

Taking SIDES

Clashing Views on
Controversial Issues in
Drugs and Society

Second Edition

Raymond Goldberg



Taking SIDES

**Clashing Views on
Controversial Issues in
Drugs and Society**



Second Edition

Edited, Selected, and with Introductions by

Raymond Goldberg

State University of New York College at Cortland

**Dushkin Publishing Group/Brown & Benchmark Publishers
A Times Mirror Higher Education Group Company**

To Norma, Tara, and Greta

Photo Acknowledgments

- Part 1 United Nations/John Robaton
Part 2 Courtesy of Louis P. Raucci
Part 3 UN PHOTO 153929/Margot Granitsas

Cover Art Acknowledgment

Charles Vitelli

Copyright © 1996 by Dushkin Publishing Group/Brown & Benchmark Publishers,
A Times Mirror Higher Education Group Company,
Guilford, Connecticut 06437

Copyright law prohibits the reproduction, storage, or transmission in any form by any means of any portion of this publication without the express written permission of Dushkin Publishing Group/Brown & Benchmark Publishers, and of the copyright holder (if different) of the part of the publication to be reproduced. The Guidelines for Classroom Copying endorsed by Congress explicitly state that unauthorized copying may not be used to create, to replace, or to substitute for anthologies, compilations, or collective works.

Taking Sides ® is a registered trademark of Dushkin Publishing Group/
Brown & Benchmark Publishers, A Times Mirror Higher Education Group Company

Manufactured in the United States of America

Second Edition

10 9 8 7 6 5 4 3 2

Library of Congress Cataloging-in-Publication Data

Main entry under title:

Taking sides: clashing views on controversial issues in drugs and society/edited, selected, and with introductions by Raymond Goldberg.—2nd ed.

Includes bibliographical references and index.

1. Drug abuse—Social aspects. I. Goldberg, Raymond, *comp.*

1-56134-443-5

362.29
95-74672



Printed on Recycled Paper

PREFACE

One of the hallmarks of a democratic society is the freedom of its citizens to disagree. This is no more evident than on the topic of drugs. The purpose of this book is to introduce drug-related issues that (1) are pertinent to the reader and (2) have no clear resolution. In the area of drug abuse, there is much difference of opinion regarding drug prevention, causation, and treatment. For example, should drug abuse be prevented by increasing enforcement of drug laws or by making young people more aware of the potential dangers of drugs? Is drug abuse caused by heredity, personality characteristics, or environment? Is drug abuse a public health, medical, legal, or social problem? Are individuals who inject drugs best served by the provision of clean needles or treatment? Are self-help groups the most effective treatment for drug abusers?

There are many implications to how the preceding questions are answered. If addiction to alcohol or other drugs is viewed as hereditary rather than as the result of flaws in one's character or personality, then a biological rather than a psychosocial approach to treatment may be pursued. If the consensus is that the prevention of drug abuse can be achieved by eliminating the availability of drugs, then more money and effort will be allocated for interdiction and law enforcement than education. If drug abuse is viewed as a legal problem, then prosecution and incarceration will be the goal. If drug abuse is identified as a medical problem, then abusers will be given treatment. However, if drug abuse is considered to be a social problem, then energy will be directed at underlying social factors, such as poverty, unemployment, health care, and education. Not all of the issues have clear answers. One may favor increasing penalties for drug violations *and* treatment services. And it is possible to view drug abuse as a medical *and* public health *and* social *and* legal problem.

Many of the issues debated in this volume have an immediate impact on the reader. For example, the discussion in Issue 3, *Does Drug Testing Violate Civil Rights?* is pertinent because the majority of large corporations in the United States now test job applicants for drugs. Issue 6, *Is Passive Smoking Harmful to Nonsmokers?* is relevant to smokers as well as nonsmokers because legal restrictions on smoking in public are discussed. And the question *Should Marijuana Be Legalized as a Medication?* (Issue 8) may become relevant for many readers or their loved ones someday.

Plan of the book In this second edition of *Taking Sides: Clashing Views on Controversial Issues in Drugs and Society*, there are 36 selections dealing with 18 issues. Each issue is preceded by an *introduction* and followed by a *postscript*. The purpose of the introduction is to provide some background information and to set the stage for the debate as it is argued in the "yes" and "no"

selections. The postscript summarizes the debate and challenges some of the ideas brought out in the two readings, which can enable the reader to see the issue in other ways. Included in the postscript are additional suggested readings on the issue. The issues, introductions, and postscripts are designed to stimulate readers to think about and achieve an informed view of some of the critical issues facing society today. At the back of the book is a listing of all the *contributors to this volume*, which gives information on the physicians, professors, and policymakers whose views are debated here.

Taking Sides: Clashing Views on Controversial Issues in Drugs and Society is a tool to encourage critical thinking. In reading an issue and forming your own opinion you should not feel confined to adopt one or the other of the positions presented. Some readers may see important points on both sides of an issue and may construct for themselves a new and creative approach. Such an approach might incorporate the best of both sides, or it might provide an entirely new vantage point for understanding.

Changes to this edition This second edition represents a significant revision. Ten of the 18 issues are completely new: *Should the War on Drugs Be Waged on an International Level?* (Issue 2); *Should Tobacco Products Be More Closely Regulated?* (Issue 7); *Should Moderate Alcohol Consumption Be Encouraged?* (Issue 9); *Should Oral Contraceptives Be Available Without a Prescription?* (Issue 10); *Do the Advantages of Prozac Outweigh Its Disadvantages?* (Issue 11); *Should There Be Tighter Restrictions on the Advertising of Prescription Drugs?* (Issue 12); *Is Drug Abuse Resistance Education (DARE) an Effective Program?* (Issue 14); *Do Cigarette Advertisements Affect an Adolescent's Decision to Smoke?* (Issue 16); *Should the Decision to Use Anabolic Steroids Be Left to Athletes?* (Issue 17); and *Should Drug Treatment Services Be Expanded?* (Issue 18). For two of the issues retained from the previous edition, the issue question has been significantly modified and both selections have been replaced in order to focus the debate more sharply and to bring it up to date: Issue 4 on needle exchange programs and Issue 8 on legalizing marijuana as a medication. For the issues on drug legalization (Issue 1), drug testing (Issue 3), and passive smoking (Issue 6), one or both of the selections have been replaced to provide new points of view. In all, 30 of the 36 selections are new.

A word to the instructor To facilitate the use of *Taking Sides*, an *Instructor's Manual With Test Questions* (multiple-choice and essay) and a general guidebook called *Using Taking Sides in the Classroom*, which discusses methods and techniques for implementing the pro-con approach into any classroom setting, can be obtained through the publisher.

Acknowledgments A number of people have been most helpful in putting together this second edition. I would like to thank those professors who

adopted the first edition of this book and took the time to make suggestions for this subsequent edition:

Barney R. Groves
Virginia Commonwealth
University

Leah Laurie
Loyola University

William M. London
Kent State University

Carolyn G. Mathews
Auburn University

Joseph M. Saeva
Erie Community College

Ray Tricker
Oregon State University

I am also grateful to my students who did not hesitate to share their perceptions and to let me know what they liked and disliked about the first edition. Without the editorial staff at Dushkin Publishing Group/Brown & Benchmark Publishers, this book would not exist. The contributions of Mimi Egan, publisher for the Taking Sides series, cannot be overstated. Her insights and encouragement were most appreciated. The efforts of David Dean, administrative assistant, and David Brackley, copy editor, were also instrumental to this book. In no small way can my family be thanked. I am grateful for their patience and support.

Raymond Goldberg
State University of New York College at Cortland

INTRODUCTION

Drugs: Divergent Views

Raymond Goldberg

AN OVERVIEW OF THE PROBLEM

Very few topics generate as much debate and concern as drugs. Drugs are evident in every aspect of life. There is much dismay that drug use and abuse cause many of the problems that plague society. Many are concerned that individuals, families, and communities are being destroyed by drug use and that moral decay will continue to fester because of drugs. The news media are replete with horrible stories of people under the influence of drugs committing crimes against others, of senseless drug-related deaths, of men and women who compromise themselves for drugs, and of women who deliver babies that are addicted to or impaired by drugs.

From the fetus to the elderly, no one is untouched by drugs. In some cases, stimulants are prescribed for children so that they may learn or behave better in school. Sometimes students take stimulants on their own so that they can stay up late to study for a test or lose a few pounds. Many teenagers take drugs because they want to be accepted by their friends who take drugs. They also take drugs to deal with daily stress. For many people, young and old, their elixir for relaxation may be sipped, smoked, swallowed, or sniffed. Some people who live in poverty-stricken conditions anesthetize themselves from their environment with drugs. On the other hand, some individuals who seem to have everything also immerse themselves in drugs, possibly out of boredom. To cope with the ailments that come with getting older, the elderly often rely on drugs. Many people use drugs to confront their pains, problems, frustrations, and disappointments. Others take drugs simply because they like the effects or are curious about the effects.

BACKGROUND ON DRUGS

Despite one's feelings about drug use, drugs are an integral part of society. The popularity of various drugs seems to rise and fall with the times. According to a recent survey of eighth-, tenth-, and twelfth-grade students, for example, many drugs such as LSD and marijuana have seen an increase in use among teenagers despite a steady decline in use throughout the 1980s (Johnston, O'Malley, and Bachman, 1995). Reports of increased use of jimsonweed, a hallucinogen, are also on the rise (*Morbidity and Mortality Weekly Report*, 1995).

Understanding the role of drugs in society is critical to our being able to address the problem of drugs. It is also helpful to place drugs in a historical

context. Drugs have been used extensively throughout history. Alcohol's role in the early history of the United States was significant. According to Lee (1963), the Pilgrims landed at Plymouth Rock because they ran out of beer. Marijuana use dates back nearly 5,000 years, when the Chinese emperor Shen Nung prescribed it for medical ailments like malaria, gout, rheumatism, and gas pains. Hallucinogens have existed since the beginning of humankind. About 150 of the estimated 500,000 different plant species have been used for hallucinogenic purposes (Schultes and Hofmann, 1979).

Opium, from which narcotics are derived, was alluded to often by the ancient Greeks and Romans; opium is referred to in Homer's *Odyssey* (circa 1000 B.C.). In the Arab world, opium and hashish were widely used (primarily because alcohol was forbidden). The Arabs were introduced to opium through their trading in India and China. Arab physician Avicenna (A.D. 1000) wrote an extremely complete medical textbook in which he describes the benefits of opium. Ironically, Avicenna died from an overdose of opium and wine. Eventually, opium played a central role in a war between China and the British government.

Caffeine is believed to be the most commonly consumed drug throughout the world. More than 9 out of every 10 Americans consume caffeine. Coffee dates back to A.D. 900 in Arabia, where, to stay awake during lengthy religious vigils, Muslims drank coffee. However, coffee was later condemned because the Koran, the holy book of Islam, described coffee as an intoxicant (Brecher, 1972). Drinking coffee became a popular activity in Europe, although it was banned for a short time. In the mid-1600s, coffeehouses were primary locations where men would converse, relax, and do business. Medical benefits were associated with coffee, although England's King Charles II and English physicians tried to prohibit its use.

One function of coffeehouses was that they served as places of learning: For a one-cent cup of coffee, one could listen to well-known literary and political leaders (Meyer, 1954). Lloyd's of London, the famous insurance company, started around 1700 from Edward Lloyd's coffeehouse. However, not everyone was pleased with these "penny universities," as they were called. In 1674, in response to the countless hours men were spending at the coffeehouses, a group of women published a pamphlet titled *The Women's Petition Against Coffee*, which criticized coffee use. Despite the protestations against coffee, its use has proliferated. Now, over 300 years later, the adverse effects of caffeine are still being debated.

Coca leaves, from which cocaine is derived, had been chewed before recorded history. Drawings found on South American pottery showed that coca chewing was practiced before the rise of the Incan Empire. The coca plant was held in high regard: it was considered to be a present from the gods, and it was used in religious rituals and burials. When the Spaniards arrived in South America, they tried to regulate coca chewing by the natives but were unsuccessful. Cocaine was later included in the popular soft drink Coca Cola. Another stimulant, amphetamine, was developed in the 1920s.

Amphetamines were originally used to treat narcolepsy, and they were later prescribed for treating asthma and for weight loss.

Minor tranquilizers, also called "antianxiety agents," were first marketed in the early 1950s. The sales of these drugs were astronomical. Drugs to reduce anxiety were in great demand, principally because people felt they were under much stress. One group of antianxiety agents are benzodiazepines. Two well-known benzodiazepines are Librium and Valium. Valium ranks as the most widely prescribed drug in the history of American medicine. Xanax, which recently replaced Valium as the tranquilizer of choice, is one of the five most widely prescribed drugs in the United States today. Minor tranquilizers are noteworthy because they are legally prescribed to alter one's consciousness. There were mind-altering drugs prior to minor tranquilizers, but they were not prescribed for that purpose.

COMBATING DRUG PROBLEMS

The debates in *Taking Sides: Clashing Views on Controversial Issues in Drugs and Society* confront many important drug-related issues. It is an understatement to say that drugs are a problem in society; recognizing the problem is essential. However, what is the most effective way to reduce drug abuse? Should laws preventing drug use and abuse be more strongly enforced, or should drug laws be less punitive? How can the needs of individuals be met while serving the greater good of society? Should drug use be seen as a public health problem or a legal problem? This debate is addressed in Issue 2, in which it is argued that America would be best served by focusing its attention on the proliferation of drugs in other countries.

One of the oldest debates concerns whether or not drug use should be legal. Issue 1 deals with this question. In recent years this debate has become more intense because well-known individuals such as political analyst William F. Buckley, Jr., and economist Milton Friedman have come out in support of legalization. The issue is not whether drug use is good or bad but whether or not people should be punished for taking drugs. One question that is basic to this debate is whether drug legalization causes more or less harm than drug criminalization. A related issue concerns needle exchange programs, in which clean needles are provided to individuals who inject themselves with drugs (Issue 4). There are obvious inherent dangers to injecting drugs. Does the provision of sterile needles help these people? Should people be given equipment that is used for an illegal act? What has been the effect of needle exchange programs in cities in which they have been instituted?

In a related matter, if drugs have the potential for abuse, should they be restricted even if they could be of medical benefit? There is concern that drugs that are used for medical reasons may be illegally diverted. Yet, most people agree that patients should have access to the best medicine available. Is the federal government consistent in allowing drugs to be used that are potentially harmful? For example, narcotics are often prescribed for pain

relief. Is there a chance that patients who are given narcotics will become addicted? Whether or not marijuana has a legitimate medical use is the focus of Issue 8.

Many of the issues discussed in this book deal with drug prevention. As with most controversial issues, there is a lack of consensus regarding how to prevent drug-related problems. For example, Issue 5 debates whether or not prosecuting women who use drugs during pregnancy will affect drug use by other women who become pregnant. Many drugs damage the fetus; will prosecuting pregnant women who use drugs help prevent others from using drugs during pregnancy? Will pregnant women who do use drugs avoid prenatal care because they fear prosecution? Will newborns be better served if pregnant women who use drugs are charged with child abuse? Are these laws discriminatory, since most cases that are prosecuted involve poor women?

Some contend that drug laws not only discriminate according to social class but also according to age and ethnicity. Many drug laws in the United States were initiated because of the drugs' association with different ethnic groups: Opium was made illegal after it was associated with Chinese immigrants (Musto, 1991); cocaine became illegal after it was linked with blacks; and marijuana was outlawed after it was linked with Hispanics.

Drug-related issues are not limited to illegal drugs. Tobacco and alcohol are two pervasive legal drugs that generate much debate. For example, should there be laws determining where people can smoke tobacco? The answer to this question depends heavily on whether or not secondhand smoke has negative effects on nonsmokers. Issue 6 discusses the validity of research regarding the effects of passive smoke. Also, should the government regulate tobacco products more closely? This is the focus of Issue 7. With regard to alcohol, Issue 9 looks at whether moderate alcohol use or total abstinence should be promoted. A related debate is whether or not alcoholism is hereditary (Issue 13). Two other issues related to legal drugs deal with whether or not women should require a prescription to obtain oral contraceptives (Issue 10) and whether or not the antidepressant drug Prozac is being prescribed more than it should (Issue 11).

GATEWAY DRUGS

A type of drug that is popular with many young people is inhalants. Like tobacco and alcohol, inhalants are considered to be "gateway drugs," which are often used as a prelude to other, usually illegal, drugs. Inhalants are comprised of numerous products, ranging from paints and solvents to aerosol sprays, glues, petroleum products, cleaning supplies, and nitrous oxide (laughing gas). Inhalant abuse is a relatively new phenomenon. It seems that until the media started reporting on the dangers of inhalant abuse, its use was not particularly common (Brecher, 1972). This raises a question regarding the impact of the media on drug use.

Advertisements are an integral part of the media, and their influence can be seen in the growth of cigarette smoking's popularity. In the 1880s cigarette use began to escalate in the United States. One of the most important factors contributing to cigarettes' popularity at that time was the development of the cigarette-making machine (previously, cigarettes could be rolled at a rate of only four per minute). Also, cigarette smoking, which was considered an activity reserved for men, began to be advertised as an option for women. By marketing cigarettes for women, cigarette smoking became more widespread. Issue 16 deals with the role of the media and its effect on tobacco use. It looks at whether or not cigarette advertisements influence young people to smoke. One argument is that if young people were better educated about the hazards of drugs and were taught how to understand the role of the media, then limits on tobacco advertising would not be necessary.

DRUG TREATMENT AND PREVENTION

Some maintain that educating young people about drugs is one way to prevent drug use and abuse. Studies show that by delaying the onset of drug use, the likelihood of drug abuse is reduced. In the past, however, drug education had little impact on drug-taking behavior (Goldberg, 1994). Some programs actually resulted in an increase in drug use because they stimulated curiosity. Does this suggest that drug education is worse than no education or that more effective programs need to be developed? One nationwide program that deals with drug use is the Drug Abuse Resistance Education (DARE) program. Issue 14 examines whether or not DARE is an effective program.

Besides addressing the legal aspects of drug use and the effectiveness of drug prevention efforts, this book looks at the efficacy of drug treatment. Despite a sagging economy, drug treatment is a growing industry. Drug treatment is expensive, and consumers need to be aware of the different modalities. However, a more basic concern is whether or not drug treatment is effective. A recent study (Glass, 1995) showed that methadone maintenance, a treatment for heroin addiction, may have some benefits. But do those benefits outweigh the costs of the treatment? If society feels that treatment is a better alternative to incarceration, then it is imperative to know if treatment works. Issue 18 deals with whether or not drug treatment services are effective and whether or not they should be expanded.

One of the few areas that drug experts agree on is that alcoholism is a serious problem. There are an estimated 10 million alcoholics in the United States. Treatment experts, however, disagree in terms of the most effective approach for treating alcoholism. Traditionally, alcoholics have been told not to drink for the remainder of their lives, that there is no cure for their condition, and that recovery is a lifelong process. Issue 15 carefully scrutinizes the need for alcoholics to be permanently abstinent.

DISTINGUISHING BETWEEN DRUG USE, MISUSE, AND ABUSE

Although the terms *drug*, *drug misuse*, and *drug abuse* are commonly used, they may have different meanings to different people. Defining these terms may seem simple at first, but many factors affect how they are defined. Should the definition of a drug be based on its behavioral effects, its effects on society, its pharmacological properties, or its chemical composition? One simple, concise definition is that a drug is any substance that produces an effect on the mind, body, or both. One could also define a drug by how it is used. For example, if watching television or listening to music are forms of escape from daily problems, then they may be considered drugs.

Legal drugs cause far more death and disability than illegal drugs, but society appears to be most concerned with the use of illegal drugs. The potential harms of legal drugs tend to be minimized. By viewing drugs as illicit substances only, we may fail to recognize that commonly used substances such as caffeine, tobacco, alcohol, and over-the-counter preparations are drugs. If these substances are not perceived as drugs, then we may not acknowledge that they can be misused or abused. Definitions for misuse and abuse are not affected by a drug's legal status. Drug misuse refers to the inappropriate or unintentional use of drugs. Someone who smokes marijuana to improve his or her study skills is misusing marijuana because it impairs short-term memory. Drug abuse alludes to negative physical, emotional, financial, intellectual, or social consequences arising from chronic drug use. Using this definition, can a person abuse food, aspirin, soft drinks, or chocolate?

THE COST OF THE WAR ON DRUGS

The U.S. government spends more than \$ 10 billion each year to curb the rise in drug use (Herman, 1991). The major portion of that money goes toward law enforcement. Vast sums of money are used by the military to intercept drug shipments, while foreign governments are given money to help them with their own wars on drugs. A smaller portion of the funds is used for treating and preventing drug abuse. One strategy being implemented to eliminate drug use is drug testing. Currently, men and women in the military, athletes, industry employees, and others are subject to random drug testing.

The expense of drug abuse to industries is staggering: Experts estimate that almost 20 percent of workers in the United States are under the influence of dangerous drugs while at work; the cost of drug abuse to employers is approximately \$120 billion each year (Brookler, 1992); as compared to non-addicted employees, drug-dependent employees are absent from their jobs 16 times as often (Wrich, 1986); and drugs users are less likely to maintain stable job histories than nonusers (Kandel, Murphy, and Kraus, 1985). In its report *America's Habit: Drug Abuse, Drug Trafficking and Organized Crime*, the President's Commission on Organized Crime supported drug testing for all federal workers. It further recommended that federal contracts be with-

held from private employers who do not implement drug-testing procedures (Brinkley, 1986).

A prerequisite to being hired by many companies is passing a drug test. On the positive side, many companies have reported a decrease in accidents and injuries after the initiation of drug testing (Angarola, 1991). However, most Americans consider drug testing to be degrading and dehumanizing (Walsh and Trumble, 1991). One important question is, What is the purpose of drug testing? Drug testing raises three other important questions: (1) Does drug testing prevent drug use? (2) Is the point of drug testing to help employees with drug problems or to get rid of employees who use drugs? and (3) How can the civil rights of employees be balanced with the rights of companies? These and other questions are addressed in Issue 3.

Athletes are periodically screened for anabolic steroids. Issue 17 questions this practice and raises the question of whether or not it is anybody's business but the individual athlete's if he or she uses steroids.

How serious is the drug problem? Is it real, or is there simply an increasing hysteria about drugs? There has been a growing intolerance toward drug use in the United States during the last 20 years (Musto, 1991). Drugs are a problem for many people. Drugs can adversely affect one's physical, social, intellectual, and emotional health. Ironically, some people take drugs *because* they produce these effects. Individuals who take drugs receive some kind of reward from the drug; the reward may come from being associated with others who use drugs or from the feelings derived from the drug. If these rewards were not present, people would likely cease using drugs.

The disadvantages of drugs are numerous: they interfere with career aspirations and individual maturation, and they have been associated with violent behavior, addiction, discord among siblings, children, parents, spouses and friends, work-related problems, financial troubles, problems in school, legal predicaments, accidents, injuries, and death. Yet, are drugs the cause or the symptom of the problems people have? Perhaps drugs are one aspect of a larger scenario in which society is experiencing much change and in which drug use is merely another thread in the social fabric.

REFERENCES

- R. T. Angarola, "Substance-Abuse Testing in the Workplace: Legal Issues and Corporate Responses," in R. H. Coombs and L. J. West, eds., *Drug Testing: Issues and Options* (Oxford University Press, 1991).
- E. M. Brecher, *Licit and Illicit Drugs* (Little, Brown, 1972).
- J. Brinkley, "Drug Use Held Mostly Stable or Better," *The New York Times* (October 10, 1986).
- R. Brookler, "Industry Standards in Workplace Drug Testing," *Personnel Journal* (April 1992), pp. 128-132.
- R. M. Glass, "Methadone Maintenance: New Research on a Controversial Treatment," *Journal of the American Medical Association* (vol. 269, no. 15, 1995), pp. 1995-1996.
- R. Goldberg, *Drugs Across the Spectrum* (West, 1994).
- E. S. Herman, "Drug 'Wars': Appearance and Reality," *Social Justice* (vol. 18, no. 4, 1991), pp. 76-84.

- "Jimson Weed Poisoning—Texas, New York, and California, 1994," *Morbidity and Mortality Weekly Report* (January 27, 1995).
- L. D. Johnston, P. O. O'Malley, and J. G. Bachman, *Monitoring the Future* (National Institute on Drug Abuse, 1995).
- D. B. Kandel, D. Murphy, and D. Kraus, "Cocaine Use in Young Adulthood: Patterns of Use and Psychosocial Correlates," in N. J. Kozel and E. H. Adams, eds., *Cocaine Use in America: Epidemiologic and Clinical Perspectives* (National Institute on Drug Abuse, 1985).
- H. Lee, *How Dry We Were: Prohibition Revisited* (Prentice Hall, 1963).
- H. Meyer, *Old English Coffee Houses* (Rodale Press, 1954).
- D. F. Musto, "Opium, Cocaine and Marijuana in American History," *Scientific American* (July 1991), pp. 40–47.
- R. E. Schultes and A. Hofmann, *Plants of the Gods: Origins of Hallucinogenic Use* (McGraw-Hill, 1979).
- J. M. Walsh and J. G. Trumble, "The Politics of Drug Testing," in R. H. Coombs and L. J. West, eds., *Drug Testing: Issues and Options* (Oxford University Press, 1991).
- J. T. Wrich, "Some National Statistics: The Impact of Substance Abuse at the Workplace," in H. Axel, ed., *Corporate Strategies for Controlling Substance Abuse* (Conference Board, 1986).

CONTENTS IN BRIEF

PART 1 DRUGS AND PUBLIC POLICY 1

- Issue 1. Should Drugs Be Legalized? 2
- Issue 2. Should the War on Drugs Be Waged on an International Level? 22
- Issue 3. Does Drug Testing Violate Civil Rights? 40
- Issue 4. Do Needle Exchange Programs Reduce the Spread of AIDS? 58
- Issue 5. Should Drug Use by Pregnant Women Be Considered Child Abuse? 78
- Issue 6. Is Passive Smoking Harmful to Nonsmokers? 98
- Issue 7. Should Tobacco Products Be More Closely Regulated? 118

PART 2 DRUGS, DRINKS, AND MEDICATIONS 135

- Issue 8. Should Marijuana Be Legalized as a Medication? 136
- Issue 9. Should Moderate Alcohol Consumption Be Encouraged? 150
- Issue 10. Should Oral Contraceptives Be Available Without a Prescription? 166
- Issue 11. Do the Advantages of Prozac Outweigh Its Disadvantages? 182
- Issue 12. Should There Be Tighter Restrictions on the Advertising of Prescription Drugs? 198

PART 3 DRUG PREVENTION AND TREATMENT 213

- Issue 13. Is Alcoholism Hereditary? 214
- Issue 14. Is Drug Abuse Resistance Education (DARE) an Effective Program? 232
- Issue 15. Do Alcoholics Have to Maintain a Lifetime of Abstinence? 254
- Issue 16. Do Cigarette Advertisements Affect an Adolescent's Decision to Smoke? 272
- Issue 17. Should the Decision to Use Anabolic Steroids Be Left to Athletes? 292
- Issue 18. Should Drug Treatment Services Be Expanded? 306

CONTENTS

Preface	i
Introduction: Drugs: Divergent Views	xiv
PART 1 DRUGS AND PUBLIC POLICY	1
ISSUE 1. Should Drugs Be Legalized?	2
YES: Lester Grinspoon and James B. Bakalar , from "The War on Drugs—A Peace Proposal," <i>The New England Journal of Medicine</i>	4
NO: Herbert D. Kleber , from "Our Current Approach to Drug Abuse—Progress, Problems, Proposals," <i>The New England Journal of Medicine</i>	11
<p>Physician Lester Grinspoon and attorney James B. Bakalar contend that if drugs were legalized, much of the time and money that is currently devoted to stopping drug abuse could be allocated for addressing some of the social problems that lead to drug abuse. Herbert D. Kleber, a physician with the Center on Addiction and Substance Abuse, argues that drug legalization would lead to increased criminal activity and widespread drug abuse, and he recommends improving treatment and prevention programs instead.</p>	
<hr/>	
ISSUE 2. Should the War on Drugs Be Waged on an International Level?	22
YES: Stephen Flynn , from "Worldwide Drug Scourge: The Response," <i>The Brookings Review</i>	24
NO: Christina Jacqueline Johns , from <i>Power, Ideology, and the War on Drugs: Nothing Succeeds Like Failure</i>	30
<p>U.S. Coast Guard lieutenant Stephen Flynn argues that a coordinated, international effort is needed to combat the increased worldwide production of heroin, cocaine, cannabis, and synthetic drugs. Criminology professor Christina Jacqueline Johns contends that international drug kingpins are beyond the reach of law enforcement and that the trafficking of drugs into the United States remains unaffected by the war on drugs.</p>	
<hr/>	
ISSUE 3. Does Drug Testing Violate Civil Rights?	40
YES: Leonard H. Glantz , from "A Nation of Suspects: Drug Testing and the Fourth Amendment," <i>American Journal of Public Health</i>	42

NO: Mick Hans, from "Do Drug Tests Invade Your Privacy?" *Safety and Health* 52

Professor of health law Leonard H. Glantz argues that random drug testing violates civil liberties and sacrifices citizens' Fourth Amendment rights. Author Mick Hans argues that drug testing does not compromise individuals' rights and is supported by a majority of employers and employees.

ISSUE 4. Do Needle Exchange Programs Reduce the Spread of AIDS? 58

YES: Editors of *Consumer Reports*, from "Can Clean Needles Slow the AIDS Epidemic?" *Consumer Reports* 60

NO: Office of National Drug Control Policy, from "Needle Exchange Programs: Are They Effective?" *ONDCP Bulletin No. 7* 67

The editors of *Consumer Reports* assert that needle exchange programs not only reduce the spread of AIDS among adults but also curtail the risk of children developing the disease. The Office of National Drug Control Policy, an executive agency that determines policies and objectives for the U.S. drug control program, sees needle exchange programs as an admission of defeat and a retreat from the ongoing battle against drug use.

ISSUE 5. Should Drug Use by Pregnant Women Be Considered Child Abuse? 78

YES: Paul A. Logli, from "Drugs in the Womb: The Newest Battlefield in the War on Drugs," *Criminal Justice Ethics* 80

NO: Maureen A. Norton-Hawk, from "How Social Policies Make Matters Worse: The Case of Maternal Substance Abuse," *Journal of Drug Issues* 87

Paul A. Logli, an Illinois prosecuting attorney, argues that pregnant women who use drugs should be prosecuted because they may harm the life of their unborn children. Social worker Maureen A. Norton-Hawk contends that there is more opportunity to help pregnant addicts and their babies if they can come for prenatal care and drug treatment without fearing prosecution.

ISSUE 6. Is Passive Smoking Harmful to Nonsmokers? 98

YES: Editors of *Consumer Reports*, from "Secondhand Smoke: Is It a Hazard?" *Consumer Reports* 100

NO: Jacob Sullum, from "Just How Bad Is Secondhand Smoke?" *National Review* 111