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The Next Step in Drug Treatment

The country needs get beyond the 'drug war' approach to addiction

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By THE EDITORIAL BOARD

The mandatory-sentencing craze that drove up the prison population tenfold, pushing state corrections costs to bankrupting levels, was rooted in New York's infamous Rockefeller drug laws. These laws, which mandated lengthy sentences for nonviolent, first-time offenders, were approved 40 years ago next month. They did little to curtail drug use in New York or in other states that mimicked them, while they filled prisons to bursting with nonviolent addicts who would have been more effectively and more cheaply dealt with through treatment programs.

The country is beginning to realize that it cannot enforce or imprison its way out of the addiction problem. But to create broadly accessible and effective treatment strategies for the millions of people who need them, it must abandon the "drug war" approach to addiction that has dominated the national discourse in favor of a policy that treats addiction as a public health issue.

The Affordable Care Act sets the stage for such a transformation by barring insurers from denying coverage to people with pre-existing conditions, including substance dependency. The administration's new National Drug Control Strategy — described in a lengthy document promoted by the White House this week — calls for, among other things, community-based drug-prevention approaches that fully integrate treatment with the health care system. President Obama's budget, meanwhile, calls for a \$1.4 billion increase in treatment funding.

To its great credit, New York was one of the first states to back away from the policies it helped to create. In 2009, it revised the Rockefeller laws, with the aim of sending more low-level, nonviolent offenders to treatment instead of to prison. That step leaves it in a good position to take advantage of the Affordable Care Act and create a system for treating drug problems that is free of the poor coordination and interagency conflicts. A timely new report issued by the New York Academy of Medicine and the Drug Policy Alliance, an advocacy group, provides a detailed blueprint for how the state could remake its drug treatment delivery system and remove public policy obstacles to timely and accessible treatment.

It notes, for example, that agencies often work at cross-purposes, in some cases penalizing, instead of helping, addicts. Addicts who avoid H.I.V.-AIDS exposure by getting clean needles at publicly funded centers are then arrested for having "drug paraphernalia." Those with drug felonies on their records can be denied access to affordable public housing. Those who seek medical treatment for illnesses, and especially for pain, are often suspected of exaggerating their ailments to get drugs.

The report calls on the governor to convene a multiagency task force of the various state agencies and departments that encounter drug users, including social service agencies and the education and court systems. The ever more pressing purpose would be to improve the delivery of quality services to people who are too often banished to the margins of the health care system.