

EXECUTIVE SUMMARY

FORMER OPIOID ADDICTS' CYCLE OF ADDICTION: Examining the Role of Criminal Justice Contact, Deterrence, and Cognitive Change

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Amidst the continued impact of the opioid epidemic, this project used 75 in-depth interviews with former addicts to investigate the circumstances surrounding users' initiation, escalation, and cessation of opioid use in order to better inform policy perspectives and criminological theory.

PRESCRIPTION DRUG ACCESS AND THE DEVELOPMENT OF ADDICTION

Many individuals' addictions can be traced back to unchecked access to prescription opioid painkillers, often involving elaborate interstate doctor shopping operations and pill mill exploitation. Whether obtained through legal or illicit means, fundamental flaws surrounding the dispersal of pills allowed individuals to quickly develop addictions. Changing regulations and the closure of medical loopholes generated widespread desperation among addicts as pills became increasingly scarce. Borne out of necessity, many addicts transitioned to heroin use to combat withdrawal symptoms.

Please note that the terms "addict" and "user" appear throughout this document. While this is considered stigmatizing language regarding people with substance use disorder, the terms were used in an effort to maintain the authenticity of participants' portrayals of their lived experiences. To learn more about why words matter, visit changingthenarrative.news/stigmatizing-language.

"It was hard to get pills. Police were cracking down... People were having trouble getting them. Then people were selling fake ones that were like laundry soap and just dyeing them. I was very adamant on never doing heroin. I'll never forget the first time that I did it was I came home from work and I was sick...and I didn't care. It just kind of escalated from there...It's cheaper. Pills are impossible to get now. Doctors are cracking down. Nobody's giving them [pills] out anymore."

—Amy, white female, age 31



“The doctors, they would tell you the laws are getting stricter, ‘We’re not allowed to prescribe this many anymore. They’re not made for long-term anymore.’ Why? You guys put me on these. You’re telling me I’m going to be in pain for the rest of my life, but you want me to cut back on medication because the laws are stricter now?...I lost everything. I had my kids taken away. I was on pain pills, couldn’t afford them, was doing limited amounts, was in extreme pain, got introduced to heroin, it was cheap. I was hearing everybody say how bad it was. It was like, “I’ll never go to that. I’ll never go to that. I don’t care if I spend every dollar on pain pills.” Then eventually, I just couldn’t take it. They were too hard to get anymore. If you did get them, they were fake. I was like, “Well, I’m just going to snort heroin instead of injecting it.” Then it went from that to injecting.”

—Max, white male, age 34

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“I was invincible. I was so concerned with getting high that at that point— the check cashing place I worked. There were like 18 fucking cameras in there. I didn’t care. That’s why I got felony charges working there and stealing. I knew I was going to get in trouble, but you convince yourself you won’t get caught. It’s one of those things you just shut off...At that moment, that’s all that matters, that I was gonna be well. There was even one guy I cashed a check for. He literally took my car, went and got dope, put it in a needle for me, and passed it right over the counter there in front of the cameras. I didn’t care. I did not care.”

—Tiffany, white female, age 33

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THE INEFFECTIVENESS OF DETERRENCE AND INCREASES IN CRIMINAL ACTIVITY

The switch from prescription pills to heroin was often accompanied by escalations in criminal involvement. My findings revealed that as addicts’ chemical dependencies worsened, they were increasingly incapable of performing the internal calculus that deterrence-based law enforcement principles are predicated upon. Absent the capacity to properly weigh risk versus reward, addicts formed a deep indifference to the threat of criminal justice contact.

“Yeah, I was afraid [of arrest]. But that didn’t stop me. My fear of being sick overrode my fear of going to jail. Even though when I went to jail, I would be sick. My fear of being sick in that moment took precedent over anything and everything else, no matter who I was around, where I was at. It didn’t matter. I think about the shit that I’m doing, I think about the repercussions and the shit that I can have from it, and consequences. But it doesn’t deter me from still doing them.”

—Kelly, white female, age 27

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“When you get high, you don’t think about getting caught. You don’t think, “Oh, I’m selling dope. Oh, I might get 20 fucking years.” You just do it, you know? You don’t think. Addicts don’t think, we just do. We act on impulse. We don’t think at all.”

—Robin, white transgender woman, age 27

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Further, justice contact, in the form of arrest and/or incarceration, did little to dissuade users from pursuing their addictions, nor did it influence their desistance from crime.

“I had like 30 drug arrests. I didn’t give a fuck. Getting dope sick, get clean, get back out, and go do it again. I had that same mentality every time. It didn’t matter what the consequence was. It didn’t matter how much time I had to go do. It was the same song and dance when I got back out. Or when I went to jail. I didn’t care. I didn’t care how long I had to go to jail for, whether it was 30 days, or any day, six months. When I got out, I want to do the same damn thing.”

—Keith, white male, age 45

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“I would get right back out of jail and as much as I hated it, and as much as it killed me to be in there, I would use again...While being locked up, you get all the different thoughts as, ‘Okay, I’m going to change.’ And then right when you hit those streets again, “Boom.” It’s over. It’s almost like you instantly forget all of the trouble you just went through. All of the pain, all of the nervousness, and the worries that you just went through in jail.

You hit those streets and it’s like your mind completely switches right back to drugs. In jail, you can’t get stuff. You’re telling yourself, ‘Hey I can’t get it. I might as well try to better myself.’ Start thinking different thoughts.

But as soon as you hit those streets and you know that it’s available, that you could get it easily and you go right back to thinking that you’re going to be relaxed and stress-free, it’s like, ‘Man, this is super hard. I thought I was going to be able to come out here and be more of a productive citizen, just because of all the hell I went through.’ But now that it’s easily available again, it’s just like you go right back to it. That addictive thinking, it’s just so easy to fall right back and do that. It’s ridiculous.”

—Dennis, white male, age 27

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“When you’re in there you go, ‘Oh, I’m never going to do it again.’ Yeah, it’s like you make all of these promises and stuff. Who wants to be in that shit?...After a while you do feel like you want to do better. Don’t get me wrong. You do want to. You know you really do want to do better. You’re going to get clean. As time starts to wind down, that voice starts edging back into you. It’s like a quiet one, to a louder one, and then you’re getting out and all you can think about is, ‘I want to go get. I’m going to get it. I’m going to get it. Who am I gonna get it from?’... They call your name and as soon as you walk out, I’m already dialing the number in my head. I can’t tell you the times when I came home and within 28 to 72 hours I wasn’t using. I did every single time.”

—Raquel, Black female, age 42

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When faced with the prospect of changing legislation, users responded similarly, maintaining that little could dissuade them from using.

“If they change the laws around on it, I really don’t think that it’s going to make much of a difference. If you make a felony a misdemeanor or make a misdemeanor a felony, none of that’s going to matter because the way the addict is going to think about it, you don’t care.”

—Justin, white male, age 31

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“When you get in trouble or if your family is pressuring you, I’ve been to treatment so many times, I can tell you what you want to hear. I can make it sound so...We are master manipulators...especially when I’m doing it to appease somebody else. I truly believe the only person that will ever know when you’re ready is you.”

—Michelle, white female, age 28

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THE DECISION TO “GET CLEAN”

While many addicts lamented that their drug developed into a compulsion extending beyond personal choice, ultimately, cessation from use entailed a steadfast determination to stop using. Posing challenges for policy development, addicts described the inability of social bonds, such as marriage, family ties, or employment, to impact their motivation to continue opioid use. Instead, my findings indicate that last pursuits of sobriety were preceded by the organic development of an internal conviction to get clean. This decision was often closely tied to several factors, including the recognition of a personal “bottom,” extreme physical and mental exhaustion, and a fear of the consequences of continued opioid use.

“Within yourself, you have to want it, and nobody can want it for you. My mom and my dad, my sister, my kids. I can’t even do it [quit] for my kids. My children, they would see me prostitute myself on the street. It burned my heart. But my kids didn’t understand the nature of the disease. I just wasn’t ready, and [my family] knew that, and they say, “When you’re ready, we’re ready.” Once I got that concept, everything started changing.”

—Liz, Asian female, age 34



“...Heroin has a grip on you. It’s the only thing that’s more powerful than my son and I had to be completely ready to let go. It’s like a relationship. You can’t live with it, can’t live without it. I was tired of the way I was living. I was tired of being sick and doing things that I was doing.”

—Anna, white female, age 28



“I would take [using] all the way until it put me in jail. I didn’t care what I did. I’ve just gotten older...I’m tired of sitting in the fucking hood, and I’m tired of being broke. Most of it is that I’m tired of my life literally revolving around one thing. I wake up, I have to have this [heroin]. I got to go get more money to have this, I got to make sure I have enough when I wake up to have this. That’s all your brain thinks about is having one thing. And there’s more to life than just that. It just gets old, of just the same thing, day-in and day-out, you know? It’s miserable.”

—John, white male, age 36



ABOUT DEPC DRUG POLICY RESEARCH GRANTS

The Drug Enforcement and Policy Center (DEPC) invites faculty and graduate students from The Ohio State University and other Ohio universities to submit proposals for funded research. DEPC grant program focuses on supporting academic research on issues related to the reform of criminal and civil laws prohibiting or regulating the use and distribution of traditionally illicit drugs. The center supports scholarship that examines the impact of modern drug laws, policies, and enforcement on personal freedoms and human well-being.

The center aims to support 3–5 research projects each academic year. Standard awards will range between \$2,500–\$10,000.

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