

Fourth Edition

Drugs, Society, *and* Criminal Justice

Charles F. Levinthal



FOURTH EDITION

Drugs, Society, and Criminal Justice

CHARLES F. LEVINTHAL

Hofstra University

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For my wife, Beth,

Our sons, David and Brian,
Daughters-in-law, Sarah and Karen,
and
Grandchildren all

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PREFACE

Drugs, Society, and Criminal Justice, Fourth Edition, has been specifically designed to provide the means for understanding (1) the multiple challenges that drug abuse brings to our society, (2) the drug-control policies we have enacted to meet those challenges, (3) the range of international and domestic law enforcement efforts that provide the implementation of our present-day drug-control strategy, and (4) the systems of criminal justice that have been established to deal with the prosecution and adjudication of drug-law offenders. In short, here is an introduction to the major facts and issues concerning criminal justice and drug-taking behavior in America today.

A comprehensive understanding of the relationship between drug use and the American criminal justice system requires recognition of the enormous diversity that exists among drugs that affect the mind and the body. Accordingly, the chapters in this book are not only about “street drugs” such as cocaine, amphetamines, heroin, hallucinogens, and (in most U.S. states) marijuana but also about legally available drugs such as alcohol and nicotine. Special attention has been paid to anabolic steroids and other performance-enhancing drugs, as well as the abuse of specific prescription medications.

What’s New in the Fourth Edition?

- A redesign of the chapters in *Drugs, Society, and Criminal Justice*, Fourth Edition, provides a greater focus on the connection between drug-taking behavior and the criminal justice system. The new five-part organization of chapters reflects the emphasis on criminal justice in the context of drug use and abuse. Part One (Chapter 1–4) reviews the domestic and international challenges that drug abuse brings to American society, the history of national drug-control policy, and the fundamental principles of drug-taking behavior that can lead to drug abuse. Part Two (Chapter 5–8) addresses the problems of drug abuse specifically in the context of criminal behavior, law enforcement, courts, and correctional systems. Part Three (Chapter 9–14) reviews the issues of criminal justice that relate to illicit (illegal) drugs, while Part Four (Chapter 15–16) reviews the issues of regulatory policy for licit (legal) drugs such as alcohol and nicotine. Part Five (Chapter 17) deals with the impact of national drug-control policy on prevention and treatment.
- **New and expanded coverage of drugs and drug abuse** in this edition reflects the attention given to continual changes in drug-taking behavior in America. Most recently, heroin abuse has become a serious and highly visible drug-abuse issue (Chapter 9), as has the proliferation of synthetic formulations of drugs with essentially unknown and sometimes toxic ingredients, putting unwary drug users at risk (Chapters 11 and 12). The newest information about the neurochemical basis for drug abuse is reviewed in Chapter 4.
- **New and expanded coverage of the criminal justice response** in this edition reflects the attention given to drug-related crime, law enforcement, courts, and correctional systems. An important focus of concern is the increasingly sophisticated system of global illicit drug trafficking in today’s world. New topics include the unending challenges brought by the influx of illicit drugs across the U.S.-Mexico border, and the destabilizing impact of narcoterrorist organizations in Afghanistan and Colombia as well as transnational narcoterrorist organizations operating across international borders (Chapter 2). Closer to home, new topics include law-enforcement challenges with respect to drug-related street gang activity and money laundering (Chapter 6) and the prosecution and prevention of drug-facilitated sexual assaults (Chapter 14). There is updated coverage of various areas of jurisdictional conflict between the federal government and individual U.S. states with regard to medical marijuana, marijuana decriminalization, and (in the case of four U.S. states) marijuana legalization (Chapter 12).
- **Drug Enforcement ... in Focus** is a new feature in this edition, emphasizing the important role that domestic and international law enforcement agencies play in the implementation of drug-control policies. Examples include: *Dealing with High-Tech Dealing: Policing the “Dark Web”* (Chapter 1), *Massive Cross-Border Drug Tunnel Detected (Again)* (Chapter 2), *The Drug Enforcement Administration Today* (Chapter 3), *The New Money Laundering: Digital Currency Exchanges* (Chapter 6), *The Anatomy of a Reverse Sting Operation* (Chapter 7), *Specialty Courts in Today’s Criminal Justice System* (Chapter 8), and *North Korea: A New Player in Methamphetamine Trafficking* (Chapter 10).
- **Numbers Talk** is a new feature in this edition, positioned at the beginning of each chapter, providing an often surprising insight into aspects of current patterns of drug-taking behavior. Short listings of thought-provoking “numerics” summarize specific facts about drug use and abuse. They serve to draw the reader into the chapter and help to set the stage for further exploration.
- **New Drugs ... in Focus** features in this edition include: *Life and Death in Mexico: Don Garza Tamez and a Man Called Z-40* (Chapter 2), *Sarin and Chemical Warfare*:

Neurotoxicity on the Battlefield (Chapter 2), *Conditioned Tolerance in Alcoholic Beverages: The Four-Loko Effect* (Chapter 4), *The Heroin Surge and Narcan for First-Responders* (Chapter 9), *Growing Hemp in America: Coming Full Circle* (Chapter 12), *The Neurochemical “Yin and Yang” of Cannabis* (Chapter 12), and *ADHD/ADD Exemption Requirements for the Use of Adderall in Sports* (Chapter 13).

- New **Portrait** features in this edition include: *Mithridates VI of Pontis—Drug Tolerance and the Story of the Poison King* (Chapter 4), *Commissioner William J. Bratton—New York’s Top Cop Second Time Around* (Chapter 7), *State Senator John Dunne—Drug Warrior/Drug-War Reformer* (Chapter 8), *Commissioner Harry J. Anslinger—From Devil Rum to Devil Weed* (Chapter 12), *Lance Armstrong—From Honor to Dishonor* (Chapter 13), and *Meeting the Challenge—The Long Island Council on Alcoholism and Drug Dependence* (Chapter 17). Each portrait puts a human face on the discussion of drugs, society, and criminal justice. They remind us that we are dealing with issues that affect real people in all walks of life, now and in the past.
- Enhanced pedagogical features of this edition include an expanded set of **Quick Concept Checks**, embedded in the chapters, providing opportunity to test oneself on basic concepts in the text. Two new features are **Review Questions** and an assignment called **Critical Thinking: What Would You Do?** at the end of each chapter. They provide the means for summarizing your knowledge about facts in the chapter and re-examining the information in the text through the application to a real-world situation. **Running Glossaries** and **Pronunciation Guides** are helpful to see the definition of terms in the immediate context of the material and to have difficult-to-pronounce terms spelled out phonetically.
- On a personal level, **Help Line** features provide important facts that can be used to recognize the specific signs of drug misuse or abuse, effective ways to respond in drug-related emergency situations, and guidance concerning circumstances that may present some degree of personal harm. At the end of each Help Line, there is a Web site that provides further assistance. Examples include: *The Possibility of a Drug–Drug or Food–Drug Combination* (Chapter 4), *Emergency Guidelines for a Bad Trip on LSD* (Chapter 11), *Emergency Signs and Procedures in Acute Alcohol Intoxication* (Chapter 15), and *Signs of Trouble from Smokeless Tobacco* (Chapter 16).

An Invitation to Readers

I welcome your reactions to *Drugs, Society, and Criminal Justice*, Fourth Edition. Please send any comments or questions to the following e-mail address: charles.f.levinthal@hofstra.edu. I hope to hear from you.

Instructor Supplements

Instructor’s Manual with Test Bank Includes content outlines for classroom discussion, teaching suggestions, and answers to selected end-of-chapter questions from the text. This also contains a Word document version of the test bank.

TestGen This computerized test generation system gives you maximum flexibility in creating and administering tests on paper, electronically, or online. It provides state-of-the-art features for viewing and editing test bank questions, dragging a selected question into a test you are creating, and printing sleek, formatted tests in a variety of layouts. Select test items from test banks included with TestGen for quick test creation, or write your own questions from scratch. TestGen’s random generator provides the option to display different text or calculated number values each time questions are used.

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Charles F. Levinthal

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PART ONE

The Challenge of Drugs in Our Society

chapter 1

Understanding the Drug Problem in America

Mike was 17, a high school junior—an age when life can be both terrific and terrifying. He looked at me with amazement, telling me by his expression that either the question I was asking him was ridiculous or the answer was obvious. “Why do kids do drugs?” I had asked.

“It’s cool,” he said. “That’s why. Believe me, it’s important to be cool. Besides, in my life, drugs just make me feel better. Smoking a little weed, mellowing out with some Perks or a little Vicodin, spinning with Molly—it’s a way of getting away from ‘stuff.’ And you know that everybody does it. At least all of my friends do it. It’s easy to get them. All you need to know is where to go. You folks think I’m getting all this stuff from some dirty old man on a street corner. You would be amazed to know where I am getting it.”

I asked Mike whether he ever thought about his future. “Yeah, once in a while,” he said, “but not all that often. After all, I’m seventeen.”

I knew the meeting was over. But as he started to leave, Mike seemed to notice a look of concern on my face. “Don’t worry about me,” he said. “I can handle it. I can handle it just fine. It’ll all work out.”

After you have completed this chapter, you should have an understanding of the following:

- Basic terminology concerning drugs and drug-taking behavior
- The nature of drug toxicity
- The DAWN statistics as a measure of acute drug toxicity
- Judging drug toxicity from drug-related deaths
- Prevalence rates of illicit and licit drug use in the United States
- Problems associated with new drugs and new drug formulations

There is no question that we live in a world where drugs are all around us. Thousands of Internet Web sites offering information (and sometimes misinformation) about drug use are just a click away. We are continually bombarded with news about drug-related arrests of major drug traffickers and ordinary citizens, news about people in the world of sports and entertainment who experience and often suffer the consequences of drug-taking behavior, news about drugs intercepted and confiscated at our borders, as well as widespread drug use in major cities and small towns of America.

It also seems impossible to avoid the problems of drugs in our personal lives. One in five adults in the United States reports that drugs have been a cause of trouble in his or her family. At a time when the economy and related matters are the main focus of our concerns about the present and the future, about two out of three Americans continue to worry about drug use either a fair amount of time or a great deal. In school, you have been taught the risks involved in drug use, and most of you have contended with the social pressure to engage in drug-taking behavior with your friends. You may or may not have been successful in doing so. You may have noticed your local pharmacy looking like a bank, with the installation of panic alarms, bulletproof glass, and security cameras as pharmacists turn to protecting themselves from people robbing them for their supplies of oxycodone and other prescription pain medications. A range of societal and personal problems surrounding drug use present a continuing challenge to our public health and public safety.¹

Three central facts should be kept in mind as we begin an exploration of issues surrounding drug use and abuse in our society today.

First of all, we need to recognize that the challenges we face with respect to drug-taking behavior extend beyond

illegal drugs such as cocaine, methamphetamine, heroin, LSD and other hallucinogens, and (except for certain U.S. states) marijuana. Certainly, these “street” drugs continue to wreak havoc on lives and communities throughout America and more than 22,000 American lives are lost each year as a consequence, but there are 25 *times* more deaths each year as a result of the effects of *legal* drugs such as nicotine and alcohol. Issues with respect to these particular drugs will be examined in Chapters 15 and 16.

Second, we need to recognize the magnitude of the impact that drug-taking behavior has on our society. As a nation, we have designed a system of criminal justice with respect to illegal drugs and a regulatory system with respect to legal drugs, but despite our efforts, we continue to pay a heavy price. The direct and indirect monetary costs of drug-taking behavior in our society are enormous, amounting to



An accused drug-law violator is led away by an agent of the Drug Enforcement Administration (DEA) on an otherwise quiet, residential street in Billings, Montana.

Numbers Talk...

439,000,000	The number of results that come up on searching the word “drug” on the Google® search engine. Search time elapsed: approximately one-third of a second.
784	Number of armed robberies of pharmacies in the United States in 2012, with 104 being committed in Indiana alone.
53,300	On an average day in 2013, the approximate number of U.S. adolescents, aged 12–17 years old, who had binged on alcohol.
34	Percentage of approximately 2.5 million drug-related emergency department visits in the United States in 2011 that were due to the nonmedical use of prescription or nonprescription drugs alone.

Sources: Armed robbery pharmacy incident data, courtesy of the Drug Enforcement Administration, U.S. Department of Justice, September 2013. Information from the Google® search engine, April 7, 2015. Center for Behavioral Health Statistics and Quality (2013). *Drug Abuse Warning Network, 2011: National estimates of drug-related emergency department visits*. Rockville, MD: Substance Abuse and Mental Health Services Administration. Center for Behavioral Health Statistics and Quality (2014, September 4). Results from The 2011 National Survey on Drug Use and Health: Detailed Tables. The 2013 National Survey on Drug Use and Health: Overview of findings. *The NSDUH Report*. Rockville, MD: Substance Abuse and Mental Health Services Administration.

hundreds of billions of dollars each year.² These costs are traditionally classified in four major areas:

- Economic costs of lost workplace productivity due to absenteeism, industrial accidents, and premature death of workers.
- Health care expenditures required to treat individuals with illnesses related to drug use, particularly with respect to the abuse of tobacco and alcohol.
- Costs of drug-related crime borne by the victims of criminal behavior and the community in which the criminal activity occurs.
- Expenses of maintaining a criminal justice system devoted to the control of illegal drugs.

There are also costs that cannot be calculated in monetary terms. They include the decline in our collective sense of social order, the diminishment of personal dignity and self-worth, and, most importantly, the devastating effect on relationships we have with our families and individuals around us.

Third, we need to recognize that it is not just a “young people’s issue.” Whether we like it or not, the decision to use drugs of all types and forms, legally sanctioned or not, has become one of life’s choices in every segment of the society in America, as well as societies around the world. The availability of drugs and the potential for drug abuse present difficulties for people of all ages, from the young to the elderly. The consequences of drug-taking behavior can be observed in the workplace and retirement communities as well as on street corners, in school yards, and on college campuses. Drug use is going on in the homes of every community, large or small. The social and personal problems associated with drug use extend in one way or another to men and women of all ethnic and racial groups, geographic regions, and socioeconomic levels. No groups and no individuals should believe themselves exempt.

The purpose of this book is to explore the full range of drug-taking behaviors in our lives, from a biological, psychological, and sociological point of view. Four major areas will be examined:

- The drug problem in America as well as elsewhere in the world in order to understand the enormous challenges we face today.
- Drug-taking behavior over the many centuries of human history in order to understand why drug-taking behavior remains so compelling for us in our modern-day society.
- The ways our society has responded to the problems of crime and violence associated with drug use.
- The present-day system of criminal justice in the United States, extending from drug trafficking control and street-level law enforcement to courts and correctional facilities, that has been created with the goal of reducing the negative impact of drug-taking behavior.

Social Messages about Drug Use

We live in a world that sends us mixed messages about drug-taking behavior. The images of Joe Camel, the Marlboro Man, and the Virginia Slims Woman in print advertisements for cigarettes are remnants of an increasingly distant past, but at one time they were iconic (and highly effective) features in marketing campaigns designed to convey the attractiveness of smoking to the public, particularly to young people. They are gone now as a result of federal regulations over cigarette advertising, established in 1998 (see Chapter 16). For decades, warning labels on cigarette packs and public service announcements have cautioned us about the serious health hazards of tobacco use, but the fact remains that about one in five adult Americans today is a current cigarette smoker. Young people begin smoking well before the minimum age requirement for the purchase of tobacco products. The popularity of flavored cigars and e-cigarettes is of particular concern.

Beer commercials during telecasts of football games and other sports events are designed to be entertaining and to encourage us to associate beer drinking with a lifestyle filled with fun, friendship, sex, and romance, but we are then expected to abide by the tagline at the end of the ad to “drink responsibly” or “know when to say when.” The ramifications of these messages are significant. It has been established that the degree of positive expectancies about alcohol (viewing drinking as a way of gaining social acceptance, for example) predicts the onset age of drinking and the tendency to engage in high-risk alcohol use over time. This is a significant problem with respect to underage alcohol drinking. One out of four eighth graders, for example, reports that he or she has consumed alcohol and one out of eight reports that he or she has been drunk sometime in his or her life (see Chapter 15).³

Major political figures, including U.S. presidents and vice presidents, as well as candidates for these offices and a host of public officials on local and national levels, have admitted smoking marijuana earlier in their lives. In recent years, regulatory policy in some U.S. states has changed dramatically, making marijuana legally available either for medical purposes or for general use by adults (see Chapter 12). Yet the U.S. federal government’s position on marijuana remains unchanged, stipulating that the drug is an illegal substance, officially classified since 1970 as a Schedule I controlled substance, defined as a drug with a high potential for abuse and no accepted medical use—in the same category as heroin (see Chapter 3). The conflicting position of federal and state drug-control authorities with respect to marijuana policy and law enforcement is one of the present-day challenges we face as we proceed through the second decade of the twenty-first century.

Anti-drug media campaigns continue to discourage young people from getting involved with drugs in general. At the same time, we observe a never-ending stream of sports

figures, entertainers, and other high-profile individuals engaging in drug-taking behavior. Even though the careers of these people are frequently jeopardized, and in some instances, as we will see later in the chapter, lives are lost, powerful pro-drug-use messages continue to influence us. These messages come from the entertainment industry and traditional media sources, as well as from Web sites on the Internet.⁴

Two Ways of Looking at Drugs and Society

In the chapters ahead, we will look at the subject of drugs and society in two fundamental ways.

First, we will examine the biological, psychological, and sociological consequences in the consumption of certain types of drugs. The focus will be on the study of drugs that alter our feelings, our thoughts, our perceptions of the world, and our behavior. These substances are referred to as **psychoactive drugs** because they influence the functioning of the brain and hence our behavior and experience.

Psychoactive drugs that traditionally receive the greatest amount of attention are the ones officially defined in the United States as **illicit** (illegal) **drugs**. Criminal penalties are imposed on their possession, manufacture, or sale. The best-known examples are heroin, cocaine, and (except in some U.S. states) marijuana, as well as “club drugs” such as methamphetamine (meth), Ecstasy, LSD, PCP, ketamine, and GHB. Other equally important psychoactive substances, however, are **licit** (legal) **drugs**, such as alcohol, nicotine, caffeine, and certain prescription medicines used to treat a wide range of mental disorders. In the cases of alcohol and nicotine, legal access carries a minimum-age requirement. In the case of prescription medicines, legal access is limited to approval by specific health care professionals. In the case of caffeine, legal access carries no restriction at all.

Second, we can focus on the interplay of circumstances in our lives that lead to drug-taking behavior. We will examine the possibility that drug use is, at least in part, a consequence of how we feel about ourselves in relation to our

psychoactive drugs: Drugs that affect feelings, thoughts, perceptions, or behavior.

illicit drugs: Drugs whose manufacture, sale, or possession is illegal.

licit drugs: Drugs whose manufacture, sale, or possession is legal.

drug dependence: A condition in which an individual feels a compulsive need to continue taking a drug. In the process, the drug assumes an increasingly central role in the individual's life.

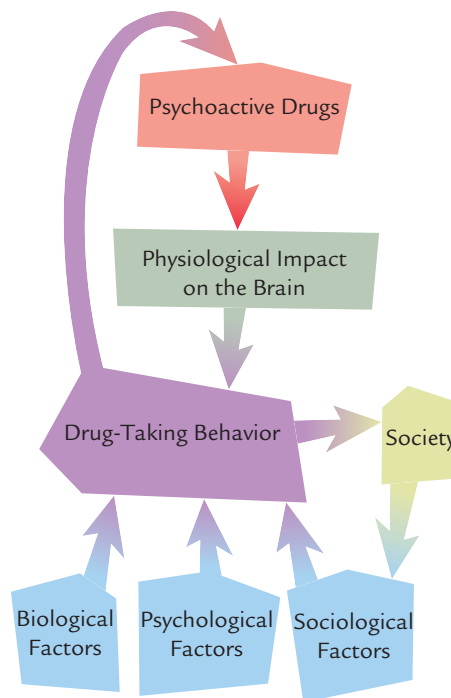


FIGURE 1.1

Understanding the interplay of drug-taking behavior and society through the biopsychosocial model of drug use.

family, to our friends and acquaintances, to our life experiences, and to the community in which we live. The reasons why some individuals engage in drug-taking behavior (and others do not) will be an important topic in Chapter 5.

Figure 1.1 shows the interplay between drug-taking behavior and society as we consider the dangerous potential for drug use to turn into **drug dependence**. As many of us know all too well, a vicious circle can develop in which drug-taking behavior fosters more drug-taking behavior in a spiraling pattern that can be extremely difficult to break. Individuals showing signs of drug dependence display intense cravings for the drug and, in many cases, require increasingly greater quantities to get the same desired effect. They become preoccupied with their drug-taking behavior, and it becomes evident that their lives have gotten out of control.

Current research on drug dependence points to the need for us to examine the issue on a biological level, psychological level, and sociological level. On a biological level, the use of psychoactive drugs modifies the functioning of the brain, both at the time during which the drug is present in the body and later when the drug-taking behavior stops. Drug dependence, therefore, produces long-lasting brain changes. It is as if a “switch” in the brain has been thrown following prolonged drug use. At the beginning, drug-taking behavior is a voluntary act, but once that “switch” is thrown, a pattern of drug dependence takes over. On a sociological level, drug dependence can be viewed as a result of a complex interaction of the individual and his or her environment. We cannot