



1-1-1994

America's Drug War: The Need and requirement for Cultural Change

Mason T. Barlow

Follow this and additional works at: <https://scholarsarchive.byu.edu/sigma>

Recommended Citation

Barlow, Mason T. (1994) "America's Drug War: The Need and requirement for Cultural Change," *Sigma: Journal of Political and International Studies*: Vol. 12 , Article 3.

Available at: <https://scholarsarchive.byu.edu/sigma/vol12/iss1/3>

This Article is brought to you for free and open access by the Journals at BYU ScholarsArchive. It has been accepted for inclusion in Sigma: Journal of Political and International Studies by an authorized editor of BYU ScholarsArchive. For more information, please contact scholarsarchive@byu.edu, ellen_amatangelo@byu.edu.

America's Drug War: The Need and Requirements for Cultural Change

Mason Barlow

Introduction

We've got a war on our hands. . . . We've got to get real and do whatever it takes to provide safety.

Washington D.C. Mayor
Sharon Pratt Kelly

Over the last few years, a terrible "rage of violence," as described by the Reverend Jesse Jackson, has swept Washington, D.C. There were 489 murders in 1991, 451 in 1992 (New York Times 1993, A14), and 466 in 1993 (Lewis and Wheeler 1994, A10). Seemingly overwhelming, the fight against drugs and crime has created an atmosphere of desperation in urban America.

Not limited to America's major cities, increased drug and gang activity has spread to small and mid-size cities. Substance abuse penetrates all regions and segments of our society.

A solution to America's drug problem has so far escaped policy makers. The much trumpeted "war on drugs," initiated by the Reagan Administration to reduce supply, is now generally considered a failure. Demand reduction efforts, primarily prevention and treatment, demonstrate only marginal success. The drug culture continues to permeate the most vulnerable segments of American society, threatening the very institutions that preserve peace and order.

In light of America's political and cultural tradition, this article explores the need and requirements for developing a cultural ethos against drug abuse. The long-term solution to America's drug problem lies beyond the reach of government policy-

makers. While government initiatives against both supply and demand may be helpful in the ultimate mix, the only lasting solution will come about from a broad-based cultural ethos against drug use.

War on Drugs

War on Supply

In February 1982 President Ronald Reagan declared a "war on drugs." This effort focused primarily on supply-side strategies to stop illicit drugs from entering the United States. Responding to Congressional pressure, President Reagan signed a National Security Decision Directive in April 1986, declaring narcotrafficking a "lethal" threat to U.S. national security and opening the door for greater military involvement (Smith 1992, 131).

Military resources focused on primarily interdiction and the support of source countries in their eradication and enforcement efforts. This strategy yielded only marginal results. Operation Blast Furnace, for example, succeeded in temporarily lowering the price of Bolivian coca leaves, but failed to slow the flow of cocaine to the United States. Bruce M. Bagley sums up the failure:

Despite the decline in leaf prices and the parallel decline in cocaine refining in Bolivia during Operation Blast Furnace, however, there was no discernible impact on the availability of cocaine in the United States, and coca leaf prices rapidly rebounded to pre-Blast Furnace levels after U.S. forces withdrew in November 1986. (Smith 1992, 136)

In an earlier article, Bagley summarized the disappointing fruits of President Reagan's "war on drugs:"

Illicit drugs of all types were more readily available and cheaper in the United States in January 1989 than they had been at the outset of the Reagan Presidency in 1981. Drug use and abuse in U.S. society had increased dramatically over the 1980's, and the U.S. drug market remained the biggest and most lucrative in the world. Drug-related crimes and violence had reached epidemic proportions and in many U.S. cities, were greatly exacerbated by the introduction and rapid spread of a highly addictive form of cocaine known as "crack." (Bagley 1988)

Declaring "this scourge will end," President George Bush increased the militarization of the drug war, culminating in the 1989 invasion of Panama and the arrest of its president for drug trafficking. In 1990, 75 percent of the \$28 billion drug control budget was spent on enforcement (Reuter 1992, 21), yet these efforts did not prevent cocaine from reaching U.S. streets.

After a decade of watching the "war on drugs" in action with its emphasis on supply-side strategies, experts are now in general agreement that any meaningful solution to the problem must reduce the U.S. demand for illicit narcotics. Peter H. Smith concludes, "Ultimately, it is decline in demand that will bring about a decline in supply" (Smith 1992, 16). Perhaps learning a lesson from Operation Blast Furnace, Miguel Ruiz-Cabanas argues "Without demand reduction, the *result will be clear*: a simple substitution of suppliers" (160). After an exhaustive study of "Bolivia and Coca," James Painter concludes, "Only demand-side solutions . . . will work to reduce the cocaine trade" (Painter 1994, 145). Bruce M. Bagley concurs: "Unless the United States addresses the demand side of the equation--thereby reducing the profitability of drug trafficking--supply-side efforts in Latin America and the Caribbean may ultimately prove fruitless" (Smith 1992,

145). At the end of his volume *Drugs and Crime*, James Q. Wilson concludes, "I believe that every contributor to this volume agrees that significant reductions in drug abuse will come only from reducing the demand for those drugs" (Tonry 1990, 534).

Emphasizing the need for global cooperation, Stephen E. Flynn recognizes, "In the long run, reducing global demand is the only truly effective way to suppress the transnational drug trade and the traffickers who profit from it" (Flynn 1993, 22). And LaMond Tullis concludes, "It seems quite clear that policy makers must face the reality that their domestic drug consumption problem is primarily an internal matter and that the solution for it must ultimately be found within the borders of their own countries" (Tullis 1991, 222).

This consensus behind a demand-side solution does not negate the need or usefulness of *all* supply-side efforts. Indeed, some may prove helpful or essential in the overall mix. But clearly any long-term solution to drug abuse must emphasize demand reduction if it is to succeed.

Despite this widespread consensus among experts, public policy has changed little. After indicating it might reverse the Bush Administration drug policy, the Clinton Administration will now only make minor changes in this year's budget. The Pentagon budget proposes a 6 to 11 percent spending cut in interception efforts, which now account for 71 percent of its \$1.17 billion anti-drug budget. It would also increase spending by 5 percent on training and equipment for countries that grow, refine and export illegal drugs to 16 percent of the total budget. Comments Peter Reuter, director of drug policy research at the Rand Corporation, "They're taking money out of interdiction, which is good. But they're moving it to an area that I think is even less promising: helping governments that don't want to be helped." This year's

Clinton budget reflects no significant change from the Bush budget, distributing 65 percent for law enforcement and 35 percent for health measures (Treaster 1993, A4). Any future move toward a demand-oriented policy will certainly arouse opposition from those with a stake in the current policy (Thoumi 1993, 474).

War on Demand

Demand-reduction efforts attempt to "dissuade, discourage, or deter individuals from either using drugs or desiring to use drugs" (Tonry 1990, 464). Thus these efforts have centered on prevention, treatment, and increasing the costs of drug use (534). Before exploring the requirements of creating a strong cultural ethos against drug use, we should look at the effectiveness of these traditional tactics of reducing demand.

Traditional prevention strategies primarily target youth and are categorized thus: 1) information-dissemination, 2) affective-education, 3) alternatives, 4) social resistance-skills, and 5) social resistance-skills training emphasizing personal and social skills training (473).

Despite proliferating over two decades, school-based education programs emphasizing the consequences of substance abuse have proven ineffective as a deterrent strategy. Studies now show that increased knowledge has "virtually no impact" on prevention (487). In fact, some evidence suggests that "'Drug education' has probably increased experimentation and tampering with illicit drugs more than deterred it" (Tullis 1991, 225).

This realization has led to a new generation of programs based on 1) advanced understanding of psychosocial influences, 2) popular theories on behavior, 3) well-tested intervention methods, and 4) rigorous evaluations (Tonry 1990, 463).

However, the only effective preventive methods are school-based approaches anchored in social learning and problem behavior theories (510). So far, prevention efforts have been generally ineffective, though recently there appears to be marginal progress.

Attempts to reduce demand through treatment have also shown mixed results. As of 1987, 90 percent of all patients participated in four major varieties of treatment: 1) outpatient methadone maintenance, 2) detoxification, 3) therapeutic communities, and 4) outpatient drug-free programs (397).

Retention and funding have been the two major problems in treatment efforts. While significantly decreasing both heroin use and criminality, methadone maintenance programs suffer from a low retention rate. Only 17 percent of entrants remain in the programs after six months, 10 percent after a year (418). Of those addicts who complete treatment in methadone maintenance, as well as therapeutic communities, two-thirds relapse within a year (48).

Outpatient drug-free programs were the least successful in reducing drug use. After one week, 21 percent of patients drop out, 36 percent after one month, and 60 percent by three months. Although 45 percent of the patients reduce their use, one-third engage in equal or increased drug use (423).

In addition, "crack" poses a special challenge, as described by Bruce D. Johnson:

The only "treatment" that consistently rehabilitates crack users is total abstinence from all drugs, but those who abstain are a distinct minority. Even programs designed for middle-class and employed working-class crack users have dismal outcomes. Over 80 percent relapse to crack and other drug use within a year, most within 30 days of treatment exit. While a variety of experimental treatments are underway, the current prognosis for finding a

treatment that can keep the one-year relapse statistic under 50 percent appears distant. (Tonry 1990, 48)

For all treatment programs, the length of time in treatment is the best predictor of a successful outcome (5). Other integral program characteristics include flexibility, regular evaluation, and a controlled setting (442-3). The addict's social background also impacts the likelihood of success. For example, criminals and urban homeless are especially likely to drop out of treatment and relapse rapidly to heroin, cocaine, and crack (48). Legal compulsion appears to be the one variable that increases retention (537).

Nevertheless, there are waiting lists to enter treatment programs, which are seriously underfunded. In New York City, for example, there are between 500,000 and 600,000 hard-core drug users with only 55,000 publicly financed treatment slots. Of these slots, 34,000 are in methadone programs for helping the 200,000 heroin addicts, leaving about 20,000 slots for cocaine and crack addicts. Two-thirds of these slots are in out-patient clinics, leaving only 6,000 slots in residential centers that provide up to two years intensive care for hard-core addicts (Massing 1993, A15). These figures demonstrate the serious lack of funding of drug treatment efforts, one of the few effective efforts in the drug war.

Last, strategies to increase the individual cost of drug use have raised controversy. Studies have shown that drug testing, under proper circumstances, may reduce drug use. In the U.S. Navy, a 1981 survey showed that 48 percent of all enlisted personnel under twenty-five years were drug users. In the late 1980s, after drug testing was implemented, that number dropped to 5 percent (Tonry 1990, 540). While widespread testing could have a supposed positive effect by demonstrating society's intolerance of drug use, there remain to be resolved ethical, legal, and cost issues (541).

In the end, the war on demand has

produced only marginal results. Clearly, treatment efforts can have a sizeable impact, but lack sufficient funds. Even if a fully funded national treatment effort only "cures" 20 percent of the nation's addicts, it would be a remarkable achievement given our unimpressive results to date. Nevertheless, any solution to America's drug problem must succeed in preventing new people from joining the drug culture. LaMond Tullis contends, "The best long-term prospects lie in value initiatives that are credible" (Tullis 1991, 224). Until we significantly reduce the number of people who become drug users, both casual and hard-core, we will be playing catch-up.

Theoretical Framework

In exploring the requirements of promoting a strong cultural ethos against drug use, we must explain how general patterns of behavior change in American society. As we do this, we must sensitize ourselves to the differences between American society in general and the specific subcultures where drug use appears most prevalent, such as the urban "underclass." As we ask how cultural behavior changes in society generally, we should also consider whether the answer holds true for those communities caught up in the drug culture. We may or may not find that what holds true for American society in general holds true for smaller subcultures within American society.

A brief discussion of mankind's moral reasoning will help us understand patterns of behavior in America. Utilitarians and cultural relativists contend that morality is learned and that man is born a *tabula rasa*. Anthropologist Robin Fox answers their argument well:

If, indeed, everything is learned, then surely men can be taught to live in any kind of society. Man is at the mercy of all the tyrants who think they know

what is best for him. And how can he plead that they are being inhuman if he doesn't know what being human is in the first place. (Fox 1973, 13)

James Q. Wilson asserts that, with few exceptions, all humans are born with a "moral sense." He offers an instructive definition of this "natural" endowment:

By *moral sense* I mean a directly felt impression of some standards by which we ought to judge voluntary action. The standards are usually general and imprecise. Hence, when I say that people have a moral sense, I do not wish to be understood as saying that they have an intuitive knowledge of moral rules. Moral rules are often disputed and often in conflict; but the process by which people resolve those disputes or settle those conflicts leads them back to sentiments that seem to them to have a worth that is intuitively obvious. These sentiments constitute the fundamental glue of society, a glue with adhesive power that is imperfect but sufficient to explain the social order to some degree. (Wilson 1992)

According to Wilson, humans respond intuitively to moral sentiments. While moral rules need to be taught and reinforced, our natural "moral sense" exists from birth.

Voluntary behavior responds to the internalization of moral codes or rules. Internalization takes place as we learn the moral rules and are held accountable for obeying them. Implicit or explicit, the most effective teaching method is by example. Moral values or codes are primarily transmitted in American society by institutions of moral instruction and authority. These "transmitters" of moral guidance interact with our moral center and over time help us to internalize the moral rules of society. "Transmitters" do not "create" morality; they instead explain it and hold us accountable for it. These "transmitters" include the family, church, and school, among others (Vetterli 1987, 52). These institutions are not all equally important, but all influence the formation of an individual's moral code and therefore

behavior.

Not only should institutions of moral instruction be identified, but also values that contribute to the formation of a cultural ethos against drug use. We must identify the values adopted that lead to drug use and counteract them with values that most effectively discourage that behavior. Not all values are equally strong in discouraging drug abuse. To be most effective, they should not be foreign to American culture, but rather be found in the American cultural tradition.

Ultimately, cultural change depends on the health of these institutions and the effective transmission of appropriate values. These institutions are societal leaders who highlight which cultural values are important. Without shared values, society becomes immobilized, as its members question each other's intentions (Hawkins 1993). If these institutions break down, society loses its moral direction and faces problems such as widespread drug use, crime, and illegitimacy. Thus to explore the requirements of developing a new cultural ethos against drug use, we must assess the health of the institutions of moral authority and determine what shared values need to be highlighted as an effective counterbalance to drug use.

Institutions

Cultural change depends on the health and strength of the institutions traditionally responsible for the transmission of moral codes. If these "transmitters" are weak, moral norms and prosocial standards of behavior suffer, as new generations fail to internalize them and adopt them as their own. In addition, if these moral codes are not reinforced continuously, the older generation, that may have internalized them in their youth, may gradually abandon them. These institutions perpetuate the pro-social,

moral behavior that contributes to orderly society. Richard Vetterli identifies the "family, school, churches, neighborhood, and other local institutions" as the "primary feeders and simulators of the general civil religion" (Vetterli 1987, 52), defined broadly, as "a people's or a nation's 'official' or generally accepted dogmas, symbols, traditions, rituals, and practices, inherited and reinforced by various forms and methods of indoctrination and socialization" (95).

Sociologist Robin Williams observes that "every functioning society has, to an important degree, a 'common religion'" (Williams 1951, 312). Anthropologist Ruth Benedict agrees: "What really binds men together" in society "is their culture—the ideas and the standards they have in common" (Benedict 1961, 16). The common values, norms, and standards of behavior are the glue that holds society together. These institutions— family, church, and school— play the vital role of identifying, explaining, and holding people accountable to the shared morality. While not equally influential, these institutions interact with one another, contributing to the development of the cultural ethos.

Family

Traditionally the most effective "transmitter" of moral guidance, the family plays a role that no other institution can play. Through parental example and instruction, children internalize moral codes. They learn society's expectations and standards, as well as their responsibilities in society. Through daily interactions with family members, children learn to distinguish good from bad behavior, associating rewards with good behavior and punishments with bad behavior. Today the health of the family, as a primary transmitter of moral values, is in doubt. A

brief glance at the statistics clearly indicates that something is awry. Nationwide, 30 percent of all babies are born out of wedlock, compared to 5 percent in 1960. Urban communities, where the drug problem seems especially acute, experience a high rate of illegitimate births: 71 percent in Detroit, 66 percent in Washington, D.C., and 45 percent in New York City. By the year 2000, the overall figure for the United States could exceed 40 percent (Clymer 1993, A12). The divorce rate has more than doubled between 1960 and 1980, resulting in half of today's first marriages eventually ending in divorce. In 1970, 12 percent of American children lived in homes headed by single mothers; today it is almost one in four. Comments Jonathan Rauch, "The rise of single parenthood is, almost certainly, the most far-reaching change in American life in this century. Not for years will the effects be fully fathomed." Already the link to poverty is undeniable: children living in fatherless homes are five times more likely to be poor, with nearly 75 percent experiencing poverty before adulthood (Rauch 1992, 22). Clearly the family unit has many challenges to its stability today.

Drug abuse within the family significantly weakens the family as a nurturer and transmitter of moral rules. Bruce D. Johnson et al. make this assessment:

Hard-drug abuse may badly damage or end relationships among family members. Companionship and sexual pleasure between adults decline due to drug consumption. Time spent with children frequently ends; the abuser's erratic and unreliable behavior undermines parent and child relationships. Once out of the household, the male drug abuser rarely has contact with his children, although female addicts may try to maintain contact. In short, cocaine-heroin abuse (unlike alcoholism and daily marijuana use) severely and rapidly undermines, if not destroys, the family as an economic and affective unit. (Tonry 1990, 54)

Evidence of this is found in New York City, where over 10 percent of babies born test positive for cocaine. "A sizeable proportion of them," state Johnson et al., "are abandoned by their mothers before leaving the hospital and are never reclaimed," contributing to the growing number of children born to "no parent" families. "That is," they continue, "no natural parent of the child is responsible enough to raise the offspring; few or no members of the child's kin network are willing to assume this responsibility" (55). Gilbert J. Botvin argues:

By far, the strongest factors associated with substance use/abuse concern both the behavior and attitudes of significant others such as parents, older siblings, and friends. Individuals who have family members or friends who are substance users have a significantly increased risk of becoming substance users themselves. (Tonry 1990, 466)

Clearly, the moral environment of the home influences child behavior for good or bad. Children generally learn how to live or how not to live life from their parents by word as well as observation.

Some suggest that families have "dropped the ball," leaving children in a "moral vacuum" at home (Peterson 1992, 10D). A controversial new bill before the New Jersey State Legislature reflects a growing concern that parents are shying away from their traditional responsibilities to their children. The bill would subject parents to a "petty disorderly persons conviction" if their child has ten or more unexcused absences in a school year and would fine them \$25 for the first offense and \$100 for subsequent offenses up to a maximum \$500, thirty days imprisonment, or both (Gray 1992, B4). Jesse Jackson has also recognized a need for greater parental responsibility, developing a plan to mobilize parents through a new church-based program. The program would distribute

cards through black churches pledging parents to take their children to school, meet their teachers, read their children's report cards and turn off their TVs at home at least three hours every night (Sullivan 1993, A14).

These measures represent a general concern that parents are failing in their traditional roles as providers of moral guidance for their children. Any long-term solution to the drug problem must reverse the decline of the American family as a "transmitter" of moral instruction and accountability. The success of a new cultural ethos against drugs requires an improvement in the condition of the family, so that it may serve in its traditional role of socializing children with the positive values and norms of the community.

Church

Among institutions, the church plays a vital role in the transmission of moral rules from one generation to the next. Said Richard and Shirley Jessor:

Among the institutions of society most clearly identified with conservation of traditional values and the maintenance of conventional standards of conduct, the church is perhaps preeminent, and much of religious doctrine is directly concerned with morality and with sanctions against transgression.

The influence of the church is not limited to the worship service, but extends to other institutions, including the family. The Jessors continue:

The socialization "reach" of the church as an institution extends well beyond its direct contact with those who attend services or participate in church schools; its doctrines are often transmitted within the family context by parents who serve, either explicitly or by example of their religious commitment and identification, to reinforce the teachings of their religion. Thus religious socialization is intimately connected with family socialization. (1977, 217-18)

The interplay between church and family contributes significantly to the creation of the American cultural ethos.

Religion is made up of "beliefs" and "rites." Beliefs are the "state of opinion" (Durkheim 1975, 113); rites are "rules of conduct that prescribe how man must behave in relation to sacred things" (117). These common beliefs and rites "unite into one single moral community called a church all those who adhere to them" (123). Religion, by its moral rules and authority, is a major influence on personal behavior, as well as the cultural ethos.

Among American institutions, none "did so much with so little as the black church." African Americans historically have treasured the black church for addressing both their secular and sacred interests (Berry and Blassingame 1982, 105). In his classic study *The Philadelphia Negro* (1899), W. E. B. Du Bois identified the many secular endeavors of the black church:

All movements for social betterment are apt to centre in the churches. Beneficial societies in endless number are formed here; secret societies keep in touch; co-operative and building associations have lately sprung up; the minister often acts as an employment agent; considerable charitable and relief work is done and special meetings held to aid special projects. (Berry and Blassingame 1982, 105)

Today, the black church continues to fulfill this role. With roots in the civil rights movement, the church continues to fight for social justice as well as the spiritual well-being of the black community.

Not surprising given its historic role in the black community, the church is one of the first institutions that is turned to for addressing the plague of drugs and violence. Many efforts are being made in the religious community, from preachers on the corner in drug infested neighborhoods of Washington, D.C., to *Hope in Youth*, a new multimillion dollar program in Los Angeles, funded by

government but run by local churches (Associated Press 1993, A13).

In Washington, D.C., the Metropolitan Baptist church purchased most of the row houses on its block, including a deli. The church cleaned up the block, ousting the drugs, alcohol, cigarettes and lottery tickets. Metropolitan's senior minister, the Reverend H. Beecher Hicks Jr. said, "We need to set an example for what is good and clean and wholesome in our communities. If the church cannot do it, no one can" (Goodstein 1993, B1).

The importance of the church in the fight against drugs cannot be overstated. Individuals who are highly religious are less likely to engage in drug abuse. Said Jessor and Jessor:

Religiosity was shown to function as an important personal control against deviant behavior, and church attendance was shown to be inversely related to engagement in a variety of problem or transition behaviors [including drug use]. (1977, 218)

The degree of "religiosity" or "fundamentalism" or "orthodoxy," of course, influences the degree to which individuals tolerate transgression.

According to the April 1993 *Gallup Poll Monthly*, 59 percent of all Americans said religion was "very" important to them, 32 percent said "fairly," and 9 percent said "not very." Among urban communities, where drug abuse has hit hardest, the response was close with 62 percent saying "very," 29 percent "fairly," and 9 percent "not very." Among the non-college educated, 64 percent said "very," 29 percent "fairly," and 7 percent "not very." Among low income individuals, earning less than \$20,000 a year, 66 percent said "very," 28 percent "fairly," and 6 percent "not very." Finally, among non-whites, 80 percent said religion was "very" important to them, 16 percent said "fairly," and only 4 percent said "not very" (Newport 1993, 43). This

poll reveals that the most religious communities are found among the non-white, urban, low-income, non-college educated sectors of American society—traditionally considered the most vulnerable community to drug abuse. Thus the church plays a potentially influential role among the disadvantaged.

Seventy-one percent of Americans claim to be a member of a church or synagogue, with 41 percent attending during the past week (Newport 1993, 37). Clearly, few institutions touch the lives of so many Americans and have such a powerful influence on individual moral development.

The tenets of Christianity, Judaism, Islam, and certainly other religions contain moral codes that concern substance abuse. Among Americans, 88 percent identify themselves with a Christian religion, 2 percent with Judaism, and 1 percent with Islam. Only 5 percent do not identify themselves with any religion (Newport 1993, 36). Thus between 91 and 95 percent of Americans already associate themselves with a religion that speaks or can speak to substance abuse. Given its traditional place and moral authority in American society, the church must play an important role in the development of a strong cultural ethos against drug abuse.

School

Another traditional "transmitter" of moral instruction and authority is the school. Through most of American history, schools focused on the development of moral character, along with reading, writing, and arithmetic. Comments William Kilpatrick:

The emphasis was not on taking a stand on an issue but on building good habits of behavior. Morality wasn't just in your mind in an abstract way but it was wired into your very being through practice and habit. It wasn't a curriculum or a course but a general approach to life. Before the '60s, no one

ever dreamed that values could be capsulized and taught in a one-hour classroom session.

Beginning in the late sixties through the seventies, most schools changed from character education to "decision making" or "values clarification" education, based on the idea that schools should not push certain values, but rather teach "relativism," or the belief that all values are equal and that no one can say what is right or wrong. This educational philosophy taught decision-making skills to help the children determine what values would be best for them (McCabe 1992, 32). James Q. Wilson observes:

Education is, of course, a moral endeavor. It is not and never was simply a form of practical instruction. This does not mean teachers and professors must announce moral precepts. That's not the way we learn morality. They must organize a moral environment in which right behavior is rewarded and wrong behavior is punished and people learn respect, duty, and obligation and if that is imposing moral views, I say that is what education is about. (Wilson 1993)

For the past twenty years or so, public schools have undermined the moral instruction taught at home and at church by teaching relativism.

Only recently, schools have begun to turn back toward character-based education. School systems in Utah, Atlanta, Oregon and Virginia have changed approaches with good results. In Oregon, for example, a school district has implemented a four-year curriculum emphasizing different virtues, such as honesty, integrity, and respect, each year. The curriculum includes the study of people who have exhibited a particular virtue and guidance on how to put a virtue into practice (McCabe 1992, 32).

Although school plays an important role in the transmission of moral codes to youth, it is unfair to expect it to succeed without vigilant and supportive parents. As

noted earlier, these institutions interact. Just as the family's efforts are hurt if the school undermines them, so can the school's efforts be undermined if they do not receive support from the family. Also, religion impacts the attitudes of family members and school administrators. Any new cultural ethos against drug use must emerge from the combined contributions of all these institutions.

Values

To develop a cultural ethos against drug abuse, society must not only work *through* the most effective institutions, but also work *with* the most effective values. Not all values have equal power in deterring illegal drug consumption. Any successful "value initiative," designed to establish a strong cultural ethos against drug abuse, must incorporate the strongest anti-drug values.

Useful values may be utilitarian or moral. Also they must "fit in" with the targeted culture. Values that play well in white middle-class America, for example, may seem foreign among urban, African-American communities. Though we often exaggerate our differences, they do exist and we need to be sensitive. One of the strengths of community-level initiatives is that they can be tailored to specific sub-cultures, employing the most appropriate and effective symbols, institutions, and values. Families, churches, and schools can tailor their efforts to their members, thereby being more effective than a nationwide, publicly lead campaign, which conjures up frightening images of social engineering.

"Self-Interest Rightly Understood"

Among secular values, few discourage drug abuse as powerfully as Alexis de Tocqueville's concept of "self-

interest rightly understood." Defined as liberal individualism tempered by republican virtue, "self-interest rightly understood" reflects the American Founders' concern that this free society embrace virtue as a necessary bulwark against self-destructive self-interest. Said de Tocqueville:

The principle of self-interest rightly understood produces no great acts of self-sacrifice, but it suggests daily small acts of self-denial. By itself it cannot suffice to make a man virtuous; but it disciplines a number of persons in habits of regularity, temperance, moderation, foresight, self-command; and if it does not lead men straight to virtue by the will, it gradually draws them in that direction by their habits (Vetterli 1987, 257).

Simply, "self-interest rightly understood" means a healthy ambition. Self-interested individuals abstain from self-defeating activities, such as drug abuse. While judging self-interest capable of removing "large segments of a new underclass generation from a drug abuse culture," LaMond Tullis concludes that

neither it nor a regime based on fear will produce desirable long-term drug consumption results in the absence of value change—the general development of generations of people who desire to sustain their lives without abusing drugs (Tullis 1991, 223).

"Self-interest rightly understood" alone cannot succeed as a final solution to the demand problem. It must be accompanied by other values.

Personal Responsibility

Capable of distinguishing right from wrong, individuals are responsible for their behavior. Regardless of their circumstances, individuals must accept ultimate accountability for their actions. Parents, clergy, teachers, community and government authorities must hold individuals accountable for their behavior, lest the ethic

of responsibility turns hollow. Comments William Bennett, "What must link all our efforts, from supply to demand, at all levels, is an ethic of personal responsibility. Those who transgress must account for their transgression. Those who spurn or resist transgression must be supported and praised" (Bennett 1989, 7). In holding individuals accountable, he continues,

We need to re-orient our process of justice where drugs are concerned and adopt the principle that certainty of punishment is more important than severity of punishment. Those guilty of drug offenses must believe that punishment is inevitable. As long as they don't, the deterrent effect of incarceration will be neutralized (Bennett 1989, 4-5).

Along this vein, not only should the criminal justice system do a better job at holding individuals accountable, but parents too must hold their children responsible, clergy should hold their parishioners responsible, teachers and administrators should hold their students responsible. Especially for the young, the "certainty, not severity" doctrine clearly labels drug use as socially intolerable. For casual users, this brings home the potential costs of their behavior; for addicts, this may encourage them to finally accept their individual responsibility and enter treatment (Bennett 1989, 7). The internalization of personal responsibility will contribute to a stronger cultural ethos against drug use.

Religious Values

Religion can give people the best reasons to avoid drug abuse. In fact, research shows that highly religious people are less likely to engage in drug use and that religious support increases the likelihood of success for individuals engaged in treatment. In Arlington, Virginia, the Lomax AME Zion Church is working to establish a program that combines standard treatment

techniques with a spiritual emphasis. Said James Van Cooper, a member of the program's advisory board and employee of the Fairfax County Department of Mental Health:

We tend to look at things from a clinical or treatment perspective, and we don't deal with the spiritual aspects of it. That's the part that is missing. The spiritual guidance and the enrichment are the key things that empower the users to go and make a difference in their lives (Kaplow 1992, V1).

Numerous testimonials of recovered drug addicts reveal that God had played an important role in their recovery. To understand religion's role in keeping people off drugs and helping them recover, we must look at the religious values or tenets that operate.

In America, 91 percent associate themselves with the Christian-Judeo-Islamic ethic, Christianity being 88 percent. These religions share many fundamental beliefs, including traditional prohibitions against substance abuse. Considering the central position of the church in American society, the church can have a powerful impact on the drug problem.

Among religious values, the very belief that God exists and loves His children can have a powerful impact against drug use. Studies have associated drug use with low self-esteem (Tonry 1990, 466). A strong belief that God loves you and is pleased with you regardless of socio-economic standing is a forceful boost to self-image. Paul writes in Romans 8:35,38-39:

Who shall separate us from the love of Christ? shall tribulation, or distress, or persecution, or famine, or nakedness, or peril, or sword? . . . For I am persuaded, that neither death, nor life, nor angels, nor principalities, nor powers, nor things present, nor things to come, nor height, nor depth, nor any other creature, shall be able to separate us from the love of God, which is in Christ Jesus our Lord.

For Christians, evidence of this love is found in John 3:16: "For God so loved the world, that he gave his only begotten Son." Belief that God loves us individually and unconditionally fortifies an individual's self-worth. Found in Judaism, Christianity and Islam, concepts of "chosenness" can also add upon this love and increase self-worth.

Hope and faith are other powerful tenets in religion. Given God's love, Christians, Jews, and Moslems share Matthew's contention that "with God all things are possible" (Matthew 19:26). The Lord asked Abraham, "Is any thing too hard for the Lord?" (Genesis 18:14). Low self-confidence is associated with substance abuse (Tonry 1990, 466). Low self-confidence also discourages people attempting to break the addiction. Hope and faith in God's power enables addicts to overcome an addiction which might seem impossible to overcome alone. In addition, those who may be led to use drugs in despair of their situation might resist by having hope and faith in God's power to help the individual overcome his trials in life. The civil rights movement drew upon the faith and hope of its members in God to deliver. In the same spirit, the Reverend Jesse Jackson recognizes the need for hope in poor communities, making famous the call, "Up with hope! Down with dope!" These values are most powerful in their effect on drug use when placed in a religious context.

Another valuable religious tenet found in America is the belief in life-after-death and that all individuals must face a final judgement by a just God. This belief makes individuals accountable not only to the law for public behavior, but also to God for private behavior. This tends to have a moderating effect on personal behavior, including "victimless" crimes.

Last, all three major American religions and many more share a common charge to followers to love their fellowmen. Said Jesus, "A new commandment I give unto you, That ye love one another; as I have loved you." (John 13:34). In Leviticus 19:18, the Lord commanded Israel, "Thou shalt love thy neighbor as thyself." Love implies not only concern, but also commitment and sacrifice for another. This fundamental tenet of religion will not only strengthen family bonds, but also require tempted individuals to think twice and contemplate the impact their drug use will have on others.

In searching for a cultural ethos against drug use, secular and religious values can have a positive impact. The most persuasive arguments not to use drugs are often religiously based. But those most vulnerable to be drawn into drugs may not be reached easily by religious arguments. No cultural ethos against drug use can appear overnight; it may take generations as these values take greater root in society. But as a society gradually internalizes these values, it becomes healthier and more capable to deal with the hardest to reach.

Conclusion

After a decade of fighting the "war on drugs," the nation's situation seems worse. Americans generally sense that their efforts have failed to reduce drug consumption and its related externalities. As violent crime increases and general health decreases, the quality of life in American society, particularly in urban America, suffers.

American policy-makers are at a loss for a solution. A decade-long strategy emphasizing supply-side reductions has failed; demand approaches have thus far

produced only marginal results. The long-term solution to America's drug problem lies out of the reach of government policy-makers. While government initiatives against both supply and demand may be helpful in the ultimate mix, a lasting solution will only come from a broad-based cultural ethos against drug use.

Family, church, and school are the primary institutions that transmit the essential pro-social, moral values that unite society in order and peace. They highlight the common values within society that permit individuals to live peacefully and positively with one another. When weak or unhealthy, these institutions are less capable of transmitting the most important societal values, including those values that most effectively discourage drug use.

Jesse Jackson had it right speaking to a concerned group recently:

Three hundred and sixty-two blacks under the age of 21 have been killed by other blacks in New York City this year. More than 300 in New Orleans. Around the country there is this rage of violence, *not born of poverty and neglect as much as driven by drugs and guns and perverse values* (Sullivan 1993, A14).

America's answer to the drug problem should not focus on the Bolivian coca farmer, but on our own soul as a nation. As the scripture says, "first cast out the beam out of thine own eye; and then shalt thou see clearly to cast out the mote out of thy brother's eye" (Matthew 7:5). By strengthening the institutions of moral socialization and employing the most effective anti-drug values, a cultural ethos against drug use can succeed to significantly reduce drug consumption in America.

WORKS CITED

- Associated Press. 1993. Los Angeles gets plan to ease gang problem. New York Times, October 14, 13(A).
- Bagley, Bruce M. 1988. U.S. foreign policy and the war on drugs: Analysis of a policy failure. Journal of Interamerican Studies and World Affairs 30 (Summer/Fall): 189-212.
- Benedict, Ruth. 1961. Patterns of culture. Boston: Houghton Mifflin.
- Bennett, William J. 1989. Moralism and realism in the drug war. New Perspectives Quarterly 6 (Summer): 4-7.
- Berry, Mary Frances and John W. Blassingame. 1982. Long memory: The black experience in America. New York: Oxford University Press.
- Clymer, Adam. 1993. Moynihan's health plan: First, cure social decay. New York Times, October 20, 12(A).
- Durkheim, Emile. 1975. Durkheim on religion. Boston: Routledge and Kegan Paul.

- Flynn, Stephen E. 1993. The transnational drug challenge and the New World Order. Washington, D.C.: The Center for Strategic and International Studies.
- Fox, Robin. 1973. Encounter with anthropology. New York: Harcourt Brace Jovanovich.
- Goodstein, Laurie. 1993. Urban church's spirited renewal as new members flock, Shaw's Metropolitan Baptist buys the block. Washington Post, February 28, 1(B).
- Gray, Jerry. 1992. Bills in Trenton aim at conduct of youngsters. New York Times, March 10, 1 (B)and 4(B).
- Hawkins, John. 1993. Lecture, notes taken by author. Brigham Young University, November 2.
- Jessor, Richard and Shirley L. Jessor. 1977. Problem behavior and psychosocial development. New York: Academic Press.
- Kaplow, Bobby. 1992. Spiritual comfort part of church's Rx for addiction. Washington Post, September 24, 1(V).
- Lewis, Nancy and Linda Wheeler. 1994. Arrest is swift in fatal shooting of D.C. officer. Washington Post, January 1, 1(A) and 10(A).
- Massing, Michael. 1993. Help addicts? Sure. We promise. Really! New York Times, October 22, 15(A).
- McCabe, Bruce. 1992. What ever happened to kids' morals? An educator tries to fathom what went wrong. Boston Globe, December 7, 32.
- New York Times. 1993. Police, not troops, in Washington. New York Times. October 27, 14(A).
- Newport, Frank. 1993. The Gallup poll monthly. Princeton, New Jersey: The Gallup Poll.
- Painter, James. 1994. Bolivia and coca: A study in dependency. Boulder, Co.: Lynne Rienner Publishers.
- Peterson, Karen S. 1992. Guiding kids with a curriculum of compassion. USA Today, December 14, 10(D).
- Rauch, Jonathan. 1992. America's crack up: Government can wage war, build roads, and desegregate schools but it can't save us from ourselves. Los Angeles Times, July 26, 22(A).
- Reuter, Peter. 1992 Hawks ascendant: The punitive trend of American drug policy. Daedalus 121 (Summer): 15-52.

- Smith, Peter H., ed. 1992. Drug policy in the Americas. Boulder: Westview Press.
- Sullivan, Ronald. 1993. Jackson calls on parents to fight school violence. New York Times, October 12, 14(A).
- Thoumi, Francisco E. 1993. Political economy and illegal drugs in Colombia.
- Tonry, Michael and James Q. Wilson, eds. 1990. Drugs and crime. Chicago: University of Chicago Press.
- Treaster, Joseph B. 1993. Pentagon drug fight to edge away from emphasis on interception. New York Times, October 29, 4(A).
- Tullis, LaMond. 1991. Handbook of research on the illicit drug traffic. New York: Greenwood Press.
- Williams, Robin M., Jr. 1951. American society: A sociological interpretation. New York: Knopf.
- Wilson, James Q. 1993. The moral sense. American Political Science Review 87 (March), 1-11.
- _____. 1993. Is there a moral sense? Speech given at Brigham Young University, Provo, Utah. Harold B. Lee Library, Learning Resource Center. Cassette AC3943.
- Vetterli, Richard and Gary Bryner. 1987. In search of the republic: Public virtue and the roots of American government. Totowa, New Jersey: Rowman and Littlefield.