



# National Report on New Psychoactive Substances Expert Interviews in the Netherlands

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# 1 Description of the respondents

## 1.1 Overview of the participants and their specific relationship to NPS

The respondents were selected based on their knowledge of NPS in general and / or specific knowledge of policy, market or users. Respondent 1 works at the National Police and is specialized in drug enforcement, in particular the synthetic market and NPS. At the department of intelligence he conducts research into risk profiles of (criminal) networks and / or persons involved in the synthetic drugs market and/or the NPS distribution and trade. His team is working together with customs - who confiscate NPS, the FIOD (Tax Information and Investigation Service) and the Public Prosecutor. His colleagues in the judiciary (respondents 2 & 3) are policy advisors and focus on the criminal side of NPS. Their information on the NPS market is partly from the EMCDDA (European Monitoring Centre for Drugs and Drug Addiction) and the DIMS (Drugs Information and Monitoring System), which monitors the Dutch drug market. The National police and justice share their knowledge with other European countries, the UNODC (United Nations Office on Drugs and Crime) and the international SYNDEC (Synthetic Drug Enforcement Conference). SYNDEC aims to enhance international operational cooperation with the goal of addressing more criminals engaged in the production and trafficking of synthetic drugs and precursors.

The chief chemist (respondent 6) works at the customs laboratory of the tax office. The lab supports customs in analysing samples for controlling the legislation: customs duties, agricultural products (like European taxes) and excise legislation (alcohol, beer, tobacco etc.). In connection with the applicable laws, including the medicine Act and the Opium Act, she is also involved in drug en medicine research connected to NPS. She examines samples through NPS confiscated by customs and she advises the Ministries of Health and of Justice, and the National Police. She also provides information about NPS to the DIMS and MND (where new drugs can be reported), which monitor the NPS market (like quantities, prevalence, use and effects). On an international level there is cooperation with other customs labs.

The managing director c.q. party doctor (respondent 4) from EMS (Event Medical Service) is responsible for event assistance (advice and risk assessment) in the medical field. EMS also provides health education regarding drug related incidents on the first aid station and is also in close contact with the organization and security. Key words are risk behaviour, evaluation, assessment and mapping health hazards and appearance. The EMS support team works on both small and large (more than ten thousand participants) dance events. The main findings will be reported after each event to the facilitator, the organizer, the GHOR (medical aid organization in the region) and the Trimbos Institute, who conducted the nationwide Drug Incidents Monitor (MDI). EMS also works closely with peer project Unity, which is often present in the same events.

According to the peer coach (respondent 8), Unity participated in more than 200 events of which more than half were organized in Amsterdam or Noord-Holland. In 2015 there were more than 15,000 face-to-face contacts. Unity originally was part of the Jellinek Prevention in Amsterdam, but now has a broad partnership with institutions in other regions. Unity works with dozens of festival organizers.

The prevention worker (respondent 7) works at the Jellinek. The core focus is on development, implementation, standardization and evaluation of the various interventions in the field of alcohol and drug

education. An important part of the work focuses on nightlife (drug control, training employees and conducting outreach activities as the Celebrate Safe campaign).

Finally the drug researcher (respondent 5) works at the Trimbos Institute and is also connected to the DIMS where he is involved in drug testing in addition to monitoring the online drug trade.

## 1.2 Short lines of communication and broad cooperation

All the respondents have their own specific expertise in the drug field and are active in specific areas within the judiciary, police, health care and prevention. They were all witness to the emerging NPS market (since 2010) and the (temporarily) collapse of the ecstasy market.

From the new generation of drugs, mephedrone (4-MMC), was one of the first emerging substances on the Dutch market. Some experts (respondents 4, 5, 7 and 8) are part of the same consultation structure in the field of health and prevention and are sharing data from the national monitoring systems on drug and consumer markets (DIMS, MDI, MND). Because the Monitor Drug Incidents (MDI) is linked to DIMS there are also contacts with medical institutions (including emergency first aid, first aid stations at festivals, forensic doctors and ambulance services) and risky developments can be early detected and adequate action be undertaken.

The other group of experts (respondents 1, 2, 3 & 6), belongs to the judiciary, police and customs (laboratory) and joining consultations where developments in the NPS market were discussed. Because the drugs problem in the Netherlands is traditionally covered by public health and justice, there are also consultations where all parties are represented. The CAM (Coordination point Assessment and Monitoring new drugs) is a committee that meets three times a year at the initiative of Ministry of Health (since 2000). Besides policy officials of Ministry of Health and Justice, there are many other disciplines c.q. organizations (toxicology, neurobiology, criminology, psychiatry, enforcement) represented. Through the National Focal Point, the CAM is also part of the European early warning system for new psychoactive substances.

The CAM has done several risk assessments in the past, including 4-MTA (1999), mushrooms (2000 and 2007), ketamine (2001), PMMA (2003), khat (2007) and GHB (2011). A risk assessment of a new drug is an evaluation of known or potential adverse effects resulting from, or through the production, marketing and use of the new drug. As a result of the increasing number of severe health incidents related to 4-FA (at the request of the Ministry of Health) a new risk assessment will be prepared in autumn 2016.

## 1.3 Definitions of NPS within organizations / work fields

On the definition of NPS, users often think differently than the experts. Users mainly talk about (new) designers, research chemicals, legal highs, only mention the brand or simply just the formula. The word NPS is virtually unknown to users. Although experts are talking about NPS, sometimes something else is understood. Justice commonly applies the rule that a substance only falls under the definition of NPS as long as it is not on the list of the Opium Act I or II. Since mephedrone (4-MMC) is scheduled, it's officially no longer an NPS. Just as 2C-B which is scheduled (Opium Act I) since 1997, but by users seen as a new designer drug. From the perspective of police the definitions of the UNODC (United Nations On Drugs and Crime) are leading. Especially the NPS which are not scheduled in the Single Convention of the United Nations (1961) and the Convention on Psychotropic Substances (1971). Therefore, the police viewed 4-FA

as a NPS because it is not yet in the International Conventions (1961 and 1971) and is not included in the Opium Act. Since 2000, a dozen NPS were brought under the Opium Act in the Netherlands. In case of a foreign rogatory, the police may only act if the drug (mephedrone, 2C-B) is illegal in the Netherlands. But for 4-FA there is (still) no legal basis. According to the police, ketamine belongs to NPS because it is not internationally recognized in the Conventions.

The experts in healthcare and prevention who are much closer to the recreational users (events, test service etc.), say that there is much confusion about the status of NPS: “Users typically mention other categories than the professionals,” respondent 5 says. As an example he mentioned 2C-B which is actually not an NPS anymore, although the current generation sees 2C-B as a new designer drug. This includes MXE and 4-MMC, that have recently been placed on Schedule I of the Opium Act and in fact no longer belong to the NPS. Respondent 5 emphasizes the very broad and flexible NPS definition in the model being used by the EMCDDA. According to these criteria, ketamine and GHB are also NPS, since they are not formally included in the list of the International Conventions. He himself means with NPS new (sometimes legal) drugs or substances that – after a few years absence – reappear on the drug market.

The medical specialist (respondent 6) emphasizes that the number of new substances is sometimes confusing for aid workers: “It’s faster than the developments in ICT.” However, the use of NPS-related stimulants and hallucinogens is limited to small scenes with a lot of drug knowledge. 4-FA is an exception and is already being separately classified by an increase in the number of health incidents in the EMS registration. Because 4-FA, 2C-B and mephedrone are well known, respondent 6 no longer speaks of NPS. Not the criminal status is leading here, but how familiar these substances are to users at events. Respondents 7 & 8 stick to the guidelines of DIMS. They emphasize that NPS refer to new drugs where there is still little knowledge about the health risks. This also applies to the now popular 4-FA. Ketamine, however, is not seen as an NPS because there has been extensive research done.

The Reporting Center New Drugs (MND) divides NPS on their chemical structure (fenylethylamines, cathinones, piperazines) or pharmacological properties (synthetic cannabinoids). On this basis, MND classifies cannabinoids, cathinones, fenylethylamines, tryptamines, piperazines and other substances.

## 1.4 Description of types of users

Prevention workers, peer coaches and first aiders have the most contact (face-to-face and online) with users in nightlife (partly with online communities). The use of NPS is primarily limited to recreational user groups in the Netherlands. The street drug scene is unfamiliar with NPS (this is confirmed by professionals in the Amsterdam treatment circuit). The peer coach and prevention worker provide education activities to users at the information desk and also meet users in the test service. Justice, police and the drug lab haven’t any contact with users. First Aid (EMS) mainly has contact with users who sometimes get into trouble with NPS alongside alcohol and other recreational drugs. These are largely “ignorant followers who are unaware what they use exactly.” Prevention worker and peer coach (from Amsterdam perspective) see a big difference between 4-FA users and users of other NPS. The group 4-FA users is by far the largest. They are generally young (early twenties), active in nightlife, student and/or highly educated and with a western background (native or western foreigners). Prevention worker (respondent 7): “Many strive for controlled drug use. The same goes for 4-FA”. It is striking that for some (young) users 4-FA is a drug of choice and is even more popular than ecstasy. The other, usually older and more experienced, group of NPS users, also have experience with other uppers (including 3-MMC, mephedrone, methylone)

and/or euphoric uppers (5-APB, 6-APB), in addition to 4-FA. A smaller proportion is also experimenting with dissociativa (MXE), psychedelia (NBOMe) or tryptamines (MeO-DIPT). According to the experts the latter group fits more in the psychonaut profile. By following new topics and discussions on the popular internet forums (Partyflock, Drugsforum.nl etc.), experts get a better idea of what people are concerned. Most discussions are about the effects and risks of 4-FA. Respondent 5 also finds it remarkable that people show a great curiosity in the coverage of NPS in traditional media.

The psychonaut profile among respondents is in general terms consistent. However, the party doctor (respondent 4) hardly met this scene of exotic NPS users because they are not visiting mainstream events where EMS is showing up. Psychonauts are male in majority, educated, Caucasian, 20-30 years, with a high interest in drugs and internet. Drug researcher (respondent 5): "These people are bored with the current conventional drugs or are curious and want to try something else." In addition to the typical recreational user with 4-FA experience, psychonauts in general have more knowledge from substances.

#### 1.4.1 Description of NPS use by these users

NPS are generally available in powder, pill, capsule or liquid form and are mostly swallowed and / or sniffed, depending on the type of agent and personal preference. Due to the change in demand on the NPS market, popping pills is becoming increasingly popular. After methylone and mephedrone (both are scheduled), 4-FA is the next NPS in the Netherlands and by far more popular than other NPS. Most experts believe that the popularity of new NPS is not a result of the scarcity of conventional substances.

##### 1.4.1.1 4-FA

The 4-FA market has changed in recent years from a powder into a pill market. 4-FA is sometimes presented in liquid form. The average dosage of 4-FA is somewhere between 100-150 mg and roughly corresponds with a recommended ecstasy dosage. 4-FA is well known in nightlife and used at (small and large) events or in the club scene. Experts believe that the frequency of 4-FA use is usually lower than with ecstasy or amphetamines. It is also (but to a lesser extent) combined with traditional drugs, especially the mix of 4-FA and MDMA. Users experience a (mild) euphoric mood and tend to move and talk more. Hunger disappears. According to prevention worker (respondent 7) 4-FA is a drug of choice where people were really looking for. "It has a permanent place alongside other classics," says the peer coach (respondent 8). Experts cite several reasons why 4-FA has become more popular. The subjective mild stimulatory effects of 4-FA are similar to MDMA and amphetamine, but less intense. It enhances social contact and the rush is more manageable than the (often) heavy dose ecstasy tablets. The prevention worker (respondent 7) sees that some of the users turn away from the too heavy ecstasy pills. Besides the ease of use (the 4-FA dose is similar to ecstasy) the manageability of intoxication seems to play an important role when going out. Peer coach (respondent 8): "No one wants to look really f\*cked like a high-dose ecstasy face." The availability is relatively easy through friends, (social) dealers or via the internet. In general, the health risks are evaluated to be low. Some experts believe that the 4-FA legal status would sometimes play a role. Especially at events where no prosecution follows after possession of 4-FA.

##### 1.4.1.2 Other NPS

Although the NPS market has grown in recent years, the classic uppers (MDMA, amphetamine and cocaine) are still dominating nightlife. Only 4-FA is sometimes used as a replacement of substitute for MDMA (in a growing minority). Other NPS like the APB's belonging to the cathinones derivatives are also

used. Especially Benzo Fury (6-APB) is known, partly because of discussions on specialized drug fora and because of some exposure a couple of times in the media (television etc.). The APB'S known remain in the margins mostly. The dissociative hallucinogenic NPS are even less popular. Metoxetamine (MXE), which is related to ketamine, is much more intense. Users report vivid and dreamlike scenes and images that persist longer than ketamine. MXE is mainly used in private, more intimate settings because of the introverted effects. Especially people with trip experience were interested. This also applies to the more hallucinogenic NBOMe, which were hardly ever used. Hardly anyone knows NBOMe users, except psychonauts on drug forums writing extensive reports of their magic trip. Synthetic cannabinoids are rarely used.

### 1.5 Which harms have users experienced (difference with traditional drugs)?

Most experts emphasize that little is known about health risks of NPS. There are only a few studies available on the health risks. Many substances have been available on the market only recently, and are rather unknown to the general public. The dosage of new substances can vary with the risk of an overdose. "The risks of dosing is underestimated," peer coach (respondent 8) says. Also, the laboratory technician (respondent 6) regularly asks whether users – given the variation in the number of NPS – are sufficiently aware of the different dosages in NPS. Many users have a lack of knowledge about it. The drug researcher (respondent 5) gives an example of a relatively unknown cathinone (Alpha-PVP) that has already been active at a low dose (15-20 mg) and is much stronger than 4-FA (ca. 100 mg). Moreover, as a consumer you only can hope that the right sticker is put on the right NPS bag: "It is unclear what is being offered and also, the awareness of products is limited. The more 'cowboys' are involved in the market, the greater the problems."

Some experts also warn of the danger of taking another dose too early, when the effects of an NPS related substance is slower acting than is the case with conventional stimulants. Based on user experience, health experts see similar symptoms with the use of stimulation NPS as with classic stimulants. According to the Unity peer coach most questions from users at festivals with regards to NPS are about 4-FA.

Most health incidents with NPS at parties are mainly 4-FA related and are similar to those related to MDMA, which belongs to the same group of fenylethylamines. A majority of patients has combined 4-FA with other drugs (mainly ecstasy) or alcohol. Party doctor (respondent 4): "We see anxiety, psychosis, palpitations and a serotonin syndrome. Users often do not know how much they have taken exactly. Generally, they fall into the mild to moderate intoxication. Nevertheless, we think that it is gradually shifting towards the more severe poisonings. Sometimes there is confusion when 4-FA is sold as MDMA."

With 4-FA (at higher doses) restlessness and insomnia sometimes occur. Based on an increasing number of health incidents, the Trimbos Institute in collaboration with Jellinek, put out a nationwide warning in the fall of 2016 (see prevention) regarding problems ranging from mild to severe headaches, to an increased risk of heart problems and strokes. The health incidents appear to become more serious in nature.

The other NPS uppers show a similar risk, according to experts. Not being able to sleep, a rushed and stressed feeling, headache, excessive sweating, inability to urinate, etc. When using 3-MMC (type of mephedrone), one may experience a feeling of craving and when using 4-MMC (mephedrone) some complain about bruising. When using NPS-dissociativa (MXE) panic attacks sometimes occurs. A lengthy trip can lead to exhaustion and psychosis.



## 2 Description of NPS market

Some of the so-called new psychoactive substances have been synthesized and entered the market long ago. But there are substances that are specifically developed as a psychoactive drug and were marketed as such.

Although there are relatively few NPS breaking through with the general public, the customs laboratory will constantly be offered new substances for analysis, from intercepted batches. According to the laboratory worker (respondent 6) more NPS are offered from 2012 onwards. "If we find a substance, we check whether it can be made into a drug precursor for the production of NPS." The existing instruments will be tested and sometimes sophisticated analytical techniques are used, or foreign colleagues consulted when a (new) sample cannot be found in the existing library. The laboratory worker (respondent 6) expresses some concern about the continued flow NPS. "There are currently substances coming in from which we are surprised that they even started experimenting. Especially if such material is not intended for the chemical industry but intended for an individual. Why is an individual interested in this? The laboratory worker (respondent 6) noted that the substances have become more 'exotic'. In other words, the "tinkering with molecules becomes more malapert".

The drug researcher (respondent 5) tells from the DIMS and MND monitors that the emergence of new substances and new markets requires increasing attention. Even it is only because he more often is called by the media about it. Internet has become an important source of information for monitoring emerging markets and how they develop. Drug researcher (respondent 5): "We are only at the beginning of a new era."

The arrival of NPS has mainly led to an increased workload for customs and the laboratories. The police are still largely engaged in traditional substances and for the party doctor (respondent 4) almost all health incidents are related to 4-FA. For the peer coach and prevention worker (respondents 7 & 8), the (work) pressure did not become substantially larger with the arrival of NPS. However, there are more questions from users and media.

### 2.1 Three waves

According to experts, the emergence of new agents develops in waves. The *first* wave was in the middle of the nineties, just before the internet age. The first generation of new substances in the Netherlands belonged largely to the fenylethylamines (MDEA, inter alia, 2C-T-2, 2C-T-7 MDOH and 2C-B) and were then sold in dozens of smart shops (all substances now fall under the Opium Act and Medicines Act). The *second* wave was mid noughties and concerned mainly methylone (and some say GHB and GBL), which in liquid form was sold in smart shops as Explosion, but they fall under the Medicines Act since 2005. During this second wave the growing influence and reach of the internet became noticeable. Marketing on the Internet and smart shops became more professional and became also wider in scope, because of the growth of the Internet.

The *third* (and current) wave, according to the respondents, started after the (temporary) ecstasy dip 2008-2009 with mephedrone (4-MMC/meow-meow) which was available in smart shops and on the Internet, but was placed on Schedule I of the Opium Act. Mephedrone, which is a psychostimulant such as

methylone, belongs to the cathinones. The new generation of NPS users began experimenting when the ecstasy market had recovered.

Some experts think that NPS are more popular on small events specifically, where the use is more extreme. The type of music and the setting also are of influence. New developments in nightlife usually occur first in the urban west of the Netherlands (where most of the events take place) and / or are reported in other university towns.

The experts believe that the traditional drug market in the Netherlands has little competition of the NPS market. The use, production and trafficking of synthetic cannabinoids remains low, as with piperazines. The customs laboratory reports that nootropics disappear but that the NBOMe's have been increasing. Other groups (e.g. tryptamines, cathinones and fenylethylamines) remain low, with the exception of 4-FA (in the initial period offered as plant feeder), which is still increasing in popularity according to all the experts, and has nested itself as a 'drug of choice' in the mainstream. At events, the party doctor (respondent 4) sees a significant increase in 4-FA and (to a lesser extent) 2C-B from 2014 onwards. According to the drugs investigator (respondent 5) 5% of consumers samples in DIMS is NPS related. All the experts think, that in some other countries NPS are much more popular (except 4-FA, but for instance cannabinoids and cathinones) and that there are differences in user markets between European countries.

### 3 Definition of harm reduction and prevention

On this topic, experts in prevention and health work give the most information. The police (but also customs) associate 'prevention' more in the sphere of detection of 'harmful' or illicit drugs to prevent them ending up on the consumer market. A thorny issue for police and judicial authorities is that there are no criminal actions against providers of 4-FA (yet) because it's legal. From a prevention point of view justice (respondents 2 & 3) sometimes receives a report of a national and/or international alert. The most recent alert (June 2016) is from a liaison in Canada, on W-18 (fentanyl); a synthetic (very potent) heroin.

Prevention in the Netherlands lies in the sphere of limiting the availability. At the customs laboratory, (seized) substances are detected that may be a threat to public health. Also, monitoring drug markets (inter alia the DIMS and MND) is indirectly derived from prevention. Here it is investigated which substances occurs in drugs and on the drug market and what the possible health risks and trends are. The collected data is used for policy and information, in addition to prevention. The prevention worker, in addition to drugs prevention, can also try to postpone use or to reduce the risks of use. By identifying problem at an early stage avoids the escalation of problems. The experts also believe that the potential damage can be limited by encouraging users to at least test their NPS.

Limiting the availability of drugs, through the Opium Act, is actively pursued by the government by criminalising sales and trading in drugs. To limit the use of drugs, thresholds can also be raised (among other things, reducing outlets, increasing legal age and price increase). When (similar to classic drugs) acute health risks to users are imminent, in connection to detected contaminants by the DIMS, then a national or regional warning campaign (Red Alert protocol in collaboration with Ministry VWS) is initiated and carried out by organizations that are part of the DIMS. The media, GGD, hospitals, police and other interested parties are involved in these campaigns. So far there was no Red Alert campaign related to NPS.

### 3.1 Risk reduction in nightlife

The focus in NPS prevention and risk reduction is primarily on the area of targeted education to at-risk groups, (mainly) in nightlife, by offering information flyers about NPS (especially 4-FA) through the official information channels, but also through the peer project Unity at party sites and through social media. An intervention of Unity initiates active contact with users, at specially selected party locations, where it is expected to have relatively many (potential) NPS users present. At EMS (first aid at festivals) 4-FA is now presented separately in the registration form. In 2012, there were three reported incidents in the MDI. In 2015, there already were 184. Nearly 10% was severely intoxicated.

Information is given to the client, and to his or her friends. According to the party doctor, one can usually carry good conversations with the clients. They also refer to Unity. Finally, there also are bottom-up initiatives by users who exchange information about NPS with each other on special drug forums or via closed Facebook groups. Analysis of the drug researcher (respondent 5) shows that most topics on these forums are about 4-FA. Here much mutual information is shared among users about the risks of NPS c.q. 4-FA.

### 3.2 Measures that should be taken to minimise the potential harm related to NPS

Experts in the health field (respondents 4, 5, 7 & 8) say that very few prevention measures around NPS have been developed. Compared to traditional recreational drugs, the NPS health market is still relatively small. Why invest heavily in education when the user groups are small or still unfamiliar with many NPS? The goal is not to add to creating demand. The peer coach and prevention worker (respondents 7 & 8) stress that with riskier NPS (inter alia NBOME, Alpha PVP) it is even completely discouraged to use it.

#### **Flakka in the media**

In the summer of 2016, media regularly reported about the new drug Flakka (alpha-PVP). Among other things, reports of people with symptoms of Excited Delirium Syndrome (EDS), agitation delirium were reported. These incidents were linked to the drug Flakka. No incident, however, was confirmed to have been actually linked to alpha-PVP (by analysis of a drug sample, or of blood or urine). An agitation delirium is a condition that can occur after the use of multiple types of drugs, such as stimulants, amphetamines, cocaine or ecstasy, or after withdrawal of GHB.

### 3.3 Special Measures prevention 4-FA

Regarding special preventive measures, 4-FA is an exception because this agent is known to a critical mass. In the perspective of peer prevention as little as possible information on new drugs or NPS is shared in face-to-face contacts, as long as they are marginal to the market. But according to the prevention worker (respondent 7), 4-FA is an exception: "A key point in our prevention message is the issue of how users handle a substance they want to use for the first time."

The national Trimbos Institute has specially created a fact sheet on 4-FA in 2016 with information on the substance, the market and the law, the effects of use, dosage, duration and risks. The Jellinek will publish a more extensive 4-FA brochure in 2016 (the first 4-FA brochure dates from 2014). For a good brochure, you need to pay particular attention to the readability and language, according to the prevention worker and peer coach (respondents 7 & 8). "Not too difficult words, short sentences, as complete as possible

but not too lengthy.” The nurses at events keep their knowledge of NPS up-to-date by reviewing new pop-ups on an internal link where new information (including presentations, monitoring, alert notifications, surveys) can be found regarding NPS.

In the Netherlands, various websites ([drugsenuitgaan.nl](http://drugsenuitgaan.nl) and [unity.nl](http://unity.nl)) provide information on use, risks and limitation of 4-FA usage. Information is also disseminated via social media (inter alia, Twitter, Facebook and party sites like PartyFlock), directed at users of recreational drugs. There also is a Drugs Infoline (€ 0.10/min) where employees answer questions about (among other subjects) NPS (especially 4-FA). There also is a chat service in cooperation with other addiction organisations. And lastly, Unity has awareness teams at festivals and clubs. Specially trained youth (‘peer educators’) inform (other) users face-to-face on the effects and risks of 4-FA. It is emphasized that there still is relatively little known about the health risks of 4-FA.

## 4 NPS market

It is generally assumed that the production of substances which are considered NPS, takes place mainly in China and (to a lesser extent) India. Customs often is the first to be confronted with it, but they do not always know for which market the NPS and/or precursors are intended. The transports often take place by passenger flights and/or air cargo. Little is known about other smuggling routes to the Netherlands.

The customs laboratory worker (respondent 6) sees a connection between availability and legal status in the Netherlands and in other European countries. Once a NPS ban is in place, Customs finds (almost) none. She shows a flow model of substances intercepted by Customs. Every year substances appear and disappear. Only a small part (among others 4-FA, 3-MMC and 5-APB) keeps coming back every year. Once there is a new substance on the market, the customs laboratory (respondent 6) immediately searches for information, including user experiences.

### 4.1 NPS entrepreneurs

The police think that suppliers and buyers know exactly which substances within the loopholes can be distributed in the Netherlands and other European countries, using legal knowledge. There are entrepreneurs active in the Netherlands who establish businesses and register with the Chamber of Commerce. The Fiscal Information and Investigation Service (FIOD) cannot check what their exact revenue is. The companies, of which an estimated 50 are active in the Netherlands, import substances from China and / or India, that are not banned here. Especially companies or private deliverers that have a large scale (from 1500 kilos) market, attract the attention of the police. The better-known, and legal, NPS are not necessarily entering the country through known smuggling routes. The items are stored in premises that are linked back to internet shops. Smuggling takes place only when parcels are dispatched by companies in the Netherlands to countries where the NPS is prohibited. The domestic demand for NPS is partly met through the mail. According to the police, larger parties often involve brokering (as evidenced by bank details and amounts collected). Yet only a small part is offered on the Dutch market. The bulk is destined for the foreign market. Many businesses affiliated to internet shops create their own hype.

Some experts (respondents 1,5,7 & 8) also presume that some smart shops c.q. head shops sell 'legal highs' (among others 4-FA, 5-APB and 3-MMC) under-the-counter.<sup>1</sup> Finally, the delivery services may also supply 4-FA, in addition to amphetamines, ecstasy and ketamine.

## 4.2 Ruling European Court hinders NPS approach

The criminal prosecution of NPS is being hampered due to a ruling by the European Court (dated July 10, 2014). The ruling states that one can only speak of a drug in the sense of medicine, if a product has a beneficial effect on human health. As a result, the (criminal) detection, enforcement and prosecution of trade and production of NPS by using the Medicines Act is therefore no longer possible.

Because of the ruling of the European Court, a research into synthetic cannabinoids was discontinued. Police can only act because of a request for judicial assistance from abroad, if the substance(s) is (are) included in the Opium Act in the Netherlands. In addition to the classic substances, this also applies to eleven relatively new substances, for example 2C-T-2, 2C-I, MTA and Metoxetamine. For 4-FMP, there is no legal basis to act after a request for legal assistance. The NPS market is described by police as a 'grey zone'. During a Europol meeting, Slovenia, Austria and The Netherlands, Slovenia reported that substances were distributed from the Netherlands to Slovenia that were punishable in Slovenia. NPS that are not included in the Opium Act in the Netherlands, are ordered in China and then sent to a location in the Netherlands. The products are shipped further by parcel mail. Slovenes mainly see activity around 3-MMC, 2-MMC and 4-FA, substances that are not abolished in the Netherlands and therefore, prosecution cannot take place. An exception is 4-MMC (mephedrone), which is on schedule I of the Opium Act since 2012. There may be a way to meet the Slovenes; following the death of a person in 2015 after purchasing from a vendor in the Netherlands Article 174 was put into force.<sup>2</sup> This is, however, only applicable when it is proven to concern 4-FA.

## 4.3 Developments on the NPS market

Although the detection of NPS is not a priority for the police, there is some information available on networks operating in the NPS market. The police see mostly Dutch and other Europeans in the business. The Dutch NPS market is still separated from the classical synthetics market (MDMA and amphetamine). The milieus are largely separated from each other, according to the police. Criminal networks like those active in the banned synthetic market are not (yet) active in the NPS market. One exception is mephedrone, where, according to strategic information from the police, some merging with the MDMA market at the production level has taken place. Internet analyses show that when a substance is likely to become a criminal offense, there are more cheap prices on the Internet. Due to the differing NPS policy, police and justice warn about a growing distribution market of NPS in the Netherlands. At the same time, it is observed that the Dutch NPS market at the consumer level remains modest (with the exception of 4-FA).

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<sup>1</sup> The National Association of Smart Products (Vereniging Landelijk Overleg Smartproducten) has advised it's members not to sell legal NPS.

<sup>2</sup> Artikel 174: 1: Hij die waren verkoopt, te koop aanbiedt, aflevert of uitdeelt, wetende dat zij voor het leven of de gezondheid schadelijk zijn, en dat schadelijk karakter verzwijgende, wordt gestraft met gevangenisstraf van ten hoogste vijftien jaren of geldboete van de vijfde categorie. 2: Indien het feit iemands dood ten gevolge heeft, wordt de schuldige gestraft met levenslange gevangenisstraf of tijdelijke van ten hoogste dertig jaren of geldboete van de vijfde categorie.

## 5 Judicial status NPS

The experts do not think that users are strongly guided by the legal status of a drug. Otherwise, it would be hard to explain the popularity of ecstasy. But according to the party doctor (respondent 4), it comes in handy for users on festivals that 4-FA is not punishable.

Justice does know that businesses behind the shops have other interests and are well aware of the legal status of NPS, but the position of the Public Prosecution Service (*Openbaar Ministerie*) towards 4-FA is relatively hesitant. According to justice and police, NPS must become punishable much earlier. They continue to follow the market to check whether it is a cover for criminals. Justice (respondents 2 & 3) observes that the number of bulk shipments to Europe through the Netherlands is increasing. Bulk orders go to buyers (big players) who redistribute it through online stores to other countries. "We must be careful that the Netherlands won't become a hub in the European NPS market." The police (respondent 1) argues that current developments necessitate more creativity in the fight against drugs. Justice did start an investigation into postal parcels containing NPS sent abroad from the Netherlands.

Justice and police say they regret the absence of an unambiguously, single European legislation on this topic. An equalization of the law inhibits the NPS trading at distribution level and prevents the attraction of entrepreneurs. At the same time, justice and police acknowledge that a user market will remain. Justice (respondents 2 & 3) hopes that cannabis is decriminalized in more European countries in the long term, especially with regard to the synthetic cannabinoids, to make the synthetic cannabinoids market less attractive for consumers.

The Jellinek prevention worker and the peer coach are more cautious with regard to the criminalization of NPS. "If 4-FA is banned, it's possible that 2-FA or 3-FA will be brought on the market," said the peer coach.

### 5.1 The present Drug Strategy

The experts believe that the Netherlands pursues a more flexible policy regarding the criminalization of NPS than most other European countries. There are different views about whether this is desirable or not. There is a realization, however, that prohibiting NPS in advance does not automatically lead to a satisfactory solution. According to the experts, the Dutch NPS user market is relatively small compared to some other European countries. Several reasons for this are brought forward: The street scene is not informed, but apparently also not interested in NPS and just sticks with the classic street drugs (crack cocaine and heroin) and methadone; On the recreational user market, NPS play a minor role, with the exception of 4-FA; And the classic stimulants (cocaine, amphetamine and ecstasy) are easily available, known, reliable, and (according to the DIMS monitoring) of good quality, generally. According to some experts (respondents 7, 8 & 5), these are the reasons why there is little incentive to experiment with NPS substitutes.

According to the police, Dutch users are not so desperate to resort to other means. The classic stimulants smother the breakthrough of NPS. Especially the ecstasy market plays a crucial role. But it is not the poor quality, but precisely the very high purity why 4-FA is popular.

The prevention worker (respondent 7) says that ecstasy is normalized at parties, but most users typically do not want to be completely off the map. The milder empathogen 4-FA is seen as an alternative to the high-dosed MDMA. Others use 4-FA as an alternative to amphetamines. Psychedelics are traditionally less



popular and so are psychedelic NPS (e.g. NBOM's). For the synthetic cannabinoids is also little or no interest since the sale of cannabis in coffee shops (over 18 years) is easy accessible.

Virtually all experts (including justice and police) see a clear link with the presence of coffee shops in the Netherlands and the varied and accessible range of cannabis that comes with it, and the lack of enthusiasm to experiment with (potentially risky) synthetic variants.

The police (respondent 1) believes that drug policy has little impact on the behaviour of users at parties, although there seems to be zero tolerance policy for festivals more often in some regions. The police wonders, given the former emergence of mephedrone (4-MMC) in 2010, what will happen if the MDMA market can be tackled successfully: will NPS therefore become more popular? So far, NPS does not have a high priority for the police. Although, the police (respondent 1) think that NPS will play a more prominent role in the future. Therefore it is important to be in agreement internationally. According to Justice (respondents 2 & 3) the legal status of 4-FA in the Netherlands will only come under pressure as the number of (serious) health incidents further. The party doctor (respondent 4) thinks it is inevitable that there will be a discussion about a ban on 4-FA when the number of 4-FA intoxications will continue to rise further in the Netherlands.

## Appendix - respondents

Police (male)	Respondent 1
Justice (female)	Respondent 2
Justice (female)	Respondent 3
Medical Director a.k.a. the party doctor EMS (male)	Respondent 4
Drug Researcher Trimbos (male)	Respondent 5
Customs laboratory technician (woman)	Respondent 6
Jellinek prevention worker (female)	Respondent 7
Peer Coach Unity (male)	Respondent 8