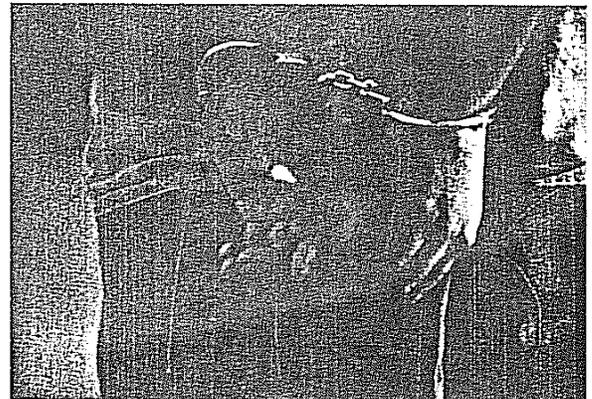
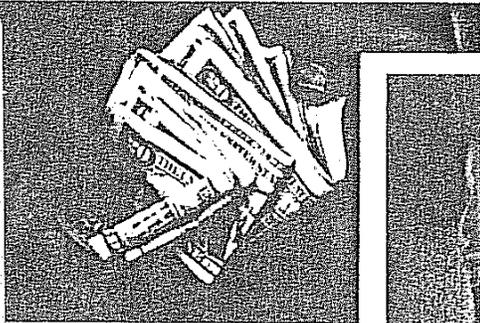
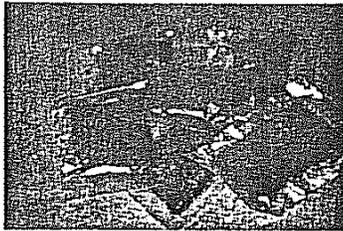
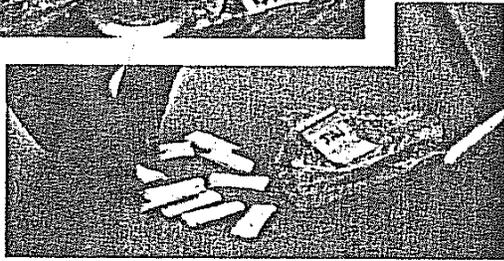
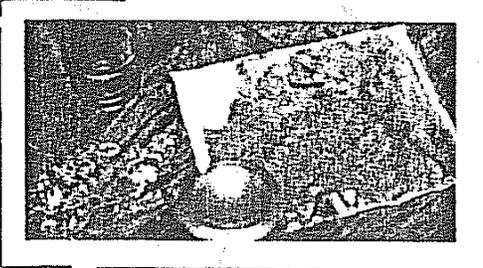
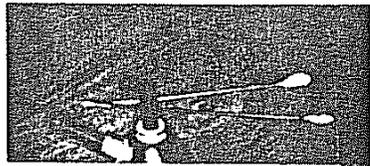


# DRUG ABUSE AND CRIME IN THE OF DISTRICT COLUMBIA

D.C. Office of Criminal  
Justice Plans and Analysis



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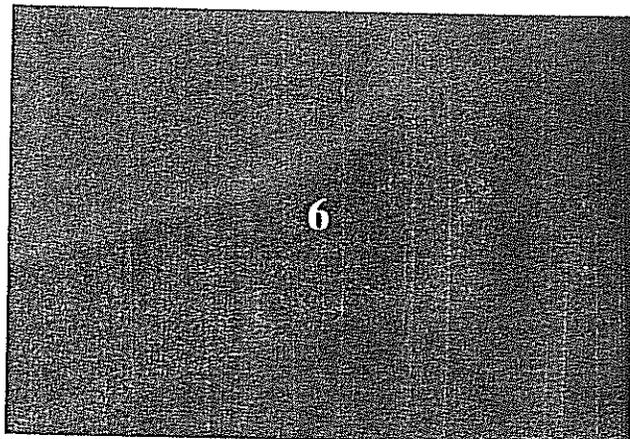
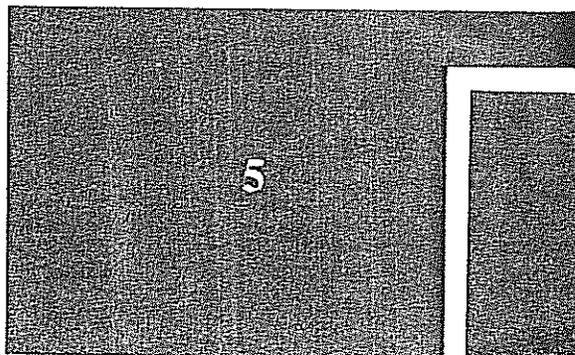
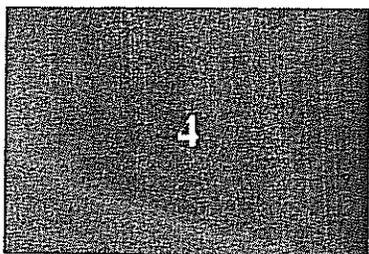
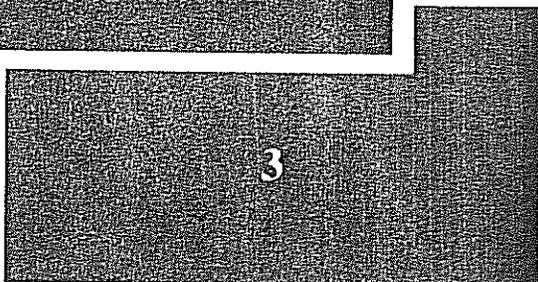
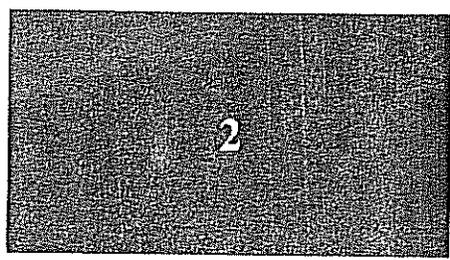
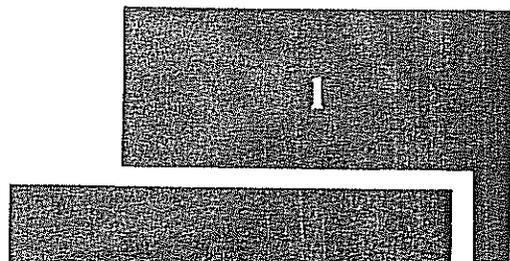
ACQUISITIONS



Government of the District of Columbia  
Marion Barry Jr., Mayor

# ABOUT THE COVER

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- 1 CRACK
- 2 COCAINE
- 3 PCP
- 4 MARIJUANA
- 5 NON-TAXABLE FUNDS
- 6 ARRESTEE

# MESSAGE FROM THE MAYOR

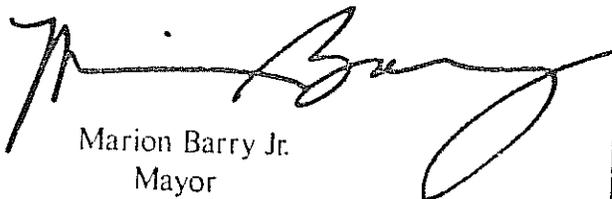
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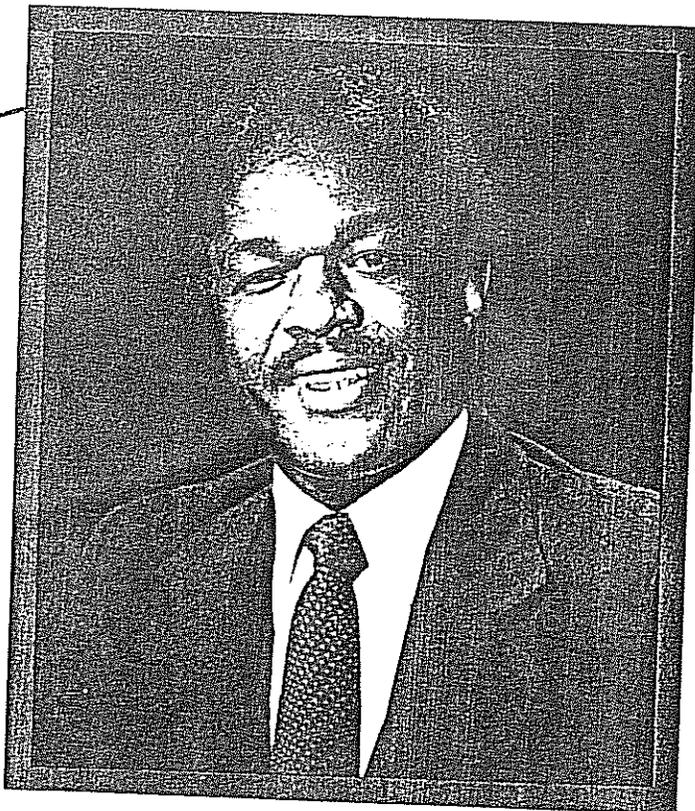
There is no greater problem confronting the citizens of the District than drug abuse. Each year hundreds of lives are lost through drug overdose and drug-related homicide. Many others develop drug habits and commit crimes to pay for their drugs.

The victims of drug abuse include the helpless addict, the hundreds who are robbed, burglarized, and assaulted by the drug abuser, and the families of drug abusers who must bear much of the burden for their care and support.

The community is mobilizing to attack this plague. We have launched an unprecedented law enforcement effort that has resulted in more drug arrests per capita than any comparable jurisdiction in the nation. A number of prevention efforts are under way to keep our young people away from drugs. Those using drugs who are arrested and convicted are being helped by drug treatment programs. In the near future, we will construct a treatment facility for inmates that will serve to intervene and break the vicious cycle of drug abuse, crime and incarceration.

Drug abuse threatens health, safety, and social order within our community. We must do whatever it takes to rid ourselves of this deadly plight.

  
Marion Barry Jr.  
Mayor



# MESSAGE FROM THE DIRECTOR

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The Office of Criminal Justice Plans and Analysis is pleased to present this comprehensive report on the impact of drugs on the criminal justice system. Drugs and crime are such wide-spread problems that national programs have been developed to combat them. While the debate continues about causation and what constitutes effective strategies, urban, suburban and rural jurisdictions continue to grapple with the devastating effects of these two social problems.

This report represents the most complete set of information compiled within the last decade for the District of Columbia. It includes: drug use and criminal justice trends; residential patterns of drug users; and different social and demographic patterns of drug users.

We hope you will find this report useful as a resource document for understanding the problems of drug abuse in the District. We also hope this report will stimulate community interest in developing prevention and treatment programs that meet the varied needs of neighborhoods. Effective solutions will only be found if citizens and government agencies work together to reduce the desire and opportunity to use drugs.

*Shirley A. Wilson*

Shirley A. Wilson  
Director



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# EXECUTIVE SUMMARY

## Purpose

This study examines the drug abuse problem in the District and its relationship to crime. Included in this study are statistical profiles of various types of drug users and an examination of geographical patterns of drug use.

## Scope of Drug Problem

Several indicators traditionally associated with measuring drug use indicate a growing drug problem in the District.

- From 1983 to 1986, the number of drug overdose deaths increased from 69 to 144, representing a 108 percent increase.
- Drug related emergency room mentions increased from 1,561 in 1982 to 2,668 in 1986, representing a 71 percent increase. During this time period, cocaine mentions increased by 293 percent while PCP mentions increased 445 percent.
- Drug arrests increased 93 percent from 1982 (6,871) to 1986 (13,280).
- The District reports the highest number of drug arrests per capita (14.8 per 1,000 population) among other cities of comparable size and demographics.

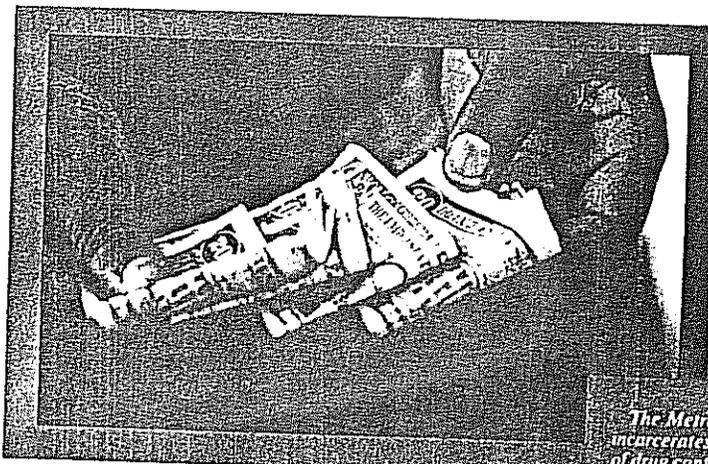
- Felony drug convictions increased from 502 in 1982 to 3,309 in 1986, representing a 559 percent increase that parallels increased arrests for street sales of illicit drugs.

- In 1984, 55 percent of the adult arrestees were found to be using one or more drugs through urinalysis tests. By 1986, the percentage of arrestees found to be using drugs increased to 68 percent. In June 1987, the percentage of arrestees using drugs reached 73 percent.

- The drugs used most often by arrestees are cocaine (40 percent) and PCP (39 percent).

## Geographic Patterns of Drug Use

- Arrestees found to be using drugs live primarily in zip code areas 20001, 20002, 20019, and 20020, which are mostly located in Wards 2, 6, 7 and 8.
- The residential patterns of heroin, cocaine and PCP users are similar to one another.



The Metropolitan Police Department (MPD) annually arrests and incarcerates thousands of drug law violators and seizes large volumes of drug contraband, cash, and vehicles. While greater emphasis is being put on penalties for drug law violations, the enormous profits made by drug traffickers more than overshadows their fear of arrest or imprisonment. The MPD is, therefore, developing rigorous assets removal techniques and planning to implement an assets forfeiture program. With this approach, drug law violators will undergo a financial investigation through which the assets of those involved in or connected with the distribution and sale of illegal drugs would be identified and seized. This method is expected to be very successful in establishing an additional deterrent to drug related criminal activity.

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## Characteristics of Arrestees Using Drugs

- Arrestees found to be using drugs were slightly younger and more likely to be single than arrestees not found to be using drugs.
- Arrestees found to be using drugs were much more likely to be charged with a drug offense (*55 percent*) than arrestees not found to be using drugs (*24 percent*).

## Juvenile Drug Use

- Findings from a study of District junior and senior high school students reveal that 13 percent reported using PCP at least once in their lives, and 7 percent reported using cocaine.
- Of the juvenile arrestees tested for drug use in 1986, 34 percent were found to be using drugs with 28 percent using PCP, 10 percent using marijuana, and 9 percent using cocaine. One percent were found to be using heroin.
- Juveniles found to be using drugs were much more likely to be charged with a drug offense (*63 percent*) than those found not to be using drugs (*38 percent*).

## Profile of Drug User Types

- Heroin users charged with crimes average 32 years of age, tend to be single, have not completed high school, and are least likely to be charged with a violent crime.
- Cocaine users charged with crimes average 28 years of age, tend to be single, have not graduated from high school, and are most often charged with a drug offense and, like the heroin user, least likely to be charged with a violent crime.
- Among the various types of drug users, the PCP user is typically younger, and more likely to be arrested for a violent crime.

## Treatment Modalities

- The four prevailing treatment approaches for drug abuse are detoxification, abstinence, therapeutic communities and methadone maintenance.
- Recent treatment developments include a greater reliance on therapeutic communities as a treatment modality and replacing methadone with naltrexone (*trexan*), a non-addicting drug, in drug maintenance programs.

# INTRODUCTION

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The purpose of this study is to determine the extent of the drug abuse problem in the District of Columbia and its relationship to crime. In addition, the study concludes with a report about how the District government is responding to the drug problem.

The illegal use, sale, distribution and manufacture of controlled substances are major challenges facing the District. Illicit drug use has reached epidemic proportions and threatens to undermine the social structures that help hold our community together. Our public resources are strained as we are forced to spend millions of dollars to arrest, prosecute, lock up and treat drug abusers. Particularly alarming is the dramatic increase in illicit drug use among the District's young people.

The District is certainly not alone in its battle against illicit drugs. Nationally, the toll of drug abuse in terms of health, safety and economic well-being has been enormous. Across the nation, the rising tide of drug use has driven hospital admissions for drug abuse up by more than 100 percent over the last five years. Cocaine-related deaths have increased by 325 percent since 1980. Illegal sales of drugs drain the economy and curtail government resources. Moreover, it has been estimated that more than 100 billion dollars a year in tax free income is generated from the sale of illegal drugs.

Drug abuse is also a contributing factor and often a root cause of crime. Offenders who are tested often are found to be under the influence of drugs. Drug dependent persons have few options within the law to secure the required funds to maintain their habits and often commit larcenies, robberies or burglaries to obtain cash to buy their drugs. With increased demands for illicit drugs, the number of persons involved in drug trafficking is also skyrocketing. Nationally, arrests for major drug offenses have increased by more than 20 percent over the last two years. Well-financed, sophisticated organizations employing many persons that operate across state, national and international boundaries are primarily responsible for the distribution of illicit drugs. Substantial law enforcement resources are generally required to penetrate and break up these groups.

Increased public awareness of drug abuse has provided the impetus for a mobilization effort to attack this pervasive problem. This study is part of that effort as we seek to better inform the District's key policy-makers, the criminal justice community and the general public about drug abuse and its relationship to crime in the District of Columbia.

# SCOPE OF THE PROBLEM:

## AN OVERVIEW OF THE DRUG PROBLEM IN THE DISTRICT OF COLUMBIA

### A. INDICATORS OF DRUG ABUSE

The District of Columbia has experienced a growing problem of drug abuse in the past several years. To assess this problem, several indicators traditionally associated with drug use are used to measure drug abuse. They are: drug-related overdose deaths, drug-related emergency room mentions, city-wide drug arrests, prosecutions and convictions, and drug urinalysis results.

### B. TRENDS IN OVERDOSE DEATHS AND EMERGENCY MENTIONS

A major indicator of drug abuse is drug-related overdose deaths. It is assumed that the number of drug overdose deaths will increase along with increases in the number of persons who intravenously

self administer drugs of varying quantity and quality. Over the past nine years, between 1978 and 1986, the District of Columbia has witnessed a dramatic increase in the number of narcotic (*heroin*) related overdose deaths. During this period, the number of annual deaths has ranged from a low of seven in 1978 to an all time high of 144 deaths in 1985. Between 1983 and 1986, the total number of drug overdose deaths increased 108 percent. The District has also reported approximately six deaths per year due to cocaine overdose since 1984 (*Table 1, Figure 1*).

TABLE 1  
DISTRICT OF COLUMBIA OVERDOSE DEATHS

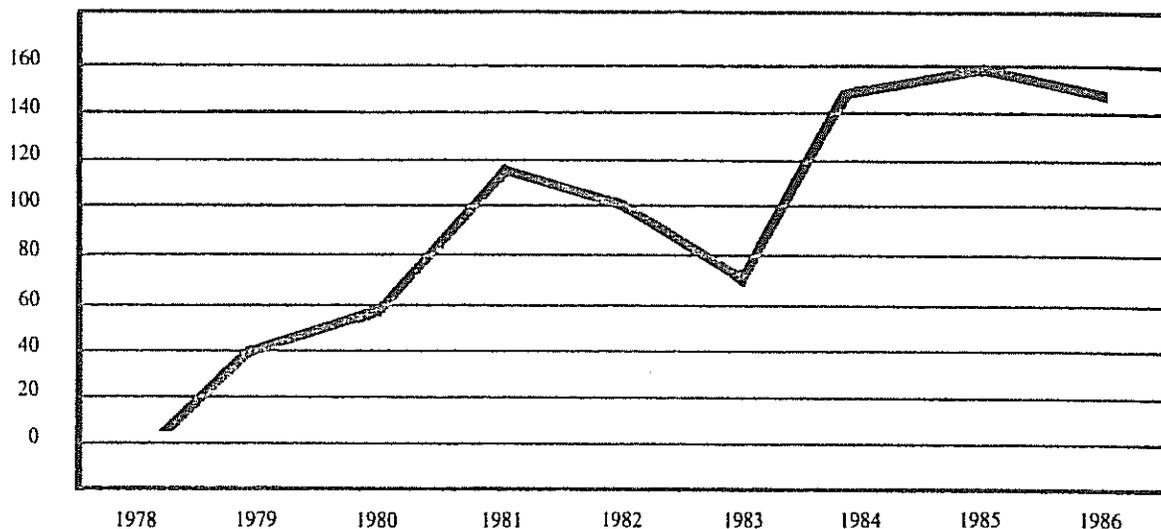
Year	Total Drug Overdose Deaths	Heroin and Cocaine Overdose Deaths	Cocaine Overdose Deaths	Heroin Overdose Deaths
1978	7	*	*	7
1979	41	*	*	41
1980	61	*	*	61
1981	115	*	*	115
1982	100	*	*	100
1983	69	*	*	69
1984	147	1	6	140
1985	155	4	7	144
1986	144	2	6	136

\*Data not available until 1984.

SOURCE: Metropolitan Police Department.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

**FIGURE 1  
OVERDOSE DEATHS**



Drug-related emergency room mentions serve as another indicator of drug use because the number of hospital emergency room mentions is thought to increase as the number of users increases. The Drug Abuse Warning Network (*DAWN*) is a project that gathers drug-related data from hospital emergency rooms to alert federal and local agencies as to the type of drugs being used.

*Table 2 (Figure 2)* shows the number of emergency room mentions for the years 1982 to 1986 for the District. Heroin mentions increased 16 percent from 1982 (561) to 1986 (649) while marijuana mentions increased 20 percent. Alcohol in combination with drug mentions decreased each year since 1982, decreasing 27 percent from 1982 (554) to 1986 (406).

**TABLE 2  
DAWN EMERGENCY ROOM MENTIONS  
1982-1986**

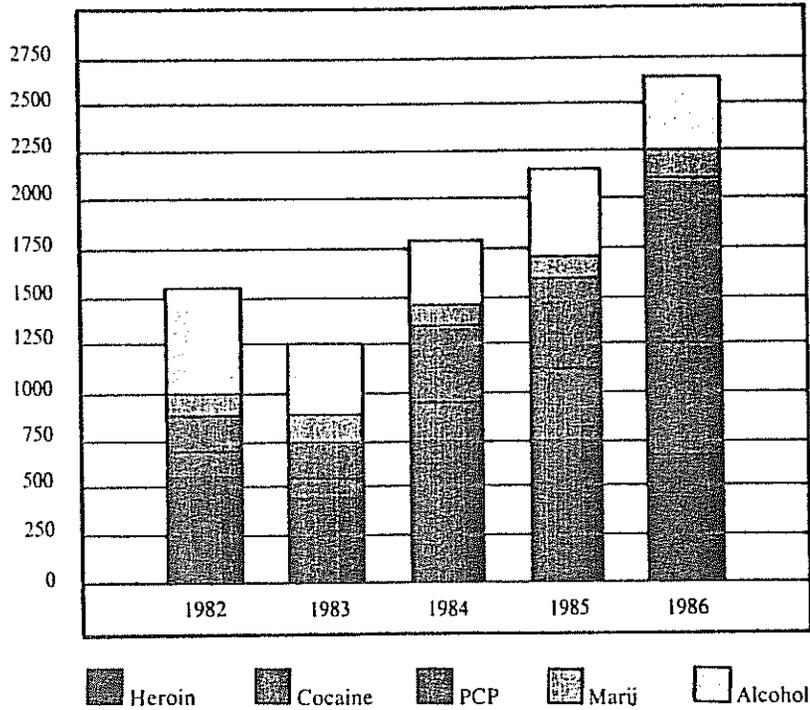
Type of Drug	1982	1983	1984	1985	1986
Alcohol in Combination	554	379	363	432	406
Heroin	561	448	719	722	649
Cocaine	151	143	234	344	579
PCP	160	202	371	509	872
Marijuana	135	91	128	129	162
<b>Total</b>	<b>1,561</b>	<b>1,263</b>	<b>1,815</b>	<b>2,136</b>	<b>2,668</b>

\*1986 figures are estimates based on 9 months of data.

**SOURCE:** Drug Abuse Warning Network.

**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

FIGURE 2  
DAWN EMERGENCY ROOM MENTIONS



Cocaine and PCP mentions have dramatically increased since 1982. From 1982 to 1986, cocaine mentions rose from 151 to 579, representing a 293 percent increase and PCP mentions increased from 160 to 872, representing a 445 percent increase. These figures indicate the prevalence of cocaine and PCP use in the District.

In response to the growing drug problem, the Metropolitan Police Department (MPD) is continually testing new strategies to more effectively deal with drug trafficking.

In a concerted effort to abate drug sales and use in and around District public schools, the MPD enrolled youth undercover officers in certain target schools. The officers engaged in illicit drug transactions and the dealers involved were subsequently arrested, resulting in a significant decrease in drug trafficking in the target schools.

Operation Clean Sweep is a special law enforcement program, which consists of units within the MPD that are assigned the task of arresting persons for street sales of illicit drugs. Since the program began in August of 1986, more than 2,000 arrests have been made.

Undercover purchases and seizures of drugs have also dramatically increased in recent years. The combined number of purchases and seizures of PCP, cocaine and heroin rose from 4,004 in 1984 to 13,929 in 1986, an increase of 347 percent. The estimated street value of drugs seized in 1986 was \$12,099,600.

The MPD also actively encourages citizen involvement in drug law enforcement with the Drug Dealer Reward Program. This is a confidential program which offers up to a \$25,000 reward for information leading to the arrest and conviction of drug dealers.



## C. CRIMINAL JUSTICE TRENDS

### Drug Arrests in the District

City-wide drug arrests provide a good indicator of drug use because the changes in the number of arrests are a function of changes in availability and drug related crimes. Total adult and juvenile drug arrests increased 93 percent from 1982 (6,871) to 1986 (13,280). During this same time period, arrests for drug sales increased 177 percent and arrests for possession of drugs increased 61 percent (Table 3, Figure 3).

From 1982 to 1986, juvenile drug arrests for opium/cocaine and their derivatives rose from 41 to 296, representing a 622 percent increase. Arrests for marijuana increased from 226 to 858 representing a 280 percent increase, and arrests for other dangerous non-narcotic drugs increased 39 percent during this same time period, from 49 to 68 (Table 4).

TABLE 3  
NUMBER AND PERCENT OF ADULT AND JUVENILE DRUG ARRESTS FOR SALES AND POSSESSION, CALENDAR YEARS 1982-1986

	Juveniles					Adults				
	Sales	%	Possession	%	Total	Sales	%	Possession	%	Total
1982	82	26	234	74	316	1,842	28	4,713	72	6,555
1983	104	24	335	76	439	2,935	39	4,687	61	7,622
1984	185	29	450	71	635	3,542	45	4,278	55	7,820
1985	220	35	410	65	630	3,126	36	5,523	64	8,649
1986	279	23	943	77	1,222	5,058	42	7,000	58	12,058

SOURCE: 1982-1986: Metropolitan Police Department.  
PREPARED BY: Office of Criminal Justice Plans and Analysis.

FIGURE 3  
DRUG ARRESTS 1982-1986

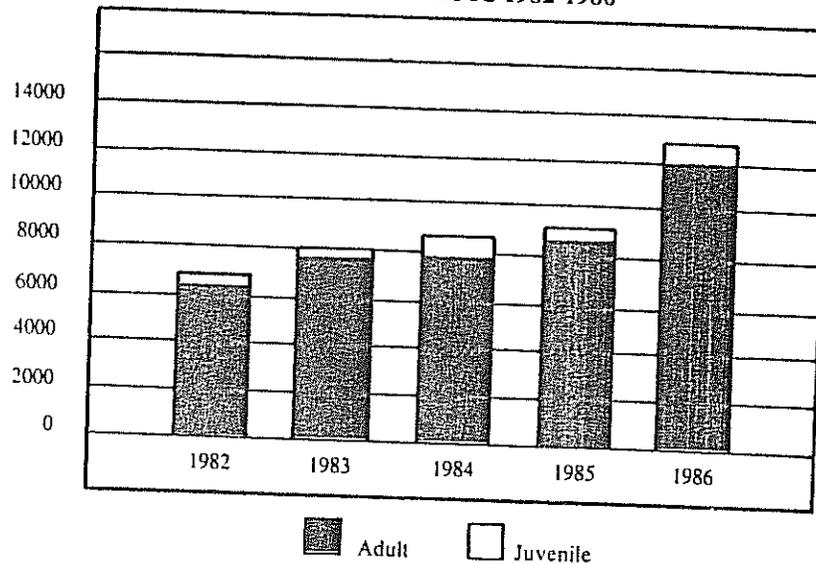


TABLE 4  
JUVENILE DRUG ARRESTS BY TYPE OF DRUG  
CALENDAR YEARS 1982-1986

Sales	1982		1983		1984		1985		1986	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Opium/cocaine & derivatives (heroin, morphine, codeine)	18	22	11	11	23	12	61	28	190	68
Marijuana	43	52	23	22	69	37	156	71	67	24
Synthetic/manufactured narcotics (Demerol, Methadones)	0	0	0	0	0	0	0	0	0	0
Other dangerous non-narcotic drugs (barbituates, benzedrine)	21	26	70	67	93	50	3	1	22	8
<b>Total Possession</b>	<b>82</b>	<b>100</b>	<b>104</b>	<b>100</b>	<b>185</b>	<b>99+</b>	<b>220</b>	<b>100</b>	<b>279</b>	<b>100</b>
Opium/cocaine & derivatives (heroin, morphine, codeine)	23	10	24	7	34	8	86	21	106	11
Marijuana	183	78	205	61	297	67	322	79	791	84
Synthetic/manufactured narcotics (Demerol, Methadones)	0	0	0	0	0	0	0	0	0	0
Other dangerous non-narcotic drugs (barbituates, benzedrine)	28	12	106	32	119	26	2	<1	46	5
<b>Total</b>	<b>234</b>	<b>100</b>	<b>335</b>	<b>100</b>	<b>450</b>	<b>100+</b>	<b>410</b>	<b>100</b>	<b>943</b>	<b>100</b>
<b>Grand Total</b>	<b>316</b>	<b>—</b>	<b>439</b>	<b>—</b>	<b>635</b>	<b>—</b>	<b>630</b>	<b>—</b>	<b>1,222</b>	<b>—</b>

SOURCE: 1982-1986: Metropolitan Police Department.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

From 1982 to 1986, adult drug arrests for opium/cocaine and their derivatives increased from 3,510 to 5,328, representing a 52 percent increase. Arrests for marijuana increased 43 percent, from 1,581 to 2,266; and arrests for other dangerous narcotic drugs increased 254 percent, from 1,262 to 4,464 (Table 5).

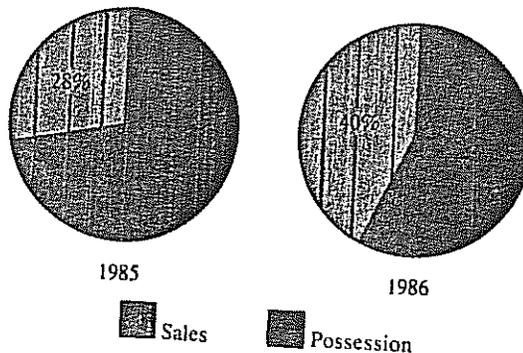
TABLE 5  
ADULT DRUG ARRESTS BY TYPE OF DRUG  
CALENDAR YEARS 1982-1986

Sales	1982		1983		1984		1985		1986	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Opium/cocaine & derivatives (heroin, morphine, codeine)	1,031	56	1,976	67	1,607	45	1,587	49	1,919	38
Marijuana	257	14	413	14	851	24	527	16	613	12
Synthetic/manufactured narcotics (Demerol, Methadones)	0	0	0	0	0	0	0	0	613	12
Other dangerous non-narcotic drugs (barbituates, benzedrine)	554	30	546	19	1,084	31	1,101	34	2,526	50
<b>Total</b>	<b>1,842</b>	<b>100</b>	<b>2,935</b>	<b>100</b>	<b>3,542</b>	<b>100</b>	<b>3,215</b>	<b>99</b>	<b>5,058</b>	<b>100</b>
Possession	2,479	53	1,824	39	1,535	36	2,389	44	3,409	49
Opium/cocaine & derivatives (heroin, morphine, codeine)	1,324	28	1,990	43	1,498	35	1,521	28	1,653	24
Marijuana	202	4	172	4	55	1	0	0	0	0
Synthetic/manufactured narcotics (Demerol, Methadones)	708	15	701	15	1,191	28	1,524	28	1,938	28
Other dangerous non-narcotic drugs (barbituates, benzedrine)										
<b>Total</b>	<b>4,713</b>	<b>100</b>	<b>4,687</b>	<b>100+</b>	<b>4,279</b>	<b>100</b>	<b>5,434</b>	<b>100</b>	<b>7,000</b>	<b>100+</b>
<b>Grand Total</b>	<b>6,555</b>	<b>—</b>	<b>7,622</b>	<b>—</b>	<b>7,821</b>	<b>—</b>	<b>8,649</b>	<b>—</b>	<b>12,058</b>	<b>—</b>

SOURCE: 1982-1986: Metropolitan Police Department.  
PREPARED BY: Office of Criminal Justice Plans and Analysis.

The rise in adult and juvenile drug arrests is a result of greater emphasis on law enforcement. Operation Clean Sweep, a special law enforcement program designed by the Metropolitan Police Department to decrease the sale of illicit drugs in the District, consists of special units within the MPD that are assigned the task of arresting persons for street sales of illicit drugs. The program has been successful: adult drug arrests for sales increased 57 percent from 1985 to 1986 (Figure 4). Also, the number of purchases and seizures of PCP, cocaine and heroin rose from 4,004 in 1984 to 13,929 in 1986, an increase of 248 percent.

FIGURE 4  
DRUG SALES AND POSSESSION



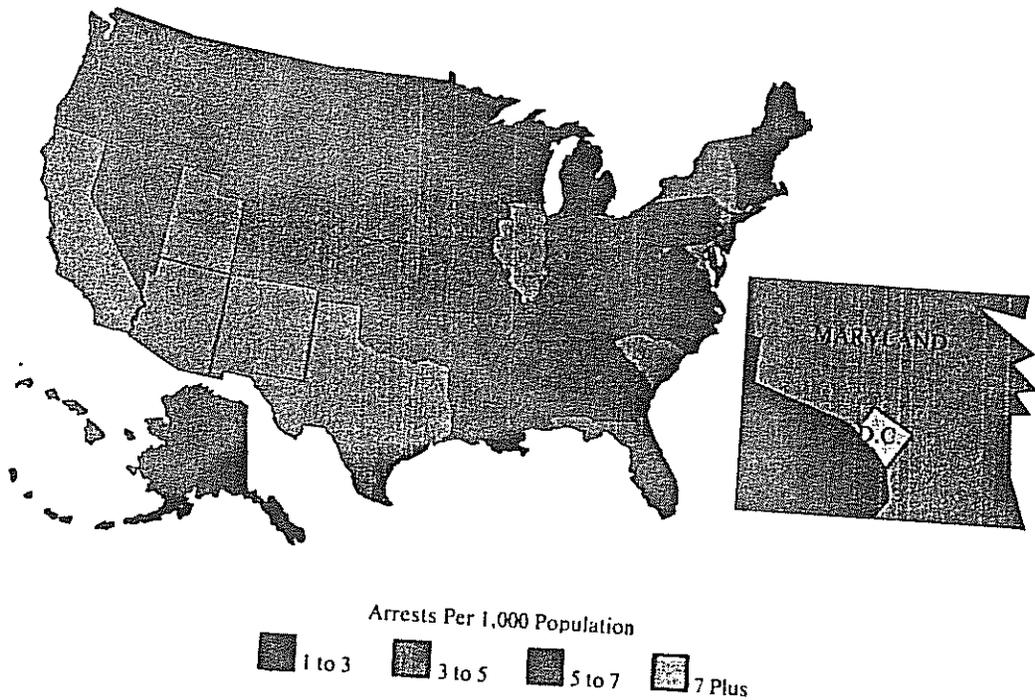
## Drug Arrest Comparisons with Other Jurisdictions

Figure 5 (Table 6) shows that the District of Columbia when compared to other states, has the highest number of drug arrests per 1,000 population in the United States.

Southwestern states bordering on or near Mexico such as California, New Mexico, Arizona and Utah have high drug arrest rates (3 to 7 per 1,000 population), as do the mid-Atlantic states: New York, Maryland, New Jersey and Delaware.

Some of the coastal states such as Florida and South Carolina, and states with large urban populations such as Illinois, also have high drug arrest rates (3 to 7 per 1,000 population).

FIGURE 5  
DRUG PROBLEM IN THE UNITED STATES  
As Measured by Drug Arrests



**TABLE 6**  
**POPULATION ESTIMATES AND NUMBER OF DRUG ARRESTS BY STATE, 1985**

State	Population	Number of Drug Arrests
Alaska	538,000	367
Alabama	4,080,000	7,253
Arkansas	2,402,000	5,910
Arizona	3,252,000	12,069
California	26,345,000	173,916
Colorado	3,270,000	7,530
Connecticut	3,176,000	7,475
District of Columbia	621,000	9,059
Delaware	621,000	1,325
Florida	11,435,000	44,168
Georgia	5,991,000	15,026
Hawaii	1,071,000	4,741
Iowa	2,943,000	2,725
Idaho	1,030,000	1,405
Illinois	11,640,000	33,242
Indiana	5,586,000	4,717
Kansas	2,471,000	3,503
Kentucky	3,786,000	8,512
Louisiana	4,533,000	5,866
Massachusetts	5,847,000	10,485
Maryland	4,436,000	18,993
Maine	1,175,000	1,701
Michigan	9,212,000	14,735
Minnesota	4,224,000	5,509
Missouri	5,094,000	6,972
Mississippi	2,647,000	1,642
Montana	837,000	878
North Carolina	6,305,000	16,616
North Dakota	700,000	857
Nebraska	1,622,000	2,096
New Hampshire	1,000,000	1,818
New Jersey	7,619,000	35,262
New Mexico	1,476,000	4,090
Nevada	941,000	1,562
New York	17,966,000	88,574
Ohio	10,836,000	13,419
Oklahoma	3,356,000	8,995
Oregon	2,709,000	6,314
Pennsylvania	12,012,000	16,108
Rhode Island	970,000	2,712
South Carolina	3,396,000	10,738
South Dakota	719,000	898
Tennessee	4,793,000	2,686
Texas	16,409,000	58,674
Utah	1,699,000	5,467
Virginia	5,785,000	12,347
Vermont	538,000	416
Washington	4,417,000	6,190
Wisconsin	4,818,000	8,881
West Virginia	1,968,000	1,414
Wyoming	516,000	948

**SOURCE:** Uniform Crime Reports 1985, unpublished data.  
**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

# PROFILE OF ADULT ARRESTEES TESTED FOR DRUG USE

The District of Columbia Pretrial Services Agency (PSA) obtains urine samples from all arrestees (excluding traffic and ordinance violations) brought for initial arraignment to the holding cells (or lock-up) in the basement of the D.C. Superior Court Building. In 1986, 14,249 arrestees were tested for drug use under the Pretrial Services Agency drug testing program. Of the arrestees tested, 9,657, or 68 percent, were found to be using drugs (tested positive for drug use). The following section of this report examines comparative characteristics of the arrestee population testing positive for drug use and testing negative for drug use in 1986. It is important to note that several variables examined in the study are self-reported: age, education and marital status.

## SEX

Table 11 shows that 83 percent of the arrestees testing positive for drug use were male, while 17 percent were female. Of those whose drug test results were negative, 84 percent were male and 16 percent were female.

## RACE

Table 12 presents the race of arrestees tested for drug use. Of those testing positive, 94 percent were black and 5 percent were white. Of those testing negative, 83 percent were black and 13 percent were white.

TABLE 11  
GENDER OF ADULT ARRESTEES TESTED FOR DRUG USE  
BY NUMBER AND PERCENT

Gender	Number Testing		Number Testing	
	Positive	Percent	Negative	Percent
Male	7,994	83	3,837	84
Female	1,645	17	750	16
*Total	9,639	100	4,587	100

\*Total data set for this analysis is 14,249 with 23 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

TABLE 12  
RACE OF ADULT ARRESTEES TESTED FOR DRUG USE  
BY NUMBER AND PERCENT

Race	Number Testing		Number Testing	
	Positive	Percent	Negative	Percent
Black	9,056	94	3,793	83
White	527	5	590	13
Other	59	1	205	4
*Total	9,642	100	4,588	100

\*Total data set for this analysis is 14,249 with 19 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

## AGE

The age of arrestees tested for drug use is shown in Table 13. Of the arrestees tested for drug use who were between the ages of 18 and 30, 48 percent tested positive for drug use and 21 percent tested negative. Nineteen percent of the arrestees between the

ages of 31 and 50 tested positive for drug use while 10 percent in this age group tested negative. Means were calculated for the two groups. Arrestees testing positive had a mean age of 27 while arrestees testing negative had a mean age of 29.

## MARITAL STATUS

The marital status of arrestees testing for drug use is shown in *Table 15*. Seventy-four percent of those testing positive for drug use were single while 10 percent were married. Eight percent were separated, 4 percent divorced, 3 percent common law, and

1 percent widowed. Of those testing negative, 70 percent were single, 13 percent married, 8 percent separated, 5 percent divorced, 2 percent common law, and 1 percent widowed.

**TABLE 15**  
**MARITAL STATUS OF ARRESTEES TESTED FOR DRUG USE**  
**BY NUMBER AND PERCENT**

Marital Status	Number Testing Positive	Percent	Number Testing Negative	Percent
Single	7,124	74	3,203	70
Married	957	10	596	13
Common Law	301	3	111	2
Separated	815	8	389	8
Widowed	56	1	54	1
Divorced	389	4	235	5
*Total	9,642	100	4,588	99 +

\*Total data set for this analysis is 14,249 with 19 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

**TABLE 16**  
**CHARGE BY OFFENSE OF ADULT ARRESTEES TESTED FOR DRUG USE**  
**BY NUMBER AND PERCENT**

Part One Offenses	Number Testing Positive	Percent	Number Testing Negative	Percent
Homicide	26	<1	37	1
Rape	55	1	63	1
Robbery	321	3	193	4
Assault	318	3	465	10
Burglary	265	3	247	5
Larceny	549	6	303	7
Motor Vehicle Theft	320	3	249	5
Arson	8	<1	5	<1
Subtotal	1,862	19	1,562	34
Drugs	5,263	55	1,123	24
Part Two	2,521	26	1,903	41
*Total	9,646	100	4,588	99 +

\*Total data set for this analysis is 14,249 with 15 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

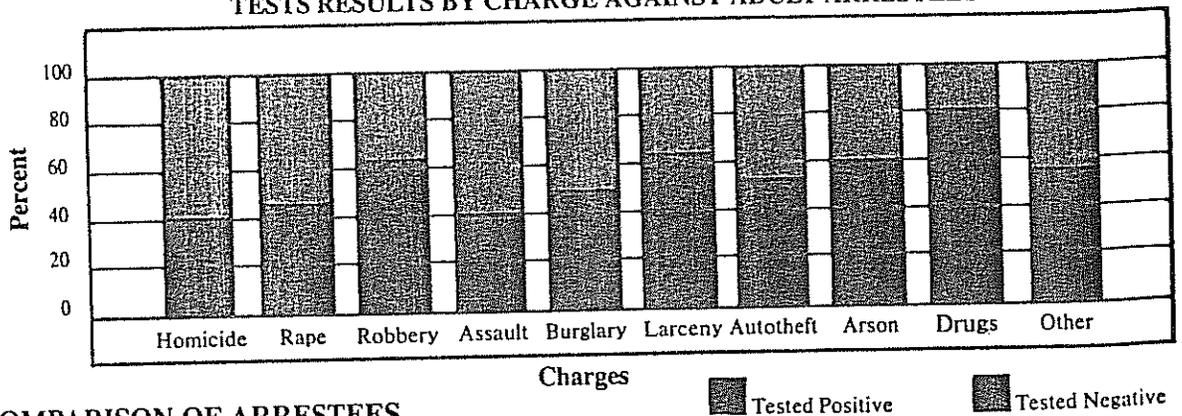
PREPARED BY: Office of Criminal Justice Plans and Analysis.

## CHARGES

Table 16 (Figure 9) presents charges by offense of the arrestees tested. Of those testing positive for drug use, 55 percent were charged with drug law violations; 7 percent were charged with a violent offense (homicide, rape, robbery, assault); and 12 percent were charged with a property offense (burglary, larceny, motor vehicle theft, arson). The re-

maining 26 percent were charged for Part Two offenses (primarily less serious crimes). Of those whose drug test results were negative, 24 percent were charged with drug law violations; 16 percent were charged with a violent offense; and 17 percent with a property crime. Forty-one percent were charged with a Part Two Offense.

FIGURE 9  
TESTS RESULTS BY CHARGE AGAINST ADULT ARRESTEES



## COMPARISON OF ARRESTEES TESTED FOR DRUG USE

An analysis of arrestees tested for drug use indicates both similarities and differences between arrestees whose drug test results were positive and arrestees whose drug test results were negative. Both groups were predominantly male and black. Arrestees testing negative for drug use were older (29 years) than those testing positive for drug use (27 years), and both groups reported an average of 11 years of education. Marital status between the two groups was similar: both groups were predominantly single with the arrestees testing negative slightly more likely to be married than the arrestees testing positive.

The most striking differences were found in the type of crimes for which these arrestees were charged. Arrestees testing positive for drug use were much more likely to be charged with a drug law violation (55 percent) than those arrestees testing negative (24 percent). Arrestees testing negative for drug use were more likely to be charged with a violent offense (16 percent) than were arrestees testing positive for drug use (7 percent).

Arrestees testing negative for drug use (10 percent) were more likely than arrestees testing positive for drug use (3 percent) to be arrested for assault. Examining property crime, we find that arrestees testing negative for drug use were also more likely to be charged with a property offense (17 percent) than were arrestees testing positive (12 percent).

These findings clearly demonstrate a strong link between drug use and drug possession and sales, with more than half of those found to be using drugs charged with drug law violations. The majority of persons charged with homicide, rape and assault were non-drug users, while the majority of arrestees charged with robbery, burglary and larceny were drug users. These findings go against the prevailing notion that arrestees using drugs are more likely to commit violent crimes. Instead, drug users tend to commit crimes where there is a monetary gain to support their drug habits.

# JUVENILE DRUG USE

In early 1986, concern about substance abuse among District of Columbia youths prompted the Alcohol and Drug Abuse Services Administration (ADASA) and the District of Columbia Public Schools to undertake a student survey to assess the prevalence of drug abuse among junior and senior high school students.

Nearly 3,000 students enrolled in the District's junior and senior high schools were surveyed regarding the use of illicit substances. Findings indicate that nearly 29 percent of the students reported using marijuana. Thirteen percent reported using PCP at some time in their life, and 7 percent reported using cocaine. The least frequently used illicit substance was heroin with only 2 percent of the students reporting heroin use.

The data revealed that the typical juvenile drug abuser in the District is a male senior high school student who first began drinking alcoholic beverages provided by his family at an early age. He is likely to have been initiated into marijuana use between the eighth and 10th grades, and he usually smokes marijuana at least one to two times per month. He has some reported use of PCP, primarily a monthly occurrence, minimal cocaine use, and little use of heroin or other drugs.

From October 20, 1986 to December 31, 1986, 1,217 juvenile arrestees were tested for drug use by Pretrial Services Agency. Of these 1,217, 95 failed to submit a test. For this reason, these 95 cases were not included in this analysis. Of the 1,122 remaining cases, 379, or 34 percent tested positive for drug use. Of those tested, 28 percent tested positive for PCP, 10 percent tested positive for marijuana, and 9 percent tested positive for cocaine. The remaining 1 percent tested positive for heroin use. Also, of those juvenile arrestees tested, approximately 24 percent tested positive for poly drug use.

## SEX

Table 17 shows the gender of juvenile arrestees tested for drug use. Of those testing positive, 93 percent were male and 7 percent were female. Of those testing negative, 95 percent were male and 5 percent were female.

TABLE 17  
GENDER OF JUVENILE ARRESTEES TESTED FOR DRUG USE  
BY NUMBER AND PERCENT

Gender	Number Testing Positive	Percent	Number Testing Negative	Percent
Male	353	93	702	95
Female	26	7	41	5
*Total	379	100	743	100

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

## RACE

Of the juvenile arrestees testing positive for drug use, 98 percent were black, 1 percent were white, and the remaining 1 percent were other. Ninety-seven percent of those testing negative were black, 1 percent were white and 2 percent were other (*Table 18*).

## AGE

*Table 19* presents the age of juveniles tested for drug use. Of those whose test results were positive, 50 percent were age 17, 24 percent were age 16, and 12 percent were age 15. About 7 percent were 14

years of age or younger. The remaining 7 percent were 18 years of age. The average age of juveniles testing positive for drug use was 16 years of age. Of those testing negative for drug use, 26 percent were 17, 25 percent were 16, and 23 percent were 15. Twenty-four percent were 14 years of age or younger. Three percent were 18 years of age. The average age of juveniles testing negative for drug use was 15 years of age (*Table 18*).

**TABLE 18**  
**RACE OF JUVENILE ARRESTEES TESTED FOR DRUG USE**  
**BY NUMBER AND PERCENT**

Race	Number Testing Positive	Percent	Number Testing Negative	Percent
Black	368	98	701	97
White	5	1	10	1
Other	3	1	11	2
*Total	376	100	722	100

\*Total data set for this analysis is 1,122 with 24 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

**TABLE 19**  
**AGE OF JUVENILE ARRESTEES TESTED FOR DRUG USE**  
**BY NUMBER AND PERCENT**

Age	Number Testing Positive	Percent	Number Testing Negative	Percent
11	0	0	8	1
12	0	0	26	4
13	1	≤1	45	6
14	27	7	97	13
15	45	12	167	23
16	89	24	182	25
17	189	50	188	26
18	26	7	22	3
*Total	377	100	735	100+

\*Total data set for this analysis is 1,122 with 10 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

## TYPE OF SCHOOL ATTENDED

Table 20 shows the type of school attended by juvenile arrestees tested for drug use. Of those testing positive for drug use, 86 percent attended public junior high school and public senior high school. Eight percent attended public career development, 4 percent attended public elementary and 1 percent attended private D.C. Schools.

Eighty-six percent of those testing negative for drug use attended public junior or senior high, and 10 percent attended public elementary school. Three percent attended public career development and 1 percent attended public special school. Less than 1 percent were enrolled in private school (Table 20).

TABLE 20  
TYPE OF SCHOOL ATTENDED BY JUVENILE ARRESTEES TESTED FOR DRUG USE  
BY NUMBER AND PERCENT

Type of School	Number Testing Positive	Percent	Number Testing Negative	Percent
Public Elementary	11	4	60	10
Public Junior High	126	43	297	50
Public Senior High	126	43	214	36
Public Special School	2	1	4	1
Public Career Development	23	8	19	3
Private D.C. School	3	1	2	≤1
*Total	291	100	596	100

\*Total data set for this analysis is 1,122 with 235 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

## EDUCATION

The grade of juvenile arrestees tested for drug use is presented in *Table 21*. Fifty-two percent of the juveniles testing positive for drug use were in grades 7 to 9, 42 percent were in grades 10 to 12, and the remaining 3 percent were in grades 1 to 6. The average grade of juveniles testing positive for drug use was the ninth grade.

Of the juveniles who tested negative for drug use, 56 percent were in grades 7 to 9, 34 percent were in grades 10 to 12, and the remaining 11 percent were in grades one to six. The average grade of juveniles testing negative for drug use was the ninth grade.

TABLE 21  
GRADE OF JUVENILE ARRESTEES TESTED FOR DRUG USE  
BY NUMBER AND PERCENT

Grade	Number Testing Positive	Percent	Number Testing Negative	Percent
1	0	0	0	0
2	0	0	0	0
3	3	1	4	1
4	1	≤1	3	1
5	1	≤1	16	3
6	6	2	37	6
7	33	12	79	14
8	38	20	94	16
9	55	20	150	26
10	55	14	85	15
11	57	21	72	13
12	20	7	33	6
*Total	269	99	573	100+

\*Total data set for this analysis is 1,122 with 280 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

## CHARGES

Table 22 (Figure 10) shows the charges by offense of juvenile arrestees tested for drug use. Of those testing positive for drug use, 63 percent were charged with a drug offense, 19 percent with a property crime, and 7 percent with a violent crime. The remaining 12 percent were charged with a Part Two offense.

Of the juveniles testing negative for drug use, 38 percent were charged with a drug offense, 33 percent were arrested for a property crime, and 17 percent were charged with a violent crime. The remaining 17 percent were arrested for Part Two crimes.

**TABLE 22**  
**CHARGE BY OFFENSE OF JUVENILE ARRESTEES TESTED FOR DRUG USE**  
**BY NUMBER AND PERCENT**

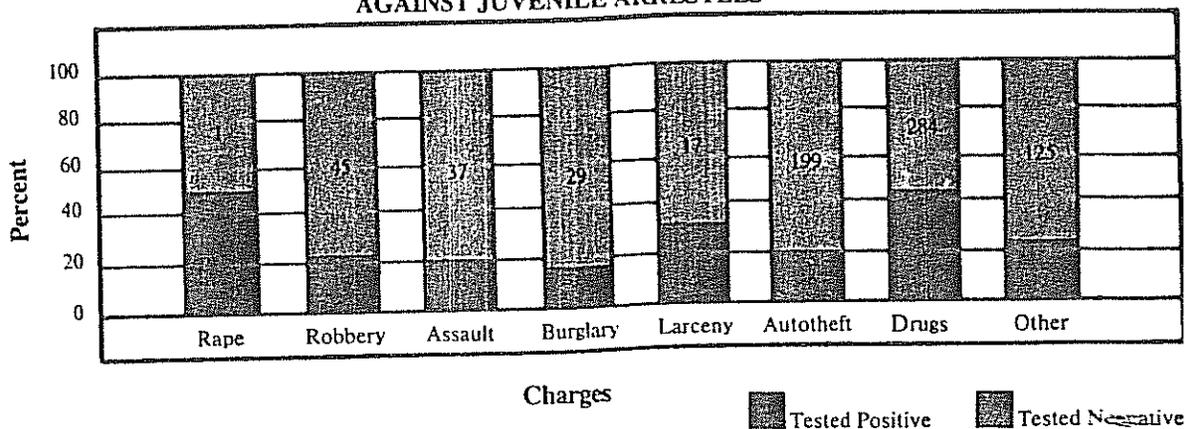
Charge	Number Testing Positive	Percent	Number Testing Negative	Percent
Homicide	0	0	0	0
Rape	1	<1	1	<1
Robbery	14	4	45	6
Assault	10	3	37	5
Burglary	6	2	29	4
Larceny	7	2	17	2
Motor Vehicle Theft	58	15	199	27
Arson	0	0	1	<1
Subtotal	96	25	329	45
Drugs	237	63	284	38
Part Two	45	12	125	17
*Total	378	100	738	100

\*Total data set for this analysis is 1,122 with 6 missing cases.

SOURCE: Pretrial Services Agency, April 1987.

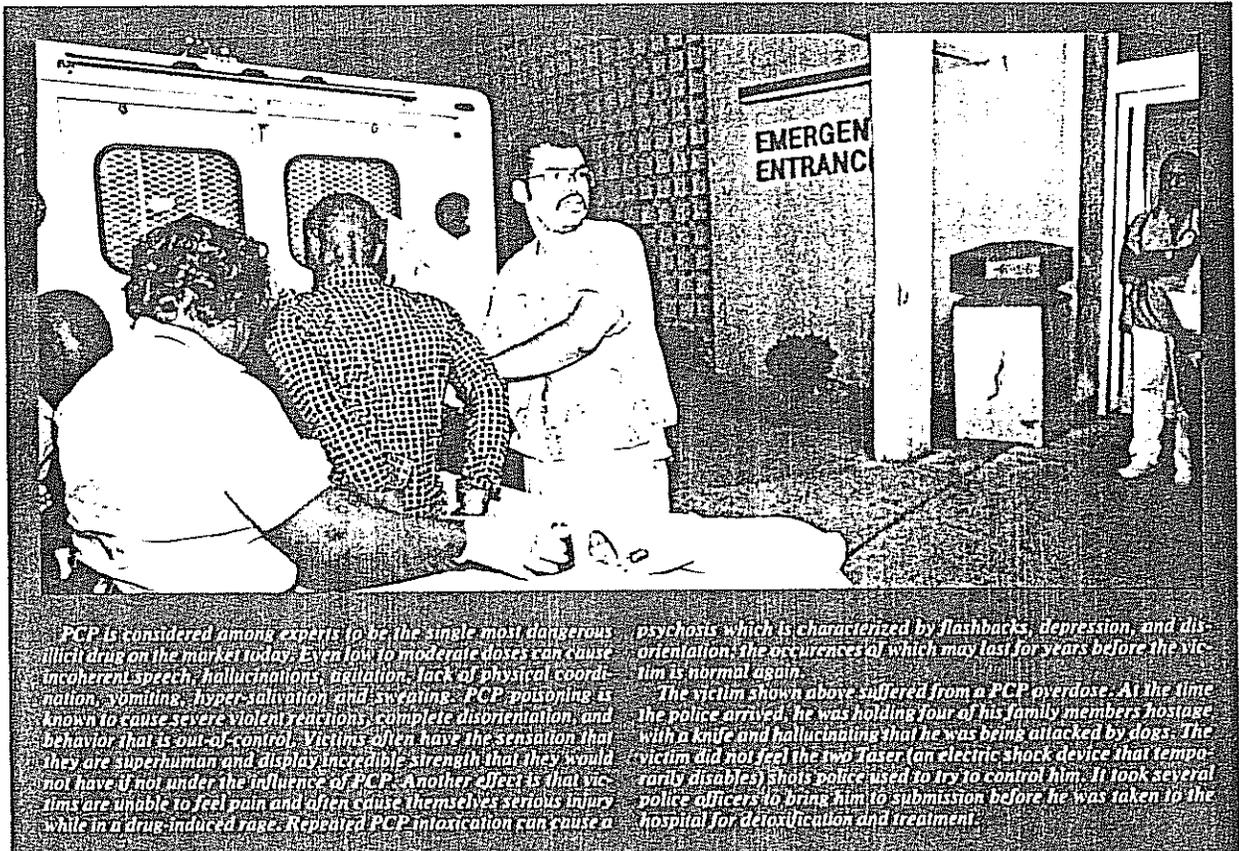
PREPARED BY: Office of Criminal Justice Plans and Analysis.

**FIGURE 10**  
**TEST RESULTS BY CHARGE**  
**AGAINST JUVENILE ARRESTEES**



## COMPARISON OF JUVENILE ARRESTEES TESTED FOR DRUG USE

The profile of juvenile arrestees tested for drug use shows some similarities and differences between those who tested positive and those who tested negative. Both groups were predominantly male and black. Arrestees testing negative for drug use were slightly younger (15 years of age) than those testing positive for drug use (16 years of age). Both groups were enrolled in public junior and senior high and both groups reported a mean grade of nine. Examining charges by offense, those arrestees testing positive for drug use were much more likely to be arrested for drug offenses (63 percent) than those testing negative for drug use (38 percent). Arrestees testing negative for drug use were more likely to be charged with a violent crime (11 percent) or a property crime (33 percent) than those testing positive for drug use (violent crime, 7 percent and property crime, 19 percent).



PCP is considered among experts to be the single most dangerous illicit drug on the market today. Even low to moderate doses can cause incoherent speech, hallucinations, agitation, lack of physical coordination, vomiting, hyper-salivation and sweating. PCP poisoning is known to cause severe violent reactions, complete disorientation, and behavior that is out-of-control. Victims often have the sensation that they are superhuman and display incredible strength that they would not have if not under the influence of PCP. Another effect is that victims are unable to feel pain and often cause themselves serious injury while in a drug-induced rage. Repeated PCP intoxication can cause a

psychosis which is characterized by flashbacks, depression, and disorientation; the occurrences of which may last for years before the victim is normal again.

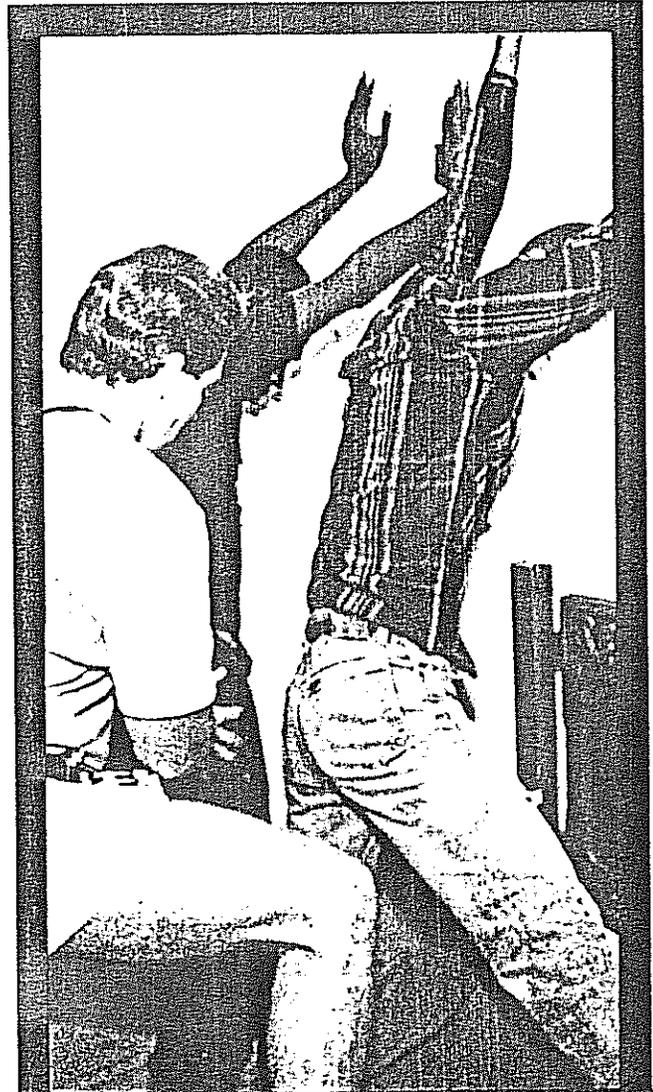
The victim shown above suffered from a PCP overdose. At the time the police arrived, he was holding four of his family members hostage with a knife and hallucinating that he was being attacked by dogs. The victim did not feel the two Taser (an electric shock device that temporarily disables) shots police used to try to control him. It took several police officers to bring him to submission before he was taken to the hospital for detoxification and treatment.

# PROFILE OF ARRESTEES WHO TESTED POSITIVE FOR HEROIN USE

Heroin is a synthetic narcotic that has been derived by modification of the chemical contained in opium. Pure heroin is a white powder with a bitter taste. Illicit heroin may vary in color from white to dark brown because of impurities left from the manufacturing process or the presence of additives such as food coloring, cocoa or brown sugar. Most street preparations of heroin are diluted, or "cut," with other substances such as sugar, starch, powdered milk and quinine. Heroin is usually dissolved in water and then injected, though it also can be sniffed or smoked. When heroin is injected, the user feels an immediate "rush." Other initial and unpleasant effects include restlessness, nausea and vomiting. Physical and psychological dependence is great because as more and more of the drug is used over time, larger amounts are needed to acquire the same effects.

The three competing sources of heroin supply to the United States are Mexico, Southeast Asia and Southwest Asia. Heroin use and trafficking patterns generally vary between different geographic regions of the United States and sometimes within a region as well. Overall trends in the northeastern United States have been influenced by the availability of Southwest Asia (SWA) and Southeast Asia (SEA) heroin. The primary suppliers of wholesale quantities of SWA heroin in the northeastern United States include not only traditional organized crime groups, but also Pakistanis, Lebanese, Nigerians and Turks. For example, law enforcement officials have determined that Nigerians have supplied SWA heroin to drug dealers in Washington, D.C.

The number of heroin addicts/users in the United States in 1981 was estimated at 490,000. Although no later estimates have been made, heroin hospital emergency room mentions in subsequent years suggest that the number of users increased between 1981 and 1983. Of the 9,657 arrestees in the District of Columbia who tested positive for drug use in 1986, 30 percent (2,918) tested positive for heroin or heroin in combination with other drugs. The following presents a profile of the heroin user in the District.



*Crack houses, like "shooting galleries" for intravenous drug users, are buildings where drug users gather to buy and use crack. They are usually abandoned apartment buildings or houses, some of which are organized operations that charge admission to enter. There are dozens of crack houses in the District and they are appearing more and more frequently.*

*The scene above is of a police raid on a crack house in the seventh police district. A warrant was served on this location, but most of the evidence had been smoked by the time the police arrived. One drug user jumped out of a two story window in an effort to escape apprehension; however, the raid did result in several arrests.*

Of the arrestees testing positive for heroin use, 75 percent were male and 25 percent female (*Table 23*). *Table 24* shows that 93 percent of the arrestees testing positive for heroin were black and 7 percent were white. Fifty-nine percent were between the ages of 26 and 35, while 24 percent were between the ages of 36 and 40. Fifteen percent were between the ages of 18 and 25, and 2 percent were 51 years of age or older (*Table 25*). The average of arrestees testing positive for heroin was 32 years.

**TABLE 23**  
**GENDER OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Gender	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
Male	2,183	75	4,585	80	4,969	89
Female	730	25	1,142	20	600	11
Total	2,913	100	5,727	100	5,569	100

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

**TABLE 24**  
**RACE OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Race	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
Black	2,698	93	5,426	95	5,393	97
White	205	7	265	5	165	3
Other	12	≤1	39	≤1	13	≤1
Total	2,915	100	5,730	100	5,571	100

SOURCE: Pretrial Services Agency, April 1987.

PREPARED BY: Office of Criminal Justice Plans and Analysis.

**TABLE 25**  
**AGE OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Age	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
18-21	122	4	1,081	19	1,942	35
22-25	334	11	1,213	21	1,595	29
26-30	840	29	1,473	26	1,273	23
31-35	878	30	1,081	19	466	8
36-40	446	15	525	9	204	4
41-45	173	6	204	4	44	1
46-50	75	3	96	2	20	≤1
51+	43	2	49	≤1	14	≤1
<b>Total</b>	<b>2,911</b>	<b>100</b>	<b>5,722</b>	<b>100</b>	<b>5,558</b>	<b>100</b>

**SOURCE:** Pretrial Services Agency, April 1987.

**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

Thirty-three percent of the arrestees testing positive for heroin use reported 12 years of education, 20 percent reported 11 years, and 16 percent reported 10 years of education. Fourteen percent reported seven to nine years of education and approximately 1 percent reported less than 7 years of education (Table 26). The average number of years of education for heroin users was 11 years.

Table 27 shows the marital status of arrestees who tested positive for heroin use. Fifty-eight percent were single, 15 percent were married, and 14 percent were separated. Six percent were common law marriages, while another 6 percent were divorced. One percent were widowed.

**TABLE 26**  
**YEARS OF EDUCATION OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Grade	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
1	0	0	2	≤1	1	≤1
2	3	≤1	2	≤1	1	≤1
3	4	≤1	5	≤1	6	≤1
4	1	≤1	3	≤1	3	≤1
5	4	≤1	9	≤1	22	≤1
6	21	1	27	1	104	≤1
7	35	1	67	1	256	2
8	107	4	203	4	517	5
9	232	9	440	9	894	10
10	402	16	831	16	1,241	17
11	500	20	1,049	20	1,707	24
12	839	33	1,784	34	409	33
13+	422	16	760	15	3	≤1
<b>Total</b>	<b>2,570</b>	<b>100</b>	<b>5,182</b>	<b>100</b>	<b>5,164</b>	<b>99+</b>

**SOURCE:** Pretrial Services Agency, April 1987.

**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

**TABLE 27**  
**MARITAL STATUS OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Marital Status	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
Single	1,690	58	4,082	71	4,643	83
Married	432	15	605	11	369	7
Common Law	162	6	217	4	110	2
Separated	415	14	535	9	296	5
Widowed	42	1	42	1	14	≤1
Divorced	174	6	249	4	139	2
<b>Total</b>	<b>2,915</b>	<b>100</b>	<b>5,730</b>	<b>100</b>	<b>5,571</b>	<b>99+</b>

**SOURCE:** Pretrial Services Agency, April 1987.

**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

As Table 28 shows, 58 percent of the arrestees who tested positive for heroin use were charged with a drug law violation. Only 5 percent were charged with a violent offense, while 14 percent were charged with a property offense. The remaining 24 percent were charged with Part Two crimes.

The above analysis suggests that the heroin user in the District is likely to be male, black, approximately 32 years of age and single. He has not completed high school and is most likely to be charged with a drug law violation and least likely to be charged with a violent crime.

Among the various types of drug users, heroin users are more likely to be female than cocaine or PCP users. A larger percentage of heroin users are white as compared to cocaine and PCP users. The heroin user tends to be older than the cocaine or the PCP user and he is the least likely to be charged with a violent crime. However, the heroin user is more likely to be charged with a property crime than either the PCP or cocaine user.

**TABLE 28**  
**CHARGES BY OFFENSE OF ADULT ARRESTEES TESTING POSITIVE FOR DRUG USE BY DRUG**

Part One Offense	Heroin		Cocaine		PCP	
	Number	Percent	Number	Percent	Number	Percent
Homicide	5	≤1	15	1	15	≤1
Rape	6	≤1	24	1	42	≤1
Robbery	80	3	158	3	227	4
Assault	46	2	152	3	211	4
Burglary	77	3	137	2	140	3
Larceny	249	9	319	6	255	5
Motor Vehicle Theft	65	2	160	3	221	4
Arson	2	≤1	3	≤1	5	≤1
<b>Subtotal</b>	<b>530</b>	<b>19</b>	<b>968</b>	<b>17</b>	<b>1,116</b>	<b>20</b>
Drugs	1,684	58	3,384	58	3,104	56
Part Two	700	24	1,416	25	1,351	24
<b>Total</b>	<b>2,914</b>	<b>100+</b>	<b>5,732</b>	<b>100+</b>	<b>5,571</b>	<b>100+</b>

**SOURCE:** Pretrial Services Agency, April 1987.

**PREPARED BY:** Office of Criminal Justice Plans and Analysis.

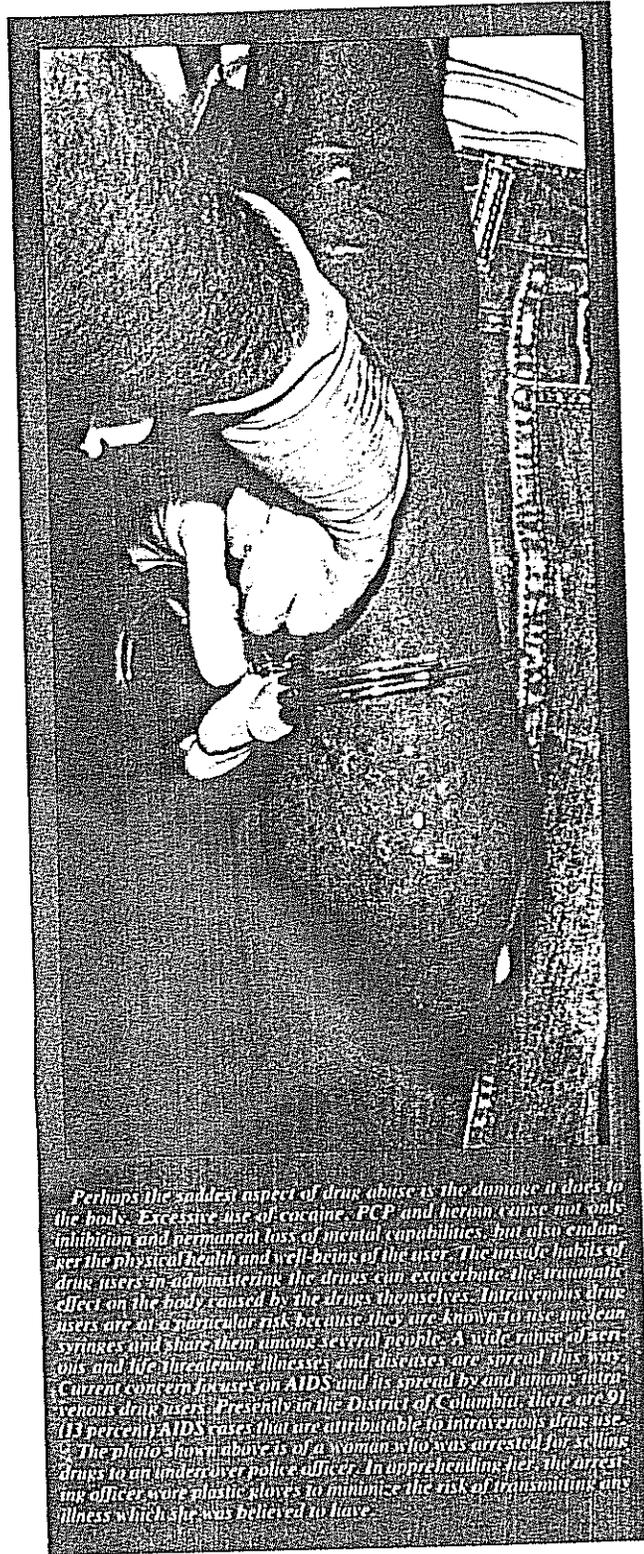
# PROFILE OF ARRESTEES WHO TESTED POSITIVE FOR COCAINE USE

Cocaine is a drug extracted from the leaves of the coca plant that grows in South America. Cocaine hydrochloride is the most available form of the drug and is used medically as a local anesthetic. It is usually a fine white crystal-like powder, although at times it comes in larger pieces, which on the street are called "rocks." Cocaine is usually sniffed or snorted into the nose, although some users inject it or smoke a form of the drug called freebase. When cocaine is "snorted," the effects begin within 15 to 20 minutes, and disappear within an hour. These effects include increased alertness, excitation, euphoria, increased pulse rate and blood pressure, insomnia and loss of appetite. Physical dependence is possible and psychological dependence is great because people who use cocaine repeatedly like its effects and want to avoid depression and fatigue they feel if they stop using the drug.

Cocaine smuggling to the United States is dominated by Columbian organizations. Florida is the principal point of entry, and in 1984, was the location of 94 percent of the cocaine seizures from all conveyances. The majority of the cocaine reaching the U.S. is shipped by general aviation and commercial aircraft. The wholesale trafficking of cocaine is dominated by Columbian organizations, although traffickers of Cuban and other nationalities have become more prominent, particularly in southern California, south Texas and New York.

Crack, a form of cocaine, looks like pieces of rock salt. The term crack refers to the crackling sound that is heard when it is smoked due to the sodium bicarbonate or other chemicals used in the process of making the drug. It differs from cocaine powder in three ways: (1) It is smoked rather than sniffed. This leads to a high that lasts less than 15 minutes. (2) Because it is smoked, its effect is much more powerful than powder. Crack goes directly from the lungs to the brain. (3) It seems less expensive because it is sold in small quantities at a low price. Three to four small rocks are sold in a vial for \$10 to \$20. It is ultimately more expensive because the user will use it more.

Crack is the most potent and toxic form of cocaine available and is 5 to 10 times as addictive as cocaine taken in other forms. Cocaine is generally 15 to 25 percent pure, while crack is often 90 percent pure.



Perhaps the saddest aspect of drug abuse is the damage it does to the body. Excessive use of cocaine, PCP and heroin cause not only inhibition and permanent loss of mental capabilities, but also endanger the physical health and well-being of the user. The unsafe habits of drug users in administering the drugs can exacerbate the traumatic effect on the body caused by the drugs themselves. Intravenous drug users are at a particular risk because they are known to use unclean syringes and share them among several people. A wide range of serious and life-threatening illnesses and diseases are spread this way. Current concern focuses on AIDS and its spread by and among intravenous drug users. Presently in the District of Columbia, there are 91 (13 percent) AIDS cases that are attributable to intravenous drug use. The photo shown above is of a woman who was arrested for selling drugs to an undercover police officer. In apprehending her, the arresting officer wore plastic gloves to minimize the risk of transmitting any illness which she was believed to have.

Crack is used by at least one million people in 25 states. Crack addicts now account for 75 to 80 percent of those seeking treatment in major cities such as New York, Los Angeles and Detroit. Most sellers and buyers are in their 20s and early 30s but more and more teenagers are becoming involved with crack.

The availability and use of cocaine is widespread. Use includes all socio-economic levels. Of the 9,657 arrestees in the District of Columbia who tested positive for drug use in 1986, 59 percent (5,741) tested positive for cocaine or cocaine in combination with other drugs. The following paragraphs present a profile of the cocaine user in the District.

Of the arrestees testing positive for cocaine use, 80 percent were male and 20 percent were female (Table 23). Ninety-five percent were black and 5 percent were white (Table 24). Sixty-six percent were between the ages of 22 and 35; 15 percent were between the ages of 36 and 50; and 19 percent were between the ages of 18-21. Less than 1 percent of the cocaine users were 51 years of age or older (Table 25). The average age of the cocaine user was 28 years.

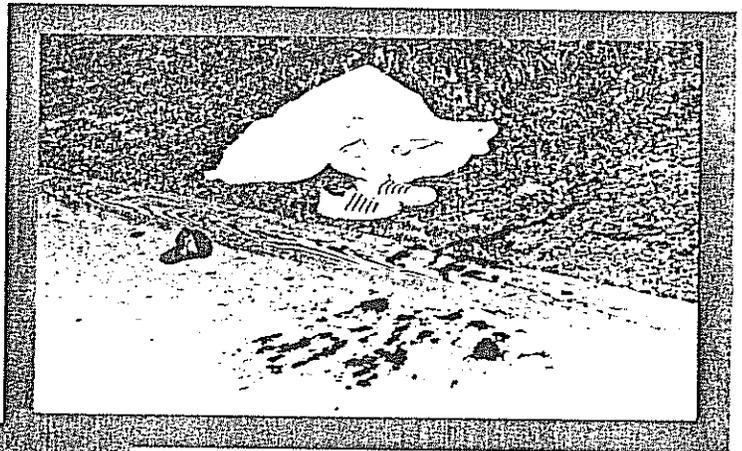
Thirty-four percent of those testing positive for cocaine use reported 12 years of education while 36 percent reported 10 or 11 years of education. Fifteen percent had 13 or more years of education, while 13 percent had eight to nine years. Approximately 2

percent reported less than 8 years of education (Table 26). The average number of years of education for the cocaine user was 11 years. Table 27 presents the marital status of the cocaine user. Seventy-one percent were single, 11 percent married, 9 percent separated, and 4 percent divorce. Four percent of the cocaine users had common law marriages, and 1 percent were widowed.

Charges by offense of those arrestees testing positive for cocaine are presented in Table 28. Fifty-eight percent were charged with a drug offense, 6 percent with a violent offense, and 11 percent with a property offense. Twenty-five percent were charged with a Part Two crime.

In summary, the data presented on arrestees testing positive for cocaine use suggest that the cocaine user in the District is male, black, and approximately 28 years of age. He has not graduated from high school and is most likely to be single. He is most often charged with drug offenses and least likely to be charged for a violent crime.

Cocaine users are more likely to be female than PCP users and are older than PCP and heroin users. The cocaine user is more likely to be single than the heroin user and is more likely than the heroin user to be charged with a violent offense.



Violence and bloodshed are an inherent part of the drug underworld. The 37 percent increase in homicides in the District last year was attributable to drug-related murders. Whether dealers are defending their sales territory or users are committing crimes to pay for their drug habit, violence is a daily part of the drug trafficking scene. The picture above shows the aftermath of a dispute between two women over the sale of some crack. A disagreement about \$40 ended with one man shooting the other in the chest. This scene illustrates how the obsession with drugs overshadows respect even for human life.

# PROFILE OF ARRESTEES WHO TESTED POSITIVE FOR PCP USE

PCP (*phencyclidine*) is most often called "angel dust." It was first developed as an anesthetic in the 1950s. However, it was taken off the market for human use because it sometimes caused hallucinations.

PCP is available in a number of forms. It can be a pure, white crystal-like powder, or a tablet or capsule. It can be swallowed, smoked, sniffed or injected. PCP is sometimes sprinkled on marijuana or parsley and smoked.

Although PCP is illegal, it is easily manufactured. It is often sold as mescaline, THC or other drugs. Sometimes it may not even be PCP, but a lethal by-product of the drug. Users can never be sure what they are buying since it is manufactured illegally.

It is unknown whether physical dependence occurs with repeated use of PCP. Physical effects include increased heart rate and blood pressure, flushing, sweating, dizziness and numbness. Other possible effects are illusions and hallucinations and poor perception of time and distance.

PCP currently dominates the illicit hallucinogen market in the United States as it has for the past nine years. The entire supply of PCP available to illicit users is produced in clandestine laboratories and is usually distributed by locally-oriented groups. PCP has become the drug of choice for an increasing number of urban youth. PCP availability and use has expanded significantly over the last several years in specific cities, notably Los Angeles, New York and Washington, D.C. Of the 9,657 arrestees who tested positive for drug use in the District in 1986, 58 percent (5,577) tested positive for PCP.

In the District, arrestees testing positive for PCP were 89 percent male and 11 percent female (*Table 23*). Ninety-seven percent were black and 3 percent were white (*Table 24*). Sixty-four percent of the PCP users were between the ages of 18 and 25 while 31 percent were between the ages of 26 and 35. Five percent were between the ages of 36 and 45, and less than 1 percent were between the ages of 46 and 51 + years (*Table 25*). The average age of the PCP user was 28 years.

*Table 26* shows the years of education of arrestees testing positive for PCP use. Fifty-seven percent reported 11 to 12 years of education, 17 percent reported 10 years, and 10 percent reported nine years of education. Eight percent had 13 or more years of education, 7 percent had seven to eight years, and less than 1 percent reported less than seven years of education. The average number of years of education of the PCP users was 11 years.

The marital status of arrestees testing positive for PCP is presented in *Table 27*. Eighty-three percent were single, 7 percent were married, 5 percent separated, 2 percent divorced, 2 percent common law, and less than 1 percent were widowed.

*Table 28* shows the charges by offense of the arrestees testing positive for PCP use. Fifty-six percent were charged with a drug law violation, 9 percent were charged with a violent offense, and 12 percent were charged with a property crime. Twenty-four percent were charged for Part Two crimes.

The data presented suggests that the adult arrestee found to be using PCP in the District is typically male, black and about 28 years of age. He is likely to be single and has not graduated from high school.

Among the various types of drug users, the PCP user is more likely to be male and younger than the cocaine or heroin user. He also is more likely to be single and more likely to be arrested for a violent offense than either cocaine or heroin users.

# TREATMENT APPROACHES

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## OVERVIEW

The goal of drug treatment programs is to help move the drug user from drug and alcohol dependence to self-sufficiency as quickly as possible. To achieve this goal, drug treatment programs usually offer counseling, treatment, outpatient and inpatient services, assessment and research, education and prevention information. The four prevailing treatment approaches for drug abuse are: (1) detoxification, (2) abstinence, (3) therapeutic communities, and (4) methadone maintenance.

## THERAPEUTIC COMMUNITY

Self-help is a major force in aiding people with problems that are not treated adequately by established service providers. An approach to the treatment of substance abuse that uses self-help principles is the therapeutic community.

A therapeutic community is an intensive treatment program that provides rehabilitation to persons with histories of drug abuse. Treatment methods include encounter groups and counseling sessions that focus on the areas of self-discipline, self-worth, self-awareness, respect for authority and acceptance of guidelines for problem areas. The length of treatment is from six to nine months, and when released from the community, participants are encouraged to seek further substance abuse treatment.

Therapeutic communities have been effective in rehabilitating substance abusers. Using psychological principles and self-help philosophy, persons in therapeutic communities are better able to understand their problems and approaches to solve them.

## DETOXIFICATION

Detoxification as a treatment modality for substance abuse requires a supervised period of withdrawal in which the illicit substance is eliminated from the body. Detoxification is a gradual process; it can take 72 hours or several months to rid the body of the illicit substance.

Detoxification programs are usually voluntary and are often the first step in the treatment of alcoholics and drug addicts. To be admitted to a detoxification unit, the level of alcohol and/or drugs in the blood must be above 0.1 percent. Once a person has been detoxified, he is usually referred to an outpatient clinic for psychiatric or psychological treatment or to an abstinence program.

Success rates for detoxification programs are difficult to assess. Detoxification programs are effective in eliminating the substance from the body. However, whether or not the person remains drug free depends on the type of aftercare or follow-up program in which he becomes involved.

## ABSTINENCE

The treatment method used by abstinence programs is to not use the substance causing the addiction. Abstinence programs view addiction as a disease. In order for abstinence programs to work, a person must take responsibility for his condition, his everyday life and his destiny. This is usually accomplished by a self-help process with the support of a group of persons experiencing similar problems with addiction. Two of the best known abstinence programs in the United States are Alcoholics Anonymous (AA) and Narcotics Anonymous (NA). Both groups are programs of complete abstinence from all drugs and alcohol. The only requirement for membership in these programs is the honest desire to stop using the substance. In the last 40 years, more than one million people have recovered in AA programs.

Success rates for abstinence programs are generally difficult to measure. Most programs base their success rate on the number of clients who successfully complete the program. However, successful completion does not guarantee that a client will remain drug free or alcohol free.

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## METHADONE MAINTENANCE

Methadone maintenance is a treatment modality used for the treatment of heroin addicts. The heroin addict is switched from heroin to an approximately equivalent amount of oral methadone. Methadone works by blocking the desire for heroin without producing the same narcotic high. The goal of methadone maintenance is abstinence from all mind-altering drugs except methadone.

Only those addicts who volunteer for methadone maintenance are accepted to most programs. The desire to stop using heroin must be great enough for the patient to return to the clinic for the daily dosage of methadone.

Methadone maintenance removes the addict from a dependence upon injecting himself many times a day with unsterile materials, and since it has proven effective in reducing daily heroin use, it substantially reduces criminality among heroin abusers. Although complete abstinence from narcotics is an optimal goal, many addicts cannot remain abstinent permanently. For these, a controlled addiction to methadone is preferable to an uncontrolled addiction to heroin.

The major disadvantages of methadone maintenance programs are that the patient remains addicted to a narcotic, and he may have to remain on methadone permanently.

Another drug used to treat heroin addicts is naltrexone. Naltrexone, marketed as trexan, is a synthetic long-acting opioid antagonist or blocking agent. If an addict takes naltrexone and then takes heroin, he will feel no effect regardless of how large a dose of heroin he takes. Naltrexone has no effect on the mind or other functionings of the patient, and it is non-addicting, which allows the person to experience no effects when the drug is discontinued. Although naltrexone enables the addict to continue his work or his career, the addict still has to work on changing his life style and his personality problems that were at one time masked by the use of narcotics.

Success rates for methadone maintenance, as a treatment modality for heroin abusers, generally range from 5 percent to 15 percent. The percentage of heroin addicts that drop out during the first year of methadone maintenance is relatively large, at 40 percent. This substantial drop out percentage contributes to the low success rate of methadone maintenance treatment.

# CONCLUSIONS

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Findings from this study indicate that illicit drug use has reached epidemic proportions in the District. Narcotic overdose deaths in the District increased 48 percent in the last five years while cocaine emergency room mentions increased 293 percent and PCP mentions increased 445 percent. From 1982 to 1986, felony drug arrests rose 177 percent, felony drug prosecutions rose 509 percent, and felony drug convictions rose 559 percent.

In 1986, approximately 68 percent of the adult arrestees tested for drug use tested positive for one or more drugs. The percentage of adult arrestees testing positive for cocaine has more than doubled from 1984 to 1986, while the percentage testing positive for PCP has increased from 32 percent in 1984 to 39 percent in 1986.

The District is not alone in its drug abuse problem. Across the nation, drug abuse is increasing at alarming rates, causing the federal government to react with national programs designed to increase law enforcement, prevention and treatment efforts.

The District's response to the growing drug problem has been dramatic. Special law enforcement programs launched by the Metropolitan Police Department (MPD), such as Operation Clean Sweep and the Narcotics Task Force, have resulted in the District having more drug arrests per capita than any city of comparable size and demographics. New programs are being implemented that focus on seizing the automobiles and other assets of drug dealers to help eliminate some of the financial incentives. The Diversion Investigative Unit curtails and prevents the diversion of legitimate drugs from the retail level of the drug industry in the District. The Major Drug Dealers Reward Program offers rewards of up to \$25,000 to citizens who provide information leading to the arrest and conviction of major drug dealers. MPD has also expanded drug awareness and education programs targeted at youth.

The District, through its Pretrial Services Agency (PSA), operates the most advanced drug urinalysis testing program in the nation. Information about an arrestee's drug use is routinely provided to judges for use in determining pretrial release conditions and in identifying treatment needs.

The District's Alcohol and Drug Abuse Services Administration (ADASA) has expanded its programs by providing a wide range of services from in-patient detoxification and treatment to an array of out-patient abstinence and prevention programs for all segments of the District's population.

To break the vicious cycle of recidivism contributed to by drug use, the District's Department of Corrections is constructing a drug treatment facility for inmates. The Board of Parole will also soon implement plans to expand drug counseling efforts for parolees.

An increasing number of community organizations and groups have dedicated their efforts to combatting the problems associated with drug use in their neighborhoods. The efforts of the District's agencies and community organizations are many and include every type of approach to deal with adults and juveniles; crime, drug and delinquency prevention; treatment, education and rehabilitation. In spite of these efforts, drug abuse will not be eradicated from our community until we adopt value systems that place a greater emphasis on our physical, mental and spiritual well-being and less emphasis on self-indulgence and material gain. This is the true challenge of all our efforts.

# APPENDIX

## DRUG INFORMATION TELEPHONE NUMBERS

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### DISTRICT OF COLUMBIA NUMBERS

Overdose Emergencies  
911

To Report Drug Dealers/Drug Sales Sites  
(Drug Dealers Reward Program):  
202-393-2222

For General Information About  
Police Drug Enforcement Activities:

Narcotics Branch  
202-727-4423 or 202-727-4426

PCP Detoxification Treatment:  
202-675-7448

Heroin-Cocaine Detoxification Treatment:  
202-373-7754

Narcotics Anonymous:  
202-338-7989

### NATIONAL TOLL FREE NUMBERS

The National Federation of Parents for Drug-Free Youth:  
1-800-554-KIDS

PRIDE Drug Information Line:  
1-800-241-9746

National Institute on Drug Abuse:  
1-800-638-2045

National Institute on Drug Abuse Hotline:  
1-800-622-HELP

Cocaine Helpline:  
1-800-COCAINE

# TREATMENT SERVICES IN THE DISTRICT OF COLUMBIA

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## OUTPATIENT SUBSTANCE ABUSE TREATMENT SERVICES

	Phone Number
Comprehensive Abstinence Program	727-0668
Adams Mill Alcohol Center	673-6618
Day Alcohol Program	673-6618
Andromeda Outpatient Abstinence Program for Hispanics	667-6766
Bureau of Rehabilitation Treatment Program	842-7027
Capitol East Addiction Services for Encouraging Development	727-0620
Concerned Citizens for Alcohol Abuse, Inc.	656-1545
Model Treatment Clinic	727-0664
Moving Addicts Towards Self-Sufficiency	727-0868
Services Helping Addicts Come Klean	727-0483
Treatment and Rehabilitation of Addicts in Need	727-3920
Women Services Clinic	727-5166
Youth Abstinence Clinic	673-6618

## INPATIENT/RESIDENTIAL SUBSTANCE ABUSE

	Phone Number
ADERO House Youth Residential Treatment Program	373-7731
Alcoholism Inpatient Detoxification Center	727-5163
Comprehensive Alcohol and Drug Abuse Center	373-7754
Heroin-Cocaine Detoxification Unit	727-5163
Mary E. Herring Residential Home	576-6637
Karrick Hall Residential Treatment Program	727-5770
PCP Detoxification Unit	675-7448
RAP Residential Treatment Program	462-7500
Second Genesis	656-1545
Youth Comprehensive Abstinence Program	725-3600 Ext.368

## PREVENTION/INTERVENTION SERVICES

	Phone Number
Community Research, Inc.	581-0449
Super Teams Program	659-1080
Parklands Community Center	457-2207
Pettson Community Program	561-4500
Living Stage	234-5782
Unfoldment, Inc. Drug Prevention Program	561-2992

