

elements of change

Highlighting Trends and Issues in the Criminal Justice System

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More than Half of Adult Male Arrestees Tested Positive for Illicit Drug Use

Between 52% and 80% of adult male arrestees in 34 cities across the U.S. tested positive for illicit drug use in 2000, according to data from the Arrestee Drug Abuse Monitoring Program (ADAM).^{*} According to urinalysis results, marijuana and cocaine are the drugs most commonly used (40% and 29% of arrestees, respectively), followed by methamphetamine (9%), opiates (8%), and PCP (1%). However, arrestee drug use patterns vary greatly by region. For example, while the average percentage of arrestees testing positive for methamphetamine was 9%, between 22% and 29% of arrestees in California ADAM sites tested positive for this drug. Only 2.6% of Denver's arrestees tested positive for methamphetamine. Large differences across regions suggest that a "one-size-fits-all approach to controlling drug use may not be the optimal one, and policies and strategies for enforcement and treatment are best tailored to specific user groups and locations" (p. 7, 2001b).

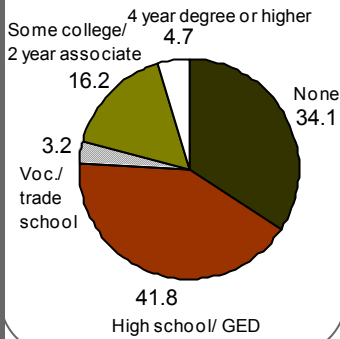
^{*} Positive urinalysis for any of the National Institute on Drug Abuse (NIDA)-5 drugs, to include marijuana, cocaine, methamphetamine, opiates, and PCP. The NIDA-5 drugs are only analyzed in urinalysis tests, and are not included in the self-report findings. The remainder of the data presented later in this newsletter pertain to ADAM's five primary *self-report* drugs, including marijuana, cocaine, crack, methamphetamine, and opiates.

SOURCES: Unless stated otherwise, data used in this newsletter were obtained from the Center for Substance Abuse Research (CESAR), the National Institute of Justice and the Arrestee Drug Abuse Monitoring Program (ADAM), *2000 Annualized Site Reports, 2001a* (available online at www.adam-nij.net/files/2000AnnualizedReports.pdf) and National Institute of Justice, *ADAM Preliminary 2000 Findings on Drug Use and Drug Markets—Adult Male Arrestees, 2001b* (available online at www.adam-nij.net/files/2000_Preliminary_Findings.pdf). Data were also obtained from the Drug Abuse Warning Network (DAWN), sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). DAWN data include emergency department and drug-related mentions and medical examiner drug abuse-related deaths.

Percent of Adult Males Testing Positive for NIDA-5* Drug Use When They Were Arrested

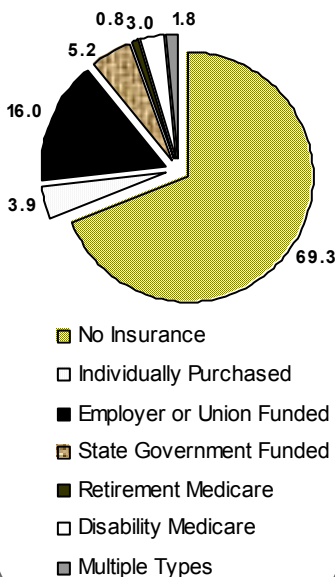
SITE	%
Anchorage	52
San Antonio	53
San Jose	53
Salt Lake City	54
Dallas	55
Des Moines	55
Houston	57
Spokane	58
Laredo	59
Las Vegas	59
Ft. Lauderdale	62
Honolulu	63
Miami	63
Omaha	63
Denver	64
Indianapolis	64
Portland	64
San Diego	64
Seattle	64
Albany	65
Albuquerque	65
Birmingham	65
Phoenix	66
Minneapolis	67
Charlotte	68
New Orleans	69
Tucson	69
Atlanta	70
Detroit	70
Oklahoma City	71
Cleveland	72
Philadelphia	72
Sacramento	74
New York	80

Highest Educational Degree Received (%)



Nearly 70 percent of arrestees reported that they had no health insurance.

Health Insurance for Booked Arrestees (%)



Denver's Adult Male Arrestees: Who Are They?

Education. Although most of the adult male arrestees in this sample stated they received a high school diploma/ GED or higher level educational degree, over one-third of arrestees had not completed high school or received a GED (see pie chart on left).

Residence. Most arrestees (76 percent) lived in a house, mobile home or apartment in the 30 days prior to their arrest. However, another 15.4 percent of arrestees had no fixed residence or lived in a shelter. Another 5.2 percent of arrestees

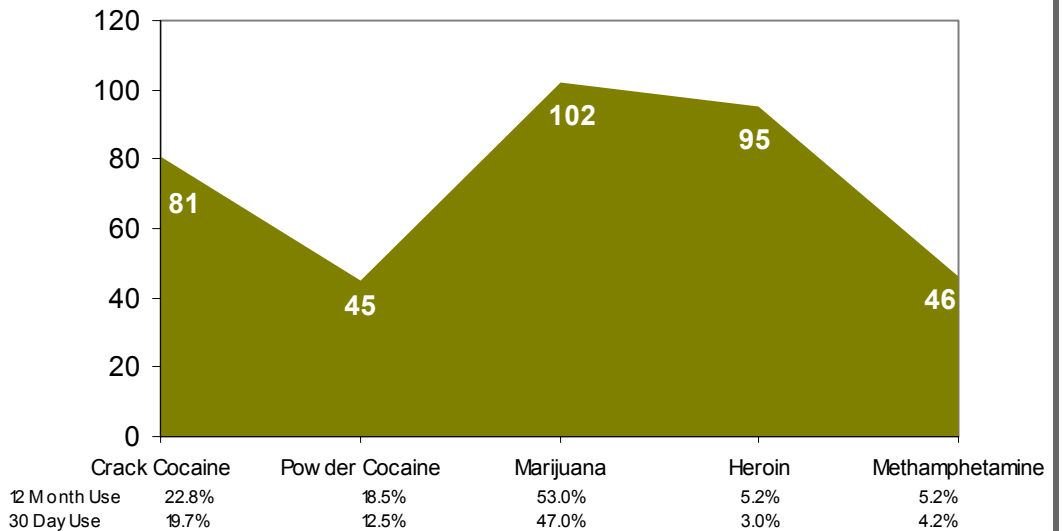
lived in group quarters, and 3.2 percent resided in a hospital or care facility or an incarceration facility.

Employment. Over half (52.8 percent) of arrestees were employed full time at the time of arrest. Another one-sixth (16.9 percent) of the males were working part time or had seasonal employment. However, 15.2 percent of arrestees were unemployed and looking for work. The remaining men (15.1 percent) were unemployed and not looking for work, in school only, retired or disabled for work.

Health Insurance. Nearly 70 percent of adult male arrestees reported that they had no health insurance. Research literature indicates that a large proportion of persons involved in the criminal justice system have mental health needs. This finding supports the idea that many offenders lack access to the mental health services they may desperately need.

Self-Reported Average Number of Days Used in the Past Year: Denver Arrestees

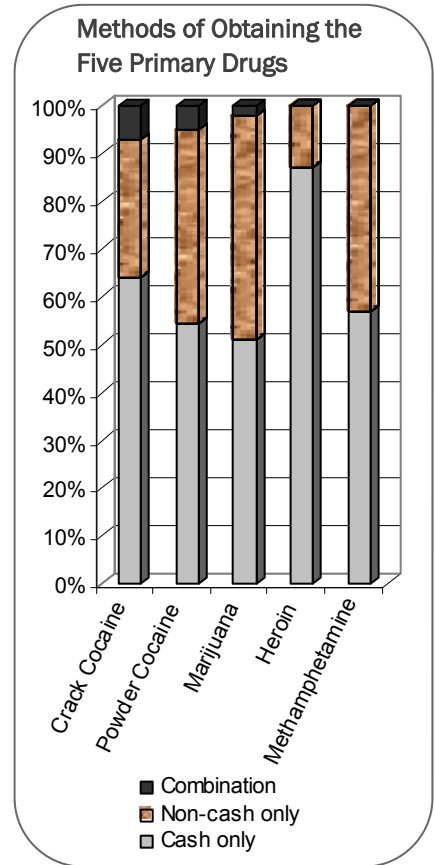
ADAM 2000 Annualized Data



	Crack Cocaine	Pow der Cocaine	Marijuana	Heroin	Methamphetamine
12 Month Use	22.8%	18.5%	53.0%	5.2%	5.2%
30 Day Use	19.7%	12.5%	47.0%	3.0%	4.2%

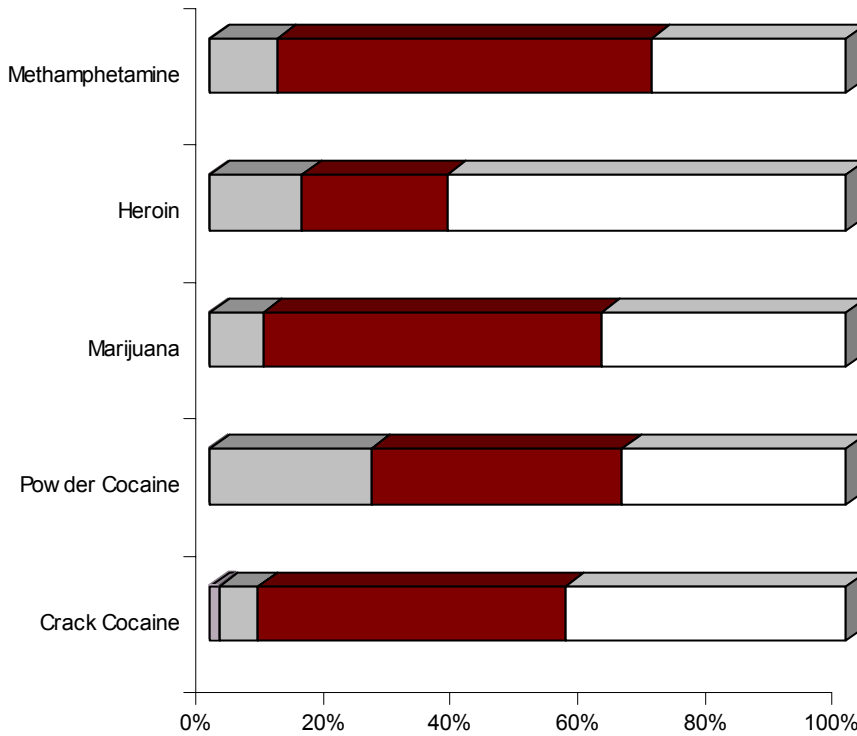
Dynamics of Drug Markets in Denver in the 30 Days Prior to Arrest

For all of the five primary drug categories, the most common method of obtaining the drugs was through cash purchases, according to Denver arrestees. However, a large proportion of offenders also said they obtained drugs without cash. Examples of non-cash transactions include receiving the drug as a gift, getting the drug on credit, stealing drugs, manufacturing the drug and trading property or services, including sex, for the drug. Only a few arrestees used both cash and non-cash transactions to obtain drugs (see bar chart on right).



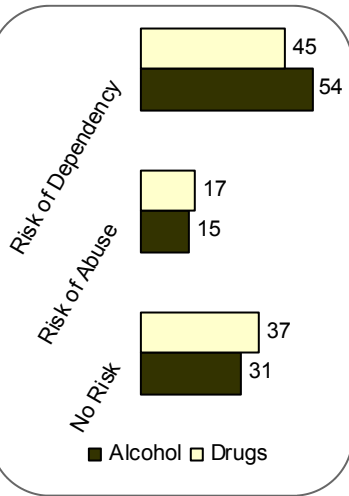
Location of Last Drug Buy by Drug Type

ADAM 2000 Annualized Data



The most common method of obtaining the drugs was through cash purchases.

	Crack Cocaine	Pow der Cocaine	Marijuana	Heroin	Methampheta mine
□ Outdoor Area	44.2	35.2	38.6	62.8	30.6
■ House or Apartment	48.3	39.5	53.0	22.7	58.9
□ Public Building	6.2	25.3	8.4	14.5	10.5
□ Other Area	1.4	0.0	0.0	0.0	0.0



Male Risk of Dependency and Abuse in Denver

About half of the male arrestees in this study were at risk of alcohol and drug dependency and about one-sixth of men were at risk of alcohol and drug abuse. According to the American Psychiatric Association DSM-IV criteria, dependence and abuse are mutually exclusive:

- **Dependence** is a pattern of alcohol or drug use resulting in a combination of three or more indicators, including tolerance, withdrawal, unplanned use, desire/attempts to stop use, too much time using, sacrificing activities to use, and medical/psychological consequences.
- **Abuse** criteria requires use resulting in a combination of two indicators, including failure to fulfill role obligation, use endangering self/others, legal problems resulting from use, and interpersonal problems caused by use.



Does Police Activity Decrease Drug Purchases?

Data from this study indicate that police activity prevented only 4% of male arrestees from purchasing drugs. According to self-report data, the dealer's schedule and availability of the type and quality of the drug had a greater impact on the decision whether or not to make a drug purchase than police activity. It is possible, however, that police activity indirectly prevented the purchase of drugs by interrupting the dealers' availability and/or drug availability.

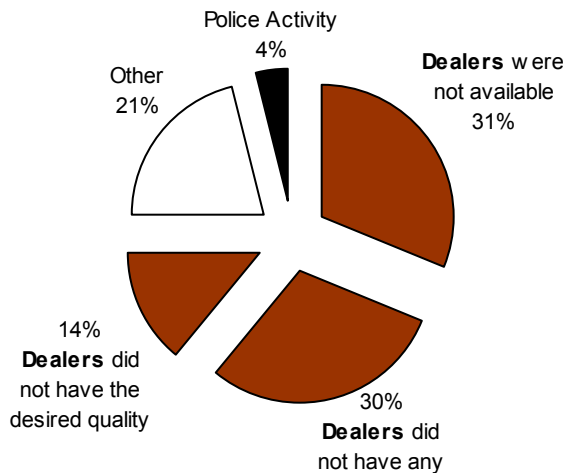
Barriers to Buying Drugs in Denver

Adult male arrestees cited dealers as the most common reason they did not purchase drugs when they intended to do so. The most frequent reason cited was that there were no dealers available. The second most frequent response was that dealers did not have any of the drug they wanted to purchase. And finally, arrestees failed to purchase drugs because the

dealers did not have the quality of drug they wanted. Approximately equal numbers of arrestees purchased drugs inside their neighborhood and outside their neighborhood (48 and 52 percent, respectively).

Why Arrestees Failed to Purchase Drugs When they Wanted Them

ADAM 2000 Annualized Data



Emergency Departments and Drug Use*

Cocaine. According to national emergency department data obtained by the National Institute on Drug Abuse (NIDA) that show the rates of drug mentions in emergency departments in 19 cities nationwide, the rates of cocaine mentions exceeded those for heroin in 16 cities. Admissions for primary abuse of cocaine in 2001 were highest in Atlanta (69.9 percent). The majority of admissions smoked the drug (crack). The lowest proportions of crack admissions were in Seattle (55.0 percent) and the State of Colorado (57.9 percent).

Heroin. Rates of heroin mentions ranged from a low of 5 in Minneapolis to a high of 105 in Baltimore. A statistically significant decrease in heroin emergency department heroin mentions occurred in

Los Angeles, New Orleans, San Diego, San Francisco, and Seattle. Significant increases from the first half of 2000 to the first half of 2001 occurred in Miami and Minneapolis.

Methamphetamine. Methamphetamine continues to be relatively high in the western part of the country. Methamphetamine increased in Detroit, Miami, Minneapolis, St. Louis, and Washington, D.C. The rates of methamphetamine mentions were highest in San Francisco (14), San Diego (13), Los Angeles (8), Phoenix (8), and Seattle (7). A significant increase from the first half of 2000 to the first half of 2001 occurred in Miami, while significant decreases appeared for Dallas, Denver, San Diego, and Seattle.

Club Drugs*

MDMA (ecstasy), gamma hydroxybutyrate (GHB), ketamine, and flunitrazepam (Rohypnol)

Emergency room mentions of club drugs, while climbing, remained low compared to mentions for cocaine and heroin. Between 1998 and 2000, MDMA emergency department mentions increased significantly in 17 cities. MDMA mentions peaked in 18 cities in 2000, as shown in the table to the right.

Data indicate that MDMA is the most frequently used club drug. For the second consecutive year, MDMA use was more prevalent among high school students nationally than was cocaine use. From 1998 to 2001, use of MDMA rose from 3.6 to 9.2 percent among 12th graders. Teens increasingly perceived MDMA as available — 61.5 percent in 2000, compared with 39.0 percent in 1997.

Trends in MDMA Mentions 1998-2000*

	1998	1999	2000	Percent Increase 1998, 2000
Atlanta	33	62	98	106.1
Baltimore	6	35	64	966.7
Boston	39	87	125	220.5
Chicago	25	103	215	760.0
Dallas	15	24	71	373.3
Denver	6	15	57	850.0
Detroit	6	40	60	900.0
Los Angeles	30	52	177	490.0
Miami	12	59	105	775.0
Minneapolis	2	16	65	3,150.0
New Orleans	42	51	44	~
New York	31	136	200	545.2
Newark	8	38	21	162.5
Philadelphia	27	89	141	422.2
Phoenix	2	20	76	3,700.0
St. Louis	~	15	52	~
San Diego	14	25	47	235.7
San Francisco	38	47	107	181.6
Seattle	19	32	128	573.7
Washington, D.C.	23	~	78	~

~ An estimate with a relative standard error greater than 50 percent has been suppressed.

*SOURCE: Adapted from the Drug Abuse Warning Network (DAWN) data, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). DAWN data include emergency department drug-related mentions. A "mention" is categorized as any time a person mentions the use of drugs during an emergency department treatment.

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Criminal Activity and Drugs in Denver

Over half of the adult male arrestees in this sample reported being arrested one to two times in the year preceeding the current arrest. Twenty-six percent of arrestees indicated that the current offense was their first in the past year.

Percent Positive for Drugs by Number of Arrests in the Past Year

ADAM 2000 Annualized Data

