**U.S. Department of Justice**
Drug Enforcement Administration

www.dea.gov

# Speaking Out Against *Drug Legalization*

March 2003

***Speaking Out Against Legalization***
*is also available at DEA's website at:*
*www.dea.gov/demand/speakout/index.html*

*For more information about drug abuse, drug crime, and drug addiction in general, visit DEA's website at:*
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Visit the DEA web site at *www.dea.gov* to learn more about drug legalization and other drug-related issues.

# *From the Administrator*

In many circles, U.S. drug policy is under attack. It is being criticized primarily by those who favor a legalization agenda. It is also being challenged by those who encourage certain trends in European drug policy, like decriminalization of drug use, "harm reduction" programs, and distinctions between hard and soft drugs.

Proponents of legalization are spending huge amounts of money to encourage a greater tolerance for drug use. A number of states have passed referendums to permit their residents to use drugs for a variety of reasons. The citizens who vote in these referendums too often have to rely on the information—or rather, misinformation— being presented by the sponsors of these expensive campaigns to legalize drugs.

This booklet, *Speaking Out Against Drug Legalization*, is designed to cut through the fog of misinformation with hard facts. The ten factual assertions, taken together, present an accurate picture of America's experience with drug use, the current state of the drug problem, and what might happen if America chooses to adopt a more permissive policy on drug abuse.

Drug abuse, and this nation's response to it, is one of the most important and potentially dangerous issues facing American citizens—and especially its youth—today. The unique freedoms of America have always depended on a well-informed citizenry. I hope you will use the facts you read in this booklet to help inform your friends and neighbors so that America can make a wise and well-considered decision on the future of its drug policy.

**John B. Brown, III**
**Acting Administrator**

# Summary of the Top Ten Facts on Legalization

**Fact 1: We have made significant progress in fighting drug use and drug trafficking in America. Now is not the time to abandon our efforts.**

The Legalization Lobby claims that the fight against drugs cannot be won. However, overall drug use is down by more than a third in the last twenty years, while cocaine use has dropped by an astounding 70 percent. Ninety-five percent of Americans do not use drugs. This is success by any standards.

**Fact 2: A balanced approach of prevention, enforcement, and treatment is the key in the fight against drugs.**

A successful drug policy must apply a balanced approach of prevention, enforcement and treatment. All three aspects are crucial. For those who end up hooked on drugs, there are innovative programs, like Drug Treatment Courts, that offer non-violent users the option of seeking treatment. Drug Treatment Courts provide court supervision, unlike voluntary treatment centers.

**Fact 3: Illegal drugs are illegal because they are harmful.**

There is a growing misconception that some illegal drugs can be taken safely. For example, savvy drug dealers have learned how to market drugs like Ecstasy to youth. Some in the Legalization Lobby even claim such drugs have medical value, despite the lack of conclusive scientific evidence.

**Fact 4: Smoked marijuana is not scientifically approved medicine. Marinol, the legal version of medical marijuana, is approved by science.**

According to the Institute of Medicine, there is no future in smoked marijuana as medicine. However, the prescription drug Marinol—a legal and safe version of medical marijuana which isolates the active ingredient of THC—has been studied and approved by the Food & Drug Administration as safe medicine. The difference is that you have to get a prescription for Marinol from a licensed physician. You can't buy it on a street corner, and you don't smoke it.

**Fact 5: Drug control spending is a minor portion of the U.S. budget. Compared to the social costs of drug abuse and addiction, government spending on drug control is minimal.**

The Legalization Lobby claims that the United States has wasted billions of dollars in its anti-drug efforts. But for those kids saved from drug addiction, this is hardly wasted dollars. Moreover, our fight against drug abuse and addiction is an ongoing struggle that should be treated like any other social problem. Would we give up on education or poverty simply because we haven't eliminated all problems? Compared to the social costs of drug abuse and addiction—whether in taxpayer dollars or in pain and suffering—government spending on drug control is minimal.

**Fact 6: Legalization of drugs will lead to increased use and increased levels of addiction. Legalization has been tried before, and failed miserably.**

Legalization has been tried before—and failed miserably. Alaska's experiment with Legalization in the 1970s led to the state's teens using marijuana at more than twice the rate of other youths nationally. This led Alaska's residents to vote to re-criminalize marijuana in 1990.

### Fact 7: Crime, violence, and drug use go hand-in-hand.

Crime, violence and drug use go hand in hand. Six times as many homicides are committed by people under the influence of drugs, as by those who are looking for money to buy drugs. Most drug crimes aren't committed by people trying to pay for drugs; they're committed by people on drugs.

### Fact 8: Alcohol has caused significant health, social, and crime problems in this country, and legalized drugs would only make the situation worse.

The Legalization Lobby claims drugs are no more dangerous than alcohol. But drunk driving is one of the primary killers of Americans. Do we want our bus drivers, nurses, and airline pilots to be able to take drugs one evening, and operate freely at work the next day? Do we want to add to the destruction by making drugged driving another primary killer?

### Fact 9: Europe's more liberal drug policies are not the right model for America.

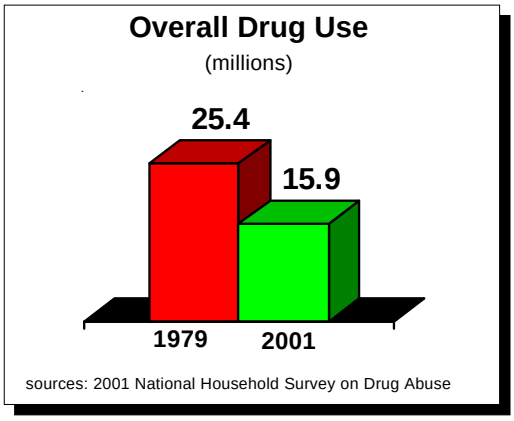
The Legalization Lobby claims that the "European Model" of the drug problem is successful. However, since legalization of marijuana in Holland, heroin addiction levels have tripled. And Needle Park seems like a poor model for America.

### Fact 10: Most non-violent drug users get treatment, not jail time.

The Legalization Lobby claims that America's prisons are filling up with users. Truth is, only about 5 percent of inmates in federal prison are there because of simple possession. Most drug criminals are in jail—even on possession charges—because they have plea-bargained down from major trafficking offences or more violent drug crimes.

***Crime, violence, and drug use go hand-in-hand.***

# Fact 1: We have made significant progress in fighting drug use and drug trafficking in America. Now is not the time to abandon our efforts.




*Demand Reduction*

- Legalization advocates claim that the fight against drugs has not been won and is, in fact, unconquerable. They frequently state that people still take drugs, drugs are widely available, and that efforts to change this are futile. They contend that legalization is the only workable alternative.

- The facts are to the contrary to such pessimism. On the demand side, the U.S. has reduced casual use, chronic use and addiction, and prevented others from even starting using drugs. Overall drug use in the United States is down by *more than a third* since the late 1970s. That's 9.5 million people fewer using illegal drugs. We've reduced cocaine use by an astounding 70% during the last 15 years. That's 4.1 million fewer people using cocaine.

- Almost two-thirds of teens say their schools are drug-free, according to a new survey of teen drug use conducted by The National Center on Addiction and Substance Abuse (CASA) at Columbia University. This is the first time in the seven-year history of the study that a majority of public school students report drug-free schools.

- The good news continues. According to the 2001-2002 PRIDE survey, student drug use has reached the lowest level in nine years. According to the author of the study, "following 9/11, Americans seemed to refocus on family, community, spirituality, and nation." These statistics show that U.S. efforts to educate kids about the dangers of drugs is making an impact. Like smoking cigarettes, drug use is gaining a stigma which is the best cure for this problem, as it was in the 1980s, when government, business, the media and other national institutions came together to do something about the growing problem of drugs and drug-related violence. This is a trend we should encourage — not send the opposite message of greater acceptance of drug use.

- The crack cocaine epidemic of the 1980s and early 1990s has diminished greatly in scope. And we've reduced the number of *chronic* heroin users over the last decade. In addition, the number of new marijuana users and cocaine users continues to steadily decrease.

- The number of new heroin users dropped from 156,000 in 1976 to 104,000 in 1999, *a reduction of 33 percent.*

- Of course, drug policy also has an impact on general crime. In a 2001 study, the British Home Office found violent crime and property crime increased in the late 1990s in every wealthy country except the United States. Our murder rate is too high, and we have much to learn from those with greater success—but this reduction is due in part to a reduction in drug use.

- There is still much progress to make. There are still far too many people using cocaine, heroin and other illegal drugs. In addition, there are emerging drug threats like **Ecstasy** and **methamphetamine**. But the fact is that our current policies balancing prevention, enforcement, and treatment have kept drug usage outside the scope of acceptable behavior in the U.S.

- To put things in perspective, less than 5 percent of the population uses illegal drugs of any kind. Think about that: More than 95 percent of Americans do not use drugs. How could anyone but the most hardened pessimist call this a losing struggle?

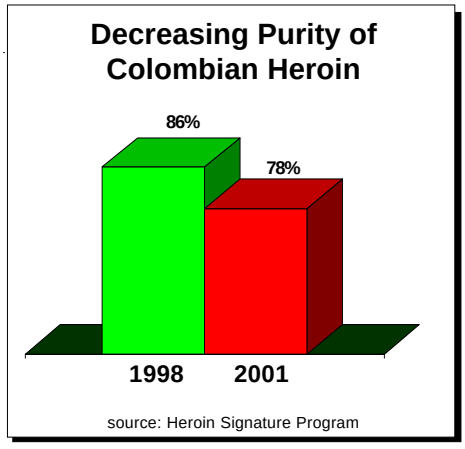
*Supply Reduction*

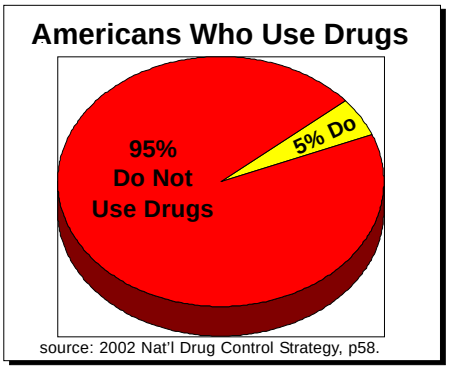
- There have been many successes on the supply side of the drug fight, as well. For example, Customs officials have made major seizures along the U.S.-Mexico border during a six-month period after September 11th, seizing almost twice as much as the same period in 2001. At one port in Texas, seizures of methamphetamine are up 425% and heroin by 172%. Enforcement makes a difference—traffickers' costs go up with these kinds of seizures.

- Purity levels of Colombian cocaine are declining too, according to an analysis of samples seized from traffickers and bought from street dealers in the United States. The purity has declined by nine percent, from 86 percent in 1998, to 78 percent in 2001. There are a number of possible reasons for this decline in purity, including DEA supply reduction efforts in South America.

- One DEA program, Operation Purple, involves 28 countries and targets the illegal diversion of chemicals used in processing cocaine and other illicit drugs. DEA's labs have discovered that the oxidation levels for cocaine have been greatly reduced, suggesting that Operation Purple is having a detrimental impact on the production of cocaine.

- Another likely cause is that traffickers are diluting their cocaine to offset the higher costs associated with payoffs to insurgent and paramilitary groups in Colombia. The third possible cause is that cocaine traffickers simply don't have the product to simultaneously satisfy their market in the United States and their rapidly growing market in Europe. As a result, they are cutting the product to try to satisfy both.



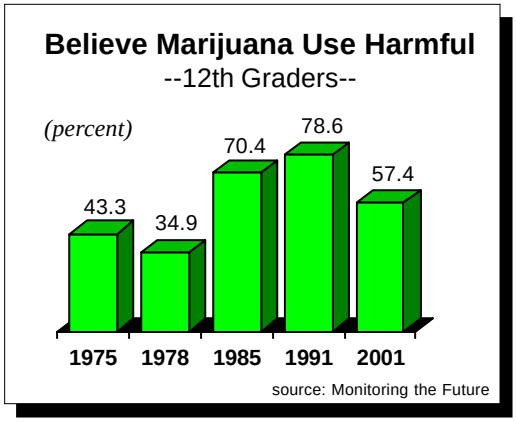

- Whatever the final reasons for the decline in drug purity, it is good news for the American public. It means less potent and deadly drugs are hitting the streets, and dealers are making less profits — that is, unless they raise their own prices, which helps price more and more Americans out of the market.

- Purity levels have also been reduced on methamphetamine by controls on chemicals necessary for its manufacture. The average purity of seized methamphetamine samples dropped from 72 percent in 1994 to 40 percent in 2001.

- The trafficking organizations that sell drugs are finding that their profession has become a lot more costly. In the mid-1990s, the DEA helped dismantle Burma's Shan United Army, at the time the world's largest heroin trafficking organization, which in two years helped reduce the amount of Southeast Asian heroin in the United States from 63 percent of the market to 17 percent of the market. In the mid-1990s, the DEA helped disrupt the Cali cartel, which had been responsible for much of the world's cocaine.

- Progress does not come overnight. America has had a long, dark struggle with drugs. It's not a war we've been fighting for 20 years. We've been fighting it for 120 years. In 1880, many drugs, including opium and cocaine, were legal. We didn't know their harms, but we soon learned. We saw the highest level of drug use ever in our nation, per capita. There were over 400,000 opium addicts in our nation. That's twice as many per capita as there are today. And like today, we saw rising crime with that drug abuse. But we fought those problems by passing and enforcing tough laws and by educating the public about the dangers of these drugs. And this vigilance worked—by World War II, drug use was reduced to the very margins of society. And that's just where we want to keep it. With a 95 percent success rate — bolstered by an effective, three-pronged strategy combining education/prevention, enforcement, and treatment — we shouldn't give up now.

# Fact 2: A balanced approach of prevention, enforcement, and treatment is the key in the fight against drugs.




- Over the years, some people have advocated a policy that focuses narrowly on controlling the supply of drugs. Others have said that society should rely on treatment alone. Still others say that prevention is the only viable solution. As the 2002 National Drug Strategy observes, "What the nation needs is an honest effort to integrate these strategies."

- Drug treatment courts are a good example of this new balanced approach to fighting drug abuse and addiction in this country. These courts are given a special responsibility to handle cases involving drug-addicted offenders through an extensive supervision and treatment program. Drug court programs use the varied experience and skills of a wide variety of law enforcement and treatment professionals: judges, prosecutors, defense counsels, substance abuse treatment specialists, probation officers, law enforcement and correctional personnel, educational and vocational experts, community leaders and others — all focused on one goal: to help cure addicts of their addiction, and to keep them cured.

- Drug treatment courts are working. Researchers estimate that more than 50 percent of defendants convicted of drug possession will return to criminal behavior within two to three years. Those who graduate from drug treatment courts have far lower rates of recidivism, ranging from 2 to 20 percent. That's very impressive when you consider that; for addicts who enter a treatment program voluntarily, 80 to 90 percent leave by the end of the first year. Among such dropouts, relapse within a year is generally the rule.

- What makes drug treatment courts so different? Graduates are held accountable for sticking with the program. Unlike other, purely voluntary treatment programs, the addict—who has a physical need for drugs—can't simply quit treatment whenever he or she feels like it.

- Law enforcement plays an important role in the drug treatment court program. It is especially important in the beginning of the process because it often triggers treatment for people who need it. Most people do not volunteer for drug treatment. It is more often an outside motivator, like an arrest, that gets —and keeps— people in treatment. And it is important for judges to keep people in incarceration if treatment fails.

- There are already more than 123,000 people who use heroin at least once a month, and 1.7 million who use cocaine at least once a month. For them, treatment is the answer. But for most Americans, particularly the young, the solution lies in prevention, which in turn is largely a matter of education and enforcement, which aims at keeping drug pushers away from children and teenagers.

- The role of strong drug enforcement has been analyzed by R. E. Peterson. He has broken down the past four decades into two periods. The first period, from 1960 to1980, was an era of permissive drug laws. During this era, drug incarceration rates fell almost 80 percent. Drug use among teens, meanwhile, climbed by more than 500 percent. The second period, from 1980 to 1995, was an era of stronger drug laws. During this era, drug use by teens dropped by more than a third.

- Enforcement of our laws creates risks that discourage drug use. Charles Van Deventer, a young writer in Los Angeles, wrote about this phenomenon in an article in *Newsweek*. He said that from his experience as a casual user—and he believes his experience with illegal drugs is "by far the most common" — drugs aren't nearly as easy to buy as some critics would like people to believe. Being illegal, they are too expensive, their quality is too unpredictable, and their purchase entails too many risks. "The more barriers there are," he said, "be they the cops or the hassle or the fear of dying, the less likely you are to get addicted….The road to addiction was just bumpy enough," he concluded, "that I chose not to go down it. In this sense, we are winning the war on drugs just by fighting them."

*Laboratory used to make Ecstasy.*

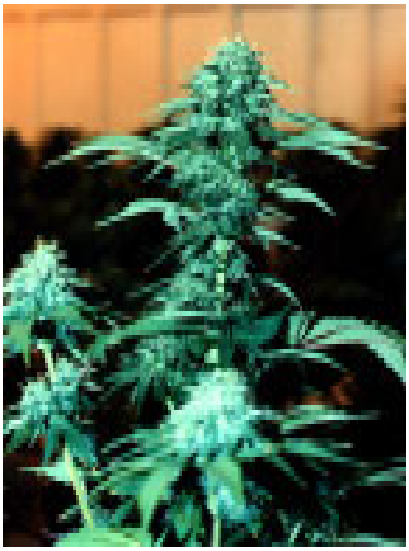
*Ecstasy (MDMA) tablets.*

- The element of risk, created by strong drug enforcement policies, raises the price of drugs, and therefore lowers the demand. A research paper, *Marijuana and Youth*, funded by the Robert Wood Johnson Foundation, concludes that changes in the price of marijuana "contributed significantly to the trends in youth marijuana use between 1982 and 1998, particularly during the contraction in use from 1982 to 1992." That contraction was a product of many factors, including a concerted effort among federal agencies to disrupt domestic production and distribution; these factors contributed to a doubling of the street price of marijuana in the space of a year.

*Powder Cocaine.*

*Crack Cocaine.*

- The 2002 National Drug Control Strategy states that drug control policy has just two elements: modifying individual behavior to discourage and reduce drug use and addiction, and disrupting the market for illegal drugs. Those two elements call for a balanced approach to drug control, one that uses prevention, enforcement, and treatment in a coordinated policy. This is a simple strategy and an effective one. The enforcement side of the fight against drugs, then, is an integrated part of the overall strategy.



*Flowering buds of cannabis plant.*

# Fact 3: Illegal drugs are illegal because they are harmful.

- There is a growing misconception that some illegal drugs can be taken safely—with many advocates of legalization going so far as to suggest it can serve as medicine to heal anything from headaches to bipolar diseases. Today's drug dealers are savvy businessmen. They know how to market to kids. They imprint Ecstasy pills with cartoon characters and designer logos. They promote parties as safe and alcohol-free. Meanwhile, the drugs can flow easier than water. Many young people believe the new "club drugs," such as Ecstasy, are safe, and tablet testing at raves has only fueled this misconception.

- Because of the new marketing tactics of drug promoters, and because of a major decline in drug use in the 1990s, there is a growing perception among young people today that drugs are harmless. A decade ago, for example, 79 percent of 12th graders thought regular marijuana use was harmful; only 58 percent do so today. Because peer pressure is so important in inducing kids to experiment with drugs, the way kids perceive the risks of drug use is critical. There always have been, and there continues to be, real health risks in using illicit drugs.

- Drug use can be deadly, far more deadly than alcohol. Although alcohol is used by seven times as many people as drugs, the number of deaths induced by those substances are not far apart. According to the Centers for Disease Control and Prevention (CDC), during 2000, there were 15,852 drug-induced deaths; only slightly less than the 18,539 alcohol-induced deaths.

*"Rave" party.*

*"Rave" party.*

*Ecstasy*

- Ecstasy has rapidly become a favorite drug among young party goers in the U.S. and Europe, and it is now being used within the mainstream as well. According to the 2001 National Household Survey on Drug Abuse, Ecstasy use tripled among Americans between 1998 and 2001. Many people believe, incorrectly, that this synthetic drug is safer than cocaine and heroin. In fact, the drug is addictive and can be deadly. The drug often results in severe dehydration and heat stroke in the user, since it has the effect of "short-circuiting" the body's temperature signals to the brain. Ecstasy can heat your body up to temperatures as high as 117 degrees. Ecstasy can cause hypothermia, muscle breakdown, seizures, stroke, kidney and cardiovascular system failure, as well as permanent brain damage during repetitive use, and sometimes death. The psychological effects of Ecstasy include confusion, depression, anxiety, sleeplessness, drug craving, and paranoia.

- The misconception about the safety of club drugs, like Ecstasy, is often fueled by some governments' attempts to reduce the harm of mixing drugs. Some foreign governments and private organizations in the U.S. have established Ecstasy testing at rave parties. Once the drug is tested, it is returned to the partygoers. This process leads partygoers to believe that the government has declared their pill safe to consume. But the danger of Ecstasy is the drug itself — not simply its purity level.

*Cocaine*

- Cocaine is a powerfully addictive drug. Compulsive cocaine use seems to develop more rapidly when the substance is smoked rather than snorted. A tolerance to the cocaine high may be developed, and many addicts report that they fail to achieve as much pleasure as they did from their first cocaine exposure.

- Physical effects of cocaine use include constricted blood vessels and increased temperature, heart rate, and blood pressure. Users may also experience feelings of restlessness, irritability, and anxiety. Cocaine-related deaths are often the result of cardiac arrest or seizures followed by respiratory arrest. Cocaine continues to be the most frequently mentioned illicit substance in U.S. emergency departments, present in 30 percent of the emergency department drug episodes during 2001.

*Coca plant.*

*Marijuana*

- Drug legalization advocates in the United States single out marijuana as a different kind of drug, unlike cocaine, heroin, and methamphetamine. They say it's less dangerous. Several European countries have lowered the classification of marijuana. However, as many people are realizing, marijuana is not as harmless as some would have them believe. Marijuana is far more powerful than it used to be. In 2000, there were six times as many emergency room mentions of marijuana use as there were in 1990, despite the fact that the number of people using marijuana is roughly the same. In 1999, a record 225,000 Americans entered substance abuse treatment primarily for marijuana dependence, second only to heroin—and not by much.

*Cannabis plant.*

- At a time of great public pressure to curtail tobacco because of its effects on health, advocates of legalization are promoting the use of marijuana. Yet, according to the National Institute on Drug Abuse, "Studies show that someone who smokes five joints per week may be taking in as many cancer-causing chemicals as someone who smokes a full pack of cigarettes every day." Marijuana contains more than 400 chemicals, including the most harmful substances found in tobacco smoke. For example, smoking one marijuana cigarette deposits about four times more tar into the lungs than a filtered tobacco cigarette.

- Those are the long-term effects of marijuana. The short-term effects are also harmful. They include: memory loss, distorted perception, trouble with thinking and problem solving, loss of motor skills, decrease in muscle strength, increased heart rate, and anxiety. Marijuana impacts young people's mental development, their ability to concentrate in school, and their motivation and initiative to reach goals. And marijuana affects people of all ages: Harvard University researchers report that the risk of a heart attack is five times higher than usual in the hour after smoking marijuana.

# Fact 4. Smoked marijuana is not scientifically approved medicine. Marinol, the legal version of medical marijuana, *is* approved by science.

- Medical marijuana already exists. It's called Marinol.

- A pharmaceutical product, Marinol, is widely available through prescription. It comes in the form of a pill and is also being studied by researchers for suitability via other delivery methods, such as an inhaler or patch. The active ingredient of Marinol is synthetic THC, which has been found to relieve the nausea and vomiting associated with chemotherapy for cancer patients and to assist with loss of appetite with AIDS patients.

- Unlike smoked marijuana—which contains more than 400 different chemicals, including most of the hazardous chemicals found in tobacco smoke—Marinol has been studied and approved by the medical community and the Food and Drug Administration (FDA), the nation's watchdog over unsafe and harmful food and drug products. Since the passage of the 1906 Pure Food and Drug Act, any drug that is marketed in the United States must undergo rigorous scientific testing. The approval process mandated by this act ensures that claims of safety and therapeutic value are supported by clinical evidence and keeps unsafe, ineffective, and dangerous drugs off the market.

- There are no FDA-approved medications that are smoked. For one thing, smoking is generally a poor way to deliver medicine. It is difficult to administer safe, regulated dosages of medicines in smoked form. Secondly, the harmful chemicals and carcinogens that are byproducts of smoking create entirely new health problems. There are four times the level of tar in a marijuana cigarette, for example, than in a tobacco cigarette.


**MARINOL - *noun*
medical marijuana; pharmaceutical product available through prescription**

**JOINT- *noun*
marijuana cigarette; illegal psychotropic substance**

*Marinol container for domestic distribution.*

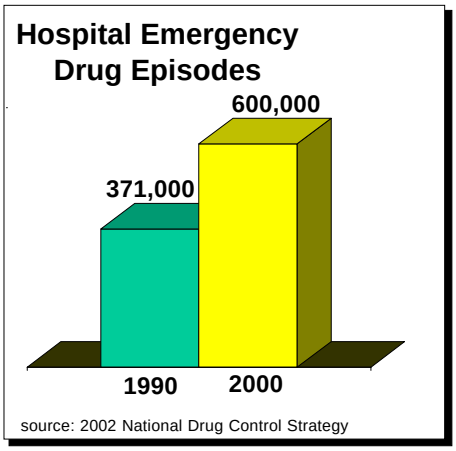
- Morphine, for example, has proven to be a medically valuable drug, but the FDA does not endorse the smoking of opium or heroin. Instead, scientists have extracted active ingredients from opium, which are sold as pharmaceutical products like morphine, codeine, hydrocodone or oxycodone. In a similar vein, the FDA has not approved smoking marijuana for medicinal purposes, but has approved the active ingredient-THC-in the form of scientifically regulated Marinol.

- The DEA helped facilitate the research on Marinol. The National Cancer Institute approached the DEA in the early 1980s regarding their study of THC's in relieving nausea and vomiting. As a result, the DEA facilitated the registration and provided regulatory support and guidance for the study. California, researchers are studying the potential use of marijuana and its ingredients on conditions such as multiple sclerosis and pain. At this time, however, neither the medical community nor the scientific community has found sufficient data to conclude that smoked marijuana is the best approach to dealing with these important medical issues.

- The most comprehensive, scientifically rigorous review of studies of smoked marijuana was conducted by the Institute of Medicine, an organization chartered by the National Academy of Sciences. In a report released in 1999, the Institute did not recommend the use of smoked marijuana, but did conclude that active ingredients in marijuana could be isolated and developed into a variety of pharmaceuticals, such as Marinol.

- In the meantime, the DEA is working with pain management groups, such as Last Acts, to make sure that those who need access to safe, effective pain medication can get the best medication available.

# Fact 5: Drug control spending is a minor portion of the U.S. budget. Compared to the social costs of drug abuse and addiction, government spending on drug control is minimal.



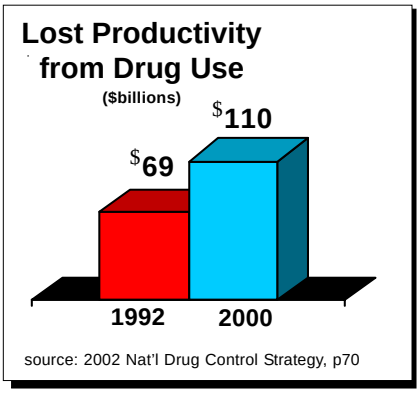

- Legalization advocates claim that the United States has spent billions of dollars to control drug production, trafficking, and use, with few, if any, positive results. As shown in previous chapters, the results of the American drug strategy have been positive indeed—with a 95 percent rate of Americans who do not use drugs. If the number of drug abusers doubled or tripled, the social costs would be enormous.

*Social Costs*

- In the year 2000, drug abuse cost American society an estimated $160 billion. More important were the concrete losses that are imperfectly symbolized by those billions of dollars—the destruction of lives, the damage of addiction, fatalities from car accidents, illness, and lost opportunities and dreams.

- Legalization would result in skyrocketing costs that would be paid by American taxpayers and consumers. Legalization would significantly increase drug use and addiction—and all the social costs that go with it. With the removal of the social and legal sanctions against drugs, many experts estimate the user population would at least double. For example, a 1994 article in the *New England Journal of Medicine* stated that it was probable, that if cocaine were legalized, the number of cocaine addicts in America would increase from 2 million to at least 20 million.

- Drug abuse drives some of America's most costly social problems—including domestic violence, child abuse, chronic mental illness, the spread of AIDS, and homelessness. Drug treatment costs, hospitalization for long-term drug-related disease, and treatment of the consequences of family violence burden our already strapped health care system. In 2000, there were more than 600,000 hospital emergency department drug episodes in the United States. Health care costs for drug abuse alone were about $15 billion.

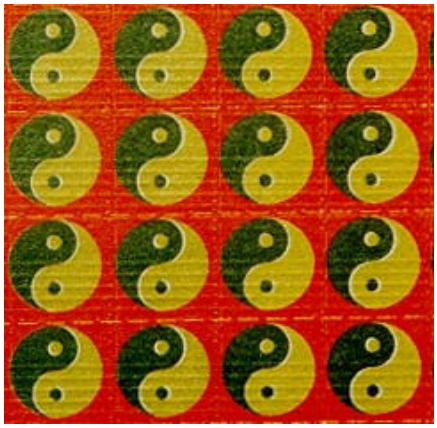



- Drug abuse among the homeless has been conservatively estimated at better than 50 percent. Chronic mental illness is inextricably linked with drug abuse. In Philadelphia, nearly half of the VA's mental patients abused drugs. The Centers for Disease Control and Prevention has estimated that 36 percent of new HIV cases are directly or indirectly linked to injecting drug users.

- In 1998, Americans spent $67 billion for illegal drugs, a sum of money greater than the amount spent that year to finance public higher education in the United States. If the money spent on illegal drugs were devoted instead to public higher education, for example, public colleges would have the financial ability to accommodate twice as many students as they already do.

- In addition, legalization—and the increased addiction it would spawn—would result in lost workforce productivity—and the unpredictable damage that it would cause to the American economy. The latest drug use surveys show that about 75% of adults who reported current illicit drug use—which means they've used drugs once in the past month—are employed, either full or part-time. In 2000, productivity losses due to drug abuse cost the economy $110 billion. Drug use by workers leads not only to more unexcused absences and higher turnover, but also presents an enormous safety problem in the workplace. Studies

have confirmed what common sense dictates: Employees who abuse drugs are five times more likely than other workers to injure themselves or coworkers and they cause 40% of all industrial fatalities. They were more likely to have worked for three or more employers and to have voluntarily left an employer in the past year.



*LSD blotter paper.*

- Legalization would also result in a huge increase in the number of traffic accidents and fatalities. Drugs are already responsible for a significant number of accidents. Marijuana, for example, impairs the ability of drivers to maintain concentration and show good judgment. A study by the National Institute on Drug Abuse surveyed 6,000 teenage drivers. It studied those who drove more than six times a month after using marijuana. The study found that they were about two-and-a-half times more likely to be involved in a traffic accident than those who didn't smoke before driving.

- Legalizers fail to mention the hidden consequences of legalization.

- Will the right to use drugs imply a right to the access to drugs? One of the arguments for legalization is that it will end the need for drug trafficking cartels. If so, who will distribute drugs? Government employees? The local supermarket? The college bookstore? In view of the huge settlement agreed to by the tobacco companies, what marketer would want the potential liability for selling a product as harmful as cocaine or heroin— or even marijuana?

- Advocates also argue that legalization will lower prices. But that raises a dilemma: If the price of drugs is low, many more people will be able to afford them and the demand for drugs will explode. For example, the cost of cocaine production is now as low as $3 per gram. At a market price of, say, $10 a gram, cocaine could retail for as little as ten cents a hit. That means a young person could buy six hits of cocaine for the price of a candy bar. On the other hand, if legal drugs are priced too high, through excise taxes, for example, illegal traffickers will be able to undercut it.

- Advocates of legalization also argue that the legal market could be limited to those above a certain age level, as it is for alcohol and cigarettes. Those under the age limits would not be permitted to buy drugs at authorized outlets. But teenagers today have found many ways to circumvent the age restrictions, whether by using false identification or by buying liquor and cigarettes from older friends. According to the 2001 National Household Survey on Drug Abuse, approximately 10.1 million young people aged 12-20 reported past month alcohol use (28.5 percent of this age group). Of these, nearly 6.8 million (19 percent) were binge drinkers. With drugs, teenagers would have an additional outlet: the highly organized illegal trafficking networks that exist today and that would undoubtedly concentrate their marketing efforts on young people to make up for the business they lost to legal outlets.

*Costs to the Taxpayer*

- The claim that money allegedly saved from giving up on the drug problem could be better spent on education and social problems is readily disputed. When compared to the amount of funding that is spent on other national priorities, federal drug control spending is minimal. For example, in 2002, the amount of money spent by the federal government on drug control was less than $19 billion in its entirety. And unlike critics of American drug policy would have you believe, all of those funds did not go to enforcement policy only. Those funds were used for treatment, education and prevention, as well as enforcement. Within that budget, the amount of money Congress appropriated for the Drug Enforcement Administration was roughly $1.6 billion, a sum that the Defense Department runs through about every day-and-a-half or two days.

*LSD tablets.*

- In FY 2002, the federal drug budget is $18.8 billion. One-third of that budget is invested in demand reduction: prevention and treatment efforts. This fiscal year, we have budgeted more than $3 billion for drug abuse treatment, a 27% increase over 1999.

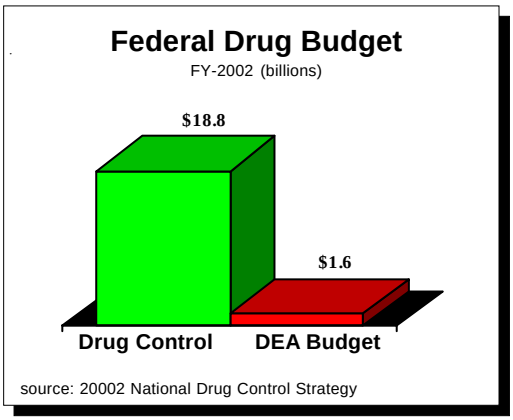
- By contrast, our country spent about $650 billion, in total, in 2000 on our nation's educational system. And most of us would agree that it was money well spent, even if our educational system isn't perfect. Education is a long-term social concern, with new problems that arise with every new generation. The same can be said of drug abuse and addiction. Yet nobody suggests that we should give up on our children's education. Why, then, would we give up on helping to keep them off drugs and out of addiction?

- Even if drug abuse had not dropped as much as it has in the last 20 years — by more than a third — the alternative to spending money on controlling drugs would be disastrous. If the relatively modest outlays of federal dollars were not made, drug abuse and the attendant social costs ($160 billion in 2000) would be far greater.

- On the surface, advocates of legalization present an appealing, but simplistic, argument that by legalizing drugs we can move vast sums of money from enforcing drug laws to solving society's ills. But as in education and drug addiction, vast societal problems can't be solved overnight. It takes time, focus, persistence – and resources.

- Legalization advocates fail to note the skyrocketing social and welfare costs, not to mention the misery and addiction, that would accompany outright legalization of drugs.

- Legalizers also fail to mention that, unless drugs are made available to children, law enforcement will still be needed to deal with the sale of drugs to minors. In other words, a vast black market will still exist. Since young people are often the primary target of pushers, many of the criminal organizations that now profit from illegal drugs would continue to do so.




- Furthermore, it is reasonable to assume that the health and societal costs of drug legalization would also increase exponentially. Drug treatment costs, hospitalization for long-term drug-related diseases, and treatment of family violence would also place additional demands on our already overburdened health system. More taxes would have to be raised to pay for an American health care system already bursting at the seams.

- Criminal justice costs would likely increase if drugs were legalized. It is quite likely that violent crime would significantly increase with greater accessibility to dangerous drugs — whether the drugs themselves are legal or not. According to a 1991 Justice Department study, six times as many homicides are committed by people under the influence of drugs as by those who are looking for money to buy drugs. More taxes would have to be raised to pay for additional personnel in law enforcement, which is already overburdened by crimes and traffic fatalities associated with alcohol. Law enforcement is already challenged by significant alcohol-related crimes. More users would probably result in the commission of additional crimes, causing incarceration costs to increase as well.

# Fact 6: Legalization of Drugs will Lead to Increased Use and Increased Levels of Addiction. Legalization has been tried before, and failed miserably.

- Legalization proponents claim, absurdly, that making illegal drugs legal would not cause more of these substances to be consumed, nor would addiction increase. They claim that many people can use drugs in moderation and that many would choose not to use drugs, just as many abstain from alcohol and tobacco now. Yet how much misery can already be attributed to alcoholism and smoking? Is the answer to just add more misery and addiction?

- It's clear from history that periods of lax controls are accompanied by more drug abuse and that periods of tight controls are accompanied by less drug abuse.

- During the 19th Century, morphine was legally refined from opium and hailed as a miracle drug. Many soldiers on both sides of the Civil War who were given morphine for their wounds became addicted to it, and this increased level of addiction continued throughout the nineteenth century and into the twentieth. In 1880, many drugs, including opium and cocaine, were legal — and, like some drugs today, seen as benign medicine not requiring a doctor's care and oversight. Addiction skyrocketed. There were over 400,000 opium addicts in the U.S. That is twice as many per capita as there are today.

- By 1900, about one American in 200 was either a cocaine or opium addict. Among the reforms of this era was the Federal Pure Food and Drug Act of 1906, which required manufacturers of patent medicines to reveal the contents of the drugs they sold. In this way, Americans learned which of their medicines contained heavy doses of cocaine and opiates — drugs they had now learned to avoid.

***In 1880, many drugs, including opium and cocaine, were legal — and, like some drugs today, seen as benign medicine not requiring a doctor's care and oversight. Addiction skyrocketed.***

- Specific federal drug legislation and oversight began with the 1914 Harrison Act, the first broad anti-drug law in the United States. Enforcement of this law contributed to a significant decline in narcotic addiction in the United States. Addiction in the United States eventually fell to its lowest level during World War II, when the number of addicts is estimated to have been somewhere between 20,000 and 40,000. Many addicts, faced with disappearing supplies, were forced to give up their drug habits.

- What was virtually a drug-free society in the war years remained much the same way in the years that followed. In the mid-1950s, the Federal Bureau of Narcotics estimated the total number of addicts nationwide at somewhere between 50,000 to 60,000. The former chief medical examiner of New York City, Dr. Milton Halpern, said in 1970 that the number of New Yorkers who died from drug addiction in 1950 was 17. By comparison, in 1999, the New York City medical examiner reported 729 deaths involving drug abuse.

*The Alaska Experiment and Other Failed Legalization Ventures*

- The consequences of legalization became evident when the Alaska Supreme Court ruled in 1975 that the state could not interfere with an adult's possession of marijuana for personal consumption in the home. The court's ruling became a green light for marijuana use. Although the ruling was limited to persons 19 and over, teens were among those increasingly using marijuana. According to a 1988 University of Alaska study, the state's 12 to 17-year-olds used marijuana at more than twice the national average for their age group. Alaska's residents voted in 1990 to recriminalize possession of marijuana, demonstrating their belief that increased use was too high a price to pay.

*European experiments with drug legalization have failed.*

- By 1979, after 11 states decriminalized marijuana and the Carter administration had considered federal decriminalization, marijuana use shot up among teenagers. That year, almost 51 percent of 12th graders reported they used marijuana in the last 12 months. By 1992, with tougher laws and increased attention to the risks of drug abuse, that figure had been reduced to 22 percent, *a 57 percent decline*.

- Other countries have also had this experience. The Netherlands has had its own troubles with increased use of cannabis products. From 1984 to 1996, the Dutch liberalized the use of cannabis. Surveys reveal that lifetime prevalence of cannabis in Holland increased consistently and sharply. For the age group 18-20, the increase is from 15 percent in 1984 to 44 percent in 1996.

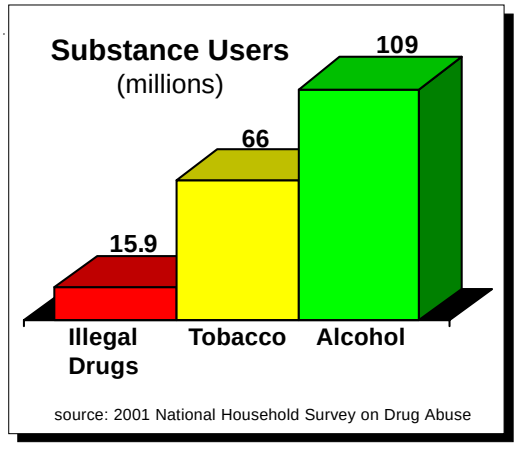
- The Netherlands is not alone. Switzerland, with some of the most liberal drug policies in Europe, experimented with what became known as Needle Park. Needle Park became the Mecca for drug addicts throughout Europe, an area where addicts could come to openly purchase drugs and inject heroin without police intervention or control. The rapid decline in the neighborhood surrounding Needle Park, with increased crime and violence, led authorities to finally close Needle Park in 1992.

- The British have also had their own failed experiments with liberalizing drug laws. England's experience shows that use and addiction increase with "harm reduction" policy. Great Britain allowed doctors to prescribe heroin to addicts, resulting in an explosion of heroin use, and by the mid-1980s, known addiction rates were increasing by about 30 percent a year.

- The relationship between legalization and increased use becomes evident by considering two current "legal drugs," tobacco and alcohol. The number of users of these "legal drugs" is far greater than the number of users of illegal drugs. The numbers were explored by the *2001 National Household Survey on Drug Abuse*. Roughly 109 million Americans used alcohol at least once a month. About 66 million Americans used tobacco at the same rate. But less than 16 million Americans used illegal drugs at least once a month.

- It's clear that there is a relationship between legalization and increasing drug use, and that legalization would result in an unacceptably high number of drug-addicted Americans.

- When legalizers suggest that easy access to drugs won't contribute to greater levels of addiction, they aren't being candid. The question isn't whether legalization will increase addiction levels—it will—it's whether we care or not. The compassionate response is to do everything possible to prevent the destruction of addiction, not make it easier.



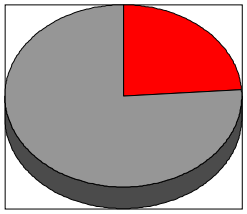
# Fact 7: Crime, Violence, and Drug Use Go Hand-In-Hand

- Proponents of legalization have many theories regarding the connection between drugs and violence. Some dispute the connection between drugs and violence, claiming that drug use is a *victimless crime* and users are putting only themselves in harm's way and therefore have the right to use drugs. Other proponents of legalization contend that if drugs were legalized, crime and violence would decrease, believing that it is the illegal nature of drug production, trafficking, and use that fuels crime and violence, rather than the violent and irrational behavior that drugs themselves prompt.

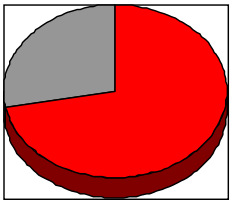
- Yet, under a legalization scenario, a black market for drugs would still exist. And it would be a vast black market. If drugs were legal for those over 18 or 21, there would be a market for everyone under that age. People under the age of 21 consume the majority of illegal drugs, and so an illegal market and organized crime to supply it would remain—along with the organized crime that profits from it. After Prohibition ended, did the organized crime in our country go down? No. It continues today in a variety of other criminal enterprises. Legalization would not put the cartels out of business; cartels would simply look to other illegal endeavors.

- If only marijuana were legalized, drug traffickers would continue to traffic in heroin and cocaine. In either case, traffic-related violence would not be ended by legalization.

**Violence Against Law Enforcement Officers**
**(in red)**



**24% were under the influence of drugs**



**72% had a history of drug law violations**

source: FBI

- If only marijuana, cocaine, and heroin were legalized, there would still be a market for PCP and methamphetamine. Where do legalizers want to draw the line? Or do they support legalizing <u>all</u> drugs, no matter how addictive and dangerous?

- In addition, any government agency assigned to distribute drugs under a legalization scenario would, for safety purposes, most likely not distribute the most potent drug. The drugs may also be more expensive because of bureaucratic costs of operating such a distribution system. Therefore, until 100 percent pure drugs are given away to anyone, at any age, a black market will remain.

- The greatest weakness in the logic of legalizers is that the violence associated with drugs is simply a product of drug trafficking. That is, if drugs were legal, then most drug crime would end. But most violent crime is committed not because people want to buy drugs, but because people are <u>on</u> drugs. Drug use changes behavior and exacerbates criminal activity, and there is ample scientific evidence that demonstrates the links between drugs, violence, and crime. Drugs often cause people to do things they wouldn't do if they were rational and free of the influence of drugs.

- Six times as many homicides are committed by people under the influence of drugs as by those who are looking for money to buy drugs.

- According to the 1999 Arrestee Drug Abuse Monitoring (ADAM) study, more than half of arrestees for violent crimes test positive for drugs at the time of their arrest.

- For experts in the field of crime, violence, and drug abuse, there is no doubt that there is a connection between drug use and violence. As Joseph A. Califano, Jr., of the National Center on Addiction and Substance Abuse at Columbia University stated, "Drugs like marijuana, heroin and cocaine are not dangerous because they are illegal; they are illegal because they are dangerous."

- There are numerous statistics, from a wide variety of sources, illustrating the connection between drugs and violence. The propensity for violence against law enforcement officers, co-workers, family members, or simply people encountered on the street by drug abusers is a matter of record.

***Six times as many homicides are committed by people under the influence of drugs as by those who are looking for money to buy drugs.***

- A 1997 FBI study of violence against law enforcement officers found that 24 percent of the assailants were under the influence of drugs at the time they attacked the officers and that 72 percent of the assailants had a history of drug law violations.

- Many scientific studies also support the connection between drug use and crime. One study investigated state prisoners who had five or more convictions. These are hardened criminals. It found that four out of every five of them used drugs regularly.

- Numerous episodes of workplace violence have also been attributed to illegal drugs. A two-year independent postal commission study looked into 29 incidents resulting in 34 deaths of postal employees from 1986 to 1999. "Most perpetrators (20 of 34) either had a known history of substance abuse or were known to be under the influence of alcohol or illicit drugs at the time of the homicide. The number is likely higher because investigations in most other cases were inconclusive."

- According to the 1998 National Household Survey on Drug Abuse, teenage drug users are five times far more likely to attack someone than those who don't use drugs. About 20 percent of the 12-17 year olds reporting use of an illegal drug in the past year attacked someone with the intent to seriously hurt them, compared to 4.3 percent of the non-drug users.

- As we see in most cases, the violence associated with drug use escalates and, in many instances, results in increased homicide rates. A 1994 Journal of the American Medical Association article reported that cocaine use was linked to high rates of homicide in New York City.

- As these studies, and others, prove—violence is the hallmark of drug abuse. Drug users are not only harming themselves, but as we can see, they are harming anyone who may have the misfortune of crossing their path. Dr. Mitchell Rosenthal, head of Phoenix House, a major drug treatment center, has pointed out that, "there are a substantial number of abusers who cross the line from permissible self-destruction to become 'driven' people who are 'out of control' and put others in danger of their risk-taking, violence, abuse, or HIV infection."

- It is impossible to claim drug use is victimless crime or deny the relationship between drugs and violence, especially when looking at an Office of National Drug Control Policy (ONDCP) estimate for 1995, which estimates there were almost 53,000 drug-related deaths in that year alone, compared to 58,000 American lives lost in eight and a half years in the Vietnam War. The assertions dismissing the connection between drugs and violence by legalization proponents are simply not true. Drug use, legal or not, is not a victimless crime; it is a crime that destroys communities, families, and lives.

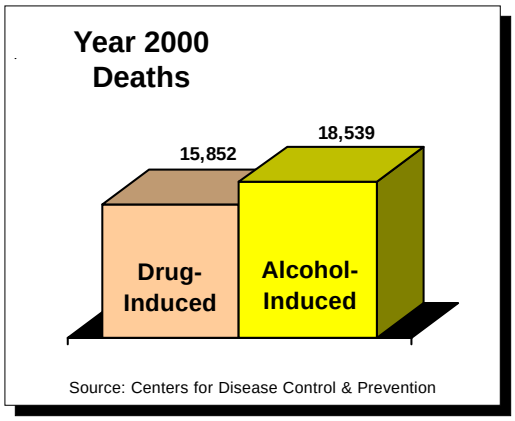
# Fact 8: Alcohol has caused Significant Health, Social, and Crime Problems in this Country, and Legalized Drugs would only make the Situation Worse.

- Drugs are far more addictive than alcohol. According to Dr. Mitchell Rosenthal, director of Phoenix House, only 10 percent of drinkers become alcoholics, while up to 75 percent of regular illicit drug users become addicted.

- Even accepting, for the sake of argument, the analogy of the legalizers, alcohol use in the U.S. has taken a tremendous physical and social toll on Americans. Legalization proponents would have the problems multiplied by greatly adding to the class of drug-addicted Americans. To put it in perspective, less than 5 percent of the population uses illegal drugs of any kind. That's less than 16 million regular users of all illegal drugs compared to 66 million tobacco users and over 100 million alcohol users.

- According to the Centers for Disease Control and Prevention (CDC), during 2000, there were 15,852 drug-induced deaths; only slightly less than the 18,539 alcohol-induced deaths. Yet the personal costs of drug use are far higher. According to a 1995 article by Dr. Robert L. DuPont, an expert on drug abuse, the health-related costs per person is more than twice as high for drugs as it is for alcohol: $1,742 for users of illegal drugs and $798 for users of alcohol. Legalization of drugs would compound the problems in the already overburdened health care, social service, and criminal justice systems. And it would demand a staggering new tax burden on the public to pay for the costs. The cost to families affected by addiction is incalculable.

*Opium gum.*



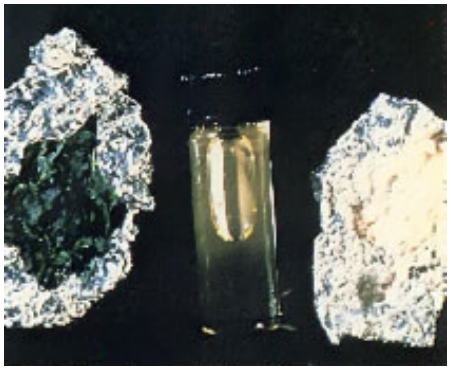

- If private companies were to handle distribution—as is done with alcohol—the American consumer can expect a blizzard of profit-driven advertising encouraging drug use, just as we now face with alcohol advertising. If the government were to distribute drugs, either the taxpayer would have to pay for its production and distribution, or the government would be forced to market the drugs to earn the funds necessary to stay in business. Furthermore, the very act of official government distribution of drugs would send a message that drug use is safe. After all, it's the U.S. Government that's handing it out, right?

- Alcohol, a "legal drug," is already abused by people in almost every age and socio-economic group. According to the 2001 National Household Survey on Drug Abuse, approximately 10.1 million young people aged 12-20 reported past month alcohol use (28.5 percent of this age group). Of these, nearly 6.8 million (19 percent) were binge drinkers. American society can expect even more destructive statistics if drug use were to be made legal and acceptable.

- If drugs were widely available under legalization, they would no doubt be easily obtained by young people, despite age restrictions. According to the 2001 National Household Survey on Drug Abuse, almost half (109 million) of Americans aged 12 or older were current drinkers, while an estimated 15.9 million or 7.1% were current illicit drug users.

- The cost of drug and alcohol abuse is not all monetary. In 2001 more than 17,000 people were killed and approximately 275,000 people were injured in alcohol-related crashes. According to the National Highway Transportation Safety Administration, approximately three out of every ten Americans will be involved in an alcohol-related crash at some time in their lives.


*Advertisements for "Rave" parties.*



*PCP in both crystalline form and a vial of PCP dissolved in water.*

*Heroin pellet.*

*Aftermath of explosion at a clandestine methamphetamine laboratory packed with toxic chemicals.*

*Bags of marijuana.*

# Fact 9: Europe's More Liberal Drug Policies Are Not the Right Model for America.

- Over the past decade, European drug policy has gone through some dramatic changes toward greater liberalization. The Netherlands, considered to have led the way in the liberalization of drug policy, is only one of a number of West European countries to relax penalties for marijuana possession. Now several European nations are looking to relax penalties on all drugs—including cocaine and heroin—as Portugal did in July 2001, when minor possession of all drugs was decriminalized.

- There is no uniform drug policy in Europe. Some countries have liberalized their laws, while others have instituted strict drug control policies. Which means that the so-called "European Model" is a misnomer. Like America, the various countries of Europe are looking for new ways to combat the worldwide problem of drug abuse.

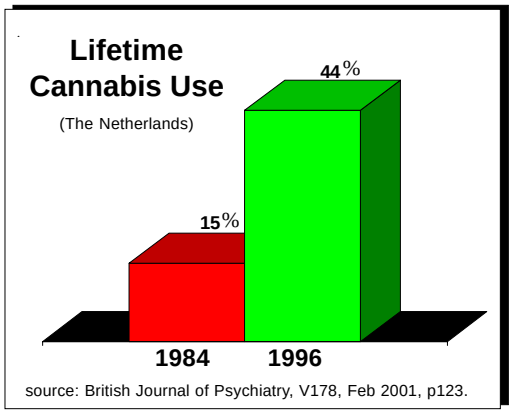
- The Netherlands has led Europe in the liberalization of drug policy. "Coffee shops" began to emerge throughout the Netherlands in 1976, offering marijuana products for sale. Possession and sale of marijuana are not legal, but coffee shops are permitted to operate and sell marijuana under certain restrictions, including a limit of no more than 5 grams sold to a person at any one time, no alcohol or hard drugs, no minors, and no advertising. In the Netherlands, it is illegal to sell or possess marijuana products. So coffee shop operators must purchase their marijuana products from illegal drug trafficking organizations.

- Apparently, there has been some public dissatisfaction with the government's policy. Recently the Dutch government began considering scaling back the quantity of marijuana available in coffee shops from 5 to 3 grams.

- Furthermore, drug abuse has increased in the Netherlands. From 1984 to 1996, marijuana use among 18-25 year olds in Holland increased two-fold. Since legalization of marijuana, heroin addiction levels in Holland have tripled and perhaps even quadrupled by some estimates.

- The increasing use of marijuana is responsible for more than increased crime. It has widespread social implications as well. The head of Holland's best-known drug abuse rehabilitation center has described what the new drug culture has created: The strong form of marijuana that most of the young people smoke, he says, produces "a chronically passive individual—someone who is lazy, who doesn't want to take initiatives, doesn't want to be active—the kid who'd prefer to lie in bed with a joint in the morning rather than getting up and doing something."

- Marijuana is not the only illegal drug to find a home in the Netherlands. The club drug commonly referred to as Ecstasy (3, 4-methylenedioxy-methamphetamine or MDMA) also has strong roots in the Netherlands. The majority of the world's Ecstasy is produced in clandestine laboratories in the Netherlands and, to a lesser extent, Belgium.



source: British Journal of Psychiatry, V178, Feb 2001, p123.

- The growing Ecstasy problem in Europe, and the Netherlands' pivotal role in Ecstasy production, has led the Dutch government to look once again to law enforcement. In May 2001, the government announced a "Five Year Offensive against the Production, Trade, and Consumption of Synthetic Drugs." The offensive focuses on more cooperation among the enforcement agencies with the Unit Synthetic Drugs playing a pivotal role.

- Recognizing that the government needs to take firm action to deal with the increasing levels of addiction, in April 2001, the Dutch government established the Penal Care Facility for Addicts. Like American Drug Treatment Courts, this facility is designed to detain and treat addicts (of any drug) who repeatedly commit crimes and have failed voluntary treatment facilities. Offenders may be held in this facility for up to two years, during which time they will go through a three-phase program. The first phase focuses on detoxification, while the second and third phases focus on training for social reintegration.

- The United Kingdom has also experimented with the relaxation of drug laws. Until the mid-1960s, British physicians were allowed to prescribe heroin to certain classes of addicts. According to political scientist James Q. Wilson, "a youthful drug culture emerged with a demand for drugs far different from that of the older addicts." Many addicts chose to boycott the program and continued to get their heroin from illicit drug distributors. The British Government's experiment with controlled heroin distribution, says Wilson, resulted in, at a minimum, a 30-fold increase in the number of addicts in ten years.

*James Q. Wilson*

- Switzerland has some of the most liberal drug policies in Europe. In late 1980s, Zurich experimented with what became known as Needle Park, where addicts could openly purchase drugs and inject heroin without police intervention. Zurich became the hub for drug addicts across Europe, until the experiment was ended, and "Needle Park" was shut down.


*Amsterdam*

- Many proponents of drug legalization or decriminalization claim that drug use will be reduced if drugs were legalized. However, history has not shown this assertion to be true. According to an October 2000 CNN report, marijuana, the illegal drug most often decriminalized, is "continuing to spread in the European Union, with one in five people across the 15-state bloc having tried it at least once."

- It's not just marijuana use that is increasing in Europe. According to the *2001 Annual Report on the State of the Drugs Problem in the European Union*, there is a Europe-wide increase in cocaine use. The report also cites a new trend of mixing "base/crack" cocaine with tobacco in a joint at nightspots. With the increase in use, Europe is also seeing an increase in the number of drug users seeking treatment for cocaine use.

- Drug policy also has an impact on general crime. In a 2001 study, the British Home Office found violent crime and property crime increased in the late 1990s in every wealthy country except the United States.

- Not all of Europe has been swept up in the trend to liberalize drug laws. Sweden, Finland, and Greece have the strictest policies against drugs in Europe. Sweden's zero-tolerance policy is widely supported within the country and among the various political parties. Drug use is relatively low in the Scandinavian countries.

- In April 1994, a number of European cities signed a resolution titled "European Cities Against Drugs," commonly known as the Stockholm resolution. It states: "The demands to legalize illicit drugs should be seen against the background of current problems, which have led to a feeling of helplessness. For many, the only way to cope is to try to administer the current situation. But the answer does not lie in making harmful drugs more accessible, cheaper, and socially acceptable. *Attempts to do this have not proved successful. By making them legal, society will signal that it has resigned to the acceptance of drug abuse.* The signatories to this resolution therefore want to make their position clear by rejecting the proposals to legalize illicit drugs."

# Fact 10: Most non-violent drug users get treatment, not just jail time.

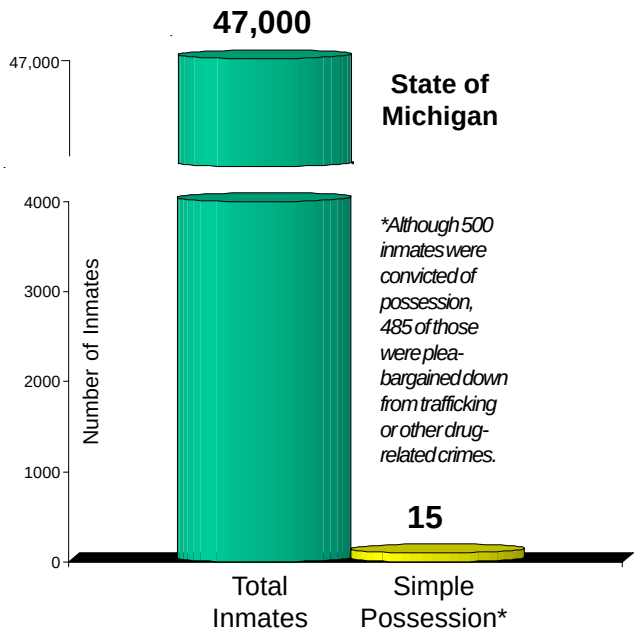
- There is a myth in this country that U.S. prisons are filled with drug users. This assertion is simply **not** true. Actually, only 5 percent of inmates in federal prison on drug charges are incarcerated for drug possession. In our state prisons, it's somewhat higher—about 27% of drug offenders. In New York, which has received criticism from some because of its tough Rockefeller drug laws, it is estimated that 97% of drug felons sentenced to prison were charged with sale or intent to sell, not simply possession. In fact, first time drug offenders, even sellers, typically do not go to prison.

- Most cases of simple drug possession are simply not prosecuted, unless people have been arrested repeatedly for using drugs. In 1999, for example, only 2.5 percent of the federal cases argued in District Courts involved simple drug possession. Even the small number of possession charges is likely to give an inflated impression of the numbers. It is likely that a significant percentage of those in prison on possession charges were people who were originally arrested for trafficking or another more serious drug crime but plea-bargained down to a simple possession charge.

- The Michigan Department of Corrections just finished a study of their inmate population. They discovered that out of 47,000 inmates, only 15 people were incarcerated on first-time drug possession charges. (500 are incarcerated on drug possession charges, but 485 are there on multiple charges or pled down.)

- In Wisconsin the numbers are even lower, with only 10 persons incarcerated on drug possession charges. (769 are incarcerated on drug possession charges, but 512 of those entered prison through some type of revocation, leaving 247 entering prison on a "new sentence." Eliminating those who had also been sentenced on trafficking and/or non-drug related charges; the total of new drug possession sentences came to 10.)

**The Number of Drug Possession Charges Out of Total Inmates**




**Policy Shift to Treatment**

- There has been a shift in the U.S. criminal justice system to provide treatment for non-violent drug users with addiction problems, rather than incarceration. The criminal justice system actually serves as the largest referral source for drug treatment programs.

- Any successful treatment program must also require accountability from its participants. Drug treatment courts are a good example of combining treatment with such accountability. These courts are given a special responsibility to handle cases involving drug-addicted offenders through an extensive supervision and treatment program. Drug treatment court programs use the varied experience and skills of a wide variety of law enforcement and treatment professionals: judges, prosecutors, defense counsels, substance abuse treatment specialists, probation officers, law enforcement and correctional personnel, educational and vocational experts, community leaders and others — all focused on one goal: to help cure addicts of their addiction, and to keep them cured.

- Drug treatment courts are working. Researchers estimate that more than 50 percent of defendants convicted of drug possession will return to criminal behavior within two to three years. Those who graduate from drug treatment courts have far lower rates of recidivism, ranging from 2 to 20 percent.

- What makes drug treatment courts so different? Graduates are held accountable to the program. Unlike purely voluntary treatment programs, the addict—who has a physical need for drugs—can't simply quit treatment whenever he or she feels like it.

- Many state governments are also taking the opportunity to divert non-violent drug offenders from prison in the hopes of offering treatment and rehabilitation outside the penal facility. In New York, prosecutors currently divert over 7,000 convicted drug felons from prison each year. Many enter treatment programs.

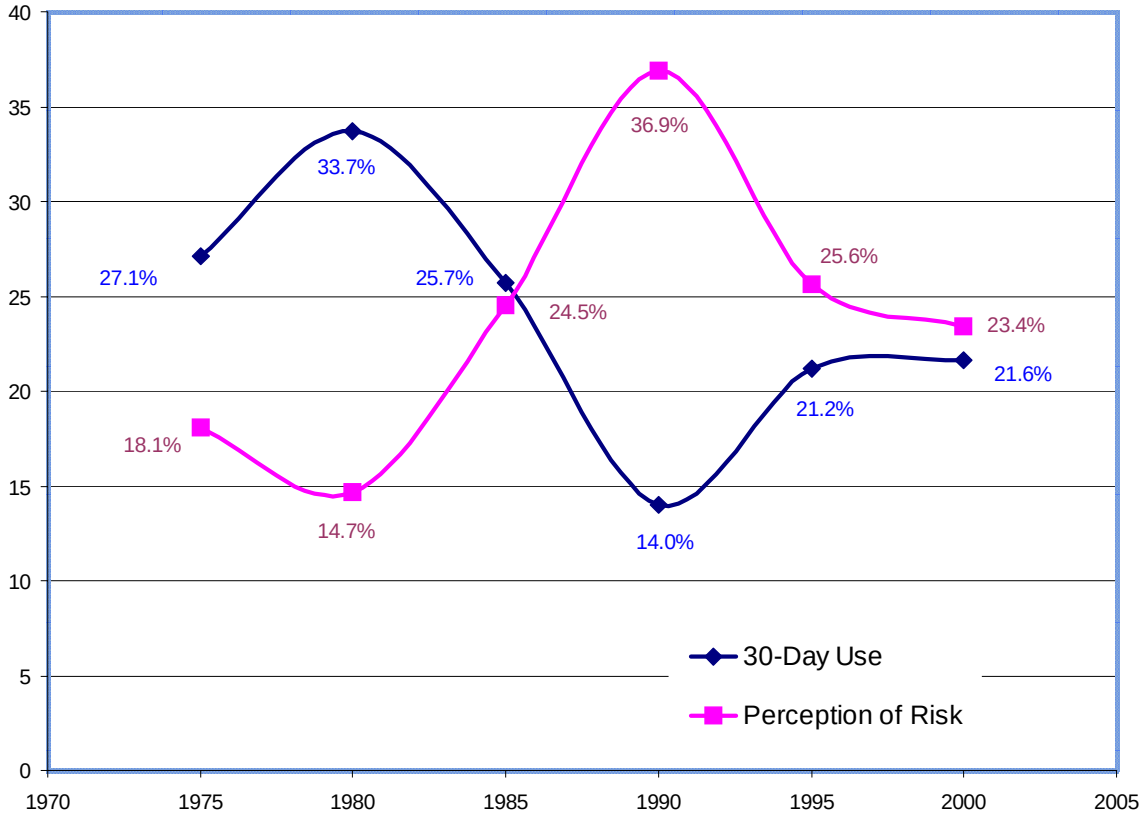
- States throughout the Midwest are also establishing programs to divert drug offenders from prison and aid in their recovery. In Indiana, 64 of the 92 counties offer community corrections programs to rehabilitate and keep first time non-violent offenders, including non-violent drug offenders, out of prison. Non-violent drug offenders participating in the community corrections program are required to attend a treatment program as part of their rehabilitation.

- In July of 2002, the Ohio Judicial Conference conducted a survey of a select group of judges. The results from the survey demonstrated that judges "offer treatment to virtually 100 percent of first-time drug offenders and over 95 percent of second-time drug offenders." According to the survey, these percentages are accurate throughout the state, no matter the jurisdiction or county size. The Ohio Judicial Conference went a step further, reviewing pre-sentence investigations and records, which demonstrated that "99 percent of offenders sentenced to prison had one or more prior felony convictions or multiple charges."

- The assertion that U.S. prisons are filled with drug users is simply untrue. As this evidence shows, more and more minor drug offenders are referred to treatment centers in an effort to reduce the possibility of recidivism and help drug users get help for their substance abuse problems. The drug treatment court program and several other programs set up throughout the United States have been reducing the number of minor drug offenses that actually end up in the penal system. The reality is that you have to work pretty darn hard to end up in jail on drug possession charges.

# Marijuana Use and Perceived Risk

Data from Monitoring the Future Survey, Dec. 2001
www.monitoringthefuture.org




U.S. Department of Justice
Drug Enforcement Administration

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