

THE STORY OF CRACK: TOWARDS A THEORY OF ILLICIT DRUG TRENDS

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Ongoing work with two heroin epidemics in Baltimore produced a “trend theory,” a way to explain illicit drug use trends. In this article, the case of the crack cocaine epidemic in the 1980s is analyzed to challenge the theory. Two of the key parameters of the theory – the drug production system and the linking networks – apply directly and generate useful explanatory material. A third parameter – historical conditions of the impacted population – does apply, but it reveals explanatory material based more on economic need than subjective effects of the drug. In the end the theory is modified to account for the new material.

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Where did the U.S. crack epidemic of the 1980s come from? The question is part of a larger study that Heather Schacht Reisinger and I have been engaged in for the last several years, a study that aims to explain illicit drug use trends. We are after an answer to that fundamental epidemiological question – why these people in this place at this time?

After analyzing two heroin cases (Agar and Reisinger, 2000, 2001a), we came up with that we call “trend theory.” Trend theory bears a family resemblance to anthropological theories that explain local events in terms of interactions among several distant social locations (Mintz, 1985; Roseberry, 1989; Wolf, 1999). It also links strongly to the transdisciplinary field of complexity theory, particularly those versions that focus on emergent properties of agent-based adaptive systems (Waldrop, 1992; Holland, 1998). What I would like to do here is challenge trend theory with the case of the crack cocaine epidemic of the 1980s. The key question is, can a theory built on heroin cases help understand a case involving a different drug at a different time?

Let me first give a summary of how trend theory works – or should work – to guide the analysis and explanation of an illicit drug epidemic (Agar and Reisinger, 2001c). We first look for a rapid increase in incidence. The assumption is that this rapidly increasing curve is an artifact, an emergent property of systems that are themselves undergoing rapid change. The research problem, then, is to look at relevant systems and locate major ongoing changes that link to the drug.

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Increases in incidence cluster in some segments of a society and not in others. So one obvious system to look at is the social cluster within which incidence is on the rise. We are interested in **changes** in that cluster that are recent or ongoing, what we call *delta-P*, shorthand for changes in the effected population.

We also assume that changes are underway in the system of production for the illicit drug, so we research that system as well, what we call *delta-D*, short for changes in drug production. Finally, we assume that change is also ongoing in the networks that link that production system with the population, what we call *delta-N* for changes in the network.

We have summarized the approach with the following equations:

$$\begin{aligned} T &= f(C) \\ C &= f(\Delta D, \Delta P, \Delta N_{(D, P)}) \\ T_{\text{time2}} &= f(T_{\text{time1}}) \end{aligned}$$

The first equation shows that a trend – in this case a steeply rising incidence curve – is a function of context, where contexts are the other changing systems that produce the incidence curve as an emergent property. The next equation shows that context is a function of changes in drug production, population, and the networks that link them. And finally, as the third function says, trends are dynamic and must be understood over time as they develop. A trend at time two is a function of what that trend looked like at an earlier time one.

Notice the absence of drug policy in the equation. Past analyses of heroin epidemics, and this analysis of crack, will show that policy plays little role in explaining the **onset** of an epidemic, though it of course makes up part of the environments within which it begins. Changes in policy occur later, in *reaction* to a situation that is already well underway. Policy is relevant to later developments in the incidence curve, an analysis that is not addressed in this article.

Here I want to focus on D, P and N for the 1980s crack epidemic. The purpose is to challenge the theory with a different kind of drug at a different time. Though the crack and heroin cases are different in many ways, the theory will on the whole prove useful in directing attention to the important similarities. Attending to delta-D and delta-N provides immediate and powerful explanatory material to understand why and how crack took off when it did. Delta-P, changes in population, will also prove important, though in ways different from the heroin cases we looked at earlier. This difference between heroin and crack poses major complications for the role of delta-P, an issue returned to in the conclusion.

An important caveat before I begin. Many are the ethnic labels in the discussions to come – white, black/African-American, Colombian, Jamaican, etc. People of these communities, or those who claim to speak for them, object with good reason when ethnic identifiers are imported into a discussion of illicit drugs. It suggests the academic equivalent of racial profiling. At the same time, lines of distribution and social clusters of use, more often than not, run along lines of a shared history and a shared language. In fact, it's always a most interesting part of the story to see where the jump from one historical/linguistic network to another occurs. I don't know how to solve the problem with this use of ethnic labels, except to say that when social labels are used, they certainly do not mean that many who bear that label are involved in the world of illicit drugs. In fact,

few are. But I cannot pretend that distribution and use don't socially cluster, because they often do.

CRACK

Where did crack come from anyway? Who invented crack and how did it become the popular drug that it did?

The idea of *smoking* cocaine was already around well before crack. Two patterns were particularly prominent. One pattern involved smoking coca paste, called *basuco* in Spanish, a pattern that developed in Latin America in the 1970s. Paste is an intermediate product in the production of cocaine. Apparently *basuco* was available in the U.S. but it never took off, probably because it contained impurities born of chemical processing of the coca leaves, which involves sulfuric acid, kerosene and a base such as sodium carbonate or calcium oxide.

A second pattern centered on freebase cocaine, also smoked. Freebase was prepared from cocaine hydrochloride powder by neutralizing it with an alkali and then mixing it with a solvent like ether, often heating the mixture with an acetylene or butane torch (Silverman, 1994). Smoking freebase grew in popularity among users of powder cocaine in the 1970s, in part facilitated by the development of an industry to provide recipes and raw materials for the conversion.

In both cases – *basuco* and freebase – the point was to smoke rather than sniff or “snort” cocaine intranasally. The reason for this shift was simple – smoking was a means to the end of a more intense and rapid, though briefer high. A second reason – in the case of freebase, powder cocaine was purified as it was reduced to its pure base form. A third reason – the vasoconstrictor effect of cocaine set natural limits on the amount and rate of absorption when snorted. With smokable cocaine, the sky was the limit.

The practice of smoking cocaine, and its power, were well-known before crack. But *basuco* was an inferior product and freebase was a rich person's drug. Where did crack come from and how did it change this picture?

The key to crack is a simple technology. Instead of the harmful chemicals in *basuco* or the dangerous ether needed to freebase, all one needs are simple ingredients off the grocery shelf, usually baking soda. By cooking powder cocaine and baking soda in water and then letting it cool, a resin-like substance will form at the top of the container and harden. This substance is broken into pieces – hence the name “rock” for crack and the phrase “rock up the cocaine.” It isn't as pure as freebase – the baking soda leaves a trace of salts – and the cocaine can be adulterated before cooking to increase the yield. Crack isn't the luxury that freebase is, but it provides the same intense high as smoking or injecting, and it is simple and safe to make.

What clever cook first figured this out? Inciardi writes that the recipe was available in *The Gourmet Cokebook* in the early 1970s (Inciardi, 1992). In the cocaine heyday of the 1970s, crack was called “garbage freebase” because of its higher level of impurity when compared to true base cocaine.

Crack probably first spread in the early 1980s, as Inciardi tells it. The U.S. set up barriers against the import of “precursor chemicals” for cocaine production into Colombia. Since making paste from coca leaves did not require these chemicals, producers in Colombia started shipping paste to the Caribbean and Florida so that final conversion to cocaine could take place there. With easy availability of paste in

the Caribbean, a version of crack was apparently developed – paste, baking soda, water and rum. It was called “baking soda base,” “base rock,” “ravel” and “Roxanne.” “Migrants from Jamaica, Haiti, Trinidad, and locations along the Leeward and Windward Islands introduced it to Caribbean populations in Miami’s immigrant under-grounds, where it was ultimately produced from powder-cocaine rather than paste” (Inciardi, 1992: 112). In an oral history, a heroin addict said he was offered some “small cocaine rocks” from Little Haiti, in Miami, in May of 1981 (1992: 114). Jonnes reports that the first arrest in a “rock house” in Miami occurred in 1982 (1996: 371).

Along with Miami, Los Angeles also received the new form of cocaine. Since these cities were centers for the cocaine trade and recipients of waves of immigration from the Caribbean, it makes sense that they would lead the trend. A *Los Angeles Times* article claims that crack first appeared in that city in 1981 (Ybarra and Lieberman, 1989). A *Newsweek* article set the date at about 1983 (Morganthau, 1986). By 1985, according to Jonnes, a sociology journal report in its “recent trends” column that there has been a “dramatic increase” in dealing cocaine rocks in the Los Angeles African-American community (1996: 367).

The early appearance of crack in Miami and Los Angeles is linked by some sources to the Bahamas, as is the development of organized crack marketing itself. The Bahamas, well before crack, was a major transshipment point for cocaine on its way from Colombia to the United States, and Carlos Lehder, the genius behind increasing cocaine shipments to be described in the next section, set up his headquarters on Norman Cay, one of the Bahama islands.

As supplies of cocaine increased, argue both Jonnes (1996) and Silverman (1994), local retailers in the Bahamas faced declining income. As the story goes, they decided to remove powder cocaine from the local market and replace it with crack – less expensive per high and therefore affordable by a larger customer base. They learned that crack actually *increased* their profits, because the brief and powerful high often resulted in binge use. The net result was increased sales to a larger market. Jonnes writes that this pattern was imported to Los Angeles and Miami by Bahamians and other Caribbeans (Jonnes, 1996: 371).

New York was not far behind Miami and Los Angeles. The New York State Division of Substance Abuse Services maintains a street research unit that checks the “buzz” around different drugs. William Hopkins, the supervisor, testified before a House committee in 1986. He said they first heard the word “crack” in December, 1983, and then again in March of 1984. Jonnes puts the appearance of crack in the city at about the same time. She notes that local distribution was from Dominicans in Washington Heights who bought from Colombians in Jackson Heights, and says the vast majority of clients were professionals or middle class kids (Congress, 1986b: 372).

Hopkins, of the New York street research unit, said: “In the past year and a half [i.e. between January, 1985, and June, 1986] that the Street Research Unit has been monitoring Crack throughout the New York City area, the problem has spread at an unbelievable rate” (1986b: 184). He added that use was spread across all areas, social groups, and socioeconomic levels. He and his team surveyed a casual sample of 241 drug users. Thirty percent did not want anything to do with crack. The rest switched to crack from snorting cocaine or injecting cocaine and heroin, some out of concern for AIDS, some for a more euphoric high.

At another Congressional hearing, a deputy commissioner from the NYPD, Wilhelmina Holliday, also put crack at about the same date. She noted that it first

appeared in LA in 1981, but probably appeared in New York in 1984 (Congress, 1986a). The DEA logged its first crack arrest in the city in that year (Morrison, 2000). And it was in that year that Terry Williams, who would write an ethnography of the era, first visited a crackhouse (1992). He was amazed at the amount of open sexuality and “freebase” use on his first visit. By January of 1985, crack appeared in the NYPD laboratories for analysis. And by the time of Holliday’s testimony, 68% of cocaine lab analyses were crack. As she summarized it: “Judging by our arrest records, crack is becoming the most available and most popular drug of choice on the streets of the city. It surpasses even heroin or marijuana” (Congress, 1986a: 63).

Robert Stutman, head of the New York DEA office, also testified. He referred to a survey by Washton, the founder of a cocaine hot-line in New York, described in more detail later. According to Washton, before October of 1985 the hotline received no calls about crack. As of May 1986, 33% of the calls were about crack, and 74% of them had been using less than a year. Stutman estimates that crack first appeared two years earlier, that is in 1984, and that the DEA first received information in the fall of 1985 (Congress, 1986a: 260).

By 1985 other federal agencies picked up on crack. Nicholas Kozel of the National Institute on Drug Abuse, who had founded the Community Epidemiology Work Group, was asked to take a look at this phenomenon that had hit New York, Miami, Los Angeles, and Phoenix. He met with a colleague in New York and talked with a group of addicts who described the widespread prevalence of crack, its inexpensive price, and its availability in single smokable doses. By the end of the year, on November 29, 1985, crack made the front page of the *New York Times* for the first time. And crack made its first appearance in the biennial report of NIDA’s Community Epidemiology Work Group at the end of that same year, along with a comment that “base houses” where crack was smoked had already been in existence for about two years in Miami and New York, in other words, roughly since the end of 1983.

William Adler wrote a book describing the rise and fall of the Chambers brothers, the two young entrepreneurs who first organized Detroit’s crack business (Adler, 1995). In 1984, Billy Chambers was selling marijuana out of party store. The state revoked his liquor license. A colleague suggested he try selling crack, which apparently had first appeared in Detroit at the end of the previous year. Chambers let his colleague sell crack out of his house as an experiment. Not much happened that first weekend. He went home to relax – the weekend before the 4th of July – and when he returned to the house he was told that \$15,000 worth of business had come to the house looking for “caine.”

Chambers scrambled to find product so he could feature crack over the Fourth of July. He joked with Adler when he told the story, saying he didn’t know what he was doing, how they’d “rock it up” while the customer waited. They ran the business, he said, “like a couple of frazzled short order cooks” (Adler, 1995: 83). On the 4th Chambers netted \$10,000 off of a single ounce of powder cocaine. The only problems were the traffic jams outside the house. The business, he said, was hectic, frantic, a heavy work load, with a “sheer volume and velocity of repeat business [that] was overwhelming” (1995: 85). The Chambers crack business was born. It wasn’t until the first Sunday of 1986 that crack hit the papers in Detroit, but by then it had “dominated the economy of the east side” for more than a year.

The creative cook – or, more likely, cooks – who discovered the simple recipe for crack is lost in time. But several sources reviewed here suggest that it was the

Caribbean where the idea diffused rapidly and widely, in part fueled by an influx of cocaine paste after Colombia out-sourced production when precursor chemicals were prohibited. The 1980s were also a time of dramatic increases in immigration to the U.S., increases to levels that had not been seen since the early twentieth century. With those two major changes in the background, speculation that crack diffused into the U.S. with Caribbean immigrants to Miami and Los Angeles seems plausible.

Wherever it came from, once it landed use spread rapidly. Looking across several cities, 1985 appears to be the year when the crack epidemic curve took off, though the curve started its climb, as we have seen, well before that in several locations. Early reports are contradictory. On the one hand, they suggest that crack took off among *all* demographic categories; on the other, that it took off in minority, primarily African-American, communities. This contradiction will be explored in a later section of the article. For now, note that the crack epidemic became a national topic in 1986. But well before that, crack use was very real indeed.

It is this period, before crack became a national topic, that I want to explore and explain. How did crack take-off? The answer begins with the development of the cocaine industry in Colombia. The changes in the drug production system for cocaine in the early 1980s set up conditions for the crack epidemic to come.

Now to the guidelines provided by trend theory. To be useful, it should show us where to look to construct an explanation of where crack came from. The first place we will look is the system of drug production, a story told in three parts. The first part shows how production increased in Colombia. The second part describes how the Sandinista/Contra war in Central America facilitated getting the product to market. And the third part shows how the decline in demand in the traditional cocaine market created the organizational crisis that precipitated the growth of crack.

DELTA-D, PART I: THE RISE OF COCAINE PRODUCTION

Colombia and the U.S. Gulf Coast had a long history of smuggling well before illicit drugs came into the picture (Jonnes, 1996: 338; Riley, 1996: 174). And drugs came into the picture well before cocaine. The cocaine business began in earnest as an out-growth of the marijuana industry that developed in Colombia after Nixon's "war on drugs" in the early 1970s. Part of Nixon's policy involved crackdowns on Mexican marijuana and destruction of their growing areas with paraquat. "By 1978, with the paraquat scare in full bloom, Colombia supplied 75% of the marijuana consumed in the United States" (Adler, 1995: 66). Interesting as it is, the story of the growth and decline of Colombian marijuana trafficking is neglected here. What is important for now is how the cocaine boom, as will be shown in several places in this article, built on marijuana distribution networks already in place.

Early in the 1970s, the construction of the Pan-American Highway had linked the coca fields of Peru with small-scale "mom and pop" cocaine producers in Chile (Riley, 1996: 11). But after Pinochet took power in the fall of 1973, he cracked down on the cocaine trade. Chilean experts moved to Colombia, which had "experienced smugglers, complicit government, a withering post-industrial economy, an entrepreneurial culture, and blessed geography" (Adler, 1995: 71). It also had the history of "la violencia," a brutal class war that began in 1948.

The “withering post-industrial” economy that Adler refers to is described in more detail in his book:

...Medellin was the country’s industrial heart, the Detroit of the Andes. Within the sprawling city of two million people were the country’s principal machine shops, glassworks, steel mills, and textile factories. During the 1970s, plant closings and massive layoffs, particularly in the textile business, left a void in the economy (Adler, 1995: 64).

One result of the economic downturn was emigration to the Jackson Heights neighborhood of Queens, often to seek work in the New York textile industry (Riley, 1997). A few of the new arrivals set themselves up as local conduits for small shipments of marijuana and cocaine. According to Jonnes, the drug business – Colombian style – gained a reputation for excessive violence and brutality right in the beginning. She cites the example of the “necktie killing,” where the victim’s tongue is pulled through a slit in his throat so that it hangs down like a tie (Jonnes, 1996).

The cocaine trade between Colombia and the U.S. started out on a small scale. Some product was imported by friends and kin in the Colombian community in New York. Some was handled by middle- and upper middle-class Anglo-American entrepreneurs. An example of this latter type of smuggler was described in an ethnography by Patti Adler (Adler, 1993); another was portrayed by the journalist Sabag in his book *Snowblind* (1976).

But then things changed. As will be described later, demand for cocaine in the U.S. and the ability of Colombia to deliver it began to feed off each other. The belief that cocaine was safe, together with its high-class associations, were major elements in its growing popularity. As Jonnes summarizes it: between the 1970s and early 1980s, “ever tried cocaine” numbers on a national survey of drug use went from 5.4 to 22 million; production went from 25 to 125 tons; prices dropped from \$60,000/kilo to \$15–20,000; and the purity of kilos rose from 35% to 60/70% (1996: 374).

Growing popularity in the U.S., in turn, led to growing delivery from Colombia. Virtually every source that deals with the history of the period awards Carlos Lehder the prize for figuring out how to turn the corner on the cocaine growth curve. Born in 1949, he moved with his divorced mother from Colombia to Detroit and worked for a stolen car ring. He was arrested in early 1973, but then jumped bail and fled to Florida. Arrested there with 200 lbs. of marijuana, he was sentenced to a brief federal prison sentence in Danbury (Jonnes, 1996).

While in prison, in 1974, he met George Jung, raised in a working class white household, the key figure in the recent Hollywood movie *Blow*. Jung had been flying marijuana into the U.S. from Mexico and had connections to a retailing network in Southern California. As *Kings of Cocaine* describes it, the two of them – Lehder and Jung – were a “pivot for history,” because they were the first to use already established methods and networks for marijuana distribution to market cocaine (Gugliotta and Leen, 1990). Quantity shipments using small aircraft were the key. At that time, cocaine cost \$2,000 per kilo in Colombia and sold for \$55,000 per kilo in the U.S., so the profit motive was powerful, to put it mildly.

Their first marketing efforts were a success, which impressed Lehder’s supplier in Medellin, the soon to be famous Pablo Escobar. By 1977, Lehder started transporting coke in lots. Business flourished and eventually he had 6 to 8 pilots carrying quarter-ton loads into the U.S. (Jonnes, 1996: 341). Others began emulating his model, but Lehder was far and away the most successful trafficker. In 1978, aged 28, he set up residence

on Norman's Cay in the Bahamas, the principal transshipment point for product on its way to Florida, the same smuggling route already established for marijuana (Riley, 1996).

The period we are concerned with here, the early 1980s, also saw increasing control over the Colombian government by the traffickers. They basically started taking over the country. In 1980 Medellin traffickers killed 17 police, four judges, some businessmen and the Mayor's bodyguard. Eleven judges received death threats and the entire Medellin bench of 180 resigned in protest (Jonnes, 1996: 351). In the summer of 1981, the Ochoa clan, Escobar and Lehder attended an organizational meeting at the Ochoa hacienda, an event that Jonnes describes as the traffickers "just hitting their stride" (1996: 350). By 1982 Pablo Escobar was elected as an alternate to the Colombian House of Representatives, giving him immunity from prosecution.

In the summer of 1983, Rodrigo Lara Bonillo, the new Justice Minister in Colombia, began a crusade against the traffickers that became a major media issue (Riley, 1996, Chapter 5). Among other things, he raided a production facility called "Tranquilandia," a facility designed to produce 20 tons of cocaine per month. Several airstrips handled coca paste coming in from Bolivia and chemicals from the U.S. and Germany as well as export of the finished product (Jonnes, 1996: 352). Bonillo sent the first extradition order to President Betancur for the arrest of Carlos Lehder. In spite of his immunity, Escobar also became a target of his attacks.

The traffickers fought back. In the spring of 1984 Bonillo requested safe haven in the U.S., but shortly after that he was assassinated. The President of Colombia declared a state of siege and signed the Lehder extradition order. Some traffickers went into temporary exile in Panama, then under the control of Manuel Noriega, but then drifted back into Colombia. Their absence opened up the market and allowed others to enter into the cocaine business, further developing and strengthening it.

The issue of whether or not the extradition order was constitutional was to be heard in the Supreme Court. At the end of 1985, the Palace of Justice was attacked, with 95 people killed, including the Chief Justice and 11 of 24 justices. The judge who had issued a warrant for Escobar was also killed. Colombia had the highest murder rate in the world that year. The next year, ten people per day were murdered in Medellin (Jonnes, 1996: 358). The traffickers, for the next few years, ran the country.

The Colombian cocaine story continues to the present, with President Pastrana's recent "Plan Colombia" supported by U.S. intervention into that country's troubled history. For now, though, this summary of the development and growth of the Colombian cocaine industry shows the roots of the crack story. During the late 1970s and early 1980s, production in Colombia and demand in the U.S. locked into a positive feedback loop that led to more and more cocaine production, distribution and use. Traffickers dominated and controlled the country, making Colombia the first "narco-state." The cocaine trade was transformed from a "cottage industry" to a "vertically integrated global pipeline" (Adler, 1995: 65).

What does all this have to do with crack? Notice how production and distribution develop into the early 1980s, the period on which we focus. The increase in production and delivery of powder cocaine to U.S. markets sets up one important condition for the crack epidemic to come. As will be described in more detail shortly, the flood of cocaine, together with decline in demand among affluent white users, created a market glut, a crisis for the producers that called for an innovative marketing response.

Crack will turn out to be that response, a new technology to process all that excess powder into a cheaper product for a poorer market.

DELTA-D, PART II: IRAN/CONTRA

While Colombian traffickers more or less took over their country in the early 1980s, American foreign policy played into the development of a secure pipeline to ship product from Colombia to the U.S. The background: “Contras” were exiled Nicaraguans who fought a guerilla war against the Sandinista government that took over the country in 1979. The Reagan administration was enthusiastic in its support of the Contras, seeing them as allies in the fight against Communism. In one famous quote, President Reagan referred to Contra leaders as the moral equivalent of the founding fathers.

Congress was more skeptical. They passed two different “Boland Amendments,” one in December of 1982, the second in October of 1984. The first amendment prohibited use of CIA funds “for the purpose of overthrowing the Government of Nicaragua” (Scott and Marshall, 1991: 112). The second amendment specified that *only* humanitarian aid could be provided to the Contras.

Reduced military support from the U.S. meant that the Contras were short on revenue to finance their guerrilla activity. The solution was obvious, especially when one considers the previous involvement in drug trafficking on the part of some of the transport companies, Contra leaders, and their allies (Cockburn and St. Clair, 1998: 284; Jonnes, 1996: 361). Planes flew loaded with supplies to Central America. Why return empty back to the U.S.? Under the ideological umbrella of “national security,” a protected conduit allowed shipments of cocaine to be transported to the U.S.

The main conclusions of a congressional investigation summarize the key points (Scott and Marshall, 1991: 10). Senator John Kerry of Massachusetts began his investigation in April of 1986 and continued for two and a half years. The conclusion, quoted in Cockburn and St. Clair: “It is clear that individuals who provided support for the Contras were involved in drug trafficking. The supply network of the Contras was used by drug trafficking organizations, and elements of the Contras themselves received financial and material assistance from drug traffickers” (1998: 303). And an important second conclusion for present purposes: “US officials involved in Central America failed to address the drug issue for fear of jeopardizing the war effort against Nicaragua” (1998: 304).

The Contra cocaine story haunts the U.S. still. In 1996, Gary Webb published a series of articles in the San Jose *Mercury News* claiming that the CIA actively developed the crack cocaine market in African-American communities of Los Angeles. The controversy continued with the publication of his book *Dark Alliance* (Webb, 1998). The scandal recalls earlier U.S. connections with drug trafficking, also driven by strategic anti-Communist goals – opium and heroin in Southeast Asia during the Vietnam War, and opium and heroin in support of the Mujahadeen rebels during the Soviet occupation of Afghanistan (McCoy, 1991).

The extent of U.S. involvement in cocaine trafficking in the 1980s remains in dispute. Based on past cases, it is unlikely that the CIA played an active role in developing U.S. markets. For present purposes, one thing is clear, in Central America with cocaine, just as with other cases in Southeast and Southwest Asia, political allies of the U.S., in wars

against Communist regimes, used illicit drugs to raise revenue to support their efforts. When this did happen, the U.S. at least looked the other way. At the next level, U.S. logistical support was used to transport illicit drugs. One more level up, and the U.S. actively intervened to protect its allies against the efforts of other agencies, from the U.S. or other countries, to stop trafficking. All these levels were reached in the Contra case. A State Department official of the time, quoted in a *Washington Post* story in 1994, said, ‘The whole thing is too sleazy for words. It’s not a happy chapter in U.S. history’” (Cockburn and St. Clair, 1998: 285).

After Gary Webb’s articles appeared in the *San Jose Mercury News* in 1996, an ABC reporter talked to Kerry, the senator who ran the congressional investigation. He is quoted as saying:

There is no question in my mind that people connected with the CIA were involved in drug trafficking while in support of the Contras. We had direct evidence that somewhere between \$10 million and \$15 million was going to the Contras. And I am quite confident that this was the tip of the iceberg. The Contras were desperate for money. So in a sense they took a bridge loan from anyone available and the drug lords were available (Cockburn and St. Clair, 1998: 308).

The Contra pipeline was another piece of the early 1980s puzzle. The Colombian traffickers who dominated their state institutions could now access their major market with some protection from anti-drug enforcement. The increase in production and distribution in the early 1980s is reflected in numerous statistics. Jonnes, for example, writes that the wholesale price of cocaine in Miami, in 1983, dropped from \$55,000 per kilo to half that (1996: 350). Later she writes that prices had dropped from \$60,000 in 1980 to \$15,000 in 1983. In January of 1984, the Baltimore DEA office reported that wholesale prices dropped 50% over the previous year and that there was a “glut” of cocaine in South Florida (“City sellers reportedly switch to cocaine”, 1984).

Many other sources during the period document the change in the markets, including the regular monitoring of drug indicators by the Community Epidemiology Work Group of the National Institute on Drug Abuse (Kozel, Semiannual). Without exception, all the CEWG indicators from the early 1980’s showed increasing supply and purity and decreasing wholesale price for cocaine. Cocaine was everywhere, getting better and cheaper all the time.

As mentioned at the end of the previous section, production of powder cocaine grew through the early 1980s and the Contra connection facilitated shipment. But, as also mentioned at the end of the last section, there was a problem with this growth industry. As the flood of product into the U.S. increased, the mostly affluent, mostly white users were about to lose interest.

DELTA-D, PART III: THE DECLINING MAINSTREAM TREND

The “baby boomers” soured on cocaine even as supply swelled and prices dropped (Jonnes, 1996: 374ff). As Baum summed it up in his history of drug policy: “As 1982 gave way to 1983, it became known, with extreme suddenness and everywhere at once, that cocaine and not marijuana was the enemy” (1996: 186). The anti-marijuana reaction of the late Carter and early Reagan administrations is a story in itself. For present purposes, what is important is how the mainstream cocaine market declined,

and how the drug became the new object of interest in the ongoing anti-drug policies of the time.

Recall that cocaine had turned into a widely accepted way to live the high life. Cocaine was seen as a safe, non-addicting party drug. The first waves of product, described earlier in this article, interacted with the first waves of cocaine's popularity in a way that the economist Arthur calls "the law of increasing returns" (Arthur, 1990). Cocaine use and production grew together at an increasing rate. The people who used, in increasing numbers, lived in a post-1960s world of acceptable illicit drug use, primarily because of widespread familiarity with marijuana. The Colombian producers distributed cocaine to this same market.

In her history, Jonnes gives several indications of cocaine's growing status and acceptability in mainstream America. Here are a few of them. In 1971 *Newsweek* called cocaine "the status symbol of the American middle-class pothead" (Jonnes, 1996: 304). In 1974 a feature in the *New York Times Sunday Magazine* had the headline, "Cocaine: The Champagne of Drugs." In 1977 *Newsweek* compared the drug to Dom Perignon and caviar. Peter Bourne, President Carter's drug advisor, described cocaine as "benign." The Drug Abuse Council, a Washington think-tank, said cocaine was like fine wine or liqueur for special occasions. A 1981 Time cover showed a martini glass filled with cocaine.

In 1975, the Ford White House issued a white paper. Guided by NIDA's director Robert Dupont, it said:

The data indicate that cocaine is used for the most part on an occasional basis (several times a month or less), usually in the company of others; and it is likely to be taken in combination with alcohol, marijuana, or some other drug. Cocaine is not physically addictive. . . Cocaine, as currently used, usually does not result in serious social consequences such as crime, hospital emergency room admissions, or death (quoted in (Jonnes, 1996: 318)).

Cocaine was considered safe and non-addictive. It was a party drug, an accessory to a successful life, a luxury for those who demanded the best. In fact, many cocaine users probably did have pleasurable experiences and developed no personal problems as a result. But clearly others suffered from a dependency that interfered with their lives. This "abuse" pattern was documented in an ethnographic study of heavy users (Waldorf *et al.*, 1991).

But by the early 1980s it was clear that all was not well with powder cocaine. To some extent the growing negative reaction responded to media events, like Richard Pryor's near death while freebasing cocaine in 1980, and John Belushi's death of a heroin/cocaine injection, a "speedball", in March of 1982. But the big drug news in 1982 came from Arnold Washton, a clinical psychologist who ran a heroin treatment clinic in East Harlem in New York. As Jonnes tells the story, Wall St. executives started showing up for help with cocaine, saying that when they tried to find help people just told them cocaine was not addicting. Washton started running groups. His patients were typically white, employed, middle and upper-middle class people in their 20s and 30s with no history of drug or psychiatric problems. It had taken most of them about five years to get to the point where they sought treatment.

In January of 1983 Washton set up a cocaine hotline and advertised it on FM stations in New York. He then left for vacation. The next day he called the answering machine and it was full with 100 messages. He expanded the hotline and started receiving two to three hundred calls daily. "Within two weeks I was on Good

Morning, America’’, (quoted in (Jonnes, 2001: 327)). According to Baum, the hotline gained support from National Medical Enterprises, who were interested in identifying insured users for treatment (Baum, 1996: 187).

In interviews with a sample of callers, Washton learned that most earned over \$25,000 per year and spent about \$600 a week on cocaine. They reported numerous problems – depression, paranoia, low sex drive, panic, problems with finances, problems with family and work, use of alcohol, tranquilizers, sleeping pills and heroin, and some seizures and suicide attempts.

Washton’s hotline marks the shift in views of cocaine among the middle-class and the mainstream. The hotline contradicted the image of the 1970s – cocaine as fun, high-status, and non-addicting. The negative momentum continued. In 1983 four Kansas City Royals, including the famous Vida Blue, went to jail for cocaine, and that same year an NFL cocaine scandal broke out. In 1984, the *New York Times* health columnist Jane Brody was warning her “legions of Yuppie readers strongly against cocaine” (Jonnes, 1996: 333). In June of that year *Rolling Stone* published an article on how to get off cocaine and Jay McInerney’s popular novel *Bright Lights, Big City* expressed the new ambivalence of the era.

The original market that fueled the growth of the cocaine industry in the 1970s ran out of steam in the early 1980s. In a time of increasing supply of powder, demand among the traditional cocaine-using population started its decline.

With the growth of cocaine production in Colombia, the enhanced ability to deliver it to the U.S. provided by the situation in Central America, and the rapid decline in demand among the traditional market, changes in the system of drug production clearly were underway, changes that trend theory helped see and organize. Next the theory asks for material on changes in the network links between systems of production and particular populations. In fact, such changes were also underway, several of them, all worth substantial analysis. In the next section, a summary of these dramatic shifts in network links between Colombia and the U.S. are summarized.

DELTA-N: GETTING CRACK TO MARKET

At first, in the 1970s powder cocaine traveled from Colombia to U.S. markets through Cubans in Miami, Colombians in New York, and free-lance Anglo entrepreneurs. But the shift from the 1970s to the 1980s, the time of growth of production in Colombia, was also the time when distribution networks to the U.S. changed. These changes played a major role in shifting the flow of product from affluent to poor. Three major networks were involved in the market shift – Dominican dealers, Jamaican posses, and African-American gangs from Los Angeles.

Dominicans living in the Washington Heights section of New York first developed the retail market for the Northeast. As Massing put it: “The Colombians living in New York are too few in number and too insular to have the array of contracts necessary to move drugs on the streets. The Dominicans, New York’s fastest growing immigrant group, do have such contacts. They also have the marketing talent” (Massing, 1989).

Massing writes that Dominicans are credited with developing crack for a mass market. Citing Terry William’s ethnographic work (1993), he describes the marketing

problem – produce inexpensive smokable cocaine for retail sale. The traditional freebase methods reduced the total weight. Dominican dealers came up with “comeback,” a chemical adulterant containing, for example, lidocaine. When it was mixed with cocaine powder and cooked into crack, comeback stayed in the mix and yielded more product.

The Cali Cartel in Colombia, looking for markets outside Miami, increased its shipments to New York. The link between Colombians and Dominicans was a natural, writes Massing, not only because of shared language, but also because of shared “entrepreneurial values” (1989). Why Dominicans took on this role rather than Puerto Ricans or Cubans, for example, is a question that no one appears to have considered. The Dominicans became New York’s “chief middlemen.” They developed their market city-wide, with links to local dealers in Hispanic and African-American neighborhoods, plus open air markets that serviced commuter purchases from the surrounding metro area.

A second major network to local U.S. markets grew out of the 1980 elections in Jamaica (Silverman, 1994). Gangs linked to the two principal political parties engaged in armed conflict, with 800 killed by election day, according to Massing’s account (1989). After Edward Seaga won the election, many gang – or “posse” – members left the country, some for the United States, some for other parts of the world, such as Canada and the U.K. This international diaspora included some networks of traffickers, first with marijuana, later with cocaine.

One famous example was Delroy “Uzi” Edwards. At first he migrated to Brooklyn on a tourist visa, then set up shop selling small amounts of marijuana out of a storefront. In early 1985 he learned the crack business and dedicated himself exclusively to that. New York already had an elaborate crack supply system, especially with the Colombian/Dominican links already in place. But Edwards noticed the entrepreneurs who came up to New York from Philadelphia, Baltimore and Washington. They would travel to the city, purchase powder, then take it home, turn it into crack and sell it for higher prices. Edwards set up shop in those nearby cities.

“Setting up shop” is too mild a phrase. As Massing described it, the posse arrived “with all barrels blazing.” Quoting a prosecutor who dealt with Edwards: “One cause of the violence we’re seeing in many cities is Jamaican traffickers pushing out American blacks” (Massing, 1989). Just as the Colombians would first use Cubans for their local U.S. contacts and then discard them, Jamaicans would use local African-Americans to get business rolling and then take over the market. At its peak, Edward’s organization, known as the Rankers, employed 50 workers and made up to \$100,000 per day” (Massing, 1989; Silverman, 1994: 48–49).

Edwards was not the only posse leader who shifted to crack distribution, nor was the New York–Washington corridor the only area of expansion. Jamaicans set up crack businesses across the U.S., focusing on towns and cities where established criminal organizations were not already in place. A posse created a crack epidemic in Kansas City, but they skipped Chicago, where local gangs already controlled traffic. In Kansas City, law enforcement commented on how efficient and business-like the Waterhouse posse had operated. The Mayor talked about how they “do everything a good business would do” (Silverman, 1994: 115). Most sources say, in one way or another, that the Jamaican posses were a major network in making crack available across the United States.

Those sources also describe the same role for African-American gangs – the Crips and the Bloods – based in Los Angeles. In fact, here we return to the earlier issue of U.S. involvement in cocaine trafficking during the Contra/Sandinista war. With his articles in the San Jose newspaper and later his book, Webb argues that the CIA were in fact directly involved in marketing cocaine to African-Americans in Los Angeles. This argument remains controversial, as described in an earlier section of this article.

Silverman writes that Cali Cartel dealer Mario Villabona was looking for an alternative to Miami in the mid-1980s. He was “the first to spot the enormous potential of the black ghettos” (Silverman, 1994: 278). He picked Los Angeles, and soon afterwards “rock houses” were established in the African-American South-Central neighborhood. Shipments arrived through Mexico to dozens of secret airstrips and miles of remote coastline. Later, in 1989, the *LA Times* reported that the gangs had expanded and were selling crack in 47 cities, including rural Iowa and small towns in South Dakota (Ybarra and Lieberman, 1989).

Massing also writes about the Los Angeles gangs. “Generally they emulate the tactics of the posses, infiltrating black communities by working through local contacts” (1989). He notes that the posses and the gangs had avoided fighting as the date of his article, with the former working east from NY and the latter working west from LA. The *LA Times*, though, says that about 400 posse members are active in LA, that they are more violent and brutal than the gangs, and that little is known about them. And in Baltimore, the city in which I work, all three networks described here fed local crack markets at one time or another.

What distinguished the Dominican, Jamaican and LA gang networks were their innovations in marketing and the way they linked Colombian sources to poor urban communities. The Dominicans provided the methods to convert powder cocaine into crack in a way that enhanced profit and served a mass market. Jamaican posses and LA gangs provided a sales force that developed numerous new sites and increased the flow of product in an efficient way. All three groups provided a crucial link between producers in Colombia and users in poor communities, most prominently – though not exclusively – African-American.

Dominicans, Jamaicans, and LA gangs do not exhaust the list of network links. The powder-to-crack game is potentially open to any player. During Congressional hearings in 1986, police from New York, Washington Miami, and Detroit discussed the nature of crack marketing (Congress, 1986a). The police said that the drug business was not “organized crime” anymore in the old sense of the term. Instead, there were large numbers of small-scale entrepreneurs. New York estimated that organized crime only controlled 25% of drug trafficking; the rest were all over the map. Detroit said anyone with a four-engine airplane could go into the cocaine business, so how organized was that? And Miami said an “everyday guy” could go to South America and form his own organization. One police representative said turf wars were battles for local corners caused by police action or death of a leader, but it was no longer a war between large-scale organized groups.

The development of links between Colombia and local markets, then, replicated what happened in Colombia itself. Entrepreneurs formed organizations that sometimes co-existed, sometimes formed alliances and then changed again. There was always room for other entrepreneurs to try their hand. This change – away from stable and hierarchical organizations – replicates again when we move to the level of street

sales, as will be described in a moment. This shift in structure – from hierarchical to flat and modular – was a major change in the drug business that arrived with crack, one that has never been reversed.

The transition from cocaine for the rich to crack for the poor is well illustrated in the story of Billy Chambers in Detroit, already discussed in an earlier section of this article. Chamber's "weight dealer" was actually a partnership. One partner was white, with a history of dealing to the "glamour" 70s market and with connections to a Colombian in Miami who represented the Cali Cartel. The second partner was black, with broad and deep connections to African-American communities in Detroit. The two of them netted, by their estimate, about \$100 thousand per day for two years (Adler, 1995). The story exemplifies the shifting link from affluent white to poor urban black. The story also shows that Dominicans, Jamaicans, and LA gangs did not cover all of the market. Once again, crack distribution, like cocaine production, like local retailing to be described later, was an open and shifting game, always with room for new entrepreneurs.

Looking for changes in the networks that link drug production with using population, as trend theory suggests, clearly provides useful information to explain where crack came from. The next area to explore, following the theory's guidelines, is change in the population where crack use took off. Here the story is about to get more complicated than earlier work on heroin epidemics suggested. In that earlier work, addiction clustered, in a statistical sense, in particular social groups. For the Baltimore cases that we analyzed, the 1960s/70s epidemic clustered among African-Americans, the 1990s epidemic among white working class suburban youth.

For the crack story, reports are contradictory. On the one hand, crack was said to be used across numerous demographic categories. On the other hand, some said that crack clustered among impoverished urban African-Americans. In this article the question of changes in population is discussed in two parts. In the first part, the question of who used crack is analyzed. In the second, reasons why the drug came to be associated with urban African-Americans are suggested. In the conclusion, the issue of changes in population will be revisited, since this aspect of the crack story poses major challenges for trend theory.

DELTA-P, PART I: WHO WERE THE EARLY CRACK USERS?

Crack is usually associated with impoverished urban African-American communities. There is little doubt that these communities were and still are most severely impacted by crack. As a reporter in Washington put it: "As in cities elsewhere, crack in D.C. has developed into an elixir with a fairly narrow marketing demographic: generally poor, young, and black" (Diaz, 2001). The same article quotes Marc Mauer, who works in a criminal justice reform think-tank in Washington: "It is hard to document, but crack is perceived as a black drug. If it had been whites doing it, I think there would be a lot more deliberation about the sentences." (He refers to harsher sentences for crack as opposed to powder cocaine.)

Jacobs, in his ethnographic study of crack dealers in the 1990s, asks why "crack never migrated outward to any great degree from central-city, predominantly African-American neighborhoods." He writes that this is "an intriguing issue but one that has received little attention" (1999: 127). He argues that, to some extent, use in poor

black neighborhoods created a racist self-fulfilling prophecy, since growing black use of crack meant whites did not want to be associated with it. “Coupled with an undercurrent of racism, the results of such identification can be powerful, as crack attests: crack was the drug of choice in the inner city and nearly nowhere else” (1999: 128).

Massing’s overview of the spread of crack makes the same point, and he includes smaller towns as well as cities. “Across the country, crack has displayed remarkable consistency, taking root in those sectors of society least able to resist it. In places like Charles Town, Newburgh, and even Fort Wayne, Ind., crack has found a foothold among poor blacks and – to a far lesser degree – Hispanics” (Massing, 1989). He wonders whether or not crack will spread to the middle-class, reporting that it has done so in limited ways.

But crack is not *just* used by African-Americans. Bourgois’s ethnography of crack dealers in East Harlem focuses on Hispanics (1995), and Williams’s ethnography of a crackhouse in New York portrays regulars who are white and Hispanic as well (1992). Riley, in his review of cocaine policy, summarizes data as of 1991. “When more recent use is considered, however, the situation is reversed; blacks and Hispanics report significantly higher rates of current use, often two and three times the rates of white . . . Past-month use figures clearly indicate that there is substantial problem cocaine use in white, black and Hispanic communities” (1996: 15).

Writing about Baltimore, Simon and Burns say: “When coke hit Baltimore in the mid-1980s it went beyond the existing addict population, gathering a new market share, for the first time bringing the women to the corner in startling numbers. More white boys came for it, too, some of them from the hillbilly neighborhoods just down the hill, others from the farthest reaches of suburbia” (Simon, 1997: 62). And Waldorf and his colleagues, in their ethnography of cocaine use, gathered a sub-sample of “base” or crack users, including working and middle class whites, explicitly to counter the images of black use. The sample was surprisingly similar to the main powder cocaine sample on most variables they checked. One difference, however: more “basers” were African-American or Latino (Waldorf *et al.*, 1991).

The conclusion is ambiguous. Crack is a drug of impoverished, urban African-American communities, but then again it isn’t. Perhaps we can clarify the ambiguity around who used crack by looking at the overall drug situation as it developed in the early 1980s. As crack appeared, several other drug trends were already underway, as described earlier. The 1970s glamour pattern had turned into the 1980s cocaine addiction problem, so the affluent powder-using trend was moving downward. At the same time, sales of freebase kits in the late 1970s suggests that those who continued to use were turning to smoking as a means to a more intense high. So, the affluent pattern trends downward in general, but smoking trends upward among those who still use.

Meanwhile, heroin use was already endemic in impoverished urban neighborhoods – mostly African-American but also Hispanic and white – long before crack arrived. Reports from the Community Epidemiology Work Group clearly show availability and use of heroin, most heavily in poor urban minority neighborhoods (Kozel, Semiannual). At the same time, as described earlier in this article, production of powder cocaine was on the increase, price was declining, and quality was increasing. In other words, *before* crack, cocaine use was also on the increase in those same neighborhoods. A heroin trend and a cocaine trend, then, were both on the increase, with the heroin line leading the cocaine line by a brief time interval.

The combination of heroin and cocaine is itself a desirable blend from the consumer's point of view. The "speedball" has in fact been around for decades. In one variant, heroin and cocaine are mixed and injected together. From a heroin addict's point of view, the mix is a luxury because of the traditional high price of cocaine. The cocaine gives an intense pleasurable rush and the heroin carries it along and takes the edge off when cocaine's effect diminishes. Recent work in neuroscience supports the reports of this experience. Dopamine levels in the pleasure center increase 380% with cocaine and 70% with heroin, but the two in combination increase levels, 1000% (Gerasimov and Dewey, 1999; Henby et al., 1999).

Even before crack, then, the drop in price and increase in quality of powder cocaine resulted in more cocaine use among heroin addicts, most of them caught up in impoverished neighborhoods where endemic heroin use was long established.

Another trend line had to do with HIV. By the early 1980s, AIDS cases had appeared and it was known that shared needles transmitted infection. As crack appeared, there was an incentive to shift from injection to snorting or smoking heroin and cocaine rather than injecting them. Furthermore, if a person began with crack, there was an incentive to go to a speedball as well, since heroin takes the edge off the depression and anxiety that set in after the intense crack rush wears off.

To sum all this up, cocaine use among the affluent was declining, though among those who did use, smoking was the rise. Cocaine still had the aura of a prestige drug, though its reputation had turned dangerous. In poor city neighborhoods, heroin increased with new waves of product from Southwest Asia, and powder cocaine dropped in price so that it was more available for use alone or in speedballs. The impact of HIV was more visible every day, and knowledge of infection encouraged snorting or smoking rather than injecting illicit drugs. Crack, in short, landed in a situation where drug use was widespread and endemic, and where pressure against injection was increasing.

With this background in place, it is clear why early descriptions of who used crack would be complicated and contradictory. On the one hand, crack is African-American because it is most visible in poor black neighborhoods. It is affordable and it fits the traditional speedball pattern in areas where heroin use is already endemic, if not on the rise. But crack is also poor white and Hispanic, because – in addition to the power of the high – it is affordable for them as well. Besides, it is associated with high status use of powder cocaine by the rich and famous.

At the same time, affluent users don't just vanish. Though the trend among them is downward by the time crack appears, such users are still around, many of them experienced in smoking freebase. One long-time white user said the difference between freebase and crack was like "the difference between preparing a gourmet meal and going out to McDonald's" (Waldorf *et al.*, 1991: 104). But others probably saw crack as a safe, simple version of freebase, something you could purchase cheaply and easily, ready to smoke – hence the name "ready rock" – rather than going through the hassle of buying powder and risking an ether explosion.

Early experimentation with crack use probably *did* scatter across many social categories. Who tried crack when it first appeared? Samples of practically everyone, in terms of different demographics. However, the *socially constructed* image clearly shifts in the mid-eighties. In his history of drug policy, Baum notes that, by the end of 1985, media no longer show the cocaine user as white, rich, attractive and tragic. Now the user is black or Hispanic, and menacing as well. Cocaine use becomes

associated with people of color in the media in general, according to several studies that he cites (Baum, 1996).

The shift in race also appears with a series of articles in the Baltimore daily newspaper during 1984. For instance, in a clear statement of the ongoing change: “While white males remain the largest single group of cocaine users, the number of black males seeking help for cocaine addiction is rising twice as fast” (Roylance, 1984). Another item from an editorial says cocaine is crossing social lines and “is being sought after by the unemployed and hopeless as much as by the creative and well-to-do” (Editorial, 1984). The earlier cited news item reports: “Cocaine addicts today are poorer, less educated, less likely to be working, and more likely to be black than they were only one to four years ago,” quoting the director of the Maryland drug office (Roylance, 1984). And as a final example, another article in 1985 notes that cocaine users are increasing in the treatment statistics, particularly when “secondary” drug problems are included. “That statistic includes an increasing number of black heroin addicts who say they also use cocaine” (Shane, 1985).

Reports from NIDA’s community Epidemiology Work Group during the period also express the transition. In December of 1983 heroin is at “elevated levels” and cocaine is easily available with higher purity and lower price. But their “most notable observation” is this: “Once considered an ‘upper class’ drug, cocaine use has crossed social class lines and is now becoming popular among all segments of society” (Kozel, Semiannual, report for 12/84: I-5). The same report notes increasing problems with HIV among drug users, and points out that a recent study shows that heroin and cocaine are increasingly used together, and that heroin and cocaine are sold in the same locations. A year later, in December of 1984, New York reports an increase in the proportion of African-Americans in their cocaine treatment statistics. And a year after that, in 1985, African-Americans have risen to 64% of cocaine admissions and clients have become younger, with a higher proportion of women as well.

The crack epidemic is difficult to punctuate. It was a new technology, not a new drug. And the drug the technology applied to – powder cocaine – was already driving several different trends, a declining pattern of affluent use and an increasing pattern of street use. The increasing use in itself involved other trends, especially increasing heroin addiction driven by Southwest Asian sources and increasing incidence of HIV injection among intravenous drug users. Still, at the end of the day, crack was seen as poor, urban, and African-American. Did crack wind up taking hold there more so than anywhere else? One powerful reason suggests why that might be true – social and economic despair.

DELTA-P, PART II: WHICH AFRICAN-AMERICANS?

There is an overwhelmingly obvious reason why crack took off in impoverished black urban communities, among the “truly disadvantaged” or the “black underclass” as Wilson called them (1987). Crack was a good and rare business opportunity in a time of extreme social and economic decline.

Whatever statistics one looks at, whatever political commentary one reads, a few major changes of the early 1980s stand out. First, manufacturing industries decline while services increases, and both manufacturing and services shift away from the city towards suburban area. And second, the federal government under President

Reagan dramatically reduces its support for social services. For poor urban residents, this meant that jobs in industry, the traditional first step out of poverty for previous populations, were less available. It also meant that social services were disappearing, services meant to help locate and train for such jobs, while also providing family support in the face of low income.

Baum writes that the Republicans did not want to pump money into cities where the addicts were anyway, since those cities voted Democratic. They shifted to “block grants” to the states that included drug services as part of a larger package for the states to do with as they wished. The 1982 federal budget reduced money for social services but increased support for federal law enforcement. And block grants resulted in total federal aid to states dropping for the first time in thirty years (Baum, 1996: 145).

Add to this another devastating change. Middle and upper class African-Americans who used to be part of those same urban communities moved to more desirable locations. Income disparities among African-Americans grew in the 1980s just as they did in the country in general, a fact dramatized in a *Frontline* show entitled “The Two Nations of Black America” (WGBH/PBS, 1998). In 1968, the average income for the poorest quintile of African-American households was \$10,624; for the richest quintile, \$60,782. By 1995, the poorest quintile had dropped to \$10,120, while the richest had risen to \$84,891. (The comparison is in 1995 dollars.)

Inner city neighborhoods, as Wilson documents in this book, became more concentrated with cases of extreme poverty, with female-headed households, and with high crime rates. These neighborhoods became, in the words of Rusk in his book on Baltimore, “warehouses for the poor” (1996).

The connection between these changes and the crack epidemic is a theme in several studies. In this study of cocaine and crack during the period, Waldorf sums it up:

... the crack industry has been ‘investing’ in inner-city neighborhoods precisely when legitimate industries have been moving out and taking jobs with them. Unlike most legal industries, the illicit drug business is an equal opportunity employer offering good pay to the unskilled. At the same time, federal, state and local governments have all cut spending on employment and social-service programs that might have eased some of the socioeconomic suffering that is at the root of much drug abuse (1991: 8).

This general argument is repeated in discussions of particular cities. For example, in his overview of Baltimore, Rusk writes:

The shift in employment patterns has worked against many inner-city residents. New job creation in downtown business districts has emphasized professional and other high-skill office occupations that are beyond the education and skill levels of many inner-city residents. Lower-wage, lower-skill retail and service jobs have expanded primarily in the suburbs, where the bulk of consumers are located” (1996: 21).

And in their book on one particular crack-dealing corner in Baltimore in the 1990s Simon and Burns write of “the unresolved disaster of the American rust-belt, in the slow, seismic shift that is shutting down the assembly lines, devaluing physical labor, and undercutting the union pay scale” (1997: 59).

Adler’s story of the Chambers brothers in Detroit makes the same point. As he sums it up, “crack distribution is for so many a rational career choice.”

Short shrift is given to the devastating consequences for inner-city residents of the Reagan-Bush era’s domestic spending policies, and to the collapse of opportunity during the 1980’s for those at the bottom of the economic heap – especially poor blacks... There is a reasonable explanation for the crack whirlwind: the head-on collision during the 1980’s of the cultures of greed and need (1995: 5).

Adler shows how the Chambers brothers were the traditional American success story, except for the fact that their business was illegal. They were “successful entrepreneurs.” They found a niche, studied barriers to entry, bought wholesale, mass produced and marketed and tracked inventory, learned how to manage inventory and cash flow, analyzed risk, monitored profit, managed employees, etc. Adler estimates that the brothers grossed about 55 million a year, “enough to rank their enterprise larger than any legal privately held business in Detroit” (1995: 6).

In broad outline, the picture is clear: The early 1980s were a time when history carved out islands of hopelessness and neglect in several cities. The carving was done with decline in unskilled and semi-skilled jobs and reduction in social services for the poor. Most heavily impacted were African-American communities, which at the same time suffered the loss of their many successful residents to new opportunities and new neighborhoods that previously had excluded them. With the “culture of greed” of the 1980s no one cared. The “truly disadvantaged” were considered to be a lost cause.

Into this hopeless situation came a new industry, one that is illegal, but otherwise represented exactly the kind of bootstrap entrepreneurial opportunity that the traditional Horatio Alger myth celebrates. Powder cocaine flooded the market, dropped in price, and increased in purity. And the recipe for crack was simple – a little powder, a little baking soda and water, and some heat to cook with. Couple dismal economics with simple market entry to a profitable business and an explosion in crack is what resulted.

Jonnes called it a “wide open” market. Cartel representatives in Jackson Heights would sell to anyone and crack was easy to make (1996). A journalist wrote: “Since then (1985), nearly every aspect of life in Washington has been rocked by the tiny rock . . . the single most important historical phenomenon to hit the District in the last quarter of the twentieth century” (Schaffer, 2000: 17). In December of 1986, New York’s street research unit reported that crack dealing and crack houses had sprung up all over the place. And Billy Chambers, when he returned to Detroit from several months away in the south, said: “Peoples I never though would be hooked was ripping and running the streets wild. And peoples I never though would be selling crack were selling it. Everything was just different, everybody acting different” (Adler, 1995: 117). Detroit’s DEA reported that “Kids in the ghetto who couldn’t get jobs – they didn’t have transportation out to the suburbs – could rock up cocaine and sell it on any street corner” (Adler, 1995: 220).

In Baltimore, Simon and Burns summed it up like this: “Cocaine changed the world. The heroin trade was limited to the hardcore, but the arrival of cheap, plentiful cocaine in the early and mid-1980s broke down all the barriers and let everyone play” (1997: 62). They elaborate:

The cocaine epidemic changed that as well, creating a freelance market with twenty-year-old wholesalers supplying seventeen-year-old dealers. Anyone could ride Amtrak or the Greyhound to New York and come back with a package. By the late eighties the professionals were effectively marginalized (1997: 63).

They call the scene “amateur hour” with no citywide organization to control it or cut up territory.

As mentioned earlier, during Congressional hearings in 1986 a panel of police chiefs said that crack wasn’t “organized crime” anymore because there were so many

small-scale entrepreneurs. Robert Stutman, head of the New York DEA office, also at those House hearings said:

The simplicity of the crack conversion process allows almost anyone with access to small amounts of cocaine to manufacture crack. As a result, crack manufacture and distribution consists of numerous 'cottage industry' distributors, instead of several large identifiable organizations controlling significant market areas, as is found with the distribution of other drugs... This lack of organization causes crack trafficking trends to vary widely, making intelligence gathering more difficult... This renders our traditional law enforcement strategy of interrupting drug distribution by immobilizing major organizational traffickers far less effective (Congress, 1986b: 268).

Crack distribution offers several employment opportunities. It has to be weighed and cooked. There are lookouts and runners and touts, all this in addition to those who actually stand on the corner and deal. In his ethnography of a crackhouse, Williams (1992) shows how regulars take various roles in the crack economy at various times. During the period of rapid growth in crack use, the period dealt with in this article, jobs increase with the epidemic so that virtually anyone who becomes a serious user can also find work to support his or her habit. Simon sums it up in an article he wrote in the *Baltimore Sun* as a "pop quiz" for the reader:

You are young, poor, a 16- or 17-year old Baltimore resident living with one parent or a grandparent in the George B. Murphy Homes. You are the product of a school system that routinely finds itself coping with a lack of basic textbooks. The unemployment rate for city teenagers is 30 to 40 percent, higher if you are black. You are looking for your place in an unforgiving world, and the older brother of a friend offers you \$500 a week to carry small packages from a row house basement to the stairwell of a high-rise blocks away (Simon, 1987).

Another comment on the business suggests the several jobs available.

If heroin was the Fortune 500, crack was Mom and Pop. A typical crack organization would have no more than seven or eight people – a street seller or two, a steerer to direct customers, a guard to protect the merchandise, a police lookout, a weigher (known as a "scale boy"), a manager and a "Mr. Big" to count the profits. Competition was intense. In busy areas like Washington Heights, one block might host four or five crews, all contending for the same consumer dollar. With no overall hierarchy or command structure to impose order, turf wars broke out over the most lucrative spots (Massing, 1989: 38).

Perhaps a good way to close this section is with a quote from Nichelle Tramble, from her novel of African-American Oakland during the time of crack.

The eighties had brought a fast and furious new industry into Oakland, the crack trade, and there was evidence of it everywhere you looked. The circus atmosphere of the drug game seeped into every aspect of urban Black life. Nothing went untouched as newfound wealth allowed men, women and children to dream, of something different. To the older cats, Michel Corleone and the crew of *The Godfather* supplied the props to let them dream in an elegant manner and jump the class barriers of their birth. But the rules and regulations of *The Godfather* became old to the youngsters even before the credits rolled. They had no time for rituals and order, just time enough to shove a big-ass foot through a door and demand the respect only a loaded gun and lots of money could bring. *Scarface* was their manifesto. It was a mess, but more seductive than anything we'd ever seen (Tramble, 2001: 8).

This isn't the only place where the *Godfather*/*Scarface* contrast is played to compare the traditional post-war heroin scene with what crack turned into. The interested reader is invited to rent the two movies and watch the difference in the characters, both of them played by Al Pacino. *Godfather* is about tradition, hierarchy, organization, and discipline, together with rules against selling heroin. *Scarface*, on the other hand, is about a violent cocaine cowboy rising and falling in gun blazing glory with the help of no one but himself. As a Baltimore acquaintance put it, the film inspired a generation of young black men in the inner city.

TREND THEORY AFTER CRACK

If trend theory does its job properly, it should give general guidelines to investigate and explain illicit drug use epidemics. It is not a “theory” in the traditional positivist sense – universal abstract laws that predict specific cases. Instead, it is a “theory” in the sense of offering a conceptual framework that guides the search for information to explain one of a class of specific problems. In this case, the class of problems is steeply rising incidence curves of the use of illicit drugs.

Now that an overview of the crack story has been laid out, of what use has the theory been?

Change in drug production systems, delta-D, played a critical role in the two heroin epidemics Reisinger and I studied. Clearly it did in the crack case as well. The consolidation of power among Colombian producers together with the new shipping corridor opened up by the Contra war set up a flow of cocaine to the U.S. that far exceeded the demand, especially as the traditional affluent user market declined at the same time. This “organizational crisis,” as we call it elsewhere (Agar and Reisinger, 2001c), set up a problem for producers that the new crack market solved.

Change in networks that link production with population, delta-N, was especially critical in the 1960s heroin epidemic, less so in the 1990s case, since that epidemic dropped new product into an already functioning distribution system of the period. In the crack case, though, changes in linking networks verged on the spectacular. Three new groups linked powder cocaine sources to crack users – Dominicans, Jamaicans, and African-American gangs based in L.A. And the market structure opened spaces for individual entrepreneurs as well.

Changes in the historical conditions of the impacted population also played a role in the heroin cases, and delta-P was important to explain crack as well. Here, though trend theory is confronted with some differences in what those changing conditions were all about, and those differences need some elaboration. Trend theory guided us into production and linking networks and worked like a charm: looking for changing conditions among the population was not so clear cut.

It was not clear, especially at the beginning, just who the effected population in fact were. Crack is associated with impoverished urban African-Americans. But as discussed earlier, many comments from the early days suggest that people from almost all demographic categories tried crack, with many of those developing a dependence on the drug. In oral history interviews now being conducted with veterans of the 1980s Baltimore crack scene, the same point is repeatedly made, both for the early days and for the present. And the author recalls a presentation by undercover narcotics offices at a meeting of the Community Epidemiology Work Group in St. Louis, this in the mid-90s. They had started a program to bust buyers rather than sellers. While the sellers were located in African-American neighborhoods in the city, many of the buyers drove to the market and many of them were white.

Use of the drug might have been widespread, but it appears that retail marketing of crack was in fact concentrated in impoverished urban African-American neighborhoods. It certainly was – and is – in Baltimore. But then other cities complicate the story, notably New York with Dominican street markets and Puerto Rican street dealers, though it would be interesting to know if the volume of crack retail sales was in fact highest in African-American neighborhoods in that city as well.

So suppose that crack was associated with urban African-Americans, in part, because that is where the product could be purchased most easily. Crack was most visible there. This conclusion makes some sense when *economic* conditions of those neighborhoods in the mid-1980s are considered, something that virtually everyone who takes a look at data from the 1980s notices as well. The deterioration that Wilson documents so thoroughly was massive – declining employment, reduced social services, and out-migration of successful community members. Into this hopeless situation came a glut of cocaine, the new crack technology, and new marketing forces. Under the economic and social deterioration of the 1980s the arrival of a means to the end of some ready cash was no doubt a godsend. Into the market came not only the traditional streetwise dealer, but also new waves of youth and members of the growing population of single mothers as well.

A second reason crack was associated with African-Americans resulted from the way it became a national topic. The precipitating event was the cocaine overdose death of Len Bias, an African-American basketball star, in the summer of 1986. The anti-drug policies of the Reagan era shifted to a new target – the menacing black crack addict, not to mention “crack babies.” As the histories document, politicians and media went into a feeding frenzy around the issue, with a flood of feature articles and documentaries and even more repressive laws, the most famous of which insured that, at the point where powder cocaine was converted to crack, prison sentences increased. This “moral panic” after Bias’ death is described elsewhere (Reinarman and Levine, 1995).

The development of this image and its consequences is specifically suggested by Tidwell in his ethnography of crack dealers (1992). Growing supply and use in African-American impoverished neighborhoods fit into traditional patterns of racism. Crack became a “black” drug, thereby increasing its concentration in those neighborhoods and reducing spread to other populations. Indeed, when Reisinger and I interviewed white suburban youth about heroin use, a couple of them said just that, crack is a black drug, to explain why they had never experimented with crack. In short, other types of users might well have become less visible as the crack epidemic developed.

So, in the end, was crack an African-American drug, or not? In retrospect, it looks like the major impact of the 1980s crack epidemic fell on “truly disadvantaged” African-American communities, as described by Wilson. Many other kinds of people used as well, then and now. But with economic pressures, visible markets, and racist images, crack did become more associated with African-Americans as the epidemic developed. This conclusion differs from trend theory work with heroin, because in those cases the impacted population appeared more clearly defined and reasons for use appeared more tied to subjective effects rather than local business opportunities. And in the two heroin cases, racism was, if anything, a reason to ignore the epidemic.

So, the first problem for trend theory is, the impacted population in part corresponds to standard sociodemographic categories, but in part it is constructed, and the categories and the constructed interact and change each other over time.

The second problem: With the heroin cases, we explained rapid increase in use of the drug by appealing to a relationship between historical conditions and consciousness. The role of the drug in the underground economy was noted, but this explanation played a secondary role. In all the heroin cases we looked at, historical change had produced an unexpected and dramatic difference between expectations and reality for some part of the population. We called this a situation of “open marginality” (Agar and

Reisinger, 2001b). Such dramatic historical change, we argued, produced the sort of widespread frustration, anger and stress that opiates were especially designed to handle. Here is where the role of endorphins – the key opioid neurotransmitter – becomes critical. Trend theory suggested that a kind of consciousness brought about by a kind of history was the key change in population to look for.

We carried this idea forward into the crack case, but it did not apply as clearly, since the situation of the 1980s, at least for impoverished urban neighborhoods, could hardly be explained as sudden new conflict between expectation and reality. It was the 1980s. A better description, for those excluded from the new opportunities of the era, might be a continuing slide into more dismal reality and no expectation of any improvement, ever. To borrow the words of a recent news article about Baltimore, “It’s the absence of hope that dashes expectations . . . (Rath, 2002).

So, the “open marginality” concept that had served us so well in the heroin cases did not help in the crack case. Still, “changes in population” had occurred and the obvious one, commented on by virtually all observers, was continuing social and economic decline. Considering that crack was a marketing revolution rather than a new drug, a revolution that opened up economic opportunity to anyone with a little cash and ambition, the link between population and drug seemed obvious. Reisinger and I had noted the role of heroin in the underground economy as well, but for crack, the chance for a lot of people to make a little cash, people struggling to survive in a declining economic situation, looked like the more powerful force.

TUNING THE THEORY

How can the theory “learn” from these difficulties? Perhaps it is a simple matter of focusing on a different kind of drug, crack rather than heroin. More than other drugs, crack is a direct hit to the “pleasure center,” what the brain scientists call the ventral tegmental area and the nucleus accumbens. Dopamine is the key neurotransmitter through which this hit is achieved. Cocaine blocks the reuptake of dopamine so that it remains in the synaptic gap for a longer period of time. One way to understand the power of this effect – dopamine plays a major role in stamping experience and memory with reward to enhance survival. Dopamine, in other words, developed with evolution to link pleasure with behavior, like food and sex and fight/flight, that promoted survival and reproduction.

With this background in place, it is easy to see why cocaine was and is an attractive drug in general, to anyone in principle, but it does not explain why it became most visible in “truly disadvantaged” African-American neighborhoods. In fact, cocaine may cluster less, in general, than other illicit drugs, just because of its universal role as a positive reinforcer linked to basic survival.

In the end, crack probably concentrated in truly disadvantaged African-American communities because social and economic conditions supported positive feedback loops at the business end of things. Those communities became retail distribution centers, though they were not the only centers for use. The local markets grew and increased availability to satisfy economic needs of large numbers of desperate people. Powerful a positive reinforcer as crack is, use increased with growing supply and declining prices, probably more so in those communities where crack could be easily obtained. By the late 1980s a time beyond the scope of this article, crack had been identified as primarily a drug of the “truly disadvantaged” African-American communities.

The forces of racism probably explain why the drug, over time, became associated exclusively with African-Americans and, as a result, reduced use outside that community. The powerful positive reinforcement of crack of course played a role, but probably no more or less so than it does in past or future cocaine epidemics among other populations, rich or poor or in-between.

What does all this mean for trend theory?

The moral of the story is that those symbols in the trend equations with which this article opened do help analyze specific cases, as far as they go. But they do not yet go far enough. In broad outline, trend theory worked to send us to the right places to explain the crack story. But, for the changes in a particular population, it gave directions that landed in problems rather than clear explanations. The concepts need to be expanded to produce better guidelines. And the expansion carries us into long-standing arguments over the relations between ideological and materialistic explanations of the human condition. The fact that we end in the middle of this enduring issue lands us in place that is beyond the scope of this article, to put it mildly. At the same, time, the fact that we land here probably means we are on the right track to improve the theory.

“Changes in population,” then, have to consider subjective effects of the drug, just as they did with heroin. But the concept has to handle more ambiguity in the boundary around “population,” more of a role for the local economy, and a more dynamic view of the social construction of whom the epidemic effects. At the same time, trend theory clearly provided some explanatory help for the crack case as well as for the two heroin epidemics Reisinger and I examined earlier. The most striking theme in the theory is rapid change at about the same time in several different locations that trend theory represents – drug production, population, and the networks that link them. When an epidemic occurs, the changes in different systems, in turn, link up and co-evolve. It is a bottom-up theory based on contingency and the emergence of changed and new inter-system relationship as those systems co-adapt to changing circumstances.

The most difficult part of trend theory work is that each “data point,” if you will, represents a complicated research effort. A massive amount of different material must be gathered, where most of it does not directly ask or answer the questions that we have. We plan to continue assembling more case studies and are currently working on ecstasy. With any luck, the effort to build a trend theory will help in some way as the drug field continues to struggle with that key epidemiological question – why these people in this place at that time?

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