

POLICIES TO PREVENT DRUG PROBLEMS: A RESEARCH AGENDA FOR 2010-2015 (HIGHLIGHTS)

AUTHOR

DENISE DION HALLFORS, PH.D.

PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION

**SUBSTANCE ABUSE POLICY RESEARCH PROGRAM (SAPRP) IS A
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Advisory Board

Members of the Advisory Board include policy researchers and experts in all aspects of substance abuse—alcohol, tobacco, and drugs.

Sven Andréasson, M.D., Ph.D.

Swedish National Institute of Public Health

Lawrence S. Brown, Jr., M.D., M.P.H., FASAM

Addiction Research & Treatment Corporation

Frank J. Chaloupka, Ph.D.

Department of Economics, University of Illinois at Chicago

R. Lorraine Collins, Ph.D.

*School of Public Health and Health Professions,
University at Buffalo, SUNY*

K. Michael Cummings, Ph.D., M.P.H.

Roswell Park Cancer Institute

Michael Eriksen, Sc.D.

Institute of Public Health, Georgia State University

Matthew C. Farrelly, Ph.D.

RTI International

Eric A. Feldman, J.D., Ph.D.

University of Pennsylvania Law School

David A. Fiellin, M.D.

Yale University School of Medicine

Harold D. Holder, Ph.D.

Pacific Institute for Research and Evaluation (PIRE)

Keith Humphreys, Ph.D.

Stanford University School of Medicine

Andrew Hyland, Ph.D.

Roswell Park Cancer Institute

Dennis McCarty, Ph.D.

Oregon Health & Science University

Robin J. Mermelstein, Ph.D.

*Institute for Health Research and Policy,
University of Illinois at Chicago*

Lorraine T. Midanik, Ph.D.

University of California, Berkeley, School of Social Welfare

Matthew L. Myers, J.D.

Campaign for Tobacco-Free Kids

C. Tracy Orleans, Ph.D.

Robert Wood Johnson Foundation

Deborah Podus, Ph.D.

UCLA Integrated Substance Abuse Programs

Kurt M. Ribisl, Ph.D.

UNC Gillings School of Global Public Health

David L. Rosenbloom, Ph.D.

*National Center on Addictions and Substance Abuse
at Columbia University*

Laura A. Schmidt, Ph.D., M.S.W., M.P.H.

*Philip R. Lee Institute for Health Policy Studies,
University of California, San Francisco*

Stephen D. Sugarman, J.D.

University of California, Berkeley, Boalt Hall School of Law

John A. Tauras, Ph.D.

Department of Economics, University of Illinois at Chicago

Alexander C. Wagenaar, Ph.D.

University of Florida, College of Medicine

Constance Weisner, Dr.P.H., M.S.W.

*Division of Research, Northern California
Kaiser Permanente*

“Illegal drug prevention policies and programs have largely fallen under two categories: those that seek to reduce demand for drug use and those that seek to reduce the availability of drugs for misuse.”

Introduction

This document focuses primarily on policy research needed to prevent problems associated with illegal drugs in the United States. A more detailed discussion of the subject, including all scientific references, is available at http://www.saprp.org/research_agenda.cfm. Illegal drugs, by definition, are outside the bounds of legitimate sales and regulation and therefore cross over into criminal justice policies. Illegal drugs include prescription drugs when used or sold outside the regulated environment via licensed physicians and pharmacies. Illegal drug prevention policies and programs have largely fallen under two categories: those that seek to reduce demand for drug use and those that seek to reduce the availability of drugs for misuse.

This document begins with criminal justice policies with an emphasis on alternatives to incarceration to prevent drug abuse and the harms of addiction. It then considers drug prevention policies affecting schools, local communities, traffic safety, and prescription drugs. Finally, it discusses new ways to enhance and support a rational drug policy based on research science.

I. Criminal Justice Policies to Deter Use and Sales

In the 1980s, state and federal governments declared a broad “War on Crime,” with massive expansion of the criminal justice system and increased punishment for illegal behaviors. In 1986, Speaker of the House “Tip” O’Neill announced a national “War on Drugs” in reaction to the cocaine-related death of basketball star, Len Bias. That same year, President Reagan signed the Anti-Drug Abuse Act of 1986, which set mandatory minimum penalties for drug offenses. Between 1980 and 2002, the incarcerated population rose from 500,000 to over 2 million. Much of the increase in admissions to prisons was for drug offenses, explained in large part by mandatory sentencing statutes. Drug courts represent an important alternative to incarceration and have been the focus of drug prevention policy studies. Other critical studies should address the wider impact of criminal drug policies on families. Although little is known about the impact on children and youth when their mothers are incarcerated, even less is known about the impact of incarcerating fathers, except that the problem is huge, hidden, and growing.

Priority Research Questions 2010-2015

- 1 What are the long-term effects of drug courts on other important outcomes (besides recidivism), such as substance use, psychological health, physical health, employment, or parenting?
- 2 What types of services within drug courts contribute to the most effective outcomes?
- 3 What are the most effective continuing-care strategies that result in the greatest likelihood of long-term success for offenders with drug-related crimes?
- 4 What barriers exist to tracking and monitoring the needs of the children of prisoners? Are there promising state or local models that protect privacy rights and minimize harm?
- 5 How do sentencing alternatives affect family health and well-being, including teen drug use?

II. School-Related Policies to Reduce Youth Demand for Drugs

As fundamental child-serving public institutions, schools have been a primary target for testing and implementing youth drug prevention interventions. Since 1988, the Department of Education (ED)'s Safe and Drug-Free Schools and Communities Act (SDFSCA) program has provided state-based infrastructure and modest funds for drug prevention. Major issues in school-based drug policies include drug testing; disciplinary actions for drug, tobacco, and alcohol possession on school grounds; and the use of alternative schools as a consequence for drug-related infractions.

Priority Research Questions 2010-2015

- 1 What is the existing evidence that student drug testing results in positive outcomes as well as negative unintended consequences?
- 2 What are the variations in how student drug testing is adopted and enforced/implemented in school systems? How are these implementation variations related to outcomes and unintended consequences?
- 3 What policies, other than drug testing, have school districts enacted in response to drug possession/use/sales on school grounds and at school functions (e.g., suspension, parental notification, counseling, alternative schooling)? How effective are these policies in preventing drug-related behavior and encouraging academic achievement?
- 4 How effective are different models of alternative schools in reducing or preventing drug use and improving academic achievement?

III. Drug Prevention Policies at the Community Level

Federal block grants provide about 60% of the funding to support state and local substance abuse prevention and treatment programs through Single State Agencies (SSAs). SSAs contract with community substance abuse/mental health centers, county governments, private nonprofit or for-profit organizations, and other organizations to provide services at regional, county, and local levels.



Priority Research Questions 2010-2015

- 1 | What are alternative options for structuring federal block grants and managing these dollars to improve accountability?
- 2 | What variations exist in how block grants are implemented and managed at the state level, and what is the impact of these variations on state performance?
- 3 | Are data sources adequate at the state and community levels? How can the federal government help to improve the quality and utility of data at the local level?

IV. Drugged Driving

In 2006, there were 10.2 million persons, or 4.2% of the population aged 12 or older, who reported driving “under the influence” of illicit drugs during the past year. The rate was highest among young adults aged 18 to 25 (13.0%). Every state has driving under the influence of drugs (DUID) legislation. Most state DUID laws are “effects-based” laws that require the officer to detect and record impairment as the basis for requiring a drug test. This legislation forbids drivers to operate a motor vehicle if they are either “under the influence” of a controlled substance or if they have been rendered “incapable of driving safely” because of their use of an illicit drug.

Priority Research Questions 2010-2015

- 1 | What variations exist in state laws, policies, and enforcement programs, and what is known about their relative effectiveness?
- 2 | What are the comparable alcohol technologies and strategies that could be applied to DUID prevention, and what are the related issues to be addressed?
- 3 | Are there policy strategies that would reduce drug impairment levels across most age groups and in most situations?

V. Preventing Harms from Prescription Drugs

In 1997, two expert panels introduced clinical guidelines for management of chronic pain, including encouraging expanded use of opioid pain medications after careful patient evaluation and counseling when other treatments are inadequate. In the 10 years following publication of the guidelines, per capita retail purchases of the pain relievers methadone, hydrocodone, and oxycodone in the U.S. increased dramatically. Along with the increase in legitimate sales of opioids, rates of emergency department visits and deaths attributable to opioid analgesic overdoses also increased.

Priority Research Questions 2010-2015

- 1 Has the National Youth Media Campaign been effective in reducing youth access to prescription medications?
- 2 Is there evidence that advertising prescription medications directly to consumers has increased the nonmedical use of psychoactive medications?
- 3 What are current policies to deter Internet distribution, and are they effective? What policies deter doctor-shopping? How do policies compare in their effectiveness to prevent unintentional death and other harms from prescription drug abuse? What is the variation in policy implementation, and how does this affect outcomes?
- 4 How would policy changes to reduce the non-medical use of prescription drugs impact physician practice and prescriptions for legitimate use? In particular, how would they impact access for necessary acute or palliative care?

VI. Improving Evaluation of Drug Prevention Policies

In order to improve drug prevention, there is a need to answer several important questions: what works; how can evaluation and accountability of drug prevention policies be improved; and what lessons from alcohol prevention provide answers to drug prevention policies, including policies related to marijuana and other drugs.



Priority Research Questions 2010-2015

- 1 What are the barriers to developing a standardized repository of clinical trials and other high quality studies of drug use and harm prevention?
- 2 Which federal agency should take the lead in the repository?
- 3 What are minimum elements of a uniform data set for drug prevention? Can data be standardized nationally so that criminal justice policies to prevent drug use, harm, and drug-related crime can be compared across states?
- 4 Have price and physical availability of marijuana changed in states that have decriminalized marijuana for medical or personal use?

Conclusion

This research agenda is designed to raise the numerous critical research questions that will need to be answered in reducing the problems associated with drug use. New and innovative approaches to reduce the burden of drug use need to be generated, and they need to be debated with the support of an evidence base. The author hopes that this research agenda will advance that process. A more detailed discussion of the subject, including all scientific references, is available at http://www.saprp.org/research_agenda.cfm. Three other research agendas (on tobacco control, alcohol prevention, and alcohol and drug treatment) developed by the Substance Abuse Policy Research Program (SAPRP) are also available at the same URL.

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