

Introduction

Trends in the supply of and demand for illicit drugs can be determined by examining data on patterns of use, prices and purity. For this 1999–2000 *Australian Illicit Drug Report*, as for previous ones, the Bureau has used unit record data provided by the State, Territory and Commonwealth police services, aggregating and analysing the material to develop a national picture.

A number of factors do, however, limit the Bureau's ability to produce a comprehensive, reliable assessment based on the data supplied:

- lack of uniformity in both recording and storing data on illicit drug arrests and seizures across all States and Territories;
- problems with quality control, resulting in the absence of essential information from some records;
- differences in applying a uniform counting methodology in all jurisdictions;
- differences in definitions of consumer and provider offences across jurisdictions;
- differences in the way drugs and offences may be coded;
- inadequate drug identification.

Interpreting the statistics

Despite the limitations of the current data set, the *Australian Illicit Drug Report 1999–2000* provides the best collection of arrest and seizure statistics available in Australia. Care should, however, be taken when comparing and interpreting the statistics, and what follows should be borne in mind.

Recording and storage methods

At present, law enforcement agencies record their illicit drug arrests and seizures in differing ways, and this presents difficulties when aggregating and comparing data. There are disparities in the level of detail recorded for each offence, in the methods used to quantify the seizures, in the way offence and seizure data are extracted, and in the way counting rules are applied.

Quality control

Missing, incomplete and non-specific information relating to drug seizures makes it impossible to calculate precisely the quantity of each drug type seized. It is thus difficult to analyse trends on a comparative basis across a number of years.

In 1998–99, for the first time in several years, South Australia Police provided seizure data extracted manually from major operational databases; the service was unable to provide this information for 1999–2000.

Counting methodology

The Bureau has used the following counting methodology to develop a count of offenders by drug type.

- Where a person has been charged with multiple consumer or provider offences for a particular type of drug, that person is counted as only one consumer or provider of that drug.
- Where consumer *and* provider charges for a particular drug type have been laid, the provider charge takes precedence and the person is counted only as a provider of that drug.
- A person who has been charged in relation to multiple drug types is counted as a consumer or provider for each drug type.
- A person is counted on each separate occasion that he or she is charged.

Not all jurisdictions apply this counting methodology, however, and records relating to additional charges for the same drug must be removed from some data sets. A more rigorous application of the methodology to the 1999–2000 data may have resulted in a reduction in the number of offences recorded for both New South Wales and Victoria.

Consumers and providers

Offenders are classified as consumers or providers to differentiate people who have been apprehended for trading in, as opposed to using, illicit drugs. Those charged with supply-type offences—for example, importation, trafficking, selling, cultivation and manufacture—are classed as providers. Those charged with user-type offences—for example, possessing or administering drugs for their own use—are classed as consumers.

In some cases the jurisdiction responsible for the data allocates consumer and provider codes. In other cases the Bureau applies the codes, using information about the type of offence committed. Further, there are some differences in the methodologies the jurisdictions use for applying consumer and provider codes; for example, in some States the quantity of the drug involved determines whether an offence is regarded as a consumer or a provider offence.

Drug identification and coding

Not all suspected drug seizures are scientifically analysed to establish the precise nature of the drug. In some cases, only seizures of a predetermined weight or seizures that are the subject of a 'not guilty' plea are scientifically analysed. All other seizures remain recorded as they were by the investigating officer, without further qualification. The officer usually carries out a narcotics ('narco') test.

There are also differences between jurisdictions in the classifications used to code drug types: this might result in inconsistencies in the treatment of some drugs.

Data sources

Three sources of drug statistics are used: offence and seizure data; drug purity data; and data on drug prices.

Offence and seizure data

Offence and seizure data were supplied by

- the New South Wales Police Service
- Victoria Police
- the Queensland Police Service
- the Western Australia Police Service
- South Australia Police (offence data only)
- Tasmania Police
- Northern Territory Police, Fire and Emergency Services
- the Australian Federal Police

Drug purity data

Data on drug purity levels were supplied by State and Territory forensic laboratories and the Australian Forensic Drug Laboratory in Sydney. Figures for Victoria, Queensland, Northern Territory, New South Wales and the Australian Capital Territory represent the purity level of drugs seized by police during the relevant quarter. Figures for South Australia, Western Australia, Tasmania and those supplied by the Australian Forensic Drug Laboratory represent the purity level of drugs received at the laboratory during the relevant quarter. The time between the date of seizure by police and the date of receipt at the laboratory can vary from a few days to several months.

Data on drug prices

Data on prices for illicit drugs—as shown in Tables 10.17 to 10.21—were collected quarterly from each of the police services and are based on information supplied by covert police units and police informants. Other price data were taken from studies of drug-using populations in specific localities: these may differ slightly from police prices; any differences are discussed in the relevant chapters.

Explanatory notes

The following definitions apply to terms used in this report.

Arrest: ‘Arrest’ incorporates all recorded law enforcement action against a person for suspected unlawful involvement in drugs. It incorporates enforcement action by way of arrest, summons, cannabis expiation notice in South Australia, simple cannabis offence notice in the Australian Capital Territory, drug infringement notice in the Northern Territory, and ‘notice to appear’ in Queensland. Some charges may subsequently have been dropped or the defendant may have been found not guilty.

Seizure: ‘Seizure’ refers to the confiscation by a law enforcement agency of a quantity of an illicit drug or a regulated drug being used or possessed unlawfully, whether or not an arrest is made in conjunction with that confiscation.

The amount of drug seized may be recorded by weight, volume, linear measurement or as a unit count (eg. number of tablets, plants or bags). The method of estimating the amount of drug seized varies from State to State and also varies within the jurisdictions. For example seizures of amphetamine in tablet form may be weighed or counted, similarly, seizures of cannabis plants may be weighed, counted or measured.

The seizures presented in Table 10.11 include only those seizures for which a drug weight was recorded. It undercounts both the number of seizures and the amount of drug seized for all drug types. Amphetamine and cannabis data are most likely to be affected by the variety of measurement methods and these figures should be treated with caution when making comparisons between States or over time. This table includes seizures by the AFP and State police.

The statistics provided by the AFP that relate to drug seizures in the ACT have been sourced from the PROMIS (Police Real-Time On-Line Management Information System) database. These statistics may differ from those published elsewhere for the same period due to time delay issues associated with the return of results from the Analytical Laboratory and the procedures for updating relevant records.

Heroin and other opioids: ‘Heroin and other opioids’ includes heroin, morphine, opium, codeine, methadone, methaqualone, methorphan and pethidine.

Cocaine: ‘Cocaine’ includes cocaine, coca leaf, coca paste and crack.

Amphetamine-type substances: ‘Amphetamine-type substances’ includes amphetamine; methamphetamine; 3,4-methylenedioxymethamphetamine (MDMA—commonly known as ‘ecstasy’); 3,4-methylenedioxyethylamphetamine (MDEA); 3,4-methylenedioxyamphetamine (MDA); dimethoxyamphetamine (DMA); paramethoxyamphetamine (PMA); crank; and ice.

Cannabis: ‘Cannabis’ includes cannabis plant, leaf, resin, oil, seed and all other forms.

Hallucinogen: ‘Hallucinogen’ includes LSD, mushroom (psilocybin), dimethoxy-phenethylamine and mescaline.

Steroid: ‘Steroid’ includes anabolic and androgenic steroids such as testosterone, nandrolone and stanazolol.

Other drugs: ‘Other drugs’ includes phencyclidine (PCP, or angel dust), diazepam, clenbuterol, etoxerdine, etorphine, lignocaine, benzocaine, pentazoc, dothiepin, flunitrazepam, other prescription drugs, and any drug not included in the other categories.