

# Chapter 5

## Substance Abuse

### a) Alcohol and cigarettes

The vast majority of the members of the sample smoked cigarettes (91%). This rate of smoking is more than 3 times the rate for the general adult male population. It also represents an increase on the results for the 1986 Mountjoy survey which showed that 80% of prisoners were smokers.

In 1986, 87% of the sample said that they drank alcohol when free. By 1996, the equivalent figure was reduced very appreciably to 68%. Surprisingly almost one in three of the prisoners claimed never to drink alcohol, although there were a few recovered alcoholics in this group. The reduction in alcohol drinkers is likely to be strongly linked with increasing drug use, in other words with changing preferences in chemical dependence rather than any increase in abstemiousness. This conclusion is confirmed by the fact that of 35 prisoners who said they never used alcohol, all but 3 were users of heroin.

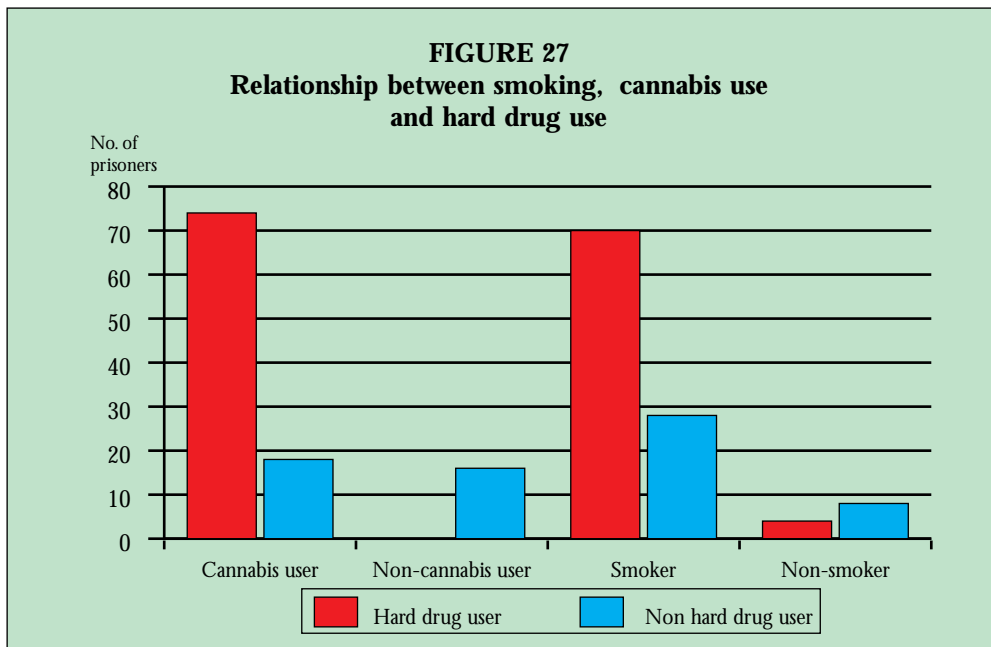
Of the total sample, 20, or 19%, admitted an alcohol problem or had been in treatment for alcoholism. This is more than a quarter (27%) of those who drank alcohol. Two people admitted to a serious alcohol problem for which they had never received treatment. Of the 18 who had been in treatment most claimed that it had been of some value, but 5 claimed that it had been of no use to them. One of these prisoners said that he was not really a problem drinker and had been forced into treatment by the criminal justice system. One person not currently drinking had had treatment for alcoholism in the past.

### b) Cannabis

Almost as many prisoners smoked cannabis as smoked tobacco. Eighty-six percent of the sample said they used cannabis and only 15 prisoners claimed never to have used it. Again, these figures represent a very considerable increase on the position in 1986, when 59% of prisoners said that they had used cannabis.

Of the cannabis smokers, 31% claimed to be only occasional users, 46% regular users and 23% daily users. There was an important relationship between smoking of both tobacco and cannabis and use of more serious drugs, mainly heroin. Of 83 users of opiates, hallucinogens, and stimulants in the sample (71 of whom had used heroin),

all without exception had used cannabis and all but 3 were current cigarette smokers. On the other hand, 18 of the cannabis users had never used more serious drugs and 28 of the cigarette smokers had never done so. These relationships are graphed in Figure:



Cannabis is often described as a gateway drug to heroin but these results, while they confirm a strong association between heroin use and cannabis use and for that matter smoking, do not tell us anything definitive about cause and effect in these relationships. For one thing, it is possible that cannabis or tobacco smoking were actually preceded by hard drug use. It should also be noted that a sizeable proportion of cannabis users (20%) had not used harder drugs and an even greater proportion of smokers had not done so (29%).

A useful statistic for examining the relationships between risk factors and negative outcomes is the Population Attributable Risk Percent (PARP). If we assume that cannabis and tobacco smoking always preceded hard drug use and can be regarded as predictive risk factors for hard drug use, the calculated PARP statistics in this sample are 100% for cannabis and 46% for tobacco. These statistics can be interpreted as indicating that a prisoner who has completely avoided cannabis use will be 100% sure to avoid hard drug use and that 46% of prisoners who manage to avoid becoming smokers will avoid hard drug use.

Although these results indicate very significant links between the tendency to smoke either cannabis or tobacco and the tendency to use hard drugs, they are in a sense a

*reductio ad absurdum* of the gateway theory. It is clear that these results cannot be extrapolated beyond the prison population because it is known that far greater proportions of cannabis and tobacco smokers in the general population do not ever use hard drugs. The equivalent PARP statistics for the general population are likely to be by comparison tiny. Thus, although it may be true that almost all prisoner addicts smoke tobacco, it would be erroneous to infer from this that cigarettes are generally a gateway drug for heroin. The smoking habits of addicts are probably more correctly interpreted as a cultural or lifestyle phenomenon and as a consequence or concomitant rather than a precursor of more serious addiction. Similarly, although the links between cannabis and hard drug use are even stronger, it would be wrong to conclude that this is confirmatory evidence that cannabis is a gateway drug for heroin.

### **c) Heroin and other drugs**

There were 83 prisoners in the sample of 108, who had experience of drugs other than cannabis (77%). A large majority of these (71 out of 83) had used heroin and, for a large majority, heroin was the drug of choice and the main drug of addiction. This amounts to 66% of the total sample, or 2 out of every three prisoners, who had used heroin. Six individuals had used cocaine but not heroin and two, amphetamines but not heroin. One additional prisoner had regularly used ecstasy and another had used it just once. For 2 prisoners the only drug experience apart from cannabis was the use of L.S.D. on just one occasion

For the most part, then, these prisoners were specifically heroin users. However, they did not use heroin in a narrow or exclusive way. They were, in fact, overwhelmingly polydrug users who had experience of, at least on an occasional basis, a wide variety of drugs, including stimulants, such as ecstasy and cocaine, hallucinogens, such as L.S.D., and narcotics, such as heroin and physeptone. All but one of the heroin users had experience of such other drugs, so that in total 82, or 76% of the complete sample, had used drugs other than heroin or cannabis. As as been indicated a small number of prisoners had very limited experience of just one or two drugs but for the most part the members of the sample who used drugs, including those with a clearcut heroin dependency, did so in a promiscuous manner, quite frequently mixing stimulants, hallucinogens, and depressant drugs as they came to hand.

Table 13 presents figures which indicate the relative popularity of various drugs and categories of drugs across the sample of prisoners. As can be seen experience with L.S.D., ecstasy, speed, cocaine and tranquillizers appears to be very widespread in this group of prisoners. Each of these drugs had been used by at least half of the sample. They were, then, almost as widely experienced as heroin itself. In the large majority of cases, however, use of these drugs was occasional and very much secondary to heroin use. Crack cocaine, cough bottles, barbiturates and volatile substances (glue,

petrol etc.) had not been used as frequently but were, nonetheless, quite commonplace having been used by between a fifth and a third of the total sample.

**Table 13: Use of drugs other than Heroin and Cannabis**

Total with any experience = 82 (76%) = % of sample				
Cocaine 60 (56%)	Crack Cocaine 32 (30%)	Speed (Amphetamine) 66 (61%)	L.S.D. 70 (65%)	
Cough Bottles 27 (25%)	Volatiles 37 (34%)	Barbiturates 20 (19%)	Tranquillisers 59 (55%)	Ecstasy 65 (60%)

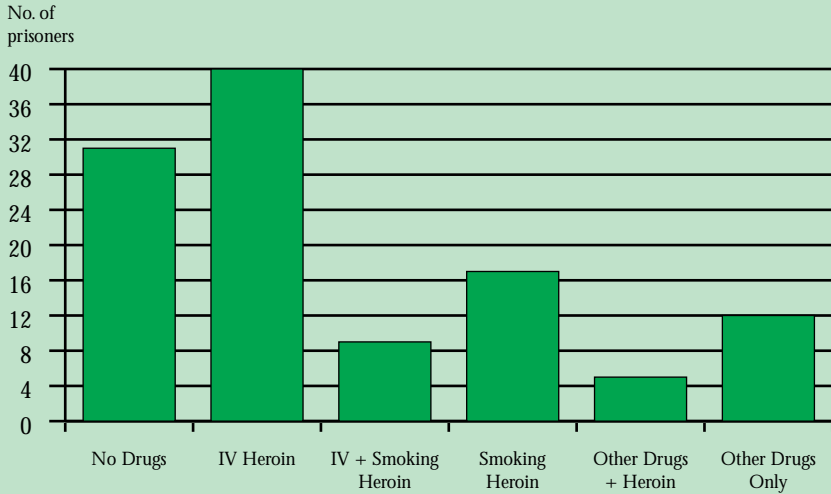
The distribution of prisoners' main drug habit, if any, is graphed in Figure 28. When asked to describe their main habit 40 prisoners said that it was intravenous use of heroin, 17 the smoking of heroin ("chasing the dragon"), and 9 a combination of smoking and intravenous use. Three more prisoners said they were intravenous users of heroin but described their main habit as a combination of this and cocaine (2 cases) and ecstasy (1 case).

Almost all the intravenous users, whether solely or in combination, had been daily users or very seriously dependent. However, 4 of the smokers only group said they were occasional users without a very strong habit. They are nonetheless included in the heroin smoking group in Figure 28. On the other hand, the remaining 13 prisoners, who described their main habit as solely smoking heroin, had a serious habit, and 7 of them said that they had also used intravenously. Another prisoner had been an intravenous user of heroin but said that his main habit was now physeptone (methadone) taken in syrup form. This person is included in the other drug plus heroin group. One other prisoner said his main habit was a combination of smoking heroin and use of tranquillizers.

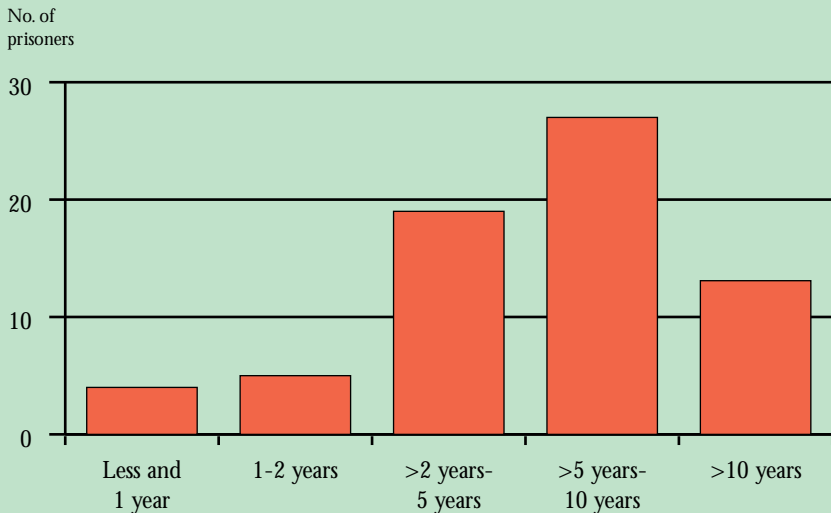
Of the prisoners with experience of drugs other than cannabis but not including heroin, 3 described cocaine as their main habit. However, 2 of these said they were only occasional users and not dependent so they have been included in the 'No main habit' group along with non-drug users. Three prisoners described ecstasy as their main habit, two in combination with cocaine and amphetamines respectively, and one using ecstasy solely, but very regularly and in large dosages. Six other prisoners, who had used L.S.D., amphetamines and cocaine, said they had done this only once or a few times and could not be described as having a main drug habit and they too are included in the 'No main habit' group in Figure 28.

Altogether 71 prisoners mentioned heroin as being in some way part of their main drug habit. Of these, 60, that is 56% of the total sample, had used intravenously. In total 68 prisoners or 63% of the members of the sample were classed as having or having had a serious heroin dependency.

**FIGURE 28**  
**Prisoners' descriptions of main drug habit if any**



**FIGURE 29**  
**Duration of serious heroin habit (n =68)**



It is worth pointing out that of the 25 prisoners who had no experience of drugs other than cannabis, 14, or 56%, had an admitted alcoholic problem. This means that only 11 prisoners out of the 108 did not have experience of either drugs other than cannabis or an alcohol problem. Six of these 11 prisoners had used cannabis.

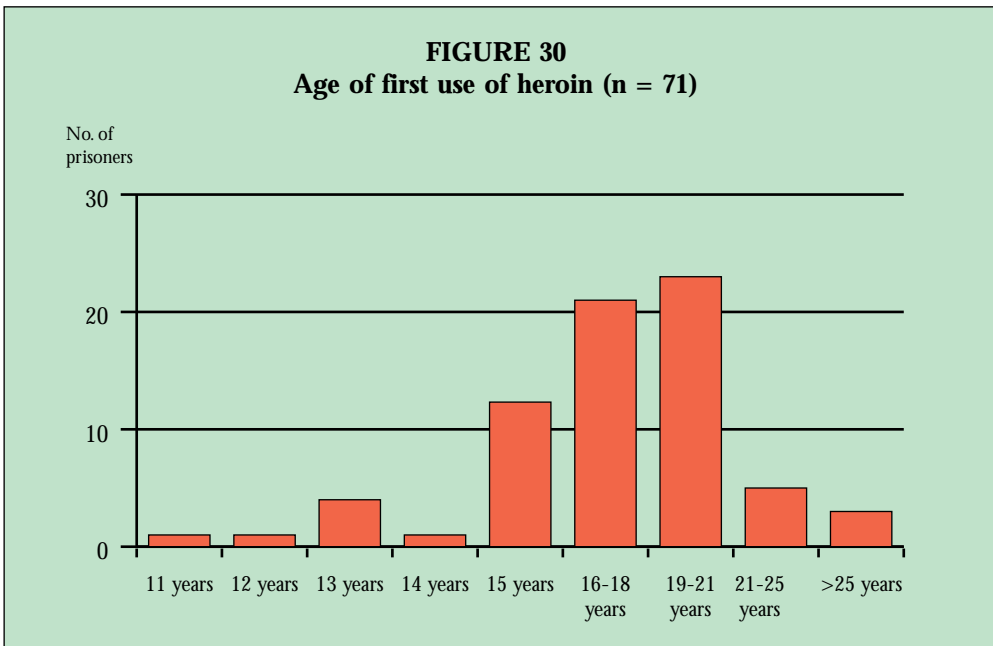
The 68 serious heroin abusers were asked about the duration of their habit. Periods of use ranged from 6 months to 20 years. The average period of use was 7 years (standard deviation 4.6 years). Altogether 9 prisoners from this group had been using for 2 years or less, 46 for more than 2 years but less than 11 years, and 13 had been using for more than 10 years (see Figure 29 ). Forty of the 68 said that their drug habit had been continuous, except for unavoidable interruptions and 28 said that there had been intermittent periods of abstinence during their career of heroin dependence.

The group of 71 heroin users were also asked about their age of initiation into opiates. The average age of initiation was 18 years (standard deviation 3.5 years). Seven had first used opiates before the age of 15 years and 8 had first used when they were over 21 years. The most common (modal) year for opiate initiation was 15 (12 cases). The age distribution for initiation is presented in Figure 30.

The figures on drug use among prisoners clearly demonstrate a significant deterioration from the situation that prevailed in Mountjoy Prison in 1986, at the time of the previous survey. Then 37% of the sample had experience of a drug other than cannabis compared with more than twice that rate (77%) in the present survey. In 1986, 31% of the sample were classed as having a serious drug dependency compared with 63% or again more than twice the rate in this survey. Finally, the proportion with experience of IV use of heroin has increased from 29% to 56% over the 10 years. This is not quite as large an increase as in the other two categories and this fact can be linked to the greater prevalence of smoking heroin as the main modality of use. Eleven of the 71 prisoners (15%), who had used heroin, had never injected. All the heroin users in the 1986 survey had injected. This change reflects the increasing tendency in recent years amongst Dublin addicts generally to smoke rather than inject heroin, as noted by the reports of the Health Research Board [61], which collate statistics on people attending treatment centres. The growth in popularity of smoking heroin and the avoidance of injecting has been most marked in new contacts with treatment centres.

Quite clearly, the results of this survey indicate that the number of prisoners with a drug problem in Mountjoy Prison has greatly escalated over the 10 years to 1996. Indeed, the figures, which are percentages, somewhat understate the growth of the problem because the 1996 rates refer to a significantly larger prison population, so that, for example, in 1996 we are talking about 77% of 650 (501) prisoners rather than 37% of 550 (204) prisoners, who have used drugs other than cannabis.

**FIGURE 30**  
**Age of first use of heroin (n = 71)**



**d) Drug use in prison**

Forty-five prisoners, or 42% of the total sample and 63% of those that had ever used heroin, had used heroin while in prison on the current occasion. Of this group of 45, 37 had used intravenously while in prison on this occasion. The 8 other prisoners said they had only smoked heroin while in on this sentence or remand. Five of these were people who used intravenously on the outside, while 3 were normally heroin smokers.

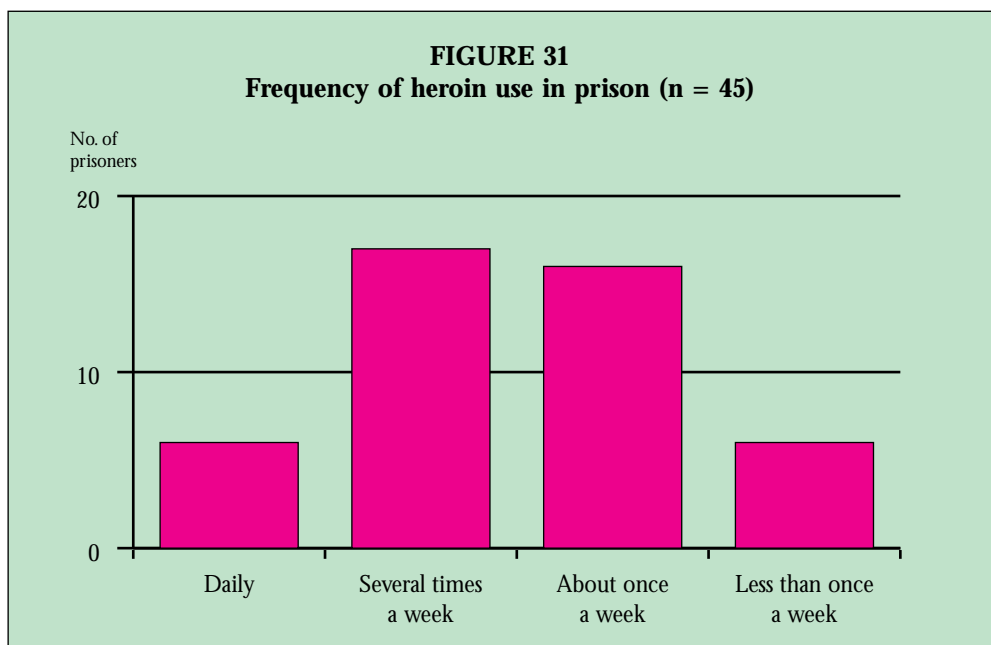
All told, 18 of the 60 people with IV experience claimed not to have used heroin on the current confinement in prison. However, it should be noted that most of this group of 18 had been only a short time in the prison. Eleven had been in prison for a month or less and 5 for a week or less. It can be assumed, therefore that some of this group are likely to use heroin in prison, but had not yet been presented with the opportunity to do so. However, some had made a genuine and determined decision to avoid heroin and three had managed to do so for periods of more than 3 months, in fact for 5 months, 6 months and 18 months.

Only 2 of the 18 remand prisoners had used drugs in prison on this occasion. This means that 48% of the total group of convicted prisoners, that is almost half, had used drugs on this sentence. Perhaps the best indicator of the extent of the drugs culture in the prison is the prevalence of drug use amongst the convicted prisoners who had been imprisoned for at least three months. This group, which excludes the remand prisoners and those in unusual categories such as debtors and barring order cases and

people that are likely to be in the prison for only a very short time, represent the core of relatively longterm prisoners, who are likely to dominate the ethos of the prison. There were 52 prisoners in this group and 29 of them, or 56%, were using heroin in prison on this sentence.

The Second Scottish Prison Survey [11] asked prisoners if they had used drugs in the last 6 months in prison. Forty-five percent said that they had done so, but a large majority were referring to cannabis solely. In fact only 9% claimed to have used heroin in the previous 6 months in prison — less than a quarter of the rate found in this Mountjoy study. Only 5% of the Scottish prisoners claimed to have injected in the last 6 months and this is about one seventh of the Mountjoy figure (35%).

Those using heroin in Mountjoy prison were asked about their frequency of use. Twenty-three said they were using daily or several times a week, 16 about once a week, and 6 less than once a week or only very occasionally. These results are presented in Figure 31. Some of these prisoners suggested that they had a constant supply of heroin available to them, but more often prisoners spoke of considerable difficulty in obtaining supplies and reported that the supply of heroin had become more scarce in recent months due to new measures, such as searches and heightened surveillance of visits. Many of those prisoners, who were not using very frequently, said that they would use heroin as often as they could get hold of it, but that the supply was quite limited and sporadic. Access to heroin appeared to be different in different locations of the prison.





The prisoners were asked about their source of drugs in the prison, but they were not pressed on this question and all did not give a response. In total 17 prisoners admitted that they got drugs into the prison through smuggling during visits. Several others said that they themselves were unable to get drugs into the prison and depended on other prisoners from whom they would buy drugs or obtain drugs by some form of exchange. A few spoke of the existence of known and reliable suppliers amongst the prisoners, with whom it was possible to leave a specific order for a consignment of drugs. No prisoner made mention of any other route of supply; in particular no one made any mention of obtaining supplies from a prison officer or other member of staff.

There was anecdotal evidence from a couple of prisoners to the effect that the more stringent recent measures against drug smuggling in the prison had impacted most dramatically on the supply of cannabis, because of the relative bulk of that drug. This was significant because so many of the prisoners used cannabis and it was suggested that a few of them had resorted to heroin use because of the scarcity of cannabis.

Six prisoners said that their first ever experience with heroin had occurred in prison. One said that this had been on the present sentence. One further prisoner said that he had first used heroin on the outside but had not become dependent until his previous period of imprisonment during which he regularly used heroin.

<b>Table 14: Use of drugs other than Heroin and Cannabis in prison on this sentence or remand</b>				
Total with any experience = 24				
Cocaine 15 (14%)	Crack Cocaine 4 (4%)	Speed (Amphetamine) 9 (8%)	L.S.D. 5 (5%)	
Cough Bottles 0 (0%)	Volatiles 1 (1%)	Barbiturates 6 (6%)	Tranquillisers 6 (6%)	Ecstasy 16 (15%)

Table 14 presents the findings on the prevalence of use of drugs other than heroin and cannabis in prison while on the present sentence. All of the people using these drugs were convicted and also using heroin in the prison. Thus, while only 22% of the total sample used drugs other than heroin and cannabis during the current period of imprisonment, 53% of those using heroin in the prison did so. Ecstasy, cocaine and speed, in that order, were the most common.

### **e) Drug use by prisoners: International comparison**

International comparison of the problem of drug abuse for prison systems is impeded by a lack of research and, where research exists, by definitional ambiguities and confusions. For example, research findings often simply refer to the global category of

drug user and fail to distinguish between cannabis, cocaine, and opiate users and between different levels of use. However, it is clear that drug abuse by prisoners has emerged in the 1980s and through into the 1990s as one of the most serious and urgent problems facing penal systems around the world. A commentator on the Italian prison system [62] has written that “the impact of drug use and distribution on the penal system as a whole cannot be overstressed”. Or again a German commentator [63] has written: “During the late 1980s prisons underwent unprecedented change owing to the influx of prisoners with drugs problems..... Health issues are becoming paramount in the running of prisons — a circumstance which may find prison officers culturally unprepared and professionally untrained”.

It is estimated that approximately 20% of German prisoners are seriously drug dependent. In Italy in 1992, it was found that about 30% of prisoners were drug dependent with this figure rising to 50% in the large cities like Rome and Milan. A number of Spanish surveys [64,65] have estimated the number of regular users of illicit drugs at between 60% and 80% of the prison population, but this is evidently a far broader definition of drug user than that in the Italian and German studies. The Swedish authorities [66] have for many years carefully monitored the drug using status of new admissions into the prison system. In 1991 and 1992 the proportions of new admissions, who were drug dependent, were 40% and 42%, and a large majority of these were daily users. In Holland [67] in 1992 just under a quarter of receptions into prison were registered drug users and 63% of these were seriously heroin dependent.

The US Survey of State Prison Inmates [12] provides a useful statistical breakdown of drug use amongst prisoners, which permits meaningful comparison with the results of the present study. In 1991, it was found that 79% of prisoners in State prisons had ever used any drug, including cannabis. Fifty percent had used cocaine or crack and 25% had used opiates. The Mountjoy figures for comparison are 86%, 56%, and 66% respectively. In other words the incidence of drug use in the Mountjoy sample is, in each of the 3 areas, higher than in the US State prison system. Cocaine and crack are the largest problem according to the US Survey of State Prison Inmates [12] but a larger proportion of Mountjoy prisoners than US State prisoners have used cocaine. Most significantly, the rate of exposure to heroin is more than two and a half times greater in the Mountjoy sample. In the U.S. sample only 31% of all prisoners had ever injected a drug compared to 56% of the Mountjoy sample.

When regular use rather than experience of a drug is examined it is found that 62% of the US State prisoners had regularly used drugs at some point in their lives. Fifty-two percent had regularly used cannabis, 32% cocaine or crack and 15% heroin. Perhaps the most startling figure for comparison here is the 63% of the Mountjoy sample who had been serious, for the most part, daily IV users of heroin. In other words, more of the Mountjoy population are regular serious abusers of heroin than are regular users of any drug, including soft drugs such as cannabis, in the American

State prison population. This is a stark reminder of the unusual seriousness of the drug problem in Mountjoy Prison — indeed more prisoners would appear to be using heroin intravenously in Mountjoy Prison than have ever used it in the U.S. sample. The figures also point up the fact that, where in the U.S. cocaine and crack appear to be a greater problem than heroin use, in Ireland the paramount problem is heroin.

Of course the appropriate base for comparison with the American figures would be the entire Irish prison system. Mountjoy Prison, undoubtedly, has a particularly marked concentration of drug using prisoners, such as is not found throughout the prison system. For example, experience of drug use is likely to be much lower in Arbour Hill which houses mainly sex offenders. The contrasts with American and European figures which generally indicate an egregiously serious drug problem in the Mountjoy population would be considerably moderated if the comparison was with figures for the whole Irish prison system.

### **Summary of main findings**

- Ninety-one percent of the prisoners said they smoked cigarettes.
- Sixty-eight percent of the prisoners said they drank alcohol when free, so just under one third said they did not. Twenty prisoners (19%) admitted to an alcohol problem or that they had been in treatment for alcoholism.
- Eighty-six percent of the sample said they used cannabis. Of the cannabis smokers, 31% claimed to be only occasional users, 46% regular users, and 23% daily users.
- There were 83 prisoners (77%) in the sample, who had experience of drugs other than cannabis. A large majority of these (71 out of 83) had used heroin and, for a large majority, heroin was the drug of first choice and the main drug of addiction. This amounts to 66% of the total sample, or 2 out of every three prisoners, who had used heroin.
- When asked to describe their main habit, 40 prisoners said that it was intravenous use of heroin, 17 said the smoking of heroin ("chasing the dragon"), and 9 said a combination of smoking and intravenous use. In total, there were 60 prisoners in the sample with experience of intravenous use of drugs.
- The prisoners tended to be polydrug users though mainly dependent on and interested in heroin. Sixty-five percent had used L.S.D., 61% amphetamines, 60% ecstasy, and 56% cocaine.
- Of the 25 prisoners who had no experience of drugs other than cannabis, 56% had an admitted alcoholic problem. This means that only 11 prisoners out of the 108 did not have experience of either drugs other than cannabis or an alcohol problem.

- For the 68 serious heroin users, the average duration of use of heroin was 7 years. The average age of initiation with heroin was 18 years. Seven had first used opiates before the age of 15 years and 8 had first used when they were over 21 years.
- Forty-five prisoners, or 42% of the total sample of 108 and 63% of those that had ever used heroin, had used heroin while in prison on the current occasion. Thirty-seven said they had used heroin intravenously in prison, while 8 said they had only smoked heroin in prison.
- Six prisoners said their first ever experience with heroin had been in prison, one on this sentence.
- Only 24 prisoners said they had used drugs other than cannabis and heroin whilst in prison this time. Fifteen percent had used ecstasy, 14% cocaine, and 8% amphetamines.
- Twenty-three prisoners said they were presently using heroin daily or several times a week, 16 about once a week, and 6 less than once a week or only very occasionally.