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Proceedings of the American Philosophical Society, Vol. 141, No. 3. (Sep., 1997), pp. 262-275.

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Why Can't We Make Prohibition Work Better?

Some Consequences of Ignoring the Unattractive*

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INTRODUCTION

United States drug policies are punitive (in both rhetoric and reality), divisive (certainly by race, probably by age and perhaps by class), intrusive (in small ways for many and in large ways for some groups) and expensive (\$30 billion annually). Even more distressingly, the nation has a drug problem more severe than that of any other rich Western society, whether measured in terms of the extent of drug use, dependence on expensive drugs, drug-related AIDS cases, or the level of violence and corruption associated with these drugs.

Many contend that the problems are a consequence of our policies. Either it is the harshness of those policies that has generated the disease and violent crime that surround drug use (the standard liberal critique)¹ or it is the lack of effective stringency that explains why drugs are so widely used and available (the hawks' critique).² Yet this may give too much credit to the role of policy, a common fallacy in modern American discussions, particularly in the nation's capital, whose business is precisely

¹ See, e.g., Skolnick, J., "Rethinking the Drug Problem," *Daedalus* 121.3 (1992): 133-60.

² The most articulate statement of this position is contained in William Bennett's introduction to the first *National Drug Control Strategy* (Office of National Drug Control Policy, 1989).

*This paper is derived from a lecture at the April 1992 American Philosophical Society 1992 meeting, which was originally published as "Hawks Ascendant," *Daedalus* 1992. This paper was updated and delivered as a lecture at the National Institute of Justice series *Perspectives on Crime and Justice* in February 1997. The research reported here was supported by a grant from the Alfred P. Sloan Foundation to RAND's Drug Policy Research Center. It draws heavily on work done jointly with Robert MacCoun, who provided valuable comments on the paper as well.

PROCEEDINGS OF THE AMERICAN PHILOSOPHICAL SOCIETY, VOL. 141, NO. 3, SEPTEMBER, 1997

policy. Whether or not there is an epidemic of experimentation with a particular drug; what fraction of experimenters goes on to become dependent; and the severity of health and crime consequences of dependence may all be much more shaped by factors other than policy. Certainly, when comparing America's drug problems with those of other nations, most of the relevant differences appear to be rooted in broader features of societies; e.g., the United States is characterized by greater hedonism, weak informal social controls, a higher propensity for risk taking, inadequate provision of health care for the poor, unequal income distribution, and high level of criminal violence generally; it is also more intimately connected with cocaine and opium growing regions, such as Colombia and Mexico. All these factors promote use of illicit psychoactive drugs and/or worsen the problems associated with that use.

If policy is only moderately important in controlling drug use, then perhaps we can mitigate the harshness of our policies with little risk of seeing an expansion of drug use and related problems. Reducing our drug *policy* problem (i.e., the adverse consequences of the policies themselves) is worth a good deal, though it would obviously be even more desirable if we could also reduce our drug problem.

But it is hard to be highly prescriptive here, to say what good drug policy would look like, because one consequence of politicians' treating drug control as a moral crusade has been an absolute uninterest, bordering on gross negligence, in assessing the consequences, good or bad, of the emphasis on punishment. We cannot say, even approximately, whether locking up more drug dealers or seizing lots of assets has any substantial effect on prices or whether higher prices would have much affect on American drug usage or related violence. There is no credible basis for describing a policy that would reduce, in any important dimension, the extent of American drug problems by, say, one-third in the next five years.

What I will offer is a set of reasonable conjectures, but a central message of this paper is that without systematic evaluation of the consequences of drug enforcement and punishment, the current stagnation of drug policies will almost certainly continue.

CHARACTERIZING AMERICAN DRUG POLICIES AND PROBLEMS

Policies. The most striking characteristics of the U.S. response to illicit drugs in the last decade have been its scale and its punitiveness. The federal government spends about \$15 billion annually on drug control. State and local governments probably spend at least as much.³ Thus drug

³ Federal figures are published annually in the *National Drug Control Strategy* (Office of

control is a \$30-35 billion government program in the mid-1990s, massively up from about \$6-7 billion in 1985. By comparison, the figure for all public law enforcement expenditures was about \$110 billion in 1996.

The intended punitiveness is reflected in budgets. About three-quarters of the national drug control budget is spent on apprehending and punishing drug dealers and users, with treatment getting about two-thirds of the remainder. State and local governments are even more enforcement-oriented than the federal government; budgetarily they exhibit a disdain for prevention, even though this is primarily a school-based activity which seems most naturally to flow from local governments.

The total punishment levied for drug control purposes has increased massively since 1981, when the concern with cocaine became prominent. The number of commitments to state and federal prison have risen approximately tenfold over the same period. By 1994, there were almost 400,000 people in prison or jail serving time for selling or using drugs; the comparable figure for 1980 was about 31,000 (see Table 1).

At the state level, one striking feature is the number of persons being imprisoned for drug *possession* felonies. This does not include possession with intent to distribute, which is classified as a distribution offense. In 1992 50,000 were sentenced to state prison for non-distribution offenses, mostly simple possession; some may be plea-bargained down from distribution charges.

Table 1: Trends in Drug Enforcement, 1980-1994

	1980	1985	1990	1994
Drug Arrests	581,000	811,000	1,090,000	1,350,000
Heroin and cocaine only	70,000 (12%)	240,000 (30%)	590,000 (54%)	635,000 (47%)
Distribution only	104,000 (18%)	192,000 (30%)	345,000 (31%)	370,000 (27%)
Inmates [Total]	31,000	68,000	291,000	392,000
Local Jails	7,000	19,000	111,000	137,000
State Prisons	19,000	39,000	149,000	202,000
Federal Prisons	4,900	9,500	30,500	51,800

Sources: *Uniform Crime Reports*, *Correctional Population in the United States*; jail figures are author's estimates.

National Drug Control Policy). State and local figures are available only for 1990 and 1991; see *State and Local Spending on Drug Control Activities* (Office of National Drug Control Policy, 1993).

Sentencing figures are of themselves insufficient to show that enforcement has become more stringent; that depends on the ratio of sentences (or years of prison time) to offenses. Imprisonment may hardly have kept up with the growth of drug markets. The number of offenses might have risen as rapidly as arrests/sentences/years of prison time between 1980 and 1985, when cocaine consumption was still expanding rapidly, but from 1985 to 1995 it is very likely that the number of offenses (transactions) and offenders (sales/sellers/users) was essentially flat; the risk of being imprisoned for a cocaine or heroin user or seller went up very sharply, perhaps nearly tenfold.

How risky is drug selling or drug possession? The aggregate data suggest that in 1994 a cocaine user had an 8 percent risk of being arrested; for a heroin user the figure may have been 10 percent. For drug selling, Robert MacCoun and I estimated in a study of the District of Columbia, that, in 1988, street dealers of drugs faced about a 22 percent probability of imprisonment in the course of a year's selling and that, given expected time served, they spent about one-third of their selling career in prison.⁴ These figures on sellers are somewhat higher than crude calculations at the national level for more recent years.

Does this make drug selling appropriately risky? One-third of a career in prison seems quite a lot. On the other hand, the risk per sale is very small indeed; in our Washington, D.C. study a seller who worked two days a week at this trade made about 1,000 transactions in the course of a year. His imprisonment risk per transaction was only about 1 in 4,500; by that metric, drug selling is a great deal less risky than, say, a burglary or robbery. Another way to assess the risk is to look at aggregate figures. It is estimated that American users consume 300 tons of cocaine per annum. If these are sold in 1 gram units, then this represents 300 million transactions, which result in fewer than 100,000 prison sentences; that generates a prison risk for a single cocaine sales transaction of about 1 in 3,000.

The punitiveness of American drug policy is not simply captured in numbers. It is also an element of rhetoric and other programs. The 1996 presidential candidates competed, albeit briefly and unconvincingly, in efforts to demonstrate their toughness; no other aspect of drug policy merited a mention. Senator Dole accused the administration of failing to make adequate use of the military, particularly in the interdiction campaign. President Clinton responded by proposing that teenagers be drug tested when they apply for a driver's license. More recently House Speaker Newt Gingrich, in what was billed as a major address on domestic

⁴ Reuter, MacCoun, and Murphy, *Money from Crime* (Santa Monica, Ca: RAND, 1990).

policy initiatives, proposed life sentences for those trafficking across state boundaries, and death sentences for the second offense.

Even the new federal welfare reform package includes its very own antidrug clause; unless a state affirmatively opts out, it must deny federal benefits to any applicant who has been convicted of a post-1996 drug felony. As deterrence, it presumes a peculiar long-sightedness on the part of offenders. It can reasonably be called spiteful, though it is not as mean-spirited as Senator Gramm's original version, which imposed loss of a wide range of public benefits for any drug conviction. It certainly serves no welfare goal to cut off those convicted at age eighteen for simple possession of small amounts of crack, as in California, from a right to welfare at age thirty-five.

WHAT HAS TOUGHNESS ACCOMPLISHED?

Toughness should raise prices, make drugs less accessible, and reinforce messages that drugs are disapproved of and harmful. This should lead to less drug use and, eventually, fewer drug-related problems. In fact illegal drugs are remarkably expensive, not universally accessible, and generally feared. Nevertheless, it is striking that, notwithstanding sharply increased stringency, prices are declining, many of the young see drugs as quite easy to get, and the fear of the mostly widely used drug (marijuana) is declining.⁵

Illicit drugs are very expensive by most measures. Marijuana is a cultivated weed like tobacco, but whereas a cigarette costs, even with excise taxes, hardly ten cents, an equivalent amount of marijuana costs \$5 or more. Heroin, a processed agricultural good like sugar, is vastly more expensive than gold, costing about \$5,000 per ounce (wholesale), compared to gold's \$400.

All the same, cocaine and heroin prices have fallen steadily since 1981; by 1995, after adjusting for inflation, they were only about one-third of their 1981 levels. For marijuana, prices rose steadily and substantially from 1981 to 1992 and then fell in the next four years back to their 1981 level. Even more surprising is Jon Caulkins's finding that crack cocaine, singled out for tough sentencing, both at the national level and in some major states (e.g., California) is no more expensive at the retail level than powder cocaine in terms of price per pure milligram.

This failure of cocaine and heroin prices to rise with tougher enforcement is a major analytic and policy puzzle. Declining demand,

⁵ The best data come from an annual survey of high school seniors conducted by the Institute of Social Research at the University of Michigan: Johnston, O'Malley and Bachman, *Monitoring the Future*.

reduced labor market opportunities for aging drug user/sellers, a decline in violence engendered by few new entrants and lower margins, and the locking up of criminal users are just some of the possible factors contributing to this. None has been subject to systematic examination.

If enforcement did not raise prices for the drugs, then it might still have been successful if it lowered availability. The only long-term data, from the annual survey of high school seniors, suggest otherwise. For example, 80 to 90 percent of the students report that they think marijuana is very available or available to them, a figure that has been stable for two decades. The percentage of seniors reporting that cocaine was available or readily available was 46 percent in 1995, compared to 30 percent in 1980, though down somewhat from its 1989 high of 55 percent. The finding that marijuana is perceived as more available to high school students than alcohol or cigarettes has been widely reported.

Drug use is estimated to be half as prevalent in 1995 as in the early 1980s, but it is now growing, albeit very slowly; in 1995 the percentage of those over twelve who reported using an illicit drug in the previous month was 6 percent, compared to 14 percent in 1981.⁶ The numbers dependent on cocaine and heroin have been fairly stable over a long period of time, at about 2.5 million. It seems likely that the severity of the nation's drug problem as measured by the related violence and health costs has also been fairly stable over that period of time, though declining somewhat since about 1990.

In some cities it appears that local enforcement has driven open air markets indoors. Driving around with police in Washington, D.C., one certainly observes much more circumspect behavior than was true in the late 1980s. This may be a major accomplishment. Open air markets not only ease access for users moving from experimentation to regular consumption but also breed violence and disorder.⁷

In summary, increasing toughness has not accomplished its immediate objectives of raising price and reducing availability. Drug use has declined, but the most proximate cause, as reported in the high school senior survey, seems to be a shift in attitudes as to the risks and approval of use of specific drugs. Though enforcement might influence those perceptions, there is no correlation between crude measures of toughness and those perceptions.

But toughness has clearly had other consequences as well.

Divisiveness. It is hard to analyze drug enforcement in contemporary

⁶ Annual data on drug use in the general population are provided by the National Household Survey on Drug Abuse (Department of Health and Human Services).

⁷ On this and other enforcement effects see Kleiman, M., *Against Excess: Drug Policy for Results*, 1992, Chapter 6.

America without reference to race.⁸ In 1992 blacks (12 percent of the general population) constituted two-thirds of admissions to state prison for drug offenses, compared to slightly less than one-half for all non-drug offenses. A similar disproportion existed for Hispanics; 10 percent of the population, they constituted 25 percent of all those sent to prison for drug offenses.

The origins of this disproportion are a matter of controversy. The standard critique is that the population of drug users is predominantly white; differences in prevalence rates for drugs (even crack) are far too modest to overcome the vastly larger white population. Ergo, drug sellers should be primarily white. This argument is at best incomplete. Sellers are a select group of users; they are likely to be poorer and more deviant than users generally since selling is risky and widely condemned. The urban poor are disproportionately minority.

Racism may play a role but a lot is driven by the police responsiveness to concerns about drug selling and the violence and disorder around inner-city markets. Focusing on those involved in the street selling of expensive drugs (essentially anything other than marijuana) is likely to generate disproportionate numbers of arrests among central city poor young males, who are tempted into this business both by the unattractiveness of their legitimate economic opportunities and the accessibility of these selling opportunities.⁹ These populations are again disproportionately minorities.

Drug selling has indeed become a common activity among poor minority urban males. For Washington, D.C., my colleagues and I estimate that over one-quarter of African American males born in the 1960s were charged with drug selling between the ages of eighteen and twenty-four.¹⁰ Most were charged with a drug felony and most will be convicted of that offense.

But it is what happens after arrest that generates much of the controversy. In particular, the disproportion in sentences for crack offenses, for which arrests are overwhelmingly of blacks and Hispanics, has been a major political issue. This, together with the difficulty of articulating any credible grounds for maintaining the current federal disparity, has increased suspicion in the black community that drug enforcement is an instrument of continuing white oppression. Tom and

⁸ See Tonry, M., *Malign Neglect* (Oxford University Press, 1994).

⁹ The most compelling description of this world is provided in Bourgois, P., *In Search of Respect: Selling Crack in El Barrio* (University of California Press, 1996).

¹⁰ Saner, MacCoun, and Reuter, "On the Ubiquity of Drug Selling," *J. Quantitative Criminology* 11.4 (1995): 337-62.

Mary Edsall report that focus groups in the early 1990s found that many blacks believed drug enforcement was part of an effort by the white community to oppress blacks.¹¹

Nor is this the only division in society arising from tough drug policies. For the young the growing harshness of rhetoric and policy to marijuana, arrests for simple possession having doubled in the last five years, reduces the credibility of government generally. The claims about marijuana's dangers, both in public rhetoric and school prevention programs, seem grossly exaggerated and indeed lack much scientific basis. For HHS Secretary Shalala to say, as she did in a recent meeting, that marijuana is comparable to crack in its dangerousness, is to disparage science and reason.¹²

Marijuana is not good for health but represents less threat in that respect than do alcohol and cigarettes; no one dies of the acute effects of marijuana and even the long-term effects are surprisingly modest. The negative effects of marijuana use on adolescent development are clearer but still modest. These are not arguments for legalization (indeed, they argue rather more for prohibition of cigarettes and alcohol), but they create a tension when so much emphasis is placed on the health effects of the only one of these substances that is not legally promoted, and is disproportionately consumed by the young.

Intrusiveness. A whole array of legal innovations have been justified by the need to end the "scourge of drugs," to use President Bush's memorable 1989 phrase. Drug dealer "profiling" by police has allowed police to undertake numerous searches with barely plausible cause; most of those searched are again either minority or young or both.¹³ Drug testing of federal employees (such as those in the executive office of the president) for purely symbolic purposes has demeaned public service. Some states require that candidates for state office be drug tested for symbolic purposes; the Supreme Court in 1997 unanimously ruled against this requirement for Georgia. Preventive detention, a particularly chilling power, has been extended in the context of the Controlled Substances Act.

Drug policy is clearly getting harsher in this respect. Some jurisdictions are contemplating testing welfare recipients for drug use and disqualifying those who cannot remain drug-free. Abe Rosenthal of the

¹¹ Edsall, T. with M. Edsall, *Chain Reaction: The Impact of Race, Rights and Taxes on American Politics* (New York: W.W. Norton, 1991), 237.

¹² This comment was reported by two participants in the meeting of the National Advisory Council of the Substance Abuse and Mental Health Administration in early 1997.

¹³ On these matters generally see Rudovsky, "The Impact of the War on Drugs on Procedural Fairness and Racial Equality," *Chicago Legal Forum* 1994: 237-74.

New York Times, the most prominent of columnist drug hawks, quickly pounced on President Clinton's proposal that all teenaged applicants for driver's licenses be subject to a drug test, suggesting that this was not nearly enough, and that the logic and facts spoke to the need to do random tests of young adults as well, since they are the highest risk group.¹⁴

The Punitive Cycle. The response to emerging drug problems is invariably punitive: the first twitch is to raise the statutory penalty for some offense. This was true in 1996 when methamphetamine showed signs of moving out of its long-established western base in San Diego, Dallas, etc. It has not yet happened for marijuana at the federal level, somewhat surprisingly, but various states are moving in that direction. For example, the Virginia Senate recently passed an increase in maximum sentences for marijuana possession offenses; a second conviction can result in a four-year prison sentence.

This is truly a vicious cycle, since the argument for raising the sentence for offenses involving a particular drug are mostly that the current sentence is less than that for other drugs and hence encourages sellers to pick that drug. This systematically generates sentence inflation. Indeed, many in Congress responded to the claim of imbalance between crack and powder cocaine by suggesting dramatically increasing penalties for powder. In May 1997 the U.S. Sentencing Commission, defeated in its previous effort at reducing the crack-powder cocaine by lowering the crack penalties, made recommendations that would indeed increase the powder penalties, while trying again to lower the discrepancy.

The intrusive and divisive elements of our policies are not inherent in prohibition. Even harsh punishment is not; consider how lightly we enforce laws against prostitution.¹⁵ However, they arise remorselessly out of the logic of drug scares, under the assumption that tougher policies will make a difference. There is some understanding that racial disparity and loss of civil liberties are not trivial harms but this rubs up against the unquestioned assumption that another major goal is importantly served by these measures, namely reductions in drug problems.

COMPARING THE U.S. AND WESTERN EUROPE

Perhaps we suffer no more from illicit drugs and clumsy drug policies than other developed countries with more wealth than self-

¹⁴ Rosenthal, A. , *New York Times*, September 1996.

¹⁵ On recent prostitution enforcement policies, showing that most arrestees receive very modest penalties, see Pearl, Julie, "The Highest Paying Customers: America's Cities and the Costs of Prostitution Control," *Hastings Law Journal* 38 (1987): 769-90.

control. Robert MacCoun and I have been studying the experiences of ten Western European countries, all of which have had significant problems with heroin and marijuana; some have also experienced cocaine or amphetamine problems.¹⁶

European innovations in tolerant drug policy, such as the Dutch coffee shops and the Swiss heroin maintenance trials, attract a fair amount of attention in the United States. But most Western European drug policy is firmly in the prohibitionist legal framework and, with respect to drug selling, these countries are, by their standards, aggressive both in enforcing the laws and in the length of sentences served by traffickers. They are, with Sweden and France as interesting exceptions, very much less aggressive toward drug users than is the U.S. They are, again with the exception of Sweden and France, strong supporters of needle exchange programs and other efforts to reduce HIV risk behaviors among intravenous drug users. As the British Advisory Council on the Misuse of Drugs said famously in 1987, "Drugs are an important problem. AIDS is a more important problem."¹⁷

None of these countries has a problem with illicit drugs comparable to that in the U.S., mostly because they have not experienced a major epidemic of cocaine use. The highest reported figure we have been able to find for lifetime marijuana use among high school seniors is 36 percent in Spain, compared to more than 50 percent in the U.S. in recent years; for most European countries the figure is closer to one-quarter. Heroin addiction in some countries, notably Italy, Spain, and Switzerland, approaches the U.S. rate of about 2-3 per 1,000 population. But if one adds in cocaine, the U.S. figures for the prevalence of addiction are at least twice that of any European country.

Even starker is the difference in violence, though this is all impressionistic. I interviewed a senior Zurich police official during the period when that the city allowed drug sellers and buyers to operate openly in a park, called the Platzspitz, near the train station. The official was complaining about how bad the crime situation had become because of the drug market. He showed me a list of the thirty-one major crime incidents in the park in 1990. The list included a fight with a policeman and precisely one homicide. This for a park in which many hundreds of drug dealers and buyers, using heroin and some cocaine, congregated every day! In other European cities the drug market generates theft and

¹⁶ On the problems of comparison here see MacCoun, Saiger, Kahan, and Reuter, "Drug Policies and Problems: The Promise and Pitfalls of Cross-National Comparison," in N. Heather, A. Wodak, E. Nadelmann and P. Ohare (eds.), *Psychoactive Drugs and Harm Reduction: From Faith to Science* (London: Whurr Publishers, 1993): 103-17.

¹⁷ Advisory Council on the Misuse of Drugs, *AIDS and Drug Misuse* (London, 1987).

disorder but not high levels of violence.

AIDS related to intravenous drug use has been a significant problem in some European countries, with France, Italy, and Switzerland the most badly affected. But neither in terms of the fraction of IVDU who are HIV-positive nor in the fraction of the population that is HIV positive as the result of drug use does any European country approach the U.S.

Should we attribute the smaller drug problems in Europe to their policies? MacCoun and I see little basis for this. Take the violence for example. The low level of violence in crime generally, perhaps itself the result of the small number of guns, is more plausible a factor than any policy action by police or the criminal justice system. The absence of a significant cocaine epidemic can hardly be attributed to enforcement; prices are now down near to U.S. levels despite increasing seizures. The greater strength of families in Southern Europe, the better safety net for those who are long-term unemployed, and the smaller fraction of young males growing up in poor female-headed households, are plausibly more important. It is hard to do any formal testing with the available data but this seems to us a reasonable interpretation.

Interestingly, the choice of drug policy by nations is more influenced by views about the role of government, as well as by views about what constitutes the drug problem. For example, the Swedish population accepts a paternalistic state and will tolerate highly intrusive rules, including compulsory drug treatment even without an arrest. In Spain there are no criminal penalties for the possession of small amounts of any psychoactive drug; this represents less a decision about drug policy than a response to the long experience with the authoritarian Franco regime, which has created a strong suspicion of any laws that allow the government to regulate private conduct. Europeans generally see illicit drugs as primarily a personal and health problem, a position consistent with the lower levels of drug-related violence. The U.S. public sees illegal drugs as a crime problem; almost all speeches and most newspaper articles refer to "drugs and crime." For a nation that sees crime as something to be solved by punishment, that is enough to sustain a set of laws and programs that make toughness their centerpiece.

A ROLE FOR RESEARCH

Clearly there are policy alternatives to our current regime, even if we stick with prohibition. For any proposal involving less harshness the central issue is assessing the consequences of a highly punitive approach. At a minimum it would be useful to say whether longer prison sentences, more drug seizures, or more intensive money-laundering investigations

can increase prices or reduce availability, and what effect these changes would have on drug use by current and prospective users, and on drug-related problems. There is not a single empirical paper that attempts to answer that question. The closest one gets is a paper of twenty-five years ago, which found that higher prices for heroin increased property crimes in Detroit.¹⁸ There has been a little progress lately in estimating the price elasticity of demand for various drugs and various populations¹⁹ but that is just a baby first step.

Oddly enough, we can say a great deal more about the effects of treatment and prevention, which account for no more than 20 percent of this nation's public expenditures on drug control, than about the consequences of enforcement.²⁰ Even more oddly, that is the result of the dedication to punishment; any other program has to justify itself against the suspicion that it is kind to criminals (treatment) or too diffuse (prevention). Since punishment is what drug users and sellers deserve, there is little need (in the eyes of politicians and perhaps the public) for these programs to demonstrate their effectiveness. Thus the National Institute on Drug Abuse has a research budget of \$450 million; research on drug enforcement has to fight for its share of the National Institute of Justice's paltry \$30 million annual budget, albeit that money is tripled by various evaluations and earmarks. Twenty million dollars is certainly far too generous an estimate of the funding for research related to drug enforcement.

One can usefully adapt a complaint of the public health research world to explain this situation. Prevention researchers object that whereas surgical procedures only have to be shown to be safe and medicines safe and effective, prevention programs have to be demonstrated to be safe, effective, and cost-effective as well. The corollary for drug enforcement is that it doesn't even have to be shown to be safe, let alone effective or cost-effective. Drug enforcement has become a crusade, and crusaders scarcely need a map, let alone evaluation.

The federal enforcement agencies sponsor no research themselves, notwithstanding federal program expenditures of about \$10 billion. The DEA and FBI may generously be called non-analytic; more accurately they are anti-analytic. Not only do they lack any internal policy analytic capacity, they seem to lack even the ability to contract with external

¹⁸ Silverman, L. and N. Spruill, "Urban Crime and the Price of Heroin," *Journal of Urban Economics* 4 (1977): 80-103.

¹⁹ E.g., Saffer, Henry and Frank Chaloupka, "The Demand for Illicit Drugs," Working Paper No. 5238 (Cambridge, Mass.: National Bureau of Economic Research, 1995).

²⁰ For a review see Anglin, M.D. and Y-I.Hser, "Treatment of Drug Abuse," in Tonry, M. and Wilson, J.Q. (eds.) *Drugs and Crime* (Chicago: University of Chicago Press, 1990).

research organizations. The DEA's inability to report price data in a meaningful way, despite gathering about five thousand observations each year, is just symptomatic of this. Surely no other federal agency in the 1990s would report as a range the very highest and lowest figures, without any measure of central tendency; to report that the price range for marijuana went from \$25-\$450 in 1993 to \$40-450 in 1994 is to simply inform the world that these data are irrelevant.

Clearly a large research and analysis program is needed that has the depth and durability to develop more credible measures of the intensity of treatment and the size of the drug problem in a particular community.

We need to take account of the enormous variation in the intensity of enforcement and severity of sentencing that seems to exist across cities and states. For example, in Texas in 1992 the median prison sentence for those convicted of drug trafficking was ten years, compared to only two years for those in Washington State. It should be possible to build on the improvements in the drug data indicators being developed by various federal agencies.

Why there is so little research on drug enforcement? Surely part of the answer is simply that there is, as James Q. Wilson noted in a recent lecture,²¹ shockingly little research on crime control generally. But another factor, I conjecture, is a curious confluence of liberal and conservative interests. Those who support tough drug enforcement see no gain in evaluation; Peter Rossi's oft-cited comment, "If you don't like a program, evaluate it," is highly relevant. Liberals find the whole effort distasteful enough that they simply want nothing to do with it; in particular, they do not want to evaluate it for the purposes of making it work better. They would much rather focus on the programs in which they have faith and in which they passionately believe, namely prevention and treatment.

CONCLUSION

But a society that deliberately averts its eyes from an honest assessment of a massive and frequently cruel intervention that sacrifices so many other goals for the one desideratum of drug abstinence can scarcely expect to find a well-grounded alternative. I am struck by the lack of any nuanced debate about drug policy, beyond the ungrounded and polarizing legalization shouting match and the banal and marginal discussion of how the federal drug budget should be spent. Welfare reform, public housing policies, and income support generally may do more to affect drug abuse

²¹ Wilson, James Q., "What, if anything, can the federal government do to reduce crime?" *Perspectives on Crime and Justice*, National Institute of Justice, 1996.

and related problems than those programs that claim to explicitly target them, yet there is rarely any serious discussion of their role in drug policy.

In John Le Carre's *The Honorable Schoolboy*, George Smiley finds some evidence that a prominent Chinese businessman in Hong Kong may be a Communist spy. Launching an investigation in Hong Kong is both politically sensitive and expensive, so he has to convene a meeting of the Foreign Office, Treasury, and other agencies to get authorization and funds. The Foreign Office is aghast; if the investigation were to become public and the businessman were innocent, it would be a major political embarrassment. On the other hand, the governor in Hong Kong entertains and trusts this businessman, indeed may recommend him for a knighthood; it would be equally embarrassing if it turned out that he was a spy! They become increasingly panicked and press Smiley for a judgment; is he a spy? Smiley inscrutably says he cannot answer without doing the investigation. The end of the story is of course that they give him the money and the authority, because the answer must be found.

That is the situation we face with respect to drug policy. If you want to know the answer as to whether we can make prohibition less expensive, divisive, and intrusive and maybe reduce the American drug problem, then you can't expect anyone to give a persuasive answer, who is not provided the money and authority to find out what our tough enforcement actually accomplishes.

Doing less rarely attracts much support for dealing with a problem that still concerns large parts of the community. But this may be the only responsible recommendation that can be made now. Locking up drug offenders for shorter terms, worrying more about the racial disparities in sentencing policies, giving up fewer of our civil liberties for unlikely reductions in drug problems, may be the best one can do at the moment. That would mean less intrusive, divisive, and expensive policies and perhaps little increase in drug problems.

Researchers are always inclined to think that learning and understanding are important for policy. The failure of the repeated findings that drug treatment has a very high benefit-cost ratio to make a policy impact²² is a sober reminder that the political decision making here is driven by other considerations. But we might actually see something approximating a reasonable discussion of the alternatives in front of the nation if there were a more credible base of empirical analysis available. In its absence we are doomed to rhetorical debate.

²² The most important of these studies, which compares the costs of reducing cocaine consumption by one percent through treatment or enforcement, is Rydell, C.P. and S. Everingham, *Controlling Cocaine* (RAND, 1994).