Title: The Reasons for the Emergence of a Drug Market in Rural Ireland in the period from 2009-2019. A case study of a small town in West Cork.

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Declaration:
This is to certify that this thesis is the candidate’s own work and has not been submitted for another degree, either at University College Cork or elsewhere. All external sources and references are clearly acknowledged and identified within the contents. I have read and understand the regulations of University College Cork regarding plagiarism.

Signed: Darren Christopher White.

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Chapter 1: Introduction.

1.1: Abstract.
Drug markets in Ireland have seen a marked change in recent years, with rural areas now comparable to urban areas in terms of drug availability and drug use. A key aim of this research is to account for the reasons for the emergence of drug markets in rural Ireland, using a small town in West Cork as a case study. A new type of drug dealing model has been identified in the UK called ‘county lines’, whereby “drug dealers are engaging in out-reach activity and travelling from their urban hub to provincial towns and cities within a wide radius of their home turf, not just to deliver their product to that location as a ‘weight’ but also to retail it there themselves” (Coomber and Moyle, 2017). European studies have shown that there is evidence of county line type drug dealing in Ireland, and a key aim of this research is to highlight this. Guided by existing literature done in Ireland and the UK, a convenience sample was utilised, and two professionals were interviewed regarding a drug market in the area. Media analysis was also employed, as several newspaper articles were reviewed to gain a contextual understanding of the local drug market. The findings of these interviews suggest that changes to the local drug market have been influenced by a multitude of factors. Foreign nationals moving into the area, from those attracted to hippy communes was the origins of this market, and it moved from a social supply model to a more entrepreneurial one as years went on, with some similarities to county lines in the UK. Money & recession and rural vulnerability are also highly influential factors to the drug market in the area.

1.2: Background and rationale.
Historically speaking, cannabis has been Ireland’s most consumed illicit drug (Windle, 2017; see also Van Hout, 2011). In recent years however, cocaine has become a major problem, as both Gardaí and drug counsellors report that cocaine is now available in every village, town
and city in Ireland, as well as rural areas (Echolive, 2020). The research site for this study is no different, as the increasing presence of different drugs including illegally obtained prescription drugs and MDMA, but especially cocaine, has been noted (Corkbeo, 2020; Irish Examiner, 2019; The Southern Star, 2019; The Southern Star, 2018).

One possible reason for this is county line type drug dealing, and as the EMCDDA has pointed out, evidence of this type of drug dealing exists in Ireland (EMCDDA and Europol, 2019). As the research site is just over an hour’s drive from Cork city, this could be a viable explanation. No academic study has been carried out regarding county line drug dealing in the Irish context, and this style of dealing may explain this recent upsurge in polydrug availability.

Being from the research site, I have a personal connection with this location, and it seems the towns teenagers may be experiencing something very different to what I experienced when I was that age. Today’s normal may not have been even considered in my time, and this is a rapid development considering we are only talking about a period of about 10 years.

1.3: Aims and Objectives.
1. To fill a gap in the knowledge base by investigating rural drug markets in Ireland and what form they are taking.

2. To critically explore the existence of county lines operations in Ireland.

3. To fill another gap in the knowledge base by investigating the movement of drug dealers within Ireland.

1.4: Chapter Outline.
Chapter 2 Literature Review: This chapter will examine existing literature regarding county line drug dealing in the UK. After reading this chapter, the intention is to give the
reader a thorough grounding in this novel form of drug dealing and draw comparisons between the UK and Irish context.

**Chapter 3 Methodology:** For this research, two participants were interviewed, a retired Garda sergeant and a drug addiction councillor who still works in the research site. Participants were selected via a convenience sample due to pre-existing contacts. Both interviews were semi-structured, recorded and transcribed. This chapter also explains the ethical concerns, analysis method and limitations of this study.

**Chapter 4 Research site drug market changes:** This chapter will discuss the evolving drug market in the research site, characterised by the increasing variety of illicit drugs and drug-related seizures and convictions. The demographics and geography of the research site will also be discussed.

**Chapter 5 Findings:** The results section will outline the main points expressed by both interview participants, both mutual and exclusive. The main points made were that a drug market in the research site is closely connected with people of foreign nationality coming into the area, the vulnerability of rural areas for illicit drug activity due to the lack of professional resources, the geostrategic nature of the area, the availability of money and increasing change in societal norms.

**Chapter 6 Discussion:** This section will bridge the gap between the findings of the interviews and media analysis and the academic literature. By analysing the main points made by both interview participants, possible explanations as to why and how a drug market evolved and mutated in the research site will be offered. This will be done via the backdrop of the academic material.

**Chapter 7 Conclusion:** The conclusion will provide a summary of the main points made and recommendations for further study. Recommendations include further research with a much
bigger sample size and will include individuals who are involved in the drug market in the research site. Policy recommendations are also provided. This dissertation concludes with a bibliography.
Chapter 2: Literature Review.

2.1: Rural drug markets.
In recent years, drug availability and prevalence of use has seen a marked increase in rural areas (Van Hout, 2009; Van Hout, 2011; Coomber and Moyles, 2017; Windle and Briggs, 2015a; Spicer, 2018; EMCDDA and Europol, 2019; see also Kelleher et al, 2011). Drug markets are constantly changing, and in the Irish context, the Irish illicit drug market has moved from a preponderance of opiate use to a more differentiated pattern of polydrug use (Bowden, 2019). As well as this change in the types and quantities of drugs available, new avenues to distribute drugs have emerged, with rural youth commenting on the increasing prevalence of illicit drug use among young people in terms of drugs of choice, peer use, earlier ages of initiation and the ease of obtaining these drugs (Van Hout, 2011; see also Van Hout, 2009).

It has been recognised that rural areas provide new drug markets, with this attributed to increased commercialisation and the growth of a materialistic society (Van Hout, 2009). The possible reasons for increased drug use in rural areas have been attributed to urban influences, the fragmentation of traditional, cohesive family values (Van Hout, 2009; Van Hout, 2011) and globalisation and economics (Windle and Briggs, 2015a; Windle, 2017; see also Bowden, 2019). Also, the increasing normalisation of drug use in youth has been observed, as most rural youth are generally not negative towards drug use (Van Hout, 2010; see also Van Hout, 2009; Bowden, 2019). Rural youth may face further risk factors for problematic drug use, such as rural isolation, compromised education and/or employment, limited recreational opportunities and low awareness of health and/or community services (Van Hout, 2009). As well as this, studies have shown that rural parents are not aware of differences in drug-related risk and can have difficulty comprehending harm-reduction principles (Van Hout, 2009).
A theory regarding the mutation of illicit drug markets is ‘symbolic’ policing, whereby the increased efforts of police arresting highly visible, low-level, local user dealers may paradoxically cause more opportunities for more predatory, violent and commercially orientated dealers to move in and exploit areas (Spicer, 2018; see also Coomber and Moyle, 2017). These issues theoretically put rural youth at an increased risk of problematic drug use and are possible attractive features for individuals or groups to begin dealing drugs in these areas.

2.1.1: Reasons for establishment in rural areas.
Rural areas are considered attractive for drug dealers for several reasons; urban markets may have become saturated (Windle and Briggs, 2015a), urban-based dealers may seek to expand their business and strive for profit maximisation (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018; Bowden 2019), there is less competition from rival dealers in areas with unestablished drug markets (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018), there is an increased sense of anonymity that comes with the distance from their base of operations (Coomber and Moyle, 2017; NCA, 2015; see also Van Hout, 2011; Windle and Briggs, 2015a; Kelleher et al, 2011), a reduced police presence due to economic downturns (Windle, 2017), and straining social and/or economic circumstances (Windle and Briggs, 2015a; Coomber and Moyle, 2017). Studies have also shown that recession and economic downturns can increase drug use and/or dealing (Storti et al, 2011). This is also supported by strain theory, whereby the means of achieving cultural goals set during times of economic prosperity are not present, and drug dealing may be a possible response to this (Merton, 1938).

It would be unwise to suggest rural communities have been totally immune to the presence of illicit drugs. However, the evidence here suggests that rural areas have seen a change
regarding illicit drugs in their communities, characterised by increased prevalence of use, an increase in the types of drugs available and the avenues by which these drugs enter rural areas. This leads on to a novel, more insidious form of drug dealing model which has been researched most extensively in the United Kingdom termed county lines drug dealing.

2.2: ‘County Line’ drug dealing in the United Kingdom.
Illicit drug-dealing in the UK has seen a new market development in recent years in the form of county lines drug dealing, “where, in opposition to traditional practice, drug dealers are engaging in outreach activity and travelling from their urban hub to provincial towns and cities within a wide radius of their home turf, not just to deliver their product to that location as a ‘weight’ but also to retail it there themselves” (Coomber and Moyle, 2017). Therefore, end-users in these provincial areas are buying directly from big-city drug dealing networks (Windle and Briggs, 2015a; Coomber and Moyle, 2017; Spicer, 2018; EMCDDA and Europol, 2019), with this usually done through the use of a dedicated phone line (Windle and Briggs, 2015a; Coomber and Moyle, 2017; Spicer, 2018, Coliandris, 2015). This new type of drug dealing has been coined ‘county lines’ drug dealing (Windle and Briggs, 2015a; Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Spicer, 2018; Robinson et al, 2018).

What is novel about the county lines dealing model compared to traditional drug market structures is that it transcends local, and even regional, boundaries, (Coomber and Moyle, 2017; Robinson et al, 2018) and key themes that have become associated with this new drug dealing model are exploitation of the vulnerable, including children, increased violence and intimidation, and a novel practice known as ‘cuckooing’ (Windle and Briggs, 2015a; Coomber and Moyle, 2017; Spicer, 2018; Robinson et al, 2018; EMCDDA and Europol, 2019; NCA, 2018; NCA, 2019; HM Government, 2016). Highlighting how academic research into county line dealing modality is scant, (Windle and Briggs, 2015a) the answers
to more fundamental questions such as why and how county lines groups choose the areas they move into remain unclear (Spicer, 2018). As well as being a novel form of drug dealing, this is therefore a relatively novel area of academia.

2.2.1: A new challenge.
The sense of urgency and severity of this novel drug market model was highlighted when Her Majesty’s government declared the tackling of county lines as the first priority of the six listed for 2015/16, with the “exploitation of vulnerable people” as a core reason for this, saying “young people are groomed and/or coerced into moving or selling drugs, and the homes of vulnerable adults can be taken over as a base from which drugs are sold” (HM Government, 2016). The taking over of vulnerable adult’s homes is what we now term ‘cuckooing’ (Coomber and Moyle, 2017). This sentiment is also echoed by the National Crime Agency, who said “Tackling county lines is a national law enforcement priority” being “the subject of specific tasking by the Director General” in 2019, following the identification of more than 2,000 active county lines operations in the UK in 2018 (National Crime Agency, 2019).

Although this phenomenon was officially recognised by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) in their annual report of 2019, the National Crime Agency in the UK say in their own report in 2017 “that nearly every police force in England and Wales has been affected to some degree” by county lines drug dealing (EMCDDA and Europol, 2019). Thus, most studies regarding this new type of drug dealing in rural areas have been carried out in the UK (Windle and Briggs, 2015a; Coomber and Moyle, 2017; Spicer, 2018; Robinson et al, 2018).

However, in the EU Drug Markets Report 2019 there is also evidence of the establishment of rural drug markets, or county line drug dealing, in Belgium, Estonia, Greece, Ireland and
Sweden (EMCDDA and Europol, 2019). The key characteristics, practices and structure of these ‘county lines’ groups will now be discussed.

2.2.2: Scoping of County Lines.
A key characteristic that has become associated with county lines drug dealing is that it transcends local and even regional boundaries, whereby urban based dealers engage in ‘commuting’ and ‘holidaying’ practices to satellite areas to sell drugs (Coomber and Moyle, 2017; Robinson et al, 2018). A key finding coming from Coomber and Moyle’s study is that across all sites investigated, there was a willingness to travel for the purpose of selling drugs (Coomber and Moyle, 2017). 85% of rural locations targeted by urban dealers encountered travelling dealers from London and other major UK cities (NCA, 2015) and many arrested as part of ‘Operation Bilbo’ were ‘junior’ London ‘gangsters’ who had been ‘sent to Oxford to prove their worth’ (Oxford Mail, 2014, as cited in Coomber and Moyle, 2017). The willingness of drug dealers to travel to sell drugs and maximise profit has been found in several UK studies (Coomber and Moyle, 2017; Windle and Briggs, 2015a; Spicer, 2018; Robinson et al, 2018).

However, a key factor as to the prevalence and success of a county line drug market in the UK is distance and ease of access to the urban hub (Coomber and Moyle, 2017; Robinson et al, 2018).

An example of a developed county lines drug market was Southend-on-Sea (Essex), which is just over an hour’s drive from London and serviced by a direct train route. In contrast to this was Torquay, which is a three-and-a-half-hour drive from London, and of the areas researched in this study, was the most difficult location to access from London. Torquay had almost no county lines presence (Coomber and Moyle, 2017). This evidence suggests that although a common narrative of willingness to travel to sell drugs exists, with some evidence
of dealers travelling up to 295 miles to exploit provincial drug markets, the ease of access to areas from the urban hub is a highly influential factor (Coomber and Moyle, 2017).

As stated in the EU Drug Markets Report 2019, county line drug markets operate differently based on geographical location (EMCDDA and Europol, 2019; Robinson et al, 2018). This factor is perhaps highlighted in the differences between Essex and Torquay, whereby the prevalence of a county lines drug market is highly influenced by the geographical location and its ease of access to a major supply hub, in this case London. It is important to note that the practice of “drug dealers being outwardly mobile and migrating to other areas is not a wholly novel phenomenon in itself”, however what is novel about this type of drug dealing model “is that it involves setting up retail operations in host areas” (Spicer, 2018). This leads to the increased scoping of county lines operations and increases their area of influence and control.

2.2.3: Structure.
County lines drug dealing “represents an organised hierarchical organisational structure”, serving to “distance the more powerful key perpetrators and garner them protection from the law” (Coliandris, 2015, as cited in Spicer, 2018). It is also a “largely hidden and poorly understood criminal business model” (Coliandris, 2015). Regarding the structure of county lines groups, Coomber and Moyle’s study in 2017 is especially relevant, as they break down this hierarchy into three distinct supply roles; ‘Top Boys’, ‘Sitters’ and ‘Runners’ (Coomber and Moyle, 2017).

‘Top Boys’ are described as the kingpins who remain in the urban base and control the outputs and performance of the county line. This is done by using a dedicated phone line (Coomber and Moyle, 2017). This phone line will be discussed in more detail in section 2.2.5. These individuals, sometimes called ‘elders’, also recruit individuals who are sometimes children, to transport their drugs for them from the urban base to the provincial
areas (Coomber and Moyle, 2017; Windle and Briggs, 2015a; Windle and Briggs, 2015b; Robinson et al, 2018; Topping 2014; Coliandris, 2015).

‘Sitters’ are characterised as low-ranking group members who direct deals in the county line market under the direction from ‘Top Boys’. Their main role is to manage the dealing operation in the host market and to act as a drugs custodian, protecting the drug stock and distributing amounts of drugs to runners (Coomber and Moyle, 2017). Once a base is secured, ‘Sitters’ are usually the ones who occupy a vulnerable individual’s home in the process known as cuckooing, usually someone who is vulnerable in some way, and use it as a dealing base in the area (Coomber and Moyle, 2017; Spicer, 2018; NCA, 2018-19). Victims of cuckooing are most likely to be psychologically vulnerable women and/or drug-dependent men or women, with victims of this practice stating these experiences could last anywhere between a few days to up to eight months, or as long as the dealer responsible felt the operation was secure (Coomber and Moyle, 2017; Spicer, 2018). Children and teenagers have been known to fill this role, with one example of 12/13-year-old boys identified as ‘Sitters’, who were “very much doing the front line dealing” (Windle and Briggs, 2015a; see also Windle and Briggs, 2015b; Robinson et al, 2018).

‘Runners’ are viewed as the most essential resource. These individuals transport the money to the ‘Sitter’ or cuckoo address and then transport the drugs to the buyer. They engage in high-risk and low-paid labour, can be both adult and/or teens who are mainly drug users themselves and/or psychologically vulnerable (Coomber and Moyle, 2017; see also Windle and Briggs, 2015a; Windle and Briggs, 2015b; Coliandris, 2015; Topping, 2014; Spicer, 2018).

2.2.4: Gang association.
Some have suggested that county lines drug dealing is associated with gangs (Storrod and Densley, 2016; NCA, 2016). However, in a 2015 study done by Windle and Briggs who
interviewed members of four different London gangs, they found these gang members sold
drugs as individual entrepreneurs rather than as a group, but used the association with the
gang to reduce the risk of robbery, intimidate rivals and for the social benefits it presented.
Therefore, the drug dealing carried out by members of these gangs did not appear to be
centrally coordinated by one distinct leader, in contrast to Coomber and Moyle (Windle and
Briggs, 2015a; see also Windle and Briggs, 2015b).

Windle and Briggs found that county line style dealing is not always carried out by, or
associated with, gangs. This highlights the importance of not viewing county lines activity as
purely gang related, as it may blur or dictate one’s interpretation of a county line operation.
Studies such as these also highlight the differences in perspectives between individuals, as
practitioner’s perspectives of county lines may be contradictory to the perspectives of those
directly involved (See Spicer, 2018; Windle and Briggs, 2015a; Windle and Briggs, 2015b).
In response to this, the word ‘gang’ was substituted with ‘out-of-town dealers’ to encapsulate
the range of actors involved in county lines dealing (Coomber and Moyle, 2017).

Whatever the reason or the actors involved, a novel type of drug market has emerged, one
that is highly organised, efficient and more difficult to recognise compared to traditional drug
market structures.

2.2.5: Organisation and practices.
The organisation of county lines drug dealing has been noted, and many similarities have
been shown between this new drug dealing model and a legitimate business regarding
structure and practices (Spicer, 2018). The decision to deal in smaller towns appears to be a
considered choice, as the people involved choose a location that gives them the best chance
of infiltrating and taking over the market, which is highlighted by the fact that other smaller
cities may have a larger potential customer base (Spicer, 2018). This consideration gives
county lines dealers the best opportunity to maximise profit and monopolise a market, bearing similarities to legitimate business practices (See also Robinson et al, 2018).

A key factor of the county lines model is the presence of a dedicated phone line which connects users in the provincial area to urban dealers who have a presence in the provincial area (Coomber and Moyle, 2017; Windle and Briggs, 2015a; Spicer, 2018; see Coliandris, 2015). This phone line becomes the distinct brand of a county line operation (NCA, 2017). Research has shown that county lines groups have been known to hand out pieces of paper with their ‘brand’ name and phone number on it, offering cheap prices to new customers while incentivising them to spread the word among other users (Spicer, 2018). County lines groups have proved popular among local drug users due to the superiority of drugs on sale, their reliability and the efficiency of these groups (Spicer, 2018). As business increases, and the ‘brand’ is proved as a good ‘service’ that provides superior ‘products’, the local drug suppliers are undermined, and as research shows, county lines groups establish themselves in local areas relatively quickly (Spicer, 2018).

As their business grows, there is a massive reluctance for county lines to change their phone numbers, as it becomes “their brand, their business” (Spicer, 2018). It should be noted that branding is not new to drug dealing, but what is new is a practice resembling franchising (Spicer, 2018).

2.2.6: Franchising.
A practice resembling franchising in legitimate business is a novel activity associated with county lines. An individual will set up a county line in a provincial area, and once this operation is established and becomes lucrative, this individual will sell it to somebody else who can then use the established brand (Spicer, 2018). Echoing this, many county lines groups who leave an area either by choice or necessity, have been known to sell off lists of phone numbers to other dealers, again in a practice similar to the selling of customer data in
legitimate business (Spicer, 2018). This highlights the adaptability of county lines groups, seeking other avenues besides selling drugs to generate income while also making it harder for police to track them (see Robinson et al, 2018).

These findings also imply that county lines groups recognise the mutual benefits of engaging with each other and were prepared to do so if it meant further profit generation (Spicer, 2018). The findings by Windle and Briggs are of relevance here. Gang members that were interviewed stated that the four gangs researched were very separate entities with little routine interaction (Windle and Briggs, 2015a; see also Windle and Briggs, 2015b). Although these four gangs didn’t work together, these gangs did cooperate outside of the urban base, as highlighted by a Somali gang collecting Red Gang members from the train station, providing them with phones and bringing them directly to an established crack house in the area (Windle and Briggs, 2015a). This highlights another novel aspect of county line dealing.

The practices described here, similar to legitimate business activities, allow a county line operation to dominate a rural market relatively quickly, and police officer’s interpretations of county lines operations view the generation of profit as the dominant, if not sole, motivator for these groups (Spicer, 2018; see also Robinson et al, 2018). This is also highlighted in the drugs of choice that county lines groups choose to provide, these being crack cocaine and heroin (Windle and Briggs, 2015a; Coomber and Moyle, 2017; Spicer, 2018; EMCDDA and Europol, 2019).

2.2.7: Violence and Intimidation.
Another key factor that has come to be associated with county lines drug dealing is the marked increase in the use of violence, compared to local drug dealers, (EMCDDA and Europol, 2019) with police officers that were interviewed expressing the view that county lines groups are comprised of “highly dangerous, evil individuals who routinely engaged in
sadistic acts of violence” (Spicer, 2018). This again feeds into the notion that county lines operations are gang related (Coomber and Moyle, 2017).

However, findings by Spicer regarding county lines activity and violence undermines this notion. Although extreme acts of violence may be present in county lines operations, Spicer’s findings show that these acts of violence are more appropriately viewed as instrumental tools rather than examples of sadism, being used to maximise profit and/or to intimidate local dealers when they first move into an area (Spicer, 2018). This again highlights how there can be vast differences between the perspectives of practitioners and those that are involved.

This was also found in other studies, where acts of violence are generally avoided and only used when necessary, as they attract police attention and are bad for business (Spicer, 2018; Windle and Briggs, 2015a; Bowden, 2019; see also Robinson et al, 2018). Highlighting how violence is generally avoided, one gang member who was interviewed stated that one motivation in his decision to leave London to sell drugs was to “avert violent confrontations with established London gangs” (Windle and Briggs, 2015a). These findings correlate with police interpretations of county lines, with profit maximisation being the dominant, if not sole, motivator (Spicer, 2018).

2.2.8: Predatory nature.
Another novelty of county lines dealing compared to previous models is its predatory nature, whereby vulnerable and marginalised populations are systematically targeted and exploited, and the maximisation of profit and/or market control outweighs the ethical or risk-related considerations regarding the treatment of these populations (Coomber and Moyle, 2017). As stated by the NCA, young and vulnerable people are manipulated using “physical, mental and sexual harm to coerce them into running drug supply lines” (NCA, 2017-18). One particularly sinister example of this happening is cuckooing. Themes of vulnerability and exploitation are central to the county lines phenomenon, (Coomber and Moyles, 2017;
Robinson et al, 2018) and perhaps highlighting the enormity of this statement is the recent strategy of police forces in the UK to begin charging county lines dealers under the Modern Slavery Act 2015 (Spicer, 2018; Robinson et al, 2018). As well as illustrating the levels of severity this exploitation can reach, it also aids police in that such convictions attaches stigma to offenders, rather than the ‘badge of honour’ associated with drug dealing.

A notable point to also make is the choice of county lines groups to exclusively provide crack cocaine and heroin. As well as being the main money-makers, police interpreted the choice of providing these drugs as being related to the vulnerability of the users who use these substances. These users were interpreted as being “socially excluded, lacking in social capital and unwilling to report victimisation to the police.” This would make them prime targets for cuckooing and viewed as a significant “objective in establishing a well-organised and financially efficient County Line operation” (Spicer, 2018). Related to the reluctance of individuals to report victimisation, research findings also suggest that many young people who are exploited as part of a county line operation justify or neutralise their exploitation (Robinson et al, 2018). This may be due to the ‘grooming’ concerns expressed earlier, manipulating young people into thinking that individuals involved in county lines that recruit them are their ‘friends’ or ‘guardians’ (HM Government, 2016).

Thus, the predatory nature of county lines groups in the UK is a significantly sinister aspect to consider, and again reiterates the magnitude of the threat posed to communities by these groups.

2.2.9: Symbolic Policing.
A potential cause for the emergence of county lines drug dealing in the UK is symbolic policing. The findings of Coomber and Moyle regarding the hierarchical structure of county lines serves to physically distance the main organisers of a county line operation from its daily activities, (see also Robinson et al, 2018) whereby the people who may be interpreted as
the masterminds of the operation are in reality low-ranking members of a much higher organisation. Observations such as this may serve to highlight how symbolic policing may have contributed to the emergence of county line drug dealing, whereby the targeting of low-level dealers led to a gap in the market, and paved the way for more predatory, violent and commercially-orientated dealers to move in and exploit areas (Spicer, 2018; see also Coomber and Moyle, 2017). As Spicer goes on to say; “While the emergence of county lines poses novel and significant challenges for police, it would be unwise to depict these activities as being without precedent” (Spicer, 2018).

2.3: Rural Drug Markets in Ireland.
Generally, there is little attention paid to county line dealing modality in academia (Windle and Briggs, 2015a), and in Ireland at the time of writing, there has been no study done explicitly on the establishment of rural drug markets. For this study, this is a significant disadvantage. As stated by the EMCDDA and Europol, evidence exists that there is county line type dealing happening in Ireland, although it is uncertain whether rural drug dealing markets here in Ireland resemble the model that police are dealing with in the UK. It is again worth pointing out a sentiment expressed in the EU Drug Markets Report 2019, whereby county line drug markets operate differently based on geographical location, especially regarding violence and intimidation (EMCDDA and Europol, 2019; see also Robinson et al, 2018).

However, there have been several studies done in the Irish context that are relevant to this study (Bowden, 2019; Kelleher et al, 2011; Van Hout, 2011; Van Hout, 2009; Windle, 2017). One notable disadvantage of some of these studies is that they are relatively old, with some studies carried out in 2009, so may not be representative of Ireland’s drug market today. However, these studies are still of relevance, provide valuable insights into illicit drug-taking
patterns and markets in Ireland, and may serve to mark trends that may have originated then but are more visible today.

2.3.1: Youth culture and the normalisation of drug taking.
The increasing normalisation of drug use is a key finding for Van Hout. As urban values are assumed in rural areas due to reasons associated with economic growth such as social housing, and rural-to-urban connections such as school, the fragmentation of traditionally cohesive rural family values ensues (Van Hout, 2009; Van Hout, 2011). Urbanisation offers new potential pathways for drugs to enter rural communities, leading to higher drug availability (Van Hout, 2009; Van Hout, 2011; see also Kelleher et al, 2011). An ever-increasing trend of youth drug use has been noted, with European surveys showing a rising trend of illicit drug use among Irish youth compared to youth in other European countries (Van Hout, 2009). It appears that drug use among Ireland’s youth is becoming normalised as part of recreation time and shifts in social discourse such as this is enabled further by the fragmentation of traditional rural family values and the widespread availability of drugs (Van Hout, 2009). As one researcher commented, “Rural kids are trying to fit in… they want to be part of what they think is cool” (Van Hout, 2011).

The normalisation of drug-taking may be a potential cause, or potential outcome, of the emergence of drug markets in rural areas, whereby the normalisation of drug-taking in today’s society may well be an attractive feature for drug dealing groups to establish markets in rural areas. Spicer sums this up effectively when he says: “while the emergence of County Lines poses novel and significant challenges for the police, it would be unwise to depict the activities of those involved as being wholly without precedent” (Spicer, 2018).

2.3.2: Rise in drug availability.
Regarding rural areas, they are now seen to be comparable to urban settings regarding drug availability and prevalence of use (Van Hout, 2011). In Van Hout’s 2009 study, parents
acknowledged that there was a drug problem in their rural area that had recently occurred. Several parents provided especially relevant information to this study; some parents commented on people dealing in proximity to urban suburbs, others believed a drug dealer encouraged first time drug use among their children, and one parent commented on how some boys in the school had been suspended for dealing drugs (Van Hout, 2009). Particularly striking is the belief that a drug dealer encouraged the first-time drug use of these parent’s children and the dealing of drugs in school, something which bears resemblance to the recruitment of young people in the UK. As discussed earlier in the UK context, the exploitation of young children and teenagers has become a key theme of county lines dealing, both to consume and to sell drugs, and Van Hout’s findings seem to correlate with research findings in the UK (Coomber and Moyle, 2017; Windle and Briggs, 2015a; Windle and Briggs, 2015b; Spicer, 2018; HM Government, 2016; Topping, 2014; Coliandris, 2015; see also NCA, 2018; NCA, 2019).

In Bowden’s study, it was observed that drug problems are related to how the economic structure of distribution is organised, with drug selling being comprised of many different levels. These levels are split into ‘main dealers’, ‘middlemen’ and ‘foot soldiers’, together with ‘enforcers’ and ‘mules’ (Bowden, 2019). This structure bears some resemblance to the hierarchical supply structure of county lines in the UK (Coomber and Moyle, 2017). However, more investigation is needed to conclusively say that the observations made by the parents in Van Hout’s study, as well as the structure seen by Bowden, are of a drug dealing model resembling county lines in the UK.

2.3.3: Growth and increasing scope of illicit drug markets in Ireland.
In Ireland, illicit drug markets have continued to grow over the past ten years (Van Hout, 2011; Bowden, 2019; Van Hout, 2009; Kelleher et al, 2011; Windle, 2017). The multiple types of drugs, and their use, has also been noted as the Irish drug market “has changed from
a preponderance of opiate use to a more differentiated pattern of polydrug use” (Bowden, 2019; see also Van Hout, 2009; Kelleher et al, 2011). It has been found that drug markets have become more complex involving the use of mobile phones, and open dealing in public places is becoming more common, with a greater sense that violence and intimidation are associated with drug markets (Bowden, 2019). As Bowden goes on to say: “a more fraught, violent and dangerous milieu involving drug debt and the threatening methods used by dealers to recoup monies” has emerged, inextricably linked with the Irish drug market moving from being predominantly an opiate one to a differentiated pattern of polydrug use in the 10 years leading up to 2019 (Bowden, 2019). These findings are especially interesting, as they bear striking similarities to the county lines phenomenon in the UK, marked by the involvement of mobile phones and the heightened sense of violence and intimidation which correlates with differentiated drug availability and use.

The investigation into new psychoactive substances and the outlets supplying them carried out by Kelleher et al highlighted how drug markets in Ireland are continuously adapting and mutating, with online retailers supplying a whole host of drugs which mimic illegal stimulants such as cocaine, ecstasy and amphetamines, as well as synthetic cannabinoids (Kelleher et al, 2011).

At the time of review, these findings highlight that fewer people appeared to be purchasing new psychoactive substances via the internet relative to their UK counterparts (Kelleher et al, 2011). However, these findings reinforce the sentiments expressed by Van Hout, whereby new avenues for distributing drugs to areas previously inaccessible have emerged, allowing one to obtain drugs or psychoactive substances via the internet, and have them delivered through the post.
2.3.4: Economic factors.
Economic prosperity and/or poverty have been noted by several academics as a causal factor regarding drug dealing and drug consumption (Windle and Briggs, 2015a; Windle, 2017; Van Hout, 2011; see also Coomber and Moyle, 2017; Van Hout 2009; Bowden, 2019). As noted by Van Hout, “Economic growth during the ‘Celtic Tiger’ in Ireland has now led to an influx of new drug markets and heightened exposure to drug activity”, as well as the fragmentation of traditional cohesive rural family structures due to the growing emergence of social and affordable housing (Van Hout, 2011). In times of economic prosperity, drug consumption tends to increase due to young people having greater levels of disposable income and reduced parental monitoring due to high employment (Van Hout, 2009). Trends of increased drug consumption were observed in the ‘Boom Years’ due to the increasing interconnectedness of Ireland to the world, which increased availability and reduced the price of drugs (O’Gorman, 2014).

In the Great Recession in 2008, Garda data suggests drug use reduced but the cultivation and manufacture of drugs increased (Windle, 2017). Several studies have pointed out that drug dealing can be a form of entrepreneurship in an unregulated economy, serving to augment lower incomes for example (Bowden, 2019; Windle and Briggs, 2015a; Windle, 2017; see McCullagh, 1996; Punch, 2005; Hourigan et al, 2017). An interesting observation worth mentioning is the distinction between ‘resilient’ and ‘vulnerable’ dealers, whereby the former deal drugs to obtain cash to ‘party’, while the latter deal drugs for more basic desires, such as clothes or food (Bowden, 2019). This highlights the significance of the unregulated economy debate, as people may begin dealing drugs for different motivations and/or objectives but are equally influenced by economic factors.

As stated by Windle, the recession forced an adaption in the Irish drug market, even if it merely sped up the inevitable (Windle, 2017). Echoing Van Hout, this adaption in the market
marked by the increased cultivation and manufacture of drugs in Ireland during the economic downturn may have created new avenues for drugs to enter rural Ireland. Although this may well be the case, it is impossible to conclude without further research that these avenues are what we might now call county lines drug dealing.

Although no study has been carried out definitively proving the establishment of drug markets in rural Ireland, the studies referenced here provide valuable insights. These studies highlight how the Irish drug market has seen immense change in almost every aspect; the different types of illicit drugs now available, the price of illicit drugs, the users of these illicit drugs and the different mediums in which to obtain these drugs.

However, one key change is how areas in Ireland, namely rural communities, are now reporting increased illicit drug use, availability and problematic use among their populations. These findings echo similar findings in the UK, where a novel and insidious form of drug dealing model has emerged, namely county lines, and these findings seem to hint that a similar phenomenon has emerged in Ireland, as highlighted by the EU Drug Markets Report 2019 (EMCDDA and Europol, 2019).
Chapter 3: Methodology.

3.1: Sampling.
This town was chosen as a research site due to the quality of my pre-existing contacts, among other reasons (May et al, 2005, pg. 7) Being originally from the research site, the sampling method employed was a convenience sample, as I knew these participants personally before this research began. For this convenience sample, a semi-structured interview style was used. The participants chosen were two working professionals in their individual fields, who are/were involved in areas of employment relevant to this research during the period of 2009-2019. These fields are policing and medicine/counselling.

These professionals were contacted individually via email. In this email, the participants were informed of the topic of research, it was highlighted how valuable their individual contributions would be based on their own unique perspectives due to their areas of employment, and they were invited to partake in the research having been made aware of the research questions and possible ethical concerns.

Due to the personal relationships built up over time with the interview participants prior to this study, this allowed for a more natural flow to the interviews, which accommodated the increased sense of ease in my participants during the interviews. This may have possibly increased the divulgence of more useful insights and opinions.

The potential ethical concerns faced will be discussed next.

3.2: Ethics.
Ethical approval to undertake this research has been granted by the Social Research Ethics Committee (SREC), University College Cork. As discussed in the ethical application to the SREC, several potential ethical concerns were identified and discussed, with each of these concerns provided with counter measures, which were undertaken during the interview stage.
3.2.1: Research Questions.
The research questions asked in the interviews were as follows:

a). When did a drug market in your town emerge?

b). Has drug consumption increased? And if so, which drugs?

c). Why do you think the drug market emerged then?

d). Have you heard of drug dealers from big cities coming here to sell drugs?

e). Have you seen any change in people’s attitude to drugs?

f). Do you think rural drug markets are different to urban ones?

As highlighted by the wording of these questions, they are purely concerned with the development of a drug market in the area and not with personal information of any kind, nor the names of people possibly involved in this drug market in any way.

3.2.2: Anonymity.
The issue of anonymity, for both the research site and the interview participants, was of immense importance for this research. Regarding the research site, it was important to anonymise this town for reputational reasons, as it was never the intention to paint the research site in a bad light or to damage the area’s reputation. This was also achieved by anonymising the identity of the interview participants. To ensure the protection of the research site’s location, the titles of some of the reference material used is not listed in the bibliography.

Anonymising the identities of interview participants was an important aspect of this research, as it increased the willingness of these participants to partake in this study by giving them an increased sense of security, as well as reassuring them that any information disclosed would not be traced back to them. Both in the information sheet participants received and at the beginning of each interview, participants were guaranteed that all personal information and
disclosures they made would be kept completely confidential. However, the one exception to this was if any sensitive information regarding serious crime, individuals involved in serious crime and/or child protection issues were disclosed. This will be discussed in further detail in subsection 3.2.3.

At the conclusion of the interviews, the recordings were transferred to an encrypted laptop and wiped from the recording device. It was made clear to interview participants that, in the subsequent two weeks following this, they could edit their contributions or withdraw their contributions entirely, and once this two-week window had passed, the interview was transcribed and all identifying information was removed.

3.2.3: Potential disclosure of sensitive information.
Although the questions were designed to be purely concerned with the development of a drug market in the research site, there was always the possibility that there could be disclosures made regarding serious crime, individuals involved in serious crime and/or child protection issues. As seen in several academic studies, the exploitation and involvement of young people and children in drug markets is beginning to become a lot more common (Coomber and Moyle, 2017; Windle and Briggs, 2015a; Windle and Briggs, 2015b; Spicer, 2018; Van Hout, 2009; Van Hout, 2011; Bowden, 2019; Robinson et al, 2018; Topping, 2014; Coliandris, 2015; see also EMCDDA and Europol, 2019).

As stated to the interview participants, this research was solely concerned with drug market trends in the research site. However, it was made clear to them that any information they disclosed that may contain information regarding the criminal behaviour of an individual, the endangerment of an individual including themselves, serious crimes and/or the harm of a child would have to be reported to the relevant authorities by me, these being the Gardaí and/or Tusla, which may affect their right to anonymity.
This statement served to reduce the chances of any sensitive information being disclosed. As professionals, these individuals would already be aware of Children First legislation. However, the risk of sensitive information being disclosed was an issue that had to be explicitly stated and actively prevented, and not dictated purely by the hope that sensitive information would not be disclosed.

3.2.4: Potential distress.
Another concern was potentially causing distress in my interview participants. The questions asked during these interviews were explicitly concerned with the participant’s general reflections regarding the development of a drug market in the research site. These questions were not concerned with any personal experiences with drugs, and thus were tailored to learn about the potential new drug market in the area, while aiming to prevent any potential distress to the participants.

As part of the information sheet distributed to interview participants, relevant services and their contact details were provided, these being the Samaritans, counselling services, medical services and the local drug and alcohol task force. It was possible that some of the interview participants may have been directly or indirectly affected by drugs in the past without my knowledge, and so these services were provided to ensure that the relevant help was provided to the participants if they so needed it.

It was also made clear to the interview participants that they could stop the interview at any time if they so wished. This was another measure taken to ensure the interview participants felt as relaxed and comfortable as possible.

3.2.5: Health and safety concerns.
If the interviews were not able to go ahead due to health and safety concerns, namely the Coronavirus pandemic where it would not be possible to maintain social distancing, alternatives were put in place to conduct the interviews. Based on interview participants’
preferences, they were given the option of either conducting the interviews face-to-face, with social distancing being always maintained, over the phone or online. Although the use of a phone to conduct an interview can be difficult, it can be a useful resource that provides another viable medium, which has proved useful in other academic studies (see Taylor et al, 2011; Brownstein, 2012).

The online application used was MS Teams due to its security guarantees, which again, maintained confidentiality. These included two-factor authentication and encrypted data, both in transit and at rest.

3.3: Participants.
The interview participants chosen for this study were two working professionals who work/worked in the research site during the period of 2009-2019. These individuals were chosen as they would provide two different perspectives on the rural drug market in the town. This allowed for a broader scope of opinions but provided a method to find a common narrative. These individuals are described as follows:

a). A retired member of An Garda Síochana who held the rank of sergeant. This individual worked in the research site during the period of 2009-2019. This individual would provide law enforcement knowledge and would have had hands-on experience with dealing with a drug market in the area. This interview participant was valuable, as studies have highlighted how police perspectives can contribute useful insights into the workings of a drug market, as well being in contention with the opinions of those involved (see Spicer, 2018; Windle and Briggs, 2015b). However police perspectives “is also likely to be broader than any one drug user or seller’s perspective and not limited to a particular block or neighbourhood”, and their “perspective on drug markets is also more likely to be informed by known facts” (Taylor et al, 2011).
b). A local drug addiction counsellor who worked in the research site from 2009-2019 and who continues to work there. This individual shed light on whether there had been a spike in drug consumption during this period, and if he/she had seen an increase in the amount of people reporting problematic drug use or issues related to drug use or drug dealing during the time period in question. This interview may link back to work done by Van Hout, regarding an increase in drug use and availability in rural areas, as well as the increasing normalisation of drug use and a shift in youth culture (see Van Hout, 2009; Van Hout, 2011).

It was also my intention to interview the local secondary school principal of the community college in the town, which sees all young people from the research site and its surrounding hinterland between the ages of 12- and 18-years old pass through its doors. This individual would have provided useful insights into whether he/she has seen an increase in drug taking among his/her students, as well as if he/she has ever experienced students involved in drug dealing. This again links back to work done by Van Hout (Van Hout, 2009; Van Hout, 2011).

Also, as discussed in several pieces of academic research carried out in the UK as part of county lines drug dealing, the exploitation and use of children and young people to transport and sell drugs is a key theme, (see Coomber and Moyle, 2017; Spicer, 2018; Robinson et al, 2018) and so this interview would have been of great value. Unfortunately, contact could not be made with this individual, possibly due to strains on the education system caused by Covid-19.

3.4: Analysis method.
Following the interviews and their subsequent transcription, the information gathered was analysed in the search for key themes and similarities. The analysis method of this research was to compare information gained from the interviews about the rural drug market that exists in the research site to existing literature about rural drug markets in general, in the attempt to draw key similarities and/or themes from the existing literature.
As seen in the UK, research has identified a new type of drug dealing model, whereby “drug dealers are engaging in out-reach activity and travelling from their urban hub to provincial towns and cities within a wide radius of their home turf, not just to deliver their product to that location as a ‘weight’ but also to retail it there themselves” (Coomber and Moyle, 2017). Finding potential similarities to this new emergence in the UK is a key aim of this research, as there is evidence of county lines drug dealing in Ireland (see EMCDDA and Europol, 2019). However, at the time of writing, there has been no study carried out investigating potential county lines activity in Ireland, rural drug markets in Ireland or the movement of drug dealers within Ireland, making this research novel.

To learn more about the movement of drug dealers within Ireland is an important aspect of this research, as there has not been a study carried out in the Irish context that has been explicitly concerned with this. Although some studies have been carried out concerned with drug markets in Ireland, (see Windle, 2017; Van Hout, 2009; Van Hout, 2011; Kelleher et al, 2011; Bowden, 2019) none of these studies have been explicitly concerned with rural drug markets, nor the movement of the individuals involved in Irish drug markets. Again, making this research novel.

3.5: Limitations.

3.5.1: Novelty of research and academic scarcity.

There are several limitations to this research.

Although the novelty of this research may provide new insights into the workings of rural drug markets in Ireland, this novelty is also a limitation. Due to the relative scarcity of academic research into drug markets in Ireland, especially rural drug markets, this limits the material on which to compare the findings of this study.
If the interviews provide information that bears similarities to county lines drug dealing in the UK, it is again important to note that county lines drug markets operate differently based on geographical location (EMCDDA and Europol, 2019; Robinson et al, 2018). The fact that this finding can be applied to different locations within the UK may deem it plausible that there exists something completely different in Ireland. This is complicated further by the issue that different geographic locations within Ireland may operate differently to each other, thus there is international and national geographic factors to consider. This, coupled with the scarcity of academic research in this area, poses a significant challenge.

3.5.2: Sample size.
Two people were interviewed as part of this study, and although these individuals provided extremely useful insights, the sample size of this study is simply too small to gain a truly accurate representation of the rural drug market in the research site.

Another key point related to this is that the people interviewed were all working professionals, and people directly involved in the drug market, being either drug-users or drug-dealers, were not interviewed. This is a significant limitation, as the interpretations of the individuals interviewed may be very different to those who are illicitly involved in this drug market.

3.5.3: Difference in perceptions.
The difference in perception between the interview participants is a significant limitation of this study. This is perhaps highlighted most effectively in the context of the interview with the retired Garda sergeant. It cannot be denied that an interview with a member of the police force is extremely valuable, as they are often the ones who have the most legitimate contact and interaction with the illegitimate enterprise of drug dealing.

However, academic findings have highlighted how police interpretations of drug market structures, motivations and practices can differ significantly to the interpretations of those
directly involved (see Spicer, 2018; Windle and Briggs, 2015b). This was a key point to bear in mind, and due to the small sample size, the interpretations of each of the individuals interviewed may have provided an inaccurate representation of the drug market in the research site.

3.5.4: Limitations of media sources.
To gain a contextual understanding of the local drug market in the research site, media analysis was a necessary means to achieve this. Media analysis can be a double-edged sword in terms of a reference source, and although it can provide useful insights into matters on a local level, it should always be kept in mind that this material if of a journalistic nature, and is usually not academic in its findings. Media sources can be the product of biased and/or sensationalist attitudes, and so the source material should always be investigated thoroughly. Media analysis is an extremely important feature of this research, however the quality of sources should always be kept in mind.

Although the limitations of this study may seem problematic, the potential benefits outweigh these concerns.
Chapter 4: Research Site Drug Market Changes.

4.1: Demographics.
The research site for this dissertation is a small town in West Cork, Ireland, and the research is focused on the reasons for the emergence of a drug market in this area during the period of 2009-2019.

In the most recent census, this town had a population of 2,706 (Census, 2016). Regarding ethnic diversity, this population is mainly composed of people who are of Irish nationality. However, it is also composed of a multitude of different nationalities including British, Polish and Lithuanian, with the other ‘EU 28’ and the ‘rest of the world’ also being represented (Census, 2016).

Regarding economic status, most individuals were ‘At work’. However, there were 203 people unemployed, 110 people unable to work due to permanent sickness or disability, and 167 students (Census 2016).

4.2: Geography.
In the research site’s online information site, the town is described as “a bustling market town” that is “only 5 kms from the nearest beach”, described as being “the ‘hub’ of West Cork” (reference not listed).¹ It is approximately just over 1 hour by car from the nearest major urban centre, Cork city, and is also served by two dedicated bus routes that run at regular intervals throughout the day, seven days a week. These buses have different routes but the destination of both is Cork city.

The research site has seen the benefits of increasing growth and infrastructure, with many housing projects being undertaken in recent years. As part of a government investment of €300m into a nationwide social housing project, this town is among three West Cork towns

¹ Reference not listed as to maintain anonymity of research site.
set to receive 150+ new homes, with the two other West Cork towns being relatively close to
the research site. These three locations in West Cork account for eight locations nationally as
part of this plan (Irish Examiner, 2019).

4.3: Increase in illicit drug presence in research site.
Historically, cannabis has been Ireland’s most widely consumed illicit drug (Windle, 2017;
see also Van Hout, 2011). In the context of the research site, this is reflected in the news
reports, as the biggest drug seizures regarding quantity have been cannabis in its various
forms (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2019). Following the search
of a premises in the research site in 2019, Gardaí seized €13,600 worth of suspected cannabis
herb and €860 worth of suspected cannabis resin (Irish Mirror, 2019). Findings such as these
suggest a link with the import substitution hypothesis proposed by Windle regarding the
increase in drug cultivation and/or manufacture, especially cannabis. This is characterised by
Irish dealers and consumers adapting to lower incomes by producing and cultivating their
own cannabis. This is highlighted by seizure statistics, as domestic plant seizures increased
from 2004 with industrial farm seizures increasing also, going from 11 farms in 2011 to 28 in
2012 (Windle, 2017).

However, in recent years the research site in question has seen a further change, with the
increasing presence of different drugs including illegally obtained prescription drugs and
MDMA, but especially cocaine (Corkbeo, 2020; Irish Examiner, 2019; The Southern Star,
2019; The Southern Star, 2018). Both Gardaí and drug counsellors report that cocaine is now
available in every village, town and city in Ireland, as well as rural areas, and that cocaine last
saw levels of comparable use during the Celtic Tiger era, with crack cocaine now also
emerging as a growing problem in Cork (Echolive, 2020). This increased availability of drugs
in rural areas is in line with Van Hout’s findings (Van Hout, 2009; Van Hout, 2011).
The fact that levels of cocaine use in Ireland last saw comparable levels during the Celtic Tiger era is in line with findings regarding economic prosperity and increased drug consumption, especially powder cocaine, in that Ireland now has a relatively low unemployment rate meaning people have more disposable income (O’ Gorman, 2014; Windle, 2017; Van Hout, 2007; Van Hout, 2011).

The link between globalisation and social change and increased crime rates is also worth noting here (McCullagh, 1996). As societies progress, some people may be left behind, creating a marginalised, disadvantaged group of people where drug use is “tangled up with broader issues of urban social inequality” (Punch, 2005). This is relevant to the research site in question, as times of economic liberalization may have affected this town in ways described here. As well as drug use, a notable example is Limerick. Limerick became a hub nationally in the drug trade, as drug wholesalers who lived there began exploiting Limerick’s sea- and airports to import drugs, being affected by factors described by McCullagh (Hourigan et al, 2017). Given the proximity of the research site to the coastline and the dozens of inlets and remote areas it is comprised of, these geographical features may have been exploited by individuals in the area for illegitimate reasons, in response to the undermining of their legitimate working-class industries.

The planned building of 150+ new homes in the research site and the wider area as part of a nationwide social housing project is also of relevance. Although this plan is mentioned, several social housing projects have been undertaken in the research site over the years. Research suggests that some drug dealers may identity new markets after being relocated to social housing outside of their urban centre (Topping, 2014). As stated earlier, few offenders are provided with opportunities to sell drugs in unfamiliar areas, suggesting therefore that some prior connection is made between an individual or group and an area before they decide to sell there (Windle and Briggs, 2015a). The link seen by Topping between the identification
of new drug markets and social housing relocation is a valuable contribution here and may provide valuable insight into the establishment of a drug market in the research site. Van Hout’s findings are also of relevance, for as urban values are assumed in rural areas due to reasons associated with economic growth such as social housing, and rural-to-urban connections such as school, the fragmentation of traditionally cohesive rural family values ensues as a result (Van Hout, 2009; Van Hout, 2011).

4.4: Emerging drug market.
Regarding West Cork, it has been noted that the cocaine trade has been “under the spotlight of the Criminal Assets Bureau”, with a recent example of CAB seizing six cars, a Rolex watch and two Louis Vuitton handbags, as well as quantities of cocaine and cannabis (Echolive, 2020). Having attracted the attention of a state body such as CAB, this highlights the recent upsurge in the increasing presence of cocaine and a cocaine drug market in West Cork.

In the first four months of 2018, Gardaí arrested 23 drug dealers in the greater West Cork area (The Southern Star, 2018). These figures were released in response to a local West Cork councillor “who called for gardaí to redeploy manpower and resources to deal with what he called the ‘growing drug problem’ in West Cork” (The Southern Star, 2018). This local councillor expressed his concerns when he said he had been receiving complaints about the increased availability of drugs in the West Cork area, and dealing in some places had gone very public, with the research site of this study being explicitly mentioned (The Southern Star, 2018).

Citing dwindling Garda resources as a reason for the upsurge in drug availability in the West Cork area is of interest here, which is in line with findings from several studies (see Coomber and Moyle, 2017; Windle, 2017; see also Van Hout, 2009). Spicer’s discussions on symbolic policing may also be of relevance here (see Spicer, 2018).
It is also mentioned in this report that the Gardaí were working with Cork County Council in relation to properties where drugs were being sold (The Southern Star, 2018). As the research site is a popular destination for holiday homes and other irregularly used properties, it may be worth acknowledging that these properties may be under investigation for offences resembling cuckooing in the UK (see Coomber and Moyle, 2017). However, without further research, it is impossible to conclusively say this.

Another point of interest is the issue of drug dealing going very public, as well as the presence of “people on the streets and you know that they are on drugs” (The Southern Star, 2018). Dealers going public is an interesting point to consider and may be in line with other studies regarding how some individuals may see drug dealing as an entrepreneurial activity and an alternative to legitimate labour (Windle and Briggs, 2015a; see also Windle, 2017; Spicer, 2018; Bowden, 2019; Coomber and Moyle, 2017; McCullagh, 1996; Punch, 2005; Hourigan et al, 2017). The increasing sense of normalisation around drug use may also be of relevance here (Van Hout, 2009; Van Hout, 2011).

4.5: Seizures and convictions.
In the research site and the general West Cork area, there have been several examples of convictions relating to cannabis seizures (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2019; Ferry, 2011). However, in recent years, convictions relating to different drugs have begun to emerge (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2020; Southern Star, 2019; Irish Mirror, 2019; see also Ferry, 2011). The Irish Mirror’s report in 2020 highlights how the market has changed considerably, going from mainly cannabis-related crimes to a greater presence of polydrug availability, (see Bowden, 2019) as this report describes the seizure of prescription drugs valued at €900 which were purchased illegally online. This report echoes findings by Kelleher et al, who state that the proliferation of head shops and online retailers has facilitated the emergence of a range of new
psychoactive substances in Ireland (Kelleher et al, 2011; see also EMCDDA and Europol, 2019).

However, the most notable development, and the most dominant example, of new drug availability and related convictions relates to cocaine. One high profile conviction highlights this, following the discovery of a cocaine lab in a town very close to the research site in 2017 (The Southern Star, 2018).

### 4.6: A new development?
Several cocaine-related convictions have occurred in the last few years, with themes of increased intimidation and threats of violence, the use of mobile phones and different smartphone apps, willingness to travel to sell or selling to people not from the research site, and high levels of organisation (Irish Examiner, 2019; The Southern Star, 2019). These themes bear some notable similarities to county lines in the UK (see Coomber and Moyle, 2017; Windle and Briggs, 2015a; Spicer, 2018; Coliandris, 2015; see also EMCDDA and Europol, 2019).

One notable conviction worth mentioning in detail is that of a 38-year-old man from the research site. Following a search of his home, Gardaí found €1,485 in cash, €585 worth of cocaine, €55 worth of MDMA, several mobile phones, one of which had an encrypted app which contained lists of names and phone numbers, tick lists and weighing scales. This raid was the result of Garda surveillance, who reported seeing several known drug users in the area coming and going at his premises (The Southern Star, 2019). The man denied being one of the ‘big dealers’ in the town but Gardaí stated this man was involved, calling him ‘the boss’. Summing up the cocaine problem in West Cork generally, the judge said during the court case: “He’s engaged in community disservice spreading the contagion of cocaine use and it’s not far off a plague” (The Southern Star, 2019).
Highlighted by convictions of individuals in the research site related to several different drugs for the purpose of sale and supply, the research site is experiencing something new regarding a drug market. This is characterised by drugs that have entered the area that were previously unseen, the availability and prevalence of use of drugs, with cocaine seeing marked increases, and the greater sense of organisation of those involved. These factors have resulted in the manifestation of a new “plague” in the community, and for these reasons, the research site is worth further study.
Chapter 5: Findings.

The purpose of the interviews was to attempt to account for the reasons for the emergence of drug market in the research site during the time period 2009-2019. This chapter will present the findings of the two interviews in a thematic style. The themes that emerged from this primary research are as follows.

- The influence of other nationalities coming into Ireland.
- The vulnerability of rural areas versus urban for drug dealing.
- The availability of money.
- Societal change.

5.1: Demographics.

Two participants took part in this research. The first participant is a retired Garda sergeant who was stationed in the research site during the time period being studied. The second participant is a drug addiction councillor, with the research site being one of many areas in West Cork that he serves. He worked in the area during the time period being studied and continues to do so.

Each question asked was intentionally broad and open-ended, giving the research participants the freedom to answer each question in whichever way they saw fit.

For the purposes of anonymity, the retired Garda sergeant will be referred to as Mr. A and the drug addiction councillor will be referred to as Mr. B.

5.2: Influence of foreign nationalities coming into Ireland.

Both interview participants placed the emergence of a drug market in the research site and the greater West Cork area in the time period of the late 1970’s/early 1980’s. It is also important to acknowledge that neither Mr. A nor Mr. B expressed any discontent toward people of other
nationalities, but merely seemed to correlate the emergence of drugs in the area, and the subsequent drug market, with an influx of people into the area from other countries.

When asked why the drug market emerged at that time, a key theme expressed by Mr. B was the influx of other nationalities into the West Cork area. This influx resulted in “a different energy”, whereby other nationalities who were looking to get away from the “madness in their own areas” began to come to West Cork “for a bit of a haven”. As a result of this, Mr. B says that many of these individuals would have brought what they perceived to be “harmless smoke” or “harmless acid” into the area, with one area just outside the research site being mentioned as a “massive influence in terms of drug markets in West Cork and drug use in West Cork.” Mr. B makes the direct correlation of the arrival of other nationalities into the research site and West Cork with the emergence of a drug market in the area.

As time went on and the drug market in the research site and West Cork began to evolve, Mr. A expressed the interesting sentiment that in “the last 20 years obviously it has spread out to our big rural towns”, and “is in every town and village.”

When asked why or how this had occurred he said that the drugs are coming into the research site by either “people that are living in the town that… want to make a quick buck” or “foreign gangs”, saying that they are “a lot of it too”. Mr. A went on to say that other nationalities had a big part to play in the presence of drugs in the research site, saying that “there is definitely foreign gangs” at least partly responsible for this.

These individuals would be “the lower tier of the foreign gangs” who are “moving into the towns.” When asked are these individuals dealing with associates based in bigger urban centres such as Cork or Waterford, Mr. A acknowledged that yes, they are. Through his work, Mr. A describes having dealings with these individuals, saying “a lot of em would be based in urban centres, but eh, have tentacles all the way down”, describing them as “serious guys”
and having “to be very careful with them”. Mr. A describes ‘big’ gangs, both Irish and other nationalities, based in big urban centres;

“there’s tentacles everywhere, and then you have the foreigners coming in… eh, obviously… there’s gangs… don’t get me wrong, there’s gangs in every town and village I suppose, of every major town as regards, when I say gang, not walking around but as regards a drug gang that are moving stuff… / a lot of em would be based in urban centres, but eh, have tentacles all the way down. You must remember that to have a network, you have to have tentacles everywhere.”

He goes on to say that:

“if you go back over drug seizures, especially on routine stops, you’ll find a lot of it is… foreign names. / They are bringing it from Cork, they might be, they might only be caught with maybe 10,000 worth of it, but they’re moving it. They’re moving into the towns. Eh, they mightn’t be particularly selling it themselves. When I say selling it, (not) to the user, what they’re doing is they’re… distributing it to maybe locals then at that stage.”

Mr. B also makes the distinction that;

“Eh it’s absolutely got from outside the town, I don’t think there’s a whole load of people going outside the town to get it, I mean there’s probably 1 or 2. I think they’re coming back in with it and I think the town becomes awash. Em… and then in recent times I have heard because of Covid, I have heard of people commuting up to the city to get some stuff.”

Although Mr. B does not reference the nationality of the people involved, he does say that the people responsible for bringing it into the town are people living in the research site.
The arrival of different nationalities into the research site and the wider West Cork area in the late 1970’s/early 1980’s seems to correlate with the emergence of drugs and the beginnings of a primitive drug market in the research site and surrounding area. As time went on and as the market evolved, there is reference made by both Mr. A and Mr. B that it is a group of individuals travelling, or commuting, from the town to purchase drugs who are then bringing the drugs into the area. Whether or not these individuals are part of a bigger organisation based in urban centres remains unclear.

5.3: The vulnerability of rural versus urban for drug dealing.
A common narrative expressed by both Mr. A and Mr. B was the perceived vulnerability of the research site compared to big urban centres such as Cork city, or put more simply, the rural versus urban divide.

Mr. A expressed his concern regarding the quantity of drugs entering the research site and the West Cork area, viewed through the prisms of the geography of the area and the lack of Garda resources. He says;

“(It) is so easy nowadays as regards networks bringing stuff around the place and there’s so many back roads, you don’t even have to go back roads, why go back roads? Because… we don’t have the resources really. / And cars that are travelling here at night-time, or trucks or vans or… like you just can’t stop everybody, and I mean it only takes one truck to go with a tonne of cocaine.”

Mr. A goes on to say;

“I mean there must be huge amounts… I’m under no illusion that there must be huge amounts of drugs coming in along the coast here like. / I mean you’ve hundreds of miles of coastline in every little… if you take small little villages here… they have, probably,
maybe 50/60 miles of coastline when it goes in and out all the way around... maybe the same amount of piers... They’ll come in anywhere.”

Mr. B echoed the sentiment of rural vulnerability regarding resources, and the lack of a tier 2 health service in the West Cork area for people seeking help, saying that;

“(T)ier 2 services are usually about working with the youth. You have a school in [research site] that has about 1,000 students... you have a school in [neighbouring town 1] that has about 800 students, you have two secondary schools in [neighbouring town 4] that have about, I think it’s about 900 students between ‘em. Eh, there’s no... youth worker.”

Describing the gap that exists between rural areas and urban areas regarding addiction and resources, Mr. B concludes by saying;

“The city areas get a lot of... project workers and youth workers. Eh, rural areas, eh, pretty much get nothing.”

The lack of resources in the research site and the surrounding area, both from law enforcement and healthcare points of view, are major factors to consider as to why a drug market emerged, and evolved, here from 2009-2019.

Another interesting factor expressed by Mr. A is the intricate geography of the area, having a lot of back roads which would make transportation of illicit drugs easier, as well as being in proximity to the coast.

5.4: The availability of money.

The availability of money proved to be an important theme expressed by Mr. A.

When asked why drug availability has become increasingly common in rural Ireland, again referencing his previous comment of drugs now being “in every town and village”, Mr. A referenced money as a powerful factor for this. As discussed earlier, both participants placed
the first appearance of a drug market in the research site in the late 1970’s/early 1980’s. Mr. A started off by saying:

“Money, I think, when it came to the 80’s I suppose, money started becoming a little bit more flush, em… late 80’s in particular em… that eh all of a sudden wages went up and there was a bit more money.” / “(M)oney started to kinda come into it say, well, not even the late 80’s I suppose t’was the 90’s eh that money started to be a bit more, eh, people… young people in particular started to be a bit more flush and anyone that was born in the 80’s, as I said, for a long, long time they never saw a bad day. / So I suppose money was in it, and when money is flush, people start buying.”

Thus, Mr. A believes that as the amount of money that individuals had begun to rise, people had more disposable income, so some individuals began to seek out drugs as a way to spend this newfound income.

Another key point expressed by Mr. A referenced the economic downturn of 2008-2010, “where the market was there before for the people that had the money, the market suddenly went to the people that didn’t have the money.” He goes on to say;

“the social-deprived inside in towns ya know, they were… em… they were vulnerable to it. That maybe didn’t have as much money and… you must remember that maybe some of them were selling at that time… / Because they wouldn’t have been in a position to have a good paid job and they were selling drugs and… they kinda got caught up in it then as regards when there was no money then you’d often find that tis the lower sector start using.”

These social issues, and people who are “social-deprived” as Mr. A says, leads directly to the next theme expressed.
5.5: Societal change.
Changes in people’s attitudes over time, and society in general, was a major topic for both Mr. A and Mr. B.

Mr. A referenced people’s changing attitudes to ‘softer drugs’;

“I’d say, the attitude of drugs, say softer drugs, like your em… cannabis, I’d say has definitely changed. I mean there was a time, em, that it was, t’was not accepted I suppose by a lot of people. / You’re talking about a young lad smoking cannabis, and his parents are… they’re kind of saying ‘well sure tis only a bit of cannabis. At least he…’ big thing is; ‘at least he’s not on harder stuff.’”

Mr. A described how people’s attitudes are changing towards certain drugs. However, Mr. B also provided an interesting insight into how people’s motivations to use drugs are also changing. He says;

“I think the, the increase in substance use is a reflection on, in the sense of what society is kind of, how society is providing for people. Eh, and I think what society is providing for people is em… kinda toxicity stuff. / we live in a society that perpetuates more ill-feeling about ourselves. / the Facebooks, the Messengers, all of these kind of things. It creates a kind of a… self-image that yano, is… a lot of people aren’t able to kind of… fit in to, to match up to. / there’s a want to get away from that… and drugs will, will support that.”

Mr. B summarised this point effectively when he said, “as long as we focus on the drug being bad, then that’s all we’ll focus on, is the drug”. Again referencing Mr. A’s point about people who are “social-deprived”, the consequences of economic downturns such as the reduction or cessation of an individual’s income can lead to negative thoughts and bring a person’s perception of self-worth into question, and drug-taking may be a potential solution to this. This can in turn lead to an increase in demand for drugs in the area, thus providing a market.
This increasing market is reflected in Mr. B’s comments describing the issues he regularly sees when he said:

“I’m gonna say probably 1 in every… 2 is alcohol… I’d say probably 1 in every maybe 3, maybe 4, maybe 5 would be cocaine… probably 1 in every 3 would be weed. / And probably I’d say 1 in every maybe 6, maybe 7 could be benzos.”

5.5.1: Age of users.
Mr. A described how people’s attitudes are changing as generations move forward;

“With cannabis they’ll openly say it to you. Cocaine here I’d say the perception would be, the generation of say the 25 year olds onwards, or maybe say 30 years, would be a little bit wary of it, em, but the young people their perception of it is just it’s a recreational drug, not realising the consequences it can have.”

Mr. B echoed this sentiment, as he described how individuals coming to see him who use cocaine are getting younger;

“(I)t’s been here since I got here in 2010, but not as much… as in the last 4 or 5 years. / I suppose in the sense of there’s 18- and 19-year olds coming into me now who are using it. I’ve heard of people yano, people using it on their lunch break.”

5.5.2: Continuing societal changes.
As Mr. A described society’s changing attitudes and increasing acceptance of certain drugs, this poses new, worrying challenges for the future. He went on to describe how cannabis can often act as a gateway drug for users to seek out more powerful drugs;

“(T)he difference between the 70’s and now, or in the last 10 years, is… the… the strength of the drug. You’re talking about cocaine, you’re talking about heroin. / it started I suppose maybe 15, 20 years ago where there was recreational use of, of em cocaine, and it
is finally getting… I suppose it’s now the recreational drug of choice. / when the high goes out of that cannabis… you’re gonna try for the cocaine.”

As time moves on, and if this trend continues, Mr. A says regarding continually changing attitudes towards more extreme drugs; “I think attitudes will get… will kinda… come around to that again and we’ll go on to the next thing.”

A good example of this phenomenon is heroin. Mr. A described the presence of heroin in the research site and the West Cork area as slim, however Mr. B provided two interesting reasons for this. Mr. B says;

“When someone comes into me with a heroin piece, em, because of the nature of the drug, it often, not all the time but often, requires a more medical model. / if somebody comes into me, I normally refer them to Arbour House / So I think there may be a case of that there may be a kind of em, a kind of a bit of knowledge out there that there’s no point in going to rehab because we just go straight to Arbour House.”

The second reason he says;

“(A)nother reason is that I just think it’s very secretive down here. Heroin use is still in the city, it’s a little bit more open and out there, in West Cork it’s… deemed very dirty. / So I think there’s a huge stigma to it and I think… it’s kept a lot quieter. Is it down here? No doubt. Is it down here to the level of the others? I don’t think so.”

This highlights the differences between certain drugs, such as heroin, on an urban versus rural level, whereby heroin is more widely and openly used in the city compared to rural areas, therefore making it more acceptable to the user and wider society.

Several main themes began to appear from the two interviews carried out. Some points were exclusive to either Mr. A or Mr. B, but there were some points made where the two
participants echoed each other. Although the number of interviews carried out are too few to gain conclusive answers, there are some powerful potential answers as to how and why a drug market emerged in the research site during the period of 2009-2019.
Chapter 6: Discussion.

The objective of this research was to account for the possible reasons as to how and why a drug market emerged in the research site during the period of 2009-2019. As the results of the interviews highlight, there are some powerful sentiments expressed by both Mr. A and Mr. B to account for this. The dynamic of foreign nationalities, money, rural vulnerability and hippie communes all have their part to play, both independently and in harmony. This chapter will now delve deeper into these sentiments and relate them back to existing literature and media reports.

6.1: The dynamic of foreign nationalities.

6.1.1: Origins.
Regarding the beginnings of a drug market in the research site, both Mr. A and Mr. B referenced people of other nationalities coming into the area in the 1970s and 1980s. This is in line with other findings, whereby drug markets began to emerge in Cork and other counties outside Dublin in the 1980’s (Hourigan et al, 2017). This is highlighted most effectively by an “influx of hippies” into the research site in 1986, individuals who came from England and Europe in search of a quiet, “alternative way of living”, or as Mr. B put it, to get away from the “madness in their own areas.” This happened throughout Ireland but especially in West Cork (RTÉ Archives, 2016).

Perhaps this influx of new ideas, values and practices also brought a new drug scene into the area that had not been seen before, as the recreational use of hallucinogenic drugs, especially marijuana and LSD, was promoted, or as Mr. B put it “harmless smoke” or “harmless acid”. In the West Cork context, this may also explain why some drugs, especially cannabis, is pretty much accepted as a form of recreation today, as it has simply been around the longest in society. Mr. A referenced this when he described his own feelings towards cannabis;
“(I)f I heard my young fella was smoking cannabis, I would definitely try and advise him not to but I mean at the end of the day, I’d be kinda looking and saying at least it’s one of the weaker ones.”

This suggests that as people of foreign nationalities moved into West Cork in the 1980s, bringing practices such as normalised drug use with them, they introduced the area to something that had not been seen before and consequently were the origin of a primitive drug market in the research site and wider West Cork area. It is important to state that this may not have been these individual’s intentions, as it may have started out as personal recreation. However, it is probable that some individuals may have begun giving away or selling “harmless smoke” or “harmless acid” to locals in the area in a passive, friendly style of exchange, rather than an aggressive, enterprising fashion. This bears resemblance to a concept of ‘social supply’, described as “drug transactions that are almost exclusively to friends and acquaintances and that are non-commercially motivated” (Coomber and Moyle, 2014). This supply model is concerned with sharing the experience of the drugs rather than for financial gain, and aptly describes the supply model that was in place in the research site at the time.

6.1.2: Mutation.
Cannabis has endured regarding its presence in the research site, with convictions related to more industrial forms of cultivation being extensively covered in the media (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2019). Historically speaking, cannabis has been Ireland’s most consumed illicit drug, and is also true for the research site (Windle, 2017). However, as time went on, new drugs began to appear in the area, non-psychedelic drugs that would not have been endorsed by hippie culture. Media reports highlight this (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2020; Southern Star, 2019; Irish Mirror, 2019). Mr. A also referenced this by saying that:
“heavier drugs started to come in on the scene… in the early 80’s, mostly in the cities. / (I)f you go the last 20 years obviously it has spread out to our big rural towns. Now if the information that I’m hearing is right, it is in every town and village.”

One key observation to take from this is how the market shifted away from a passive, friendly style seen in the research site in the 1980s, towards a more aggressive, enterprising one in the last 20 years, as “heavier drugs” have made their way from the cities into rural areas. The most prevalent example of this is cocaine, and as described earlier, cocaine has become a major problem in West Cork, with the research site being explicitly mentioned (The Southern Star, 2018).

As highlighted in previous studies “the importation and wholesale distribution of drugs remain dominated by Irish nationals linked to actors with access to source countries” (Connolly and Donovan, 2014, as cited in Windle, 2017). Although this may still be the case, the emphasis placed on foreign actors in rural areas by both Mr. A and Mr. B cannot be ignored, and may point to a novel development, at least in terms of rural areas. This is highlighted in the cannabis factories shut down in previous years in the West Cork area, as it was “mainly Asian gangs, including the feared Chinese Triads, who’ve had factories shut down so far” (Ferry, 2011). This is in line with other findings, as large-scale cannabis cultivation in Ireland has been historically associated with Asian cultivators (EMCDDA, 2013; Irish Examiner, 2015; Migrant Rights Centre, 2014; PSNI and An Garda Síochána, 2014; as cited in Windle, 2017).

As discussed, the origin of a drug market in the research site and the West Cork area seemed to have its primitive beginnings as a result of people of foreign nationalities moving into the area. Perhaps the movement of “heavier drugs” such as cocaine into the research site and West Cork had similar origins, but with a more enterprising intent. As discussed earlier, the research site is among three West Cork towns set to receive 150+ new homes as part of a
nationwide social housing project worth €300m (Irish Examiner, 2019), and as highlighted by Van Hout, urbanisation offers new potential pathways for drugs to enter rural communities, leading to higher drug availability (Van Hout, 2009; Van Hout, 2011; see also Kelleher et al, 2011). Perhaps housing projects such as these that have occurred in the research site over the years reinforce Van Hout’s findings, and the continuing urbanisation of the research site is continuously creating new pathways for drugs to enter the community, as individuals who are so inclined are drawn to the research site as a drug dealing location.

As stated earlier, few offenders are provided with opportunities to sell drugs in unfamiliar areas, suggesting therefore that some prior connection is made between an individual or group and an area before they decide to sell there (Windle and Briggs, 2015a), with some drug dealers identifying new markets after being relocated to social housing outside of their urban centre (Topping, 2014). Some individuals may have begun drug dealing in the research site following their relocation there from urban settings, or perhaps just holidaying, possibly explaining the upsurge in drug variety. The holidaying aspect is an interesting one, as “Drug gangs have been renting isolated farms left empty by the recession and holiday homes to set up their operations” (Ferry, 2011). This may point to these individuals engaging in some form of reconnaissance prior to setting up their operations, something which bears some resemblance to county lines in the UK.

During his interview, Mr. A described dealing with individuals of certain foreign nationalities in the research site through his work, saying “you deal with them differently than you do with the local”, describing them as “serious guys” and having to be “very careful with them”.

Spicer’s work is of relevance here, as the increasing use of violence associated with county lines groups to intimidate local dealers when they first move in has become associated with these groups (Spicer, 2018). Mr. A went on to say that “a lot of em would be based in urban
centres, but eh, have tentacles all the way down.” It is important to point out that the individuals referred to are part of a small minority, as studies have shown that there is no distinct link between an individual’s likelihood to commit a crime and their nationality (Jaitman and Machin, 2013; see also Caviedes, 2018).

Mr. A harrowingly says:

“It’s coming in by either people that are living in the town that… want to make a quick buck or… foreign gangs. There is foreign gangs… you have a lot of foreigners in every town now and a lot of them are associated with gangs. / They are bringing it from Cork, they might be, they might only be caught with maybe 10,000 worth of it, but they’re moving it. They’re moving into the towns.”

As discussed in the literature review, rural areas are considered attractive for drug dealers for several reasons, including their urban markets may have become saturated (Windle and Briggs, 2015a), urban-based dealers may seek to expand their business and strive for profit maximisation (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018; Bowden 2019), there is less competition from rival dealers in areas with unestablished drug markets (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018) and there is an increased sense of anonymity that comes with the distance from their base of operations (Coomber and Moyles, 2017; NCA, 2015; see also Van Hout, 2009; Van Hout, 2011; Windle and Briggs, 2015a; Kelleher et al, 2011)

Statements such as the one provided by Mr. A, and the interactions he had with these individuals through the course of his work, point to a more organised, commercial and aggressive form of drug dealing that has moved into the area. This minority of individuals might have a “legit job” but may be part of a gang that have their roots in urban centres, such
as Cork city, who have expanded their drug dealing operations following their relocation to the research site.

6.2: Money and recession.
As discussed earlier, two reasons among others as to why rural areas are considered attractive for drug dealers is a reduced police presence due to economic downturns (Windle, 2017), and straining social and/or economic circumstances (Windle and Briggs, 2015a; Coomber and Moyle, 2017; see also McCullagh, 1996). As studies have shown, recession and economic downturns can increase drug use and/or dealing (Storti et al, 2011), and this is also supported by strain theory, whereby the means of achieving cultural goals set during times of economic prosperity are not present, and drug dealing may be a possible response to this (Merton, 1938).

During times of economic prosperity in Ireland, drug consumption increased, especially of powder cocaine (see O’Gorman, 2014; Van Hout, 2007). In contrast, during times of economic downturns in Ireland, it was seen that drug use and dealing reduced, while the cultivation and manufacture of drugs increased (Windle, 2017). These findings are supported in the context of the research site and wider area, as the most consistent convictions relate to cannabis seizures in a cultivation aspect (Irish Examiner, 2019; Southern Star, 2018; Irish Mirror, 2019). However, in recent times the manufacture of other drugs has been noted, following the discovery of a cocaine lab in a town near the research site in 2017, (The Southern Star, 2018) and the shutting down of cocaine and heroin operations (Ferry, 2011).

During times of austerity and prosperity, we see a pattern of differing types of drugs used, cultivated and/or seized. In the research site, this is characterised by an increase in the presence of cocaine during times of economic prosperity, which has been noted in 2020, whereby cocaine last saw levels of comparable use during the Celtic Tiger era (Echolive,
The discovery of the cocaine lab also highlights this. In times of economic downturns, cannabis is the main drug being seized, correlating with Windle’s findings (Windle, 2017).

To possibly account for this, criminological research has suggested that “crime is most prevalent in societies that permit large disparities in the material standards of living of its citizens” (Hsieh and Pugh, 1993; Kawachi et al, 1994, as cited in Kawachi et al, 1999). During economic downturns, rural areas such as the research site may be particularly hit as a lot of them would depend on the tourism sector for income, and during times of economic hardship, income from the tourism sector may wilt or indeed dry up. This may result in individuals experiencing relative deprivation, whereby the means to achieve culturally-set goals are not present, and illegitimate endeavors such as drug-dealing or manufacture may seem like the only option for a minority of people (see Merton, 1938). This is characterized by the discovery of the cocaine lab and the numerous cannabis seizures. (The Southern Star, 2018; Irish Examiner, 2019; The Southern Star, 2018; Irish Mirror, 2019).

In the context of the research site, the debate between rural versus urban areas, or ‘us’ and ‘them’, may still be an issue for some people, and when some people in rural areas who are struggling see individuals in urban areas who are prospering, it may push them to pursue illicit enterprises.

### 6.3: Rural vulnerability.

In an article titled ‘West Cork No. 1 for drugs factories’ published in 2011, it stated “There are more dopes in West Cork than anywhere else in the country”, with second place going to the South Dublin District. Most of the factories shut down were associated with cannabis, but other seizures included cocaine and heroin (Ferry, 2011). Coming from a vulnerability aspect, rural areas are attractive to drug dealers because there is less competition from rival dealers due to unestablished drug markets (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018), and so urban-based dealers may seek to
expand their business and strive for profit maximisation (Coomber and Moyle, 2017; EMCDDA and Europol, 2019; Windle and Briggs, 2015a; Spicer, 2018; Bowden 2019). The research site and surrounding area is vulnerable to drug dealers and drug dealing for several reasons.

6.3.1: Geography.
The research site and surrounding areas are connected by several national roads, however a plethora of ‘back’ roads outnumber these. These can be quiet, dimly lit and rarely used, and provide the perfect means of navigation for a would-be smuggler. Mr. A referenced this by saying:

“(It is) so easy nowadays as regards networks bringing stuff around the place and there’s so many back roads… / cars that are travelling here at night-time, or trucks or vans or… like you just can’t stop everybody and I mean it only takes one truck to go with a tonne of cocaine.”

As well as this, the research site is situated very close to the coast, and with “hundreds of miles of coastline” that could be utilised by smugglers, this provides the perfect backdrop to smuggle drugs into the country. As Mr. A says, he is under “no illusion that there must be huge amounts of drugs coming in along the coast here”. Perhaps the most famous example of this, one unlucky enough to get caught, was the seizure of €440 million worth of cocaine off the West Cork coast in 2007, which was destined for Ireland (Independent.ie, 2008).

The desolate, lonely places that litter the coastline of West Cork are a dream for a would-be drug smuggler or dealer, and the research site and surrounding area have become flooded with drugs in recent years, especially cocaine, possibly due in part to this unique geography. As highlighted by Windle, “Ireland is predominantly a destination market for illicit drugs, although some traffickers use the country to tranship drugs to Britain” (Windle, 2017). Having a coastline that is so erratic, wild and geostrategic, as well as being one of the first
landmasses hit by trans-Atlantic travellers, makes West Cork an attractive destination for illicit drugs, either to be retailed locally, nationally or to be transhipped for delivery to Britain or mainland Europe. As Ferry puts it, “They used to produce their deadly wares out of housing estates or anonymous-looking warehouses on vast city-centre industrial parks, but now it seems they prefer the country air” (Ferry, 2011).

6.3.2: Lack of resources.
Both Mr. A and Mr. B made strong reference to the lack of resources in West Cork, these being policing and drug addiction services respectively. This is again linked to money and the economic situation at the time, whereby rural areas are deemed attractive to drug dealers due to reduced police presence and straining economic/social circumstances.

Mr. A, when referencing the ease of an individual to transport drugs around West Cork using back roads, is also quoted in saying:

“(It) is so easy nowadays as regards networks bringing stuff around the place and there’s so many back roads, you don’t even have to go back roads, why go back roads, because… we don’t have the resources really.”

West Cork suffered a spate of Garda station closures in the past 10 years, with seven being closed over the two-year period of 2012-2013 (The Southern Star, 2015). Echoing the sentiments of Mr. A., these closures reduced the amount of Garda resources in the West Cork area, which may in turn have attracted the attention of drug dealing ‘entrepreneurs.’ This could possibly be highlighted by the media sources provided, as many of the high-profile seizures and convictions occurred in the latter half of the past decade.

Mr. B also referenced the lack of healthcare resources in the context of his profession, saying:
“The city areas get a lot of… project workers and youth workers. Eh, rural areas… pretty much get nothing. So therefore you can expect then that they will be a rise in substance use…”

The lack of attention on healthcare can deem the research site and West Cork area attractive to drug dealers to set up business, due to a stable and ever-growing customer base caused by a lack of healthcare and professional help for those dealing with addiction. In the context of county lines in the UK, we have seen how vulnerable and marginalised populations are systematically targeted and exploited (Coomber and Moyle, 2017). Perhaps the research site and West Cork area were seen to be vulnerable with marginalised populations due to a lack of professional resources in the area.

Echoing the findings of Van Hout on how society is moving towards a general acceptance of recreational drug use among young people, Mr. B says he has encountered 18- and 19- year olds coming into his office who reported using cocaine on their school lunch break (Van Hout, 2011; see also Van Hout, 2009; Bowden, 2019). Mr. A also acknowledges this, saying how the generation below 25 to 30 years of age view cocaine particularly as just a form of recreation.

The research site and the West Cork area are at an increased risk of drug dealers moving into the area to retail drugs. The combination of intricate road systems and miles of coastline filled with isolated inlets and landing spots make West Cork an extremely attractive destination for illicit drugs. As well as this, the lack of Garda resources makes this unique geography even more appealing, as there is nobody to police these areas. The lack of addiction services makes the research site attractive also, as without an adequate healthcare service, the individuals who use these drugs are more likely to fall into addiction when these
drugs hit their market. Mr. A summarises these points effectively when describing how vulnerable the research site is to individuals who wish to set up a drug operation:

“It is wide open for them… / They’ll come in anywhere… / (It’s) very easy to get in.”

6.4: Hippies/Communes.
Linking back to subsection 5.1.1, the issue of hippies moving to West Cork and the setting up of communes, or ‘alternative living’ arrangements, may make the drug market in the research site unique to the area. As discussed earlier, it is highly probable that the first drugs seen in the area were sold in a passive and friendly way, which is in line with the peaceful hippie subculture. This indicates a more consumer led approach and not an aggressive, enterprising model that is common in drug markets today. These individuals were not aggressively selling their product and were not involved in large-scale cultivation or manufacture that has become increasingly common today. Perhaps as time went on, these individuals expanded their operations as demand increased, as cannabis cultivation has persisted to be a problem as seizures highlight.

However, an interesting sentiment expressed by Mr. B highlights how the attitudes of these individuals who moved to the area in the 1980s may have persisted to the present today. When talking about heroin he describes how he doesn’t see it that often, and one explanation he gives for this is that he believes it is very secretive in the research site and wider area. He says it is “deemed very dirty” in West Cork compared to the city, where it is a “little bit more open and out there”, and there is “no doubt” that heroin is in the area but not “to the level of the others.”

This attitude of people in the area may serve to be a deterrent to drug-pushing individuals who may wish to bring heroin into the research site and West Cork, thus preventing it from gaining a foothold. As seen in the U.K in the context of county lines, heroin has ravaged
communities where it has managed to make its way into rural areas and towns. This has so far not happened in Ireland, and the West Cork context may explain this; people’s attitudes are still very much against “heavier”, “dirty” drugs such as heroin, preventing a market being established. It is still seen as a ‘city’ drug, and media representations of it may have already made up the minds of rural individuals. ‘This drug is “very dirty” and we don’t want that kind of thing down here’.
Chapter 7: Conclusion.

The overall research aim of this dissertation was to account for the reasons as to why and how a drug market emerged in the research site from the period of 2009-2019. Several reasons were discussed in detail in chapter 5 to account for this, using material gathered from interviews, in depth media analysis and existing literature.

The findings of this research suggest that the emergence of a drug market in the research site has its roots in a variety of factors. Historically speaking, an influx of foreign nationalities into the area in the 1980s, namely hippies, brought with it a new culture of drug taking, characterised by psychedelic drugs such as cannabis and LSD. This drug selling followed a ‘social supply’ model, where the shared experience of the drug was prioritised over monetary gain (Coomber and Moyle, 2014). This development created a somewhat-unique dynamic for the area, where drug use became normalised in society, something that is still felt to a certain extent in the area today.

As time went on, this original drug market moved from a ‘social supply’ model to a more enterprising, aggressive one, characterised by the presence of new, non-psychoactive drugs such as cocaine, and an increased sense of violence, as highlighted by Mr. A.

The research suggests that the geostrategic nature of the research site and West Cork, coupled with a lack of professional resources, makes this area very attractive for drug dealers to be utilised for drug smuggling, cultivation and selling. This is highlighted by several high-profile seizures. This could be a potential cause of ‘The Balloon Effect, whereby pressure put on drug markets in urban areas by law enforcement may have forced these groups into rural areas (Windle and Farrell, 2012). This factor also relates to the issue of the minority of people of foreign nationalities, as interview results point to foreign gangs that are based in urban centres expanding into the attractive solitude of rural areas.
An overarching factor that ties a lot of this together is economics, as the research suggests that there still exists some form of divide between urban and rural areas when it comes to resources. As the interviews illustrate, the research site is not equipped to deal with the ever-growing problem of drug dealing and drug addiction, with an ever-dwindling police presence and under-resourced addiction service. This could prove to be a pivotal factor for the future.

Thus, the issue of rural drug markets in Ireland deserves more scrutiny and attention, as the evidence gathered through this research suggests this phenomenon is continuing to evolve and expand, while professional aspects such as policing, healthcare and addiction services are continuously being under-resourced. Further policy drafting should bear this in mind, especially when it comes to rural areas.

Future research should include a bigger interview sample, as the sample size in this research was too small to conclusively draw a wider picture for drug markets in rural Ireland, the movement of drug dealers within Ireland, and the investigation into county lines style drug dealing in Ireland. However, the findings of this research regarding a drug market in the research site bear some striking resemblances to county lines drug dealing, something which may serve to inspire future research.

As well as a bigger sample size, a more diverse sample is also needed. Research into the area of rural drug markets should incorporate not only working professionals, but also individuals who are involved in the illicit enterprise of drug selling, as well as drug users. This is needed to gain a more accurate perspective as to the reality of the situation both in the research site and further afield in terms of drug markets.
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