

National Center for Advocacy and Recovery (NCAAR) Decriminalization Position

NCAAR holds a position that supports decriminalization of possession of marijuana and illicit substances for personal use. The stance is a carefully considered middle ground between the extremes of criminalization and legalization. It is the position of NCAAR that addiction is a chronic disease and that the most appropriate and effective way to prevent and treat this disease is with an approach that is rooted in public health, not criminal justice. NCAAR further believes that the criminalization of addiction and the collateral sanctions that the criminal justice system attaches to convictions for drug offenses (such as driver's license suspensions, bars from receiving student loans, exclusions from certain professions and prohibitions against living in public housing) have often made it more difficult for recovering addicts to rejoin mainstream society. For these reasons, NCAAR supports the decriminalization of the possession of illicit substances personal use, and specifically a public health approach that consists of decriminalization, drug education, evaluation and referral to treatment if necessary. NCAAR's purpose and mission have a history dating back to the inception of the National Council on Alcoholism in 1944. Mrs. Marty Mann, the founder of that organization, from the beginning stated that there were three basic NCA concepts:

1. *Alcoholism is a disease and the alcoholic is a sick person.*
2. *The alcoholic can be helped and is worth helping.*
3. *This is a **public health problem** and therefore public responsibility.*

NCAAR still strongly believes in those three concepts and they inform the mission and the policy positions that the organization takes on various issues pertaining to all addictive substances. In recent times issues pertaining to the legalization of medical marijuana, or the general legalization of marijuana, have become increasingly debated. Over 40 states plus Washington, DC, have legalized medical marijuana and many states have legalized the sale of marijuana as a recreational substance. This movement towards the legalization of marijuana has made it imperative that NCAAR make clear its position on the criminalization of addictive symptoms so as to not to confuse our support of decriminalization with that of total legalization. This movement towards legalization has polarized public opinion, making it important to stake out a position that is neither for the total criminalization of all addiction- related behaviors and activities on one hand, and the total legalization of all illicit drugs on the other.

The "war on drugs," initiated in the 1970s, has resulted in the criminalization of behaviors related to addictive symptoms or a possible substance use disorder (SUD). It has gone beyond legal penalties for the sale and distribution of illicit substances. The mere possession and personal use of illicit substances has also been made a criminal offense. In fact, 82% of all drug related arrests in the United States were for simple possession. It is with this latter policy that NCAAR takes issue. Possession arrests in 2016 equaled an astounding 32,263. Recognizing that addiction is a chronic disease and a public health problem, NCAAR cannot support the criminalization of addictive symptoms.

NCAAR believes that the reliance on criminal and collateral sanctions to punish addiction related symptoms is counterproductive. This does not mean that other crimes related to addictive symptoms, or the sale and distribution of illicit substances, should not have criminal sanctions. That said, it must be noted that relatively small amounts of marijuana and other drugs have led to distribution charges. Behaviors limited to individual use should be considered part of the nature of addictive illness and should therefore be met primarily with public health, as opposed to a criminal justice response. There is another reason why NCAAR opposes the criminalization of addictive symptoms in and of itself.

Central to our mission is promoting recovery from a SUD. Sentencing laws have meant that individuals continue to be hampered by criminal records and collateral sanctions stemming solely from the possession and use of the substance to which they were addicted. This has had serious consequences for their ability to move forward and is a severe barrier to recovery and wellness. It has been shown that the ability to be engaged in productive employment is a major factor in successful recovery. Individuals with criminal records based solely on their actions while in active SUD face major barriers in obtaining employment and therefore have a more difficult time finding stable recovery. It is ironic that the "war on drugs," which was meant to end the drug problem, actually perpetuates it by introducing factors into an individual's life that make recovery less likely, and recidivism and continued use of illicit drugs more likely. NCAAR supports a policy that would not criminalize substance use disorders in and of itself.

Our position is that simple possession of illicit substances should not result in any criminal penalties that could have a lasting negative impact, while civil penalties would act as a deterrent to underage usage.

NCAAR views the need for education, screening and referral for treatment if deemed clinically appropriate as a necessary part of any public health approach. In addition, a Recovery Oriented System of Care is believed to maximize long term recovery for those who suffer from an addictive illness. As stated earlier, the issue of what policies to adopt with regard to the use of illicit substances has polarized this country. On one side there are those who vehemently support the war on drugs and if anything implement increased sanctions. On the other are those who support the total legalization of marijuana as a recreational substance. NCAAR does not believe that either position is viable. Although there is mounting evidence that the war on drugs has not been a success, NCAAR's position on the issue is based primarily on its understanding that addiction is an illness and should be treated as a public health issue, and that no unnecessary barriers to recovery should be propagated. We believe that eliminating criminal penalties for the possession of illicit substances for personal use accomplishes that goal without making it a legal substance with regard to production, distribution and sale. Further, establishing an administrative system which supports and encourages treatment for substance use disorders moves the issue more appropriately into the public health arena. We hope that this middle ground approach will be seen as a viable alternative to the current extreme viewpoints. It is a position in keeping with the principles NCAAR's founder articulated over 75 years ago.