

Shetland's remote but affluent island communities are facing up to the reality that, unlike the rest of Britain, rising numbers of young people are taking up heroin. Andy McNicoll investigates

# High tide



Three years ago, the 22,000 members of Shetland's close-knit community – who inhabit a string of 15 islands isolated at the apex of the North Sea and North Atlantic, 150 miles north-east of mainland Scotland – faced an uncomfortable truth.

Everyone had heard of heroin users from Glasgow and Edinburgh migrating to the remote Scottish isle. But the death of Megan Chapman, a 17-year-old who grew up in Lerwick, Shetland's main town, was different. With the support of her parents she appeared to have shaken off her year-long battle against heroin addiction. Yet in July 2007, weeks before Megan was due to start a dream job working at a local stables, she died of a heroin overdose at a friend's home.

"I always thought this was a brilliant spot to bring up kids because you can give them much more leeway than if you were down south," Megan's father, Phil, told a reporter at the time. "But I find it very difficult to say that now."

Megan's death stunned the islanders and marked a watershed moment in

their attitudes to drug use. Despite Shetland's prosperity, fuelled by the oil boom in the seventies, and its remoteness from Britain's major cities, heroin has a grip in the community. Drugs could no longer be dismissed as a problem confined to 'south folk' from the mainland.

Figures from Community Alcohol and Drug Services Shetland (CADSS), the isles' main treatment agency, highlight the extent of heroin's penetration. In 2001, CADSS treated a small pocket of heroin users, around three-quarters of whom were incomers from elsewhere. Nine years on, around 70-80 per cent of its heroin-using clients have been born or brought up in Shetland.

Contrary to sensationalist headlines slamming Shetland for having 'Scotland's worst heroin problem', the numbers are relatively low. CADSS now treats around 100 heroin users, a fraction of most urban caseloads. Yet worryingly, while treatment agencies across Britain are witnessing an ageing heroin-using population, Shetland is bucking the

trend. Under-25s now account for around half of CADSS drug treatment clients, compared to a quarter in 2006.

So how and why has heroin gained a foothold in Britain's remotest community, not to mention one where the usual drivers of drug addiction are absent? Homelessness isn't an issue and Shetland has the enviable situation of boasting the highest employment levels in Scotland, along with one of the nation's lowest crime rates.

A key driver of Shetland's expanding heroin trade lies in the isles' affluence. Made rich by its share of the North Sea oil revenues pumped ashore at Sullum Voe oil depot, and its successful fishing industry, Shetland offers a captive and lucrative market for dealers. In the mid-2000s, gangs from Britain's major drug hubs, chiefly Liverpool, got wise to the islanders' spending power and targeted Shetland.

Prior to setting-up CADSS in 2001, Gill Hession, the service manager, spent the majority of her career working for London drug agencies, including the

Hungerford Project. She stresses that CADSS is dealing with similar issues to mainland drug services but recognises that the profile of Shetland's heroin use is unique.

"It's a very different culture of substance misuse. Most don't develop drug problems here because they're unemployed or homeless," Hession tells *Druglink*. "They mostly start using drugs because they can. The community as a whole is quite well off and dealers know that."

Yet the difference with the mainland lies in the fact that heroin is by far and away the most available drug. Coupled with the fact that Shetland's small community means that recreational users, non users and problematic users are more likely to mix, it means people are more likely to come into contact with heroin, particularly when alternatives are in short supply.

"A lot of young folk are taking gear because that's what's available. There are so little soft drugs about, they are going to take the harder stuff," a young heroin user told a study into young people's drug use carried out by CADSS last year.

Many of the triggers for people using drugs on the island echo any other drug-using context. The study found that the majority of young islanders cited 'to be cool' and 'escaping from problems and boredom' as the main reasons underpinning their drug use. "After a while you've played all the games on the computer, it's just something to do", one young heroin user told the research team.

Shetland's remote location limits drug supply, allowing dealers to peddle substances at inflated prices and exploit a 'use whatever's available' drug culture. The most profitable drug is heroin. Smuggled in on ferries, yachts, fishing boats and even through the post, the drug fetches £100 a gram on Shetland, more than double its mainland price.

"Dealers are focusing on heroin purely for the profit margin," says Hession. "They're exploiting the naivety of young adults here. A lot of them haven't grown up knowing anything about heroin, as it was never an issue in Shetland, so there's a real risk that they don't initially appreciate what they're getting into."

The dealers' tactics have transformed Shetland's drug market. In the early 2000s amphetamine and cocaine use was prevalent, particularly among workers in the oil and fishing trades, while cannabis was a popular and available recreational drug. Thankfully, fears that Aberdeen's burgeoning crack cocaine trade would flood Shetland, have never materialised.

Until recent years, the opiate market was never big business in Shetland. Instead it serviced a small group of users, most of who fled to the isles from mainland cities in an attempt to escape their drug using pasts.

According to Hession the availability of most drugs has been curbed in recent years as dealers focus on heroin. While cannabis is apparently scarce on the island at the moment, heroin remains widely available despite Shetland police seizing record amounts of the drug in 2008/09.

Singer-songwriter and journalist Malachy Tallack, grew up on the isles and edits Shetland Life magazine. Tallack recognises that heroin's emergence in Shetland over the last decade and says that the "impression that it's only folk from elsewhere" who use the drug no longer rings true.

## A LOT OF YOUNG FOLK ARE TAKING GEAR BECAUSE THAT'S WHAT'S AVAILABLE. THERE ARE SO LITTLE SOFT DRUGS ABOUT, THEY ARE GOING TO TAKE THE HARDER STUFF

"When I was at school there were pockets of people using cannabis or ecstasy and that sort of thing. Heroin just wasn't around," he tells *Druglink*. "But it's rapidly increased and some young people have started using. In terms of actual numbers it's probably not high but the penetration into the community has been quite dramatic."

Support agencies have been proactive in adapting to Shetland's growing heroin problem. In the wake of Megan Chapman's death in 2007, CADSS introduced specialist drug education to the isles' schools to ensure that pupils are aware of the risks attached to using heroin and other drugs, including alcohol.

Closer ties between drug and alcohol services have also been established as links between heavy drinking and heroin use have emerged. Two years ago Shetland's specialist drug service and alcohol service merged to form CADSS.

"It's only in the last few years that we've seen young folk who are drinking too much, starting to combine their drinking with harder drugs," says Hession. "Now when we ask how someone has made the leap and

started using heroin, they often say that they were drunk. Now, very clearly the community is saying we need to confront our alcohol and drug use culture as one thing, not separate issues."

Strong joint working between Shetland's health, enforcement and specialist agencies underpins its response. Since 2001, CADSS has worked with partners to develop a range of treatment options including substitute prescribing, needle exchange, counselling and aftercare services. The agency's close relationship with social services has been instrumental in getting some heroin-using clients into mainland residential rehab centres, with three-quarters completing programmes first time, a success rate above the UK average.

Shetland Area Command Chief Inspector Dave Bushell acknowledges that the police's strong relationship between police and treatment services, housing agencies and Dogs Against Drugs, a charity that provides sniffer dog support, has been invaluable. "In 24 years policing, I've worked in inner-city London and throughout the North of Scotland. The joint working done in Shetland is the best that I've seen, especially around drugs and alcohol," he tells *Druglink*.

As Shetland's heroin using profile shifts, some challenges facing treatment providers remain constant. Limited public transport, particularly in Shetland's outer reaches, makes outreach work difficult and means some users have trouble reaching the Lerwick-based services. Yet the major barrier remains a lack of anonymity for service users. For some, the fear of being seen even visiting a drug service and 'outed' is a step too far given the stigma attached to being a known drug user in such a close-knit community.

Nevertheless, three years on from Megan Chapman's death, there are signs that a growing recognition of heroin's impact on Shetland's own is shifting islanders' attitudes towards addiction and recovery.

"Shetlanders are naturally very forgiving but in the past someone identified as a drug user would be viewed as one long after they have stopped using," Hession tells *Druglink*. "Now that people realise that users might be a family member or a friend, folk are more willing to give people second chances. That's a big step forward."

■ **Andy McNicoll** is a freelance journalist and was previously DrugScope's Communications Officer