower proportion from the powder cocaine group (21.0%) (Fig L2).

Gender



A greater proportion of clients from the powder cocaine group were male (89.3%) compared to the PDU group (73.6%) (Fig K3).

Drug Use

Table L2: Liverpool Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)

Drug use by Powder Cocaine group (n=1121)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	112 (10.0%)	353 (31.5%)	656 (58.5%)	1121 (100%)
Crack				
Heroin				
Methadone				
Cannabis	197 (17.6%)	49 (4.4%)	26 (2.3%)	272 (24.3%)
Amphetamines	1 (0.1%)	2 (0.2%)		3 (0.3%)
Benzodiazepines	5 (0.4%)			5 (0.4%)
Ecstasy		3 (0.3%)	11 (1.0%)	14 (1.2%)
Subutex				
Methamphetamines				

Nearly six in ten (58.5%) of the powder cocaine group used the drug on a monthly basis with a further three in ten (31.5%) reporting using it weekly. Only 10% of clients used cocaine on a daily basis. There were a low proportion of clients from this drug group who also used other drugs. Cannabis was the second most commonly used drug, with a quarter

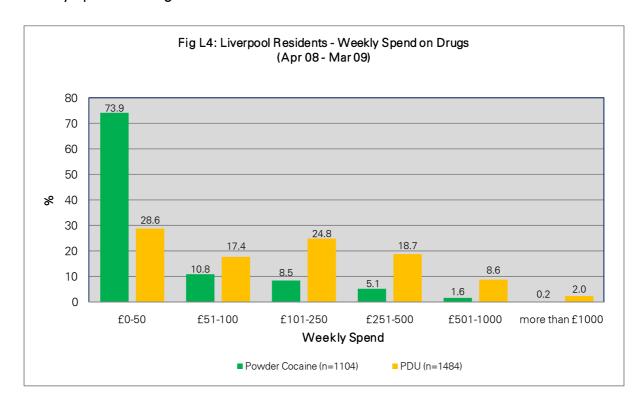
of this group using this drug (24.3%) and the majority of these clients using the drug on a daily basis (Table L2).

Table L3: Liverpool Residents - Drugs used by the PDU group (Apr 08 – Mar 09)

Drug use by PDU group (n=1517)				
Drug	Daily	Weekly	Monthly	Total
Cocaine	36 (2.4%)	38 (2.5%)	32 (2.1%)	106 (6.9%)
Crack	749 (49.4%)	305 (20.1%)	75 (4.9%)	1129 (74.4%)
Heroin	1089 (71.8%)	255 (16.8%)	54 (3.6%)	1398 (92.2%)
Methadone	148 (9.8%)	28 (1.8%)	3 (0.2%)	179 (11.8%)
Cannabis	50 (3.3%)	20 (1.3%)	3 (0.2%)	73 (4.8%)
Amphetamines	3 (0.2%)	2 (0.1%)		5 (0.3%)
Benzodiazepines	31 (2.0%)	8 (0.5%)	7 (0.5%)	46 (3.0%)
Ecstasy	1 (0.1%)			1 (<0.1%)
Subutex	6 (0.4%)	3 (0.2%)	1 (0.1%)	10 (0.7%)
Methamphetamines	1 (0.1%)			1 (<0.1%)

The PDU group presented a more varied drug use pattern with the greatest proportion of these clients indicating daily use of crack (49.4%) and heroin (71.8%). A small proportion of this drug group also reported using powder cocaine which was the fourth most used drug (6.9%) (Table L3).

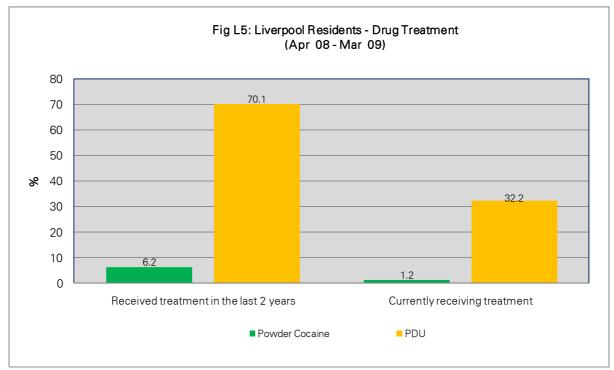
Weekly Spend on Drugs



The highest proportion of clients in both drug groups indicated that they spent up to £50 on drugs a week but 73.9% of the powder cocaine group spent up to that amount compared to

28.6% of the PDU group. Also, it was reported that over half of the PDU group (54.1%) spent over £100 a week on drugs compared to a little over a sixth (15.4%) of the powder cocaine group (Fig L4).

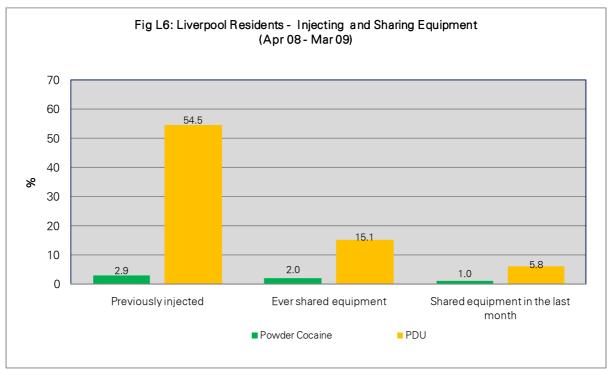
Drug Treatment



(Note: Eight clients from the powder cocaine group did not provide any information for the receiving treatment in the last two years analysis as well as six from the currently receiving treatment analysis. 20 PDU clients did not provide any information for the received treatment in the last two years analysis as well as five from the currently receiving treatment analysis.)

The PDU group had a considerably higher proportion of clients who had either received treatment in the previous two years (70.1%) or were currently receiving treatment (32.2%) compared to the powder cocaine group (6.2% and 1.2% respectively) (Fig L5).

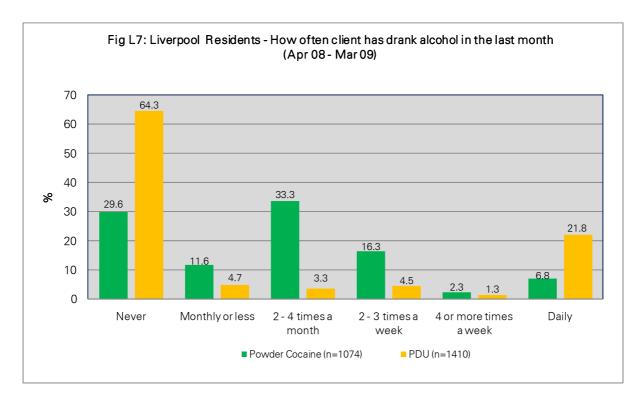
Injecting and Sharing Equipment



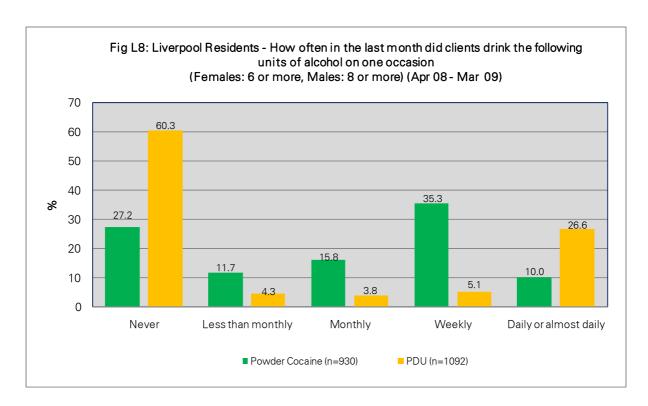
(Note: One powder cocaine using client did not provide any information for the shared equipment in the last month analysis. 11 PDU did not provide any information for the previously injected analysis, nine PDU did not provide any information about for the ever shared equipment analysis as well as seven PDU who did not provide any information for the shared equipment in the last month analysis.)

The greatest proportion of individuals who reported that they had previously injected were from the PDU drug group (54.5%) compared to the powder cocaine group (2.9%). The PDU group also reported higher levels of lifetime equipment sharing (15.1%) and sharing equipment in the last month (5.8%) compared to the powder cocaine group (2.0% and 1.0% respectively) (Fig L6).

Alcohol Consumption



A third of the powder cocaine users indicated that they drank alcohol 2-4 times a month (33.3%) in the month prior to being assessed. In addition just under a third indicated that they never drank alcohol during that time (29.6%). This is in contrast to the PDU group the largest proportion of whom never drank alcohol (64.3%) but among whom there were a higher proportion of clients who drank on a daily basis (21.8%) when compared to those in the powder cocaine group (6.8%) (Fig L7).



Six in ten (60.3%) of the PDU group reported not "binge drinking" in the previous month. This is in contrast to the powder cocaine group the largest proportion of whom reported "binge drinking" on a weekly basis (35.3%). However, only one in ten from the powder cocaine group (10.0%) indicated "binge drinking" on a daily basis compared to over a quarter (26.6%) from the PDU group (Fig L8).

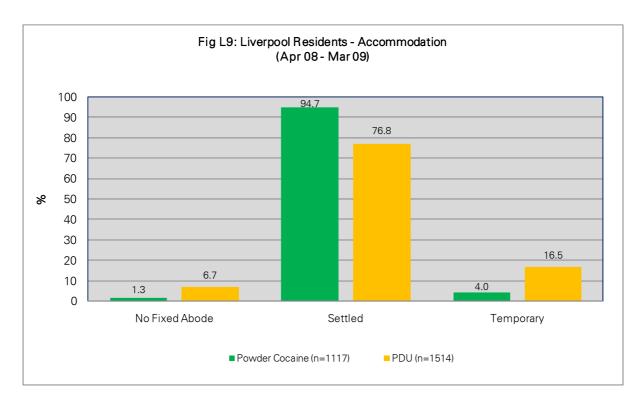
Offences Committed

Table L4: Liverpool Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offences	Total Offending Powder Cocaine (n=1116)		Total Offending PDU (n=1500)	
	Number	%	Number	%
Begging			115	7.7
Breach	15	1.3	89	5.9
Burglary	95	8.5	105	7.0
Criminal Damage	12	1.1	6	0.4
Firearms/Weapons	2	0.2	13	0.9
Fraud	20	1.8	18	1.2
Going Equipped				
Handling	14	1.3	30	2.0
MDA Offences	507	45.4	273	18.2
Motoring Offences	23	2.1	8	0.5
Soliciting			17	1.1
Public Order Offences	54	4.8	31	2.1
Robbery	41	3.7	51	3.4
Shoplifting	121	10.8	575	38.3
Theft	85	7.6	109	7.3
Theft-Car	101	9.1	33	2.2
Warrant	6	0.5	61	4.1
Wounding or Assault	66	5.9	40	2.7
Other	25	2.2	11	0.7

The most common group of offences committed by the powder cocaine group were MDA offences (45.4%) but a much lower proportion of the PDU group (18.2%) had committed these offences. The most common offence committed by the PDU group was shoplifting (38.3%) but only just over one in ten of the powder cocaine group (10.8%) had committed this offence (Fig L4).

Accommodation



There was a greater proportion of clients from the powder cocaine drug group who were reported as being in settled accommodation (94.7%) compared to the PDU group (76.8%) (Fig L9)

Employment Status

Table L5: Liverpool Residents - Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocaine (n=1119)		PDU (n=1508)	
	Number	%	Number	%
Economically inactive	42	3.8	186	12.3
Pupil/student	34	3.0	3	0.2
Regular employment	420	37.5	40	2.7
Unemployed	594	53.1	1236	82.0
Not known	1	0.1	1	0.1
Other	28	2.5	42	2.8

The majority of clients from the PDU group were unemployed (82.0%) compared to 53.1% of the powder cocaine group. There was also a much greater proportion of the powder cocaine group who were in regular employment (37.5%) compared to the PDU group (2.7%) (Table L5).

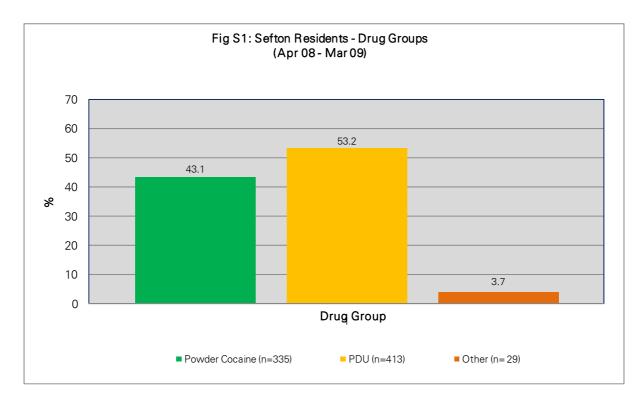
4.1 LIVERPOOL SUMMARY

- > There were a greater proportion of Liverpool resident PDU compared to powder cocaine users assessed by DIP across Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- > A greater proportion of the powder cocaine drug group were male compared to the PDU group.
- Powder cocaine users tended to use powder cocaine only and this drug was mainly taken on a monthly basis. 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. This drug group may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU drug group reported lifetime injecting compared to the powder cocaine group. A higher proportion of PDU were also more likely to have ever shared equipment as well as to have shared equipment in the last month than among the powder cocaine 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 drinking any alcohol, those that did were more likely than powder cocaine users to report problematic daily "binge drinking".
- > The most commonly committed group of offences for the powder cocaine group was MDA offences compared to shoplifting being the most common for the PDU 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.

More than eight in ten of the PDU group were unemployed compared to just over half of the powder cocaine group. Over a third of powder cocaine clients also reported being in regular employment.

5.0 SEFTON RESIDENTS

Drug Groups



In 08/09, 777 Sefton residents were assessed by DIP teams across Merseyside. Over half of these clients indicated that they were PDU (53.2%) using crack and opiates, over four in ten (43.1%) indicated that they used powder cocaine and did not use crack or opiates. A small proportion of clients assessed (3.7%) were considered outside the scope of the report and were not included in any further analysis (Fig S1).

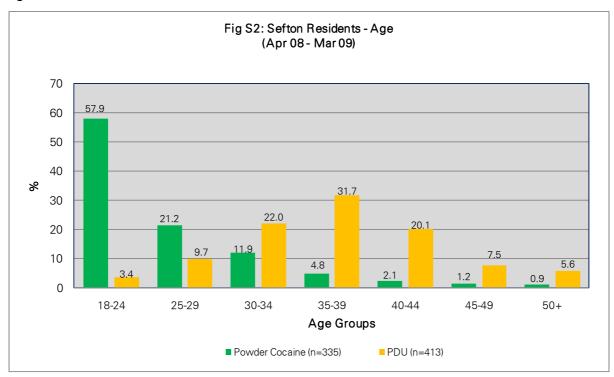
Ethnicity

Table S1: Sefton Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Cocaine (n=335)		PDU (n=410)	
Lumenty	Number	%	Number	%
Black or Black British	2	0.6	1	0.2
White	333	99.4	409	99.8

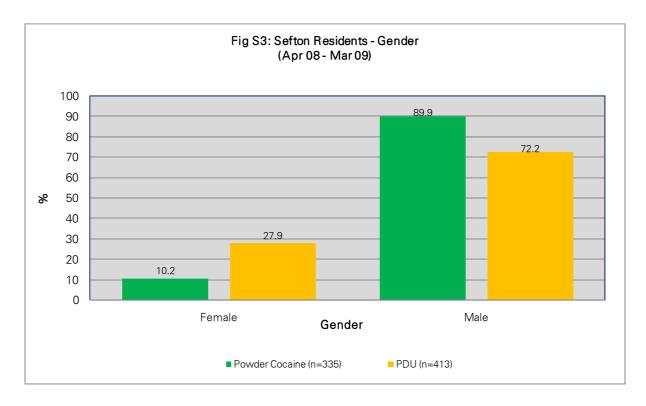
The ethnic profile of the two drug groups was predominantly white – 99.4% of the powder cocaine group and 99.8% of the PDU group (Table S1).

Age



Over half of clients from the powder cocaine group were aged between 18 and 24 years old (57.9%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (3.4%). Almost two thirds of clients from the PDU group (64.9%) were aged 35 years old or older compared to a much lower proportion from the powder cocaine group (9.0%) (Fig S2).

Gender



A greater proportion of clients from the powder cocaine group were male (89.9%) compared to the PDU group (72.2%) (Fig S3).

Drug Use

Table S2: Sefton Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)

Drug use by Powder Cocaine group (n=335)						
Drug	Daily	Weekly	Monthly	Not stated	Total	
Cocaine	21 (6.3%)	98 (29.3%)	215 (64.2%)	1 (0.3%)	335 (100%)	
Crack						
Heroin						
Methadone						
Cannabis	65 (19.4%)	10 (3.0%)	11 (3.3%)		86 (25.7%)	
Amphetamines	2 (0.6%)	3 (0.9%)	3 (0.9%)		8 (2.4%)	
Benzodiazepines						
Ecstasy		4 (1.2%)	5 (1.5%)		9 (2.7%)	
Subutex						
Methamphetamines						

Almost two thirds (64.2%) of the powder cocaine group used the drug on a monthly basis with a further three in ten (29.3%) using it weekly. Only 6.3% of clients used cocaine on a daily basis. There were a low proportion of clients from this drug group who also used other drugs. Cannabis was the second most commonly used drug with over a quarter of this

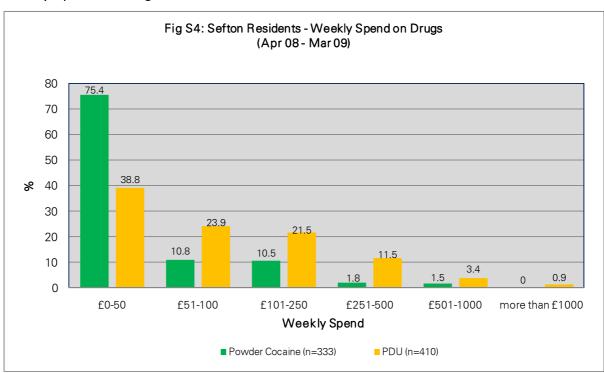
group using the drug (25.7%) and the majority of these clients using the drug on a daily basis (Table S2).

Table S3: Sefton Residents - Drugs used by the PDU group (Apr 08 – Mar 09)

	Drug use by PDU group (n=413)						
Drug	Daily	Weekly	Monthly	Not stated	Total		
Cocaine	8 (1.9%)	17 (4.1%)	18 (4.4%)		43 (10.7%)		
Crack	148 (35.8%)	113 (27.4%)	21 (5.1%)		282 (68.3%)		
Heroin	270 (65.4%)	79 (19.1%)	18 (4.4%)		367 (88.9%)		
Methadone	45 (10.9%)	3 (0.7%)			48 (11.6%)		
Cannabis	11 (2.7%)	10 (2.4%)	5 (1.2%)		26 (6.3%)		
Amphetamines	1 (0.2%)		1 (0.2%)		2 (0.5%)		
Benzodiazepines	26 (6.3%)	3 (0.7%)	4 (1.0%)		33 (8.0%)		
Ecstasy							
Subutex	6 (1.5%)		1 (0.2%)		7 (1.7%)		
Methamphetamines							

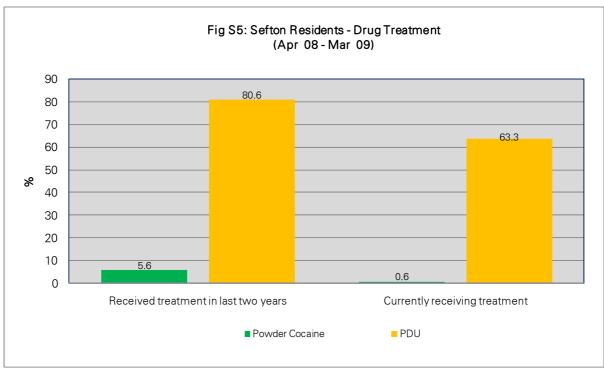
The PDU group presented a more varied drug use pattern compared to the powder cocaine group, with the greatest proportion of these clients indicating daily use of crack (35.8%) and heroin (65.4%). A small proportion of this drug group also reported using powder cocaine which was the fourth most used drug overall (10.7%) (Table S3).

Weekly Spend on Drugs



The greatest proportion of clients in both drug groups indicated that they spent up to £50 on drugs weekly but among the powder cocaine group 75.4% of clients spent up to that amount compared to (38.8%) of the PDU group. Also, it was reported that over a third of the PDU group (37.3%) spent over £100 a week on drugs compared to a little over one in ten (13.8%) of the powder cocaine group (Fig S4).

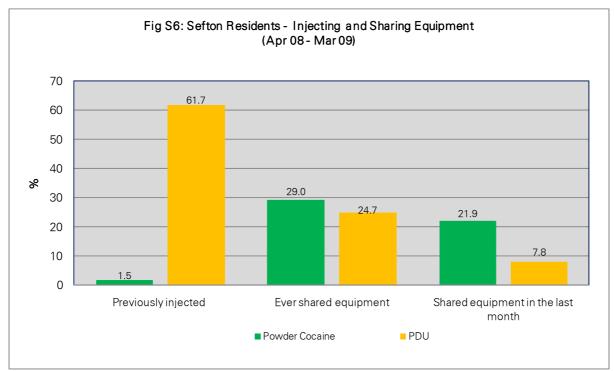
Drug Treatment



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

The PDU group had a considerably higher proportion of clients who had either received treatment in the previous two years (80.6%) or were currently receiving treatment (63.3%) compared to the powder cocaine group (5.6% and 0.6% respectively) (Fig S5).

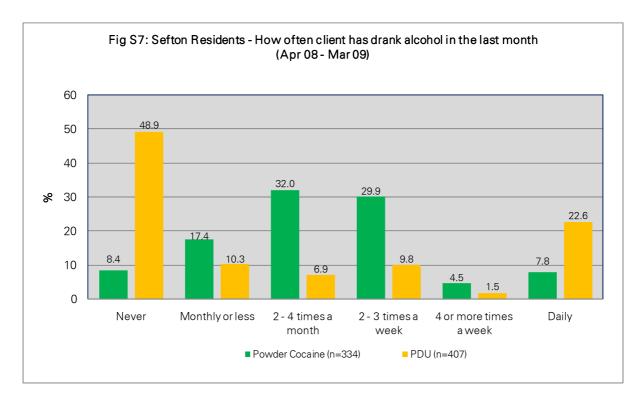
Injecting and Sharing Equipment



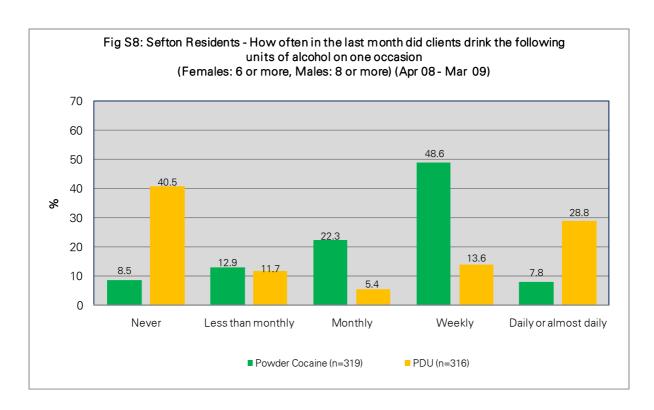
(Note: One individual from the powder cocaine group did not provide information for the previously injected analysis as well as one individual from the ever shared equipment analysis and one from the shared equipment in the last year analysis. From the PDU drug group one individual did not provide information for the previously injected analysis.)

Around six in ten of the PDU group (61.7%) reported that they had previously injected compared to a much lower proportion of the powder cocaine group (1.5%). Proportions of clients from both drug groups who had ever shared equipment were similar; 29.0% of the powder cocaine group compared to 24.7% of the PDU group. It should be noted however that 21.9% of the powder cocaine group had shared equipment in the last month compared to just 7.8% of the PDU group (Fig S6).

Alcohol Consumption



Nearly half of the PDU group indicated that they never drank alcohol (48.9%) compared to under one in ten of the powder cocaine group (8.4%). Nearly one in ten of the PDU group drank alcohol 2-3 times a week (9.8%) in contrast to nearly three in ten of the powder cocaine group (29.9%). Over a fifth of PDU clients drank on a daily basis (22.6%) nearly three times the proportion of the powder cocaine group (7.8%) (Fig S7).



Among clients who reported drinking in the past month nearly half of the powder cocaine group reported "binge drinking" on a weekly basis (48.6%) compared to 13.6% of the PDU group. Just over a quarter of the PDU group (28.8%) reported "binge drinking" on a daily or almost daily basis compared to less than one in ten of the powder cocaine group (7.8%) (Fig S8).

Offences Committed

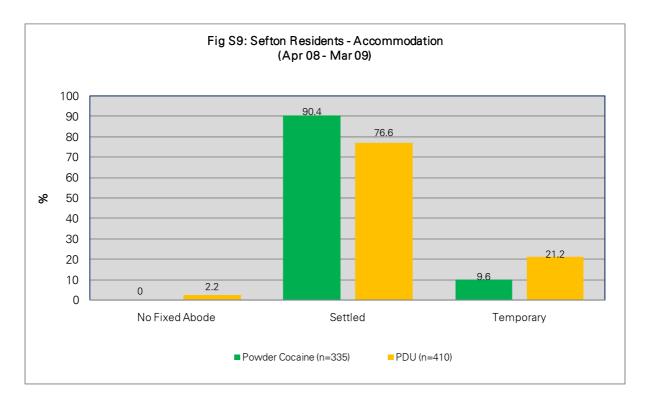
Table S4: Sefton Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offence	Total Offending Powder Cocaine (n=333)			offending (n=402)
	Number	%	Number	%
Begging			20	5.0
Breach	4	1.2	7	1.7
Burglary	32	9.6	39	9.7
Criminal Damage	9	2.7	2	0.5
Firearms/Weapons	5	1.5	3	0.7
Fraud	3	0.9	6	1.5
Going Equipped				
Handling	7	2.1	12	3.0
MDA Offences	154	46.2	54	13.4
Motoring Offences	10	3.0	2	0.5
Soliciting			1	0.3
Public Order Offences	18	5.4	4	1.0
Robbery	7	2.1	4	1.0
Shoplifting	36	10.8	196	48.8
Theft	26	7.8	44	10.9
Theft-Car	26	7.8	9	2.2
Warrant			3	0.7
Wounding or Assault	21	6.3	10	2.5
Other	7	2.1	9	2.2

(Note: Two individuals from the powder cocaine group did not provide information for the offences committed analysis as well as 11 from the PDU group who did not provide any provide any information for the same analysis.)

The most common group of offences committed by the powder cocaine group were MDA offences (46.2%) and a much lower proportion of the PDU group (13.4%) had committed these offences. In contrast, shoplifting was the most common offence for the PDU group (48.8%) but this offence was committed by a much lower proportion of the powder cocaine group (10.8%) (Table S4).

Accommodation



There was a greater proportion of clients from the powder cocaine group in settled accommodation (90.4%) compared to the PDU group (76.6%) (Fig S9).

Employment Status

Table S5: Sefton Residents - Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocaine (n=333)		PDU ((n=412)
Employment Status	Number	%	Number	%
Economically inactive	15	4.5	45	10.9
Pupil/student	9	2.7	1	0.2
Regular employment	145	43.5	15	3.6
Unemployed	157	47.1	343	83.3
Other	7	2.1	7	1.7
Not known			1	0.2

Over eight in ten clients from the PDU group were unemployed (83.3%) compared to a much lower proportion of the powder cocaine group (47.14%). There were a much greater proportion of clients from the powder cocaine group (43.5%) who reported that they were in regular employment compared to the PDU group ((3.6%) (Table S5).

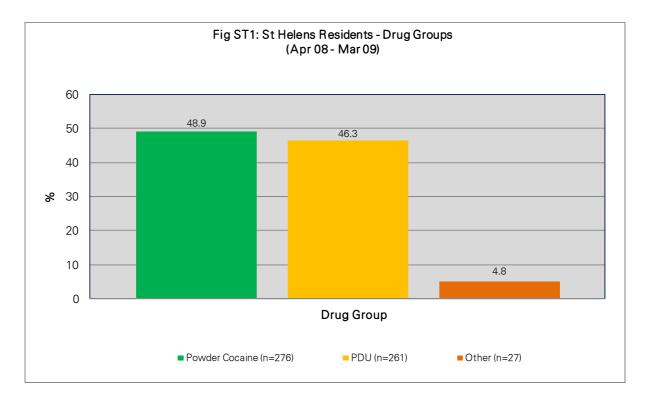
5.1 SEFTON SUMMARY

- There were a greater proportion of Sefton resident PDU compared to powder cocaine users assessed by DIP across Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- > 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 only and this drug was mainly taken on a monthly basis. In contrast, the PDU drug 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. This group may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU drug group reported lifetime injecting compared to the powder cocaine group. A similar proportion from both drug groups had ever shared drug using equipment and 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 PDU group did not drink any alcohol, those that did were more likely than the powder cocaine users to report problematic daily "binge drinking".
- > The most commonly committed group of offences for the powder cocaine group were MDA offences compared to shoplifting being the most common for 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.

> Over three quarters of the PDU group were unemployed compared to nearly half of the powder cocaine group. A high proportion of clients form the powder cocaine group also reported being in regular employment.

6.0 ST HELENS RESIDENTS

Drug Groups



In 08/09, 564 St Helens residents were assessed through DIP across Merseyside. Nearly half of these clients (48.9%) indicated that they used powder cocaine and did not use crack or opiates. A similar proportion of clients (46.3%) reported using crack and opiates. A small proportion of clients (4.8%) were considered outside the scope of the study and were not included in any further analysis (Fig ST1).

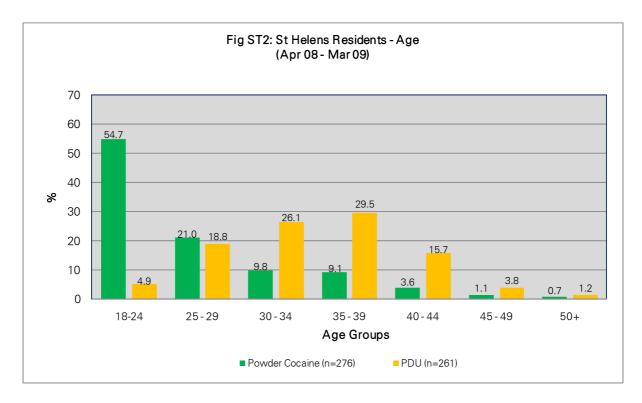
Ethnicity

Table ST1: St Helens Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Cocaine (n=276)		PDU (n=261)	
Lumbity	Number	mber % Num		%
Asian or Asian British	1	0.4		
Black or Black British	1	0.4		
White	274	99.3	260	99.6
Not Stated			1	0.4

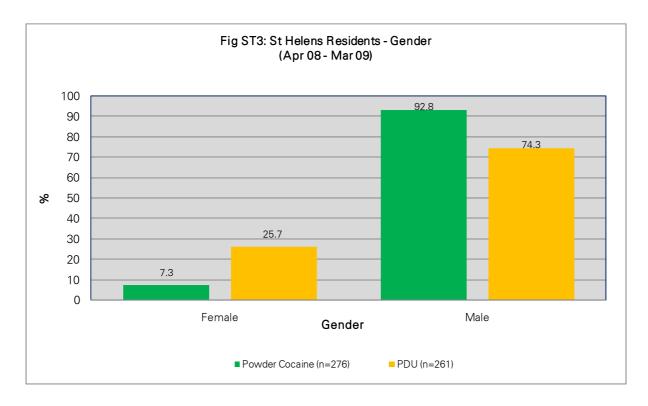
The ethnic profile of the clients from both of the drug groups was predominantly white – 99.3% of the powder cocaine group and 99.6% of the PDU group (Table ST1).

Age



Over half of clients from the powder cocaine drug group were aged between 18 and 24 years old (54.7%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (4.9%). Over half of clients from the PDU group were aged over 35 years old (50.2%) compared to a much lower proportion from the powder cocaine group (14.5%) (Fig ST2).

Gender



A greater proportion of clients from the powder cocaine group were male (92.8%) compared to the PDU group (74.3%) (Fig ST3).

Drug Use

Table ST2: St Helens Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)

Drug use by Powder Cocaine group (n=276)						
Drug	Daily	Weekly	Monthly	Not stated	Total	
Cocaine	14 (5.1%)	65 (23.6%)	196 (71.0%)	1 (0.4%)	276 (100%)	
Crack						
Heroin						
Methadone						
Cannabis	40 (14.5%)	23 (8.3%)	17 (6.2%)		80 (29.0%)	
Amphetamines	2 (0.7%)	1 (0.4%)	5 (1.8%)		8 (2.9%)	
Benzodiazepines		1 (0.4%)			1 (0.4%)	
Ecstasy			4 (1.4%)		4 (1.4%)	
Subutex						
Methamphetamines						

Over seven in ten (71.0%) of the powder cocaine group used the drug on a monthly basis with nearly another quarter (23.6%) reported using it weekly. Only 5.1% of clients used powder cocaine in a daily basis. There were also a low proportion of clients from this drug group who also used other drugs. Cannabis was the second most commonly used drug,

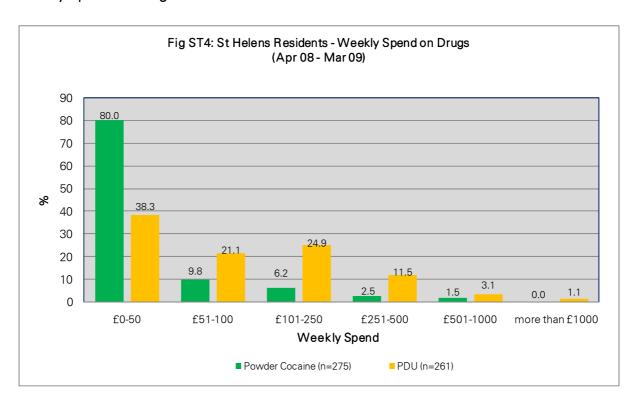
with nearly three in ten of this group using this drug (29%) and the majority of these clients using the drug on a daily basis (Table ST2).

Table ST3: St Helens Residents - Drugs used by the PDU group (Apr 08 - Mar 09)

	Drug use by PDU group (n=261)						
Drug	Daily	Weekly	Monthly	Not stated	Total		
Cocaine	27 (10.3%)	19 (7.3%)	11 (4.2%)		57 (21.8%)		
Crack	74 (28.4%)	33 (12.6%)	21 (8.0%)		128 (49.0%)		
Heroin	180 (69.0%)	45 (17.2%)	16 (6.1%)	1 (0.2%)	242 (92.7%)		
Methadone	25 (9.6%)	4 (1.5%)	2 (0.8%)		31 (11.9%)		
Cannabis	16 (6.1%)	9 (3.4%)	6 (2.3%)		31 (11.9%)		
Amphetamines	2 (0.8%)	1 (0.4%)			3 (1.1%)		
Benzodiazepines	17 (6.5%)	4 (1.5%)	1 (0.4%)		22 (8.4%)		
Ecstasy							
Subutex	3 (1.1%)	1 (0.4%)	2 (0.8%)		6 (2.3%)		
Methamphetamines							

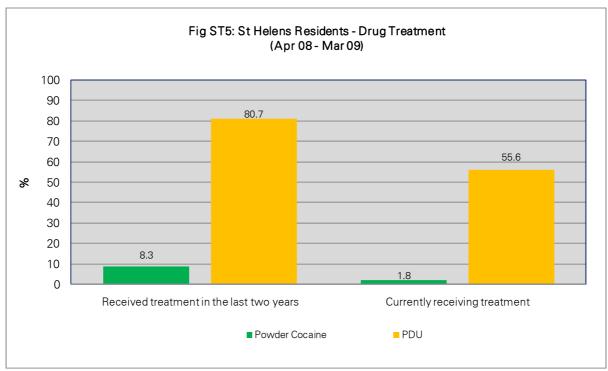
The PDU group presented a more varied drug use pattern compared to the powder cocaine group, with the greatest proportion of these clients indicating daily use of crack (28.4%) and heroin (69.0%). A proportion of this drug group also reported using powder cocaine which was the third most used drug overall (21.8%) (Table ST3).

Weekly Spend on Drugs



The largest proportion of clients in both drug groups indicated that they spent up to £50 on drugs weekly but among the powder cocaine group 80.0% spent up to that amount compared to the 38.3% of the PDU group. Also, it was reported that over four in ten of the PDU group (40.6%) spent over £100 a week on drugs compared to a little over one in ten of the powder cocaine group (10.2%) (Fig ST4).

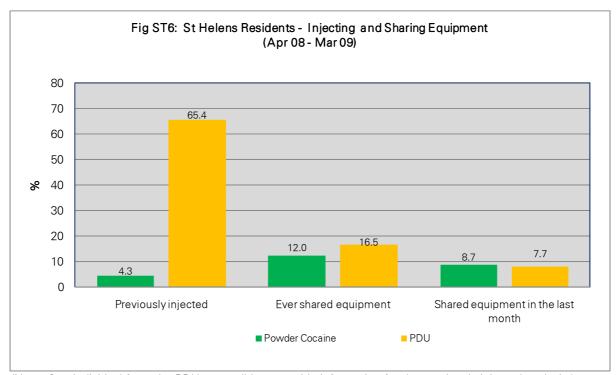
Drug Treatment



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

There was a considerably higher proportion of clients from the PDU group who had either received treatment in the previous two years (80.7%) or were currently receiving treatment (55.6%) compared to the powder cocaine group (8.3% and 1.8% respectively) (Fig ST5).

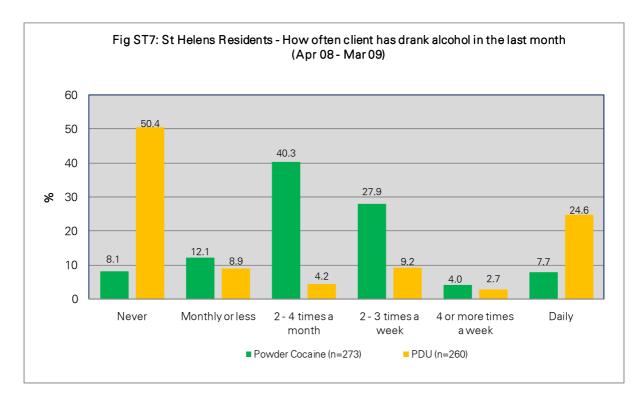
Injecting and Sharing Equipment



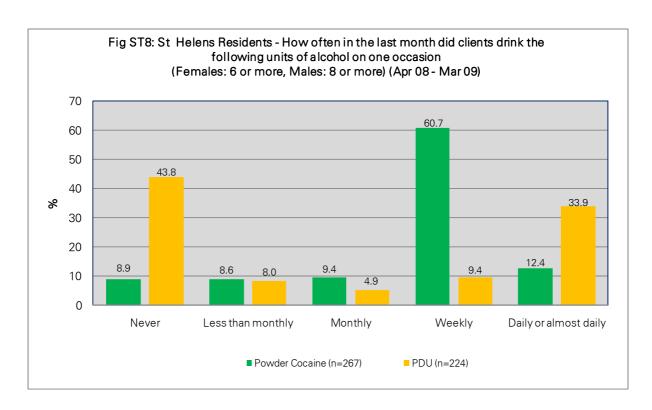
(Note: One individual from the PDU group did not provide information for the previously injected analysis.)

Almost two thirds of the PDU group reported that they had previously injected (65.4%) compared to a much lower figure from the powder cocaine group (4.3%). A greater proportion of clients from the PDU group had reported ever sharing drug taking equipment in their lifetime (16.5%) compared to the powder cocaine group (12.0%). It should be noted however that a slightly greater proportion of the powder cocaine group had shared equipment in the last month (8.7%) compared to the PDU group (7.7%) (Fig ST6).

Alcohol Consumption



Over half of the PDU group indicated that they never drank any alcohol (50.4%) compared to less than one in ten of the powder cocaine group (8.1%). Just under one in ten of the PDU group (9.2%) drank alcohol 2-3 times a week in contrast to the powder cocaine group were nearly three in ten (27.9%) did so. Nearly a quarter of the PDU group drank on a daily basis (24.6%) more than three times the proportion of the powder cocaine group (7.7%) (Fig ST7).



Among the clients who reported drinking in the last month, six in ten of the powder cocaine group reported "binge drinking" on a weekly basis (60.7%) compared to less than one in ten of the PDU group (9.4%). Just over a third of the PDU group (33.9%) reported "binge drinking" on a daily or almost daily basis compared to one in ten of the powder cocaine group (12.4%) (Fig ST8).

Offences Committed

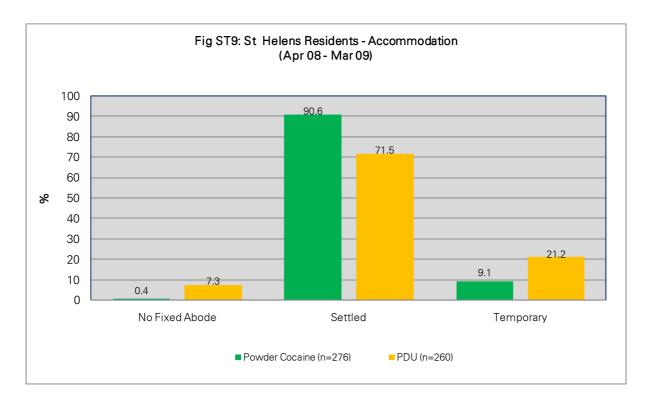
Table ST4: St Helens Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offence	Total Offending Powder Cocaine (n=271)			Offending (n=258)
	Number	%	Number	%
Begging			3	1.2
Breach	6	2.2	12	4.7
Burglary	13	4.8	22	8.5
Criminal Damage	7	2.6	2	0.8
Firearms/Weapons	3	1.1	3	1.2
Fraud	4	1.5		
Going Equipped				
Handling	5	1.8	2	0.8
MDA Offences	149	55.0	42	16.3
Motoring Offences	8	3.0	2	0.8
Soliciting				
Public Order Offences	17	6.3		
Robbery	2	0.7	3	1.2
Shoplifting	17	6.3	135	52.3
Theft	14	5.2	24	9.3
Theft-Car	22	8.1	8	3.1
Warrant			7	2.7
Wounding or Assault	25	9.2	7	2.7
Other	7	2.6	6	2.3

(Note: five individuals from the powder cocaine group did not provide information for the offence analysis and three individuals from the PDU group did not provide information for this analysis.)

The most common group of offences committed by the powder cocaine group were MDA offences (55.0%) and a much lower proportion of the PDU group (16.3%) had committed these offences. It is also worth noting that the second most common offence committed by the powder cocaine drug group was wounding or assault (9.2%) compared to a lower figure of 2.7% for the PDU group. The most common offence committed by the PDU group was shoplifting (52.3%) but this offence was committed by a much lower proportion of the powder cocaine group (6.3%) (Table ST4).

Accommodation



There was a greater proportion of clients from the powder cocaine drug group in settled accommodation (90.6%) compared to the PDU group (71.5%) (Fig ST9)

Employment Status

Table ST5: St Helens Residents - Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocaine (n=276)		PDU (n=260)	
Employment Status	Number	%	Number	%
Economically inactive	14	5.1	48	18.5
Pupil/student	6	2.2		
Regular employment	144	52.2	6	2.3
Unemployed	100	36.2	176	67.7
Other	11	4.0	29	11.2
Not known	1	0.4	1	0.4

Around two-thirds of clients from the PDU group were unemployed (67.7%) compared to approximately a third of the powder cocaine group (36.2%). Over half of the powder cocaine group were in regular employment (52.2%) compared to the PDU group (2.3%) (Table ST5).

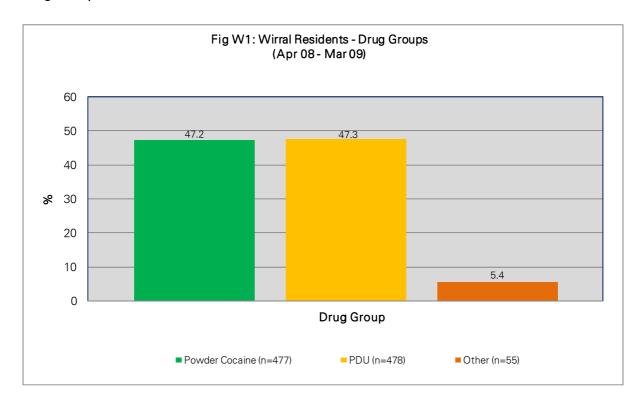
6.1 ST HELENS SUMMARY

- There were a greater proportion of St Helens Resident powder cocaine users compared to PDU assessed by DIP across Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- > A greater proportion of the powder cocaine group were male compared to the PDU group.
- > The powder cocaine group tended to use powder cocaine only and this drug was mainly taken on a monthly basis. 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. They may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU drug group reported lifetime injecting compared to the powder cocaine group. A slightly greater proportion of clients from the PDU group had ever shared their equipment but a slightly greater proportion of the powder cocaine group had shared their drug equipment in the last month than among 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 over half of the PDU group did not drink any alcohol, those who did were more likely than powder cocaine users to report problematic daily "binge drinking".
- ➤ The most common group of offences committed by the powder cocaine group was MDA offences and wounding or assault and 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.

- > 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. Over half of powder cocaine clients also reported being in regular employment

7.0 WIRRAL RESIDENTS

Drug Groups



In 08/09, 1,010 Wirral residents were assessed through DIP across Merseyside. Nearly half of these clients (47.2%) indicated that they used powder cocaine and did not use crack or opiates. A very similar proportion reported using crack and opiates (47.3%). A small proportion of those assessed (5.4%) were considered outside the scope of the report and were not included in any further analysis (Fig W1).

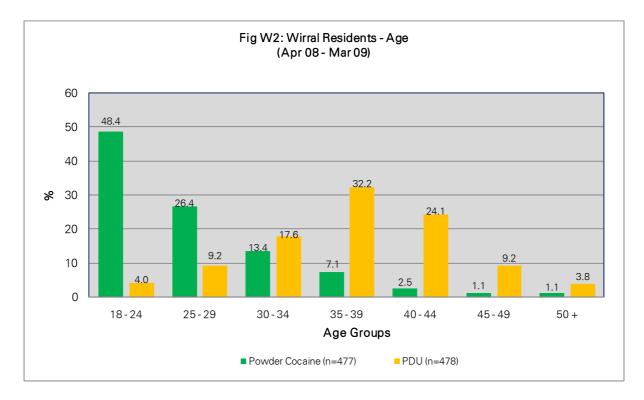
Ethnicity

Table W1: Wirral Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Cocaine (n=477)		PDU (n=478)	
Limitity	Number	%	Number	%
Chinese or Other Ethnic Group	1	0.2		
Mixed	10	2.1	1	0.2
White	466	97.7	473	99.0
Not Stated			4	8.0

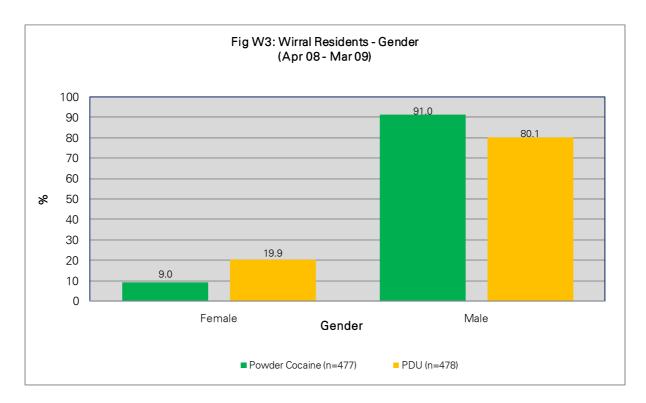
The ethnic profile of the two drug groups was predominantly white – 99.7% of the powder cocaine group and 99.0% of the PDU group (Table W1)

Age



Nearly half of the powder cocaine group were aged between 18 and 24 years old (48.4%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (4.0%). Almost seven in ten of the clients from the PDU group were aged over 35 years old (69.3%) compared to a much lower proportion from the powder cocaine group (11.8%) (Fig W2).

Gender



A greater proportion of clients from the powder cocaine group were male (91.0%) compared to the PDU group (80.1%) (Fig W3).

Drug Use

Table W2: Wirral Residents - Drugs used by the powder cocaine group (Apr 08 – Mar 09)

Drug use by Powder Cocaine (n=477)						
Drug	Daily	Weekly	Monthly	Total		
Cocaine	40 (8.4%)	163 (34.2%)	274 (57.4%)	477 (100%)		
Crack						
Heroin						
Methadone						
Cannabis	131 (27.5%)	43 (9.0%)	33 (6.9%)	207 (43.4%)		
Amphetamines	4 (0.8%)		4 (0.8%)	8 (1.7%)		
Benzodiazepines	1 (0.2%)	1 (0.2%)		2 (0.4%)		
Ecstasy	2 (0.4%)	5 (1.0%)	13 (2.7%)	20 (4.2%)		
Subutex						
Methamphetamines						

Nearly six in ten (57.4%) of the powder cocaine group used the drug on a monthly basis while a further three in ten (34.2%) reported using it weekly. Only 8.4% of clients used cocaine on a daily basis. Cannabis was the second most commonly used drug with four in

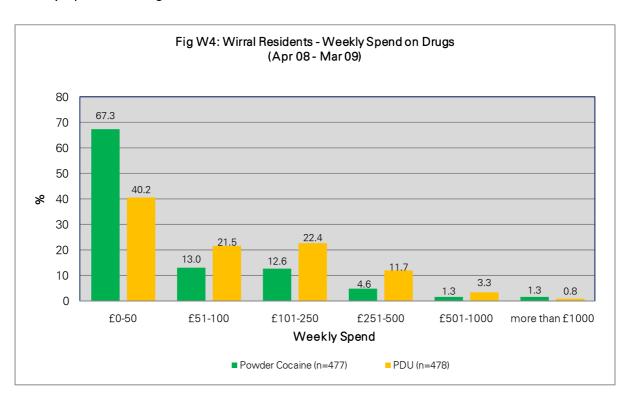
ten clients from this drug group using the drug (43.3%) and the majority of these clients using the drug on a daily basis (Table W2).

Table W3: Wirral Residents - Drugs used by the PDU group (Apr 08 – Mar 09)

Drug use by PDU group (n=478)						
Drug	Daily	Weekly	Monthly	Total		
Cocaine	6 (1.3%)	20 (4.2%)	18 (3.8%)	44 (9.2%)		
Crack	132 (27.6%)	129 (27.0%)	42 (8.8%)	303 (63.4%)		
Heroin	272 (56.9%)	114 (23.8%)	36 (7.5%)	422 (88.3%)		
Methadone	42 (8.8%)	13 (2.7%)	6 (1.3%)	61 (12.8%)		
Cannabis	43 (9.0%)	19 (4.0%)	12 (2.5%)	74 (15.5%)		
Amphetamines	1 (0.2%)	4 (0.8%)		5 (1.1%)		
Benzodiazepines	17 (3.6%)	9 (1.9%)	8 (1.7%)	34 (7.1%)		
Ecstasy			3 (0.6%)	3 (0.6%)		
Subutex	1 (0.2%)	1 (0.2%)		2 (0.4%)		
Methamphetamines						

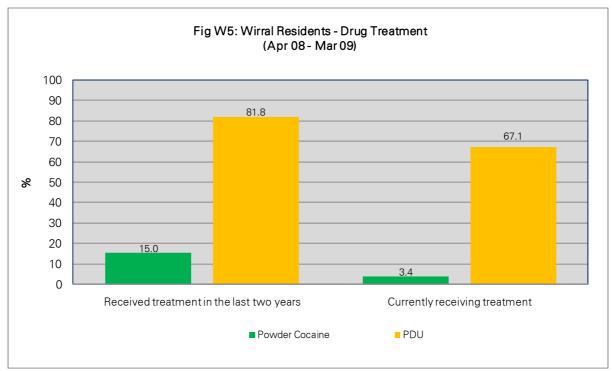
The PDU group presented a more varied drug use pattern compared to the powder cocaine group, with the greatest proportion of these clients indicating daily use of crack (27.6%) and heroin (56.9%). A small proportion of clients in this drug group also reported using powder cocaine which was the fifth most used drug overall (9.2%) (Table W3).

Weekly Spend on Drugs



The greatest proportion of clients from both drug groups indicated that they spent up to £50 on drugs weekly but among the powder cocaine group 67.3% spent up to that amount compared to 40.2% of the PDU group. Also, it was reported that over a third of the PDU group (38.2%) spent over £100 a week on drugs compared to a fifth of the powder cocaine group (19.8%) (Fig W4).

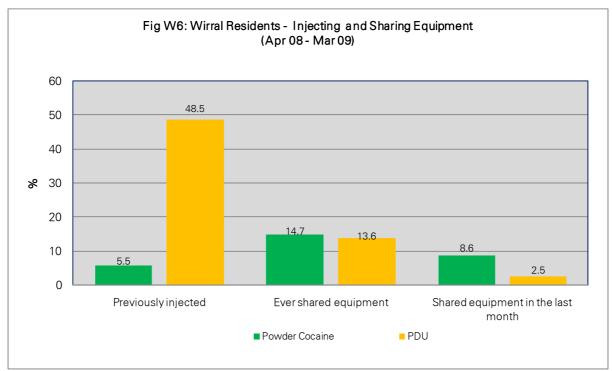
Drug Treatment



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

The figure above highlights that considerably greater proportions of clients from the PDU group had either received treatment in the previous two years (81.8%) or were currently receiving treatment (67.1%) compared to the powder cocaine group (15.0% and 3.4% respectively) (Fig W5).

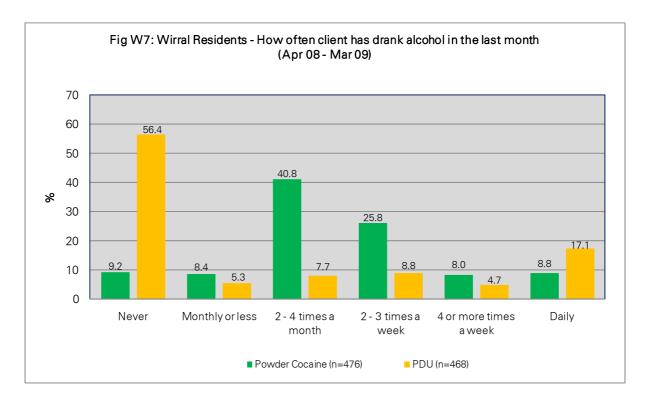
Injecting and Sharing Equipment



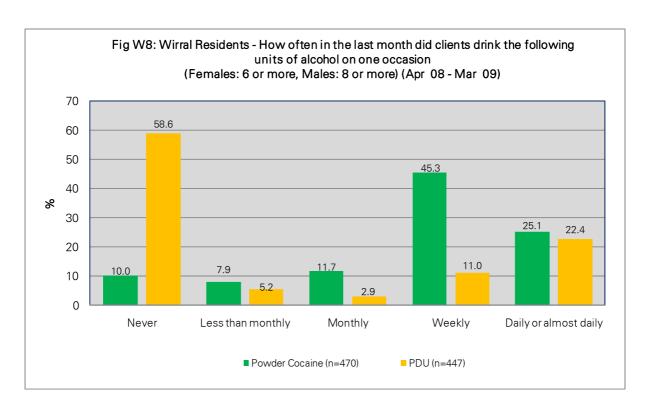
(Note: One individual from the powder cocaine group did not provide any information for the shared equipment analysis.)

Almost half of the PDU drug group (48.5%) reported that they had previously injected compared to a much lower proportion from the powder cocaine group (5.5%). Proportions of clients that had ever shared equipment were similar with 14.7% of the powder cocaine group having ever shared compared to 13.6% of the PDU group. It should be noted however that that a greater proportion of the powder cocaine group had shared equipment in the last month (8.6%) compared to the PDU group (2.5%) (Fig W6).

Alcohol Consumption



Over half of the PDU group indicated that they never drank any alcohol (56.4%) compared to less than one in ten of the powder cocaine group (9.2%). Less than one in ten of the PDU group drank alcohol 2-3 times a week (8.8%) in contrast to a quarter of the powder cocaine group (25.8%). Over a sixth of the PDU group drank on a daily basis (17.1%) approximately double the proportion of the powder cocaine group (8.8%) (Fig W7).



Among the clients who reporting drinking in the past month nearly half of the powder cocaine group reported "binge drinking" on a weekly basis (45.3%) compared to one in ten of the PDU group (11.0%). Just over a fifth of the PDU group (22.4%) reported "binge drinking" on a daily or almost daily basis in comparison to more than a quarter of the powder cocaine group (25.1%) (Fig W8).

Offences Committed

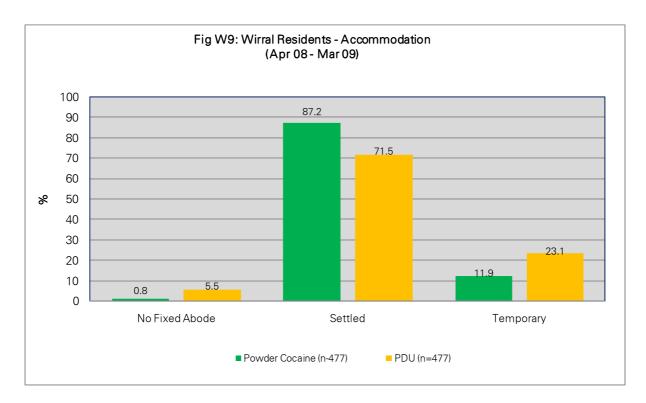
Table W4: Wirral Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offences	Total Offending Powder Cocaine (n=472)		Total Offending PDU (n=474)	
	Number	%	Number	%
Begging			4	0.8
Breach	14	3.0	12	2.5
Burglary	33	7.0	44	9.3
Criminal Damage	21	4.4	2	0.4
Firearms/Weapons	9	1.9	5	1.1
Fraud	7	1.5	9	1.9
Going Equipped				
Handling	4	0.8	7	1.5
MDA Offences	177	37.5	138	29.1
Motoring Offences	14	3.0	4	0.8
Soliciting				
Public Order Offences	42	8.9	8	1.7
Robbery	10	2.1	12	2.5
Shoplifting	16	3.4	148	31.2
Theft	40	8.5	67	14.1
Theft-Car	31	6.6	13	2.7
Warrant			1	0.2
Wounding or Assault	87	18.4	28	5.9
Other	9	1.9	11	2.3

(Note: Five individuals from the powder cocaine group did not provide any information for the offences committed analysis as well as four individuals from the PDU group.)

The most common group of offences committed by the powder cocaine group were MDA offences (37.5%) and a lower proportion of the PDU group (29.1%) had committed these offences. The second most common offence for this drug group was wounding or assault (18.4%) and was committed by a lower proportion of the PDU group (5.9%). The most common offence for the PDU group was shoplifting (31.2%) but this offence was committed by a much lower proportion of the powder cocaine group (3.4%) (Table W4).

Accommodation



There was a greater proportion of clients from the powder cocaine group in settled accommodation (87.2%) compared to the PDU group (71.5%) (Fig W9).

Employment Status

Table W5: Wirral Residents - Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocaine (n=473)		PDU (n=474)	
	Number	%	Number	%
Economically inactive	55	11.6	164	34.6
Pupil/student	9	1.9	1	0.2
Regular employment	197	41.6	40	8.4
Unemployed	197	41.6	254	53.6
Other	14	3.0	14	3.0
Not known	1	0.2	1	0.2

Over half of clients from the PDU group were unemployed (53.6%) compared to a little over four in ten of the powder cocaine group (41.6%). There was also a high proportion of the powder cocaine group who were in regular employment (41.6%) compared to a much lower proportion from the PDU group (8.4%) (Table W5).

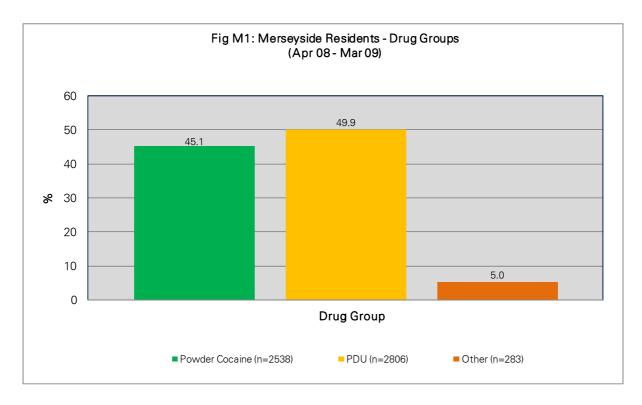
7.1 WIRRAL SUMMARY

- > There were almost equal proportions of Wirral resident powder cocaine users compared to PDU assessed by DIP across Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both drug groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- 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 a monthly basis and may also have used cannabis. 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. This group may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU group reported lifetime injecting compared to the powder cocaine group. A similar proportion from both drug groups had ever shared their equipment but more powder cocaine users had shared their drug 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 of the PDU group did not drink any alcohol, nearly a quarter of the remaining clients reported problematic daily "binge drinking".
- The most commonly committed group of offences for the powder cocaine group was MDA offences with wounding or assault also being committed 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.
- 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 four in ten of the powder cocaine group. A high proportion of clients from the powder cocaine group also reported being in regular employment.

8.0 MERSEYSIDE RESIDENTS - Summary

Drug Groups



In 08/09, 5,627 Merseyside residents were assessed through DIP. Just under half of these clients (45.1%) indicated that they used powder cocaine and did not use crack or opiates. A slightly higher proportion (49.9%) reported using crack and opiates. A small proportion of those assessed (5.0%) were considered outside the scope of the study and were not included in any further analysis (Fig M1).

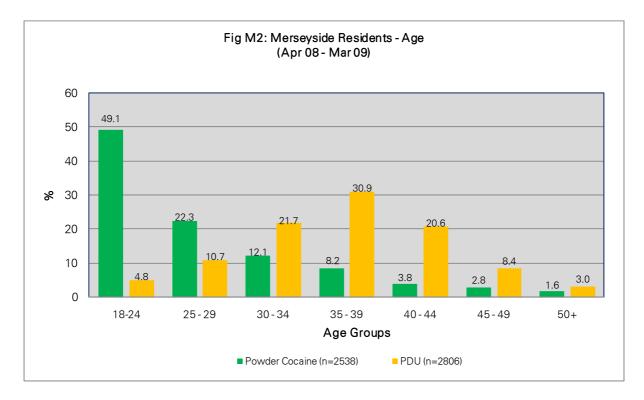
Ethnicity

Table M1: Merseyside Residents - Ethnic background (Apr 08 – Mar 09)

Ethnicity	Powder Cocaine (n=2538)		PDU (n=2806)	
Ethnicity	Number	%	Number	%
Asian or Asian British	5	0.2	3	0.1
Black or Black British	40	1.6	62	2.2
Chinese or Other Ethnic Group	6	0.2		
Mixed	44	1.7	32	1.1
White	2438	96.1	2692	95.9
Not Stated	5	0.2	17	0.6

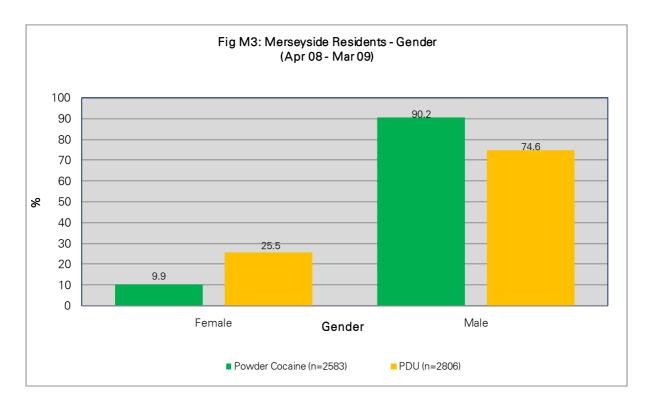
Across Merseyside the ethnic profile of the two drug groups was predominantly white – 96.1% of the powder cocaine group and 95.9% of the PDU group (Table M1).

Age



Nearly half of clients from the powder cocaine group were aged between 18 and 24 years old (49.1%). This was considerably greater than the proportion from the PDU group falling into the same age bracket (4.8%). Six in ten of the clients from the PDU group (62.9%) were aged over 35 years old compared to a much lower proportion of the powder cocaine group (16.4%) (Fig M2).

Gender



A greater proportion of clients from the powder cocaine group were male (90.2%) compared to the PDU group (74.6%) (Fig M3).

Drug Use

Table M2: Merseyside Residents - Drugs used by the powder Cocaine group (Apr 08 – Mar 09)

Drug use by powder cocaine group (n=2538)						
Drug	Daily	Weekly	Monthly	Not stated	Total	
Cocaine	207 (8.2%)	781 (30.8%)	1548 (61.0%)	2 (0.1%)	2538 (100%)	
Crack						
Heroin						
Methadone						
Cannabis	496 (19.5%)	135 (5.3%)	93 (3.7%)		724 (28.5%)	
Amphetamines	10 (0.4%)	7 (0.3%)	12 (0.5%)		29 (1.1%)	
Benzodiazepines	7 (0.3%)	2 (0.1%)			9 (0.4%)	
Ecstasy	3 (0.1%)	13 (0.5%)	34 (1.3%)		50 (2.0%)	
Subutex						
Methamphetamines						

Over six in ten (61.0%) of the powder cocaine group used the drug on a monthly basis with a further three in ten (30.8%) reporting using it weekly. Only 8.2% of clients used cocaine on a daily basis. There were a low proportion of clients from this drug group who also used

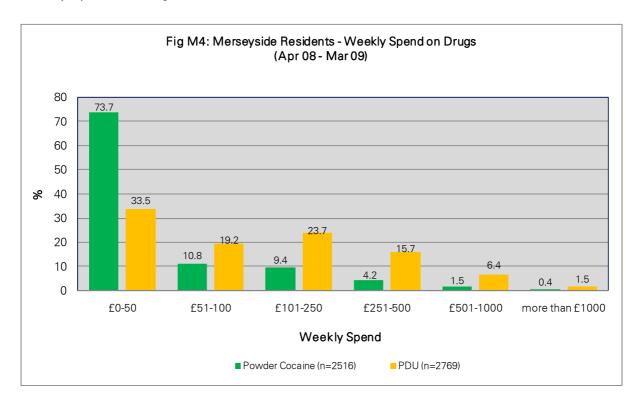
other drugs. Cannabis was the second most commonly used drug with almost three in ten clients of this group using the drug (28.5%) and the majority of these clients using the drug on a daily basis. (Table M2).

Table M3: Merseyside Residents - Drugs used by the PDU group (Apr 08–Mar 09)

Drug use by PDU group (n=2806)						
Drug	Daily	Weekly	Monthly	Not stated	Total	
Cocaine	82 (2.9%)	98 (3.5%)	87 (3.1%)		267 (9.5%)	
Crack	1175 (41.9%)	603 (21.5%)	169 (6.0%)		1947 (69.4%)	
Heroin	1894 (67.5%)	520 (18.5%)	134 (4.8%)	1 (<0.1%)	2549 (90.8%)	
Methadone	286 (10.2%)	49 (1.7%)	12 (0.4%)		347 (12.4%)	
Cannabis	121 (4.3%)	60 (2.1%)	28 (1.0%)		209 (7.4%)	
Amphetamines	8 (0.3%)	8 (0.3%)	1 (<0.1%)		17 (0.6%)	
Benzodiazepines	94 (3.3%)	24 (0.9%)	20 (0.7%)		138 (4.9%)	
Ecstasy	1 (<0.1%)		3 (0.1%)		4 (0.1%)	
Subutex	23 (0.8%)	5 (0.2%)	4 (0.1%)	1 (<0.1%)	33 (1.2%)	
Methamphetamines	2 (0.1%)				2 (0.1%)	

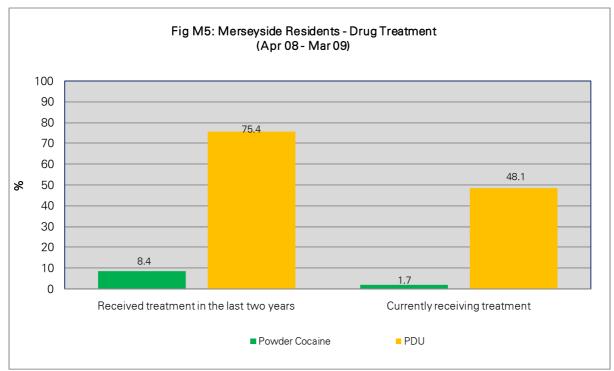
The PDU group presented a more varied drug use pattern compared to the powder cocaine group, with the greatest proportion of these clients indicating daily use of crack (41.9%) and heroin (67.5%). As small proportion of this drug group also reported using powder cocaine (9.5%) which was the fourth most commonly used drug overall (Table M3).

Weekly Spend on Drugs



The greatest proportion of both drug groups indicated that they spent up to £50 on drugs weekly but among the powder cocaine group 73.7% spent up to that amount compared to 33.5% of the PDU group. Also, nearly half of the PDU group (47.3%) reported spending over £100 a week on drugs compared to a little over a sixth of the powder cocaine group (15.5%) (Fig M4).

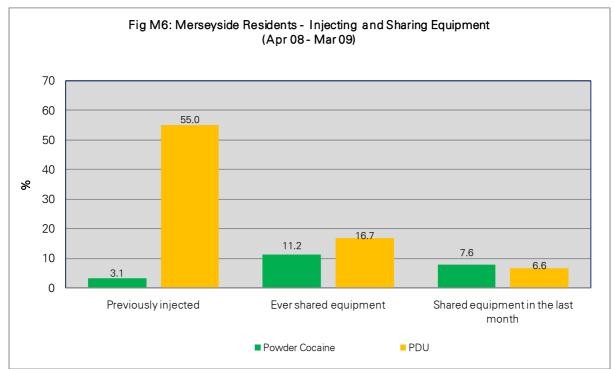
Drug Treatment



(Note: 12 individuals from the powder cocaine group did not provide information for the receiving treatment in the last two years analysis and 30 did not provide information for the currently receiving treatment analysis. 13 PDU did not provide information for the receiving treatment in the last two years analysis and 11 PDU did not provide information for the currently receiving treatment analysis.)

Across Merseyside the PDU group contained a considerably higher proportion of clients who had either received treatment in the previous two years (75.4%) or were currently receiving treatment (48.1%) compared to the powder cocaine group (8.4% and 1.7% respectively) (Fig M5).

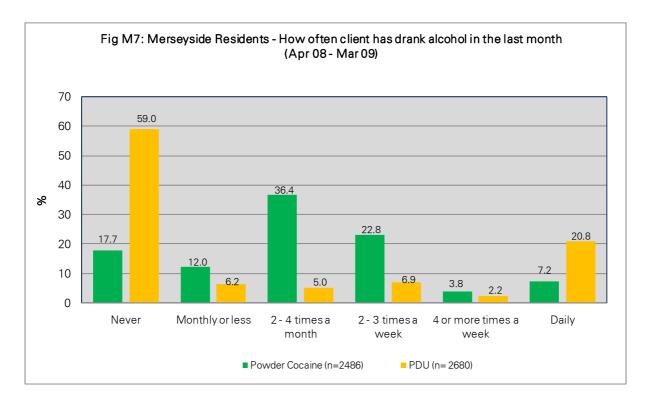
Injecting and Sharing Equipment



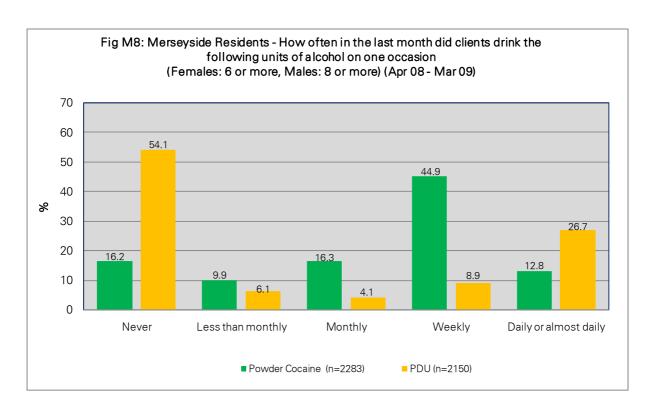
(Note: One individual from the powder cocaine group did not provide information for the previously injected analysis, two did not provide information for the ever shared equipment analysis and two did not provide information for the shared equipment in the last month analysis. 13 PDU did not provide information for the previously injected analysis, nine did not provide information for the ever shared equipment analysis and seven PDU did not provide information for the shared equipment in the last month analysis.)

Over half of the PDU drug group (55.0%) reported that they had previously injected compared to a much lower figure among the powder cocaine group (3.1%). Proportions of clients that had ever shared equipment were greater from the PDU group (16.7%) compared to the powder cocaine group (11.2%). It should be noted however that that across Merseyside a slightly greater proportion of the powder cocaine group had shared equipment in the last month (7.6%) compared to the PDU group (6.6%).

Alcohol Consumption



Over half of the PDU group assessed through DIP across Merseyside indicated that they never drank alcohol (59.0%) compared to less than a fifth of the powder cocaine group (17.7%). Less than one in ten of the PDU group (6.9%) drank alcohol 2-3 times a week in contrast to just over a fifth of the powder cocaine group (22.8%). A fifth of the PDU group (20.8%) drank alcohol on a daily basis, nearly three times the proportion of the powder cocaine group (7.2%) (Fig M7).



Among the clients that reported drinking nearly half of the PDU group reported "binge drinking" on a weekly basis (44.9%) compared to less than one in ten of the powder cocaine group (8.9%). Just over a quarter of the PDU group (26.7%) reported "binge drinking" on a daily or almost daily basis compared to one in ten of the powder cocaine group (12.8%) (Fig M8).

Offences Committed

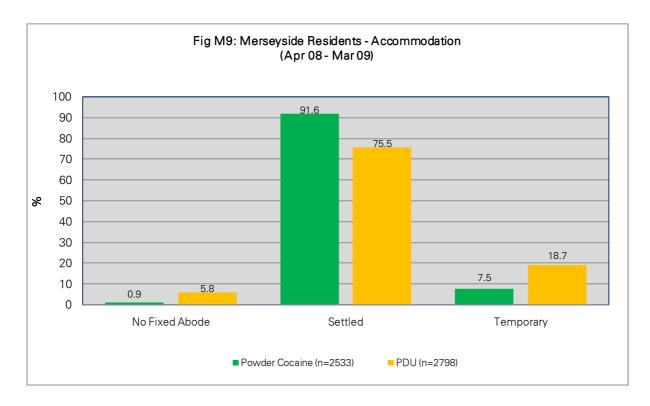
Table M3: Merseyside Residents - Offending that lead to contact with DIP (Apr 08 – Mar 09)

Offence	Total Offending Powder Cocaine (n=2517)		Total Offending PDU (n=2770)	
	Number	%	Number	%
Begging			144	5.2
Breach	42	1.7	128	4.6
Burglary	202	8.0	221	8.0
Criminal Damage	54	2.1	12	0.4
Firearms/Weapons	21	0.8	25	0.9
Fraud	41	1.6	34	1.2
Going Equipped			1	<0.1
Handling	35	1.4	54	1.9
MDA Offences	1158	46.0	524	18.9
Motoring Offences	57	2.3	17	0.6
Prostitution			19	0.7
Public Order Offences	141	5.6	44	1.6
Robbery	68	2.7	74	2.7
Shoplifting	215	8.5	1121	40.5
Theft	189	7.5	252	9.1
Theft-Car	202	8.0	72	2.6
Warrant	7	0.3	73	2.6
Wounding or Assault	223	8.9	93	3.4
Other	51	2.0	38	1.4

(Note: 57 individuals did not provide information for the offences committed analysis, 21 from the powder cocaine group and 36 from the PDU group.)

The most common group of offences committed by the powder cocaine group were MDA offences (46.0%) and a much lower proportion of the PDU group (18.9%) committed these types of offences. Other common offences committed by this drug group included wounding or assault (8.9%), theft – car (8.0%) and public order offences (5.6%) and were committed by a lower proportion of clients in the PDU group (3.4%, 2.6% and 1.6% respectively). The most common offence committed by the PDU group was shoplifting (40.5%) but this offence was committed by less than one in ten of the powder cocaine group (8.5%) (Table M3).

Accommodation



There was a greater proportion of clients from the powder cocaine group who were in settled accommodation (91.6%) compared to the PDU group (75.5%) (Fig M9).

Employment Status

Table M4: Merseyside Residents – Employment status (Apr 08 – Mar 09)

Employment Status	Powder Cocair	ne (n=2529)	PDU (n=2789)		
	Number	%	Number	%	
Economically inactive	149	5.9	466	16.7	
Pupil/student	67	2.6	5	0.2	
Regular employment	1044	41.3	105	3.8	
Unemployed	1200	47.4	2112	75.7	
Other	65	2.6	97	3.5	
Not known	4	0.2	4	0.1	

Over three quarters of clients from the PDU group were unemployed (75.7%) compared to nearly half of clients from the powder cocaine group (47.4%). There was also a large proportion of the powder cocaine group who were in regular employment (41.3%) compared to a much lower figure from the PDU group (3.8%) (Table M5).

8.1 MERSEYSIDE SUMMARY

- There was a slightly higher number of Merseyside resident PDU as powder cocaine users assessed by DIP teams in Merseyside in 08/09.
- > The vast majority of clients assessed during this time period in both drug groups were white.
- > Clients in the powder cocaine group tended to be much younger than those in the PDU group.
- A greater proportion of the powder cocaine group were male compared to the PDU group.
- ➤ The powder cocaine group tended to use powder cocaine only and this drug was mainly taken on a monthly basis. In contrast, the PDU drug 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. This drug group may also have used 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 have received treatment in the past two years.
- A greater proportion of the PDU drug group reported lifetime injecting compared to the powder cocaine group. A proportion from both drug groups had ever shared their equipment but slightly greater proportion of clients from the powder cocaine group shared their drug 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 over a quarter of the remaining clients reported problematic daily "binge drinking".
- ➤ The most commonly committed group of offences for the powder cocaine group was MDA offences with wounding or assault, theft car and public order offences also being committed 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.
- > Three quarters 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.

9.0 CONCLUSIONS AND RECOMMENDATIONS

The main aim of this report was to compare the characteristics of two different drug user groups - the powder cocaine group and the PDU group - who were Merseyside residents and had been assessed through DIP in Merseyside between April 08 and March 09. The findings from this report highlight the different profiles of these two groups of clients.

Drug Groups

Overall in Merseyside, there were a slightly greater proportion of clients assessed by DIP teams who fell into the PDU group than into the powder cocaine group. This overarching trend was consistent throughout three of the Merseyside DAAT areas with the exception of Knowsley, and St Helens. Knowsley had the greatest difference between the two drug groups as it had over twice as many powder cocaine users (68.1%) compared to PDU (28.4%). St Helens, who have traditionally reported having more PDU clients, had a slightly greater proportion of powder cocaine users (48.9%) compared to PDU (46.3%). This finding also corresponds to the 08/09 Demographics Report which illustrates that cocaine use in St Helens has increased considerably over the last two years (Cuddy & Duffy, 2009b, in press). Recommendation: Traditionally powder cocaine has not been the focus of the DIP due to the lack of evidence connecting it to acquisitive crime. The emergence of a powder cocaine using group and the relatively even split in most areas between powder cocaine users and PDU suggests that if teams wish to attempt engagement with all of these cocaine using clients considerable thought is going to need to be given to the allocation of resources. Questions about the level of benefit, both to the individual and to the community, of intervention must be weighed against the resource allocated.

Age

There was a clear difference between the two groups in terms of age profile. The powder cocaine group tended to be young with nearly half of all clients in this group in Merseyside aged between 18 and 24 years old. In contrast, the PDU drug group were mainly older with the greatest proportion of clients being over 35 years old. These findings confirm previous research undertaken in Merseyside that demonstrated that DIP clients under 25 are much more likely to use powder cocaine than their older counterparts (Cuddy & Duffy, 2008).

Recommendation: It is important for all areas 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. Systems should be in place to channel such

clients into more appropriate treatment which may need to be different to the treatment suitable for the older PDU clients. There should also be an education route for such clients should they need to continue and complete their education.

Gender

Across all areas in Merseyside clients from the powder cocaine using group were more likely to be male than their PDU counterparts. This was more evident in St Helens than any of the other areas.

Recommendation: The DIP teams in Merseyside should be aware that clients accessing services due to their powder cocaine use are likely to be male to an even greater extent than is the case among PDU clients. Whilst services must be designed with this 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 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

A clear difference emerged between the two groups with regards to patterns of drug use during the month prior to assessment. The powder cocaine group mainly used the drug on a weekly or monthly basis and a substantial minority in all areas used cannabis most often on a daily basis. Clients from the PDU drug group were slightly more likely to use to use heroin than crack but did tend to use both on a daily basis. This higher frequency of use suggests that the drug use of this group was more problematic. In all five areas relatively small proportions of PDU reported also using powder cocaine however, this was more common in St Helens than in any other area suggesting a larger crossover in the market there.

Recommendation: The frequency of powder cocaine use implies that for most clients in this group, use had not reached problematic levels. For a proportion of the clients it should also be considered whether daily cannabis use is as much of, if not a greater, issue for them and this should be addressed in treatment interventions. PDU clients also demonstrate high levels of stimulant use, most often crack, and services will need to put in place appropriate interventions for this.

Weekly Spend on Drugs

Powder cocaine using clients generally spent less on drugs per week than their PDU counterparts.

Recommendation:

Low expenditure levels combined with infrequent use outlined earlier would suggest that powder cocaine using clients are unlikely to need to commit crime to fund their cocaine use. Treatment may not have an impact on their offending rate as the links between cocaine use and acquisitive crime or indeed violent crime are not clear. Other factors are likely to play as significant a role as drug use in clients' offending and these will 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 be considered and the use of alternative points of referral investigated.

Drug Treatment

There was a large proportion of PDU in Merseyside who had previously been in treatment within the last two years as well as currently being in treatment at the time of their assessment. 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 was very low but Wirral residents in this drug group were more likely to have had treatment in the past or be in treatment currently than clients in any other area.

Recommendation: It is important for service providers to be aware that powder cocaine users are likely to 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 and Sharing Equipment

Whilst PDU clients were more likely to have injected and to have ever shared drug taking equipment than powder cocaine users, the opposite was true for the current sharing of drug taking equipment. Powder cocaine using clients were slightly more likely to have shared their equipment compared to the PDU and this was particularly the case for clients from Knowsley, Sefton and Wirral. The reduction between proportions of PDU clients having ever

shared equipment and those currently sharing may suggest that harm reduction messages are having some impact in this group. The harms of injecting are well known and information about this is highly visible in drug treatment services. However the harms associated with the sharing of bank notes and other 'snorting' equipment such as the transmission of Hepatitis C are still theoretical and information regarding these risks is not as readily available. This is likely to be the reason why the drop off between ever and current sharing in the powder cocaine group is substantially less marked as clients may see no reason to stop sharing 'snorting' equipment resulting in similar rates of current sharing between the two groups.

Recommendation: Whilst the risks are currently theoretical it would make sense for teams 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.

Alcohol Consumption

Although a greater proportion of the powder cocaine group reported high drinking levels 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. This was particularly the case for PDU from Knowsley and St Helens.

Recommendation: Service providers need to ensure that they have services in place to address "binge drinking" among the powder cocaine using group as well as potentially problematic drinking among some PDU. 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 MDA offences but also for wounding or assault, theft – car and public order offences. The first two of these offences point to a link with the night time economy. The PDU group were most likely to have been arrested for shoplifting which, as expected and in contrast to the powder cocaine group, suggests they are offending to fund their drug use.

Recommendation: DIP staff need to be aware that these two groups of clients may have different motivating factors for committing crime. These need to 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.

Accommodation

Whilst both groups were most likely to be in settled accommodation this was the case for a greater proportion of the powder cocaine group than the PDU group.

Employment Status

Clients from the powder cocaine group were equally split between being employed or being unemployed. This is in contrast to the PDU group the majority of whom were unemployed. St Helens had the highest employment rate within the powder cocaine group with Sefton having the highest unemployment rate among this group.

Recommendation: It is 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.

Analysis has revealed two relatively distinct client profiles between powder cocaine users and PDU 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
- 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 can also use powder cocaine
- 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
- may or may not have injected in their lifetime but is less likely to have ever shared drug using equipment and very unlikely to currently be sharing
- 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

REFERENCES

Cabinet Office (2004) Alcohol Harm Reduction Strategy for England.

Available at: http://www.cabinetoffice.gov.uk/strategy/work_areas/alcohol_misuse.aspx

Cuddy, K. & Duffy, P. (2009a) *Merseyside Demographic Report 07/08*. Centre for Public Health, Liverpool John Moores University.

Cuddy, K. & Duffy, P. (2009b) *Merseyside Demographic Report 08/09*. Centre for Public Health, Liverpool John Moores University. In press.

Cuddy, K. & Duffy, P. (2008) *Merseyside DIP Clients: A comparison of client characteristics* for under and over 25 years old. Centre for Public Health, Liverpool John Moores University.

Dewa, L., Regan, L. & Duffy, P. (2008) *Merseyside Demographic Report 06/07*. Centre for Public Health, Liverpool John Moores University.

Duffy, P. (2006) *Merseyside DIP Activity – Client Demographics (May – Oct 2005).* Centre for Public Health, Liverpool John Moores University.

European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) (2008a) *EMCDDA*Annual Report: The State of the Drugs Problem in Europe. Lisbon.

Available at: http://www.emcdda.europa.eu/publications/annual-report/2008

European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) (2008b) *Drug Situation: Statistical Bulletin.* Lisbon.

Available at:http://www.emcdda.europa.eu/stats08/gps

European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) (2007) Cocaine and

crack cocaine: A growing public health issue. Lisbon.

Available at: http://www.emcdda.europa.eu/html.cfm/index44746EN.html

Gossop, M., Manning, V. & Ridge, G. (2006) Concurrent use and order of use of cocaine and

alcohol: behavioural differences between users of crack cocaine and cocaine powder.

Addiction; 101, p1292-8.

Hoare, J (2009) Drug Misuse Declared: Findings from the 2008/09 British Crime Survey

England and Wales. London: Home Office.

Available at: http://www.homeoffice.gov.uk/rds/pdfs09/hosb1209.pdf

Hoare, J. & Flatley, J. (2008) Drug Misuse Declared: Findings from the 2007/08 British

Crime Survey England and Wales. London: Home Office.

Available at: http://www.homeoffice.gov.uk/rds/pdfs08/hosb1308.pdf

Home Office (2009a) Drug Interventions Programme Strategy. London: Home Office

Available at: http://drugs.homeoffice.gov.uk/drug-interventions-programme/strategy/

Home Office (2009b) DIP Key Messages. London: Home Office

Available at:

http://drugs.homeoffice.gov.uk/drug-interventions-

programme/strategy/communications/kev-messages/overarching KM

92

Home Office (2008) Drugs: Protecting Families and communities. London: Home Office

Available at:http://drugs.homeoffice.gov.uk/publication-search/drug-strategy/drug-strategy-

2008?view=Standard&pubID=531716

Hurst, A., Parker, H., Marr, A. & McVeigh, J. (2009); AACCE (non-opiate) substance use in

the North West of England: The changing profile of substance users engaged in treatment

and its implications for future provision. Centre for Public Health, Liverpool John Moores

University.

Available at: http://www.cph.org.uk/publications.aspx

McCance-Katz, E. F., Kosten, T. & Jatlow, P. (1998) Concurrent use of cocaine and alcohol is

more potent and potentially more toxic than use of either alone - a multiple dose study.

Biological Psychiatry; 44; 250-9.

National Treatment Agency for Substance Misuse (2002), Models of care for treatment of

adult drug misusers Framework for developing local systems of effective drug misuse

treatment in England. NTA: London.

Available at:

http://www.nta.nhs.uk/publications/documents/nta_modelsofcare1_2002_moc1.pdf

Pennings, E.J.M., Leccese, A.P. & de Wolff, F.A. (2002) Effects of concurrent use of alcohol

and cocaine. Addiction, 97(7): p773-783

Vitale, S. & van De Mheen, D. (2005) Illicit drug use and injuries: A review of emergency

room studies. Drug and Alcohol Dependence, 82: p1-9