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IS PROHIBITION MAKING DRUG FIENDS?

ASSERTIONS THAT THE PROHIBITION of alcoholic beverages in the United States is resulting in an increased use of habit-forming drugs are negated by facts, so far as they can be ascertained, we are told by Cora Frances Stoddard, executive secretary of the Scientific Temperance Federation, in a report printed in *The Scientific Temperance Journal*. To ascertain what, if any, effect national prohibition was having on the use of narcotic and habit-forming drugs, Miss Stoddard sent in June, 1920, a questionnaire to the Board of Health of every State and of all cities (88) of over 80,000 inhabitants. The questionnaire asked for official statistics indicating in any way the prevalence of drug addiction, past and present, the extent to which drug addicts were formerly alcoholic drinkers, whether inmates of institutions for treatment of addicts were increasing, or if new regulations had gone into effect recently which might affect statistics. Replies conveying information have so far been received from officials of nineteen States and from officials of twenty large cities. They indicate lack of information as to exact conditions, and even approximate figures as to the number of drug addicts are scanty. The claim that prohibition increases the number of drug addicts, however, is not supported, and the trend of opinions and data is that it has not increased the use of drugs, and that where there seems to be an increase, it is due to active enforcement of antinarcotic laws and regulations. Abstracts from separate reports on these indications are given as follows:

“Providence, R. I.: ‘We fail to find a man among applicants for treatment formerly addicted to the free use of alcoholic beverages.’

“Massachusetts: ‘Drunkenness and drug addiction not common in the same person.’

“New York City Health Department during past year asked 1,403 drug patients how they became addicted. Of 1,247 who gave information, only 12, about 1 per cent., came to it from alcoholic indulgence.

“Philadelphia General Hospital asks each drug patient as to the effect of inability to get liquor upon his drug disease. ‘No connection whatever has been found.’

“Of 55 cases registered at Jacksonville, Fla., this past year, only two had turned from alcohol to drugs. ‘From the histories of persons registered it appears that there is no relation between the drug addict and the habitual user of alcoholic liquor.’

“In Kentucky it is thought that many liquor users do turn to drugs when they have a chance, but there are no statistics. In Chicago investigations show that practically all addicts begin with alcoholic liquors, but the statistics already quoted do not indicate that prohibition has increased the number.

“Los Angeles (Cal.) Narcotic Clinic found in its first 500 cases only three or four who took drugs after being deprived of alcohol.

“Reports from several widely separated cities as Bridgeport, Conn.; Rochester, N. Y.; Richmond, Va.; and Milwaukee, Wis., find no evidence that alcoholic drinkers become drug addicts, while in Canton, Ohio, it is observed that ‘those deprived of liquor seek not drugs but substitutes like Jamaica ginger, raisin jack, etc.’

“The Pennsylvania Chief of Drug Control thus expresses this phase of the situation:

“‘A large proportion of the people who become addicted to narcotics are of the class who also drink liquor, but I am strongly of the opinion that the average man who drank liquor before prohibition is facing the proposition as a good sport and despises the drug addict. Such a man would not think of substituting drugs for liquor. As regards the lower, especially the criminal, classes, I have no doubt some of them will take cocaine if they can get it and can not get liquor, but they are the fellows who took cocaine before when they could get it. I can trace no connection between the use of liquor and morphin except among the lower grade of the population.’”

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Further evidence that prohibition of alcoholic drinks has not been in the past the chief cause of the spread of drug-using is presented by Miss Stoddard from further investigations which have shown that the use of drugs spreads chiefly through bad associations and the appeal of commercialism. Of 3,262 drug patients in New York City, 2,482 gave "associates" as the origin. "Drug addiction spreads like a pestilence through association." The Treasury Department Commission found that in 1,310 cases, 974 were due to association with other addicts. The Los Angeles Narcotic Clinic reports: "It is common to hear that the first hypodermic dose was administered to the novice by the addict. In the young this first step was taken in a spirit of bravado." Drug addicts are comparatively youthful, which again indicates that the habit is not usually built on antecedent alcoholism. A large majority of the patients at the New York Health Department Clinic "are under twenty-five, and nearly one-third of them are not out of their teens." "It is easily understood," says the Health Department *Bulletin*, "what a large share idleness and bad companions have in starting the use of narcotics—often, perhaps, taken from a morbid desire to imitate what they think is a practise of the "underworld," "gunmen," and "gangsters." We read further:

"Behind all these conditions the greatest influence in the spread of drug addiction is the financial interest. In many parts of the country were discovered conditions similar to those thus described by Dr. Lichtenstein in 1914:

"Individuals have come to the conclusion that selling "dope" is very profitable. They have sent their agents among gangs frequenting our city corners, instructing them to make friends and induce them to take the drug. Janitors, bartenders, and cabmen have been employed to help spread the habit. The plan has worked so well that there is scarcely a pool-room in New York that may not be called a meeting-place of drug fiends. The drug has been made in candy and sold to school children. The conspiring individuals, being familiar with the habit-forming action of the drugs, believe that the increased number of "fiends" will create a larger demand for the drug and in this way build up a profitable business.'

"This desire for profit from an illicit trade probably explains the secret and long-unobserved spread of drug addiction, and the present smuggling from Canada and Mexico which complicates law-enforcement and makes it difficult to get statistics of the extent of the evil. As in the case of alcoholic liquors, an aggressive traffic sought for profit the wrecking of human lives. In time the results began to appear in the courts in both 'wet' and prohibition sections. As soon as legislation was directed against the traffic it dragged the conditions out into the light of day."

Miss Stoddard closes with the following summary:

"1. There are no dependable or extensive statistics of the preprohibition period as to the number of drug addicts. Statements that prohibition increased drug-using are, therefore, without statistical foundation.

"2. Present statistics, tho still meager, and observations of public officials give practically no indication whatever that the former alcoholic is substituting drugs for liquor. Where liquids containing these drugs are used as substitutes they were primarily taken for their alcohol, or where use of certain drugs has increased it is added to previous use of drugs.

"3. The number of drug addicts who became such as the result of alcoholic indulgence is negligible. Most authorities see little or no connection between them.

"4. The drug evil spread secretly for years little noticed, finally manifesting itself with virulence in 'wet' States as well as in 'dry' States. Apparently the exposure of conditions was coincident with the spread of prohibition, not the result of prohibition.

"5. Bad associations and the urge of an illicit traffic seeking to profit by the sale of the habit-forming drugs are the most potent causes for the growth of the evil."