

## Substance Use Disorder – Effectiveness of Prevention, Treatment, and Imprisonment.

Substance abuse is an epidemic that has plagued the globe and society and has virtually touched every aspect of life. Substances, in the context of substance use disorder, are any drug that is used to alter the user's state of mind. Drugs can be highly addictive and have many adverse effects on a person's mental and physical health. Substance use disorder (SUD) "is a complex condition in which there is uncontrolled use of a substance despite harmful consequences" (American Psychiatric Association 2024). Typically, a person with SUD will have an addiction to one or multiple substances. An addiction is "a compulsive, chronic, physiological or psychological need for a habit-forming substance, behavior, or activity having harmful physical, psychological, or social effects..." (Merriam-Webster 2019). SUD is a recognized mental disorder in the DSM (Diagnostic and Statistical Manual of Mental Disorders) V affecting nearly "48.5 million (16.7%) Americans" (American Addiction Centers 2024). SUD encompasses many different drugs, including, but not limited to, opioids, alcohol, cannabis, steroids, cocaine, meth and LSD. Fortunately, Substance use disorder, like other mental disorders, is treatable with a high level of success. According to a 2021 Nation Survey on Drug Use and Health "of the 29.0 million adults who perceived that they ever had a substance use problem, of the 29.0 million adults who perceived that they ever had substance use problem, 72.2% (or 20.9 million) considered themselves to be in recovery or to have recovered from their drug or alcohol use problem" (SAMHSA 2023).

### **Substances by schedule and penalties**

Illicit drugs are drugs that can be abused. They may be substances that have no medical purpose or legitimate medical purposes but are used outside of their intended use. Drugs are classified into “Schedules” by law.

- Schedule I - “Reserved for those controlled substances with the highest potential for abuse and no acceptable medical use” (Siegel 2016)
- Schedule II – “Contains drugs that have a high potential for abuse, but which also have legitimate medical use” (Siegel 2016)
- Schedule III – “Moderate to low potential for physical and psychological dependence” (Siegel 2016)
- Schedule IV-V – These are drugs that have a low potential for abuse and dependence.

The federal government classifies drugs like Ecstasy, Heroin, LSD, and Marijuana as Schedule I. Cocaine, meth, fentanyl, Adderall, and oxycodone are Schedule II. Schedule III includes drugs like ketamine, anabolic steroids, and testosterone. Schedule IV includes drugs like Xanax, Valium, Ambien, and others. Schedule V drugs include “cough preparations with less than 200 milligrams of codeine or per 100 milliliters (Robitussin AC), Lomotil, Motofen, Lyrica, Parepectolin” (United States Drug Enforcement Administration 2018).

The penalties a person receives depend on the substance they possess, the amount they possess, the purpose they possess it, and the number of prior offenses the person has. This can either be a Felony or a misdemeanor crime. Possession of 100 grams of heroin, roughly the weight of a bar of soap, can result in a “Five-year mandatory minimum and maximum of 40 years” (United States Department of Justice 2020). Simple possession under federal law refers to someone who “possess a controlled substance unless such substance was obtained directly, or

pursuant to a valid prescription or order, from a practitioner,” (United States Office of the Law Revision Counsel 1996). The severity of punishments for simple possession increases about the number of offenses, but 1st offenses can include up to a 1-year prison sentence and a \$1,000 fine.

### **Prevention**

Prevention of drug use, in concept, is educating and informing the public on the effects of drug use and its consequences. This is particularly important with the younger population in K-12 schools. Drug use in adolescence leads to a higher probability that a person becomes addicted to drugs. “D.A.R.E. is a comprehensive K-12 prevention education program taught in thousands of schools in America” (D.A.R.E America 2017) These programs focus on educating teens and youth on drug use and its effects, among other issues. Efforts are collaborative between law enforcement, the federal government, and schools to deliver meaningful and compelling messages to teens who are at high risk of becoming addicted to substances. The DEA (Drug Enforcement Administration) also assists in community outreach programs to prevent drug use. “When youth and young adults perceive that drug use is harmful and risky, drug use dramatically declines. The longer youth and young adults delay drug use, addiction and/or substance use disorders are significantly reduced.” (DEA n.d.)

### **Imprisonment and arrests**

Currently, as of November 2<sup>nd</sup>, 2024, 44.2% of inmates in the United States federal prisons are imprisoned on drug-related offenses. The table below, provided by the Federal Bureau of Prisons, shows how many more people are imprisoned on drug-related offenses than

any other offense.

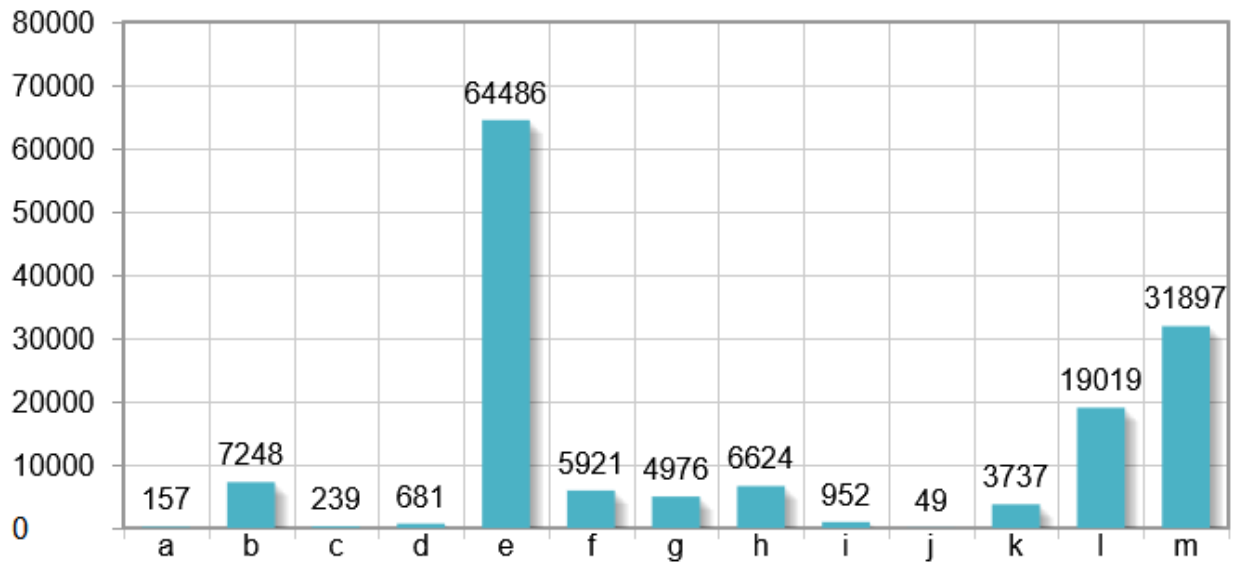


Chart Label	Offense	# of Inmates	% of Inmates
a	Banking and Insurance, Counterfeit, Embezzlement	157	0.1%
b	Burglary, Larceny, Property Offenses	7,248	5.0%
c	Continuing Criminal Enterprise	239	0.2%
d	Courts or Corrections	681	0.5%
e	Drug Offenses	64,486	44.2%
f	Extortion, Fraud, Bribery	5,921	4.1%
g	Homicide, Aggravated Assault, and Kidnapping Offenses	4,976	3.4%
h	Immigration	6,624	4.5%
i	Miscellaneous	952	0.7%
j	National Security	49	0.0%
k	Robbery	3,737	2.6%
l	Sex Offenses	19,019	13.0%
m	Weapons, Explosives, Arson	31,897	21.8%

Figure 1 - Offenses (Federal Bureau of Prisons 2024)

Drug-related offenses encompass not only simple possession but trafficking-related offenses as well as manufacturing. In total, 1 out of 5 people are in local jails, state prisons, and federal prisons for a drug-related offense. If we examine only people who are arrested on possession charges, it shows that most drug-related arrests are due to possession. “Of the estimated 907,958 arrests for drug law violations in the United States in 2022, 87.8% (797,187) were for possession of a controlled substance and 12.2% (110,771) were for sale or manufacture of a drug.” (Foundation 2021). According to the National Institute of Drug Abuse, “65% percent of the United States prison population has an active SUD” (NIDA 2020). SUD and drug addiction, as mentioned previously, is a recognized mental health disorder and is treatable. Addiction compromises an individual’s ability to make good decisions, as addiction leads to impulsivity and dependence. An arrest or prosecution and imprisonment of an individual with SUD may cause unneeded consequences such as a criminal record that can prevent them from gaining employment and certain government benefits, which would increase the likelihood of relapse.

### **Treatment**

Treatment of SUD may be the best approach to help those who have been charged and imprisoned on drug possession offenses, especially if screened for SUD under the DSM-V. Treatment for SUD is highly effective if given the proper approach. There are multiple therapeutic approaches that are used to treat SUD such as Cognitive behavioral therapy, which is commonly used to treat a wide array of mental health disorders. Other therapies exist that can be used to treat SUD as well, such as Dialectical behavior therapy. Additionally, medications such as Methadone can assist in the treatment of Meth addiction. The United States government has utilized a “Residential Drug Abuse Program” (RDAP) in an effort to treat inmates who suffer from SUD. “RDAP is typically a 9-month, 500-hour program in which participating inmates are

housed together in a separate unit reserved for drug treatment at a BOP institution.” (Federal Bureau of Prisons 2024) This program utilizes group therapies and social building activities such as half-workdays, school, and other activities in an effort to treat SUD and prevent the likelihood of a relapse once released from prison. Successful completion of the course can reduce an inmate's prison sentence and give them a better outlook on recovery. RDAP is only available to inmates in federal prison systems, but other state prisons have similar programs, such as the state of Virginia’s substance abuse education program and the Residential Substance Abuse Treatment (RSAT) programs. Even though treatment proves effective, it is essential that inmates find proper support after release. It is shown that “68% of drug offenders are rearrested within 3 years of release from prison” (Belenko, Hiller, and Hamilton 2013). Intensive in and out-patient programs, as well as support from local groups such as Narcotics Anonymous groups and Alcoholics Anonymous groups, can help reduce the chance of relapse and potential reincarceration. A holistic approach would include a foundational treatment of inmate pre-release with follow-up treatment once released from prison to reintroduce inmates into society with a good support group.

### **Conclusion**

SUD is a recognized mental illness that is highly treatable. “1.16 million Americans are arrested annually for the sale, manufacture or possession of illegal substances” (National Center for Drug Abuse Statistics 2022). With 65% or more of inmates having SUD, the availability of treatment while imprisoned and post-release is imperative to help prevent relapse and reincarceration or additional arrests. Prevention measures within communities, such as D.A.R.E. in schools, can help mitigate to an extent. However, for those who find themselves entangled in the criminal justice system for drug-related offenses, especially those charged with possession, treatment

during incarceration and post-release is a must to help prevent relapse and repeat arrest. States and Federal governments should put more emphasis on the treatment of this mental health disorder and attempt to educate communities to remove stigmas and rehabilitate those recovering. Though federal, state, and governments can only accomplish so much, the communities as a whole should help in efforts to ensure that inmates who suffer from SUD can be reintroduced to society to help sustain long-term recovery.

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