

Interim Findings from Release's Coronavirus Drug Purchases Impact Survey & Drug Market Monitoring Network

# Drugs in the Time of COVID

The UK Drug Market Response to Lockdown Restrictions

**Release**  
Drugs, The Law & Your Rights

# Release

The national centre of expertise on drugs and drugs law - providing free and confidential specialist advice to the public and professionals. The organisation campaigns directly on issues that impact on our clients - it is their experiences that drive the policy work that Release does. Release believes in a just and fair society where drug policies should reduce the harms associated with drugs, and where those who use drugs are treated based on principles of human rights, dignity and equality.

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# Key Findings

Findings are based on 2,621 responses to Release's 'Coronavirus Drug Purchases Impact Survey' received between the 9th April 2020 and the 17th September 2020 (inclusive). Responses capture drug purchases made in anticipation of and during the **first UK national lockdown**, as well as purchases made during the easing, and eventual lifting, of this first national lockdown. Individuals aged 18 and over, residing in the UK, were eligible to complete the online survey and respondents were asked to describe a recent **drug purchase**.

- The majority of respondents did not report finding a **supplier, or a desired drug**, to be more difficult when comparing their experiences to before the start of the COVID-19 pandemic. However, difficulties in finding a supplier, and a desired drug, were more often reported as the first national lockdown *eased and lifted* – an observation consistent with supply shortages.
- More than 1 in 10 purchases were made on the **darknet**. Of these purchases, 13% had not previously used the darknet to buy drugs, and over a quarter of the sample stated that they planned to use the darknet to buy drugs if necessary, signalling a shift to darknet markets that may have been prompted by the pandemic.
- Reports of **price(s)** being higher than they were prior to the pandemic were more frequent than reports of prices being the same or lower. Higher prices were more often reported as the first national lockdown *eased and lifted* – an observation consistent with supply shortages.
- The majority of respondents reported that the **purity** of their purchase remained the same (and for some, actually increased). This is consistent with suppliers responding to drug shortages by increasing prices and perhaps reducing deal-sizes, as opposed to using adulterants to bulk out products.
- Purchases of **cannabis products** were most commonly reported across all periods of the pandemic (7 in 10 purchases overall), as expected. We found relatively infrequent purchases of MDMA/ecstasy, and other drugs associated with going out/partying - consistent with fewer opportunities to socialise related to pandemic-related restrictions.
- In connection to almost two-thirds (62%) of drug purchases made during lockdown, respondents reported that their **suppliers** adhered to government-advised **social distancing** measures. There is evidence that some suppliers also adopted additional measures, similar to those adopted by licit markets (for example, accepting card payments and disinfecting cash), in order to further prevent virus transmission.
- More respondents reported that their drug **use** had increased, rather than decreased or stayed the same, since the start of the pandemic.
- When comparing their experiences to *before* the pandemic, more respondents reported increased contact with the **police** than reduced, or the same level of, contact with police.
- When comparing their experiences to *before* the pandemic, more respondents reported experiencing increased **withdrawal** symptoms, increased non-fatal **overdoses**, and increased injection **equipment-sharing**, than reduced, or the same level of, these harms.

# Introduction

In the same way that the COVID-19 pandemic has profoundly impacted all aspects of our lives, it is reasonable to expect that with lockdowns and global restrictions on movement, the drug market will also be impacted.<sup>1</sup> The European Monitoring Centre for Drugs and Drug Addiction has stated that there is “a critical need to investigate the impact of these developments on drug markets in order to identify changes that may require an immediate policy or operational response... and to learn lessons about how we might better anticipate emerging threats in the future”<sup>2</sup>

The availability of controlled drugs - whether bought via online platforms or via face-to-face transactions - will likely be compromised by COVID-19, particularly where those drugs are transported across borders.<sup>3</sup> In anticipation of possible drug shortages, some people who use drugs may ‘stockpile’ their drugs of choice; contributing further to potential shortages.<sup>4</sup> Given a rapid shift to online purchasing of licit goods during the pandemic, we might expect a similar shift in respect to drug purchasing behaviour, with an increase in darknet purchasing.<sup>5</sup>

Since the beginning of the first national coronavirus lockdown, Release has operated a public, online survey designed to monitor how people are buying their drugs. The purpose of this survey, which is open to anyone residing in the UK over the age of 18, is to determine the impact that the COVID-19 pandemic, and corresponding restrictions, have had on buying illegal substances. Release also set up a national ‘Drug Market Monitoring Network’, made up of people who use drugs, harm reduction and recovery activists, as well as people working on the frontline, who continue to regularly report on developments in their local drug markets during the pandemic.<sup>i</sup> Qualitative feedback from the Drug Market Monitoring Network will be used where appropriate to contextualise quantitative findings from the survey.

In May 2020, Release updated Vice on survey results less than 2 months into the first national coronavirus lockdown. We noted that the market had remained relatively stable, but we predicted that we would see more change over the coming months, given that disrupted trade routes and production take time to impact destination markets (like the UK).<sup>6</sup>

In this current paper, we present findings from the 2,621 responses received between the survey’s launch on the 9th April 2020 and the 17th September 2020 (inclusive); which capture drug purchases made *in anticipation* of and *during* the first national lockdown, as well as purchases made during the *easing*, and eventual *lifting*<sup>ii</sup>, of the first national lockdown.

In Anticipation	Purchases made <b>in anticipation</b> of the first national lockdown: <i>Purchases before 23rd March 2020</i>
During	Purchases made <b>during</b> the first national lockdown: <i>Purchases between 23rd March - 10th May 2020</i>
Eased	Purchases made when the first national lockdown <b>eased</b> : <i>Purchases between 11th May - 4th July 2020</i>
Lifted	Purchases made when the first national lockdown was <b>lifted</b> across most of the UK: <i>Purchases between 5th July - 17th September 2020</i>

i Reports from the ‘Drug Market Monitoring Network’ are also shared with Public Health England

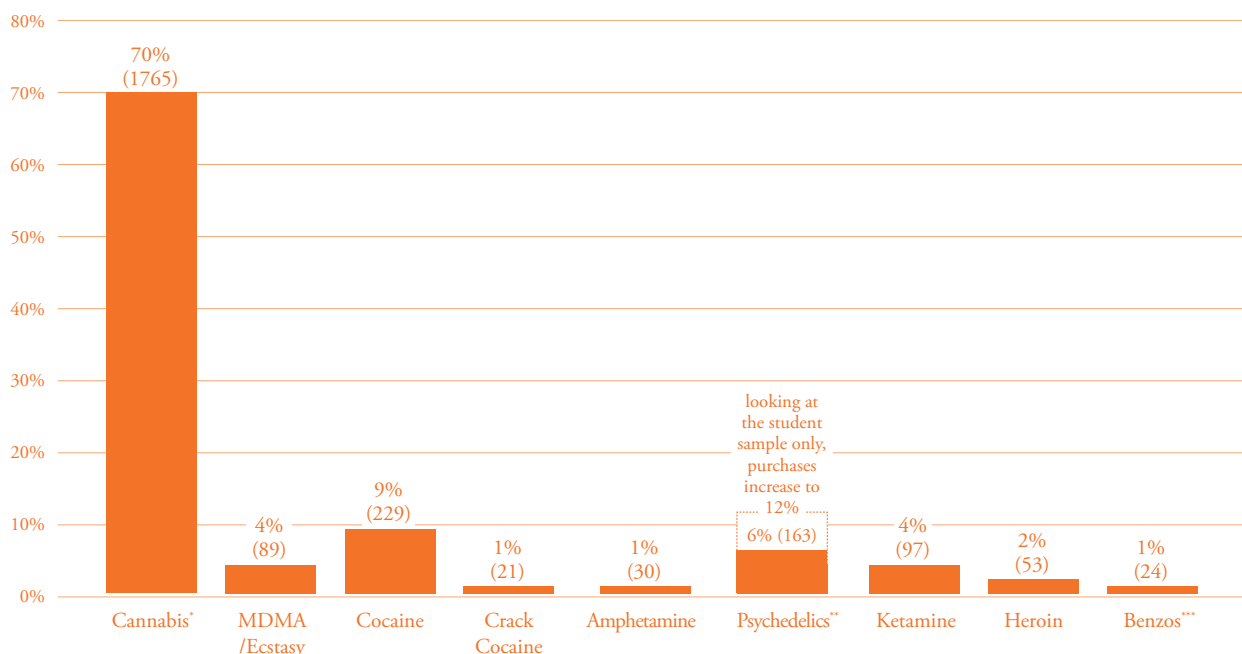
ii A new phase of the first UK national lockdown was entered on the 4th July 2020 following a large number of restrictions being lifted. However, this was not uniform across the UK.

The survey obtained ethical approval from the University of Manchester. It is confidential and responses are anonymous, with no identifiable information, or IP addresses, being collected. The survey asks respondents to describe a recent drug purchase, including its date, location (UK region), drug type, price, and quantity, as well as how the respondent believes purchasing may be different compared to purchases made before the start of the COVID-19 pandemic. The survey asks respondents to comment on the difficulty associated with finding desired products and suppliers, perceived changes in product quality and price, and whether purchases were made via the darknet marketplaces. Respondents were able to complete the survey multiple times, and were encouraged to do so for subsequent drug purchases. Given the removal of IP addresses for respondent anonymity, it was not possible to identify how many individual *respondents* have completed the survey. The unit of analysis is therefore transactions (purchases), not buyers. The questions apply to drugs bought with money (including virtual currency) or obtained otherwise from someone as a gift or traded for non-monetary property.

Key findings presented below are in connection to drug availability, quality and price, use of the darknet, supplier behaviour, and harm(s) experienced. More than half of the responses received (56%) were from 18-24-year-olds, with one quarter (25%) from 25-34-year-olds. Almost three-quarters of survey returns identified as male (69%), and the majority were in full time employment (32%). This broadly aligns with the sociodemographic characteristics of people who use drugs (PWUDs) as captured by the Crime Survey for England and Wales: which finds that drug use prevalence is higher among men and young adults, and decreases with age<sup>7</sup>.

# Drugs Purchased

*Drugs reported in the survey more than ten times are presented*



\* Cannabis includes: Sinsemilla/Skunk/Import, Herbal cannabis (low grade), Other cannabis, Cannabis resin/hash, Cannabis oil/shatter/extract

\*\* Psychedelics include: LSD, 2CB, Mushrooms / DMT / other psychedelics

\*\*\* Diazepam/ Xanax/ other benzodiazepines

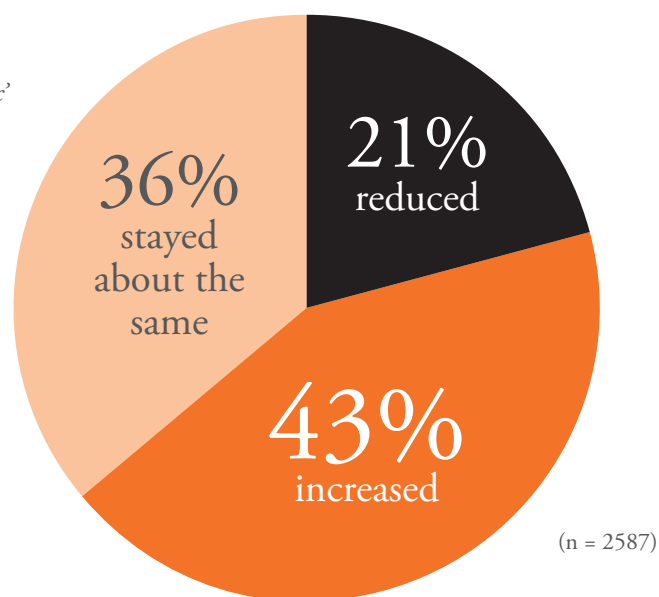
As expected, when examining drug purchases overall (n = 2528, missing = 93), cannabis product purchases were most commonly reported to the survey - with 7 in 10 transactions connected to cannabis. There have also been reports from our national Drug Market Monitoring Network of suppliers and users moving to cannabis use/supply due to the restricted availability of other drugs. Cannabis resin is significantly less popular than herbal cannabis in the UK<sup>8</sup>, however we were surprised by the low proportion of reported cannabis resin/hash purchases (3% of purchases overall, 4% of cannabis product purchases) and this is supported by reports from our Drug Market Monitoring Network regarding a scarcity of resin.

It is interesting to see more psychedelic drug purchases than MDMA/ecstasy purchases (6% and 4% of purchases overall, respectively). Previous national surveys have shown MDMA/ecstasy to be more popular than psychedelic drugs, for example, LSD.<sup>9</sup> The low proportion of MDMA purchases, a substance that is associated with highly socialised environments such as clubs and festivals, is an expected response to the pandemic given reduced social interaction and fewer opportunities to use this drug in customary settings. We may find that this change is reflected in future national and international drug monitoring surveys.

Reports of nitrous oxide (n=1) and synthetic cannabinoid (n=2) purchasing were negligible. Given nitrous oxide's popularity among the largest response group to this survey, 18 to 24-year-olds – as recorded by national surveys<sup>10</sup> - it will be important to see whether there has been a reduction in nitrous oxide use, reflected in future drug monitoring surveys, or whether this result reflects that in this transaction-based survey, people buying nitrous oxide did not consider this a drug purchase in the same way they might other drugs.

## Drug use

*Changes in drug use compared to 'before the pandemic'*



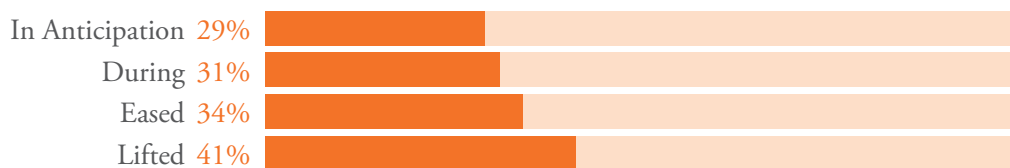
Respondents were asked to report whether their drug use in general had increased, decreased, or stayed the same, in comparison to before the pandemic. Increased use was most commonly reported (43%), followed by reports that use had stayed the same (36%). About 1 in 5 respondents reported reduced drug use.

When responses to the question of whether drug use had increased, reduced, or stayed the same were disaggregated by the type of drug purchased, reports of increased use were more common than reports of decreased use for all drug types. However, an increase in use was more pronounced for reported purchases of cannabis products (with the exception of cannabis resin/hash). For the drugs most associated with going out/parties (MDMA, cocaine, ketamine), reporting reduced use was almost as common as reporting increased use.

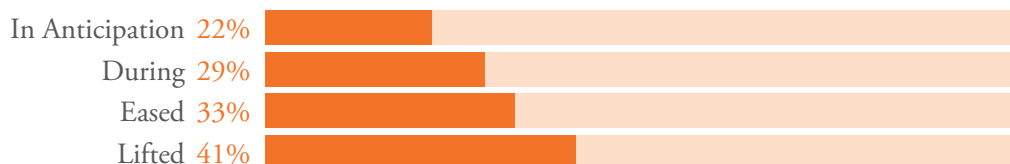
# Availability

Indicators of drug availability compared to 'before the pandemic'

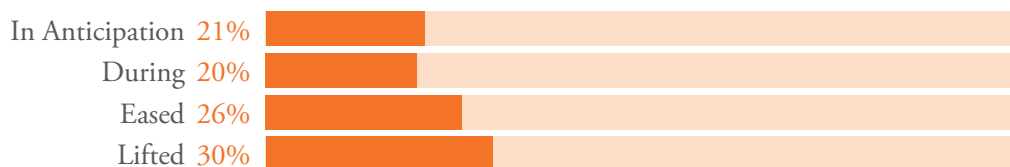
## More difficult to find a seller (n=2450)



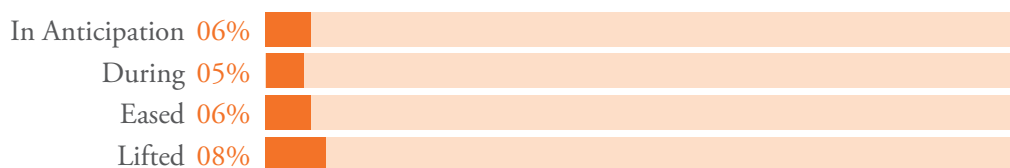
## Bought from other than preferred seller (n=2443)



## More difficult to find drug wanted (n=2443)



## Preferred drug unavailable, bought different drug (n=2297)



Finding a supplier was only reported as being 'more difficult' for a minority of the sample (between 29% and 41% over the period studied) compared to their experiences of drug purchasing before the pandemic. Reports of having difficulty increased slightly for drugs purchased during lockdown (31%) compared to purchases made in anticipation of lockdown (29%). However, reports of difficulty finding suppliers increased as lockdown eased (34%) and lifted (41%).

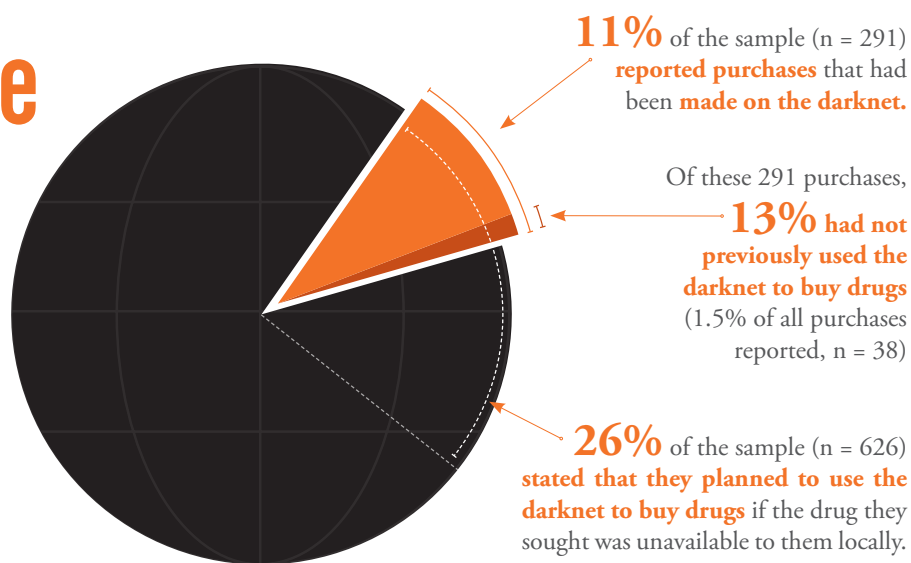
Making a purchase from someone other than a 'preferred' supplier can be an indicator of reduced availability. Although a majority did not report doing so throughout the period of the survey, the minority who did increased from 22% for purchases made in anticipation of lockdown to 29% for purchases made during lockdown, and then increased again to 33% and 41% for purchases made as lockdown eased and then lifted, respectively.

Finding the 'drug wanted' for the reported purchase was described as being more difficult for a minority of the sample (less than 1 in 3). However, reports of finding the wanted drug being more difficult increased from around 20% (for purchases made in anticipation of and during lockdown), to 26% as lockdown eased, and to 30% after lockdown lifted.

We might anticipate that reduced drug availability results from: (1) scarcity of product arising from reduced opportunities for, and increased risks associated with, transporting products; and/or (2) increased risk of getting caught arising from official attention to dwindling numbers of citizens in public locations. Intelligence collected from the Drug Market Monitoring Network supports that rather than supply scarcity driving reduced drug availability during the early stages of lockdown, the increased risk of getting caught was likely to have played an important role. For example, some suppliers worked reduced hours, and at certain hours (usually during the day when there were more people out), in order to avoid detection. We have subsequently learnt that stop and search increased during the first national lockdown (discussed further within **Individual and Social Harms**, page 11), suggesting that the risk of detection may indeed have increased.

The reduced availability we observed during earlier stages of lockdown likely reflects increased risk of conducting drug transactions in public spaces. However, the fact that availability problems remain or indeed increase as lockdown began to ease suggests that supply scarcity played an increasing role. This possibility is supported by anecdotal evidence from the Drug Market Monitoring Network. During the early stages of lockdown, reports from the network suggested that suppliers were confident that they had enough stock for around three months – a period that broadly aligns with lockdown easing and lifting. This period also coincided with the well-publicised arrests connected to law enforcement access into the ‘Encrochat’ encrypted messaging service used by many organised criminal groups focused on the supply of Class A drugs. Arrests following the Encrochat closure in June 2020 coincided with reports that the markets for cocaine, crack cocaine and heroin across the country were significantly disrupted.<sup>11</sup> Whilst the present survey did not specifically ask questions about the Encrochat closure, the arrests made following its closure are thought to have had an impact on the supply of drugs alongside lockdown restrictions.

## Use of the darknet



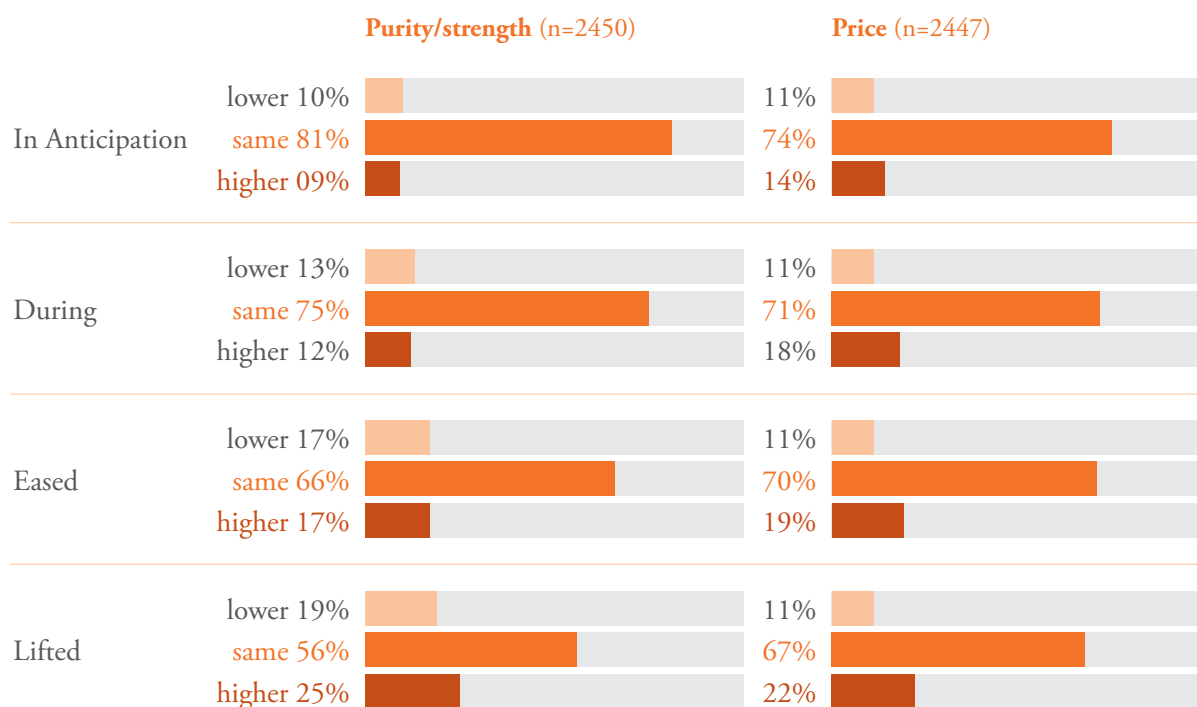
Whilst it is important to note that the majority of purchases reported in the survey were made offline, our finding that over 1 in 10 purchases were made online via the darknet, means that we have captured a shift to darknet markets that may have been prompted by the COVID-19 pandemic.<sup>12</sup> This may be motivated by actual or perceived shortages in local offline drug markets, or in connection to people spending more time at home, online, and with more available time to acquire the knowledge and skills required to access the darknet.

Google Trends analysis shows some increases in interest during the lockdown period as gauged by google searches using the terms ‘buy drugs online’, which have tended to spike more frequently over the period since the first national lockdown eased and lifted. Whilst the Drug Market Monitoring Network has not focused on darknet drug activity, there have been anecdotal reports of increased use by people seeking prescription drugs, particularly benzodiazepines, and of individuals ‘offering to show others how to use the darknet for a fee’.



# Quality and price

Quality and price of drug purchases compared to experiences 'before the pandemic'



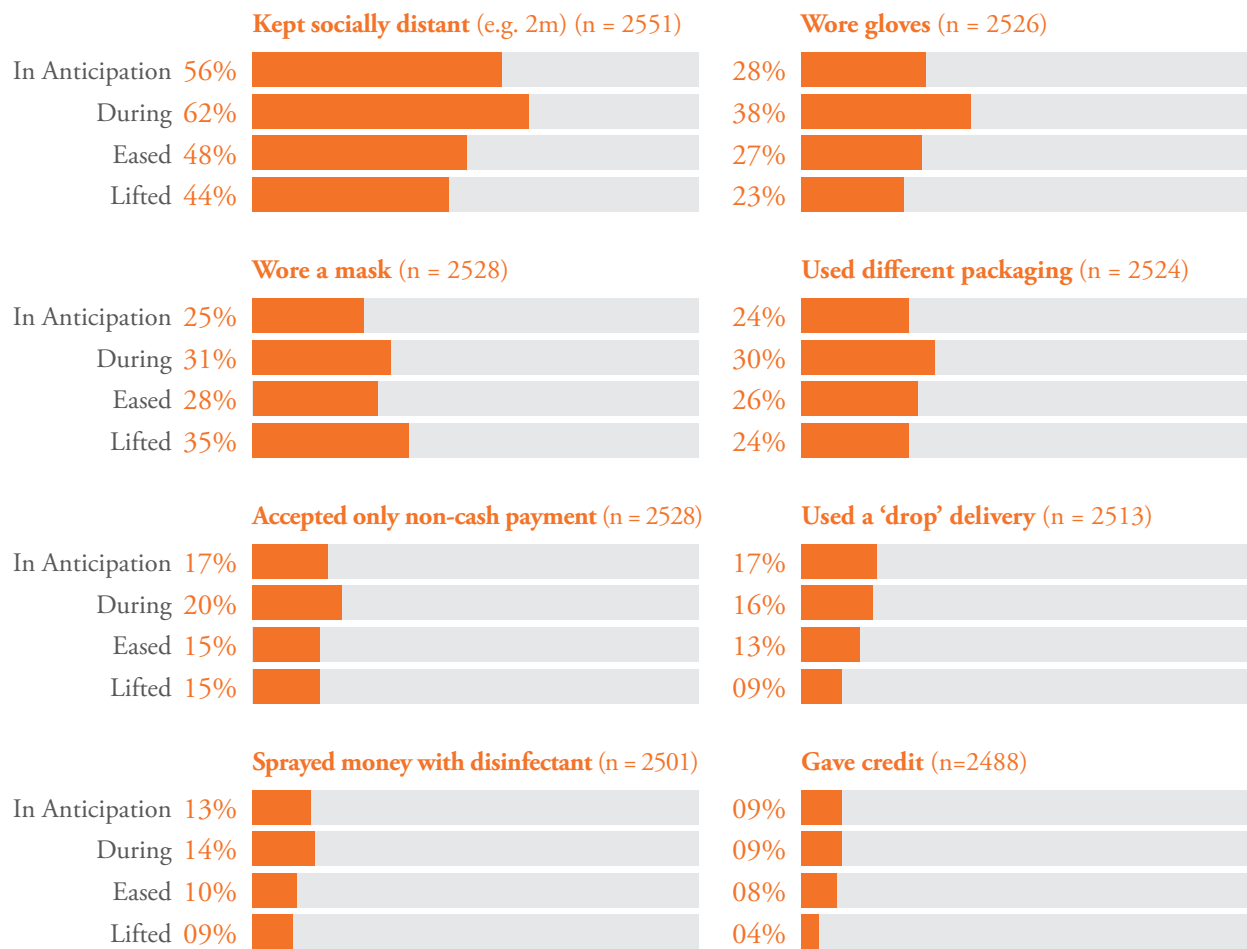
Purchases made of products reported as having 'the same' purity/strength as 'before the pandemic' occurred for the majority, but decreased from 81% (for purchases made in anticipation of lockdown) to 75% during lockdown, to 66% as lockdown eased, and to 56% as lockdown was lifted. Interestingly, purchases made in the three periods prior to lockdown lifting were equally as likely to be higher purity/strength as lower purity/strength. As lockdown lifted, however, purity/strength was more likely to be higher (25%) than lower (19%).

Purchases made of products reported as having 'the same' price as 'before the pandemic' were most common; 74% for purchases made in anticipation of lockdown, dropping to around 70% for purchases made during lockdown and its easing, and dropping again to 67% as lockdown lifted. Reports of prices being higher exceed reports of lower prices, and by the time the national lockdown lifted, respondents were twice as likely to report higher than lower prices. This mirrors reports from the Drug Market Monitoring Network of increasing prices, particularly for cocaine and cannabis, and this fits our prediction that in situations of scarcity or increased risk of selling, price would increase, or purity-adjusted price would increase.

As the majority of respondents reported that the purity of their purchase remained the same, and higher-than-expected purity reports increase over the period studied, this is indicative of suppliers responding to drug shortages by increasing prices and perhaps reducing deal-sizes, as opposed to using adulterants to bulk out products. These findings are also consistent with global reports of increased drug prices, and largely stable drug purity, as captured by the 2020 Global Drug Survey, which specifically sought to understand the global drug market response to COVID-19.<sup>13</sup>

# Supplier precautions

Steps taken by suppliers to reduce virus transmission



## Supplier precautions during Lockdown purchases made between 23rd March - 10th May 2020



Respondents were asked which, if any, safety practices their suppliers employed to reduce transmission of the virus in connection to a reported purchase<sup>iii</sup>.

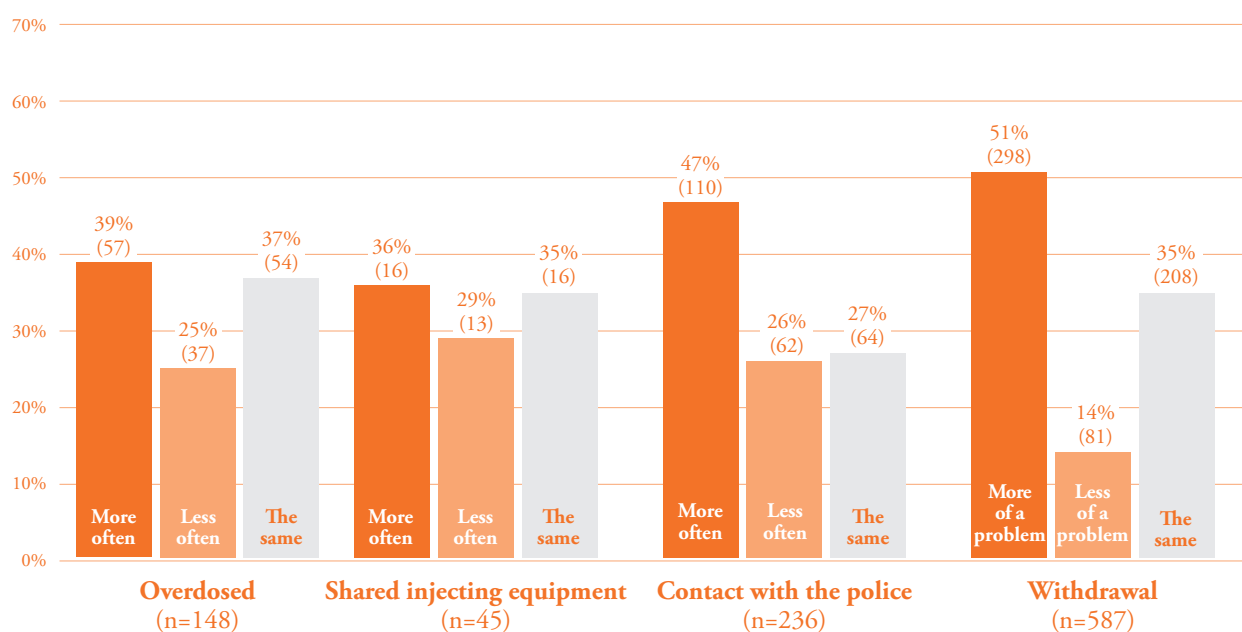
For purchases made *during* lockdown, for example, almost two-thirds of suppliers were reported to practice the two-metre social distancing rule (62%). In common with many supermarket chains at the time, 1 in 5 respondents reported that the supplier from whom the purchase was made would not accept cash, preferring for their customers to pay by bank transfer or PayPal (20%). Other techniques used to reduce transmission of the virus during drug transactions, as reported by respondents, included suppliers wearing gloves (38%) and suppliers having modified drug packaging (30%). These additional precautions adopted by suppliers challenge longstanding perceptions of suppliers as “morally bereft actors”.<sup>14</sup>

Steps taken to reduce virus transmission were most commonly reported in connection to drugs purchased during lockdown, compared to drugs purchased as lockdown eased and lifted. One exception was found for suppliers wearing masks, which was highest for transactions taking place after lockdown lifted (35%). This is broadly reflective of the proportion of the general UK population who reported either ‘always or frequently’ wearing a mask (37%) outside of the home in the week commencing 6th July 2020 (as captured by the COVID-19 behaviour tracker<sup>15</sup>).

The general trend towards suppliers adopting fewer safety measures over the periods studied may reflect ‘lockdown fatigue’<sup>16</sup>: confusion about which strategies may be most effective, or an evolving understanding of the mechanisms of virus transmission, which increasingly prioritised aerosol transmission over surface/touch transmission. The contrasting increase in suppliers’ use of face masks in the final period analysed here may reflect broader uptake and social accommodation of mask wearing more generally.

## Individual and social harms

*Change in individual and social harms compared to ‘before the pandemic’*



<sup>iii</sup> It is not known whether transactions occurred inside closed spaces or in open areas

## Change in individual and social harms compared to 'before the pandemic'



Drugs in the Time of COVID: The UK Drug Market Response to Lockdown Restrictions

Respondents were asked to compare their current experience(s) to their experiences 'before the pandemic'. Reports of overdosing 'more often' (39%) were more frequent than reports of overdosing less often (25%) when comparing experiences to before the coronavirus. Respondents were substantially more likely to report that contact with the police happened more often (47%) than less often (26%). Withdrawal was substantially more likely to be rated as more of a problem (51%) than less of a problem (14%). Reports of sharing injecting equipment more often (36%) were also slightly more frequent than reports of sharing injecting equipment less often (29%).

In addition to the risks that people who are drug-dependent face in terms of serious respiratory illness if they become infected with COVID-19 - due to the high prevalence of chronic medical conditions among this population<sup>17</sup> - it is clear that the COVID-19 pandemic has brought additional risk(s) for people who use drugs. The present results indicate that individuals overall have experienced more withdrawal, more (non-fatal) overdoses, more contact with the police, and have engaged more frequently in risky needle sharing practices during the pandemic compared with prior to the pandemic.<sup>18</sup>

Whilst the pandemic has led to discovering new ways to provide harm reduction services, such as delivering or mailing supplies, extending prescription lengths,<sup>19</sup> medicine hotlines for prescriptions, screening clients for COVID-19 symptoms in efforts to prevent transmission,<sup>20</sup> as well as smaller initiatives such as Release's own 'essential-journey' travel cards to assist in people's journeys to services,<sup>21</sup> more must be done to assist harm reduction services in their operations moving forward.

The increased contact with police reported here mirrors a concerning pattern of increased stop and search during the COVID-19 pandemic:<sup>22</sup> with the vast majority of such searches being for drugs (over 60% of searches under the main police powers).<sup>23</sup> During May 2020 alone, the Metropolitan Police Service conducted 43,913 searches: the highest monthly rate of the police's use of these powers in London since January, 2012. Of these searches, 68% were for drugs.<sup>24</sup> These searches were not linked to COVID-19 restrictions, or adherence with lockdown rules, but it is worth noting that these powers were most used in London boroughs suffering the highest rates of COVID-19 deaths.<sup>25</sup>

It is also important to note that a vast majority of responses to the present survey (92%) were from individuals identifying as 'White'. We therefore expect, given the wealth of evidence to support disproportionate contact with police for ethnic minority individuals<sup>26</sup>, that the lack of BAME experiences captured is likely to have impacted the proportion of the sample reporting increased contact with police over the period studied.

Drugs in the Time of COVID: The UK Drug Market Response to Lockdown Restrictions

The findings reported here help us better understand how the buying and selling of drugs in the UK may have changed as a result of the COVID-19 pandemic. This understanding informs the work that Release does in providing free, specialist advice and information to the public and professionals on issues related to drug use and drug laws - as well as the work done by other organisations represented in the Drug Market Monitoring Network. Our findings show that whilst COVID-19 has resulted in adaptations to practices involved in buying and selling drugs, the drug market itself has remained remarkably resilient in the face of such unprecedented restrictions, whilst harms to some of the people who use drugs have increased. Facilitating harm-reduction initiatives may therefore be more beneficial than continued efforts to control supply through law enforcement actions, which have limited impact on the supply of drugs and drug use.

As we enter subsequent lockdowns, and as the restrictions associated with the COVID-19 pandemic continue, it is vital that we continue to monitor the market via analyses of drug buying. The Coronavirus Drug Purchases Impact survey is still running. Please help us understand the impact of subsequent lockdowns by filling in the survey – and we encourage you to do this every time you purchase drugs so that we can see how things are changing. You are also able to email us at [drugreport@release.org.uk](mailto:drugreport@release.org.uk) if you have insights into the market that would help us. The email is confidential.

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