



National Institute of Justice

Research Preview

Jeremy Travis, Director

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Drug Treatment Needs Among Adult Arrestees in Baltimore

*A Summary of a Research Presentation by Eric D. Wish, Ph.D.,
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Preliminary research results estimate that more than 19,000 of the approximately 41,000 adults arrested in Baltimore from October 1994 to September 1995 were dependent on—and, therefore, needed treatment for—one or more drugs. Between 12,000 and 14,000 of these arrestees were addicted to heroin. The State of Maryland funds 5,000 treatment slots in Baltimore, only half of which offer methadone maintenance treatment addressing heroin abuse. Further, only 200 slots provide for inpatient treatment, which permits the lengthy detoxification in a residential setting that is needed by many with chronic drug-dependence problems. Baltimore's treatment options parallel those available in comparable cities. Their inadequacy is more glaring when one takes into consideration not only addicted arrestees, but also drug-dependent persons on parole and probation, inmates in prisons or jails, and drug abusers in the general population, all of whom are not included in these estimates.

The Baltimore study is one of a series being conducted by the Center for Substance Abuse Research (CESAR) and the Maryland Alcohol and Drug Abuse Administration (ADAA) to determine the need for substance abuse treatment among various segments of the Maryland population. Similar studies have been funded in all States by the Federal Center for Substance Abuse Treatment (CSAT). The research on Baltimore arrestees demonstrates that, with large numbers of arrestees passing through booking facilities daily, the criminal justice system is well positioned to identify drug dependency and other public health problems and to direct those in need to medical treatment and behavior modification programs.

Methodology

CESAR staff developed the SANTA (Substance Abuse Need for Treatment Among Arrestees) methodology, based on the methods used in the National Institute of Justice's Drug Use Forecasting (DUF) program. Trained researchers interviewed random samples of (1) adult male arrestees in each of the nine booking facilities in Baltimore, and (2) female arrestees in the Central District booking facility, where all arrested women are processed. Each arrestee was asked to participate in a 20- to 40-minute anonymous and confidential interview conducted using the AutoSANTA instrument, a computerized interview that included:

- The core DUF interview (measuring demographic data, drug use, and injection and AIDS risk behaviors).
- The DUF heroin addendum.
- A module of questions comprising the CSAT protocol consisting of a modified version of the internationally recognized Diagnostic Interview Schedule (DIS) to assess each arrestee for dependence on alcohol and five classes of other drugs: cocaine, opiates, marijuana, hallucinogens, and amphetamines.
- Additional questions on living situation, use of firearms, and criminal history.

Urine specimens and, where possible, samples of scalp hair, were collected at the completion of each interview. Urine specimens were sent to a National Institute on Drug Abuse certified laboratory for analysis for 10 drugs plus alcohol; urines were also tested for HIV status. Hair samples were analyzed for five drugs.

Findings

More than 90 percent of arrestees who were approached agreed to be interviewed. Over 80 percent of those interviewed provided urine or hair specimens. All data on the 1,190 arrestees (755 males and 435 females) who were interviewed were weighted by age, ethnicity, charge, and district of arrest to reflect the population of approximately 41,000 adults arrested in Baltimore during the 12-month period. Laboratory test results for the 990 arrestees tested revealed the following:

- Sixty-nine percent of male and 75 percent of female arrestees tested positive by urinalysis for at least one drug—most frequently, cocaine, which was detected in 54 percent of males and 65 percent of females.
- Heroin and other opiates were detected in 40 percent of males and 46 percent of females, while marijuana was detected in 20 percent of males and 9 percent of females.
- Nearly 11 percent of males and nearly 12 percent of females tested positive for HIV, representing an estimated 4,500 arrestees in a year.

Although cocaine was the drug most frequently detected in arrestees, heroin was the substance on which a large number of arrestees were assessed as being dependent. Assessment results from the interview indicate:

- Forty-three percent of male and 59 percent of female arrestees interviewed were assessed as being dependent on alcohol or another drug.
- More than 19,000 of the persons arrested in Baltimore during the 12-month period were estimated to be dependent on (and therefore to need treatment for) one or more drugs, including alcohol. Between 12,000 and 14,000 of these addicts were dependent on heroin.

A common misconception is that only large cities have major drug-dependency problems. The Baltimore SANTA project included in its research a pilot study of rural Hagerstown, Maryland. Although the study found no opiate- and fewer cocaine-positives than in the Baltimore sample, 55 percent of Hagerstown male arrestees (versus 43 percent in Baltimore) were found to be dependent on a drug, most often alcohol.

Implications

Forty-four States are conducting studies similar to the Maryland SANTA study, and the majority are using the AutoSANTA protocol. CESAR believes that the results from the Baltimore SANTA study will be of assistance to planners of national projects being developed to identify drug users in the criminal justice system, get them into treatment, and get them off drugs. Booking facilities represent an extraordinary vehicle for reaching and addressing a significant population of persons with drug abuse and other public health problems, such as HIV and tuberculosis.

While the percentage of arrestees in Baltimore who tested positive for drug use by urinalysis is similar to that found in other large cities, the percentage who tested positive for opiates is higher than in any city that has recently tested its arrestee population. This finding is consistent with data from the national Drug Abuse Warning Network (DAWN) indicating that the rate of heroin-related emergency room incidents in Baltimore is among the highest in the United States.

Although urine testing and sanctions may be sufficient for young drug abusers, individuals entrenched in a lifestyle that includes heavy heroin and cocaine use may require residence in a more traditional therapeutic community and methadone maintenance, combined with other efforts. Funding is needed for additional research to determine the type, duration, and methods of treatment most appropriate for persons with longstanding addictions to specific kinds of drugs.

As part of NIJ's Research in Progress Seminar Series, Eric D. Wish, Ph.D., discussed the work summarized in this document with an audience of researchers and criminal justice professionals and practitioners. Dr. Wish is Director of the Center for Substance Abuse Research at the University of Maryland.

A 60-minute VHS videotape, *Dependence and Drug Treatment Needs Among Adult Arrestees*, is available for \$19 (\$24 in Canada and other foreign countries). Please ask for NCJ 163058. Use the order form on the next page to obtain this videotape and any of the other tapes now available in the series.

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