

HEROIN

KEY POINTS

- Both the number and weight of heroin detected at the Australian border decreased in 2015–16.
- In the first six months of 2016, heroin profiling data identified South-East Asia as the sole source region of analysed border seizures.
- The weight of heroin seized nationally this reporting period decreased, while the 2 081 national heroin seizures in 2015–16 is the highest reported in the last decade.
- While the number of national heroin arrests decreased in 2015–16, it is the second highest number reported in the last decade.



MAIN FORMS

Opiates are naturally occurring alkaloid compounds found in the opium poppy (*Papaver somniferum*). Belonging to the opiates group, heroin is derived from morphine, a drug present in the sap extracted from the seed pod of the opium poppy. Illicit cultivation of the opium poppy occurs on a large scale in the three primary regions of South-West Asia (known as the ‘Golden Crescent’¹), South-East Asia (known as the ‘Golden Triangle’²) and Latin America (primarily Mexico and Colombia; UNODC 2016).

Morphine extraction begins with scraping or scoring the unripened poppy seed pod to produce a thick liquid sap. The sap, which hardens on standing, is then referred to as opium, from which the drug morphine is extracted. Morphine is manufactured into heroin base through a chemical process involving acetic anhydride. The heroin base is then treated with hydrochloric acid, resulting in the water soluble salt form of the drug—heroin hydrochloride (EMCDDA 2015; Zerrell et al 2005).

The two most common forms of heroin found in Australia are powder and rock, which are usually white or off-white in colour. Although heroin is sometimes graded according to its colour, this is not a definitive or reliable method of assessing the origin or purity of the drug. Unrefined heroin base is rarely found in Australia. ‘Homebake’ heroin is a crude form of heroin made from codeine extracted from pharmaceutical products. Heroin is most commonly dissolved and injected. Alternative methods of administration include smoking, swallowing or snorting, heating and inhaling the fumes—a practice known as ‘chasing the dragon’—or added to cannabis or tobacco (ADF 2016).

There are four main grades of heroin, which have different utility and desirability in the Australian market. Grades 1 and 2 refer to heroin base, which is essentially unprocessed heroin not commonly encountered in Australia. Grade 3 heroin is more refined and less granular in appearance. Considered unsuitable for injection, it is most commonly heated and the vapours inhaled. Grade 4 heroin is the purest form. Easily dissolved and usually injected, it is the most common grade used in developed countries (Booth 1998).

Heroin is a depressant drug, which initially suppresses pain-signalling nerves and brain centres that control the respiratory system. Following initial administration, users may report a surge of euphoria, referred to as ‘the rush’. This is usually accompanied by a warm flushing of the skin, dry mouth and a heavy feeling in the extremities. Heroin overdose can occur even when small amounts are taken and are often the result of suppressed respiration. Additional short-term effects of use may include slowing of mental processes, irregular heart rate, respiratory depression, unconsciousness and in some instances, death. Long-term effects of use may include permanent neurochemical and molecular changes in the brain, depression, memory impairment, weight loss, infection of the heart lining and valves and rheumatological problems (ADF 2016; NIDA 2014).

1 The Golden Crescent encompasses large areas of Afghanistan and parts of Pakistan.

2 The Golden Triangle encompasses the border regions of Myanmar, Thailand and Laos.



INTERNATIONAL TRENDS

Globally, opium is produced illicitly in nearly 50 countries. Afghanistan remains the world's largest opium and heroin producer. In 2016, the estimated total area under opium poppy cultivation in Afghanistan was 201 000 hectares, an increase of 10.0 per cent on 2015 estimates. The number of poppy-free provinces in Afghanistan decreased in 2016, from 14 to 13. In 2016, the Southern region accounted for 59.0 per cent of total opium cultivation, followed by the Western region (25.0 per cent) and Eastern region (9.0 per cent). Combined, the Northern, North-Eastern and central regions account for the remaining 7.0 per cent. Afghanistan's potential opium production was estimated at 4 800 tonnes in 2016, an increase from the estimated 3 300 tonnes in 2015. This increase is primarily driven by the higher opium yield per hectare, which increased 30.1 per cent, from 18.3 kilograms in 2015 to 23.8 kilograms in 2016 (UNODC 2016; UNODC 2016a).

South-East Asia is a major source of opium and heroin, particularly for South-East Asia and Oceania. In 2015 the potential opium production of Myanmar was estimated at 650 tonnes. Over the period 1998–2014 opium production in Latin America more than doubled, with the potential opium production in 2015 estimated at 500 tonnes (UNODC 2016; UNODC 2016a).

According to the 2016 World Drug Report, 536 tonnes of opium, 81 tonnes of heroin and 21 tonnes of illicit morphine were seized globally in 2014. Compared with figures reported in 2013, this represents a 17.0 per cent decrease in the weight of opium seized, a 5.0 per cent increase in the weight of heroin seized and a 46.0 per cent decrease in the weight of morphine seized. South-West Asia accounted for the greatest proportion of the weight of opiates seized globally in 2014, followed by Europe. The Islamic Republic of Iran accounted for the greatest proportion of global opiate seizures at a country level in 2014, accounting for 75.0 per cent of opium seizures, 61.0 per cent of morphine seizures and 17.0 per cent of heroin seizures (UNODC 2016).

The total number of heroin seizures by World Customs Organization (WCO) agencies decreased 5.3 per cent, from 1 328 in 2014 to 1 257 in 2015. The weight of heroin seized decreased 50.6 per cent, from 11 467 kilograms in 2014 to 5 661 kilograms in 2015. The United States (US) accounted for the greatest proportion of both the number and weight of heroin seized in 2015, accounting for 55.4 per cent of the number and 44.8 per cent of the weight (WCO 2016).



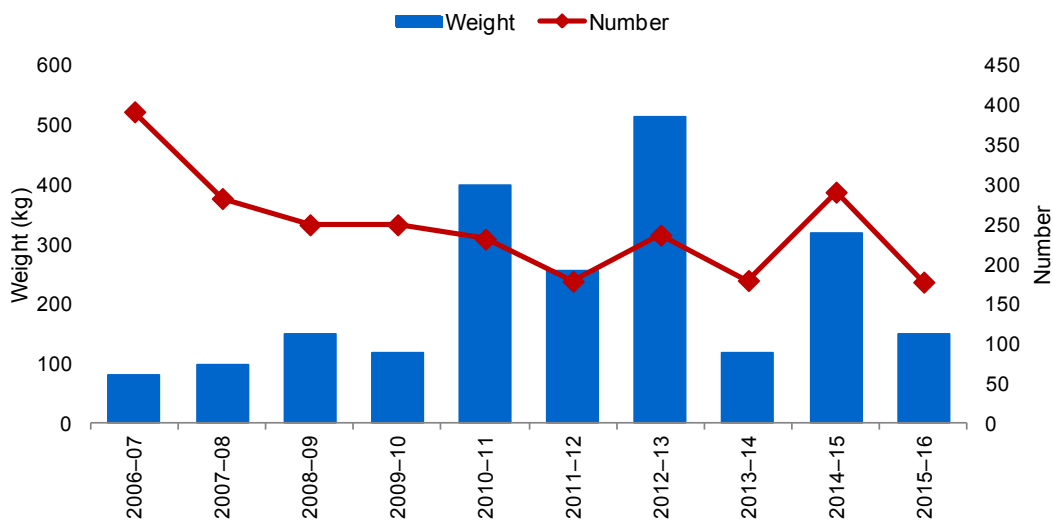
DOMESTIC TRENDS

AUSTRALIAN BORDER SITUATION

Consistent with trends over previous reporting periods, following increases in 2014–15 both the number and weight of heroin detections at the Australian border decreased in 2015–16. The number of heroin detections decreased 38.8 per cent this reporting period, from 291 in 2014–15 to 178 in 2015–16. The weight of heroin detected this reporting period more than halved, from 318.7 kilograms in 2014–15 to 149.7 kilograms in 2015–16 (see Figure 35).

In 2015–16, 29 heroin detections weighed one kilogram or more. With a combined total weight of 132.6 kilograms, these 29 detections account for 88.6 per cent of the weight of heroin detected at the Australian border this reporting period.

FIGURE 35: Number and weight of heroin detections at the Australian border, 2006–07 to 2015–16 (Source: Department of Immigration and Border Protection)



SIGNIFICANT BORDER DETECTIONS

Significant border detections of heroin in 2015–16 include:

- 20.5 kilograms of heroin detected on 3 June 2016, concealed in knee and arm pads, via international mail from Thailand to Melbourne
- 18.0 kilograms of heroin detected on 18 October 2015, packed in luggage, via air passenger/crew from Malaysia to Melbourne
- 10.8 kilograms of heroin detected on 10 March 2016, via air passenger/crew from Vietnam to Sydney
- 10.0 kilograms of heroin detected on 15 November 2015, concealed in cardboard boxes, via air cargo from Thailand to Sydney
- 8.0 kilograms of heroin detected on 6 November 2015 via air cargo from Thailand to Sydney.

These 5 detections have a combined weight of 67.3 kilograms and account for 45.0 per cent of the total weight of heroin detected at the Australian border in 2015–16.





IMPORTATION METHODS

While detections of heroin at the Australian border occurred in the air cargo, air passenger/crew and sea cargo streams this reporting period, the majority occurred within the international mail stream, in weights ranging from 20.5 kilograms to less than one gram.

In 2015–16, the international mail stream accounted for 79.8 per cent of the number and 37.1 per cent of the weight of heroin detected at the Australian border. Detections in the air cargo stream accounted for 15.2 per cent of the number and 38.9 per cent of the weight of heroin detected this reporting period (see Figures 36 and 37).

FIGURE 36: Number of heroin detections at the Australian border, as a proportion of total detections, by method of importation, 2015–16 (Source: Department of Immigration and Border Protection)

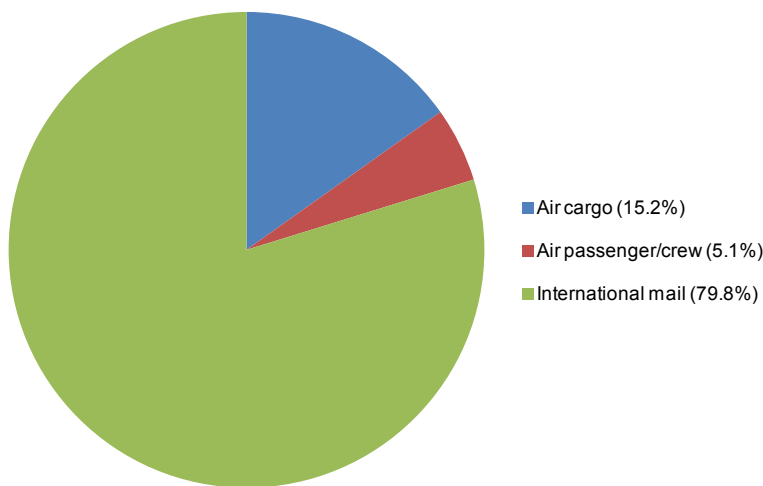
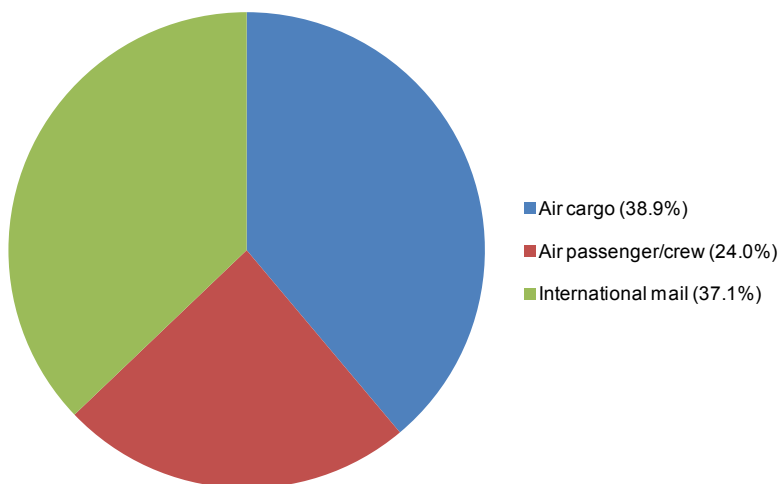


FIGURE 37: Weight of heroin detections at the Australian border, as a proportion of total detections, by method of importation, 2015–16 (Source: Department of Immigration and Border Protection)



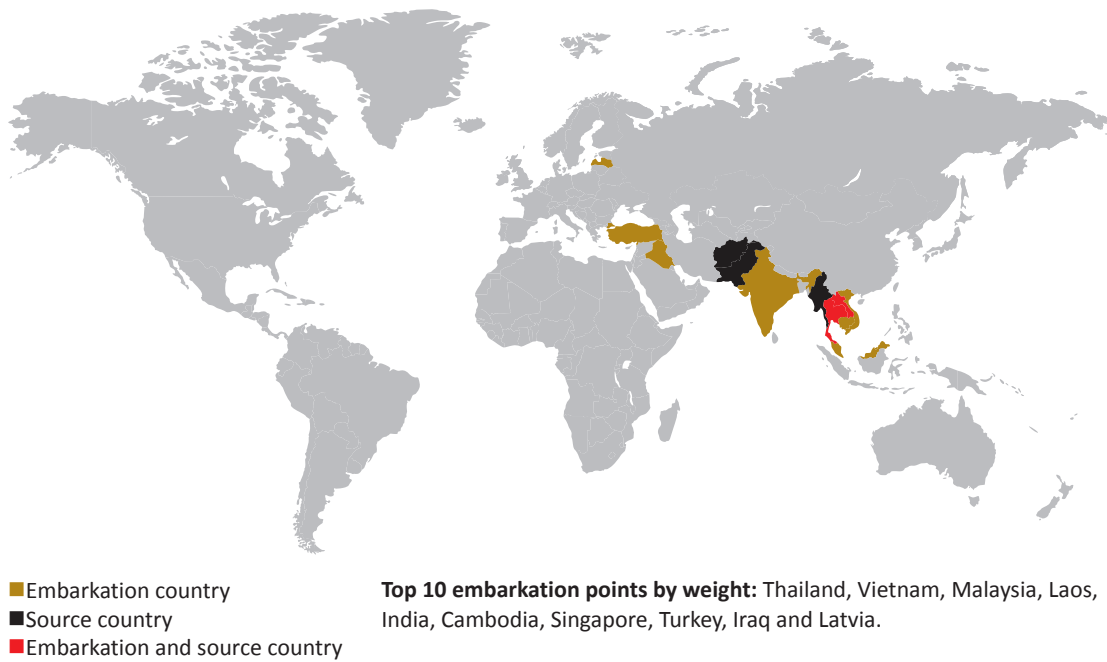
EMBARKATION POINTS

In 2015–16, 23 countries were identified as embarkation points for heroin detected at the Australian border, compared with 27 countries in 2014–15.

By number, the Netherlands was the primary embarkation point for heroin detections in 2015–16, with 59 detections. Other key embarkation points this reporting period include Thailand (23 detections), Vietnam (19 detections) and France (13 detections). Combined, these 4 embarkation points account for 64.0 per cent of the number of heroin detections at the Australian border in 2015–16.

By weight, Thailand (84.9 kilograms), Vietnam (22.7 kilograms) and Malaysia (20.2 kilograms) were the most significant embarkation points for heroin detected at the Australian border this reporting period. Combined, these 3 embarkation points account for 85.4 per cent of the weight of heroin detected at the Australian border in 2015–16 (see Figure 38).

FIGURE 38: Key source countries and embarkation points for heroin detections, by weight, at the Australian border, 2015–16





DRUG PROFILING

The Australian Federal Police (AFP) Forensic Drug Intelligence (FDI) team operates a forensic drug profiling capability through the National Measurement Institute (NMI), which enables the identification of the regions of origin and manufacturing trends for samples of heroin submitted from seizures made at the Australian border. The capability also allows for comparisons within and between seizures to identify distinct batches of drugs, or to demonstrate links between groups involved in illicit drug manufacture or trafficking. The following data relates to seizures investigated by the AFP between 2005 and June 2016, and from which samples were submitted to the NMI for routine analysis and profiling.³

Heroin originating from South-East Asia continues to dominate AFP seizures. Compared with 2014, there was a dramatic decrease in the number of seizures and total bulk weight in 2015, with a total of 27 seizures totalling 71.9 kilograms. This is the lowest number of seizures and bulk weight of heroin seized since 2007. During the first six months of 2016 there were 26 heroin seizures, with a total bulk weight of 93.0 kilograms. All 2016 heroin seizures profiled to date originated from South-East Asia (see Tables 15 and 16).

TABLE 15: Geographical origin of heroin samples as a proportion of analysed AFP border seizures, 2008–June 2016⁴ (Source: Australian Federal Police, Forensic Drug Intelligence)

Year	South-East Asia %	South-West Asia %	South American %	Unclassified %	South-East Asia & Unclassified %	South-West Asia & Unclassified %
Jan–Jun 2016	100.0	–	–	–	–	–
2015	77.8	18.5	–	3.7	–	–
2014	52.2	37.0	–	2.2	4.3	–
2013	74.6	18.2	5.5	–	1.8	–
2012	70.7	25.9	–	3.4	–	–
2011	49.0	51.0	–	–	–	–
2010	63.8	27.5	–	5.8	–	2.9
2009	53.9	42.6	–	3.4	–	–
2008	44.1	44.1	–	11.8	–	–

³ Profiling data relate to seizures investigated by the AFP between 2005 to June 2016, and from which samples were submitted to the National Measurement Institute (NMI) for routine analysis and profiling. Improvements in information technology have brought about changes to how the data is collated and presented, and for this reason, care should be taken in comparing figures before 2010 to more recent data. For all reporting years, the data represent a snapshot across the applicable reporting period. These figures cannot reflect seizures that have not been submitted for forensic examination due to prioritisation of law enforcement resources or those that have passed through the border undetected. Certain seizures/samples, such as those containing swabs or trace material, have been omitted from the analysis as they are not amenable to chemical profiling. It is difficult to extrapolate the impact of any observed border trends on drugs reaching consumers i.e. street level seizures in Australia but samples from selected state and territory jurisdictions are submitted for chemical profiling as part of the Enhanced National Intelligence Picture on Illicit Drugs (ENIPID) project.

⁴ This data may also include seizures destined for Australia which occurred offshore.

TABLE 16: Geographical origin of heroin samples as a proportion of total bulk weight of analysed AFP border seizures, 2005–June 2016⁵ (Source: Australian Federal Police, Forensic Drug Intelligence)

Year	South-East Asia %	South-West Asia %	South American %	Unclassified %	South-East Asia & Unclassified %	South-West Asia & Unclassified %
Jan–Jun 2016	100.0	–	–	–	–	–
2015	97.4	1.8	–	0.8	–	–
2014	89.9	7.8	–	<0.01	0.2	–
2013	84.3	8.9	4.3	–	2.5	–
2012	98.4	1.3	–	0.3	–	–
2011	39.4	60.6	–	–	–	–
2010	93.3	5.8	–	0.9	–	–
2009	48.2	40.9	–	10.9	–	–
2008	26.0	66.3	–	7.7	–	–
2007	47.9	50.6	–	1.5	–	–
2006	70.1	27.4	–	2.7	–	–
2005	78.9	18.0	–	3.1	–	–

The Enhanced National Intelligence Picture on Illicit Drugs (ENIPID) project extends this profiling to include state and territory seizures involving heroin, methylamphetamine, MDMA and cocaine. This enables detection of similarities between supply routes into different jurisdictions; links between different criminal groups; as well as comparison of trends between jurisdictions, including importations seized and profiled from the border.

Heroin originating from South-East Asia continues to dominate heroin samples collected by jurisdictions and submitted to the ENIPID project. Of interest is one heroin sample submitted by Victoria Police between Jan–Jun 2016 that has been profiled as being of South-West Asian origin. This differs to data from border seizures and seizures from other jurisdictions which have seen no heroin of South-West Asia origin profiled between Jan–Jun 2016 (see Tables 17 and 18).

⁵ This data may also include seizures destined for Australia which occurred offshore.



TABLE 17: Geographical origin of heroin ENIPID samples as a proportion of analysed jurisdictional samples, 2011–June 2016 (Source: Australian Federal Police, Forensic Drug Intelligence)

Year	Jurisdiction	Geographical origin			Total %
		South-East Asia %	South-West Asia %	Mixed/ Unclassified %	
Jan– Jun 2016	ACT	4.5	–	–	4.5
	NSW	31.8	–	–	31.8
	SA	18.2	–	–	18.2
	VIC	36.5	4.5	4.5	45.5
Total		91.0	4.5	4.5	100.0
2015	ACT	7.2	–	–	7.2
	NSW	36.1	4.1	5.2	45.4
	TAS	1.0	–	–	1.0
	VIC	38.1	2.1	–	40.2
	WA	6.2	–	–	6.2
Total		88.6	6.2	5.2	100.0
2014	NSW	47.6	7.2	–	54.8
	SA	–	2.4	–	2.4
	VIC	–	7.1	–	7.1
	WA	35.7	–	–	35.7
Total		83.3	16.7	–	100
2013	NSW	45.7	–	2.9	48.6
	WA	34.3	17.1	–	51.4
Total		80.0	17.1	2.9	100
2012	ACT	8.5	–	–	8.5
	NSW	55.3	12.8	12.8	80.9
	WA	2.1	8.5	–	10.6
Total		65.9	21.3	12.8	100
2011	NSW	9.8	2.0	3.9	15.7
	WA	82.3	–	2.0	84.3
Total		92.1	2.0	5.9	100

Note: Due to a lack of available data, some samples were classified based on the sample collection date in place of the sample seizure date.



TABLE 18: Geographical origin of heroin ENIPID samples as a proportion of analysed jurisdictional cases, 2011–June 2016 (Source: Australian Federal Police, Forensic Drug Intelligence)

Year	Jurisdiction	Geographical origin			Total %
		South–East Asia %	South–West Asia %	Mixed/ Unclassified %	
Jan–Jun 2016	ACT	5.9	–	–	5.9
	NSW	41.2	–	–	41.2
	SA	17.6	–	–	17.6
	VIC	23.5	5.9	5.9	35.3
Total		88.2	5.9	5.9	100.0
2015	ACT	3.1	–	–	3.1
	NSW	35.4	6.1	6.2	47.7
	TAS	1.5	–	–	1.5
	VIC	35.4	3.1	–	38.5
	WA	9.2	–	–	9.2
Total		84.6	9.2	6.2	100.0
2014	NSW	51.7	10.3	–	62.0
	SA	–	3.5	–	3.5
	VIC	–	3.5	–	3.5
	WA	31.0	–	–	31.0
Total		82.7	17.3	–	100
2013	NSW	50.0	0.0	5.6	55.6
	WA	33.3	11.1	0.0	44.4
Total		83.3	11.1	5.6	100
2012	ACT	9.4	–	–	9.4
	NSW	46.9	12.5	18.7	78.1
	WA	3.1	9.4	–	12.5
Total		59.4	21.9	18.7	100
2011	NSW	18.8	6.2	12.5	37.5
	WA	56.3	–	6.2	62.5
Total		75.1	6.2	18.7	100

Note: Due to a lack of available data, some samples were classified based on the sample collection date in place of the sample seizure date.

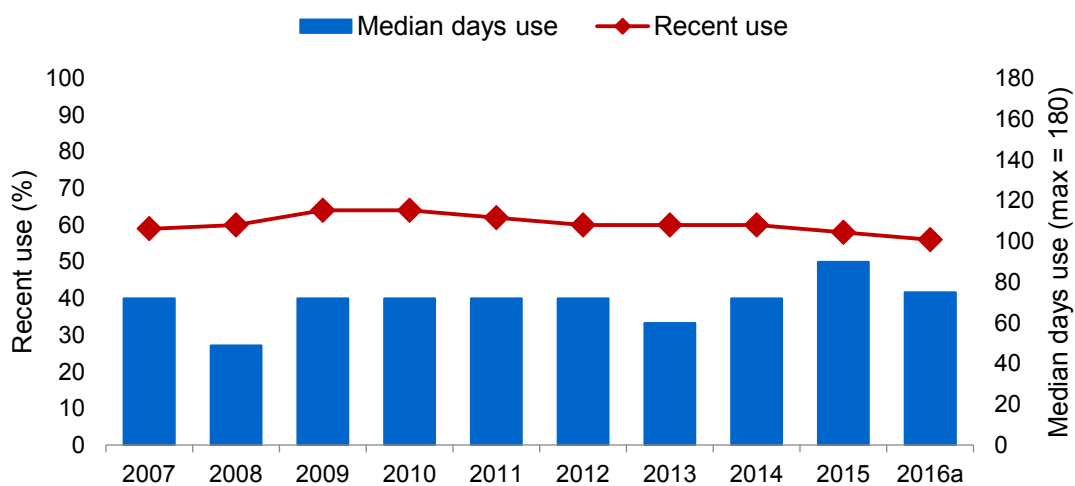


DOMESTIC MARKET INDICATORS

According to the 2013 National Drug Strategy Household Survey (NDSHS), the proportion of the Australian population aged 14 years or older who reported having used heroin at least once in their lifetime decreased from 1.4 per cent in 2010 to 1.2 per cent in 2013. In the same survey, the proportion reporting recent⁶ heroin use also decreased, from 0.2 per cent in 2010 to 0.1 per cent in 2013 (AIHW 2014).

In a 2015 national study of regular injecting drug users, the proportion of respondents reporting the recent⁷ use of heroin decreased, from 60.0 per cent in 2014 to 58.0 per cent in 2015. Within this regular drug injecting population, the reported median days of heroin use in the six months preceding interview increased, from 72 days in 2014 to 90 days in 2015. Early findings from the 2016 study indicate the proportion of respondents reporting recent heroin use has decreased to 56.0 per cent, with the reported median days of heroin use decreasing to 75 days (see Figure 39; Stafford & Breen 2016; Stafford et al 2016).

FIGURE 39: Proportion of a regular injecting drug user population reporting recent heroin use and median days of use, 2007 to 2016 (Source: National Drug and Alcohol Research Centre)



a. Reported figures for 2016 are preliminary.

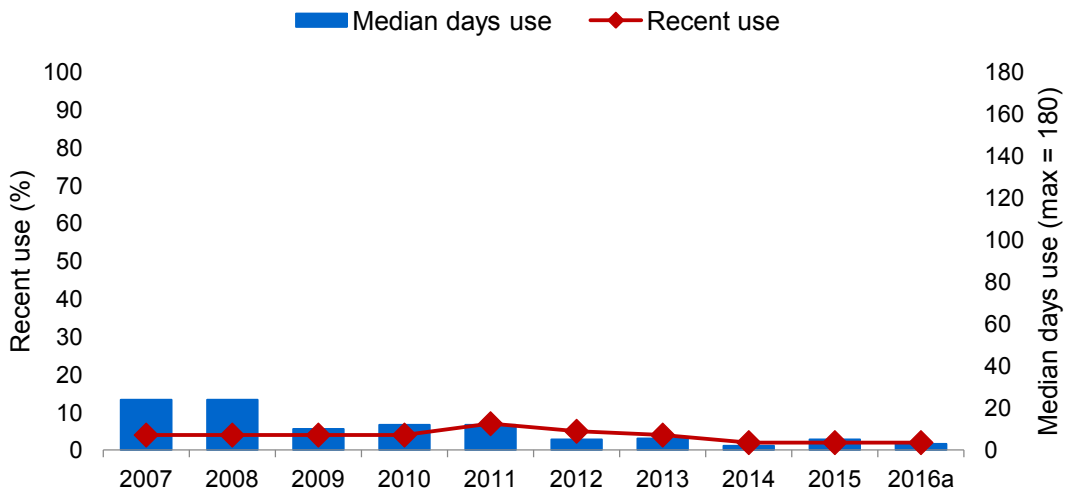
In the same 2015 study, the proportion of respondents reporting heroin as their drug of choice increased, from 50.0 in 2014 to 52.0 per cent in 2015. Early finding from the 2016 study indicate this has decreased to 46.0 per cent (Stafford & Breen 2016; Stafford et al 2016).

In a 2015 national study of regular ecstasy users, the proportion of respondents reporting the recent use of heroin remained stable at 2.0 per cent. Early findings from the 2016 study indicate this proportion remains unchanged at 2.0 per cent. Within this regular ecstasy user population, the reported median days of heroin use in the six months preceding interview in 2015 was 5 days, an increase from the 2 days reported in 2014. Early findings from the 2016 study indicate this has decreased to 3 days (see Figure 40; Sindicich et al 2016; Stafford et al 2016).

⁶ In the NDSHS, recent use refers to reported use in the 12 months preceding interview.

⁷ In both the Illicit Drug Reporting System (IDRS) and Ecstasy and Related Drugs Reporting System (EDRS), recent use refers to reported use in the six months preceding interview.

FIGURE 40: Proportion of a regular ecstasy drug user population reporting recent heroin use and median days of use, 2007 to 2016 (Source: National Drug and Alcohol Research Centre)



a. Reported figures for 2016 are preliminary.

In the same 2015 study, the proportion of respondents reporting heroin as their drug of choice decreased, from 1.0 per cent in 2014 to <1.0 per cent in 2015. Early findings from the 2016 study indicate this has increased to 1.0 per cent (Sindicich et al 2016; Stafford et al 2016).

The Drug Use Monitoring in Australia (DUMA) program, which examines drug use and offending patterns among police detainees in Australia, comprises an interviewer-assisted self-report survey and the voluntary provision of a urine sample which is subjected to urinalysis to detect licit and illicit drug use.⁸ The proportion of detainees testing positive via urinalysis⁹ for heroin continued to decrease this reporting period, from 5.8 per cent in 2014–15 to 5.7 per cent in 2015–16. Self-reported recent use¹⁰ of heroin increased this reporting period, from 11.1 per cent in 2014–15 to 12.5 per cent in 2015–16 (see Figure 41).

8 Detainees can participate in the survey without providing a urine sample. Cases with missing data are excluded from the relevant analysis.

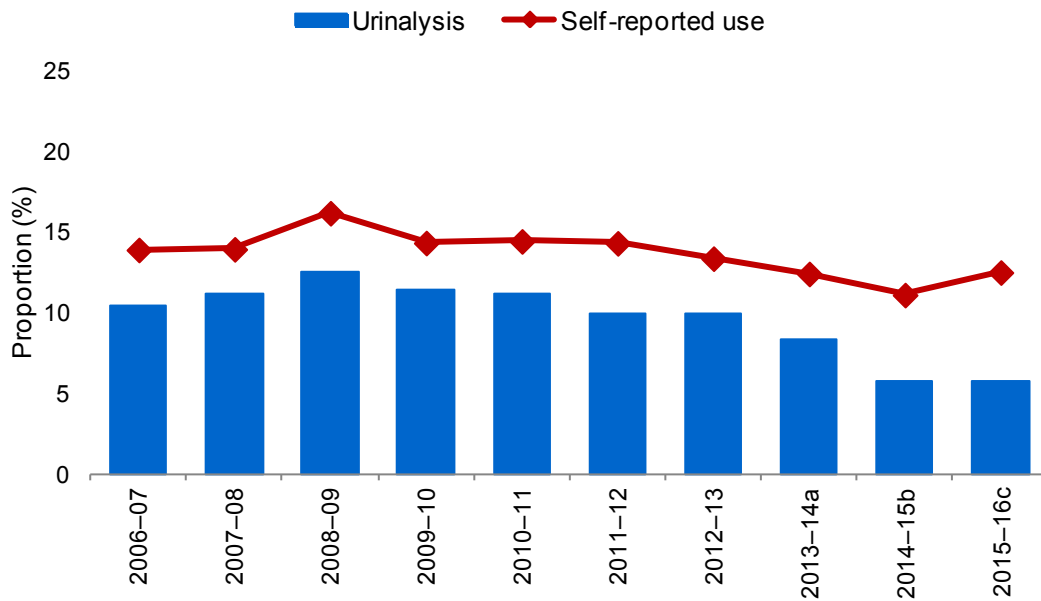
9 Heroin and its metabolite can be detected in urine for 6 hours after administration.

10 Recent use in the DUMA program refers to self-reported use in the 12 months prior to arrest.



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FIGURE 41: National proportion of detainees testing positive for heroin compared with self-reported recent use, 2006–07 to 2015–16 (Source: Australian Institute of Criminology)



- a. Urine was collected in the third and fourth quarter of 2013 and the first quarter of 2014.
- b. Urine was collected in the third quarter of 2014 and the first and second quarter of 2015.
- c. Urine was collected in the third quarter of 2015 and the first and second quarter of 2016.

PRICE

Nationally, the price for 1 gram of heroin ranged between \$200 and \$700 in 2015–16, compared with a price range between \$300 and \$800 in 2014–15. Nationally, the price for an 8-ball¹¹ of heroin ranged between \$800 and \$1 700 in 2015–16, compared with a price range between \$800 and \$1 800 in 2014–15. Victoria was the only state to report a price for 1 kilogram of heroin this reporting period, which ranged between \$300 000 and \$400 000. This is an increase from the \$280 000 to \$295 000 price range reported by New South Wales in 2014–15, the only state or territory to report a price for 1 kilogram of heroin in that reporting period.

PURITY

Figure 42 illustrates the annual median purity of analysed heroin samples over the last decade. Since 2006–07, the annual median purity of heroin has ranged between 12.2 per cent and 68.0 per cent. In 2015–16, the annual median purity of heroin ranged from 15.6 per cent in Victoria to 58.5 per cent in Western Australia. This reporting period New South Wales, Victoria, Queensland, South Australia and Western Australia all reported an increase in the annual median purity of heroin.

¹¹ An 8-ball equates to 3.5 grams.



FIGURE 42: Annual median purity of heroin samples, 2006–07 to 2015–16

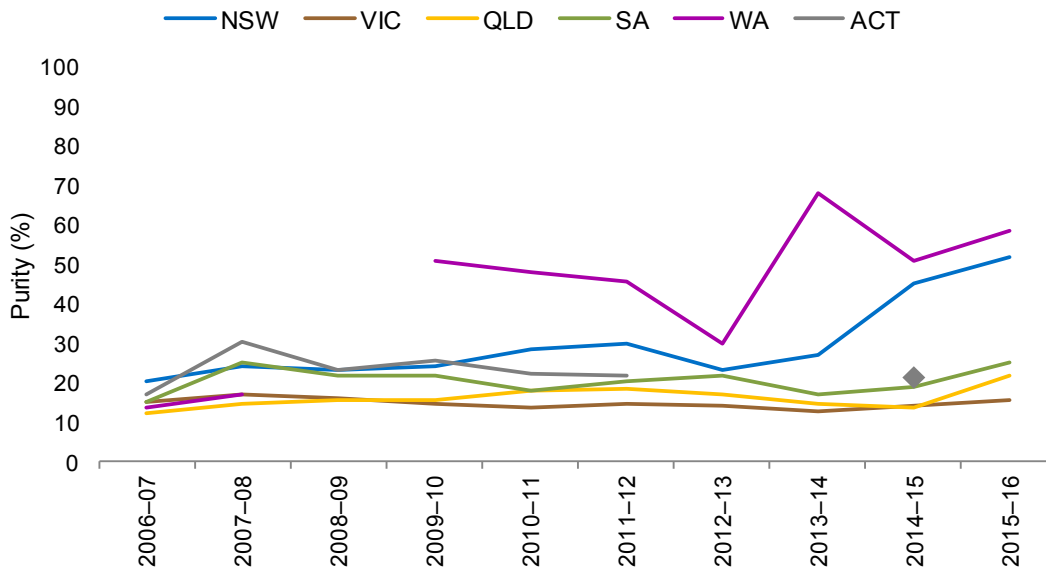
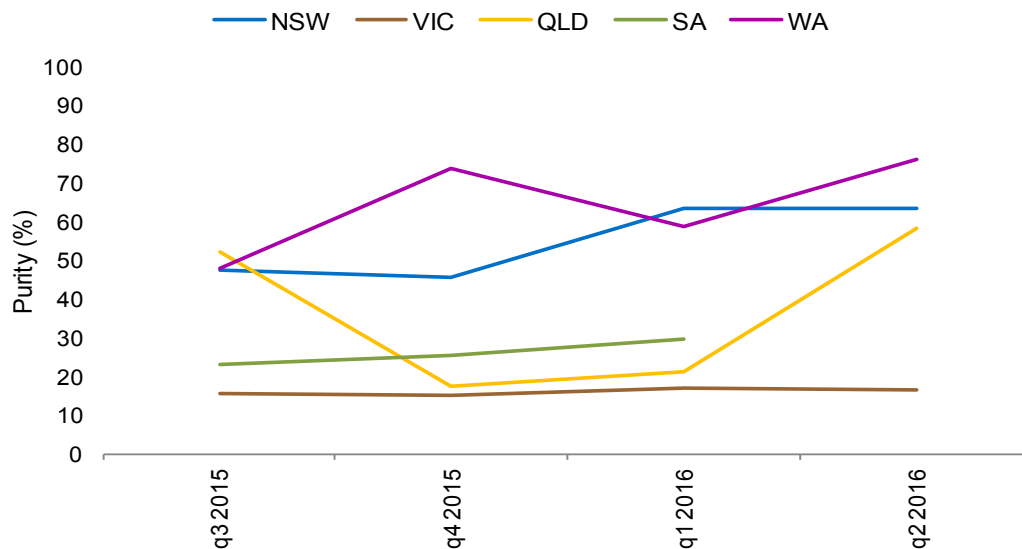


Figure 43 illustrates the median purity of analysed heroin samples on a quarterly basis in 2015–16. This reporting period the quarterly median purity of heroin ranged between 15.3 per cent in Victoria in the fourth quarter of 2015 and 76.0 per cent in Western Australia in the second quarter of 2016.

FIGURE 43: Quarterly median purity of heroin samples, 2015–16



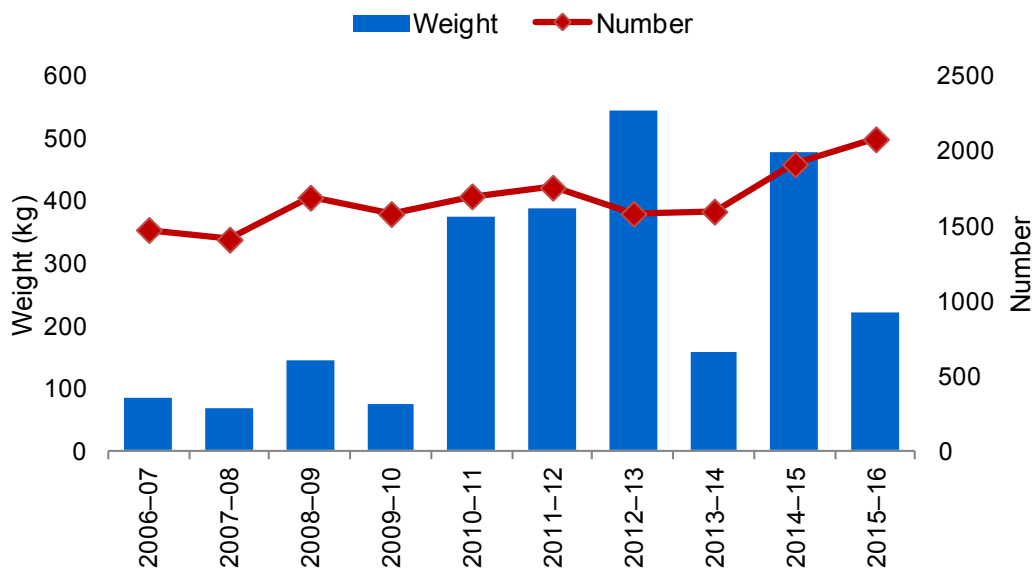
AVAILABILITY

In a 2015 national study of regular injecting drug users, of the respondents able to comment on the availability of heroin, 88.0 per cent reported heroin as being easy or very easy to obtain, a decrease from 89.0 per cent in 2014. Early findings from the 2016 study indicate that this has increased to 91.0 per cent (Stafford & Breen 2016; Stafford et al 2016).

SEIZURES AND ARRESTS

The number of national heroin seizures increased 8.7 per cent this reporting period, from 1 914 in 2014–15 to 2 081 in 2015–16, the highest number reported in the last decade. The weight of heroin seized nationally decreased 53.8 per cent this reporting period, from 477.9 kilograms in 2014–15 to 220.7 kilograms in 2015–16 (see Figure 44).

FIGURE 44: National heroin seizures, by number and weight, 2006–07 to 2015–16



Tasmania reported the greatest percentage increase in both the number (100.0 per cent) and weight of heroin seized (1 200.0 per cent) in 2015–16. New South Wales continues to account for the greatest proportion of the number of national heroin seizures (47.7 per cent), while Victoria accounted for the greatest proportion of the weight of heroin seized nationally in 2015–16 (52.2 per cent; see Table 19).

TABLE 19: Number, weight and percentage change of national heroin seizures, 2014–15 and 2015–16

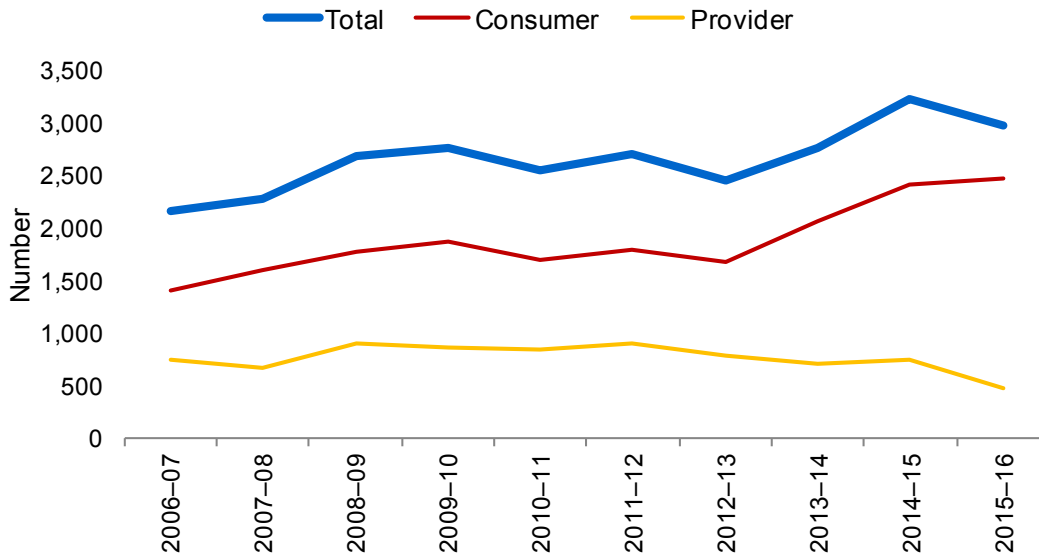
State/Territory ^a	Number			Weight (grams)		
	2014–15	2015–16	% change	2014–15	2015–16	% change
New South Wales	975	992	1.7	402 833	95 746	-76.2
Victoria	396	381	-3.8	59 474	115 196	93.7
Queensland	220	219	-0.5	5 778	2 636	-54.4
South Australia	36	50	38.9	295	396	-34.2
Western Australia	249	385	54.6	9 052	6 326	-30.1
Tasmania	2	4	100.0	1	13	1 200.0
Northern Territory	3	1	-66.7	329	<1	-99.9
Australian Capital Territory	33	49	48.5	202	432	113.9
Total	1 914	2 081	8.7	477 964	220 745	-53.8

a. Includes seizures by state and territory police and Australian Federal Police for which a valid seizure weight was recorded.



The number of national heroin and other opioid arrests decreased 7.8 per cent this reporting period, from 3 227 in 2014–15 to 2 975 in 2015–16. Consumer arrests continue to account for the greatest proportion of arrests, comprising 83.6 per cent of national heroin and other opioid arrests in 2015–16 (see Figure 45). However, the Northern Territory reported more heroin and other opioid provider arrests than consumer arrests in 2015–16.

FIGURE 45: Number of national heroin and other opioid arrests, 2006–07 to 2015–16



South Australia reported the greatest percentage increase in heroin and other opioid arrests this reporting period (210.6 per cent). Victoria accounted for the greatest proportion of national heroin and other opioid arrests in 2015–16 (43.6 per cent), followed by New South Wales (27.5 per cent). Combined, these two states account for 71.1 per cent of national heroin and other opioid arrests in 2015–16 (see Table 20).

TABLE 20: Number and percentage change of national heroin and other opioid arrests, 2014–15 and 2015–16

State/Territory ^a	Arrests		
	2014–15	2015–16	% change
New South Wales	1 315	817	-37.9
Victoria	1 265	1 297	2.5
Queensland	313	399	27.5
South Australia ^b	47	146	210.6
Western Australia	226	258	14.2
Tasmania	34	44	29.4
Northern Territory	0	2	—
Australian Capital Territory	27	12	-55.6
Total	3 227	2 975	-7.8

- a. The arrest data for each state and territory include Australian Federal Police data.
- b. For the first time, offender data provided by South Australia Police in 2015–16 included data for offenders participating in its Drug Diversion Program (excluding diversion records not related to a drug seizure).



HEROIN

NATIONAL IMPACT

Although Afghanistan remains the largest cultivator of opium and producer of heroin in the world, South-East Asia remains the predominant source for analysed heroin in Australia, reflected in both samples of seizures at the Australian border and those profiled as part of the ENIPID project. In the first six months of 2016, every analysed border seizure of heroin was identified as originating from South-East Asia.

While surveys of a regular injecting drug user population indicate decreases in the reported recent use of heroin and median days of use in 2016, figures remain relatively consistent with those reported in the last decade. Surveys of a regular ecstasy drug user population indicate recent heroin use remains low and stable. According to a national study of police detainees, the proportion of detainees testing positive for heroin remained stable in 2015–16 and is at a decade low. The self-reported use of heroin within this population increased in 2015–16, however it remains lower than figures reported earlier in the decade.

Both the number and weight of heroin detections at the Australian border decreased this reporting period. The number of heroin detections decreased from 291 in 2014–15 to 178 in 2015–16, while the weight detected almost halved this reporting period to 149.7 kilograms. The international mail stream was the primary importation method by number for detections of heroin at the Australian border in 2015–16, while air cargo was the primary importation method by weight. The number of embarkation points identified for heroin detections at the Australian border decreased this reporting period, from 27 in 2014–15 to 23 in 2015–16. The Netherlands was the prominent embarkation point by number for heroin detections in 2015–16, while Thailand was the prominent embarkation point by weight.

The number of national heroin seizures increased this reporting period to 2 081, the highest number reported in the last decade. The weight of heroin seized nationally decreased this reporting period to 220.7 kilograms. While the number of national heroin and other opioid arrests decreased in 2015–16, the 2 975 arrests this reporting period is the second highest number reported in the last decade.

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