

# The Influence of the Medicalization of Addiction on the United States Legal System

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## Abstract

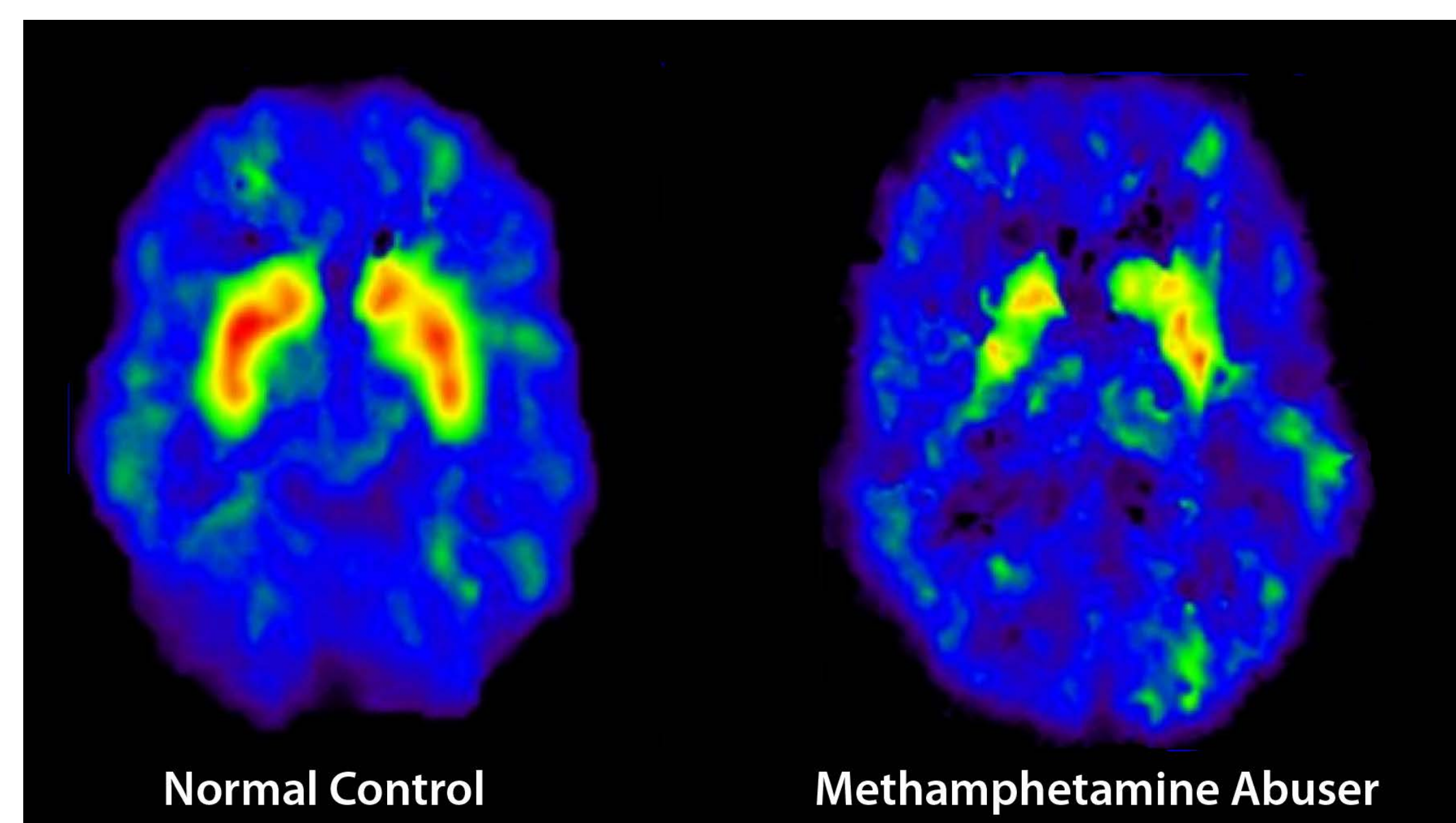
The medicalization of addiction has played a role in the development of drug addiction policy and treatment courts. This research synthesizes cross-sectional studies, case law, and current policy related to drug addiction in order to ascertain the faults in the current system. Based on these faults, ways for improvement in terms of successful treatment outcomes, cooperation between the medical and law professions, and the upholding of basic human rights will be proposed.

## Questions

- How have advancements in medicine impacted the United States Legal System?
- Should drug addiction be seen as a mental illness in the eyes of the law?
- How have the sociological, legal, and medical perspectives of drug addiction changed over time?

## The Medicalization of Addiction

- Medicalization is the process by which human conditions are considered medical issues
- There was a shift from the Moral Model of Addiction to the Brain Disease Model of Addiction (BDMA) in the 1930s<sup>1</sup>
- There has been an increase in the recognition of the Fundamental Attribution Error<sup>2</sup>
- Addiction was declared a treatable disease by the American Medical Association during the second half of the 20<sup>th</sup> century



## Drug Addiction in a Legal Context

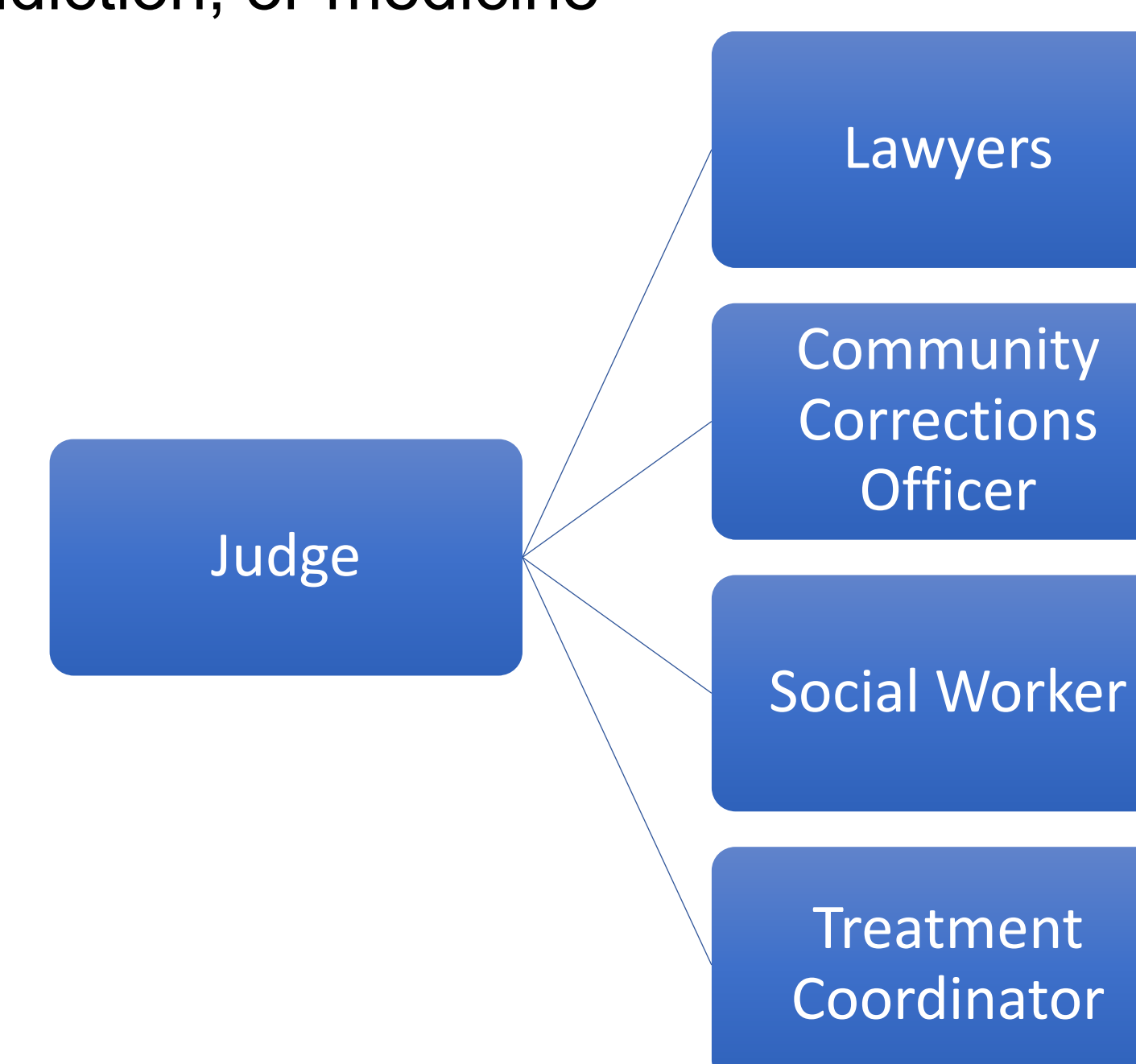
- The presence of drugs within the law evolved significantly during the 20<sup>th</sup> century
  - 1914 – Harrison Narcotic Act
  - 1962 – Robinson v. California
  - 1970 – Controlled Substances Act
  - 1986 – Anti-Drug Abuse Act
- Drug policy debates continue as drug addiction is viewed from a criminological and medical perspective

## Drug Courts

- The first drug court was formed in 1989 and they are now present in all 50 states
- Offender screenings are based on risks, needs, responsivity, and previous interaction with the law
- Sanctions, incentives, treatments, and rehabilitation services are offered to participants
- Judge, lawyers, community corrections officers, treatment coordinators, and social workers are present in the court room
- Participants in drug court reported less criminal activity, had fewer arrests, reported less drug use, and were less likely to test positive for drugs than comparable offenders<sup>3</sup>

## Observations

- Observations were taken at Amherst Drug Court in Amherst, NY
- Some individuals “graduated” from their treatment program and many individuals were given sanctions for not obeying their treatment plans
- There was a brief meeting to discuss participants previous to the court session, but the Judge ultimately made all decisions during the court session
- The Judge had not received any degree in human health, drug addiction, or medicine



## Conclusions

- There is a lack of knowledge and application of addiction science and medicine in regards to judicial rulings
- Studies have shown that individuals in drug court are given improper treatment because plans are developed by individuals with no medical training or case effective management strategies for substance use disorders such as case management, support for stable housing, and medication assisted treatment (MAT) are not offered or not offered in a sufficient quantity<sup>4</sup>
- In order to increase the effectiveness of drug courts, judges should be required to listen to physicians or medical professionals present in the courtroom or should have a vast amount of knowledge to be given the power to “prescribe” a legal treatment plan

## Future Research

- Determine a system to implement the presence of medical professionals within the local drug courts in Buffalo, NY
- Influence of racial discrimination within drug courts in regards to success rates and acceptance into the program

## References

1. National Institute on Drug Abuse. “Drugs and the Brain.” NIDA.
2. Jones, E E, and V A Harris. “The Attribution of Attitudes.” *American Psychological Association*, 1967.
3. “National Criminal Justice Reference Service.” *Facts and Figures - Drug Courts In the Spotlight* | NCJRS.
4. Physicians for Human Rights. “Neither Justice Nor Treatment.” June 2017.

