

# Differentiation between Opiate Addicts in Relation to Judicial Problems

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## SUMMARY

**Introduction** Some research results point to significant benefit in the use of methadone substitution treatment in reduction of criminogenic activities in opiate addicts, as in positive affect on their somatic and mental state.

**Objective** The objective of the study was to indicate factors which lead to criminogenic activities in addicts with judicial problems before entering substitute, methadone program.

**Methods** Addicts were divided into two groups: addicts who had judicial problems before they entered substitution methadone program (group A-46 addicts) and addicts without judicial problems (group B-20 addicts). A questionnaire containing basic data about the addicts in the treatment program (Pompidou questionnaire) was for questioning.

**Results** A statistically significant difference was recorded related to the way of taking PAS. The largest number of examinees from the group A took primal PAS intravenously (41; 89.1%), while from the group B 11 took it intravenously (55.0%). The majority of examinees in the group A committed the first criminal act before taking PAS (psychoactive substances) (19; 41.3%), then after taking so-called harder PAS (16; 34.8%), and finally after taking the so-called lighter PAS (11; 23.9%). In somewhat over half of the examinees in the group A (24; 52.2%) the measure of juvenile court was imposed. A suspended sentence was passed upon 19 (41.3%) examinee, then prison sentence in 16 (34.8%), multiple prison sentences in 6 (13.0%) and misdemeanour in 4 (8.7%).

**Conclusion** Future research at our centre should show the efficiency of methadone program in a decrease of risky behaviour, degree of criminogenic activity and judicial problems, improvement of life quality, as well as show the ways for preventive acting.

**Keywords:** addicts; opiates; judicial problems

## INTRODUCTION

A great number of studies comparing (which/that compare) involvement of offenders abusing psychoactive substances (PAS), with involvement of those not using them, indicate that the abuse of PAS can be a factor leading to crime and social-pathological behaviour in general. Using the method of parallel groups, researchers compared addicts and delinquents, as groups of subjects with different forms of deviant behaviour. Persons predisposed to delinquent forms of behaviour often, in a psychological sense, develop from one form of early neglect. Under greater pressure, a delinquent chooses different behaviour patterns, which are not always regressive in their character and are less obvious than those chosen by an addict. Unlike a delinquent, the addict is always on the verge of losing contact with reality and mental disintegration due to weak and with time even weaker object relations and connections with the real world [1].

Although there is a considerable degree of agreement among researchers regarding a strong connection between PAS abuse and

criminogenic behaviour, there are also significant differences in interpretations of the sequence of events, i.e. differentiating the cause from the consequence. The approach claiming that criminal lifestyle leads to experimenting with PAS is supported by some researches [2, 3]. Authors claiming that addiction causes criminogenic behaviour give reference to the model of economic coercion established by Clayton and Touchfield (1982). Furthermore, results of some longitudinal studies indicate that criminogenic behaviour and abuse of PAS are preceded by similar sets of social, psychological, and demographic variables [4].

Some researches suggest that in 2/3 of subjects PAS abuse is preceded by criminal behaviour, which is especially true if altered antisocial behaviour with elements of violence has been observed early in youth. Other authors suggest that in 50% of subjects' criminogenic activity occurs first, then in 25% of subjects PAS consummation is primary, and in the remaining 25% of subjects these two occur simultaneously. This process could be developed because: 1) some persons completely devote themselves to PAS consummation and become offenders

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consequently, as this is the way to ensure continual use, or 2) those that were minimally devoted to criminal behaviour, later used PAS, and after some time became addicted to both behaviours. Those persons have specific lifestyle, since stimulation of adrenal cortex through criminogenic activities is believed to be equivalent to the thrill achieved through obtaining and consummation of PAS [5].

Addicts conceal their problem for long periods of time due to the fear of social condemnation, stigmatization, and social isolation, more than 50% of cases do not receive any kind of treatment, and treating of discovered ones frequently starts too late. In most addicts, instead of abstinence stabilization a relapse occurs, indicating that addiction is a state of long-term functional brain disorder [6, 7]. In most addicts periods of abstinence from the main agent of addiction are possible (with medications or without them) and are interrupted by a relapse [8].

Some researches results have shown significant benefit from methadone substitution treatment use for reduction of criminogenic activities in opiate addicts, and its positive impact on their somatic and mental state [9-13]. It is believed that programs using higher daily methadone dosages in the maintenance period than in detoxification treatment, paired with necessary engagement of social services providing consultations and support are more efficient.

Substance addiction is manifested as a compulsive need to take PAS notwithstanding serious negative consequences, whereas this behaviour is traditionally considered as wrong but the addict's voluntary choice. Yet, recent studies have shown that long-term abuse leads to changes in brain structures that are important for behaviour control. This knowledge should lead to the change in the approach to prevention and treatment of these disorders [14].

## OBJECTIVE

The objective of the study was to present socio-demographic characteristics of male opiate addicts, and to indicate factors which led to criminogenic activities in addicts with judicial problems before entering the methadone substitution program.

## METHODS

Research was conducted at the Methadone Centre of the Department of Psychiatry at the General Hospital in Valjevo. Over the period from July 1, 2008 to June 30, 2010, 66 male addicts were included in the methadone substitution program. With regard to judicial problems they had, the addicts were divided in two groups: addicts who had judicial problems before entering the substitution methadone program (Group A) and addicts who did not have judicial problems (Group B). There were 46 addicts in the group A (69.7%), and 20 addicts in the group B (30.3%). In the research we used a questionnaire for collecting basic data on the addicts in the treatment program (Pompidou questionnaire), which is used in many European countries

so that prevalence of PAS abuse, modalities of use, and accompanying harmful effects could be determined. Program package SPSS 13.0 for Windows was used for statistical data processing.

## RESULTS

The average age of subjects in the group A was 31.54 years (SD=7.37), and in the group B 31.50 years (SD=6.84), and there was no statistically significant difference ( $t=0.022$ ;  $p>0.05$ ).

As the top three most influential factors that caused PAS usage, subjects from both groups listed three factors they considered crucial for starting PAS use: influence of peers or partners, having fun, and lack of knowledge about harmful effects.

In respect of sociodemographic characteristics there were no statistically significant differences between the tested groups. Most of the subjects from the group A were single (31; 67.4%), without children (31; 67.4%), with secondary education (23; 50.0%), came from unbroken families (27; 58.7%), and with parents who had the same level of education (31; 67.4%). Most of the subjects from the group B were also single (16; 80.0%), without children (18; 90.0%), had secondary education (15; 75.0%), and came from unbroken families (11; 55.0%), with parents who had the same level of education (10; 50.0%). Most subjects from the group A rated their material situation as below average (31; 67.4%), and from the group B as average (11; 55.0%), but there was no statistically significant difference.

A statistically significant difference was recorded with regard to the route of PAS administration. Most subjects from the group A took primary PAS intravenously (41; 89.1%), while (11; 55.0%) the subjects from the group B took it intravenously.

In further research, an analysis of subjects who had judicial problems was performed in relation to the time period when judicial problems occurred and penalty passed as the consequences of their criminogenic activities. Most subjects from the group A committed their first criminal act prior to taking PAS (19; 41.3%), then after taking the so-called hard PAS (16; 34.8%), and finally, after taking the so-called lighter PAS (11; 23.9%). In slightly more than half of subjects from the group A (24; 52.2%) a juvenile court

**Table 1.** Regression analysis results; variables analysed as predictors of subject's involvement in criminogenic behaviour

Model	$\beta$	t	p
Age	-0.334	-1.345	0.184
Education	-0.176	-1.338	0.186
Material situation	0.142	1.146	0.257
Employment	-0.007	-0.057	0.955
Age when PAS was taken for the first time	0.021	0.123	0.903
Marital status of parents	-0.190	-1.347	0.183
Duration of primary PAS use	0.628	3.086	0.003
Father's education level	-0.0237	-1.418	0.162
Mother's education level	0.201	1.286	0.204

measure was pronounced. Probation was sentenced to 19 (41.3%) subjects, then prison to 16 (34.8%) subjects, multiple prison sentences to 6 (13.0%), and a misdemeanour sentence to 4 (8.7%).

Regression analysis based on socio-demographic characteristics and variables associated with PAS consummation (age, education, material situation, employment, age when PAS was taken for the first time, marital status of parents, duration of primary PAS use, father's and mother's education), showed that the duration of primary PAS use represented a significant predictor of criminal behaviour in the subjects ( $p < 0.05$ ) (Table 1).

## DISCUSSION

Researches have shown that methadone substitution treatment program lowers the rate of criminogenic activities, reduces spreading of infectious diseases that occur due to risky behaviour, and leads to improvement of somatic and mental state of addicts and their social rehabilitation [15]. None of the subject who were not engaged in criminogenic activity before entering the program (group B) had judicial problems during the current treatment, and out of 46 subjects who had judicial problems before entering methadone program, 7 subjects had judicial problems in the course of current treatment.

Some researchers claim that models based on assumption that heroin use causes criminogenic activity are considerably simplified. Several authors have offered a model according to which heroin use and criminogenic activity basically occur simultaneously, but for a different reason, concluding that heroin addiction will not necessarily force users to commit criminal acts [16]. Alternative explanations include ideas that criminal and heroin use tend to occur in the same environment, since heroin use and related criminality can be seen as a trend in some environments, since earnings gained through criminogenic activities enable users to consume great quantities of heroin. Our research showed that a greater number of subjects (59.7%) committed their first criminal act after taking PAS, while 34.8% of subjects committed the first criminal act after taking the so-called hard PAS, which could be explained as a consequence of financial problems caused by PAS abuse.

Swedish researchers have developed a typology based on the pattern of criminogenic behaviour observed in a sample of 698 male addicts (not exclusively opiates). Their four types included: Type 1 – addicts perpetrators of criminal acts (25.4%); Type 2 – perpetrators of criminal acts and addiction (24.4%); Type 3 – addicts perpetrators of less serious criminal acts (30.2%); Type 4 – emotionally unstable addicts with little or no criminal activity (20.0%).

As expected, they have confirmed that PAS users do not commit criminal acts for the sole purpose of financing their habit. Their result supports the research which indicates that perpetrators of criminal acts and addicts tend to come from the same population. Their typology has shown that this is not true for all addicts, and that a certain number of

them had apparently committed crimes before they started to use PAS [17].

However, in Type 4 a previously existing criminal career has had a small impact, while individual factors, especially emotional problems, and in some cases mental illnesses have been of greater importance for developing and shaping of their addiction.

The time spent in methadone treatment contributes greatly to the reduction of daily PAS consumption. Even though consumption is not completely prevented, monitoring of a model that shows reduction in criminal earnings indicates that there is a benefit from substitute treatment implementation [18-22].

In our research, subjects with judicial problems were frequently single (67.4%) and described their material situation as below the average (67.4%). Opiate addicts go through turbulent phases for the most part of their adolescence. These phases are characterized by emotional problems, wrong behaviour patterns, tendency for identification with wrong role models and groups, first judicial problems, family conflicts, etc. In such relationships it is hard to achieve adequate marital relations and they are primarily directed towards partners who also have not achieved adequate social positions. The financial situation of addicts should be interpreted in view of the current economic circumstances (unemployment, uncertainty due to economic instability, institutional problems, etc) [23]. In this group of subjects the largest number (50.0%) completed secondary school and came from unbroken families (58.7%) in which both parents had the same education level (67.4%), although some researches indicate that there is a larger number of addicts who come from families in which mother has lower level of education, where the emphasis is put on the importance of her competence for solving family problems.

The largest number of subjects who had judicial problems (89.1%) was taking opiates intravenously. This fact may indicate that they are long-standing addicts, who have experienced considerable material problems. However, it was observed that age when the initial PAS was taken was lowered, and the time interval from taking any substance to switching to primary agent of addiction was shortened. Furthermore, switching to intravenous intake was also quicker, which later on makes the adequate treatment of this group of addicts difficult. In our region, the largest number of addicts starting the drug abuse used to belong to the age group 14-25 years. Nowadays, the first PAS taking is experienced at the age of 10 years, and there is an increasing number of those who become addicts after the age of 30 years. This indicates that addiction is a complex socio-medical problem with a number of aspects that should be investigated.

The duration of primary PAS use is defined as a variable, since it is an important predictor of subjects' involvement in criminogenic behaviour. The subjects included in the substitution program were heroin addicts who had previously underwent ineffective addiction treatments and unstable periods of abstinence, so it was expected that the duration of primary PAS use was an important predictor.

In our research, a group of male addicts was singled out, since the group of women who met the criteria for inclusion in the substitute program was inadequately small at the period of observation. This is considered to be the consequence of cultural characteristics and inclination of men to experiment with PAS, or maybe it is just harder to register female addicts.

## CONCLUSION

Implementation of substitution therapy in the treatment of opiate addicts represented a response to an increase in viral infections due to risky behaviour of this population, and a desire to influence their criminogenic behaviour and reduce judicial problems. In addition, by following established guidelines addicts are provided with adequate social rehabilitation and monitoring through healthcare

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## Разликовање опијатских зависника у погледу судских проблема

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### КРАТАК САДРЖАЈ

**Увод** Резултати неких истраживања су указали на значајну корист од примене метадонског супституционог третмана у смањењу криминогених активности опијатских зависника, као и позитиван утицај на њихово телесно и психичко стање.

**Циљ рада** Циљ рада је био да се укаже на факторе који су довели до криминогених активности зависника са судским проблемима пре укључивања у супституциони, метадонски програм.

**Методе рада** У супституциони метадонски програм укључено је 66 опијатских зависника мушког пола. У погледу судских проблема разликовали су се зависници који су пре укључивања у метадонски програм имали судске проблеме (група А-46) и зависници који их нису имали (група Б-20). За испитивање је коришћен упитник с основним подацима о зависницима у програму лечења (Помпиду упитник).

**Резултати** Статистички значајна разлика је утврђена у односу на начин узимања психоактивне супстанце (ПАС). Нај-

већи број испитаника групе А примарну ПАС је узимао интравенски (41; 89,1%), а из групе Б око половине испитаника (11; 55,0%). Највећи број испитаника групе А је учинио прво кажњиво дело пре узимања ПАС (19; 41,3%), потом након узимања тзв. тежих ПАС (16; 34,8%), и коначно након узимања тзв. лакших ПАС (11; 23,9%). Код нешто више од половине испитаника групе А (24; 52,2%) изречена је мера малолетничког суда. Условном казном кажњено је 19 испитаника (41,3%), затворском казном 16 (34,8%), вишеструком затворском казном шест испитаника (13,0%), док је прекршајна казна изречена четворици испитаника (8,7%).

**Закључак** Будућа истраживања у нашем центру требало би да покажу ефикасност метадонског програма у смањењу ризичног понашања, степена криминогених активности и судских проблема, побољшању квалитета живота зависника од опијата, као и начине превентивног деловања.

**Кључне речи:** зависници; опијати; судски проблеми