# "How to Spot and Deal with a Drug User in the Family"

# Book 3

# The Drugs Watch Guide

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solutionbooks4u

# A very warm welcome to you!

# Let's just get the formalities out of the way first

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The last nine pages of this book provide you with a consolidated summary of all the links and apps suggested throughout this book. Click the following link to go straight to the summary: <u>Website Links and Apps Summary</u>

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If you know of any better alternatives or similar useful sites or apps then I would like to hear from you: <u>chris@thewatchguides.com</u>

# About the Author

Chris Bowker is a UK military veteran; who served in the Brigade of Guards, the Special Air Service (SAS) and in Intelligence. He served for 25 years working in a combination of high, medium and low risk-countries, often working in hostile environments against terrorist groups and foreign threats.

He spent the last 20 years working as a security consultant and security manager in various commercial sectors, again in high, medium and low-risk countries and environments.

The commercial sector's focus has been on the protection and risk reduction to companies, individuals, property and assets. The areas of the sector included the film and entertainment industry, the steel industry, oil and gas sector, the defence industry, retail industry, insurance industry, aviation industry,

high net worth individuals, government and diplomatic missions, corporations, companies and individuals under perceived or actual threats.

Chris has conducted risk assessments, security audits, evaluations, training and education, mentoring and crisis management within complex and fluid operating environments. Instructed government and commercial agencies and companies in basic and advanced levels of foot and mobile surveillance combined with private investigation work and risk consulting.

He has provided close protection and management planning for international trips of high-profile executives and personnel who were under known terrorist or criminal threats.

He has lived and worked in over 50 countries.

#### Chris is now an Author, Publisher and Entrepreneur.



In a past life, Royal Duties and service with the Special Air Service (SAS)



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# Introduction

By the end of this book, you will know in detail about many types of drugs and their effects. You will learn what to look for in recognizing a possible user and what actions to take if you have or think you might have a drug user in the family! You will learn how to be proactive in prevention and detection measures and what to do if you must be re-active to a confirmed user.



Imagine if that was your child

Kids can hear about drugs everywhere, in music, in movies, the news, and on the TV. They hear about it online, in things like YouTube videos, or on various social media apps. They might see people doing drugs on the street or even in their own home. Exposure is everywhere, perhaps more so than ever before.

As a parent and in a conversation with some teenagers, I realised just how little I know about the "drugs scene" at street level. As parents we know drugs can be dangerous, especially where children are concerned. But how much as adults do we really know about drugs? We may be worldly wise in general terms of the harm that drugs can do, but what do we really know about them and what makes a user a user? Realising I didn't know as much as I thought I did, I decided to research the subject more and then put my findings in writing to share with other people in the form of this book. I am not a doctor or drug councillor.

Whilst this book is primarily aimed at dealing with child drug abuse it also applies to adult users, a user is a user, young or old.

Kids today are very savvy, and the availability of drugs has perhaps never been more rampant than now. The temptation to try or use them is ever present, fuelled often by social pressures or home circumstances.

Those teenagers I mentioned, they can get almost get any type of drug they want. It's just a quick call or text message to a dealer or to someone who knows someone! They are still school children, and yet for them the ability to get drugs is a perfectly normal part of everyday life, like popping to the local store.

The chances are that many kids know far more about drugs than many adults. I'm certainly not quite as wise as I thought I was!

However, they may not know so much about the dangers and the damage that drugs can cause. So that is where we need to join the dots, so to speak. Dealers will not be telling kids about all the possible dangers, but they don't want fatalities either as that's not good for business, or future sales. Adult knowledge and experience combined with kids' knowledge and dare I say experience too, makes an alliance if you like to raise awareness.

This is like having two software programs that need to work together. Both may have different codes or languages, and age versions, but we need them to be compatible so as to understand each other clearly, so that they can work together. We need to know the code or language that joins them. We have the parental knowledge and kids have the street level knowledge.

So, the aim of this guidebook is to give you as much background information as possible so that if you have to address a drugs issue in the

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family, you can speak from a knowledgeable and informed position, you'll know the language, the dots are joined.

Before you go rushing in to deal with a drugs issue though, with the best intentions in the world, it's critical that you have a clear idea of what you may be dealing with first. With the wrong approach and a lack of understanding or sensitivity it is possible to do more harm than good.

These are the problems as I see it where kids are concerned:

#### **Exposure – Temptation – Vulnerability – Social Pressure**

Any of those four or any combination are all potential traps that can lure kids to try drugs.

Drugs, legal or illegal and certain substances are a massive global problem that affect all levels of society, from the rich and famous to the weakest and the most vulnerable. From the in control recreational user to the habitual out-of-control addict.

One thing they all have in common though is that they all need a supply and in Chapter 2 we will look at the drug supply chain industry.

For any family, living with a drug user in the family can be a living hell. Relationships destroyed; trust gone, families, friends and opinions divided as to what to do. The fear and the worry of not knowing what he or she will do next and sadly too often families and friends having to live with the fatal consequences of drug and substance abuse or addiction.



All of that is compounded when children and young adults are the users. But how can you tell if a loved one is using drugs? In some cases, it may be obvious and in other cases there is only suspicion or perhaps you have no idea at all. Having no idea at all then begs the question, well how or why would I know if I have no idea or suspicion? Those questions we will look at and answer in Chapter 3... Ignorance though is not an excuse!

Before that you will learn about many types of drugs and their effects so you can start to recognise the signs, symptoms and behavioural patterns, the tell-tale signs of drug use and abuse!

The technical phrase for a drug user is someone that has a:

#### "substance or drug use disorder"

Okay, just to set the scene of the scale of the global drug problem, in a moment you will see some statistics which are alarming to say the least. These I have broken down into 4 areas, Global, the US, the UK and Australia.

Before you see the statistics though, a question, do you know which are the two most abused drugs in the world? Answer at the end of the statistics.

#### To the statistics...

#### Global:

The following are extracts from the United Nations Office on Drugs and Crime (UNODC) report 2018:

• About 275 million people worldwide, which is roughly 5.6 per cent of the global population aged 15–64 years, used drugs at least once during 2016. Some 31 million people who use drugs suffer from drug use disorders, meaning that their drug use is harmful to the point where they may need treatment.

- Opioids continue to cause the most harm, accounting for 76 per cent of deaths where drug use disorders were implicated.
- Roughly 450,000 people died as a result of drug use in 2015, according to WHO. Of those deaths, 167,750 were directly associated with drug use disorders (mainly overdoses). The rest were indirectly attributable to drug use and included deaths related to HIV and hepatitis C acquired through unsafe injecting practices.
- Total global opium production jumped by 65 per cent from 2016 to 2017, to 10,500 tons, easily the highest estimate recorded by UNODC since it started estimating global opium production at the beginning of the twenty-first century. The total area under opium poppy cultivation worldwide increased to almost 420,000 ha in 2017. More than 75 per cent of that area is in Afghanistan.
- Global cocaine manufacture in 2016 reached its highest level ever: an estimated 1,410 tons. After falling during the period 2005–2013, global cocaine manufacture rose by 56 per cent during the period 2013–2016. The increase from 2015 to 2016 was 25 per cent. The total area under coca cultivation worldwide in 2016 was 213,000 ha, almost 69 per cent of which was in Colombia.
- Cannabis remained by far the most widely consumed drug worldwide in 2016, with 192.2 million past-year users, corresponding to 3.9 per cent of the global population aged 15–64 years. High annual prevalence rates of cannabis use continue in West and Central Africa (13.2 per cent), North America (12.9 per cent) and Oceania (11.0 per cent).
- In addition to being the most widely consumed drug worldwide, cannabis continues to be the most widely produced. Over the period 2010–2016, the cultivation of cannabis was reported, directly or indirectly, to UNODC by 145 countries located in all regions. Accounting for 94 per cent of the global population, that is more than twice the number of countries reporting opium poppy cultivation.
- In July 2017 police forces from several countries worked together to take down the largest drug-trading platform on the darknet, the part of the "deep web" containing information that is only accessible using special web browsers. Before it was closed, AlphaBay had featured more than 250,000 listings for

illegal drugs and chemicals. It had had over 200,000 users and 40,000 vendors during its existence.

- Although the scale of drug trafficking on the darknet remains limited, it has shown signs of rapid growth. Authorities in Europe estimated that drug sales on the darknet from 22 November 2011 to 16 February 2015 amounted to roughly \$44 million per year. However, a later study estimated that, in early 2016, drug sales on the darknet were between \$14 million and \$25 million per month, equivalent to between \$170 million and \$300 million per year.
- Surveys on drug use among the general population show that the extent of drug use among young people remains higher than that among older people, although there are some exceptions associated with the traditional use of drugs such as opium or khat. Most research suggests that early (12–14 years old) to late (15–17 years old) adolescence is a critical risk period for the initiation of substance use and that substance use may peak among young people aged 18–25 years.

Source: https://www.unodc.org/wdr2018/prelaunch/WDR18\_Booklet\_2\_GLOBAL.pdf

#### In the US:

The following are extracts from the American Addiction Centers.org:

- According to the National Survey on Drug Use and Health (NSDUH), 19.7 million American adults (aged 12 and older) battled a substance use disorder in 2017.
- Almost 74% of adults suffering from a substance use disorder in 2017 struggled with an alcohol use disorder.
- About 38% of adults in 2017 battled an illicit drug use disorder.
- That same year, 1 out of every 8 adults struggled with both alcohol and drug use disorders simultaneously.
- In 2017, 8.5 million American adults suffered from both a mental health disorder and a substance use disorder, or co-occurring disorders.

- Drug abuse and addiction cost American society more than \$740 billion annually in lost workplace productivity, healthcare expenses, and crime-related costs.
- In 2017, approximately 4% of the American adolescent population age 12 to 17 suffered from a substance use disorder; this equals 992,000 teens or 1 in 25 people in this age group.
- In 2017, approximately 2.3 million Americans between the ages of 12 and 17 and 2.4 million Americans between the ages of 18 and 25 started to drink alcohol.
- About 443,000 adolescents age 12 to 17 had an alcohol use disorder in 2017, or 1.8% of adolescents.
- An estimated 741,000 adolescents suffered from an illicit drug use disorder in 2017, or about 3% of this population.
- Approximately 4.1 million American adults over the age of 12 battled a marijuana use disorder in 2017.
- The majority of people struggling with marijuana addiction in 2017 were between the ages of 12 and 25.
- In 2017, an estimated 14.5 million American adults age 12 and older battled an alcohol use disorder, or 5.3% of this population.
- Over half of all American adults have a family history of problem drinking or alcohol addiction.
- More than 10% of U.S. children live with a parent with alcohol problems.
- Alcohol is the third-leading cause of preventable death in the United States.
- 47% of the 78,529 liver diseases among people age 12 and older in 2015 involved alcohol.
- 40% of all hospital beds in the United States are used to treat conditions related to alcohol consumption.

Source: https://americanaddictioncenters.org/rehab-guide/addiction-statistics

#### In the UK:

The following are extracts from the UK Home Office Crime Survey for England and Wales (CSEW) 2017/18 report:

- Around 1 in 11 (9.0%) adults aged 16 to 59 had taken a drug in the last year. This equated to around 3.0 million people and was similar to the 2016/17 survey (8.5%). The trend in last year drug use among 16 to 59 year old's has been relatively flat since the 2009/10 survey, and the latest estimate was similar to a decade ago (9.4% in 2007/08). However, the 2017/18 prevalence estimate was lower than in 1996 (11.1%), when the time series began.
- Around 1 in 5 (19.8%) adults aged 16 to 24 had taken a drug in the last year. This proportion was more than double that of the wider age group and equates to around 1.2 million people. This was similar to the 2016/17 survey (19.2%), but there was a decrease from 1996 (29.7%). There was no significant change compared with a decade ago (21.4% in 2007/08).
- Around 1 in 29 (3.5%) of adults aged 16 to 59 had taken a Class A drug in the last year, equivalent to 1.1 million people. This increased compared with the previous year and a decade ago (2007/08; both 3.0%).
- Class A drug use among 16 to 24 year old's has been increasing since 2011/12. While not statistically significant from year to year, there is an upward trend apparent in the use of Class A drugs, particularly among 16 to 24 year old's. Although there was no significant change from the 2016/17 estimate for this age group, there was an increase 0 5 10 15 20 25 30 35 Percentages Any drug (16-24) Any drug (16-59) Any Class A drug (16-24) Any Class A drug (16-59) from the 2011/12 survey estimate (6.2% to 8.4%). This was mainly driven by an increase in powder cocaine and ecstasy use. (*There is more about Class A drugs in the next Chapter*)
- As in previous years, cannabis was the most commonly used drug in the 2017/18 CSEW, with 7.2 per cent of adults aged 16 to 59 having used it in the last year (around 2.4 million people). This was similar to the 2016/17 estimate (6.6%), and there was no significant change between 2017/18 and a decade ago (7.5% in 2007/08), but the 2017/18 estimate was lower than at the start of measurement in 1996 (9.4%).

Source: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/72877\_6/drug-misuse-2018-hosb1418snr.pdf

EU drug statistics by country 2019: <u>http://www.emcdda.europa.eu/countries/drug-reports/2019/united-kingdom\_en</u>

#### In Australia:

The following are extracts from the Australian Addiction Center and from the Australian Institute of Health and welfare:

- Nearly 6,000 people die from alcohol-related diseases every year in Australia. That is one person every 90 minutes.
- Given Australia's population size, its percentage of people who use illicit drugs is very large. After marijuana, Australia's most abused drugs are ecstasy, hallucinogens, and amphetamines. The most popular, ecstasy, has been used by 11.2 percent of Australians over the age of 14. That is close to 3 million people and doesn't include the use of hallucinogens, 9.4 percent, or amphetamines, 6.3 percent.
- As of 2017, doctors in Australia were cumulatively writing 14 million prescriptions for opioids pain killers every year. While this may not seem dangerous, 1-in-10 who are prescribed an opioid become addicted to their prescription. That means there are potentially 1.4 million people across Australia who are battling an addiction that came from a genuine need for pain relief.
- 69 percent of drug-related deaths in 2015, a total of 1,395, were due to a prescription drug.
- In 2016, about 8.5 million (or 43%) people in Australia aged 14 or older had used an illicit drug in their lifetime (including misuse of pharmaceuticals). Around 3.1 million (or 15.6%) had illicitly used in the last 12 months and 2.5 million (12.6%) had used an illegal drug not including pharmaceuticals.
- More people in their 40s used illicit drugs in 2016 than in 2013 (increased significantly from 13.6% to 16.2%), particularly among males in their 40s (increased from 15.4% to 20%).

- The average age at which people first tried any illicit drug increased, from 19.3 years in 2013 to 19.7 years in 2016. Between 2013 and 2016, older average ages of first use were reported for cannabis (from 18.5 to 18.7 years), meth/amphetamines (from 21.6 to 22.1 years) and hallucinogens (from 20.0 to 20.4 years).
- People in their 40s in 2016 were more likely to have recently used cannabis, meth/amphetamines and cocaine than people in their 40s in 2001. While people aged 14–19 in 2016 were less likely to have used cannabis, ecstasy and meth/amphetamines than 14–19 year old's in 2001.

 Source: <a href="https://www.addictioncenter.com/addiction/addiction-in-australia/">https://www.addictioncenter.com/addiction/addiction-in-australia/</a>

 Source:
 <a href="https://www.aihw.gov.au/reports/illicit-use-of-drugs/ndshs-2016-key-findings/contents/illicit-use-of-drugs/ndshs-2016-key

I think you may agree that some of those statistics really are alarming, frightening even. What is of great concern is the obvious vulnerability of the young as clearly shown. 12-year-olds battling with substance disorders. 12-year-olds in the liver disease category because of alcohol abuse.

Okay, back to the earlier question, what are the two most abused drugs in the world?

The two most abused drugs in the world are Marijuana and Alcohol. If you are wondering about alcohol, yes, it's a drug, a psychoactive drug that affects the mind and alcohol contains ethanol and is a central nervous system depressant. Did you guess right?

#### Okay, so let's get started

First, some KEYWORDS related to and associated with drugs.

Dictionary Definitions: <u>www.merriam-webster.com</u>

In brackets under each I have added further details.

• Addiction, a compulsive, chronic, physiological or psychological need for a habit-forming substance, behavior, or activity having harmful physical, psychological, or social effects and typically

causing well-defined symptoms (such as anxiety, irritability, tremors, or nausea) upon withdrawal or abstinence: the state of being addicted.

(Someone has an addiction when he or she becomes dependent on ((can't stop taking the drug without getting sick)) or craves a drug all of the time)

• **Depressant**, an agent that reduces a bodily functional activity or an instinctive desire.

(A depressant is a drug that slows a person down. Doctors prescribe depressants to help people be less angry, anxious, or tense. Depressants relax muscles and make people feel sleepy, less stressed out, or like their head is stuffed. Some people may use these drugs illegally to slow themselves down and help bring on sleep — especially after using various kinds of stimulants)

• **Stimulant**, an agent (such as a drug) that produces a temporary increase of the functional activity or efficiency of an organism or any of its parts.

(A stimulant speeds up the body and brain. Stimulants, such as methamphetamines and cocaine, have the opposite effect of depressants. Usually, stimulants make someone feel high and energized. When the effects of a stimulant wear off, the person will feel tired or sick)

• **High**, intoxicated by or as if by a drug or alcohol.

(A high is the feeling that drug users want to get when they take drugs. There are many types of highs, including a very happy or spacey feeling or a feeling that someone has special powers, such as the ability to fly or to see into the future)

• Hallucinogen, a substance that induces hallucinations.

(A hallucinogen is a drug, such as LSD, that changes a person's mood and makes him or her see or hear things that aren't really there or think strange thoughts)

• **Inhalant**, something (such as an allergen or medication) that is inhaled.

(An inhalant, such as glue or gasoline, is sniffed or "huffed" to give the user an immediate high. Inhalants produce a quick feeling of being drunk — followed by sleepiness, staggering, dizziness, and confusion)

• **Narcotic**, a drug (such as opium or morphine) that in moderate doses dulls the senses, relieves pain, and induces profound sleep but in excessive doses causes stupor, coma, or convulsions.

(A narcotic dulls the body's senses (leaving a person less aware and alert and feeling carefree) and relieves pain. Narcotics can cause someone to sleep, fall into a stupor, have convulsions, and even slip into a coma. Certain narcotics — such as codeine — are legal if given by doctors to treat pain. Heroin is an illegal narcotic because it has dangerous side effects and is very addictive)

• Licit, conforming to the requirements of the law, not forbidden by law.

(Legal)

• Illicit, not permitted, unlawful, illegal.

(Illegal)

All the above are not your average everyday conversational words for most people, but you will see them all again as you work your way through this book.

#### Coming up next.

In the next chapter we will look at **Drug Types.** You will learn about the forms that drugs come in and how they are medically classified and how the law in certain countries classifies them.

Also, we will look at the main drug classes and the effects that they can have on a user. These are the signs and symptoms to look for if you suspect that you may have a user in the family. You will learn how those drugs can be taken by a user.

And lastly in this Chapter, you'll learn the slang/street names for many types of drugs. Users and dealers will use coded or veiled speech to cover up and disguise what they are really talking or writing about. In a later Chapter you will see some examples of how they may use slang/street terms.

# **1** Drug Types



Cigarettes and alcohol are classed in many countries as recreational drugs