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The Melding of Drug Markets in Houston After Katrina: Dealer and User Perspectives

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Abstract

In the aftermath of Hurricane Katrina, the majority of routine activities in New Orleans were disrupted, including the illegal drug market. The large-scale relocation of New Orleans evacuees (NOEs), including many illegal drug users and sellers, to host cities led to a need for new sources of illegal drugs. This need was quickly satisfied by two initially distinct drug markets (1) drug dealers from New Orleans who were themselves evacuees and (2) established drug dealers in the host cities. To be expected, the two markets did not operate indefinitely in parallel fashion. This paper describes the evolving, operational relationship between these two drug markets over time, with a focus on Houston. We analyze the reciprocal evolution of these two markets at two significant points in time: at the beginning of the relocation (2005) and two years later (2007). The overall trend is towards a melding of the two drug markets, as evidenced primarily by decreases in drug-related violence and the cross-fertilization of drug tastes. We describe the process by which the two drug markets are melded over time, in order to seek a better understanding of the social processes by which drug markets in general evolve.

Keywords

illicit drug use; illicit drug markets; New Orleans evacuees; illicit drug culture; Hurricane Katrina

Introduction

When Hurricane Katrina struck the Gulf Coast in August 2005, the city of New Orleans was flooded and virtually the entire population of the city of New Orleans was evacuated. Most routine everyday activities in the city were disrupted, including the illegal drug market. The large-scale relocation of New Orleans evacuees (NOEs), including many illegal drug users and sellers, to host cities such as Atlanta, San Antonio, and Houston led to a need for new sources of illegal drugs. This need was quickly satisfied by two initially distinct drug markets (1) drug dealers from New Orleans who were themselves evacuees and (2) established drug dealers in the host cities. To be expected, the two markets did not operate indefinitely in parallel fashion. The purpose of this paper is to describe the evolving, operational relationship between these two drug markets over time. The focus is on the city

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Declaration of Interest

The authors report no conflict of interest. The authors alone are responsible for the content and writing of this paper.

of Houston, the host city that accepted the largest number of New Orleans evacuees (approximately 150,000). We analyze the reciprocal evolution of these two markets at two significant points in time. We will delineate aspects of the two markets as they were observed at the beginning of the relocation (2005) and two years later (2007). The overall trend is towards a melding of the two drug markets, as evidenced primarily by decreases in drug-related violence and the cross-fertilization of drug tastes. As the population of New Orleans evacuees continues to be integrated into the broader Houston community, the maintenance of separate drug markets would appear to be inefficient and dysfunctional for buyers and sellers alike. We describe the process by which the two drug markets are melded over time, in order to seek a better understanding of the social processes by which drug markets in general evolve.

Previous Research

“As with any other type of commodity, illicit drugs are traded in a market where buyer and seller have to locate one another in order to conduct a transaction” (Harocopos and Hough, 2005). The term “drug market,” which is used widely in illicit drug research, holds different meanings for different researchers. There are, however, several components upon which qualitative researchers generally agree. As Ritter (2003) notes, an ethnographic portrait of illicit drug markets includes components such as “a rich picture of the market (for example the different roles and structures to the market), the marketplace (for example the interactions between actors) and social and cultural norms (governing drug transactions).”

Perhaps more relevant than methodological differences is the argument in the literature that there is considerable variation in use practices, purchasing patterns, prices, and distribution mechanisms from one city or location to another. As Coomber and Maher (2006) argue:

Drug markets differ in character, time and place, and even within the same geographical location over time... because drug markets are not determined by the characteristics of the drugs bought and sold in them nor do they follow predictable organizational structure. Depending on whether they are burgeoning, established, or declining, markets can vary organizationally depending on the type and degree of organization that is historically or culturally embedded in any particular market or geographical location (p. 721–2).

Coomber and Maher’s argument may be true when considering the structural and cultural characteristics of individual, discrete drug markets. But it remains to be seen how a particular drug market appears when it is severely disrupted and its participants are relocated to a new geographic location with its own existing market. The complexity of this situation, which was the case following the diaspora in the aftermath of Hurricane Katrina, calls for research not only to explore the differences and similarities (Dunlap et al., 2009), but to explore the way the two markets interact over time.

The Katrina disaster provided us with the opportunity to report on the relationship between the New Orleans (original) drug market and the Houston (host) drug market through the perspectives, experiences, and interpretations of users and low-level dealers from New Orleans in accessing Houston drug markets. This paper is the first report of findings on a qualitative/ethnographic analysis of this intriguing relationship.

Methods

The project researchers collected data for this study through a series of interviews and observations in both New Orleans and Houston. The research was designed to reveal New Orleans evacuees’ (NOEs’) drug use and market behavior before the hurricane, in the storm

period before evacuation from New Orleans, during the initial periods following the evacuation, and during the recovery process in Houston. NOEs who returned or who were planning to return to New Orleans have been included along with expatriates who now reside in Houston indefinitely.

The research methods employed were intended to obtain thick description (Geertz, 1973) of the illicit drug markets from active participants at the sites of interest. The two major data collection activities employed to gain a preliminary understanding of the phenomenon were ethnographic observations with accompanying field notes, and qualitative in-depth, open-ended interviews. The researchers also used these methods to locate drug-using NOEs to participate at a later date in personal in-depth interviews about their experiences over the course of relocating to Houston. The open-ended interviews were digitally recorded and transcribed. The transcripts provide details about how individuals' involvement with drug use and distribution changed as a result of varying community contexts. This ethnographic work provided very rich descriptions of drug use and marketing situations as well as insight into the culture of illicit drug use that was evolving.

There were four categories of respondents in Houston. The first consisted of the drug users themselves, both male and female, over the age of eighteen, from New Orleans. The second consisted of drug dealers from New Orleans. The third and fourth categories consisted of users and dealers who have been residents in Houston since at least before Hurricane Katrina—to serve as control groups.

We assembled our sample through a process of fortuitous contact. During fieldwork and the individual interviews, researchers in both New Orleans and in Houston began by selecting a few persons who seemed to be particularly knowledgeable and articulate about the illicit drug market(s). The staff located these prime contacts through pre-existing professional relationships, and field presence at locations likely to produce drug users and dealers (e.g., convenience stores and apartment complex commons areas). These prime contacts, who included both dealers and users, were invited to participate in personal interviews. The staff asked the prime contacts if they could help us locate other respondents safely and confidentially. Accordingly, the staff accumulated a snowball sample (Henry, 1990, p. 21). Approximately 25% of all potential respondents approached actually participated in the study. All respondents provided their full informed consent to participate in a 60 minute recorded interview.

The focus groups were carefully assembled from these respondents that met for approximately two hours each. Groups were composed of 5–7 respondents each and were assembled according to two criteria: drug of primary choice/use and seller versus consumer. The focus groups met in secure locations, including community centers and private apartments. The purpose of the focus groups was to generate conversations about drug markets among those who share common interest in the market (see Greenbaum, 1988). Several focus group participants were also involved in the individual interviews, and all respondents were financially remunerated.

There were a total of 107 individual respondents that self-reported drug use. This included 26 heroin users, 86 crack/cocaine users, 77 marijuana users and, 63 users of other drugs. Many subjects used several different drugs.

The analysis of data that follows was formulated according to the logic of grounded theory. Grounded theory is employed where emergent ideas are explored, typologies are elaborated, and connections with other themes and experiences are identified (Charmaz, 2000; Glaser and Strauss, 1967). This inductive procedure provides a method for reading, coding, and rereading the extensive collection of transcripts and observations to achieve insight into the

forces and processes that underlie the lived experiences of NOEs who participate in illicit drug markets. Since the individual and focus group interviews consisted largely of open-ended and conversational questions, grounded theory functions well to direct discovery in data analysis. The guiding factors are the questions being asked and the responses and observations generated.

Findings

When illegal drug users and sellers from New Orleans evacuated to Houston, they arrived in a city with a very well developed, but quite different, drug market. According to the National Drug Intelligence Center, Houston is one of the major illegal drug distribution centers in the United States (NDIC, 2007). Houston's large and socio-economically diverse population, central geographic location, and numerous transportation systems have over time led to robust local and international drug markets.

The relationship between the drug market in Houston and the drug market in New Orleans has evolved over time. In late 2005, in the aftermath of Hurricane Katrina, users and dealers from New Orleans attempted to restore their drug activities within a context that was partially familiar, partially foreign, and generally dangerous. By 2007, a partial yet ongoing merging of the two drug markets was occurring. This merging included the mutual accommodation of both markets due in large part to the lessening of conflict between evacuees and residents and the cross-fertilization of drug tastes and drug use styles.

2005: Navigating Parallel Drug Markets

Initial Differences—Patterns of Illegal Drug Use

Patterns of illegal drug use in New Orleans and Houston were significantly different before Hurricane Katrina. ADAM data on arrestees' drug use in New Orleans and Houston for 2000–2003 are displayed in Table 1 below. Other comparison cities in Texas (Dallas, San Antonio) and New York City, which has the highest arrestee drug use rates, are provided for comparison.

Table 1 indicates that detectable drug use among arrestees was considerably higher in New Orleans across the major drugs of choice. The difference in heroin use is by far the most noteworthy, with just 6.5% of Houston arrestees testing positive while over 15% of New Orleans arrestees tested positive. We would expect this difference to diminish considerably as a result of the increase in the number of heroin users from New Orleans who relocated to Houston either for a period of time or indefinitely.

Initial Differences—Location and Style

Respondents from New Orleans indicated that the drug market was primarily located outdoors in widely accessible public settings. These settings include sidewalk street corners, near or inside small businesses (storefronts), front porches, and the streets themselves. For example, Jeff (a pseudonym, as are all names in this report) explained, "They get out there on the corner and they work it. ... Like you go to a job and work, they get on the corner and work their crack." Similarly, Miss J said, "Well, only thing that I think that differs there is they, in New Orleans, they're more out in the open with the selling." This public yet condensed scene is due in large part to the fact that New Orleans has short city blocks, a mixture of housing and commercial areas in the same neighborhood, frequent pedestrian activity, and somewhat more limited police patrols than Houston. In addition, houses in New Orleans are very likely to front the street and sidewalk, so that pedestrian traffic is always common and not ordinarily suspicious. These components of the built environment allow for the flourishing of a vibrant outdoor, public drug market.

In Houston, on the other hand, respondents reported that the drug market was primarily located indoors in private spaces. For instance, as Black Girl simply put it, “Houston got their... apartments where they sell drugs.” She explained, “Down here in Texas, it’s hard to get around because you have to drive a couple of miles to get to where you’re goin’. ... [And] you’re gonna have to go to this apartment set, that apartment set and that apartment set to get to your products and stuff like that.” As before, the built environment is largely responsible for these characteristics of the dealing styles because Houston has large apartment complexes with apartments facing a common area. There are few pedestrians who will walk long distances to stores, and Houston has frequent targeted police patrols on all public streets.

In addition to these differences in dealing locations, there are also differences in dealing styles. Lee provided an excellent overall summary of the differences between the two dealing styles:

The dealers? ... [I]t take more, they take more precautions out here than they did in New Orleans.... You’ll see like a whole crowd of ‘em in New Orleans sellin’, bein’ there just sellin’ heroin. And they wouldn’t even much care like if the police passed, they’d still be out there. ... But out here [in Houston] you ain’t gonna see ‘em out there. Certain times of the day is the only time you can go get it, ...like when they think the police ain’t ridin’ around or somethin’ like that. That’s the only time. But they take more precautions out here in sellin’.

Many respondents noted that it was fairly easy to tell New Orleans dealers from Houston dealers because of these differences in style. Jeff, a crack user from New Orleans, explained:

It’s way totally different. And you can tell the... hustlers from New Orleans and Houston, you know. Because... it’s like a more a fashion statement from New Orleans, makin’ money off, off their crack than the Houston, or to the Houstonian. ... [I]f you can sit them, put both of them together, you can tell yourself which one from New Orleans and which one from Houston.

Setting Up Shop

Our New Orleans respondents noted that the indoor location and differing style of dealing in Houston encourages violence and difficulty “setting up shop” in the months just after the storm. Violence is encouraged by having strangers enter one’s home, beyond the protective surveillance of friends and other residents hanging around outside. “Setting up shop” at one’s new home in Houston is difficult because it involves establishing a secure location for inventory and learning the practical, local rules for managing interaction in an enclosed location.

However, despite these differences, NOEs still had to find a way to continue their dealing and buying patterns. For New Orleans dealers, the relationship with Houston dealers was first and foremost one of economic exigency. Mick, a heroin user from New Orleans, said:

And regardless whether New Orleans dealers are down here, the fact is that you have to understand that they down here; and it ain’t like they doin’ good like we doin’ good. Even if they was, they was sellers in New Orleans, they come down here to be sellers, it’s a lot harder; because they got to purchase their package a different way now. It ain’t like in New Orleans where they had their connections where they could get their bundles for half price or somethin’. Down here they gotta pay the full price and the package is not like it was in New Orleans. So they’re not givin’ us no break at all, even if we from New Orleans. ...

Jay, a 31-year-old African-American crack dealer from New Orleans, noted the importance of becoming familiar with potential customers in the process of “setting up shop,” explaining:

It’s like, for me, I started gettin’ knowin’, I started gettin’ to knowin’ people quick. I know like, like I know the whole area almost. That side, this side. I know a lot of people now. So, at first it was kinda hard. It was like you gotta really look around to find what you want, or you done either met that person or you got to hang with ‘em for a little while, or somethin’ like that. Or you might just hear somebody, one, hear, where it’s at, you know, where the spot at and all that. And that’s how you find the way. Then when you go in that spot, you gonna start seein’ people you know from New Orleans and everything. So it just start growin’ on you.

Another strategy for “setting up shop” in Houston was to simply deal only to fellow New Orleans folks. For instance, Slim noted:

Alright. A typical buyer for me, I mostly, I mostly serve, I mostly serve my New Orleans people, ever since I been down here. I don’t mean no disrespect to the H-town. And I don’t mean no disrespect to no race or no white or no black. ... So I mostly, since I’ve been down here in H-town, I mostly just serve nothin’ but New Orleans people. I serve a couple of H-town people.

Similarly, Bo, a 19-year-old African-American marijuana dealer from New Orleans, indicated that he continues to sell to New Orleans people because they approach him:

I know all of ‘em, yeah. I got a lot of people I serve, they really be from New Orleans, though....I don’t really be selling to new people. A lot of people from New Orleans come to me.

Very quickly, however, both New Orleans and Houston dealers realized that a potential buyer’s residential identification should not preclude making a deal. Rico, a 20-year-old African-American marijuana dealer from New Orleans, noted, “I gonna make money, regardless. Because, alright, y’all based here so I gotta score from one of y’all. I gotta get it from one of y’all.”

Difficulties in Establishing a Drug Market for Evacuees

Mechanisms for locating or selling drugs did not develop easily. A number of problems resulted in a distribution system that was both dangerous and less than predictable.

The cultures of dealing contrasted greatly. New Orleans crack cocaine dealers were generally more aggressive in selling large inventories to strangers and much more willing to take chances. They were also significantly younger than their Houston counterparts. Houston dealers, in contrast, organized their work by marketing small amounts to regular customers. Ms. D, a cocaine user from New Orleans, explained this volatile situation in terms of an invasion:

The reason why they can’t, when they came here to Houston and got so involved with all this violence and stuff down here; is because you came to somebody else. ... That’s like me comin’ to your house and takin’ over your house. You not gonna allow me to come there and take over your house and, and do whatever I want in your house. And you been there all your life. That’s the same way with Houston....

Elroy, a 41-year-old African-American heroin user from New Orleans, highlighted the youthfulness of the transplanted New Orleans dealers, saying:

Far as the distribution on the heroin, I, I’d say a lot of more young people are gettin’ involved, gettin’ involved in heroin, you know, and cocaine selling now,

versus before Katrina. You know, it was a lot of older people that had control of the heroin.

And Jay explained, “And they got more, um, younger in New Orleans than down here I know foolin’ with heroin. And they were like from sixteen on up.”

Respondents from both cities insisted that the youthfulness of the New Orleans dealers was the main reason for the increase in violence and gang activity. In the year following evacuation, the homicide rate in Houston increased 32%, which was largely attributed by law enforcement officials to youthful offenders from both New Orleans and Houston (Drew, 2006). In 2006, there was a wave of killings in a southwest-side apartment complex housing numerous Katrina evacuees. The media reported, “Homicide investigator Sgt. Bobby Roberts said the killings were the result of a turf war between Houston-based drug dealers operating in apartment projects in the area and Katrina evacuees trying to take over the business” (Stinebaker, 2006).

Soup, a 50-year-old African-American crack dealer from New Orleans, described his methods for coping with potential competitors and the on-going conflicts among sellers:

I really don’t have no territory but I go find me a spot that I know is safe, where ain’t nobody doing what I’m doing and I handle my business. But I know if you go into somebody’s territory they are going to kill you. That is what has been happening all through the early days of the year. They were just shooting each other up. Why are you over here!? Then after they shoot him, somebody drive over there to shoot somebody over there. That is why I don’t like, you know...I mean I know people that be out there on them corners but I don’t hang out there with them.

And Mom, a 67-year-old African-American female heroin user from New Orleans, registered her dislike of the violence that characterized the early interactions of dealers and users in Houston after Katrina. She said:

Well, to me, before Katrina it was, it was better. This is garbage. There’s too much of killing. It’s too much of killing and too much of angry-hearted with one another.

2007: The Merging Drug Markets

Decreases in Violence

The parallel drug markets described above have changed considerably over the past few years. Perhaps most significantly, the conflict among dealers noted above has significantly decreased (<http://www.crimehouston.com>). Robert described this decrease in violence:

Yeah, it got a whole lot better. At first it was more violence because people didn’t understand this and people couldn’t understand that. And, um, it, it kind of got, a lot of things went down; but it got like you say, leveled out. You know, everybody respect everybody and, you know, it, it’s probably a few disagreements, or whatever, however. But it’s not as much as it was when we first got down here. It have changed a whole lot.

There appear to be four factors related to this decrease. First, rapid and massive police intervention has led to decreased drug use and sales in the large apartment complexes (Flakus, 2005). The FBI, for example, got heavily involved in this effort. FBI Agent Burrus notes, “It’s something we’ve addressed as it’s happened. For example, we saw a significant spike in gang activity in Houston after Katrina, so we teamed up with the Houston Police Department and went after those gangs” (FBI, 2006). Many of the respondents mentioned this as well. For instance, Robert said, “Like as far as the police goes, they hot. ... They’re out to get me, the dealers, and whoever else.” And Ms. D explained that “the police in

Houston, they don't play." Lastly, Will noted, "Man, them police gonna be there. You like, you can't avoid them. I'm tellin' you, if they want you they gonna come and get you, no matter what." Dealers indicated that they initially had difficulty successfully negotiating "corners" in a "block" with their Houstonian counterparts living and selling in the same complex. Elroy noted:

Well, it's more violent than it is now, because a lot of youngsters, you know, they're out for a reputation, you know. One person can't have the block, you know what I'm sayin'. All of 'em want the block. And that will cause a lot of violence, you know. And so if we all get together we can make money like the old-timers, you know. See, if I was selling and he was selling, once I ran out, I would push his for him, you know. And we'll all make money. Because the block ain't big enough, really. You see what I'm sayin'?

Second, stern prosecution of dealers has led to imprisonment for many of them. Black Girl, a female cocaine user from New Orleans, pointed this out, explaining, "But it's really like in Texas you gotta watch out for the laws, you know. The laws are like everywhere." And, as Toya—an African-American female crack user from New Orleans—explained, "If you go to jail out here [in Houston], it's hard to get out."

Third, the two groups of dealers simply had to negotiate a peace in order to stop the killing that was making headlines and diminishing their ranks. As Black Girl observes:

It's plenty room for everybody, you know. ... When New Orleans got here, in Houston... Houston got their corners where they sell drugs, apartments where they sell drugs. They come, they try to move around in their little spots and maneuver in their little spots. ... People are alright here in Houston. Oh, they'll share you a block, send you down there on that one. And you can make your money down there.

Part of this negotiated peace is due to the fact that large numbers of New Orleans evacuees, including dealers, returned to New Orleans. The competition and related conflict over "turf" and clientele may have been at least partially resolved in Houston by the more violent drug sellers returning to New Orleans—where the homicide rate increased by 50% since Katrina (Johnson and Dunlap, 2007).

Slim very elegantly discussed how, regardless of motive, managing mixed clientele is a function of negotiation and good will:

I really have, I really have, like I say, I, I mostly serve New Orleans people. But I have, I have a lot of, um, Houston customers, too. And, um, so we get along very well. Ain't no beef or nothin'. It was beef like when we first came down here, like right after the storm, you know. People from Houston, they thought we was tryin' to come down here and take over and all that there. But they fail to realize, man, you know, we had to be away from the city, man. We had to worry about, you know what I'm sayin', our own people. You know, we wasn't, I know I wasn't tryin' to come down here and beef with no Houston person. Y'all got it. So I'm tryin' to get what y'all got. I'm hurtin'. I don't have nothin'. So I'm tryin' to come up, you know. I ain't tryin' to make no friends with you or nothin' like that. I'm tryin' to see where you at, where your head at, what you got for me, you know what I'm sayin'.

Fourth, the distinctive built environment in Houston has at least indirectly helped reduce violence. As mentioned above, New Orleans evacuees were relocated to large and sprawling apartment complexes in Houston already partially populated by Houston residents. Informants and the police report that violence has largely occurred among Houston and New

Orleans drug dealers living in the same complex. Put differently, the apartment complexes are fairly self-contained drug centers, at least in terms of retail marketing and use. In light of prevailing environmental factors, such as the absence of meaningful public transportation servicing many of these complexes and the ability of the police to concentrate enforcement efforts on a delimited space, drug dealers and users eventually discovered the value of coexistence for sheer survival. The Houston dealers and users were beginning to experience the increased risks associated with increased police surveillance of their new neighbors. As Elroy later stated, “They [Houston dealers and users] ain’t goin’ nowhere and we ain’t goin’ nowhere. If we don’t make peace, there won’t be nobody left.”

Cross-Fertilization of Drug Preferences

One other factor helps to illustrate the merging of the two markets: the integration of drug use styles and preferences, especially among younger users. Heroin use, always highly visible among New Orleans users, has increased dramatically among Houston users since Hurricane Katrina and the subsequent influx of NOEs. Red—a 38-year-old white crack dealer from New Orleans—explained this, noting, “They [Houstonians] are doing a lot of pills... a lot of Ecstasy pills, got a lot of them out there doing heroin [now]. You got a lot of Ecstasy, prescription pills, and heroin. A lot of young users.”

On the other hand, the use of “pills”, such as pharmaceutical analgesics and designer club drugs, has increased among New Orleans users, as Charles—a cocaine user from New Orleans—explained:

Well, this the difference. In New Orleans, all the drug I had experience was [cocaine] powder and marijuana. Here in Texas, I have experienced handlebars, which is a Xanax pill. You know, I never heard of it until I came here. And it’s more, it’s more the ladies that do that here, um, than the guys that I notice. In New Orleans I ain’t, you know, I noticed White people do the pills, the pill thing in New Orleans. You know, it just really started, to me. When I moved to Houston, which I haven’t been here long, few years, you know, I noticed that here it’s pills.

Another drug that was “new” to New Orleans users is cough syrup, variously referred to as “lean” and “purple” in Houston. Once again, Charles explained:

And the syrup, the syrup, Promethazine, codeine liquid, you know, that’s something different, to me, from New Orleans. [Interviewer: That’s a cough syrup?] Charles: Yes. It’s like... Promethazine. ... Codeine syrup. It’s purple. They have different varieties of colors here, you know. But that’s something new to me, different from New Orleans, you know.

The cross-fertilization of drug styles and use occurs largely among younger users. Adolescent and young adult users are more likely than adults to socialize together. They cross paths at high school, in music and dance clubs, and in the apartment complexes New Orleans and Houston residents share. Young drug users from New Orleans learn how to be a Houstonian by learning Houston culture, which of course involves learning the preferred drugs and how to acquire them. Drugs are part of a more general leisure culture. For example, young New Orleans respondents described the complexity of navigating through a typical hip-hop dance club on the southwest side of Houston:

The Houston dudes like that lean, man. They just lay there all fucked up—kinda like the boys who do embalming fluid, you know what I’m sayin’? They like that real slow rap, DJ Screw. ... Lean is cool, but you lose out on all the good lookin’ girls who want to dance bounce [NOTE: fast-beat, New Orleans-based dance music]... they don’t want to just watch you bein’ down, man.

Thus, we witness a situation in which changes in drug preferences precede market changes. (cf. Coomber and Maher, 2006). When young NOEs acquire a taste for lean, they become dependent on Houston dealers who supply lean. Similarly, when young Houston users acquire a taste for heroin from their NOE counterparts, they may become dependent on NOE dealers who specialize in heroin.

The Melding of Wholesale Drug Supply

Despite the significant differences in these two distinct drug markets following the evacuation, there have always been reciprocal relationships between drug traffickers from Houston and New Orleans. Our respondents described how these relationships increased in the wake of Hurricane Katrina. As indicated above, there is a history of low-level drug dealers from New Orleans and Houston doing business with each other. At the wholesale level, NDIC notes:

Some of these evacuees were drug traffickers from high-crime areas of New Orleans and, upon relocating to Houston, formed relationships with drug dealers and gang members. Many of these traffickers have returned home to New Orleans, and the relationships that they built with these Houston-based drug dealers and gang members have given them the ability to obtain significant quantities of illicit drugs directly from connections in Houston. (NDIC, 2007)

There is also a history of wholesale-level interaction among dealers from both cities. Over the years, many New Orleans dealers obtained their inventory/supply/product from wholesalers in Houston. Slim is a 32-year-old African-American drug dealer from New Orleans who has transported marijuana from Houston on I-10 for more than 15 years. He noted:

Yeah. Before the hurricane, you hearin' me, we always came out here and brought it back to New Orleans or whatever. So we been doin' this since like '92, '93.

Slim also noted that his transporting business slowed down as a result of Katrina and its implied moral warnings:

So, you know, it just, it just was basically, God was just telling us that if we ain't get our act right, he's gonna make us get right. ... [Before Katrina] it was under the table the whole time. Now it's on the table.

Summary and Conclusion

The melding of drug markets serving New Orleans evacuees and Houston residents did not begin with the Katrina diaspora. There were preexisting connections between participants in the two locations. At the wholesale level, New Orleans suppliers routinely purchased large quantities of cocaine and marijuana in Houston before Katrina and transported them home via Interstate 10. The actual changes in wholesale delivery after Katrina remain to be examined. We do know that low-level NOE dealers continued to sell in both cities to the extent that they commuted between both Houston and New Orleans in the aftermath of Katrina. We also know that some NOE low-level dealers returned to New Orleans to deal to returning residents and new residents (e.g., Hispanic laborers working on reconstruction in New Orleans). A closer examination of the relationship between wholesalers will reveal more information about the merging of these two initially distinct drug markets.

At the user level, there was always a sharing of drugs and drug use among New Orleans residents who visited family and friends in Houston. Following Katrina, NOEs either expanded upon these pre-existing relationships or sought new sources of drugs. Seeking new sources of drugs was and remains dangerous, as transactions occur with strangers in a very

different socio-cultural place. For example, having a car is very important in Houston to managing drug use, unlike the front-porch marketing style in New Orleans. Violence was commonplace after the Katrina diaspora until NOE drug dealers did one of the following: stopped dealing, returned to New Orleans to deal, went to jail, died, or forged working relationships with Houston dealers. The melding of drug markets in Houston involves a combination of these situations. The melding is supported by the extent to which both user populations increasingly prefer the same drugs. The extent to which young NOEs convert to lean and young Houston users convert to heroin will be a measure of melding at the user level.

Our study suggests principles that may apply more generally to interacting drug locations. Assuming that all geographic locations are likely to be home to illegal drug scenes, we would expect the melding of drug markets to predictably follow the melding of user populations. Increased police surveillance, increased violence, the cross-fertilization of drug tastes and the ongoing integration of the overall populations—especially among younger members who are illicit drug users—are factors that place pressure on the drug markets to meld. In closing, Ms. D. offers a philosophical take on the drug situation among Katrina evacuees everywhere:

Drugs is everywhere. No matter where, Houston, New Orleans, New Orleans, Houston. Male, female. Cocaine, heroin, crack, pills, cough syrup, whatever it is, it's here and it's abundantly. ... And it's not a once, it's not a one-state thing or a one-city thing; it's not just for the Black man; it's not just for the Black woman or the White man. It's for every individual because you got all walks of life that is doin' drugs. And until, until the people understand that, you need to know that there are all kinds of people doing these drugs and it's a disease just like cancer. It's not something for to be looked down upon. You're not gonna ever be able to help the people because you're looking at 'em in a different perspective. You gotta look at 'em like it's the disease and they need help.

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Biographies



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Jennifer L. Fackler, M.A., is the Sociology Faculty Scholar Intern at Houston Community College-Southwest and a Sociology Instructor at the University of Houston. She also works as a research consultant at the National Development and Research Institute. She has multiple publications on a variety of topics including social problems, gender, and culture.



Bruce D. Johnson, Ph.D., (1971, Sociology, Columbia) has been involved in drug abuse research for 36 years and has directed over 15 federally funded research projects. Before his passing, he directed the Institute for Special Populations Research at NDRI, a leading nonprofit research organization focused on the consequences of drug use/abuse since 1992. He has over 125 publications in professional journals plus 6 published books. His Institute's research efforts included identifying drug abuse patterns among arrestees and criminals (Johnson, Golub, Dunlap, 2006), impacts of policing upon arrestees (Johnson et al., 2001), estimating hard drug users and sellers (Davis and Johnson, 2000; Davis et al., 2003), an in-depth analysis of violence among crack abuser households (Dunlap, Johnson, Rath, 1996), and other projects. A key focus of research has been a balanced focus upon employing both quantitative and qualitative methodologies to document hidden phenomena like drug use and sales activities for marijuana (Johnson 1973; Johnson and Golub 2007; Ream et al., 2006, 2007, 2008), heroin (Johnson et al., 1985), and crack (Johnson, Golub and Fagan, 1995; Johnson, Dunlap, Tourigny, 2000), and changing drug subcultures for criminal violence (Johnson, Golub, Dunlap, 2006).



Eloise Dunlap, Ph.D., is a sociologist and graduate of the University of California, Berkeley. At the present time she is Director of the Institute of Special Populations Research (ISPR) at the National Development and Research Institutes (NDRI) in New York City. She has extensive qualitative experience in research and analysis with drug markets, with African-American families, and with drug-abusing families and households. Her work is rooted in an attempt to understand drug markets, their impact on inner city families, male-female and family relations and whether and how these relationships contribute to African-American family instability. Dr. Dunlap has conducted intensive ethnographic studies, including lengthy in-depth interview and detailed observations in many African-American households. Her research has included the combination of both qualitative and quantitative investigations. She has over 20 years of experience in carrying out research, looking at the drug market, and its impact on family life. Dr. Dunlap has numerous publications analyzing restructuring and reformulation of family relationships based on drug use and or sales. At

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Table 1

Drug use measures among ADAM Arrestees in New Orleans and Houston before Katrina

Selected ADAM site	Urine test results positive for:			Past 30 day use (self-reports)		
	Heroin	Crack	Marijuana	Heroin	Crack	Marijuana
New Orleans	15.3%	40.3%	46.0%	12.8%	18.3%	49.7%
Houston	6.5%	30.0%	35.6%	0.9%	12.3%	34.6%
Dallas	6.0%	30.6%	36.2%	2.7%	13.4%	38.6%
San Antonio	9.2%	28.0%	39.1%	6.0%	4.1%	36.0%
New York	16.9%	43.8%	41.9%	15.1%	20.0%	47.0%
All ADAM Sites—Median	5.5%	29.7%	43.0%	3.9%	15.2%	44.6%