Observatoire français des drogues et des tendances addictives

December 2025

Tendances
Drugs, international challenges
Drugs and addictions, key data

Inès Longuet (OFDT),
Delphine Tinval (ORSAG)

TENDANCES

DRUGS AND ADDICTIVE BEHAVIOURS IN SAINT-MARTIN AND SAINT-BARTHÉLEMY

ABSTRACT

■ To the north of Guadeloupe, Saint-Martin forms part of the logistical chain for cocaine trafficking between the producing countries of South America and Europe. Couriers use it as an air route to circumvent enhanced compliance checks in French Guiana, Guadeloupe and Martinique.

■ Cannabis use is described as relatively common in both territories. In Saint-Martin, its use is viewed more positively within the local population than cocaine use.

■ On both islands, the availability of cocaine acts as a factor facilitating its use in recreational settings, particularly among new residents. Among young seasonal workers, the blurred boundaries between professional and personal life can heighten the risks of addiction and vulnerability.

■ On both islands, crack cocaine use has been observed among people in highly precarious situations. While this issue is structural in Saint-Martin, it remains marginal in Saint-Barthélemy and mainly affects homeless workers seeking economic opportunities.

■ In both territories, the health care supply in addiction medicine is limited and the possibilities for long-term follow-up are inadequate.

Observations of drug use in the French overseas departments and territories (OUDOM), a project of the French Monitoring Centre for Drugs and Drug Addiction (OFDT), is based on qualitative surveys carried out in the overseas territories. It draws on the methods developed as part of the Emerging Trends and New Drugs (TREND) scheme, with the aim of developing documentation on trafficking and the use of psychoactive substances in these areas. This issue of *Tendances* presents the findings of the study conducted in Saint-Martin and Saint-Barthélemy in 2025. Driven by the local public authorities, the survey was conducted alongside the Guadeloupe component of the OUDOM project, in order to address the lack of data for these areas.

Located in the heart of the Caribbean Sea, the islands of Saint-Martin and Saint-Barthélemy (commonly referred to as Saint-Barth') are French overseas territories and constitute two distinct territories with contrasting demographic and socio-economic realities. Saint-Barthélemy is a small island territory, with just over 10 000 inhabitants living in an area of 21 km^2. The island of Saint-Martin has a total area of 90 km², divided between the Dutch side, Sint Maarten, and the French side, which covers 53 km² and is home to over 40 000 inhabitants. This binational context, combined with a cosmopolitan population resulting from various waves of migration dating back to the 1980s, makes Saint-Martin a unique area facing multiple challenges regarding drugs. Furthermore, since the early 2010s, Saint-Martin has had an ageing population, mainly due to young adults leaving in search of economic opportunities. In less than 10 years, the proportion of people under 24 has fallen from 40.8% to 34.6%, while the proportion of those aged 55 and over has risen from 14.5% to 24.4% [1]. The two islands are also home to a range of different social groups. Local residents and residents from mainland France, seasonal workers and tourists cross paths, as seen in other overseas territories [2]. However, the dynamics differ due to the specific contexts of the two areas. These characteristics result in a range of motivations and patterns of use of psychoactive substances, shaped by the age and origin of the population.

The two territories also differ economically. Saint-Barthélemy has a relatively prosperous economy: its Gross Domestic Product (GDP) per capita is significantly higher than the average recorded in France as a whole, including the overseas territories (€38 994 compared with €32 404 in 2014[1]) and is also higher than that of Saint-Martin (€16 572 in the same year) [3].

1. Socio-economic and statistical data in Saint-Martin and Saint-Barthélemy remains limited, which accounts for gaps or discontinuities in the data available over multiple years.

The economy of Saint-Barthélemy is based on high-end tourism and relies primarily on the hospitality and catering sector, retail, and construction industry, which account for the majority of private-sector employees. This model supports a high standard of living and a very low unemployment rate, only 1.9% in 2022 compared to 7.3% in France as a whole excluding Mayotte, and 28.8% in Saint-Martin [3]. While tourism is also the main pillar of the economy in Saint-Martin, this island has been more severely affected than Saint-Barthélemy by successive crises (Hurricane Irma in 2017, the COVID-19 pandemic in 2020), which have profoundly destabilised the sector.

[…] Located on the strategic route between South American coca leaf-producing countries and Europe, Saint-Martin and Saint-Barthélemy are at the centre of international cocaine trafficking. Nevertheless, the impact of this trafficking on local contexts, patterns of use and treatment services for drug users varies between the two territories.

Saint-Martin, a territory on the cocaine route

Since the mid-2010s, global cocaine production has been steadily increasing [4]. Trafficking to Europe occurs from the three main cocaine-producing countries (Colombia, Peru, Bolivia) by sea and air, passing through the transit areas of the Guiana Shield and the Caribbean islands. Saint-Martin is one of the many links in this transport chain. […]

Maritime drug trafficking is also particularly challenging to address at a local level, due to the island›s binational status and the proximity of neighbouring island territories, which are also transit points for cocaine destined for Europe. No information has been gathered regarding synthetic drug trafficking, as they are found in the territory to a lesser extent than cocaine and cannabis. […]

Since 2022 and the introduction of the so-called "100% compliance check", a system of enhanced compliance checks at Félix Éboué Airport in Cayenne, French Guiana, dealers have developed new intermediary routes for transporting drugs to Europe. Gradually, the airports in Guadeloupe and Martinique have experienced a resurgence of this phenomenon, which had been scarcely or not at all identified there until the late 2010s [5]. However, due to enhanced security measures at these airports, law-enforcement services in Saint-Martin have observed a third wave of diversion of trafficking by cocaine air couriers, which are increasingly transiting through Saint-Martin›s two airports (Grand Case and Princess Juliana).

To counter this displacement phenomenon, the authorities of Saint-Barthélemy and Saint-Martin carried out an initial local "100% compliance check" campaign at Grand Case Airport in July 2025 [6]. Such measures are set to be increased. It should be noted that Princess Juliana International Airport handles the majority of flights to and from Saint-Martin and remains outside the jurisdiction of the French authorities, as it is located in the Dutch part of the island.

Clearly identified physical points of sale

Local trafficking of psychoactive substances in Saint-Martin is characterised by the presence of points of sale, in particular for cannabis, operated by groups of drug dealers established in various neighbourhoods. Their location depends on group affiliation and strategic considerations, such as the possibility of a quick escape in the event of intervention by law-enforcement services, and the presence of hiding places to conceal or abandon goods. In most cases, drug dealers travel or remain on motorbikes to facilitate a possible escape. In the French part of Saint-Martin, more than 30 points of sale have been identified and are known both to law-enforcement services and to users of psychoactive substances. […]

In Saint-Barthélemy, law-enforcement services have identified three points of sale for cannabis and cocaine, located in the nightlife areas of Gustavia and Saint-Jean, following a pattern similar to that observed in Saint-Martin. Dealers are stationed at specific locations and supply local users with substances directly on the street. Clients may also have the contact details of their usual dealer, allowing them to arrange transactions or deliveries directly by telephone. Supply arrangements for wealthy tourists are, however, more difficult to observe. These networks are parallel, discreet and private, operating beyond the oversight of law-enforcement services.

A significant presence of cannabis

The presence of cannabis in the Caribbean is rooted in a strong cultural tradition, influenced by both geographical and symbolic proximity to Jamaica and Rastafarian culture[2]. In Saint-Martin, cannabis use among a cosmopolitan population originating from various neighbouring territories follows this same pattern. In Saint-Barthélemy, cannabis use is also reported to be common.

On both islands, the authorities interviewed report an absence of organised cannabis cultivation. Local production of herbal cannabis is described as marginal. It is limited to individual growers who cultivate the plant for their own use or that of those around them. In Saint-Martin, supply is described as relying mainly on imports from Canada and the United States.

Herbal cannabis is virtually the only form in circulation, with cannabis resin rarely reported by respondents. This mirrors the situation observed in other French departments in the Americas [2, 7]. Various varieties are reported in both territories, enabling users to tailor their use according to the desired effects and their budget. The variety referred to as "Jamaican" or "jammie" is described by users as being of "low quality", but is also the least expensive, with its reported price starting at €2.50 per gram in Saint-Barthélemy and around €5 in Saint-Martin. Conversely, other varieties of herbal cannabis regarded as higher quality by experienced users are available at a reported price ranging from €10 to €20 per gram. Cannabis can therefore be considered expensive for these users, some of whom are accustomed to prices in mainland France (ranging from €8 to €10 per gram [8]). […]

In both territories, supplies of cannabis are mainly sourced from identified urban points of sale. Respondents did not report the use of digital platforms such as Snapchat or Telegram for advertising or customer development purposes. However, home deliveries via WhatsApp may take place when the drug dealer is part of a close circle of acquaintances. A user in Saint-Barthélemy reports the possibility of obtaining pre-rolled cannabis cigarettes in packs through this channel, for a price of around €40 for four joints. […]

Cocaine use, a widespread phenomenon

Respondents agree that cocaine is highly prevalent in both territories, with its circulation facilitated by the proximity of producer countries. In Saint-Martin, the price per gram recorded at the time of the survey ranges from €15 to €20, which is approximately three times lower than that observed in mainland

2. Rastafarian culture, which originated in Jamaica in the 1930s, regards cannabis as a sacred plant used for spiritual purposes. This symbolism has shaped social perceptions of cannabis in neighbouring Caribbean territories.

France in 2023, where it ranged from €50 to €60 [8]. In Saint-Barthélemy, users report prices ranging from €20 to €50 per gram, with variations depending on the buyer's profile and their relationship with the drug dealer.

In 2024, 56% of visitors to Saint-Barthélemy were from the United States, while 61% of tourists in Saint-Martin were from mainland France [1, 3, 9]. The ready availability of cocaine probably accounts for its popularity among these groups, who have access to a substance that is less expensive than they are used to, while also possessing greater purchasing power than local residents. For example, in 2021, the average price of cocaine in the United States was estimated at around €120 per gram [10]. Among cocaine users visiting the islands, their use is therefore sometimes heightened, driven by the opportunity to use at a lower cost.

While the average purity of seized cocaine was 73% in mainland France in 2023 [11], seizures by the Drug Enforcement Administration (DEA) in the Caribbean region for the same year recorded an average purity of 83.4% [12, 13]. Among the users surveyed, there is a perception of "superior quality", which contributes to the reputation of better "value for money" locally. […]

In Saint-Barthélemy, cocaine use is described by respondents as widespread. Parties and nightlife play a central role in integrating newcomers to the island, who have easier access to the substance within local social circles. Arrival in Saint-Barthélemy can therefore act as a catalyst for both experimentation and increased use. […]

Similarly, this party culture facilitates the use of cocaine among the many seasonal workers present on both islands in hospitality establishments.

In Saint-Barthélemy, where there is a shortage of housing, most establishments employing seasonal workers provide shared accommodation for young seasonal workers. The fast-paced work environment, combined with social integration through parties and communal living arrangements, encourages these young adults to experiment with psychoactive substances, particularly cocaine. […]

According to a healthcare professional in Saint-Barthélemy, substance use tends to increase during the high season with the rise in professional activity, driven by an intense work pace, high pressure, and an omnipresent party environment. This leads to consequences such as road traffic accidents or psychiatric complications. […]

In Saint-Martin, crack cocaine users in highly precarious situations

In Saint-Martin, free base cocaine[3] users are predominantly members of the local population facing structural precariousness, as observed in Martinique and French Guiana [5, 7]. They live in an urban environment, mainly in Marigot and the surrounding areas. Experimentation may occur during adolescence, often encouraged by family members or friends who use. The adoption of daily use can be explained by the need to alleviate the challenges of urban life, serving as a tool for survival in highly precarious situations. […]

As observed in Martinique and French Guiana, there is an ageing population of free base cocaine users monitored by social workers. Their ages range from 25 to 70 and their use tends to be long-term. According to respondents, this use in urban areas has not increased since the early 2000s. On the contrary, certain places that were once emblematic, such as a car park on Rue Saint-James that was historically frequented by users, now tend to be abandoned.

According to respondents, free base cocaine is available in Saint-Martin directly in the form of crack cocaine. This encourages purchases in small quantities and increases accessibility of the substance among vulnerable groups. Supplies are obtained from drug dealers at a reported price of around €5 per rock. For these vulnerable populations, purchasing this substance depends on income from occasional undeclared work, known in French as "jobs", which are typical in the overseas territories studied as part of the OUDOM project and the TREND scheme. Some individuals mention gardening, masonry or painting services, activities that can be paid for either in cash or with substances. Women also engage in sex work to obtain free base cocaine.

According to the respondents, free base cocaine is most often used with homemade crack cocaine pipes, which users make themselves from cans or other metal containers. Glass crack cocaine pipes for individual use, which remain an essential harm reduction measure by helping to limit the transmission of infectious diseases and prevent injuries associated with other methods of use, are relatively scarce (see "Limited treatment of addictions").

Vulnerable workers and crack cocaine in Saint-Barthélemy

Poverty in Saint-Barthélemy remains scarcely documented, as the island is mainly known for its affluent households and luxury tourism. The proportion of recipients of minimum social benefits is low: in 2016, only 0.7% of the population received the active solidarity benefit (RSA), compared with 20% in Guadeloupe in the same year [15]. Nevertheless, respondents highlight the presence of individuals in highly precarious situations in the territory. Attracted by higher wages, workers from Guadeloupe or Saint-Martin do not have sufficient resources to secure accommodation locally. Marginality is characterised by isolation and the use of temporary shelters on beaches, in cars or on boats.

In Saint-Barthélemy, the use of free base cocaine is closely linked to situations of social and economic disadvantage. Job loss, reduced income and homelessness are factors that contribute to this use, which seems to serve as a way to escape daily hardship and stress associated with precarious situations. […]

Law-enforcement services report difficulties in apprehending drug dealers in possession of free base cocaine. This substance is more commonly found directly with users. The observations do not make it possible to determine whether free base cocaine is available for sale ready for use, or whether it is produced from cocaine hydrochloride by users.

Limited treatment of addictions

In Saint-Martin, the Treatment and Prevention Centre for Addiction (specialised drug treatment centre or CSAPA) is the only medico-social facility entirely devoted to supporting people who use psychoactive substances. In Saint-Barthélemy, the health care supply in addiction medicine relies entirely on services based in Saint-Martin. Although the CSAPA and the Community Mental

3. Free base cocaine, also known as "crack cocaine" or "free base", is a derivative of cocaine hydrochloride, produced by adding bicarbonate or ammonia. A "rock of crack cocaine" refers to a small solid lump of free base cocaine obtained after the transformation process, which is consumed by smoking.

Methodology

This qualitative field study was carried out jointly by the OFDT research officer responsible for observations of drug use in the French overseas departments and territories (project OUDOM), during a visit to Saint-Martin and Saint-Barthélemy in May 2025, and the sociologist commissioned by the Guadeloupe Regional Health Observatory (ORSAG) as part of the OUDOM project.

This qualitative study aims solely to highlight convergent trends based on the collection and comparison of accounts from various local stakeholders involved in the use and trafficking of psychoactive substances, gathered without concern for representativeness.

The respondents were recruited both from facilities providing counselling to users of psychoactive substances (addiction medicine services, accommodation centres, and directly at identified use sites: areas frequented by people in situations of disadvantage or nightlife venues). To preserve anonymity in these small territories, the names of the organisations remain confidential. The law enforcement officers interviewed (gendarmerie, police, border police, customs, prefecture, Public Prosecutor's Office) as well as territorial civil servants were contacted with the support of the Prefecture of Saint-Martin and Saint-Barthélemy. As part of this study, professionals from the hotel industry were also consulted as key observers in a sector where the use of psychoactive substances is particularly prevalent. One of them was also interviewed as a former cocaine user. In total, 38 interviews were conducted with 63 participants.

- In Saint-Martin, 22 semi-structured interviews, either individual or group, were conducted with 37 participants: 6 professionals from the field of law enforcement, 16 professionals from the medical and medico-social sector, 14 psychoactive substance users and 1 professional from the hotel sector.
- In Saint-Barthélemy, 16 interviews were conducted with 26 participants: 10 law enforcement and local authority officers, 6 professionals from the medical and medico-social sector, 6 psychoactive substance users and 3 professionals from the hotel sector.

Health Center (CMHC) in Saint-Martin offer clinic hours and mobile support in Saint-Barthélemy, with visits to the island a few times a month, there is no dedicated facility permanently based on the island. This lack of specialised institutions is a significant barrier to treatment, as follow-up must necessarily continue in Saint-Martin, or even in Guadeloupe when the case requires more intensive support or specialised treatment. There is a similar issue in Saint-Martin, where the existing services also do not allow for comprehensive care pathways. Long-term follow-up and hospital admissions require referral to other territories. […]

In both territories, social and medico-social professionals highlight the complexity of supporting individuals experiencing addiction, due to the limited number of specialised facilities and the lack of long-term support solutions. Accommodation facilities, in particular, remain scarce and are insufficient to provide comprehensive and long-term support for precarious populations. Furthermore, the lack of facilities is compounded by insufficient staffing, which also prevents optimal care for beneficiaries.

In Saint-Barthélemy, the issue of mutual acquaintance, which is heightened in this small territory, can also limit consultations for individuals experiencing addiction. Some professionals interviewed state that reputational concerns restrict access to health care among socially integrated individuals.

Furthermore, there is no Support Centre for the Reduction of Drug-related Harms (harm reduction facilities or CAARUD) in either of the two territories. Overall, the provision of harm reduction (HR) measures remains limited. In Saint-Martin, few organisations distribute crack cocaine pipes as part of efforts to prevent risks of infection and injuries associated with consumption patterns, while in Saint-Barthélemy, no distribution of HR equipment has been observed.

Conclusion

In Saint-Martin, cocaine trafficking is a key component of the transatlantic network supplying Europe. Saint-Barthélemy, on the other hand, is more of a destination island for substances. On both islands, local trafficking is concentrated around points of sale known to law-enforcement services and users. In Saint-Martin, the growing presence of criminal groups influenced by foreign actors is of particular concern to the authorities, especially in the context of rising global cocaine production.

Cannabis use is similar on both islands. It is socially tolerated, and the substances available are sold at comparable prices and under similar names. Cocaine use is also widespread there and deeply embedded in party culture. Young seasonal workers are particularly at risk, as their professional and social integration exposes them to easy access to the substance. Its low cost and high availability make it harder to stop and often lead to more intensive use. This can result in significant social consequences, ranging from job loss to increased precariousness.

Whilst precariousness is a structural issue in Saint-Martin, due to a lower standard of living, it remains marginal in Saint-Barthélemy, mainly affecting homeless workers seeking economic opportunities. In a context where access to housing is particularly challenging, homelessness becomes, for some, the only way to remain on the island. In both territories, disadvantage and free base cocaine use are closely linked, with the substance circulating mainly within marginalised communities. Nevertheless, professionals interviewed in both territories also reported instances of free base cocaine use among socially integrated populations[4]. Similarly to synthetic substances (MDMA/ecstasy, ketamine, cathinones, etc.), which were only marginally observed in this survey, a more in-depth documentation of these dynamics of use would help to better understand the nature of such use as well as the profiles of users.

Finally, treatment for people who use psychoactive substances remains inadequate in both territories. In Saint-Martin, the only addiction medicine facility on the territory is not sufficient to meet all needs, particularly with regard to a dedicated inpatient care pathway. In Saint-Barthélemy, this shortfall is exacerbated by the near total absence of local facilities, with interventions occasionally provided by services from Saint-Martin. In a context where social relations make the treatment of addiction a taboo subject, the need for permanent and accessible facilities is a key factor in improving access to health care. Furthermore, the delivery of harm reduction material related to drugs is limited on both islands.

4. Here, social integration is defined by stable housing and employment, as well as a steady income.

Bibliography

Links available on 18/11/2025

1. IEDOM (2025) Rapport annuel économique de Saint-Martin 2024. Paris, Institut d'émission des départements d'outre-mer, 131 p.

2. Obradovic I. (2020) Drugs and addictions in overseas France. State of play and issues. Paris, OFDT, coll. Théma, 84 p.

3. IEDOM (2025) Rapport annuel économique de Saint-Barthélemy 2024. Paris, Institut d'émission des départements d'outre-mer, 113 p.

4. UNODC (2024) Online World Drug Report 2024 - Drug market patterns and trends. New York, United Nations.

5. Longuet I., Vassaux T. (2025) Drogues et conduites addictives en Guyane. Paris, OFDT, 32 p.

6. Petit C. (2025) Première opération « 100 % contrôle » à l›aéroport de Saint-Martin : une mobilisation inédite contre le narcotrafic. Guadeloupe La 1ère, 10 juillet.

7. Longuet I., Gérome C., Merle S., Neller N., Thirot M., Zobda-Zebina M. (2024) Drug user practices and drug-related interventions in Martinique in 2022. Paris, OFDT, coll. Notes de résultats, 19 p.

8. Gérome C. (2024) Psychoactive substances, users and markets: trends in 2023. *Tendances*, OFDT, n° 166, 8 p.

9. ITSEE (2025) Tourisme - Bilan Annuel 2024, Institut territorial de la statistique et des études économiques de Saint-Martin, 24 p.

10. UNODC (2025) World Drug Report 2025 - Drug Trafficking & Cultivation. New York, United Nations.

11. OFDT (2025) La pureté des principaux produits stupéfiants depuis 2012.

12. DEA (2024) CY 2023 Cocaine Signature Program annual report. Washington, DC, Drug Enforcement Administration, 23 p.

13. DEA (2025) CY 2024 Annual Cocaine Report. Washington, DC, Drug Enforcement Administration, 26 p.

14. Comité territorial du tourisme de Saint-Barthélemy (2025) Observatoire du tourisme de Saint-Barthélemy 2023-2024, 60 p.

15. ORSaG (2022) Profil socio-sanitaire de la collectivité d'outre-mer de Saint-Barthélemy. Baie-Mahault, Observatoire régional de la santé de Guadeloupe, 29 p.

> **This text is a translation of part of the original French text from:** Longuet I., Tinval D. (2025) Drogues et conduites addictives à Saint-Martin et Saint-Barthélemy. *Tendances*, OFDT, n° 171, 8 p.

Acknowledgements

The respondents and staff of the organisations surveyed, for their time and patience.

The Prefecture of Saint-Martin and Saint-Barthélemy, to the regional health agency of Guadeloupe, Saint-Martin and Saint-Barthélemy, and to the Interministerial Mission for Combating Addictive Behaviours (MILDECA), for their support in organising the OFDT's visit to these territories.

Valérie Ulrich, Clément Gérome and Ivana Obradovic, as well as to the OFDT Scientific Council, for their review.

This study was financed by the Fund for Combatting Addiction, managed by the French National Health Insurance Fund.

Ours

Tendances
Director of publication: Guillaume Airagnes / Editor in chief: Ivana Obradovic.
Review Committee: Virginie Gautron, Fabien Jobard, Aurélie Mayet, Karine Gallopel-Morvan.
Graphic designer: Frédérique Million / Documentation: Isabelle Michot.
Translated in English by Fluent Planet supervised by Anne de l'Eprevier.

ISSN: 1295-6910 / ISSN on line: 2272-9739 /
Photos copyrights: © Monticelllo (Adobe Stock)

Observatoire français des drogues et des tendances addictives

69 rue de Varenne 75007 Paris - France
Tel.: +33 (0)1 41 62 77 16
e-mail: ofdt@ofdt.fr

www.ofdt.fr