January 1993, Vol. 59, No. 3, Pp. 552-53.

Our Right to Drugs: The Case for a Free Market.

By Thomas Szasz. New York: Praeger Publishers, 1992. Pp. xvii, 199. \$19.95.

Many recent books have exposed drug prohibition for the folly and tragedy that it is, but none do what this book does: challenge drug prohibition itself as a selfish and disgusting indecency perpetrated against the American people. From his libertarian mountain top, Thomas Szasz writes not to cajole or bargain with his adversaries, but to purify his own thoughts and those of fellow believers. Such is the way of the unruly crank, but sometimes the crank, shining magnificently in his own purity, over time finds more influence than does the eager compromiser. (Ponder the case of Szasz's hero, Ludwig von Mises.)

Szasz is a psychiatrist and Professor Emeritus at SUNY Health Science Center in Syracuse. The author of over twenty books, he is famous for describing the system of medicalizing deviant behavior by experts, often with drugs and without consent, as a sham, and for denouncing the literalizing of metaphors of health and illness for patterns of behavior. (Szasz notes that in 1973, "the American Psychiatric Association declared that homosexuality was no longer a mental illness" [p. 67].) He argues against "mental illness," and for individual responsibility and the dignity of individual autonomy, although he acknowledges the need to care for feeble individuals. His body of work represents one of history's most passionate and penetrating explorations of the moral constitution of the libertarian idea. Here he is in the company of von Humboldt, Mill, Spencer, and Mencken.

Szasz's siege on drug prohibition is a moral one in three ways. First, he discusses the moral basis out of which drug prohibition grows. Second, he studies the moral consequences of drug prohibition. And third, pointing to the doctrine of inalienable rights, etc., Szasz proclaims the Drug War itself immoral.

Szasz presents drug prohibition as a manifestation of "this nation's historical penchant for waging moral crusades" [p. 33]. In 1906, "although virtually all of the drugs of which we are now deathly afraid were freely available, there was nothing even remotely resembling a 'drug problem'" [p. 34]. The crusade at that time was against pornographic books, magazines, and pictures, and Anthony Comstock, its Torquemada, boasted in 1913, "I have convicted persons enough to fill a passenger train of sixty-one coaches, sixty coaches containing sixty passengers each and the sixty-first almost full. I have destroyed 160 tons of obscene literature" [p. 36]. Will a future John Doe one day look back on drug persecution in the late 20th century—"a moral crusade wearing a medical mask" [p. 57]—and find it as revolting as the John Doe of today finds the boast of Comstock?

The American intemperance—crusades against pornography, against alcohol, against opiates, for democracy—is an idealism that seeks "to perfect the world through the conquest of nature and the moral reform of others" [p. 31]. It is authoritarian and anti-libertarian, since the main goal is not the reformed behavior but the coercive waging of the crusade itself. It is a projection outward of the individual's drama to control himself; tired and bored of his personal struggle, usually gloriously triumphant, the puritanical crusader seeks the drama and self-exaltation that meddling in the lives of others holds out. Pleasure-producing activities are particularly vulnerable to moral assault because the motive of simple pleasure is easily denounced as selfish and anti-social. For example, "Americans feel it is morally justifiable to take pills to make oneself healthy, but not to make oneself happy" [p. 92]. In the eyes of the prohibitionist, the drug user "pollutes himself as well as his community" [p. 63].

The moral basis of drug prohibition merits study by anthropologists. The War on Drugs displays "the grand themes of taboo, scapegoating, and redeemership—traditionally religious, now medical" [p. 64]. Szasz describes the Reagans' "moronic anti-drug slogan" ("Just say no to drugs") as "a ritual incantation" [p. 77]. Szasz shows the taboo against publicly admitting to drug use of any kind, even aspirin or alcohol [pp. 84f], and the taboo against reasoned assessment of drug prohibition [pp. 53, 96, 102]. The scapegoating of so-called dangerous drugs is a means of obtaining group cohesion. He says [p. 58]:

. . . our collective striving for a 'holy utopia' is the superglue that reconciles and unites . . . the diverse personalities and politics of Nancy Reagan and Jesse Jackson, George Bush and Charles Rangel, William

Bennett and Ralph Nadar. If our love of the Constitution and gratitude for our heritage cannot keep us united as a nation, then hatred of 'dangerous drugs' must do the job.

Thus, "dangerous drugs are therapeutic for the body politic" [p. 115].

Szasz indicts the Drug War not only for its moral basis, but also its moral consequences. The Drug War is a bulwark against the presumption of individual choice and for the presumption of the state as forbidding father and succoring mother. The American people are correspondingly degraded. They knuckle under to belligerent paternalistic dictates, they acquiesce in the face of draconian police measures, they learn to fear and respect medical experts who enjoy state power, sometimes even feeling gratitude, they willingly imbibe the indoctrination of so-called drug education programs, and they mouth the intolerant dogma of the crusade. Thus have we experienced "nearly a century of medical-statist infantilization and tyrannization" [p. 97].

Szasz points out a subtle moral consequence when exploring the link between drug prohibition and prescription laws. Because Americans are no longer permitted to self-medicalize, they must patronize doctors to get the drugs they seek. A good economist senses that there is little point in distinguishing between "medical need" and plain old want—holy claims of scientific medicine to the contrary. Thus drug prohibition (of which prescription law is but a species) "fosters a mutually degrading dishonesty between physicians and patients, epitomized by the prescribing of sleeping pills" [p. 134]. Szasz hates passionately the medical-statist establishment and gives ample attention to how organized medicine has supported the whittling away of the once-free market in drugs, in pursuit of its own profit and sacerdotal exaltedness.

Szasz advocates a free market in drugs. He distinguishes himself, too furiously, from others in favor of freeing up drugs, accusing them of being too willing to compromise. He even attacks Milton Friedman as a pussyfooter, although the dustjacket bears a warm endorsement by Friedman. The only restriction Szasz would accept on the sale of marijuana, cocaine, crack, opiates, and so on is one based on age.

Unlike virtually all other advocates of freer drugs, Szasz claims the free market as a moral right. He cites Locke, Jefferson and others on the matter of life, liberty and property, and says that complete laissez-faire in drug trade lies squarely within such "inalienable rights" [pp. 2f]. I do not see that such fundamentalist libertarian declarations add much to the more earthly arguments and the honest expression of contempt. Szasz cites Jefferson to better effect in reproducing his statement: "Were I to commence my administration again, the first question I would ask respecting a candidate would be, 'Does he use ardent spirits?' "Szasz remarks [p. 85]: "More afraid of the teetotaler than the alcoholic, Jefferson—a connoisseur of wine—suggested this drug test to avoid the threat posed by the moral meddler."

Szasz offers novel insights that I can only mention. He describes the former free market in drugs and the lack of serious problems; he details the subtle historical transformation of drug use from something protected by constitutional interpretation to target of government war [p. 37]; he notes the shared prohibitionism of the Left and the Right [pp. 47, 58]; he devotes a chapter to the racial aspects of drug prohibition (e.g., drug enforcers are far more likely to accost blacks than whites); he suggests a connection between drug prohibition and the personal dread of the availability of an easy and pleasurable way to commit suicide [p. 150]; he remarks on the link between drug prohibition, prescription laws, and the doctor racket [pp. 53, 109, 132]; and he discusses how pain killers are tragically underused because doctors fear drug enforcers [pp. 125f]. As regards the last, Szasz provides two especially nice quotations—Thomas Sydenham, M.D., 1680: "Among the remedies which it has pleased the Almighty God to give to man to relieve his sufferings, none is so universal and so efficacious as opium;" Russel Portnoy, M.D., Sloan Kettering Hospital, 1987: "The undertreatment of pain in hospitals is absolutely medieval."

If Szasz finds drug prohibition morally reprehensible, he also retains moral hope. He says [p. 84], "the aim of real drug education ought to be to encourage not drug avoidance, but good drug-using habits, that is, using drugs knowledgeably, responsibly, and with self-discipline" [p. 84]. He hopes [p. 160] for a society in which "we are rewarded and punished for the behaviors we display—not . . . for the drugs [others] detect in our urine."