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The Arrestee Survey 2003 – 2006 2nd edition

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The Arrestee Survey 2003 – 2006: Executive summary

Overview of key findings

The Arrestee Survey is the first nationally-representative survey of drugs and crime among individuals arrested in England and Wales. It provides a measurement of self reported drug misuse among a sample of individuals arrested in England and Wales. The link between drug and/or alcohol consumption and criminal offences leading to arrest is also examined, as are associations between self-reported drug use and wider offending behaviour. Three sweeps of the data have been collected in 2003-04, 2004-05 and 2005-06. This report presents the findings from the 2005-06 survey, as well as highlighting any significant changes in results over the three sweeps. Only statistically significant, and substantial, changes over time are included in this report. Any other apparently substantial differences in tables are not statistically significantly and as such cannot be taken as showing real change.

Key findings include:

- Regular (at least weekly) users of heroin or crack (HC), reported making less money from crime in the year before arrest than was reported by respondents in previous sweeps of the survey - 77% in 05/06 compared to 82% 03/04.
- Regular users of HC were more likely to have committed acquisitive crime in the previous 12 months to arrest (81%) than those who did not take HC regularly (30%). This trend has remained stable since the survey began.
- Seventy nine per cent of regular HC users had been arrested in the year previous to being surveyed compared to 48% who report occasional/no use of HC.
- Self reported heroin and crack cocaine use by those reporting multiple drug use has fallen over the life of the survey, but use of powder cocaine has increased.
- The proportion of respondents who had ever injected drugs decreased from 18% to 13% over the life of the survey.
- There was an increase in those reporting treatment for heroin in the 12 months previous to arrest: from 34% to 41% across the life of the survey.
- There was an increase from 23% to 32% in the proportion of frequent heroin users (i.e. those who used heroin 5 or more days a week) currently in treatment.
- In 2005/06, 26% of those reporting previous treatment for heroin dependency reported no longer using heroin.

These findings are expanded upon and contextualised against the previous sweeps of the data below. Note that each section looks at data provided by the overall sample as well as that provided by those respondents reporting substance misuse.

1. Introduction

The Arrestee Survey is the first nationally-representative survey of drug use and crime among individuals arrested in England and Wales. While the main focus of this report is on the latest (2005-06) sweep, it also provides an overview of key trends across all three years of the Arrestee Survey, providing comparisons between the baseline (2003–04), the second year (2004–05) and the third year (2005–06). The report focuses on the:

- Socio-demographic characteristics of the respondents;
- Self-reported substance misuse;
- Previous contact with the Criminal Justice System;
- Offending behaviour;
- Treatment;
- Availability/supply of drugs.

Chapter One of the main report provides a full description of the methodology; however, in brief, respondents were eligible to take part in the survey if they were 17 years or older and arrested on suspicion of committing an offence. The survey interview consisted of a 20-minute computerised interview with a substantial self-completion section. The latter contained the most sensitive questions about offending behaviour, drug and alcohol use and treatment for drugs. In addition, respondents were asked to provide an oral fluid sample for analysis of recent drug use to compare against self-reported drug use

Interviewing in police custody suites is problematic and has implications for survey response. For example having to fit the survey around the police process, respondents who posed a safety risk or were unfit for interview meant that interviewers in 2005-06 were able to approach only 33% of those eligible. Sixty-nine per cent of those approached participated in the survey - 23% of all eligible respondents. This gave a sample in the 05/06 sweep of 8,027 respondents.

The original intention was to compare findings for users of heroin, crack, and/or powder cocaine (HCC) across the three sweeps of the survey. However, while the overall prevalence of using all three drugs did not change over the period, changes in the use of cocaine particularly meant the HCC group could not be reliably compared across the three sweeps. Instead, the focus here is on those who used heroin or crack (HC) at least weekly – notionally, those who comprise the most problematic drug users.

2. Characteristics of respondents in the 2005-06 sweep

The characteristics of respondents in 2005-06 were similar to those in 2004-05 and 2003-04.

In 2005–06, the most common reasons for arrest among all those arrested and interviewed, were assault (26%) and shoplifting (10%). However, those who reported taking HC regularly, were most likely to have been arrested for shoplifting (37%), followed by burglary (14%).

In 2005-06, 84% of participants were men, with 16% women. Nearly half were under the age of 25: 43% of all respondents were aged between 17 and 24, 27% were aged between 25 and 34. The age profile was similar for men and women. Overall, 86% of the sample described themselves as White, 7% as Black, 1% as Asian and 5% as Mixed ethnicity.

Ten percent of regular HC users reported being in paid employment or full-time education or training. Forty-nine per cent of those not using HC regularly were in work of training.

Most respondents said they had finished full-time education at the age of 16 or younger; 34% were younger than 16 when they finished their full-time education and 39% were aged 16. Overall, 41% of respondents had been excluded from school temporarily, and 23% had been excluded permanently. Of all respondents, 16% had spent some time in a foster home, children's home or a young person's unit.

3. Substance misuse

In 2005–06, 52% of all respondents reported having taken one or more drugs in the month previous to arrest. Cannabis was the most widely taken drug, with 41% having taken it in the month previous, followed by heroin and powder cocaine (13%), crack (11%) and ecstasy (8%). Overall, 26% reported taking heroin, crack or cocaine in the previous month. These patterns were similar to 2004–05 but slightly different compared with 2003–04; among all respondents in 2004–05 and 2005–06 the reported use of heroin and crack in the month before arrest decreased, but there was no change in the overall use of powder cocaine or ecstasy.

In 2005–06, of those reporting taking heroin, crack or powder cocaine in the month previous to arrest, 26% had taken heroin and crack in the last month, 40% had taken powder cocaine only, and 17% had taken heroin only. This pattern of polydrug use was different from 2004–05 and 2003–04, which reflected a consistent trend of a relative decrease in the use of heroin and crack and a relative increase in the use of powder cocaine.

The survey asked the respondents to report the use of ten different drugs. Similar proportions reported taking heroin and crack in the month previous to arrest, but heroin was used more frequently. In 2005–06, 9% of respondents usually took heroin at least 5 times a week compared with 4% who took crack at least 5 times a week and 2% who took powder cocaine at least 5 times a week. In 2005–06, 1% of respondents took ecstasy at least 5 times a week. Similar patterns were found in 2004–05 and 2003–04.

Respondents who reported any drug use were asked whether they had ever injected drugs. There was a consistent decrease in the overall prevalence of ever having injected drugs between 2003–04 (18%) and 2005–06 (13%). This decrease is likely to be the consequence of both a larger proportion of respondents who had never taken drugs that could be injected (44% in 2003–04 and 47% in 2005–06), and a decrease in the proportion of injectors among those respondents who did use these drugs (33% in 2003–04 and 25% in 2005–06).

Dependence on individual drugs was measured using the Severity of Dependence Scale (SDS), which uses five questions to measure dependence. Dependence was only measured for heroin, crack and powder cocaine. In 2005–06, dependence on heroin was greater than on crack or powder cocaine – 85% of those who had taken heroin in the last year were assessed as dependent. Equivalent figures for crack and powder cocaine were 55% and 23%. Results were similar to 2004–05 and 2003–04.

Dependent alcohol use among respondents was assessed using the Fast Alcohol Screening Test (FAST). Dependent alcohol use was defined as having a FAST score of 3 or more. In 2005–06, 57% of respondents were dependent drinkers.

4. Past contact with criminal justice system

There was no change over time observed between sweeps in terms of past contact with the criminal justice system reported by all respondents or those who reported regular HC use.

In 2005–06, most respondents reported having been arrested before; 52% had been previously arrested within the last 12 months and 29% had been arrested longer ago, although 18% had never been arrested before. Overall, 16% of respondents had been to prison in the last 12 months, 22% had been to prison longer ago, and 44% had never been in prison.

Among respondents who took HC at least once a week, 79% had been arrested in the last year, whereas the equivalent figure was 48% among those who did not take HC weekly. Respondents who took HC at least once a week were also much more likely to have been to prison in the last year (44%), compared with those who did not take HC weekly (12%). Similar patterns were seen in 2004–05 and 2003–04.

5. Offending

Respondents were asked about offending behaviour against nine offences in the four weeks prior to arrest. In 2005-06, shoplifting was the most commonly reported offence (15%), followed by selling stolen goods (13%), buying stolen goods (11%), and vandalism (10%). The likelihood of committing these offences in the four weeks prior to arrest was higher among those who used HC regularly compared to those who did not. The difference was particularly pronounced with regard to shoplifting (54% and 10%, respectively), followed by selling stolen goods (45% and 9%, respectively), and buying stolen goods (20% and 10%, respectively). These patterns were similar to those observed in 2004–05 and 2003–04.

For less common offences, respondents were asked about offences committed in the last 12 months. Assault was the most common offence reported in 2005–06 (committed by 24% of all respondents), followed by possession of a weapon other than a gun (14%). Those who did not take HC weekly were more likely to have assaulted someone (25%) than those reported regular HC use (19%). But regular HC users reported possessing a weapon other than a gun

more frequently than those who did not use HC regularly (26% and 13%, respectively). Similar patterns were found in 2004–05 and 2003–04.

Overall, in 2005–06, 36% of all respondents had committed acquisitive crimes (other than selling drugs) in the last 12 months. Those who took HC regularly were notably more likely to have committed acquisitive crime in the last 12 months (81%) than those who did not take HC weekly (30%). Similar patterns were found in 2004–05 and 2003–04.

Respondents were asked about the cash value of the proceeds of each type of offence they had committed and a total estimated annual income was calculated. In 2005–06, in the last 12 months, 30% of all respondents reported having made money from crime. Those who usually took HC were more likely to have made money from crime, and the amounts they made tended to be larger. However, among those reporting regular HC use, there was a decrease in the proportion who made any money from crime from 82% in 2003–04 to 77% in 2005–06. Among those who took HC regularly, 77% had made money from crime in the last 12 months, and 32% had made £5,000 or more. The equivalent figures were 23% and 3%, respectively, among those who did not report regular HC use.

In 2005–06, 38% of all respondents responded that they had got into a fight or used violence against someone after drinking alcohol and 17% responded that they had caused damage or vandalised a vehicle, house or some other building after drinking alcohol. There was no difference in the responses among respondents who took HC regularly and those who did not.

In 2005–06, 86% of all respondents said they had never committed any crime whilst under the influence of drugs. Respondents who took HC regularly were substantially more likely than those who did not take HC regularly to have committed crimes whilst high on drugs. Among respondents who responded that they had done this, 43% of respondents said that they would not have committed the crimes had they not been high on drugs, 18% said that they would have committed all of them and 38% responded that they would have committed some of them.

6. Treatment

Prevalence of having had treatment for heroin in the last 12 months (including currently receiving treatment) increased from 56% in 2003–04 to 67% in 2004–05 and to 71% in 2005–06, whereas rates of treatment for crack, powder cocaine and alcohol appeared to have remained constant over the same period.

Treatment for drug use was dominated by heroin treatment. In 2005–06, among those who had ever taken heroin, 62% had ever been offered treatment, 57% had ever received treatment and 30% were currently receiving treatment. Treatment for other drugs was at a much lower level. In 2005-06, among those who had ever used individual drugs (or taken alcohol) 57% had ever had treatment for heroin, 9% had ever had treatment for crack, 3% had ever had treatment for cocaine and 11% had ever had treatment for alcohol.

Although frequent heroin users were more likely to be in treatment in 2005–06 (32%) than in 2003–04 (23%), similar proportions felt that they did not want any treatment (8% and 9% respectively). Overall, in 2005–06, among those who usually took heroin on 5 or more days a week, 32% said they were currently receiving treatment, 60% said they would like treatment, and only 9% did not want treatment.

There was less reported need for treatment among users of other drugs and alcohol. Compared with the 9% of frequent heroin users who felt that they did not want treatment, equivalent figures among frequent or problematic users were 35% for crack, 60% for powder cocaine and 74% for alcohol.

7. Availability and supply of drugs

Heroin and crack were viewed as always available to a significant majority of respondents who had ever bought those drugs when they had enough money to buy them, a similar finding across all three sweeps. In 2005–06, among those had bought heroin in the last year, 75% said that it was available all the time and only 3% said heroin was often not available.

Powder cocaine was reportedly not as readily available as heroin or crack. Of those who had bought crack, 75% said it was always available, and 68% of those who had ever bought powder cocaine said it was always available.

All respondents were asked whether they had ever sold heroin, crack or powder cocaine. Those who reported using drugs were most likely to report selling them. Thirty-one per cent of regular heroin users reported selling drugs – the figure was 20% for crack users and 26% for powder cocaine users. Out of the total respondents, 6% had ever sold heroin, 4% had sold crack and 5% had sold powder cocaine in 2005-06. Similar patterns were found in 2004–05 and 2003–04.

In 2005–06, respondents who had taken and bought heroin, crack, powder cocaine, or ecstasy were asked about the expensiveness and purity of these drugs compared to 6 months previously. Overall, a net proportion of 29% and 27% of respondents reported that expensiveness of heroin and powder cocaine, respectively, had decreased, whereas the equivalent figure was 47% for ecstasy and 14% for crack. Net purity was also reported to have decreased for each drug, though to a slightly lesser extent.

1 Introduction

1.1 The survey

The Arrestee Survey, which took place between the years 2003 and 2006, is the first nationally representative survey of drugs and crime among the population of individuals representing arrest events in England and Wales. The survey aims to provide information on a range of areas within the drugs and crime nexus. This report covers all three years of the Arrestee Survey, although results from the 2003/04 sweep have been previously published (Boreham et al., 2006); as such, this report makes comparisons between the baseline (2003–04), the second year (2004–05) and the third year (2005–06). The following topics are discussed: prevalence of problematic drug misuse among respondents representing arrest events; links between drug and/or alcohol consumption and offending; availability of drugs; estimated levels of demand (met and/or unmet) for drug and alcohol treatment services among respondents; levels of intravenous drug use among respondents; and the characteristics and offending histories of those participating in the survey.

The Drug Strategy, which was updated in 2002, aims to reduce the harm caused by illegal drugs and has four key strands: reducing drug-related crime; reducing the supply of illegal drugs; preventing young people from becoming drug users; and reducing drug use and drug-related harm through treatment and support. The Drug Interventions Programme (DIP) – which began in April 2003 – is the key element of the strategy to tackle drug-related crime. It provides tailored solutions for adult drug-misusing offenders from arrest, through court, sentencing, prison and beyond, using a case management approach to offer access to treatment and support. Although DIP operates across England and Wales, the full range of interventions operates in the areas with the highest levels of acquisitive crime ("intensive" areas). Drug testing after charge for certain "trigger" ¹ offences was introduced in 52 custody suites (in 30 police Basic Command Units) in 2003.

The survey findings presented in this report relate to the period October 2003 to September 2006 and DIP has rolled out its various components more widely during this period and thereafter. For example, as of June 2006, drug testing was operational in 175 custody suites (98 BCUs). Moreover, testing has been brought forward and now takes place at the point of arrest rather than at charge in the intensive areas (rolled out between December 2005 and March 2006) and individuals testing positive (at arrest or charge) are required to undergo an assessment with a drugs worker. The aim of these new interventions is to identify and assess the needs of a larger number of drug misusers in the early stages of the criminal justice system. A wide range of other interventions to tackle drug supply and prevent drug use are also being carried out as part of the Drug Strategy.

The objectives of the Arrestee Survey have been to provide:

- measurement of the prevalence and change in problematic drug misuse among a sample of individuals representing arrest events in England and Wales;
- information to allow monitoring of drug use within drug-using groups that are likely to be under-represented in household surveys;

- individual-level data for the purpose of researching the behavioural links between drug and/or alcohol consumption and criminal offences leading to arrest;
- a means to estimate the level of demand (met and/or unmet) for treatment services among the problematic drug/alcohol user population;
- monitoring information on the level of intravenous drug use among arrestees to better inform harm-reduction programmes; and
- a means for routine collection of custody-suite information for the purpose of analysing arrestee flows and the process of being in custody, and for analysing the characteristics and offending histories of individuals entering the criminal justice system.

1.2 Research design

Respondents were interviewed in 72 custody suites (60 in the first year of the survey) across England and Wales. Interviews were conducted throughout the year on all days of the week and at all times of the day. The eligible population was defined as people aged 17 or older who had been arrested on suspicion of committing an offence and who had not previously been interviewed within the current survey year.

The sample design was a stratified two-stage random probability sample. A random selection of custody suites was first drawn. Within each suite, a random sample of shifts was then selected. Interviews were attempted with all eligible respondents within the selected shifts. This design meant that the sample would be representative of all arrest events over a 12-month period.

Suites were eligible for selection if they were open 24 hours, designated under The Police and Criminal Evidence Act (PACE), had at least one interview room and dealt with more than 2,000 arrests per year. The population of eligible suites was split into four strata according to the number of annual arrests, with approximately equal numbers of arrestees included in each stratum. Thus the high-flow stratum contained a relatively small number of large suites, whereas the low-flow stratum contained a larger number of small suites. Within each stratum, suites were selected by random sampling without replacement, with selection probabilities proportional to projected arrestee numbers. Although the sample is nationally representative, there were insufficient suites to stratify by Police Area and thus the sample is not representative of individual Police Areas.

Within each custody suite, interviewers worked a number of six-hour shifts and within each shift attempted to interview as many eligible respondents as possible. The sample of shifts was designed to cover all days of the week and all hours of the day. The number of shifts selected per suite was in proportion to the square root of the estimated arrestee inflow, to exploit the lower interview costs in large suites. Further information on sampling may be found in the Arrestee Survey Technical Report Oct 2004 – Sep 2005 and Oct 2005 – Sep 2006 (available from RDS on request).

For the first six months of fieldwork (1 October 2003 to 31 March 2004) the shifts start times were 03:00, 09:00, 15:00 and 21:00, but there were two major operational difficulties with this shift pattern. Firstly, arrestees tend to have their statutory uninterrupted rest period between 00:00 and 06:00, so this was affecting the end of the shifts starting at 21:00 and the start of the 03:00 shifts. Secondly, the 03:00 shift was having a very disruptive effect on interviewers sleep patterns. Therefore, shifts start times were 00:00, 06:00, 12:00 and 18:00 in the second six months of fieldwork in the first survey year. In the second year of the survey, the shift that started at 00:00 was

discontinued. The shift start times were consequently 06:00, 12:00 and 18:00 in 2004–05. These start times remained unchanged in 2005–06.

The distinction between arrest events and arrested people is important for the interpretation of this report and of any further analysis of the data. There are essentially two distinct populations underlying the Arrestee Survey: the population of arrested people (all those who experience arrest during the reference year) and the population of arrest events (the set of all eligible arrests that take place during the year). The sample design and weighting used for this report produced a sample of the population of arrest events, since an individual's chance of being sampled was approximately proportional to the number of arrests he or she experienced. Since people who experience frequent arrests during the year have a greater chance of being sampled, the sample presented here is not representative of the population of arrestees. For ease of reference, this report uses 'respondents' to describe the population of interest.

A complication to the design was that the survey was allowed to interview an individual only once per survey year, implying that some repeat arrest events were excluded. However, only a small proportion of all shifts was selected. Therefore, in practice, the probability was low that a respondent who was arrested more than once during a survey year (at a survey custody suite) would actually be sampled twice or more. Overall, only 1% - 2% of arrest events resulted in survey non-response because the respondent had already been interviewed for this study, though the percentage was a little higher for certain acquisitive crimes. Any impact on estimates would, at most, have been marginal. (See Appendix G for a comparison of frequency of arrest among different groups of respondents).

The distinction between arrest events and arrestees is an important one to bear in mind when interpreting Arrestee Survey data. Any user of the Arrestee Survey data for secondary analysis should consider whether the research objectives relate to the population of arrestees or the population of arrest events, and choose the weighting scheme accordingly.

The interview consisted of a CAPI³ interview of around 20 minutes with a substantial CASI self completion section, which contained the most sensitive questions about offending behaviour, drug and alcohol use and treatment for drugs. Audio-CASI was available for respondents with literacy problems. In addition, respondents were asked to provide an oral fluid sample for analysis of recent drug use and these were sent to Cozart Bioscience Ltd for testing. For eligible respondents who did not take part in the main interview, interviewers attempted to administer a short 5-minute non-response questionnaire.

1.3 Achieved samples and response rates

The first year of the survey was carried out in a nationally representative sample of 60 custody suites between 1 October 2003 and 30 September 2004 and in total interviewers worked 5,043 shifts and interviewed 7,535 respondents (a rate of 1.50 per shift). The number of custody suites was increased to 72 in both the second and third survey years. In the second year, interviewers worked a total of 5,523 shifts and interviewed 8,530 respondents (a rate of 1.54 per shift). In the third year of the survey, the equivalent figures were 5,535 shifts and 8,027 respondents (a rate of 1.45 per shift).

The overall response rate was 23% in 2005–06. The main reason for the low response rate was that interviewers were only able to approach 33% of all eligible respondents. Among all respondents who were approached, 69% agreed to take part in the survey. Similar proportions of all eligible respondents took part in the survey in 2004–05 (24%) and 2003–04 (23%). The response rates among all approached respondents were 69% and 72%, respectively, in the second and first survey years.

The overall response rate was low due to a number of problems associated with interviewing in police custody suites: Interviewers are governed by PACE, and as such cannot do anything which extends the length of an arrestee's stay in custody, which means having to fit interviews around the police process. Although the main interview averaged 20 minutes, the whole process from getting respondents from the cells and explaining the survey to them, doing the interview and taking an oral fluid sample, and then returning them to their cells, took around 45 minutes. Therefore it was necessary to find a 45-minute gap in police procedures to fit in each interview. Additional problems such as respondents being a safety risk or unfit for interview meant that interviewers were only able to approach 33% of eligible respondents to ask them if they were willing to take part in 2005–06 (see Appendix A for detailed response rates).

1.4 Precision of estimates and testing differences

The sample design, which clusters interviews in shifts and custody suites, means that 'design effects' for this survey are relatively high. A design effect is the factor by which the sampling variance for a given variable exceeds the variance achievable in a simple random sample of the same size. The scale of a design effect depends on several factors, including weighting, stratification and clustering. The last of these is the most salient for this survey, since the level of clustering necessary for logistical reasons has a notable impact on the precision of estimates. In other words, the confidence intervals around estimates tend to be wider than one might anticipate, given the relatively large sample interviewed for each year of the survey.

As indicated, there is not just one design effect for each year of the survey but a different one for each estimate. Put straightforwardly, this is because the effect of clustering depends upon the extent to which a characteristic or behaviour may vary across clusters. To illustrate by way of example, it is estimated that 19% of respondents aged 17 to 34 had taken crack in the last month in 2005–06; the 95% confidence interval ranges between 16% and 22%.

The significance test used in the analysis in this report takes the sample design into account, meaning that the confidence intervals reflect the complexity of the design. It should be noted that the significance tests that were used test for statistical significance for a whole variable, rather than testing differences between individual sub-groups. In other words, rather than testing an estimate in, say, 2003–04 against that in 2005–06, it tests or significant differences between 2003–04, 2004–05 and 2005–06 simultaneously. Statistically significant differences might be found even when confidence intervals are wide, although a larger difference is required. It should further be noted that the number of custody suites increased from 60 in 2003–04 to 72 in 2004–05 and 2005–06. Consequently, the sample became less clustered in the second and third year of the survey, which meant that differences between sub-groups within each survey year, based on for example age or sex, were slightly more likely to be statistically significant in 2004–05 and 2005–06 compared to

2003–04. The lower level of clustering in the last two survey years also somewhat increased the likelihood of finding statistically significant differences over time.

1.5 Representativeness of the sample

In general there is an underlying assumption in social surveys that respondents who take part in a survey are similar to those who do not take part. However, if certain groups of respondents consistently do not participate in a survey, the achieved sample will be biased. That is, it will underrepresent some groups while over-representing others compared to the population that is being studied. This problem of 'non-response' bias can be addressed but not necessarily solved by applying weights to the data (see Section 1.6 below for further details on the weighting).

Non-response is a large issue for the Arrestee Survey, since the proportion of eligible respondents who eventually yield an interview is low (23% in 2005–06). However, there is not necessarily a strong relationship between the response rate and biases in estimates calculated from the survey. Indeed, the main source of interview loss is the lack of a time slot in the custody process (22%) followed by 'other time issues' (17%), which were both unrelated to the reason for arrest (see Table A.1 for the proportion of non-interviews caused by a lack of time gap among different groups of respondents). The factors which resulted in lack of time for an interview *could* be entirely unrelated to the characteristics of respondents and their behaviours relating to the arrest event. In which case, these reasons for non-response would not cause bias. Alternatively, it *could* also be that those for whom time for an interview was not found are systematically different from those interviewed. The point is that this major cause of non-response produces an uncertainty about the representativeness of the samples, which needs to be borne in mind.

More clear cut is that other specific reasons for non-response will probably have caused bias. For example, unfitness for interview due to drugs would clearly be expected to cause bias in the estimation of mean rates of drug consumption. Fortunately, there are few sample losses from this source (1% in 2005–06). The analogous problem for alcohol is more serious (6%). Similar patterns were seen in 2004–05 and 2003–04.

The pattern of non-response can further be analysed by looking at response by offence. Response rates among respondents arrested for different types of offence showed little variation, ranging between 19% and 26% in 2005-06, with the exception of those arrested for 'drunk/disorderly and other alcohol' offence for which the response rate was only 8%. Therefore, with the exception of alcohol-related crime, there seems to be little indication of a substantial bias in the achieved sample in relation to offence type. Response rates by offence were also similar in 2004–05 and 2003–04.

Consequently, different forms of non-response have quite different implications on bias. Those implications are in turn likely to vary between types of estimate. The major apparent source of bias in the Arrestee Survey is under-representation of respondents committing alcohol-related crime. Estimates of offending behaviour that may have a direct or indirect link to alcohol are therefore at great risk of under-estimation. The focus of this report is those who take and those who do not take heroin or crack at least once a week. It is therefore unlikely that bias linked to alcohol-related crime has any substantial impact on key estimates.

A further issue concerning the representativeness of the sample is that the sample studied in each survey year might potentially have been a different one. In other words, any observed changes could be due to changes in the behaviour of a particular kind of person or due to changes in the kind of person who is likely to be arrested.⁴ There is no satisfactory way of identifying which effect is being observed. However, in order to provide an indication of the effect that is most likely the predominant one, the trend over time in the number of eligible respondents per shift per quarter is calculated (see Appendix F). The numbers of eligible respondents per shift are largely similar in each quarter, which suggests that the size of the population of eligible respondents remained unchanged during the course of the survey.

Importantly, response by age, sex, ethnic group, and offence was also similar in all three survey years, suggesting that the characteristics of individuals likely to be interviewed did not change during the course of the survey. The stability in both the characteristics of the type of person likely to be arrested and the person likely to participate in the survey suggests that the observed differences between the survey years are the result of true changes in behaviour of respondents (see Appendix A for further details).

1.6 Weighting

In the analysis in this report, weights were applied to adjust for 1) the selection of custody suites and the allocation of number of interviewer shifts to suites; 2) the timing of interviewer shifts; and 3) non-response. The response weights attempt to minimise biases by controlling for reason for arrest, time and day of arrest, and demographic characteristics. The weights that were applied were similar in all three years of the survey.

A set of weights was also created that could be used to improve the representativeness of arrestees (see Appendix D for details). Applying this set of weights would mean that each arrestee, regardless of the extent of his or her criminal activity, would in principle be treated equally in the analysis. Since the purpose of the Arrestee Survey is to investigate the link between drugs and the population of offence events, rather than the drug-taking behaviour of a given population of arrestees, these weights are not used in the report.

1.7 This report

This report is intended to provide key findings from the full three years of the survey as well as an overview of the 2005-06 results. It covers the main areas investigated by the survey, including offending behaviour, substance misuse, access to treatment and availability of drugs. Only statistically significant, and substantial, differences are commented on in the text. For greater details on the survey and sample design, see the Arrestee Survey Technical Report Oct 2003 – Sep 2004 (forthcoming) and the Arrestee Survey Technical Report Oct 2004 – Sep 2006 (forthcoming).

In this report, comparisons are made between respondents who took either heroin or crack at least once a week and respondents who did not. It should be noted that in 2004–05 and 2005–06 the composition of the group who had used heroin, crack or powder cocaine in the last year and last month was different compared with 2003–04. Respondents were more likely to have used powder cocaine, whereas use of heroin and crack decreased. Overall, however, the prevalence of using

heroin, crack or powder cocaine did not change. Yet this group cannot be reliably compared across 2003–04, 2004–05, and 2005–06 as a result of its changed composition, since users of powder cocaine and users of heroin or crack tend to have different characteristics in terms of age and frequency of drug taking.⁵ As mentioned above, there is little evidence that the composition of the sample in terms of demographic characteristics changed. Therefore, the change in the composition of respondents who used heroin, crack or powder cocaine in the last month or last year is likely to be attributed to a change in drug-taking behaviour. The different characteristics of respondents who take powder cocaine and respondents who use heroin or crack may in turn imply that offending behaviour also differs. Rather than focusing on those who used heroin, crack or cocaine in the last year and in the last month, as originally intended,⁶ the focus will therefore be on those who used heroin or crack at least once a week. This is consistent with the Drug Strategy focus on the most problematic drug users. It should further be noted that this approach means that occasional or recreational users of heroin and crack will be included among those who did not take these drugs at least weekly, in addition to respondents who did not take the drugs at all.

In order to make the report more readable, the abbreviation HC is used to refer to heroin or crack throughout the report. As discussed above, the sample is representative of arrest events rather than arrestees. Hence, the reported findings are based on respondents who were representing the arrest events sampled for the survey. In order to avoid cumbersome and repetitive language, we report findings in respects of respondents (as would commonly be the case). 'Respondents' should not, therefore, be misinterpreted as synonymous with 'arrestees'.

In terms of conventions and notation, unstacked bar charts show the 95% confidence interval of the estimates in the form of a vertical line. Percentages are rounded to 0 decimal places, so that percentages may not add to 100%. Tables show weighted and unweighted bases and percentages, but not weighted counts. The following notations have been used.

- Percentages enclosed in [] are based on between 30 and 49 unweighted cases, and should therefore be treated with caution as they may be unreliable. Percentages based on less than 30 unweighted bases are too unreliable to be shown and have been replaced with "*".
- "0" = a percentage of less than 0.5 but more than 0.
- "-" = a true zero, no cases for this category.

Design effects and true standard errors are presented for some key variables in Appendix D.

Notes and reference

¹ Trigger offences are those for which, if charged, an arrestee has to provide an oral fluid sample for the Police to test for recent drug use. The definitions of trigger offence used in this survey are shown in Appendix C.

For example, in 2005-06, there were 365*4*72=105,120 possible shifts among the selected custody suites. Interviewers worked 5% of these shifts (5535 shifts).

- ³ CAPI stands for Computer Assisted Personal Interviewing, and is where the interviewer conducted the interview using a laptop computer. CASI is where the interview is self-completion using a laptop, and A-CASI or Audio-CASI is where the questions are recorded and the arrestee then listens to them via headphones during a self-completion interview.
- The likelihood of a particular person being arrested may be a consequence of, for example, efforts made by the police to increase arrests for certain offences. Such increases may in turn influence the overall prevalence of a particular offence in the survey, and potentially also have an effect on arrests for other offences as resources are diverted. Taking such effects into account is beyond the scope of this report.
- Arrestees in the youngest age group tended to be more likely to have taken powder cocaine in the last year or in the last month compared to arrestees in the older age groups. The opposite tended to be true for heroin and crack.
- See the Arrestee Survey Annual Report: Oct 2003– Sep 2004 for findings from the first survey year (http://www.homeoffice.gov.uk/rds/pdfs06/hosb0406.pdf), which covers arrestees who used heroin, crack or powder cocaine in the last year.

2 Characteristics of respondents

2.1 Introduction

This chapter starts with an overview of the characteristics of respondents representing arrest events, then examines these characteristics by sex, age and whether respondents reported having taken heroin or crack (HC) at least once a week.

One of the key objectives of this report is to look at differences between respondents with problematic drug use and those with no problematic drug use. The Drug Strategy focuses on the most problematic drug users, so this report divides respondents into those who reported having taken heroin and/or crack at least once a week and those who did not. Note that the latter group includes those who take heroin or crack less often than once a week, those who take other illegal drugs, and those who do not take any drugs at all.

2.2 Overview of characteristics of respondents in 2005-06

The most common reasons for arrest were assault (26%) and shoplifting (10%). When the reasons for arrest were summarised (see Appendix C for details on how they were summarised), it can be seen that violent crimes was the most common reason (32%), which was closely followed by arrest for theft (29%).

(Table 2.2-2.1)

In total, 84% of respondents were men and 16% were women, 43% were aged from 17 to 24, 27% were aged from 25 to 34 and 30% were aged 35 or over. The majority of respondents were White, with 14% from Black, Asian, Mixed or other ethnic groups.

(Table 2.8-2.10)

In terms of education and working status, 34% had finished full-time education before the age of 16 and a further 39% finished at the age 16; 41% had been temporarily excluded from school and 23% had been permanently excluded. Respondents were more likely not to be working than working – 44% were in paid employment, full-time education or training.

(Table 2.11, 2.14, 2.15)

The majority of respondents (90%) lived in a house or flat, 3% lived in a hostel and 4% were homeless although 10% had slept rough at some point in the last four weeks. Overall, 16% had lived in a foster home or other local authority care.

(Table 2.12, 2.13, 2.16)

2.3 Reasons for arrest

Most information on offending was supplied by the respondents themselves and the information on self-reported offending is covered in Chapter 5. The reason for their current arrest was taken from custody records and coded by interviewers. The coding frame used to code reason for arrest was similar in the 2005–06 and 2004–05 surveys, but was simplified compared with the 2003–04 survey. Changes in reasons for arrest between the first and the subsequent survey years should therefore be treated with caution as they may be due to the way that arrests were coded.

In order to provide an overview, reasons for arrest were summarised into four categories. Overall in 2005–06, 32% of respondents were arrested for violent crimes, 29% for theft, 17% for drink/drug related offences, and 22% for other offences. There were some changes in summarised reasons for arrest between 2003–04, 2004–05 and 2005–06; Arrest for violent crime consistently increased from 27% in 2003–04 to 32% in 2005–06, while arrest for theft decreased from 33% to 29% over the same period.

The profile of reasons for arrest was different among those who did and those who did not take HC at least once a week. In 2005–06, those taking HC at least once a week were more likely to have been arrested for theft offences (65% compared with 24%), and less likely to have been arrested for violent offences, drink/drugs, and 'other' offences.

Among those who took HC at least once a week, there was an increase in the proportion arrested for drink/drug-related offences between 2003–04 (8%) and 2005–06 (12%). In contrast, the proportion who were arrested for theft decreased between the first and the second year of the survey among those who took HC at least weekly (from 70% to 65%, after which it remained constant). It is possible that this decrease may be explained by a change in the way offences were coded. No consistent changes were seen among those who did not take HC at least weekly.

(Table 2.1, Figure 2.1)

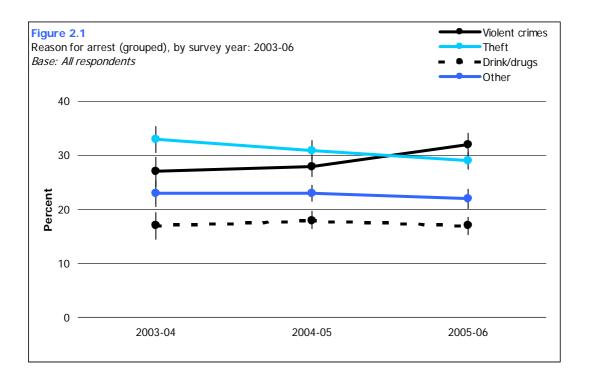
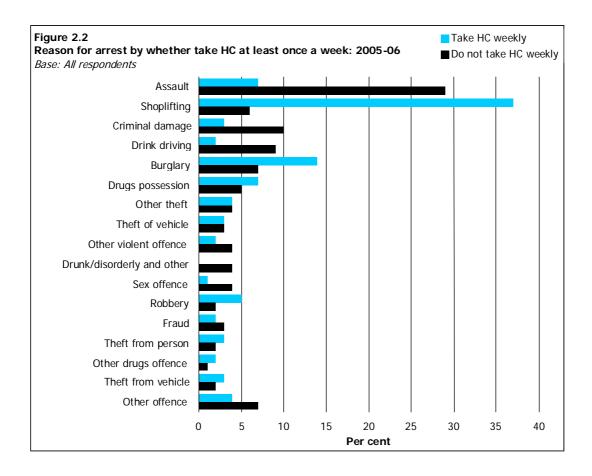


Table 2.2 shows more detailed categories of reasons for arrest and it is evident that in 2005–06, overall, the most common reasons for arrest among those interviewed were assault (26%) and shoplifting (10%). However, those who took HC at least once a week were most likely to have been arrested for shoplifting (37%) or burglary (14%). Those not taking HC at least weekly were most likely to have been arrested for assault (29%) or criminal damage (10%). Arrests for assault increased slightly from 22% of all respondents in 2004–05 to 26% in 2005–06, which was also reflected in a higher level of arrest for violent crime overall.

(Tables 2.2-2.5, Figure 2.2)



In 2005–06, overall 13% of respondents took HC at least once a week, but the proportion varied according to the reason for arrest. Those arrested for shoplifting were most likely to take HC at least weekly (45%), which was followed by those arrested for other drugs offences (27%), burglary, drugs possession, other theft and violent offence, where between 15% and 23% of respondents took HC at least once a week. Those arrested for sex offences, criminal damage, and drink-driving were least likely (1% to 4%) to take HC at least once a week. These findings were slightly different compared with 2003–04 and 2004–05; those arrested for other drugs offence in 2005–06 were more likely to take HC at least weekly (27%) compared with those in 2004–05 (22%) and 2003–04 (17%). However, it is also evident that among those arrested for drug possession, the proportion who took HC at least once a week decreased between 2004–05 (23%) and 2005–06 (18%), that is, offsetting the increase among those arrested for other drugs offences. It therefore seems that the likelihood of

taking HC at least once a week remained unchanged between 2004–05 and 2005–06 among those arrested for drug-related offences.

In addition, comparing the first two years of the survey, it can be seen that the likelihood of taking HC at least once a week in 2004–05 decreased both among those arrested for shoplifting (46%) and burglary (25%) compared with 2003–04 (54% and 36%, respectively). No significant differences were seen with respect to the other offences.

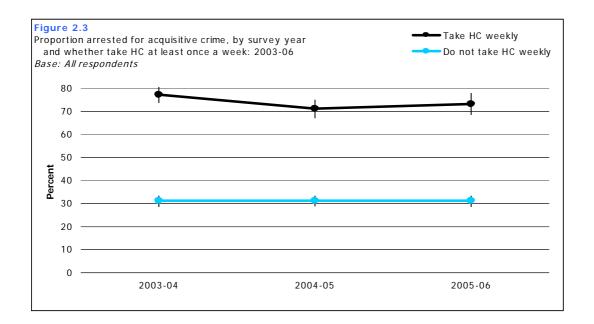
(Table 2.6)

Those who took HC at least once a week were more likely than those who did not to have been arrested for an acquisitive crime or a trigger offence. For example, in 2005–06, 73% of those who took HC at least once a week were arrested for an acquisitive crime compared with 31% of those who did not.

Among those who took HC at least once a week, the proportion arrested for acquisitive crimes decreased from 77% to 71% between 2003–04 and 2004–05, where the level remained in 2005–06. There was no change in the proportions arrested for acquisitive crimes or trigger offences among those who did not take HC at least once a week. The fall in arrests for acquisitive crime among those who took HC at least weekly is reflected in an overall decrease in arrests for acquisitive crime (from 39% in 2003–04 to 36% in 2005–06). This trend is also reflected in a lower proportion of arrests for theft, which is mentioned above.

In 2005–06, among those who took HC at least weekly, there was no difference in the proportion who were arrested for an acquisitive crime among the different age groups (71% among both those aged from 17 to 24 and those aged 35+). In contrast, in both 2004–05 and 2003–04 the prevalence of being arrested for an acquisitive crime decreased with age among those who took HC at least weekly (for example, in 2004–05, 73% of 17- to 24-year-olds were arrested for acquisitive crimes compared with 69% of those aged 35 or older. In 2003–04, the equivalent figures were 79% and 72%). There was no consistent pattern with regards to age in the prevalence of being arrested for a trigger offence. Among those who did not usually take HC in 2005–06, the prevalence of being arrested for acquisitive or trigger offences decreased with age. A difference of 10% or more is seen among respondents aged 35 or older compared with 17- to 24-year-olds for both acquisitive and trigger offences. This pattern was seen in both 2004–05 and 2003–04.

(Table 2.7, Figure 2.3)

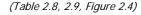


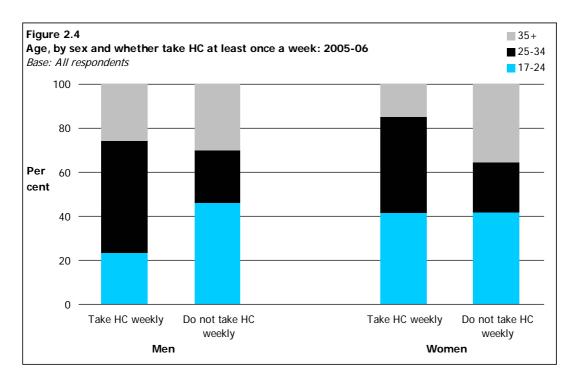
2.4 Sex and age

Respondents were more likely to be men than women: in 2005–06, 84% of participants were men, with 16% women. Similar proportions of male and female respondents were seen in 2004–05 and 2003-04.

In 2005-06, nearly half of respondents were under the age of 25: 43% of all respondents were aged between 17 and 24, 27% were aged between 25 and 34, with 30% were aged 35 or over. The age profile was similar for men and women, and was similar to 2004-05 and 2003-04.

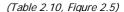
In 2005-06, 13% of respondents reported taking heroin or crack at least once a week. Respondents who said they took HC at least once a week were likely to be older than those who did not². In 2005-06, of those who took HC, 17% were aged between 17 and 24 and 24% were aged 35 or over compared with 45% and 31%, respectively, of respondents who did not usually take HC. These patterns were similar in the previous two survey years.

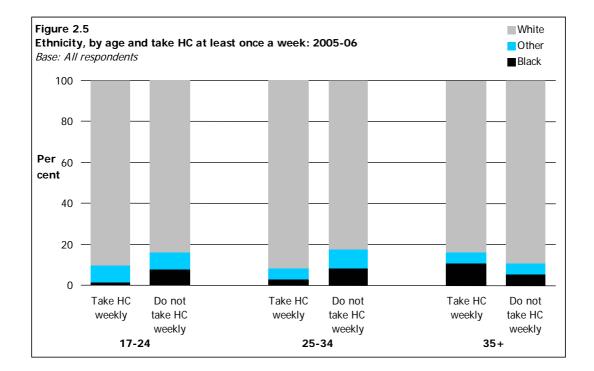




2.5 Ethnicity

In 2005–06, 86% of the sample described themselves as White, 7% as Black, 5% as Mixed ethnicity, and 1% as Asian.³ Those who took HC at least once a week were more likely to be White, and less likely to be Black or Asian. Among respondents taking HC at least once a week, 89% were White and 4% Black, compared with 85% White and 7% Black respondents who did not usually take HC (this difference was seen among those aged 17 to 34, but not among those aged 35 or over). These patterns were similar in 2004–05 and 2003–04.



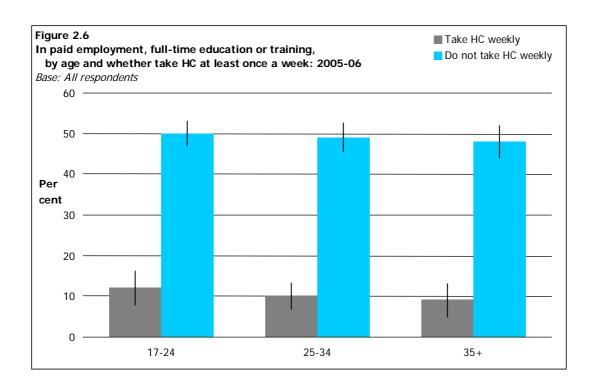


2.6 Working status

Respondents who reported using HC at least once a week were much less likely to be in paid employment or full-time education than those who did not take HC at least weekly. In 2005–06, 10% of respondents who took HC at least once a week were in paid employment, full-time education or training, compared with 49% of those who did not usually take HC. These figures were similar in 2004–05 and 2003–04.

Between 2003–04 and 2005–06 the proportion of respondents who were working did not vary by age among either those who used HC at least once a week or among those who did not.

(Table 2.11, Figure 2.6)



2.7 Accommodation

In 2005–06, respondents were most likely to live in a house or flat that they or someone else owned or rented (90%).⁴ Otherwise they were most likely to be homeless or with no fixed address (4%) or to live in a hostel (3%). Those who took HC at least once a week were more likely to be homeless (10%) or to live in a hostel (6%) than those who did not (3% and 2%, respectively) and less likely than other respondents to live in a house or flat – 80% compared with 92%. Findings were similar in 2004-05 and 2003-04.

(Table 2.12)

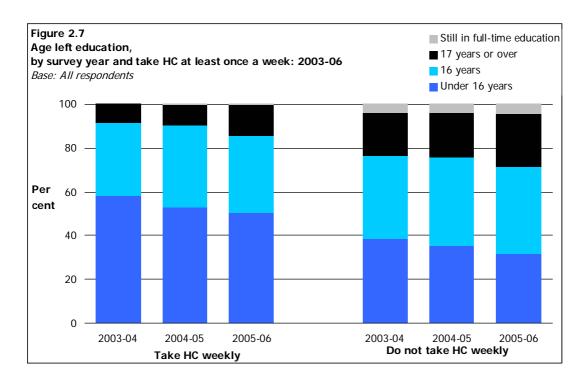
In the four weeks prior to interview, 10% of respondents in 2005-06 had slept rough.⁵ Those who took HC at least once a week were more likely to have slept rough than those who did not – 24% compared with 8%. Findings were similar in 2004–05 and 2003–04.

(Table 2.13)

2.8 Education

Most respondents had finished full-time education at the age of 16 or younger. In 2005–06, 34% were aged younger than 16 when they finished their full-time education, 39% were aged 16, 23% were aged 17 or older, and 4% were still in full-time education. Those taking HC at least once a week were more likely to have left school early. In 2005–06, 50% had left school before the age of 16, compared to 32% of those who did not usually take HC.

The proportion of respondents who had left education before the age of 16 decreased consistently from 42% in 2003–04 to 34% in 2005–06 with a corresponding increase in the proportion who left education aged 16 or older. This decrease was seen among those aged 17 to 24 and among those aged 35 or older, but not among those aged 25 to 34. This pattern was seen both among those who usually took HC and those who did not.



In 2005–06, 41% of respondents had been excluded from school temporarily and 23% had been excluded permanently. For all respondents, there was a strong relationship between age at interview and exclusion from school: younger respondents were much more likely to have been excluded. Similar results were found in 2004–05 and 2003–04.

Those taking HC at least once a week were more likely to have been excluded from school than those who did not take HC at least weekly: in 2005–06, 58% had been temporarily excluded and 36% permanently excluded, compared with 39% and 21% of those who did not usually take HC. Findings for 2004–05 and 2003–04 were similar.

(Table 2.15)

2.9 Local authority care

In 2005–06, 16% of all respondents had spent some time in a foster home, children's home or a young person's unit and this was more common among those who took HC at least once a week – 29% of those taking HC at least once a week had done so compared with 15% of those who did not take HC weekly. These patterns were similar to 2004–05 and 2003–04.

(Table 2.16)

Notes and References

- ⁴ 'Living in a house or a flat' was defined as the place where respondents lived most of the time in the last four weeks.
- ⁵ Sleeping rough was defined as "sleeping on the streets or some other public place such as a park, field etc."
- ⁶ The majority of those leaving school aged under 16 would be pupils who no longer turned up to classes or had been excluded, as it would only have been legal to leave school at 15 or under for those aged 47 or above.

The definitions of trigger offence and acquisitive crime used in this survey are shown in Appendix
 Trigger offences are those offences where if a respondent is charged with that offence, they have to provide an oral fluid sample for the Police to test for recent drug use.

² Note that those who did not take HC at least once a week includes those who frequently took other drugs as well as those who did not take any drugs.

³ This is based on respondents' own definitions of their ethnicity, using the sixteen 2001 census categories. For the purposes of analysis, these have been combined into the five categories shown in Table 2.10.

Table 2.1

Reason for arrest (grouped), by age, survey year and whether take heroin or crack at least once a week

Reason for		Take HC w	eeklv	Do not	take HC w	eeklv		Total	
arrest			_			_	I		
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
Violent	11	12	16	30	31	32	27	29	31
crimes									
Theft	72	66	62	31	28	28	37	33	30
Drink/drugs	6	9	10	16	16	17	15	15	17
Other	12	13	12	23	25	23	21	24	22
25-34									
Violent	9	11	13	29	29	36	24	25	31
crimes									
Theft	72	65	67	26	24	25	38	34	35
Drink/drugs	9	11	11	19	23	17	16	20	16
Other	10	13	9	27	24	23	22	21	19
35+									
Violent	16	12	11	33	33	37	31	31	34
crimes									
Theft	61	63	64	15	20	18	20	25	23
Drink/drugs	12	15	15	22	21	20	21	20	19
Other	12	10	10	30	26	26	28	25	24
Total									
Violent	11	11	13	31	31	35	27	28	32
crimes									
Theft	70	65	65	25	25	24	33	31	29
Drink/drugs	8	11	12	19	19	18	17	18	17
Other	11	12	10	26	25	24	23	23	22
Weighted									
bases									
17-24	475	413	263	2630	3157	3076	3121	3592	3396
25-34	606	530	479	1612	1740	1608	2245	2288	2110
<i>35+</i>	249	270	232	1885	2174	2092	2149	2483	2360
Total	1330	1214	974	6130	7070	6776	7518	8363	7867
Unweighted		•	-						
bases									
17-24	586	469	306	2903	3379	3314	3513	3880	3688
25-34	663	602	<i>521</i>	1500	1741	1673	2184	2371	2221
35+	291	278	216	1517	1800	1704	1821	2112	1958
Total	1541	1349	1043	5922	6920	6691	7521 7521	8363	7867

Table 2.2

Reason for arrest, by age and survey year

Other offence

Weighted bases

Unweighted bases

All respondents Oct 2003-Sept 2006 Reason for arrest 17-24 25-34 35+ Total 2005-2004-2004-2005-2003-2004-2003-2004-2003-2005-2003--06 % % % % % % % % % % % % Assault Shoplifting Criminal damage Drink-driving Burglary Drugs possession Other theft Theft of vehicle Other violent offence Drunk/disorderly and other Sex offence Robbery Fraud Theft from person Other drugs offence Theft from vehicle

Reason for arrest, by age and whether take heroin or crack at least once a week

Table 2.3

All respondents Oct 2005–Sept 2006

Reason for arrest		Age a	nd whether	take HC wee	kly			
	1	7-24	25	5-34	3	5+	Tota	ıl
	Yes	No	Yes	No	Yes	No	Yes	No
	%	%	%	%	%	%	%	%
Assault	7	24	7	30	4	34	7	29
Shoplifting	33	5	38	7	39	8	37	6
Criminal damage	4	12	3	8	3	9	3	10
Drink-driving	1	7	2	8	3	11	2	9
Burglary	13	8	16	7	11	4	14	7
Drugs possession	6	6	7	5	10	4	7	5
Other theft	4	4	5	4	3	3	4	4
Theft of vehicle	5	6	3	3	2	1	3	3
Other violent offence	3	5	2	4	2	2	2	4
Drunk/disorderly and		4	0	3		4	0	4
other	-	4	U	3	-	4	U	4
Sex offence	3	2	-	3	1	7	1	4
Robbery	6	4	4	2	5	0	5	2
Fraud	1	2	2	4	1	4	2	3
Theft from person	3	2	2	2	5	1	3	2
Other drugs offence	3	1	2	1	2	0	2	1
Theft from vehicle	4	2	3	2	3	1	3	2
Other offence	5	7	4	7	5	6	4	7
Weighted bases	263	3076	479	1610	232	2091	974	6777
Unweighted bases	306	3314	521	1674	216	1703	1043	6692

Table 2.4

Reason for arrest, by age and survey year, among those who take heroin or crack at least once a week

All taking heroin or crack at least once a

Oct 2003-Sept 2006

Reason for arrest		17-2	4		25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Assault	5	7	7	4	7	7	6	7	4	5	7	7
Shoplifting	35	34	33	37	37	38	37	36	39	36	36	37
Criminal damage	3	4	4	2	3	3	2	3	3	3	4	3
Drink-driving	0	1	1	2	1	2	1	1	3	1	1	2
Burglary	19	14	13	17	15	16	10	11	11	16	14	14
Drugs possession	4	6	6	4	6	7	6	12	10	4	7	7
Other theft	7	5	4	7	6	5	7	5	3	7	5	4
Theft of vehicle	6	5	5	5	2	3	1	3	2	5	4	3
Other violent offence	1	1	3	3	1	2	3	2	2	2	1	2
Drunk/disorderly and other	0	1	-	1	0	0	0	0	-	0	0	0
Sex offence	-	1	3	0	0	-	1	0	1	0	0	1
Robbery	4	3	6	2	3	4	6	3	5	3	3	5
Fraud	1	1	1	2	0	2	3	2	1	2	1	2
Theft from person	3	5	3	1	3	2	2	6	5	2	4	3
Other drugs offence	2	2	3	2	4	2	4	2	2	2	2	2
Theft from vehicle	3	3	4	4	3	3	3	1	3	3	3	3
Other offence	8	7	5	7	9	4	7	5	5	8	7	4
Weighted bases	477	413	263	615	530	479	250	270	232	1343	1214	974
Unweighted bases	589	469	306	671	602	521	292	278	216	1553	1349	1043

Table 2.5

Reason for arrest, by age and survey year, among those who do not take heroin or crack at least once a week

All not taking heroin or crack at least once a

Oct 2003-Sept 2006

Week							:			<u> </u>		
Reason for arrest		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Assault	14	22	24	18	24	30	24	29	34	18	25	29
Shoplifting	6	6	5	9	9	7	6	8	8	7	7	6
Criminal damage	11	12	12	9	7	8	9	7	9	10	9	10
Drink-driving	6	7	7	8	11	8	14	13	11	9	10	9
Burglary	9	9	8	5	6	7	3	5	4	6	7	7
Drugs possession	4	4	6	5	6	5	2	3	4	4	4	5
Other theft	6	4	4	6	4	4	3	4	3	5	4	4
Theft of vehicle	7	7	6	3	2	3	2	1	1	5	4	3
Other violent offence	6	5	5	6	4	4	6	3	2	6	4	4
Drunk/disorderly and other	4	3	4	3	4	3	4	4	4	4	4	4
Sex offence	1	2	2	2	3	3	4	6	7	2	4	4
Robbery	4	4	4	1	2	2	1	1	0	2	2	2
Fraud	2	2	2	4	3	4	3	3	4	3	2	3
Theft from person	1	1	2	1	2	2	0	1	1	1	1	2
Other drugs offence	2	2	1	2	1	1	3	1	0	2	2	1
Theft from vehicle	2	2	2	2	1	2	0	1	1	1	1	2
Other offence	13	10	7	14	11	7	15	10	6	14	10	7
Weighted bases	2630	3157	3076	1612	1740	1608	1889	2174	2092	6134	7070	6776
Unweighted bases	2903	3379	3314	1500	1741	1673	1519	1800	1704	5924	6920	6691

Table 2.6

Whether take heroin or crack at least once a week, by reason for arrest and survey year

All respondents Oct 2003–Sept 2006

Reason for arrest										
		Take H	C weekly		Wei	ghted bas	es	Unv	veighted bas	es
		2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-05	2005-
		04	05	06	04	05	06	04		06
Shoplifting	%	54	46	45	909	941	797	1224	1075	859
Burglary	%	36	25	23	<i>598</i>	655	586	669	<i>782</i>	696
Drugs possession	%	20	23	18	298	385	400	366	342	377
Other drugs offence	%	17	22	27	166	140	84	941	164	136
Other theft	%	22	20	15	1148	940	878	1305	1151	1007
Other violent offence	%	12	11	14	607	499	467	601	591	567
Criminal damage	%	3	2	1	228	269	240	134	165	123
Assault	%	5	6	4	642	689	719	553	644	612
Other drink offences	%	5	5	3	1188	1839	2003	1127	2004	2198
Drink-driving	%	3	2	3	570	685	599	297	324	302
Sex offence	%	2	2	4	151	261	251	110	183	186
Other offence	%	10	10	8	972	980	724	882	844	671
Acquisitive crime										
Yes	%	35	28	26	2937	3032	2781	3473	3521	3101
No	%	7	7	5	4539	<i>5253</i>	4968	4004	4749	4633
Trigger offence										
Yes	%	33	27	24	3401	3571	3294	4024	4054	3650
No	%	6	5	4	4075	4714	4455	3453	4216	4084
Total	%	18	15	13	7476	8285	7749	7477	8270	7734

Table 2.7

Whether arrested for acquisitive crime or a trigger offence, by age, survey year and whether take heroin or crack at least once a week

All respondents									-Sept 2006
Reason for arrest		Take HC weekly		Do not take HC weekly				Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
Acquisitive crime	79	73	71	38	35	35	44	40	38
Trigger offence	83	79	79	45	41	42	51	46	45
25-34									
Acquisitive crime	78	70	75	32	30	32	45	40	42
Trigger offence	83	80	84	40	38	38	52	48	49
35+									
Acquisitive crime	72	69	71	20	25	23	26	30	28
Trigger offence	80	83	84	25	30	28	31	36	34
Total									
Acquisitive crime	77	71	73	31	31	31	39	37	36
Trigger offence	83	80	83	37	37	37	45	43	43
Weighted bases									
17-24	477	413	263	2630	3157	3076	3123	3592	3396
25-34	615	531	479	1612	1740	1608	2254	2289	2110
<i>35+</i>	250	270	232	1889	2174	2092	2154	2483	2360
Total	1343	1215	974	6134	7070	6776	7535	8364	7867
Unweighted bases									
17-24	589	469	306	2903	3379	3314	3516	3880	3688
25-34	671	603	521	1500	1741	1673	2192	2372	2221
<i>35+</i>	292	278	216	1519	1800	1704	1824	2112	1958
Total	1553	1350	1043	5924	6920	6691	7535	8364	7867

Table 2.8

Sex, by survey year and whether take heroin or crack at least once a week

All respondents								Oct 2003	-Sept 2006	
Sex		Take HC v	weekly	Do no	t take HC	weekly	Total			
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	
	%	%	%	%	%	%	%	%	%	
Male	82	78	80	86	85	85	86	84	84	
Female	18	22	20	14	15	15	14	16	16	
Weighted bases	1343	1215	974	6134	7070	6776	7535	8364	7867	
Unweighted bases	1553	1350	1043	5924	6920	6691	7535	8364	7867	

Table 2.9

Age, by sex, survey year and whether take heroin or crack at least once a week

All respondents								Oct 2003	-Sept 2006
Age	Т	ake HC we	ekly	Do no	t take HC w	eekly		Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
Male									
17-24	35	32	23	43	45	46	42	43	43
25-34	46	44	51	27	25	24	30	27	27
35+	18	24	26	30	30	30	28	29	30
Female									
17-24	37	41	41	40	42	42	39	42	42
25-34	43	42	44	22	24	23	27	27	26
35+	20	17	15	38	34	35	33	31	32
Total									
17-24	36	34	27	43	45	45	41	43	43
25-34	46	44	49	26	25	24	30	27	27
35+	19	22	24	31	31	31	29	30	30
Weighted bases									
Male	1105	950	776	5303	6017	<i>5772</i>	6454	7037	6647
Female	238	265	197	830	1053	1004	1081	1327	1220
Total	1343	1215	974	6134	7070	6776	7535	8364	7867
Unweighted									
bases									
Male	1231	1065	840	5119	5947	<i>5724</i>	6396	7095	6678
Female	322	285	203	805	973	967	1139	1269	1189
Total	1553	1350	1043	5924	6920	6691	7535	8364	7867

Ethnic group, by age, survey year and whether take heroin or crack at least once a week

Table 2.10

Oct 2003-Sept 2006 All respondents Ethnic group Take HC weekly Do not take HC weekly Total 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 2004-05 2005-06 2003-04 % % % % % % % % % 17-24 White Mixed Asian Black Other 25-34 White Mixed Asian Black Other 35+ White Mixed Asian Black Other Total White Mixed Asian Black Other Weighted bases 17-24 25-34 35+ Total Unweighted bases 17-24 25-34 *35+* Total

Table 2.11

take heroin or crack at least once a week

In paid employment, full-time education or training, by age, survey year and whether

All respondents								Oct 2003	-Sept 2006
In paid employm	ent,								
full-time educati	ion or	Take HC v	weekly	Do no	ot take HC	weekly		Total	
training									
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
Age	%	%	%	%	%	%	%	%	%
17-24	10	10	12	48	49	50	42	45	47
25-34	10	9	10	50	50	49	39	41	40
35+	10	9	9	44	47	48	40	42	44
Total	10	9	10	47	49	49	40	43	44
Weighted bases									
17-24	469	413	263	2609	3157	3076	3093	3591	3396
25-34	611	531	479	1606	1740	1608	2243	2289	2110
<i>35+</i>	245	270	232	1884	2174	2092	2143	2483	2360
Total	1325	1214	974	6102	7070	6776	7483	8364	7867
Unweighted bases									
17-24	<i>578</i>	468	306	2881	3379	3314	3481	3879	3688
25-34	666	603	521	1490	1741	1673	2177	2372	2221
35+	289	278	216	1513	1800	1704	1814	2112	1958
Total	1534	1349	1043	5886	6920	6691	7475	8363	7867

Accommodation, by age, survey year and whether take heroin or crack at least once a week

Table 2.12

Unweighted bases

17-24

25-34

35+

Total

Table 2.13

Slept rough in the last 4 weeks, by age, survey year and whether take heroin or crack a

Slept rough in the last 4 weeks, by age, survey year and whether take heroin or crack at least once a week

All respondents								Oct 2003	-Sept 2006
Slept rough in		Take HC we	eekly	n od	not take HO	weekly		Total	
the last 4 weeks	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24	30	25	22	9	10	9	12	12	10
25-34	28	25	24	9	9	8	14	13	12
35+	24	28	24	8	8	8	10	10	9
Total	28	25	24	9	9	8	12	11	10
Weighted bases									
17-24	477	413	263	2626	3157	3076	3119	<i>3592</i>	3396
25-34	615	531	479	1611	1740	1608	2253	2289	2110
<i>35+</i>	250	270	232	1888	2174	2092	2153	2483	2360
Total	1343	1215	974	6128	7070	6775	7530	8364	7867
Unweighted bases									
17-24	589	469	306	2902	3379	3314	3515	3880	3688
25-34	671	603	521	1499	1741	1672	2191	2372	2220
<i>35+</i>	292	278	216	1518	1800	1704	1823	2112	1958
Total	1553	1350	1043	5921	6920	6690	7532	8364	7866

Table 2.14

Age finished full-time education, by age, survey year and whether take heroin or crack at least once a week

All respondents Oct 2003-Sept 2006 Age finished full-time Take HC weekly Do not take HC weekly Total education 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 % % % % % % % % 17-24 Under 16 years 16 years 17 years or over Still in full-time education 25-34 Under 16 years 16 years 17 years or over Still in full-time education 35+ Under 16 years 16 years 17 years or over Still in full-time education Total Under 16 years 16 years 17 years or over Still in full-time education Weighted bases 17-24 25-34 35+ Total Unweighted bases 17-24 25-34 35+ Total

Table 2.15

Temporary or permanent exclusion from school, by age, survey year and whether take heroin or crack at least once a week

All respondents Oct 2003–Sept 2005

All respondents								Oct 2003–	<i>Sept 2005</i>
Temporary or permanent exclusion	sion	Take HC	weekly	Do no	ot take HO	: weekly		Total	
from school		Take Ho	Weeking		or take in	Weeking		lotui	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
Temporarily excluded from school	76	69	71	54	55	56	57	57	58
Permanently excluded from school	55	50	48	31	29	30	35	32	32
25-34									
Temporarily excluded from school	54	54	62	33	32	37	39	37	43
Permanently excluded from school	37	36	37	17	16	20	22	21	24
35+									
Temporarily excluded from school	38	45	36	13	14	14	16	17	17
Permanently excluded from school	26	25	21	8	8	8	10	10	10
Total									
Temporarily excluded from school	59	57	58	36	37	39	40	40	41
Permanently excluded from school	41	38	36	20	19	21	24	22	23
Weighted bases*									
17-24	477	413	263	2628	3156	3076	3122	3591	3396
25-34	615	531	479	1612	1740	1607	2254	2289	2109
<i>35+</i>	250	270	232	1889	2174	2092	2154	2483	2360
Total	1343	1215	974	6132	7070	6774	7533	8364	7865
Unweighted bases*									
17-24	<i>589</i>	469	306	2901	3378	3314	3514	3879	3688
25-34	671	603	521	1499	1741	1671	2191	2372	2219
<i>35+</i>	292	278	216	1519	1800	1704	1824	2112	1958
Total	<i>1553</i>	1350	1043	5921	6919	6689	<i>7532</i>	8363	7865

^{*}The bases of respondents who were asked whether they were permanently excluded from school were marginally larger than for respondents who were asked whether they were temporarily excluded (the difference being 5 or less in some of the subgroups)

Table 2.16

Ever lived in a foster home, children's home or young person's unit, by age, survey year and whether take heroin or crack at least once a week

All respondents	Oct 2003-Sept 2005
-----------------	--------------------

Ever lived in local authority care	Take	HC weekl	у	Do no	ot take HC	weekly		Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24	31	34	34	17	16	15	19	18	17
25-34	26	30	27	16	16	16	18	19	19
35+	31	32	28	12	14	12	15	16	14
Total	29	32	29	15	15	15	18	18	16
Weighted bases									
17-24	477	413	263	2630	3156	3074	3123	3591	3394
25-34	615	531	479	1612	1740	1608	2254	2289	2110
<i>35+</i>	250	270	232	1888	2174	2092	2153	2483	2360
Total	1343	1215	974	6133	7069	6773	7534	8363	7865
Unweighted bases									
17-24	589	469	306	2903	3377	3312	3516	3878	3686
25-34	671	603	521	1500	1741	1672	2192	2372	2220
<i>35+</i>	292	278	216	1518	1800	1704	1823	2112	1958
Total	1553	1350	1043	5923	6918	6688	7534	8362	7864

3 Substance misuse

3.1 Introduction

This chapter covers self-reported drug use and drinking. It reports on a range of drugs used in the last month and in the last year, though the focus is on heroin, crack and powder cocaine since these drugs are the ones most commonly used with the exception of cannabis. As discussed below, the focus of the report covering the first year of the survey was on those who had taken heroin, crack or powder cocaine in the last year and the last month and those who had not taken either of these drugs within the reference periods. However, since the composition of the group who had taken at least one of these drugs in the last month changed notably in the second and third year of the survey compared to the first year, this report focuses on those who took heroin or crack at least once a week. This chapter also reports on these changes in detail. A comparison of self-reported drug use and the results from testing oral fluid samples for recent use of opiates and cocaine is contained in Appendix B.

3.2 Drugs taken

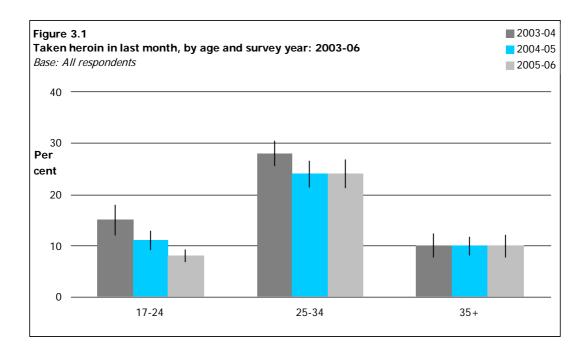
All respondents were asked about their use of ten different individual drugs over a range of time periods, including in the last week, last month or last year. Respondents were also asked when they last used each drug (if they had ever used it). The drugs included in the questionnaire were: cannabis, heroin, crack cocaine, powder cocaine, tranquillisers, ecstasy, amphetamines, unprescribed methadone, magic mushrooms and LSD. In 2005-06, 52% of respondents had taken one or more drugs in the last month. As in previous years, cannabis was the most widely taken drug in 2005-06, with 41% who had taken it in the last month, followed by heroin (13%) powder cocaine (13%), and crack (11%). Overall, in 2005-06, 15% had either taken heroin or crack, and 26% had either taken heroin, crack or cocaine (HCC) in the last month.

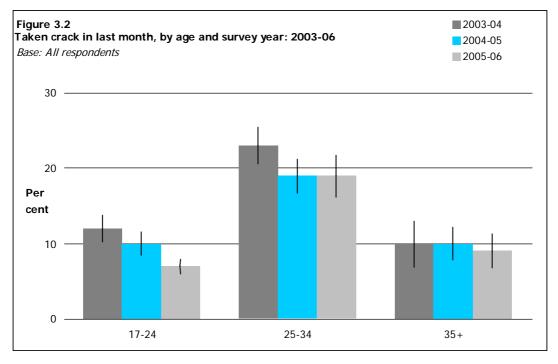
(Table 3.1)

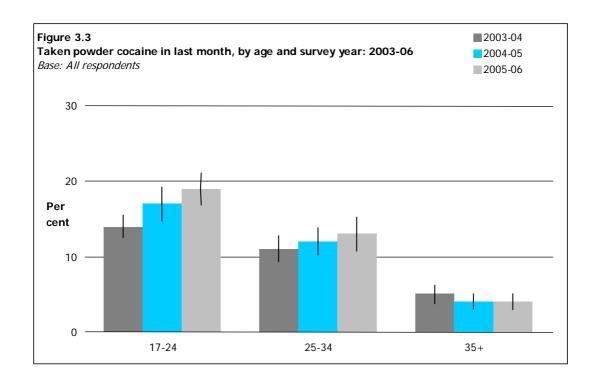
There were changes between the survey years in the prevalence of heroin, crack and powder cocaine use among different age groups, whereas no such change was seen in ecstasy use. Prevalence of taking heroin or crack in the last month decreased consistently over the three survey years among 17- to 24-year-olds; heroin use in the last month decreased from 15% in 2003–04 to 11% in 2004–05 and to 8% in 2005–06, and crack use from 12% in 2003–04 to 10% 2004–05 and to 7% in 2005–06. In contrast, there was a small but consistent increase in the proportion reporting taking powder cocaine in the last month among this age group over the three survey years; 14% had taken powder cocaine in the last month in 2003–04, whereas the equivalent figure was 19% in 2005–06. There was no consistent trend among those aged 25 to 34, although there was a decrease in the use of both heroin and crack in this age group between 2003–04 and 2004–05; heroin use decreased from 28% in 2003–04 to 24% in 2004–05, and crack use from 23% to 19%. There was no difference among this age group in the prevalence of taking heroin or crack in the last month between 2004–05 and 2005–06. The level of heroin, crack and powder cocaine use in the previous month among those aged

35 or older remained constant over the three survey years. The net results of these changes in the different age groups was an overall decrease in the proportion of respondents who had taken heroin or crack in the last month, but no significant change in the proportion who had taken powder cocaine or ecstasy in the last month, nor in the proportion who had taken HCC in the last month.

(Table 3.1, Figures 3.1-3.3)





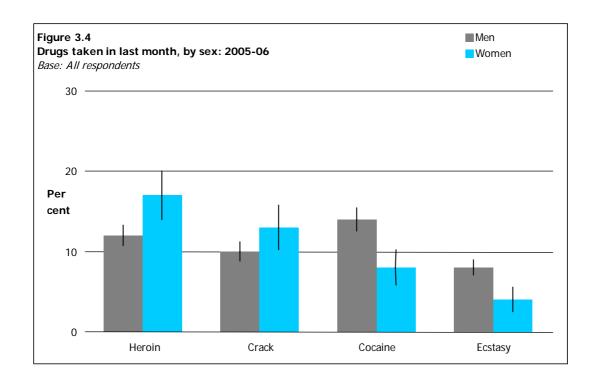


In 2005–06, 59% of respondents had taken at least one drug in the last 12 months before interview, and patterns of use of individual drugs in the last year were similar to patterns of use in the last month. In the last 12 months, 35% of respondents had taken heroin, crack or powder cocaine. The changes in the pattern of drug use in the last 12 months between 2003–04, 2004–05 and 2005–06 was very similar to the changes in drug use in the last month over the same period.

(Table 3.2)

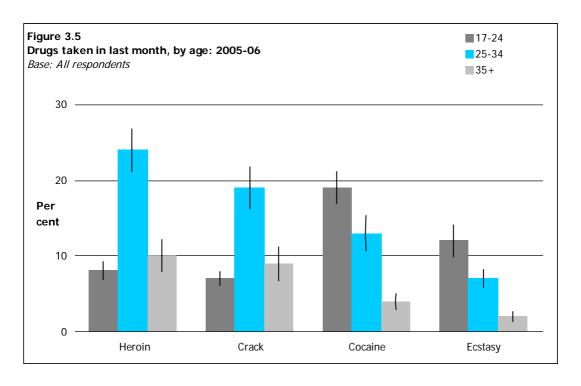
Arrested men and women had different patterns of drug use. In 2005–06, men were more likely than women to have taken powder cocaine in the last month (14% compared with 8%) but were less likely to have taken heroin (12% compared with 17%) or crack (10% compared with 13%). In 2005–06, men were also more likely to have taken ecstasy in the last month compared to women (8% and 4%, respectively). Similar patterns were found in 2004–05 and 2003–04.

(Table 3.1, Figure 3.4)



Patterns of drug use also varied with age. In 2005-06, use of powder cocaine in the last month decreased with age (19% of 17- to 24-year-olds compared with 4% of those aged 35 or over). In contrast, use of heroin in the last month was most prevalent among those aged 25 to 34 (24%) compared with 17- to 24-year-olds (8%) and those aged 35 or over (10%). Use of crack was also most prevalent among the 25 to 34 age group. Ecstasy use in the last month was most common among those aged 17 to 24 (12%) compared with those aged 25 to 34 (7%) and those aged 35 or older (2%). Similar patterns were found in 2004-05 and 2003-04.

(Table 3.1, Figure 3.5)



There was no relationship in 2005–06 between ethnic group and taking drugs in the last month for either of heroin, crack, powder cocaine or ecstasy. Ethnicity was related to use of cannabis with Asian respondents being the least likely group to have taken cannabis in the last month (33%) compared with over 40% for White, Mixed and Black groups. It should be borne in mind that as 86% described themselves as White, the sample sizes for other ethnic groups are relatively small and thus it is difficult to identify differences. Though there may be differences in drug taking by ethnic group, this survey has not been designed to examine differences with regards to ethnicity, and thus is not capable to detecting anything other than substantial differences in behaviour between the groups. Findings in 2004–05 and 2003–04 were similar.

(Table 3.3)

3.3 Heroin, crack, and powder cocaine (HCC) users

There was evidence of considerable polydrug use among drug users. Among those who had taken HCC in the last month, in 2005–06, 26% had taken heroin and crack in the last month, 40% had taken powder cocaine only, and 17% had taken heroin only. The pattern of polydrug use was different from 2004–05 and 2003–04, which reflected a consistent trend of a relative decrease in use of heroin and crack and a relative increase in use of powder cocaine. The rise in powder cocaine use was primarily attributed to an increase in use among those aged 17 to 24.

(Table 3.4)

Although the overall prevalence of having used HCC in the last month and the last year was not significantly different between 2005–06, 2004–05 and 2003–04, the composition of the group who used HCC was different. The age and offending characteristics of cocaine users are very different from those of heroin or crack users. In order to avoid conflating changes in offending and other characteristics associated with drug taking with those related to age or other demographic characteristics, the majority of this report will analyse differences between those who took HC at least once a week and those who did not take HC at least weekly. This report thus differs from the one covering the first year of the survey, where differences were analysed between those who took HCC at least once in the last year and those who did not take HCC at least yearly. This difference in composition should be borne in mind when interpreting any change over time.

3.4 Frequency of drug taking

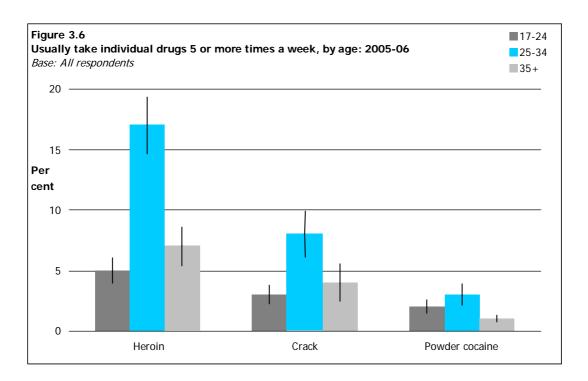
Respondents who had ever used any of the ten individual drugs surveyed were asked how often they usually took each drug. Although similar proportions of respondents had taken heroin and crack in the last month, heroin was used more frequently. In 2005–06, 9% of respondents usually took heroin at least 5 times a week compared with 4% who took crack at least 5 times a week and 2% who took powder cocaine at least 5 times a week. In 2005–06, 1% of respondents took ecstasy at least 5 times a week.

(Table 3.5-3.8)

Among those aged 17 to 24, the proportion of respondents who took heroin 5 or more days a week fell consistently from 12% in 2003–04 to 5% in 2005–06. There was no change in the frequency of heroin use among older age groups. The changing pattern of frequent heroin use among 17- to 24 year-olds was reflected in an overall decrease of the proportion of respondents who took heroin 5 or more days a week from 13% in 2003–04 to 9% in 2005–06.

In 2005–06, frequent use of heroin was most prevalent among 25- to 34-year-olds with 17% who usually took heroin at least 5 times a week. Equivalent figures for 17- to 24-year-olds and those aged 35 or over were 5% and 7%, respectively. In addition to this age pattern, young female respondents were more likely to take heroin frequently than young male respondents. For example, in 2005–06, 13% of women aged 17 to 24 took heroin on 5 or more days a week compared with 4% among men aged 17 to 24. There was no difference between men and women among those aged 25 or over. Similar patterns were found in 2004–05 and 2003–04.

Frequent use of crack showed a similar pattern with age, and as with heroin use young female respondents were more likely than young male respondents to take crack frequently. However frequent use of powder cocaine and ecstasy was similar among all age group, and among men and women. These patterns were also seen in 2004–05 and 2003–04.

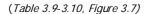


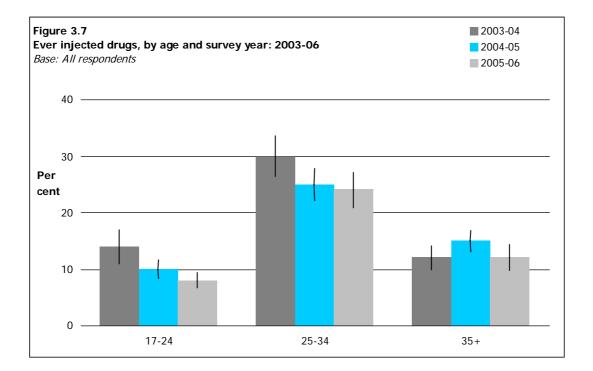
(Table 3.5-3.8, Figure 3.6)

3.5 Injecting drugs

Respondents who had ever used amphetamines, heroin, crack, powder cocaine (or drugs other than the specific ten listed drugs) were asked whether they had ever injected drugs. There was a consistent decrease in the prevalence of ever having injected drugs between 2003–04 (18%) and 2005–06 (13%). This decrease was likely to be the consequence of both a larger proportion of respondents who had never taken drugs that could be injected (44% in 2003–04 and 47% in 2005–06), and a decrease in the proportion of injectors among respondents who did use these drugs (33% in 2003–04 and 25% in 2005–06). Between 2003–04 and 2004–05 prevalence of ever having injected drugs decreased among those aged 17 to 34, but there was no consistent change among those aged 35 or over.

In 2005–06, those aged between 25 and 34 were most likely to have ever injected drugs (24%) compared with 8% of those aged 17 to 24 and 12% of those aged 35 or over. There was no difference among men and women in their likelihood of ever having injected drugs (13% and 14%, respectively). Similar patterns in terms of age and sex were seen among those who had taken drugs that could be injected. It should be noted, however, that women were more likely than men to have injected drugs in both 2004–05 and 2003–04 (both among all respondents and among respondents that had taken drugs that could be injected). The convergence between men and women in the prevalence of injecting drugs is likely to be explained by the fact that the decrease among male respondents was limited to those aged 17 to 34, whereas among female respondents a decrease was seen among all age groups.





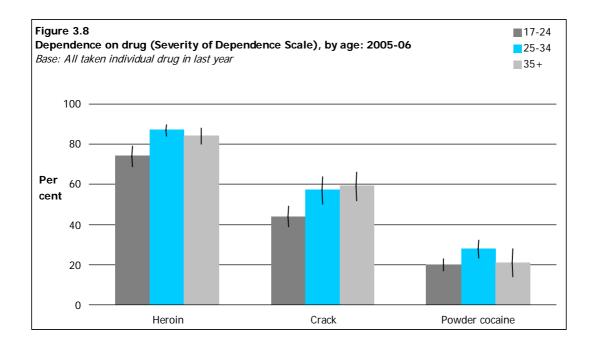
3.6 Dependence

Dependence on individual drugs was measured using the Severity of Dependence Scale (SDS), which uses five questions to measure dependence (see Appendix E). Dependence was only measured for heroin, crack and powder cocaine. In 2005–06, among those who had used individual drugs in the last year, dependence on heroin was greater than on crack or powder cocaine – 85% of those who had taken heroin in the last year were assessed as dependent. Equivalent figures for crack and powder cocaine were 55% and 23%, respectively. Results were similar to 2004–05 and 2003–04.

In 2005–06, among those who had taken each drug, dependence was associated with age for both heroin and crack, but not powder cocaine. In 2005–06 among heroin users, dependence was lowest among 17- to 24-year-olds (75%) compared with 90% among 25- to 34-year-olds and 87% among those aged 35 or older. The equivalent figures for crack were 45% among those aged 17 to 24, 59%

among those aged 25 to 34, and 61% among those aged 35 or older. In contrast, in 2003–04, there was no relationship between dependence and age for any of these drugs.

(Table 3.11-3.14, Figure 3.8)

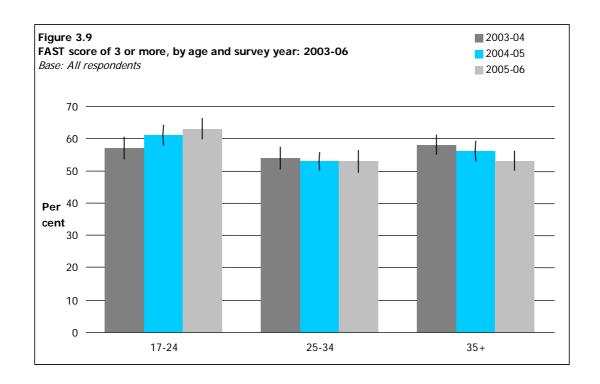


3.7 Harmful alcohol use

Dependent or harmful alcohol use among respondents was assessed using the Fast Alcohol Screening Test (FAST) which uses between one and four questions to screen for dependent drinking (see Appendix E). Dependent alcohol use is defined as having a FAST score of 3 or more.

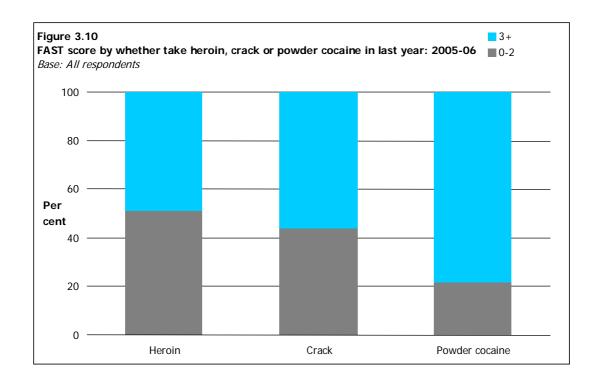
In 2005–06, 57% of respondents were dependent drinkers. Men were more likely than women to have a FAST score of 3 or more (57% and 50%, respectively). In 2005–06, dependent alcohol use was highest among those aged 17 to 24 (63%) compared with those aged 25 or older (53%). Among those aged 17 to 24, the proportion who had a FAST score of 3 or more increased consistently between 2003–04 (57%) and 2005–06 (63%). Similar patterns were seen among the two older age groups in 2004–05, but not in 2003–04 where levels of dependent drinkers did not vary significantly with age.

(Table 3.15, Figure 3.9)



Those who took heroin or crack at least once a week were less likely to be dependent drinkers than those who did not take either of these drugs at least once a week. In 2005–06, 47% of this group had a FAST score of 3 or more, compared with 59% of those who did not usually take heroin or crack. Those aged 17 to 24, both among those who did and who did not take heroin or crack weekly, were slightly more likely to have a FAST score of 3 or more compared with those in the older age groups. Respondents who had used cocaine in the past year were more likely than those who had used heroin or crack to be dependent drinkers – 78% of those who had used powder cocaine in the last year had a FAST score of 3 or more, compared with 49% of those who had taken heroin and 56% of those who had taken crack in the last year.

(Table 3.15-3.16, Figure 3.10-3.11)



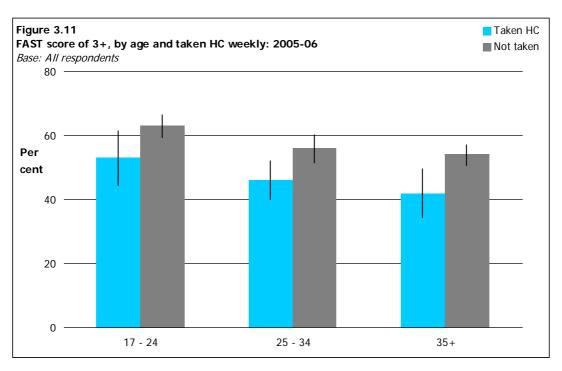


Table 3.1

Taken drugs in last month, by sex, age and survey year

All respondents										Oct 2	2003–Sep	ot 2006
Taken drug in last month		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men												
Cannabis	59	57	55	51	47	44	30	27	24	48	45	43
Heroin	14	10	6	27	22	23	10	10	11	17	13	12
Crack	12	9	5	22	18	19	10	10	9	14	12	10
Powder cocaine	14	17	20	12	13	13	5	5	5	11	12	14
Tranquillisers	6	4	3	15	12	11	8	7	7	9	7	6
Ecstasy	15	15	13	9	8	8	3	3	2	10	9	8
Amphetamines	8	7	6	11	9	7	6	6	4	8	7	6
Unprescribed methadone	4	3	2	9	7	8	3	3	3	5	4	4
Magic mushrooms	2	2	1	1	1	1	1	0	0	1	1	1
LSD	1	2	1	1	1	1	0	1	0	1	1	1
HCC	28	26	26	38	33	36	17	16	16	28	25	26
HC	17	13	8	31	25	27	14	13	13	20	16	15
Any drug	66	64	63	64	61	61	38	37	34	58	55	54
Women												
Cannabis	47	42	38	39	32	31	20	22	14	36	33	29
Heroin	21	19	17	35	33	29	12	10	8	22	20	17
Crack	17	15	14	32	27	22	11	10	6	19	17	13
Powder cocaine	8	13	14	5	8	8	2	2	1	5	8	8
Tranquillisers	11	8	6	20	21	13	12	13	11	14	13	9
Ecstasy	12	13	7	3	5	5	2	1	1	7	7	4
Amphetamines	7	9	10	10	6	9	4	5	6	7	7	8
Unprescribed methadone	6	7	6	6	9	9	2	4	2	5	6	5
Magic mushrooms	2	1	1	-	1	0	0	_	_	1	1	0
LSD	1	1	1	_	0	1	1	_	_	1	1	0
HCC	28	31	31	43	41	36	15	14	9	28	28	25
HC	24	22	20	41	38	31	14	13	9	25	23	19
Any Drug	58	57	52	57	55	54	33	34	26	49	49	44
Total		- 37	- 52	37			33	- 34		7/	77	
Cannabis	57	55	53	49	45	42	28	26	22	46	43	41
Heroin	15	11	8	28	24	24	10	10	10	18	14	13
Crack	12	10	7	23	19	19	10	10	9	15	13	11
Powder cocaine	14	17	, 19	11	12	13	5		4	10	12	13
Tranquillisers	7	5	4	16	13	11	9	4 8	8	10	8	13 7
•	, 15	ວ 15	12	8		7	3	2	2	9	9	8
Ecstasy	8		7	10	8				4	8		
Amphetamines		8		l	8 7	8	6 3	6		5	7	6
Unprescribed methadone	4	4	2	8		8	i	3	3	i	5	4
Magic mushrooms	2	2	1	1	1	1	1	0	0	1	1	1
LSD	1	2	1	1	1	1	0	0	0	1	1	1
HCC	28	27	27	39	34	36	16	16	15	28	26	26
HC	18	14	10	32	27	28	14	13	12	21	17	15
Any drug	65	63	61	63	60	60	37	36	32	57	54	52
Weighted bases												
Men	2692	3014	2843	1945	1915	1777	1779	2042	1947	6419	6972	6566
Women	420	<i>556</i>	500	290	358	319	361	404	383	1072	1319	1201
Total	3112	3570	3342	2235	2274	2096	2139	2446	2330	7491	8290	7768
Unweighted bases												
Men	2959	<i>3255</i>	3097	1860	1986	1870	1537	1782	1619	6359	7023	6586
Women	538	<i>595</i>	530	318	365	333	276	299	307	1132	1259	1170
Total	3497	3850	3627	2178	2351	2203	1813	2081	1926	7491	8282	7756

Table 3.2

Taken drugs in last year, by sex, age and survey year

Drug use in the last month, by ethnicity and survey year

	All respondents
2::	
	Oct 200

Used drug in		White			Mixed			Asian			Black			Other			Total	
last month																		
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Cannabis	47	44	40	60	54	55	24	27	33	52	42	47	37	23	24	46	43	
Heroin	19	16	14	17	1	10	1	12	9	7	51	6	∞	σı	12	18	14	13
Crack	15	13	<u> </u>	22	15	14	8	10	8	14	9	12	14	ъ	10	15	13	
Powder cocaine	1	13	14	9	1	13	4	∞	ω	4	ω	6	6	6		10	12	
Tranquillisers	11	10	8	57	2	4	2	ω	2	ω	_	_	1	0	4	10	8	7
Ecstasy	10	10	œ	œ	ъ	œ	2	2	2	4	ω	ω	2	4	7	9	9	
Amphetamines	9	8	7	4	6	ω	_	2	2	2	0	_	1	2	4	∞	7	
Unprescribed	σ	υ	4	2	ω	_	4	51	6	2	_	_	1	0	ъ	Sī.	IJ	
methadone				•••••														
Magic mushrooms	_	_	_	2	_	'	_			_		0	ω			_	_	
LSD	_	_	_	2	_	0	_		_	0	0	,	,				_	
HCC	29	28	27	30	25	26	15	18	10	17	12	17	19	11	21	28	26	26
HC	22	19	16	24	17	15	13	13	10	16	10	14	16	6	12	21	17	
Any drug	57	56	53	69	62	64	32	35	40	56	46	52	42	26	35	57	54	52
Weighted bases	6287	6864	6436	253	302	346	288	121	98	557	587	515	92	106	105	7491	8290	١.
Unweighted bases	6286	6959	6393	279	293	350	284	108	96	552	543	536	78	94	100	7491	8282	7756

Polydrug use in last month, by sex, age and survey year

Frequency of heroin use, by sex, age and survey year

Total

Frequency of crack use, by sex, age and survey year

Table 3.7

Frequency of powder cocaine use, by sex, age and survey year

All respondents										UCT 2	2003–Sep	1 2006
Frequency of powder		17-24			25-34		:	35+			Total	
cocaine use	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005
	04	05 %	06	04	05 %	06	04	05 %	06	04 %	05	06 %
84	%	76	%	%	76	%	%	76	%	76	%	70
Men	0	•	0		0	•	4		4	_	2	•
5 or more days a week	2	2	2	2	2	3	1	1	1	2	2	2
3 or 4 days a week	1	1	1	1	1	2	0	1	1	1	1	1
1 or 2 days a week	4	4	4	4	3	4	2	1	1	3	3	3
1 or 2 days a month	6	7	8	5	5	4	3	1	1	5	5	5
A few times a year	6	6	7	6	6	5	3	3	3	5	5	5
Less often than once a year	0	0	0	1	0	0	0	1	0	0	0	0
Only ever taken once	7	7	7	5	5	5	2	3	2	5	5	5
Used to take, do not take	18	18	17	32	30	31	16	17	19	21	21	21
now												
Never taken	56	54	53	46	47	46	74	72	72	58	57	57
Women												
5 or more days a week	1	1	1	1	0	3	-	0	0	1	1	1
3 or 4 days a week	0	2	1	1	0	2	1	-	-	1	1	1
1 or 2 days a week	2	2	2	1	0	2	0	0	0	1	1	1
1 or 2 days a month	3	5	6	2	4	2	1	0	1	2	3	3
A few times a year	6	5	4	3	3	4	1	2	1	3	4	3
Less often than once a year	0	0	1	0	1	0	0	0	-	0	1	0
Only ever taken once	6	6	6	3	5	3	2	0	3	4	4	4
Used to take, do not take	22	18	18	25	33	29	13	15	11	20	21	19
now												
Never taken	60	61	61	64	53	55	82	80	84	68	65	67
Total												
5 or more days a week	2	2	2	2	2	3	1	1	1	2	2	2
3 or 4 days a week	1	1	1	1	1	2	0	0	1	1	1	1
1 or 2 days a week	4	4	4	3	3	4	1	1	1	3	3	3
1 or 2 days a month	6	6	8	5	5	4	2	1	1	5	4	5
A few times a year	6	6	6	6	5	5	2	3	3	5	5	5
Less often than once a year	0	0	0	1	1	0	0	1	0	0	0	0
Only ever taken once	7	7	7	5	5	5	2	2	2	5	5	5
Used to take, do not take	, 18	18	, 17	31	31	31	15	17	17	21	21	21
	10	10	1,	31	31	31	13	1,	1,	21	21	21
Never taken	57	55	54	48	48	47	75	74	74	59	58	58
Weighted bases	31	33	34	40	40	47	73	74	74	37	30	30
=	2475	2000	2026	1020	1002	1755	17//	2021	1025	427E	4020	4 E 1 .
Men Waman	2675	2998 552	2826 405	1930	1902 250	1755	1766	2031	1935	6375	6930	6510
Women	419	<i>552</i>	495	288	358	312	358	403	381	1065	1314	1188
Total	3094	3550	3322	2218	2260	2066	2124	2434	2316	7440	8244	770-
Unweighted bases								:				
Men	2943	3240	3075	1847	1964	1840	1525	1771	1606	6318	6975	652
Women	535	588	<i>525</i>	314	364	328	275	298	306	1124	1250	115
Total	3478	3828	3600	2161	2328	2168	1800	2069	1912	7442	8225	768

Frequency of ecstasy use, by sex, age and survey year

All respondents Oct 2003–Sept 2006

All respondents										Oct 2	003–Sep	t 2006
Frequency of ecstasy use		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men												
5 or more days a week	2	2	1	1	2	1	0	0	0	1	1	1
3 or 4 days a week	1	1	0	0	1	1	0	0	0	1	1	0
1 or 2 days a week	4	3	3	3	3	3	0	1	1	3	3	3
1 or 2 days a month	7	6	5	4	3	3	1	1	0	4	4	3
A few times a year	5	6	6	5	5	6	2	1	1	4	4	5
Less often than once a year	0	1	1	1	0	1	0	0	0	0	0	1
Only ever taken once	7	6	7	4	5	4	3	3	2	5	5	5
Used to take, do not take	29	29	27	44	40	40	17	20	21	30	29	29
now												
Never taken	45	46	49	38	41	42	75	73	74	51	53	54
Women												
5 or more days a week	1	3	1	0	1	2	0	-	-	1	1	1
3 or 4 days a week	0	1	0	-	1	-	-	0	-	0	1	0
1 or 2 days a week	4	3	2	2	2	1	-	1	1	2	2	1
1 or 2 days a month	6	3	3	1	2	2	0	0	0	3	2	2
A few times a year	4	3	4	3	3	4	1	1	0	3	2	3
Less often than once a year	1	0	0	0	1	0	0	1	0	0	1	0
Only ever taken once	8	7	7	3	4	6	2	2	3	5	5	5
Used to take, do not take	27	31	30	35	39	35	10	13	13	23	28	26
now												
Never taken	50	49	54	55	49	51	86	82	82	63	59	62
Total												
5 or more days a week	2	2	1	1	1	1	0	0	0	1	1	1
3 or 4 days a week	1	1	0	0	1	1	0	0	0	1	1	0
1 or 2 days a week	4	3	3	3	3	3	0	1	1	3	3	2
1 or 2 days a month	7	5	5	3	3	3	1	1	0	4	3	3
A few times a year	5	5	6	5	5	6	2	1	1	4	4	4
Less often than once a year	0	0	0	1	1	1	0	0	0	0	0	1
Only ever taken once	7	6	7	4	5	4	3	3	2	5	5	5
Used to take, do not take	29	30	28	43	40	39	16	19	19	29	29	28
now												
Never taken	45	47	50	40	42	43	77	74	75	53	54	56
Weighted bases												
Men	2675	2995	2832	1936	1906	1769	1775	2040	1936	6389	6941	6537
Women	419	<i>553</i>	499	288	<i>357</i>	318	357	404	383	1064	1315	1200
Total	3094	3549	3331	2224	2263		2131	2444		7453	8256	7737
Unweighted bases			-			-						-
Men	2946	3233	3084	1851	1975	1860	1532	1780	1611	6332	6988	6555
Women	536	591	528	316	364	332	275	299	307	1127	1254	1167
Total	3482	3824	3612	2167	2339	2192	1807	2079	1918	7459	8242	7722

Table 3.9

Ever injected drugs, by sex, age and survey year

All respondents Oct 2003-Sept 2006 **Ever injected drugs** 17-24 25-34 35+ Total 2004-2004-2003-2004-2005-2003-2005-2003-2005-2003-2004-2005-% % % % % % % % % % % % Men Yes No Never taken drugs that could be injected Women Yes Never taken drugs that could be injected Total Yes No Never taken drugs that could be injected Weighted bases Men Women Total Unweighted bases Men Women Total

Table 3.10

Ever injected drugs among those who had taken drugs that could be injected, by sex, age and survey year

All respondents who had taken drugs that could be injected

Oct 2003-Sept 2006

nyeeteu												
Ever injected		17-24			25-34			35+			Total	
drugs	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
_	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men	24	17	12	41	36	35	33	36	33	32	28	25
Women	35	25	26	50	46	36	31	43	18	39	35	28
Total	25	18	14	42	37	35	33	37	31	33	29	25
Weighted bases												
Men	1545	1704	1538	1384	1295	1162	675	819	<i>752</i>	3605	3818	3452
Women	238	316	258	177	221	205	113	133	133	529	671	596
Total	1784	2020	1796	1561	1516	1367	788	953	885	4134	4489	4048
Unweighted base	es											
Men	1718	1882	1688	1353	1380	1239	695	780	693	3767	4042	3620
Women	320	351	281	219	234	209	118	116	103	657	701	593
Total	2038	2233	1969	1572	1614	1448	813	896	796	4424	4743	4213
							•					

Table 3.11

Dependence on heroin (Severity of Dependence Scale), by sex, age and survey year

All used heroin in	last year									Oct .	2003–Se _l	ot 2006
Dependent		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
Sex	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men	82	77	70	83	85	90	86	84	86	83	82	84
Women	93	85	87	89	91	92	90	90	[95]	91	89	90
Total	84	79	75	84	87	90	87	85	87	85	84	85
Weighted bases												
Men	455	<i>352</i>	226	637	489	466	213	257	239	1306	1098	931
Women	107	114	93	113	126	98	49	<i>51</i>	33	269	290	223
Total	<i>562</i>	465	318	749	615	564	262	307	272	1575	1388	1155
Unweighted												
bases												
Men	518	402	270	654	<i>575</i>	498	265	266	220	1438	1243	988
Women	162	132	96	147	134	105	56	<i>51</i>	34	365	317	235
Total	680	534	366	801	709	603	321	317	254	1803	1560	1223

Table 3.12

Dependence on crack (Severity of Dependence Scale), by sex, age and survey year

Dependent		17-24			25-34			35+		Total		
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
Sex	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men	46	42	45	53	58	56	56	63	63	51	53	54
Women	56	51	46	58	66	72	61	68	[48]	58	60	56
Total	48	44	45	54	60	59	57	64	61	52	54	55
Weighted bases												
Men	<i>523</i>	484	298	627	471	435	245	274	229	1395	1229	962
Women	114	122	104	116	110	77	50	<i>51</i>	<i>32</i>	280	282	214
Total	637	605	402	743	581	<i>513</i>	295	325	260	1676	<i>1512</i>	1175
Unweighted												
bases												
Men	614	<i>536</i>	354	637	<i>552</i>	458	279	271	215	1531	1359	1027
Women	170	138	105	139	119	84	57	<i>53</i>	<i>32</i>	366	310	221
Total	784	674	459	776	671	542	336	324	247	1897	1669	1248

Table 3.13

Dependence on powder cocaine (Severity of Dependence Scale), by sex, age and survey year

All used powder cocaine in last

Oct 2003-Sept 2006

year

Dependent		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
Sex	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men	21	24	20	24	27	29	34	24	23	24	25	23
Women	23	18	19	[10]	16	29	*	*	*	18	19	21
Total	21	23	20	23	26	29	32	25	22	23	24	23
Weighted bases												
Men	778	951	976	503	492	427	187	193	199	1468	1636	1602
Women	96	137	116	33	62	54	16	18	19	145	217	188
Total	874	1088	1092	536	554	481	203	211	218	1613	1852	1791
Unweighted bas	ses											
Men	875	1064	1045	497	531	471	185	199	194	<i>1557</i>	1794	1710
Women	134	159	125	49	64	56	21	19	15	204	242	196
Total	1009	1223	1170	546	595	527	206	218	209	1761	2036	1906

Table 3.14

FAST Score, by sex, age and survey year

All respondents					Oct 2003-	Sept 2006				
FAST Score		Men			Women		Total			
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	
	%	%	%	%	%	%	%	%	%	
17-24										
0-2	41	38	36	51	44	45	43	39	37	
3+	59	62	64	49	56	55	57	61	63	
25-34										
0-2	45	46	46	56	51	51	46	47	47	
3+	55	54	54	44	49	49	54	53	53	
35+										
0-2	42	43	45	41	49	56	42	44	47	
3+	58	57	55	59	51	44	58	56	53	
Total										
0-2	42	41	41	49	47	50	43	42	43	
3+	58	59	59	51	53	50	57	58	57	
Weighted										
bases										
17-24	2685	2999	2838	420	555	498	3105	3554	3336	
25-34	1943	1909	1771	288	356	318	2231	2265	2089	
35+	1773	2034	1944	361	404	383	2133	2438	2327	
Total	6404	6942	6553	1069	1315	1199	7473	8257	7752	
Unweighted ba	ses									
17-24	2953	3239	3092	536	594	529	3489	3833	3621	
25-34	1860	1977	1862	315	364	333	2175	2341	2195	
35+	1529	1775	1620	276	298	308	1805	2073	1928	
Total	6345	6991	6574	1127	1256	1170	7472	8247	7744	

Table 3.15

FAST Score, by age, survey year and whether use heroin or crack at least once a week

All respondents								Oct 2003-	-Sept 2006
17-24 0-2 3+		Take HC we	ekly	Do no	t take HC v	veekly		Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
0-2	58	54	47	40	37	37	43	39	37
3+	42	46	53	60	63	63	57	61	63
25-34									
0-2	58	59	54	41	43	44	46	47	47
3+	42	41	46	59	57	56	54	53	53
35+									
0-2	59	59	58	39	42	46	42	44	47
3+	41	41	42	61	58	54	58	56	53
Total									
0-2	59	57	53	40	40	41	43	42	43
3+	41	43	47	60	60	59	57	58	57
Weighted bases									
17-24	476	408	262	2624	3144	3063	3105	3554	3336
25-34	615	<i>526</i>	478	1609	1735	1603	2231	2265	2089
<i>35+</i>	249	270	227	1881	2163	2085	2133	2438	2327
Total	1342	1204	967	6117	7042	6751	7473	8257	<i>7752</i>
Unweighted base	es								
17-24	587	463	305	2897	3366	3299	3489	3833	3621
25-34	671	596	519	1497	1736	1666	2175	2341	2195
<i>35+</i>	291	276	213	1511	1791	1701	1805	2073	1928
Total	1550	1335	1037	5907	6893	6666	7472	8247	7744

FAST Score, by age, survey year and whether taken heroin, crack or cocaine in last 12 months

All respondents		Tal	cen druç	j in last	year ^a		:			Oct .	pt 2006	
FAST Score	Heroin			Crack			Cocaine			Total		
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
0-2	54	54	51	49	47	44	26	24	22	43	42	43
3+	46	46	49	51	53	56	74	76	78	57	58	57
Weighted bases	1575	1404	1187	1677	1521	1190	1611	1853	1803	7473	8257	7752
Unweighted bases	1802	<i>1572</i>	1262	1896	1673	1266	1759	2034	1916	7472	8247	7744

a Note that there is some overlap between drugs taken in the last year.

4 Past contact with criminal justice system

4.1 Introduction

A number of changes were introduced to the questions about previous contact with the criminal justice system in the third year of the survey compared with the two previous years. In particular, there was a move away from looking at the experience of specific sanctions, which may be subject to change, and instead a focus on the objectives of those interventions, such as testing respondents for drugs and putting arrestees in contact with drug workers. In consequence, questions relating to arrest referral workers and Drug Treatment and Testing Orders were replaced by new, more general questions in 2005–06 that simply asked whether respondents had ever been tested for class A drugs at a police station and whether they had ever had contact with a drug worker.

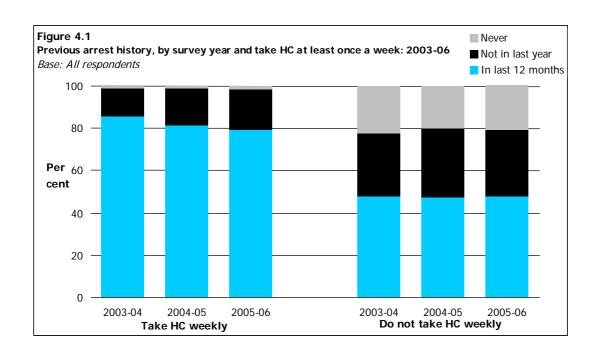
4.2 Previous arrest history

All respondents were asked whether they had been arrested before (not including their current arrest), and those who had been arrested previously were asked how many times they had been arrested in the last 12 months.

Most respondents had been arrested before – in 2005–06, 52% had been previously arrested within the last 12 months and 29% had been arrested longer ago, although 18% had never been arrested before. There was no consistent trend over the three survey years, and the pattern seen in 2005–06 was similar to that seen in 2004–05. However, some change was evident between 2003–04 and 2004–05; the proportion arrested in the last 12 months decreased from 55% to 52%, with a corresponding increase in the proportion arrested longer ago (27% to 31%). These changes over time were seen among those who took HC at least once a week, but not among those who did not take HC weekly.

Those who took HC at least once a week tended to have been arrested more recently and more often compared to those who did not take HC weekly. In 2005–06, 79% had been previously arrested in the last 12 months, and 23% had been arrested on five or more occasions in the past 12 months. Among those who did not usually take HC weekly, 48% had been previously arrested in the last 12 months, and 9% had been arrested on five or more occasions in that period. Among those who took HC at least once a week, there was a consistent decrease over the three survey years in the proportion who had been arrested in the last 12 months, even if the decrease was relatively more substantial between 2003–04 and 2004–05 than between 2004–05 and 2005–06. No such change was seen among those who did not take HC weekly.

(Table 4.1)



There was a strong relationship between age and recent arrest history. Among those who did not take HC at least once a week, in 2005–06, 57% of 17- to 24-year-olds had been previously arrested in the last 12 months, compared with 47% of 25- to 34-year-olds and 35% of those aged 35 or over. Findings from 2004–05 and 2003–04 were similar.

There was a similar but less marked relationship between age and recent arrest history among respondents who took HC at least once a week in 2005–06. Among those who took HC at least once a week, 84% of 17- to 24-year-olds had previously been arrested in the last 12 months, compared with 79% of 25- to 34-year-olds and 75% of those aged 35 or over. This pattern was slightly different to that found in 2004–05, where those aged 25 to 34 were the age group least likely to have been arrested in the last 12 months. The findings in 2003–04 were, however, similar to those in 2005–06.

(Table 4.1)

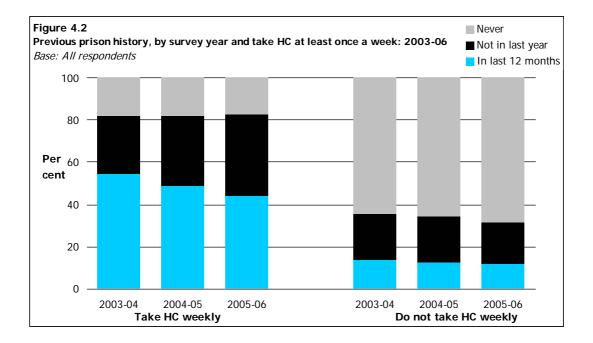
4.3 Previous prison history

Respondents who had previously been arrested were asked whether they had ever been in prison before and, if so, how long they had spent in prison in the last 12 months. In the analysis presented in this section, those who had not been arrested before are included in the "Never been to prison" category.

In 2005–06, 16% of respondents had been to prison in the last 12 months (a decrease from 21% in 2003–04 and 18% in 2004–05), 22% had been to prison longer ago, and 44% had never been to prison. The decrease in the proportion of respondents who had been to prison in the last 12 months was seen among those who took HC at least once a week (55% to 44%), but not among those who did not take HC weekly.

Those who took HC at least once a week were more likely to have been to prison than those who did not take HC at least weekly. In the last 12 months 44% of respondents who took HC at least once a week had been to prison, compared with 12% of those who did not usually take HC on a weekly basis. This pattern was seen in all age groups.

(Table 4.2, Figure 4.2)



4.4 Contact with arrest referral workers or drug workers

Arrest referral schemes, partnerships between the police and local agencies, aim to identify and assess drug-using offenders and refer them to specialist treatment or other interventions. Respondents were asked if they would like to see an arrest referral worker, that is, a dedicated substance misuse worker working in the police custody suite. Participation in the scheme is voluntary. Since 2002 arrest referral schemes have operated within all police forces in England and Wales.²

Respondents in 2003–04 and 2004–05, but not in 2005–06, who said they had been arrested before were asked if they had ever been interviewed by a drug or alcohol arrest referral worker. In 2004–05, among those who had been previously arrested, 25% had ever had contact with arrest referral workers. This was higher among those who took HC at least once a week (62%) than among those who did not (17%). Among respondents who took HC at least once a week, there was an increase between 2003–04 and 2004–05 in the proportion who had ever had contact with arrest referral workers (57% compared to 62%). The pattern was similar in 2003–04 among those who did not take HC at least weekly.

(Table 4.3)

The question relating to arrest referral workers and drug workers was changed in 2005–06 to simply ask whether respondents had ever been in touch with a drug worker. The responses in 2005–06 are thus not comparable with those from the previous two survey years. In 2005–06, 13% of those who had been previously arrested reported that they had had contact with a drug worker in the last 12

months, and 7% reported that they had had contact with a drug worker longer ago, while 80% of all respondents had never had contact with a drug worker. Respondents who took HC at least weekly were much more likely to ever have had contact with a drug worker than those who did not take HC at least weekly (64% and 12%, respectively). Among those who took HC weekly, 45% had had contact with a drug worker in the last 12 months, whereas 18% had had contact with one longer ago. A similar pattern was seen among all age groups.

(Table 4.6)

4.5 Drug Treatment and Testing Orders

Drug Treatment and Testing Orders (DTTOs) are community sentences combining drug treatment, compulsory drug testing and court reviews of progress. DTTOs were introduced in three pilot areas in 1998 and subsequently extended to the rest of England and Wales in 2000.

Again, respondents in 2003–04 and 2004–05, but not in 2005–06, were asked whether they had ever received a DTTO. In 2004–05, among those who had previously been arrested, 31% of those who took HC at least once a week had ever received a DTTO, compared with 3% of other respondents. Among those who took HC at least weekly, those aged 35 or older were least likely to have received a DTTO (25%) compared with those aged 25 to 34 (33%) and those aged 17 to 24 (32%). This pattern was also seen in 2003–04.

(Table 4.4)

4.6 Drug testing at charge

Respondents in 2003-04 and 2004-05, but not in 2005-06, were also asked about drug testing at charge. Drug testing at charge was introduced in three pilot areas in 2001, and subsequently extended, so that by September 2003, adults charged with certain 'trigger³ offences were being tested in 30 areas. This had been extended to 66 areas by September 2005. Drug testing on arrest was introduced in pilot areas in December 2005 and expanded to include all intensive areas in March 2006. A new question on drug testing on arrest was therefore introduced in the 2005–06 questionnaire. Consequently, the two questions are not compatible, implying that the responses from the third survey year cannot be compared with those in the previous two survey years.

Overall, 16% of respondents in 2004–05 said they had ever been tested for drugs on being charged. This included 31% of respondents at drug-testing sites and 11% at other sites. (Since the question referred to previous arrests, respondents could have been arrested and tested in a different custody suite.)

In 2004-05, within drug testing on charge sites, 71% of those who took HC at least once a week and 21% of those who did not usually take HC had been tested. Among respondents who took HC at least once a week, there was a substantial increase in the proportion who had been tested at drug-testing sites in 2004-05 (71%) compared with 2003-04 (44%). There was no difference in the proportion who had been tested at other sites among those who took HC at least once a week between the first and the second survey year. The pattern among respondents who did not usually take HC weekly was similar in 2004-05 to that in 2003-04 both with regards to testing at drug testing sites and other sites.

(Table 4.5)

Respondents in 2005–06 were asked whether they had ever been tested for a class A drug by the police at a police station. Among those who had been previously arrested, 17% had been tested in the last 12 months, 8% had been tested longer ago, whereas 75% of all respondents had never been tested. Respondents who took HC at least once a week were more likely to have been tested for a class A drug by the police at a police station than those who did not take HC weekly (57% and 19%, respectively). Among those who took HC at least once a week, 43% had been tested in the last 12 months and 14% had been tested longer ago. There was no difference among the different age groups in the likelihood of having been tested.

(Table 4.7)

Notes and References

¹ This includes arrestees who had not previously been arrested and those who had been arrested but had not been to prison.

Arrest referral schemes and testing on charge are components of the Drug Interventions Programme (formerly the Criminal Justice Interventions Programme) introduced in 2003 to provide an integrated programme of initiatives in areas with high levels of drug-related crime. They also help to identify offenders for the Drug Treatment and Testing Order (http://www.drugs.gov.uk/NationalStrategy/DrugsInterventionsProgramme).

³ Trigger offences are offences known to be strongly associated with drug use. They are listed in Appendix C of this report. Arrestees can also be tested at an Inspector's discretion if there are reasonable grounds to suspect that misuse of heroin and/or cocaine by the detainee caused or continued the offence.

Table 4.1

Previous arrest history, by age, survey year and whether take heroin or crack at least once a week

All respondents Previous arrest history	Tak	e HC wee	eklv	Do not	take HC v	veeklv		<i>2003–Se</i> T otal	·
Trovious urrest motory	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%
17-24	,,,	,,,	,,,			,,,		,,,	
Never previously arrested	1	2	3	22	19	21	18	17	19
Not arrested in last 12 months	10	13	13	20	24	22	19	22	21
Arrested once in last 12 months	11	13	13	21	20	22	19	19	21
Arrested 2-4 times in last 12 months	39	34	36	25	25	23	27	26	24
Arrested 5+ times in last 12 months	39	38	35	12	12	13	16	15	15
Arrested in last 12 months	89	85	84	58	57	57	63	60	60
25-34									
Never previously arrested	1	0	1	21	19	18	15	15	14
Not arrested in last 12 months	14	22	20	33	38	35	28	35	32
Arrested once in last 12 months	17	15	20	20	19	22	20	18	21
Arrested 2-4 times in last 12 months	36	42	40	18	17	19	23	23	24
Arrested 5+ times in last 12 months	32	21	20	8	7	6	14	10	9
Arrested in last 12 months	85	78	79	46	42	47	57	51	54
35+									
Never previously arrested	2	1	1	24	22	24	22	20	22
Not arrested in last 12 months	17	17	25	40	42	41	37	39	39
Arrested once in last 12 months	22	25	19	17	16	17	17	17	17
Arrested 2-4 times in last 12 months	42	37	39	12	15	14	16	17	16
Arrested 5+ times in last 12 months	17	20	16	7	6	4	8	7	6
Arrested in last 12 months	81	82	75	35	37	35	41	42	39
Total									
Never previously arrested	1	1	1	22	20	21	19	17	18
Not arrested in last 12 months	13	18	19	30	33	31	27	31	29
Arrested once in last 12 months	16	17	18	19	18	20	19	18	20
Arrested 2-4 times in last 12 months	38	38	39	19	20	19	23	22	22
Arrested 5+ times in last 12 months	32	27	23	9	9	9	13	11	10
Arrested in last 12 months	86	81	79	48	47	48	55	52	52
Weighted bases									
17-24	471	413	263	2619	3157	3076	3105	3592	3396
25-34	610	531	479	1610	1740	1608	2247	2289	2110
35+	250	270	232	1886	2174	2092	2150	2483	2360
Total	1331	1215	974	6118	7070	6775	7505	8364	7866
Unweighted bases									
17-24	580	469	306	2885	3379	3314	3488	3880	3688
25-34	664	603	521	1497	1741	1672	2181	2372	2220
35+	291	278	216	1515	1800	1704	1818	2112	1958
Total	1536	1350	1043	5899	6920	6690	7490	8364	7866

Previous prison history, by age, survey year and whether take heroin or crack at least once a week

Table 4.2

All respondents Oct 2003-Sept 2006 Previous prison history Take HC weekly Do not take HC weekly Total 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 % % % 17-24 Never previously arrested Never been to prison Not been to prison in last 12 months Been to prison in last 12 months 25-34 Never previously arrested Never been to prison Not been to prison in last 12 months Been to prison in last 12 months 35+ Never previously arrested Never been to prison Not been to prison in last 12 months Been to prison in last 12 months Never previously arrested Never been to prison Not been to prison in last 12 months Been to prison in last 12 months Weighted bases 17-24 25-34 *35+* Total Unweighted bases 17-24 25-34 35+ Total

Table 4.3

Ever had contact with arrest referral worker, by age, survey year and whether take heroin/crack at least once a week

All previously arrested Oct 2003–Sept 2005

Ever had contact with arrest referral worker	Take HO	weekly	Do not take	HC weekly	Total		
	2003-04	2004-05	2003-04	2004-05	2003-04	2004-05	
	%	%	%	%	%	%	
17-24	56	61	19	17	26	23	
25-34	58	62	22	20	34	32	
35+	58	61	16	16	22	22	
Total	57	62	19	17	27	25	
Weighted bases							
17-24	473	405	2063	<i>2555</i>	2550	2979	
25-34	610	530	1277	1405	1910	1953	
<i>35+</i>	244	269	1429	1698	1683	1996	
Total	1327	1204	4772	<i>5658</i>	6146	6927	
Unweighted bases							
17-24	<i>582</i>	461	2325	2722	2927	3211	
25-34	662	601	1212	1419	1892	2048	
<i>35+</i>	287	277	1194	1428	1491	1734	
Total	1532	1339	4733	5569	6313	6993	

Table 4.4

Ever had DTTO, by age, survey year and whether take heroin or crack at least once a week

All previously arrested Oct 2003-Sept 2005 Ever had DTTO Take HC weekly Do not take HC weekly Total 2004-05 2004-05 2003-04 2003-04 2003-04 2004-05 % % % % 17-24 25-34 35+ Total Weighted bases 17-24 25-34 *35+* Unweighted bases 17-24 25-34 35+ Total

Table 4.5

Ever been drug tested at charge, by drug-testing site, survey year and whether take heroin or crack at least once a week

All previously arrested	Oct 2003-Sept 2005
-------------------------	--------------------

Drug tested at charge	Take HC	weekly	Do not tak	e HC weekly	Tota	al
	2003-04	2004-05	2003-04	2004-05	2003-04	2004-05
	%	%	%	%	%	%
Drug-testing site	44	71	16	21	23	31
Not drug-testing site	18	25	7	8	9	11
Total	27	38	10	11	13	16
Weighted bases						
Drug-testing site	424	343	1310	1302	1747	1666
Not drug-testing site	903	861	3462	4356	4399	<i>5262</i>
Total	1327	1204	4772	5658	6146	6927
Unweighted bases						
Drug-testing site	565	444	1457	1495	2038	1967
Not drug-testing site	967	895	3276	4074	4275	5026
Total	1532	1339	4733	5569	6313	6993

Table 4.6

Ever had contact with drug worker, by age and whether take heroin or crack at least once a week

All previously arrested Oct 2005–Sept 2006

Contact with drug worker	Take HC weekly				Do not take HC weekly					Total			
	17-24 %	25-34 %	35+ %	Total %	17-24 %	25-34 %	35+ %	Total %	17-24 %	25-34 %	35+ %	Total %	
Contact in last 12 months	47	46	42	45	7	8	4	6	11	18	9	13	
Contact longer ago	15	19	21	18	6	7	4	5	7	10	6	7	
Never had contact	38	35	38	36	87	85	93	88	82	71	85	80	
Weighted bases	187	363	163	714	1842	1016	1172	4030	2068	1394	1361	4823	
Unweighted base	218	392	156	766	2005	1051	978	4034	2267	1460	1162	4889	

Table 4.7

Ever been drug tested for class A drug at police station, by age and whether take heroin or crack at least once a week

All previously arrested Oct 2005–Sept 2006

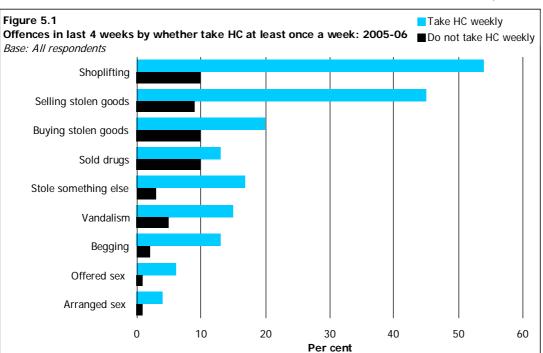
Ever drug tested at charge	Take HC weekly				Do not take HC weekly				Total			
	17-24	25-34	35+	Total	17-24	25-34	35+	Total	17-24	25-34	35+	Total
	%	%	%	%	%	%	%	%	%	%	%	%
Tested in last 12 months	37	44	48	43	14	14	10	13	16	22	15	17
Tested longer ago	7	19	11	14	6	9	6	7	6	12	7	8
Never tested	56	37	41	43	80	77	84	81	78	66	78	75
Weighted bases	187	363	163	714	1843	1015	1167	4025	2068	1393	1356	4818
Unweighted base	218	392	156	766	2005	1049	973	4027	2267	1458	1157	4882

5 Offending

5.1 Offences committed

The history of respondents' past offending behaviour was collected in the interview and is therefore self-reported. Participants were not asked directly about their current arrest or the circumstances surrounding it, but were asked a series of questions about a range of different offences (whether they had committed the offence, how many times, and, if relevant, how much money they had made from committing the offence). Past offending was considered within two reference periods: that is, the last four weeks for crimes which are likely to be committed frequently and the last 12 months for less common offences. The focus was on offences most likely to be related to drug use.

Respondents reported offending behaviour from the last four weeks in relation to nine offences. In 2005-06, shoplifting was the most commonly reported offence (15%), followed by selling stolen goods (13%), buying stolen goods (11%), vandalism (10%), selling drugs (7%) and stealing something else (5%). (Stealing something else was asked about *after* offences committed in the last 12 months, including theft of and theft from a motor vehicle, pickpocketing, burglaries, robberies and frauds.) Those who took HC at least once a week were substantially more likely to have shoplifted and sold stolen goods (54% and 45%, respectively) in the last four weeks than those who did not take HC at least once a week (10% and 9%, respectively). Those who took HC at least once a week were also more likely to have committed the remaining offences than those who did not take HC weekly, though the differences were less pronounced.



(Table 5.1, Figure 5.1)

Younger respondents were generally more likely to have committed more offences than older ones, but there were different relationships between age and offending among those who did and did not usually take HC.

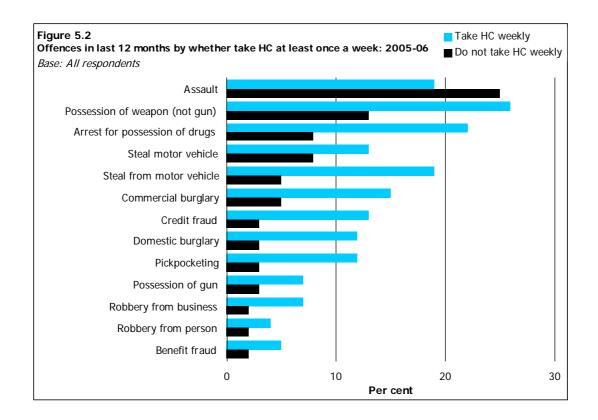
Among those who did not take HC at least once a week, vandalism, buying stolen goods, selling stolen goods and shoplifting were the most common offences in all age groups. Those aged 17 to 24 were most likely to have committed each types of crime.

Among those who took HC weekly, those aged 17 to 24 years were again most likely to have committed each type of crime. However, in contrast to those who did not take HC weekly, those aged 35 or older who took HC at least once a week did not differ much in their likelihood of committing various types of crimes (notably shoplifting) compared with those aged 25 to 34. A similar pattern was found in 2004-05 and 2003-2004, but a decrease was seen in the proportion who had shoplifted and sold stolen goods among respondents aged 17 to 24 who took HC at least once a week. In 2005-06, 49% and 47% of respondents in this group had shoplifted and sold stolen goods, respectively, compared to 62% and 55% in 2004-05 and 63% and 60% in 2003-04.

(Table 5.1)

In 2005-06, among reported offences committed in the last 12 months, assault was most common (committed by 24% of all respondents), followed by arrest for carrying a weapon other than a gun (14%). Arrest for possession of drugs (10%), stealing a motor vehicle (8%) and stealing from a motor vehicle (7%), were the next most common offences. Those who took HC at least once a week were more likely to have carried out each type of offence, with the exception of assault, which respondents who did not take HC at least weekly were slightly more likely to have reported committing. The levels of offending declined with age for all respondents. Similar patterns were found in 2004-05 and 2003-04.

(Table 5.2, Figure 5.2)



Although those who took HC at least once a week only made up 13% of the sample, they tended to account for at least 40% of frequently committed crimes, and a third for less common offences. Those who had committed assault or vandalism were least likely to have taken HC at least once a week (10% and 16%, respectively), and those who had offered sex (47%), arranged sex (47%), begged (46%), shoplifted (45%), sold stolen goods (43%) or committed credit card fraud (39%) were most likely to have taken HC at least once a week. A similar pattern was seen in 2004–05 and 2003–04.

(Table 5.3)

5.2 Acquisitive crime

Acquisitive crimes are those where an offence is committed to obtain money or goods. A list of the offences defined as acquisitive crimes for the purposes of this report is contained in Appendix C. For offences where respondents were asked how many times they had committed that offence in the last four weeks, their answers were multiplied by 13 and added to the number of offences committed for offences where a 12-month estimating period was used, to produce an annual estimate of the total number of acquisitive crimes.

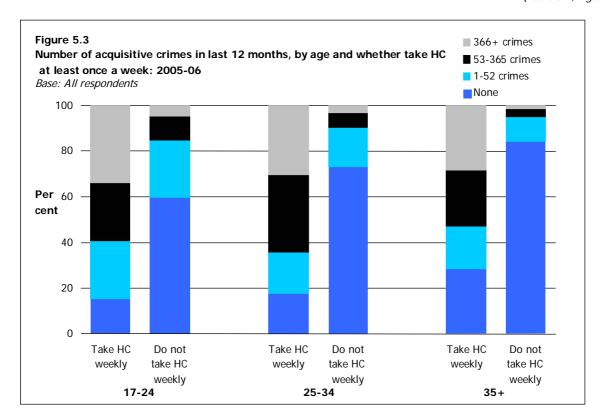
Overall in 2005–06, 36% of respondents had committed acquisitive crimes¹ in the last 12 months – 19% had committed between 1 and 52 acquisitive crimes (fewer than one a week), 10% had committed between 53 and 365 (at least one a week, but fewer than one a day), and 7% had committed 366 or more in the last year, an average of at least one acquisitive crime every day.² Those who took HC at least once a week were more likely to have committed acquisitive crimes: 31% had committed at least 366 acquisitive crimes in the last year, compared to just 3% of those who did not usually take HC. Thus respondents who took HC at least once a week were much more likely to

be high-rate offenders than those who did not usually take either or both of these drugs at least on a weekly basis.

(Table 5.4)

There was a strong relationship between acquisitive crime and age. Among those who did not usually take HC, older respondents were much less likely to commit these crimes, and also tended to commit fewer of them. Among those who took HC at least once a week, the likelihood of committing 366 or more acquisitive crimes in the last 12 months declined with age, from 34% of 17- to 24-year-olds to 28% of those aged 35 or above. A similar pattern was found in 2004–05 and 2003–04.

(Table 5.4, Figure 5.3)



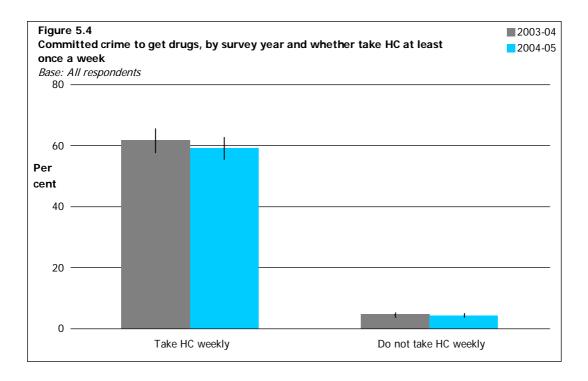
5.3 Crime committed to get drugs

All respondents in 2003–04 and 2004–05, but not in 2005–06, were asked whether they had committed any crimes in the last four weeks in order to buy or get hold of drugs. In 2004–05, overall 12% of respondents said that they had done so. This was much more likely among those who took HC at least once a week, 59% of whom had committed a crime to get drugs, compared with 4% of those who did not take HC at least once a week. The likelihood of having committed a crime to get drugs decreased with age among both respondents who took HC weekly and among those who did not, even if the likelihood of having committed a crime among those aged 35 or older who took HC weekly still remained high.

Among those who took HC at least once a week, the proportion who had committed crimes in order get hold of drugs decreased from 62% in 2003–04 to 59% in 2004–05. There was no difference among those who did not take HC weekly. The change among those who used HC weekly resulted in

a decrease in the total proportion of respondents who had committed crime to get hold of drugs in 2004–05 (12%) compared with 2003–04 (15%).

(Table 5.5, 5.7, Figure 5.4)



Respondents in 2005–06 were asked whether they had committed any crimes in the last 12 months in order to buy or get hold of drugs. Overall, 12% of respondents said that they had. Again, this was much more likely among those who took HC at least once a week, 64% of whom had committed a crime to get drugs, compared with 5% of those who did not take HC at least once a week. The likelihood of having committed a crime to get drugs in the last 12 months did not decrease with age either among those who took HC at least weekly and among those who did not.

(Table 5.6)

5.4 Income from crime

For each type of offence that respondents had committed, they were asked about the cash value of the proceeds of the offence, which was defined as follows: "The cash value of goods is the value that you could sell or trade them for". A total estimated annual income was calculated from these amounts (amounts from offences where questions were asked about a four-week period were multiplied by 13). Respondents were asked whether they thought this estimated annual income was accurate, and if not, then they were asked what the correct amount was. If respondents gave their own estimate, this was used in place of the computed annual income. Note that this measure is a retrospective estimation of an annual income from crime, which may be subject to recall error and should be treated with caution.

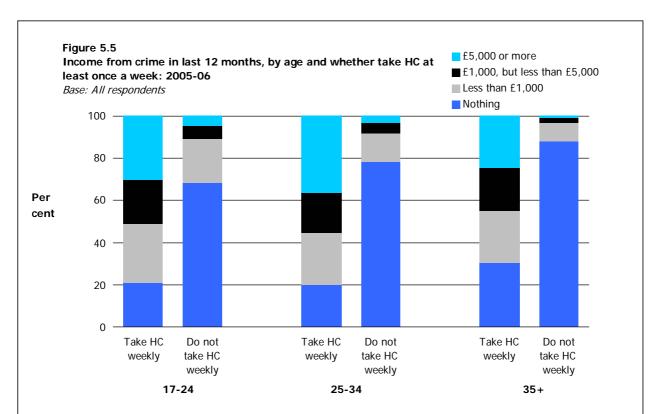
In 2005–06, 30% of respondents claimed to have made money from crime in the last 12 months. Overall, 16% had an income of less than £1,000, 7% had an income of more than £1,000 but less than £5,000, and 7% had made £5,000 or more. Those who took HC at least once a week were more

likely to make money from crime, and the amounts they made tended to be larger; 77% had made money from crime in the last 12 months, and 32% had made £5,000 or more. Among those who did not take HC at least once a week, 23% had made any income from crime in the last year, and 3% had made £5,000 or more.

Among those who took HC at least once a week, there was a consistent decrease in the proportion of respondents who made any money from crime from 82% in 2003–04 to 77% in 2005–06, whereas there was no difference between the survey years among those who did not take HC at least weekly. This trend further supports the finding that drug-related acquisitive crime and theft decreased during the survey period, as is discussed above.

(Table 5.7)

There was a relationship between age and income from crime. Among those who took HC at least once a week, the proportion of respondents who made money from crime declined with age from 79% of 17- to 24-year-olds to 70% of those aged 35 or over. A similar pattern was seen among respondents who did not take HC, although the decline was much sharper in the latter group. Similar patterns were seen in 2004–05 and 2003–04.



(Table 5.7, Figure 5.5)

5.5 Violence and vandalism after drinking alcohol

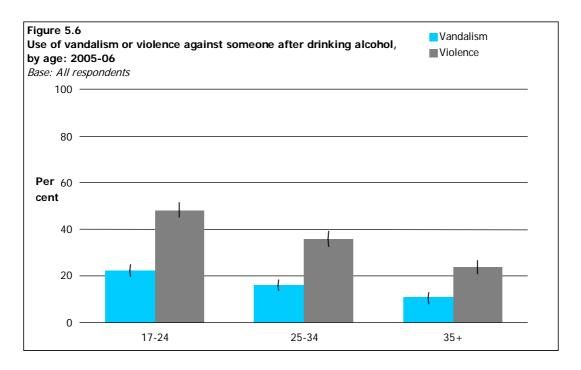
In 2005–06, new questions on violent behaviour after drinking alcohol were introduced to the questionnaire. Specifically, respondents were asked whether they had got into a fight or used violence against someone after drinking alcohol. Overall, 38% of respondents said that they had done

so. There was no difference in the responses among respondents who took HC at least once a week and those who did not take HC at least weekly.

Younger respondents were more likely than older respondents to respond that they had got into a fight or used violence against someone after drinking alcohol. Overall, 48% of those aged 17 to 24 responded that they had done so, whereas the equivalent figures were 36% and 24% among those aged 25 to 34, and 35 or older, respectively.

Respondents were also asked whether they had caused damage or vandalised a vehicle, house or some other building after drinking alcohol. Overall, 17% had done so. Again, there was no difference in the responses among respondents who took HC at least once a week and those who did not take HC at least weekly.

Younger respondents were again more likely than older respondents to respond that they had caused damage to a vehicle or a building as a result of drinking alcohol. Overall, 22% of those aged 17 to 24 responded that they had done so, whereas the equivalent figures were 16% and 11% among those aged 25 to 34, and those aged 35 or older, respectively.



(Table 5.8-5.9, Figure 5.6)

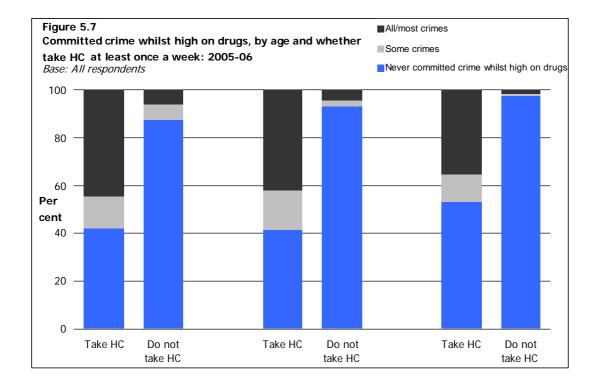
5.6 Crime committed whilst being high on drugs

In 2005–06, all respondents were asked whether they had committed any crimes whilst being high on drugs. Overall, a large majority of respondents (86%) responded that they had never committed any crimes whilst high on drugs, 9% responded that they had committed all or most crimes, and 5% responded that they had committed some crimes whilst high on drugs. As expected, there was a substantial difference between respondents who took HC at least once a week and those who did not take HC at least once a week. Among respondents who took HC at least once every week, 22% responded that they had committed all crimes, 20% responded that they had committed most crimes,

and 15% responded that they had committed some crimes, whilst high on drugs. The equivalent figures ranged between 2% and 4% among respondents who did not take HC at least once a week.

There was no difference in the proportion who reported committing crime whilst high on drugs among the different age groups, either with respect to respondents who took HC at least once a week or those who did not take HC at least once a week.

(Table 5.10, Figure 5.7)



5.7 Whether respondents would have committed crime had they not been high on drugs

Respondents who stated that they had committed crimes whilst high on drugs were further asked whether they would have committed those crimes had they not been high on drugs. Overall, 43% of respondents said that they would not have committed the crimes, 18% responded that they would have committed all of them, and 38% responded that they would have committed some of them.

Respondents who took HC at least once a week were more likely to respond that they would have committed all their crimes had they not been high on drugs, compared with those who did not take HC at least once a week (23% and 14%, respectively). This finding suggests that respondents who take HC at least once a week are more likely to commit crimes regardless of whether or not they are high on drugs at the time of the offence.

Among respondents who took HC at least once a week, those in the youngest age group were more likely (34%) than those aged 25 or older (18% and 21% among those aged 25 to 34 and those aged 35 or older, respectively) to respond that they would have committed all of the crimes. A similar pattern was seen among respondents who did not take HC at least once a week, which suggests that the responses might have been influenced independently by age.

(Table 5.11)

Notes and References

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¹ The offences defined as acquisitive crimes are listed in Appendix C.

Where acquisitive crime was recorded as having been committed in the last four weeks, the number of offences committed has been multiplied by 13 to estimate the equivalent number of offences committed in the last 12 months.

Offences committed in last 4 weeks, by age, survey year and whether take heroin or crack at least once a week

Table 5.1

^{* &#}x27;Stole something else' was asked about after the offences listed in Table 5.2, which include various types of theft, robbery, burglary and fraud.

Table 5.2

Offences committed in last 12 months, by age, survey year and whether take heroin or crack at least once a week

All respondents							(Oct 2003–.	Sept 2006
Offences committed in last	Ta	ake HC we	ekly	Do not	take HC w	eekly		Total	
12 months			_	_			2002.04	2024.05	2005.07
	2003-04 %	2004-05 %	2005-06 %	2003-04 %	2004-05 %	2005-06 %	2003-04 %	2004-05 %	2005-06
17-24	/0	/0	/0	/0	/0	/0	/0	/0	/0
Assault	28	29	27	32	36	36	31	35	35
				20		19			
Possession of weapon (not gun)	34	32 27	37 25		21		22 13	23	21 13
Arrest for possession of drugs	21			11	11	12 15		13	
Steal motor vehicle	29	23	21	16	14	15	18	15	15 10
Steal from motor vehicle	33	28	24	11	10	9	14	12	10
Commercial burglary	31	22	21	8	9	8	12	10	9
Credit fraud	24	22	14	5	6	4	8	8	5
Domestic burglary	19	18	17	6	6	5	8	8	6
Pickpocketing	18	16	15	6	5	5	7	7	6
Possession of gun	9	8	11	4	5	4	5	5	4
Robbery from business	15	11	11	4	4	3	6	4	4
Robbery from person	11	11	6	4	5	3	5	5	3
Benefit fraud	5	7	5	2	2	2	3	3	2
25-34									
Assault	19	18	19	19	19	21	19	19	20
Possession of weapon (not gun)	25	24	25	12	9	10	16	13	13
Arrest for possession of drugs	23	18	21	8	8	7	12	11	11
Steal motor vehicle	15	12	12	5	3	4	8	5	6
Steal from motor vehicle	19	17	20	4	3	4	8	7	8
Commercial burglary	20	18	13	4	4	3	9	7	6
Credit fraud	22	17	14	4	3	3	9	6	5
Domestic burglary	12	13	12	3	2	3	6	5	5
Pickpocketing	8	10	11	1	2	2	3	4	4
Possession of gun	8	5	5	3	2	2	4	2	3
Robbery from business	6	8	6	2	1	2	3	3	3
Robbery from person	6	6	4	1	1	1	2	2	2
Benefit fraud	7	7	4	3	2	2	4	3	2
35+									
Assault	12	19	12	13	14	12	13	15	12
Possession of weapon (not gun)	22	17	15	7	6	5	8	8	6
Arrest for possession of drugs	19	20	21	4	4	3	6	6	5
Steal motor vehicle	8	7	4	1	2	1	2	2	1
Steal from motor vehicle	15	10	8	1	1	1	3	2	1
Commercial burglary	12	13	10	2	2	1	3	3	2
Credit fraud	14	14	9	2	2	1	3	3	2
Domestic burglary	7	8	8	1	1	1	2	2	2
Pickpocketing	, 10	9	12	1	1	1	2	2	2
Possession of gun	5	2	6	1	1	1	2	1	1
Robbery from business	4	4	4	1	0	1	1	1	1
-	-			0	1				
Robbery from person	3	3	3	2		0	1	1	1
Benefit fraud	4	3	5	2	1	2	2	2	2
Weighted bases	477	440	0/0	0/00	2453	2071	2447	2525	2215
17-24	477	413	263	2630	3157	3076	3117	3585	3365
25-34	615	531	479	1612	1740	1608	2246	2284	2106
35+	250	270	232	1889	2174	2092	2146	2474	2349
Unweighted bases									
17-24	589	469	306	2903	3379	3314	3507	3870	3655
25-34	671	603	521	1500	1741	1673	2188	2366	2215
35+	292	278	216	1519	1800	1704	1818	2105	1947

Table 5.2 (cont)

Offences committed in last 12 months, by age, survey year and whether take heroin or crack at least once a week

Offences committed in last									
12 months	Tak	Take HC weekly			take HC w	eekly	Total		
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
Total									
Assault	21	22	19	23	25	25	22	25	24
Possession of weapon (not gun)	28	25	26	14	14	13	16	15	14
Arrest for possession of drugs	22	21	22	8	8	8	11	10	10
Steal motor vehicle	19	15	13	8	8	8	10	9	8
Steal from motor vehicle	23	19	19	6	6	5	9	8	7
Commercial burglary	23	18	15	5	5	5	8	7	6
Credit fraud	21	18	13	4	4	3	7	6	4
Domestic burglary	13	13	12	4	4	3	6	5	4
Pickpocketing	12	12	12	3	3	3	5	4	4
Possession of gun	8	5	7	3	3	3	4	3	3
Robbery from business	9	8	7	2	2	2	4	3	3
Robbery from person	7	7	4	2	3	2	3	3	2
Benefit fraud	6	6	5	2	2	2	3	3	2
Weighted bases	1343	1215	974	6134	7070	6776	7513	8342	7820
Unweighted bases	1553	1350	1043	5924	6920	6691	7516	8341	7817

Table 5.3

Whether take heroin or crack at least once a week by offences committed and survey year

Offences										
		Take	e HC at	least	We	ighted ba	ases	Unw	eighted ba	ases
		on	ice a we	ek						
		2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
		04	05	06	04	05	06	04	05	06
Offences in last 4 weeks										
Shoplifting	%	58	49	45	1313	1372	1170	1583	1566	1292
Selling stolen goods	%	56	47	43	1192	1183	1019	1381	1328	1137
Buying stolen goods	%	33	28	22	<i>853</i>	956	879	957	1034	936
Vandalism	%	25	20	16	767	840	787	<i>825</i>	889	832
Stole something else	%	52	41	41	507	514	390	632	576	451
Sold drugs	%	39	36	29	503	581	501	<i>578</i>	631	546
Begging	%	54	52	46	275	326	268	331	373	293
Offered sex	%	49	47	47	116	138	130	158	150	146
Arranged sex	%	55	40	47	86	77	74	95	90	81
Offences in last 12 months										
Assault	%	17	13	10	1673	2039	1884	1768	2124	1988
Possession of weapon (not gun)	%	30	24	23	1216	1282	1115	1336	1390	1196
Possession of drugs	%	36	31	28	792	825	762	892	<i>853</i>	823
Steal motor vehicle	%	33	25	19	770	711	655	869	776	730
Steal from motor vehicle	%	46	38	34	676	629	526	792	709	<i>577</i>
Commercial burglary	%	49	38	31	619	590	462	703	679	528
Credit fraud	%	54	46	39	527	482	329	627	570	371
Domestic burglary	%	43	39	36	415	414	333	478	474	385
Pickpocketing	%	46	39	37	346	365	321	427	429	348
Possession of gun	%	38	25	28	285	259	240	310	292	272
Robbery from business	%	44	41	33	267	233	206	306	283	230
Robbery from person	%	43	32	29	233	262	148	284	288	188
Benefit fraud	%	36	34	27	221	208	161	251	228	163
Total	%	18	15	13	7476	8285	7749	7477	8270	7734

Table 5.4

Total

Number of acquisitive crimes committed in last 12 months, by age, survey year and whether take heroin or crack at least once a week

Table 5.5

Committed crime to get drugs in last 4 weeks, by age, survey year and whether take heroin or crack at least once a week

All respondents Oct 2003–Sept 2005

Committed arims to get						
Committed crime to get	Take H	C weekly	Do not tak	e HC weekly	Tot	al
drugs in last 4 weeks				· · · · · · · · · · · · · · · · · · ·		
	2003-04	2004-05	2003-04	2004-05	2003-04	2004-05
Age	%	%	%	%	%	%
17-24	70	63	6	7	16	13
25-34	61	59	5	4	20	16
35+	48	53	2	1	7	7
Total	62	59	4	4	15	12
Weighted bases						
17-24	463	402	2620	3130	3086	3533
25-34	604	517	1603	1731	2208	2248
35+	245	262	1881	2164	2126	2426
Total	1312	1182	6107	7025	7424	8207
Unweighted bases						
17-24	<i>571</i>	456	2891	3352	3464	3808
25-34	658	587	1492	<i>1732</i>	2152	2319
<i>35+</i>	285	270	1513	1792	1798	2063
Total	1515	1313	5898	6876	7417	8190

Table 5.6

Committed crime to get drugs in last 12 months, by age, survey year and whether take heroin or crack at least once a week

All respondents Jan 2006-Sept 2006^a

Committed crime to get drugs in last 12 months

g	T-1 110 1-1	D	T-4-1
	Take HC weekly	Do not take HC weekly	Total
Age	%	%	%
17-24	66	7	12
25-34	64	6	19
35+	60	2	7
Total	64	5	12
Weighted bases			
17-24	190	2284	2474
25-34	356	1215	1571
<i>35+</i>	150	<i>1537</i>	1687
Total	697	5035	<i>5732</i>
Unweighted bases			
17-24	217	2462	2680
25-34	383	1252	1635
<i>35+</i>	147	<i>1255</i>	1402
Total	747	4969	5717

a The question whether respondents had committed crime to get drugs in the last 12 months was introduced in the second quarter in the 2005–06 survey year.

Income from crime in last 12 months, by age, survey year and whether take heroin or crack at least once a week

Table 5.7

All respondents	Oc					Oct 2003–9	Sept 2006		
Income from crime	Tak	e HC wee	kly	Do not	take HC w	eekly/		Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
Nothing	11	16	21	67	66	68	58	60	65
Less than £1,000	24	27	28	19	20	20	20	21	21
£1,000, but less than £5,000	17	21	21	7	8	6	9	9	8
£5,000 or more	48	37	30	7	6	5	13	10	7
Made any money from crime	89	84	79	33	34	32	42	40	35
25-34									
Nothing	19	23	20	77	79	78	61	66	65
Less than £1,000	25	25	24	12	13	13	16	15	15
£1,000, but less than £5,000	18	18	19	6	4	5	9	8	9
£5,000 or more	38	34	36	5	4	4	14	11	11
Made any money from crime	81	77	80	23	21	22	39	34	35
35+									
Nothing	31	30	30	88	86	88	81	80	82
Less than £1,000	25	28	24	9	9	9	10	11	11
£1,000, but less than £5,000	16	20	20	2	2	2	4	4	4
£5,000 or more	29	23	25	2	2	1	5	5	3
Made any money from crime	69	70	70	12	14	12	19	20	18
Total									
Nothing	18	22	23	76	75	77	66	68	70
Less than £1,000	24	26	25	14	15	15	16	16	16
£1,000, but less than £5,000	18	20	20	5	5	5	7	7	7
£5,000 or more	40	32	32	5	4	3	11	8	7
Made any money from crime	82	78	77	24	25	23	34	32	30
Weighted bases									
17-24	477	407	256	2630	3103	3023	3121	<i>3532</i>	3334
25-34	615	<i>523</i>	478	1612	1729	1593	2248	2270	2094
<i>35+</i>	250	269	229	1889	2166	2086	2150	2475	2351
Total	1343	1200	963	6134	6998	6702	7523	8277	7779
Unweighted bases									
17-24	589	462	299	2903	3327	3255	<i>3513</i>	3821	3619
25-34	671	591	518	1500	1729	1653	2190	2348	2198
35+	292	276	214	1519	1792	1696	1821	2102	1947
Total	1553	1329	1031	5924	6848	6604	7527	8271	7764

Table 5.8

Violence after drinking alcohol, by age and whether take heroin or crack at least once a week

Respondents who drank alcohol in the previous 12

months Jan 2006–Sept 2006^a

Used violence after drinking a	lcohol		
	Take HC weekly	Do not take HC weekly	Total
	%	%	%
17-24	55	48	48
25-34	29	37	36
35+	25	24	24
Total	35	38	38
Weighted bases			
17-24	157	2096	2258
25-34	295	1100	1398
<i>35+</i>	134	1364	1504
Total	585	4560	5160
Unweighted bases			
17-24	183	2241	2434
25-34	314	1127	1446
<i>35+</i>	123	1109	1241
Total	620	4477	5121

a The question on violence after drinking alcohol was introduced in the second quarter in the 2005–06 survey year.

Table 5.9

Vandalism after drinking alcohol, by age and whether take heroin or crack at least once a week

Respondents who had drunk alcohol in the previous 12 months

Jan 2006-Sept 2006 a

Caused damage or vandalism after drinking alcohol

arter drinking accords			
	Take HC weekly	Do not take HC weekly	Total
	%	%	%
17-24	30	22	22
25-34	18	16	16
35+	15	10	11
Total	20	17	17
Weighted bases			
17-24	156	2092	2252
25-34	292	1099	1394
<i>35+</i>	134	1361	1500
Total	581	<i>4551</i>	5146
Unweighted bases			
17-24	183	2237	2428
25-34	311	1127	1442
<i>35+</i>	123	1108	1239
Total	617	4472	5109

a The question on vandalism after drinking alcohol was introduced in the second quarter in the 2005–06 survey year.

Table 5.10

Crime whilst being high on drugs, by age and whether take heroin or crack at least once a week

Respondents who had taken drugs in the previous 12 months

Jan 2006-Sept 2006^a

Committed crime whilst being high			
on drugs			
	Take HC weekly	Do not take HC weekly	Total
	%	%	%
17-24			
All of them	23	2	3
Most of them	22	5	6
Some of them	13	6	7
Never committed crime whilst being high	42	87	84
25-34			
All of them	21	3	7
Most of them	21	2	6
Some of them	17	3	6
Never committed crime whilst being high	41	93	81
35+			
All of them	21	1	2
Most of them	14	1	2
Some of them	12	1	2
Never committed crime whilst being high	53	98	94
Total			
All of them	22	2	4
Most of them	20	3	5
Some of them	15	4	5
Never committed crime whilst being high	44	92	86
Weighted bases			
17-24	190	2283	2473
<i>25-34</i>	355	1216	1571
<i>35+</i>	154	1537	1691
Total	699	5036	<i>5735</i>
Unweighted bases			
17-24	216	2457	2674
25-34	382	1252	1634
<i>35+</i>	149	1254	1403
Total	747	4963	5711

a The question whether respondents had committed crimes whilst high on drugs was introduced in the second quarter in the 2005–06 survey year.

Table 5.11

Whether would have committed crimes if hadn't been high on drugs, by age and whether take heroin or crack at least once a week

Respondents who committed crimes as result of being high on drugs

Oct 2005-Sept 2006

Whether	would	have	comn	nitted	
crimes if	hadn't	been	high	on drug	s

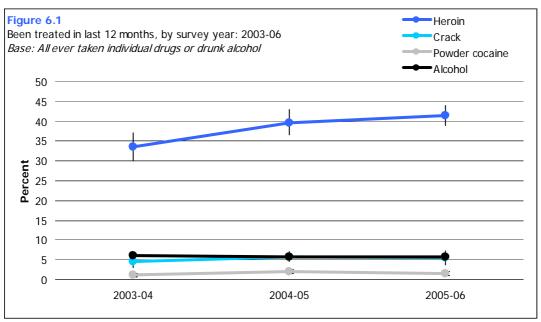
	Take HC weekly	Do not take HC weekly	Total
	%	%	%
17-24			
All crimes	34	17	22
Some crimes	38	41	41
None	28	41	37
25-34			
All crimes	18	6	15
Some crimes	34	43	37
None	48	50	48
35+			
All crimes	21	[7]	16
Some crimes	34	[32]	34
None	45	[61]	50
Total			
All crimes	23	14	18
Some crimes	36	41	38
None	41	45	43
Weighted bases			
17-24	110	284	394
25-34	206	86	293
35+	72	38	109
Total	388	408	796
Unweighted bases			
17-24	132	310	442
25-34	225	97	322
<i>35+</i>	69	33	102
Total	426	440	866

6 Treatment

6.1 Treatment for drug and alcohol use

Respondents who had ever taken individual drugs were asked a series of questions about treatment for each drug they had taken. The questions included whether they had ever been offered treatment, had ever received treatment, had received treatment in the last 12 months, were currently receiving treatment or whether they wanted treatment. This series of questions was only asked of those who had ever taken heroin, crack, powder cocaine or alcohol.

Heroin treatment was the most prevalent form of treatment for drug use. In 2005-06, among those who had ever taken heroin, 62% had ever been offered treatment, 57% had ever received treatment and 30% were currently receiving treatment. Prevalence of having had treatment for heroin in the last 12 months (including currently receiving treatment) increased from 34% in 2003-04 to 40% in 2004-05 and 41% in 2005-06, whereas treatment for crack, powder cocaine and alcohol remained constant.



(Table 6.1-6.7, Figure 6.1)

Treatment for other drugs was at a much lower level. Among those who had ever used individual drugs (or taken alcohol), in 2005-06, 57% had ever had treatment for heroin, 9% had ever had treatment for crack, 3% had ever had treatment for cocaine and 11% had ever had treatment for alcohol.

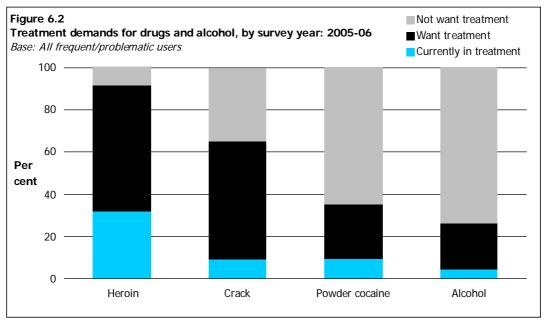
(Tables 6.1, 6.4, 6.6, 6.8)

6.2 Meeting treatment demands

It is difficult to assess the extent to which treatment is meeting demands because there is a measure of current use, but not a measure of use prior to having had treatment. However, it is possible to look at whether frequent or problematic users¹ are receiving treatment, or would like to receive treatment. It should also be borne in mind that even if respondents stated that they would like treatment, the data does not allow verification of whether they would actually take up treatment after receiving an offer.

In 2005-06, among those who usually took heroin on 5 or more days a week, 32% were currently receiving treatment, 60% would like treatment, and only 9% did not want treatment. Although frequent heroin users were more likely to be in treatment in 2005–06 (32%) than in 2003–04 (23%), similar proportions felt that they did not want any treatment (8% and 9%, respectively).

There was less demand for treatment among users of other drugs and alcohol. Compared with the 9% of frequent heroin users who felt that they did not want treatment, equivalent figures for frequent or problematic users were 35% for crack, 65% for powder cocaine and 74% for alcohol. It can further be seen that 56% of frequent crack users, 26% of frequent powder cocaine users, and 21% of frequent alcohol users responded that they would like treatment.



(Table 6.2, 6.5, 6.7 and 6.9, Figure 6.2)

The effectiveness of heroin treatment is difficult to judge since successful treatment is likely to imply that former heroin addicts may be less likely to be arrested. However, it can be seen that the majority of those who had received treatment for heroin in the last 12 months (but who were not currently in treatment) used heroin on 5 or more days a week – 40% in 2003–04, 50% in 2004–05, and 52% in 2005–06, and only 22% in 2003–04, 25% in 2004–05, and 26% in 2005–06 did not use heroin anymore. The high proportion of respondents who had received treatment in the last 12 months and who was currently taking HC on 5 or more days per week may suggest that treatment was not fully effective. However, it may also illustrate the chronic nature of drug use and the need for multiple episodes of treatment.

(Table 6.3)

Notes and References

Notes and References

¹ Frequent drug users have been defined as those using drugs at least 5 days a week in this analysis, and dependent alcohol users are those with a FAST score of 3 or more.

Table 6.1

Treatment for heroin, by survey year and frequency usually take heroin

All ever taken heroin Oct 2003–Sept 2006

	Fre	quency	usually	take h	eroin							
Treatment for heroin	5+ days a week				Less ofter	ı	Do no	ot take an	y more	Total		
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Ever offered treatment	70	76	79	59	66	65	41	45	43	58	62	62
Ever received treatment	63	67	70	57	64	63	35	43	40	52	57	57
Received treatment in last 12 months	40	50	52	42	51	52	22	25	26	34	40	41
Currently receiving treatment	23	29	32	33	42	48	17	19	21	22	27	30
Weighted bases	963	842	675	309	282	259	752	780	645	2031	1912	1581
Unweighted bases	1139	946	720	339	315	273	808	827	670	2294	2097	1665

Table 6.2

Would like treatment for heroin, by survey year and frequency usually take heroin

All taken heroin in last 12 months

Oct 2003-Sept 2006

	Frequ	ency us	ually ta	ke hero	oin							
Treatment for heroin	5+ days a week				Less often		Do no	t take an	ymore			
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Currently receiving treatment	23	29	32	34	43	48	40	46	47	28	36	39
Would like treatment	69	62	60	37	34	25	9	9	8	51	44	40
Would not like treatment	8	9	9	29	23	27	51	46	45	21	20	21
Weighted bases	952	829	667	305	275	254	317	324	283	1578	1434	1205
Unweighted bases	1126	930	710	334	305	267	342	362	287	1807	1604	1265

Table 6.3

Frequency usually take heroin among those had treatment in last year and not currently in treatment, by survey year

All had treatment in last year and not

currently in treatment Oct 2003–Sept 2006

Frequency usually take heroin			
	2003-04	2004-05	2005-06
	%	%	%
5 or more days a week	72	71	76
Less often	12	10	6
Do not take any more	16	18	18
Weighted bases	229	243	180
Unweighted bases	290	266	203

Table 6.4

Treatment for crack, by survey year and frequency usually take crack

All ever taken crack Oct 2003–Sept 2006

	Fre	equency	usually	take c	rack						
5+	5+ days a week			Less often	ı	Do not take any more			Total		
2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
04	05	06	04	05	06	04	05	06	04	05	06
%	%	%	%	%	%	%	%	%	%	%	%
20	22	25	12	14	14	11	10	11	13	13	14
13	18	18	6	10	8	6	6	7	7	9	9
9	11	13	4	6	6	3	3	3	5	6	6
4	7	9	2	4	4	2	2	2	2	4	4
481	478	326	768	638	545	1131	1186	1073	2386	2307	1963
568	516	354	870	720	564	1226	1280	1161	2673	2521	2092
	2003- 04 % 20 13 9 4	5+ days a w 2003- 2004- 04 05 % % 20 22 13 18 9 11 4 7 481 478	5+ days a week 2003- 2004- 2005- 04 05 06 % % % 20 22 25 13 18 18 9 11 13 4 7 9 481 478 326	5+ days a week 2003- 2004- 2005- 2003- 04 05 06 04 % % % % 20 22 25 12 13 18 18 6 9 11 13 4 4 7 9 2 481 478 326 768	5+ days a week Less often 2003- 2004- 2005- 2003- 2004- 04 05 06 04 05 % % % % 20 22 25 12 14 13 18 18 6 10 9 11 13 4 6 4 7 9 2 4 481 478 326 768 638	2003- 2004- 2005- 2003- 2004- 2005- 04 05 06 04 05 06 % % % % % 20 22 25 12 14 14 13 18 18 6 10 8 9 11 13 4 6 6 4 7 9 2 4 4 481 478 326 768 638 545	5+ days a week Less often Do no 2003- 2004- 2005- 2003- 2004- 2005- 2003- 04 05 06 04 05 06 04 % % % % % % 20 22 25 12 14 14 11 13 18 18 6 10 8 6 9 11 13 4 6 6 3 4 7 9 2 4 4 2 481 478 326 768 638 545 1131	5+ days a week Less often Do not take any 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 04 05 06 04 05 06 04 05 % % % % % % % 20 22 25 12 14 14 11 10 13 18 18 6 10 8 6 6 9 11 13 4 6 6 3 3 4 7 9 2 4 4 2 2 481 478 326 768 638 545 1131 1186	5+ days a week Less often Do not take any more 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 04 05 06 04 05 06 04 05 06 9	Frequency usually take crack 5+ days a week Less often Do not take any more 2003- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 006- 04- 05- 06- 04- 05- 06- 04- 05- 06- 04- 05- 06- 04- 9- <	5+ days a week Less often Do not take any more Total 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 04 05 06 08 06 08 06 08 06 06 07 07 9 09 11 13 4 6 6 3 3 3 5 6 04 05 06 04 05 06 08 08 08 08 08 </td

Table 6.5

Would like treatment for crack, by survey year and frequency usually take crack

All taken crack in last 12 months Oct 2003–Sept 2006

	Freq	uency u	sually 1	ake cra	ck						
5+ days a week			Less often			Do no	t take any	more	Total		
2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
04	05	06	04	05	06	04	05	06	04	05	06
%	%	%	%	%	%	%	%	%	%	%	%
4	8	9	2	4	4	4	5	5	3	5	6
63	60	56	26	31	27	12	10	7	33	34	29
33	32	35	71	65	69	84	85	88	64	60	65
470	468	313	735	614	508	447	423	342	1656	1506	1175
556	504	338	828	691	<i>527</i>	492	461	370	1882	1657	1243
	2003- 04 % 4 63 33 470	5+ days a w 2003- 2004- 04 05 % % 4 8 63 60 33 32 470 468	5+ days a week 2003- 2004- 2005- 04 05 06 % % % 4 8 9 63 60 56 33 32 35 470 468 313	5+ days a week 2003- 2003- 2004- 2005- 2003- 04 05 06 04 % % % 4 8 9 2 63 60 56 26 33 32 35 71 470 468 313 735	5+ days a week Less often 2003- 2004- 2005- 2003- 2004- 04 05 06 04 05 % % % % 4 8 9 2 4 63 60 56 26 31 33 32 35 71 65 470 468 313 735 614	2003- 2004- 2005- 2003- 2004- 2005- 04 05 06 04 05 06 % % % % % 4 8 9 2 4 4 63 60 56 26 31 27 33 32 35 71 65 69 470 468 313 735 614 508	5+ days a week Less often Do no 2003- 2004- 2005- 2003- 2004- 2005- 2003- 04 05 06 04 05 06 04 % % % % % % 4 8 9 2 4 4 4 63 60 56 26 31 27 12 33 32 35 71 65 69 84 470 468 313 735 614 508 447	5+ days a week Less often Do not take any 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 04 05 06 04 05 06 04 05 % % % % % % % 4 8 9 2 4 4 4 5 63 60 56 26 31 27 12 10 33 32 35 71 65 69 84 85 470 468 313 735 614 508 447 423	5+ days a week Less often Do not take any more 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 04 05 06 04 05 06 04 05 06 % % % % % % % % 4 8 9 2 4 4 4 5 5 63 60 56 26 31 27 12 10 7 33 32 35 71 65 69 84 85 88 470 468 313 735 614 508 447 423 342	5+ days a week Less often Do not take any more 2003- 2004- 2005- 2003- </td <td>5+ days a week Less often Do not take any more Total 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 05 06 04 05 08 08</td>	5+ days a week Less often Do not take any more Total 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 2005- 2003- 2004- 05 06 04 05 08 08

Table 6.6

Treatment for powder cocaine, by survey year and frequency usually take powder cocaine

All ever taken powder cocaine Oct 2003–Sept 2006

, ,												
		Freque	ncy usu	ally tak	ce powe	der coc	aine					
Treatment for powder cocaine	5+ days a week			Less often			Do not take any more			Total		
	2003	2004	2005	2003	2004	2005	2003	2004	2005	2003	2004	2005
	-04	-05	-06	-04	-05	-06	-04	-05	-06	-04	-05	-06
	%	%	%	%	%	%	%	%	%	%	%	%
Ever offered treatment	14	26	18	6	4	7	3	3	4	4	5	6
Ever received treatment	11	21	11	2	2	4	2	2	2	2	3	3
Received treatment in last 12	7	17	8	1	1	2	1	1	1	1	2	1
months												
Currently receiving treatment	4	13	8	0	1	1	1	1	0	1	1	1
Weighted bases	114	134	134	973	1100	1075	1909	2163	1980	3004	3406	3201
Unweighted bases	134	154	153	1041	1193	1136	2107	2299	2092	3290	3655	3397
							•					

Table 6.7

Would like treatment for powder cocaine, by survey year and frequency usually take powder cocaine

All taken powder cocaine in last 12 months

Oct 2003-Sept 2006

		Frequ	ency us	ually ta	ake pow	der co	aine					
Treatment for powder cocaine	5+ days a week			Less often			Do no	t take any	/ more	Total		
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Currently receiving treatment	5	14	9	1	1	1	2	3	1	1	2	2
Would like treatment	26	26	26	15	13	11	5	5	4	12	11	10
Would not like treatment	70	60	65	85	87	88	93	92	94	87	87	89
Weighted bases	100	123	116	905	1033	1023	598	709	653	1607	1869	1796
Unweighted bases	122	141	132	957	1131	1077	675	772	689	1757	2049	1906

Table 6.8

Treatment for alcohol, by age, survey year and FAST Score

All ever taken alcohol Oct 2003–Sept 2005

All ever taken alcohol								Oct 2003–.	Sept 2005	
Treatment for alcohol	F	AST Scor	e 3+	FA	ST Score	0-2	Total			
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	
	%	%	%	%	%	%	%	%	%	
17-24										
Ever offered treatment	22	18	20	4	3	5	15	13	15	
Ever received treatment	11	9	9	2	1	2	8	6	7	
Received treatment in last 12 months	6	6	5	1	0	1	4	4	4	
Currently receiving treatment	3	3	2	1	0	0	2	2	2	
25-34										
Ever offered treatment	25	28	24	4	6	5	17	18	16	
Ever received treatment	17	18	17	2	4	3	11	12	11	
Received treatment in last 12 months	10	11	10	0	1	1	6	7	6	
Currently receiving treatment	5	4	5	0	0	0	3	3	3	
35+										
Ever offered treatment	34	34	36	5	4	5	23	22	23	
Ever received treatment	27	23	27	3	3	3	18	15	17	
Received treatment in last 12 months	13	12	14	1	1	0	9	8	8	
Currently receiving treatment	7	6	7	0	1	0	4	4	4	
Total										
Ever offered treatment	26	25	25	4	4	5	18	17	17	
Ever received treatment	17	15	16	2	3	3	12	11	11	
Received treatment in last 12 months	9	9	9	1	1	1	6	6	6	
Currently receiving treatment	5	4	4	0	0	0	3	3	3	
Weighted bases										
17-24	<i>1772</i>	2165	2060	2060	2845	3290	2845	3290	3080	
25-34	1189	1193	1094	1094	2013	2057	2013	2057	1882	
<i>35</i> +	1235	1358	1214	1214	1984	2234	1984	2234	2128	
Total	4197	4716	4369	4369	6845	7581	6845	7581	7090	
Unweighted bases										
17-24	1148	1944	2304	1226	1209	1148	3178	3530	3319	
25-34	827	1122	1220	811	877	827	1935	2108	1976	
<i>35+</i>	<i>752</i>	972	1127	681	760	<i>752</i>	1662	1896	1756	
Total	2727	4039	4651	2720	2846	2727	6778	7534	7051	

Table 6.9

Would like to receive treatment for alcohol, by age, survey year and FAST Score

All drunk alcohol in last 12 months Oct 2003–Sept 2006

Would like to receive treatm	FAST S	core 3+	FAS	T Score 0	-2				
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24									
Currently receiving treatment	3	3	2	1	0	0	2	2	2
Would like treatment	15	15	14	2	3	1	10	11	10
Would not like treatment	82	82	83	98	97	99	88	87	89
25-34									
Currently receiving treatment	5	4	5	0	0	0	3	3	3
Would like treatment	28	25	25	3	2	2	18	16	15
Would not like treatment	67	70	70	97	98	98	80	81	81
35+									
Currently receiving treatment	7	6	7	0	0	0	4	4	4
Would like treatment	29	31	30	1	2	2	19	20	18
Would not like treatment	64	63	63	98	97	97	77	76	78
Total									
Currently receiving treatment	5	4	4	0	0	0	3	3	3
Would like treatment	23	22	21	2	2	2	15	15	14
Would not like treatment	73	73	74	98	97	98	82	82	83
Weighted bases									
17-24	1772	2164	2059	1062	1109	1005	2839	3287	3075
25-34	1186	1192	1092	825	<i>853</i>	780	2013	2055	1879
<i>35+</i>	1231	1353	1213	740	865	903	1980	2229	2126
Total	4190	4709	4363	2629	2827	2689	6835	<i>7571</i>	7080
Unweighted bases									
17-24	1941	2302	2154	1222	1209	1145	3170	3527	3312
25-34	1119	1220	1137	812	875	827	1934	2106	1973
<i>35+</i>	967	1123	998	679	759	751	1655	1893	1754
Total	4028	4645	4289	2715	2843	2723	6762	<i>7526</i>	7039

7 Availability and supply of drugs

7.1 Availability of heroin, crack and cocaine

Respondents who had ever bought heroin, crack or cocaine were asked how available each drug was when they had the money to buy it. Heroin and crack were always available to a substantial majority of respondents who had ever bought these individual drugs when they had enough money to buy them in the last 12 months. In 2005–06, among those who had bought heroin in the last year, 75% said that it was available all the time and 18% said it was available most of the time, while 4% said it was available to them only some of the time and 3% said heroin was often not available.

Crack and powder cocaine followed a similar pattern to heroin of general availability, although powder cocaine was not reported to be as readily available as heroin or crack. It is possible that the apparent lower availability of powder cocaine may be explained by the different frequency of drug taking among respondents who took powder cocaine, or heroin or crack, and hence behaviour of acquiring the drugs. Of those who had bought crack, 75% said it was always available and 68% of those who had ever bought powder cocaine said it was always available.

In 2005–06, respondents were also asked about availability of ecstasy. Among those who had bought this drug in the last 12 months, a slightly lower proportion of respondents reported that it was always available (60%) compared to heroin, crack and powder cocaine.

The availability of heroin and crack was similar across all age groups. Similar patterns were found in 2004–05 and 2003–04.

Figure 7.1
Whether substances are always available, by survey year: 2003-06
Base: All ever bought substance

100

80
40
20
2003-04
2004-05
2005-06

(Table 7.1-7.4, Figure 7.1)

7.2 Selling drugs

All respondents were asked whether they had ever sold heroin, crack or powder cocaine, even if they had never used or bought either drug. In total, 6% of respondents had ever sold heroin, 4% had sold crack and 5% had sold powder cocaine in 2005–06. Those who had used individual drugs in the last year were more likely to have ever sold them – for example, in 2005–06, 31% of those who took heroin at least once a week had ever sold it, compared with 3% of other respondents. In terms of crack, 20% of respondents who took this drug at least once a week had ever sold it, whereas 3% of respondents who did not usually take crack had done so. Among those who took powder cocaine at least once a week, 26% had ever sold it, whereas 4% of those who did not take it at least weekly had done so. Similar patterns were found in 2004–05 and 2003–04. In 2005–06, respondents were also asked whether they had ever sold ecstasy. Among those who took ecstasy at least weekly, 32% had ever sold it. The equivalent figure was 9% among respondents who did not take ecstasy weekly.

A consistent relationship between age and the likelihood of selling heroin or crack did not appear to exist. A relationship between age and the likelihood of selling powder cocaine and ecstasy did appear to exist, however, with those in the youngest age group being the most likely to sell these drugs.

(Table 7.5-7.8)

7.3 Relative price of drugs

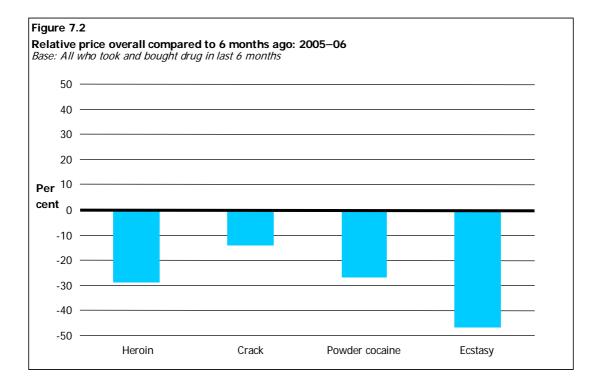
In 2005–06, all respondents who had taken and bought heroin, crack, cocaine or ecstasy in the last 6 months were asked about the relative price of the individual drugs at the time of interview compared to 6 months previously. Respondents were given three response options ("more expensive", "stayed about the same", "less expensive"). In the analysis of the perception of the relative price of drugs, the net change in the relative price of each drug is reported, that is, the proportion *on balance* who reported that each drug had become more or less expensive compared to 6 months previously. In other words, the net proportion is the difference between those who reported that the relative price increased and those who reported that the relative price decreased. For example, a larger proportion of respondents said that heroin had become less expensive than more expensive, thus suggesting that heroin had become cheaper overall, i.e. there was a net decrease in relative price. It should, however, also be noted that the majority reported that the price for heroin had stayed about the same.

Overall, a net proportion of respondents reported that each of the drugs had become relatively cheaper compared to 6 months previously. A net proportion of 29% and 27% of respondents reported that the relative price of heroin and powder cocaine, respectively, had become cheaper, whereas the equivalent figure was 14% for crack. In contrast, those who reported that ecstasy had become cheaper outweighed those who reported that it had become more expensive by 47 percentage points. The largest net proportion who reported that each drug had become cheaper was seen among respondents aged 25 to 34. For example, a net proportion of 36% of respondents aged 25 to 34 responded that heroin had become cheaper, compared to 30% of those aged 35 or older and 15% of those aged 17 to

24. A similar pattern was seen for powder cocaine and crack, with the exception of a small net proportion (2%) of those aged 17 to 24 who responded that crack had become more expensive. In terms of ecstasy, among all age groups, the net proportion who reported that the drug had become cheaper was much larger compared to the other drugs, although the order was the same.

Yet again, it should be borne in mind that these findings merely indicate respondents' perceptions of net expensiveness; no data was collected on actual prices, implying that the finding cannot be verified.

(Table 7.9 - 7.12, Figure 7.2)



7.4 Purity of drugs

In 2005-06, all respondents who had taken and bought heroin, crack, powder cocaine, or ecstasy were asked about the purity of these drugs. Similar to expensiveness, the net proportions of respondents who reported that purity had decreased or increased are reported. Overall, a net proportion of respondents responded that purity had decreased for each drug compared with 6 months previously. Relative purity of heroin, crack, powder cocaine and ecstasy were slightly different to that of relative price, both in terms of magnitude and pattern. The largest net proportion who responded that purity had decreased was seen for heroin (23%), which in turn was followed by ecstasy (19%), crack (16%), and powder cocaine (8%). There were no differences among the different age groups. These findings thus suggest that the price of heroin, powder cocaine and ecstasy decreased in real terms (i.e. controlling for purity), even if it should again be noted that they are based on respondents' *perceptions* rather than actual prices. The reported relative decrease in real price seems to be most substantial for powder cocaine and ecstasy and less pronounced for heroin. In contrast, the findings suggest that the price for crack increased marginally in real terms compared to 6 months previously.

(Table 7.13-7.16, Figure 7.3)

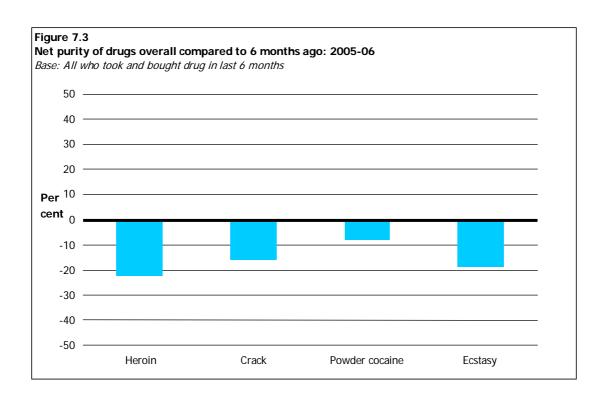


Table 7.1

Availability of heroin, by age

All who bought heroin in last 12 months

Oct 2003-Sept 2006

Availability of heroin	17-24				25-34			35+			Total		
-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	
	04	05	06	04	05	06	04	05	06	04	05	06	
	%	%	%	%	%	%	%	%	%	%	%	%	
Always available	79	79	73	79	80	79	79	79	70	79	80	75	
Available most of the time	18	18	20	17	15	16	18	16	20	18	16	18	
Available some of the time	2	3	4	3	3	2	2	3	7	2	3	4	
Often not available	1	0	3	0	2	2	1	2	3	1	1	3	
Weighted bases	551	463	299	711	596	565	253	309	279	1515	1368	1143	
Unweighted bases	668	522	350	772	688	606	310	312	259	1751	1522	1215	

Table 7.2

Availability of crack, by age

All who bought crack in last 12 months										Oct 20	003Sep	ot 2006
Availability of crack	17-24		25-34			35+			Total			
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Always available	76	74	72	76	77	78	79	76	72	77	76	75
Available most of the time	18	17	18	16	17	15	13	19	19	16	18	17
Available some of the time	4	7	7	5	4	5	6	1	6	5	5	6
Often not available	2	2	3	2	2	2	1	3	4	2	2	3
Weighted bases	578	530	340	707	544	493	281	304	265	1566	1378	1098
Unweighted bases	714	604	401	736	621	<i>525</i>	323	301	250	1774	1526	1176

Table 7.3

Availability of powder cocaine, by age

All who bought powder cocaine in last 12 months

Oct 2003-Sept 2006

Availability of powder cocaine	17-24			25-34			35+			Total		
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Always available	72	69	69	66	68	68	69	64	59	69	68	68
Available most of the time	19	21	21	20	19	22	17	24	32	19	21	23
Available some of the time	6	7	5	12	8	6	10	9	6	9	7	6
Often not available	3	3	4	3	5	3	5	3	2	3	4	4
Weighted bases	693	873	865	469	461	395	172	158	162	1334	1492	1422
Unweighted bases	809	985	925	456	483	426	170	172	160	1435	1640	1511

Table 7.4

Availability of ecstasy, by agea

All who bought ecstasy in last 12 months

Oct 2005-Sept 2006

in tine zeagin ecclesy in race 12	00.2000 cop. 2000				
Availability of ecstasy	17-24	25-34	35+	Total	
	%	%	%	%	
Always available	58	62	69	60	
Available most of the time	24	23	21	24	
Available some of the time	11	7	7	10	
Often not available	6	8	3	7	
Weighted bases	763	331	70	1164	
Unweighted bases	806	332	79	1217	

a Respondents were only asked about the availability of ecstasy in the survey year 2005-06.

Table 7.5

Ever sold heroin, by age and whether take heroin at least once a week

All respondents Oct 2003-Sept 2006 Sold heroin Take heroin weekly Do not take heroin weekly Total 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 % % % % % % % % % 17-24 25-34 35+ Total Weighted bases 17-24 25-34 35+ Total Unweighted bases 17-24 25-34 35+ Total

Table 7.6

Ever sold crack, by age and whether take crack at least once a week

All respondents Oct 2003-Sept 2006 Sold crack Take crack weekly Do not take crack weekly **Total** 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 % % % % % % % % % 17-24 25-34 35+ Total Weighted bases 17-24 25-34 *35+* Total Unweighted bases 17-24 25-34 35+ Total

Table 7.7

Ever sold powder cocaine, by age and whether take powder cocaine at least once a week

All respondents Oct 2003-Sept 2006 Take powder cocaine Do not take powder cocaine Sold powder cocaine Total weekly weekly 2005-06 2003-04 2004-05 2003-04 2004-05 2005-06 2003-04 2004-05 2005-06 % % % % % % % % % 17-24 25-34 35+ [19] Total Weighted bases 17-24 25-34 35+ Total Unweighted bases 17-24 25-34 *35+* Total

Table 7.8

Ever sold ecstasy, by age and whether take ecstasy at least once a week^a

All respondents Oct 2005–Sept 2006

Sold ecstasy	Take ecstasy weekly	Do not take ecstasy	weekly Total
	%	%	%
17-24	38	11	12
25-34	24	11	11
35+	[27]	4	4
Total	32	9	9
Weighted bases			
17-24	150	3162	3320
25-34	89	1984	2077
<i>35+</i>	27	2278	2313
Total	267	7424	7710
Unweighted bases			
17-24	170	3421	3602
25-34	93	2086	2185
<i>35+</i>	31	1876	1912
Total	294	7383	7699

a Respondents were only asked whether they had ever sold ecstasy in the survey year 2005–06.

Table 7.9

Relative price of heroin now compared to 6 months ago, by age

All who have taken and bought heroin in the last 6 months (except 'only ever taken heroin once')

Oct 2005-Sept 2006

/			
)			
Heroin			
17-24	25-34	35+	Total
%	%	%	%
20	11	14	14
45	42	41	43
35	47	45	43
-15	-36	-30	-29
248	<i>512</i>	234	995
290	547	218	1055
	Heroin 17-24 % 20 45 35 -15	Heroin 17-24 25-34 % % 20 11 45 42 35 47 -15 -36 248 512	Heroin 17-24 25-34 35+ % % % 20 11 14 45 42 41 35 47 45 -15 -36 -30 248 512 234

Table 7.10

Relative price of crack now compared to 6 months ago, by age

All who have taken and bought crack in the last 6 months

Oct 2005-Sept 2006

(except 'only ever taken crack once')

Expensiveness now compared to 6 months ago	Crack			
	17-24	25-34	35+	Total
	%	%	%	%
More expensive	28	10	22	18
About the same as 6 months ago	47	52	49	50
Less expensive	26	38	29	32
Net expensiveness	2	-27	-8	-14
Weighted bases	228	412	217	857
Unweighted bases	280	437	204	921

Table 7.11

Relative price of powder cocaine now compared to 6 months ago, by age

All who have taken and bought powder cocaine in the last 6 months (except 'only ever taken powder cocaine once')

Oct 2005-Sept 2006

Expensiveness now compared to 6 months ago	Powder	cocaine		
	17-24	25-34	35+	Total
	%	%	%	%
More expensive	17	9	8	14
About the same as 6 months ago	46	41	56	45
Less expensive	38	49	36	41
Net expensiveness	-21	-40	-28	-27
Weighted bases	618	277	102	997
Unweighted bases	653	285	103	1041

Table 7.12

Relative price of ecstasy now compared to 6 months ago, by age

All who have taken and bought ecstasy in the last 6 months

Oct 2005-Sept 2006

(except 'only ever taken ecstasy once')

- 	*			
Expensiveness now compared to 6 months ago	Ecstasy			
	17-24	25-34	35+	Total
	%	%	%	%
More expensive	13	5	[15]	11
About the same as 6 months ago	32	28	[18]	30
Less expensive	54	67	[67]	59
Net expensiveness	-41	-62	[-52]	-47
Weighted bases	500	200	41	741
Unweighted bases	<i>513</i>	198	47	<i>758</i>

Table 7.13

Purity of heroin compared to 6 months ago, by age

All who have taken and bought heroin in the last 6 months (except 'only ever taken heroin once')

Oct 2005–Sept 2006

Purity now compared to 6 months ago	Heroin			
	17-24	25-34	35+	Total
	%	%	%	%
More pure	7	8	5	7
About the same as 6 months ago	65	62	67	64
Less pure	28	30	28	29
Net purity	-21	-23	-24	-23
Weighted bases	243	492	231	966
Unweighted bases	280	527	212	1019

Table 7.14

Purity of crack compared to 6 months ago, by age

All who have taken and bought crack in the last 6 months

Oct 2005-Sept 2006

(except 'only ever taken crack once')

Purity now compared to 6 months ago	Crack			
	17-24	25-34	35+	Total
	%	%	%	%
More pure	10	7	4	7
About the same as 6 months ago	68	68	74	69
Less pure	22	25	22	23
Net purity	-12	-18	-18	-16
Weighted bases	225	401	209	834
Unweighted bases	276	425	197	898

Table 7.15

Purity of powder cocaine compared to 6 months ago, by age

All who have taken and bought powder cocaine in the last 6 months (except 'only ever taken powder cocaine once')

Oct 2005-Sept 2006

Purity now compared to 6 months ago	Powder co	ocaine		
	17-24	25-34	35+	Total
	%	%	%	%
More pure	11	8	2	9
About the same as 6 months ago	71	75	86	74
Less pure	19	16	12	17
Net purity	-8	-8	-10	-8
Weighted bases	614	275	101	989
Unweighted bases	644	280	101	1025

Table 7.16

Purity of ecstasy compared to 6 months ago, by age

All who have taken and bought ecstasy in the last 6 months (except 'only ever taken ecstasy once')

Oct 2005-Sept 2006

Purity now compared to 6 months ago	Ecstasy			
	17-24	25-34	35+	Total
	%	%	%	%
More pure	6	5	[3]	6
About the same as 6 months ago	67	72	[81]	69
Less pure	26	23	[15]	25
Net purity	-20	-18	[-12]	-19
Weighted bases	492	195	40	727
Unweighted bases	506	194	46	746

Appendix A Response tables

The main issue which resulted in a low response rate was the difficulty in being able to approach respondents to ask them to participate in the survey. Interviewers were governed by the Police and Criminal Evidence Act (PACE) which meant that they were not allowed to prolong the amount of time that an arrestee spent in custody – thus in 2005–06 it was not possible to approach 22% of respondents because there was not a long enough time gap to allow an interview. In 2005–06, other time issues (such as interviewer or police being unavailable when an respondent was free to be approached) accounted for a further 17% of eligible respondents not being approached. Some respondents were also not fit to be interviewed either because they were drunk (6%), high on drugs (1%) or other reasons such as being mentally incapable (5%). In 6% of cases either the custody staff or interviewer felt that the respondent was a potential safety risk and therefore did not approach them to take part. Other reasons accounted for a further 9% of non-contacts.

Thus, in 2005–06 it was only possible to approach 33% of respondents to ask them to take part – 69% of these agreed to take part, resulting in an overall response rate of 23%. The overall response rate was similar to that in the previous years, even if there was a small decrease in the participation rate among those who were approached in 2004–05 and 2005–06 (69%) compared with 2003-04 (72%).

Response was similar among men and women, but slightly higher amongst younger respondents (27% among 17- to 24-year-olds, 23% among 25- to 34-year-olds and 19% among those aged 35 or over, in 2005–06). Similar response patterns were seen in 2004–05 and 2003–04. There was no difference among respondents of different ethnic groups in their willingness to take part in either 2005–06 or 2004–05. In 2003–04, however, there were slight variations in response rates for different ethnic groups. Black respondents were more likely to take part (29%) and Asian respondents were slightly less likely to do so (23%).

The greatest variation in response was by type of arrest, which ranged from 8% for those arrested for being drunk and disorderly to 26% among those arrested for burglary and other theft. Similar patterns were seen in 2004–05 and 2003–04.

(Tables A.1 – A.6)

Table A.1

Non-interview due to lack of time gap for sex, ethnicity, age and reason for arrest, by survey year

Base: All approached respondents Oct 2003 – Sep 2006

Non-interview due to lack of time gap	2003-04	2004-05	2005-06
	%	%	%
Sex			
Male	21	22	22
Female	21	24	23
Ethnicity			
White	21	22	22
Black	16	19	20
Asian	21	25	22
Chinese	7	33	16
Other	12	23	21
Age			
17-24	21	23	22
25-34	19	21	21
35+	19	21	21
Reason for arrest			
Assault	22	22	23
Sex offence	21	22	20
Other violent offence	19	23	21
Burglary	21	20	20
Shoplifting	21	24	23
Other theft	22	23	23
Criminal damage	22	23	22
Drugs possession	21	25	22
Other drugs offence	21	19	21
Drink driving	22	24	23
Drunk/disorderly	14	16	18
Other offence	19	24	25
Total	21	22	22
Bases	21		
Male	28356	30372	30147
Female	4763	5127	4995
White	26646	29067	28874
Black	2569	29007 2857	2936 2936
Asian	1372	1649	1553
Mixed	282		284
Chinese	202 124	261 45	67
Other	573	382	
			219
17-24	12485	13474	13518
<i>25-34</i>	9315	9952	9781
35+	8846	10085	10011
Assault	5206	8301	9646
Sex offence	659	981	974
Other violent offence	2766	2574	2494
Burglary	2291	2770	2823
Shoplifting	4364	4189	3692
Other theft	4863	4258	4027
Criminal damage	2386	2787	2873
Drugs possession	1396	1488	1537
Other drugs offence	749	656	576
Drink driving	1762	1694	1583
Drunk/disorderly	1949	1769	1660
Other offence	4749	4049	3261
Total	33140	35518	35146

Table A.2

Response, by sex and age and survey year

Table A.2 (cont.)

Response, by sex and age and survey year

All eligible respondents Oct 2003–Sept 2006

All eligible respondents										ÜC	t 2003–Se	ept 2006
Response		17-24			25-34			35+			Total	
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005
	04	05	06	04	05	06	04	05	06	04	05	-06
	%	%	%	%	%	%	%	%	%	%	%	%
Total												
All eligible												
Interview	27	29	27	22	24	23	20	21	19	23	24	23
No time gap	21	23	22	19	21	21	19	21	21	21	22	22
Other time reason	12	17	19	11	15	17	10	14	17	11	15	17
Unfit due to alcohol	9	5	5	9	6	6	12	10	9	10	7	6
Unfit due to drugs	2	1	1	2	2	2	2	2	2	2	1	1
Other unfit	2	4	3	4	6	5	6	7	6	4	5	5
Safety risk	6	5	5	8	6	7	9	8	7	8	6	6
Refusal	9	10	10	10	12	11	8	10	10	9	11	10
Other reason	13	8	9	14	8	9	12	8	9	13	8	9
All approached												
Participation rate	76	75	74	69	66	68	71	68	67	72	69	69
Consent to take												
saliva sample												
Consented (all eligible)	24	25	23	19	21	19	18	18	16	20	21	19
Consented (all	67	65	62	60	57	57	62	58	54	63	60	57
approached)												
Bases												
All eligible	12485	13474	13518	9315	9952	9781	8846	10085	10011	33140	35518	35146
All approached	4431	5155	4967	3030	3597	3244	2506	3111	2914	10521	12376	11630

Table A.3

Response, by ethnic group and survey year All respondents Oct 2003-Sept 2006

, , 00/0011001100																		de: -cc
Response		White			Black			Asian			Other			Refused			Total	
	2003-	2004-	2005-	2003-	2003-	2003-	2004-	2005-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	04	04	05	06	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
All eligible																		
Interview	23	25	23	26	24	26	21	26	26	18	26	26	16	12	12	23	24	23
No time gap	21	22	22	16	19	20	21	25	22	12	23	22	34	43	40	21	22	22
Other time reason	1	15	18	10	13	14	12	15	19	7	16	15	6	14	13		15	17
Unfit due to alcohol	1	8	7	ω	ω	_	4	4	ω	ω	ω	4	8	4	ъ	10	7	6
Unfit due to drugs	2	_	_	2	_	2	_	_	_	_	_	_	2	_	0	2	_	_
Other unfit	4	ъ	ъ	ъ	6	ъ	ω	4	ω	ω	7	ω	IJ	4	ω	4	IJ	ъ
Safety risk	œ	6	6	ω	8	7	ъ	IJ	ъ	ъ	6	6	8	ъ	7	∞	6	6
Refusal	9	10	10	14	16	14	∞	10	10	6	œ	12	IJ	9	10	9	1	10
Other reason	11	8	8	18	10	10	25	10	11	44	9	11	18	8	10	13	8	9
All approached																		
Participation rate	73	70	70	65	60	64	72	72	72	76	77	68	77	58	54	72	69	69
Consent to take saliva																		
sample																••••••		
Consented (all eligible)	21	21	19	20	19	20	16	20	20	16	22	22	14	10	10	20	21	19
Consented (all approached)	65	62	59	50	46	50	54	55	55	67	64	58	70	48	48	63	60	57
Bases																		
All eligible	26646	29067	28874	2569	2857	2936	1372	1649	1553	979	688	570	1563	1252	1211	33140	35518	35146
All approached	8554	10111	9411	1020	1162	1177	398	598	561	230	236	219	314	266	261	10521	12376	11630

Response, by suspected offence

All respondents												Oct 2003-Sept 2004	Sept 2004
Response Year 1	Suspected offence	ence											
		Sex	Other violent				Criminal	Drugs		Drink-	Drunk/ disorderly and other	Other	
	Assault %	offence %	offence %	Burglary %	Shoplifting %	Shoplifting Other theft %	damage %	possession %	offence %	driving %	alcohol %	offence %	Total %
All eligible													
Interview	22	17	22	30	29	27	24	27	28	17	7	19	23
No time gap	22	21	19	21	21	22	22	21	21	22	14	19	21
Other time reason	12	10	9	=======================================	11	13	10	13	10	9	6	10	1
Unfit due to alcohol	8	2	4	ω	ω	ω	1	2	_	24	50	14	10
Unfit due to drugs	_	0	2	2	ω	2	2	6	4	ω	2	2	2
Other unfit	4	6	5	ω	4	ω	6	2	2	2	ω	6	4
Safety risk	10	14	14	5	5	σı	œ	4	6	4	7	9	8
Refusal	8	6	9	12	11	1	7	10	10	7	ω	œ	9
Other reason	13	22	16	13	13	15	11	14	17	13	7	14	13
All approached													
Participation rate	73%	73%	71%	72%	72%	72%	76%	72%	73%	70%	68%	71%	72%
Consent to take saliva													
Consented (all eligible)	19	16	18	26	25	24	21	23	24	15	7	17	20
Consented (all approached)	65	66	58	63	62	64	67	62	63	63	69	62	63
Bases													
All eligible	5206	659	2766	2291	4364	4863	2386	1396	749	1762	1949	4749	33140
All approached	1564	157	861	944	1725	1842	737	515	289	425	201	1261	10521

Table A.5

Response, by suspected offence

All respondents
Response Year 2 Suspected offence Oct 2004–Sept 2005

response rear z	suspected offence	ence											
									Other		Drunk/ disorderly		
	Assault	Sex offence	Other violent offence	Burglary	Shoplifting Other theft	Other theft	Criminal damage	Drugs possession	drugs offence	ving	and other alcohol	Other offence	Total
	%	%		%	%	%	%	%	%	%	%	%	%
All eligible													
Interview	25	19	24	30	27	28	24	24	26	20	10	21	24
No time gap	22	22	23	20	24	23	23	25	19	24	16	24	22
Other time reason	15	14	15	15	14	18	15	14	20	14	12	16	15
Unfit due to alcohol	6	_	л	2	4	2	7	_	_	21	39	œ	7
Unfit due to drugs	_	0	0	_	2	_	_	6	ω	2	2	_	_
Other unfit	6	4	ъ	6	6	4	7	4	4	2	4	6	5
Safety risk	8	10	10	5	4	4	7	4	4	ω	6	6	6
Refusal	10	8	10	13	13	13	9	13	1	8	6	10	<u> </u>
Other reason	8	21	8	8	7	7	6	9	13	6	5	8	8
All approached													
Participation rate	72%	71%	71%	69%	66%	68%	72%	65%	71%	70%	64%	68%	69%
Consent to take saliva													
Consented (all eligible)	21	16	20	26	23	24	21	19	21	18	9	19	21
Consented (all approached)	61	59	60	60	57	58	63	52	56	63	59	60	60
Bases													
All eligible	8302	981	2574	2770	4189	4258	2787	1488	656	1694	1769	4050	35520
All approached	2879	269	858	1188	1678	1756	931	547	245	483	270	1271	12376

able A.6

Response, by suspected offence

All respondents												Oct 2005-Sept 2006	Sept 2006
Response Year 3	Suspected offence	ffence											
											Drunk/ disorderly		
	Assault %	Sex offence %	Other violent offence %	Burglary %	Shoplifting %	Shoplifting Other theft %	Criminal damage %	Drugs possession %	Drugs Other drugs possession offence %	Drink driving %	and other alcohol %	Other offence %	Total %
All eligible													
Interview	23	20	24	26	24	26	22	25	24	19	œ	21	23
No time gap	23	20	21	20	23	23	22	22	21	23	18	25	22
Other time reason	17	18	18	18	16	18	17	16	19	16	16	17	17
Unfit due to alcohol	٥ ن	2	Οī	_	4	2	7	2	0	20	38	ΟΊ	6
Unfit due to drugs	_	0	_	2	ω	_	_	Οī	ω	ω	N	_	_
Other unfit	бı	Оī	4	4	0	ω	7	4	ω	ω	4	Οī	Οī
Safety risk	8	9	7	Οī	Οī	Οī	7	4	ω	ω	o	6	6
Refusal	9	6	10	13	11	13	10	13	1	œ	Ŋ	10	10
Other reason	8	20	10	10	9	9	7	10	14	5	4	9	9
All approached													
Participation rate	71%	76%	70%	66%	69%	67%	70%	66%	68%	71%	62%	68%	69%
Consent to take saliva													
Consented (all eligible)	20	16	20	21	20	22	18	22	19	15	7	17	19
Consented (all approached)	60	62	58	54	56	56	58	58	54	55	55	55	57
Bases													
All eligible	9646	974	2494	2823	3692	4027	2873	1537	576	1583	1660	3261	35146
All approached	3179	254	853	1104	1314	1563	906	583	206	433	203	1032	11630

Appendix B Comparison of self-reported drug use with drug testing of oral fluid samples

All respondents were asked to provide a voluntary oral fluid sample. Samples were sent to Cozart Bioscience Ltd for analysis of recent drug use. Two stages of testing were employed.

An initial screening test was carried out and cases were classified as testing positive (or not) for cocaine and for opiates. The screening test levels for cocaine indicated for each sample are a result of the presence of cocaine and its many metabolites. However, a positive screening test is only a presumptive positive and should be confirmed by a more specific confirmatory test, e.g. gas chromatography-mass spectrometry (GC-MS). The purpose of the confirmation test is to identify the exact compounds that are present in the sample. This test looks for specifically: cocaine, cocaethylene and benzoylecgonine. As the screening test is not 100% specific (very much like a pregnancy test) some samples screening positive close to the cut-off will confirm negative. These guidelines also apply to opiates.

Factors influencing the detection of illicit drugs like cocaine and heroin in biological samples are the purity of the drug, the amount of the dose taken and accurate recall of when drugs were last taken. E.g. a small dose of impure cocaine can disappear from the body and not be detected after a couple of hours. In the case of opiates, the factors are more complex. Overthe-counter medication (e.g. pholocodeine and codeine) and prescribed medication (dihydrocodeine, MST) are detected alongside heroin and its metabolites by the opiates test kit. It is very common for an individual to forget or not know that they should have declared medication containing opiates in the previous 48 hours. An individual may have correctly declared that they have not taken heroin in the last 48 hours but the test could be positive as a result of medication containing opiates.

Although overall levels of consenting to an oral fluid sample were high (83% of interviewed respondents agreed to provide a sample in 2005-06), there were differences between those who had and had not taken drugs. In 2005-06, those who reported taking heroin in the last 48 hours were slightly more likely to consent to providing a sample (86%) than those who reported that they had not taken heroin in the last 48 hours (83%). The same pattern was seen for recent reported use of crack or powder cocaine and consent to provide an oral fluid sample. Similar patterns were seen in 2004–05 and 2003–04.

(Table B.1)

In 2005-06, the proportion who screened positive for cocaine (13%) was similar to the proportion who reported having taken cocaine or crack in the last 48 hours (11%). As commented on above, factors such as the purity and amount of the drug, and when it was actually taken affect whether a screening test is positive. In total, 71% of those who reported using cocaine or crack tested positive for cocaine, as did 7% of those who said that they had not used these drugs in the last 48 hours. Similar patterns were seen in 2004–05 and 2003–04.

(Tables B.2, B.3)

The relationship between self-reported recent use of heroin and a positive screening for opiates was weaker than the equivalent relationship for cocaine (this may be due to false positives from taking medication containing opiates). In 2005–06, in total 15% screened positive for opiates compared with 11% who reported using heroin in the last 48 hours. In total, 90% of those who reported taking heroin in the last 48 hours screened positive for opiates, compared with 7% of those who said that they had not taken heroin in the last 48 hours. Similar patterns were seen in 2004–05 and 2003–04.

(Tables B.2, B.4)

Table B.1									
Consent to	oral fluic	l sample	, by whe	ther take	en heroin	in last 4	8 hours	and surv	ey year
All respondents								Oct 2003-	-Sept 2006
Consent to	Heroi	n in last 48	3 hours						
saliva sample									
		Yes			No			Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%		%	%
Given consent	89	89	86	85	84	83	85	84	83
Bases	1225	1093	820	6235	7283	6945	7501	8433	7835

Table B.2

All with valid oral fluid sa	mple									Oct 2	003-Sep	ot 2006
Positive screening		17-24			25-34			35+			Total	
tests												
	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-	2003-	2004-	2005-
	04	05	06	04	05	06	04	05	06	04	05	06
	%	%	%	%	%	%	%	%	%	%	%	%
Men												
Positive cocaine screen	11	10	11	21	20	20	12	10	10	15	13	13
Positive opiates screen	13	10	7	28	24	25	15	15	15	18	16	14
Women												
Positive cocaine screen	15	16	14	28	23	22	13	8	5	18	16	14
Positive opiates screen	22	23	18	41	32	30	20	15	17	27	23	21
Total												
Positive cocaine screen	12	11	12	22	21	21	12	10	10	15	13	13
Positive opiates screen	14	12	8	30	26	25	16	15	16	19	17	15
Weighted bases												
Men	1959	2264	2244	1454	1446	1366	1328	1501	1487	4886	5322	5183
Women	309	430	379	226	270	267	258	299	277	805	1013	941
Total	2268	2694	2623	1680	1716	1634	1586	1801	1764	5692	6335	6124
Unweighted bases												
Men	2129	2446	2404	1338	1504	1399	1095	1294	1208	4817	5377	5110
Women	411	464	406	234	268	256	199	210	214	875	960	896
Total	2540	2910	2810	1572	1772	1655	1294	1504	1422	5692	6337	6006

Table B.3

Positive cocaine screen, by age and whether taken cocaine or crack in last 48 hours and survey year

All with valid oral fluid sample Oct 2003–Sept 2006

Positive co	ocaine Ta	ken cocair	e or crack	in last 48 h	ours				
screen									
		Yes			No			Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24	63	59	64	6	6	7	12	11	12
25-34	78	71	77	10	11	9	22	21	21
35+	85	85	70	6	4	5	12	10	10
Total	74	69	71	7	7	7	15	14	14
Weighted b	ases								
17-24	245	259	239	2216	2425	2390	2470	2691	2638
25-34	304	272	276	1443	1445	1322	1759	1721	1603
<i>35+</i>	134	122	113	1502	1645	1588	1644	1773	1710
Total	710	668	633	5302	5627	5400	6042	6312	6056
Unweighte	d bases								
17-24	279	294	256	2420	2608	2540	2708	2910	2809
25-34	325	305	265	1342	1461	1382	1675	1772	1654
<i>35+</i>	136	134	113	1237	1366	1303	1380	1504	1422
Total	794	<i>752</i>	646	5251	5567	5331	6069	6337	6004

Table B.4

Positive opiates screen, by age and whether taken heroin in last 48 hours and survey year

All with valid oral fluid sample Oct 2003–Sept 2006

Positive op	oiates	Taken hero	in in last 48	3 hours					
screen									
		Yes			No			Total	
	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06	2003-04	2004-05	2005-06
	%	%	%	%	%	%	%	%	%
17-24	83	88	82	5	4	3	14	12	8
25-34	89	89	94	11	10	9	30	26	26
35+	94	88	89	9	8	10	16	15	16
Total	88	88	90	8	7	7	19	17	15
Weighted ba	ases								
17-24	297	250	163	2168	2438	2469	2470	2691	2639
25-34	415	349	316	1332	1365	1283	1759	1721	1604
<i>35+</i>	133	153	122	1506	1612	1577	1644	1773	1706
Total	876	771	614	5143	<i>5523</i>	<i>5420</i>	6042	6312	6054
Unweighted	l bases								
17-24	359	285	179	2342	2620	2621	2708	2910	2810
25-34	464	402	339	1203	1363	1308	1675	1772	1655
<i>35+</i>	157	156	117	1216	1342	1298	1380	1504	1420
Total	1039	870	654	5008	5449	5326	6069	6337	6004

Appendix C Definitions of trigger offence, acquisitive crime, and summarised reason for arrest

Definition of acquisitive crimes (self-reported) used in the Arrestee Survey

- Gone into a shop and taken one or more things and then deliberately left the shop without paying in last 4 weeks
- Sold something to someone else that knew had been stolen in last 4 weeks
- Bought something that knew or thought had been stolen in last 4 weeks
- Stolen or driven away a car, van, motorbike or other motor vehicle without permission in last 12 months
- Stolen or tried to steal anything from the inside or outside of a vehicle, such as parts or personal possessions in last 12 months
- Got into someone's home without permission because wanted to steal or damage something in last 12 months
- Gone into any other types of buildings without permission because wanted to steal or damage something in last 12 months
- Used force, violence or threats against anyone to steal from a shop or any other business in last 12 months
- Used force, violence or threats against someone in order to steal something from them in last 12 months
- Stolen something from someone's hand, pocket or bag or anything else that they were carrying or wearing without the use of force, violence or threats in last 12 months
- Used a cheque book, credit card, store card or cash point card belonging to someone else without their permission in last 12 months
- Falsely claimed social security benefits, housing benefits or tax credits that were not entitled to in last 12 months
- Stolen anything else in the last 4 weeks
- Offered sex for money, drugs or something else in last 4 weeks

Definition used in the Arrestee Survey of whether reasons for arrest were acquisitive crimes or trigger offences

	Acquisitive crime	Trigger offence
Robbery	$\sqrt{}$	$\sqrt{}$
Burglary - dwelling	$\sqrt{}$	\checkmark
Burglary - non-dwelling	$\sqrt{}$	\checkmark
Theft person	$\sqrt{}$	\checkmark
Theft dwelling	$\sqrt{}$	$\sqrt{}$
Theft cycle	$\sqrt{}$	$\sqrt{}$
Theft from vehicle	$\sqrt{}$	$\sqrt{}$
Theft/Taking of vehicle	$\sqrt{}$	$\sqrt{}$
Theft from shops	$\sqrt{}$	$\sqrt{}$
Theft work/employer	$\sqrt{}$	$\sqrt{}$
Theft other	$\sqrt{}$	$\sqrt{}$
Handling stolen goods	$\sqrt{}$	$\sqrt{}$
Fraud/Forgery/Deception	$\sqrt{}$	$\sqrt{}$
Other theft of property	$\sqrt{}$	$\sqrt{}$
Drugs supply		$\sqrt{}$
Drugs possession		$\sqrt{}$
Begging	$\sqrt{}$	\checkmark
Prostitution – soliciting	$\sqrt{}$	
Making off without		
payment	$\sqrt{}$	$\sqrt{}$

Summarised reasons for arrest

Violent crime includes assault, other violent offence

 $\textbf{Theft} \ \text{includes burglary, shoplifting, other theft} \\$

Drink/drugs includes drink-driving, drugs possession, other drugs offence, drunk and disorderly **Other crime** includes criminal damage, sex offence, other offence

Appendix D Design and effect of weighting

There are five phases to creating the weights for the Arrestee Survey.

Phase 1

Weights designed to adjust for the selection of custody suites and the allocation of numbers of interviewer shifts to suites. These weights are the inverse of the probability of a randomly selected shift being allocated to a suite. All respondent numbers are projections of the eligible number of respondents from the 2002 census of custody suites. The strata are constructed to have approximately equal numbers of arrestees.

Phase 2

Further multiplicative weights designed to adjust for the timing of interviewer shifts. First, a separate set of police arrestee monitoring data relating to the period 2004–05 are used to estimate a regression of log custody duration on demographic characteristics and dummy variables representing the reason for arrest. The police data is then partitioned into three tertile groups based on predicted log duration to identify groups of high, medium and low duration arrestees. Within each group, a non-parametric duration analysis is conducted, conditional on time of entry into custody. This analysis gives the projected probability that an respondent, with any given characteristics and entering custody at any given time, will be in custody for some or all of an interview shift. This function is estimated non-parametrically and used to construct, for each respondent, the inverse probability of being in custody during one of the randomly assigned interviewer shifts. Separate weights are constructed in this manner for the pre- and post-January 2004 periods, which had different interview shift systems.

Phase 3

Further multiplicative weights designed to adjust for non-response. Weights are given for the interview and drug-test samples, based on logistic regression models. These models generate response probabilities for the interview/no-interview dichotomy, predicted from four separate logits for the subsamples of: white females; white males under 21; white males aged 21+; and members of an ethnic minority. The fitted probabilities are then smoothed by dividing the sample into 20 quantile groups and replacing each prediction by the sample response rate for the relevant quantile group. The reciprocals of these are then used as the response weights.

Phase 4

Weights designed to adjust for inter-individual variations in arrest frequency. These weights should be used to draw inferences about the population of arrestees (i.e. the set of people experiencing arrest during the course of the year) rather than the set of arrest events. The weights are based on the predicted mean annual number of arrests for each individual, from a negative binomial model fitted to data on the number of arrests in the previous 12 months. The predictions are smoothed by replacing them by average numbers of actual arrests (+1 for the current arrest) within 20 quantile groups and weights are calculated as the reciprocals of these means.

Phase 5

Comparison of weighted sample characteristics with population information from police arrestee monitoring data and further calibration weighting. Some preliminary explorations have been made, but it is not yet possible to implement this fully, owing to timing differences and incomplete coverage of the police monitoring data.

The weights used in this report are the product of the weights at phases 1 to 3, so there is no attempt to correct for the over-representation of people with high-arrest frequency.

Non-response is a large issue for the Arrestee Survey, since the proportion of eligible respondents who eventually yield an interview is quite low (23%). However, there is no necessary relationship between the response rate and biases in estimates calculated from the survey. Different forms of non-response may have quite different bias implications and those implications may vary between types of estimate. Unfitness for interview due to drugs would clearly cause bias in the estimation of mean rates of drug consumption. However, there are few sample losses from this source in the third year of the survey (1%); the analogous problem for alcohol is more serious (6%). The major source of interview loss is the lack of a time slot in the custody process (22%), which is related to the reason for arrest. A similar pattern was seen in the first and the second year of the survey. The response weights attempt to minimise biases by controlling for reason for arrest, time/day of arrest and demographic characteristics.

The following table shows the effect of weighting on a selection of survey estimates. It also shows the design effect (Deff), which gives the factor by which the sampling variance exceeds the variance achievable in a random sample of the same size. The design effect depends on several factors, including weighting and the pattern of clustering of interviews within custody suites. In some cases the design effect is quite large, which means that the 95% confidence interval around survey estimates is considerably wider than it would be for a simple random sample.

Table D.1

Effect of weighting on survey estimates and confidence intervals

Oct 2003-Sep 2004

					OCI 2003-3	
		Esti	mate		nce interval of d estimate	f
Variable	Bases	Unweighted	Weighted	LCI	UCI	Deff
variable	Dases	%	%	%	%	Den
Ever taken drug:						
Cannabis	7474	75.23	71.72	69.66	73.78	4.07
Heroin	7476	31.19	27.71	25.75	29.68	3.74
Crack	7478	36.31	32.52	30.45	34.59	3.79
Ecstasy	7474	51.26	47.35	44.45	50.25	6.55
Powder cocaine	7472	44.65	40.86	38.73	42.99	3.65
Take heroin or crack at least once a week	7475	20.75	17.93	16.28	19.58	3.61
Ever received heroin treatment	2289	52.25	51.71	48.12	55.31	3.08
Ever received crack treatment	2662	7.59	7.40	5.56	9.24	3.42
Ever received powder cocaine treatment	3282	2.59	2.27	1.69	2.86	1.32
Made money from crime in last year:						
Nothing	<i>7527</i>	60.82	65.54	63.36	67.72	4.12
Less than £1,000	7527	17.50	15.83	14.29	17.36	3.47
More than £1,000, but less than £5,000	7527	8.24	7.43	6.70	8.16	1.51
More than £5,000	<i>7527</i>	13.44	11.21	10.06	12.35	2.57
Committed offence in last year:						
Burglary	7476	6.45	5.61	4.78	6.44	2.54
Possession of drugs	7478	11.98	10.65	9.62	11.68	2.16
Stole motor vehicle	7486	11.73	10.40	9.17	11.63	3.16
Stole something from inside motor vehicle	7486	10.66	9.13	8.10	10.15	2.48
Acquisitive crimes in last year:						
None	7173	55.50	60.92	58.55	63.30	4.43
1-52	7173	21.59	19.81	18.16	21.46	3.21
53-365	7173	12.57	10.78	9.88	11.69	1.59
366+	7173	10.33	8.49	7.46	9.51	2.53
Availability of heroin:						
Always available	<i>1751</i>	79.61	79.23	75.54	82.92	3.77
Available most of the time	<i>1751</i>	17.19	17.64	14.16	21.12	3.80
Available some of the time	<i>1751</i>	2.34	2.48	1.49	3.47	1.85
Often not available	1751	0.86	0.66	0.24	1.07	1.22
Availability of powder cocaine:						
Always available	1435	69.13	69.34	65.65	73.03	2.39
Available most of the time	1435	19.16	18.74	15.69	21.79	2.28
Available some of the time	1435	8.36	8.73	6.58	10.88	2.16
Often not available	1435	3.34	3.19	2.21	4.16	1.15
Availability of crack:						
Always available	1774	76.38	76.54	72.79	80.29	3.62
Available most of the time	1774	17.02	16.31	13.23	19.39	3.20
Available some of the time	1774	4.74	5.22	3.70	6.74	2.16
Often not available	1774	1.86	1.93	1.19	2.67	1.34
Positive screening tests:						
Cocaine	6069	16.43	15.14	12.78	17.51	6.88
Opiates	6069	21.52	19.49	17.62	21.37	3.54
Morphine/heroin	<i>5351</i>	6.09	5.60	4.59	6.61	2.68

Table D.1 (continued)

Effect of weighting on survey estimates and confidence intervals

					Oct 2003–3	Sep 2004
		Estin	nate		nce interval o d estimate	f
Variable	Bases	Unweighted	Weighted	LCI	UCI	Deff
		£	£	£	£	
Total income from crime	7507	5302.21	4300.45	3293.28	5307.62	2.11
Shoplifting proceeds in last month	1554	478.93	537.74	251.92	823.56	2.76

Table D.2

Effect of weighting on survey estimates and confidence intervals

Oct 2005-Sep 2006

s 	Estim Unweighted %	Weighted	95% confiden weighted LCI		Deff
	_	-	_		Doff
	_	-	LCI	UCI	I lott
3	%	07	07		Den
3		%	%	%	
3	72.25	(0.02	(0.25	71 (0	2.40
2	72.35	69.92	68.25	71.60	2.68
3	22.47	21.17	19.67	22.68	2.73
3	28.05	26.14	24.84	27.45	1.78
7	47.39	44.58	42.47	46.70	3.64
	44.88	42.14	40.18	44.10	3.19
,	13.46	12.56	11.36	13.76	2.65
	75.05	70.07	70.00	77.50	
					1.20
)	54.97	56.64	53.50	59.77	1.73
3	9.51	9.29	7.02	11.57	3.35
					2.56
					1.78
					2.47
5	7.72	6.87	6.09	7.64	1.90
7	4.97	4.33	3.67	4.99	2.15
5	10.66	9.92	8.91	10.94	2.35
5	9.48	8.49	7.51	9.48	2.53
2	7.46	6 79	5.87	7 70	2.68
-	7.40	0.77	3.07	7.70	2.00
?	61.61	64.07	62.53	65.60	2.07
?	20.13	18.90	17.67	20.13	1.99
?	10.54	10.25	9.28	11.22	2.06
?	7.73	6.78	6.04	7.52	1.75
5	78.37	75.33	71.73	78.93	2.21
,	16.02	18.12	14.81	21.42	2.33
,	3.41	4.02	2.17	5.88	2.81
5	2.20	2.53	1.46	3.60	1.46
1	67.17	67.85	64.20	71.51	2.41
1	23.30	22.63	19.69	25.57	1.94
1	6.85	5.85	4.20	7.50	1.95
1	2.68	3.67	2.26	5.08	2.22
5	74.22	74.61	70.23	78.99	3.10
		16.84		20.07	2.28
	5.21	5.69	3.55	7.83	2.61
	2.77	2.86	1.68	4.03	1.52
1	13.88	13.54	11.91	15.17	3.54
					2.46
					2.31
	1 5 5 6 7 7 8 8 5 5 5 5 5 6 6 2 2 2 2 2 2 2 2 1 1 1 1 1 1 1 1 1 1	5 13.46 75.25 75.25 75.25 75.27 8 9.51 5 67.52 5 17.54 5 7.22 7.72 6 4.97 5 10.66 6 9.48 2 7.46 2 61.61 2 20.13 2 10.54 2 7.73 5 78.37 5 16.02 5 3.41 5 2.20 7 67.17 7 23.30 7 6.85 7 2.68 6 74.22 6 17.80 6 5.21 6 2.77	5 13.46 12.56 6 75.25 73.37 9 54.97 56.64 8 9.51 9.29 5 67.52 69.91 5 17.54 16.40 5 7.22 6.82 6 7.22 6.87 9 4.97 4.33 5 10.66 9.92 9.48 8.49 2 7.46 6.79 2 61.61 64.07 2 20.13 18.90 2 10.54 10.25 2 7.73 6.78 5 78.37 75.33 5 16.02 18.12 5 3.41 4.02 5 2.20 2.53 7 67.85 3.67 6 74.22 74.61 6 74.22 74.61 6 5.21 5.69 2.77 2.86 4 13.88 13.54 4 15.40 15.38 </td <td>5 13.46 12.56 11.36 6 75.25 73.37 70.22 6 54.97 56.64 53.50 8 9.51 9.29 7.02 5 67.52 69.91 68.28 5 17.54 16.40 15.31 5 7.22 6.82 5.94 5 7.72 6.87 6.09 0 4.97 4.33 3.67 5 10.66 9.92 8.91 6 9.48 8.49 7.51 2 7.46 6.79 5.87 2 61.61 64.07 62.53 2 10.54 10.25 9.28 2 7.73 6.78 6.04 3 75.33 71.73 4 10.25 9.28 7.73 6.78 6.04 3 76.78 6.04 4 13.41 4.02 2.17 3 10.25 9.28 1.46 3 14.02 2.17</td> <td>5 13.46 12.56 11.36 13.76 6 75.25 73.37 70.22 76.52 6 54.97 56.64 53.50 59.77 8 9.51 9.29 7.02 11.57 5 67.52 69.91 68.28 71.54 5 17.54 16.40 15.31 17.50 5 7.22 6.82 5.94 7.70 6 7.72 6.87 6.09 7.64 9 4.97 4.33 3.67 4.99 9.48 8.49 7.51 9.48 2 7.46 6.79 5.87 7.70 2 61.61 64.07 62.53 65.60 2 20.13 18.90 17.67 20.13 2 10.54 10.25 9.28 11.22 2 7.73 6.78 6.04 7.52 5 78.37 75.33 71.73 78.93</td>	5 13.46 12.56 11.36 6 75.25 73.37 70.22 6 54.97 56.64 53.50 8 9.51 9.29 7.02 5 67.52 69.91 68.28 5 17.54 16.40 15.31 5 7.22 6.82 5.94 5 7.72 6.87 6.09 0 4.97 4.33 3.67 5 10.66 9.92 8.91 6 9.48 8.49 7.51 2 7.46 6.79 5.87 2 61.61 64.07 62.53 2 10.54 10.25 9.28 2 7.73 6.78 6.04 3 75.33 71.73 4 10.25 9.28 7.73 6.78 6.04 3 76.78 6.04 4 13.41 4.02 2.17 3 10.25 9.28 1.46 3 14.02 2.17	5 13.46 12.56 11.36 13.76 6 75.25 73.37 70.22 76.52 6 54.97 56.64 53.50 59.77 8 9.51 9.29 7.02 11.57 5 67.52 69.91 68.28 71.54 5 17.54 16.40 15.31 17.50 5 7.22 6.82 5.94 7.70 6 7.72 6.87 6.09 7.64 9 4.97 4.33 3.67 4.99 9.48 8.49 7.51 9.48 2 7.46 6.79 5.87 7.70 2 61.61 64.07 62.53 65.60 2 20.13 18.90 17.67 20.13 2 10.54 10.25 9.28 11.22 2 7.73 6.78 6.04 7.52 5 78.37 75.33 71.73 78.93

Table D.2 (continued)

Effect of weighting on survey estimates and confidence intervals

Oct 2005-Sep 2006

					001 2003-36	2000
		Cotin	95°	% confidence in	nterval of	
		ESUI	nate	weighted est	imate	
Variable	Bases	Unweighted	Weighted	LCI	UCI	Deff
		£	£	£	£	
Total income from crime	7740	2959.56	2408.27	1928.27	2888.28	0.97
Shoplifting proceeds in last month	1198	259.21	206.77	130.44	283.11	0.90

Appendix E Severity of Dependence Scale (SDS) and Fast Alcohol Screening Test (FAST)

Severity of Dependence Scale (SDS)

The questions that make up the SDS scale along with the scores for each answer were:

- In the last 12 months how often did you think your use of <drug> was out of control? Never (0), Sometimes (1), Often (2), Always (3)
- In the last 12 months how often did the prospect of missing a <drug>hit make you anxious or very worried?
 - Never (0), Sometimes (1), Often (2), Always (3)
- In the last 12 months how often did you worry about your <drug>use? Never (0), Sometimes (1), Often (2), Always (3)
- In the last 12 months how often did you wish you could stop using <drug>? Never (0), Sometimes (1), Often (2), Always (3)
- How easy would you find it to stop or go without <drug>?
 Very easy (0), Quite easy (1), Quite difficult (2), Very difficult (3)

Scores for all five questions are added together and a total score of 4 or more indicates potential dependence.

For a full description of the Severity of Dependence Scale (SDS – Gossop, M., Griffiths, P., Powis, B. & Strang, J. 1992) see http://www.drugnet.bizland.com/assessment/screening.htm.

For the Arrestee Survey the question about being able to give up was changed from:

"How difficult would you find it to stop or go without <drug>?": "Not at all, A little, Quite difficult, Impossible" to

"How easy would you find it to stop or go without <drug>?": "Very easy, Quite easy, Quite difficult, Very difficult"

Thus findings are not compatible with other studies using the SDS.

Fast Alcohol Screening Test (FAST)

The questions that make up the FAST scale along with the scores for each answer were:

- How often do you have 8 (6 for women) or more alcoholic drinks on one occasion?
 Never (0), Less than monthly (1), Monthly (2), Weekly (3), Daily or almost daily (4)
- How often during the last 12 months have you been unable to remember what happened the night before because you had been drinking?
 - Never (0), Less than monthly (1), Monthly (2), Weekly (3), Daily or almost daily (4)
- How often during the **last 12 months** have you failed to do what was normally expected of you because of drinking?
 - Never (0), Less than monthly (1), Monthly (2), Weekly (3), Daily or almost daily (4)
- In the **last 12 months**, has a relative or a friend, or a doctor or other health worker been concerned about your drinking or suggested you cut down?
 - No (0), Yes on one occasion (1), Yes on more than one occasion (2)

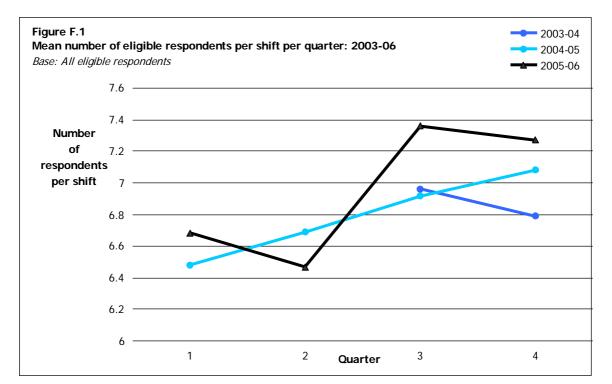
Scores for all four questions are added together and a total score of 3 or more indicates harmful or hazardous drinking.

For a full description of the FAST see: Health Development Agency and University of Wales College of Medicine, *Manual for the Fast Alcohol Screening Test (FAST)*. HDA, 2002 www.hda-online.org.uk/documents/manual_fastalcohol.pdf

Appendix F Arrestee flow

The reported changes in the behaviour and characteristics of respondents may be due to actual changes among particular kinds of persons, or it may be due to a change in the type of person who is likely to be arrested. There is no satisfactory way of knowing which effect is being observed. However, it is possible to get an indication of which one is the predominant effect by looking at trends in the mean number of eligible respondents per shift over time in the sampled custody suites.

The mean number of eligible respondents per shift was similar in 2005–06, 2004–05 and 2003–04, even if some variation can be seen between the different quarters within each year (note that only the second half of Year 1 is included in the analysis, due to different start and end times of the shifts in the first six months of fieldwork). Therefore, it may be concluded that the reported changes are more likely to be the result of real changes in behaviour rather than a higher or lower likelihood of particular groups of people being arrested.



(Figure F.1, Tables F.1- F.3)

Table F.1

Mean number of eligible respondents per shift per quarter

Mean number of eligible Base: All eligible respondents Mar 2003-Sep 2004

respondents per shift Y1								
		Quar	Quarter 3			Quarter 4	4	
Shift time 0-6	0-6	6-12	12-18	18-24	0-6	6-12	12-18 18-24	18-24
Mean number of respondents	7.8	7.0	6.8	6.3	7.7	6.7	6.4	6.3
Total number of shifts	81	299	263	583	95	336	295	641

Table F.2

Mean number of eligible respondents per shift per quarter

Base: All eligible respondents

Mean number of eligible

Total number of shifts Mean number of respondents respondents per shift Y2 Shift time 6-12 348 7.0 Quarter 1 12-18 6.3 298 18-24 581 6.1 6-12 6.8 320 Quarter 2 12-18 289 6.8 18-24 532 6.5 6-12 383 7.3 Quarter 3 12-18 349 6.9 18-24 639 6.6 6-12 487 7.7 Quarter 4 12-18 438 6.8 18-24 779 6.8

Oct 2004–Sep 2005

Table F.3

Mean number of eligible respondents per shift per quarter

Base: All eligible respondents

Total number of shifts 368 323 624 351 310 586 390	Mean number of respondents 7.4 6.5 6.1 6.5 6.8 6.1 7.6	Shift time 6-12 12-18 18-24 6-12 12-18 18-24 6-12	Quarter 1 Quarter 2	respondents Y3	Mean number of eligible	Base: All eligible respondents
			•••••			
385	7.7	12-18	Quarter 3			
534	6.7	18-24				
432	7.4	6-12				
422	7.8	12-18	Quarter 4			Oct 2005-Sep 200
595	6.6	18-24				Sep 2006

Appendix G Previous participation in the Arrestee Survey

Only a very small proportion of all approached respondents had previously been interviewed in the Arrestee Survey within the same survey year (1% in 2003–04, 1% in 2004–05 and 2% in 2005–06). Respondents who had already participated in the survey in a given year were not interviewed again. Respondents who were frequently arrested had a greater chance of being sampled than other respondents. In order for the sample to be representative of arrest events rather than arrestees, respondents should therefore, strictly speaking, have been interviewed multiple times if sampled more than once. As discussed in Chapter 5, respondents who take heroin or crack at least once a week are more likely to have committed acquisitive crimes, such as shoplifting and theft, in comparison to respondents who do not take heroin or crack at least once a week. Respondents who take HC at least once a week were also more likely than respondents who did not take HC on a weekly basis to have been arrested in the last 12 months (see Chapter 4). Respondents who were arrested for acquisitive crimes would, therefore, be expected to be more likely to previously have participated in the survey for a given year, compared to respondents arrested for other offence types.

Looking at whether respondents had been interviewed previously by reason for arrest, it can be seen that in 2005–06 those who were arrested for shoplifting (3%), burglary (3%) and theft from a vehicle (4%) were marginally more likely to previously have participated in the survey in a given year compared to those who were arrested for other offence types (for which 1% to 2% had previously participated in the survey). A similar pattern was seen in 2004–05. Therefore, as expected, those who had been arrested more than once in the last 12 months tended to be more likely to have previously participated in the survey. Yet the difference is marginal, which suggests that the sample is unlikely to be substantially biased against those with frequent arrest histories.

(Tables G.1 - G.3)

6	J	ы		
		n	-	

Whether previously interviewed in survey year by reason for arrests

Base: All approached respondents

	Reason fo	r arrest										
Whether previously	Assault	Shop- lifting	Criminal damage	Drink- driving	Burglary	Drugs possess.	Other theft	Theft of vehicle	Other violent offence	•	Sex offence	Robbery
interviewed	%	%	%	%	%	%	%	%	%	%	%	%
Previously interviewed	1	2	2	0	3	1	1	1	1	1	0	1
Bases Unweighted	5249	4476	2426	1769	2365	1408	1607	1434	2031	1973	662	779

Table G.2

Whether previously interviewed in survey year by reason for arrests

Base: All approached respondents

	Reason for	r arrest										
Whether previously	Assault	Shop- lifting	Criminal damage	Drink- driving	Burglary	Drugs possess.	Other theft	Theft of vehicle	Other violent offence	Drunk/di sorderly	Sex offence	Robbery
interviewed	%	%	%	%	%	%	%	%	%	%	%	%
Previously interviewed	1	2	1	0	3	1	1	2	1	1	1	2
Bases Unweighted	8550	4433	2824	1771	2804	1511	1634	1410	1748	1788	1057	905

Table G.3

Whether previously interviewed in survey year by reason for arrests

Base: All approached respondents

	Reason fo	r arrest										
Whether previously	Assault	Shop- lifting	Criminal damage	Drink- driving	Burglary	Drugs possess.	Other theft	Theft of vehicle	Other violent offence	Drunk/di sorderly	Sex offence	Robbery
interviewed	%	%	%	%	%	%	%	%	%	%	%	%
Previously interviewed	1	3	2	1	3	2	2	2	1	1	1	2
Bases												
Unweighted	9933	3979	2904	1686	2871	1562	1360	1308	1628	1687	1055	972

Erratum

Table 3.14 page 63 – the figures for the total % of males with a FAST score of 3+ are: 2003-04-58%; 2004-05-59%; and, 05-06-59%. This has been amended from an earlier version of this publication which showed the figures as: 2003-04-57%; 2004-05-55%; and, 05-06-57%.