

The Drugs/Violence Nexus: A Tripartite Conceptual Framework

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I. Introduction

Drug use and drug trafficking are examined as etiological factors in the creation of violence. A conceptual framework is presented for examining the drugs/violence nexus. Drugs and violence are seen as being related in three possible ways: the psychopharmacological, the economically compulsive, and the systemic. Each of these models is examined in depth. The quality of data available in existing national crime data bases to explicate these relationships is assessed.

Drug use, as well as the social context in which that use occurs, are etiological factors in a wide range of other social phenomena. Drug use is known to be causally related to a variety of physical and mental health problems, crime, poor school performance, family disruption, and the like. Previous research has also consistently found strong connections between drugs and violence.

For example, Zahn and Bencivengo (1974) reported that in Philadelphia, in 1972, homicide was the leading cause of death among drug users, higher even than deaths due to adverse effects of drugs; and drugs accounted for approximately 31% of the homicides in Philadelphia. Monforte and Spitz (1975), after studying autopsy and police reports in Michigan, suggested that drug use and distribution may be more strongly related to homicide than to property crime. Preble (1980) conducted an ethnographic study of heroin addicts in East Harlem between 1965 and 1967. About fifteen years later, in 1979 and 1980, he followed up the seventy eight participants and obtained detailed information about what had happened to them. He found that 28 had died. Eleven, 40% of the deaths, were the victims of homicide. The New York City Police Department (1983) classified about 24% of known homicides in 1981 as

drug related. The drugs/violence nexus also appears consistently in newspaper headlines. For example, a seventeen year old boy who committed suicide by hanging himself in his jail cell had earlier confessed to committing a ritual stabbing and mutilation killing of another youth because he believed the boy had stolen ten bags of PCP from him (New York Times, July 12,1984). A New York City Transit policeman was beaten with his own nightstick and his chin was nearly bitten off by a farebeater who was high on angel dust (New York Post, September 19, 1984). A thirty-nine year old mother of three was killed by a stray bullet fired during a fight between drug dealers on the lower east side of Manhattan (New York Post, October 10, 1984). A front page headline in the New York Times (October 29,1984) claimed that "Increase in Gang Killings on Coast is Traced to Narcotics Trafficking." Less than a month later, another New York Times front page headline announced that "Cocaine Traffickers Kill 17 in Peru Raid on Antidrug Team" (November 19, 1984) A Miami police official was quoted on television as saying that one-third of the homicides in Miami in 1984 were cocaine related.

Even though the relationship between drugs and violence has been consistently documented in both the popular press and in social scientific research, it is only recently that attempts have been made to assess this problem on a national level. One such effort estimated that 10% of the homicides and assaults nationwide are the result of drug use (Harwood et al., 1984). Another recent report estimated that in the United States, in 1980, over 2,000 homicides were drug related and, assuming an average life span of 65 years, resulted in the loss of about 70,000 years of life. This report further estimated that in 1980 over 460,000 assaults were drug related, and that in about 140,000 of these assaults the victims sustained physical injury leading to about 50,000 days of hospitalization (Goldstein and Hunt, 1984). While the association between drugs and violence appears strong, and drug use and trafficking appear to be important etiological factors in the incidence of violence, there has been little effort to place this relationship into a conceptual framework to guide further empirical research. The purpose of this paper is to introduce such a framework.

Information for this report was gathered during the course of three separate empirical investigations. Sixty women were interviewed in 1976 and 1977 for a study of the relationship between prostitution and drugs (Goldstein, 1979). Between 1978 and 1982, an ethnographic study was undertaken of the economic behavior of 201 street opiate users in Harlem. (This research was supported by the New York State Division of Substance Abuse Services; by a Public Health Service Award from the National Institute on Drug Abuse (RO1-DA 01926); and by an interagency agreement between NIDA (RO1-DA 02355) and the Law Enforcement Assistance Administration (LEAA-J-IAA-005-8).) Finally, in 1984, I began a study of the relationship between drugs and violence on the lower east side of Manhattan. (This research is being supported by the New York State Division of Substance Abuse Services and by a Public Health Service Award from the National Institute on Drug Abuse (RO1-DA 03182).)

That study is guided by the conceptual framework presented below.

Drugs and violence are seen as being related in three possible ways: the psychopharmacological, the economically compulsive, and the systemic. Each of these models must be viewed, in a theoretical sense, as "ideal types," i.e., as hypothetically concrete ". . . devices intended to institute comparisons as precise as the stage of one's theory and the precision of one's instruments allow." (Martindale, 1959:58- 59). In fact, it will be shown below that there can be overlap between the three models. However, this overlap does not detract from the heuristic value of the tripartite conceptual framework.

II. Psychopharmacological Violence

The psychopharmacological model suggests that some individuals, as a result of short or long term ingestion of specific substances, may become excitable, irrational, and may exhibit violent behavior. The most relevant substances in this regard are probably alcohol, stimulants, barbiturates and PCP. A lengthy literature exists examining the relationship between these substances and violence (Tinklenberg, 1973; Virkunen, 1974; Glaser, 1974; Gerson et al., 1979; Ellinswood, 1971; Smith, 1972; Asnis and Smith, 1978; d'Orban, 1976; Feldman et al., 1979).

Early reports which sought to employ a psychopharmacological model to attribute violent behavior to the use of opiates and marijuana have now been largely discredited (Finestone, 1967; Inciardi and Chambers, 1972; Kozel et al., 1972; Greenberg and Adler, 1974; Schatzman, 1975; Kramer, 1976). In a classic statement of this point, Kolb argued the following.

There is probably no more absurd fallacy prevalent, than the notion that murders are committed and daylight robberies and holdups are carried out by men stimulated by large doses of cocaine or heroin which have temporarily distorted them into self-imagined heroes incapable of fear ... violent crime would be much less prevalent if all habitual criminals were addicts who could obtain sufficient morphine or heroin to keep themselves fully charged with one of these drugs at all times (Kolb,1925:78).

Kolb's point must be modified in one very important way. He is correct in claiming that ingestion of opiates is unlikely to lead to violence. However, the irritability associated with the withdrawal syndrome from opiates may indeed lead to violence. For example, in previous research on the relationship between drugs and prostitution I found that heroin using prostitutes often linked robbing and/or assaulting clients with the withdrawal experience (Goldstein,1979). These women reported that they preferred to talk a "trick" out of his money, but if they were feeling "sick," i.e., experiencing withdrawal symptoms, that they would be too irritable to engage in gentle conning. In such cases they might attack the client, take his money, purchase sufficient heroin to "get straight," and

then go back on the street. In a more relaxed physical and mental state, these women claimed that they could then behave like prostitutes rather than robbers.

Drug use may also have a reverse psychopharmacological effect and ameliorate violent tendencies. In such cases, persons who are prone to acting violently may engage in self-medication in order to control their violent impulses. Several subjects have reported doing this. The drugs chosen for this function are typically heroin or tranquilizers.

Psychopharmacological violence may involve drug use by either offender or victim. In other words, drug use may contribute to a person behaving violently, or it may alter a person's behavior in such a manner as to bring about that person's violent victimization. Previous research indicates relatively high frequencies of alcohol consumption in rape (Amir, 1971; Rada, 1975) and homicide victims (Shupe, 1954; Wolfgang, 1958). Public intoxication may invite a robbery or mugging. One study found that in rapes where only the victim was intoxicated, she was significantly more likely to be physically injured (Johnson et al., 1973).

It is difficult to estimate the true rate of victim precipitated psychopharmacological violence because many such instances go unreported and, hence, unrecorded in official records. My own research in New York over the last decade indicated that many intoxicated victims do not report their victimization. Such victims say that they do not wish to talk to the police while drunk or "stoned." Further, since they are frequently confused about details of the event and, perhaps, unable to remember what their assailant looked like, they argue that reporting the event would be futile.

Assuming that the psychopharmacological violence is not precipitated by the victim, the victim can then be just about anybody. Psychopharmacological violence can erupt in the home and lead to spouse or child abuse. Psychopharmacological violence can occur in the workplace, on the streets, in bars, and so on. The incidence of psychopharmacological violence is impossible to assess at the present time, both because many instances go unreported and because when cases are reported the psychopharmacological state of the offender is seldom recorded in official records.

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III. Economic Compulsive Model

The economically compulsive model suggests that some drug users engage in economically oriented violent crime, e.g., robbery, in order to support costly drug use. Heroin and cocaine, because they are expensive drugs typified by compulsive patterns of use, are the most relevant substances in this category. Economically compulsive actors are not primarily motivated by impulses to act

out violently. Rather, their primary motivation is to obtain money to purchase drugs. Violence generally results from some factor in the social context in which the economic crime is perpetrated. Such factors include the perpetrator's own nervousness, the victim's reaction, weaponry (or the lack of it) carried by either offender or victim the intercession of bystanders, and so on.

Research indicates that most heroin users avoid violent acquisitive crime if viable non-violent alternatives exist (Preble and Casey, 1969; Swezey, 1973; Cushman, 1974; Gould, 1974; Goldstein and Duchaine, 1980; Goldstein, 1981; Johnson et al., 1985). This is because violent crime is more dangerous, embodies a greater threat of prison if one is apprehended, and because perpetrators may lack a basic orientation toward violent behavior. Bingham Dai reported similar findings nearly fifty years ago. His study of the criminal records of over one thousand opiate addicts in Chicago revealed that the most common offenses for which they were arrested were violations of the narcotics laws, followed by offenses against property.

. . . it is interesting to note that comparatively few of them resorted to violence in their criminal activities. The small percentage of addicts committing such crimes as robbery, assault and battery, homicide and others that involve the use of force seems to discredit the view shared by many that the use of drugs has the effect of causing an individual to be a heartless criminal. On the contrary, our figures suggest that most of the crimes committed by addicts were of a peaceful nature that involve more the use of wit than that of force (Dai, 1937:69).

Victims of economic compulsive violence, like those of psychopharmacological violence, can be anybody. Previous research (Goldstein and Johnson, 1983; Johnson et al., 1985) indicates that the most common victims of this form of drug related violence are people residing in the same neighborhoods as the offender. Frequently the victims are engaged in illicit activities themselves. Other drug users, strangers coming into the neighborhood to buy drugs, numbers runners, and prostitutes are all common targets of economic compulsive violence.

While research does indicate that most of the crimes committed by most of the drug users are of the nonviolent variety, e.g., shoplifting, prostitution, drug selling, there are little data that indicate what proportion of violent economic crimes are committed for drug related reasons. No national criminal justice databases contain information on the motivations or drug use pattern of offenders as they relate to specific crimes.

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IV. Systemic Violence

In the systemic model, violence is intrinsic to involvement with any illicit

substance. Systemic violence refers to the traditionally aggressive patterns of interaction within the system of drug distribution and use. Some examples of systemic violence follow below. 1. disputes over territory between rival drug dealers. 2. assaults and homicides committed within dealing hierarchies as a means of enforcing normative codes. 3. robberies of drug dealers and the usually violent retaliation by the dealer or his/her bosses. 4. elimination of informers. 5. punishment for selling adulterated or phony drugs. 6. punishment for failing to pay one's debts. 7. disputes over drugs or drug paraphernalia 8. robbery violence related to the social ecology of copping areas. Substantial numbers of users of any drug become involved in drug distribution as their drug-using careers progress and, hence, increase their risk of becoming a victim or perpetrator of systemic violence. Examples of each type of systemic violence mentioned above are readily available.

We recently reported that much of the heroin in New York City is being distinctively packaged and sold under "brand names" (Goldstein et al., 1984). These labeling practices are frequently abused and this abuse has led to violence. Among the more common abuses are the following: Dealers mark an inferior quality heroin with a currently popular brand name. Users purchase the good heroin, use it, then repackage the bag with milk sugar for resale. The popular brand is purchased, the bag is "tapped," and further diluted for resale.

These practices get the real dealers of the popular brand very upset. Their heroin starts to get a bad reputation on the streets and they lose sales. Purchasers of the phony bags may accost the real dealers, complaining about the poor quality and demanding their money back. The real dealers then seek out the purveyors of the phony bags. Threats, assaults, and/or homicides may ensue.

A common form of norm violation in the drug trade is known as "messing up the money." Basically, this involves a subordinate returning less money to his superior than is expected. For example, a street dealer is given a consignment of drugs to sell and is expected to return to his supplier or lieutenant with a specific amount of money. However, for any of a variety of reasons, he returns with too little money or fails to return at all. Some of the reasons why he might be short on his money are that he used some or all of the drugs himself; he sold all of the drugs, but then spent some or all of the money; he gave out too many "shorts," i.e., he sold the drugs for less than he should have; he was robbed, either of his drugs or of the money that he obtained from selling them.

When a street dealer fails to return sufficient money, his superior has several options. If only a small amount of money is involved, and the street dealer has few prior transgressions and a convincing justification for the current shortage, his superior is likely to give him another consignment and allow him to make up the shortage from his share of the new consignment. Other options include firing the street dealer, having him beaten up, or having him killed. In a recent study, a lieutenant in a heroin dealing operation had been rather lax in supervising the six

street dealers working under him. Just about everybody was messing up the money, including himself. One day the supplier and two soldiers' picked up the lieutenant and took him for a ride in their car. The lieutenant was afraid that he was going to be killed. However, after cruising for a while, they spotted one of the street dealers who had been "messing up the money." The two soldiers jumped from the car and beat him with iron pipes. They positioned him in the street and drove the car over his legs, crippling him for life. The supplier then suggested to the lieutenant that he would be well advised to run the operation more tightly in the future.

An interesting addendum to this discussion is that the "code of the streets dictates that blood cancels all debts." In other words, if a street dealer has "messed up the money" and is subsequently beaten up or wounded, then he no longer owes the money. The shedding of blood has canceled the debt. The above account illustrates a direct punishment for a norm violation. Violence may also arise in the course of a dispute that stems from a norm violation. I was recently told of such an incident. A drug dealer operated out of an apartment in New York City. Prospective purchasers would line up in the hallway of the apartment house and give their money to a young Hispanic woman who worked for the dealer. The woman would then get the drugs from the dealer and give them to the buyers. Dealers seldom allow customers into the space where the drugs are actually kept. One day the line was long and three Black men waited patiently to make their purchase. Finally it was their turn. However, the woman bypassed them in favor of two Hispanic men who were at the back of the line. The Hispanic men made a large purchase and the woman announced that the dealer had sold out for the day. The Blacks were furious. An argument ensued, shots were fired, and one of the Hispanic men was killed. The norm violator in this case, the woman, was fired by the dealer.

A common precipitator of violence in the drug scene is the robbery of a dealer. No dealer who wishes to stay in business can allow himself or his associates to be robbed. Most dealers maintain an arsenal of weapons and a staff that knows how to use them. A subject in a recent study reported going with two friends to "take off" a neighborhood social club that was a narcotics distribution center. In the course of the hold-up they shot one of the employees and beat up several other men and women. In retrospect, the subject admitted that they had probably used excessive force, but that at the time it had seemed justified because they were outnumbered about fifteen to three. One of the victims recognized one of the robbers. This robber was later shot to death in the street.

The Pulitzer Prize winning study of narcotics trafficking, *The Heroin Trail*, documents many instances of systemic violence. One concerns Joseph Fucillo, a Brooklyn drug dealer who became a police informant in 1972.

One day, as his wife watched from the window of their home in the Bensonhurst section of Brooklyn, Fucillo backed his car out of the driveway, and two men in

ski masks walked up to it. Two guns fired rapidly and seven bullets went into Fucillo's head. He died. (Newsday Staff and Editors, 1974:226)

A pimp stated that he would never allow a "junkie broad" to work for him. One of his reasons was that an addicted woman might be easily turned into an informant by the police. When asked what he would do if one of his women did start to use narcotics, he replied that if she didn't know too much about his activities he would just fire her. However, if she did know too much, he would kill her. (Goldstein, 1979:107)

New York Magazine reported an event that was tragic both in its consequences and in the fact that it is so typical of the current drug scene.

Sylvester, a 16 year old boy is stabbed in the chest . . . in the Crown Heights section of Brooklyn. He is taken to St. Mary's Hospital and dies a short time later. According to a witness, Sylvester sold marijuana to a group of adolescents a few days before the incident. His customers were apparently dissatisfied with its quality. Tonight the teenagers, a group of about eight or ten, find Sylvester on the street and complain about the bad grass. The leader of the group, John Green, demands their money back. Sylvester then picks up a couple of bottles and throws them at the group, running away down the block. The teenagers chase Sylvester down Lincoln Place where he picks up a stick and starts swinging. Knocking the stick out of his hand, John Green plunges a four inch knife into Sylvester's chest. Green and the others escape from the scene. At one P.M. Sunday afternoon, in apparent retaliation for the Sylvester murder, John Green is shot once in the left rear side of the body. He too is taken to St. Mary's, where he too dies (Goro, 1977:31).

Violence associated with disputes over drugs have long been endemic in the drug world. Friends come to blows because one refuses to give the other a "taste." A husband beats his wife because she raided his "stash."

The current AIDS scare has led to an increasing amount of violence because of intravenous drug users' fear of contracting this fatal disease from contaminated "works." Some sellers of needles and syringes claim that the used works that they are trying to sell are actually new and unused. If discovered by would-be purchasers, violence may ensue. I was recently told of one incident that allegedly led to the death of two men. A heroin user kept a set of works in a "shooting gallery" that were for his exclusive use. One day another man used these works. The owner of the works discovered what had happened and stabbed this man to death. He later stabbed a friend to death who was present when the stranger had used the works, had done nothing to stop him, and had failed to inform the owner of what had happened.

The social ecology of copping areas is generally well suited for the perpetration of robbery violence. Most major copping areas in New York City are located in

poor ghetto neighborhoods, such as Harlem. In these neighborhoods, drug users and dealers are frequent targets for robberies because they are known to be carrying something of value and because they are unlikely to report their victimization. Dealers are sometimes forced to police their own blocks so that customers may come and go in safety.

A subject in a current study earns money by copping drugs for other people. He stated that he was recently forced to protect one of his clients by fighting off two would-be robbers with a garbage can lid. Interestingly, he knew the two attackers from the street, but he claimed to harbor no ill will towards them. He stated that they did what they had to do and he did what he had to do.

Victims of systemic violence are usually those involved in drug use or trafficking. Occasionally, noninvolved individuals become innocent victims. The case of a woman being killed by a stray bullet fired in a dispute between rival drug dealers was cited earlier. Several cases have been reported where whole families of drug dealers, including wives and young children, have perished in narcotics gang wars. However, the vast majority of victims of systemic violence are those who use drugs, who sell drugs, or are otherwise engaged in some aspect of the drug business.

Various sources have stressed the importance of what I have termed the systemic model in explaining drugs/violence relationships. Blum (1969) points out that, with the exception of alcohol, most drug users are not violent but that this point does not apply to the typical dealer for whom there is strong evidence linking drugs and violence. Smith (1972) in his discussion of amphetamines and violence in San Francisco's Haight-Ashbury district, stated that the primary cause of violence on the streets was "burning," i.e., selling phony or adulterated drugs. Several sources suggest that studying the area of systemic violence may be more important than the study of the relationship of drug use to crime on the level of the individual user.

Racket associated violence, a result of the intense competition for enormous profits involved in drugs, is flourishing. This is not the crime in the streets which is often associated with drugs, but an underworld in which ordinarily those people suffer from violence who in one way or another have become related to the traffic (Fitzpatrick, 1974:360).

Because these criminal entrepreneurs operate outside the law in their drug transactions, they are not bound by business etiquette in their competition with each other, in their collection of debts, or in their nondrug investments. Terror, violence, extortion, bribery, or any other expedient strategy is relied upon by these criminals . . . (Glaser, 1974:53).

Where a commodity is scarce and highly in demand (as may be the case with drugs), extreme measures of control, i.e., homicide, may be involved. Further, in

areas of high scarcity and inelastic demand, bitter arguments centering on the commodity are likely to ensue. When such arguments take place in a subculture where violence is the modus operandi, and where implements of violence, e.g., guns, are readily available, homicide is likely to be the result (Zahn, 1975:409).

Zahn pointed out the importance of systemic violence in her recent study of homicide in twentieth century United States. She showed that homicide rates peaked in the 1920s and early 1930s, declined and leveled off thereafter, began to rise in 1965, and peaked again in 1974. This analysis led to the following conclusion.

In terms of research directions this historical review would suggest that closer attention be paid to the connection between markets for illegal goods and the overall rate of homicide violence. It seems possible, if not likely, that establishing and maintaining a market for illegal goods (booze in the 1920s and early 1930s; heroin and cocaine in the late 1960s and early 1970s) may involve controlling and/or reducing the competition, solving disputes between alternate suppliers or eliminating dissatisfied customers The use of guns in illegal markets may also be triggered by the constant fear of being caught either by a rival or by the police. Such fear may increase the perceived need for protection, i.e., a gun, thus may increase the arming of these populations and a resulting increased likelihood of use. For the overall society this may mean a higher homicide rate (Zahn, 1980:128).

It was stated above that the three models of the drugs/violence nexus contained in the tripartite conceptual framework should be viewed as ideal types, and that overlap could occur between them. For example, a heroin user preparing to commit an act of economic compulsive violence, e.g., a robbery, might ingest some alcohol or stimulants to give himself the courage to do the crime. This event now contains elements of both economic compulsive and psychopharmacological violence. If the target of his robbery attempt was a drug dealer, the event would contain elements of all three types of drug related violence.

The conceptual framework allows the event to be effectively analyzed and broken down into constituent parts and processes. The roles played in the event by different sorts of drugs can be explicated. In the above example, the need for money to purchase heroin was the primary motivation for the act. Alcohol and stimulants were ingested after the act was decided upon because of the robber's need for courage and, presumably, because prior experience with these substances led the perpetrator to believe that they would serve that psychopharmacological function.

The choice of target, a drug dealer, is open for empirical investigation. It may turn out that the reason the heroin user needed to commit the robbery was because that dealer had cheated him earlier in the day on a drug purchase,

perhaps selling him "dummy" bags. Our robber, needing to "get straight" and not having any more money, decides that robbing this unscrupulous dealer would be an appropriate revenge. Several subjects in our studies reported committing economic compulsive acts out of fear of becoming a victim of systemic violence. These were street dealers who had "messed up the money" and who were terrified of what their superiors might do to them. Some had already been threatened. This motivated them to do robberies as a quick way to obtain the money that they owed.

Thus, as the concepts are employed, a fuller understanding of the event emerges. The roles played by specific drugs become clearer. The actor's motivations and the process by which he undertakes to commit a robbery are elaborated upon.

If the above events were to be examined in official crime records, assuming they were reported, they would be listed as robberies. Victim-perpetrator relationships would probably be unknown, though they might be listed as "acquaintance" or "stranger." No mention of drugs would be made. Victims of systemic violence frequently lie to the police about the circumstances of their victimization. Not a single research subject whom I have interviewed who was the victim of systemic violence, and who was forced to give an account of his or her victimization to the police, admitted that he or she had been assaulted because of owing a drug supplier money or selling somebody phony or adulterated drugs. All such victims simply claimed to have been robbed.

It would make little difference if the robbery were to develop into a homicide. The classification of the event would change from robbery to homicide, but victim-perpetrator relationship and nature of the homicide would remain unknown or be coded in such a broad fashion that the information would not be very useful. No mention of drugs would be made. Attention will now be focused on the quality of data available on the national level to elaborate on the drugs/violence nexus.

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V. Quality of Data Available on Drugs/Violence Nexus

The drugs/violence nexus is one of the most important criminological and health issues for which rigorously collected data is currently unavailable. While a variety of ethnographic studies focus on violent behavior of drug users, most of this material is not quantitative and does not allow national projections to be made. Official statistics collected in the criminal justice and health care systems do not link acts of criminal violence and resultant injuries or death to antecedent drug activity of victims or perpetrators. Broad recording categories make it virtually impossible to determine whether the offender or victim was a drug user or distributor, or whether the pharmacological status of either victim or offender

was related to the specific event.

Uniform Crime Reports (UCR), collected by the Federal Bureau of Investigation, is the most visible source of crime data in the country. However, it is not very useful for an elaboration of the relationship between drugs and violence. UCR is a measure of crimes known to the police. Many crimes are not reported. The 1980 National Crime Survey found that the following proportions of violent victimizations were not reported to the police: 57% of the rapes; 41% of the robberies; 52% of the assaults (BJS, 1982:71). UCR data on homicide, due to the presence of a body, is the most reliable crime incidence category.

Reporting schedules to which local law enforcement agencies must adhere frequently result in data being submitted to UCR before investigative work has been completed and, hence, large numbers of unknowns usually appear in relevant categories. The New York City Police Department has addressed this issue by holding an annual debriefing of detective squad commanders about all homicides that occurred in their precincts during the preceding year. It was in the context of these debriefings that the significance of drug related homicides first emerged and became an important analytic category for the NYPD Crime Analysis Unit. The new data gathered during these debriefings have never been included in UCR because no structure exists for their transmission. This has led to such curious statistical phenomena as New York City reporting more drug related homicides for a given year than UCR reports for the nation as a whole, including New York City.

The major difficulty in using UCR to estimate drug related violent crime is the lack of a descriptive component to supplement the quantitative presentation. The drug relatedness of violent events is simply not coded. Therefore, it is not possible to link specific violent acts to antecedent drug activities of either victim or perpetrator.

An alternative data source is the National Crime Survey (NCS). This annual report issued by the Bureau of Justice Statistics (BJS) is based on data obtained from a stratified, multistage cluster sample. The basic sampling unit is the household. Respondents within households are asked for all instances of victimization in the past year. Projections are then made to the nation as a whole.

As was the case with UCR, the NCS is not very useful for elaborating on the drugs/violence nexus. Street drug users frequently are not part of a household, i.e., they may sleep in abandoned buildings, in subways, on park benches. Thus, a population that is posited to be at especially high risk for drug related violence is likely to be underrepresented in this data. Also, victims may have difficulty recalling specific events or be reluctant to describe them to an interviewer.

Research on the capacity of victims to recall specific kinds of crime . . .

indicates that assault is the least well recalled of the crimes measured by the NCS. This may stem in part from the observed tendency of victims not to report crimes committed by offenders known to them, especially if they are relatives. In addition, it is suspected that, among certain groups, crimes that contain the elements of assault are a part of everyday life and, thus, are simply forgotten or are not considered worth mentioning to a survey interviewer. Taken together, these recall problems may result in a substantial understatement of the "true" rate of victimization from assault (BJS, 1982:94).

A major problem with the NCS is that victims seldom know the motivation of offenders for committing acts of violence. Of course, this is less the case with systemic violence than it is with either psychopharmacological or economic compulsive violence. With regard to psychopharmacological violences victims may not be able to discern that assailants are "high" and, even if they could, it would be difficult to ascertain what substances are involved. Similarly, victims of economic compulsive violence may not know that they are being robbed in order to finance a drug habit.

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VI. Summary And Conclusion

Drugs and violence were shown to be related in three possible ways: psychopharmacologically, economic compulsively, and systemically. These different forms of drug related violence were shown to be related to different types of substance use, different motivations of violent perpetrators, different types of victims, and differential influence by social context. Current methods of collecting national crime data were shown to be insensitive to the etiological role played by drug use and trafficking in creating violent crime.

No evidence currently exists as to the proportions of violence engaged in by drug users and traffickers that may be attributed to each of the three posited models. We need such data. My own impression, arising from research in New York, is that the area of systemic violence accounts for most of the violence perpetrated by, and directed at, drug users. Systemic violence is normatively embedded in the social and economic networks of drug users and sellers. Drug use, the drug business, and the violence connected to both of these phenomena, are all aspects of the same general life style. Individuals caught in this lifestyle value the experience of substance use, recognize the risks involved, and struggle for survival on a daily basis. That struggle is clearly a major contributor to the total volume of crime and violence in American society.

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