Harms, benefits and the policing of cryptomarkets: a response to commentaries

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Concise statement

Among the insights in commentaries to our article was the valuable suggestion that cryptomarkets serve a particular subpopulation of drug buyers; whatever harm-reducing outcomes they generate may simultaneously reproduce drug-related inequalities. We caution against generalising our arguments to other online purchasing locations and conclude that responses to cryptomarkets that do not acknowledge benefits may be short-sighted.

Response

We thank the authors of the four commentaries (1-4) for their critical and fruitful engagement with our question: “Will growth in cryptomarket drug buying increase the harms of illicit drugs?”

Van der Gouwe and Brunt (4) in their commentary suggest that our analysis could be extended to include all internet-facilitated drug sourcing, including clearnet webshops and drug discussion forums. While we certainly see value in such an exercise, these other online locations will have different characteristics and therefore, different effects to cryptomarkets. Importantly, our arguments cannot and should not be generalised to virtual platforms that lack the third-party services unique to cryptomarkets— including payment escrow and dispute resolution. Future research examining the harms and benefits connected to various marketplace types must also carefully distinguish among online as well as offline market subtypes, including buying from friends, known and unknown dealers.

Whether or not the cryptomarket drug trade continues to grow, Sumnall (1) suggests that there is no guarantee that the potential harms and benefits as detailed in our assessment will continue in future. This observation is valuable. Sumnall points to cryptomarket mechanisms that facilitate trust via customer feedback on purchases as one variable in our equation for estimating harms and benefits that may falter. We would add that law enforcement activity aimed at degrading trust (5) may similarly impact on harms and benefits.

Even if cryptomarkets serve to reduce some drug-related harms, it is possible that they may function to reproduce, or indeed exacerbate, drug related inequalities. Sumnall points to our suggestion that cryptomarket buyers do not fit the profile of drug users with the most harmful patterns of use. As with independent drug checking services (6) that primarily cater to recreational drug users, cryptomarket drug buying seems likely
disproportionately to exclude from its benefits those most likely to experience drug harms. Martin (2) makes a similar observation in connection to the potential for cryptomarkets to reduce violence. To the extent that these platforms predominantly serve buyers of drugs like MDMA and cannabis, typically sold in markets in which systemic violence is already relatively rare, cryptomarkets may have limited impact in reducing violence where its effects are most problematic.

Martin’s aptly termed ‘gentrification hypothesis’, however, suggests that cryptomarkets may, for some less commonly sold substances like methamphetamine, alter supply networks. Recent evidence in the Australian context is compelling. Australian cryptomarket prices were found to be significantly lower than offline prices for methamphetamine, but this difference was not observed for cannabis, cocaine and ecstasy (7). The disproportionate involvement of organised criminal groups with an established reputation for violence in Australian methamphetamine markets may have functioned to increase the comparative risk – and therefore price – for offline sourced methamphetamine, consistent with Reuter and Kleiman’s ‘risk and prices’ framework (8). To the extent that cryptomarkets facilitate anonymity and physical separation among buyers, sellers and other drug market actors, Martin encourages us not to ‘write off minor reductions in systemic violence as inconsequential’ (p. X).

Mounteney and colleagues (3) encourage us to be wary of the term ‘drug quality’ with its positive connotations in connection to product safety, and here we concur. It was for this reason that we sought to specify how vendor accountability may function to make cryptomarket vendors more likely to sell ‘as advertised’ substances than their offline counterparts, and acknowledged that high purity can lead to harmful outcomes like overdose (p. X), a problem exacerbated in the absence of knowledge about substance content. It is here that we see the potential for the wholesale function of cryptomarkets as a double-edged sword in relation to harms and benefits. While customers using these platforms to source stock for offline resale may have greater confidence in obtaining products with known content and purity than they might when sourcing stock offline, their offline customers may not be protected by the same kind of seller accountability mechanisms. One possibility might be the intentional sourcing of fentanyl from cryptomarkets and then mis-selling it offline as heroin. Research is required to establish the extent to which cryptomarkets may be used in this way, given the sharp rise in accidental overdoses reported by the National Crime Agency which are thought to be linked to fentanyl and its analogues being mixed by dealers with heroin (9).

The joint Europol/EMCDDA publication in November 2017 ‘Drugs and the darknet: Perspectives for enforcement, research and policy’ (5) concluded: “In the light of the relative ease and convenience of the darknet as a sales channel, it is essential that measures are considered to prevent and discourage consumers from using online platforms for obtaining drugs.”. We are minded to ask: in favour of what alternative? We find here little critical reflection on the implications of law enforcement ‘success’ in the form of arrests and marketplace disruption measures. Will drug harms, drug deaths and violence as a result of such ‘successes’ be reduced? Or might these be increased? Our analysis suggests that the relationship between drug purchasing and harms and benefits is complex and dynamic. The need for monitoring and well-designed research is urgent.
4. van der Gouwe D, Rigter S, Brunt TM. Focus on cryptomarkets and online reviews too narrow to debate harms of drugs bought online. Addiction. 2017.