

AARIN

Arizona Arrestee Reporting Information Network

**Methamphetamine Use Among Recently
Booked Arrestees and Detainees
in Maricopa County, Arizona**

January 2009

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Methamphetamine Use Among Recently Booked Arrestees and Detainees in Maricopa County, Arizona

by

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Background

According to the most recent study of crystal methamphetamine use, 2.8% of young adults (ages 18-26) reported using the drug in 2001-2002. Although recent focus has been placed on educating children and adolescents about the dangers associated with methamphetamine use, reports continue to show that young adults represent the age group most prone to using the drug. Over the years, data from emergency rooms and substance abuse treatment programs have shown the growing problem of methamphetamine use. Data from the Drug Abuse Warning Network (DAWN) and from treatment admissions reveal increases in methamphetamine use as high as 50% from the mid-1990s to the early 2000s. Unfortunately, the various sources used to report methamphetamine use provide little direction in understanding the true extent of the methamphetamine problem at the local level.

In spite of different sources used to document methamphetamine use, reports consistently show the same socio-demographic characteristics associated with the drug. For example, methamphetamine users tend to be White and male and to live in the Western United States. Methamphetamine users also tend to have a lower social economic status and to use other illicit drugs. Although White persons are over-represented in methamphetamine use statistics, studies have documented increasing methamphetamine use among Hispanics and Native Americans.

The fiscal and social costs associated with widespread production, distribution, and use of methamphetamine are well documented. In fact, the impact of methamphetamine use on the justice system is startling. A study conducted by the National Association of Counties (NACo) found that methamphetamine is the leading drug-related local law enforcement problem in the United States. NACo also reported that 76% of counties in the Southwest rate methamphetamine as their number one drug problem. Further, methamphetamine use is associated with increasing crime rates. Sheriffs throughout the nation report increases in robbery, burglary, identify theft, fraud, simple assaults, and domestic violence due to methamphetamine use. Correctional staff report overcrowding in their jails due to crimes associated with methamphetamine. Confirming reports from criminal justice personnel, a recent study found that methamphetamine use is related to criminal behavior and risky sexual behavior, especially among women.

The enactment of legislation at the local, state, and federal levels has been critical in efforts aimed at reducing the spread of methamphetamine use. To date, at least 40 states have passed laws that restrict retail distribution of precursor chemicals. Precursor chemicals are chemicals or compounds that are required or used in manufacturing synthetic drugs. For methamphetamine production, precursor chemical legislation has predominately focused on over-the-counter cold and allergy medications that contain

pseudoephedrine. According to various government agency reports, precursor legislation has led to substantial reductions in domestic methamphetamine labs. Methamphetamine lab seizures have had an impact on the manufacturing of the drug in the United States. The supply of methamphetamine is now estimated to be overwhelmingly transported across the U.S.-Mexican border. As law enforcement focuses its efforts on seizing these labs, methamphetamine is increasingly being produced abroad, especially in Mexico.

To many, the consequences of methamphetamine use are all too real. While the criminal justice system is struggling to control and curb methamphetamine use among the criminally involved, social service and behavioral health agencies are attempting to provide care for the children of parents who use methamphetamine. Many social service agency personnel regard children of users as the unseen victims of methamphetamine use. Abuse and neglect of children due to parental methamphetamine use has had a significant impact on the already financially strained welfare system. The extent to which methamphetamine users are able to receive substance abuse treatment is also a serious concern. Increases in methamphetamine treatment admissions across the nation come at a time when resources available for treatment are becoming more limited. It is no surprise that methamphetamine is viewed by many as a serious social and public health problem.

The purpose of this report is to examine methamphetamine use among adult arrestees and juvenile detainees in Maricopa County, Arizona. We relied on data from the Arizona Arrestee Reporting Information Network (AARIN) to address the following five questions:

1. What percent of adult arrestees are methamphetamine users and what are their social characteristics?
2. What is the relationship between methamphetamine use and arresting offense?
3. What is the relationship between methamphetamine use by parents and the presence of children in the household?
4. What percent of methamphetamine users are receiving treatment for their drug use?
5. What percent of juvenile detainees are methamphetamine users and what are their social and legal characteristics?

Methodology

This report relied on data from the Arizona Arrestee Reporting Information Network (AARIN). The AARIN project is designed to provide information about drug abuse and drug-related activities among arrestees in Maricopa County, Arizona. AARIN data collection takes place at three adult and two juvenile intake facilities. The adult intake facilities are located at the Central Intake of Maricopa County's 4th Avenue Jail, the Mesa Police Department, and the Glendale Police Department. Juvenile intake facilities are located at the Durango Juvenile Detention Center and the Southeast Facility (SEF).

Professionally trained interviewers registered adult arrestees and juvenile detainees for voluntary and anonymous in-depth surveys that focused on drug use and related behavior. After completion of the interview, a urine specimen was collected to confirm drug use. Interviewers collected data during an 8-hour period each day, whereby arrestees and detainees were systematically selected based upon booking time. Only those individuals in custody for 48 hours or less were eligible for participation in the AARIN study.

The standardized tool was comprised of various sections including current and past drug use (e.g., past 12 months, past 30 days), drug dependency, and substance abuse treatment. Information about arrestees' and detainees' criminal history and history of victimization and mental health status was also gathered during the interview process. Data in this report came from the 2007 adult and juvenile data sets and included data only where the arrestee or detainee agreed to be interviewed and provided a urine sample. The sample included 1,607 adult arrestees and 366 juvenile detainees.

What percentage of adult arrestees use meth, and what are their social characteristics?

A review of self-reported drug use showed that 52.2% of arrestees had used methamphetamine at least once in their lifetime: 35.8% in the past 12 months, 30.2% in the past 30 days, and 21.7% in the past three days (see Exhibit 1).

As shown in Exhibit 2, urinalysis results indicated that 36.1% of the adult arrestee population in Maricopa County tested positive for methamphetamine. Specifically, 16.3% of arrestees tested positive for methamphetamine only, and 19.8% tested positive for methamphetamine plus at least one other illicit drug.

The overwhelming majority of poly-drug use involved methamphetamine and marijuana. Nearly 4% of arrestees tested positive for methamphetamine and at least two other illicit drugs. The specific drugs used by methamphetamine poly-drug users are shown in Exhibit 3.

Exhibit 4 presents the socio-demographic characteristics of arrestees by methamphetamine urinalysis results. Findings showed that a higher proportion of females than males tested positive for methamphetamine. About 20% of males and females were methamphetamine poly-drug users; 23% of females compared with 14.1% of males were methamphetamine-only users. Data revealed a significant difference in methamphetamine use across racial/ethnic groups. White arrestees

Exhibit 1: Self-reported Methamphetamine Use of Arrestees

(N= 1,607)	
	%
Lifetime	52.2
Past 12 Months	35.8
Past 30 Days	30.2
Past 3 Days	21.7
Age at First Use	21 years

Exhibit 2: Methamphetamine Urinalysis Results

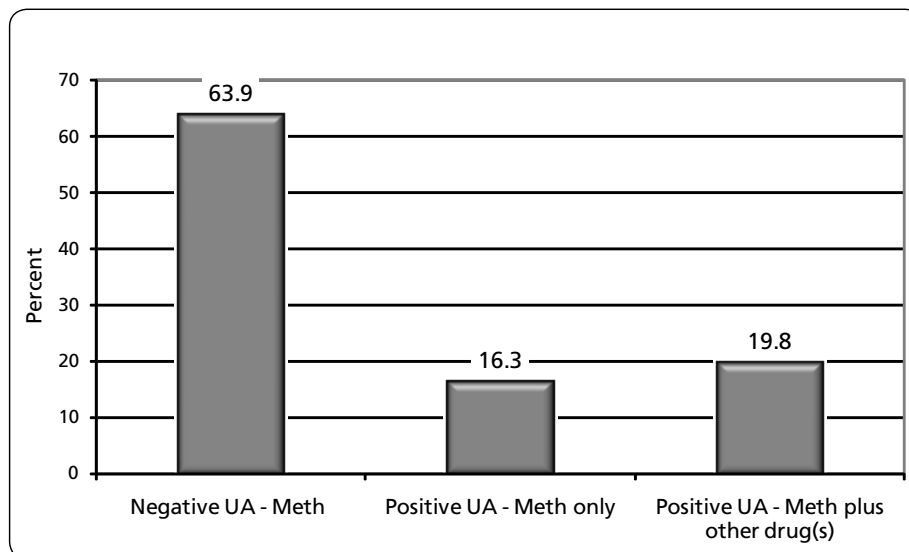
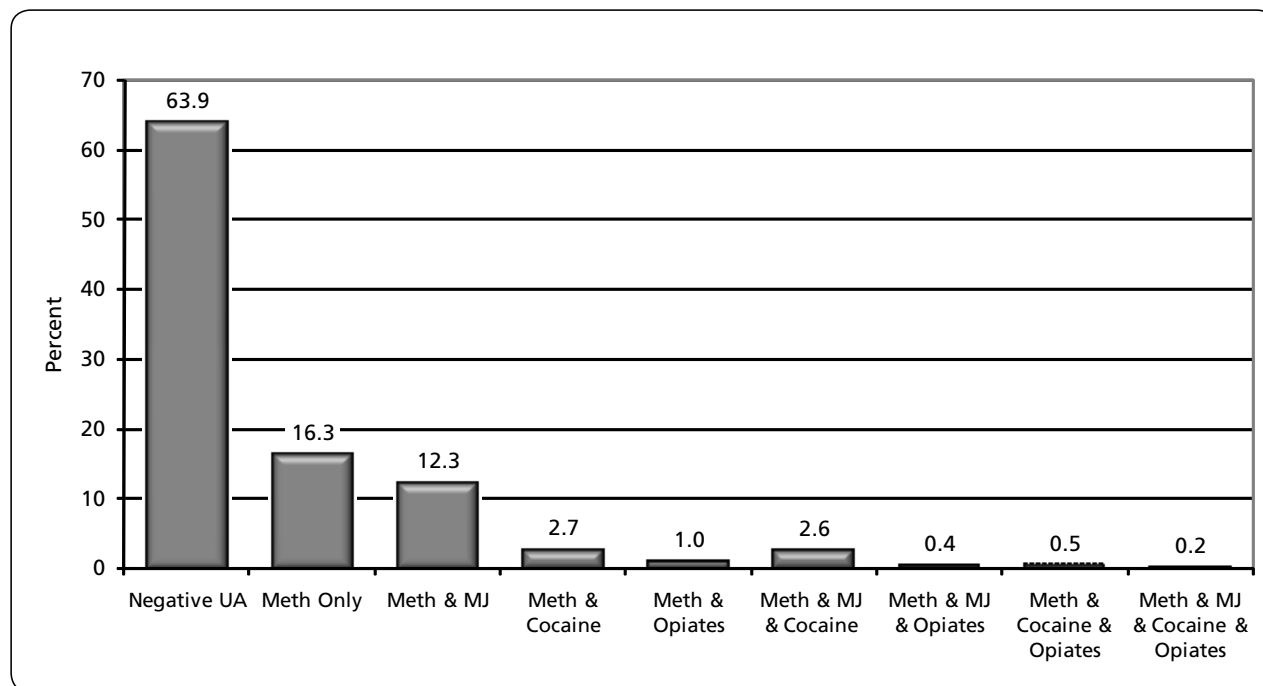


Exhibit 3: Urinalysis Results: Poly Drug and Methamphetamine



had the highest methamphetamine use rates (46.9%), followed by Hispanics (34.7%), Native Americans (16%), and Blacks (14.8%). U.S. citizens were more likely to test positive for methamphetamine use than either legal or illegal aliens.

A quarter of arrestees with less than a high school education were methamphetamine poly-drug users. This rate is significantly higher than methamphetamine poly-drug use by arrestees with a high school degree or GED (17.6%) and with a post-high-school education (19.3%).

Arrestees were asked to report their main source of income over the past 30 days. More than a fifth of arrestees working part time (21.4%) were methamphetamine-only users, and more than a third of arrestees who relied on illegal sources as their main source of income (38.1%) were methamphetamine poly-drug users. Arrestees who were working full time had the lowest rates of methamphetamine use (27.6%). In reference to age, methamphetamine-only users were slightly older (33.2 years old) at the time of arrest than arrestees who tested negative for the drug (31.1 years old) and those who were methamphetamine poly-drug users (31.4 years old).

Arrestee experiences with victimization are shown in Exhibit 5. Methamphetamine users reported significantly higher rates of victimization when compared with non-methamphetamine users. Furthermore, victimization rates were higher among methamphetamine poly-drug users than among methamphetamine-only users. For example, 19.9% of methamphetamine-

Exhibit 4: Socio-demographic Characteristics of Arrestees

	Negative UA	Positive UA	
		Meth Only	Meth plus
	%	%	%
Sex*			
Male	77.8	64.9	74.8
Female	22.2	35.1	25.2
Race/Ethnicity*			
White	33.4	56.5	48.7
Black	15.1	3.1	6.0
Hispanic	34.4	31.7	33.0
Native American	9.2	3.8	2.5
Other	8.0	5.0	9.7
Citizenship Status*			
Illegal alien	12.4	3.4	5.3
US Citizen	85.3	95.4	93.4
Legal Alien	2.3	1.1	1.3
Highest Educational Attainment*			
Less than HS degree	36.6	33.1	45.1
HS degree or GED	36.8	44.4	31.3
Post HS education	26.6	22.6	23.6
Main Source of Income (past 30 days)*			
Working full time	54.2	41.0	32.9
Working part time	12.9	20.3	19.9
Other legal sources	18.1	23.4	22.2
Illegal sources	6.0	8.4	16.1
No income	8.7	6.9	8.9
Age (in years)*			
Mean	31.1 years	33.2 years	31.4 years
SD	10.6	9.4	9.8

* *t* test or Chi-square significant at $p < .05$.

Exhibit 5: Victimization History by Urinalysis Results

(N=1,607)				
		Positive UA		
		Negative UA	Meth Only	Meth plus other
		%	%	%
Past 12 Months				
	Threatened with a Gun *	16.7	19.9	28.6
	Shot at *	10.6	10.4	16.0
	Shot	1.9	1.5	3.1
	Threatened with a weapon (not a gun) *	19.0	17.3	26.5
	Injured with a weapon (not a gun)	9.2	8.8	10.1
	Assaulted	24.4	25.7	29.9
	Robbed	14.1	14.2	19.5

* Chi-square significant at $p < .05$.

only users self-reported being threatened with a gun during the past 12 months compared with 28.6% of methamphetamine poly-drug users. Also, 14.2% of methamphetamine-only users reported being robbed in the past 12 months compared with 19.5% of methamphetamine poly-drug users.

Exhibit 6 shows findings on methamphetamine use and its relationship to mental illness. Although there were no significant differences in mental illness status and methamphetamine use, data show that a mental illness diagnosis in the past 12 months appeared to be more prevalent among methamphetamine poly-drug users than among methamphetamine-only users (7.5% vs. 5.3%). About 6% of methamphetamine poly-drug users received treatment for a mental illness and were medicated for the illness in the past 12 months – rates that were slightly higher than those of methamphetamine-only users.

Exhibit 6: Mental Illness by Urinalysis Results

(N=1,607)			
	Negative UA	Positive UA	
	%	Meth Only %	Meth plus other %
Past 12 Months			
Diagnosed for mental illness	5.9	5.3	7.5
Treated for mental illness	5.1	4.6	5.7
Hospitalized for mental illness	1.6	0.8	2.8
Medicated for mental illness	4.3	4.2	5.7

* Chi-square significant at $p < .05$.

What is the relationship between meth use and arresting offense?

Offenders who were charged at the time of arrest with at least one forgery or burglary count were examined to identify the extent to which they had higher rates of methamphetamine use than non-methamphetamine users. As shown in Exhibit 7, 49.1% of forgery offenders tested positive for methamphetamine compared to 35.7% of non-forgery offenders. A fifth of forgery and non-forgery offenders were methamphetamine poly-drug users; 28.3% of forgery offenders and 15.9% of non-forgery offenders were methamphetamine-only users.

Exhibit 8 displays the rate of methamphetamine use among burglary offenders. Findings show that a significantly higher proportion of burglary offenders than non-burglary offenders tested positive for methamphetamine (57.1% vs. 35.4%). Although a third of burglary offenders were

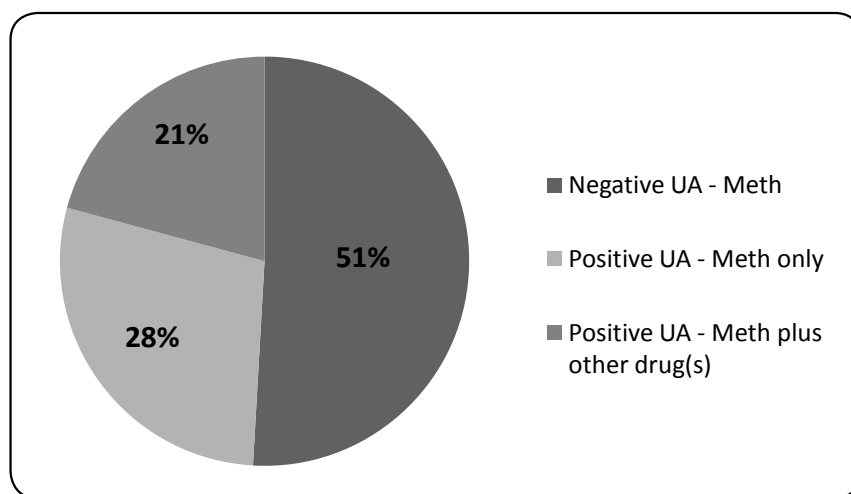
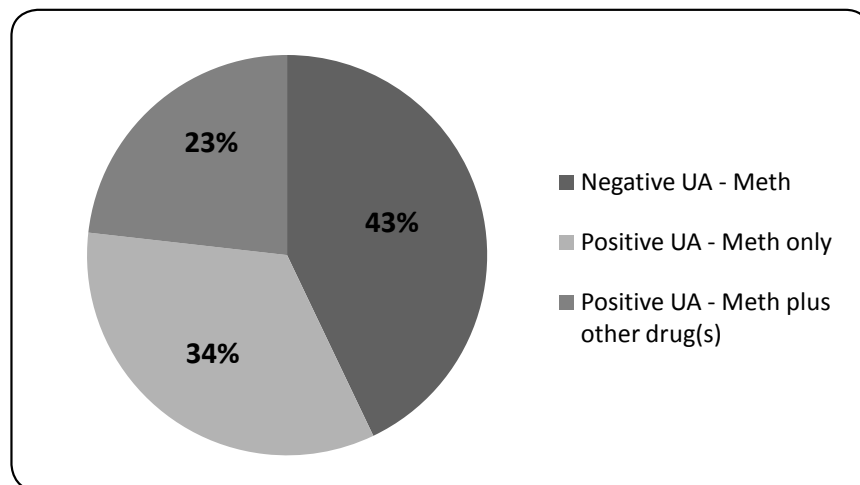
Exhibit 7: Arrestees with Forgery Charges (N=53)

Exhibit 8: Arrestees with Burglary Charges (N=56)

methamphetamine-only users (33.9%), less than a fifth of non-burglary offenders tested positive for methamphetamine only (15.7%).

As shown in Exhibit 9, a review of the most serious offense at arrest showed methamphetamine rates were highest among drug offenders (43.2%) and property offenders (37.1%). Self-reported criminal history data revealed that the mean numbers of prior arrests and prior incarcerations were significantly

higher among methamphetamine users than non-methamphetamine users. The average numbers of prior arrests and prior incarcerations were highest for methamphetamine poly-drug users.

Exhibit 9: Type of Offense and Extent of Criminal Involvement of Arrestees by UA Results

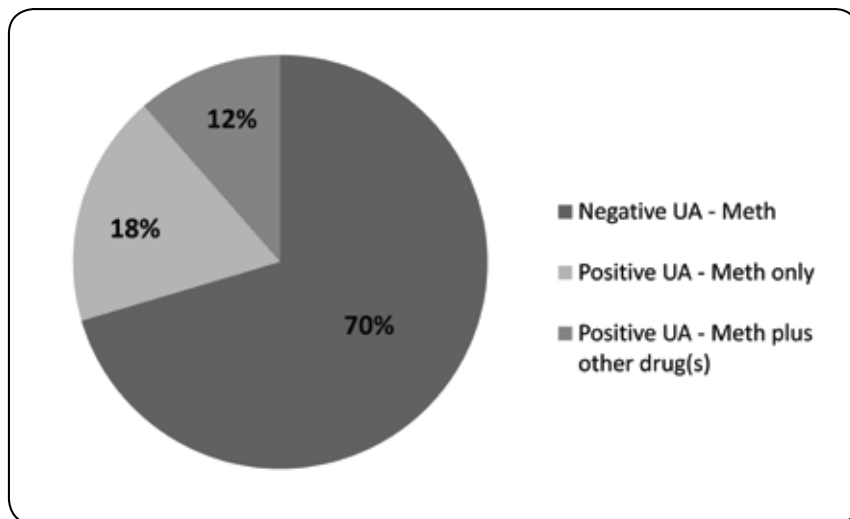
(N=1,592)			
	Negative UA	Positive UA	
		Meth Only	Meth plus
	%	%	%
Most Serious Offense at Arrest*			
Violent	17.9	12.4	14.0
Drug	16.0	22.1	22.1
Property	18.2	20.9	18.2
Other	47.9	44.6	45.6
Prior Arrest (past 12 months)*			
Yes	41.1	49.6	59.7
No	58.9	50.4	40.3
Mean	0.8	1.0	1.4
Prior Incarceration (lifetime)*			
Yes	69.2	75.2	83.3
No	30.8	24.8	16.7
Mean	0.7	0.8	1.1

* t test or Chi-square significant at p < .05.

What is the relationship between meth use by parents and the presence of children in the household?

Bivariate analysis displayed in Exhibit 10 shows significant differences in methamphetamine use and the living situation of children. Specifically, 29.6% of arrestees who reported living with a child tested positive for methamphetamine compared with 39.2% of those who were not living with a child.

Exhibit 10: Arrestees Living with Children (N=40)



What percent of methamphetamine users received treatment for their drug use?

One of the strengths of the AARIN project is its capacity to shed light on gaps in substance abuse treatment, given the levels of confirmed drug use among the arrestee population. Arrestees were asked to self-report whether they felt dependent on methamphetamine, whether they were currently receiving or had previously received treatment for the drug, and whether they felt that they could use treatment for methamphetamine. Exhibit 11 presents the findings reported by the arrestees.

Exhibit 11: Methamphetamine Dependency and Treatment History by UA Results

	(N=1,607)		
	Negative UA	Positive UA	
		Meth Only	Meth plus other
	%	%	%
Dependent*	3.6	40.5	34.9
Currently receiving treatment*	3.3	8.6	3.6
Previously received treatment*	14.9	26.1	21.0
Could use treatment*	12.8	48.9	46.2

* Chi-square significant at $p < .05$.

More than 40% of arrestees who tested positive for methamphetamine only self-reported dependence on the drug. Although 8.6% of methamphetamine-only users reported currently receiving treatment, nearly half reported that they could use treatment for methamphetamine (48.9%). The proportion of methamphetamine poly-drug users who were currently receiving treatment was 3.6%; nearly half (46.2%) reported that they could use treatment for methamphetamine.

What percent of juvenile detainees use meth, and what are their social and legal characteristics?

A review of drug-use data in Exhibit 12 showed that 30.1% of juvenile respondents self-reported having used methamphetamine at least once in their lifetime, 19.7% in the past 12 months, 12.9% in the past 30 days, and 6.6% in the past three days.

Exhibit 12: Self-Reported and Confirmed Methamphetamine Use by Juvenile Detainees

(N=366)	
	%
Lifetime	30.1
Past 12 Months	19.7
Past 30 Days	12.9
Past 3 Days	6.6
Urinalysis	9.6
Age at First Use	14.1 years

Urinalysis results indicated that 9.6% of juvenile respondents tested positive for methamphetamine. Specifically, 2.2% of juveniles tested positive for methamphetamine only and 7.4% tested positive for methamphetamine plus another illicit drug(s). On average, juvenile respondents self-reported that they first tried methamphetamine when they were 14.1 years old.

Exhibit 13 presents the socio-demographic characteristics of juveniles by methamphetamine urinalysis results. Findings show that a significantly higher proportion of girls than boys tested positive for methamphetamine (12.4% vs. 8.9%). About 12% of His-

panic juveniles were methamphetamine poly-drug users, a significantly higher percentage than all other racial/ethnic groups. Juveniles who reported being illegal aliens were more likely to test positive for methamphetamine use than legal aliens and U.S. citizens.

A review of the most serious offense at arrest showed that drug offenders had a higher rate of methamphetamine use than other offenders. Also, among those juvenile detainees who tested positive for methamphetamine, a higher proportion were poly-drug users than were methamphetamine-only users. Self-reported prior criminal history information revealed that the mean numbers of prior arrests and prior detentions were highest among methamphetamine poly-drug users, followed by those who tested negative for methamphetamine, and then by those who tested positive for methamphetamine only.

Exhibit 13: Socio-Demographic Characteristics of Juveniles by UA Results

		(N=366)		
		Negative UA	Positive UA	
			Meth Only	Meth plus other drug(s)
		%	%	%
Sex*				
	Male	82.8	50.0	85.2
	Female	17.2	50.0	14.8
Race/Ethnicity*				
	White	26.9	37.5	3.7
	Black	11.2	0.0	3.7
	Hispanic	47.1	37.5	81.5
	Native American	3.9	0.0	0.0
	Other	10.6	25.0	11.1
Citizenship Status*				
	Illegal Alien	5.7	25.0	7.4
	US Citizen	91.8	75.0	88.9
	Legal Alien	2.4	0.0	3.7
Highest Educational Attainment*				
	Less than HS degree	89.7	100.0	84.6
	HS degree or GED	10.0	0.0	15.4
	Post HS education	0.3	0.0	0.0
Most Serious Offense at Arrest*				
	Violent	22.2	0.0	14.8
	Drug	8.0	25.0	11.1
	Property	23.1	12.5	11.1
	Other	46.8	62.5	63.0
Prior Arrest (past 12 months)*				
	Yes	59.8	50.0	73.1
	Mean	1.2	0.6	1.4
Prior Detention (lifetime)*				
	Yes	61.3	50.0	77.8
	Mean	1.0	0.9	1.3
Age (in years)*				
	Mean	15.5	16.0	16.3
	SD	1.4	1.1	1.0

* t test or Chi-square significant at p < .05.

Discussion and policy implications

The analyses presented in this report confirm what many criminal justice officials have claimed for some time: Methamphetamine use is a significant problem among offenders in Maricopa County. Although the reduction in domestic methamphetamine labs has had an impact on production of the drug, levels of use among the criminally involved remains high. In 2007, according to AARIN data, more than a third of all adult arrests and about 10% of juvenile arrests made by law enforcement involved individuals who tested positive for methamphetamine.

Drug distribution factors. As law enforcement works toward suppressing distribution of the drug, information about the circumstances surrounding how individuals acquire it becomes useful. Data from this report suggested several important factors related to arrestees who used methamphetamine that might be relevant to law enforcement. For example, since females had higher rates of use than males, do methods for acquiring methamphetamine differ for males and females? Analyses presented here show that certain offenders (e.g., drug, burglary, and forgery offenders) were more likely than others to test positive for methamphetamine. Additional research into whether illegal behaviors (e.g., drug distribution, burglary) lead to methamphetamine use or merely are engaged in to support drug use would be particularly important.

Impact of parental drug use. The devastating impact on children of parental methamphetamine use is often noted. Analyses in this report show a bivariate relationship between arrestees' methamphetamine use and children living in the household. Specifically, this study found that arrestees who reported living with a child had lower rates of methamphetamine use. However, based on a few important research design issues, we suggest caution when interpreting this finding. First, arrestees were asked about their living situation in the past 30 days, thus reflecting their current status and not any previous living situation. Given the multiple living situations of children of criminal offenders and the fact that more than half of the adult arrestees self-reported using methamphetamine in their lifetime, methamphetamine users may possibly have lived at one time with their children. Second, children of methamphetamine users are harmed by their parents' drug use regardless of the family living situation. Children of drug users lack needed emotional and social support that is often absent, regardless of living situation. We hope the above finding will not lead anyone to minimize the harms associated with parental drug use or the need to consider the welfare of affected children.

Potential for victimization and mental illness. Our findings suggest that efforts by criminal justice and social service agencies to provide substance abuse treatment for methamphetamine users must consider the risk of victimization and mental illness among this population of users. In fact, rates of victimization and mental illness were higher among methamphet-

amine poly-drug users than among methamphetamine-only users. Collaboration among criminal justice practitioners, substance abuse treatment providers, and behavioral health professionals appears to be critical in the treatment of methamphetamine users. Further, since methamphetamine use among arrestees was linked to prior criminal involvement, it may be beneficial to direct resources to offenders after use is identified. Additional research on the relationship between methamphetamine use and other illicit drug use will be critical in assessing treatment needs among arrestees in Maricopa County.

Public awareness, particularly among adolescents. Last, public awareness campaigns aimed at preventing methamphetamine use among adolescents are spreading throughout the nation. In light of these media campaigns, it is important to ensure that methamphetamine use is monitored among the general population as well as among those most at risk. Our analyses indicated that almost 10% percent of juvenile detainees tested positive for methamphetamine. Furthermore, data analyses indicated that 30.1% of juveniles self-reported using methamphetamine in their lifetime, and 19.7% reported use in the past 12 months. These rates of methamphetamine use are striking and warrant further research. Since juveniles who come to the attention of the juvenile justice system are exposed to an array of risk factors, it will be important to identify how to address their various needs and to provide the substance abuse treatment they need. Monitoring levels of use among juveniles in the general student population as well as in the juvenile justice system will provide a more comprehensive review of methamphetamine use, and it can assist in identifying where resources are needed most in order to reduce methamphetamine use among adolescents.

About the Center for Violence Prevention and Community Safety

Arizona State University, in order to deepen its commitment to the communities of Arizona and to society as a whole, has set a new standard for research universities, as modeled by the New American University. Accordingly, ASU is measured not by whom we exclude, but by whom we include.

The University is pursuing research that considers the public good, and is assuming a greater responsibility to our communities for their economic, social, and cultural vitality. Social embeddedness – university-wide, interactive, and mutually supportive partnerships with Arizona communities – is at the core of our development as a New American University.

Toward the goal of social embeddedness, in response to the growing need of our communities to improve the public's safety and well-being, in July 2005 ASU established the Center for Violence Prevention and Community Safety. The Center's mission is to generate, share, and apply quality research and knowledge to create "best practice" standards.

Specifically, the center evaluates policies and programs; analyzes and evaluates patterns and causes of violence; develops strategies and programs; develops a clearinghouse of research reports and "best practice" models; educates, trains, and provides technical assistance; and facilitates the development and construction of databases.

For more information about the Center for Violence Prevention and Community Safety, please contact us using the information provided below.

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