

# COLUMBIA SPECTATOR ARCHIVE

Columbia Daily Spectator, Volume CXIX, Number 57, 18 April 1995 — SPECTATOR SPECTRUM Drugs: a public health issue  
[ARTICLE+ILLUSTRATION]

## S P E C T A T O R SPECTRUM

### *Drugs: a public health issue*

By NOAH POTTER

Columbia University Harm Reduction Education Session (CUHRES) was recently referred to in *Spectator* as a “drug advocacy group.” Our meetings do not consist of strategy debates as to how to promote drug use. A fairer characterization would be a “drug users advocacy” group, since harm reductionists oppose incarceration, asset seizures, and revocation of civil rights as a valid means of reducing the societal harms of drug use. When Dora Gruner and I first discussed establishing a harm reduction discussion group, we fully expected to be misunderstood. The ignorance that has allowed America’s catastrophic drug policy to continue for 80 years is what motivated the creation of CUHRES in the first place.

The underlying rationale of drug control is a presumed causal relationship between “nonmedicinal” drug use (ingestion of drugs for purposes other than curing a particular illness) and crime; drugs invariably transform formerly virtuous or docile people into amoral menaces-to-society. The ultimate goal of prohibition is to prevent individuals from in-

g e s t i n g

psychoactive com-  
pounds. Official  
drug policy consists  
of two strategies

supply reduction and de-

mand reduction. The immediate  
goal of this economics model is to  
keep sellers and buyers from com-  
ing to the market to make transac-  
tions.

Comprehension of harm reduc-  
tion has been determinedly resisted  
by mainstream drug policy experts,  
as exemplified by A.M. Rosenthal's  
recent mischaracterization on *The*  
*New York Times* op-ed page. *Harm*

*reduction is not drug legalization.*  
Perhaps the simplest way to ex-  
plain it is to say that some things are  
more important than abstinence. If  
reducing the spread of the Human  
Immunodeficiency Virus and Hepa-  
titis C is more important than insist-  
ing that injection drug users give up  
their lifestyle, public health work-  
ers will be permitted to make sterile  
syringes available. Drug users are  
currently the second largest group  
of people with AIDS, a situation  
which could have been prevented  
if Presidents Nixon a n d

Reagan had not  
sabotaged drug

abuse treatment  
programs, and if

Presidents  
Reagan and

Bush had

not fiercely  
opposed

needle  
exchange.

Part of a

harm reduc-

tion approach is the idea that drug abusers are people who not only have problems but also have feelings and critical faculty. Given useful information in a non-judgmental format, many drug users will modify their behavior to avoid health hazards. The experts who say that drug abusers will only submit to treatment in prison are right: Someone who is distrustful of authority in the first place is not going to *choose* to go to an unfriendly environment where they

will be badgered and threatened to give up a primary coping mechanism. Harm reduction theory proposes that the way to resocialize drug users is to decriminalize and de-stigmatize them.

Since 1914, United States drug control policy has underfunded drug treatment in favor of maintaining prisons and arming law enforcement agents—an approach which derives directly from the habit of classifying “nonmedicinal” drug use as a crime problem. This completely illogical classification is carefully cultivated and nurtured by such smug dismissal of any attempt to investigate the history, rationale, and practice of drug control as hedonists’ schemes for drug legalization.

Harm reduction is premised on the idea that drug control should be a public health concern first, and a law enforcement issue second. Next is the idea that drug ingestion is not the main problem: The dangers of HIV transmission through needle-sharing or sex-for-crack exchanges, the emotional or spiritual crises underlying drug abuse, and the desperately materialistic human environment in America (masked by the demonization of drug-using deviants) are a few examples of the world of subjects that might be discussed if we were permitted to move beyond pledging perpetual allegiance to a Drug-Free America.

Is this drug advocacy? CUHRES is about *harm reduction*. We discuss theory, history, and current developments in drug treatment, as well drug and violence prevention among youths. If we wanted to be drug advocates, we would have applied for recognition as Friends

of the American Psychiatric Association. We are opposed to drug abuse, or *abuse of any kind*. However, one person's drug abuse is another person's drug use.

An examination of the concepts of "medicinal" and "nonmedicinal" uses of drugs is 80 years overdue. Not only is the war on drugs a vast drain on America's material and human resources, it has locked the moral and intellectual development of its unrecognized victims—voters and taxpayers who have been prevented from hearing alternative analyses—into a foul mutation of Progressive-Era prohibitionist conceptions of human nature.

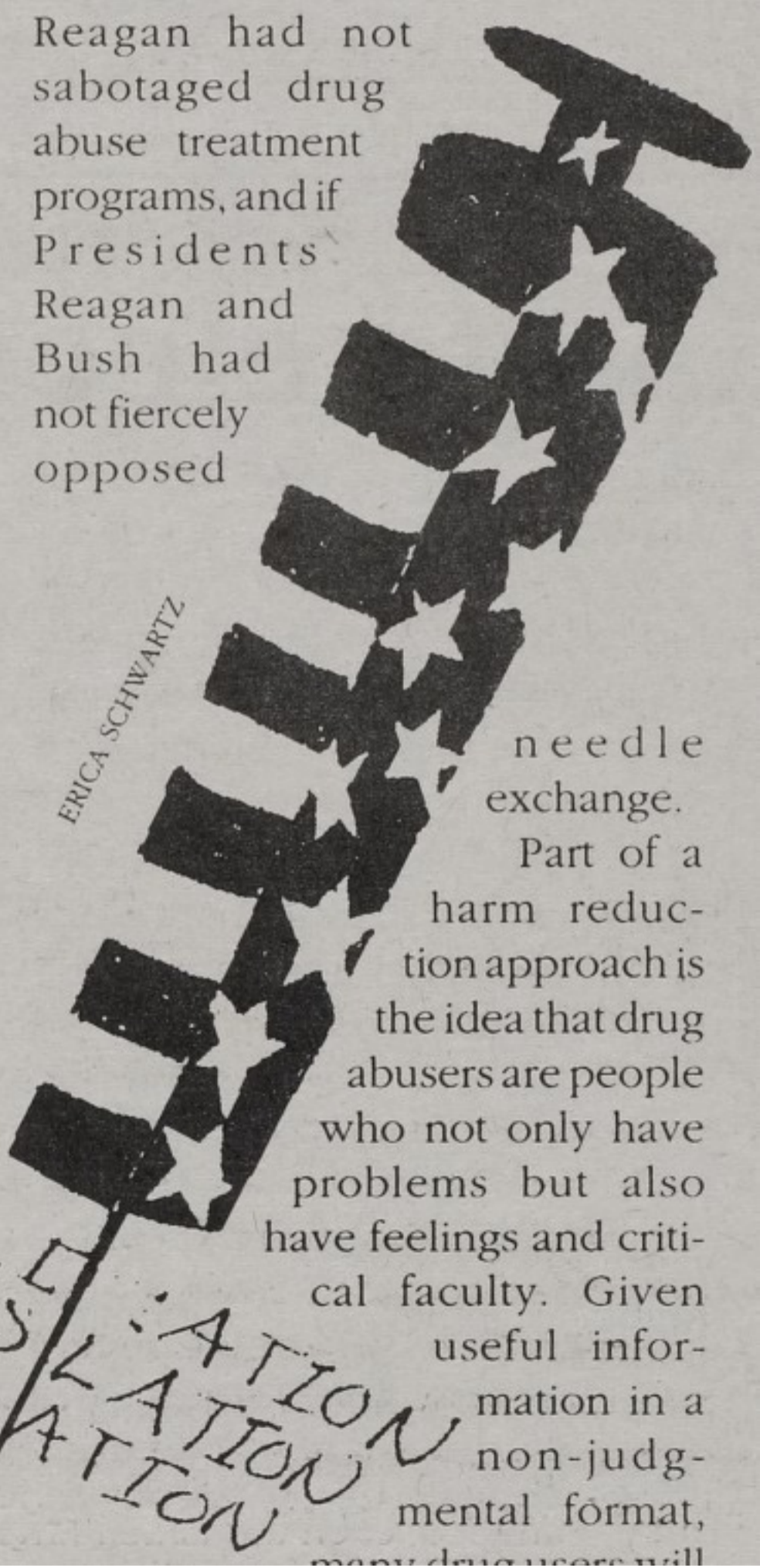
**Noah Potter is a Columbia College senior.**

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