

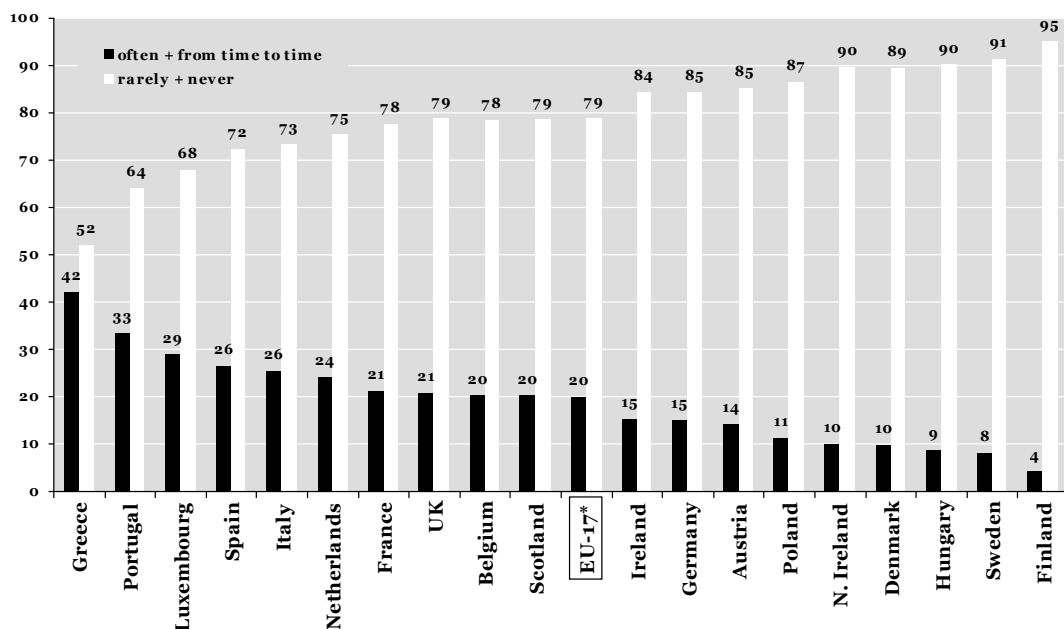
# Drug-related Problems in Europe's Neighbourhoods

by Gergely Hideg and Robert Manchin,  
based on the data of the European International Crime Survey (EU ICS), Gallup Europe

For the first time in its history, the European International Crime Survey asked its respondents about their experience with drug-related problems in their area<sup>1</sup>. The question in the survey used a four point scale asking the following: “Over the last 12 months, how often were you personally in contact with drug related problems in the area where you live? For example seeing people dealing in drugs, taking or using drugs in public spaces, or finding syringes left by drug addicts? Was this often, from time to time, rarely or never?”. This paper introduces the main findings of the survey. The question was previously used by several Eurobarometer surveys in the 15 older member states of the EU. Please note that some of the reported drug incidents (e.g. those involving soft drugs, such as cannabis) may not qualify as criminal offence according to the penal code of certain EU member states.

Overall, every fifth citizen in the seventeen countries where the EU ICS was carried out reported drug-related events in their neighbourhood.

Figure 1. Drugs in the neighbourhood



Nine percent claim to often see drug-related activity in their neighbourhood, and a further 11% say that they are confronted with the phenomenon regularly (i.e. “from time to time”).

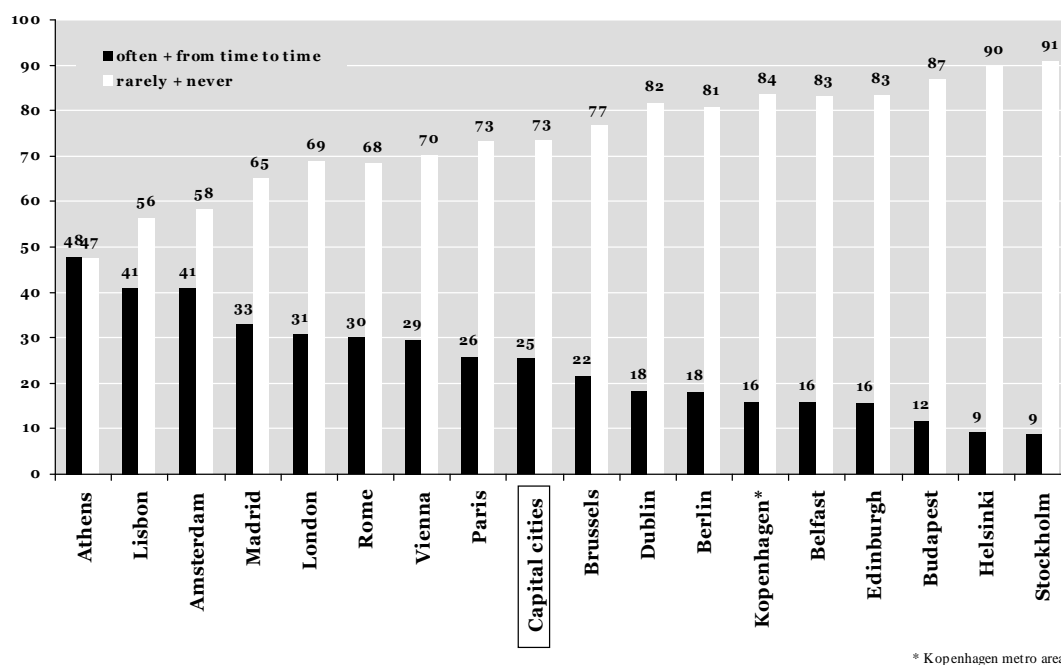
<sup>1</sup> Since 2005, this question became a standard item in the International Crime Victimization Survey (ICVS) global questionnaire.

Such incidents are much more often reported in Southern Europe than in the rest of the countries (Fig. 1.).

There are six countries in Europe, where a quarter of the citizens or more report having seen (signs of) public drug use in the area where they lived. The strict prohibitionist Greece (42%) and Portugal (33%) stand out with the most citizens reporting such incidents (EU ICS respondents from Luxembourg, Spain, Italy and the Netherlands are also more likely than the average to report incidents related to illegal drugs). Scandinavian countries – together with Hungary – show the lowest levels of drug-related activities in their home area. Finland and Sweden (both strict prohibitionist countries, such as those leading the ranking) are the ones with the lowest prevalence of significant drug problems.

Looking at capital cities, the ranking does not change dramatically. Amsterdam emerges as a city with drug-related incidents almost as widespread as Athens and Lisbon (Fig. 2.). It is not surprising that the levels of serious (illegal) drug problems are higher in the more urbanised regions, and especially in the largest cities. Looking at the difference across Europe, we find that the drug-related incidents are 27% more likely to be witnessed if someone lives in a capital than the national average (national: 20%, capital city 25%). In a number of countries we see a much larger difference. The level of drug-related experience in Vienna is 29% compared to 14% nationwide, which is a more than double difference (107%). In Finland, where drug use is a rarely reported phenomenon, the difference is even higher: it is 123% more likely that a Helsinki resident reports such incidents compared to the national average, even if the actual level remains one of the lowest among the European capitals.

Figure 2. Drugs in the neighbourhood in European capitals

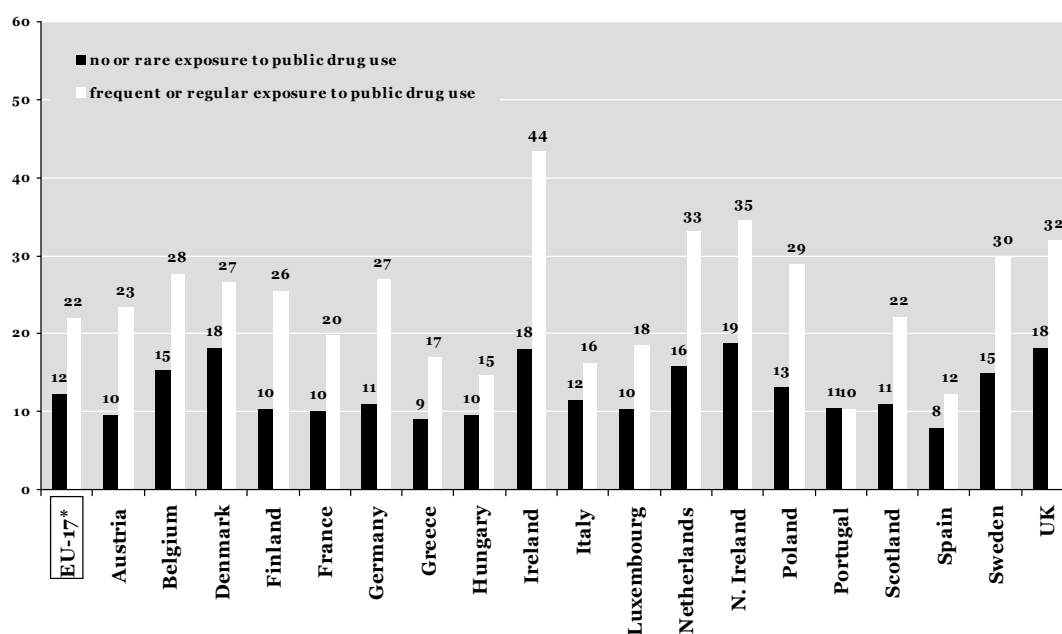


Amsterdam, Copenhagen, Belfast and London are other capital cities where the difference of the local prevalence and the national average is at least 50%, indicating a clear, significant concentration of the visible drug problems in the capitals. Again, the prevalence of public drug use is the lowest in Stockholm and Helsinki.

## Witnessing drug-related incidents and crime victimisation: is there a connection?

Persons who have been in contact with drug-related problems in the past 12 months were exposed to crime significantly more in the past year than those who do not report such contacts in their area. The correlation between the two factors is  $.112^2$  on the average of the 17 EU member states. As Fig. 3. illustrates below, in all but one country (Portugal) the prevalence of the 10 volume crimes measured by the EU ICS<sup>3</sup> is higher (often times much higher) among those who report drug-related incidents in their area than among those who can't recall such problems.

Figure 3. Contact with drug-related problems and past year victimisation



\* weighted average without the separate Northern Irish and Scottish samples

The connection remains if we control the urbanisation effect: the same exists in the capital city sample, however the relationship is somewhat weaker,  $.085$ . Without exception, in each of the 16 capitals we find a higher victimisation rate among those who indicate drug-related problems in their area.

Another variable that is suspected to influence the relationship of contact with drugs and victimisation history is the age of the respondent. Younger persons are more prone to be victimised<sup>4</sup> and also more likely to be in contact with drug-problems (31% in the 16-29 years, vs. 17% in the older age groups). While the association between witnessing drug-related incidents and crime victimisation is indeed higher in the young age group (Pearson correlation  $.121$  vs.  $.083$  among those above 30), the relationship between crime experience and contact with drug-related problems prevail in each age segment.

<sup>2</sup> all correlations in this paper are individual-level Pearson Correlations, significant at the 0.01 level (2-tailed)

<sup>3</sup> Jan Van Dijk-Robert Manchin-John van Kesteren-Sami Nevala-Gergely Hideg: Burden of Crime in the EU, Comparative Analysis of the EU International Crime Survey (EU ICS) 2005

<sup>4</sup> see: Burden of Crime in the EU

As Table 1. shows, the contact with drugs increases the chance of being victimised in Europe.

Table 1. Age, contact with drug problems, and victimisation

AGE	CONTACT WITH DRUGS IN LOCAL AREA	PAST YEAR VICTIMISATION	
		not victimized	victimized once or more
16-29	no + rare	81	19
	regular + frequent	70	30
30-59	no + rare	87	13
	regular + frequent	80	20
60+'	no + rare	93	7
	regular + frequent	89	11

### Drug problems and safety

The EU ICS found that in Europe, not that much the actual crime victimisation – or the lack of it –, but the level of personal safety determines the subjective well-being of the citizens<sup>5</sup>. In other words, the more secure one feels the more likely is this person to have a high life satisfaction, while the sheer lack of personal victimisation experience does not make people happy. Besides and beyond reducing crime, policies need to address this need of the citizens to increase their well-being.

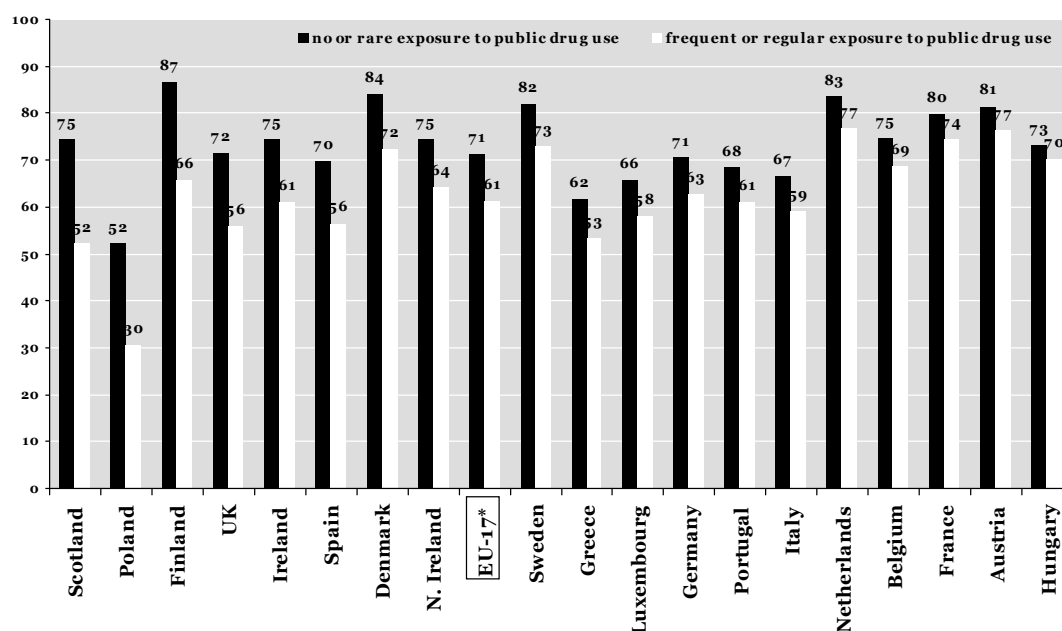
The EU ICS found that contrary to the great amount of criticism it receives, the question of “*How safe do you feel walking alone in your area after dark*” has the greatest explanatory power to the life satisfaction of the respondent as opposed to questions asking about “fear of crime” or avoidance of crime.

Exposure to drug-related incidents in the neighbourhood has a detrimental effect to the citizens feeling of safety. Those who have witnessed drug-related dealings in their neighbourhood are significantly less likely to feel fairly or very safe walking after dark in their area (71% feel safe among those without exposure vs. 61% of those who had contact with drug-related problems). The same association exists in every capital city, as well (54% vs. 46%, respectively).

<sup>5</sup> Laura Szabó and Robert Manchin 2005. The Effect of Crime Experience and Personal Safety to Subjective Well-being, *EU ICS Working Paper Series*, <http://www.gallup-europe.be/euics>

Looking at the effect of drug-related problem exposure by country (Fig 4.), we see some clear differences in the extent it interferes with one's personal safety. Those Scottish, Polish and Finnish who report drug problems in their area have a much deteriorated feeling of safety. On the other hand such exposure seems to have no effect on Hungarians, Austrians, French, Belgians, and Dutch. Somewhat contra-intuitively, the prevalence of drug-related problems has no significant correlation with how much it affects the safety of the people.

Figure 4. Safety by exposure to drug-related problems in local neighbourhood (ranked by the effect of contact with drug-problems)



\* weighted average without the separate Northern Irish and Scottish samples

The EU ICS confirms that the significant presence of drugs on the streets has an adverse effect on people's feeling of safety as well as the security of the area. Policing as well as social policies have to continue to focus on this issue to enhance the quality of life of the European citizens. Our results are however inconclusive whether or not strict prohibitionist policies can reach their goals: we see some positive examples (especially Sweden and Finland) but generally we do not find a clear positive relationship between more liberal drug policies and more widespread problems.

Looking at the drug problem as a safety issue, we find controversial results. In several countries drug exposure does not have an adverse effect on how safe people feel, while in some other countries this relationship is extremely strong. The latter group includes the countries on the British isles (Ireland and the UK, including Northern Ireland and Scotland), the three Scandinavian countries, Spain and Poland. Safety is clearly not a derivative of one particular variable that describes the environment of the citizens from a particular perspective.

Even if it seems that in some countries there is only a weak effect of public drug use / dealing with the persons' safety in that area, we see a clear connection if we extend our focus (and narrow our location). From a capital city subsample in most of the countries<sup>6</sup> we know that the quality of environment affects one's safety to a large extent. In neighbourhoods where

<sup>6</sup> N~400 in all countries, but Luxembourg, Estonia and Poland

there are a lot of unfavourable environmental factors, such as loitering, graffiti, speeding cars, etc<sup>7</sup>, people are less likely to feel safe. Drugs come along with these other symptoms of unfavourable living environment, showing a .301 correlation with the overall “slum” variable we created from the list of adverse conditions in the neighbourhood. And universally, slums make their citizens feel less secure in the capitals of the EU<sup>8</sup>.

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<sup>7</sup> “slum factors” measured: cars speeding, streetlights not functioning, unsupervised youth on the street, littering, loud parties or noises, public intoxication, houses in a very bad state of repair, graffiti. EU ICS used a three-point scale to measure the extent of each phenomenon (often, sometimes, never). A dichotomous unfavourable living environment („slum”) variable was created based on these responses to each case.

<sup>8</sup> Gergely Hideg and Robert Manchin 2005. Environment and Safety in European Capitals, *EU ICS Working Paper Series*, <http://www.europeansafetyobservatory.eu>