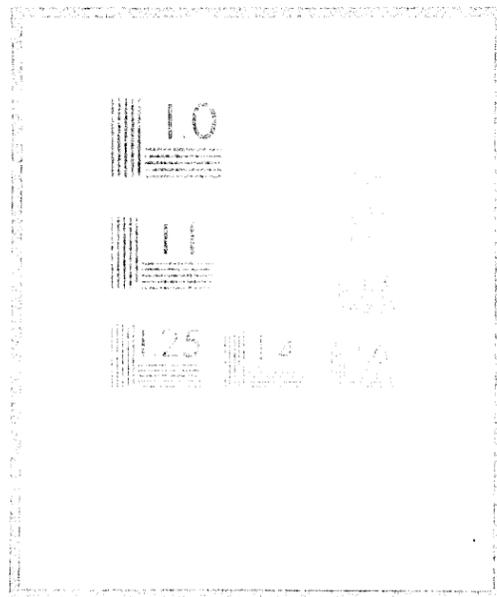


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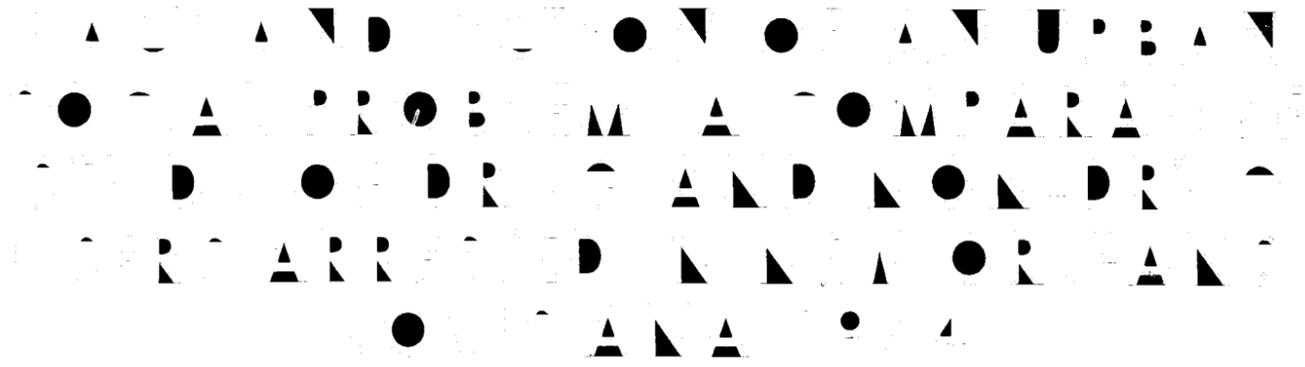
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FACT AND FICTION OF ADULT
SOCIAL PROBLEM: A COMPARATIVE
STUDY OF DRUG ABUSE AND
USERS AND THEIR PROBLEMS

39072



**Prepared By
THE MAYOR'S CRIMINAL JUSTICE
COORDINATING COUNCIL**

**Frank R. Serpas, Jr., Executive Director
Eleck Craig, Principal Researcher**



THE TARGET AREA CRIME SPECIFICS PROGRAM,
RESEARCH REPORT
funded in part by the Law Enforcement
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**PRIDE BUILDS
NEW ORLEANS**

THE MAYOR'S CRIMINAL JUSTICE
COORDINATING COUNCIL

NCJRS MAYOR MOON LANDRIEU
Chairman

FEB 3 1977

ACQUISITIONS

ANTHONY GAGLIANO
Vice-Chairman

PREFACE

This research report represents an outgrowth of the program evaluation of the Parish Prison Detoxification Program. The Detoxification Program was funded by the Law Enforcement Assistance Administration through the Mayor's Criminal Justice Coordinating Council as part of the Target Area Crime Specifics Plan. Two phases were involved in the Detoxification Program with the first phase, a research project conducted by the Orleans Parish Coroner's Office. Coroner personnel took voluntary urine samples from arrestees in New Orleans in an effort to determine the extent of drug usage by arrestees and the types of drugs being used. Phase two involved the establishment of a treatment program for Orleans Parish Prison by Odyssey House personnel. A case study of this project has been published which details the history of the program.¹

This research report presents an analysis of data collected by the Coroner's Office which was not interpreted during Phase one of the grant. The accumulation of this uninterpreted data offered an opportunity to investigate several hypotheses relative to drug usage and crime. Four major research questions were posed as parameters for this

¹Evaluating Demonstration Programs: Two Case Studies (Drug Treatment in a Parish Prison, and a Community-Based Residential Facility), MCJCC, July, 1976.

study. First, is there a difference between the types of offenses for which drug users and non-drug users are arrested? Second, is there a difference in the arrest pattern of drug and non-drug users? Third, is there a difference in recidivist rates and fourth, what are the profiles of drug and non-drug arrestees? The answers to these questions serve as input into the planning process for new programs and projects relative to drug abuse, drug enforcement, and drug rehabilitation.

The study was prepared by Mr. Eleck Craig, an intern with the Evaluation Unit of the Criminal Justice Coordinating Council. At the termination of his internship, Mr. Craig was awarded a Master of Arts degree in Urban Studies from the University of New Orleans. In addition to assistance in the preparation of this report from the Evaluation Unit, Mr. Craig received valuable support from the Target Area Supervisor, Mr. Richard Brown, Mrs. Cheryl Lyle, and from his thesis committee at the University of New Orleans.

Stuart P. Carroll
 Evaluator, CJCC

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ABSTRACT

A comparative study of drug users and non-drug users who were arrested between July 23, 1974 and August 23, 1974 was completed to examine the differences between the two groups of arrestees. Six hundred and seventy-four arrestees were requested to give a urine sample immediately after being booked at Central Lock-Up in New Orleans, Louisiana. Four hundred and eighty-nine of the arrestees provided a urine sample. The one hundred and fifty persons who were classified as drug users on the basis of their urinalysis were compared with a random sample of one hundred and fifty non-drug user arrestees.

The drug user group committed significantly fewer violent crimes and significantly more money-producing crimes than the non-drug users. It was also determined that the drug users had significantly more past arrests than the non-drug users. Drug users had more arrests in the year following the study period than did the non-drug users. Demographic data for the two groups showed no significant differences.

The user group was also analyzed by sub-groupings of the drugs detected in the urinalysis. Over thirty-three per cent of the drug users who were arrested had methadone in their systems at the time of arrest.

CHAPTER I

NEW ORLEANS DRUG USERS

INTRODUCTION

There is a growing need for current objective information concerning drug users and their crime patterns in urban areas. Much of the literature gives conflicting information as to the relationship between crime and drugs. Myths and facts are interwoven in the mind of the public. The usefulness of the majority of the information available on drug addicts who are criminals is limited, as the samples were selected from addicts involved in treatment. Thus, the information provided in those thorough studies cannot be extrapolated to the typical criminal narcotic user.

A comparative study of drug users and non-drug users who are involved in criminal activity was completed to see if there was a significant difference between drug users and non-drug users who were arrested in New Orleans. The following questions were considered:

1. Using only a one-month study period, is there a difference in the types of arrests for drug users compared with non-drug users?

2. Using the complete criminal records of the arrestees, is there a difference between the types of crimes for which drug users and non-drug users were arrested?
3. Do drug users or non-drug users have greater numbers of rearrests in the one year period following their index arrests?
4. Is there a difference between the profiles of drug users and non-drug users who were arrested?

Although there are people addicted to amphetamines and barbiturates who engage in crime, these drugs are more easily and legally obtained from physicians than are opium derivatives such as heroin. Thus, heroin users have more of a need to commit property crimes to support their drug habits than do other drug users. Therefore, this study will focus primarily on the heroin users.

During August, 1974, 674 persons who were arrested and booked at Central Lock-Up in New Orleans were requested to give a urine sample. The analyses of these samples were used to separate drug users from non-drug users. If a person's urinalysis was negative and he denied that he had a drug problem, he was not classified as a drug user. Because of the limitations of the method of obtaining the drug information, it cannot be reliably stated that all of the

positive urinalysis reports indicated addiction. Addiction is commonly defined as a physical and psychological dependence on a drug, while the presence of a drug in a person's urine only indicates that he had recently ingested or injected a drug. The extent of drug usage cannot be determined from a urinalysis. While this lack of addiction diagnosis is regrettable, it is an inherent limitation in using a sample which is not treatment related.

STATEMENT OF THE PROBLEM

Like every large city in the country, New Orleans is experiencing a drug problem. But what is the magnitude of the problem, and what effect does it have on crime and thus on the total city?

Although there are many types of drugs abused in the city, the primary drug-related crime problem is associated with heroin addiction. Because heroin is the most difficult of all of the drugs to obtain legally, heroin addicts often resort to crime in order to support their habits.

Heroin is a short-acting drug which requires the addict to purchase at least two "papers" each day. A paper normally weighs one gram and consists of a small percentage of heroin (approximately 10 per cent) and extraneous material. Currently, the "papers" are retailing for twelve dollars each in New Orleans. Prior to inflation, Bloom and Lewis (1968) estimated that the average narcotic addict in New Orleans had to steal property valued at more than \$18,000.00 each year to support his habit. Recent estimates by the New Orleans Criminal Justice Coordinating Council (1976) suggest that 50 per cent of all burglaries in New Orleans can be attributed to drug addicts and that fifteen to twenty million dollars of property are stolen each year by New Orleans addicts. In addition to this loss of property, there are more indirect costs associated with the provision of prevention, control, and treatment staffs and the potential loss of tourism dollars as a result of fear of urban drug-related crime.

While crime statistics are influenced by many variables, they are one important source of information in determining the magnitude of drug-related crime problems. The New Orleans Police Department reported a fairly steady rise in arrests for illegal possession of opium from 169 in 1964 to a peak of 764 in 1971. After 1971, the opium arrests began steadily dropping until only 334 arrests for illegal possession of opium occurred in 1974. As methadone became available to more heroin addicts, a rise in arrests for illegal possession of methadone paralleled a drop in arrests for illegal possession of opium. In 1971 at the peak of the opium arrests, there was only one arrest for methadone. In the following three-year period, methadone arrests rose steadily to a current high of 116.

Crimes against property are frequently associated with drug addiction, as the addict frequently commits property crimes to support his addiction. Combining the property crimes of burglary, theft, and receiving stolen property shows that the arrests rose from 2,378 in 1966 to 5,919 in 1974.

The number of police arrests are influenced by many variables and do not represent the number of crimes being committed. Some crimes may go unsolved, while many thefts may be cleared up with the arrest of only one person. Therefore, the number of reported crimes was also examined. The number of reported burglaries rose from 6,970 in 1964 to 11,086 in 1970. However, burglaries decreased 7.6 per cent

from 1971 when 10,705 burglaries were reported to 1974 when 9,905 burglaries were reported.

Reported robberies showed an increase of 182 per cent from 1964 to 1970. While they dropped steadily from the 1970 peak of 3,632 to 3,001 in 1972, they began rising again in 1973 and had risen to 3,829 by 1974.

Reported thefts paralleled the pattern of reported burglaries. Thefts over \$50.00 increased 120 per cent, and thefts under \$50.00 increased 38 per cent between 1964 and 1970. Between 1971 and 1974, thefts over \$50.00 decreased by 11 per cent, and thefts under \$50.00 decreased 25 per cent.

A second source of information on the drug problem in New Orleans is the treatment community. Methadone clinics which first opened in 1968 in New Orleans reached their peak in 1972 when 1,654 clients were enrolled (Bebelle, 1976). The New Orleans Police Department reported that new admissions to methadone clinics rose after major crackdowns on narcotics such as "Top Cat" in September, 1975 and "Operation Checkmate" in the fall of 1974. Currently, there are 1,605 narcotic addicts in various forms of treatment in New Orleans.

Bloom, Sudderth, and Marcelo (1972) estimated the minimum number of narcotic addicts in New Orleans to be 3,000 and suggested that only 50 per cent of the addicts would be involved in treatment at any one time. Minyard and Niklaus (1976) stated that New Orleans has a greater drug problem than any other Southern city and estimated the number of narcotic addicts to be between 5,000 and 8,000.

Deaths from drug overdoses were not listed in the Annual Report of the Coroner's Office until 1969. However, from 1969 through 1975, a total of 210 people died from drug overdoses. The largest increase in the number of deaths related to drug overdoses occurred between 1969, when 13 people died, and 1970, when 45 people died from drug overdoses. After 1970, the number gradually declined until in 1975, there were only a total of 25 deaths due to drug overdoses.

Minyard and Niklaus (1976) reported that forty murders in 1975 were classified as drug-related.

The peak of drug-related crime problems appears to have passed. Opium arrests reached their peak in 1971, and the number of methadone clients peaked in 1972. Reported burglaries and thefts were the highest in 1971. With the exception of reported robberies which has again begun a gradual climb, all of the drug and drug-related crime statistics have stabilized.

Exaggerated estimates of the current drug-related crime problems alarm the citizens of New Orleans and increase their fears of continuing to live in an urban area. On the other hand, the apparent stabilization of drug-related crime problems does not suggest the absence of serious problems, nor should it be considered a cause for ignoring the drug-related crime problems. While it is encouraging to note the stabilization, the crime rate continues to be excessive and to be detrimental to the city.

The usefulness of studies completed in the early 1970's was limited by the large amount of flux in drug-related crimes. This comparative study of non-drug and drug-related crimes should have more long-term value in this stable period. Results of the study should provide more objective information for estimating the magnitude of drug-related crimes in New Orleans.

CHAPTER II

REVIEW OF DRUG HISTORY AND LITERATURE

HISTORY

Drug addiction has not always been associated with crime. Most authorities agree that all major societies with the exception of the Eskimos have used addicting drugs to treat pain, to achieve a pleasurable sensation, or to participate in a religious ritual. Drugs used for such purposes have ranged from so-called minor drugs such as peyote by American Indians to hard drugs such as opium in Mesopotamia.

In the United States, opium was first introduced in the middle 1800's by Chinese laborers who had been brought to work on the Western railroad expansion. As a result of the growing habit of opium smoking, the city of San Francisco in 1875 prohibited the smoking of opium. This city ordinance was the first anti-drug legislation passed in the United States.

While opium smoking became popular with underworld characters in the late 1800's, the injection of opium by hypodermic needles was believed to be more addicting and was avoided by them. Lindesmith (1947) believed that this general association of criminals with opium in the past played a role in the continuing view of addicts as criminals.

In the nineteenth century, physicians used morphine, an opium derivative, not only as a painkiller but also for such esoteric uses as curing alcoholism. Alcoholism was felt to be more harmful to the body and was often implicated in family disturbances. The morphine user, in contrast to the alcoholic, was more relaxed and docile. Thus, it was felt that an addiction to morphine was preferable to an addiction to alcohol (Lindesmith, 1947).

Heroin, which was first refined from a morphine base in 1898, was initially regarded as a therapeutic drug. Ironically, heroin was considered to provide the same painkilling benefits as morphine without the danger of addiction. Even after heroin was proved addicting, it continued for some time to be considered primarily a therapeutic drug. In the early twentieth century, heroin was easily obtainable from the local pharmacy without a prescription and at a very small cost. In fact, opium and its several derivatives were common ingredients in many of the patent medicines sold in that time.

The use of opium derivatives, such as morphine and heroin, in the United States has been greatly affected by the war activities in this country. Beginning in the Civil War when hypodermic needles were first available, many soldiers became addicted to morphine as a result of their medical treatment which included morphine as a painkiller. This same pattern of addiction to opium derivatives following medical treatment continued through the Spanish American War and World War I.

World War II, however, retarded the use of drugs as normal contact between the United States and opium producing countries was interrupted and medical authorities used heroin with much more discrimination.

Germany, in response to its inability to import opium during World War II, invented a synthetic substitute known as methadone during the War. Because methadone does not produce a feeling of euphoria, it was not used heavily in the United States until treatment centers employed it in the 1960's to treat heroin addicts.

During the early twentieth century, many countries discovered a growing drug addiction problem. This problem was most pronounced in China and in the Phillipines. Worldwide concern over the drug problem led to an international meeting at the Hague Opium Convention in 1912. Congress ratified the Hague Convention with the passage of the Harrison Narcotics Act of 1914 (PL 63-223, 38 Stat. 785).

The original intent of the Harrison Narcotics Act was to reduce the growing addiction rate by regulating the use of opium derivatives. Prior to this time, many unsuspecting citizens had become addicted to heroin and morphine as a result of their using patent medicines which contained such drugs but did not require a prescription for purchase. The primary concern was preventive; current addicts were of less interest.

However, the U. S. Supreme Court in three important decisions, *Webb vs. the United States*, *Moy vs. the United States*, and the *United States vs. Behrman* (1919-1922), ruled that heroin prescriptions for addicts were not permitted. Physicians could only prescribe opium derivatives as needed for medical treatment for non-addicts. King (1974) suggested that the "inflamed climate" of the country had much to do with these three decisions by the Supreme Court. The Eighteenth Amendment, prohibiting alcohol, had just been ratified; and Treasury spokesmen who were responsible for enforcing both the Harrison Act and the Eighteenth Amendment were alarming the nation with exaggerated reports of the dangers of alcohol and drugs. In addition, wartime propaganda suggested that one of Germany's objectives was to addict the youth of the United States to narcotics. The Court reversed itself and returned to the spirit of the Harrison Act in *Linder vs. the United States* in 1925, but the pattern had been set and the reversal did not have much impact.

Lindesmith (1947) reported that clinics to aid narcotic addicts were set up in forty cities around the country in 1919-1920. Many of these addicts were reputable citizens who had never been arrested and now had no source for the needed heroin. Prosecution and threats of prosecution by the Treasury Department, however, brought the closure of all of the clinics by 1923.

As prisons became full of addict-inmates, the Porter Act (PL 70-672, 45 Stat. 1085) was passed in 1929 to establish

two inpatient facilities at Lexington, Kentucky and Fort Worth, Texas. The act provided that convicted addict-criminals could serve their sentences in those institutions.

In 1930, the Bureau of Narcotics was established to enforce the laws against narcotic use. With the upsurge in addiction after World War II, public opinion was again focused on drugs. Agents from the Narcotics Bureau testified at the Kefauver Crime Committee Hearings and linked organized crime with the distribution of illegal drugs. Congress responded to this testimony in 1951 by passing the Boggs Act (PL 82-255, 65 Stat. 767) which established mandatory minimum sentences (King, 1974).

Federal concern over the drug problem has continued to be expressed in strict and punitive ways. As the drug problem became more of a political issue, new laws and special enforcement offices were established.

The Narcotic Control Act of 1956 (PL 84-728, 70 Stat. 567) raised penalties for all drug offenses. Suspension, probation, and parole were denied except for first offenders convicted only of possession.

The Narcotic Addict Rehabilitation Act (PL 89-793, 80 Stat. 1438) passed in 1966 provided treatment by civil commitment, rather than prosecution for those accused of non-violent crimes who were not on probation and not more than a second offender at the time of arrest. Additionally, those persons who were excluded by the above conditions and found guilty would be committed for an indeterminate period

of up to ten years. People not charged with crimes could commit themselves or be committed on the petition of a relative for three and one-half years. However, in all cases the Surgeon General had to certify that there were adequate treatment facilities available to treat the addicts. This restriction severely limited the act.

In 1968, President Johnson abolished the old Bureau of Narcotics in the Treasury Department and the New Bureau of Drug Abuse Control in the Food and Drug Administration. Their functions were transferred to a new Bureau of Narcotics and Dangerous Drugs in the Department of Justice (King, 1974).

The Comprehensive Drug Abuse Prevention and Control Act of 1970 (PL 91-513, 84 Stat. 1236) classified all abusable drugs into five categories with restrictions and penalties for each.

In 1971, President Nixon established a "Special Action Office" for Drug Abuse Prevention in the White House, and Congress appropriated almost a billion dollars for its use. In January, 1972, when such useful programs as health, housing, and education were being cut, the White House also created a new Office of Drug Abuse Law Enforcement in the Justice Department under the direction of a White House consultant (King, 1974).

David Musto (1975) theorized that the various anti-drug legislations have been related not only to a fear of the drugs, but also to a fear of the drugs' reactions on minority groups with whom the drugs were linked. As society felt it

was losing social control over a feared group of people, it responded with stricter legislation. Musto gave several examples of this type of behavior. A popular myth in the early twentieth century was that Blacks on cocaine could not be injured by bullets. Since Blacks were viewed as a hostile group by whites, cocaine was also feared. Musto also reported that in the 1920's heroin was associated with urban teenage gangs; in the 1950's, heroin was seen as part of a Communist plot to overthrow the United States.

REVIEW OF THE LITERATURE

While characterizations of addicts as sexual deviates or violent people persist, no such references could be found in the professional literature. Early writings such as L. Stanley's in 1918 had a very moralistic tone and could hardly be described as research. Later writers were not as emotionally involved but reported only subjective research without the use of statistical tests for significance.

Kolb (1925) completed a personality study of two hundred and twenty-five drug addicts; they were interviewed in jails, hospitals, and in their homes. Most of the addicts in the study had been treated by Kolb, and his report was primarily subjective. In Kolb's study, all of the criminal-addicts had been criminals prior to their addiction. He hypothesized that addicts who had not been criminals sought medical treatment rather than turn to crime when they could no longer support their habit legally.

Kolb diagnosed all habitual criminals as psychopaths and believed that they were especially vulnerable to addiction because of their emotional disturbance. He discounted the view that addiction causes crime; and, in fact, he argued that the psychopathic murderer is much less dangerous if he is addicted to opium derivatives. Such drugs would make him more docile and turn him from a murderer into a thief. Finally, Kolb felt that differences in the incidence of crime in different locations and fluctuations in the crime rate in any one area were due to various factors that did not include drug addiction.

Dai (1937) was one of the first authorities to complete a large-scale study of opium use. He studied 2,518 drug addicts and gathered data from the Federal Bureau of Narcotics in Chicago, the Chicago Police Department, and Cook County Psychopathic Hospital. Dai's study included such diverse areas as the types of laws for which addicts are arrested, the areas of Chicago where drug use is prevalent, and profiles of addicts.

While white addicts comprised 77.1 per cent of the addict population, they were underrepresented in a city with 92.3 per cent white population. Blacks and Orientals were overrepresented in the sample.

Dai found the average addict to be thirty-two years of age. Fifty-three and two-tenths per cent of the addicts had never been married, and an even higher percentage did not have children. Less than a fifth reported regular employment, and 78.6 per cent reported marginal incomes.

The total number of criminal charges against 201 addicts revealed only two rape charges and eight charges of assault and battery. All of the other charges (numbering 330) were related to violations of drug laws, theft or robbery, and other non-violent crimes.

The American Bar Association and the American Medical Association Joint Committee on Narcotic Drugs (1961) explored the drug problem in the United States and made several recommendations. They found that addiction rates are highest in urban slums where delinquency, crime, alcoholism, and mental

illness are also high. In addition, their research showed that the addict was rarely introduced to narcotics by a drug peddler. Rather, the initial doses were supplied by acquaintances as a friendly gesture.

The Joint Committee deplored the continuing controversy over the relationship between drugs and crime. They emphatically stated that narcotics, by themselves, do not cause crime. Crime is caused by the life styles of the addicts, the illegality of the drugs, and the high price required to purchase them. They believed that the myth of drugs causing crime retarded the management and treatment of drug addicts. The recommendations made were general ones involving the need for more research and the institution of less punitive measures against drug addicts.

O'Donnell (1961) did a follow-up study of 266 addicts who had been patients at Lexington. While 33 per cent of the sample had been arrested prior to addiction, 60 per cent were arrested after being addicted. However, many of these arrests were only for illegal possession of drugs. With the exception of robbery, which is a money-producing crime, there were no increases in crimes against persons after addiction. O'Donnell believed his findings on preaddiction crime and postaddiction crime were consistent with his hypothesis that the physical effects of drug use lower the probability of crimes against persons, while the life-style acquired by most addicts raised the probability of more crimes against persons. Thus, the two opposing influences cancel each other out.

O'Donnell also grouped the addicts into five categories describing their source of drugs and compared those categories with the number of sentences they received. For addicts who got their drugs only from one doctor, 91 per cent had no sentences and nine per cent had only one or two sentences. In the category of completely illegal drug sources, only 28 per cent had no sentences, 29 per cent had one or two sentences, 26 per cent had three to five sentences, and 17 per cent had more than six sentences.

Cushman (1974) compared the New York police records of 210 methadone patients in a longitudinal study. Arrests were classified as occurring in the preaddiction stage, the addiction stage, and in the methadone treatment stage.

Only 11 per cent of the addicts were arrested prior to their addiction. The majority of these arrests were for crimes against property. During addiction, arrests for all categories of offenses other than sex and gambling rose dramatically. Using person-years at risk as the standard measuring device, the total arrest rate rose from 3.30 in the preaddiction stage to 41.40 in the addiction stage and dropped to 9.82 in the methadone treatment stage.

Crimes against property arrest rates dropped from 8.90 in the addiction phase to 1.18 in the treatment phase, while crimes against persons dropped only from 3.25 to 1.66 for the same phases. The control group had arrest rates for both categories of only .70.

Stephens and Ellis (1975) studied 589 New York state addicts aged twenty-four to twenty-five years old who had been arrested at least once. Thirty-seven per cent of the addicts had preaddiction arrests.

While the drug arrests appeared to be declining from 1969 to 1972, property arrests and "other" arrests remained stable. Crimes against persons, however, showed a steady increase during the four-year period according to Stephens and Ellis. Further study of the growing arrest rate of crimes against persons showed that 85 per cent of all of those arrests occurred in combination with a property offense, i.e., robbery. The explanation that the crimes were committed primarily for money does not eliminate the fact that addicts are becoming more willing to commit such crimes. The authors speculated that the trend toward greater numbers of crimes against persons to obtain money was merely a reflection of the changes in street crime in general.

THEORY OF DRUG ADDICTION AND CRIME

Many theories have been proposed to explain such deviant behaviors as drug addiction and theft. Lemert (1967) addressed both problems with his concept of secondary deviance. Rather than trying to discern the original causes of a specific deviance, Lemert focused on the behaviors or self-concepts which originate as a reaction to societal conditions and which cause a person to continue his deviant behavior or even expand his deviant behavior.

Secondary deviation is deviant behavior or social roles based upon it, which becomes a means of defense, attack, or adaptation to the overt and covert problems created by the societal reaction to primary deviance. In effect, the original 'causes' of the deviation recede and give way to the central importance of the disapproving, degredational, and isolating reactions of society (Lemert, 1967).

Drug addicts who commit thefts can be better understood by the use of Lemert's theory. Although drug addiction has been termed a victimless crime, the United States has reacted strongly to the use of hard drugs such as heroin. Strict laws have made the selling of drugs a felony. As a result, heroin has become very expensive and can be obtained only from illegal sources.

The process of drug addiction may have begun for any number of reasons. During the early stages when the addict can pay for his drugs, society does not suffer. However, as the need and price of drugs escalate, the addict is no longer able to work at his usual job. Few legal occupations provide the kind of salary a person would require to support a daily

drug habit, so the drug addict frequently turns to money-producing crime. All of the addict's life is centered around his drug addiction. There is a daily need to steal property, to sell it, and to find drugs. In addition to paying an exorbitant amount of money for the drugs, he must associate with criminals in order to purchase his drugs.

Using Lemert's theory, the property crimes and criminal life-styles of drug addicts are secondary deviations. These behaviors are ways of adapting to society's repressive drug laws.

Drug addicts who have developed secondary deviations begin to adopt new identities along with new behaviors. Society does not accept them, and they begin to think of themselves as criminals. This new negative self-concept overshadows the original causes of the addiction.

The identity with criminals and the new life-style play an important role in the treatment aspects of drug abuse. Most addicts continue their patterns of drug abuse and crime rather than seeking treatment as a change would require greater energy and cause more distress than continuing in the old pattern. For those addicts who do enter drug treatment programs, their physical needs are usually met. However, the secondary deviation of crime is so firmly entrenched in the addict's identity that he may continue his criminal behavior even when it is no longer required to fulfill the original goal of supporting a drug habit.

Perhaps secondary deviation can be better understood by comparing two dissimilar drug addicts. The first drug addict is a physician who can purchase his drugs from a reputable legal source at low cost under low risk conditions. The physician is able to continue his high status occupation and hide his addiction from society. Society regards this drug addict as a valued citizen. He is not isolated or degraded by others' reactions to him, and he is able to continue his usual life style.

On the other hand, the street addict lives under high risk conditions with unreliable sources of drugs who demand excessive amounts of money. As a result of laws forbidding the selling of heroin, the street addict commits thefts in order to support his drug habit and associates with criminals in order to purchase the drugs. Eventually, the criminal life-style becomes a part of the street addict's identity, and he considers himself to be a criminal.

While both the physician-addict and street addict may use the same amount of drugs daily, only the street addict considers himself to be a criminal. Only the street addict had developed a secondary deviance.

In summary, secondary deviance is those behaviors and self-concept a person adopts as a result of society's response to his primary deviance. The drug addict who commits thefts is a model of secondary deviance, as he can adapt to society's repressive attitudes only by adopting criminal behaviors and a criminal identity.

CHAPTER III

RESEARCH DESIGN

HYPOTHESES

1. The drug user group has a greater number of non-violent index arrests than does the non-drug user group.

This hypothesis is based on the theory of secondary deviance (Lemert, 1967) which suggests drug users are criminals only because they must commit crimes in order to obtain money to support their drug habits. Many other writers such as Kolb (1925) have attested to the non-violent nature of drug users.

2. The drug user group has a greater number of money-producing index arrests and less battery arrests than does the non-drug user group.

While this hypothesis appears to be only a restatement of the first hypothesis, it differs in a subtle manner. Because armed robbery is both a violent crime and a money-producing crime, the second hypothesis was needed to be able to group money-producing crimes without the characterization of violent/non-violent.

3. The drug user group has a higher number of total past arrests than does the non-drug user group.

4. Drug users have a higher recidivism rate in the year following their index arrests than do non-drug users.

Hypotheses Three and Four are related by theory. Drug addiction is a constant process which requires the purchase of at least two hundred dollars of heroin each week. Thus, frequent crimes are necessary to support a drug habit. The probability of arrest rises with the increased frequency of commission of crime.

5. There are significant differences between the profiles of the drug user group and the non-drug user group.

This hypothesis of socioeconomic differences is related to the theory of secondary deviance. Lemert's theory suggests that hard drug users adjust both their behavior and their sense of identity so that they can survive in a society which is repressive to drug users. Their entire lives revolve around getting enough money to support their drug habits. Thus, the drug users as a group will have less stability in terms of employment and marital status. Other writers have suggested that economically disadvantaged and minority groups have a higher incidence of hard drug use. This would suggest that there should be significantly more Blacks than whites in the drug user group.

RESEARCH DESIGN AND METHODOLOGY

A sample of drug user arrestees was compared with a sample of non-drug user arrestees. The original samples were determined in a survey by the Orleans Parish Coroner's Office funded by the Criminal Justice Coordinating Council. The purpose of the survey was to gather data for use in planning a drug abuse program for Orleans Parish Prison.

The initial survey took place between July 23, 1974 and August 23, 1974. This time period was felt to be a representative month. No major drug crackdowns took place during this period, nor did any holidays occur. The survey consisted of requesting urine samples and a short interview from all persons arrested for violations of state crimes who were booked at Central Lock-up between the hours of three P.M. and seven A.M. during the month. Those people who were booked at Central Lock-Up during the day watch (seven A.M. to three P.M.) were not included in the survey, as their number was felt to be too small to warrant the time of a staff member from the Coroner's Office.

Six hundred and seventy-four individuals were arrested and booked at Central Lock-Up between three P.M. and seven A.M. from July 23, 1974 until August 23, 1974. All were approached after their booking and requested to give a urine sample and to answer a few questions about their drug usage. The arrestees were told that the information would be confidential and would not be released to the Police Department.

Four hundred and eighty-nine (72.5 per cent) of the arrestees agreed to be tested.

One hundred and fifty-one arrestees had a positive urinalysis. One was dropped from the study due to a lack of information. The rest of the drug users, numbering 150, made up the drug user group to be studied. One hundred and fifty non-drug users were selected at random from the non-drug user group of 238 to be used as a comparison group.

The Criminal Justice Coordinating Council provided the names of the 674 arrestees in the survey and the urinalysis reports of the drug users.

The Arrest Registers for the index arrest of each of the 300 arrestees in the study were photostated from the New Orleans Police Department. Total past arrests for the 300 arrestees were also photostated from the microfilmed police records. Copies of the Federal Bureau of Investigation's records were also obtained from the Police Department when they were available.

Demographic data was limited to the data obtained from the photostats of the index Arrest Registers. The data which was available included: race, sex, age, marital status, employment status, and job skills. The information which had been photostated was then manually transferred to the summary sheets developed for this study.

The hypotheses were tested for significance with chi square tests of significance and the Student's t test.

Cumulative frequency per cent charts and tables were used to present the data graphically.

The use of index arrests/charges proved to be somewhat more involved than expected. Because it is not uncommon for a person who is arrested to be charged with more than one crime, the index arrests for the 150 drug users totaled 201, while the index arrests for the 150 non-drug users totaled 181. Those larger totals were used in finding the relative per cents of arrests. However, for the chi square tests of significance where it was desirable to have only one index crime per person, the index crime used was the one judged to be the most serious. In most cases, the choice of the most serious crime was obvious. The majority of duplicate index arrests were primarily for those people charged with both theft and possession of stolen property.

CHAPTER IV

RESULTS

Demographic data for the drug user group which consisted of 150 arrestees was first examined. Blacks accounted for 79 per cent (n=119) of the sample with whites making up 21 per cent (n=31). Males were also predominant in the group and accounted for 79 per cent (n=119) of the sample, with women making up 21 per cent (n=31) of the sample. A combined racial-sexual breakdown indicated that 64 per cent (n=96) were Black males, while 15 per cent (n=23) were Black females, and 15 per cent (n=22) were white males, while 6 per cent (n=9) were white females. The average age of the drug user group was 27.813.

An examination of the marital status of the drug user group indicated that 63 per cent (n=95) of the group were single, and 36 per cent (n=54) of the group were married. Divorcees accounted for only 1 per cent (n=1).

The majority of the drug users (59 per cent, n=86) were unemployed. Only 41 per cent (n=62) were employed at the time of their index arrest. The largest reported known job skills category was unskilled, which accounted for 34 per cent (n=51) of the sample. Skilled employees constituted 20 per cent (n=30) of the sample. Students made up 3 per cent

(n=5) of the group, while professionals accounted for only 2 per cent (n=3) of the group. Sixty-one (41 per cent) did not report any information on job skills.

The urinalysis reports indicated that 85 arrestees had a positive test for opium or opium in combination with other drugs. Those drug users having only opium made up 42 per cent (n=64) of the total sample. A combination of opium and methadone accounted for 12 per cent (n=18) of the sample. Combinations of opium and barbiturates and combinations of opium and amphetamines each accounted for only 1 per cent (n=2) of the sample. A positive test for methadone showed 21 per cent (n=31) of the drug users had methadone in their system at the time of arrest. In addition, 1 per cent (n=2) had a combination of methadone and barbiturates. Barbiturates alone accounted for 9 per cent (n=14) of the sample, while amphetamines accounted for 3 per cent (n=4) of the group. The combination of amphetamines and barbiturates accounted for 9 per cent (n=13) of the group.

Because tattoos are believed to be often used by drug users to camouflage their needle marks, an examination of the tattoos, needle marks, and scars was completed. Sixty-one per cent (n=92) of the drug users had tattoos. Scars accounted for 13 per cent (n=19) of the sample, while only 1 per cent (n=2) had needle marks. An additional 7 per cent (n=10) had a combination of scars and tattoos, while 2 per cent (n=3) had a combination of scars and needle marks, and 3 per cent (n=4) had a combination of tattoos and needle marks.

Thirteen per cent (n=20) had no tattoos, scars, or needle marks.

Thefts accounted for 33 per cent (n=67) of all index charges, while possession of stolen goods followed with 21 per cent (n=43) of the sample. Drug violations accounted for 14 per cent (n=29) of the sample. Burglaries made up 7 per cent (n=15) of the sample, while armed robberies made up only 4 per cent (n=8) of the sample. Aggravated batteries also accounted for 4 per cent (n=9) of the sample. There were a total of five (2 per cent) sex offenses, but three of these were only for prostitution. Non-support, simple escape, and simple robbery each accounted for 1 per cent of the total. The category of "other" charges made up 8 per cent (n=17) of the total.

During the study period, 93 per cent (n=140) of the drug user group were arrested only once. Five per cent (n=8) were arrested twice, and 1 per cent (n=2) were arrested four times during the month.

An examination of the past arrest records for the drug users revealed a total of 1,409 past charges and 1,189 past arrests. Twenty-eight per cent (n=391) of all charges were for theft, 14 per cent (n=193) were for simple burglary, and 13 per cent (n=188) were charges for drug violations. Armed robbery (n=57), sex offenses (n=54), and aggravated battery (n=62) each accounted for 4 per cent of the total charges for the drug user group. Two per cent (n=33) of the charges were for simple robbery, while 1 per cent (n=20) were for

simple battery, and 1 per cent (n=13) were for simple escape. Fifteen per cent (n=216) of the total past charges for the drug group were categorized as "other." Loitering, vagrancy, refusing to move on, and other similar minor charges were categorized as "other."

Of the 150 drug users, 36 per cent were rearrested in the year following their index arrest, i.e., between August 23, 1974 and August 23, 1975. Thirteen per cent (n=20) were re-arrested only once, while 12 per cent (n=18) were rearrested twice, 9 per cent (n=13) were rearrested three times, and 1 per cent (n=2) were rearrested four times. One drug user was rearrested thirteen times during the year following his index arrest.

The drug user group was then examined by sub-groupings according to the type of drug used. The major drug categories used were: (1) opium (n=64), (2) methadone (n=31), (3) combination of opium and methadone (n=18), (4) barbiturates and/or amphetamines (n=31). The smaller drug groups were not analyzed.

Table One indicates that the greatest differences in race can be seen between the methadone group which was 10 per cent (n=3) white and the barbiturate/amphetamine group which was 39 per cent (n=12) white.

Table Two examines the sexual breakdown by drug groups and shows that the largest percentage of females (42 per cent, n=13) was found in the barbiturate/amphetamine group, while the smallest percentage of females (11 per cent, n=7) was found in the opium group.

Table Three indicates that only 29 per cent (n=9) of the barbiturate/amphetamine group were married, while 44 per cent (n=8) of the opium/methadone group were married.

While 50 per cent of the opium addicts were employed, only 32 per cent (n=10) of the barbiturate/amphetamine group were employed as shown in Table Four.

TABLE 1

RACE ACCORDING TO DRUG SUB-GROUP BY PER CENT

Race	Opium	Methadone	Opium/ Methadone	Barbiturate/ Amphetamine
Black	80%	90%	83%	61%
White	20%	10%	17%	39%
Total	100% (64)	100% (31)	100% (18)	100% (31)

TABLE 2

SEX ACCORDING TO DRUG SUB-GROUP BY PER CENT

Sex	Opium	Methadone	Opium/ Methadone	Barbiturate/ Amphetamine
Male	89%	81%	83%	58%
Female	11%	19%	17%	42%
Total	100% (64)	100% (31)	100% (18)	100% (31)

TABLE 3

MARITAL STATUS ACCORDING TO DRUG SUB-GROUP BY PER CENT

Marital Status	Opium	Methadone	Opium/ Methadone	Barbiturate/ Amphetamine
Single	62%	61%	56%	71%
Married	38%	39%	44%	29%
Total	100% (64)	100% (31)	100% (18)	100% (31)

TABLE 4

EMPLOYMENT ACCORDING TO DRUG SUB-GROUP BY PER CENT

Status	Opium	Methadone	Opium/ Methadone	Barbiturate/ Amphetamine
Employed	50%	39%	39%	32%
Unemployed	50%	61%	61%	68%
Total	100% (64)	100% (31)	100% (18)	100% (31)

Index crimes committed by the different drug sub-groups were examined in Table Five. While only 2 per cent (n=1) of the opium group's arrests were for aggravated battery, 10 per cent (n=3) of the methadone group's arrests were for aggravated battery. Another major difference can be seen in the category of simple burglary. Sixteen per cent (n=10) of the opium group's arrests were for simple burglary, while the opium and methadone group had no arrests for simple burglary. The methadone group had only 3 per cent (n=1) of its arrests for simple burglary and 6 per cent (n=2) of the barbiturate/amphetamine group's arrests were for simple burglary. Thefts accounted for the largest per cent of all of the arrests in each group, ranging from 30 per cent of the opium arrests to 58 per cent of the methadone group's arrests.

The areas of the city where the index arrests occurred are indicated on a map, which is located in Appendix A. Arrests for those people using opium occurred primarily in Police District Six (27 per cent), closely followed by arrests in Police District One (25 per cent). Thirty-two per cent of the methadone users were also arrested in Police District One. Methadone/opium users had 33 per cent of their arrests in District Six, while the barbiturate/amphetamine groups had 19 per cent arrested in District One, 19 per cent arrested in District Two, and 19 per cent arrested in District Six.

TABLE 5

INDEX CRIMES ACCORDING TO DRUG SUB-GROUP BY PER CENT

Index Crime	Opium	Methadone	Opium/ Methadone	Barbiturate/ Amphetamine
Aggravated Battery	2%	10%	6%	3%
Simple Battery	2%	0%	0%	0%
Simple Burglary	16%	3%	0%	6%
Armed Robbery	3%	3%	6%	10%
Simple Robbery	6%	0%	6%	0%
Theft	30%	58%	56%	48%
Possession of Stolen Goods	8%	3%	0%	3%
Drugs	17%	10%	11%	19%
Other	17%	13%	17%	9%
Total	100% (64)	100% (31)	100% (18)	100% (31)

Demographic data for the non-drug user group which consisted of 150 arrestees was examined. Blacks accounted for 70 per cent (n=105) of the sample with whites making up 30 per cent (n=45) of the group. Males accounted for 84 per cent (n=126) of the sample with females making up 16 per cent (n=24) of the sample. A combined racial-sexual breakdown shows that 60 per cent (n=90) were Black males, while 24 per cent (n=36) were white males. Black females made up 10 per cent (n=14) of the sample, while the remaining 6 per cent (n=9) consisted of white females. The average age of the non-drug user group was 27.36.

An examination of the marital status of the non-drug user group indicated that 61 per cent (n=92) of the group were single, and 36 per cent (n=54) were married. Divorcees made up 2 per cent (n=3), and the remaining 1 per cent (n=1) was accounted for by a separation in the non-drug user sample.

The majority of the non-drug users were unemployed. Only 46 per cent (n=69) were employed at the time of arrest. The largest reported known job skills category was skilled, which accounted for 29 per cent (n=44). Unskilled employees made up 27 per cent (n=40) of the sample, and 6 per cent (n=9) were students. Thirty-eight per cent (n=57) did not report their level of job skills.

The largest percentage (41 per cent, n=62) of the non-drug user group had tattoos, while 25 per cent (n=38) had scars. A combination of scars and tattoos was recorded for 2 per cent (n=3), and a combination of scars and needle marks

was recorded for 1 per cent (n=1). One per cent also accounted for two arrestees who had needle marks. No tattoos, scars, or needle marks were noted for 29 per cent (n=44).

Theft accounted for 25 per cent (n=45) of all of the index charges for the non-drug user group. Seventeen per cent (n=30) had drug violations, while 14 per cent (n=26) were charged with possession of stolen goods. Aggravated battery accounted for 9 per cent (n=16) of the charges and simple battery made up 3 per cent (n=5) of the charges. Armed robbery accounted for 6 per cent (n=10), while simple burglary made up 5 per cent (n=9) of the charges. Sex offenses accounted for 6 per cent (n=10) of the charges, while 1 per cent (n=2) were for non-support in the non-drug user group. Fourteen per cent (n=25) of the charges were categorized as "other."

During the study period, 97 per cent (n=145) of the non-drug user group were arrested only once while 3 per cent (n=5) were arrested twice.

Examining the past arrest records for the non-drug user group revealed a total of 819 charges and 688 arrests. Twenty-three per cent (n=188) of the crimes were theft, while 16 per cent (n=130) were categorized as "other."

Simple burglary accounted for 13 per cent (n=104) of the charges, and 12 per cent (n=102) had been charged with possession of stolen goods. Eleven per cent (n=89) were charges for drug violations, and 9 per cent (n=73) were for aggravated battery. Sex offenses accounted for 5 per cent (n=45),

simple battery made up 3 per cent (n=21), and 2 per cent (n=18) were for simple robbery. Both simple escape (n=5) and non-support (n=7) had 1 per cent each in the total charges.

Of the 150 non-drug users, 23 per cent were rearrested during the year following their index arrests. Eight per cent (n=12) were rearrested once, 11 per cent (n=17) were rearrested twice, and 1 per cent each were arrested three times (n=2), four times (n=2), five times (n=1), and seven times (n=1).

The areas where the index arrests occurred are indicated on a map included in Appendix A. The largest number (24 per cent) were arrested in Police District One, while 19 per cent were arrested in Police District Six and 18 per cent were arrested in Police District Five.

Several tests of significance were carried out to test hypotheses that there were differences between the drug user group and the non-drug user group in relation to the number and types of crimes they committed.

In order to test Hypothesis One that drug users commit fewer violent crimes than do non-drug users, a chi square test of significance was used on the index crimes. Armed robbery, battery, and violent sex offenses were grouped into a violent category. The non-violent category consisted of burglary, theft, possession of stolen goods, simple escape, non-support, drug violations, and "other" crimes. Table Six indicates that the results were significant at the .005 level.

Another test of significance was carried out to test Hypothesis Two that addicts commit more money-producing crimes (violent or non-violent), and fewer battery and other crimes which are not related to money. Thus, armed robbery, simple robbery, theft, possession of stolen goods, and simple burglary were grouped into a money-producing category. Aggravated battery and simple battery were combined in a battery category. Table Seven indicates that the null hypothesis can be rejected and that the test was significant at the .01 level.

To test Hypothesis Three that drug users have a larger number of total past arrests than do non-drug users, a Student's t test of significance was used. Table Eight indicates that the difference is significant at the .0005 level.

Hypothesis Four which stated that the drug user group had a higher recidivism level than the non-drug user group between August 23, 1974 and August 23, 1975 was tested with a chi square test of significance. Table Nine indicates that the results were significant at the .05 level.

TABLE 6

VIOLENT INDEX CRIMES
ACCORDING TO DRUG GROUP CLASSIFICATION

Group	Violent Index Crime		Non-Violent Index Crime	
Drug User	13%	(19)	87%	(131)
Non-Drug User	23%	(35)	77%	(115)

$$\chi^2 = 11.6029$$

$$P < .0005$$

TABLE 7

TYPES OF INDEX CRIMES
ACCORDING TO DRUG GROUP CLASSIFICATION

Group	Money-Producing	Battery	Other
Drug User	64% (96)	5% (7)	31% (47)
Non-Drug User	49% (73)	13% (19)	39% (58)

$$\chi^2 = 9.78$$

$$P < .01$$

TABLE 8

TOTAL PAST ARRESTS BY DRUG GROUP CLASSIFICATION

Group	Total Arrests
Drug User	1,189
Non-Drug User	688

T=4.7851

P < .0005

TABLE 9

RECIDIVISM ACCORDING TO DRUG GROUP CLASSIFICATION

Group	Recidivist	Non-Recidivist
Drug User	36% (54)	64% (96)
Non-Drug User	23% (35)	77% (115)

 $\chi^2=5.7671$

P < .05

CHAPTER V

DISCUSSION

It is obvious from examining Tables Ten and Eleven at the end of this chapter that the drug user group committed less violent and more money-producing crimes than did the non-drug user group. However, one category of crimes in both the index table and the history table deserves further attention. The index crime, Table Ten, lists 17 per cent of the non-drug users as being charged with drug violations as compared with only 14 per cent of the drug users being charged with drug violations. The table of history of crimes shows that 11 per cent of the non-drug users were arrested for drug violations as compared with 13 per cent of the drug users for the same charge.

While arrests for marijuana and other minor drugs were included in the drug category, it was felt that further investigation was warranted. One sub-group of the non-drug users which was examined was those arrestees who had refused to give a urine sample. The thirty-seven refusals were placed in the non-drug user group in the initial survey, as the original investigators wanted to guard against the bias of volunteerism. The second sub-group which was investigated was those people who were placed in the non-drug user group

because of their negative urinalysis but who had past drug arrests. The police records were examined again to determine the type of drug for which they had been arrested in the past. Those people who had been arrested in the past for cocaine and heroin or who had had three or more unspecified drug arrests were grouped together. These people numbered only 13, but they accounted for 34 past arrests for drug violations. Those people having only marijuana arrests or only one or two unspecified drug arrests were not examined.

Subtracting the 31 refusals and 13 past drug arrestees from the original non-drug user group of 150 left 100 people in the modified non-drug user group.

The greatest and most expected change was that the percentage of past drug arrests dropped from 11 per cent for the original non-drug user group to 5 per cent for the modified non-drug user group. The next greatest change was the percentage of past aggravated battery arrests which rose from 9 per cent in the original group to 12 per cent in the modified group. All of the other changes in the history of arrests were less than 3 per cent as seen in Table Twelve at the end of this chapter. Because the hypotheses involving different types and numbers of crimes had already been shown to be significant with the original data, they were not calculated again with the modified group data.

The drug user group as expected had both a larger amount of recidivism following the index arrest and a larger number of past arrests than did the non-drug users. These results

are believed to be related to the fact that drug users must engage in more frequent crimes than non-drug users in order to support the expense of their drug habits. These results may also be related to the theory of secondary deviance in a second way since the drug user is forced by society's repressive drug laws to associate with criminals in order to obtain his drugs. Thus, many of the recidivists who were arrested only for "other" charges may have been unfortunate enough to be arrested only because of the circumstances in which they were found.

Supporting the consensus of authorities in the field such as Kolb (1925) and contradicting the public myth was the finding that drug users commit less violent crimes than do non-drug users. In a related hypothesis, the drug users committed more money-producing crimes and less battery crimes than did the non-drug users. This finding is in agreement with O'Donnell (1961).

Hypothesis Five concerning differences in the demographic data between users and non-users was not found to be true. The drug user group had 79 per cent Black, and the non-drug user group had 70 per cent Black. Males made up 79 per cent of the drug user group and 84 per cent of the non-drug user group. Neither the racial nor sexual differences were significant. (See Tables Fifteen and Sixteen in Appendix A.)

Similarly, 63 per cent of the drug user group were single, while 61 per cent of the non-drug user group were single. While the difference is not significant, the finding is in

agreement with Dai (1937) who reported the majority of the addicts were single. The differences in the employment rate were also not significant. (See Tables Seventeen and Eighteen in Appendix A.)

The data revealed that both the drug user group and the non-drug user group are relatively young. (See Tables Thirteen and Fourteen at the end of this chapter.) Those persons aged 29 and younger accounted for 65 per cent of the drug users and 73 per cent of the non-drug users.

The lack of significant difference in the profiles of the drug user group and the non-drug user group can probably be accounted for by the fact that both groups are composed of arrestees. While there may be a difference between the demographic data of drug users compared with a non-arrested population, the differences are not present when examining groups of arrested persons.

In retrospect, it is obvious that arrestees, whether drug users or non-drug users, may be less stable in such areas as employment and marital status than is the normal population. It should not be expected that a population of arrestees who have violated society's norms by committing crimes would adhere to society's norms in other areas of their lives. It has also been shown in other studies that those people who are economically disadvantaged and members of minority groups are arrested more often in urban areas than are the middle-class groups. While this subject is not part of the present study under consideration, it does help to explain why there

is no apparent difference in the socioeconomic aspects of the drug user group and the non-drug user group.

The most apparent differences in the demographic data were seen in the breakdown of the drug user group into types of drugs used. (See Tables One through Five.) The barbiturate/amphetamine group had 39 per cent white and 42 per cent female, percentages which more closely approach the New Orleans population figures.

However, while the sub-groupings established for the drug user group answer some questions, they also bring up unanticipated results in several areas. Why do the opium users have the highest employment rate of all of the drug groups? Certainly this fact conflicts with the theory of secondary deviance, as opium users should face the most negative reactions from society and receive less of society's benefits.

The breakdown of the drug user sample into specific drug groups shows that 21 per cent of the total group had only methadone in their systems at the time of arrest. An additional 12 per cent had a combination of methadone and opium, and 1 per cent had a combination of methadone and barbiturates in their systems at the time of arrest. Since the methadone clinics instituted strict control over their clients' ingestion of methadone in the clinics, methadone has become much harder to obtain illegally than has opium. Therefore, it is not unreasonable to suggest that over 33 per cent of the total drug user sample were methadone patients at the time of their arrest. This occurrence coincides with

the theory of secondary deviance, as it suggests that the stigma attached to opium users has become part of the methadone patients' identity. While there is no longer a need to commit crimes in order to maintain a drug habit, the methadone patient has adopted a criminal life-style and identity which he is unable/unwilling to relinquish.

TABLE 10

PER CENT DISTRIBUTION OF INDEX CRIMES
BY DRUG GROUP CLASSIFICATION

Index Crime	Drug User	Non-Drug User
Aggravated Battery	4%	9%
Simple Battery	0%	3%
Simple Burglary	7%	5%
Armed Robbery	4%	6%
Simple Robbery	1%	1%
Theft	33%	25%
Possession of Stolen Goods	21%	14%
Simple Escape	1%	0%
Drug Violation	14%	17%
Non-Support	1%	1%
Sex Offenses	2%	6%
Other	8%	14%
Total	96%* (201)	96%* (181)

*rounding error

TABLE 11

PER CENT DISTRIBUTION OF HISTORY OF CRIMES
BY DRUG GROUP CLASSIFICATION

Crime	Drug User	Non-Drug User
Aggravated Battery	4%	9%
Simple Battery	1%	3%
Simple Burglary	14%	13%
Armed Robbery	4%	4%
Simple Robbery	2%	2%
Theft	28%	23%
Possession of Stolen Goods	13%	12%
Simple Escape	1%	1%
Drug Violation	13%	11%
Non-Support	0%	1%
Sex Offenses	4%	5%
Other	15%	16%
Total	99%* (1,409)	100% (819)

*rounding error

TABLE 12

PERCENTAGE HISTORY OF CRIMES DISTRIBUTION
BY ORIGINAL NON-DRUG GROUP AND MODIFIED NON-DRUG GROUP

Crime	Original Non-Drug Group	Modified Non-Drug Group
Aggravated Battery	9%	12%
Simple Battery	3%	3%
Simple Burglary	13%	15%
Armed Robbery	4%	4%
Simple Robbery	2%	2%
Theft	23%	22%
Possession of Stolen Goods	12%	13%
Simple Escape	1%	1%
Drug Violation	11%	6%
Non-Support	1%	1%
Sex	5%	4%
Other	16%	18%
Total	100% (819)	101%* (454)

*rounding error

TABLE 13

FREQUENCIES AND CUMULATIVE PERCENTAGES
OF AGE DISTRIBUTIONS FOR 150 DRUG USERS

Age Group	Drug Users		
	Frequencies	Percentages	Cumulative Percentages
15 - 19	19	13	13
20 - 24	45	30	43
25 - 29	33	22	65
30 - 34	29	19	84
35 - 39	12	8	92
40 - 44	4	3	95
45 - 49	1	1	96
50 - 54	4	3	99
55 - 59	3	2	101*
60 - 64	0	0	101*
65+	0	0	101*

*rounding error

TABLE 14

FREQUENCIES AND CUMULATIVE PERCENTAGES
OF AGE DISTRIBUTIONS FOR 150 NON-DRUG USERS

Age Group	Non-Drug Users		
	Frequencies	Percentages	Cumulative Percentages
15 - 19	24	16	16
20 - 24	57	38	54
25 - 29	28	19	73
30 - 34	11	7	80
35 - 39	13	9	89
40 - 44	8	5	94
45 - 49	6	4	98
50 - 54	1	1	99
55 - 59	0	0	99
60 - 64	1	1	100
65+	1	1	101*

*rounding error

CHAPTER VI

CONCLUSIONS AND RECOMMENDATIONS

Many expected and unexpected results were discovered in this comparative study of drug user arrestees and non-drug user arrestees. New Orleans does have a drug-related crime problem. However, the drug-related crime problem is not related to violent crimes.

One expected result was that drug users have a higher recidivism rate than do non-drug users. Thus, drug users account for a much larger percentage of the crimes committed in New Orleans than would be expected from their number.

An unexpected finding was that over 33 per cent of all drug user arrestees were currently taking methadone. This fact should be further studied, as it is apparent that the substitution of methadone for heroin did not make any impact on the criminal behavior of many methadone clients. Two recommendations can be made to lessen this problem. All methadone clinics should be automatically notified when their clients are arrested by the police, as more realistic treatment plans could be made with this information. Secondly, the methadone clinics must reevaluate their programs to determine if they are providing all of the services needed by their clients in light of the findings of this study.

The high recidivism rate of drug users suggests that jail sentences are not providing the deterrent force that is needed. The increased use of enforced treatment programs, such as Treatment Alternatives to Street Crime, should be considered as an alternative to incarceration.

Effective control and treatment of individual drug users can only be initiated when their usage/addiction is known. A drug user may be arrested for numerous thefts and not be provided with appropriate treatment if he escapes detection as a drug user. It is recommended that policy and funding be explored to determine if routine urinalysis could become part of the booking procedure at Central Lock-Up. While this recommendation may be considered to be controversial, it would serve a dual purpose. Routine urinalyses would provide the Court with added information as to the appropriate type of sentences as well as prevent the potential legal and health issues which might arise if an arrestee went through an unexpected withdrawal while being detained.

Finally, it is recommended that the objective data provided by this comparative case study be utilized as a planning tool in developing the needed effective programs in the criminal justice system.

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APPENDIX A

TABLE 15

PER CENT RACIAL DISTRIBUTION
BY DRUG GROUP CLASSIFICATION

Race	Drug User	Non-Drug User
White	21%	30%
Black	79%	70%
Total	100% (150)	100% (150)

TABLE 16

PER CENT SEX DISTRIBUTION
BY DRUG GROUP CLASSIFICATION

Sex	Drug User	Non-Drug User
Male	79%	84%
Female	21%	16%
Total	100% (150)	100% (150)

TABLE 17

PER CENT MARITAL STATUS DISTRIBUTION
BY DRUG GROUP CLASSIFICATION

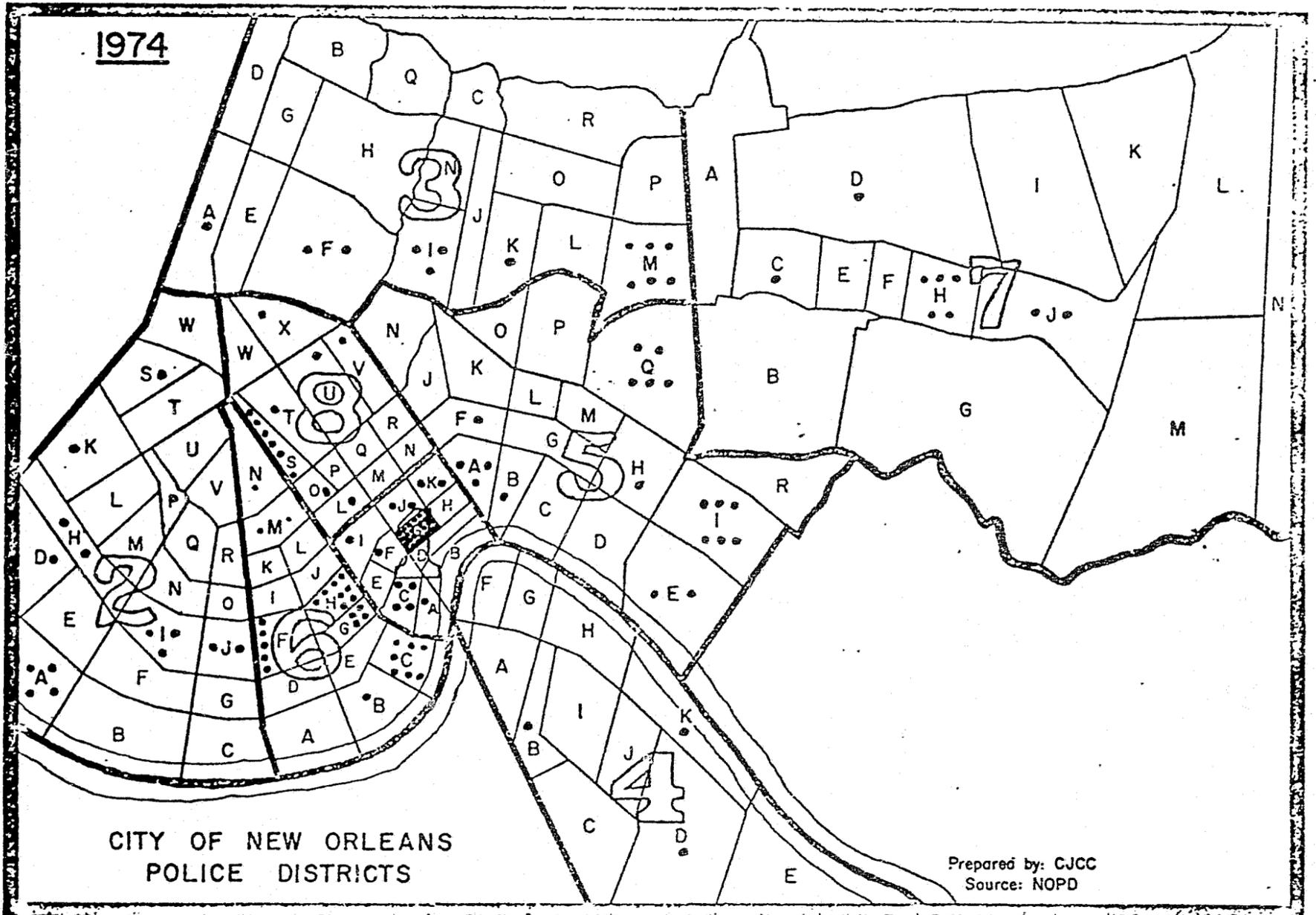
Marital Status	Drug User	Non-Drug User
Single	63%	61%
Married	36%	36%
Divorced	1%	2%
Separated	0%	1%
Total	100% (150)	100% (150)

TABLE 18

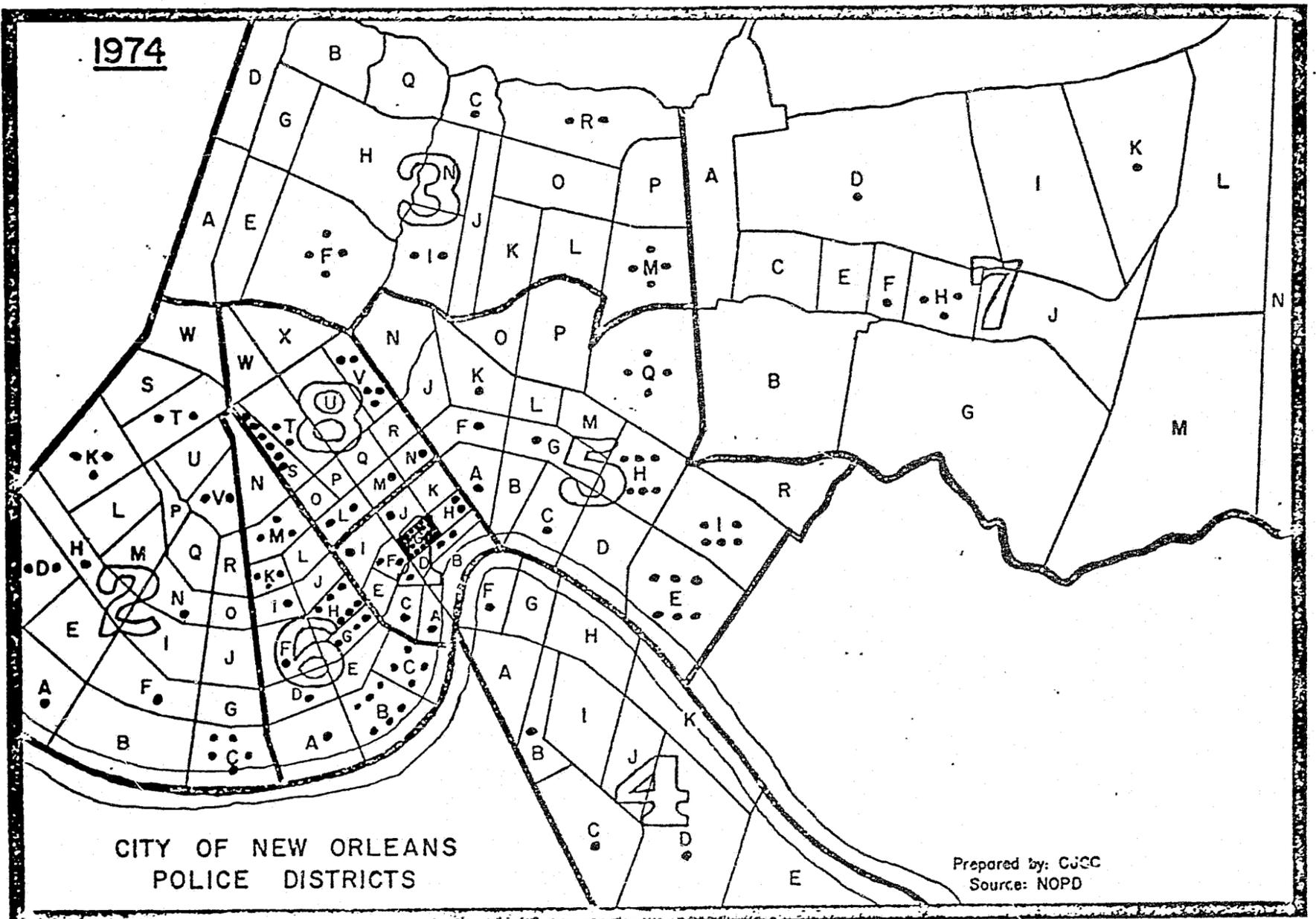
EMPLOYMENT STATUS DISTRIBUTION PERCENTAGES
BY DRUG GROUP CLASSIFICATION

Employment Status	Drug User	Non-Drug User
Employed	41%	46%
Unemployed	59%	54%
Total	100% (150)	100% (150)

LOCATIONS FOR INDIVIDUAL INDEX ARRESTS FOR THE DRUG USERS



LOCATIONS FOR INDIVIDUAL INDEX ARRESTS FOR THE NON-DRUG USERS



DEPARTMENT OF POLICE NEW ORLEANS, LA.
ARREST REGISTER - FINGERPRINTS COPY

ARRESTEE DATA												
Arrestee Name	R	S	Birth	Ht	Wt	Hair	Eyes	Skin	Arrest #			
Arrestee Address	City	St	Birth	St	Nationalty	Bureau #						
Occupation	Employer							Motion #				
Alias	Mart Stat	Social Sec #	License #	Lic St	Yr							
Marks, Scars, Tattoos, etc.												
Injured, describe - Intoxicated, describe								Addict	Meth			
Vehicle Involved	Yr	Make	Modl	Type	Color	Vehc ID #	Disp					
ARREST DATA												
Location of Arrest	D/Z	Arr Date	Time	Bk Date	Time	Item #						
Arresting Officer's Name			Officer Ser	Unit	Arr Credit							
Transporting Officer's Name			Officer Ser	Unit								
CHARGES AND COURT SCHEDULE												
Ordinance #	Affidavit #	Relative To										
Court Schedule	Section	Date	Time	Amount of Bond								
OFFENSE DATA												
Location of Offense					Date	Time	Day					
Specify												
Complainants and Witnesses' Name				Race	Sex	Birth Date						
Address		City	State	Telephone								
Remarks - Brief Description of Arrest												

Signature

Signature

Doorman

Time In

Desk Sergeant

UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
IDENTIFICATION DIVISION
WASHINGTON, D. C. 20537

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