

Drug Wars: Legalization Gets a Hearing

A small number of politicians and academics ask that a strategy of taking crime out of drugs be explored



This is the eighth in a series on drug addiction.

WHILE CONGRESS IS BENT on escalating the war on drugs, a handful of political and academic leaders have raised a provocative alternative—a peace initiative, of sorts. They say the cheapest and cleanest way to reduce drug-related crime would be to do away with the laws that make drug use a crime. Their assumption is that society would be better off if it did not try to stand between the drug buyer and his habit. Even if the number of drug users were to increase as a result of relaxing criminal sanctions, they ask, wouldn't it be worth it just to get rid of the crime?

The question cannot be answered with any precision, of course, because the number of new addicts this policy would create cannot be tabulated, nor can the potential decline in violence. But it is interesting to hear the question asked, even if it is asked in

frustration, and to listen to the answers.

Even in ordinary times, it takes courage to suggest a policy reversal in so sensitive an area. In an election year, few politicians want to talk about it. Thus, when the subject came up earlier this year, the chief drug policy board in Congress gave it a brush-off. The Select Committee on Narcotics Abuse and Control, chaired by Representative Charles Rangel (D-NY), refused to hold hearings on such proposals. "I strongly object to even the mention of legalization as an option," Rangel wrote at one point.

But a discussion grew up outside the committee anyway, and in the heat of a television debate, Rangel offered to hold a hearing. The date has now been set for 29 September. Rangel intends to grill the witnesses, and, an aide says, to see that this idea is "laid to rest once and for all."

Kurt Schmoke, the recently elected black mayor of Baltimore, is the prime mover behind the political debate. He spoke to the U.S. Conference of Mayors in April about the violence created by the illicit drug trade and about his frustration at seeing so much time, money, and labor devoted to what has

proved to be a fruitless endeavor. As a former U.S. prosecutor, he speaks with authority on this point, and he reflects a widespread sense of malaise in the enforcement community. It is time to consider new ideas, he says, including removing police from the drug beat.

Other writers and academics have gotten attention by raising this idea this year, notably the editors of the *Economist*, assistant professor Ethan Nadelmann of Princeton University's Woodrow Wilson School of Public and International Affairs, and advocates of minimal government like author William F. Buckley, Jr., and economist Milton Friedman. But few elected officials have. Those who support Schmoke publicly would hardly fill a closet. They include Representatives Steny Hoyer (D-MD), Fortney Stark (D-CA), and James Scheuer (D-NY). An aide to Stark insists that there is "a host" of sympathetic but silent support in Congress.

Schmoke will be the lead witness at the hearing later this month.

According to Princeton's Nadelmann, reformers span a wide spectrum of opinion, but they aim to find a consensus before charging into battle.

One point that seems to appear in every reform scheme is that drug users (as opposed to dealers) should not be treated as criminals, but as victims. There are problems with this notion, such as the fact that dealers and users tend to be the same people. But the effort to make a distinction persists, and it has a powerful basis in pragmatism. Many mayors and prosecutors, like Schmoke, would like to be relieved of the chore of

BLOOM COUNTY / By Berke Breathed

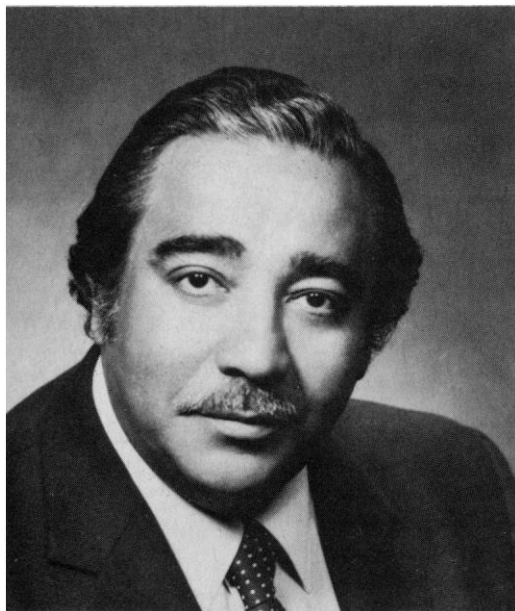


pushing less serious drug cases through the criminal system.

They would like at least to reduce the volume. It is a Sisyphean task that seems to grow bigger and less rewarding each year. In some cities, routine drug indictments make up 50% or more of the criminal work load. Meanwhile, state and federal prisons are packed to capacity so that convicts must be released early to make room for new arrivals.

A study of drug abuse in Washington, D.C., conducted by the Rand Corporation this year illustrates the trend. The report finds that arrests for all drug violations in the city increased by 70% between 1981 and 1986, and that a crackdown on drug sales was "effectively supported by all elements of the criminal justice system." In 1986, over half of all felony prosecutions were made, and more than a third of all new prisoners were sentenced, on drug violations. The minimum sentence during the period 1981-1986 increased 465%, from 5.5 months to 25.6 months. Despite this blitz, the authors conclude, "There is no evidence that the District's intensified enforcement efforts have reduced drug abuse in the short run. Instead, drug abuse, along with violence and crime, seems to be on the upswing."

The courts are overloaded, says Karst Besteman, executive director of the Alcohol and Drug Problems Association, and "you reach a point where criminal sanctions don't have an effect any longer." Besteman is "not a proponent of legalization," but he finds overwhelming evidence that enforcement is failing to do the job, and that "a better way to do this" would be to "conceptualize it as a public health problem rather than a criminal problem. He claims the Senate has not



Charles Rangel. New York congressman at first refused to hold hearings on legalization.

examined the drug problem, except as an "election year emergency," in more than a decade. In their impatience, he says, leaders have failed to see the complexities.

This moderate view is supported by most reformers, as is the plea of medical professor Steven Jonas of the State University of New York at Stony Brook, that policy be made more coherent. Americans live in a culture that promotes drug taking on television and in printed advertisements, through the medical profession, and even among the vitamin-eating health faddists. In order to control street drugs adequately, Jonas argues, "We have to deal with all the drugs together and develop a generalized program," citing controls on advertising and limits on the availability of liquor by curtailing late-night alcohol sales as examples. Controlled official sales of street drugs might be part of the agenda.

Some, like legal expert Arnold Trebach of American University in Washington, D.C., argue for a more modest liberalization. He would turn the drug problem over to the physicians in the belief that they would be likely to make more humane and individually correct decisions.

"The deviants in any modern society, in statistical terms, are those who take no drugs," he writes in *The Heroin Solution*. "National laws and social policies, therefore, must recognize that millions of people throughout the world will continue to use licit and illicit psychoactive drugs and that millions will become dependent on them." The goal, Trebach writes, is to "help users create as little social harm as possible," and he believes that "doctors should be legally empowered to prescribe heroin and all other opiates to the organically ill and the addicted."

Others, like Nadelmann, frankly advocate legalization. He declares in an article in *Foreign Policy* this spring that allowing drug sales would bring a dramatic drop in organized crime and petty robberies, reduce official corruption, improve relations with Latin America, and sharply cut U.S. drug enforcement costs, which he puts at \$8 billion a year.

He concedes that if drugs became easier to buy, the number of addicts might increase. However, citing projections from a 1986 survey sponsored by the National Institute on Drug Abuse, he asserts that "the vast majority of Americans who have used illicit drugs have done so in moderation. "There is good reason to assume that even if all the illegal drugs were made legally available," Nadelmann writes, "the same cultural restraints that now keep most Americans from becoming drug abusers would persist and perhaps even strengthen." But in a



Kurt Schmoke. Baltimore mayor says time to consider new ideas in combating drugs.

telephone interview, he said that the question of the potential future rate of abuse is "the big unknown variable" that people worry about. But he is confident that the new problems caused by legalization would be dwarfed by the benefits.

The data are equivocal on this important issue. Both advocates and opponents of decriminalization point to America's experience with Prohibition to support their case. Advocates describe the attempt to outlaw liquor as an abject failure, seeing in it the lesson that drug-related crime and corruption could be done away with, just as easily as was the gangsterism of the 1920s, by changing the law. Opponents stress the public health benefits of Prohibition. They point out that less alcohol was consumed, rates of cirrhosis of the liver went down, and fewer drinkers were committed to psychiatric wards during the 1920s. They also cite the growth in alcohol use since Repeal—there are an estimated 110 million drinkers in the United States now—and raise the specter of a cocaine or marijuana culture growing as large. Recent research shows that cocaine, in addition to being more quickly habit-forming than alcohol, may also be more rapidly damaging to the body.

It is just as hard to draw lessons from other nations as from the past. The "British system" of heroin maintenance, often cited as a humane way to deal with addicts, actually ended in 1967 after the medical establishment became embarrassed by a handful of drug-peddling doctors.

Since then, addicts who wish to be "maintained" on drugs must register for help at designated clinics. Over time, British treatment methods have begun to resemble those

in the United States. Most addicts supplied by the state now get methadone; less than 100 still receive heroin. Clinicians lean on their patients to quit drugs altogether. Meanwhile, a healthy black market in heroin has sprung up outside the legal system.

The Netherlands is also cited as having a commonsense approach. There, many kinds of street drugs are available on a quasi-legal basis at cafés in a designated section of town. These places are described as seamy and unattractive, inhabited by lowlife, not the focus of cultural attention. Although addicts from other countries are attracted, the citizens of the Netherlands have not been swept up in a drug craze, observers believe.

However, the Dutch and American cultures differ sharply, according to Peter Reuter, a researcher at the Rand Corporation. Only 6% of the respondents to a school survey in the Netherlands in 1984 said they had used marijuana in the preceding year—one-tenth the U.S. rate. But it is risky to make comparisons across cultures or over time.

Above all, it is important to be specific about which drugs are being considered for legalization, according to Reuter. For example, it would be “irresponsible” to suggest that anyone be allowed to use PCP (phencyclidine), an extremely destructive chemical that seems to trigger violent behavior in some. Yet it might make sense to decriminalize marijuana. What about cocaine, the one that is causing the trouble today?

The researchers who know cocaine best and spend the most time treating addicts seem to oppose any step that would make it easier to obtain. Herbert Kleber, founder of a treatment clinic in New Haven and professor of psychiatry at Yale University, is typical of this group in his rejection of decontrol schemes. He has called cocaine “clearly the most addictive drug that I’ve encountered.” If it were legalized, he would expect more addiction and more crime. Because the difference between the production cost of cocaine (\$3 per gram) and the market price (\$60 per gram) is so great, he says, the government would find it very difficult to underprice the criminal peddlers. If the price were set high, criminals would continue to prosper. If it were set low, every schoolchild could afford it.

“We don’t need a change in the law,” says Kleber. “We need resources for treatment.” Because funds are short, volunteers for treatment in New Haven must now wait 4 to 6 months to be taken in. Leaders of drug treatment programs say they would not be put out of business by legalization. Just the opposite; they expect waiting lists would grow even longer.

One powerful force that might bring the cocaine plague to an end, some analysts say, is the unpredictable current of fashion. Once a drug gets a reputation for being ugly and dangerous, its popularity declines—rapidly among middle-class users and more slowly among the poor.

This is perhaps what happened to the “heroin epidemic” of the 1960s, which seemed about to sweep the nation, but stabilized in the 1970s to a population of 150,000 down-and-out addicts. Surveys hint that cocaine use has peaked, too, and that the increase in cocaine demand in recent years does not represent a big increase in the number of users, but reflects a rise in the amount of drug being consumed per addict.

If it is true that the cocaine fad is running downhill just as society is mobilizing to battle it, the scenario would seem to fit neatly into a pattern described by David Musto, psychiatrist and historian at Yale. In his classic description of the boom and bust periods of drug enforcement, *The American Disease*, Musto suggests that public attitudes go through a regular cycle: experimentation and promotion of new drugs by enthusiasts, followed by widespread use and tolerance of abuse, disillusionment, and finally prohibition and sharp intolerance of abusers.

“There is reason to believe we are in a period of growing intolerance,” Musto says. “Law enforcement is now the favored solution and people have given up on treatment.” He thinks the public is “angry about drugs and drug users,” frustrated, and out to punish. There is not much sympathy for the problems of the addicts or for basic research on addiction. Middle-class people, who are “great consumers of social attitudes and media information,” have already turned away from cocaine, but the poor have not. Education, health warnings, and even police threats do not penetrate this level of society very well.

“It is very important to sustain a research program over the long term” and to support treatment facilities, Musto argues. Even though the cocaine fad may be passing, the addicts it created will be around, using drugs and needing help, for many years.

Among the critics of drug enforcement there clearly is no consensus. No one has developed, or is willing to put forward, a plan for getting from the present drug policy based on criminal punishment to a new, more tolerant system. There does seem to be a common feeling, however, that criminal sanctions have reached the limit of efficacy and that future investments will bring steadily diminishing returns.

■ ELIOT MARSHALL

Pay Cap for Grantees Has Up Side for NSF

With its penchant for keeping a grip on agency purse strings, Congress last year imposed a ceiling on what the National Science Foundation could pay a small number of high-powered outsiders it brings in for short-term duty at the agency. The limit was set at the top level for federal civil servants—currently \$77,500. In the appropriations bill enacted recently, the legislators extended the pay limit extramurally, capping the salary funds NSF can pay an individual through its research grants.

NSF frequently picks up a portion of the salary of a principal investigator holding an NSF grant. The new provision restricts NSF to paying no more than its proportional share of a \$95,000 annual salary. What NSF sees as the good news is that short-term employees in the foundation’s home office are included under the \$95,000 cap.

NSF has chafed under the salary limits imposed on these short-termers, many from high-demand fields. Those affected are called “IPAs” because they come to NSF under the Intergovernmental Personnel Act which allows agencies to engage employees of state and local government and nonprofit institutions on a cost-sharing basis for a limited period. Most IPAs come from academe and NSF says they cannot afford to interrupt their careers and relocate in Washington with its high cost of living. The new cap may crimp things for some more generously remunerated PIs out there, but it means a tidy pay boost for the IPAs.

■ J.W.

Britain to Set Science, Math Goals for Kids

The British government, concerned about the inadequate performance by school children in science and mathematics, is looking at a series of nationwide “attainment targets.” In physics, for example, a child should know simple properties of magnets by the age of 7, that some materials conduct electricity by the age of 11, about the dangers of electricity by 14, and about the measurement of electrical energy by 16.

The introduction of prescribed attainment targets is a central component of government efforts to establish a national “core curriculum.” As such, they mark a substantial shift from the previous tradition under which the content of school courses was left primarily to the teaching profession. ■ D.D.