



ASAM

American Society of Addiction Medicine

Public Policy Statement on National Drug Policy

Background

Public policy regarding drugs capable of producing dependence, including nicotine, alcohol, opiates, sedatives, stimulants, inhalants and others, has shifted in content and emphasis over the course of American history. These policy changes have resulted from changes in the public perception of the relative health and social consequences associated with the use of these substances, as well as from deliberate choices of strategy deemed most likely to prevent and ameliorate drug-related problems.

The present national drug strategy has focused attention on a variety of measures designed to deal with problems related to illicit drugs such as cocaine, marijuana and heroin, while excluding so-called "legal drugs" such as nicotine and alcohol, from many of its initiatives. In addition, this national policy has placed a much greater emphasis on supply-side strategies such as international control, interdiction and law enforcement, rather than demand reduction through prevention and treatment.

The exclusion of consideration of nicotine- and alcohol-related problems from this national drug policy does not reflect current reality. Dependence on nicotine and alcohol greatly outweigh dependence on all other drugs in numbers of people affected, numbers of premature deaths, and total health and social cost. Furthermore, at the levels of prevention and treatment programming, combined use of different types and classes of drugs is more often the rule than the exception. This recognition has resulted in urgent calls for the United States and other nations to adopt a comprehensive and coordinated approach to all drugs of dependence.

As part of the public debate on national drug policy, many proposals have been put forward that would change laws or regulations related to the cultivation, manufacture, importation, distribution, advertising, sale, possession and use of various psychoactive substances. Some of these proposals, classified under the general categories of "decriminalization," or "legalization," would increase drug availability. "Legalization" means relaxation or removal of legal restrictions on the cultivation, manufacture, distribution, possession and/or use of a psychoactive substance. "Decriminalization" refers to the relaxation or removal of criminal penalties for the possession and/or use of an illicit psychoactive substance. Other proposals call for increased restrictions on the

marketing and availability of drugs now sold under controlled conditions, such as tobacco, alcohol and psychoactive prescription pharmaceuticals. Finally, many have urged a shift in the proportion of total resources devoted to supply and demand reduction strategies.

Recommendations

The American Society of Addiction Medicine, as an organization of physicians who have both hands-on experience and deep concern about the victims of alcoholism and other drug dependencies, recommends that the following principles guide the formation and evaluation of national drug policy:

- 1. National policy should present a comprehensive and coordinated strategy aimed at reducing the harm done to individuals, families and society by the use of all drugs of dependence.**
- 2. Reliance on the distinction between "legal" and "illegal" drugs is a misleading one, since so-called "legal" drugs are illegal for persons under specified ages, or under certain circumstances.**
- 3. Prevention programs should be comprehensively designed to target the entire range of dependence-producing drugs as well as to produce changes in social attitudes. (See ASAM Prevention Statement.)**
- 4. Outreach, identification, referral and treatment programs for all persons suffering from drug dependencies, including alcoholism and nicotine dependence, should be increased in number and type until they are available and accessible in every part of the country to all in need of such services.**
- 5. Persons suffering from the diseases of alcoholism and other drug dependence should be offered treatment rather than punished for their status of dependence.**
- 6. The balance of resources devoted to combating these problems should be shifted from a predominance of law enforcement to a greater emphasis on treatment and prevention programs, as well as programs to ameliorate those social factors that exacerbate drug dependence and its related problems.**
- 7. Law enforcement measures aimed at interrupting the distribution of illicit drugs should be aimed with the greatest intensity at those causing the most serious acute problems to society.**
- 8. Any changes in laws that would affect access to dependence-producing drugs should be carefully thought out, implemented gradually and sequentially, and scientifically evaluated at each step of implementation, including evaluating the effects on:**

- access to young people and prevalence of use among youth;
 - prevalence of use in pregnancy and effects on offspring;
 - prevalence rates of alcoholism and other drug dependencies;
 - crime, violence and incarceration rates;
 - law enforcement and criminal justice costs;
 - industrial safety and productivity;
 - costs to the health care system;
 - family and social disruption;
 - other human, social and economic costs.
9. ASAM opposes any changes in law and regulation that would lead to a sudden significant increase in the availability of any dependence-producing drug (outside of a medically-prescribed setting for therapeutic indications). Any changes should be gradual and carefully monitored.
10. ASAM opposes any system of distribution of dependence-producing drugs that would involve physicians in the prescription of such drugs for other than therapeutic or rehabilitative purposes.
11. ASAM supports public policies that would offer treatment and rehabilitation in place of criminal penalties for persons who are suffering from psychoactive substance dependence and whose only offense is possession of a dependence-producing drug for their own use.
12. ASAM supports public policies which offer appropriate treatment and rehabilitation to persons suffering from psychoactive substance dependence who are found guilty of an offense related to that dependence, as part of their sentence. This goal may be attained through a variety of sentencing options, depending upon the nature of the offense.
13. ASAM supports an increase in resources devoted to basic and applied research into the causes, extent and consequences of alcohol and other drug use, problems and dependence, and into methods of prevention and treatment.
14. In addition, scientifically sound research into public policy issues should receive increased support and given a high priority as an aid in making such decisions.
15. Physicians and medical societies should remain active in the effort to shape national drug policy and should continue to promote a public health approach to alcoholism and other drug dependencies based on scientific understanding of the causes, development and treatment of these diseases.

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