

# Drug Use, Drug Possession Arrests, and the Question of Race: Lessons from Seattle

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*Many analysts have argued that the most harmful forms of drug use are disproportionately concentrated in poor communities of color, and that this pattern—combined with law enforcement’s tendency to focus on outdoor drug activity—explains racial disparity in drug arrests. Others contend that comparatively high black and Latino drug arrest rates result from racial bias or racist intent on the part of the architects or lieutenants of the drug war. This article offers an alternative explanation of racial disparity in drug arrests in Seattle, Washington. Specifically, we argue that the racialization of imagery surrounding drugs in general and crack cocaine in particular had long-lasting institutional and cultural effects that continue to shape police perceptions and practices, and that these effects explain much of the disparity that characterizes drug possession in Seattle.*

Many scholars have noted that the war on drugs is an important cause of rising incarceration rates and of racial disparities in prison and jail populations (Blumstein 1993; Duster 1997; Tonry 1995). Researchers have also documented the adverse effects of incarceration for the individuals and communities most affected (Clear et al. 2003; Fagan and Meares 2001; Hagan and Coleman 2001; Mauer and Chesney-Lind 2002; Meares 1998; Pager 2003; Pettitt and Western 2004; Uggen and Manza 2002; Western and Beckett 1999). Although the pernicious effects of the war on drugs are increasingly evident, there is less certainty about *why* the war on drugs has had such racially disparate consequences. This article draws on a variety of data sources to explain comparatively high black and Latino drug possession arrest rates in one U.S. city: Seattle, Washington.

The most recent war on drugs, initiated by President Reagan in 1982, intensified considerably after the emergence of crack cocaine (Reinarman and Levine 1997). The results were dramatic. The number of annual drug arrests increased from about half a million in 1980 to over 1.5 million in 1996 (Beckett and Sasson 2004). But the impact of the drug war was not evenly felt. In the two decades following 1980, the national drug arrest rate among blacks increased from roughly 650 to 2,907 per 100,000 population, while the national drug arrest rate among whites increased from approximately 350 to 463 per 100,000 persons (Donziger 1996; U.S. Department of Justice 2003). Latinos are as likely as blacks to be incarcerated in state prison for drug offenses (Sentencing Project n.d.), and nearly 80 percent of those

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currently serving time in state prison for drug offenses are black and/or Latino (King and Mauer 2002; see also Miller 1996).

These comparatively high black and Latino drug arrest rates have been explained in a number of ways. First, as a result of pre-existing socio-economic inequities and the racially uneven impact of deindustrialization, racial and ethnic minorities might use serious drugs more frequently than whites (Baumer 1994; Currie 1994; Duster 1997; Hagan 1994). From this perspective, poverty and unemployment fuel the most destructive forms of drug use. High rates of addiction stem from the absence of opportunities for satisfying work that pays a living wage; the conditions caused by poverty, overwork, and ill health; and the frustration that can result from the inability to achieve success through legitimate channels. Similarly, the poor may be less likely to have a “stake in conventional life” and social connections that are crucial resources for those seeking to control or to quit their drug use (Waldorf, Murphy, and Reinerman 1991). Insofar as rates of poverty are significantly higher among blacks and Latinos than among whites,<sup>1</sup> this perspective suggests that that comparatively high black and Latino drug arrest rates are a consequence of higher rates of serious drug use.

A different but complementary argument suggests that black and Latino drug users are more likely than white drug users to obtain those substances in public spaces that are visible to the police (Blumstein 1993; Duster 1997; Goode 2002; Johnson, Peterson, and Wells 1977; Sterling 1997; Tonry 1995). The sociological literature has long suggested that differential access to private space shapes the likelihood that deviant behavior will be detected (see Chambliss and Seidman 1971; Stinchcombe 1963). According to this argument, access to private space is differentially distributed across socio-economic (and hence racial and ethnic) groups; those who engage in illicit conduct in public places are more visible to the police and therefore are more likely to be arrested. This argument often rests on the assumption that law enforcement’s proclivity to focus on outdoor drug venues is a racially neutral organizational necessity (but see Duster 1997).

Each of these explanations stresses the socio-economic (or “structural”) determinants of racial disparity in drug arrests and sometimes are contrasted with the notion that law-makers’ and law enforcers’ “direct, overt racist motives” are responsible for racial disparities in drug arrests (see especially Goode 2002:41). From this structural perspective, socio-economic forces and dynamics—rather than racism, *per se*—influence both the propensity to use serious drugs in destructive ways and the likelihood of detection, thereby shaping arrest outcomes.<sup>2</sup>

There is, however, another way of understanding the role of race in drug wars. Although not necessarily denying the importance of socio-economic factors, many scholars suggest that race has its own significance, though it operates in a more complex and subtle fashion than the legal notion of “racist intent” implies. Specifically, many contemporary race scholars highlight the cultural and political processes by which certain categories or behaviors are racialized; that is, they are imbued with racial meanings (see especially Brubaker, Lovemen, and Stamatov 2004; Hall et al. 1978; Omi and Winant 1986). Scholars working within this tradition also analyze whether and how racialized meanings and associations influence popular responses to social problems, and especially to crime, drugs, and welfare (see, for example, Beckett 1997; Gilens 1995, 1996; Jenkins 1999; Katz 1989; Quadagno 1994).<sup>3</sup> From this

1. According to 2000 U.S. Census data, 6.2 percent of King County whites, but 19.9 percent of King County blacks, had incomes that fell below the poverty line (U.S. Bureau of the Census 2000). Rates of poverty are thus more than three times higher among blacks than whites.

2. This view is consistent with Wilson’s (1978) argument that contemporary racial inequalities are largely a result of the confluence of past racial discrimination and contemporary socio-economic dynamics rather than on-going racial discrimination.

3. Evidence suggests that the racialization of these issues has important political consequences. For example, experimental studies indicate that the cultural association of blacks with crime and welfare has enhanced white support for “tough” policy approaches to both crime and poverty (Gilens 1995, 1996; Gilliam and Iyengar 2000; Gilliam, Valentino, and Beckman 2002; Iyengar 1995).

perspective, drug policies and enforcement practices may be influenced by the cultural construction and racial coding of drugs and those who ingest them; ostensibly race-neutral practices (such as the tendency to treat users of crack cocaine more harshly than users of powder cocaine) may reflect the association of certain substances or modes of ingestion with racially or ethnically stigmatized groups (see Beckett 1997; Duster 1997; Lusane 1991; Manderson 1997; Musto 1987; Reinerman and Levine 1997; Steiner 2001; Tonry 1995).

Indeed, historical scholarship demonstrates that those consciousness-altering substances associated with racial and ethnic minorities are more likely to be defined as highly dangerous and to be the target of aggressive anti-drug efforts (see Duster 1997; Lusane 1991; Manderson 1997; Morgan 1982; Musto 1987; Reinerman and Levine 1997). For example, opium-smoking—associated with Chinese immigrants—became the subject of an intense anti-drug effort after the completion of the railroads, while oral consumption of opium—widespread among Anglo Americans—was not considered to be a significant social problem (Morgan 1982; Musto 1987; Reinerman and Levine 1997). More recently, critics have charged that sentencing laws that single out crack offenders for harsher penalties similarly reflect the association of crack with poor urban blacks rather than race-neutral policy considerations (Duster 1997; Tonry 1995).

Many studies of media representations of crack cocaine also suggest that these images have been highly racialized (Beckett 1995; Beckett and Sasson 1998; Reeves and Campbell 1994; Reinerman and Levine 1997). For example, Jimmie L. Reeves and Richard Campbell (1994) showed how the media imagery surrounding cocaine changed as the practice of smoking cocaine spread to the poor. Early in the 1980s, they suggest, the typical cocaine-related story focused on white recreational users who snorted the drug in its powder form relied on news sources associated with the drug treatment industry and emphasized the possibility of recovery. By late 1985, however, this frame was supplanted by a new “siege paradigm” in which transgressors were poor, nonwhite users and dealers of crack cocaine, and in which law enforcement officials assumed the role of drug “experts,” emphasizing the need for law and order responses to the drug problem. It is possible that the institutional and policy response to crack cocaine was shaped by this kind of cultural imagery which in turn helps to explain racial disparity in drug arrests.

In sum, racial disparities in drug arrests have been explained in a variety of ways. Debate has centered on whether and how race matters, over and above the socio-economic conditions with which it is intertwined. In what follows, we draw on a number of data sources to assess various explanations of racial disparity in Seattle drug possession arrests. Following a brief discussion of the data and methods, we first compare race/ethnicity data for Seattle drug users with the racial composition of those arrested for drug possession. We consider whether the focus on crack users contributes to the overrepresentation of blacks and Latinos among those arrested for drug possession. Next, we assess whether law enforcement’s focus on those enmeshed in the crack market relates to the frequency with which crack is exchanged outdoors, any particular association of the crack cocaine market with violence, and/or public health considerations. Finally, we draw on ethnographic observations and other data sources to evaluate whether the disparities stem from police concentration on outdoor (as opposed to indoor) drug activity. The conclusion reiterates the main findings and considers their theoretical and policy implications.

### **Data Sources and Research Design**

Many social scientists have debated whether arrests in general are an accurate measure of unlawful behavior (for example, see Blumstein 1993; D’Alessio and Stolzenberg 2003; DeFleur 1975; Tonry 1995). Most researchers examining this question have concluded that race plays a comparatively small role in arrests for serious offenses, such as murder and robbery, but a significant role in the policing of more minor offenses. Moreover, when the parties

directly involved in the illicit behavior are consenting, more proactive and discretionary law enforcement techniques are more likely to be used. These findings imply that drug law enforcement may be shaped by race. Several unique or uncommon data sources enable us to assess whether racially disparate arrest rates reflect quantitative or qualitative differences in offending behavior in Seattle.

### *Seattle Needle Exchange Survey*

The first of these sources is the *Seattle Needle Exchange Survey*. This survey, designed in consultation with Dr. John Lamberth of Temple University,<sup>4</sup> was administered by surveyors hired as temporary employees under Seattle's *Racial Disparity Project*. Over a two-week period in April 2002, surveyors were present during all hours of operation at five Seattle needle exchange sites. Needle exchangers were asked to report—among other things—their race/ethnicity, the drug(s) present in the needle(s) just exchanged, whether or not they obtained (each of) those drugs in Seattle, and the race/ethnicity of the person from whom they had obtained those drugs. Respondents were also asked about “other drugs” (i.e., other than the drugs in the needles they exchanged) they had recently obtained. Five hundred eighty-nine surveys were completed by individuals who obtained at least one illicit drug in Seattle; these respondents provided information about over 800 drug transactions. This survey thus provides important information regarding one category of drug users—those who inject drugs and utilize needle exchange services.

### *Public Drug Treatment Admission Data (TARGET)*

TARGET (Treatment Assessment Report Generation Tool), a reporting management information system used by the Washington State Department of Social and Health Services Division of Alcohol and Substance Abuse, collects information regarding those admitted to public drug and alcohol treatment facilities in Washington State. All treatment agencies that provide public sector-contracted or publicly funded treatment services must report data for those clients whose treatment is partially or fully publicly funded, while reporting for any private pay clients is optional. We use data regarding the race/ethnicity of those admitted to fully or partially *publicly funded* drug treatment programs in Seattle.<sup>5</sup>

### *Ethnographic Observations*

We conducted ethnographic observations of two open-air drug markets within Seattle in order to gain data regarding the race/ethnicity of those who acquire drugs outdoors in Seattle. These observations took place in one section of downtown Seattle and another in the Capitol Hill neighborhood, areas known to drug users, law enforcement personnel, and business and neighborhood groups as centers of outdoor drug consumption and sales. Additionally, these neighborhoods are already well known by the investigators, neighborhoods where the investigators are also well known, and where investigators' presence would attract neither notice nor suspicion.

The ethnographers observed these areas on random days and times in the first three weeks of April 2002. The downtown area was observed in two 30-hour waves; the Capitol Hill area was observed in one 30-hour wave and one 10-hour follow-up observation. Together

4. Prof. Lamberth, a statistician in the Department of Psychology at Temple University, also designed the study that was used to establish racial profiling in traffic stops by the New Jersey State Police (see *State of New Jersey v. Pedro Soto*).

5. Data were provided by Fritz Wrede, Division of Alcohol and Drug Abuse of Washington's Department of Social and Health Services, and are on file with the lead author.

these resulted in 100 total observation hours. Ethnographers looked for and documented all indications of drug transactions that occurred in these locations and recorded the perceived race/ethnicity of those engaged in these exchanges, as well as their role in the transaction (i.e., whether individuals involved were engaged in drug purchase, the referral of buyer to seller (which we included as “delivery”), or an actual sale.<sup>6</sup>

The validity of this kind of “rapid assessment” ethnography depends upon experienced observers who are already familiar with the behavior in question and are trusted by the people being observed (see Lambert, Ashery, and Needle 1995). Typically such work is done in teams, with the ethnographer(s) relying on the assistance of key informants or indigenous experts. In this case, the fieldwork was carried out by a trained ethnographer (Kris Nyrop) who has worked with Seattle area substance users since 1988, and two assistants who are both former substance users and who have been professionally involved in HIV prevention, treatment, and/or counseling for over three years. All three work for a local non-profit agency whose mission involves working with drug users, commercial sex workers, and the homeless.

In all cases, we recorded those individuals providing referrals, receiving money, or transferring drugs as involved in delivery; those giving money and receiving drugs were recorded as involved in drug purchases. Whenever possible, we enlisted the aid of other individuals to assist in interpretation of our observations. In almost all cases, the drug being sold could be identified because: (a) we were familiar with the individuals involved and were able to ask; (b) a key informant provided us with that information, or; (c) the individuals involved approached us and offered drugs for sale.

### ***Seattle Police Department Incident Reports***

Data regarding the racial/ethnic composition of persons arrested for drug possession in Seattle were drawn from Seattle Police Department (SPD) Incident Reports. These reports document all drug-related police encounters, some of which resulted in arrest, from January 1999 through April 2001. The Incident Reports were coded for the crime of arrest, race of person arrested, the drug involved, type of operation, precinct, type of location, census tract, and other relevant factors. This database provides information about arrests; it does not contain information about persons under the supervision of the criminal justice system who are jailed for violating conditions of release by using drugs.

Many police departments—and nearly all urban police departments—make data regarding the race of the suspect, crime of arrest, and drug involved in drug arrests publicly available through the FBI’s Uniform Crime Reports. The Seattle Police Department does not. Rather, the Incident Reports were made available to attorneys from the *Racial Disparity Project* as a result of a discovery ruling in the case of *Johnson v. Washington State*. The coding protocol and selection of coders were agreed upon by both defense attorneys and state prosecutors involved in the case.<sup>7</sup>

Because police officers are not asked to record the ethnicity of the suspect on the Incident Reports, the percent of Latino arrestees was estimated using Hispanic surname analysis.<sup>8</sup> That is, a numeric value between 0 and 1 was assigned to all white arrestees in each sub-category (e.g., possession arrestees citywide, cocaine possession arrestees in the West Precinct, etc). These numeric values are provided by the U.S. Census Department and represent the probability that a given surname corresponds to persons who identified as Hispanic/Latino in the 1990 U.S. Census. For each category, the mean of these numeric values (e.g. .12, or 12 percent) was

6. Both of the latter two behaviors meet the legal definition of delivery in Washington State.

7. The lead author of this study has submitted an analysis of drug delivery arrests for consideration in this case.

8. This method is described in detail in “Building a Spanish Surname List for the 1990s—A New Approach to an Old Problem,” by Word and Perkins (1996), and is now frequently used by social scientists and policy analysts.

used to estimate the percent of whites arrested that identify as Latino. This percentage was then subtracted from the white category and added to a separate Latino category. This methodology was applied only to whites in order to avoid double-counting non-whites (i.e., counting black Latinos as black and Latino). As a result, only white Latinos appear in the “Latino” category.

### *ADAM Data*

Since 2000, the National Institute of Justice has collected data regarding drug use and drug market participation among persons charged with a crime. Arrestee Drug Abuse Monitoring (ADAM) Program data include the results of urinalysis tests and interviews with a sample of arrestees in 35 metropolitan areas regarding their drug use and drug market participation. Those tested and interviewed in the ADAM studies may have been arrested for violent or property crimes, DUIs, or drug offenses. Although the ADAM survey cannot be used as a source of information about the prevalence of drug use in the general population, the data is often used to assess and compare drug markets across the 35 ADAM sites. In our analysis, Seattle-specific ADAM data are combined with other measures of drug use to estimate the comparative size of Seattle’s drug markets. The data utilized are for King County jail inmates arrested by the Seattle Police Department.

### *Setting*

This study examines drug use and drug possession arrests in one city: Seattle, Washington. Seattle is unique in several important respects. First, according to the 2000 ADAM survey data, Seattle has one of the four most active drug markets in the country (Taylor et al. 2001) and has gained particular notoriety for its heroin problem. Second, Seattle has a large white population compared to other U.S. cities and has relatively small black and Latino populations. Specifically, 70.1 percent of Seattle’s residents are white and 13.1 percent are Asian. Only 8.4 percent are black, and 5.3 percent are Latinos of any race (U.S. Census Bureau 2000). Finally, a comparatively large percentage of those arrested for drug law violations in Seattle are black. In 2002, 36.4 percent of those arrested for drug law violations in the United States were black (FBI 2004). In Seattle during the 28-month period under investigation, 51.1 percent of those arrested for drug law violations (of any type) were black. Thus, rates of drug use and racial disparities in drug arrests are quite pronounced in Seattle.

## **Part I. Comparing the Race/Ethnicity of Seattle’s Drug Users and Arrestees**

In the past, researchers and activists have compared the results of household surveys with arrest statistics to make the case that blacks are overrepresented among drug arrestees (for example, see Donziger 1996.) Critics of this approach have pointed out that household surveys rely on self-reporting and tend to miss transient populations (see especially Goode 2002). Other publicly available data sources, including Drug Abuse Warning Network (DAWN) emergency room data and mortality data, also provide information about the racial/ethnic composition of drug users, but do not rely on self-reporting. However, neither of these is appropriate for comparison with Seattle arrest statistics, largely for geographic reasons.<sup>9</sup>

9. In general, mortality data provide a reasonable measure of the racial and ethnic distribution of harmful drug use. However, in the case of Seattle, these data include information from the entire county (which is characterized by an even larger white majority). SAMHSA’s DAWN data track the number of times drugs are “mentioned” by patients in hospital emergency rooms (SAMHSA 2001b) and are also treated as a measure of drug use (see Goode 2002). However, insofar as the poor and underinsured are more likely to rely on hospital emergency rooms to obtain health care, these

Two unique data sources that best capture information about Seattle's serious drug users are compared with Seattle drug possession arrestees in the sections below. The strengths and weaknesses of each data source are briefly described.

### *Seattle Needle Exchange Survey*

As discussed previously, the needle exchange survey captures information regarding those who inject drugs and exchange needles in Seattle. Because non-prescription pharmacy sale of needles is legal in Washington State, Seattle injecting drug users (IDUs) who are able to purchase their needles quite possibly do not exchange needles at public needle exchanges. To the extent that this is the case, the needle exchange survey under-counts middle and upper income IDUs (who can afford to purchase needles) and, therefore, white injecting drug users. In addition, several needle exchange surveyors noted that some injecting drug users with "reputable" jobs hired other injecting users to exchange needles for them. To the extent that it exists, this practice likely leads to a further undercount of white injection drug use.

On the other hand, because heroin, cocaine, and methamphetamine are all injected predominantly by white drug users, the survey may undercount people of color who are more likely to use marijuana and crack cocaine. Racial and ethnic differences in response rates also led to a slight overrepresentation of white needle injectors. Specifically, approximately 47 percent of those exchanging needles agreed to complete a survey. However, surveyors also recorded the perceived race/ethnicity of those who did not complete a survey, which allows us to compare the two groups. Of the exchangers who completed a survey, 70.3 percent were white, 13 percent were black, and 5.4 percent were Latino. Of the 677 non-responders, 449 (66.3 percent) were identified as white, 132 (19.5 percent) as black, and 62 (9.2 percent) as Latino. Black and Latino exchangers were thus somewhat less likely to complete a survey than were white exchangers. If these non-respondents are combined with respondents, the proportion of white needle exchangers decreases from 70.3 percent to 68.1 percent, while the proportion of black exchangers increases from 13 percent to 16.6 percent (see Table 1). The impact of this reporting bias on the results within drug categories is unknown.

The majority of needle exchangers who completed a survey reported that the needles they exchanged contained heroin, methamphetamine, cocaine, or some combination of these substances. Those who obtained their drugs outside of Seattle, or whose responses were not legible, were not included, leaving a sample of 553 exchangers and 899 reports of recent drug acquisition. Of these reports, 486 involved heroin; 254, powder cocaine; 54, marijuana; 45, methamphetamine; and 32, crack cocaine. Twenty-eight surveys listed other drugs or were illegible.

### *Public Drug Treatment Admission Data (TARGET)*

As noted previously, the TARGET data capture those who participate in drug treatment programs in Seattle and whose treatment is at least partially publicly funded. The omission of many of those who pay out-of-pocket or whose insurance pays for their drug treatment from the TARGET data likely means that middle and upper income users, and therefore whites, are

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data likely overrepresent the poor and, therefore, people of color (see Morgan and Zimmer 1997; Wishner et al. 1991). Furthermore, the results for Seattle are based include reports from King County hospitals that fall outside Seattle's boundaries; these data are therefore inappropriate for a comparison with Seattle arrest statistics (personal communication with Banta-Green, Research Consultant at the Alcohol & Drug Abuse Institute, University of Washington).

**Table 1 • Racial Composition of Needle Exchange Survey Respondents and Non-Respondents**

	<i>Respondents</i>	<i>Non-Respondents</i>	<i>All Needle Exchangers</i>
Black	13% ( <i>n</i> = 72)	19.5% ( <i>n</i> = 132)	16.6% ( <i>n</i> = 204)
Latino	5.4% ( <i>n</i> = 30)	9.2% ( <i>n</i> = 62)	7.5% ( <i>n</i> = 92)
Other	11.2% ( <i>n</i> = 62)	5% ( <i>n</i> = 34)	7.8% ( <i>n</i> = 96)
White	70.3% ( <i>n</i> = 389)	66.3% ( <i>n</i> = 449)	68.1% ( <i>n</i> = 838)
Total	100% ( <i>n</i> =553)	100% ( <i>n</i> =677)	100% ( <i>n</i> =1,230)

under-counted in this data source.<sup>10</sup> As a result, this data source is the more conservative measure, in terms of its implications for racial disparity, against which arrest statistics are compared.

Many who receive publicly funded drug treatment in Seattle are required to do so by the courts. Insofar as drug arrests are racially skewed, the inclusion of court-ordered treatment recipients would exacerbate the already-present undercounting of white drug users. As a result, those receiving treatment as the result of a court order were not included in the public treatment data shown in Table 2. For each category, the data represent the number of non-court-involved persons admitted to public treatment programs who identified the substances listed as their primary or secondary drug of abuse.

### *Comparing Seattle's Drug Abusers and Arrestees*

The results of the needle exchange survey and the public treatment data are quite consistent for several drug categories. In particular, both data sources indicate that whites are over-represented among those who use methamphetamine. Both data sources indicate that blacks are overrepresented among users of cocaine and that rates of drug use among Latinos are very close to what would be predicted on the basis of Seattle demographic data. Finally, both data sources indicate that the majority (between 61 percent and 69 percent) of those who snort or inject cocaine or who use heroin are white.<sup>11</sup>

However, the two measures of drug use diverge somewhat in the case of marijuana and crack; the needle exchange survey results suggest lower rates of use among people of color than the treatment data suggest. Because the majority of those who inject drugs in Seattle are white, the white share of crack and marijuana users suggested by the needle exchange survey is likely inflated. On the other hand, the socio-economic bias of the public treatment data probably means that whites are likely under-counted in this data source. Although it is reasonable to assume that the truth lies somewhere in the middle of the ranges shown for these two drugs, we cannot know the racial/ethnic composition of Seattle's marijuana and crack users with precision. If we average the results of the two data sources to estimate the racial and ethnic composition of Seattle's crack users, it appears that about one-half of those who use crack cocaine in Seattle are white. This estimate is consistent with national data, which indicate that just over half of U.S. crack cocaine users are white and that just fewer than half are black (U.S. Sentencing Commission 1997:8).

Comparison of the drug use data with the arrest statistics indicates some important discrepancies between the racial/ethnic composition of arrestees and users of each drug. For example, the drug use data indicate that between 36 and 69 percent of those who use or abuse crack cocaine in Seattle are white, yet only 26.3 percent of those arrested for crack pos-

10. Significant racial differences in treatment utilization might reduce or magnify this bias.

11. Other data sources, not shown here, indicate that the vast majority of ecstasy users are also white. See SAMHSA's recent report (2003a) on ecstasy, available online at <http://www.samhsa.gov/oas/2k3/ecstasy/ecstasy.htm>.



**Table 2 • Race/Ethnicity of Seattle Residents, Drug Users, and Drug Possession Arrestees**

<i>Drug</i>	<i>Race/ Ethnicity</i>	<i>General Population</i>	<i>Needle Exchange</i>	<i>Public Treatment</i>	<i>Possession Arrestees</i>
Marijuana	White	70.1%	84.6%	50.9%	50.8%
	Black	8.4%	6.2%	27.7%	36.4%
	Latino	5.3%	4.6%	7.2%	5.1%
	Asian	13.1%	4.6%	4.1%	4.3%
Meth/stimulants*	White	70.1%	86.6%	81.6%	84.4%
	Black	8.4%	0%	5.4%	9.6%
	Latino	5.3%	2.2%	3.1%	3%
	Asian	13.1%	6.6%	1.7%	1.3%
Heroin	White	70.1%	68.5%	64.1%	71.6%
	Black	8.4%	14.2%	21.6%	13.5%
	Latino	5.3%	6.2%	6%	9.7%
	Asian	13.1%	2%	1.7%	.6%
Snorted/powder cocaine	White	70.1%	—	52.7%	51.9%
	Black	8.4%	—	22.6%	22.6%
	Latin	5.3%	—	9%	18.8%
	Asian	13.1%	—	1.8%	4.5%
Injected cocaine	White	70.1%	60.9%	64.9%	—
	Black	8.4%	21.7%	23.3%	—
	Latino	5.3%	0%	5.5%	—
	Asian	13.1%	11.4%	1.2%	—
Crack/smoked cocaine	White	70.1%	68.8%	35.6%	26.3%
	Black	8.4%	15.6%	47.4%	63.1%
	Latino	5.3%	0%	4%	4.7%
	Asian	13.1%	15.6%	1.9%	3.8%
No drugs	White	70.1%	—	—	40%
	Black	8.4%	—	—	46.2%
	Latino	5.3%	—	—	5.5%
	Asian	13.1%	—	—	5.1%

Notes: Percentages may not add to 100 due to rounding. Seattle population figures are 2000 data and are taken from the U.S. Census Bureau. The public treatment admission (TARGET) data are for the year 2000, include methamphetamine and other stimulants, and were provided to the author by Fritz Wrede, Division of Alcohol and Drug Abuse, Washington State Department of Social and Health Services. Seattle needle exchange data were collected in early 2002 and are on file with the lead author. Arrest data were provided by the SPD and summarize information regarding persons arrested by the SPD for drug possession between January 1999 and April 2001.

session are white. The statistical significance of the disparity between each measure of the drug-using population and the arrested population may be evaluated by assessing the likelihood that the observed racial/ethnic difference in the samples is due to chance (see Table 3). Z-scores of 2 or greater indicate no more than a five percent chance of observing a given difference in the sample proportions, if there is, in fact, no difference between the population proportions. Z-scores were calculated to assess the significance of the difference between the arrest statistics and both measures of drug abuse. Although the sample size for methamphetamine, marijuana, and crack is smaller than would be ideal in the needle exchange data, the Z-scores are based, in part, on sample size and will reflect the fact that larger sample sizes ensure greater reliability.

For the sake of conservatism, differences between the racial/ethnic composition of the

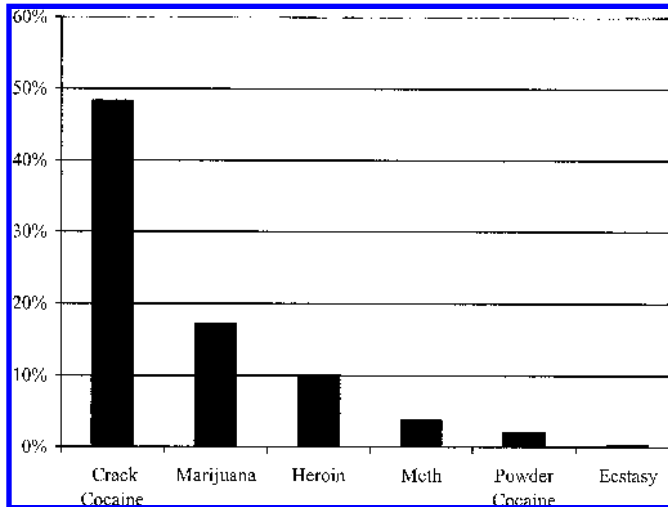
**Table 3 • Statistical Significance of Racial/Ethnic Differences between Drug Users and Possession Arrestees**

<i>Drug</i>	<i>Race/ Ethnicity</i>	<i>Arrestees</i>	<i>Public Treatment</i>	<i>Drug Needle Exchange</i>	<i>Arrestee/ Treatment Z-Score</i>	<i>Arrestee/ Needle Ex. Z-Score</i>
Marijuana	Black	36.4% (336/1,088)	27.7% (371/1379)	6.2% (3/54)	4.56*	8.96*
	Latino	5.1% (56/1,088)	7.2% (97/1339)	4.6% (2/54)	-2.15*	.54
	White	50.8% (552/1,088)	50.9% (682/1339)	84.6% (47/54)	-.1	-7.54*
Heroin	Black	13.5% (86/638)	21.6% (326/1511)	11.9% (58/486)	-4.72*	.77
	Latino	9.7% (62/638)	6% (91/1511)	6.2% (30/486)	2.79*	2.21*
	White	71.6% (457/638)	64.1% (968/1511)	80% (389/486)	3.49*	-3.31*
Meth	Black	9.6% (23/239)	5.4% (19/353)	0% (0/45)	1.98*	5.04*
	Latino	3% (7/239)	3.1% (11/353)	2.2% (1/45)	.94	.29
	White	84.4% (202/239)	81.6% (288/353)	86.6% (39/45)	-.13	-3.8*
Powder/intranasal cocaine	Black	22.6% (30/133)	26.6% (59/222)	29.5% (75/254)	-.86	-1.51
	Latino	18.8% (25/133)	9% (20/222)	34.3% (87/254)	2.51*	-3.43*
	White	52.1% (69/133)	52.7% (117/222)	34.6% (89/254)	-.15	3.20*
Crack cocaine	Black	63.1% (1,929/3,058)	47.4% (842/1,532)	15.6% (5/32)	5.27*	7.33*
	Latino	4.7% (145/3,058)	4% (52/1,532)	0% (0/32)	2.24*	12.34*
	White	26.3% (805/3,058)	35.6% (467/1,532)	68.8% (22/32)	-2.93*	-5.15*

\* Indicates a statistically significant disparity ( $Z > 2$ ).

drug-using and the arrested populations is considered robust and significant if the absolute value of the Z-score is greater than 2 for both comparisons.

In several cases, the Z-scores measuring the discrepancies between the drug-using and arrested populations reveal significant and consistent disparities. In particular, both comparisons suggest that blacks are significantly overrepresented among marijuana, methamphetamine, and crack arrestees. Latinos are significantly overrepresented among heroin and crack arrestees in both comparisons. By contrast, whites are significantly underrepresented among crack arrestees. Thus, within these drug categories, comparisons of arrest statistics and data regarding the racial and ethnic composition of those who use these illegal drugs suggest statistically significant disparities. Especially noteworthy are the most robust discrepancies, found between estimates of crack users and crack arrestees, as the majority of possession arrests involve crack (see Figure 1).



**Figure 1 • Drug Possession Arrests by Drug, Seattle, 1999–2001**

In fact, black arrestees outnumber white arrestees largely because possession arrests were far more likely to involve crack offenders than any other type of drug user. The SPD made 3,058 arrests for crack possession, but only 384 for methamphetamine, ecstasy, and powder cocaine *combined* during the period under consideration. Over 63 percent of those arrested for crack possession were black, while 22.1 percent of those arrested for possession of any drug other than crack were black. Because crack arrests outnumbered all other drug arrests combined, and because the majority of those arrested for possession of crack cocaine were black, black possession arrestees outnumbered white possession arrestees.

In short, although significant racial disparities between the using and arrested populations exist within drug categories, the focus on crack is the primary cause of racial disparity in drug possession arrests. The following section considers a variety of explanations for the focus on crack users.

### Understanding the Focus on Crack

There are several ways to explain the fact that most possession arrests involved crack users. The first possibility is that law enforcement focuses on black individuals or predominantly black drug markets, and as a result that it disproportionately arrests crack users. Alternatively, it is possible that the SPD has prioritized crack above all other drugs, including heroin, and that it therefore arrests a disproportionate number of blacks. It is extremely difficult to disentangle and assess these two possibilities. However, compelling evidence suggests that the SPD has indeed prioritized crack cocaine. For example, in over two-thirds of all buy-bust operations (in which undercover enforcement officers solicit drugs from suspected drug dealers), officers requested crack cocaine. We even came across records of cases in which undercover officers were offered heroin and powder cocaine by street dealers (both black and white) and refused to purchase those substances, saying they only wanted crack. Thus, while it is difficult to determine whether racially disparate arrest outcomes are a consequence of law enforcement's focus on blacks or its focus on crack, it is clear that the police focus on

crack is an important cause of racially disparate drug possession arrest rates in Seattle. Why, then, does law enforcement focus on crack cocaine?

Some observers have suggested that crack tends to be exchanged more frequently leads to a generally greater risk of arrest among crack users than among those who use other illegal substances (see especially Riley 1997; Sterling 1997). According to ADAM data, arrestees who use crack cocaine acquire it three to five times more frequently than those who use powder cocaine or methamphetamine (Taylor et al. 2001; see also Riley 1997; Sterling 1997).<sup>12</sup> The focus on crack, then, may result from the frequency with which crack is exchanged, especially outdoors.

Estimating the frequency with which various drugs are exchanged in Seattle allows us to evaluate this possibility. Because marijuana may be intentionally de-prioritized by law enforcement, the following analysis focuses on four serious drugs for which data are available: heroin, methamphetamine, powder cocaine, and crack cocaine. The omission of ecstasy (MDMA) from this analysis means that all of these estimates are inflated by an unknown margin.<sup>13</sup>

### *Estimating the Frequency of Drug Transactions*

Assessing the frequency with which various drugs are exchanged both in general and outdoors involves first estimating the number of active users of each substance. Unfortunately, no reliable estimates of the number of users exist at the city level. The National Substance Abuse and Mental Health Services Administration (SAMHSA) provides an annual estimate of the number of past-month users of various illicit substances in the United States. Insofar as these estimates are based largely on the results of the National Household Survey, they almost certainly undercount the actual numbers of users of each substance, for two main reasons. First, although the national household survey now reaches some homeless and institutionalized individuals, it cannot capture transient individuals, among whom rates of drug use may be higher. Second, many people do not admit illicit activities such as drug use in surveys (Lu, Taylor, and Riley 2001).<sup>14</sup> Simply applying these estimates to the Seattle population would further undercount drug use because rates of drug use are higher in urban areas than non-urban areas. Moreover, evidence suggests that drug use is more widespread in Seattle than in most other U.S. cities, and that local drug use patterns diverge somewhat from the national pattern. As a result, estimates of the number of users of each substance must be adjusted by the particularities of Seattle's drug markets.

In 2000, the Seattle metropolitan area had the fourth highest rate of emergency department methamphetamine mentions in the country, as well as the seventh highest rate of emergency department cocaine mentions (SAMHSA 2001b). Seattle has also gained notoriety for the severity of its heroin and ecstasy problems. In 2000, Seattle (and New York City) had

12. The reasons for this pattern are not known but have sometimes been thought to reflect the rapidity with which crack is metabolized. However, ADAM data indicating that heroin users make even more frequent purchases than crack users is not consistent with this explanation.

13. Ethnographic evidence indicates that although ecstasy is more widely used than methamphetamine, heroin, or crack it is primarily exchanged indoors, and therefore that the results pertaining to *outdoor* exchanges are influenced in a relatively minor way by its omission (see Millman and Beeder 1998).

14. This study, based on ADAM data, found that about half of the arrestees who tested positive for methamphetamine (43.9 percent), crack (51.8 percent), or opiates/heroin (54.1 percent) lied about their use of these substances. The fact that crack and especially heroin users are most likely to lie about their use of these substances means that the number of users of these substances may be underestimated by a slightly larger margin in the calculations shown in Table 4. Additional evidence suggests that the number of heroin users in the Seattle area is underestimated by an even greater magnitude. Specifically, in the year 2000, 1,117 individuals who identified crack cocaine as their main substance of abuse were admitted to public treatment programs; in the same year, 1,673 individuals who were mainly heroin abusers were admitted to such programs. Similarly, according to local public health experts, an estimated 10 to 14 thousand actively injecting heroin users live in King County, most of whom reside in Seattle (Seattle and King County Public Health 2001). The fact that the number of heroin users is probably most severely undercounted means that the estimated proportion of transactions involving crack is likely overestimated.

the fifth highest rate of emergency department heroin mentions (SAMHSA 2001b), and in 2001, the second highest rate of emergency room reports of ecstasy use (*Seattle Times* 2002).

The ADAM data provide further evidence of comparatively widespread cocaine, heroin, and methamphetamine use in Seattle/King County. According to these data, Seattle-area arrestees have higher rates of drug use than arrestees in most other metropolitan areas studied; therefore, Seattle is classified as one of the four most active drug market sites in the country. Specifically, male Seattle-area arrestees in 2000 were 1.4 times more likely to report obtaining powder cocaine in the past month than male arrestees from all jurisdictions surveyed; they were 1.5 times more likely to report obtaining crack cocaine; they were 2.3 times as likely to report obtaining heroin; and they were 3.5 times as likely to report acquiring methamphetamine. These differences, fairly consistent with those suggested by emergency department data, are used below to adjust the estimates of the number of recent users resident to the Seattle area.

For example, according to SAMHSA 2000 data .406 percent of the U.S. population aged 12 and older used powder cocaine in the past month; .166 percent used methamphetamine; .113 percent used crack cocaine; and .056 percent used heroin (SAMHSA 2001a, Table F1). In the analysis that follows, these estimates are applied to the Seattle population and then adjusted for the differences between the Seattle ADAM results and the national ADAM results to reflect the particularities of Seattle-area drug markets. For instance, the estimated number of past-month powder cocaine users derived from national prevalence data was multiplied by 1.4 to reflect the higher rates of powder cocaine use in the Seattle area. The resulting estimate of the number of recent drug users is shown in the first column of Table 4.

Estimating the number of recent users of each substance is only a first step in estimating the frequency with which various drugs are exchanged outdoors. In particular, some researchers have stressed that crack users make more frequent purchases than users of some other drugs, and are more likely to obtain crack outdoors (see Riley 1997; Sterling 1997). Table 4 combines information about the frequency and location of drug acquisitions with the estimated number of drug users to calculate the number of monthly transactions involving heroin, methamphetamine, powder cocaine, and crack cocaine in Seattle.

Data for the frequency with which users of each substance obtain each drug and for the likelihood that these acquisitions are made outdoors are taken from the ADAM survey of

**Table 4 • Drug Market Characteristics and Estimated Number of Monthly Transactions**

	# of Users	# of Times Acquired in Past Month	% of All Transactions	% Who Last Obtained Outdoors	% of Outdoor Transactions
Powder cocaine	2,859 (2,042 × 1.4)	4	24.7% (11,436)	48.2%	22.7% (5,512)
Meth	2,923 (835 × 3.5)	3	18.9% (8,769)	29.7%	10.7% (2,604)
Crack cocaine	852 (568 × 1.5)	15	27.6% (12,780)	63.2%	33.3% (8,077)
Heroin	649 (282 × 2.3)	20.5	28.7% (13,305)	60.8%	33.3% (8,089)
All of above	7,283	NA	100% (46,290)	NA	100% (24,282)

Note: Number of users was estimated by multiplying national prevalence data by the number of Seattle residents aged 12 and older in 2000 (503,050). These numbers were then adjusted to reflect the relative size of each drug market in King County. Data regarding the number of past-month acquisitions and location of last drug transaction are based on the results of ADAM surveys with King County respondents arrested by the SPD between January 2000 and September 2001. (Ad-hoc analysis of Seattle ADAM data by Joe Kabel, Ph.D., Seattle ADAM Site Director, *Looking Glass Analytics*, and Michael Gilson, Ph.D., Research Analyst, *Looking Glass Analytics*).

adult males arrested by the Seattle Police Department between January 2000 and September 2001. Of course, arrestees who use illegal drugs may obtain them more frequently than persons who are not arrested. However, no evidence suggests that this is more or less true for particular drugs. Indeed, research on patterns of drug use among persons frequently engaged in criminal behavior suggests that abuse of a wide variety of substances is quite common among these populations (see Burr 1987; Faupel and Klockars 1990; Watters, Reinerman, and Fagan 1985; Weissman 1982; Wright and Decker 1994). Thus, the magnitude of this error is likely consistent across drug categories, and these data allow us to compare the relative frequency with which each drug is obtained.

The estimated number of transactions is calculated by multiplying the number of recent users shown in the first column of Table 4 by the number of times Seattle arrestees reported obtaining each drug in the past month. The number of outdoor transactions is then calculated by multiplying the number of monthly transactions by the proportion of Seattle ADAM respondents who reported making their last transaction outdoors.

According to these calculations, crack cocaine and heroin are each involved in approximately 33.3 percent of the outdoor drug transactions that involve one of these four drugs. Nearly 23 percent of all outdoor drug transactions involving one of these four serious drugs involved powder cocaine. Methamphetamine is estimated to be involved in 10.7 percent of the outdoor drug transactions involving one of these four drugs.

Thus, although crack does appear to be purchased more frequently and is more likely to be obtained outdoors than powder cocaine and methamphetamine, these estimates indicate that one-third of all outdoor drug transactions that include one of these four serious drugs involve crack. By contrast, 75.2 percent of the possession arrests involving one of these four drugs involved crack, and 15.7 percent involved heroin (see Figure 2). Crack is clearly over-represented in arrests relative to the frequency with which it is exchanged, and each of the other drugs is underrepresented in arrests. Law enforcement's overwhelming focus on crack does not appear to be a function of the frequency with which crack is exchanged in Seattle.

Two additional observations lend further support to this conclusion. First, 69.6 percent of all indoor drug possession arrests involving one of these four drugs involved crack cocaine. By contrast, using the data shown in Table 4, we can estimate that approximately 25 percent of the indoor drug transactions involving one of these four drugs involve crack. Second, the downtown drug market that is the site of so many drug arrests is dominated, according to our

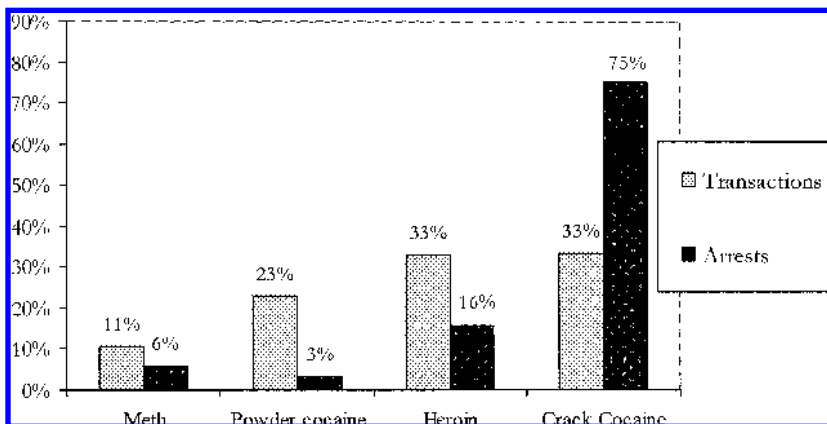


Figure 2 • Outdoor Drug Exchanges Compared with Seattle Drug Arrests

ethnographic observations, by heroin rather than by crack. Nonetheless, 67 percent of those arrested downtown for possession of one of the four drugs considered above were arrested for crack possession; 29.7 percent were arrested for possessing heroin. In short, the available evidence indicates that neither the prevalence of crack use in the Seattle area nor the frequency with which it is acquired outdoors explains the preponderance of crack users among arrestees.

### ***Violence and the Crack Market***

Even if the focus on crack users is not a function of the frequency with which crack is exchanged in Seattle, any association of the crack market with an unusual degree of violence could arguably justify law enforcement's focus on crack users.<sup>15</sup> Although the crack trade has been associated with high levels of systemic violence—that is, violence that results from the unregulated nature of the illegal drug market—in some cities during some periods of time (Blumstein 1995; Brownstein et al. 1992; Goldstein et al. 1997), local police officials have noted that this association does not appear to have existed in Seattle during the period under investigation (Klement and Siggins 2001:37). According to these officials, analysis of homicide and other violent crimes (which are comparatively infrequent in Seattle) indicates no “significant level of violence associated with crack” (Klement and Siggins 2001:37).

More generally, evidence indicates that the association between the crack market and systemic violence in the 1980s and early 1990s in some urban areas arose from the novelty of crack and the resulting instability of the crack market (Blumstein 1995; Taylor and Brownstein 2003). As the crack market has stabilized, the connection between the crack market and violence, as well as the difference between the crack market and other drug markets, has diminished. For example, the Sentencing Commission recently reported that a minority of federal-level crack offenders possessed a weapon at the time of their arrest, and that powder cocaine offenders were only very slightly less likely to possess a weapon when arrested (USSC 2002; see also Martin et al. 2004<sup>16</sup>).

SPD Anti-Crime Teams (ACT) records identifying weapons seized in the course of narcotics operations present even more dramatic evidence that Seattle's crack trade is not especially violent. These records indicate that during the 28-month period under investigation, SPD officers seized a total of 57 guns. Only 2.3 percent of crack arrests, but 25.9 percent of all heroin arrests, involved guns. In short, the available evidence indicates that crack arrests are less likely, not more likely, to involve gun seizure. The available evidence thus indicates that Seattle's crack market is not more violent than other drug markets.

### ***Crack and Public Health***

A final, race-neutral explanation for law enforcement's focus on crack emphasizes the adverse health consequences of that particular substance. While such adverse health effects surely exist, the evidence from the Seattle area indicates that the extent of the focus on crack is difficult to justify in public health terms. As is now well known among social scientists, early claims regarding crack's propensity to cause addiction were exaggerated (see Morgan

15. This logic is contestable, however. Even if there is more violence associated with the crack trade than with other drug markets, many of those involved in that trade do not resort to violence, and it is arguable that a more individualized approach to the problem of violence is warranted (USSC 2002). In addition, insofar as most of the violence associated with illegal drugs relates to the unregulated nature of the markets for those drugs, this violence may be better understood as a consequence of criminal law than as a feature of the drugs themselves. Finally, although some studies have found that aggressive drug enforcement can reduce violence (NIJ 1995; 1996; Sherman, Shaw, and Rogan 1995), other studies have found that intensified anti-drug enforcement efforts actually might increase the violence associated with the drug trade (Montalvo-Barbot 1997; Shepard and Blackley 2003; Sherman 1995).

16. This study found no association between levels of cocaine use and violent crime rates, but a strong association between alcohol use and violent crime in U.S. cities over a ten year period.

and Zimmer 1997; Reinerman and Levine 1997; Reinerman, Murphy, and Waldorf 1994; Waldorf, Murphy, and Reinerman 1991). For example, the vast majority of those who try crack cocaine do not go on to be regular users of crack (Morgan and Zimmer 1997:143–44). Similarly, the harm posed to fetal and infant health by crack use has been exaggerated (Inciardi 2003). Specifically, researchers have found that more than two-thirds of crack-exposed infants suffer no adverse consequences at birth, and that both prenatal and postnatal interventions may prevent or ameliorate developmental problems for those infants who are harmed as a result of their prenatal exposure to drugs (Chasnoff et al. 1992; Humphries 1993; Mathias 1992). Although efforts to reduce drug use among pregnant women are clearly warranted, the evidence does not justify singling out those who use crack versus those who use other substances, such as heroin or alcohol.

Local mortality data are also inconsistent with a public health rationale for the focus on crack. From 1999 to 2001, the Office of the King County Medical Examiner found that 279 overdose deaths involved heroin (and another 123 involved other opiates), whereas 213 overdose deaths involved cocaine (which may have been snorted, smoked, or injected).<sup>17</sup> Furthermore, the public health consequences of intravenous drug use are arguably far greater than those posed by crack use. Of course, all of this begs the question of whether a public health problem can be addressed effectively through law enforcement, but the point here is that no clear public health rationale explains law enforcement's prioritization of crack cocaine over other serious drugs.

### Differential Access to Private Spaces

The evidence presented thus far indicates that blacks and Latinos are significantly over-represented and whites are significantly underrepresented among drug possession arrestees, largely as a result of law enforcement's focus on users of crack cocaine, and especially on black and Latino crack users. However, differences in access to private space might explain this pattern. According to this argument, access to private spaces is differentially distributed across socio-economic (and, hence, racial) groups; those who engage in illicit conduct in public places are more visible to the police and therefore are more likely to be arrested. Although the frequency with which crack is exchanged outdoors does not explain the proportion of arrests that involve crack, blacks and Latinos who use crack might be more likely to obtain it outdoors, and that this racial difference explains arrest outcomes.

The argument that differential visibility explains racial disparity in drug arrests is sometimes accompanied by the claim that law enforcement's proclivity to focus on outdoor drug venues is a (racially neutral) organizational or legal necessity given the greater "payoff" associated with such operations (see Goode 2002; but see Duster 1997). The evidence from Seattle does not support this claim. During the period under investigation, buy-bust operations, which targeted "street dealers," yielded an average of .1 gram of narcotics and 33 cents in funds seized per officer-hour spent conducting the operation. By contrast, search-warrant arrests, which by definition occur indoors, yielded an average of 52 grams of illegal drugs and \$749 per officer hour. (These figures do not include arrests by the Narcotics Division, which are explicitly aimed at those "higher up" the drug distribution system). Furthermore, despite the fact that buy-busts outnumbered search-warrant arrests by over 15 to one, 52 weapons were seized in the course of the search warrant operations, while only two were seized in conjunction with buy-bust operations.<sup>18</sup> In short, the police focus on outdoor venues and

17. Many individuals who die of an overdose have more than one drug in their bloodstream. The numbers presented in the text represent the number of times each type of narcotic is listed as a cause of death. Data were provided to the author by Caleb Banta-Green, Research Consultant at the University of Washington Alcohol and Drug Abuse Institute.

18. These data are based on records of the North, South, and East Precincts; data regarding weapons seized are not available from the West Precinct.



preference for outdoor arrests is better understood as an (inefficient) policy choice than as an organizational or legal necessity.

Regardless of whether law enforcement's focus on outdoor drug venues can be understood as a racially neutral organizational inevitability or as an inefficient public policy choice, the claim is often made that differential visibility explains racially disparate arrest rates. Our data suggest that law enforcement's prioritization of outdoor drug activity contributed to racial disparity in arrests. Whites compose a larger share of those arrested indoors (49.5 percent) than outside (38.5 percent). Conversely, blacks compose a plurality of those arrested outdoors (49.9 percent) but 38.5 percent of those arrested indoors. Insofar as over 72 percent of the possession arrests in which the location was specified occurred outdoors, and whites were less likely to be arrested outdoors than indoors, socio-economic and racial differences in access to private space do appear to contribute to the overrepresentation of blacks among drug possession arrestees in the context of law enforcement's focus on outdoor drug activity.

Over 72 percent of the possession arrests in which the location was specified occurred outdoors; 27.3 percent occurred indoors (in public or private buildings). Whites compose a larger share of those arrested indoors (49.5 percent) than outside (38.5 percent). Conversely, blacks compose 49.9 percent of those arrested outdoors, but 38.5 percent of those arrested indoors. Thus, socio-economic and racial differences in access to private space do appear to contribute to the overrepresentation of blacks among drug possession arrestees in the context of law enforcement's focus on outdoor drug activity. However, the impact of law enforcement's focus on outdoor markets is not as significant as the impact of its focus on crack cocaine: blacks composed a smaller share of non-crack possession arrestees (22.1 percent) than of those arrested indoors for drug possession (38.5 percent). Eliminating the focus on crack would thus reduce racial disparity in drug possession arrests far more than would eliminating outdoor arrests.

A few additional qualifications to our claim that the focus on outdoor activity contributes to racial disparity are in order. First, even among those acquiring drugs outdoors, blacks appear to be at greater risk of arrest. For example, although our observations indicated that 3 percent of those purchasing drugs in the Capitol Hill area were black, 20.5 percent of those arrested for drug possession in that area were black. Similarly, our observations indicated that 38.5 percent of those obtaining drugs, but 45.8 percent of those arrested, in the downtown area were black.

Second, although some drug possession arrests do take place in predominantly white outdoor drug venues, we found in a separate analysis that the vast majority of drug *delivery* arrests occurred in the racially heterogeneous downtown area. In fact, over 65 percent of all buy-bust operations that resulted in a drug delivery arrest were located in three downtown census tracts; only a tiny fraction occurred in predominantly white drug market areas. These deployment choices were not a response to citizen complaints. Nor are they explicable in terms of crime rates. In sum, while the focus on outdoor markets does worsen racially disparate arrest outcomes, the impact of the focus on outdoor drug activity is not as significant as the focus on crack, and the risks associated with obtaining drugs outdoors appear to be shaped by race.

## Discussion and Conclusion

This article draws on a number of data sources to assess competing explanations of racial disparity in drug arrests, and finds that this disparity is largely a consequence of law enforcement's focus on black and Latino users of crack cocaine. Further, we find that law enforcement's focus on crack users does not appear to be a function of the frequency with which crack is exchanged, the concentration of crack transactions exchanges outdoors, or other race-neutral factors. There are, of course, several limitations to the study. First, Seattle is unique in several

important respects, and these findings may not be replicated in other cities. In addition, some possession arrestees, in fact, may be drug dealers, and this may account for some of the discrepancy between estimates of the user population and possession arrestees. Finally, measuring drug use patterns and assessing the relative frequency of drug transactions is, as a result of the illicit nature of the activity, inherently difficult, and this necessarily limits the confidence we can have in our conclusions.

Nonetheless, our findings are supported by multiple data sources and suggest that many commonly held assumptions about the causes of racial disparity in drug arrests may not be accurate. In particular, our findings indicate that blacks and Latinos are overrepresented among those arrested for drug possession compared with a variety of measures of drug use. This overrepresentation primarily results from law enforcement's focus on crack users, and especially on black and Latino crack users. Differential access to private space (in the context of law enforcement's prioritization of outdoor drug venues) also contributes to racially disparate arrest outcomes, though this pattern is numerically less important than the focus on crack. Moreover, our data suggest that the concentration on outdoor drug activity may be an extremely inefficient, even irrational, policy choice rather than an organizational (and race-neutral) inevitability.

Our conclusion that the focus on crack is the primary cause of racial disparity in drug possession arrests in Seattle underscores the need to understand the focus on that particular substance. Contrary to the assertions of social scientists and politicians alike, our findings indicate that this focus is not explicable in terms of: the frequency with which crack is exchanged, any particular association between crack and violence in Seattle, or considerations of public health. Moreover, Washington State law does not treat crack offenders more harshly than powder cocaine or heroin offenders (methamphetamine users are subjected to the most severe penalties), so there are no legal incentives for law enforcement officers to focus on crack offenders. The focus on crack users thus appears not to be explicable in racially neutral terms.

Although an attitudinal conception of racial bias (linked to the notion of "intent") might conceivably explain the overrepresentation of blacks and Latinos among those arrested for possession of crack or other drugs, law enforcement's focus on those enmeshed in the crack market—the most important cause of racial disparity—is difficult to explain in these terms. Rather, it appears that both the focus on crack and the overrepresentation of blacks and Latinos among those arrested for crack and other drugs reflect a racialized conception of "the drug problem." Indeed, law enforcement's focus on black and Latino individuals *and* on the drug most strongly associated with "blackness" suggests that law enforcement policies and practices are predicated on the assumption that the drug problem is, in fact, a black and Latino one, and that crack, the drug most strongly associated with urban blacks, is "the worst." Just as diffuse cultural imagery leads many to assume that criminals and welfare recipients are black and to favor more punitive policies as a result, it appears that law enforcement practices in Seattle reflect a widespread cultural script about who and what constitutes the drug problem, a script that has long-characterized popular discussions of drugs, and, most recently, the crack problem (see Beckett and Sasson 1998; Reeves and Campbell 1994; Reinerman and Levine 1997).

This script appears to be widespread. Indeed, one study found that when asked to imagine a typical drug user, over 95 percent of survey respondents pictured an African American (Burston, Jones, and Robertson-Saunders 1995). Similarly, a Seattle precinct captain responsible for the predominantly white Capitol Hill area reported that outdoor drug transactions *do not occur* in that area (Klement and Siggins 2001:13). However, we were able to observe hundreds of drug transactions in that area in a fairly short period of time, the vast majority of which involved whites. This example suggests that white people who engage in drug transactions outdoors are simply not perceived as drug offenders by Seattle police officers. Cultural imagery surrounding crack and drugs generally also appears

to have affected organizational development within the Seattle Police Department. Indeed, the anti-crime teams, which currently conduct the vast majority of drug busts in Seattle and focus overwhelmingly on crack, were created in the 1980s in response to, and in an effort to combat, the “crack epidemic” (Klement and Siggins 2001). ACT officers continue to enact this organizational charge, nearly two decades later, in the course of their daily activities.

In short, popular discussions and images of the “crack epidemic” in the 1980s appear to have had important institutional consequences beyond the adoption of the federal sentencing laws, and continue to shape both popular and police perceptions of drug users. It is also likely that law enforcement’s tendency to look for and to scrutinize “known drug offenders” means that the focus on black and Latino crack users reproduces itself over time.<sup>19</sup>

In many states, a felony drug conviction has long-lasting individual consequences. As part of a sweeping revision of the administration of welfare in 1996, Congress prohibited anyone convicted of a felony drug offense from receiving welfare or food stamps (Rubenstein and Mukamal 2002). Twenty states enforce this ban. In addition, federal laws adopted in the late 1990s allow public housing agencies to deny housing to anyone who has ever engaged in any drug-related activity or in whose apartment such activity has occurred<sup>20</sup> and render anyone ever convicted of a drug offense ineligible for student loans. These provisions apply only to drug offenders, the vast majority of whom have no history of violence (Rubenstein and Mukamal 2002; King and Mauer 2002). The penalties associated with being officially sanctioned for using or delivering drugs are thus quite severe.

Indeed, the severity of the penalties associated with the drug war make it difficult to imagine that this war could ever be fought on college campuses or in other predominantly white settings. Moreover, the historical record suggests that punitive anti-drug efforts are often triggered by sudden upsurges in concern about the use of consciousness-altering substances by members of a racially or ethnically stigmatized group. In short, racial disparities might not be simply an unfortunate by-product of drug wars, but rather might be a constitutive component of those campaigns.

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19. Indeed, the mayor of Seattle just announced that an increasing number of DOC employees would ride along with SPD officers in order to assist in locating “known drug offenders.” See <http://www.ci.seattle.wa.us/news/detail.asp?ID=4643&dept=40>.

20. “Title 42 U.S.C. §1437d(l)(6) provides that each ‘public housing agency shall utilize leases . . . provid[ing] that . . . any drug-related criminal activity on or off [federally assisted low-income housing] premises, engaged in by a public housing tenant, any member of the tenant’s household, or any guest or other person under the tenant’s control, shall be cause for termination of tenancy.’”

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