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# The Changing Demographics of Cocaine Body Packers in Jamaica

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## Abstract

Cocaine trafficking by body packers has become epidemic in Jamaica. In 1999 the Jamaican government created a specialized anti-drug task force aimed at intercepting body packers at international airports. An important method used to identify these packers is passenger profiling. International experience suggests that the majority of body packers are single females from under-privileged backgrounds with multiple dependents. This retrospective study describes the demographics of Cocaine body packers detained at the largest international airport in Jamaica between January 2002 and December 2006. There were 189 body packers identified, with a marked preponderance of male offenders (81% vs 19%). There were 153 males, with a mean age of 34.3 +/- 9.5 years (Range 17 to 57; Median 33; Mode 38). Only 35 offenders were female, with a mean age of 29.9 +/- 10.4 years (Range 17 to 55; Median 27; Mode 27). The demographics of the Cocaine body packer in Jamaica have changed. The typical body packers are now young males. The anti drug task forces must be aware of these trends in order to effectively identify and detain offenders.

## INTRODUCTION

Jamaica is a notorious trans-shipment point for Cocaine trafficking to developed countries. ([123]) "Body packing" is a common method of transport where the smugglers ingest Cocaine filled packages to avoid detection by authorities. ([1234])

In an attempt to control this practice, drug enforcement authorities have introduced many anti-trafficking measures at the Jamaica's emigration ports. ([5]) One such measure was the 1999 inception of the Airport Counter Narcotic Interdiction Task Force, a specialized anti-drug task force aimed at intercepting body packers before they could board commercial airlines. ([56])

These anti-drug task forces commonly employ the method of passenger profiling to select suspicious individuals for detailed searches. Prior local and international experience suggests that the majority of the detained body packers are single females from under-privileged backgrounds, usually with multiple dependents. ([3478])

We performed a retrospective audit of all body packers identified at the largest international airport in Jamaica in order to determine the demographics of body packers in this setting.

## METHODS

When detained by the Airport Counter Narcotic Interdiction Task Force, body packers are brought to a hospital for evaluation and management. In Jamaica, they are brought to government institutions in proximity to the international airports. The Cornwall Regional Hospital (CRH) is a public tertiary referral centre that is located 10 Kilometres from the Sangster International Airport in Montego Bay, the larger of two international airports in Jamaica. Virtually all the detained body packers at the Sangster International Airport are taken to the CRH for observation and/or treatment.

We identified all the patients admitted to this hospital with a diagnosis of Cocaine body packing over five years from January 1, 2002 to December 31, 2006. The patients were included in the analysis whether they were detained or presented to hospital voluntarily. Their hospital records were retrieved and demographic data extracted for analysis.

The data extracted from the hospital records during the study period were entered in a Microsoft Excel<sup>®</sup> worksheet and analyzed using SPSS version 12.0.

## RESULTS

There were 189 patients admitted to the CRH over the study period for suspected Cocaine body packing. There was a

marked preponderance of male offenders (81% vs 19%). This trend was consistent throughout each year during the study period as outlined in table 1.

**Figure 1**

Table 1: Hospital Admissions for Cocaine Body Packing

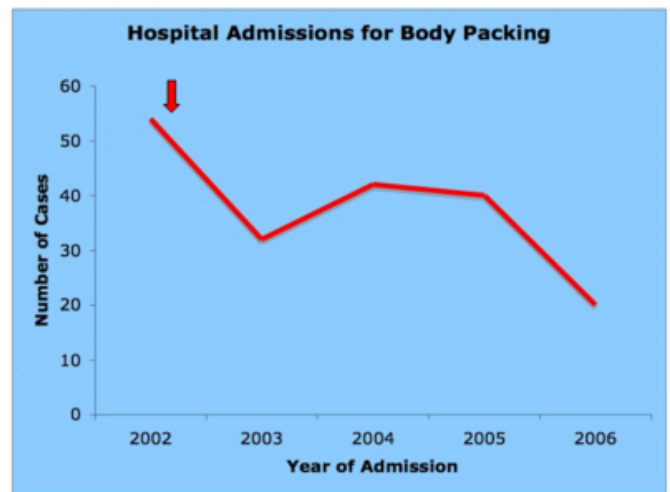
Year	Total	Male	Female
2002	54	44	10
2003	32	28	4
2004	42	31	11
2005	40	36	4
2006	20	16	4

There were 153 males admitted over the study period. Their mean age was 34.3 +/- 9.5 years (Range 17 to 57; Median 33; Mode 38). Thirty five females were admitted over the study period with a mean age of 29.9 +/- 10.4 years (Range 17 to 55; Median 27; Mode 27).

There was a notable decline in the number of hospital admissions over the study period as outlined in Figure 1. The reason for the decline could not be determined from the study methods, but the trend coincides with previous reports of the introduction of screening machines at Jamaican airports. ([9])

**Figure 2**

Figure 1: The number of cases of detained body packers has reduced. The red arrow marks the introduction of screening machines at emigration ports. ([1])



There was a paucity of data regarding the patients’ marital status, number of dependents, socio-economic background and ethnicity in the hospital records. When available, there was inconsistent correlation between the information in the admission records, physician notes, nurses notes and hospital security records. This information was not included in our analysis.

**DISCUSSION**

The high demand for Cocaine in developed countries fuels the drug trade in many Caribbean territories. ([569]) Jamaica is a notorious trans-shipment point. ([12345678.]) It has been estimated that 30% of Cocaine imported into the United States ([5]) and over 50% of the Cocaine available on the streets of Britain ([9]) have been in transit through Jamaica.

Body packing is a common method of transport. ([1234]) The packers ingest several small pellets that contain an average of 3-12 grams of Cocaine (Fig. 2). They are encapsulated with a variety of materials including condoms, plastic films and even aluminium foil. ([13410]) The packers transport several packages with an average total weight of one kilogram, often by commercial flights to the delivery points. Upon arrival at their destination, packers are usually given laxatives, cathartics or enemas in an attempt to expedite delivery of their cargo. ([13410])

**Figure 3**

Figure 2: Cocaine pellets confiscated from detained body packers in Jamaica. Multiple pellets spontaneously evacuated by an offender. Surgically extracted pellets from the stomach of an offender.



Body packing is rampant in Jamaica because there is a large population of impoverished persons with an estimated 15% prevalence of unemployment. ([3]) The drug trade organizations target these individuals using the lure of enormous financial rewards. ([12348]) It has been reported that body packers can earn between £2,000 and £5,000 (US \$3,960 to \$9,906) per successful trip. ([3])

In an attempt to stem this practice, the Jamaica government has invested significant resources into the detection of these body packers at Jamaica's ports of emigration. Specific airport based efforts include the installation of ion scanners and Emit® screening machines (Dade Behring Inc. Illinois, USA) in 2002 to detect trace amounts of Cocaine ([9]) and the 1999 inception of the Airport Counter Narcotic Interdiction Task Force, a specialized anti-drug task force aimed at intercepting body packers before they could board commercial airlines. ([56])

It has already been noted that there was a sharp decline in the number of hospital admissions over the study period that coincided with some of these anti-trafficking measures. It is unlikely that this was due to increased numbers of packers escaping detection at Jamaican airports because there have been similar reductions in packer arrests at airports in the commoner destination countries. ([6]) Although the reason for this trend cannot be definitively ascertained from this study method, it seems plausible that less individuals are taking this risk because they are dissuaded by the visible presence of enforcement agents and the highly publicised installation of screening machines at Jamaican airports. ([569])

Information on the marital status, ethnicity and socio-economic background of the offenders was not reliably available with this study method. When the information was available, the data recorded by admission clerks, physicians,

nurses and hospital security officers were inconsistent, even within the same admission. This was not unexpected since detained packers are often deceptive historians and are uncooperative as they face the impending reality of incarceration. This is important information and deserves further study. This may require incorporation of data from other sources, such as police records, or the creation of a prospective study database.

It was interesting that the preponderance of detainees were young males (34.3 +/-9.5 years). This is not in keeping with the published demographics where most individuals were single young females. ([123478]) This information is important because it will allow law enforcement agents, who rely on suspect profiling, to redirect their efforts to this group of individuals in order to increase the proficiency of their detection.

Increased packer detention and drug confiscation means that there will be less Cocaine available for local consumption and for export. Additionally, this makes it more costly for drug trade organizations to move their product, thereby squeezing the funding available to sustain the drug trade. This is brought into perspective when we consider that a single body backer carries an average of one kilogram of Cocaine, which at wholesale prices garners between US \$30,000 and \$90,000 in European countries. ([3])

There should also be wider societal benefit if this information can be used to increase the number of detentions. Jamaica now has the world's third highest homicide rate behind South Africa and Colombia, 50% of which are reprisal or drug-related killings. ([11]) We hope that by assisting to stem the drug trade, proper use of this information will eventually lead to a concomitant long term reduction in the prevalence of interpersonal violence in Jamaica.

**CONCLUSION**

The demographics of the Cocaine body packer in the main tourist hub in Jamaica have changed. There is now a preponderance of males attempting to transport Cocaine by body packing. The authorities must be aware of this trend in order to effectively identify these offenders if the practice is to be tempered.

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