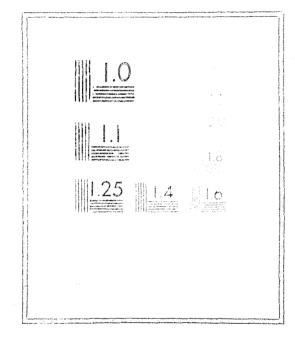
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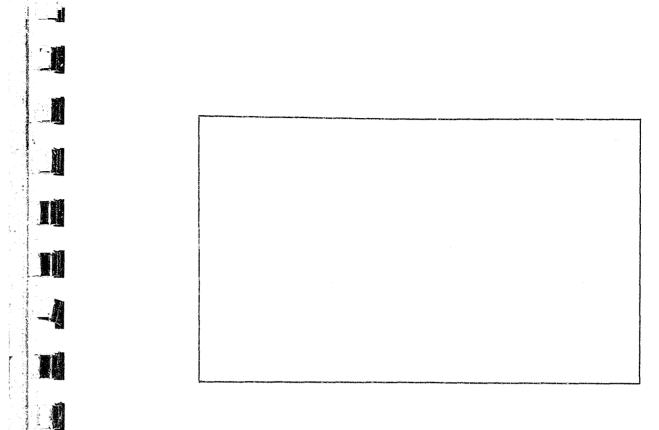


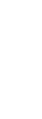
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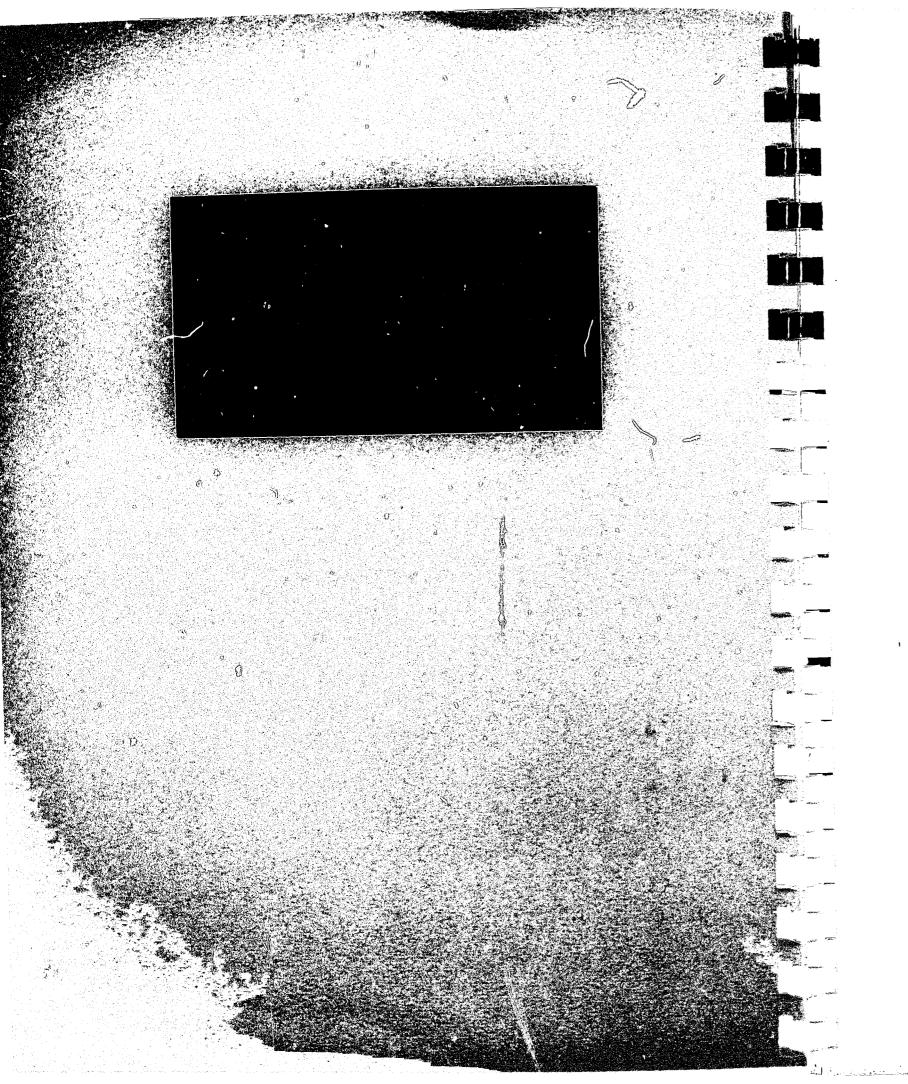
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College of William and Mary

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CORRELATES OF PRISON DRUG USE

An Evaluation of Two Conceptual Models*

bу

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PL Figure 8 and 1

The Metropolitan Criminal Justice Center operates the Pilot City program in Chesapeake, Norfolk, Portsmouth, and Virginia Beach, Virginia. Established in September, 1971, the Center is a research and program planning and development component of the College of William and Mary in Williamsburg, Virginia. The Center's Pilot City program is one of eight throughout the nation funded by the Law Enforcement Assistance Administration of the U. S. Department of Justice. The basic purpose of each Pilot City project is to assist local jurisdictions in the design and establishment of various programs, often highly innovative and experimental in nature, which will contribute over a period of years to the development of a model criminal justice system. Each Pilot City team is also responsible for assuring comprehensive evaluation of such programs, for assisting the development of improved criminal justice planning ability within the host jurisdictions, and for providing technical assistance to various local agencies when requested.

The Pilot City Program has two primary responsibilities -to the host municipalities and to the improvement of the criminal justice system. In Virginia, responsibility for adult
corrections, except for offenders sentenced for one year or
less to local jails, (and for much of juvenile corrections)
rests with the State Department of Welfare and Institutions.
Thus, the Pilot City Program's activities in the adult corrections area consist primarily of program planning assistance to
local correctional efforts and research regarding such currently
important issues in Virginia as sentencing, community corrections, and institutional programming and management, as reflected
in this monograph.

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CORRELATES OF PRISON DRUG USE An Evaluation of Two Conceptual Models

Research on inmate adaptations to correctional settings has traditionally focused on those variables which might enable us to better understand and predict shifts in inmate attitudes and values that reflect the impact of what Clemmer (1940) has termed a prisonization process. This rapidly growing body of literature has linked the degree to which inmates become prisonized to influences and experiences located in their preprison lives (Clemmer, 1940, 1951; Schrag, 1944, 1961; Irwin and Cressey, 1962; Ward and Kassebaum, 1965; Giallombardo, 1966; Wellford, 1967; Edwards, 1970; Irwin, 1970; Thomas and Foster, 1972; Thomas, 1973); such immediate prison influences as alienation (Tittle, 1964, 1969, 1972; Wilson, 1968; Thomas, 1975; Thomas and Zingraff, 1975), sentonce length (Clemmer, 1940, 1951; Wheeler, 1961; Garabedian, 1963; Glaser, 1964; Wellford, 1967; Atchley and McCabe, 1968; Wilson, 1968; Tittle, 1972), and the structural characteristics of the prison organization (Grusky, 1959; Zald, 1962; Glaser, 1964; Street, 1965; Berk, 1966; Street, et al., 1966; Cline, 1968; Wilson, 1968; Mathiesen, 1971; Akers, et al., 1974); and extraprison variables that include the quality and degree of contact with the larger society that is maintained during periods of confinement

(Clemmer, 1940, 1951; Wheeler, 1961; Garabedian, 1963; Thomas, 1973; Zingraff, 1973) as well as the inmate's evaluation of his postrelease life-chances (Thomas and Foster, 1972; Zingraff, 1973). Although on a far more limited level, other studies have attempted to evaluate the extent to which levels of prisonization have implications for the postrelease adjustments that inmates make upon their release from confinement (Garrity, 1961; Glaser, 1964; Kassebaum, et al., 1971; Thomas and Foster, 1972).

Despite the obvious importance of developing a more thorough understanding of the factors that affect the attitudes and values held by inmates and the impact that these attitudes and values have on the postrelease life-chances of these inmates, this body of research provides pityfully little information on the actual behavior exhibited by inmates during the period of their incarceration. The single major exception to this general shortcoming in the existing literature is provided by the several studies that have examined homosexuality among inmate populations (Clemmer, 1940; Kinsey, et al., 1953; Sykes, 1958; Halleck and Hersko, 1962; Ward and Kassebaum, 1964, 1965; Giallombardo, 1966a, 1966b; Kirkham, 1971; Gagnon and Simon, 1968; Akers, et al., 1974). In light of the fact that the two major conceptual models that have been developed as a means by which inmate responses may be better predicted contain quite contradictory implications with regard to the variables that affect both inmate attitudes and behavior, the importance of more detailed analyses of inmate behavior is quite clear. The

purpose of this research, therefore, is to pursue the important work of Akers, et al., (1974) by examining correlates of illicit drug use and abuse within a correctional setting and exploring the extent to which the two basic conceptual models that have been developed in this area of criminology facilitate predictions of such drug use. A secondary goal of our study is to evaluate the pervasiveness of illicit drug use in an institutional setting that is structured in such a way as to minimize the importation and distribution of all non-prescribed drug compounds.

Conceptual Model

Attempts to account for differing responses to imprisonment flow from two basic theoretical paradigms (cf. Cline, 1968; Thomas, 1970). Of the two perspectives, perhaps the structural-functional orientation of the "deprivation model" has drawn the most attention (cf. Sykes, 1958; Sykes and Messinger, 1960; Cloward, 1960; Goffman, 1961). The most fundamental assertions of this model may be simply summarized. Inmates enter correctional institutions having already been exposed to a series of depersonalizing and stigmatizing experiences that tend to strip them of their individual identities. This stripping process is extended by the induction ceremonies adopted in many institutions. Further, upon becoming a member of the inmate population, the inmate assumes a position within the prison organization that forces him to confront and attempt to resolve a variety of problems inherent in confinement.

Sykes (1958) has noted that these problems include such "pains of imprisonment" as loss of status, liberty, goods and services, heterosexual relationships, security, autonomy, and self-esteem. Perhaps more importantly, the structure of the prison organization is such that the inmace cannot resolve the problems that confront him through his individual efforts. Instead, not unlike the dilemma Albert Cohen (1955) posed for his delinquent boys, the inmate learns that he is but one of numerous similarly situated prisoners who share common problems of adjustment, problems that demand a collective response. Thus, proponents of the deprivation model argue that the normative system into which inmates are assimilated through a prisonization process is itself a reflection of a collective response to the various pains of imprisonment that are presented by the structure of the prison organization. This, in turn, implies that an understanding of inmate attitudes, values, and behavior will be derived primarily from an examination of influences that are indiginous to the immediate prison setting.

The narrow focus of functional explanations of inmate adaptations to confinement has not escaped criticism (cf. Irwin and Cressey, 1962; Wellford, 1967; Cline, 1968; Thomas, 1970; Thomas and Foster, 1972, 1973; Tittle, 1972, 1974; Thomas, 1973). To the contrary, numerous researchers have suggested that, despite the obvious importance of problems and presumes associated with the immediate prison setting, inmate adaptations to confinement are conditioned by such factors as their

preprison experiences, extraprison contacts, and evaluations of their life-chances following release from prison. This more processually-oriented perspective, typically referred to as the importation model, places considerable importance on at least three factors. First, although the presence of common problems of adjustment may be sufficient to stimulate some type of adaptive response among inmate populations, the mere presence of common problems does not provide an adequate basis for predicting a particular response pattern. Second, many problems of adjustment that many inmates confront are neither directly related to organizational characteristics of the prison nor are they subject to control by that organization. Third, it seems unrealistic to expect that the adaptations made by adults who have already experienced many years of preprison socialization would be totally or even largely unrelated to these experiences. This does not reflect the belief on the part of those who have contributed to the development of the importation model that organizational influences and the problems inherent in confinement have no impact on the attitudes and behavior of inmate populations. It does mean that they critique the closed-system functionalist paradigm as being too restrictive in scope and that they view a more inclusive model as a better foundation upon which a more thorough explanation of inmate adaptations and responses can be constructed.

Despite the paucity of previous research on drug use in prison settings, examinations of correlates of prison drug use

would appear to provide a means by which significant implications of both the deprivation and importation models can be directly tested. The deprivation model, for example, implies that drug use might well be one functional means of adapting to the pressures of confinement, an adaptation that might occur independently of extraprison influences. This, in turn, implies that we might find fairly substantial numbers of inmates becoming involved in drug use only after they have been confined. The importation model, on the other hand, implies that drug use exemplifies but one of many attitudinal and behavioral patterns that are associated with preprison and extraprison influences on inmate adaptations. Thus, the specific implication with regard to drug use would be that the preponderance of drug use inside the prison can be linked to influences outside the prison, particularly preprison involvement in drug use. Although the implications of both models have found support in previous research on homosexuality (cf. Sykes, 1958; Ward and Kassebaum, 1964, 1965; Giallombardo, 1966; Gagnon and Simon, 1968; Kirkham, 1971; Akers, et al., 1974), the only significant previous work on prison drug use (Akers, et al., 1974) must be viewed as inconclusive because the researchers relied on inmate estimates of other inmates drug involvement rather than information obtained from inmate respondents on their personal involvement with drugs.

Research Methodology

Data for the present study were collected from inmates who were confined in a medium security penitentiary for young adult male felons that is located in a southeastern state early in 1973. A variety of factors precluded contact with a strictly random sample of the slightly greater than 600 inmate population, but satisfactorily completed self-administered questionnaires were obtained from a substantial proportion of the total population (N = 273). Our impression is that sampling biases were minimal, but our results must be carefully qualified because of our inability to specify with any exactness the nature of biases that may be present. Further, particularly in light of the fact that the study conducted by Akers and his associates showed that both drug and homosexual involvement varied by type of institution, our findings lack the power that would have followed a comparative organizational analysis. Nevertheless, because of the paucity of research on prison drug use and a tendency for previous researchers to focus their attention on maximum security facilities rather than minimum or medium security institutions, the results of our analysis will, we hope, provide a useful point of reference for future research.

The operational measures of the major variables employed in this research are described below. Sample items from each of the attitudinal measures are reported in Appendix A.

Alienation

The adoption of a coercive organizational structure as a means by which prison officials can attain and maintain desired

levels of social control has often been described as a determinant of relatively high levels of structurally-generated alienation among confined populations (cf. Sykes, 1958; Etzioni, 1959, 1961; Goffman, 1961; Thomas and Zingraff, 1975; Thomas and Poole, 1975). Perhaps the most important aspect of alienation for correctional researchers is that of powerlessness. If proponents of the deprivation model are correct, we would expect to find higher rates of drug use among those who are alienated. Thus, a contextual measure of alienation comparable to that reported earlier by Thomas and Zingraff (1975) was employed in this study. The measure consists of five Likerttype attitude items that were derived from a larger initial pool of items. Item selections were accomplished in this and the other attitudinal measures by correlating each item response with a summated scale score that was based on all potential items in the scale under examination. Any item-to-scale correlation that was not equal to or greater than .50 (and therefore significant at less than the .001 significance level) was deleted from the final scale. The higher the scale score on this measure, the lower the level of powerlessness. The mean of this variable was 14.861; the standard deviation 4.279. Opposition to the Prison Organization

One of the particularly salient consequences of confinement in many total institutions is the tendency of those who are confined to develop an oppositional orientation toward both the organization of which they have been forced to become a part and the officials of the organization who have control over them.

High levels of opposition to the organization and its staff would appear to lessen the extent to which the organization could implement and maintain effective programs of resocialization. More importantly for this analysis, those most integrated into the inmate normative system are expected to be most oppositional to the prison organization. This implies that, following the logic of the deprivation model, the most oppositional inmates will report relatively high levels of prison drug use. In order to measure this consequence of confinement we developed a nine-item attitude measure. The mean of the scale was 25.051; the standard deviation 8.001. The higher the scale score on this measure, the more positive the attitude toward the prison organization.

Postprison Expectations

One of the pressures associated with confinement over which the prison organization has little control is the quality of each inmate's expectations about his postrelease life-chances, but previous research has demonstrated the relevance of this variable. As with prisonization and opposition to the prison organization, the extent to which the quality of postprison expectations influences the probability of drug use within the prison has not been determined in earlier research. If, however, drug use does represent a functional adaptation to the pressures of confinement rather than a type of behavior which is simply an extension of similar behavior in the preprison lives of inmates, one would hypothesize that as pressures associated with negative postrelease expectations increase the

probability of drug use would also increase. A six-item scale was developed as a measure of this variable. The mean of the scale was 23.890; the standard deviation 4.891. The higher the scale score on this variable, the more positive the postprison expectations.

Prisonization

Prisonization is conceptualized as a socialization process by means of which inmates acquire the attitudes and values of the inmate society. Prior research has shown that these attitudes and values are typically hostile and oppositional in many prison settings, particularly those that emerge within organizations that are custodially oriented. To the extent that drug use represents a response to the problems of confinement, we would expect to find that those inmates who are more integrated into the inmate normative system are more likely to report prison drug use. If, on the other hand, prison drug use reflects one type of behavior that is more closely associated with preprison experiences, there would appear to be little reason to expect a linkage between prisonization and drug use. A fouritem Likert-type attitude measure of prisonization was employed in this research. The scale had a mean of 11.154; the standard deviation 3.248. The higher the scale score on this measure, the lower the degree of prisonization.

Drug Use

Several self-report measures of drug use were included in our questionnaire. The dependent variable for the present analysis was operationalized by responses to a series of

questions regarding drug use within the prison. These questions allowed us to identify those inmates who were presently using a drug for which no legitimate prescription had been issued. Similar questions allowed us to identify those inmates who had been using drugs prior to being confined, and preprison drug use was defined in terms of those inmates who reported non-prescription drug use within six months prior to their present confinement. Additional information was obtained on the frequency of preprison drug use, whether the inmates were still using drugs at the time of their arrest, and whether the inmates anticipated continued drug involvement after their release. Related Self-Reported Measures

Additional measures were developed on the basis of selfreport information that was obtained from each respondent.

These variables include length of time served on this sentence,
whether the inmate had been incarcerated previously, offense
type (drug offenses versus all others), educational attainment,
marital status, and race.

Analysis and Findings

An overview of our findings shows that 67.0 percent (N=183) of our respondents had used drugs prior to imprisonment and that 17.2 percent (N=47) had been convicted of a drug-related offense. Among those who reported preprison drug use, 75.4 percent (N=138) reported having used drugs more than once a week during the six month period prior to their arrest and 76.0 percent (N=139) reported using drugs at the time of their arrest.

More importantly for the purposes of the present study, 30.6 percent (N=56) of those reporting preprison drug use continued to use drugs subsequent to their confinement and only 4.4 percent (N=4) of those who did not report preprison drug involvement (N=90) began using drugs after confinement. Thus, although 22.0 percent (N=60) of the total sample reported prison drug use, only 1.4 percent of the total sample (or 6.7 percent of the prison drug users) reported using drugs only in prison. This, in turn, raises serious questions about the ability of explanations derived from the deprivation models to account for prison drug use even though the overall rate of drug use among those in our sample appears relatively high. Instead, these initial findings rather strongly support the hypothesis that drug use represents a type of behavior which, however functional it might prove to be for those confronting the problems and pressures of confinement, is largely the product of their preprison experiences.

The initial implication that the deprivation model fails to provide an adequate means by which prison drug use may be predicted is further supported when relevant variables derived from both the importation and deprivation model are correlated with drug use. As may be seen from an examination of Table 1, and as would be expected given the earlier observation that the vast majority of prison drug users reported involvement with drugs prior to their confinement, our drug-related variables provide the best predictors of prison drug use. Those who reported drug use prior to their present confinement

(gamma = .809), who were arrested for drug related offenses (gamma = .550), who reported frequent preprison drug use (gamma = .428), and who indicated that they expected to continue using drugs after their release from prison (gamma = .920) were considerably more likely to report drug use within the prison than were their counterparts. Other variables that do not reflect the immediate consequences of confinement provided the next best set of predictor variables. Those who were white (gamma = .395), unmarrried (gamma = -.497), unemployed prior to their present confinement (gamma = -.184), better educated (gamma = .102), and recidivists (gamma = .320) were more likely to report prison drug use than were other categories of inmates. The weakest predictor variables were those employed to measure the pressures of confinement and levels of integration into the inmate normative system. Still, those who reflected relatively high levels of structurally-generated powerlessness (gamma = -.163), high levels of prisonization (gamma = -.112), and oppositional attitudes toward the prison organization (gamma = -.298) were more likely to report prison drug use than were others in the inmate population. Further, those who had more negative expectations about their postrelease life-chances, a problem associated with confinement that is beyond the control of the prison organization, were more likely to report drug use than those with more positive expectations (gamma = -.333). The only deprivation morel variable that was not associated with prison drug use in the anticipated direction was length of time served on this sentence (gamma = -.108). The tendency for those who had served relatively less time on their present offense to

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report prison drug use, however, would appear to be a function of the associations noted in Table 1 between amount of time served and whether or not the offense for which the inmate was confined was drug related (gamma = -.302). In other words, because those confined for drug related offenses had both served less time on their present sentence and were more likely to report prison drug use, the amount of time served does not provide a meaningful assessment of the impact of duration of confinement on prison drug use.

//INSERT TABLE 1 ABOUT HERE//

Our interpretation of these associations may be simply summarized. Only a very small proportion of those reporting drug use while in prison indicated having not used drugs for non-medical purposes prior to their present confinement. Although the total group of prison drug users appear slightly more prisonized, more oppositional in their orientation toward the prison organization, and less positive in their evaluations of their postrelease life-chances, these problems of confinement cannot be properly viewed as determinants of prison drug use when the vast majority of those reporting prison drug use appear to be simply continuing in a pattern of behavior that is strongly associated with their preprison experiences. This interpretation is clearly supported by the substantial levels of association that we have observed between our several measures of preprison involvement in drug use and prison drug use.

Indeed, even among the set of variables that we have conceptualized as indicants of the problems of confinement the best predictor of prison drug use is the quality of postprison expectations. Any influence exerted by this variable must be interpreted as providing support for an importation model explanation of prison drug use because of the fact that these expectations are not directly linked to that aspect of confinement experience which reflects problems created by the structure of the prison organization.

Summary and Conclusions

Prior research has paid relatively little attention to the behavior of inmates. Instead, most research has focused on patterns of attitudinal and value change that reflect the impact of prisonization. Still, the structural-functional implications of the deprivation model and the more processually oriented assertions of the importation model represent interrelated attempts to account for both the attitudinal and behavioral orientations of inmates. This study, building on the earlier work of Akers and his associates, represents an attempt to evaluate the extent to which these two models facilitate predictions of illicit drug use in prison settings.

Our analysis, based on data obtained from a sample of 273 inmates who were confined in a medium security penitentiary, examined the ability of both important deprivation model and importation model variables to account for drug use among these inmates. Despite the finding of earlier research that suggested an association between type of organizational structure and the

rate of drug use among confined populations, we find little evidence to support the deprivation model hypothesis that the pressures of confinement stimulate significant numbers of inmates to turn to drug use as a means of resolving the problems which they confront. To the contrary, only 1.4 percent of our total sample reported having begun to use drugs only after they reached the prison. Stated somewhat differently, 93.3 percent of those inmates reporting drug use within the prison also reported some degree of involvement in drug use prior to their confinement. Thus, not surprisingly, we found that those variables which reflect preprison involvement in drug use were the best predictors of drug use in the prison. Other variables that reflect variations in preprison experience and socialization, however, were found to be better predictors of prison drug use than were those variables that were designed to measure both the pressures of confinement and levels of integration into the inmate subculture.

ones.

Although the conclusions that may be drawn on the basis of our study of a single prison must be carefully qualified because of the absence of comparative data, our data rather strongly suggest that drug use among prison inmates does not represent an adaptation to the problems of confinement. Instead, our analysis supports the contention that this type of behavior flows directly from the preprison experiences that inmates have had prior to their confinement. This, in turn, suggests that deprivation model based interpretations of prison drug use are far less adequate than those which may be derived from the

importation model.

This finding is, of course, contrary to the conclusions of earlier research on drug use among inmate populations. It should be carefully noted, however, that this previous research attempted to measure drug use among inmates by asking inmate respondents to indicate how many inmates other than themselves they could confidently estimate as having used drugs in the prison. No attempt was made to obtain data on the individual respondent's involvement in drug use either during or prior to confinement. Thus, previous research has not been able to ascertain what proportion of those using drugs within the prison began using only after their confinement. Because no comparative data are reported in the present research, we can only speculate on how the discrepancy between our findings and those of Akers, et al. can be accounted for. It appears probable, however, that the structure of the prison organization may not generate problems that stimulate drug use among inmates without prior drug experience. Instead, these structural pressures may affect the probability that those who have already been involved in drug use prior to confinement will continue to be similarly involved when they enter the prison. In other words, the structural pressures associated with confinement in a custodially oriented maximum security penitentiary may create an increase in the proportion of those who have used drugs prior to confinement who use drugs within the prison. The confirmation of this interpretation will, unfortunately, have to await a more extensive comparative organizational study.

APPENDIX A

The following sample items provided operational measures of the variables employed in this article.

Alienation

We are totally powerless to control what happens to us in this institution.

*We are allowed to make a lot of decisions for ourselves here.

None of us have any influence on how we're treated here.

There is really not much I can do about what happens to me here.

Opposition to the Prison Organization

This place is run in such a way that makes it easy for the staff but without showing much consideration for the needs and desires of inmates.

Most of the staff here believe "Once a con, always a con."

The people on the staff here seem to feel that no inmate can be trusted.

The staff here would rather do things for a few inmates who will inform on others or who do just what they are told than do anything about the problems the rest of us have.

The people in charge here make me feel like a caged animal.

Postprison Expectations

So many bad things have happened to me that the future doesn't look very good when I get out.

An ex-con is a fool if he thinks he can get by on the street without breaking the law.

My family and friends have just about given up on me.

*When a man leaves prison he can make it on the street without breaking the law if he wants to.

*Indicates reversed scoring.

Prisonization

The best way to do time is to keep your mouth shut and never let the staff know that anything is getting you down.

The other inmates are right when they say "Don't do anything more than you have to."

I try to stay out of trouble but nobody around here is going to push me around and get away with it.

Around here it's best to do something to others before they get a chance to do it to you.

TABLE 1

INTERCORRELATION MATRIX (GAMMA)

| | xı | x ₂ | х3 | Х ₄ | X ₅ | X ₆ | X ₇ | X ₈ | X ₉ | X ₁₀ | X _{ll} | X ₁₂ | X ₁₃ 368 | X ₁ 4 | X ₁₅ | X ₁₆ |
|----|------|---------------------------------------|-------------|----------------|----------------|----------------|----------------|----------------|----------------|-----------------|-----------------|-----------------|------------------------|------------------|-----------------|-----------------|
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| | | T.00 | 1.00 | | | .396 | | | | | | | .134 | | | .10 |
| | | | | 1.00 | | 193 | | | | .386 | | 249 | 173 | 040 | 333 | .32 |
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| | • | | | | | 1.00 | .935 | .412 | .813 | .360 | 302 | .110 | .228 | .259 | .095 | . 5 5 |
| | | | | | | | 1.00 | * | .978 | .946 | 380 | 131 | .014 | 159 | 278 | . 8 (|
| | | | | | | | | 1.00 | .759 | .525 | 166 | 063 | 061 | 035 | 108 | . 4: |
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X₁ = Race
X₂ = Marital Status
X₃ = Education
X₄ = Recidivism

X₅ = Employment Status

 X_6 = Offense Type X_{11} = Time served this sentence X_7 = Prior Use X_{12} = Alienation X_{13} = Prisonization X_{13} = Prisonization X_{14} = Postprison Expectations X_{10} = Future Use X_{15} = Opposition to Prison

 X_{16} = Prison Drug Use

* = No correlation possible for this cell

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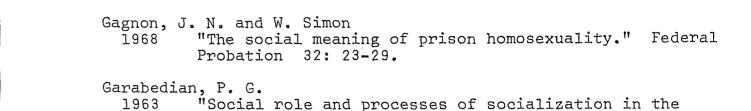
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