

The Role of Subculture Theory in the Treatment and Correction of Addiction and
Drug Related Crime

A THESIS Submitted to the Faculty of the School of Graduate Studies and
Research of California University of Pennsylvania in partial fulfillment of the
requirements for the degree of Master of Arts

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California, Pennsylvania
2013

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Dedication

I dedicate this thesis to my husband, William Birdseye, who supported this research through patience, a way of life supporting its ideas, and my freedom to always study what I want to for learning and bettering myself.

Acknowledgements

I wish to thank all of the professors in the applied criminology program at California University of Pennsylvania for their work and guidance over the two years I was their student.

I wish to thank Dr. Elizabeth Larsen for her excellent advice and work with me on this research.

I wish to thank Dr. Emily Sweitzer for teaching me not only about crime but also about qualitative research in this program and for agreeing to be on this committee.

I would thank Dr. John Cencich for teaching me criminology, how it is applied to investigative work and also for his guidance especially on how to write well when he gave it.

Table of Contents

Abstract	6
Introduction.....	7
Review of Related Literature	9
The Crime and Addiction Relationship.....	9
Definitions of Addiction	11
The Debate on Explanatory Causes of Addiction	12
The Criminal Justice System’s Approach to Addiction.....	13
The Medical Community and Addiction Treatment	14
Sociological Discussions of Addiction.....	15
Definitions of Subculture and Subculture Theory.....	16
Arguments for and Against Subculture Theory	17
The Drug Related Subculture Concept	18
Drug Related Identity Change and Cultural Identity.....	19
Application of Sociological Concepts to Addiction Treatment	20
Application of Subculture Theory to Addiction Treatment	21
Method	24
Results	28
Conclusions.....	32
References	35
Appendix A: Questionnaire.....	39
Appendix B: Participant Consent Letter.....	41
Appendix C: IRB Approval Letter.....	42

Abstract

Drug related subcultures can cause or exacerbate addiction and drug related crime. This study surveyed drug and alcohol clinic supervisors on their opinions of the causes of addiction, the role of drug related subcultures in the addiction disease process and crime related to it, and how subculture theory can aid in treatment through asking how to approach the subcultures issue in treatment and programming. It used an open-ended questionnaire and the results indicated that subculture, based on opinions of professionals in the field, does in fact exacerbate addiction, and the application of subculture theory is helpful in treatment. Respondents' answers to the questions are explained qualitatively, and a concluding discussion connects grounded theory to the data.

Introduction

Few people, educated or not, would question whether or not addiction and crime have a relationship. This thesis began in rehabilitative spirit with my sincere desire to learn how to help those ill with addiction. Later, it evolved into a theoretical discussion and a defense of the usefulness of a criminological concept that is referred to sociologically as subculture. Last, it is a researched application of subculture theory to solving the problem of addiction and how to treat it.

Definition is often said to be the beginning to solving any problem. I would also acknowledge that it is not unusual to apply a theory to explaining or solving a problem. It is not unique to prefer an argument in analysis of sides of a theoretical debate. Surely, many academic discussions accomplish these tasks in one way or another. What is different in this thesis is the method of application and manner of preference.

Criminology has long been informed by psychologists and sociologists to be sure. After all these years of learning, it is appropriate to suggest that criminology is able to inform psychology in return. It is also desirable and practical for this to take place in the form of theoretical discussion concerning how best to do so. Similarly, psychologists have long studied the police and the

criminal justice system. It is likewise beneficial in this research for a criminological academic effort to study psychological professionals, in this case, addiction counselors and their opinions of subculture as it relates to the causes and presence of addiction and the correction of it. This thesis is, to some extent, a meeting place of criminology and psychology.

Review of Related Literature

The crime and addiction relationship and how it is approached can be summarized through discussing this relationship in terms of statistical realities, medicinal approaches and issues, criminal justice answers, and sociological discussion. Further, this thesis is about subculture and addiction, subculture and how it has thus far been addressed, and areas that warrant additional examination can also be seen in the literature.

The Crime and Addiction Relationship

In one recent analysis of prison inmates, Sims (2005) found that 57 percent of state inmates and 47 percent of federal inmates reported using drugs in the month prior to their arrests. Further, she cites that 75 percent of all prison inmates can be classified as drug involved offenders. The relationship between drug abuse and criminality is unmistakable. Drugs impair judgment and create criminal environments.

Wilson (2002) describes the relationship between drugs and crime when he says, "illegal drugs contribute to crime by causing some people to steal in order to buy them and other people to use force or bribery to maintain their control over the supply" (p. 744). Whether one feels addiction leads to crime or crime leads to addiction, a relationship exists not limited to the illegal nature of

drug use itself but also to the behaviors and lifestyles that accompany the addicted condition. Adler, Mueller, and Laufer (2007) advise that property crimes and violence are often associated with the drug-crime relationship, and they explain that drug abuse and criminality stem from the same biological, sociological and psychological factors. Addiction should be viewed as a criminological as well as psychological problem.

Criminology is not alone in recognition of the drug-crime relationship. The American Psychiatric Association (APA) describes for example opioid abuse in terms of the reality that “legal difficulties may arise as a result of behavior while intoxicated with opioids or because an individual has resorted to illegal sources of supply (p. 271). The APA also notes that substance abuse of all types “can be associated with violent or aggressive behavior” (p. 207).

Drug abuse and criminality are linked in a number of ways. Boyum, Caulkins and Kleinman (2011) classify drug related crime into three categories. First they discuss psychopharmacologic crime defining it as crimes committed while under the influence of drugs. Second, systemic crime is crime related to illegal drug markets, often violent. Third, economic-compulsive crime is crime that emerges from addicts’ need to buy drugs.

The direct relationship between drugs and crime makes treating addiction itself as imperative as enforcement of drug laws. To examine how to do so, it is necessary to understand not only this relationship but also addictive pathology, cause, treatment and related crime correction on a number of levels including medicinal, legal and social remedies. The social solutions are the focus of this

paper but the medical and law enforcement issues can be examined to understand how and why sociological understanding becomes also important.

Definitions of Addiction

Some consensus exists in the bulk of the literature on the matter of how to define addiction. There are criminological, medical, and social definitions and this review will consider them in this order. Typically, as Erickson (2007) concludes, addiction is “a compulsive, pathological, impaired control over drug use, leading to an inability to stop using drugs in spite of adverse consequences” (p. 17). In similar theme, the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association (2000) defines addiction as “a maladaptive pattern of substance use, leading to clinically significant impairment or distress” (p. 197). Many modern approaches to addiction tend to favor these ideas of addiction, which involve an involuntary loss of control over one’s own behaviors.

Some recent definitions can be seen to consider addiction as originating from multiple causes while still viewing it as a disease. The National Institute on Drug Abuse (2013) defines addiction as a “multi-determined, maladaptive way of coping with life problems that often becomes habitual and leads to a progressive deterioration in life circumstance” and tells us that addiction is a “disease in its own right” (p. 1).

Adrian (2003) gives us an encompassing definition of addiction in her research as “a state of periodic or chronic intoxication produced by the repeated consumption of a drug. Characteristics include compulsion, physical

dependence, dosage increasing tendency and effect detrimental to the individual and society” (p. 1415). It is indeed true as she indicates that addiction affects not only the person but also those around them, and it is useful to realize drug abuse is a social ill as well.

The Debate on Explanatory Causes of Addiction

The questions that surround addiction can be seen as two-fold: First, speculation regarding its classification as a disease, and second, determination regarding its causes. Espejo (2011) includes in his book opposing viewpoints on the matter that include four common definitions on the issue. First, addiction is a brain disease. Second, addiction is a chronic disorder. Third, addiction is not a disease (but rather a chosen behavior). Last, addiction is due to environmental factors.

Many writers tell us these are the commonly held beliefs as to what causes addiction. Sims (2005) similarly highlights the theories with respect to considering correctional clients. Biological theory purports a predisposition to addiction. Psychological theory considers variables such as low self-efficacy and poor coping skills. Sociological theory considers concerns such as negative role models during development, weak bonds to societal institutions, and family interaction promoting addictive behavior.

Some scholars question if addiction is indeed involuntary or if it is to be considered intentional deviance. Others emphasize social factors as primarily responsible. For example, when discussing adolescent substance abuse particularly, Milkman and Wanberg (2005) explain, “the role of social influence in

the etiology of adolescent substance abuse has been identified as central” (p.69). The debate is extensive in the literature and only summarized here before turning to relevant approaches to treatment.

The Criminal Justice System’s Approaches to Addiction Treatment

Treatment theory can be seen as related to causal factors. How a social institution defines a social problem assists in demonstrating addiction is indeed a social problem. Such definitions may also affect how social institutions go about solving or controlling issues surrounding addiction. Wilson (2002) recommends two strategic factors for responding to the drug problem, reducing demand and reducing supply.

Law enforcement plays an important role in solving the crime and addiction problem. Multi-agency partnerships and community policing show promise according to some research as more effective than traditional policing (Mazerolle, 2006). The New York Commission on Drugs and the Courts (2000) found that addiction treatment is the key to reducing crime and that programs that embrace this finding are most effective.

Many researchers agree that the best solution to drug related crime is successful addiction treatment. Boyum et al., (2011) tell us that reducing crime is unequivocally related to reducing drug abuse, and we would do well to study effectiveness of drug treatment programs in a quest to solve the problem (p. 384). Drug courts have grown in number in the past twenty years (Stinchcomb, 2010). His study demonstrates that drug courts and the treatment they administer in a spirit of “therapeutic jurisprudence” yield better results than

punishment efforts to correct drug offenders that have traditionally been used in the past. It can be appropriately argued that in fact drug treatment and drug law enforcement are not opposing goals in the solution to the drug problem, not at all. Quite the contrary, one without the other would be less effective indeed.

Criminal justice programs that recognize such a multifaceted approach have become more common in recent years and more numerous in varied approaches (New York Commission on Drugs and the Courts, 2000). This is evident in the literature where comparative studies involving comparing them to traditional enforcement practices, are becoming more numerous as well. Prison drug abuse treatment programs, community based treatment, other forms of residential treatment, and juvenile drug treatment facilities are all efforts of the criminal justice system aimed at treating and correcting drug related crime (Sims, 2005).

The Medical Community and Addiction Treatment

The medical community sees addiction as a disease, one to be treated with various types of medications or therapies. Addiction treatment is becoming a more specialized field in the medical community, but the premise remains the same. Addiction is a disease. Yet, this field is evolving at a rapid pace (Scott, 2000).

Erickson (2007) explains that twelve step programs are common in treatment of addiction in methadone clinics in treatment of opiate addicts. Half way houses, detoxification units, outpatient psychotherapy, medical remedy by doctors, and inpatient hospitalization are all among the medicinal approaches to

treating addiction and its effects on addicts from both physiological and psychological perspectives.

Sociological Discussions of Addiction

Sociological theorists on addiction are far outnumbered by medical and psychological considerations on the subject, but some relevant insight can be found in the literature. Two articles by sociologists on addiction are particularly relevant to this discussion.

First, Adrian (2003) developed a micro (individual) and macro (society) interaction in considering addiction in cautioning us “addiction is an individual behavior that has a social effect” (p. 1388). She summarizes the main sociological theories of structural functionalism, conflict theory, and symbolic interactionism and how they can be used to understand addiction.

With regard to structural functionalism, she mentions Durkheim and tells us the anomie condition is to blame. Anomie is defined by her as a sociological condition that occurs when shared views of appropriate rules and behavior break down. Anomie, as she explains, causes a state of weak or nonexistent norms. Thus from this structural view, addiction is how some cope with anomie (Adrian, 2003).

Conflict theory examines disproportionate social control of deviance. Most suited to the thesis in this study is the symbolic interactionist perspective. As described by Adrian (2003), the deviance is learned like any other behavior which provides a basis for her regarding the need for a macro-micro model when considering addiction socially. She suggests further that we may therein “better

understand social, cultural, and structural drivers of addictive behaviors as they condition and interact with individual socioeconomic and demographics of a population as well as intrapsychic factors of the persons making up that population” (p. 1414).

Weinberg (2011) more recently insisted addiction is not wisely construed as only a biological condition and that we must consider addicts’ “wider social lives.” (p. 299). Weinberg reviews for us historical sociological perspectives related to addiction examples. This includes that of Merton who was of the view that addicts represent a retreatist adaptation in their criminality. He notes the work of Cloward and Ohlin who suggest addicts represent a double failure in that they fail to achieve by legitimate or illegitimate means. He also reviews a concept known as normative ambivalence theory which is a result of conflicting normative orientations to drug use.

Weinberg tells us the main sociological debate on addiction is in answering whether it is involuntary or intentionally deviant. In any case, and leading to the thesis topic, Weinberg appreciates descriptions of drug cultures, the social settings of drug activity and the self-identities of drug users. He tells us rational choice theory is not credible in relation to addiction and that addiction is culture bound. Last he stresses addiction is not “merely biological determinism” (p. 307).

Definitions of Subculture and Subculture Theory

Tibbets and Hemmens (2010) in their criminology textbook tell us that subcultural criminology sees subcultures as groups of individuals with different

norms than conventional values. To criminology having its roots in sociology, culture is an important issue. Culture can be defined in more ways than one as can subculture. Farley (1990) in his sociology textbook tells us culture is shared in terms of knowledge and beliefs, language, values, ideology and social norms which are behavioral expectations. He then defines subculture as “a set of cultural characteristics shared among a group within a society that are distinct in some ways from the larger culture within which the group exists” (p. 102).

Farley tells us there are two types of deviance. The first is primary which relates to social, cultural, psychological situations. Secondary deviance evolves out of an offender’s self-concept. Addiction and its related crime would be well considered on both primary and secondary levels in this manner. Addicts need help with many psychological and social issues.

As to whether drug-related subculture is a form of deviant subculture, Gelder (2005) tells us that subcultures are positioned precariously in relation to property, labor, class, and the law. Cohen (1955) tells us in his theory of subcultures that the crucial condition for the emergence of new cultural forms is “the existence, in effective interaction with one another, of a number of actors with similar problems of adjustment” (p. 54). Irwin (1970) defines subculture as a social world and an explicit lifestyle. Further, he sees subculture as an action system.

Arguments for and Against Subculture Theory

Notwithstanding the support of sociologists and other subcultural theorists discussed already and drug related subcultures discussed later in this review,

arguments against subculture theory exist. The most obvious arguments against subculture theory come from fields other than sociology, but some sociological arguments against its utility also exist.

According to Gelder (2007), the sociologist Jenks believes that subculture theory ignores the big picture of society itself (p. 31). In examination of Jenks (2005) directly, he does not use the term subcultural theory, but says that by, “having a strong sense of together we can begin to understand and account for what is outside, at the margins or defies the consensus” and that we need to confirm “the human experience is the constant experience of limits” (p. 144).

According to Manning (2007), critiques of subcultural theory can be numerous. Examples of arguments against this theoretical framework are that it overlooks empirical research on popular cultures with regard to drug use; it exaggerates the extent to which behavior is determined by social structures; and it exaggerates the difference between the criminal and the law abiding individual from sociological perspectives. Yet he reminds us subcultural theory is important as it invites researchers to think seriously about the relationship between drug consumption and social practices. Drug related crime lends itself to consideration of subculture as related to drugs and the behaviors surrounding the use of them.

The Drug-Related Subculture Concept

Based on the review of the literature thus far, there is support for the theory that drug related subcultures exist. Other scholars corroborate such a position. McHugh et al., (2012) discuss the role of a perceived belongingness to

a drug subculture with regard to opiate dependent patients. They explain, “illicit drug use frequently occurs in a context of a drug subculture characterized by social ties with other drug users, feelings of excitement and effectiveness deriving from illicit activities, and alienation from mainstream society” (p. 1).

Golub, et al. (2005) discuss the relationship between subcultural evolution and illicit drug use. They define a drug subculture as “an inter-related cluster of cultural elements associated with the consumption of an illicit drug in social settings” (p. 219).

Cohen and Short (1958) long ago described one type of a delinquent subculture as being drug related. Smeja and Rojek (1986) tell us that drug involvement is “intensely social behavior,” and as such, it lends itself to subcultural existence.

Drug Related Identity Change and Cultural Identity Theory

Some promising more recent sociological theory on addiction rests on the ideas of identity, which involves drug related identity and cultural identity. Anderson (1998) explains two themes in her theory of drug related identity change. First, is motivation and the second is opportunity. With the second, she purports that drug subcultures provide important opportunities for drug related identity change in that they offer deviant or alternative identities. These opportunities are defined as the availability of drugs, drug-related friends, and a drug lifestyle within a non-normative social context.

Interestingly, the micro (individual) and macro (environmental) sociological spheres are both considered in the cultural identity theory of drug

abuse. Social identity in regard to subculture is taken up as well by Gelder (2005).

Application of Sociological Concepts to Addiction Treatment

Berger and Luckman (1966) stated “human reality is socially constructed reality” (p. 189). While the literature does not specify the application of sociological theory to addiction treatment, it is important to consider sociological theory applicability as well as explanatorily as Scott cautions us that thus far, “treatment practices in addictions have not typically conceptualized from research findings” (p. 210).

Studies on counseling topics with addicts discuss social issues as strongly linked to positive outcomes in terms of issues such as friendships (Joe, et al., 2009). Supportive counseling is stated to yield more positive outcomes for patients than punitive. It is reasonable to offer support on social issues as well as medical problems in treatment and correctional settings.

The National Institute on Drug Abuse (2013) stresses the importance of “staying away from negative people, places and things” and recommends counseling topic themes such as managing high risk social situations and responding to social pressures (p. 3). One recommended social solution found with many addiction remedies is additional or exclusive participation in self-help groups, which provide a social remedy for a social ill.

Adrian (2003) tells us that addiction counseling has a therapeutic effect partially due to the fact that counseling has “an element of social intervention” (p.

1387). Annis et al., (1996) discusses relapse prevention as a critical component of treatment and social factors including antecedents to using drugs are important in this area of counseling.

Understanding the social realities, relationships, influences, opportunities, hardships, social traumas, every day social lives and internalized social norms of addicts is useful in treatment. It can help partially guide counseling theories and should influence criminal justice policies. Social realities exist on individual as well as group levels and drug related subculture should be considered in determining treatments and policies not only in planning but also implementation.

Application of Subcultural Theory Specifically to Addiction Treatment

Tibbets and Hemmens (2010) tell us that criminal justice approaches to deviant subculture can prove to be “ironic.” For example, people in high drug crime neighborhoods live in more fear and do not get involved with law enforcement than people in neighborhoods without drug crime problems, while studies show community- based intervention is the most effective (p. 393). They recommend programs that help negate anti-social cultural norms with high- risk youth and anti- aggression training programs. It becomes apparent that subculture theory is most often used as descriptive and suggestions for its application to solving crime or treating illness are very few. Addicts are affected by drug related subcultures and frequently enter treatment programs after having just come out or experience relapse while still participating in the programs.

At a minimum, subculture theory lends understanding to supporting the research of sociologists. At best, it shows the problem facing many addicts and

how being a part of a drug related subculture affects sense of self, social relationships, and thinking. Subculture theory can be considered not only in individual treatments but also in group treatment settings.

It may seem impractical to apply a criminological theory to a treatment as opposed to an investigation, prosecution, or policy. But if we know drug related subculture affects feelings of identity, addictive behaviors, evolution of addiction, escalation of crime due to addiction, lack of conformity with society, and deviance however it is defined, we know a person needs to be treated not only psychologically but also socially, and that the social component of treatment should consider and respond to drug related subcultures.

Based on a review of the literature, this research sought to ascertain how subculture theory could aid in addiction treatment and programming. Accordingly, the following discussion of this study's method and results and ensuing conclusions support the further examination of drug related subculture realities and also the possibilities for applying subculture theory to treatment of addiction and correction of drug related crime.

An open-ended survey was selected due to the theoretical and practical discussion that comes with professional opinion surveys on this issue. It is certainly useful to study the lives of addicts, treatments by studying patients themselves or outcomes or relapse rates of individual programs, or even to study them comparatively. This study goes further by undertaking a survey of drug and alcohol treatment supervisors and evaluating how their responses are related to many of the questions and issues presented in this literature review. Direct,

open-ended questions in a survey questionnaire, through qualitative analysis, and through an inclusive method and conclusive recommendations based on professional opinions were used. There is no competitiveness, deception, experimentation or treatment applied in this research.

Method

Participants

The participants in this study were recruited from the 2011 National Directory of Drug and Alcohol Abuse Treatment Programs published online by the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. Copies of this directory are available from the web link <http://oas.samhsa.gov>.

As the mailings were addressed “Attention Director or Supervisor,” the participants were in supervisory positions at the clinics selected for mailing of the approved questionnaire, response envelope and cover letter. It is reasonable to assume that the individuals addressed completed the questionnaires but realistically due to the study’s anonymity, other employees could have done so. It is most likely the supervisors who completed the returned surveys. I assert that other professionals in the field (other employees at the clinics) would provide equally useful and valid data to this study.

Five hundred surveys were sent out. Fifty-three were returned as having had undeliverable addresses, and 103 completed surveys came back for a response rate of 23 percent. The respondents varied greatly according to years

working in addiction treatment and highest educational degree earned. The following two tables represent the distribution of the two attributes:

<u>Educational Level</u>	<u>Number</u>
High School Diploma	1
Some College	1
Associates Degree	4
Bachelor's Degree	13
Master's Degree	68
Doctorate Degree	8
Doctor of Nursing Practice	1
Medical Doctor	2
<u>Unreported Attribute</u>	<u>5</u>
Total	103

<u>Years Working in Field</u>	<u>Number</u>
0-5	15
6-10	21
11-15	11
16-20	11
21-25	23
26 or more	20
<u>Unreported attribute</u>	<u>2</u>
Total	103

Regarding participant characteristics, only education and years of experience in addiction treatment were solicited. The questionnaire did not ask for any personal demographic information from participants and did not ask for name or other personal identifying information. The participants were thereby assured anonymity and threats to the internal validity of the study were minimized.

Procedure

After seeking and receiving Institutional Review Board approval from California University of Pennsylvania, five hundred questionnaires, return envelopes and cover letters were mailed out to randomly selected clinics to the attention of supervisors/directors from the directory. Random selection was based upon selecting one or two potential subjects from each page of listings for each state. Ten were sent to each of 50 states of the United States, totaling the 500. Methadone clinics, private practices, halfway houses, detoxification units, and full service clinics were all included in the selection process. Preference was not given to any one particular modality of treatment. It is suggested that this sampling method allowed for the process of addiction treatment to be studied from various perspectives for better understanding and inclusive results. A postage paid return envelope was provided for anonymous response.

Responses were analyzed qualitatively in searching for similar themes with regard to content for the purposes of answering the study's research questions. The results section of this study explains similarities in answers in this manner to the questions posed to participants. Reliability was not tested, as this is a descriptive study seeking valid, qualitative opinion, and as such, not measuring variables quantitatively.

Questionnaire

This research used a questionnaire to study drug and alcohol clinic supervisor opinions regarding some of the issues of subculture as these relate to addiction and drug related crime. An open-ended question format was used asking four questions as follows of participants:

1. In your opinion, is addiction best explained as a result of social, psychological or biological factors?
2. Subculture is defined as a set of cultural characteristics shared among a group within a society that are distinct in some ways from the larger culture within which the group exists. In your opinion, what role does subculture have in the development of addiction, addictive behaviors and crime?
3. In your opinion, how should treatment programs approach the issue of drug related subcultures in their programming?
4. In your opinion, can an understanding of drug related subculture and its application to treatment of addiction increase positive outcomes for patients?

It is possible that the wording of some questions (1 and 4) allowed for yes/no answers as well as invitation for detailed responses. The results section of this study contains explanations for the answers to the questions in terms of common themes. The section on conclusions explains how the participants' responses to the questionnaires relates to the original research questions and concerns.

Results

Question #1: In your opinion, is addiction best explained as a result of social, psychological or biological factors?

This question resulted in varied answers, but certain common themes emerged. More than half of the respondents stated that addiction is a combination of social, psychological and biological factors. The relative importance and chronological occurrence of these factors varied. Some respondents explained that addictions begin as a social ill and becomes a biological illness later or alternatively, one has a biological predisposition that later becomes a psychological, social illness.. Some respondents used the phrase “biopsychosocial disease” to explain addiction. Others simply stated, “yes” in response to this question.

Of those that did not state a combination of factors and emphasized only one cause as the explanation for addiction, biology was emphasized rather than social causes. Atypical responses included two of the three causal relationships for emphasis, and in instance, the respondent stated only “biological and social” and two stated “biological and psychological” reasons for their explanations.

Question #2: Subculture is defined as a set of cultural characteristics shared among a group within a society that are distinct in some ways from larger culture with in which the group exists. In your opinion, what role does subculture have in the development of addiction, addictive behaviors and crime?

The second question asked about the role of subculture in addiction development and drug related crime. Two types of answers were found in the majority of responses:

1. To state that what is expected (norms), beliefs and actions, and ethics are different within a drug related subculture. 2. Emphasizing that the socialization, availability of drugs and reinforcement of addictive behaviors present in subculture are culprit in the addiction process. These responses seem to agree that subculture promotes addiction and drug related crime, and positive socialization is therefore lacking.

Some participants interpreted the definition of the term subculture to include family relationships, especially those with traumatic history. Some emphasized socioeconomic class as being related to subculture and drugs.

Isolated comments to this question were that it is has biological not social origins and is not a social illness, that it does not cause addiction but has a role, which depends on the person and context. Other related comments included the idea that crime increases due to drug related subculture, that crime does not cause addiction but addiction causes crime, and that crime is learned while addiction is not. Others provided uncertain responses, left the item blank, or

stated that addiction affects everyone and is not subcultural. One respondent stated, "addiction itself is a subculture." The issue of the need for multicultural sensitivity was raised in the responses to this question as well.

Question #3: In your opinion, how should treatment programs approach the issue of drug related subcultures in their programming?

Three common themes arose in answers to the third question. First, answers emphasized the recommendations and concerns for cultural competence and diversity trainings of staff and creation of culturally competent policies in addiction treatment. Second, treatment should in some manner address and discuss subculture in treatment specifically. Answers in this second regard contained ideas such as learning to recognize, explore, talk about, respect, or eliminate the subculture. Third, treatment should change addicts' subcultures and create new social relationships. This theme provided contained recommendations to "create a counter culture," learn different norms and values, invite family or church, embrace Alcoholics Anonymous or Narcotics Anonymous, help addicts to find assistance, help addicts to escape drug related subcultures, or encourage clients in treatment to make new relationships.

Isolated comments can be mentioned with this question as well. For example, some respondents stated that addiction is not due to subculture, that we should create prevention programs, drug dealers should not be placed in the same treatment groups with addicts, that it "takes time" to treat all three causes of addiction, simply answering with the word "carefully," creating guidelines in treatment for acceptable behavior, simply stating yes or need to include

subculture in the treatment programs, recommending that relevant education start in school years, and that treatment should be “broadened” to include subcultures.

Question #4: In your opinion, can an understanding of drug related subculture and its application to treatment of addiction increase positive outcomes for patients?

Nearly all participants responded affirmatively to the final question as to whether or not understanding subculture and applying it to treatment can increase positive outcomes for addicts. There were many ways in which the responses were formulated but very few disagreed with the premise of the question. Some respondents emphasized how positive outcomes would come about in preventing relapse and in understanding triggers.

Some of the respondents emphasized the importance of the addicts not returning to the subcultures after treatment. Recommendations that programs be built on clients’ specific needs and not to “talk down” to addicts were made by at least two participants. The word “yes,” though, was written in many of the answers to this question. One respondent explained, “positive outcomes happen as readiness to change increases.”

Individual unrepeated comments in the data included responding that subculture is of little relevance, understanding alone will not stop it, stated simply no, or as one participant stated, “it is only one piece of the puzzle.” Three of the clients who are social workers emphasized the importance of “meeting the client where they are at.”

Conclusions

Conceptual mapping of the subculture concept and the theories of addiction is a precedent to studying further how to approach subculture in addiction treatment. Such a process demonstrates that the issue does in fact need to be addressed, provides insight into how it should be addressed, and assists in formulating a good starting point for investigation of how to improve the mental health and social deviance of addicts. As shown in this study, some elements of addiction treatment might be debated, but agreement can be found in many places as well. It is in the context of such relevant consensus that this research rests.

It is evident from the 103 respondents' contributions to this study that drug related subculture is not only a valid criminological concept, but also a serious problem. If many of the respondents feel drug related subcultures can be defined as those having norms and ethics contrary to mainstream society, that of deviant socialization and those involving the availability of drugs and addicted lifestyles, then it is an important consideration in treatment planning. While differences existed in responses on what causes addiction, there was little disagreement as to whether addressing subculture would improve outcomes for patients. Indeed, virtually all respondents were of this view. The detailed responses of how to go about addressing it from the research participants are acknowledged and

appreciated even though this writing focused on emerging dominant themes in answers to the questionnaires' questions.

I claim the following correctional and treatment findings based on the results of this study as being supported by the survey responses of drug and alcohol clinic supervisors:

1. Subculture contributes to the development and exacerbation of addiction.
2. Addiction is a biological, psychological, and social disease, and its remedies should involve strategies addressing all three causal factors.
3. Drug-related subculture should not be underemphasized, and it should be addressed in treatment and correction of addicted persons.
4. Addressing drug related subcultures should be done directly while creating other non-deviant social opportunities with clients.
5. To help prevent relapse, former involvement in drug related subculture should be explored, and relapse prevention should include prevention of involvement in similar social situations.
6. Cultural sensitivity is important to addiction treatment professionals.

Every study has its strengths and limitations. First, the scope of this study is to gather and analyze the perspectives of drug addiction clinic supervisors on the role played by subculture in drug addiction. The results of the research provide and inform direction for future investigation. Subsequent research may want to consider querying similar groups of professionals on topics such as crimes or how they are committed in connection with the drug and crime relationship. Second, ideas on how to incorporate subculture theory into therapy

were more suggestive generally than instructive specifically. This opens up a new focus of investigation. Last, an understanding of correcting criminality as part of the addiction treatment process, as either incidental or as an additional component in treatment, was not directly answered as it went beyond the scope of this project. Here too, the results of this research provide guidance for further investigation.

In conclusion, recommendations for future studies as a result of this research might be to examine how the respondents in this study would “explore” subculture including treatment, techniques, and relevant ethical considerations. It may also be useful to study what theoretical orientations of therapists lend themselves to what opinions on addiction treatment. Last, further inquiry relating to the timing of socially themed remedy in treatment versus when to focus on more internal, individual psychological coping skills would also be helpful.

References

- Adler, F., Mueller, G., & Laufer, W. (2007). *Criminology and the criminal justice system*. New York, NY: McGraw Hill.
- Adrian, M. (2003). How can sociological theory help our understanding of addictions? *Substance Use and Misuse*, 38(10), 1385-1423.
- American Psychiatric Association (2000). *Diagnostic and statistical manual of mental disorders*. Washington, D.C.: American Psychiatric Association.
- Anderson, T. & Mott, J. (1998). Drug-related identity change: Theoretical development and empirical assessment. *Journal of Drug Issues*, 28(2), 299-328.
- Annis, H., Schober, R., & Kelly, E. (1996). Matching addiction outpatient counseling to client readiness for change: The role of structured relapse prevention counseling. *Experimental and Clinical Psychopharmacology*, 4(1), 37-45.
- Berger, P. & Luckman, T. (1966). *The social construction of reality*. New York, NY: Anchor Books.
- Boyum, D., Caulkins, J. & Kleiman, M. (2011). Drugs, crime and public policy. In J. Wilson & J. Petersilia (Eds.), *Crime and public policy* (pp. 368-410). New York, NY: Oxford University Press.
- Cohen, A. (1955). A general theory of subcultures. In K. Gelder (Ed.), *The*

- subcultures reader* (pp. 50-59). New York, NY: Routledge.
- Cohen, A. & Short, J. (1958). Research in delinquent subcultures. *Journal of Social Issues*, 14(3), 20-37. Abstract retrieved from National Criminal Justice Reference Service. <http://www.ncjrs.gov>
- Erickson, C. (2007). *The science of addiction*. New York, NY: W.W. Norton & Co.
- Espejio, R. (Ed.). (2011). *Chemical dependency*. New York, NY: Greenhaven Press.
- Farley, J. (1990). *Sociology*. Edgewood Cliffs, NJ: Prentice Hall.
- Gelder, K. (2007). *Subcultures: Cultural histories and social practice*. New York, NY: Routledge.
- Golup, A., Johnson, B., & Dunlap, E. (2005). Subcultural evolution and illicit drug use. *Addiction Research and Theory*, 13(3), 217-229.
- Irwin, J. (1970). Notes on the status of the concept subculture. In K. Gelder (Ed.), *The subcultures reader* (pp.73-77). New York, NY: Routledge.
- Jenks, C. (2005). *Subculture: The fragmentation of the social*. Thousand Oaks, CA: Sage Publications.
- Joe, G., Simpson, D., & Rowan-Szal, G. (2009). Interaction of counseling Rapport and topics discussed in sessions with methadone treatment clients. *Substance Use and Misuse*, 44, 3-17. doi: 10.1080/10826080802525876
- Manning, P. (2007). *Drugs and popular culture*. United Kingdom: Willan

Publishing.

- Mazerolle, L., Rombouts, S. & Soole, D. (2006). Street-level drug law enforcement: A meta-analytical review. *Journal of Experimental Criminology*, 2, 409-435. doi: 10.1007/s11292-006-9017-6
- Moshier, S., McHugh, K., Caulkins, A., Hearon, B., Rosellini, A., Weitzman, M., & Otto, M. (2012). The role of perceived belongingness to a drug subculture among opioid-dependent patients. *Psychology of Addictive Behaviors*, 26(4), 812-820. Abstract retrieved from PsycArticles Database. <http://psycnet.apa.org>
- Milkman, H. & Wanberg, K. (2005). *Criminal conduct and substance abuse treatment for adolescents*. Thousand Oaks, CA: Sage.
- National Institute on Drug Abuse (2013). Description of addiction counseling approach. *Archives*. Retrieved from <http://archives.drugabuse.gov/ADAC/ADAC7.html>
- New York Commission on Drugs and the Courts. (2000). *Confronting the cycle addiction and recidivism*. Retrieved from www.nycourts.gov/reports/addictionrecidivism.shtml
- Scott, C. (2000). Ethical issues in addiction counseling. *Rehabilitation Counseling Bulletin*, 43(4), 209-214.
- Sims, B. (Ed.). (2005). *Substance abuse treatment with correctional clients*. Binghamton, NY: The Haworth Press.
- Smeja, C. & Rojek, D. (1986). Youthful drug use and drug subcultures.

International Journal of Addictions, 9, 1031-1050. Abstract retrieved from PubMed. www.ncbi.nlm.nih.gov/pubmed/3793308

Stinchcomb, J. (2010). Drug courts: Conceptual foundation, empirical findings and policy implications. *Drugs: Education, Prevention and Policy*, 17(2), 148-167.

Tibbets, S. & Hemmens, C. (2010). *Criminological theory*. Thousand Oaks, CA: Sage Publications.

Weinberg, D. (2011). Sociological perspectives on addiction. *Sociology Compass*, 5(4), 298-310.

Wilson, J. (2002). Crime and public policy. In S. Tibbetts & C. Hemmens (Eds.), *Criminological theory* (pp. 736-750). Thousand Oaks, CA: Sage.

Appendix A: Questionnaire

Student Research Questionnaire

Your Highest Degree Earned: _____

Number of Years working in Addiction Treatment: _____

Please answer as briefly or as in as much detail as you wish the following four questions and return this page in the pre-addressed envelope provided. Thank you.

1. In your opinion, is addiction best explained as a result of social, psychological or biological factors?

2. Subculture is defined as a set of cultural characteristics shared among a group within a society that are distinct in some ways from larger culture with in which the group exists. In your opinion, what role does subculture have in the development of addiction, addictive behaviors and crime?

3. In your opinion, how should treatment programs approach the issue of drug related subcultures in their programming?

4. In your opinion, can an understanding of drug related subculture and its application to treatment of addiction increase positive outcomes for patients?

Appendix B: Participant Consent Letter

BIR8531@calu.edu

February 19, 2013

Dear Sir or Mam,

My name is Desiree Birdseye. I am graduate student of social science, applied criminology at California University of PA. I am conducting research on culture as it relates to addiction and I am seeking the opinions of addiction treatment professionals in my research.

I have enclosed a brief questionnaire, and I would appreciate your completion of it in the enclosed postage paid envelope. Participation is voluntary. Your responses will be anonymous and confidential. Participation may be discontinued at any time without penalty and all data will be discarded. There is no risk exceeding that of normal daily living. Return of this survey constitutes consent to use the data.

The results will be housed at the California University of PA in a locked cabinet in the Law, Justice and Society Department.

This research is approved by the California University of PA Institutional Review Board effective 2/15/2013 and expires 2/16/2014. My faculty adviser's name is Dr. Elizabeth Larsen and she can be reached at 724-938-4149 if you have any questions.

Thank you.

Desiree Birdseye

IRB Approval Letter Information

The Institutional Review Board of California University of PA approved of this study with revisions and stipulations to the original proposal and their approval is available for review, if requested, of the faculty.