



**ROCU**  
**Problem Profile**

**Profile of Mephedrone and New Psychoactive**  
**Substance Use & Supply in Wales**

Originator: Regional Intelligence Unit, Wales  
Author: Stephanie Evans  
Owner: Gill Duggan  
Date: September 2014

## Contents

|                                                  |         |
|--------------------------------------------------|---------|
| Contents                                         | 2       |
| Introduction                                     |         |
| 1. Scope                                         | 3       |
| 2. Key Findings                                  | 3       |
| Part One: Definitions                            | 4       |
| Part Two: Effects of Use                         | 4 - 5   |
| Part Three: Legislation                          | 5       |
| Part Four: Forensic Early Warning Systems (FEWS) | 5       |
| Part Five: Emerging NPS                          | 5 - 6   |
| Part Six: User Profile                           | 6 - 7   |
| Part Seven: Vulnerable Groups                    | 7       |
| Part Eight: Sources                              | 7 - 8   |
| Part Nine: Price                                 | 8 - 9   |
| Part Ten: Prevalence                             | 9 - 10  |
| Part Eleven: Seizures & Arrests                  | 10 - 12 |
| Part Twelve: Offending                           | 12 - 13 |
| Part Thirteen: High Risk Areas                   | 13      |
| Part Fourteen: Hubs Feeding Wales                | 13      |
| Part Fifteen: Related Deaths                     | 13 - 14 |
| Bibliography                                     | 14 - 16 |

## **Introduction**

Intelligence suggests that the use of Mephedrone and New Psychoactive Substances (NPS) is an ongoing issue within the South and Mid Wales Region. The purpose of this document is to help gain a better understanding of the Mephedrone and NPS markets within the southern Wales region.

## **Scope**

The profile will concentrate on the period between 2012 and 2014 with an analysis of offences, availability of Mephedrone/NPS and Mephedrone/NPS related deaths. The report uses recorded drugs offences and intelligence reports relating to Mephedrone from the Dyfed Powys, South Wales and Gwent Police Forces.

## **Key Findings**

- A year on year comparison of drug-related crime data across Dyfed Powys, South Wales & Gwent shows a general reduction in Mephedrone-related arrests and seizures for 2013/14 when compared to recent years.
- A report produced by Fiona Brookman and published by the University of South Wales in April 2014 gives an invaluable insight into the harmful side-effects of long-term Mephedrone use on the users, both physical and mental.
- Despite a reduction in reported cases of Mephedrone-related drugs offences, there continues to be supply and demand for Mephedrone and other closely related substances in southern Wales
- The Welsh Emerging Drugs & Identification of Novel Substances Project (WEDINOS) continues to evidence the varied & ever-changing nature of New Psychoactive Substances (NPS) available in Wales
- Over 77% of all branded NPS products tested by WEDINOS were shown to contain two or more substances in varying levels
- WEDINOS findings show that a brand name for any given NPS is no guarantee of consistency in the chemical content of the product, presenting the real risk of unwitting poly-drug use

## **Definitions**

### Description of Mephedrone

Mephedrone (meph, m-cat, miaow miaow) is derived from cathinone – a stimulant found in the plant *Catha edulis*. Mephedrone is available in several forms including powder, pills and capsules, and is also water soluble allowing users to inject the drug. The drug can also be snorted, swallowed and bombed (ground up, wrapped in paper and swallowed) but cannot be smoked. Mephedrone has a uniquely unpleasant odour that has variously been described as resembling stale urine, vanilla and bleach, and electric circuit boards. It can be cut with other substances so sometimes appears discoloured.

### Description of NPS

New Psychoactive Substances are mainly synthetic drugs manufactured to mimic the effects of already controlled drugs and are used mainly as recreational drugs. The majority of NPS are sold in mixtures. NPS come in the form of white, off white and other coloured powders, various shaped and coloured pills, pellets, liquids and smoking blends. The only way that anyone can be certain of their content is when they are examined by the relevant scientific analysis equipment.

## **Effects of use**

### Mephedrone

In summary users report the positive effects to be somewhere between MDMA and Cocaine with euphoria, enhanced music appreciation, elevated mood, increased energy, sociability, mental stimulation and sexual stamina commonly mentioned. Loss of appetite and weight loss are also cited as positive effects.

However, Mephedrone can over stimulate the heart, circulation and nervous system therefore causing a risk of fits. The psychological impact of the drug can have an effect very quickly and cause side effects, including psychosis, paranoia, depression, self-harm and suicidal thoughts. Mephedrone is twice as corrosive as Cocaine on the membrane/septum when snorted and collapses the vein three times faster than Heroin when injected (SWP Intelligence Bulletin 83/12).

There is strong anecdotal evidence that users can become addicted to Mephedrone. Users report a desire to re-dose and craving the drug, often to overcome the 'come down' or 'hangover' associated with its use. Users report that they quickly develop a tolerance to Mephedrone and have to increase the frequency and dosage to maintain the positive effects. This is often reported to quickly progress to uncontrolled bingeing behaviour called 'Fiending'. The desire to offset the effect of comedown and to return to the highly pleasurable effects of Mephedrone leads to this 'fiending'. In one survey over 60% of users reported using the drug for longer and in larger amounts than originally intended when they began (Wood, 2013).

Standard risks associated with frequently injecting controlled drugs apply to Mephedrone also. Very little is known about the long-term effects of the drug.

### NPS

Little evidence currently exists as to the harms that these substances may be able to cause (ACPO, 2011). Products sold under a 'branded name' often contain completely different substances and therefore, the effects of NPS cannot be known (NCA, July 2014).

In general, the most commonly reported adverse effects appear to be losing consciousness and vomiting. While these are both a cause for concern in isolation, it is important to note that the threat they pose is significantly increased when occurring *simultaneously*, due to the risk of potentially fatal asphyxiation.

## **Legislation**

### Mephedrone

Mephedrone became classified as a Class B illegal substance in April 2010 under the Misuse of Drugs Act 1971.

### NPS

NPS/‘legal highs’ are substances which produce the same, or similar effects, to illegal stimulant drugs such as Cocaine and ecstasy, but are not controlled under legislation. It is however considered illegal under current medicines legislation to sell, supply or advertise for “human consumption”. To get round this sellers refer to them as research chemicals, plant food, bath crystals or pond cleaner. A number of NPS have been controlled under the Misuse of Drugs Act 1971 often using a generic definition enabling the Government to legislate for the ‘family’ of related drugs as far as possible.

## **Forensic Early Warning System (FEWS)**

FEWS was developed in January 2011 in response to the emergence of NPS. FEWS helps to identify NPS quicker by bringing together expertise from forensic laboratories, chemical suppliers, law enforcement agencies and experts in the field in a coordinated approach to the analysis of law enforcement seizures and test purchases.

Substances are collected by forces and sent to their usual Forensic Provider (using a special FEWS Label) for examination, when collection plans are in place. The Forensic Provider will examine these substances as part of the FEWS project, at no cost to the submitting force.

## **Emerging NPS**

New and previously unseen NPS are being identified throughout Europe and the United Kingdom on a regular basis.

FEWS (Forensic Early Warning System) has identified a number of NPS including:

- AKB-48
- 25-B-NBOMe
- 4-MeO-PCP
- Critical Haze
- Sparklee
- Black Mamba

The most commonly mentioned legal highs in 2013 and 2014 were “Exodus” followed by “Pandora’s Box” and “Black Mamba”.

In 2013, 81 new psychoactive substances were notified to the EU Early Warning System, compared to 74 in 2012, 49 in 2011 and 41 in 2010. This brings the number of substances monitored to more than 350.

During 2013-2014, two new NPS (down from 10 in 2012) have been identified under FEWS which have not been previously encountered in the UK or Europe. These are mephedrone and LY2183240. Two new substances have been identified at UK level only, which are BB-22 and dichloromethylphenidate.

The EMCDDA report noted particular concern at EU level around synthetic opioids such as AH-7921, MT-45, carfentanil and ocfentanil which have been widely reported in the past two years. The ACMD has recommended the control of the synthetic opioid AH-7921 ('legal Heroin') as a Class A drug. A number of tryptamines are already controlled under UK legislation but the ACMD is recommending the definition is widened to include hallucinogenic drugs in the same group including AMT (similar effects to LSD) and 5-MeO-DALT ('rockstar'/'green beans'/'jungles').

Enquiries reveal "Jeffrey" refers to either the stimulant NPS "Posh" mixed with Mephedrone or oxidised, illicit Ephedrine. For example limited intelligence from South Wales indicates some Western BCU dealers are adding NPS to Cannabis, though it is unclear if this is the addition of chemical stimulants, hallucinogens and/or Synthetic Cannabinoids (Wilson and Holmstrom, 2014).

There is limited intelligence to suggest NPS are being used as cutting agents, although the full extent remains unknown.

## **User profile**

### Mephedrone

The majority of Mephedrone users are in the age range 18-24 and are predominantly male (RIUW, 2012). Richards (2012) states that young people are most vulnerable to Mephedrone use because they are more exposed to drugs in pubs and nightclubs. Mephedrone has been ranked as the fourth most popular drug in the 16-24 age group on the British Crime Survey.

According to the British Crime Survey 2013 – 2014 around 10.9% of respondents who had been to a nightclub four or more times in the last month were frequent drug users. This compares with 2.3% of respondents who had not visited a nightclub in the past month. Furthermore, youths are a particular high-risk group in that they are more likely than other age groups to try an unknown drug/white powder.

### NPS

The profile of the most significant number of users is broadly similar to the profile of club drug users; both NPS and club drug users are generally young males, well educated, and socially functional (ACPO, 2011). The NPS user demographic is generally seen to differ from other drugs. Those that present to health services tend to have stable jobs, relationships and accommodation and appear more likely to make the most of treatment (NCA, July 2014).

The report for the National Treatment Agency for Substance Misuse (NTASM, 2012) stated that individuals who sought treatment for NPS in 2012 were relatively young, with 56% of all adults in treatment aged 18-24. Despite the fact that the sale of such substances to minors is prohibited, the

intelligence logs have shown the use of NPS to be strongly linked to those under the age of 18. Street dealers have no qualms about supplying NPS to minors.

There are incidents of former high-harm drug users diverting to NPS, potentially due to the low purity of controlled drugs in their area (ACPO, 2011). There is some evidence to suggest that NPS are being injected by users; generally existing drug injectors as a substitute for opiates during a periods of low opiate availability/affordability (NCA, July 2014).

### **Vulnerable groups**

*Children & Young People* – influenced most by the image of Mephedrone, more likely to experiment with unknown ‘white powers’ and being actively targeted by dealers (offering tasters to school children for under £1).

*Problematic Drug Users* – intravenous Heroin users are at increased risk due to the image of Mephedrone as an aid to coming off Heroin and reducing withdrawal symptoms.

*Existing Mental Health Issues* - those already suffering with poor mental health may also be at increased risk as Mephedrone seems to exacerbate existing conditions and has been linked to a disproportionate number of suicides than other stimulants.

*Not in Education Employment or Training (NEETs)* - unemployed males and females aged 16-24 years may be most at risk of becoming Mephedrone dealers given the current state of the jobs market in many areas of Wales, particularly if they are already recreationally using drugs.

A large proportion of people using Mephedrone and NPS are not using these substances in isolation but take them alongside other controlled substances namely Valium, Cocaine, Heroin, Ketamine and Amphetamine.

### **Sources**

#### Mephedrone

Research suggests that Mephedrone was originally sold as a party drug in Israel in the early 2000’s and then distributed and used in the western world (Nutt, 2012). Mephedrone can be bought via the internet or through street dealers. Prior to being classified in 2010 it was also widely available from ‘head shops’ on the high street. However, even following the classification of Mephedrone as a Class B drug it can be easily purchased online.

Europol (2011) reported that the most common method of sourcing Mephedrone in urban areas is from friends and dealers. Even following classification of the drug it can easily be purchased online but McElrath and O’Neill (2010) reported that very few people purchased Mephedrone from online suppliers. Similarly, Brookman’s (2014) study also revealed little evidence of internet-based purchases.

‘Silk Road’, is an underground website (sometimes referred to as the ‘Amazon.com’ for illegal drugs) which provides buyers with anonymity when browsing and making online drug purchases. The site was shut down in 2013 but now apparently operates again as Silk Road 2.0.

Suppliers appear to order large quantities of Mephedrone online (mainly from China and India) which then arrive through post and parcel services (SOCA, 2012). Intelligence suggests that it is unlikely that Mephedrone is being produced in South Wales. However, the vast majority of

Mephedrone dealers appear to have a localised impact, obtaining smaller amounts frequently (rather than kilo quantities) and dealing to a network of local users.

Mephedrone suppliers often use legitimate businesses as a method to conceal their dealing activities. Pub owners, particularly in the Western Valleys of South Wales, are known to sell controlled substances including Mephedrone over the counter to their customers. Similarly, delivery drivers are known to carry and distribute drugs alongside takeaway food.

### NPS

The earliest reported form of new psychoactive substance was Ketamine in America at the start of the 1980's (EMCDDA, 2002).

NPS can be bought via the internet, at festivals, through street dealers or 'head shops' on the high street. Those selling NPS through the internet and head shops will often brand them as 'legal' or 'herbal highs' or attempt to conceal their true purpose by miss-describing them, for example as 'plant food', 'pond cleaner', 'bath salts' or 'research chemicals'. However, analysis of test purchases demonstrates they often contain Mephedrone or a wide range of other controlled drugs.

The majority of NPS are produced in China, and sometimes India, and traded via the internet. Whilst the internet is an important retail agent, particularly for larger amounts, available data suggests that at 'user' level most consumers purchase NPS through friends or traditional 'dealing' networks (NCA, July 2014).

It has been reported that students have created websites to supply legal highs nationally and through local markets (ACMD, 2011).

### **Price**

#### Mephedrone

The price of Mephedrone at street level is very similar across southern Wales, on average between £10-20 for a deal (approx. 1 gram). Frequently 2-3 gram bags can be purchased at lower prices, often £25-30. In some areas the price can be as high as £40 per gram, but it is likely that at this price the Mephedrone will be mixed with other drugs such as Cocaine or Benzocaine. Ounces can be bought across South Wales for on average £150-300 but limited information is known about the larger quantities such as kilos.

#### Price comparison with other problematic drugs

|                   |                    |                        |                            |
|-------------------|--------------------|------------------------|----------------------------|
| Cocaine           | £30-50 <b>Gram</b> | £800-1000 <b>Ounce</b> | £50,000-55,000 <b>Kilo</b> |
| Heroin            | £40-50             | £650-900               | £15,000-17,000             |
| <b>Mephedrone</b> | <b>£10-20</b>      | <b>£200-300</b>        | <b>£4,000</b>              |

Mephedrone is significantly cheaper than Heroin or Cocaine at all levels of the supply chain. Rough estimations of profitability suggest that selling Mephedrone at street level is more profitable than dealing Cocaine with the added attraction of a significantly lower initial outlay.

Intelligence suggests drugs markets are becoming increasingly "business-like" with some Mephedrone dealers charging a £20 "delivery charge". Street dealers are known to drive around in vehicles delivering the substances to their customers.



Mephedrone and NPS are also widely available to drug users in prison. It is said that a single line of Mephedrone will 'cost' one box of Amber Leaf tobacco.

### NPS

NPS products online range from £4 to £150 depending on dosage and item, in certain shops legal highs can be purchased for between £10 and £200. Some customers are known to come in and 'stock up' on a large quantity of drugs, presumably with the intention of trading the products at a higher price. Young buyers have been seen selling newly purchased drugs just two streets away from the head shop in which they were bought. Due to the age restrictions that prohibit the sale of NPS to minors, there is some suggestion of an emerging trend for nominals to make multiple legitimate purchases from head shops that they then "deal" to under age users.

Overall, prices of NPS products are very similar to prices of Mephedrone. In much the same way as Mephedrone, NPS can be bought as a gram/bag (£10) or several grams/3 bags at a reduced rate (£25).

There is data available that shows that some significantly lower priced items sold online contained the same NPS as the more expensive samples. It is possible that vendors expect customers to make the assumption that high price equals high quality, thereby enabling maximum profit.

### **Prevalence**

#### Mephedrone

Areas of high prevalence in 2012 and 2013 were Llanelli, Swansea, Bridgend, Cardiff and Newport. Police records do not show that this problem has began to impact on North Wales (Chadd, 2013).

Mephedrone use was first recorded in the British Crime Survey England and Wales in 2010-2011. Mephedrone usage decreased in 2012-2013. 0.5% of adults reported using Mephedrone compared to 2011-2012 when an estimated 1.1% used it.

The British Crime Survey 2013 – 2014 revealed that 1.9% of people (aged 16-24) have admitted to using Mephedrone at least once in their lives. This is a slight increase compared to 1.6% of people in 2012 – 2013.

Including Mephedrone, the proportion of adults (aged 16 to 59) taking any illicit drug in the last year was 8.8% in 2013/14 i.e. no different to the proportion when excluding Mephedrone (Home Office, 2014) which suggests that Mephedrone popularity is decreasing dramatically.

The British Crime Survey 2013 – 2014 revealed that less than 10% of adults (aged 16 to 59) used Mephedrone more than once a month compared to over 80% of young adults used the drug less than once a month.

Between April 2014 and June 2014 the Welsh Emerging Drugs & Identification of Novel Substances Project (WEDINOS) received 641 samples of NPS (this represented a 15% increase from the last quarter). 77% of all branded psychoactive products were found to contain at least two substances following analysis; with 34% containing at least three substances. Out of the 7 Welsh health boards the Anuerin Bevan locality (Blaenau Gwent, Newport, Caerphilly, Torfaen and Monmouthshire) provided the most samples. Mephedrone was the seventh most commonly identified substance amongst the samples.

Despite the prevalence of Mephedrone in Western, Northern and Central BCU's in South Wales, in the main little is known in relation to the supply structure above that of end-users and their immediate suppliers.

#### NPS

Within the UK data relating to the use of NPS is relatively new, with Ketamine and Mephedrone only being included for the first time on the 2010 – 2011 British Crime Survey and the 2012 report for the National Treatment Agency for Substance Misuse (NTASM, 2012).

In 2011 The European Commission interviewed 12,000 randomly sampled young people from EU member states and it was found that 5% of the whole young person sample had used NPS. In relation to the UK, it was found that 8% of the young people had used NPS compared to 0.8% in Italy, 1% in Finland and 1.6% in Greece.

19.2% of NPS samples collected by FEWS in 2013-14 contained controlled drugs. In some cases more than one substance was identified in each sample. Some samples contained cutting agents such as caffeine, lidocaine and benzocaine. Of the samples analysed that contained NPS, about 91% were identified as mixtures of either two (61%) or three (30%) different active components.

Between April 2014 and June 2014 WEDINOS received 641 samples of NPS (this represented a 15% increase from the last quarter). 77% of all branded psychoactive products were found to contain at least two substances following analysis; with 34% containing at least three substances. Out of the seven welsh health boards the Anuerin Bevan locality (Blaenau Gwent, Newport, Caerphilly, Torfaen and Monmouthshire) provided the most samples.

#### **Seizures of Mephedrone & Related Arrests**

##### Dyfed Powys

Crime data reveals that the total amount of Mephedrone seized within the Dyfed Powys force area during the period 1 April 2014 to 1 August 2014 has decreased from approximately 1.39kgs to 0.5kg when compared to the same period last year. 84% (472g) of the Mephedrone seized during the reporting period has been in Carmarthenshire, the remaining being seized from Powys (59 grams) and Pembrokeshire (13 grams).

| Area            | Apr '13 to Aug '13 | Apr '14 to Aug '14 | % Change |
|-----------------|--------------------|--------------------|----------|
| EASTERN         | 107                | 50                 | -53.27%  |
| Carmarthenshire | 90                 | 37                 | -58.89%  |
| Powys           | 17                 | 13                 | -23.53%  |
| WESTERN         | 15                 | 13                 | -13.33%  |
| Ceredigion      | 1                  | 4                  | 300.00%  |
| Pembrokeshire   | 14                 | 9                  | -35.71%  |
| Grand Total     | 244                | 126                | -48.36%  |

**NOT PROTECTIVELY MARKED**

Data supplied in the Dyfed Powys Mephedrone profile from August 2014 shows a reduction of 48.36% in the number of Mephedrone related drug offences when comparing like periods for 2013 and 2014. All but one area showed a reduction in offences, with the largest reduction being in Carmarthenshire.

South Wales

Occurrence data reveals that the total amount of Mephedrone seized within the South Wales force between the period August 2013 and July 2014 decreased by 34% compared to the same period in 2012 and 2013.

| BCU's       | Aug 12 to Jul 13 | Aug 13 to Jul 14 | % Change |
|-------------|------------------|------------------|----------|
| Central     | 111              | 82               | -26.13%  |
| Eastern     | 45               | 23               | -48.89%  |
| Northern    | 111              | 93               | -16.22%  |
| Western     | 163              | 84               | -48.47%  |
| Grand Total | 430              | 282              | -34.42%  |

Seizures in Eastern and Western BCU's decreased by nearly half in 2013-2014 compared to 2012-2013. Northern and Western BCU's also show a decline regarding the recorded seizures. Northern BCU demonstrates the smallest percentage decrease of seizures year on year.

Overall, much like Dyfed Powys Police Force, the occurrence data reveals that the seizures related to Mephedrone in the South Wales force area have decreased dramatically in 2013 – 2014 compared to 2012 – 2013.

Gwent

Data obtained for Gwent Police shows that there was a 63% reduction in the amount of Mephedrone seized in Gwent when comparing the data for 2012/13 with that of 2013/14. There were 58% fewer items seized in 2013/14 compared to 2012/13 and the amount seized reduced from 1.54kg down to 569g in total.

| LPU           | Apr '12 to Mar '13 | Apr '13 to Mar '14 | % Change |
|---------------|--------------------|--------------------|----------|
| Blaenau Gwent | 57                 | 3                  | -94.74%  |
| Caerphilly    | 62                 | 37                 | -40.32%  |
| Monmouthshire | 41                 | 19                 | -53.66%  |
| Newport       | 101                | 72                 | -28.71%  |
| Torfaen       | 27                 | 23                 | -14.81%  |
| Grand Total   | 288                | 154                | -46.53%  |

Overall results for Gwent show a 46.53% reduction overall in the number of arrests relating to Mephedrone. Reductions were noted across all of the LPUs, with the most significant occurring in Blaenau Gwent and Monmouthshire.

**NOT PROTECTIVELY MARKED**

## **Offending**

### Mephedrone

In 2011 – 2012 drug related offences involving Mephedrone increased by 83% in Wales (289 to 530). In 2012 – 2013 a further sharp increase of 165% was noted (Chadd, 2013).

Whilst there are numerous anecdotal accounts of Mephedrone-induced aggression and violence (Daly, 2012) the empirical research base is sparse. Van Hout and Bingham (2012) studied the patterns of use and perceived consequences of Mephedrone based head shop products in Ireland. The study analysed 11 Mephedrone users who all had a history of injecting and poly drug use. Mephedrone users stated that Mephedrone heightened the sense of paranoia that in turn, led to elevated levels of violence and participation in criminal acts. Mephedrone users also reported acting violently when they were trying to secure further supplies of the drug for the next dose (Van Hout and Bingham, 2012).

Increased aggression and violent behaviour has also been reported on numerous occasions often linked to the 'come down' rather than the 'high' (Brookman, 2014). Over half of those interviewed in Brookman's (2014) survey, which covered an area that took in both South Wales and Gwent Police Force areas, had become involved in acquisitive crime (including shoplifting, burglary, vehicle theft and street robbery). Intelligence logs from South Wales and Gwent Police Forces over the last 12 months support this information. Three-quarters of those interviewed had committed acts of violence connected in some way to their use of Mephedrone. Four somewhat distinct violence-Mephedrone links were discerned: (i) violence when 'high'; (ii) violence associated with comedown; (iii) economic compulsion and violence and (iv) violence associated with purchasing and dealing Mephedrone. Importantly, regarding the first two categories, interviewees were very clear in their own minds that Mephedrone had a direct and significant influence on them becoming involved in acts of violence. This, they reasoned, must be the case as they were either not usually violent or, would not normally have been violent in relation to such trivial triggers.

Key findings from expert practitioners who work with users in many regards mirrored and confirmed the findings from the users (Brookman, 2014). Many practitioners had been on the receiving-end of aggressive and violent behaviour by Mephedrone-using clients, most of whom had not exhibited such tendencies in the past. Many had been verbally threatened and several had been physically assaulted. Practitioners also reported a range of acquisitive crimes committed by their clients specifically linked to their abuse of Mephedrone and the necessity to fund their increased use of this highly addictive drug.

All Southern Wales forces report incidents of domestic disturbances or assaults mainly involving youths who were Mephedrone users. A number of assaults across the region can be linked to Mephedrone use, often in combination with alcohol or the night-time economy. In several cases the offenders have had no previous history of violence (Chadd, 2013).

Users who had injected or snorted Mephedrone were prone to being more aggressive and violent, compared to users who swallowed or bombed the drug (Daly, 2012).

### NPS

NPS markets encompass a large number of users across almost all demographics of society. The impact of NPS usage therefore also poses a significant threat to the Force area; Anti-Social Behaviour (particularly linked to younger users), the often blatant dealing and using of these drugs and the associated risks to mental and physical health all have a profound effect on communities. (Wilson and Holmstrom, 2014).

At this time, there are no known Organised Crime Groups concerned in the supply of NPS in the South Wales area (Wilson and Holmstrom, 2014). The rise in popularity of NPS, particularly Synthetic Cannabinoids, is undoubtedly an issue within the SWP force area. The existing widespread and established drugs market and the supply chains, the low risk of penalties, the inability to identify usage via drug testing, the ease at which they can be purchased at low cost and the misguided belief that they are “safe”, all make NPS appealing to many demographics within society and relatively easy to get hold of.

Whilst much NPS trade is in small amounts, trafficking and supply sometimes also involves organised crime. Criminals involved in NPS activity specifically are often relatively unknown to UK law enforcement, score low on OCGM and receive limited attention (NCA, July 2014).

### **High risk areas**

Areas of higher prevalence of Mephedrone offences appear to correlate primarily with rural areas or urban areas of higher deprivation. It is possible that Mephedrone is more popular in rural areas simply due to a lack of an established class A market. In more deprived urban areas (e.g. some areas of Swansea, Bridgend or the Valleys) the drug is likely to be more attractive to both recreational and problematic drug users as it is cheaper and better quality than available Cocaine and Heroin. The British Crime Survey 2013 – 2014 showed that 4.5% of adults who lived in very deprived areas were more frequent drug users compared with those who lived in the least deprived areas (2.3%).

Mephedrone can be easily sourced via the internet/postal systems, so normal Class A drugs supply networks are not needed to source the drugs. In more deprived urban areas (e.g. some areas of Swansea) the drug is likely to be more attractive to both recreational and problematic drug users as it is cheaper and better quality than available class A drugs such as Cocaine and Heroin.

### **Hubs feeding Wales**

Bristol, Liverpool, Manchester, Cardiff, Newport & Swansea are the principal hubs identified for supply throughout southern Wales.

Even with limited intelligence the hubs tend to reflect the established Class A hubs. Dealers are likely to be picking up other Class A drugs alongside Mephedrone from these hubs.

### **Related deaths**

#### Mephedrone

In the UK between September 2009 and August 2011 there were a total of 60 confirmed and 125 suspected Mephedrone-associated fatalities identified. Two of these deaths occurred in Wales. 13 of the confirmed deaths resulted from suicide by hanging, which is significantly higher than with other stimulant drugs.

On 2 July 2013 Sarah Mayhew, a teacher from Newport, died after taking a cocktail of drugs, including Mephedrone and became the first recorded Mephedrone death in Gwent.

On 30 December 2013 Rhys Trimby from Crumlin died after taking Mephedrone with alcohol.

NPS

Since 2005, NPS have been attributed to 70 deaths in the UK (NPS conference, 2014).

The number of deaths related to Mephedrone and NPS is extremely difficult to ascertain as there is a significant delay between a death occurring and the coroner's findings being released. Previous research surrounding Mephedrone/NPS related deaths shows us that deaths have occurred due to poly drug use.

## **Bibliography**

ACMD, 2011. *Consideration of the Novel Psychoactive Substances ('Legal Highs')*. Advisory Council on the Misuse of Drugs [online]. Available at:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/119139/acmdnps2011.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/119139/acmdnps2011.pdf)

Angelus Foundation and Solve It, 2014. Findings from the New Psychoactive Substances Conference 2014 [online]. Available at:

<http://www.cjsevents.co.uk/files/eventdownloads/NPS%20report%20FINAL.PDF> [Accessed 19 August 2014]

Association of Chief Police Officers, 2011. Guidance on Policing New Psychoactive Substances Including Temporary Class Drugs [online]. Available at:

<http://www.acpo.police.uk/documents/crime/2012/CBADrugsPsychoactiveNov2011.pdf> [Accessed 18 August 2014]

Brookman, F., 2014. *The Links Between Mephedrone Use, Violence and other Harms in South Wales*. Centre for Criminology, University of South Wales.

Chadd, A., 2013, 'Mephedrone emergence in southern Wales', presentation.

Claridge, H., Corkery, J, Goodair, C., Loi, B. And Schifano, F., 2013. *Drug-related deaths in the UK: January – December 2012. Annual Report 2013* [online]. Available at:

[http://www.sgul.ac.uk/research/projects/icdp/our-work-programmes/pdfs/drd\\_ar\\_2013.pdf](http://www.sgul.ac.uk/research/projects/icdp/our-work-programmes/pdfs/drd_ar_2013.pdf) [Accessed 20 August 2014]

Daly, M., 2012. *Drone Strikes* [online]. Available at:

<http://www.drugscope.org.uk/Resources/Drugscope/Documents/PDF/Publications/StreetDrugTrendsSurvey.pdf>. [Accessed 30 August 2014]

EMCDDA, 2002. *Annual Report on the State of the Drugs Problem in the European Union and Norway*. Lisbon: EMCDDA.

European Monitoring Centre for Drugs and Drug Addiction, 2014. *European Drug Report. Trends and Development* [online]. Available at:

[http://www.emcdda.europa.eu/attachements.cfm/att\\_228272\\_EN\\_TDAT14001ENN.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_228272_EN_TDAT14001ENN.pdf) [Accessed 21 August 2014]

Europol, 2010. *Europol-EMCDDA Joint report on a new psychoactive substance: 4-methylmethcathinone* [online]. Available at:

<http://www.emcdda.europa.eu/html.cfm/index132196EN.html> [Accessed 30 August 2014]

Home Office, 2013. *Annual Report on the Home Office Forensic Early Warning Systems (FEWS). A System to Identify New Psychoactive Substances in the UK* [online]. London: Home Office.

Home Office, 2014. *Annual Report on the Home Office Forensic Early Warning Systems (FEWS). A System to Identify New Psychoactive Substances in the UK*. London: Home Office.

Home Office, 2013. *Drug Misuse: Findings from the 2012 to 2013 Crime Survey for England and Wales*. London: Home Office.

Home Office, 2014. *Drug Misuse: Findings from the 2013/2014 Crime Survey for England and Wales*. London: Home Office.

McElrath, K and O'Neill, C., 2010. 'Experiences with mephedrone pre- and post-legislative controls: Perceptions of safety and sources of supply', *International Journal of Drug Policy*. 22 (2), p120-127.

NTASM, 2012. *Club Drugs: Emerging Trends and Risks*. National Treatment Agency for Substance Misuse [online]. Available at: <http://www.nta.nhs.uk/uploads/clubdrugsreport2012%5B0%5D.pdf>. [Accessed 15 September 2014]

Nutt, D., 2012. "Meow Meow" - should mephedrone have been banned? In: *Drugs without the hot air*. Cambridge: UIT Cambridge Ltd.

Richards, C., 2012. *An audit on the range of drugs taken by remand prisoners prior to entering HMP Swansea (May 2012-July 2012)*. HMP Swansea.

RIUW., 2012. *Profile of Mephedrone Use and Supply in Wales (Sanitised for Partner Agencies)*. Wales: Regional Intelligence Unit Wales.

Scrutiny Committee for Learning, Caring and Leisure, 2013. *Young People's Substance Misuse Service Report* [online]. Available at: <http://www.newport.gov.uk/stellent/groups/public/documents/report/cont717354.pdf> [Accessed 21 August 2014]

The Government Response to the Twelfth Report from the Home Office Committee Session 2013-14, 2014. *Drugs: new psychoactive substances and prescription drugs* [online]. Available at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/307865/New\\_pschoactive\\_substances\\_and\\_prescription\\_drugsPRINT.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/307865/New_pschoactive_substances_and_prescription_drugsPRINT.pdf) [Accessed 20 August 2014]

Van Hout, M.C . & Bingham, T., 2012. 'A Costly Turn On: Patterns of use and perceived consequences of mephedrone based head shop products amongst Irish injector', *International Journal of Drug Policy*. 23 (3): 188-197.

WEDINOS, 2014. *WEDINOS Quarterly Newsletter. Philtre Bulletin: Issue 3 April – June 2014*.

Williamson, D., 2013. Legal high 'epidemic' calls for an overhaul of legislation, parliamentary committee warns [online]. Available at: <http://www.walesonline.co.uk/news/wales-news/legal-high-epidemic-calls-overhaul-6433174> [Accessed 20 August 2014]

Wilson P., and Lloyd., D., 2014, *Problem Profile: Head Shops and Legal Highs (sanitised partner version)*. South Wales: Specialist Crime.

#### **Websites**

[www.acpo.police.uk](http://www.acpo.police.uk)

[www.bbc.co.uk](http://www.bbc.co.uk)

[www.chaste.org.uk](http://www.chaste.org.uk)

[www.cps.gov.uk](http://www.cps.gov.uk)

[www.crimestoppers-uk.org](http://www.crimestoppers-uk.org)

[www.emcdda.europa.eu](http://www.emcdda.europa.eu)

[www.ind.homeoffice.gov.uk](http://www.ind.homeoffice.gov.uk)

[www.nationalcrimeagency.gov.uk](http://www.nationalcrimeagency.gov.uk)

[www.pentameter.police.uk](http://www.pentameter.police.uk)



**NOT PROTECTIVELY MARKED**

[www.senedd.assemblywales.org](http://www.senedd.assemblywales.org)

[www.soca.gov.uk](http://www.soca.gov.uk)

[www.south-wales.police.uk](http://www.south-wales.police.uk)

[www.tarianrocu.org.uk](http://www.tarianrocu.org.uk)

**NOT PROTECTIVELY MARKED**