DRUG AND ALCOHOL: AN EPIDEMIC IN AMERICA

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ABSTRACT

Drugs have made a major impact on Americans history since the founding of the first English colony at Jamestown in 1607. Even as drug, legal and otherwise, have contributed to the growth of the national economy, Americans have struggled to find policies that limit drugs’ negative effects on society without generating negative side effects on their own. Drugs have been a part of the American story since the first day Columbus landed in the New World, when the Taino Indians he met presented him with a gift of tobacco which would go on to become (for better or worse – mostly worse) one of the most important drugs in the American’ history. And if drugs have existed since the beginning, so have drug problems. And so have attempts to solve those drug problems. As we, the American face drug problems, we, the Americans learn something from these attempts. Quite contradictory; According to an article published in Time magazine (2012), one in twenty-five deaths around the world is alcohol related. Also, According to an article published in New York Times (2013) alcohol intake (moderate) is good for the heart

Keywords: Drugs, Alcohol, Epidemics.

INTRODUCTION

Determining the amount of alcohol consumed in America is tricky because the percentages of alcohol vary from one beverage to another. Beer is 3% to 5% alcohol, while wine is around 18% alcohol. The harder drinks like vodka and whiskey may be around 45% alcohol. What makes finding a statistic on alcohol consumption even more difficult is that the statistics may be based on all ages or just adults.

Even though statistics may vary, it is quite clear that the consumption of alcohol in the early years of the United States was prevalent and extensive. It was not hidden; citizens and visitors to the country both openly noticed it and thought of it as a developing problem. Historians believe that, although drinking alcohol was widely accepted and done in excess, there wasn’t a lot of people getting “drunk”. This means that drinking alcohol was such a part of the lives of early Americans that they had a tolerance to its effects and rarely got to the point where they were “falling down drunk”.

Most casual drinkers at the time would start their days with a quarter pint of cider. If they did not have their drink at home, they would stop for a drink on their way to work. Most merchants and businessmen would take a late morning break for a drink of their favorite liquor. On their way home, it was customary to stop for a drink at the local pub. All walks of life at all times of the day and at all ages participated in the consumption of alcohol. It was America’s pastime (Journal Library of History, 2007).

The United State’ temperance movement began in the late 1700s with the gathering of New England Federation to discuss the impact and consequences of alcohol consumption. The
most prominent leader of the temperance movement was Dr. Benjamin Rush. His ideas were the primary foundation of this movement. He explained that alcohol consumption was detrimental to one’s health, both physical and psychological. In 1784, he described what we would now call alcohol dependence as an involuntary condition. He laid the foundation for what is now called the disease concept or model of addiction and alcoholism. Despite the thinking of Dr. Rush, the ideas of the temperance movement and the whiskey tax (The Act of 1791), which was later repealed by Thomas Jefferson in 1802, the number of saloons in the late 1700s-early 1800s grew as an exponential rate. There were so many that by the early 1800s there was at least one saloon for every 100-200 Americans, including those that did not drink alcohol. As a solution to what they felt was a growing epidemic, Maine passed the first successful prohibition law in 1851. After the passing of the law, twelve other states followed Maine’s example and became “dry” states.

The reasons that Americans drank back in the early days of the country are probably the same as they are today. They liked the feeling that alcohol gave them. Plus alcohol was easy to make and this great country, America had all the right ingredients. It was a cash crop. It was cheap to make, and a lot of it was made which paved the way for mass consumption. People drank to celebrate. They drank to bond. They drank to numb their feelings. Back then, it seems nobody was above the allure of alcohol.

According to information provided by the website MedicineNet.com, young people in America use alcohol more frequently than other drug. Approximately 50 percent of children ages 11 to 18 drink alcohol at least monthly. Medical research has borne out the lasting and permanent effects of alcohol, especially on changing teen bodies. These effects fall into several categories.

Physical

In as little as 5 to 10 minutes, the body quickly absorbs alcohol into the blood. The effects can last for hours, depending on the gender, weight, and amount consumed, and how quickly consumption occurred. Alcohol acts as a depressant and slows down the brain and the nervous system. Physical effects include slurred speech, loss of coordination, clumsiness, decrease in the ability to pay attention, decreased reaction time, reduced function of vision and hearing. Greater alcohol consumption enhances these physical effects, resulting in balance loss, double vision, feeling the room spin, staggering, nausea and vomiting. Young people who drink more likely will involve themselves in risky sexual behavior or even have sex with a stranger.

Mental

The mental effects of alcohol of young people include a decreased ability to pay attention. Alcohol causes teens to act out of character in ways they wouldn’t normally act. Drinking by young people also results in short-term memory loss, which has further implications for school-related studies and taking tests. Heavy drinking can hide other teen emotional issues, such as anxiety problems or depression and increases suicidal attempts. Finally, young people are more likely to try drugs when drinking because of the reduction of inhibitions.
Social and Emotional

Many young people like the relaxed feeling and loosened inhibitions that alcohol gives them after one or two drinks. It tends to heighten the emotional state of the person when he begins drinking; in other words, if he felt in bad humor, he might become sullen and depressed. If he’s, he could become excited and euphoric. This means a teen’s body may not react the same way to alcohol each time he drinks. As in all cases for both young and adult drinkers, alcohol will initially produce euphoria, which will later change to dysphoria; depression is the end result.

Increased Addition Risk

One of the greatest concerns of parents, mental health professionals, educators and medical personnel alike is that problem drinking increases as the age of the first-time drinker decreases. As in all cases,

LITERATURE REVIEW

Throughout the centuries alcohol has served the controversial role of social lubricant, means of relaxation, symbol of religious worship, part of entertainment and many other things. To the greater extent, this refers to the alcohol, although the level of its harm as opposed to the one from drug usage is still subject to debate. According to Hanson, 1995, alcohol has been known since ancient times of Egyptians where it has been part of the religious cult and worship to the gods. As Hanson claims further, alcohol has been equally a substantial part of Chinese, Indian and especially European culture. Being a substance capable of changing human perception, it is not only the positive externalities to which alcohol could lead. The shift of drug purpose is vastly unknown in time, although the core problem of drug abuse was brought into light since Victorian England where the opium dens had become so popularized that they were considered to be one of the visit cards of the époque when regarded today (Rosen, 2009). Through the history of humanity, the problems set affront by the issues of drug and alcohol abuse have been noticed as more and more devastating and worrying especially in the developed western societies who’s level of development should not have allow such collisions to occur at the first sight. America has been often visualized as the quintessence of drug and alcohol problem. The history of drugs and alcohol is so extensive in the USA along with relatively history of the country itself, however it should be great example to other countries to regard the issue of the problem and the means applied to defeat the threat to the health and well-being of the whole nation. Young people are dying, families breaking up, striking work force and economic hardship due to arising drug and alcohol epidemics the 80s and 90s. This is a wakeup call to all.

The natural legislative response to excessive usage of alcohol was first expressed at the Virginia Colonial Assembly in 1629 which pointed out as "Ministers shall not give themselves to excess in drinking, or riot, or spending their time idling day or night," (National Commission on Marihuana and Drug Abuse, n.d.). Different states have addressed the similar problem in a number of different ways; not a single state has clearly confronted the usage of alcohol, however the overdosing problem has been restricted by implementing such means as prohibition to remain in tavern ‘longer than necessary occasions’, control of excessive consumption, age limitation etc. It was not until 18th century though that the attempt to prohibit the manufacture, importation, sale, or consumption of alcoholic beverages would take place (National Commission on Marihuana and Drug Abuse, n.d.).
In comparison with alcohol, the history of drug usage in the USA accounts for a less significant amount of time, however with much more drastic outbreaks in the timeline and with rather worrying outcomes. According to the research of DEA Museum, Chinese immigrants who came to work in the mines brought opium with them and it took about two decades for certain American classes to accept and patronize this drug. But before the majority of Americans was satisfied, the drug has expanded further to the east and since then opium dens has become a commonplace for American life.

One cannot over emphasize that one of the most vulnerable side of the people, the society is it’s over usage in medicine. Prescription drug abuse is a common problem today, however, the very problem has got its roots in the same 19th century when the medicine was primitive and there were merely no means to cure the painful maladies at a low cost, at the time when opiates came in. Doctors gracefully turned to a whole range of opium-based drugs taking them to casual use, yet not realizing the long term effect which inevitably led to addiction (National Commission on Marihuana and Drug Abuse, n.d.).

It can be evidentially seen that whereas alcohol has been more common in the history of the US and more widely spread, the problem with it has always been expressed by extensive usage within the minority of drinkers which varied according to economic and social circumstances providing space for various social unrests and contributing to adverse classes of the society expansion and to increase in different sorts of crimes when impaired under alcoholic condition. Apart from severely damaged minority, the alcoholic addiction was being cured rather successfully, although patients may not have fully restored their capabilities. The issue of drug abuse as the basic research above suggests is far more controversial as it comes from the lack of knowledge about the adverse power of different drugs and medical incapability to cure the addiction to some of them as well as fast self-destruction of the organism being addicted to certain heavy drugs. It can be therefore said that although both of these problems of abuse lead to merely the same negative externalities on the global scale, they still need to be addressed separately in order to provide the causal analysis and to see what has been done to tackle these problems and how much space is there yet to be filled with accomplishments in these areas.

Alcohol abuse has been known since ancient times. Hanson, 1995 provides across-the-world evidence that there was not a single culture or religion where alcohol abuse was praised although many ancient cultures, e.g. Greeks or Egyptians, tolerated and exalted moderate usage of alcohol. The problem in America has been there ever since, however in the present day, it is seen through a different set of views focusing on different edges of it. Nowadays it’s the vulnerable stratum of the population which accounts for the most danger when discussing the abuse issues – i.e. teenagers, pregnant women, ethnic minorities. In general, alcohol abuse can be classified via implementing such factors as amount, type and effect of alcohol on the drinker. Impaired effects which inevitably grow as the consumed volume of alcohol builds up, and although their transmission and effect may differ due to the aforementioned aspects, the majority of consumers is alas unaware of the moment when such impaired effects start to take place. It is due to this unawareness that multiple accidents and crimes occur.

The general list of alcoholic addiction classification can be divided into five stages: 1. the problem drinker, 2. the hard drinker, 3. the periodic drinker, 4. the steady alcoholic, and 5. the plateau alcoholic. All of these stages bare somewhat differing symptoms and describe different level of addiction. However it should be pointed out that in the real world, there is no sharp classification and different features from each class of the abovementioned might
apply and hence it would be challenging for a person to characterize. Subsequently, further research brings in a different vision of classification which includes other data in addition to the volumes of actual alcohol consumed. These factors allow splitting the society into five seemingly clear interlayers characterizing the specific features for each group. According to Buddy, 2007, these groups can be addressed as young adult alcoholics, young antisocial alcoholics, functional alcoholics, intermediate familial alcoholics and chronic severe alcoholics. To elaborate, brief description would help to familiarize with specific aspects of each group along with the statistical data provided by the study. The young adult alcoholics are those drinkers who are young, experiencing low rates of family alcoholism and rarely seeking for any kind of help for their addiction; this group partly deals with the emotive issue of youth alcoholism. According to the research it accounts for 31.5 percent of alcoholics. The young antisocial alcoholics represent the most dangerous ‘potential bomb’ environment for the society as their addiction is often not limited to alcohol abuse but also to drug and cigarette dependence. Most of them are believed to be early onset of their addictions and most of them come from problematic families with similar problems of alcoholism and antisocial disorders. Their quota is 21 percent. The third group grips the functional alcoholics which are middle aged and well-educated people with stable families. Such issues as smoking habits and multigenerational history of alcoholism often apply to them. This group accounts for 19.5 percent. Intermediate familial alcoholics account for 19 percent. The difference from the previous group is manifested in more shaped side addictions and partial pursuit for treatment. The last group is chronic severe alcoholics and this is the group which is most reluctant to recovery albeit it’s not potentially explosive as young antisocial alcoholics. It makes up another 9 percent of alcoholic strata of population. This group has the highest rates of side addictions to drugs etc, and the highest rates of various physical and mental disorders. Due to the fact that two thirds of the group are seeking for treatment, this group appears to serve as a prevalent group for medical assistance.

The latter classification gives the opportunity to disallow foregone conclusions and to discover what hazards alcohol abuse may have for a particular social stratum. The government and the society itself are able to attend to these groups separately to cope with the problem or to minimize its adversity for the population to a sustainable level. Up to date, there have been many controversial questions picked up by various social organizations, churches, government and people; albeit sometimes rational, they did not seem to integrally see the scope of the problem since its major arrival in the Great Depression times and up to the present day of post-industrialized community. Alternative views are various – from rumors of marijuana’s lesser damage than alcohol to clear data that the effects of drug abuse on children who were addicted before their birth is less disturbing than the effects of alcohol exposal (Okie, 2009). Hence, addressing the issue in the unbiased light and tackling each of its sharp edges individually should provide necessary assistance in evaluating the possible outcome of the problem which appears to be global for many societies in the world including American society. Furthermore, apart from damaging the exposed social strata, alcoholism is also an issue of large amounts of government expenses to fight it. The financial side of the problem obscures huge losses of costs most of which do not seem to return back in time and thus are perceived as sunk costs. According to the research conducted by the Restored Church of God, 2002 governments across the world spend significant volumes of funds to combat alcoholism. Television advertising, funding health programs for medical care system and providing low price medication for those suffering from alcoholism account for a large quota of what the taxpayers actually pay and this leads to the conclusion that the problem refers to everyone. Actually, this provides contrast to the general ignorant public belief that
alcoholism does not refer to them and hence they may live in sheer unawareness to the problem of the century.

Drugs Abuse

Turning to the issue of drug abuse, it can be started that initially, drug intention was mistreated and abode to misconception. The lack of knowledge is to blame for the furious expansion of drugs into the modern western societies, and in particular America as the cornerstone of the western world. Whitebread, 1995 provides a brief overview of installation of drug problem into the American life during the last one hundred years.

The history started off with two reasons, which Whitebread, 1995 claimed to be the driving force for the severe drug abuse. Morphine was the drug that was used during the majority of legitimate medical operations and was later given to the patient as the medication which ultimately flowed out into addiction after hospitalization. The second reason is the infamous illiteracy among the countryside areas in particular which led to speculation with miraculous potions at relatively low price proposed by all sorts of voyaging doctors and simultaneously serving them as a safe means of earning money. Whitebread, 1995 elaborates that most of these so called ‘potions’ were filled with morphine as the major substance which inevitably led their buyers to come to purchase more later on. Combined with their ignorance about the true nature of drug addiction and its fatal causes altogether, this created a potent market for all sorts of chevaliers of industry. Later on, the general huge demand for morphine-based medications built on ignorance and gullibility brought the issue of patent medicine addiction since it also contained a substantial amount of morphine which proved to be a perfect temporary painkiller. Patent medicine responded to vast demand for the potions and proposed its alternative – to buy the same kind of stuff legally over the counter in the chemist’s shop. These two facts combined created a massive boost in the drug abuse which required instantaneous government intervention. Indeed, the intervention took its place since the evident hazard was finally acknowledged. The actions of the government were fetched out by a number of various legislative acts with both administrative and criminal manners and responsibilities involved. The first legislation act aimed at the problem of drug abuse has done the most so far to minimize it, claims Whitebread, 1995. The Pure Food and Drug Act of 1906 did three things. Firstly, it created the Food and Drug Administration which served as the first legitimate body to watch for the quality of all food and drug products by approving or prohibiting them for consumption. Secondly, it limited the drugs use by making some of them available only via prescription. Thirdly, it obliged the producers of drugs to put a warning label on any drug that was recognized as habit-forming. The first criminal law which was ‘to criminalize the non-medical use of drugs’ came in 1914 (Whitebread, 1995) and it became known as the Harrison Act.

There has been a series of further acts throughout the century fluctuating between prohibition and permission of different drugs usage with the latest up-to-date one being the cutting the federal penalties for possession of crack cocaine (Banks, 2010) and several details need to be noted. At the beginning of the century, the drugs used were predominantly of different kinds compared to fatal drugs of nowadays – they were morphine, marijuana and opium. Furthermore, the social stratum which fell into drug abuse was quite different – the middle aged women took patent drugs presented as medications. The general trend can be seen in a quite controversial light. There occurred a certain shift on the stratum exposed to the problem and a second one which changed the types of regularly used drugs making more fatal and representing a greater life threat. Different legislations were used throughout, but did not
eliminate the problem. The evidence to this was a series of huge drug epidemics which happened in United States.

The last enormous outbreak of drug epidemic occurred from the 80s to early 90s. It has become known as the crack epidemic due to the type of relatively cheap and easily dispensed drug that became widely used by the most vulnerable classes of the population – the poor classes which dwelt in the ghetto, whose main activities were crime, robberies, prostitution etc. It was massiveness and global scale that turned particular attention to the issue. The addiction was a matter of weeks, then the nation began to devastate due to vastly increased crime rates – from robberies to murders.

The reasons for such outbreak could be found in the market conjunction – there has been accumulated significant amount of the imported drug from Colombia which caused its price to drop by 80 percent (DEA History Book, 1985-1990) and this is what made crack cocaine accessible. Before it took its marketing form, it was changed into solid crack by drug dealers since initial substance was in the form of powder. Its major advantages for sellers were that it was ‘cheap, simple to produce, ready to use, and highly profitable for dealers to develop’ (DEA History Book, 1985-1990). The further influx of trafficking and dealers who realized the power of the emerging ever-cheap market from the business viewpoint flooded the country and brought epidemic in the matter of months as the users became quickly addicted. The government imminently increased spending on the police; however it did not really contribute to the solving of the problem. The crime rates have drastically increased. One conspiracy theory linked to the crack epidemic was that CIA was involved in the crack epidemic as the organization which accompanied the spread of the drug in the US and did not stop the influx of dealers. Newsweek, 1996 suggested that the extent to which CIA knew what was happening could not be known as no one from the agency ever clearly stated the linkage; however, there might exist grounds to suppose that certain spheres may have been lobbying their own global interests through putting epidemic into primarily black ghettos, with varying intentions applied by different critics. However, all of a sudden, the crime rates dropped due to the later discovered drastic drop in usage of drugs. Some critics have managed to explain this through legalized abortions which allowed children from poor families not to be born. Due to the fast-rolling flux of new consumers of crack the period occurred when they were not there because they were not born and consequently didn’t grow up. Empty niche in consumption line caused a shock in the market which later was defeated as the trend gradually declined.

The consequences of the crack epidemic are often seen as the cornerstone of America’s drug abuse problem and the ways it has been tackled in general. Although there is no longer phenomenon of American crack usage, some people are still addicted to it, and so many others have died or their families suffered a lot. The major concern and another phenomenon brought up along with the epidemic were known as ‘crack babies’. Those were the babies which were born to intoxicated mothers addicted to crack. They were believed to have a prenatal drug addiction and many of them were supposed to die within months or a few years. There is strong evidence to the contrary, as the research conducted by Okie, 2009 advocates. There are some adverse effects on children affected by crack, however they are minor and in the long run incomparable to those caused by alcohol. As to the other drugs which compound the issue of illegal drug abuse today, the majority of them accounts for cocaine, heroine, methamphetamine and marijuana. Although the general trend of illegal drug consumption and the youth trends for cocaine and heroine have been declining over the last decade, there has been a worrying tendency noted in the youth segment tangible to general
consumption which has experienced a steady growth, according to National Criminal Justice Reference Service, n.d. Marijuana accounts for nearly 57 percent of current illicit drug consumption and is increasing together with methamphetamine usage. In general, the overall trend towards light drugs is observable although the number of uses and first-tries brings worries in certain areas. It is clear from the report that the government recognizes the danger of drug abuse claiming that it threatens ‘Americans of every socio-economic background, geographic region, educational level, and ethnic and racial identity’ and underlining the effects of drug use which are often felt disproportionally.

When regarded on the global scale, alcohol and drug problem appear to be prevalent for many other western countries along with a range of developing countries where several drug consumption levels are reaching pandemic size. To serve an example of western country with alcohol and drug abuse problem set affront, UK can be taken as the epitome of the old European cultural and economic centre. The general trend in the UK is that ‘Drug abuse among teenage students is worse in England and Wales than in any other part of the European Union’, claims Meade, 2000. Furthermore, the rates of consumption of such drugs as LSD and marijuana exceed some other states of the EU in ten times or even over. This led to the European Commission reporting increasing number of youth deaths related to drug abuse. Alcohol abuse also exists on the substantial level. According to Daily Mail, n.d., alcohol abuse costs Britain about 6 billion pounds a year. This includes premature deaths, losses to businesses, all of drink-related crimes and accidents. Alcohol misuse is a serious problem for the UK society and many campaigners vote for the beginning of governmental strategy implementation to reduce the alcohol overconsumption.

Developing Countries

Developing countries are not exempt from drug and alcohol abuse. Every country in the world (developed or developing) has its’ problem regarding alcohol/drug usage and all the problems associated with it. However, it is the African countries which clearly demonstrated a nearly perfect correlation between wealth and alcohol-drug consumption, claims Raffensperger, 2008. An infamous example of such correlation is shown by Uganda which was the world’s highest consumer of alcohol per capita, as of 2003 (Raffensperger, 2008). It must be noted that Uganda’s consumption level was nearly twice American and over that coefficient for the neighboring countries and this contributed to its various health and social costs. Albeit alcohol is a large part of Ugandan culture, such high rates of alcohol abuse brought high mortality rates, higher rates of dividing families and long-term health diseases and higher traffic accident rates. Some other tangent factors have added to heavy levels of alcohol consumption. The most of weight falls on the political instability, poverty and war which altogether demoralized the society. Considering that this is the case for most developing countries of Africa, the example of Uganda sets out a trend for most developing countries where lack of education, employment or entertainment may separately or mutually cause many poor classes to turn to alcoholism. This in turn would affect not only their lives but also the economic potential of the whole country as its labor force would suffer. Strict regulation from the government is required for implementation in order to mitigate the severe adverse effects of alcohol-drug abuse in these vulnerable regions. A total shut down of alcohol consumption in the developing countries, Uganda as an example has to be weighted and evaluated with caution. Alcohol industry is one of the leading home industries in Uganda and some other African countries (substantial in Nigeria local economy), hence simply shutting it down or restricting directly would only harm economy even further. This conclusion is supported by Raffensperger, 2008 claiming that ‘Home-brewing and distilling
alcohol is not only a cultural activity but a large part of many families' incomes, and which families use to pay school fees and household expenses’. Moreover, it would affect not only the workers which are men, but also those who sell the product – women and children who are often exposed to the lack of alternatives of doing other sort of income generating activity.

Finally, the alcohol-drug abuse issue is something new to the emerging markets of the world, presumably China and India. To afford the importance of this latter question the problem has to be approached from a different angle, suggests Parry, 2000. To bring some new light on the whole thing a question like ‘how would people view alcohol were it discovered today?’ has to be put. The answer may seem to be unobvious, yet this pretty much simulates the situation for Asia. According to the other study by Assunta, 2001, Asia is the future market of alcohol since this is where the demand is rising most rapidly; whereas it is relatively low in Europe and the US, at least not showing the same figures of a drastic growth.

Back to the question set affront, it is possibly how the problem of alcohol abuse may come into the Asian society. Although it has been discussed previously that alcohol history in Asia accounts for hundreds of years and it was Chinese miners immigrating into the US who brought opium with them, the other obvious historic fact has to be enclosed in the argument. First of all, for the majority of the timeline of the last century, Asian countries have experienced a strong totalitarian power which strictly controlled any problems linked to social negative externalities including prevalently alcohol and drug consumption questions. There are many generations educated on moderate to neutral attitude towards drinking and hence the effect of major alcohol producers’ market shift cannot be fully predicted. Second of all, due to the global trend of globalization, Asian culture blurs faster than it was supposed to. This inevitably leads to Asian mimicry of many Western World traditions, customs and trends with moderate to substantial alcohol consumption level in the first rows. In the end, it puts Asian countries before a difficult choice: accept the trend or fight it. There is little doubt that any regulation will be actually effective if any would come to be imposed at all since there are market forces and business rational that drive the hegemonic economies of the human civilization and not moral issues. Ultimately, Asia will be put in front of such question. However, the worries may be exaggerated, suggests Assunta, 2001. There is a substantial number of Asian countries which are Muslim, and alcohol consumption is prohibited there by law and by religion which is more notional. Religion is a strong stimulator of building a set of societal behavior and mental stability, especially within such strong religion as Islam. The most of concern will be coming from the major growing markets of the region – China, India, Sri Lanka, Thailand where various deregulatory measures have already been done.

Saturation of European and American markets, growing demand in Asian markets and penetration of Western style cultural elements into the Asian world all play ultimate role in Asia becoming the world’s leading consumer of alcohol in the future. The potential hazard arises from the question set above. A large proportion of the population may be unaware of potential hazard that extensive alcohol consumption may bring to the society and it is the job of different agencies to educate people on the topic. Moreover, genetically Asian people are considered to be less persistent to drunkenness and this factor can make the problem even more severe. In addition to that, Parry, 2000, underlines that the impact of alcohol on the economy cannot be overestimated. ‘In both developed and developing societies, alcohol plays a significant role in leisure activities and in certain cultural and religious traditions’, he claims, supporting this point by the statement that alcohol equally provides formal and
informal entertainment and also generates considerable tax amounts for the government which makes it one of the top budget filling industries.

Turning to the drug abuse aspect in African countries it can be said that apart from some traditional light drug activities (which have mainly to do with cannabis abuse and khat chewing in distinct parts of Africa) the history of drug abuse of the region is relatively short (Asuni, 1986). The drastic increase in drug abuse can be explained by the introduction of prescription drugs in Africa and also by the ease of trafficking class. ‘A’ drugs through Africa is due to governments’ insolvency to control the border and the situation generally which is the case for the majority of African countries. Moreover, drug abuse increase is directly connected to the most deadly epidemic of African countries – the HIV. UN has to assist African countries in the consolidated effort to fight this problem with the utmost available attempt and understanding. Consequently, the patterns of drug usage in Africa have been experiencing a changing behavior; however it is from the questions of ‘poverty, political instability, and social unrest and refugee problems’ according to Odejide, n.d., that the spread of psychoactive substances will be determined. Other issues brought to the forefront which might add up to the problem of poor tackling of the drug abuse concern are the imperfections and general backwardness of medical care system which comes out in such features as insufficient medical skills, poor funding, inadequate laboratory and treatment facilities etc.Civil society has to be built in order to somehow mitigate the alarming rates of the illicit drug consumption growth; although everybody realizes that it would take immense funds and time.

The drug abuse in Asian countries has been considered a major health concern. Also, Asia serves as cultivation field for many crops which are turned into drugs and hence the ultimate importance of this region to the contribution of solving the world issue of drug abuse must be acknowledged. Specific feature in this case is that drug cultivation is not distributed and most drugs are linked to a specific region. For example, cultivation of opiate as well as its production is concentrated in Afghanistan which allocates the problematic area perfectly well for those who will attempt to solve or restrict it. Furthermore, according to PPCAU, 2008, it is the drug trafficking and not the consumption itself which naturally seems to be the utmost trouble of the region since a lot of cultivated and processed drugs are being trafficked to the most vulnerable regions for consumption. The concerns which come along with it are drug related crime, HIV/AIDS and specifically injecting drug use. PPCAU further states that it is hard to judge upon the extent to which organized crime is responsible for the trafficking of opiates in the region however, this stands out as the most severe concern of the drug problem in Asian region. Also, a clear causation chain is evident between the drastic increase in rates of drug abuse, HIV infection and drug trafficking. The Central Asia therefore provides the major threat for the whole region and serious measures need to be taken to minimize the existing issue of drug trafficking which flourishes nowadays.

CONCLUSION

It can be stated that the extent to which alcohol and illegal drug usage is a pandemic in America today is unknown for sure. The history of development of both kinds of controversial substances has demonstrated an unequal attitude towards it within different cultures and timelines. What is more to say, the two problems when taken separately are treated differently in the nowadays world with probably the most polarized views ever available. Whereas the history of alcohol has been long enough to maintain the abuse within the minor circle of alcoholics and not to allow it to the pandemic levels in practically any
society apart from the most depressive ones, the history of illicit drugs is much shorter, however it has put a lot of worrying and deadly issues in many countries of the world.

The consumption of alcohol in America (per capita) in 1830 was nearly 4 gallons. In other words, each person in the United State of America average about 4 gallons of alcohol per year. Some years later, that average had declined to 1 gallon per person (FDA, 2005). Why such a decrease in this period of times? It has to do with the big changes the society in the United States underwent during the years of the 19th Century. The development of the economy, the monopoly of employment, the big changes in how people communicate and how they get around; the insurgence of religion—all these changes were motivators for people to be more interested in abstaining from alcohol than being under the influence of it. In today’s society, there is much divisiveness over alcohol consumption. Many religious cultures forbid drinking, while other more cosmopolitan cultures view it as a social staple. Regardless of this, for those people who have a problem with alcohol abuse, it is hugely destructive substance that destroy lives.

Alcohol is really a problem of moderate importance varying from country to country. In the societies where drinking has been part of the culture for a long time, it represents a controllable issue addressed quite properly although existing somewhere in the middle ground of no global threat to the whole of practically any nation. In the developing countries and more importantly, emerging market countries where the drinking traditions may not have been substantial and timely, there might be certain concern as the demand will only grow and the primary response of consumers to the increased supply would be unknown. The major issue can be expressed as ‘will the Asian culture be ready to get exposed to substantially increased amounts of alcohol consumed in everyday’s life?’ Anyway, legislation and any other kind of government intervention are a valid legacy of the world history, especially with regard to the legislation put against alcohol overconsumption by American government throughout the history. To a certain extent, it can serve as a suitable example for the other countries of how to tackle the problem.

As to drug abuse problem – it has often been seen as more severe and with greater adverse effects than alcohol which also were more short-termed. As explained before, the drug abuse problem grew on the ground of ignorance, apathy and greed, from various sides. At first, primitive medical technique introduced such drug as morphine on the wide basis to American public shifting from medication to addiction, plus the Asian immigrants contributed with growing consumption of opium by quickly implementing it into the intermediate interlayers of Western culture and setting it into the consciousness as one of the cultural fundamentals dropping the awareness of its danger. The latter fact concerned both European and American nations in a great extent. Although proper legislation allowed tackling and minimizing the problem of patent drugs usage and illicit drugs consumption, several outbreaks of epidemics still occurred with most prominent of them being the crack epidemic of 80s. It hit the American nation most severely and caused many devastating long term effects, also discovering possible causes for many social trends such as crime growth and fall considering such factors as permission of abortions. The epidemic has brought the whole new light on the everlasting problems of morality exposing them under the brand new light and the causal relationships which may be obscured but still impose the greatest impact on adverse phenomenon of the society. The drug problem in developing markets requires experience and carefulness as economy is already depressing and the risk of political instability is substantially high. In general, sustainable and weighted rational approach is needed in any situation linked to such world issues as alcohol and drug abuse.
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