

An Altered State? Emergent Changes to Illicit Drug Markets and Distribution Networks in Scotland

Introduction

Illicit drugs are big business and an even bigger public health problem (Stevens, 2011), but research on the ‘realities’ of drug markets is surprisingly thin (Antonopoulos & Papanicolaou, 2010, p. 3). This is especially true in Scotland, which despite its unique drug problem profile (Casey et al. 2009), has been either neglected by drugs scholars or subsumed under studies of UK-wide drugs markets (e.g., Matrix Knowledge Group, 2007). To address this gap, the current study draws upon interviews with 42 illicit drug suppliers who successfully operated at retail, wholesale or middle market, and importation levels of the market in Scotland. Our results provide a holistic view of the characteristics and dynamics of Scotland’s drug market, whilst alerting us that significant changes to this market are already underway. We begin by analysing the extant literature on Scottish drug markets within a UK context.

Literature Review

As noted by Coomber (2015), the UK drug market is highly differentiated with no unified market but rather a ‘series of loosely interlinked local and regional markets’ (Pearson & Hobbs, 2001, p. vii). Drug markets typically are compartmentalized into international (importation), national/regional (wholesale or middle market), and local (retail) levels (Lupton et al., 2002; Matrix Knowledge Group, 2007). Local retail markets are further differentiated, however, as open, semi-open (e.g., pub and club-based) and closed, trust-based, markets (May & Hough, 2004).

The majority of drugs are sold or distributed in the UK in community settings (Hales & Hobbs, 2010), by non-gang affiliated dealers working within friendship networks (Parker, 2000; Taylor & Potter, 2013), or by individual entrepreneurs ‘going solo’ (Windle & Briggs,

2015a). Commercially motivated ‘real dealers’ (Stevenson, 2008), the focus of the current study, however, are more likely to be organised into ‘associational criminal structures’ (Von Lampe, 2016), sustained partially via kinship and ethnicity (Pearson & Hobbs, 2001), or drugs gangs for whom illicit enterprise is integral to collective identity (Densley, 2014).

The Scottish Parliament (2017) has highlighted that problem drug use is disproportionately high in Scotland compared to England and Wales, and that the 706 drug-related deaths recorded in 2015 was the highest on record. Drug harms generate an approximate cost of around £3.5 billion annually to the Scottish economy (Casey et al. 2009). Against this backdrop, the Scottish National Party (SNP) pledged to make Scotland ‘drug free’ by 2019 (Scottish Government 2008). To achieve this objective, the Scottish Government’s (2015) Serious Organised Crime Strategy (SOCS) is focused on dismantling drug supply.

Few studies of the illegal drugs market in Scotland currently exist. May and Hough (2004) outline two market forms in Scotland as being dominant: a top down pyramid model and a highly-fragmented model. Adopting a top down perspective, Preble and Casey (1969) outline a three-tier model, with drugs being imported into the country before being passed to wholesalers and then retail-level distributors. Coope and Bland (2004) outline a similar model as being applicable to the contemporary Scottish context, taking into account globalisation processes that influence the size and scale of the illegal drugs market. In the context of drug markets, globalisation can be defined as the widening of markets from monopolistic to competitive structures; the opening up of borders that subsequently leads to an influx of high- and low- level traffickers; and reduced transport, communication, and information costs that, in turn, increase international trade and help conceal drug transactions (Storti & De Grauwe, 2009b).

McPhee et al. (2009) note that while a hierarchical model may be the most applicable to the Scottish drugs market, there is a distinct lack of empirical evidence in this area.

McPhee's (2012, p. 245) later work on drug distribution indeed found very 'few participants, who would describe themselves as dealers, although it was clear that several had engaged in small-scale commercial enterprises'. In this case, social sellers had started to become more entrepreneurial, a finding consistent with studies outside of Scotland that find 'minimally commercial supply' (Coomber & Moyle, 2014) extending out of informal 'social supply,' which itself exists in the grey area between commercial drug dealing and possession for personal use (Aldridge et al., 2011; Coomber et al. 2015), and is especially important for young people's access to cannabis (Coomber & Turnbull, 2007).

A recent study exploring the dynamics of heroin markets in three Scottish case study areas (Cyster & Rowe, 2006), moreover, found that heroin was so widely available and geographically widespread that conventional wisdom about illicit drugs markets needed revisiting. To this end, McLean, Densley and Deuchar (2018a) have shed light on the hidden role of street gangs in drug distribution in Scotland. Following similar trends observed in London (e.g., Densley, 2014; Harding, 2014), McLean et al. found that gangs have evolved to not necessarily *control* drug markets, but to participate in them and benefit from territorial control of a marketplace (see also, McLean, 2018; McLean et al., 2018b). The authors likewise note that while the term 'gang' is often applied in a stereotypical manner by those in the political establishment and media as representing a cohesive criminal group (Deuchar, 2009, 2016), in reality there are significant variations between gangs in regard to hierarchy, division of labour, cohesion, and purpose (Densley, 2012). Indeed, it is not uncommon for members to even be part of several 'gangs' at once. Thus, how gangs present themselves may range from somewhat informal collectives to highly solidified groups (McLean, 2018). However, while the motivation to supply drugs is often individualized, there has been a

growing tendency in recent years for dealers, and in particular retail dealers, to come together with likeminded individuals to reduce risk and victimization, and pool resources, in what is a highly competitive, and inherently dangerous, market (McLean et al., 2018a).

In the past decade, moreover, media sources indicate Scottish police (working with local, national, and international law enforcement partners) have had considerable success in surveillance and disruption of Serious and Organised Crime Groups (SOCG) involved in large scale drug importation. In 2005, for example, three members of a Glasgow drugs gang were jailed for life (The Times, 2005), and in 2010, the ringleader of a national cocaine and heroin operation based in Edinburgh was jailed for 10 years (BBC, 2010). In 2013, eight members of a Liverpool-based drugs gang, including seven from Scotland, were jailed for supplying tens of millions of pounds worth of cocaine and heroin to Glasgow (BBC, 2010). And in 2018, members of an SOCG described at trial as ‘the most sophisticated encountered by Police Scotland’ were jailed for 87 years for violence, drugs, and firearms offences. Described as ‘wholesalers to other organised crime groups’, the SOCG undertook the ‘importation of vast quantities of cocaine’ from South America and were ‘at the top of the chain in terms of drugs transactions in Scotland and the UK as a whole’ operating across central Scotland and the north of England (O’Hare, 2018). Such law enforcement activity is important because it both highlights, and simultaneously sets the stage for, the market changes described below.

The Current Study

Modifications to drugs markets often remain unexplored by scholars long after becoming adopted practice because markets are considerably under-researched. Drug market research is often focused on structural elements, e.g., ‘middle markets’ (Pearson & Hobbs, 2001), retail distribution (Desroches, 2007), or on a single drug type (Briggs, 2010), thus

broad changes at all market levels, or examples of intersectionality, get missed. For example, whilst it is true the internet has disrupted traditional drug markets, online sales remain ‘anchored’ in offline drug markets (Aldridge & Décary-Héту, 2016) and face-to-face transactions still dictate the vast majority of retail-level transactions, especially with regard to heroin and crack cocaine, which have a distinct consumer profile (Coomber, 2015). Thus, acquiring an aggregate view of UK, or Scottish, drug markets can be complicated, often only surfacing via general prevalence survey or government report every ten years (e.g., Bennett & Holloway, 2007).

In contrast, the present study has captured voices of active drug offenders in community contexts who articulate how the existing hierarchical model of Scottish drug markets and distribution now appears to be in a state of flux. Several reasons emerge from our research as to why this is happening: (a) risk mitigation by importers and distributors, related in part to successful police intervention; and (b) market diversification of both product and demand, partially tied to globalisation. It is believed these changes have resulted in modifications to distribution networks, which may continue to evolve over the coming years.

In this paper, we seek to provide a holistic view of the dynamics and characteristics of Scotland’s drug markets by focusing in depth on the elements of importation and distribution. Prior to doing this, we provide the methodology for our study, illustrating how we accessed participants. Drawing upon salient extracts from semi-structured interviews, we then examine the structure of the Scottish drug market and how it is in flux. We focus on the market rather than different ‘types’ of drug dealers, because drug distribution is complex and considerable ‘overlap’ exists between ‘different patterns of supply’ (Potter, 2009, p. 52). Finally, we discuss the impact of these changes for those involved in the drug markets at each level, finishing with a review of implications for policy and policing.

Method

Data were gathered between 2012 and 2016 as part of a broader qualitative study of crime in Glasgow, Scotland (see AUTHOR 2017). Participant criteria was defined as: (a) previous experience of gang or group offending; (b) previous engagement in practices identified by Police Scotland as serious and organised crime, that is, the provision of illegal goods and services for profit (Scottish Government 2015); and (c) aged 16 years and older. We acknowledge that by focusing on participants embedded in gangs and organised crime, the voices of small-scale drug dealers and social sellers who are not gang members are excluded, and this is a limitation. Still, we present data from a unique ‘hard-to-reach’ sample population (Bhopal & Deuchar, 2016), that was accessed via a combined purposive and snowball sample that started with frontline practitioners in outreach projects acting as gatekeepers (an approach common in studies of gangs and criminal networks, e.g., Densley, 2013). In total, face-to-face, semi-structured interviews were conducted with 12 ex-offenders and 32 active offenders. 34 were male and 8 were female. These 42 participants all were aged between 16 and 35 years of age. All respondents were raised in Glasgow ‘schemes’, characterised by high levels of deprivation (see Miller, 2015).

The interviews encouraged participants to reflect upon criminal trajectories arising from childhood and it was found that all 42 respondents had been involved in retail-level drug supply at some time. Despite variation in the quantity/bulk that participants purchased and distributed, 26 males and three females had engaged in wholesale practices. Seven participants had gone on to be involved in the importation and trafficking of drugs into the country. Because lower level retailers may not be as well informed about wholesaling and trafficking, we have prioritized voices from within each market level. In terms of product, all study participants had sold cannabis at some time. Heroin, cocaine, and to a lesser extent

ecstasy, were the most common Class A drugs sold,¹ with over 80 percent of the sample doing so. Cannabis was the most popular Class B drug, but amphetamines, barbiturates, and other drugs were also discussed.

Open-ended, in-depth interviews allowed participants to convey, unrestricted, their own subjective understanding of drug markets. Interviews typically lasted one hour, with up to five interview sessions scheduled per participant. Most interviews were conducted one-to-one, although two group interviews (n=4 and 5) were held. Data were triangulated via discussion with other interviewees and gatekeepers. On occasion, interviewees voluntarily provided corroborating evidence (i.e., media articles, criminal records, etc.). Interviews were digitally transcribed and analysed thematically. Ethical approval was granted by the researcher's home institution.

Findings

Market Structure and Risk Mitigation

The UK is predominantly an end-user of drugs, except for cannabis which is also locally produced. Consistent with UNODC (2016) data, respondents said that heroin came in overland from the opium fields of Afghanistan, through Turkey and the Balkans, or in some cases was transhipped via boat or air from Pakistan. Cocaine came from South America via Jamaica, North Africa, and Spain, and ecstasy and other synthetics arrived from The Netherlands (SOCA, 2009). International importation into Scotland was uncommon, respondents said, because most points of entry were from England or Northern Ireland. Indeed, respondents argued that in Scotland wholesaling was preferable to importing, and in some cases more profitable, owing to the transportation and storage risks/costs and the logistical challenges associated with sourcing drugs. Where trafficking did occur, however, it

¹ The Misuse of Drugs Act 1971, with amendments, is the main law regulating drug use in the UK. It divides controlled substances into three classes: A, B and C. Class A is the category which attracts the most severe penalties for possession, supply and trafficking.

followed a hierarchical supply model (Pearson & Hobbs, 2001). For example, during one of the interviews, Sean explained:

Not everyone can import stuff.... They (the importers) sell large to a few guys who [then] move it on to people who sell it in smaller bulks ... not everyone would buy the same amount. . . . Depends.

From Dean's perspective, individuals in high level importing often retained particular privileged positions or roles in society that could be leveraged to their advantage, including connections to high level criminals who could set up 'underworld' connections on their behalf:

[Those involved] in high end drug distribution basically control the market.... [lower dealers] work for them, [but] no[t] always directly. Most people don't even probably know they get [drugs] off them.... Being involved in [OC] means they can turn to corrupt cops.

When inquiring as to those who imported drugs internationally, Sean elaborated:

I've only met [the individuals who] bring the stuff in, but they won't be the actual guys arranging the smuggling [from outside the UK]. They are like representatives [in the UK], obviously working for [traffickers outside the UK]. Probably [extended] family or something.

Although Sean made reference to networks based upon familial or ethnic ties, this was in regards to those who have direct handling of the drugs being imported. Sean spoke from the perspective of a ‘runner’ who is in direct contact with the designee or representative(s) of the regional wholesaler(s); who Pearson and Hobbs’ (2001) refer to as the ‘face’.

Interviewee William explained, traffickers have in recent years changed their airborne smuggling tactics to minimise risk and reduce opportunities for police and customs officials to intervene. He compared past methods of smuggling, whereby organised criminals would import directly, with more contemporary methods of tempting outsiders to act as mules and import drugs on behalf of the organisation. Powder cocaine was transported and smuggled into Scotland through various means, for example, including by air:

[It] use[d] to be popular for someone to travel to like Columbia, [or] the Caribbean countries instead, and bring it over on flights. That isn't really done now but....thing is, just paying someone to do it.... Like daft wee boys, offer them a holiday, a week away, and set them up to meet [OCG representative] while there....just mules basically. Fuck it, if they get caught it's them that gets [apprehended]... changes up the custom profiling, know. –William

With only two international airports in Scotland, such use of drug mules was highly risky and restricted to small amounts of high quality drugs at any one time, usually from Spain or The Netherlands. To mitigate the risks, international importation was more routinely undertaken via sea routes. The Scottish west coast has multiple sea lochs (inlets) making (often undetected) importation comparatively easy. Moreover, SOCGs have sophisticated networks of contacts remunerated for ease of importation. For instance, William argued it was not uncommon for only one, or a select few, crew on maritime vessels, shipping containers, and

pleasure boats to be aware of drugs being transported on-board. William said it was not money, but rather fear of reprisals for missing cargo or seizures that kept people honest:

Smuggle that shit in from everywhere... Say gear (cocaine), right, is coming in on a particular boat. The guys getting their hands dirty aren't the ones arranging it all, no.... takes a bit more brains than that.... If it's coming in on a ship, there will be say, inside guys, working the dock, emptying containers, that know, HGV drivers... they get a cut (paid) for just moving it along.... Most of the workers don't know what's going on.... Might not be the best [wage for those transporting] but you don't bump these guys arranging it.... [or] they will get you fuckin' done in, if you get caught dipping goods.

While William indicated that pay to those maritime workers undertaking transportation was 'not the best,' this was in relation to what the wholesalers were making, or what maritime workers could themselves earn if they became independent suppliers to wholesalers in their own right. Further, William and others argued that it was not uncommon for those involved in logistical supply to do so to pay off outstanding drug and gambling debts of their own.

As international importation carries significant risks, these were best mitigated by importation into England followed by ground transportation to Scotland. Participants involved in high level wholesaling discussed how they had a steady supply from known sources and that UK-based representatives were easier to contact and work with than foreign suppliers. As William said: '*Once off, it might be transported right to [a] yard, whatever, or sometimes, depending on bulk, someone will collect directly*'. This was where the first exchange of money in country took place:

We got it right from the [source in Scotland], well so we were told... don't get much bigger than I've heard of.... Moving [heroin] brought [good income]....[between] £10,000-£20,000 for each bulk shift[ed].... Would [sell] to people to [supply thereafter].... [if] we earned £10,000 [though] [It] get[s] [divided] up [with group members]. –Conner

Conner implied that whilst he was informed of who his supplier was, he was sceptical because importers rarely if at all handled drugs directly, but rather delegated the task to their associates.

Importation into England was generally secured into one of four centres or cities operating as national supply 'hubs', i.e., London, Birmingham, Liverpool, and Manchester (NCA, 2016). From here 'mid-level' distributors bulk-buy drugs from importers before transportation to smaller regional hubs like Glasgow, where drugs are sold to local wholesalers and established sellers, who, in turn, distribute to lower-level retail sellers (Matrix Knowledge Group, 2007), and 'user dealers' (Moyle & Coomber, 2015).

Most drugs therefore enter Scotland primarily via northern England. Many participants talked about making 'runs', 'collections', or 'pick-ups' from 'south of the border', with Liverpool and Manchester most frequently cited as collection points. It was not uncommon for middle-level dealers to mitigate risk by employing (both directly and indirectly) young people loosely embedded in criminal networks to travel to make 'pick-ups' for them and drop money in return:

[Individual X] always meets me once there.... No, they don't meet us half way or nothing. I have to drive right to [Merseyside area] [we don't always rendezvous]

at same place.... I hand over the bag [of money], no[t] to him, in his hands... put it somewhere... mostly [in his] car trunk... [or] leave it for him under the table if we are at [restaurant X] ... [and] he leaves with it.... [once back in Glasgow] I make a drop off to [an associate], and they hold onto it. –Dee

Traffickers operating on Scotland's East Coast, notably the Lothians and the Scottish capital Edinburgh, also reported alliances with suppliers in the English Midlands, many of whom were labelled 'Yardies' by our white respondents because they conformed to stereotypes of black criminality (for a discussion, see Karim, 1999). A number of participants described making large collections from Birmingham:

Quite a few boys from around [Scotland's East Coast] had strong alliances with [censored group name] from down Birmingham way... [they] put me in touch, know, hooked me up.... Most [of] the pickups used to come from around Liverpool, know, but for a few years there, I'm telling you, [significant] amounts of like pure (potent drug quality) was coming in from there (Birmingham).... especially Skag (heroin)... from Pakistan and [Afghanistan] know Was a heavy outfit going, [that] ran a lot of the shit coming into Scotland for a while... dried up a good bit... few guys making strong connections back with the Liverpool mobs again. –Donnie

It was after being 'hooked up' via connections on the East Coast that Donnie, who was in fact based on Scotland's West Coast, started dealing directly with those from in and around Birmingham. Owing to globalisation and immigration patterns, Birmingham had emerged as a source of a better and more consistent supply of heroin for Scottish customers. Storti and De Grauwe (2009b) have drawn attention to the way in which globalisation affects

the retail market by reducing the import cost of drugs while also increasing the availability of drug dealers. Accordingly, globalisation was a prominent factor in increasing the degree of competition in drug markets, thus heightening the diversification of drug distribution patterns (Storti & De Grauwe, 2009a). However, the Birmingham pipeline eventually ‘dried up’, Donnie said, forcing West Coast importers to go back to more durable, traditional alliances with importers in Liverpool and Manchester. Another example of the market was always adapting to changes in quality, supply and price.

Further adaptive strategies saw the relatively recent emergence of Northern Ireland as a UK regional hub for drug trafficking. Post the 1998 Good Friday Agreement, the province witnessed a significant rise in drug markets and the consequent emergence of trafficking networks (McElrath, 2004; McSweeney et al., 2008; Coomber, 2009). Owing to geographical proximity (coastal Ulster and Scotland being only 12 miles apart) and shared history, the West Coast of Scotland was also supplied from Northern Ireland:

[My family member] was heavy moving (supplying significant amounts of drugs)

He was working wi’ cunts from all over Glasgow.... [even] Ireland, going over to

[Irish city]. –Alpha

I: How often do you think you go over [to Ireland] then?

Bee: Catch the Ferry around couple of times a month to meet [individual Z] Aye, a few at least, I would have to say.

The participants felt Scotland’s West Coast drug traffickers had a strategic advantage over those in the East due to geo-proximity and social or family ties to the distribution ‘hubs’ in Liverpool, Manchester, and Belfast. This afforded traffickers a consistent supply, first-hand, to freshly imported drugs. This viewpoint was supported by Police Scotland, who have

identified elevated levels of drug supply and disproportionate numbers of drug dealers situated in the West of Scotland (Scottish Government, 2015). Participants in the West spoke of regularly wholesaling and distributing drugs to contacts in central and east Scotland and, to a lesser degree, Northern Scotland (e.g., Aberdeen and the Western Isles). Some media reports of successful police operations to target traffickers cited in the literature review also support this West Coast network theory. It should therefore be considered possible that two wholly separate methods of distribution now operate with West Coast distribution differing slightly from East Coast arrangements.

The supply of imported cannabis operated on similar principles to Class A drug supply. A few very well-organised criminal syndicates, involving a mixture of career criminals and those in privileged positions, arranged for the bulk importation of cannabis, often in resin form, into England from Morocco, before further distribution into Scotland. As imported cannabis entered mainland Britain much further south than Liverpool or Manchester it was not uncommon for midway collection points to be arranged, as noted by Delph:

It gets brought up from London.... That's where my guy says it comes from when we pick up.... Asked him last time I seen him actually, just at [particular service point midway].

However, Delph was the exception not the rule with his bulk buying of cannabis from 'South of the Border'. Other interviewees sourced cannabis in smaller quantities and often in combination with other drugs:

Wouldn't ever go to get kilos and kilos of [cannabis], just no' worth the risk, too bulky... when I'm picking up some [ecstasy], more speed.....or [individual Y] always flings in a bit when I'm buying [steroids]. –Boab

For many interviewees, their drug dealing careers started with the 'social supply' of cannabis they purchased from others, but over time they realized they could make more money by cultivating the drug themselves. As Melvin explained:

You work with your pals. . . . [you] can trust them to do business wi'. You can't just [initially] start off like big time gangsters (laughs). Really start by selling weed, aye. Well we did, aye. Me and [censored name]. Sold weed to wee guys first. Done a few grows, you know, a few pots in the cupboard..... not really that hi-tech. .. [as the gang progresses in experience] you'd chip in a couple a G[rand] to buy big.

In-house cultivation, often referred to as 'import substitution' (Decorte et al., 2011), had additional benefits, said respondents, because it gave them control over their product and limited the transactional risks involved in buying cannabis (e.g., Belackova et al., 2015). William argued domestic 'homemade factories' were commonplace, with even 'law-abiding' citizens getting in on the action:

Cannabis is just grown in factories [in Scotland], I would think... Fuck, everyone going has a grow, even if it's just their own [for personal use]. –William

However, import substitution was not without risks, and some respondents felt that, in the end, large-scale cannabis supply was a fruitless endeavour:

A few boys doing grows.... Couple selling solid... [most people] don't.... it's not growing it that's hard, but you have to stockpile it. Can never fuckin' sell it all... no[t] for what it's worth. –William

Sure, I got asked to get involved [in a cannabis grow] with [gang A]. I said 'no chance, way too dodgy'. They had been doing well. Like getting' rented flats, more from [associate rough landlord], none of that RightMove shite, you kiddin'.... Put up a couple of partition walls, false walls and do a few grows.... In every room... [except] living room and kitchen. Windows [and curtains] in them rooms would be open.... So cunts aren't gettin' pure suspicious, being nosey, aye... rent [the homes] for a bit, [then] move....They never had the houses in their names, but [when they approached me] this time they were taking out a factory, I was like fuck off.... Ended up some cunt took their grow and set fire to the place to get them caught.' –Greg

Participants continuously stated that the cannabis market was now 'saturated', with competition benefitting consumers but eating away at margins for suppliers. The time and specialist skills required to successfully differentiate one's brand in the marketplace made cannabis growing less attractive for many. Silverstone and Savage (2010) find that London cannabis markets have been monopolised by Vietnamese growers. The Vietnamese community in Scotland is much smaller but recent figures from the National Crime Agency (NCA) and the UK National Referral Mechanism (NRM), which monitors victims of modern slavery, reported that one third of all potential victims identified in Scotland were Vietnamese; suggesting this community is growing. Reflecting Storti and De Grauwe's (2009a, b) insights that suggest that the process of globalisation has increased the availability

of drug dealers while also reducing the import cost of drugs, should such new arrivals from Vietnam continue to operate in Scottish drug distribution networks, it might be that the UK drugs market ultimately becomes more uniform.

As discussed, cannabis was often the entry point for drug dealing careers. Reasons for dealing cannabis ranged considerably, from the fact that cannabis was easy to buy and sell, to the notion that it was a social drug that carried little risk of prosecution. A common theme that emerged for participants, however, was quickly progressing onto selling ‘harder drugs’ such as cocaine, owing to ready access to established drug markets (also see Windle & Briggs, 2015). Often the combination of perceiving themselves as having a somewhat innate criminal identity and having easy access to established supply networks via kinship, criminal-familial, or close friends, resulted in a heightened chance of engaging in drug supply. While cannabis was ‘safer’ to move on, the market was viewed as being saturated and cannabis itself carried little profit. This combination motivated participants to venture into other drug markets deemed more financially lucrative. Yet, part of the challenge was keeping up with new trends in drug supply and consumer demand and then responding to this diversifying marketplace, all the while looking to avoid, or stand out from, the competition.

Market Diversification and Modifications to Distribution Networks

Our study has thus far articulated how the existing hierarchical model of Scottish drug markets is in a state of flux, owing to increasingly adaptive risk mitigation by importers and distributors (in the context of increased law enforcement scrutiny). However, we also found that these adaptations have resulted in market diversification of both product and demand, and modifications to distribution networks, which we now move on discuss.

The manner in which drugs are imported into Scotland inevitably affects local level distribution networks. The West Coast market is highly lucrative and, as a result, illegal

entrepreneurial structures have emerged from underlying social relationships, namely friendship networks within the drug world, but also kinship ties. This is consistent with the foundational work of Adler (1985) and others. At the centre of the West Coast market sits Glasgow. As we have argued elsewhere (AUTHOR), Glasgow's drugs market is too vast, too complex, and too diverse for any one group or individual to try to monopolise it. Instead, gangs compete on cost, quality, and delivery of service in a competitive 'free market' drugs economy. Some groups do well, while others fail. Ultimately, however, the market is large enough, diverse enough, and lucrative enough for all who wish to enter to do so.

Looking at the local level of the city of Glasgow, the ready access to importers means that a single 'scheme' (or housing estate), can house more than one organised crime group at the wholesale level and several street gangs at the retail level (McLean et al., 2018a, b). To meet demand, therefore, retailers will access supply from several wholesaling sources. This means that whilst there may be multiple drugs gangs in a single housing scheme, they can operate independently from one another and in relative peace. Participant Alpha noted:

When you're young you just fight cunts.... like wee guy shit.... I'm no[t] going to start scrappin' wi' guys from [another scheme] Just [be]cause they are from another scheme. That's daft.

Another interviewee, Mary, likewise talked about supplying drugs to Glasgow through her siblings who lived there. Mary's risk strategy was to stay outside the city limits, thus avoiding unwanted police attention. Her description of working remotely through others, even exploiting vulnerable young people and adults to 'stash gear in their house and sell from there' or 'puts (sic) a set up in their house', was reminiscent of the 'county lines' and 'cuckooing' (whereby a vulnerable adult's home is taken over as an operational base)

phenomena found in England (NCA, 2015), and now on the radar of Police Scotland (2017).

As Mary said:

The boys still stay up there. Everyone has phones now don't they....[It's] good down here. Quiet, so no' much people giving any hassle. Hardly any police as well. ... loads a' wee villages round about as well...well, basically [Brother C] or [Brother A] usually go scope the place first and if it is cool then they start dealing. ... you get a feel for the place.

The 'county lines' supply model (NCA, 2015; Storrod & Densley, 2017; Windle & Briggs, 2015b) challenges the traditional 'national' wholesale and 'local' street dealing dichotomy because it involves dealers in hub cities 'commuting' to provincial markets to both wholesale and retail their product (Coomber & Moyle, 2017). Andell and Pitts (2017, p.11) note such distribution methods have arisen due to saturation of big city markets; dangerous levels of competition in big cities; dealers being too well known to police; and gangs anticipating less resistance in provincial areas.

Distribution of drugs must also take into account attempts to boost profits from retailing the drug. Profits are boosted by wholesalers mixing drugs with a cutting agent to increase volume. This process must be factored into the distribution chain. It also required the importation of sufficient volumes of cutting agents and the actual physical practice of cutting or mixing drugs prior to the drugs hitting the street. Participants articulated this process, noting the face(s) liaised directly with wholesale distributors, who collected from various sites. At such sites, drugs were often mixed with a cutting agent, as Alpha explained:

When it (imported cocaine) arrives at the store house [in] the flats (tower blocks), it gets cut... We use Benzocaine at whatever ratio you are setting, given the weight.

In 2016, Police Scotland (2016) raided a flat in the East end of Glasgow found drugs worth £1.3M including 30 kilos of Benzocaine.

Once 'cut', drugs were then supplied either to groups at a similar level of organisation, or more usually to lower-end dealers. Retail dealers were in some cases upcoming criminal groups or individual players occasionally affiliated with other similar level suppliers. Arguably, the growing number of individuals involved in drugs markets meant that people were more inclined to band together to minimize risk and improve proficiency by strength in numbers and pulling together resources. Money made from bulk supply was then passed back up through the supply chain, often being deposited by criminal groups (like Conner's) to the 'faces'.

A more contemporary modification to distribution networks appearing now in Scotland is 'digital dealing', said respondents. Drug dealing via online apps and social media platforms has emerged as a highly lucrative new development for Glasgow gangs. Drugs such as M-Cat, Mephedrone, and GBH are all easily purchased online and dispatched in small user-ready quantities. A 2017 BBC Documentary identified this distribution route as most favoured by 'tech-savvy' teenagers. One Glasgow gang revealed that two thirds of their drug transactions are now via online apps and this method of distribution can generate up to £22,000 of Cocaine sales in a couple of hours.

The internet not only enabled respondents to source drugs from further afield than was possible in years past, but it also fed consumer demand for new illicit products:

Too much risk in dealing heroin mate, cunts aren't interested in being junk balls nowadays anyways. Everybody is into looking pristine, hitting the gym and all that shit. No even kidding mate, people are selling steroids and melan-o-tan more than ching (Cocaine) now.... I just go online. You could type it into google shopping right now and it will come up. I just order it in on the [inter]net. Get it in about 3 days or so.... The [ste]roids are good sellers, long as you know what you are looking for. The tanning injections as well. Girls always buy them.... I could sell more tanning injections in a week than weed.... best thing is, see if you get caught, it's a fucking slap on the wrist whereas see heroin mate, you're talking serious jail time. –Boab

Boab argued that in a rapidly changing world, law enforcement could not keep up, thus he changed his business to exploit a gap in policy; sourcing profitable drugs that carried a lesser punishment should he be apprehended. For example, Boab discussed selling 'new psychoactive substances' (UNODC, 2014) or 'legal intoxicants' sold openly in 'head shops' alongside drug paraphernalia (BBC, 2014), that produced similar effects to illegal drugs like cocaine, cannabis and ecstasy. He conceded he had '*no fuckin' idea what [was] in them [as] it changes all the time*'. Boab also sold the surface anaesthetic benzocaine and other medicines that operated in the 'grey' market because they were legal for medical use but illegal for personal use.

Other respondents said drugs such as Valium, whilst purchased directly, were also stolen from the homes of prescribed users. Sometimes 'user-dealers' used prescription drugs to fund their own habits, a finding consistent with prior research on the subject (e.g., Moyle & Coomber, 2015):

Most people like a wee dunt (euphoric feeling).....To get [a dunt].....most addicts takes blues, yellas, and your prescribed meds (medication) as well....it's easy to get and sell [your medication] plus it's no' illegal, but I have sold brown (heroin) to feed my own habit.....it's no' actual drug dealing, well suppose it is kind of, but no' really. Only sell so I can get my own [fix].....police don't see it like that. –Gerald

Discussion

The findings from our research chart recent changes to drugs distribution networks in Scotland. Owing in part to adaptive risk mitigation on the part of drug dealers combined with issues of globalisation, we find the Scottish drugs market is in flux. We recognize that risk mitigation is essentially a form of displacement, which produces, at times, unintended consequences. Therefore, the current study contributes to a large body of work on drug market displacement and unintended consequences of drug enforcement (for a discussion, see Caulkins, 1992; Windle & Farrell, 2012). Historically, largely white, working class criminal cartel families with extensive criminal backgrounds controlled the Scottish market at all levels, as directed by kingpins in Spain and Portugal (Matrix Knowledge Group, 2007). Distribution was conducted by middle men leveraging criminal networks or gangs shifting product via the commercial club scene and door security staff. But law enforcement action changed this, disrupting traditional distribution networks. Market diversification in supply and demand and enhanced competition, emerging as a result of increasing levels of globalisation (Storti and De Grauwe, 2009a, b), compounded this disruption. For example, one participant identified the rapid growth of steroids as a result of the huge rise in interest in bodybuilding and body image (McVeigh and Begley, 2016), and its concomitant dearth of enforcement compared to other drugs (e.g., heroin), thus influencing his economic decision to switch products.

Product diversification brings further adaptive distribution methods including online sales and 24 Hour Dial-A-Deal delivery to your front door. Such diversification offers new points of entry into the market. Here traditional methods of selling and dealing count for less. In this new marketplace, value is given to telephone databases of users rather than the networked knowledge of domestic markets (Densley, 2013). This, in turn, feeds into another driver for change—the emergence of ‘county lines’ (Coomber & Moyle, 2017). County lines first became a reality for the Scottish public in 2013 with the machine-gun murder of gang member in the Edinburgh Suburb of Willowbrae by a group of Somali dealers who were living in Edinburgh and running a lucrative county line operation for a south-east London street gang. This new distribution model is foregrounding several key changes to drug distribution in Scotland.

First, county lines are operated by street gangs, not the traditional Glasgow or Paisley-based crime families thus far prominent in Scottish distribution networks. Such gangs report back to London, Birmingham or Manchester, and so do their profits. Second, county lines are predicated on the use and exploitation of children or vulnerable young adults (see Coomber & Moyle, 2017)—‘runners’ trafficked from diverse cities in England who are not the usual white working class boys from Scottish housing schemes. Such operations cut out the traditional Scottish middleman. It is likely, therefore, that the introduction of new players will fundamentally alter the ethnic homogeneity thus far present in Scottish drugs networks.

Whilst those involved in drug distribution will often work with anyone to turn a profit, these changes nonetheless represent a challenge to Scottish police who might find traditional lines of intelligence no longer effective, and new arrival communities under-researched and unfamiliar—a position that gives these new players a short-term advantage. Likewise, the progression of disadvantaged young men from ‘social supply’ of cannabis into retail supply and wholesale of Class A drugs, should be noted. Research has found that economic factors

can account for such decisions (e.g., Windle, 2017) and we are mindful that the current study was conducted in the aftermath of the 2008 Great Recession that affected our respondents in ways beyond the scope of this paper. Further, the emergence of newer markets centred on steroid and psychoactive substances requires updated policy to address online purchasing and street-level distribution among young people.

It is important to recognise the small-scale nature of our research and therefore to be cautious about applicability claims. However, the findings illuminate young people's involvement in organised crime, and the dynamic operation of and emerging issues within drug markets in Scotland (Scottish Government, 2008). Given the unique insights emerging from the youth participant interviews, the research findings could hold the potential to more clearly inform policy-related discussion on the most effective means of policing drug dealing and preventing organised crime in Scotland.

Our research clearly has the capacity to inform law enforcement and practitioners about the diverse and evolving nature of drug distribution in Scotland to improve effectiveness in tackling drug distribution networks. However, additional research is needed to explore and examine emerging markets and distribution systems because they continue to change. Echoing recommendations from the UK Drug Policy Commission (2008), there is a need to further explore and research Scottish (and UK) drug markets and how these have evolved, mapping structures, new players, and new trafficking networks. Only then can policy interventions, refreshed partnership strategies, and community resilience start to take shape. The Scottish Government (2008) stated 'reducing the supply of drugs' was an 'essential part' of its harm reduction strategy, but recognised it needed to know more about the 'dynamics behind the drugs markets' and to be 'alert to emerging issues so that enforcement activities can be targeted effectively'. Our research clearly adds to this knowledge base, enabling Scotland to become more effective in improving the safety and wellbeing of people, places, and communities.

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