

## Prohibition's Real Lessons for Drug Policy

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Prohibition – America's notoriously "failed social experiment" to rid the United States of alcohol – was on many people's minds this past month, as public television stations repeatedly broadcasted director Ken Burns' highly acclaimed series of the same name.

Immediately, it was seized upon by drug legalization advocates, who say it proves that drug prohibition should be abandoned. But a closer look at what resulted from alcohol prohibition and its relevance to today's anti-drug effort reveals a far more nuanced picture than the legalization lobby might like to admit.

First, it is important to get the facts right about alcohol prohibition, which lasted from 1920 to 1934. As ratified in the 18th Amendment, Prohibition banned the "manufacture, sale, or transportation of intoxicating liquors within, the importation thereof into, or the exportation thereof from the United States...." Many states – 36 of the 48 to be exact – had already banned liquor prior to the national constitutional amendment. As argued by Harvard's Mark Moore and other astute policy observers, alcohol prohibition had beneficial effects along with the negative ones. Alcohol use plummeted among the general population. At the beginning of the twentieth century, Americans drank 2.6 gallons of alcohol per person, per year. By 1919, this amount dropped to 1.96 gallons per person. In 1934, the first full year after repeal of national Prohibition, alcohol use stood at .97 gallons per person. From then on, consumption rose steadily to its present level, approximately tripling from the time immediately after Prohibition.<sup>1</sup> Furthermore, death rates from cirrhosis of the liver fell from 12 per 100,000 in 1916 to 5 per 100,000 in 1920, and remained at that level throughout Prohibition before rising sharply again after repeal. Among men such rates declined even more sharply – about 66% in all.<sup>2</sup>

Additionally, arrests for public drunkenness were cut in half. Yes, organized crime was emboldened, but the mob was already powerful before Prohibition, and this continued long after Prohibition ended. In fact, the homicide rate grew faster in the decade before Prohibition, according to a report by the National Academies of Science.

Despite these statistics, no one is suggesting that alcohol prohibition should be reinstated. Americans have concluded that the right to drink outweighs its public health and safety consequences. But it is important to remember that the policy was not the complete failure that most think it was, and so we should be wary of misapplying its lessons.

If our experience with Prohibition was a nuanced one, then it is surely a stretch to apply the so-called conventional wisdom associated with it to help us shape policies on other intoxicants today. Still, a favorite argument of legalization supporters is that since “we all know” alcohol prohibition failed, drug prohibition is destined to fail, too. Given modern America’s thirst for liquor, it is a clever political maneuver to link the two policies in this way. But notwithstanding one’s position on the success or failure of alcohol prohibition, there are key differences between that policy and modern day drug enforcement that render a comparison almost useless for serious policy analysis.

First, it should be remembered that, unlike illegal drugs today, alcohol was never really prohibited altogether. Laws forbade the sale and distribution of liquor, but personal use was not against the law. Second, alcohol prohibition was not enforced in the same way as today’s drug laws. Congress and the executive branch were uninterested in enforcing the law. Even many prohibitionists felt that the law was so effective, it did not need enforcement. Police, prosecutors, judges and juries, frequently refused to use the powers the law gave them. In 1927, only 18 of the 48 states even budgeted money for the enforcement of prohibition, and some states openly defied the law.

The key difference between alcohol and drug prohibition, however, lies in the substance itself. Alcohol – unlike illegal drugs – has a long history of widespread accepted use in our society, dating back to before Biblical times. Illegal drugs cannot claim such pervasive use by a majority of the planet’s population over such a long period of time. Of course cannabis *has been used* for thousands of years, and other mind altering substances have their place in *certain cultures during specific periods of time*, but no substance other than alcohol can claim such widespread approval, use, and influence.

So what lessons should policymakers learn from America’s experiment with alcohol prohibition to inform drug policies? One lesson learned is that when a substance is legal, powerful business interests have an incentive to encourage heavy use by keeping prices low. Heavier use, in turn, means heavier social costs. For example, alcohol is the cause of a million more arrests annually than are all illegal drugs combined. Indeed, alcohol use leads to \$180 billion in costs associated with health care, the criminal justice system, and lost productivity; alcohol taxes on the other hand – kept outrageously low by a powerful lobby – generate revenue amounting to less than a tenth of these costs.

Even so, legalization advocates try to capitalize on today’s global economic woes, and use the potential for new tax revenues as a key argument in favor of repealing drug laws. But as author Daniel Okrent, whose research into prohibition inspired Burns’ series, wrote last year: “The history of the intimate relationship between drinking and taxing suggests ... that ... [people] indulging a fantasy of income tax relief emerging from a cloud of legalized marijuana smoke should realize that it is likely only a pipe dream.”

If our experience with legal alcohol provides us with any lessons for drug policy, it is this: we have little reason to believe that the benefits of drug legalization would outweigh its costs.

But that doesn’t mean that we need to be severe and punitive in our drug enforcement either. People in recovery from alcohol and other drug addictions should be entitled to social benefits, including access to education, housing, and employment opportunities, despite their past drug use. We should think seriously about the rationale and effectiveness of imposing harsh mandatory minimum sentences for simple drug possession. And no one can credibly argue that we have enough treatment slots for everyone who needs them, or that we have an adequate supply of evidence-based drug prevention for every school kid, regardless of

economic background. Indeed, our current drug policy leaves something to be desired, and like most policies, it needs constant refinement.

Still, it is wrongheaded to think that the only choices we have in drug policy are a punitive approach centered exclusively on enforcement, and one based on careless legalization. Neither has ever worked particularly well.

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### **About the Author**

Working on drug policy issues for more than eighteen years, Kevin Abraham Sabet, served from 2009-2011 in the Obama Administration as the Senior Advisor to Director Kerlikowske at the White House Office of National Drug Control Policy (ONDCP). In this position, Dr. Sabet advised Director Kerlikowske on all matters affecting priorities, policies, and programs of the National Drug Control Strategy. He was one of three main writers of President Obama's first National Drug Control Strategy, and his portfolio included leading the office's efforts on marijuana policy, legalization issues, international demand reduction, drugged driving, and synthetic drug (e.g. "Spice" and "Bath Salts") policy. Dr. Sabet represented ONDCP in numerous meetings and conferences, and led the Administration's international drug legislative and diplomatic efforts at the United Nations. Representing his non-partisan commitment to drug policy, he previously worked on research, policy and speech writing at ONDCP in 2000 and from 2003-2004 in the Clinton and Bush Administrations, respectively. He remains the only staff member at ONDCP to hold a political appointment in both the Bush and Obama Administrations.

Through [www.kevinsabet.com](http://www.kevinsabet.com), Dr. Sabet is currently a consultant to numerous domestic and international organizations. As a Marshall Scholar, he received his Ph.D. and M.S. in Social Policy at Oxford University and B.A. in Political Science from the University of California, Berkeley.

## Sources:

<sup>1</sup> Lender ME, Martin JK. Drinking in America. a history. New York: Macmillan, 1982.

<sup>2</sup> Aaron P, Musto D. Temperance and prohibition in America: a historical overview. In: Moore M, Gerstein D, eds. Alcohol and public policy: beyond the shadow of prohibition. Washington, DC: National Academy Press, 1981:127-181 and Goldstein A. Addiction: from biology to public policy. New York: WH Freeman, 1994.