

POLICE PERCEPTIONS AND ATTITUDES OF DRUG ADDICTS

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Chapter 1

Introduction

Law enforcement according to McCartney and Parent (2015) is one of the most significant professions in America. In one of the most authoritative and influential positions, officers are trusted with an extensive amount of discretion while enforcing law. Jorgensen (2018) describes a police officer as a representative of the judicial system who is authorized to enforce laws against violent crimes. In addition, police are tasked with enforcing victimless laws such as drug offenses. Initially, the creation of this study was motivated by a concern of the opioid epidemic. A substantial body of research has been explored to analyze causes of fatal opioid overdoses. Considering the high overdose rates, which will later be revealed in the literature of this study, and since police are generally the first to encounter addicts, how are attitudes of police displayed towards addicts? Flanagan and Hancock (2010) identified drug addicts in a study as a group of people who are hard to reach. The study concluded that drug addicts have been let down by the system.

Moreover, if perceptions and attitudes from police are unfavorable, could that be a contributor to the epidemic? The intention of this thesis is to evaluate police perceptions and attitudes towards drug addicts and contributors to the perceptions. For the criminal justice system to function effectively, police attitudes towards addicts must be researched and evaluated. The urgency to implement this research lies within the opioid epidemic. The purpose of this thesis is to explore the perceptions police have towards drug addicts. Furthermore, the objective is to add literature to an unexplored study. It is likely that over time, officers develop negative judgments and personal bias towards repeat offenders, specifically, drug addicts. While focusing on the term “addict,” more insight will be presented to the condition of addiction. Police

officers' sentiments may be lacking when encountering a begging panhandling addict. The adverse assessment can surface and become visible during contact with addicts. Officers' attitudes towards drug addicts may not be as thoughtful as their attitudes may be towards a routine traffic violator.

Currently, research shows illicit drug use on the rise (Johnston et al., 2012; Banta-Green Beletsky, Schoeppe, Coffin, and Kuszler, 2013). Based on that information, addicts are at risk for exposure to law enforcement attitudes. Adverse attitudes towards drug addicts from police may easily result in a negative ramification (Rivera, DeCuir, Crawford, Amesty, and Lewis, 2014). Although the central concept of law enforcement is enforcing established laws, officers are also mentors and leaders in their community (Arter, 2006).

Furthermore, public policy is influenced by society and the opinions citizens hold (Sheff, 2013). Police are tasked with enforcing the law and expected to be a community representative who is influential and has a measure of leadership in their community. If misconceptions and negative stigmas of addicts continuously circulate, Americans will continue in a pattern of addiction and policy will likely remain damaged and unproductive (Sheff, 2013). Although vice crimes such as prostitution, gambling, and drug abuse are designs of addiction, it is possible only one of these behaviors may face harsh criticism from the public and law enforcement. It is believable that the stigma surrounding drug addiction is one that no other addiction may encounter. The importance of studying police perceptions of drug addicts should be considered critical since opioids and methamphetamines have are proven to be the most abused drugs, with an increase in users, and opioids alone are the blame for such a high fatal overdose rate (Johnston, et al., 2012). Additionally, there is a lack of research in police perceptions of the drug addict. It is critical to add literature to combat addiction and the opioid epidemic successfully.

Drug addicts often linger on the streets searching for their next high. The constant use of a substance most likely has caused a physical dependency that leads the user to obtain their drug of choice at all costs, including engaging in criminal acts (Maté, 2010). Many times, this scavenger hunt can lead them to encounter police. Law enforcement's previous encounters with a drug addict may cause them to develop perceptions and stereotypes of all drug addicts. Police views and attitudes of addicts may range from, addicts choosing the addiction, addicts inducing self-harm willingly, addicts are weak, and are contributing to their own self-destruction (Sheff, 2013). Therefore, based on negative perceptions, empathy and sympathy are not usually extended by officers that encounter drug offenders during contact (Green et al., 2013). Instead, the attitude from police towards addicts and drug offenders may result in astringent criticism and a lack of compassion when communicating with the addict. Although, police undergo hours of training to eliminate bias from their decision-making, being knowledgeable on a topic equips police to manage a subject and situation more effectively. Continuing education and training can help improve problem-solving skills for officers (Varricchio, 1998). There is a substantial amount of research and data to support the theory that drug addicts suffer a mental illness (Maté, 2010; Leshner, 1997; Akers, Sellers and Jennings, 2017). However, officers may be unaware of the numerous studies that provide data on addiction and thus consequently, continuing the stigma of drug addicts.

Statement of the Problem

Officers encounter severe addicts who are in grave condition because of their addiction to illegal substances. Encounters are as routine as a traffic stop for an equipment violation. As America combats the opioid crisis, police have found themselves also at risk to the dangers of the drug. Vehicle and property searches of a substance user's possessions may result in: officers

punctured by uncapped needles, fentanyl exposure, and other hazardous exposures such as diseases contracted from the intravenous user such as HIV and hepatitis. This compound effect can leave officers feeling frustrated and disheartened due to the health risks they become exposed to.

Furthermore, police may be untrained and inexperienced concerning the psychological culpability of the addict. Police may view the addict as a public nuisance who is careless and neglectful of their surroundings, appearances, and even their children (Maté, 2010). When a police officer discovers that drug addicts bring their children with them to obtain drugs and get high in front of their children, an officer can become resentful and bitter towards all substance abusers. However, many officers may be unaware of the deficiency of impulse control induced by substance abuse that can result in a lack of parental care (Maté, 2010).

Faupel and Klockars, (1987) explained the public views addicts as “junkies”. They convey the impression they are stranded in their addiction. They forfeit the American dream, and some choose to live on the street making drug use a priority. Their life structure is a daily goal of obtaining a way to get their “fix”. Faupel and Klockars (1987) also adds, a street junkie might be known as a heroin addict. They may be cut off from their source of heroin and not know when or where their next “hit” is coming from. They are woefully disarranged and unable to maintain a normal routine of cleanliness (Faupel and Klockars, 1987). Addicts arms and body are often perforated and scabbed with track marks. The needle injection sites on their body may be swollen from infections of the unclean needles penetrating their skin and the dirty injection environment (Vlahov, Sullivan, Astemborski, and Nelson, 1992; Maté, 2010). This could create a dirty stigma of all addicts which could hinder treatment (Buchman and Reiner, 2009). It is common the public develops negative perceptions and attitudes towards addicted people

(Buchman and Reiner, 2009). There is also a range of perceptions and attitudes from police towards addicts (Beyer et al., as cited in Green et al., 2013). However, policing, according to Green et al., (2013) has evolved over the years as part of the broken windows theory. Branching from strict enforcement to more of a community-based police style, in problem solving while encountering homeless, mentally ill, and addicts is a future goal.

Officers in America spend hours daily answering calls for service of individuals who may have overdosed. Rando et al., (2015) explained that some officers are now equipped with naran (Naloxone) the opioid blocker, as a tool to resuscitate overdose victims. On each call the officer rushes to the aid of an addict who has overdosed in order to provide any preventive measure necessary to bring life back to the individual (Rando et al., 2015). However, a study showed, officers perceptions change when the officer finds the addict willingly abused the substance (Green et al., 2013). These repeated calls may leave police officers feeling distressed and annoyed, which may result in a loss of empathy to the addict and prevent treatment (Green et al., 2013). When an officer's perceptions of drug addicts are supported through the arrest or response with the same addict, it is justifiable that officers retain a futile attitude towards addicts. Green et al., (2013) explained how this repeated behavior can create a "burnout" for officers. Police play an important role while engaging with addicts. For example, police searches, questioning, and drug related arrest are critical components to the opioid crisis and addiction (Banta-Green et al., 2013).

Moreover, marijuana is becoming more socially acceptable, yet in many states remains illegal (Ward, Lucas, and Murphy, 2018). Nonetheless, the leniency officers generously extend to offenders with small amounts of marijuana, is usually not extended to offenders in possession of any other narcotic or drugs (Jorgensen, 2018). Research has proven that officers view

marijuana use as less harmful in comparison to other drugs (Petrocelli, Oberweis, Smith, and Petrocelli, 2014). In contrary, heroin and other hard drugs users have created a public impression of disgust (Barry, McGinty, Pescosolido, and Goldman, 2014). There is a clear bias in the justice system based on society's approval and disapproval of certain drugs (Bottorff et al., 2013; Barry et al., 2014). Society's acceptance of marijuana, which is an illegal drug in many states has created challenges for law enforcement, and according to, Ward et al. (2018) may negatively impact police roles. In addition, there are citizens who view drug use as a victim-less crime, and those hold the belief that addicts should be allowed to use if they choose. Some may perceive this usage as acceptable (Jorgensen, 2018). This reinforces society and law enforcements lack of care for addiction and addicts. Some drug addicts do not impose harm on citizens, by their own drug use. However, they are still criminal and held accountable for their own drug use according to the criminal statue (Jorgensen, 2018). When an addict is apprehended by law enforcement and incarcerated, the future of the addict is placed in the hands of the judicial system. The justice system's perception of drug addicts may result in these offenders being left with untreated addictions while they are incarcerated. This creates a revolving circle of self-harm, crime, recidivism, and even death amongst substance abusing offenders (Rivera et al., 2014). The importance of evaluating law enforcements perception of drug addicts is the first step in uncovering other issues related to drug use, such as recidivism, fatal overdose rates, crime, and recovery. Discovering police attitudes as they encounter substance abusers is the beginning of determining future training and policy needs for police to help preserve the life of addicts and encourage recovery.

Background and Current Study

In 1971, a policy was created to combat drugs, yet it created an adverse effect and contributed to negative public perceptions of addiction (Sheff, 2013). The war on drugs is considered by many as a failed policy that did not work (Ward et al., 2018). It is likely police perceptions generated from the war on drugs (Jorgenson, 2018). Not only did the result of this policy create a negative stigma, but it consisted in billions of dollars uselessly spent, and America still faces an epidemic. However, this time the epidemic transitioned to opioids, mass incarcerations of Americans with drug addictions, and negative criminal justice opinions (Sheff, 2013; Ward et al., 2018). By continuing this level of defeat, in 2011 funds to combat the war on drugs were estimated to be at \$25 billion dollars (Sheff, 2013). Policy makers that consider drug addiction a choice and encourage withholding public and policy support construct a careless attitude towards preventative and research methods (Staff, 1997).

Jorgesen (2018) confirmed research on police perceptions of drug use is underdeveloped. In addition, the study of the drug addict and their addiction is unfounded and unknown. In 1985, a study conducted by Wilson, Cullen, Latessa, and Wills explored the perceptions of police on vice crimes and related data to reflect drug abuse. Jorgensen (2018) then extended that study on police officers' perceptions with a focus on drugs. Jorgensen (2018) concluded, the likelihood that police perceptions of drugs influence officer discretion when interacting with a drug offender. Furthermore, research has been conducted on the public's perception of drug addicts; however, there is a difference between the perception and attitudes of the public and officers who enforce the law. A study showed officers disclosed punitive attitudes towards drug use and further favored incarceration over treatment to drug use (Jorgensen, 2018). Jorgensen (2018)

additionally explained officers felt the laws that banned drug use, sale, and manufacture of drugs were not strict enough and tougher punishments should be imposed.

Importance of the Study

It is important to understand police perceptions of drug addicts. If negative attitudes are displayed towards addicts, it can be demoralizing (Logan et al., 2006). Ethical behavior is essential in law enforcement. McCartney and Parent (2005) illustrate the importance of ethical behavior of police by explaining law enforcement, which should always address situations with compassion and respect.

The lack of literature available and limited research on police perceptions of drug addicts and their addiction is critical to future policy, police training, and recidivism. It is estimated that from 2014 to 2015 heroin death rates expanded by 20.6%. Additionally, overdose death rates from synthetic opioids increased by 72.2% (Phalen et al., 2018). The current debate in the justice system to rehabilitate a drug offender versus a punitive approach relies extensively on policy. Policy generally is obtained and created through contact and data of police officers. Disheartened attitudes police obtain through experience may repress any future assistance for drug addicts and their addiction. It is critical to study police officers' perceptions of drug addicts when drug use and overdose rates continue to surge. New data showed opioids and methamphetamines to be the most abused drugs with an increase in users (Johnston et al., 2012). An increase in usage may produce an increase in drug-related deaths.

Empirical research and data regarding the attitudes and perceptions of law enforcement officers towards drug users is scant. This could continue to lower other poor factors within society and the criminal justice system for substance abusers. Comprehending data that

correlates crime and drug use or the contrary is imperative to understanding the persuasion of officer's perceptions and opinions towards addicts.

Moreover, officers are mandated to participate in required training throughout their career to recognize and handle mentally ill subjects. Treatment of the mentally ill is generally different than someone of rational cognizant state. Furthermore, correlating drug addiction with a mental illness could leave a question of the mishandling of drug addicts in the criminal justice system as they encounter police.

Chapter 2

Literature Review

Introduction

Data and literature on police perceptions of the drug addict is undetermined and limited. Understanding the addicted state of mind, and how addiction and drug use affect the brain, is essential to understanding the addict's actions, which may be criminal and can create negative perceptions. The criminal justice system historically placed the mentally ill, such as schizophrenics or those with other brain diseases in prison asylums (Leshner, 1997). Once the topic of criminalizing mentally impaired people was researched and awareness explained, punitive approaches were reconsidered (Leshner, 1997). In addition, officers are expected and mandated to attend extensive training on handling the mentally impaired offender with careful considerations. There is enough research to conclude drug addiction is a disease (Maté, 2010). Although it is not the scope of this thesis, if police understood addiction as they do other mental illnesses' then police would likely affect societal views, and contribute to recovery (Leshner, 1997).

A minimal amount of literature are available referencing police perceptions and attitudes that exist on violent crimes and criminal activity. Since there is no located literature of police perceptions towards the drug addict, analyzing public perceptions of addicts, police perceptions on drug use, and defining addiction and theories will be utilized for this study.

Addiction

Literature and research on police attitudes towards drug addicts are undetermined. The purpose of this section is to explore research and gain a better understanding of the behavior in addiction and debunk any myths associated. This is necessary information, because the

addiction is who the addict has become, which may influence officers' opinions. Any stereotypes or misinformed ideas may be a contributor to police attitudes and be counterproductive to recovery. Gaining knowledge through research and refining any unfounded misconception(s) of addicts is informative. The goal of this section is to gather literature and reference it to the addict's actions.

Many experts disagree on defining addiction and its causes. Sheff (2013) explains several factors that contribute to an addictive nature. Stress, childhood trauma, dysfunctional families, mental illness' (which we will explore hereafter), and negative environmental factors (Sheff, 2013). A drug addict will impulsively use drugs even with the desire to stop using drugs. The desire to use drugs supersedes the will to stop (Arthur, Scarlet, and Shapiro, 2009). Drug addiction controls the reality of the addict. For instance, paying bills, buying groceries, and providing essentials for their family may be unimportant and replaced with the irresistible desire to abuse drugs. This view is an attempt to explain the conduct by the consequence of drugs on the brain (Arthur, 2009). Pembleton (2017) described addiction as a social problem with many critical issues. Pembleton (2017) also concluded that many addicts find it difficult to turn down the temptation of drugs.

Drug use does not affect all users accordingly. Dr. Maté (2010) explains that, many people believe they know what addiction is. Dr. Maté continues, some people with certain factors are at high risk for addiction. Many patients are prescribed opioids for pain after surgery. In Dr. Matés' usefully explanation he affirmed, if addiction were a choice then every person who has ever taken an opioid for pain would be an addict (Maté, 2010). Addiction creates a bargain scheme in the addicted person's brain. The addict is helpless and misplaces control over their actions (Carnes, 2012). *The National Institute on Drug Abuse* (NIDA) (2018) defines addiction

as a chronic disorder in comparison to heart disease, in which the person is constantly seeking drugs.

West (2001) explored a series of theories related to addiction. It is likely police officers have developed their own theories that produce their perceptions of addicts. Reviewing a selected few frequently mentioned described by West (2001) may give an insight to the addict's behavior. Marlatt and Gordon (as cited in Drummond, 2001) applied the cognitive social learning theory and associated it with relapse and prevention. Sheff (2013) researched that addicts who grew up in a drug infested home often became addicts themselves. Additionally, when drug addicts are released from jail, they often return to the environment where they abused drugs, and social factors influence the use (Drummond, 2001). Uhl and Grow (2004) claimed genetic research has proven at least 40-60% of addiction is heredity. There is a substantial amount of data to support environment, genetic and hereditary factors as a theory of addiction (Maté, 2010; Sheff, 2013; Akers, Sellers, and Jennings, 2017; Buck and Finn. 2001). However, some criminologists have associated the rational choice theory to addiction (Akers, Sellers, and Jennings, 2017; Becker and Murphy, 1988). Theoretical approaches are not equal to all addicts. Where one might argue the rational choice theory where the addict chooses to abuse drugs, another might dispute that addicts with high risk factors and predispositions may not fit rational choice. Although, the extensive research of addiction exceeds the framework of this thesis, a basic understanding is necessary to assess police perceptions of drug addicts.

The Addict

Exploring literature regarding the addicted brain and the correlation of mental impairment for the purpose of this study is only intended to question the addicts' mental culpability. In the criminal justice system, anyone charged and convicted with a crime, must

meet a legal culpability state or *mens rea*. In general, and constitutionally incompetent offenders are not held accountable for a law and policy violations. Therefore, comprehending literature and research on a drug addicts' brain function may enlighten the true culpability state.

Signifying addiction as a mental illness consist outside the scope of the study, however, the importance is to fully understand addiction and the medical and scholarly definitions associated. The purpose in doing so helps improve a better understanding of why addicts abuse drugs, which influence police officers' opinions.

Comprehending perceptions police have towards drug addicts, indicates grasping the heart of the issue; the addiction. *The Journal of Drug Addiction, Education, and Eradication* (2011) defined and confirmed with other sources that addiction is a brain disease. It is considered a brain disease because the chemicals in the drugs change the brain function (*The Journal of Drug Addiction, Education, and Eradication*, 2011). Furthermore, the Journal added, the changes in the brain can be long-lasting and create dangerous behaviors (*The Journal of Drug Addiction, Education, and Eradication*, 2011). Maté (2010) describes an addict as, someone who owes a debt, and cannot repay it. The someone, or the addict, in this case becomes a slave to their addiction. He further listed addiction as a neurobiological disease with cravings that create a negative impact (Maté, 2010). Officers repeated contact with addicts who commit crimes in addition with their drug use can create serious misconceptions of the addict. Believing the addicts choose their addiction could be a misconceived idea by officers.

According to the *National Institute on Drug Abuse* (NIDA) (2010) mental illness develops when the addicts brain function is disturbed or disrupted by use of narcotics (NIDA, 2010). NIDA (2010) also explained comorbidity in a drug addict. This occurs when a mental illness coexists with another mental illness. For example, an addict with an addicted brain who

also battles another mental illness (NIDA, 2010). Sheff (2013) detailed the effects drugs have on the brain when the addict suffers from a mental illness. Sheff (2013) described the addiction as an intense feeling for a person with comorbidity. Based on the evidence it is proven addiction correlates with a mental illness. The addict's priorities and desires are hijacked with new priorities that relate to their drug use, abandoning any other important life factors.

Furthermore, the NIDA (2010) indicated the results in a compulsive behavior that disregards consequences due to a lack of impulse control. The brain function of the addict is controlled by the drug, illustrating an absence of clear cognitive decision making (NIDA, 2010). Acknowledging addiction as a mental illness or a disease has been a long debate. Szalavitz (2017) illustrates, how the brain resets its priorities during a craving phase. Szalavitz relates the reset to a person who falls in love by demonstrating, when someone falls in love, everything is prioritized around the person he or she have fallen in love with (Szalavitz, 2017).

Dr. Maté (2010) explained the drug addicted brain displayed on scans from magnetic resonance imaging (MRI) and positron emission tomography (PET) are different than brain scans of a person who is not addicted to drugs. Leshner (1997) confirms the addicted brain is not the same as an unimpaired brain. Szalavitz (2017) described abusing drugs can affect large areas of the brain such as the pre-frontal cortex. This area in the brain involves motivating and critical behavior in addicts (Szalavitz, 2017). After extensive drug use it is obvious through visual scans, the brain is not the same as before the addict used drugs. As a result, the rational and logical thinking is diminished in an addict's brain (Maté, 2010).

Emotional separation, powerlessness, and additional stress are the main components that create the neurobiology of addiction in people (Maté, 2010). Sheff (2013) researched addiction and concluded it as a disease that over time if left untreated will advance. Kuehn (2010)

articulated how drug use often correlates with other psychiatric illness. The NIDA (2012) defines addiction as a treatable disease and a mental disorder. Moreover, the psychoanalytical theory reveals that addiction is the cause of multiple underlying mental illness' (Akers et al., 2017). Specifically correlating this theory with a cause of drug abuse and addiction explains the addict's failure in attempting to deal with feelings of guilt, hopelessness, despair, or unresolved emotional turmoil. The addict then attempts to self-medicate to escape reality (Akers et al., 2017).

America's Drug Problem

According to Volko, Nora, Collins, and Frances (2017) more than 90 Americans die from opioid overdoses a day. However, there is new data that suggest those numbers have astoundingly increased. In 2016, a total of around 65,000 fatal drug overdoses took place (Stoffers, 2018). Further research indicated by *The National Institute of Health* (NIH) (as cited by Steele, 2018) shows that in 2016, 115 people died daily from opioid overdose. That is the equivalent of 42,000 people who died from overdose of opioids, which is more than car crashes, shootings, and suicide (*The National Institute of Health*, as cited Steele, 2018). According to *The Centers for Disease Control* (CDC) (as cited by Moss and Carlo, 2019) in 2017, a rapid increase of 10% of deaths were related to overdose. That equals to 72,000 American's who fatally overdosed for the year. 87.7% of the increase of overdose deaths were related to synthetic opioids (Moss and Carlo, 2019). Even more recent research indicates that in 2018, those numbers intensely increased to more than 130 people who fatally overdosed daily to opioids (NIDA, 2019). That is 48,000 American overdosing from opioids alone. Police are often in contact with an addict at some point in their addiction. Logan et al. (2006) explained, positive interactions with police can influence help seeking behaviors.

A car accident and a prescription for pain relief can lead a person down a road to addiction. According to the *Congressional Digest* (2018), in 2015 two million people had a prescription opioid addiction and 591,000 suffered from addiction to heroin. Prescription drug abuse cost the United States 78.5 billion in health care, law enforcement, and loss of productivity (*Congressional Digest*, 2018). Furthermore, the sale of OxyContin grew from 48 million in 1996 to almost 1.1 billion in 2001 (Van Zee, 2009). Van Zee (2009), explain the easy availability of OxyContin coincided with the increase of abuse and addiction. In 2010, the government decided to intercede on the mis-use of prescribed opioids by placing restrictions on the prescriptions. However, at that point many Americans were already gravely addicted (Stoffers, 2018). Quinones (2016) researched and studied the opioid epidemic and concluded, people who have been prescribed an opioid for pain risked being addicted and needing it every day. Yet, the knowledge of this information may be unknown to officers who hold the idea addicts choose to abuse drugs willingly.

Furthermore, the drug overdose rate is now the main cause of accidental deaths (NIH, 2018). Although prescription drugs were responsible for the health crisis of addiction, illicit drugs such as heroin, and synthetics are now contributors to the problem (*Congressional Digest*, 2018). Burke (2016) defined the opioid epidemic as an infestation that is the force behind opioid addiction, degrading health, high crime rates, and destructive to families (Burke, 2016).

As a result of the war on drugs, which increased contact between addicts and police, King (2008) explained that Ft. Worth, Texas experienced an 81% increase in drug arrest between 1980 and 2003. The offenders ranged from experimental users, addicts, and distributors. Nonetheless, they have encountered police. Thoumi (2012) writes that social reform is the only solution to the world's drug problem. Police perceptions of addicts may be influenced by the current policy and

war on drugs. This policy has initiated an approach to be tough on drug offenders. Drug enforcement, such as arresting a drug offender for possession is seen in the law enforcement community as bean counting and viewed as a competition between each other. Competing for the most arrests from drugs, or the largest weight in drugs earns the winning officer departmental respect (Gaines and Kremling, 2014). Conducting massive arrests for drug offenses seem to be counterproductive and is proven it does not prevent or stop illicit drug use (Gaines and Kremling, 2014).

The Correlation of Drugs and Crime

Contributors to negative perceptions officers may have towards drug addicts could rely on the crime addicts may commit. When responding to criminal activity and learning through investigation the offender is a drug addict, the officer may be persuaded to hold negative perceptions of all addicts. According to Mitchell (2016) as the war on drugs continue, the legacy of the 1980s, has been to arrest all drug offenders even anyone in possession of a small number of drugs (Mitchell, 2016). Furthermore, Gaines and Kraska (1997) mention that criminal activity has been known to change with the level of heroin consumption. They further add, many offenders arrested for robberies, theft, and, burglaries use cocaine during the commission of the offense to support their drug habit (Gaines and Kraska, 1997). Jorgensen (2018) proved in a survey that 56% of officers strongly feel drug involvement leads to other serious crimes.

A study was conducted on the correlation between drug use and crime. The data showed, drug use has a strong commonality with offenders who are booked into correctional facilities for criminal offenses (Harrison and Gfroerer, 1992). The U.S Department of Justice explained a close link between drugs and crime. Criminal activity of violent crime committed by drug offenders was reported at 26.1 % in 1994 (U.S. Department of Justice. Table 1. 1994). In an

attempt to explain why addicts commit crime, Dobinson and Ward (1985) analyze factors in which the effects of drugs induce the addict to commit the crime. Furthermore, the effects cause the drug addict to engage in delinquent behavior that will contribute to the buying the drugs (Dobson and Ward, 1985). Hunt, (as cited in Belenko and Spohn, 2015) explain a survey in 2005, which included county law enforcement and the Association of National Counties, as many as 58% of officers believed methamphetamine was the popular drug of choice and the drug problem in their county. Most participants in the study explained that methamphetamine had a connection to robberies, burglary, and, domestic violence (Belenko and Spohn, 2015). Inciardi (as cited in Inciardi and Cicero, 2009) described many residential burglaries that occur in the United States each year show prescription drugs are a major objective of these crimes. Morton (as cited in Szalavtiz and Rigg, 2017) discussed cocaine as a link to violence among people who are already predisposed to it, because of the violent behavior the user experiences.

However, according to Dai (as cited in Dobison and Ward, 1985) opioid addiction is not the primary cause for criminal activity but is a consequence to the environmental factors of the addict's life. A lack of motivation could result in the lack of committing crimes. This may disprove that drugs create crime by addicts (Gaines and Kraska, 1997). However, more significant research is needed for the determination. Moreover, Gaines and Kraska (1997) explain a study proved, opioid users committed a serious crime before their first use of heroin. As the person became addicted, nearly all of the participants in the study reported a three- and half-year elapse from their first serious criminal offense (Gaines and Kraska,1997).

Public Perception and Stigma of Drug Addicts

According to Corrigan et al. (as cited in Sattler, Escande, Racine, and Goritz, 2017) addiction to illicit drugs seems to be the most disgraced and stigmatized condition in America.

Sattler et al. (2017) explained in a recent survey, data showed the public viewed people with a drug addiction in a condemning light in comparison to those of a mental illness. Public attitudes displayed drug addicts as blameworthy and correlated them with a negative stigma (Corrigan, Kuwabara, and O'Shaughnessy, 2009). The public's attitudes, and perceptions of people with drug addiction have serious consequential effects on the drug addict (Sattler et al., 2017). Societies discontent with addicts can persuade police to acquire unfavorable opinions. Illicit drug use by policy is criminal and results in legal intervention and punishment. Police enforce laws therefore, a drug addict is essentially breaking the law, so it is important to know the perception officers gain from their interaction with drug addicts. Research reviewed has proven, negative attitudes can cause the person who is addicted to continue the use of substances (Buchman and Reiner, 2009).

The stigma of drug addiction may be influenced by many factors including a character flaw (Sattler et al., 2017). Research proves, stigmas interfere with recovery (Rivera et al., 2014; Green et al., 2013). The stigma of addiction often separates the addict from the community and their family. This can create isolation and separation so the addict hides from the embarrassment they encounter through their addiction (Volkow and Ting-Kai, 2004). Although, the community may exhibit a negative stigma of drug addicts, they can help produce intervention and rehabilitation (Volkow and Ting-Kai, 2004). If police are the forefront of the community, then their intervention is just as critical. It is imperative addicts interact with the community (Volkow, and Ting-Kai, 2004). Barry et al. (2014) thoroughly explained a study with participants who held negative views of people with drug addiction. The study showed participants were unwilling to allow a drug addict to marry a family member or even work with them. Barry et al. (2014) further added prejudgment and discriminatory acts from the

participants against drug addicts were viewed as acceptable. In the same survey conducted by Barry et al. (2014) respondents did not approve of any policy to support treatment of drug addicts. There is simply a lack of care for addicts based on stigma and stereotype. Moreover, it is important to understand drug abuse and addiction as a mental illness (Olsen and Sharfstein, 2014). However, addiction and drug addicts are overlooked and stained with a stigma as a moral weakness or a choice by the user (Olsen and Sharfstein 2014).

In addition, the on-going stigma that is associated with opioid and heroin addiction is unhealthy and prevents the user from gaining the help they badly need (Olsen and Sharfstein, 2014). According to Matthews, Dwyer, and Snoek (2017) addicts self-stigmatize and there is a cause behind it. The shame in which addicts feel, is a continuance to live in disgrace and humiliation based on the public's stigma and perception associated with their addiction. Negative stigmatization influences society and policymakers, which generates the same negative view to be carried over to police. Moreover, Matthews et al. (2017) defines the public's perception and the stereotype towards addicts, by including the names as: "junkie, doper, dopehead, druggie, and freak" (p 280).

Historically, researchers have studied drug abuse to disapprove the myths and misconceptions of drug addiction (NIDA, 2010). NIDA (2010) described in the 1930s when researchers began to study addictive behavior in people addicted to drugs, they found that society viewed addicts as morally flawed and lacked willpower. In addition, the message that shaped societies response to drug abuse is addressing it as a powerless condition of the weak who intentionally violate policy (NIDA, 2011). Perceptions and attitudes of the public towards drug addicts help create policies that characterize people who use drugs as, unimportant citizens, and labeling them as scapegoats for other issues (*Global Commission on Drug Policy, 2017*).

Furthermore, it continues, that as addicts continue to use drugs, the stigma attached remain to dehumanize drug addicts (*Global Commission on Drug Policy, 2017*).

Corrigan, et al., (2009) agree perceptions of people with drug addictions are often viewed by society as dangerous. The efforts made by society are to avoid drug addicts yet, place those with mental illnesses in highest regard, while overlooking the needs of drug addicts and labeling them as a public nuisance (Corrigan et al., 2009). Livingston, Milne, Lan Fang and, Amari (2011) clarify a reason addiction is a public stigma may be, people with the condition of addiction are perceived as having control of their addiction. Therefore, addicts should be held responsible and blamed for their choice in abusing drugs (Livingston et al., 2011). Public perceptions that drug addicts could stop abusing drugs contradicts with the complexity of addiction and further demonstrates, the insensitivity and ignorance of the notion (Staff, 1997). Judging and categorizing people into groups in a normal behavior (Matthews et al., 2017). Misconceptions and myths obtained through the public view could be contributors to the opioid epidemic. Better avenues should be implemented to help educate the public, and policymakers of the addictive nature on the brain (Staff, 1997).

Police Perceptions of Drug Abuse

Research in criminal justice is expansive in exploring several topics. However, police perceptions of the drug addict are nearly absent and unexplored. There is almost no known data of police perceptions of drug addicts. This missing data and information could provide critical insight into drug addiction and influence policy, while additionally prompting recovery. Law makers consider the opinions and perceptions of police since they are the ones applying the law (Jorgensen, 2018). Petrocelli et al. (2014) confirms, by failing to understand police perceptions of drugs and drug policy we are abandoning vital information that could assist in law

enforcement. In a rare study, Jorgensen (2018) explored police perceptions of drug use, which transpired from Wilson et al. (1985). The study showed, officers felt punishment for selling heroin and cocaine should result in prison time, yet those convicted for selling marijuana should only serve a minimal time in jail. This explains the view officers have which may relate to societies acceptance of marijuana use. Takebe (2013) explored the public perceptions of police legitimacy where morals and values were in question. Wilson (as cited in Tankebe, 2013) clarified morality explaining by the concept that all humans are of equal treatment and value, which therefore entitles them to the same respect. Watson et al. (2012) described a study conducted in Canada, where police reported that drug addicts and users requested help to end their addiction. Some police officers explained, addicts hated their life and wanted to stop the use of drugs. Yet, many of the officers continued to describe their perceptions that addicts are selfish and disorganized people and only cared about getting high (Watson et al., 2012). An interesting take of this study by Watson et al. (2012) is respondents participated from two large agencies. There were different attitudes and perceptions from each. Ottawa participants advocated treatment for drug users, whereas officers from Toronto did not (Watson et al., 2012). Disentangling the negative relationship between police and drug users is important to combat the drug epidemic that claims so many lives of Americans.

Exploring police officers' attitudes towards certain crimes could offer insight to enforcement decisions (Logan et al., 2006). Logan et al. (2006) surveyed 315 officers to gain the perspective of police attitudes towards domestic violence. Drug abuse was added in addition to the crime. Logan et al. (2006) concluded that officers felt tougher punishments are appropriate for domestic violence offenders who used narcotics, versus those who did not abuse drugs. It was also noted, officers felt it was more suitable to allow domestic violence offenders who were

not drug abusers attend treatment programs in comparison to offenders with substance abuse issues (Logan et al., 2006).

Policymakers formulate laws that are available to protect and assist powerless people. However, when policy makers view drug addicts and their addiction as self-created, and undeserving of support, preventive measures that ultimately include reducing the overdose rates are not financially supported (Staff, 1997). Research has proven, unexplored research is the perspective of police officers as they enforce drug policy (Green et al., 2013; Ward et al., 2018). Police are the forefront of the drug war and arrest millions for drug offenses a year (Petrocelli et al., 2014).

In an effort to gain insight and knowledge to police officers' perceptions of drug use, Petrocelli et al. (2014) surveyed drug interdiction officers and found that the majority of officers felt methamphetamine was the most abused drug. Officers throughout America, according to this study, believed combating drug addiction is won by incarcerating the addict (Petrocelli et al., 2014). The study by Petrocelli et al. (2014) showed police held harsher punitive views for drug use, and although officers felt marijuana was less harmful, they still believed it should not be legalized.

Conclusion

Police exercise an abundant amount of power and authority through discretion. Decisions that are made from attitudes and perceptions can change an individual's life (Johnson and Lafrance, 2016). A cohesive factor that was discovered during research for this thesis is the increase of fatal overdose rates, and the lack of literature on police attitudes of drug addicts. The underdeveloped data pertaining to the drug addict (person) and not drug use, should change the course of action in research. Since there is a lack of literature to emphasize the perceptions

officers have towards the drugs addict, reviewing the limited data of perceptions towards drug use and other crimes offered an insight to attitudes of police towards general offenders.

Chapter 3

Methodology

Introduction

The purpose of this study is to explore perceptions and attitudes police have towards drug addicts. Characterizing addiction through previous research and literature was added since the researcher hypothesized it to influence officers' attitudes. Furthermore, current literature on police perceptions and attitudes towards drug addicts is so underdeveloped researchers can draw no clear conclusions from it. After receiving an IRB approval, the researcher obtained primary data obtained for this study through surveys and interviews. Data was collected from police officers in a small county in the north Texas region on the outskirts of a large metropolitan area.

Based on the geographical area, sample size was small for the study. However, there is research that proves sample size is either an effective tool or ineffective tool for studies. Specifically, relating to sampling in criminal justice, Hinkle, Weisburd, Famega, and Ready, (2013) articulated that even in small cities serious crimes occur and need to be studied. Although there are limitations in small sample sizes based on low statistical probability, there is currently little information on crime in smaller cities which can be problematic in drawing conclusions overall. Hinkle et al. (2013) stress there is an importance of conducting research in small cities.

Furthermore, due to a lack of research on police perceptions of drug addicts, the researcher could not draw secondary data. However, research for comparison data by Jorgensen (2018), who explored police perceptions of drug use, and research by Petrocelli et al., (2014) who identified police perceptions of drug enforcement was located. In addition, this study focused on addiction in order to identify any misconceptions that could possibly affect police

attitudes. One goal of this study is to explore likely contributors to police perceptions and attitudes towards addicts. The study also examined other possible contributing factors by referencing data of police perceptions of other crimes while focusing on a comparison to drugs and public perceptions of addicts. Moreover, the study explored and reviewed data referencing the opioid crisis to determine a possibility of a relationship to police perceptions.

Characteristics and Demographics

A sample from the population of police officers in America came from a group of officers in north Texas. Since the motivation was to obtain perceptions and attitudes from patrol officers, participation was restricted to a patrol function only. Detectives or specialized unit officers were considered out of the scope of this study. Participants' daily task consisted of basic patrol functions, such as answering calls for service during daily routines and initiating routine traffic stops for traffic infractions. Characteristics are not disclosed as it could be identifying of the participants (Green et al., 2013). For the quantitative study in an agency of roughly twenty sworn officers, volunteers consisted of eleven participants with a response rate of 55%. Participants median years of experience were nine years. The median age of the participants was 37 years of age. Participants held all ranks in a patrol function. The highest-ranking participant is a Chief of Police, and the lowest rank held is an officer. The sample size was small and does not represent the population of law enforcement.

The qualitative study of semi-structured interviews consisted within the same county of roughly thirty-two additional sworn officers. A response rate of 35% volunteered which included nine participants. Only two of the participants from the survey participated in the interviews. The average age for this study was 37. The officers averaged seven years of service.

The rank of the participants consisted in all ranks in a patrol function. The highest rank participating, was a lieutenant and the lowest in rank, an officer.

Without a recent census, the general citizen count in the area where officers patrolled and assisted sister agencies in patrol functions roughly varied from 50,000 plus. This area was accessible and convenient for the researcher. Additionally, a main factor in choosing this area relied on a main interstate that travelled through the region. Officers considered this interstate a drug trafficking trail and a main thoroughfare where drifters and travelers often relocate across the U.S. for easier methods to buy and use of drugs. The interstate stretches from the border of Mexico and south Texas to the northern area of the U.S. Officers eligible to participate in the survey held a patrol position from December 2018 to March of 2019.

Data Collection

Quantitative

After receiving authorization to recruit and correspond with participants, officers were invited to participate in a survey either at the start or the end of their shift. The times of recruitment varied from 6 p.m. or 6 a.m. on unspecified days. The agency size consisted roughly twenty full time patrol officers. Of the twenty sworn patrol officers, eleven volunteered (response rate of 55%) to participate in survey. The researcher gave a verbal explanation detailing the study to officers. Officers were asked, upon deciding to participate in the study to sign a consent form. The consent was attached with the survey in an unsealed white letter envelope. Appendix A displays the survey. Volunteering participants received an unsealed white envelope containing the survey and consent. The researcher made note and documentation of volunteers who retrieved the white envelope for accountability. Volunteers who retrieved the white envelope with the survey either completed the survey during briefing or took the survey to

complete at their convenience. This method prevented participants from influencing one another. Once all participants completed the survey, participants placed the data and consent form back into the white envelope, secured it with a sealing mechanism, and placed in the researcher's mail box. Participants notified the researcher once they secured completed data forms in the box. Four respondents physically delivered the secured data to the researcher in passing.

Qualitative

Thematic analysis is beneficial as it forces a well-structured approach in examining data by helping produce a clear report of the findings (King, as cited in Nowell, Norris, White, and Moules, 2017). To strengthen data analysis, a qualitative method, of semi-structured interviews containing twenty questions, preceded the survey. Recruitment for the interviews occurred face to face or via phone/text communication. Nine participants agreed to be interviewed. Based on shift differences and limited availability due to law enforcement assignments, seven participants requested the interview be emailed for completion at their convenience. Upon receipt of the signed consent forms, which were given directly to the researcher, the researcher submitted interview questions by electronic mail (e-mail) to the volunteer. The interview questions are displayed in Appendix B. Thereafter, the researcher received the interview responses by e-mail. Two participants were interviewed at a north Texas law enforcement agency. It was requested participants sign a consent prior to beginning the interview process. In order to protect the privacy of the participants and to alleviate any possible reprisal based on the participants opinions, interviews were not recorded. However, interviews were transcribed, with the participant's review and verification at the end of the interview. Copies of the interview questions with transcribed answers were e-mailed to participants.

Instruments

The quantitative survey consisted of 20 questions which included four questions regarding characteristics and demographics, thirteen close ended questions with Y/N option, which the researcher later coded, and three open ended questions. The researcher collected and incorporated the data onto a excel spread sheet.

The qualitative aspect of this study consisted of semi-structured interviews with open-ended questions. The participants were granted the opportunity to express thoughts and opinions on each question. That data was transcribed in a Word document on the computer and saved to a protected file listed as “interviews.” Participants who responded to the interview by preference of e-mail, responded as a reply from either business or personal e-mail. Once received, the answers were transferred from the e-mail folder and placed into the same file as face to face interviews on a computer device. To differentiate between face to face interviews and respondents who participated by e-mail, titles in the file were labeled accordingly (i.e. name email or name and interview).

Data Analysis

The survey was generated by the researcher. Responses are dichotomous and coded. The survey was composed of 20 questions containing three open-ended questions. Question number 20, an open-ended question, gave the participant the option to explain and detail any feelings that had been developed through interactions with drug addicts. This question was added to the qualitative data analysis for a thematic review. The two remaining open-ended questions were eliminated from the data analysis for inapplicability to the study. Four questions pertained to demographics and characteristics of the participant. There are thirteen close ended questions that have been evaluated. The survey was presented to a sample of participants in north Texas. The

aim of the research is to evaluate police perceptions and attitudes of drug addicts. Also, it is the intention to explore characteristics of addicts that may contribute to police attitudes. The survey has one question that specifically centers on police attitudes and perceptions. The question, “Do you hold negative perceptions of drug addicts?” was coded in two responses. A second question to analyze contributors towards police attitudes of drug addicts, “Addiction is a disease.” was evaluated and responses were coded. “Do you consider drug addicts dirty and unkempt?” is coded in two responses. The third question was meant to evaluate contributors to police attitudes, “Do you believe drugs cause crime?” This question has been coded as two responses as well. The question, “Do you believe drug use is a choice?” is coded in two responses. The following question may pertain as contributing factors to police attitudes, “Have you arrested the same drug addict more than once?” the replies are coded in two responses. Furthermore, the question, “It is hard to show sympathy to an overdose victim.” has been coded in two responses. Although this question is broad in a sense, and analyzing it can create many misconceptions, the question serves as a baseline of what the participants perceive. The question is also analyzed as a possible contributor to evaluate police perceptions of the opioid epidemic. To generalize and gain a concept of police knowledge and perceptions towards drug addicts and addiction, questions regarding the addict’s cognitive behavior is examined. The question, “Do you believe drug addicts suffer a mental illness?” was coded in two response. The question “Do you believe addiction comes from a life trauma?” was also coded in two responses. To determine if police believed addiction is genetic, participants were asked, “Do you believe addiction is heredity?” The responses are coded. The researcher coded responses to, “Do you know a family member or someone close addicted to drugs?” Participants were also asked, “Do you consider a drug addict the same as you would a mentally ill subject?” replies are coded. Since law enforcement officers receive little training in addiction, the survey asked participants, for public policy “Would you

like more training in addiction?” responses were coded. Frequencies were reported and presented in the following chapter (see Table 1).

Interviews Analysis

The researcher generated the questions for the interviews. The questions originated from missing information or inconclusive data from the survey. The purpose of the interviews was to strengthen overall data of the thesis. The interview contained 20 open-ended questions where each participant was given the opportunity to explain responses in detail. A selection of some questions analyzed in the quantitative study were applied to the qualitative study with additional questions. Administering interviews with a thematic analysis created the opportunity for details to be explored, while notating participants true feelings.

Nine respondents agreed to participate in the interview. Although the agency is small in comparison to the large population, the qualitative data gave insight from the participants descriptive themes as they narrowed their perceptions and feelings of drug addicts. Based on the thematic analysis several limitations can impose on the research. Braun and Clark (2006), describe the thematical approach as a possible disadvantage to the researcher, by the lack of method structure to analyze data. Braun and Clark (2006) also describe the thematic analysis as “demarcated” (p. 97). However, due to the small sample size, and conjunction and comparison with the structured close ended survey, the thematical approach appeared more appropriately for data analysis. At the start of the interview the researcher encouraged the participants to speak openly and candidly in order to reveal personal feelings. Participants were informed, if they were unsure how they felt, to say that. It was reiterated, privacy and identity would be masked. So that a thoughtful insight, with in-depth feelings could be analyzed with the quantitative data of

police attitudes of drug addicts, interviews were constructed for theme assessment. Corden and Sainsbury, (2006) explored researchers' success by utilizing the thematical analysis with the use of participants quotations. Corden and Sainsbury (2006), concluded verbatim quotations are an effective tool when applied to research. Quotations are included just as they were received. There is no "clean-up" process on sentence structure. In the presence of spelling or other errors "(sic)" is entered in the quotation. All quotations inserted are those directly from participants. This is to ensure the trustworthiness and integrity of the analysis.

There were three themes that revolved throughout the data analysis. Participants narratives and interviews are a reference to correlate with human experience (Floersch, Longhofer, Kranke, and Townsend, 2010). It is the attempt and goal of the researcher to quote verbatim as the participant's expressed their thoughts as they relate to their experience and perceptions. Nine participants ($n=9$) volunteered for the interview. As mentioned in the previous chapter, from the nine participants only two were face to face interviews. The remaining participants corresponded responses to questionnaires through e-mail. Gaining insight to the perceptions and attitudes of police by open ended questions and interviews allowed an explanation by police rather to be limited to a response. Through interviews the researcher formed a method of reliability. The data for the thematic analysis was conducted using a step by step guide of instructions implemented by, Braun and Clarke (2006). Once the data was retrieved from participants, the researcher began to review and read the transcripts and questionnaire responses submitted and verified. This phase gave the researcher the ability at-first glance to record any applicable information. Although time consuming, each response was repeatedly read. The process was to ensure data familiarization by paying attention to consistent

themes. Braun and Clarke (2006) identify this method as “reading immersion”. Through rigorous repeated reading to the extent of almost memorization of the transcripts and questionnaire responses, the researcher obtained, noted, and highlighted in a notebook any valid and important information. Through repeated reading, the researcher observed patterns and phrases. The transcripts and questionnaires contained thoughts and raw information from each participant that revealed an idea of response types.

According to Braun and Clarke (2006), a second phase in data analyzing is described as the coding process. Through this method, after thoroughly reading the responses, repeated ideas and interesting phrases were identified and coded in a notebook by the researcher. Included in the coding process were ideas that may be inconsistent to the thesis. This information was added and could later be refined. Contradicting information obtained and added to be certain that all data was examined (Braun and Clarke, 2006).

In the next phase, the goal was to locate common themes that continuously were presented and developed. Braun and Clarke (2006) describe the third phase as a focus on the analysis which is an extensive phase of coding. This section of data analysis, according to Nowell et al. (2017) is descriptive in nature, which can also entail combining codes from a category to a theme. All data collected for coding is given equal attention to be certain all information is assessed. The repeated idea and phrases from participants were transformed from the notebook, to an excel spread sheet. Codes were placed in a category and labeled as a theme. By coding the data and listing the information on a spreadsheet, the focus was centralized on key ideas pertinent to the study (Nowell et al., 2017).

The next phase required reviewing themes. During this process, any irrelevant data that was not applicable to the thesis was eliminated. Codes grouped as a theme gave valid

information, that also related to the overall story (Fielden, Sillence, and Little, 2011). By narrowing down the codes, three themes developed: acquired views, police sentiments, and attitudes of action. At the completion of this stage in data analysis, clear formulated concepts were retrieved and applied to the relation of the overall story. This information was then transferred into the next stage where the results are displayed and organized for clarification and solidity to support the thesis.

Chapter 4

Results

Introduction

The purpose of this thesis is to evaluate police attitudes towards drug addicts and what are the characteristics of the addict that contribute to police attitudes, and how does the opioid crisis pertain to police attitudes. It was observed while analyzing the data for the quantitative and qualitative results there is a noticeable difference in responses. A change in behavior performance appeared to occur when the participants were aware the assessment and observations of the research were conducted by the researcher whom there is a familiarity with. This creates a bias that can hinder the outcome of the research. Nguyen et al., (2018) explain this as the Hawthorne Effect. Furthermore, this is detailed more thoroughly in the limitations section.

The results for the quantitative and qualitative data are broken into sections, examined, and explained separately. The first section will describe the quantitative results and variables using a frequency table and cross-tabulations. The second section will describe a thematic analysis of interviews.

Quantitative Results

Quantitative research is beneficial in examining data that links drug abuse and crime, and additionally, it's effective in influencing policy for the criminal justice field (Worrall, 2000). In the survey, participants were restricted to two responses. A few participants bypassed the restricted response selection and instead handwrote narratives or ideas explaining their answer.

Police Perceptions of Drug Addicts

To evaluate police perceptions of drug addicts, a direct question, "Do you have adverse or negative perceptions of drug addicts?" was asked on the survey. Out of eleven participants six

responded, “yes” (55%) indicating they hold negative or adverse opinions towards drug addicts. Five participants responded, “no” (45%) indicating they do not retain negative perceptions of drug addicts. This indicates, police perceptions could be negative towards addicts.

Characteristics of Drug Addicts that Impose Police Perceptions

The second group of questions relating to a thesis point, was establishing characteristics that contribute to police perceptions. “Do you consider drug addicts dirty and unkempt?” had a response (yes), at 55% agreeing, they do find addicts dirty and unkempt. However, 45% (no) disagreed they do not find addicts dirty. Participants were divided in believing addicts are dirty or unkempt. The participants unanimously agreed at 100% that “drug use is a choice.” All eleven participants responded with, “yes”. Some comments that were added by the participants are important to note. For example, one participant added with the response, “It is peer pressure or want to be cool.” A second participant informed, “I think people make conscious efforts to use drugs.” One participant documented, “the person chooses to take drugs” and another,

I believe that people make a choice on whether or not to use drugs. Obviously, most use as a recreational choice. However, others use as a means of coping with issues that exist in their life. Either way, they make the choice to use and often become addicted and lack the ability or skills to quit.

To support participants belief, drug use is a choice, nine out of eleven participants responded “no” (81%) by disagreeing that “Addiction is genetic or hereditary”. One respondent did not answer the question; therefore, it was categorized in a “missing” data. To determine if there are repeated arrest for the same addict the question, “I have arrested the same addict more than once” appeared on the questionnaire. Responses were restricted to “True or False”. The purpose of this question was to examine the occurrence that officers may arrest an addict. The “True”

response showed 91% indicating participants have arrested the same addict more than once. One participant responded “False” (9%) indicating no repeated arrest for the same drug addict.

Opioid Epidemic factors of Police Perceptions

To examine if there is a correlation between police perceptions and the opioid epidemic, the question “It is hard to show sympathy to an overdose victim” showed a split analysis of six respondents who disagree indicating “False” (55%) and relaying they can show sympathy to overdose victims. However, the remaining five responded, “true” (45%) that it is difficult to show sympathy to overdose victims.

Public Policy Concerns

The following questions were added to the survey to examine if there is a conformity of the literature review of addiction and police perceptions. To address any policy concerns for the addict or training for law enforcement, questions to compare data and literature on the addicts’ cognitive state were assessed. Participants were divided in agreeing that addiction stems from a life trauma (55%) with six responding “yes”. Five respondents (45%) disagreed with the belief, addiction does not come from life trauma. The survey conducted displayed 90% of participants believed drug addicts are not considered nor should be considered the same as a mentally ill subject.

However, in contradiction, 64% of participants agreed most addicts suffer a mental illness. One participant did not answer and was categorized as “missing” data (9%). This participant instead added an explanation, “Not an absolute I believe there is a mixture of individuals that use narcotics.” The remaining participants agreed addicts suffer a mental illness with three participants choosing “no” addicts do not suffer a mental illness (27%). When asked if addiction is a disease, eight out eleven participants (72%) responded their belief that addiction is

a disease. Whereas, only three (27%) disagreed, and responded “No” to indicate it is not a disease. In the survey, only 63% of participants knew someone close to them who is an addict. Furthermore, when participants were asked if they would like additional training in addiction, only eight out of eleven participants (82%), agreed they would like to have more training. Where one participant did not respond the data was entered in the “missing “category. Below the data is conveyed in a frequency table (Table 1).

Table 1. *Descriptive Statistics of Police Perceptions of the Addict*

Variable	<i>f</i>	%
Negative perceptions of drug addicts		
Yes	6	45
No	5	55
Total	11	100
Drug addicts are dirty and unkempt		
Yes	6	55
No	5	45
Total	11	100
Drug use is a choice		
Yes	11	100
No	0	0
Total	11	100
Addiction is genetic or hereditary		
Yes	1	9
No	9	82
Missing	1	9
Total	11	100
Arrested the same addict more than once		
True	10	91
False	1	9
Total	11	100

Table 1 (Continued)

Variable	<i>f</i>	%
Hard showing sympathy to overdose victims		
True	5	45
False	6	55
Total	11	100
Addiction comes from a life trauma		
Yes	6	55
No	5	45
Total	11	100
Consider addicts as a mentally ill subject		
Yes	1	9
No	10	91
Total	11	100
Addicts suffer a mental illness		
Yes	7	64
No	3	27
Missing	1	9
Total	11	100
Addiction is a disease		
Yes	8	73
No	3	27
Total	11	100
Has a family member or knows someone addicted		
Yes	7	64
No	4	36
Total	11	100
Drugs Cause Crime		
Yes	11	100
No	0	0
Total	11	100
Desire for training in cognitive state of addiction		
Yes	9	82
No	2	18
Missing	1	9
Total	11	100

Qualitative data

This section contains data from the interview transcripts, and questionnaire responses. A thematic analysis was applied, and data derived encompassed significant thoughts from

participants that evolved from questions pertaining to police attitudes towards addicts. By administering semi-structured interviews, data retrieved gave insight to in-depth perspectives and concepts that clarified valid information (Boyatzis, as cited in Braun and Clark, 2006). Three categories have been identified through processing themes. They are Acquired Views, Police Sentiments, and Attitudes of Action. Through the interviews and questionnaires participants were able to express their thoughts and relay the perceptions they have towards addicts.

Acquired Views

This theme developed as participants relayed their perceptions and views, they perceive towards drugs addicts. Throughout the course of this theme, participants expressed their view of drug addicts as blameworthy for their addiction. Many participants conveyed their view of addiction as a choice or a decision the addict made. The word “choice” was expressed throughout the questionnaire, 22 times by nine participants. One participant explained, “I believe drug use is a choice. It was a conscious decision to use drugs for the first time and ultimately their decision led to continuous use.” Other participants confirmed this view as one wrote, “I know addiction is awful to deal with and has lifelong problems, but it is a choice.” Participants did not waver on their perspective of drug use and addiction as a choice. Consistency in the theme occurred when a participant explained, “Life in general is choices.” A veteran in the law enforcement expressed a view of addiction and drug use by writing:

I believe that people make a choice on whether or not to use drugs. Obviously, most use as a recreational choice. However, others use as a means of coping with issues that exist in their life. Either way, they make the choice to use and often become addicted and lack the ability or skills to quit.

A pattern was developed throughout this theme as participants continued to explain addiction as a choice and decision. Below a participant explains why the adversity surrounds addiction and drug use.

I do have a very adverse perception of drug users/addicts. They make poor choices every day. Time and again these people are Given an opportunity to change and be a positive member to society through the justice system, and/or government programs. To help them become sober. Some try, most don't. It's a shame.

Additionally, this participant explains a point of view on addiction that coincides with the theme of choosing the addiction by writing,

I believe addiction is a choice for the most part. It is a choice in the fact that you have to choose to be sober. If you do not choose to be sober than you are choosing to be addicted.

For participants to theorize their version of why addiction occurs is simply founded on their experience with addicts. "I feel that drug users choose the way they are. I don't have any sympathy for that because they are only hurting their family members if something happens."

There is a common expression that a lack of sympathy from participants exist, based on their perception that addicts choose to abuse drugs and become addicted. All the participants expressed some degree of negativity when they considered a drug addict. One participant described a perception of addicts by responding, "I believe addicts are unpredictable. I believe drug addicts pose a greater threat to society, personal property and health of our country." While participants distributed negative views of addicts in responses, one participant admitted, "In my

encounters, I tend to prejudge the addict.” Also, an addict’s lack of self-respect was repeated in this theme.

Q: What is the first thought that comes to mind when you hear “drug addict”

P: Pill poppers and needles is the first thought of addicts. The majority of addicts I deal with either fall into one of those categories. They are addicted to meth or heroin.

Other negative views communicated describe the addicts destructive path and how it affects the rest of society, “They are a nuisance because they destroy property and lives.” Another participant described how upsetting it is to arrive on vehicle accident scenes and find the driver under the influence of some type of narcotic or alcohol, while the other driver involved a sober fatality victim at the hands of an addict under the influence: “I have seen many users Get high while driving or drive shortly after. These people drive intoxicated and cause deadly crashes and destroy property. This leaves the rest of the positive members of society to clean up their mess.”

A third participant revealed in a detailed response,

Alcoholics and drug users regularly crash their cars while driving intoxicated. It is never the sober driver that walks away from the crashes. We see it every day on the news lately about fatality crashes and wrong way crashes that are attributed to some form of intoxication.

One participant expressed a discontent by writing, “Addicts ruin lives”. Many others supported the statement in their interviews by adding, addicts are a nuisance, and many are lazy “until it’s time to get high”. One respondent expressed, “They are a nuisance. They drive crime rates up, they drive health costs up, they drive insurance cost up, and a number of other things.”

Adverse and unfavorable opinions are not uncommon in this theme. Participants expressively agree that a contributor to negative perceptions, could relate to the addicts' inability to tell the truth. This idea transpired when a question about vehicle searches was presented to the participants. Many participants gave accounts of searches that produced hazards and dangerous paraphernalia. Through the searches it was expressed, addicts always lie about anything that could hurt an officer in the vehicle. One participant tells a story of a time when a vehicle search was being conducted, "I usually ask them about needles or anything that can cut, stick, or poke me before I search but everyone lies to you." The participant went on to describe how the needle almost punctured the participant. This concept is relayed in responses throughout the interview with a sense of anger when a participant is almost exposed to hazardous disease and infections at the cost of an addict lying. One participant expressed, "I don't want to get stuck with a needle and catch some form (sic) of sickness." There is an agreement presented by the participants that when addicts lie, it affects personal safety, which therein changed the perceptions officers have acquired. It was conveyed by a participant, if an addict is telling a story, and if the story sounds "too good to be true" then the participant immediately believes the addict is lying. Another participant explained, "You have to really be careful. I wish they would create a law with a high charge for lying to an officer about uncapped needle."

Police Sentiments

This theme was formulated by expressions from participants when they explained they did not understand addiction or why it occurs. "Sentiments" simply describes the feelings the participants retain on the overall issue. One participant responded, "I try to ask myself how anyone could get to this point or why they would want too. When I ask myself this, I can never find an answer." Furthermore, there were those who described sympathy they may have

obtained for some addicts as it is a “case by case” review as one participant puts it. In a very detailed and lengthy explanation a 16-year veteran wrote about a perspective obtained throughout the years of being an officer. In order to give the full detailed explanation, without eliminating any of the emotion behind the view, the quotation is verbatim:

Every situation is different, but generally I have a sense of sympathy/sadness on how an individual reaches a point in their life when they allow a substance to take control of their life. How did they reach a point where they need drugs, and it’s the only viable solution to the struggle/adversity they are facing? That perspective is lost in that their drug use will only deepen their struggles not alleviate that problem that has taken them to this point in their lives.

During theme assessment, data analyzed showed some participants who expressed a “sore spot” for addiction. It became apparent the participants who expressed a degree of sympathy were able to empathize, because they have family members who struggle with addiction. Of the nine participants, five admitted having family members or knowing someone close who is an addict. A five-year veteran described empathizing with other family members of addicts who are battling the opioid addiction, “I have firsthand knowledge, of a family member that could not quit, it was horrible. The worst part was not being able to help.” When a ranking participant was asked, are there any negative perceptions of drug addicts, the response was, “No, I have seen this stuff growing up.” One participant described having more than one close family member who is struggling with addiction to methamphetamine. Meanwhile, another expressed a “raw” feeling, and having a “sore spot in the soul” from responding to the questions. The participant included, that an immediate family member succumbed to a heroin overdose recently. The victim was only eighteen. Another participant explained the cause for a lack of compassion to addicts, “I

have had several members in my family attempted drug overdose so I can be less sympathetic than most.” Meanwhile, another participant believes, “Most need help and support. Once a family and friends give up, I feel it’s too late.” One participant shares the sorrowful feeling towards addiction, by describing, “In the end I feel bad for the addict or pity them.” Expressing sympathy for the addict’s family became common throughout the study. However, at the same time other respondent’s resentment towards an addict is not dismissed, one participant explained,

I hate to go on calls where a family member has taken in a drug addicted member and then they steal from them. You see these people who have tried to be kind and helpful. Then they are taken advantage of and are sometimes out thousands of dollars when the family member is done stealing from them.

As explanations of irritation mounted considering the addicts’ imposed stress on their families, participants describe frustrations from the continued drug use as one participant puts it,

I understand the anger and frustration that these Officers feel. You do get tired of doing the same thing over and over again and the person you are trying to save does not seem to care what the consequences are.

Moreover, recent exposure to fentanyl in law enforcement appears to have participants on edge. It was commonly referenced throughout the interviews that there is a sense of fear during contact with addicts. The unknown knowledge of the type of substance that is retrieved from an addict poses a great risk. As one participant reacts to the scare of fentanyl or opioids, “That is one of my biggest concerns. Just this week an officer overdosed, on what they believe was fentanyl, and passed out in his patrol unit while transporting a subject to the jail.” When a participant with ten years plus of law enforcement experience was asked,

Q: How does it make you feel to search a vehicle or personal property, and find uncapped syringes, narcotic residue, and other dangerous paraphernalia?

P: It happened to me. I was scared, upset. It could hurt me. Scared I might get infected. Upset because they knew where it was located but still enjoy playing games with police.

Another participant details the frustration felt towards addicts while searching their vehicle. Once it is revealed there are small children inside the vehicle with access to narcotics and dangerous paraphernalia negative attitudes are displayed. The participant describes, "If there are children in the car or they lied, I could harm myself or another officer searching the vehicle. That's frustrating." Another respondent gave an account of a vehicle search that was conducted. The participant explained the anger felt during the search,

I once searched a car that someone had put uncapped needles in a foam drink cup. When I picked it up one was barely sticking out the side and almost poked me. I was angry when I found it because they did not care that I could have been stuck with that needle.

A participant articulates how vehicle searches can initiate feelings of anger and frustration while searching and locating uncapped syringes. That participant further explained, "I don't want to get poked and catch a illness or sickness (sic)."

Nevertheless, although few, some participants were unsure how they truly felt about addicts. It appeared when they really thought about the question, they were inconsistent with themselves in responding. Some expressed anger and frustration, while others expressed

feelings of pity and sorrow for the addicts. The feelings participants expressed influenced their notion of drug addicts and how they respond and treat them in the field.

Attitudes of Action

This section identifies the themes in relation to the participants actions with drug addicts. The opioid crisis is mentioned in this section. The cause for the reference of opioids in this section is the emergency in finding a solution in public policy. Therefore, if we can understand how first responders feel and act about it, it can be easier to develop a plan of action. Contacts whether positive or negative with addicts have transpired. The safety issues are explained as participants describe actions that have left them with unfavorable perceptions.

Although not all encounters leave a bad taste for the participants, there are a few that recall positive interactions, and it is apparent it left the officer in good spirits. As one participant describes an encounter, he had with an ex-addict, it is worthy of citing the quote and its entirety to display how officers may perceive positive interactions. Location descriptors of the initial quotation were removed for privacy:

I have also dealt with people that have made the choice to get clean. One person in particular comes to mind. He stopped one night a gas station, and said, "Officer, do you remember me?" I looked at him. I couldn't remember his name but recognized his face. Apparently, I arrested him a year or so prior to this contact and he made the decision to get clean. He said that I set him straight. He was a heroin addict. Heroin is probably the hardest substance to quit. I am sure it's not easy to quit, but I do know it can be done.

Furthermore, another participant explains a similar incident, “I feel like building a rapport, being consistent and treating them with respect goes a long way. With that said, I will still take them to jail for their benefit.” When asked in the interview if overdose calls are a waste of time, the responses were mixed. One participant informed, “No matter how bad they get I try to always remember that the person is a human and deserves the respect of being a human.” While another explained, it is common to label frequently visited homes. One home, explains the participant, is no stranger to heroin and overdoses, it is labeled as the “overdose house.” While still recognizing the opioid crisis as mentioned in the literature, a participants’ attitude to frequent overdose calls is described as,

A life is a life. I responded to a call where a female had overdosed on methadone. I was the first officer on scene and began performing CPR. I was actually able to resuscitate the female and save her life. I was given a lifesaving award for that event and the female went on to live and kick her addiction.

This officer expressed a sense of pride when explaining the efforts put into helping an overdose victim who later got “herself together.”

Participants were asked about their attitudes on dispensing narcan to overdose victims. Considering the opinions and perceptions police have towards addicts, and recently certain geographical areas are supplying first responders with narcan, it was a critical to understand how participants felt about the topic. One described,

I believe that all humans deserve a chance at life. But if it comes down to a citizen, another officer, and an addict all needing naran at the same time the addict is going to be the last to get their dose.

Only a few participants relayed their desire to train and administer naran to overdose victims. A participant said, "I will do anything to save a life" and another said, "Yes, I would help an overdose victim." However, the consensus informed, officers should have naran, but only to assist each other in the case of exposure and expressed the elimination of administering it to the addict. Their responses consisted of, "No for overdoses. We should carry it only to help a fellow officer that comes into contact with it." Another participant said, "No, they chose to drug, so why should I be their EMT. Only EMTs should carry that. Not police." Another responded, "no there is too much liability involved in that."

The belief retained that addicts choose to use, and abuse drugs may have weight on why almost all of the participants believe the use of naran should be limited for officers' exposure only. Officers detailed futile attitudes of naran use. There is a sense of resentment in some participants that exposed itself through the interview responses. Participants base their perception from a series of views they perceive of the addict from past contact. A response, regarding fatal opioid overdose by one participant explains, "We talk about it later about how stupid people are for getting hooked on drugs or trying to commit suicide by overdosing." Then another participant who illustrates their view when responding to overdose calls, "First responders are constantly tied up on overdose calls because addicts are selfish and depend on everyone else to survive. We are dealing with drug users rather than focusing our efforts somewhere else to combat crime."

Another participant explained why it was no longer worth it to try and mentor and assist addicts, “I stopped trying to help them. I feel like it has never worked or succeeded when I have tried in the past.” This participant also explained the perception of having a lack of understanding of why an addict uses or abuses narcotics. It is also worthy of notating this participant is veteran with over eighteen years of service, and who at this point in the profession has essentially given up on attempting to mend addicts

Chapter 5

Limitations

Survey responses proved expectations which were less than desired because the complexity of the topic and lack of availability of participants. The small geographical area that was available produced a minimal participation level. During analyzing data of both methods, it was noticed there were difference in responses between surveys and interviews. The researcher was an employee of the agency where surveys were distributed. When surveys were given to the participants the researcher was in a police uniform and familiar with participants. However, the researcher was not an employee with the agency where interviews were distributed, nor in uniform when the participants were recruited. Based on this information, it appeared that some of survey responses were given to appease the researcher. The comparison between the quantitative and qualitative responses showed a clear altered behavior in the survey responses. Whereas, the interview responses produced open and true feelings of perceptions. Nguyen et al., (2018) described a researcher bias in explaining the Hawthorne Effect, which can disguise the true effect of the intervention. Based on that information, data was more effective from the qualitative results.

Officers were hesitant in releasing opinions that might be viewed as damaging towards a group or a certain population. Since officers are held to a higher standard with unbiased demands, contributing their true feelings could pose a risk to their reputation. The geographical area chosen for the study was convenient, with accessibility to the location. The researcher had direct access to the officers. Difficulties with schedules and timing created an obstacle in recruiting volunteers. Officers were requested upon volunteering to answer the survey sincerely. However, some officers expressed fear and ramifications in volunteering to participate

and exposing their true feelings. Although, the participants were reassured, all measures would be taken to protect their identity. This fear may have applied to volunteers when answering the surveys and interviews truthfully. Discussing the complex topic in an expressional manner posed a risk for the participants that could be detrimental.

Additionally, the small sample size created minimal data. Jorgensen (2018), explained a similar limitation in his study. In a department which employed roughly 3,500 officers, only 314 responded to the invitation to participate in the study that researched police perceptions. Furthermore, a lack of literature for comparison was limited for this research. Two available articles specifically related to police perceptions of drugs and drug use were located (Jorgensen, 2018; Petrocelli et al., 2014). An article published over thirty years ago on police perceptions of vice crimes (Wilson et al., 1985) is outdated and unattainable for the researcher at the time of the study. Since the sample size is small, the lack of participants and surveys imposed a limitation in data conclusion.

Moreover, close-ended questions in the survey appeared problematic for participants. Restricting and forcing participants to choose dichotomous responses resulted in limited data. This caused a hinderance for valid responses and created data with a low probability of accuracy. Due to the restriction of responses, some participants did not give a direct answer. Instead the data was missing, and it was discovered participants answered in their own words. Once the surveys were completed and reviewed, it became apparent important questions were omitted from the survey for unknown reasons. Therefore, this became an additional motivation for detailed interviews.

The qualitative study presented some limitations as well. The researcher found it troublesome to retrieve participants while on duty. Participants were active full-time officers and

committing time for the interview was difficult considering hefty calls loads. When the researcher attempted to schedule participants for interviews, it was often re-scheduled due to on-going calls for service. A thematic analysis of the data presented limitations for the study. This type of method is relative for small sample size. However, with the risk of sample limitations, the probability could lack enough data to support some of the themes coded (Braun and Clark, as cited in Nowell et al., 2017). Coding limitations occurred when the same few ideas became repetitive throughout the interview responses. This left no room to eliminate irrelevant data and with consideration of an already small sample size.

According to McShane and Williams (2008), there are limitations in most measurements and data analysis. However, eliminating the study would possibly leave the topic unexplored and the future of public policy still in question regarding law enforcement training in addition. McShane and Williams (2008) additionally explain, there are advantages of national representation in a sample size. The sufficient data enhances the analysis. However, with the minimal data derived, a foundational baseline was still established.

Chapter 6

Conclusion

Summary and Discussion

The purpose of this thesis was to determine police perceptions of drug addicts. As previously mentioned in literature and to recapitulate the opioid epidemic is claiming the lives of thousands annually. Police were given the opportunity through interviews and open-ended questions to express perceptions and feelings they may harbor towards drug addicts. Police candidly expressed perceptions that developed through time and experience. Many officers related of mounted frustration with addicts as they continue to battle illicit drug use. Many of the stories told in the interviews were personal accounts of encounters the officers had with addicts. Through the stories, officers conveyed negative and stigmatized views as an overall perception.

Although methods are mixed, obtainment of accurate and cohesive analysis are essentially the same. Many officers expressed difficulty showing sympathy to an addict who they believe chose their situation. This perception appeared to be the main contributing factor of police perceptions. The survey showed a response of 100% participants believed addicts chose drug use and addiction. The interviews produced the same result as almost each participant described an opinion of an addicts' decision to become a factor of their situation. Based on that perception, showing sympathy was difficult for officers. As previous literature tells, addiction is theorized in many different conceptions. However, most agree the choice to be addicted is misinformation, as many scientific measures prove addiction is not a choice (Maté, 2010).

It was also gathered throughout the data of the qualitative study officers expressed a fear when dealing with drug addicts. The source of fear is accidental contact with fentanyl at the hands of an addict. According to some participants, recent media depictions of officers

unknowingly contacting fentanyl have established a concern in police attitudes. Police expressed their concerns discussing experiences during vehicle and property searches. Furthermore, public safety concerns also contributed to police perceptions. Police conveyed the belief that addicts lacked self-awareness, created destruction to society, and neglected safety for officers and the rest of the public. Through the stories, police displayed a harsher stance with their attitudes with addicts.

It appeared the participants who expressed knowing someone personally close to them or in their family addicted to drugs held more of a sympathetic feeling towards the addict versus the officers who do not know of someone addicted. However, the officers who expressed empathy also said, they still believe addiction is a choice, and addicts and offenders should still face incarceration.

Most of the sample in the qualitative study disagreed with the use of narcan. The disagreement of utilizing narcan, may can be referenced to the perception police retain that addicts chose their addiction. It was conveyed in this area of the questionnaire several times that police should not have to “clean up” the damage of an addict. Furthermore, a divided sample agreed that the opioid crisis is a problem. One participant included, “A lot of people are ok with the opioid crisis because it does not affect them. They don’t realize they are one surgery or injury away from being addicted to pain killers.” Moreover, police have a large influence on society. It is important that as they come in contact substance abusers, they are aware of any negative views and perceptions they have (Jorgensen, 2018). Displaying the views of negativity, certainly is not contributing to winning the opioid epidemic or war drugs.

Study Implications

A new approach is critical in combating the current epidemic. Future research on police perceptions is necessary for examination. As reviewed in the results section, police may exhibit adverse opinions towards a certain group of people in the public. When comparing literature and research to the analyzed perceptions and “knowledge” police have construed over the years, it is noticeable the topic deserves attention and research. Surveying the public or addicts opinion would be beneficial for future research as well. This would equip scholars to research individual and environmental indicators of police perceptions (Jorgensen, 2018). It is obvious through literature and this study there are formulated views that have been misconceived and lack medical information regarding drug use and addiction. As a result, stigma and negative views continue to surface from police. Initiating training and educational efforts to accurately inform law enforcement of addiction could be a persuasive element to combat the war on drugs. Furthermore, public policy needs attention centering police and community relationships.

Conclusion

Understanding police perceptions as they relate to drug addicts can be essential to criminal justice, public health, and public policy. To emphasize the importance of police perceptions, it is necessary that future research extends beyond this study. Also, analyzing perceptions addicts have of the judicial system would additionally give a deeper analysis of the possible surrounding issues. Past data and literature are incomplete and missing from this subject. The importance in future research on police perceptions is noticeable in the literature review and thematical analysis results section of this thesis. The lack of knowledge and the misunderstandings between police and substance abusers may create a continuance vicious circle of crime, overdose, and addiction.

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Appendices

Appendix: A

Participant Survey

Questionnaire:

1. Male or Female
 2. Age Group:
 - 21-26
 - 27-32
 - 33-38
 - 39-44
 - 45 and over
 3. Years of police and patrol experience:
 - 0-3 years
 - 4-7 years
 - 8-11 years
 - 12-15 years
 - 16 Plus years' experience
 4. Describe you job function in your agency. IE. Patrol, Detective.
-
5. Do you feel that addiction is a disease?
 Yes No
 6. Do you know anyone close to you or in your family addicted to drugs?
 Yes No
 7. Do you feel that drugs cause crime?
 Yes No
 8. How often do you arrest a drug offender for narcotics?
 Often Not Often Rarely Never
 9. Do you think drug addicts suffer a mental illness?

Yes No

10. Do you think drug use a choice?

Yes No Depends. Explain your answer

11. Do you consider drug addicts the same as a mentally ill subject?

Yes No

12. Do you consider drug addicts dirty and unkempt?

Yes No

13. Do you believe drug addiction comes from a induced life trauma?

Yes No

14. Do you believe drug addiction is hereditary and/or that genetics play a role?

Yes No

15. True or False. I have arrested the same drug addict/offender more than once.

True False

16. Do you have a negative perception of drug addicts/drug offenders?

Yes No I do not have one.

17. True or False. It is hard for me to show sympathy to drug overdose subjects, because I feel they did it to themselves.

True False

18. Do you believe drug addicts are predisposed to their addiction OR do you feel addicts choose their addiction?

19. Would you like more training and education on the cognitive state of a drug addict?

Yes No Does not really matter

20. In your words, explain how you feel about a drug addict you encounter?

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Appendix: B

INTERVIEW

Participant:

Date:

Time:

Demographics:

Gender:	
Age	
Years of service	
Rank	
Ethnicity:	

- 1) How often do you arrest drug addicts or offenders?
- 2) Do you perceive drug addicts as blameworthy of their addiction? If so why?
- 3) Does the opioid crisis concern you?
- 4) Do you consider it worthless to rehabilitate a drug addict?
- 5) Have you ever conducted a vehicle or property search, and located uncapped syringes, narcotic residue, and other paraphernalia that could impose harm to you? If so, how did it affect your attitude once it was located?

- 6) How often do you respond to drug overdose calls?
- 7) Upon your arrival to an overdose call, are you less sympathetic than you would be for any other medical call?
- 8) Do you feel drug overdose calls are a waste of your time?
- 9) Do you know the characteristics a person who is simply high on a substance versus one experiencing excited delirium or close to overdosing? If so, what are some of them.
- 10) Do you feel drug addicts should face strict punitive actions? If yes, what kind?
- 11) How much official training or education do you have in identifying drug addicts or offenders? Not the substance, but characteristics or indicators of the person.
- 12) Do you know anyone personally who is addicted to drugs? If so, how has this affected your perception in the law enforcement role?
- 13) Do you believe drug addicts suffer from some type of mental illness?
- 14) If your command staff asked if you would like to have the opportunity to train and administer Narcan to overdose victims, would you be for it or against it? Why?
- 15) Do you find drug addicts lazy and pathetic? If yes, why?
- 16) Do you believe drug addicts are a nuisance to society?
- 17) Do you believe you understand addiction?
- 18) Do you hold an adverse perception of addicts? Briefly explain how you feel about drug addicts and your interaction as an officer.
- 19) Does the annual number of opioid overdose deaths concern you?
- 20) Do you wish you had more training in addictive characteristics

Vita

Stephanie Osborne was born in Dallas, Texas on December 18, 1981. She grew up in the southeast Dallas area and attended Seagoville High School.

Stephanie has been a police officer in a patrol function since 2007. She spent most of that time in the Dallas County area before relocating to a smaller agency. Stephanie received her Bachelor of Science in Political Science, with a minor in Public Administration from Walden University in 2013. Shortly after receipt of her Bachelor of Science, Stephanie enlisted in the United States Army Reserves where she fulfilled six years of service.

In 2017, Stephanie enrolled in graduate studies at Texas Christian University, and in May received her Master's in Criminal Justice and Criminology. Stephanie currently resides with her three children in the Dallas County area.

Abstract

POLICE PERCEPTION AND ATTITUDES TOWARDS DRUG ADDICTS

By Stephanie Osborne

Master of Science, 2019

Texas Christian University

Katherine Polzer, Associate Professor of Criminal Justice

As first responders, police are generally the first to arrive to any drug-related calls including overdoses. Little is known of police perceptions and attitudes regarding drug abuse. Police opinions are essential to study since they are the forefront of the judicial system, and America is in the grips of an opioid crisis. Research on police perceptions towards the addict is nearly non-existent. This study examines perceptions and attitudes police have towards drug addicts and the contributing factors of those perceptions using quantitative and qualitative analysis. Data obtained is from the north Texas region, in a small law enforcement area where drug exposure is substantial. A total of eleven officers completed a survey. In addition, semi-structured interviews were completed by nine officers. Findings suggest most officers acknowledge having unfavorable opinions of drug addicts and agreed it is hard to show sympathy to overdose victims.