ISSUE 17

Should Laws Against Drug Use Remain Restrictive?

YES: **Herbert Kleber and Joseph A. Califano Jr.,** from "Legalization: Panacea or Pandora's Box?" *The World & I Online* (January 2006)

NO: **Peter Gorman,** from "Veteran Cops Against the Drug War," *The World & I Online* (January 2006)

ISSUE SUMMARY

YES: Herbert Kleber, the executive vice president of the Center on Addiction and Substance Abuse (CASA), and Joseph Califano, founder of CASA, maintain that drug laws should remain restrictive because legalization would result in increased use, especially by children. Kleber and Califano contend that drug legalization would not eliminate drug-related violence and harm caused by drugs.

NO: Author Peter Gorman states that restrictive drug laws have been ineffective. He notes that drug use and drug addiction have increased since drug laws became more stringent. Despite the crackdown on drug use, the availability of drugs has increased while the cost of drugs has decreased. In addition, restrictive drug laws, says Gorman, are racist and endanger civil liberties.

In 2008, the federal government allocated nearly $13 billion to control drug use and to enforce laws that are designed to protect society from the perils created by drug use. Some people believe that the government's war on drugs could be more effective but that governmental agencies and communities are not fighting hard enough to stop drug use. They also hold that laws to halt drug use are too few and too lenient. Others contend that the war against drugs is unnecessary; that, in fact, society has already lost the war on drugs. These individuals feel that the best way to remedy drug problems is to end the fight altogether by ending the current restrictive policies regarding drug use.

There are conflicting views among both liberals and conservatives on whether legislation has had the intended result of curtailing the problems of drug use. Many argue that legislation and the criminalization of drugs have been counterproductive in controlling drug problems. Some suggest that the

criminalization of drugs has actually contributed to and worsened the social ills associated with drugs. Proponents of drug legalization maintain that the war on drugs, not drugs themselves, is damaging to American society. They do not advocate drug use; they argue only that laws against drugs exacerbate problems related to drugs.

Proponents of drug decriminalization argue that the strict enforcement of drug laws damages American society because it drives people to violence and crime and that the drug laws have a racist element associated with them. People arrested for drug offenses overburden the court system, thus rendering it ineffective. Moreover, proponents contend that the criminalization of drugs fuels organized crime, allows children to be pulled into the drug business, and makes illegal drugs more dangerous because they are manufactured without government standards or regulations. Hence, drugs may be adulterated or of unidentified potency. Decriminalization advocates also argue that decriminalization would take the profits out of drug sales, thereby decreasing the value of and demand for drugs. In addition, the costs resulting from law enforcement are far greater to society than the benefits of criminalization.

Some decriminalization advocates argue that the federal government's prohibition stance on drugs is an immoral and impossible objective. To achieve a "drug-free society" is self-defeating and a misnomer because drugs have always been a part of human culture. Furthermore, prohibition efforts indicate a disregard for the private freedom of individuals because they assume that individuals are incapable of making their own choices. Drug proponents assert that their personal sovereignty should be respected over any government agenda, including the war on drugs. Less restrictive laws, they argue, would take the emphasis off of law enforcement policies and allow more effort to be put toward education, prevention, and treatment. Also, it is felt that most of the negative implications of drug prohibition would disappear.

Opponents of this view maintain that less restrictive drug laws are not the solution to drug problems and that it is a very dangerous idea. Less restrictive laws, they assert, will drastically increase drug use. This upsurge in drug use will come at an incredibly high price: American society will be overrun with drug-related accidents, lost worker productivity, and hospital emergency rooms filled with drug-related emergencies. Drug treatment efforts would be futile because users would have no legal incentive to stop taking drugs. Also, users may prefer drugs rather than rehabilitation, and education programs may be ineffective in dissuading children from using drugs.

Advocates of less restrictive laws maintain that drug abuse is a "victimless crime" in which the only person being hurt is the drug user. Opponents argue that this notion is ludicrous and dangerous because drug use has dire repercussions for all of society. Drugs can destroy the minds and bodies of many people. Also, regulations to control drug use have a legitimate social aim to protect society and its citizens from the harm of drugs.

In the following selections, Henry Kleber and Joseph Califano explain why they feel drugs should remain illegal, whereas Peter Gorman describes the detrimental effects that he believes occur as a result of the restrictive laws associated with drugs.

YES

Herbert Kleber and Joseph A. Califano Jr.

Legalization: Panacea or Pandora's Box?

Introduction

Legalization of drugs has recently received some attention as a policy option for the United States. Proponents of such a radical change in policy argue that the "war on drugs" has been lost; drug prohibition, as opposed to illegal drugs themselves, spawns increasing violence and crime; drugs are available to anyone who wants them, even under present restrictions; drug abuse and addiction would not increase after legalization; individuals have a right to use whatever drugs they wish; and foreign experiments with legalization work and should be adopted in the United States.

In this, its first White Paper, the Center on Addiction and Substance Abuse at Columbia University (CASA) examines these propositions; recent trends in drug use; the probable consequences of legalization for children and drug-related violence; lessons to be learned from America's legal drugs, alcohol and tobacco; the question of civil liberties; and the experiences of foreign countries. On the basis of its review, CASA concludes that while legalization might temporarily take some burden off the criminal justice system, such a policy would impose heavy additional costs on the health care system, schools, and workplace, severely impair the ability of millions of young Americans to develop their talents, and in the long term overburden the criminal justice system.

Drugs like heroin and cocaine are not dangerous because they are illegal; they are illegal because they are dangerous. Such drugs are not a threat to American society because they are illegal; they are illegal because they are a threat to American society.

Any relaxation in standards of illegality poses a clear and present danger to the nation's children and their ability to learn and grow into productive citizens. Individuals who reach age 21 without using illegal drugs are virtually certain never to do so. Viewed from this perspective, substance abuse and addiction is a disease acquired during childhood and adolescence. Thus, legalization of drugs such as heroin, cocaine, and marijuana would threaten a pediatric pandemic in the United States.

While current prohibitions on the import, manufacture, distribution, and possession of marijuana, cocaine, heroin, and other drugs should remain,

As seen in *The World and I Online* journal, January 2006, from a report of The National Center on Addiction and Substance Abuse at Columbia University, September 1995.

America's drug policies do need a fix. More resources and energy should be devoted to prevention and treatment, and each citizen and institution should take responsibility to combat drug abuse and addiction in America. . . .

Legalization, Decriminalization, Medicalization, Harm Reduction: What's the Difference?

The term "legalization" encompasses a wide variety of policy options from the legal use of marijuana in private to free markets for all drugs. Four terms are commonly used: legalization, decriminalization, medicalization, and harm reduction—with much variation in each.

Legalization usually implies the most radical departure from current policy. Legalization proposals vary from making marijuana cigarettes as available as tobacco cigarettes to establishing an open and free market for drugs. Variations on legalization include: making drugs legal for the adult population, but illegal for minors; having only the government produce and sell drugs; and/or allowing a private market in drugs, but with restrictions on advertising, dosage, and place of consumption. Few proponents put forth detailed visions of a legalized market.

Decriminalization proposals retain most drug laws that forbid manufacture, importation, and sale of illegal drugs, but remove criminal sanctions for possession of small amounts of drugs for personal use. Such proposals suggest that possession of drugs for personal use be legal or subject only to civil penalties such as fines. Decriminalization is most commonly advocated for marijuana.

Medicalization refers to the prescription of currently illegal drugs by physicians to addicts already dependent on such drugs. The most frequently mentioned variation is heroin maintenance. Proponents argue that providing addicts with drugs prevents them from having to commit crimes to finance their habit and insures that drugs they ingest are pure.

Harm reduction generally implies that government policies should concentrate on lowering the harm associated with drugs both for users and society, rather than on eradicating drug use and imprisoning users. Beginning with the proposition that drug use is inevitable, harm reduction proposals can include the prescription of heroin and other drugs to addicts; removal of penalties for personal use of marijuana; needle-exchange programs for injection drug users to prevent the spread of AIDS and other diseases that result from needle sharing among addicts; and making drugs available at low or no cost to eliminate the harm caused by users who commit crimes to support a drug habit.

Variations on these options are infinite. Some do not require any change in the illegal status of drugs. The government could, for instance, allow needle exchanges while maintaining current laws banning heroin, the most commonly injected drug. Others, however, represent a major shift from the current role of government and the goal of its policies with regard to drug use and availability. Some advocates use the term "harm reduction" as a politically attractive cover for legalization.

Where We Are

Most arguments for legalization in all its different forms start with the contention that the "war on drugs" has been lost and that prevailing criminal justice and social policies with respect to drug use have been a failure. To support the claim that current drug policies have failed, legalization advocates point to the 80 million Americans who have tried drugs during their lifetime. Since so many individuals have broken drug laws, these advocates argue, the laws are futile and lead to widespread disrespect for the law. A liberal democracy, they contend, should not ban what so many people do.[1]

The 80 million Americans include everyone who has ever smoked even a single joint. The majority of these individuals have used only marijuana, and for many their use was brief experimentation. In fact, the size of this number reflects the large number of young people who tried marijuana and hallucinogenic drugs during the late 1960s and the 1970s when drug use was widely tolerated. During this time, drug use was so commonly accepted that the 1972 Shafer Commission, established during the Nixon Administration, and later, President Jimmy Carter called for decriminalization of marijuana.[2]

Since then, concerned public health and government leaders have mounted energetic efforts to de-normalize drug use, including First Lady Nancy Reagan's "Just Say No" campaign. As a result, current* users of any illicit drugs, as measured by the National Household Survey on Drug Abuse, decreased from 24.8 million in 1979 to 13 million in 1994, a nearly 50 percent drop. Over the same time period, current marijuana users dropped from 23 million to 10 million and cocaine users from 4.4 million to 1.4 million.[3] The drug-using segment of the population is also aging. In 1979, 10 percent of current drug users were older than 34; today almost 30 percent are.[4]

With these results and only 6 percent of the population over age 12 currently using drugs,[5] it is difficult to say that drug reduction efforts have failed. This sharp decline in drug use occurred during a period of strict drug laws, societal disapproval, and increasing knowledge and awareness of the dangers and costs of illegal drug use.

Several factors, however, lead many to conclude that we have not made progress against drugs. This feeling of despair stems from the uneven nature of the success. While casual drug use and experimentation have declined substantially, certain neighborhoods and areas of the country remain infested with drugs and drug-related crime, and these continuing trouble spots draw media attention. At the same time, the number of drug addicts has not dropped significantly and the spread of HIV among addicts has added a deadly new dimension to the problem. The number of hardcore** cocaine users (as estimated by the Office of National Drug Control Policy based on a number of surveys including the Household Survey, Drug Use Forecasting, and Drug

*Throughout this paper, "current" drug users refers to individuals who have used drugs within the past month, the definition used in most drug use surveys.

**Throughout this paper, "hardcore" users refers to individuals who use drugs at least weekly.

Abuse Warning Network) has remained steady at roughly 2 million.[6] The overall number of illicit drug addicts has hovered around 6 million, a situation that many experts attribute both to a lack of treatment facilities[7] and the large numbers of drug-using individuals already in the pipeline to addiction, even though overall casual use has dropped.

Teenage drug use has been creeping up in the past three years. In the face of the enormous decline in the number of users, however, it is difficult to conclude that current policies have so failed that a change as radical as legalization is warranted. While strict drug laws and criminal sanctions are not likely to deter hardcore addicts, increased resources can be dedicated to treatment without legalizing drugs. Indeed, the criminal justice system can be used to place addicted offenders into treatment. In short, though substantial problems remain, we have made significant progress in our struggle against drug abuse.

Will Legalization Increase Drug Use?

Proponents of drug legalization claim that making drugs legally available would not increase the number of addicts. They argue that drugs are already available to those who want them and that a policy of legalization could be combined with education and prevention programs to discourage drug use.[8] Some contend that legalization might even reduce the number of users, arguing that there would be no pushers to lure new users and drugs would lose the "forbidden fruit" allure of illegality, which can be seductive to children.[9] Proponents of legalization also play down the consequences of drug use, saying that most drug users can function normally.[10] Some legalization advocates assert that a certain level of drug addiction is inevitable and will not vary, regardless of government policies; thus, they claim, even if legalization increased the number of users, it would have little effect on the numbers of users who become addicts.[11]

The effects of legalization on the numbers of users and addicts is an important question because the answer in large part determines whether legalization will reduce crime, improve public health, and lower economic, social, and health care costs. The presumed benefits of legalization evaporate if the number of users and addicts, particularly among children, increases significantly.

Availability

An examination of this question begins with the issue of availability, which has three components:

- **Physical**, how convenient is access to drugs.
- **Psychological**, the moral and social acceptability and perceived consequences of drug use.
- **Economic**, the affordability of drugs.

Physical

Despite assertions to the contrary, the evidence indicates that presently drugs are not accessible to all. Fewer than 50 percent of high school seniors and young adults under 22 believed they could obtain cocaine "fairly easily" or

"very easily."[12] Only 39 percent of the adult population reported they could get cocaine; and only 25 percent reported that they could obtain heroin, PCP, and LSD.[13] Thus, only one-quarter to one-half of people can easily get illegal drugs (other than marijuana). After legalization, drugs would be more widely and easily available. Currently, only 11 percent of individuals reported seeing drugs available in the area where they lived;[14] after legalization, there could be a place to purchase drugs in every neighborhood. Under such circumstances, it is logical to conclude that more individuals would use drugs.

Psychological

In arguing that legalization would not result in increased use, proponents of legalization often cite public opinion polls, which indicate that the vast majority of Americans would not try drugs even if they were legally available.[15] They fail to take into account, however, that this strong public antagonism towards drugs has been formed during a period of strict prohibition when government and institutions at every level have made clear the health and criminal justice consequences of drug use. Furthermore, even if only 15 percent of population would use drugs after legalization, this would be triple the current level of 5.6 percent.

Laws define what is acceptable conduct in a society, express the will of its citizens, and represent a commitment on the part of the Congress, the President, state legislatures, and governors. Drug laws not only create a criminal sanction, they also serve as educational and normative statements that shape public attitudes.[16] Criminal laws constitute a far stronger statement than civil laws, but even the latter can discourage individual consumption. Laws regulating smoking in public and workplaces, prohibiting certain types of tobacco advertising, and mandating warning labels are in part responsible for the decline in smoking prevalence among adults.

The challenge of reducing drug abuse and addiction would be decidedly more difficult if society passed laws indicating that these substances are not sufficiently harmful to prohibit their use. Any move toward legalization would decrease the perception of risks and costs of drug use, which would lead to wider use.[17] During the late 1960s and the 1970s, as society, laws, and law enforcement became more permissive about drug use, the number of individuals smoking marijuana and using heroin, hallucinogens, and other drugs rose sharply. During the 1980s, as society's attitude became more restrictive and anti-drug laws stricter and more vigorously enforced, the perceived harmfulness of marijuana and other illicit drugs increased and use decreased.

Some legalization advocates point to the campaign against smoking as proof that reducing use is possible while substances are legally available.[18] But it has taken smoking more than 30 years to decline as much as illegal drug use did in 10.[19] Moreover, reducing use of legal drugs among the young has proven especially difficult. While use of illegal drugs by high school seniors dropped 50 percent from 1979 to 1993, tobacco use remained virtually constant.[20]

Economic

By all of the laws of economics, reducing the price of drugs will increase consumption.[21] Though interdiction and law enforcement have had limited

success in reducing supply (seizing only 25 percent to 30 percent of cocaine imports, for example)[22] the illegality of drugs has increased their price.[23] Prices of illegal drugs are roughly 10 times what they would cost to produce legally. Cocaine, for example, sells at $80 a gram today, but would cost only $10 a gram legally to produce and distribute. That would set the price of a dose at 50 cents, well within the reach of a school child's lunch money.[24]

Until the mid-1980s, cocaine was the drug of the middle and upper classes. Regular use was limited to those who had the money to purchase it or got the money through white collar crime or selling such assets as their car, house, or children's college funds. In the mid-1980s, the $5 crack cocaine vial made the drug inexpensive and available to all regardless of income. Use spread. Cocaine-exposed babies began to fill hospital neonatal wards, cocaine-related emergency room visits increased sharply, and cocaine-related crime and violence jumped.[25]

Efforts to increase the price of legal drugs by taxing them heavily in order to discourage consumption, if successful, would encourage the black market, crime, violence, and corruption associated with the illegal drug trade. Heroin addicts, who gradually build a tolerance to the drug, and cocaine addicts, who crave more of the drug as soon as its effects subside, would turn to a black market if an affordable and rising level of drugs were not made available to them legally.

Children

Drug use among children is of particular concern since almost all individuals who use drugs begin before they are 21. Furthermore, adolescents rate drugs as the number one problem they face.[26] Since we have been unable to keep legal drugs, like tobacco and alcohol, out of the hands of children, legalization of illegal drugs could cause a pediatric pandemic of drug abuse and addiction.

Most advocates of legalization support a regulated system in which access to presently illicit drugs would be illegal for minors.[27] Such regulations would retain for children the "forbidden fruit" allure that many argue legalization would eliminate. Furthermore any such distinction between adults and minors could make drugs, like beer and cigarettes today, an attractive badge of adulthood.

The American experience with laws restricting access by children and adolescents to tobacco and alcohol makes it clear that keeping legal drugs away from minors would be a formidable, probably impossible, task. Today, 62 percent of high school seniors have smoked, 30 percent in the past month.[28] Three million adolescents smoke cigarettes, an average of one-half a pack per day, a $1 billion a year market.[29] Twelve million underage Americans drink beer and other alcohol, a market approaching $10 billion a year. Although alcohol use is illegal for all those under the age of 21, 87 percent of high school seniors report using alcohol, more than half in the past month.[30] These rates of use persist despite school, community, and media activities that inform youths about the dangers of smoking and drinking and despite increasing public awareness of these risks. This record indicates that efforts to ban drug use among minors while allowing it for adults would face enormous difficulty.

Moreover, in contrast to these high rates of alcohol and tobacco use, only 18 percent of seniors use illicit drugs, which are illegal for the entire society.[31] It is no accident that those substances which are mostly easily obtainable—alcohol, tobacco, and inhalants such as those found in household cleaning fluids—are those most widely used by the youngest students.[32]

Supporters and opponents of legalization generally agree that education and prevention programs are an integral part of efforts to reduce drug use by children and adolescents. School programs, media campaigns such as those of the Partnership for a Drug-Free America (PDFA), and news reports on the dangers of illegal drugs have helped reduce use by changing attitudes towards drugs. In 1992, New York City school children were surveyed on their perceptions of illegal drugs before and after a PDFA campaign of anti-drug messages on television, in newspapers, and on billboards. The second survey showed that the percentage of children who said they might want to try drugs fell 29 points and those who said drugs would make them "cool" fell 17 points.[33] Another study found that 75 percent of students who saw anti-drug advertisements reported that the ads had a deterrent effect on their own actual or intended use.[34]

Along with such educational programs, however, the stigma of illegality is especially important in preventing use among adolescents. From 1978 to 1993, current marijuana use among high school seniors dropped twice as fast as alcohol use.[35] California started a $600 million anti-smoking campaign in 1989, and by 1995, the overall smoking rate had dropped 30 percent. But among teenagers, the smoking rate remained constant—even though almost one-quarter of the campaign targeted them.[36]

In separate studies, 60 to 70 percent of New Jersey and California students reported that fear of getting in trouble with the authorities was a major reason why they did not use drugs.[37] Another study found that the greater the perceived likelihood of apprehension and swift punishment for using marijuana, the less likely adolescents are to smoke it.[38] Because a legalized system would remove much, if not all of this deterrent, drug use among teenagers could be expected to rise. Since most, teens begin using drugs because their peers do[39]—not because of pressure from pushers[40]—and most drugs users initially exhibit few ill effects, more teenagers would be likely to try drugs.[41]

As a result, legalization of marijuana, cocaine, and heroin for adults would mean that increased numbers of teenagers would smoke, snort, and inject these substances at a time when habits are formed and the social, academic, and physical skills needed for a satisfying and independent life are acquired.

Hardcore Addiction

A review of addiction in the past shows that the number of alcohol, heroin, and cocaine addicts, even when adjusted for changes in population, fluctuates widely over time, in response to changes in access, price, societal attitudes, and legal consequences. The fact that alcohol and tobacco, the most accepted and available legal drugs, are the most widely abused, demonstrates that behavior is influenced by opportunity, stigma, and price. Many soldiers who were regular

heroin users in Vietnam stopped once they returned to the United States where heroin was much more difficult and dangerous to get.[42] Studies have shown that even among chronic alcoholics, alcohol taxes lower consumption.[43]

Dr. Jack Homer of the University of Southern California and a founding member of the International System Dynamics Society estimates that without retail-level drug arrests and seizures—which reduce availability, increase the danger of arrest for the drug user, and stigmatize use—the number of compulsive cocaine users would rise to between 10 and 32 million, a level 5 to 16 times the present one.[44]

Not all new users become addicts. But few individuals foresee their addiction when they start using; most think they can control their consumption.[45] Among the new users created by legalization, many, including children, would find themselves unable to live without the drug, no longer able to work, go to school, or maintain personal relationships. In fact, as University of California at Los Angeles criminologist James Q. Wilson points out with regard to cocaine,[46] the percentage of drug triers who become abusers when the drugs are illegal, socially unacceptable, and generally hard to get, may be only a fraction of the users who become addicts when drugs are legal and easily available—physically, psychologically, and economically.

Harming Thy Neighbor and Thyself: Addiction and Casual Drug Use

To offset any increased use as a result of legalization, many proponents contend that money presently spent on criminal justice and law enforcement could be used for treatment of addicts and prevention.[47] In 1995, the federal government is spending $13.2 billion to fight drug abuse, nearly two-thirds of that amount on law enforcement; state and local governments are spending at least another $16 billion on drug control efforts, largely on law enforcement.[48] Legalization proponents argue that most of this money could be used to fund treatment on demand for all addicts who want it and extensive public health campaigns to discourage new use.

With legalization, the number of prisoners would initially decrease because many are currently there for drug law violations. But to the extent that legalization increases drug use, we can expect to see more of its familiar consequences. Costs would quickly rise in health care, schools, and businesses. In the long term, wider use and addiction would increase criminal activity related to the psychological and physical effects of drug use and criminal justice costs would rise again. The higher number of casual users and addicts would reduce worker productivity and students' ability and motivation to learn, cause more highway accidents and fatalities, and fill hospital beds with individuals suffering from ailments and injuries caused or aggravated by drug abuse.

Costs

It is doubtful whether legalization would produce any cost savings, over time even in the area of law enforcement. Indeed, the legal availability of alcohol

has not eliminated law enforcement costs due to alcohol-related violence. A third of state prison inmates committed their crimes while under the influence of alcohol.[49] Despite intense educational campaigns, the highest number of arrests in 1993—1.5 million—was for driving while intoxicated.[50] Even if, as some legalization proponents propose, drug sales were taxed, revenues raised would be more than offset by erosion of the general tax base as abuse and addiction limited the ability of individuals to work.

Like advocates of legalization today, opponents of alcohol prohibition claimed that taxes on the legal sale of alcohol would dramatically increase revenues and even help erase the federal deficit.[51] The real-world result has been quite different. The approximately $20 billion in state and federal revenues from alcohol taxes in 1995[52] pay for only half the $40 billion that alcohol abuse imposes in direct health care costs,[53] much less the costs laid on federal entitlement programs and the legal and criminal justice systems, to say nothing of lost economic productivity. The nearly $13 billion in federal and state cigarette tax revenue[54] is one-sixth of the $75 billion in direct health care costs attributable to tobacco,[55] to say nothing of the other costs such as the $4.6 billion in social security disability payments to individuals disabled by cancer, heart disease, and respiratory ailments caused by smoking.[56]

Health care costs directly attributable to illegal drugs exceed $30 billion,[57] an amount that would increase significantly if use spread after legalization. Experience renders it unrealistic to expect that taxes could be imposed on newly legalized drugs sufficient to cover the costs of increased use and abuse.

Public Health

Legalization proponents contend that prohibition has negative public health consequences such as the spread of HIV from addicts who share dirty needles, accidental poisoning, and overdoses from impure drugs of variable potency. In 1994, more than one-third of new AIDS cases were among injection drug users who shared needles, cookers, cottons, rinse water, and other paraphernalia; many other individuals contracted AIDS by having sex, often while high, with infected injection drug users.[58]

Advocates of medicalization argue that while illicit drugs should not be freely available to all, doctors should be allowed to prescribe them (particularly heroin, but also cocaine) to addicts. They contend that giving addicts drugs assures purity and eliminates the need for addicts to steal in order to buy them.[59]

Giving addicts drugs like heroin, however, poses many problems. Providing them by prescription raises the danger of diversion for sale on the black market. The alternative—insisting that addicts take drugs on the prescriber's premises—entails at least two visits a day, thus interfering with the stated goal of many maintenance programs to enable addicts to hold jobs.

Heroin addicts require two to four shots each day in increasing doses as they build tolerance to its euphoric effect. On the other hand, methadone can be given at a constant dose since euphoria is not the objective. Addicts maintained on methadone need only a single dose each day and take it orally, eliminating the

need for injection.[60] Because cocaine produces an intense, but short euphoria and an immediate desire for more,[61] addicts would have to be given the drug even more often than heroin in order to satisfy their craving sufficiently to prevent them from seeking additional cocaine on the street.

Other less radical harm reduction proposals also have serious flaws. Distributing free needles, for example, does not guarantee that addicts desperate for a high would refuse to share them. But to the extent that needle exchange programs are effective in reducing the spread of the AIDS virus and other diseases without increasing drug use, they can be adopted without legalizing drugs. Studies of whether needle exchange programs increase drug use have generally focused on periods of no longer than 12 months.[62] While use does not seem to increase in this period, data is lacking on the long-term effects of such programs and whether they prompt attitude shifts that in turn lead to increased drug use.

Some individuals do die as a result of drug impurities. But while drug purity could be assured in a government-regulated system (though not for those drugs sold on the black market), careful use could not. The increased numbers of users would probably produce a rising number of overdose deaths, similar to those caused by alcohol poisoning today.

The deaths and costs due to unregulated drug quality pale in comparison to the negative impact that legalization would have on drug users, their families, and society. Casual drug use is dangerous, not simply because it can lead to addiction or accidental overdoses, but because it is harmful per se, producing worker accidents, highway fatalities, and children born with physical and mental handicaps. Each year, roughly 500,000 newborns are exposed to illegal drugs in the womb; many others are never born because of drug-induced spontaneous abortions.[63] Newborns already exposed to drugs are far more likely to need intensive care and suffer the physical and mental consequences of low birth weight and premature birth, including early death.[64] The additional costs just to raise drug-exposed babies would outweigh any potential savings of legalization in criminal justice expenditures.[65]

Substance abuse aggravates medical conditions. Medicaid patients with a secondary diagnosis of substance abuse remain in hospitals twice as long as patients with the same primary diagnosis but with no substance abuse problems. Girls and boys under age 15 remain in the hospital three and four times as long, respectively, when they have a secondary diagnosis of substance abuse.[66] One-third to one-half of individuals with psychiatric problems are also substance abusers.[67] Young people who use drugs are at higher risk of mental health problems, including depression, suicide, and personality disorders.[68] Teenagers who use illegal drugs are more likely to have sex[69] and are less likely to use a condom than those who do not use drugs.[70] Such sexual behavior exposes these teens to increased risk of pregnancy as well as AIDS and other sexually transmitted diseases.

In schools and families, drug abuse is devastating. Students who use drugs not only limit their own ability to learn, they also disrupt classrooms, interfering with the education of other students. Drug users tear apart families by failing to provide economic support, spending money on drugs, neglecting the

emotional support of the spouse and guidance of children, and putting their children at greater risk of becoming substance abusers themselves.[71] With the advent of crack cocaine in the mid-1980s, foster care cases soared over 50 percent nationwide in five years; more than 70 percent of these cases involved families in which at least one parent abused drugs.[72]

Decreased coordination and impaired motor skills that result from drug use are dangerous. A recent study in Tennessee found that 59 percent of reckless drivers who, having been stopped by the police, test negative for alcohol on the breathalyzer, test positive for marijuana and/or cocaine.[73] Twenty percent of New York City drivers who die in automobile accidents test positive for cocaine use.[74] The extent of driving while high on marijuana and other illegal drugs is still not well-known because usually the police do not have the same capability for roadside drug testing as they do for alcohol testing. . . .

Crime and Violence

Legalization advocates contend that *drug-related* violence is really *drug-trade-related* violence. They argue that what we have today is not a drug problem but a drug prohibition problem, that anti-drug laws spawn more violence and crime than the drugs themselves. Because illegality creates high prices for drugs and huge profits for dealers, advocates of legalization point out that users commit crimes to support their habit; drug pushers fight over turf; gangs and organized crime thrive; and users become criminals by coming into contact with the underworld.[75]

Legalization proponents argue that repeal of current laws, which criminalize drug use and sales, and wider availability of drugs at lower prices will end this black market and thus reduce the violence, crime, and incarceration associated with drugs.

Researchers divide drug-related violence into three types: systemic, economically compulsive, and psychopharmacological:[76]

- **Systemic violence** is that intrinsic to involvement with illegal drugs, including murders over drug turf, retribution for selling "bad" drugs, and fighting among users over drugs or drug paraphernalia.
- **Economically compulsive violence** results from addicts who engage in violent crime in order to support their addiction.
- **Psychopharmacological violence** is caused by the short or long-term use of certain drugs which lead to excitability, irrationality and violence, such as a brutal murder committed under the influence of cocaine.

Legalization of the drug trade and lower prices might decrease the first two types of violence, but higher use and abuse would increase the third. Dr. Mitchell Rosenthal, President of the Phoenix House treatment centers, warns, "What I and many other treatment professionals would expect to see in a drug-legalized America is a sharp rise in the amount of drug-related crime that is *not* committed for gain—homicide, assault, rape, and child abuse. Along with this, an increase in social disorder, due to rising levels of drug consumption and a growing number of drug abusers."[77]

In a study of 130 drug-related homicides, 60 percent resulted from the psychopharmacological effects of the drug; only 20 percent were found to be related to the drug trade; 3.1 percent were committed for economic reasons. (The remaining 17 percent either fell into more than one of these categories or were categorized as "other.")[78] U.S. Department of Justice statistics reveal that six times as many homicides, four times as many assaults, and almost one and a half times as many robberies are committed under the influence of drugs as are committed in order to get money to buy drugs.[79] Given these facts, any decreases in violent acts committed because of the current high cost of drugs would be more than offset by increases in psychopharmacological violence, such as that caused by cocaine psychosis.

The threat of rising violence is particularly serious in the case of cocaine, crack, methamphetamine, and PCP—drugs closely associated with violent behavior. Unlike marijuana or heroin, which depress activity, these drugs cause irritability and physical aggression. For instance, past increases in the New York City homicide rate have been tied to increases in cocaine use.[80]

Repeal of drug laws would not affect all addicts in the same way. Addicts engage in criminal behavior for different reasons. A small proportion of addicts is responsible for a disproportionately high number of drug-related crimes and arrests. Virtually all of these addicts committed crimes before abusing drugs and use crime to support themselves as well as their habits. Their criminal activity and drug use are symptomatic of chronic antisocial behavior and attitudes. Legally available drugs at lower prices would do little to discourage crime by this group. For a second group, criminal activity is associated with the high cost of illegal drugs. For these addicts, lower prices would decrease drug-related crimes. For a third group, legally available drugs would mean an opportunity to create illegal diversion markets, as some addicts currently do with methadone.[81]

Legalization advocates point to the exploding prison population and the failure of strict drug laws to lower crime rates.[82] Arrests for drug offenses doubled from 470,000 in 1980 to 1 million in 1993.[83] Some 60 percent of the 95,000 federal inmates are incarcerated for drug-law violations.[84]

Rising prison populations are generated in large part by stricter laws, tough enforcement, and mandatory minimum sentencing laws—policy choices of the public and Congress. But the growing number of prisoners is also a product of the high rate of recidivism—a phenomenon tied in good measure to the lack of treatment facilities, particularly in prison. Eighty percent of prisoners have prior convictions and 60 percent have served time before.[85] Despite the fact that more than 60 percent of all state inmates have used illegal drugs regularly and 30 percent were under the influence of drugs at the time they committed the crime for which they were incarcerated,[86] fewer than 20 percent of inmates with drug problems receive any treatment.[87] Many of these inmates also abuse alcohol, but there is little alcoholism treatment either for them or for those prisoners dependent only on alcohol.[88]

While strict laws and enforcement do not deter addicts from using drugs, the criminal justice system can be used to get them in treatment. Because of the nature of addiction, most drug abusers do not seek treatment voluntarily, but many respond to outside pressures including the threat of incarceration.[89]

Where the criminal justice system is used to encourage participation in treatment, addicts are more likely to complete treatment and stay off drugs. . . .[90]

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Peter Gorman

NO

Veteran Cops Against the Drug War

Howard Woolridge is outside of Utica, New York, heading east on horseback on a beautiful late summer day. He's wearing a T-shirt with the slogan "Cops Say Legalize Drugs. Ask Me Why." For the last 3,000 miles, he's been switching off between his two horses, Misty and Sam. But the T-shirt slogan has stayed the same.

The rangy, good-looking guy is also talking on the cell phone to a reporter back in North Texas. But he interrupts that conversation to speak to someone who pulls up next to him in a car. "That's right—cops say legalize," he tells the newcomer in a deep voice. "Why? Because if we do, we just might be able to keep drugs out of the hands of your 14-year-old."

"Right on!" the motorist shouts, and drives off.

Woolridge is not a lunatic and he's not been out in the sun too long, even if he did cross the United States on horseback in the summer heat. He's a retired law enforcement officer with 18 years on the job who finally decided that the war on drugs was more of a problem than the illicit drugs it was purporting to fight.

He's also a serious long-distance horseman, on the road this time since March 4, when he left Los Angeles for the 3,400-mile ride to New York Harbor. It's the second time Woolridge has crossed the United States to publicize the campaign to repeal most of the drug laws in this country. In 2003 he rode from Georgia to Oregon. When he finished this trip on October 5, looking out at the Statue of Liberty, he was honored by the Long Riders' Guild as only the second person known to have ridden horseback all the way across the country in both directions. And he'll still be wearing one of his "Ask Me Why" T-shirts, the same shirts he's been wearing for six years.

"When I first started wearing it," he says, "people in Texas thought I was crazy. They thought my idea would destroy Texas and America. They believed the government propaganda that millions of people would pick up heroin or methamphetamines and become junkies overnight if you legalized it." But in the last two to three years, he's seen a sea change in the attitude of the American public regarding the war on drugs.

Jailed over Medicinal Marijuana

"At any given Arby's, McDonald's, Rotary Club or veterans hall," he says, "people are overwhelmingly in favor of calling a halt to drug prohibition. Overwhelmingly."

From *The World & I Online*, January 2006.

Many of the houses Woolridge is riding past carry plaques attesting to the Utica area's involvement in the Underground Railroad that once funneled runaway slaves from the south up to Canada. It makes him think about Bernie Ellis, a fellow soldier in the war against the drug war, who has lost his own freedom.

"For 10 years he provided free medical marijuana to three oncologists in the Nashville, Tennessee, area for their patients undergoing chemotherapy. He never once met the doctors, of course; it was all cloak-and-dagger. He'd bring the marijuana to an office worker who'd get it to the patient.

"Well, he finally got busted last year. Now he's looking at five years mandatory federal prison time, though that might go up to 10 because he had a shotgun on his farm when he got busted. And of course his million-dollar farm has been forfeited because he grew the medical marijuana there."

The phone goes quiet for a minute, and there's the sound of a strangled sob. "Sorry. Got a little choked up for a second," he says. He pauses to explain his T-shirt to a motorist, then he's back on the phone talking about Bernie. "This is a guy who broke the law to help people and is now facing the consequences of that. Poor son of a bitch. Next time I see him he'll be in prison."

Woolridge is not a lone ranger in the fight to legalize drugs. He's a founding member of an organization called Law Enforcement Against Prohibition or LEAP, an organization made up entirely of current or former members of law enforcement who feel the drug war's a failure and believe legalization and regulation are preferable to the incarceration of drug users and control of the drug market by organized crime.

Founded in March 2002 by five police officers, LEAP now counts about 3,000 members, from the ranks of policemen, prison guards, Drug Enforcement Administration (DEA) agents, judges and even prosecutors in 48 states and 45 foreign countries. The idea behind LEAP is that, as with the Vietnam Veterans Against the War, the call for an end to the drug war carries more weight when it comes from folks who were in the trenches.

"We're the ones who fought the war," said Jack Cole, LEAP's executive director, who retired from the New Jersey state police as a detective lieutenant after 26 years, including 14 in their Narcotics Bureau, mostly undercover. "And I bear witness to the abject failure of the U.S. war on drugs and to the horrors these prohibitionist policies have produced."

The LEAP Web site provides the statistical backup for that argument. "After nearly four decades of fueling the U.S. policy of a war on drugs with over half a trillion tax dollars and increasingly punitive policies, our confined population has quadrupled," it says. "More than 2.2 million of our citizens are currently incarcerated and every year we arrest an additional 1.6 million for nonviolent drug offenses—more per capita than any country in the world. . . . Meanwhile, people continue dying in our streets while drug barons and terrorists continue to grow richer."

To get that message out, LEAP members have given nearly 1,500 speeches since 2003. And they don't preach to the choir. "We don't do hemp rallies or Million Man Marijuana Marches," said Woolridge. "We do Kiwanis Clubs and PTA meetings and cop conventions. That's where the people we've got to reach go."

To parents and teachers and Rotarians and other cops, LEAP members tell their own stories, about their work and about how they came to feel the drug war was not the answer.

Woolridge, for instance, was a street cop in Michigan for 15 of his 18 years of service, before moving up to the rank of detective. "I didn't work directly with the drug war, in that I wasn't in narcotics," he said. "Still, as a detective I was constantly working with felonies that touched on the drug war. Eight of 10 burglary suspects I dealt with were on crack at the time. They were stealing for drug money."

The burglary victims "were all in real pain," he said. "And I got so fed up with it I began saying, 'Why not let these guys have all the crack they want until they die?' Now I'd say, 'Have all you want for a dollar.' That makes it their choice to live or die. Either way, you don't have people breaking into houses for drug money anymore."

"Dehumanizing" Drug Users

To Cole, who did work directly in narcotics, the whole concept of the war on drugs is wrong. "You declare war, you need soldiers. You have soldiers, they need an enemy. So we've effectively taken a peacekeeping force—the police—and turned them into soldiers whose enemies are the 110 million people who have tried illegal substances in the U.S."

To be an effective soldier, you've got to dehumanize your enemy. "When I started out in narcotics I believed everything they told me," said Cole, a no-BS kind of guy. "Drugs were bad. The people who did them were less than human. I was all for locking them up."

Worse, he said, he and others often applied what they called a little "street justice" to the people they were arresting. "In our training we were taught to believe that drug users were the worst people in the world and whatever we did to them to try to stop their drug use was justified."

What they did was kick in home or apartment doors and have every man woman and child inside lie on the floor. If people didn't cooperate immediately, they were thrown to the floor. Then the place was ransacked. "When we searched for drugs we pretty much did as much damage as possible. We'd break bureaus, turn over beds, smash mirrors, throw things on the floor. Didn't matter, because the people there weren't humans, right? And then, if we did find any drugs, we'd arrest everyone in the house: parents, sisters, brothers. And since we'd already kicked the door down when we came in, it would be left open and anyone who wanted to enter could steal what they wanted. We never cared about that."

Street justice didn't stop there, said Cole. In court, he said officers routinely changed testimony to insure convictions—times, locations, amounts of drug, "anything that couldn't be checked to catch the officer in a lie."

It didn't take long for Cole to reach the conclusion that the drug war and its street justice weren't for him. He was mostly going after small-timers, and his job, he came to feel, was to insert himself into voluntary, private business transactions. "To do that, I had to become someone's confidant, their best friend. And once I was, I would bust them."

But he, too, got hooked—on the adrenaline high of the game. "By the time I came to my senses, I was working on big-timers, and pitting your mind against theirs was a great rush," he said. "Also, it was hard to quit because we were considered by the public and our peers as heroes. And then, given that I'd worked with a lot of cops who applied bad street justice, I let myself believe that at least if I was the one catching [the dopers] they'd be legally caught, and I'd tell the truth and justice would prevail."

He laughed. "Know what was the worst? When I realized that I liked and respected a lot of the bad guys much more than I liked or respected the guys I was working with."

Prohibition: Has It Worked by Its Own Standards?

The stated goals of the war on drugs are to lower drug consumption, reduce addiction and dependence, and decrease the quality and quantity of illegal drugs available on American streets. Those have been the goals since President Richard Nixon first declared the war as part of his attempt to look tough on crime during the presidential election in 1968.

Since then, the strategy of prohibition has been ramped up by every succeeding administration. Few people in this country—or anywhere—have escaped the effects of the U.S. drug war, from the toll of burglaries and car thefts committed to pay for drugs, to the tax bills for prisons to hold the increasing percentages of citizens locked up for nonviolent drug-related crimes, to the millions of kids who've grown up without one or both parents as a result of drug convictions and drug addictions. Drug-related murders reach into the tens of thousands in this country, and the toll is much higher in drug-producing and-shipping nations, from Colombia to Afghanistan to Jamaica. Thousands of peace officers have died fighting the drug war. Whole countries have found themselves under the boot of the illegal drug industry, their governments controlled or intimidated by drug cartels, their politicians and police forces infiltrated, and honest public servants assassinated.

The assumption in American drug policy has always been that those are the impacts of illegal drugs themselves. But LEAP members have come to believe those are the wages not of drugs, but of the war on drugs. And they want the rest of the country to look closely at the costs of that strategy and what they see as its failures.

Despite the billions of dollars spent on the fight in nearly 40 years, LEAP members point out, the drug war has failed on every one of its own stated goals.

Drug consumption, for instance, shows little sign of dropping. Whereas in 1965, according to the Drug Enforcement Administration, fewer than 4 million Americans had ever tried an illegal drug, the figure is now more than 110 million. In 2000, the federal government estimated that there were about 33 million people in this country who had used cocaine at least once—a more than 700 percent increase over the total number of people 35 years before who had used any illegal drug.

Dependence and addiction? According to the Office of National Drug Control Policy (ONDCP), the federal agency that sets and administers U.S. drug policy, in 2002 more than 7 million Americans were either dependent on or abusing illegal substances—nearly double the number of people who had even tried such drugs when Nixon declared his war. Heroin addicts have jumped from a few hundred thousand in the 1960s to between 750,000 and one million today according to the ONDCP.

Attempts to decrease the quality of available drugs also have failed. In 1970, average street heroin in this country had a potency of 1 to 2 percent. In 2000, according to the DEA, that purity figure was 36.8 percent—although U.S. drug czar John Walters did praise anti-drug forces recently for reducing the strength of street heroin coming from South America to 32.1 percent. Similarly, street cocaine was roughly 2 to 4 percent pure in 1968—and a whopping 56 percent in 2001, according to the ONDCP. The average strength of the active ingredient (THC) in marijuana sold in this country more than doubled between the late 1970s and 2001.

Nor is there much good news on drug quantities and availability, at least not judging by the numbers of users and the prices on the street. The ONDCP estimates that Americans' use of cocaine and crack has dropped from 447 tons in 1990 to 259 tons in 2000. But the price of cocaine has dropped from $100 per gram in 1970 to $25 to $50 per gram in 2002—for cocaine that was many times stronger. At the wholesale level, a kilogram of cocaine (2.2 pounds at roughly 25 percent purity) cost $45,000 in New York City in 1970. Today, in any large city in the U.S., it costs less than $15,000 and it's about 65 percent pure.

Only marijuana showed a price increase. In 1970, a bag of Mexican ditchweed (roughly an ounce) cost $20. In 2005, that same bag costs nearly $50. But most Americans who can afford it don't smoke Mexican ditchweed. They smoke U.S.-grown sinsemilla, which runs up to $400 per ounce.

With availability, price, and quality making drugs as attractive as ever, the only other barometer of the success of the drug war might be if it's stopped anyone from trying drugs—an area where programs like DARE, a huge effort targeted at schoolkids—have had a noted lack of success. "It didn't stop George Bush, Bill Clinton, Al Gore or me from smoking pot," said Woolridge. "I don't think it probably ever stopped anyone."

Collateral Damage

The cops and prosecutors and judges who belong to LEAP think the bad results of the drug war go beyond its policy failures, even beyond the lives lost to drug violence and incarceration.

"Let's be honest," Cole said. "The war on drugs has taken an incredible toll in terms of the loss of our civil liberties, particularly in terms of the Fourth Amendment, from property forfeiture laws that fund law enforcement agencies to warrantless searches. It's promoted institutionalized racism, and it's created a systemic level of corruption among law enforcement unheard of prior to its initiation."

Law enforcement veterans like Cole and Woolridge believe the increase in institutional racism is one of the deepest wounds. They point out, for instance, that crack users (generally inner-city blacks) are subject to mandatory

minimum sentences of five years for possession of five grams of crack, while powder cocaine users (generally middle-class whites) have to be caught with 500 grams to get the same mandatory sentence.

While ONDCP statistics show that whites use more than 70 percent of all illegal drugs, blacks are sentenced to prison for drug crimes seven times more often than whites.

"Imagine," said Cole, "one of the most racist places in the world: South Africa, 1993. At that time, the South African government was incarcerating black males at the rate of 859 per 100,000 population." And yet in 2004 in the United States—with more people and a higher percent of its population in prison than any country in the world—the incarceration rate for black males was 4,919 per 100,000 (compared to 726 overall).

He pointed to an FBI estimate that one in three black male babies born in the U.S. in 2004 have an expectation of going to prison during their lifetime. "That just blows my mind," he said.

LEAP members believe that a large percentage of the corruption found in U.S. police agencies is tied to drugs. In Texas, recent drug-related scandals included the Dallas fake-drugs operation, in which a snitch was paid more than $200,000 over a two-year period to provide local cops with drug dealers. The "dealers" turned out to be nearly all illegal immigrants; their "drugs" turned out to be crushed sheetrock and pool chalk.

And then there was Tulia, in the Texas Panhandle, in which a multi-county drug task force hired a corrupt deputy sheriff to rid the town of its drug problem; when it turned out there wasn't one, the deputy created one, and more than 40 people wound up arrested.

LEAP spokesmen see both of those high-profile Texas drug corruption cases as indicative of a much wider problem: officers cutting corners to get the arrest numbers that will keep the fuel line of federal and state anti-drug funding open. And those scandals don't begin to touch on the border patrol agents, police, and other law enforcement officials who have been corrupted because the drug money is so available.

More Law-Enforcement Corruption

Rusty White, another LEAP member, is a self-described redneck who grew up hard in east Texas and now, after many stops in other states and countries, lives just north of Fort Worth. At 13, he saw a friend shoot up black-tar heroin and decided he didn't like hard drugs. By 16, he'd been to juvenile detention five times and gotten kicked out of his high school "because I was traveling with an older crowd of bad-ass kids that I was trying to live up to."

In quick succession, he married, became a father, joined the Army and got divorced. After a second tour with the Army, he ended up in Florence, Arizona, where he went to work at the state penitentiary, which, he said, was "one of the most violent prisons in the United States at that time."

From 1973 to 1978, he worked as a guard on maximum security, death row, and administrative segregation cellblocks, dealing with horrors daily. "Life meant very little to those inside the walls," he said, noting that two

prison guards were killed and mutilated by inmates in 1973. "And drugs were one of the biggest problems we had. They were the cause of most of the deaths and power struggles." And most of the drugs were brought in by family members of prison workers. "I got fed up with the corruption and left to go into the oil-drilling business in 1979," he said.

After working overseas for several years, White moved to Oklahoma. And there, he said, he got to see the war on drugs from a very different vantage point. "The county I lived in had a sheriff who controlled the drug market. And he did so with force. It was common knowledge that if you crossed him he could be—and had been—deadly."

But the same sheriff regularly flew around the county in National Guard helicopters, providing photo ops for news crews to show how tough he was on drugs. "The only thing he was getting rid of was the competition," said White disgustedly.

His only personal encounter with the sheriff and his machine occurred when White's brother-in-law, a small-time pot dealer, was busted. "He was poor, didn't have a car that ran, and was living off [government] commodities. Yet he was going to be played by the sheriff as a drug-dealing kingpin," the former prison guard said.

"Anyway, he's the father of three little ones, all younger than six, and when the police arrived, he offered to go with them willingly. But he asked that his kids be allowed to stay with an uncle who was there rather than dragging them down to the station. Well, you know how people feel about 'drug dealers.' The police said no, the kids were coming to the station to watch their father get busted, and then they'd be released to the uncle."

When the man's trial came up, White said, it turned out the district attorney didn't have any evidence against him as a big-time dealer. Nonetheless, he was offered a plea deal: Admit to being a big dealer and get a one- to three-year sentence. If he took it to trial, however, the prosecutor promised he'd ask for a full 10 years.

"He copped to the plea. But to see him struggle with having to lie in front of his kids and admit to something he hadn't done—well, I sort of snapped and screamed at the prosecutor and asked him if he'd thought he'd earned his money that day and why he was playing God, and he looked at me and answered, 'Because in this county, I am God.'"

A couple of years later, White said, the DA went back into private practice and shortly thereafter was arrested and convicted for dealing methamphetamines. "How the sheriff escaped that net, I don't know," White said. "But the thing to remember is that . . . this sort of thing is happening every day in the war on drugs, all over the country. And that abuse of trust and power is far more harmful to Americans than drugs could ever be."

No Place for "Anyone with a Conscience"

Shortly after his brother-in-law's conviction, White went back to work in the prison system, and became a drug-dog trainer and handler. It was the sort of work White said he was meant to do. "I tracked several escapees from the

prison and even some cop killers using my track K-9s. We helped departments all over the state. I'd be sent to prisons to look for drugs—I had no problem with that. But the more we were used with other police organizations the more my conscience started to become a problem."

Two incidents stick in White's mind. Once while his partner was helping another officer, part of a joint was discovered in the ashtray of an old pickup belonging to an elderly man. The dogs were brought in, and in the camper shell on the back of the truck in which the old man lived the dogs sniffed out a briefcase with more than $9,000 in it. Because it was a drug dog that had alerted on it, the money was confiscated. "And they just stood around laughing as the old man begged them not to take his life savings. It just made me sick and ashamed. Heck, it's common knowledge that over 90 percent of the paper money in this country is tainted with a drug scent a dog can find. But using that to rob our people disgusts me. Heck, if you walk any K-9 into a bank vault the dog will mark on that money, too. How come that money isn't confiscated?"

The second incident occurred one night when White and his drug dog were called to help a local police department search a house for drugs. When he pulled up to the house, he asked to see the warrant. The officer told him it wasn't there yet but to go ahead and start the search, and it would be there shortly. "I told him that's just not how it works. I needed the warrant for the search to be legal. So I put my K-9 back into the truck and brought him back to the kennel. And then I got called on the carpet for refusing to assist."

White thought getting into trouble for following the law he'd sworn to uphold was just too much, so he quit. "Heck, there was so much corruption, even among K-9 handlers. If they didn't want someone with drugs caught they'd say the dog didn't mark. If they did, well, we heard of cases where guys went so far as to 'salt' the areas their dogs were searching to make sure someone got busted. It was so bad that, being honest, you couldn't do it. . . . I don't think anyone with a conscience can be part of law enforcement anymore."

Richard Watkins saw the same corruption inside prison that White did, but from a unique perspective. A decorated Vietnam veteran with a Ph.D. in education, Watkins worked at Texas' Huntsville prison for 20 years; the last several as warden of Holiday Unit, a 2,100-bed facility housing a range of criminals from nonviolent to violent/maximum security.

He was originally hired to revamp and professionalize the correctional officers training program—something the prison system was forced to do by federal mandate, and which Watkins said was badly needed. "It was just horrible. Corrupt, bad, just plain horrible," he said.

Watkins had always had reservations about the war on drugs. He figured the drug dealers wouldn't go away as long as there was a market. And looking at this country's experience with Prohibition, "and how that created mobsters and criminal gangs," he figured that legalizing drugs made more sense. When selling and drinking booze became legal in this country again, he said, "you had so much more control of it. You had supporting laws that managed the use of alcohol."

Watkins was first exposed to drugs in Vietnam. He didn't use them—he preferred alcohol—but he saw a lot of other guys getting high on marijuana and other drugs. Many of those men wound up in prison when they came home

with addiction problems. "And in prison, you could always get whatever drugs you wanted. Heck, we arrested a mom one time who was putting a lip-lock on her son to pass him a balloon full of heroin. But most of the drugs came in through the guards. Drugs are packaged so small, it's almost impossible to keep them out. Think about that: If you can't keep drugs out of a maximum-security prison, you can't keep them out of schools or anywhere else."

Once drugs land someone in prison in Texas, he said, life's prospects get a lot dimmer. "We've got these minor players put in with professional criminals. If they weren't criminals going in they damn sure are when they get out. Imagine a system where we put people into a society that's really a training ground for criminals, then don't provide them with either schooling or treatment, then put them back on the streets where they came from. Do you really expect them to be reformed? Life doesn't work that way."

He wishes people wouldn't make the decision to use drugs. "But if they did use them, I wouldn't put them in prison. I'd rather see the money we spend on prisons going to give these kids the tools they need to make better choices."

Voices Opposing LEAP's Perspective

You might imagine that it would be easy to find law enforcement agencies and personnel who oppose LEAP's call for legalization and regulation as an alternative to the war on drugs. But neither the FBI nor the DEA would discuss the subject.

"Our job is to stop the flow of illegal drugs both at home and abroad, as well as to stop our citizens from wanting to use them, through education and prevention methods," said an ONDCP representative. "We will not discuss legalization or any organization which thinks that would be a solution."

Jack Cole wasn't surprised. "They're good soldiers," he said. "They're not allowed to question their commands. Our job is to simply have their commanders change their marching orders."

Mike Smithson, who runs LEAP's speakers bureau, said he's made more than 100 attempts to get law enforcement and drug policy officials to come out and debate LEAP, "and we've only been taken up on it five times. Policymakers generally say that debating us will lend us credence. We think they're just afraid. How can they defend a policy that is already being defended by every major drug dealer, cartel and drug-producing government worldwide?"

Woolridge says that on his entire ride from Los Angeles he's talked to only two officers who disagreed with LEAP's point of view. "One guy thought we'd destroy America if we legalized drugs. He was so angry when he couldn't find anything to write me a ticket for that he gave me the finger as he drove away. And there was a state trooper with 22 years on the job who told me to take off my shirt because it said 'Cops say legalize drugs,' and he didn't agree with that. I told him go make up his own shirt."

One person did agree to discuss his opposition to LEAP's stand was Sheriff John Cooke of Wells County in Colorado. Cooke is a member of a Rotary Club at which Howard Woolridge spoke. He was so taken aback by the idea of legalizing drugs that he demanded equal time and recently spoke to the Rotary Club himself.

"In my opinion, there are several reasons not to legalize drugs," Cooke told Fort Worth Weekly. First of all, when people say you're going to eliminate the black market, does that mean you're going to sell drugs to 12- and 15-year olds? Because if you don't, someone will. Law enforcement surely hasn't done a good job at keeping alcohol and cigarettes out of the hands of kids, so what makes them think they'll do any better with drugs? And if you don't sell drugs to them, there will be a black market created to sell to them. So I don't buy the end of the black market theory.

"Secondly, we already have social ills from the legal use of alcohol and tobacco. Why on earth would we want to turn other addictive substances loose on the public?

"Thirdly, these LEAP folks want to throw in the towel, say we've lost the drug war. But the thing is that I think we're winning the war on drugs. I think drug use is down. I think if we keep at it, we will win.

"Then there's the question of use. Right now, I believe that the threat of the hammer of law enforcement is keeping a great many people from doing drugs. The threat of prison time is a big hammer. I think if we legalized you'd see the number of people doing drugs in this country skyrocket. I believe we'd have a drug-dependent society . . . and I don't want to see America as a drug-dependent country."

Michael Gilbert, director of the Department of Criminal Justice at the University of Texas at San Antonio, said he doubted that there would be any sizeable black market aimed at teens if drugs were legalized. Gilbert is a LEAP member who worked in prisons—including Leavenworth—and with Justice Department agencies for more than 20 years.

"The reason there's so much money in the black market is not because of the small portion of destabilized street addicts we have, or even kids experimenting with drugs. It's because you have long-time productive millions [of people] who regularly purchase small quantities of the drugs of their choice but they don't use them in a way that becomes destructive to their lives," he said. "They're working, paying their taxes and so forth. The real money is from the enormous number of middle-class people who use drugs. So while you might still have a small market of teens purchasing drugs, it wouldn't be large enough to fund criminal enterprises as it does today."

While few policy makers will discuss the benefits of drug prohibition, several well-known former policy makers have come out against it. Among them are Nobel Prize-winning economist Milton Friedman, a former member of President Reagan's Economic Advisory Board; former Secretary of State (under Ronald Reagan) George P. Shultz; former governor of New Mexico Gary Johnson; former Baltimore Mayor Kurt Schmoke; and U.S. Rep. Dennis Kucinich of Ohio, a former presidential candidate.

Benefits of the LEAP Solution

None of the LEAP members interviewed for this article believes abusing drugs is a good choice. But that's different, they say, from the legal system further ruining people's lives because of that bad choice. They also figure that, like tattoos,

hair color decisions, and bad marriages, drug use is a poor choice that society should only care about when it hurts other people. In town, running around in your yard naked and screaming at 4 a.m. breaks the social contract. On a ranch where no one else can see or hear, few people would care about it. Likewise, LEAP members figure, if you can do drugs and not break the social contract, go ahead. And in fact, the federal government figures that 72 percent of chronic drug users continue to function well in society, without harming others.

Even considering the harm that drugs can cause, however, LEAP members believe that the war on drugs is even more harmful. Legalizing drugs, on the other hand, would take profits out of the hands of criminals and hugely reduce the need for people to commit crime to pay for drugs, they say. Regulation would take drug manufacture out of the hands of bathtub chemists and put it into the hands of real chemists, eliminating many of the deaths from bad drugs—much like the end of Prohibition did for deaths from homemade booze. HIV and hepatitis C, rampant among needle-sharing junkies, could be significantly reduced with the availability of clean needles, reducing a major health-care burden for the country.

"Don't forget my favorite," Woolridge said. "If as Bush said, drug money funds terrorists, [then] legalizing drugs would take half a billion dollars a day out of Afghanistan alone, much of which is going to al Qaeda to buy weapons to be used to kill our boys. We could eliminate that overnight."

Legalization, in fact, would probably not increase drug use long-term, many believe—especially since nearly half the population has already tried it. "In all likelihood," Watkins said, "you would see a spike in use as we did with the end of alcohol prohibition. But that normalized pretty quickly, and would probably be the same with drugs. There would be a period of experimentation that would level out, and we'd be left with all the benefits and none of the negatives."

It was Sunday afternoon and Howard Woolridge and Misty were still in upstate New York, having made it from Utica to a ghetto in Schenectady. Woolridge was back on the phone again, when a woman approached him.

"What do you mean cops say legalize drugs?" she could be heard asking.

"Just that. Let's legalize drugs, take them off the street corner."

"What kind of drugs?"

"Heroin, crack, methamphetamine, anything you can think of."

"Are you crazy? I don't want my kids doing those drugs!"

"Neither do I," he told her. "They're no good. But that doesn't keep them from being sold on the corner in this very neighborhood, does it? I'd legalize them and get them into pharmacies. Keep your kids from being shot while walking down the street."

There was a pause and then she laughed. "I never thought of it that way before. You're making me think now."

POSTSCRIPT

Should Laws Against Drug Use Remain Restrictive?

Kleber and Califano assert that utilizing the criminal justice system to maintain the illegal nature of drugs is necessary to keep society free of the detrimental effects of drugs. Loosening drug laws is unwise and dangerous. They argue that international control efforts, interdiction, and domestic law enforcement are effective and that many problems associated with drug use are mitigated by drug regulation policies. They maintain that restrictive drug laws are a feasible and desirable means of dealing with the drug crisis.

Gorman charges that restrictive drug laws are highly destructive and discriminatory. He professes that if drug laws remain stringent, the result would be more drug users in prison and that drug abusers and addicts would engage in more criminal activity. Also, there is the possibility that more drug-related social problems would occur. Gorman concludes that society cannot afford to retain its intransigent position on drug legalization. The potential risks of the current federal policies on drug criminalization outweigh any potential benefits. Society suffers from harsh drug laws, says Gorman, by losing many of its civil liberties.

Proponents for less restrictive drug laws argue that such laws have not worked and that the drug battle has been lost. They believe that drug-related problems would diminish if more tolerant policies were implemented. Citing the legal drugs alcohol and tobacco as examples, legalization opponents argue that less restrictive drug laws would not decrease profits from the sale of drugs (the profits from cigarettes and alcohol are incredibly high). Moreover, opponents argue, relaxing drug laws does not make problems associated with drugs disappear (alcohol and tobacco have extremely high addiction rates as well as a myriad of other problems associated with their use).

Many European countries, such as the Netherlands and Switzerland, have a system of legalized drugs, and most have far lower addiction rates and lower incidences of drug-related violence and crime than the United States. These countries make a distinction between soft drugs (those identified as less harmful) and hard drugs (those with serious consequences). However, would the outcomes of less restrictive laws in the United States be the same as in Europe? Relaxed drug laws in the United States could still be a tremendous risk because its drug problems could escalate and reimposing strict drug laws would be difficult. This was the case with Prohibition in the 1920s, which, in changing the status of alcohol from legal to illegal, produced numerous crime- and alcohol-related problems.

Many good articles debate the pros and cons of this issue. These include "Who's Using and Who's Doing Time: Incarceration, the War on Drugs, and

Public Health," by Lisa Moore and Amy Elkavich (*American Journal of Public Health,* September 2008); "Too Dangerous Not to Regulate," by Peter Moskos (*U.S. News and World Report,* August 4, 2008); "Reorienting U.S. Drug Policy," by Jonathon Caulkins and Peter Reuter (*Issues in Science and Technology,* Fall 2006); "No Surrender: The Drug War Saves Lives," by John Walters (*National Review,* September 27, 2004), the current director of the Office of National Drug Control Policy; "Lighting Up in Amsterdam," by John Tierney (*New York Times,* August 26, 2006); "What Drug Policies Cost: Estimating Government Drug Policy Expenditures," by Peter Reuter (*Addiction,* March 2006); "An Effective Drug Policy to Protect America's Youth and Communities," by Asa Hutchinson (*Fordham Urban Law Journal,* January 2003); and "The War at Home: Our Jails Overflow with Nonviolent Drug Offenders. Have We Reached the Point Where the Drug War Causes More Harm Than the Drugs Themselves?" by Sanho Tree (*Sojourners,* May–June 2003).