

# Perspectives on drug and alcohol use essay

[Literature](#), [Russian Literature](#)



in the Criminal Justice System

. Any drug (whether medicinally prescribed or recreationally taken) will have adverse consequences on the body. Often we refer to these as side-effects when discussing doctor-prescribed medications, or as negative effects when discussing illicit street drugs. Either way, these effects are the consequences of introducing a substance other than food into the human body. These consequences may be physical, neurological or psychological, and they sometimes lead to dependence on the substance.

### **The need to consider whether or not the benefit of prescribing a medicinal drug to a**

patient outweighs the potential side effect is known as the cost: benefit ratio consideration.

Questions to consider would include: What stage of illness is the patient in?

Will the effect of

the drug on body systems cause more harm than good to the patient? Is

there a more effective

and less toxic drug available for treatment of these symptoms? Might this

drug potentially cause

a dependence to develop?

**Select one drug that we have explored during the semester (i. e., heroin, cocaine,**

marijuana, LSD, etc.) that is now illegal to use recreationally (or has been illegal to use at some

point) but also has been known to reap medicinal benefits. Discuss the cost: benefit ratio of this

drug for a hypothetical patient. Report evidence from readings to support the argument to both

use and to not use the drug in question based on potential side effects. Be certain to consider

whether or not alternate drugs exist that would have a reduced toxic effect but still yield similar

medicinal benefits.

One of the benefits of the marijuana in medical treatment is that, unlike most of the medicines that are currently available, the marijuana is non-toxic, has never caused a fatality due to overdose, and has minimal long-term and short-term side effects (Grinspoon, 1999). It is also less expensive than the regular medicines and is greatly versatile in that it is capable of treating more than 2 dozen syndromes and symptoms, with more possibly being discovered in the future (Grinspoon, 1999). Also unlike the aspirin whose effects can be seen only in the long term, the marijuana immediately provides relief from suffering. The marijuana has proven to be useful for people with depression, chronic pain, and multiple sclerosis, although it may also provide relief for other symptoms (Grinspoon, 1999).

## **On the other hand, among its dangers is that its effect cannot be exactly predicted**

(Anslinger & Cooper, 1937). It can turn one into a philosopher, a reveler, or a murderer. It can give the user illusions that someone wants to hurt them, which may make them act violently in defense. It can also make those with problems do something that will be harmful for themselves. In addition, marijuana addicts can develop a delirious rage that can cause them to be temporarily and violently insane (Anslinger & Cooper, 1937).

As such, the use of marijuana in medical treatment - especially when administered unsupervised - may not be advisable especially when taken outside the clinical or hospital setting. This can be dangerous due to its adverse effects. Moreover, the relief that it offers patients may be the same thing that will trigger the patient's marijuana addiction as they would then want to always feel relief. This can be likened to Lindesmith's sociological theory of drug addiction where Lindesmith posits that addicts use drugs to avoid withdrawal (Lindesmith, 1938).

There are other traditional herbal medicines that may provide the same soothing effects as the marijuana. Examples would include capsalcin, ginger, feverfew, turmeric, ginseng, and others (Bhatia & Hwang, 2012). Although they may not be as powerful as the marijuana, they are at least safer and have been tested more.

5. " Why do people take drugs?" So began Inciardi and McElrath's introduction to part One of their text for this class, *The American Drug Scene: An Anthology*. Have we answered this question? Is there an answer to this question? Review the various

perspectives on

the origins of drug use. Comment on how the different effects of various substances on

the body and mind may play a part in maintaining an addiction. Give examples of

substances which seem to have a higher prevalence rate of addiction in one demographic

rather than others. Provide explanations explaining these disparities. Finally, in

conclusion, take a stance supporting one of the major perspectives (i. e., environmental, individual predispositions, gateway effects, etc.) we have explored in class to answer the question of " why do people take drugs?" Be certain to provide evidence from the course readings to defend your stance.

As Inciardi and McElrath (2009) suggest, there are many different reasons that people take drugs. It can be for the pleasure and the enhancement of performance, for recreation, for escaping from reality, or for the suppression of feelings of guilt, inadequacy, sorrow, and other emotional pains. Although there is no single reason as to why people take drugs, it still remains that people do have their own reasons for taking drugs. For example, some people just take them as a way of experimenting; others for recreation and pleasure. Still, others take drugs for stress relief while those who have become addicted find that they can no longer function well without drugs.

Two of the drugs that are popular among the younger people are marijuana and hallucinogens (Weil, 1972). The youth is an easy target for peddlers as peddlers promise them that the marijuana can do wonders for them, such as

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the stimulation of the imagination, mental power, and physical strength, and that it is a love potion (Anslinger & Cooper, 1937). These youngsters are also told that taking the marijuana has no harmful effects. Given their adventurous and curious nature, these youngsters would then try using marijuana. According to previous studies (Sifaneck et al., 2003), the use of marijuana in the Netherlands and the United States was consistently prevalent among the youth and the young adults.

The hallucinogen salvia divinorum is also prevalent among college students, particularly among white, male students who are from affluent backgrounds (Khey, Miller & Griffin, 2008). Moreover, club drugs such as ecstasy and ketamine are popular among the youth, especially at raves (Khey et al., 2008) where these drugs are used as a means of achieving solidarity with one's group and of fostering friendships (Kavanaugh & Anderson, 2008)

Although the various perspectives on why people take drugs do have their own points, I most agree with Friedman's sociopharmacology perspective on drug use (Friedman, 2002) where the political, economic and social context in which drug use occurs is taken into account. In this perspective, the social order and social context are more representative of the underlying causes of drug use than the individual context.

For example, drug use can be associated to cultures and sub-cultures. In the 1980s and 1990s, Rastafarianism and Hip Hop emerged where the marijuana was embraced as their primary and exclusive drug of choice (Safineck et al., 2003). Within these sub-cultures, marijuana use was associated with rituals and meanings that made them distinct from other sub-cultures that also

used the marijuana. Similarly, the “420” concept among marijuana users provides them with a collective identity (Halnon, 2003). It also holds an important symbolic meaning for them where many of them even incorporate rituals into their drug use lifestyles.

In addition, a study by Kurtz & Inciardi (2003) showed how the use of crystal methamphetamine was prevalent in the subculture of circuit parties. In the same manner,

a study conducted by Nichter et al. (n. d.) found that informal rules existed with regards to patterns of smoking in relation to one’s image and that the rules for males and females were different.

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