Chapter Four: Alcohol and Other Drugs

• The Problem in Social Perspective
  • Ours is a drug using society
    o The United States of America is one of the most over-medicated countries on the planet
      ▪ We use drugs to escape pain, increase alertness, relax tension, lose weight, gain strength, fight depression and avoid pregnancy.
      ▪ Abuse of alcohol and other drugs is a growing problem throughout the world.

  • Drug use has existed throughout known human history
    o When people discovered drugs some began abusing drugs

• Drugs, the individual and society
  o Every society has its own drugs
    o Drugs play an important part in the lives of every one of us.
      ▪ Mankind has always used drugs to alter their state of consciousness, using whatever naturally occurring (or synthetic) substance.

  o Most everyone uses some type of drug legal or illegal
    o In 1998 government survey
      ▪ Six percent of the population over the age of twelve used some illicit drug
      ▪ The trend has gone downward

  o Drug taking is “almost a universal phenomena, and in the statistical sense of the term it is the person who does not take drugs who is abnormal” (Michael Gossop in “Living with Drugs”)

  o Definitions of drugs vary from society to society
    ▪ Alcohol part of western culture
    ▪ Peyote use as a religious ritual among Native Americans
    ▪ Coca and South America

  o Definitions of drugs have varied over time in the United States
    ▪ Attitudes toward cocaine
      ▪ Cocaine early on was seen as a medical panacea
      ▪ Racism and cocaine usage
    ▪ Immigrants and drug use
      ▪ U.S. Congress and the Harrison act of 1914
How drugs are viewed as good or bad is based on:

- How we define the drug
- Social reaction
- How our views of a drug change over time

A medical textbook published in 1909 warned against the excessive use of this drug:

- “The sufferer is tremulous and loses his self command; he is subject to fits of agitation and depression. He loses color and has a haggard appearance … As with other such agents, a renewed dose of the poison gives temporary relief, but at the cost of future misery.”
  - The drug is coffee!

Society clings to the notion that some substances we use are ‘good’, whereas others are ‘bad’ drugs.

- Heroin is a ‘bad drug’ and heroin users are often classed as deviant or abnormal.
- Tea and coffee are ‘good’ drugs (although most people do not consider them as drugs).
- Librium, oxyconton, and Valium are ‘good’ drugs, which can be obtained on prescription for anxiety and pain states.
  - However, these drugs become ‘bad’ drugs if used by people who also take heroin or amphetamine.
- Alcohol is a ‘good’ drug, even though we are becoming increasingly aware of the risks that can be associated with its misuse.
- Tobacco is rapidly shifting from a ‘good’ drug to a ‘bad’ drug.

The ‘good/bad’ drug distinction sometimes becomes synonymous with ‘safe/dangerous’.

- However, many more people die, either directly or indirectly, as a result of using tobacco, alcohol and prescription drugs (which are all addictive) than all illegal drugs combined.

An important part of what is generally called the drugs problem is the set of attitudes that society maintains towards drugs and drug taking.

- Much of the damage that is associated with drug taking is a result of mistaken laws and policies, and of hypocritical and self-deluding attitudes.
- The term drug taker is used as a condemnation, as a way of identifying someone who is involved in a strange and deviant form of behavior.
- There is a continuing reluctance to face up to the fact that drugs and drug takers are part of our everyday life.
A drug is defined as any habit-forming substance that directly affects the brain or nervous system -- this can include drugs, such as alcohol, that are more socially acceptable.

- Drug abuse refers to the use of unacceptable drugs and or the excessive or inappropriate use of acceptable drugs in ways that can lead to physical, psychological, or social harm.
- The term addiction refers to a complex phenomenon that involves the user’s psychological and physical condition, the type of drug, and the amount and frequency of use.
  - The term “addiction” is used to refer to physical dependence.
  - Habituation refers to psychological dependence.
    - The DSM-IV carefully defines the terms dependence and abuse because of insurance and legal issues.

The distinction between using a drug from abusing a drug

- Use that goes against accepted medical practices
- Effect of the drug
  - Mental harm
  - Physical harm
  - Social harm
- Addiction and Dependency
  - Addiction – a physical or psychological craving for a drug
  - Withdrawal symptoms
  - Complex
    - Dependency – a state in which a person’s body has adjusted to regular use of a drug
      - Need for the drug to feel normal

Not all drug addiction is seen as problematic; terminally ill patients may be addicted to drugs, but this is not seen as a problem.

- Knowledge of the distribution of use is important; therefore, researchers study prevalence, or the extent to which a behavior appears in the population.
- Drug prevalence data tells us about the popularity of specific drugs in a population.

The effects of a drug are not just dependant on the kind of drug.

- The way in which a drug affects a person who has taken it depends upon the psychological (e.g. their personality, how they believe the drug will affect them, their emotional state)
- and physiological (e.g. rate drug is metabolized) characteristics of the individual.
It also depends on a variety of social factors (e.g. the nature of the environment).
- You will often hear that the effects of a drug are dependant on drug, set and setting.

Drugs and addiction or dependence - use of a substance to deal with problems of living:
- Withdrawal
- Craving
- Psychological dependence

Sociologists have looked at the social factors that facilitate or inhibit the spread of drug use and how those factors can influence treatment of addiction and abuse.
- Among these factors are: peer influence, SES, family, religion and school.
- Drug use is related to crime and violence, but this relationship varies by type of drug.
  - Heroin and crack cocaine are most frequently associated with criminal behavior.
  - Over 80% of all prison inmates have history of abuse, about 50% of those arrested from crimes are drug users.

Why do people Use Drugs?
- Five reasons behind use
  - Recreational use
  - Therapeutic use
  - Escapism
  - Spiritual or psychological use
  - Conform to group and social standards

Attitudes toward drug use has changed in the U.S
- Objective condition of drug has less to do with defining a drug as a social problem
- Subjective concern has more to do with defining a drug as a social problem
  - A drug as a social problem has more to do with how we define and react to a drug and its use than the physical effects of a drug

As I said before, most Americans use some form of drug legal or illegal
- Drugs are taken for granted in society

Some drugs are approved of more than others
- From a personal problem to a social problem:
  - When a drug begins to affect a large number of people and the public demands action it becomes a social problem
The Scope of the Problem

- **Alcohol:**
  - Alcohol use is involved in 38% of motor vehicle deaths
  - Alcohol abusers more likely to be victims of homicide and suicide
  - A large number of Americans die from alcohol related problems and diseases

- **Nicotine:**
  - Billons of dollars are spent on treating tobacco related illnesses
  - Responsible for 400,000 deaths annually
    - The History of tobacco
      - New world to old world
      - Many countries tried to prohibit tobacco use with sever social sanctions:
        - King James of England 1604 campaigned against the horrors of tobacco
        - Czar of Russia in 1634 ordered the nose of smokers to be slit
    - Many countries tried to prohibit tobacco use with sever social sanctions:
      - China and Turkey in the 1600’s prescribed the death penalty for tobacco users

- **Caffeine**
  - Many countries prescribed sanctions for the use of coffee
    - Arabia in the 1500
    - In England women’s groups lobbied against the use and evils of coffee

- **Objective condition** of alcohol and tobacco far outweighs its societal subjective concern
Looking at the Problem Theoretically

Symbolic Interactionism
- The social meanings and definitions that people attach to a drug and its use and users
  - Sacred, Religious rituals
  - Harmful
  - How people make sense out of drugs

Symbolic interactionist study the relative nature of drugs:
- The meanings attached to a drug in society
  - Variation in the meaning from one group to the next
  - How definitions of a drug change over time and influence behavior

Social meaning of a drug is related to:
- Power and symbols associated with drug use
- Social class and symbols associated with drug use
- Religious groups and drug use

Functionalism
- The functions of a drug for the operation of society
  - Economic functions
  - Social and cultural functions

Drugs as dysfunctional for the operation of society

Functionalist study the functions and dysfunctions of a drug and drug use for society
- Functional aspects of drugs:
  - Medical use
  - For those that make money of the process manufacturing and distributing drugs

- Latent function:
  - How criminalization of drugs strengthens the agencies that control the problem
    - Criminalization and organized crime
      - How drug laws create and protect jobs (Law enforcement of the drug laws)

- Dysfunctions:
  - How drugs interfere with people’s social and mental functioning
  - Drug related accidents and death
    - Crime
    - Economic costs to society
    - Rise in drug related diseases
Conflict Theory
  - Study the relationship between power and wealth and the drug problem:
    - Drugs as a source inter group conflict
    - Political tool
    - Drug laws and immigration policies
    - Drugs laws as a way of controlling minorities and the poor
    - Drugs as tool of the elite in society by distracting the masses from other internal problems
  - Focus is on how power and wealth shapes social life and society
    - Power and drug laws
    - Power and the regulation and enforcement of laws
    - Power and punishment

Global Poverty
  - Illegal drugs in the U.S. are a part of the global economy
    - Poverty in poor nations and the production of drugs
    - Opiates in Asia
    - Hashish from Middle East and West Africa
    - Cocaine from South America
  - Source of income and capital for poor Nations
  - Demand for drugs from rich Nations

Conservatives: Just Say No
  - Moral values in the analysis of the drug problem
  - Lack of family and religion at the heart of the problem
  - Drug use as a function of self-centered hedonism
  - Drugs cause crime and the erosion of morality
  - Get tough on drug dealers and users

Liberals: Reform Society
  - Personal choice and freedom
  - Treatment and education approach
  - Tolerant view of “soft drugs”
  - Legalization of marijuana
  - Support law enforcement for hard “drugs”

Radical Views: Right-Wing Libertarians and the Far Left
  - Libertarians – people who favor the greatest individual freedom possible
    - Oppose government efforts to regulate drugs
    - Favor individual choice and freedom
    - Drug use should be left up to the individual
    - Radical left drug laws reflect the interest of the dominant group
• Research Findings
  o Medicalization of Human Problems
    ▪ Medicalization refers to how personal and social problem have come to be defined as a medical problem.
      o Offering a medical solution to personal problem
    ▪ Medicalization of:
      o Emotional problems
      o Behavioral problems
      o Children and hyperactivity (attention deficit – hyperactivity disorder)
  o Medicalization of Human Problems
    ▪ Functions of medicalization:
      o Controlling undesirable behavior
    ▪ Dysfunctions:
      o Stigma
      o Effects and consequences of labels
  o The Effects of Drugs
    ▪ The effects of a drug depend on a number of factors:
      o The dosage
      o A person’s psychological state
      o Body weight and metabolism
      o Social setting
      o Subculture
  o The Recreational Mood Elevators
    ▪ Major recreational and social drugs of choice of Americans are:
      o Alcohol
      o Nicotine
      o Marijuana
      o Cocaine
• The Recreational Mood Elevator Alcohol
  • Research suggests that a little over 7% of the adults in the United States meet the criteria for alcoholism.
    o Social factors that affect alcoholism and problem drinking include age, gender, religion, and socioeconomic status.
      ▪ In general, heavy drinkers tend to be younger.
      ▪ Those who attend church appear to drink less.
      ▪ Men tend to drink more than women, although the rates for women have been increasing.
      ▪ Those with higher SES drink less than those with lower SES.
      ▪ Businessmen drink more than farmers; among women, service workers drinker most heavily.
    o Additionally, there are cultural and biological factors that impact the use and abuse of alcohol.
      ▪ Drinking among college and high school students is considered to be a social problem.
        ▪ Many college students engage in binge drinking, and they have higher rates of alcohol related deaths and injuries.
    o Alcohol abuse has an impact on the health of abusers and their families
      ▪ It impacts crime, homelessness, and the rate of traffic accidents.
      ▪ Alcoholics can expect to live 10-12 fewer years than non-alcoholics.
      ▪ Alcohol has been implicated in about 40% of all traffic fatalities, and about 12% of all non-serious crime arrests.
      ▪ Within the family, children may develop severe physical and emotional problems and may experience codependency.
      ▪ Alcoholism is present in about 5% of the homeless population.
      ▪ There are a number of approaches to treatment that have had various levels of success.
        ▪ These include rehabilitation, Alcoholics Anonymous, Antabuse, the Johnson Intervention, and other programs.
    o Alcohol consumption per capita 31.9 gallons of beer, 2.7 gallons of wine and 1.8 gallons of hard liquor
      ▪ Half of high school seniors drank in the last month
      ▪ Of the 80 million drinkers about 10 million are considered alcoholics
        ▪ Most are functional alcoholics and continue with daily activities
    o Low amounts of alcohol may have beneficial health effects:
      ▪ Stimulates production of good cholesterol (HDL)
      ▪ Acts as mild sedative
Heavy consumption of alcohol may have **harmful** health effects:
- Increase risk of heart disease
- Increase risk of some forms of cancer
- Liver and stomach problems
- Fetal alcohol syndrome

Drinking behavior is related to **cultural norms**
- Drinking behavior is **learned**
  - Studies of groups that have low rates of alcoholism found them to:
    - Drink alcohol as regular part of life and starts early in life
    - Do not view alcohol as good or bad
    - Drinking is not a right of passage into adulthood
    - Do not tolerate abusive drinking

  - Heavy drinking is related to:
    - Culture of ambivalence surrounding drinking
    - Drinking in emotionally charged situations

**The Recreational Mood Elevator Nicotine**
- Nicotine second most popular drug
- Health care cost of nicotine use run in the billions

- Economic cost in the form of lost worker productivity
  - Over 400,000 deaths annually to nicotine use
  - Today nicotine use is selectively condemned based on the situation
  - Nicotine use is seen as a medical problem of addiction and health
There are also numerous illegal drugs that have some prevalence in American society.

- These include marijuana, cocaine, heroin, amphetamines, ecstasy and other designer drugs, and barbiturates.
  - All of which have varied over time in their popularity among drug users and which have varying impacts on crime, violence, and the spread of AIDS.
- The opportunity to use drugs is among the most important factors in illicit use.
  - Two important sources of information on drug use are the Monitoring the Future survey and the National Household Survey on Drug Abuse.
    - These surveys show that there is an inverse relationship between disapproval of drugs and their use.
    - These surveys have also shown that men more than women, whites more than other groups, lower classes more than upper classes and younger more than older people use drugs.

**The Recreational Mood Elevator Marijuana**
- The third drug used for recreational use is marijuana
  - Extent of marijuana use peaked in the 1970’s and has declined in the population
  - Still a drug of choice among high school seniors
  - Studies on the effects of marijuana on health has produced mixed results

- **Negative findings**
  - Impairs immune system
  - Lowers fertility
  - Damages chromosomes
  - Lowers testosterone
  - Brain damage

- **Positive findings**
  - Relieves glaucoma
  - Reduces side effects of chemotherapy
  - Relieves migraine headaches

- Marijuana use and amotivational syndrome

- **Subjective concern over marijuana does not match the objective condition**
The Recreational Mood Elevator Cocaine

- Cocaine is the fourth drug used for recreational use
- Cocaine has been seen as a controversial drug in society

  - Revered by the Inca’s
    - Spanish conquerors vied it as an evil substance
    - Cocaine was seen as a medical wonder drug of the 1800’s
    - Cocaine was an ingredient in a number of popular beverages including Coca-Cola in the late 800’s
    - Cocaine use began to be linked to crime to the poor and criminals in the early 1900’s

Popular cultural beliefs in the use of cocaine.

- Feeling of well-being
- Energy/Stimulant
- Aphrodisiac
- Medical Use
- Local anesthetic
- Vasoconstrictor
- Use in nose, throat, larynx and lower respiratory surgeries

Cocaine has a high risk for dependence/addiction

- Cocaine use and depression
- Cocaine and freebasing
- Cocaine/crack use
- Crack addiction

A drug's social reputation:

- Drugs reputation is not based on its objective condition
- Drugs gain their reputation over time from people and events
- The reputation of a drug is related to the social status of users
- Reputation subject to change
• The Hallucinogens
  o LSD (lysergic acid diethylamide)
    ▪ Discovered by Albert Hoffman in 1938
    ▪ Popularized by Timothy Leary in the 1960’s
      o “Turn on, tune in and drop out”
      o Not widely used
  o Peyote and mescaline
    ▪ Religious sacrament in some Native American cultures
  o Magic Mushrooms of Mexico (psilocybe mexicana)
  o PCP (phencyclidine hydrochloride) or angel dust

• The Amphetamines and Barbiturates
  o Methadrine / Methamphetamine
    ▪ Stimulant
    ▪ Used as a diuretic
    o Use of amphetamines may lead to:
      o Feelings of paranoia
      o Fixations
      o Aggression and violence
  o Barbiturates
    ▪ Phenobarbital used to treat a variety of mental disorders
    ▪ Phenobarbital may lead to physical dependence with severe withdrawal effects:
      o Nausea
      o Anxiety
      o Muscular twitching
      o Convulsion, coma and death

• The Narcotics
  o Opium poppy
  o Heroin:
    ▪ Recreational use
    ▪ Addiction
    ▪ Fetal narcotic syndrome
  o Drug crime link
    ▪ Correlation but not cause
    ▪ Law, drugs and organized crime
Social Policy: Responding to the Drug Problem

The War on Drugs

- The Nixon Era: Drugs as “Public Enemy Number One”
  - Created the DEA – Oversea our government anti-drug operations
  - Nixon administration and treatment programs
  - Main thrust was enforcement over treatment

- The Reagan Era: Zero Tolerance
  - Defining the drug problem as moral challenge
  - Increased the federal budget to fight the drug problem
  - Interdiction and the use of the CIA and Military
  - Mandatory jail time
  - Forfeiture laws

  - Office of National Drug Control Policy
  - William Bennett the first drug czar
  - Tough laws

- The War on Drugs
  - The Clinton Era: More of the Same
  - Treatment over incarceration
  - Later years tougher enforcement

Strategies to Control Drugs

- Interdiction – stopping drugs from entering our country
  - DEA
  - U.S Customs Service
  - Border Patrol
  - U.S. military

- Prosecution
  - Prosecuting drug dealers and incarceration

- Mandatory sentencing
  - Punishing the poor and minorities

- Education
  - Dare (Drug Abuse Resistance Education)
  - Public advertisement campaign
  - Treatment
    - In and out patient treatment
    - AA
    - Narcotics Anonymous
▪ Counterpoint: Legalization
  ▪ Decriminalization of drug laws – treating drugs like how we regulate alcohol and tobacco
  ▪ Zurich: Legalization that failed
  ▪ Netherlands: Legalization that works

  o Options…
    ▪ Get tough
    ▪ Interdiction of supply
    ▪ Tougher laws and sentences
    ▪ More prisons
    ▪ Ban on drug advertising
    ▪ Drug education
    ▪ Treatment
    ▪ Decriminalization/legalization

▪ The Future of the Problem
  o Drug use will remain high or decline
  o New drugs
  o Drugs in the work place
  o Get tough or prevention and treatment