

SAM HARRIS

THE BLOG

A War Well Lost

Sam Harris and Johann Hari discuss the “war on drugs”

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(Photo via [Pete Zarria](#))

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Hari's latest book is the *New York Times* best seller [*Chasing the Scream: The First and Last Days of the War on Drugs*](#). You can follow him on Twitter [@johannhari101](#).

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S. Harris: Thanks for taking the time to speak with me, Johann. You've written a [wonderful book](#) about the war on drugs—about its history and injustice—and I hope everyone will read it. The practice of making certain psychoactive compounds illegal raises some deep and difficult questions about how to create societies worth living in. I strongly suspect that you and I will agree about the ethics here: The drug war has been a travesty and a tragedy. But you're much more knowledgeable about the history of this war, so I'd like to ask you a few questions before we begin staking out common ground.

The drug war started almost exactly 100 years ago. That means our great-grandparents could wander into any pharmacy and buy cocaine or heroin. Why did the drug war begin, and who started it?

J. Hari: It's really fascinating, because when I realized we were coming up to this centenary, I thought of myself as someone who knew a good deal about the drug war. I'd written about it quite a lot, as you know, and I had drug addiction in my family. One of my earliest memories is of trying to wake up one of my relatives and not being able to.

And yet I just realized there were many basic questions I didn't know the answer to, including exactly the one you're asking: Why were drugs banned 100 years ago? Why do we continue banning them? What are the actual alternatives in practice? And what really causes drug use and drug addiction?

To find the answers, I went on this long journey—across nine countries, 30,000 miles—and I learned that almost everything I thought at the start was basically wrong. Drugs aren't what we think they are. The drug war isn't what we think it is. Drug addiction isn't what we think it is. And the alternatives aren't what we think they are.

If you had said to me, "Why were drugs banned?" I would have guessed that most people, if you stopped them in the street, would say, "We don't want people to become addicted, we don't want kids to use drugs," that kind of thing.

What is fascinating when you go back and read the archives from the time is that that stuff barely comes up. Drugs were banned in the United States a century ago for a very different reason. They were banned in the middle of a huge race panic. After the Civil War, Reconstruction failed, and what you had were African Americans and Chinese Americans who—rightly—were pissed off. At various points they showed their anger—in fact, given how extreme their oppression was, it's surprising they didn't show a lot more anger. Many white Americans explained this growing rebelliousness at the

start of the 20th century by saying that African Americans and Chinese Americans were forgetting their place, using drugs, and attacking white people. If this sounds bizarre, that's because it was.

The official statements are extraordinary. A typical one said, "The cocaine nigger sure is hard to kill." Sheriffs across certain parts of the United States increased the caliber of their bullets because they believed African American men were taking cocaine and ravaging and attacking white people. The main way I tell about that in the book is through the story of how the founder of the war on drugs, Harry Anslinger, played a crucial role in stalking and killing Billie Holiday, the great jazz singer, which blew my mind when I first learned it.

S. Harris: I'd like to underscore this background fact. Many people are aware that the war on drugs has caused disproportionate harm to the black community. But I think people don't generally know that racism had anything to do with its origins. Can you say a bit more about what the link was?

J. Hari: I think a good illustration is that in California there was a really deep bigotry against Chinese Americans. There were actually mass lynchings of them in Los Angeles, for example. In San Francisco they tried to forcibly relocate Chinatown out of the city and into an area reserved for pig farming. Chinese Americans challenged it all the way to the California Supreme Court, which ruled that they couldn't be forcibly evicted.

Very soon afterward, the white authorities shifted and said, in effect, "Oh, okay, well, these Chinese Americans brought opium dens with them. We'll attack them for their opium dens." They went in and burned large parts of Chinatown. The drug war provided a legal excuse to do what they wanted to do already—unleash real force against ethnic minorities.

One of the best places to start, when it comes to African Americans, is that story about Billie Holiday. Harry Anslinger was probably the most influential person that no one's ever heard of. He took over the Department of Prohibition just as alcohol prohibition was ending, so he had this big government bureaucracy with very little to do. And he was driven by two intense hatreds: One was a hatred of addicts, and the other was a hatred of African Americans.

He was regarded as an extreme racist by the racists of the 1930s. This is a guy who used the "N" word in official memos so often that his own senator said he should have to resign. He found out at about the same time that three famous Americans were addicts, and he treated them very differently. I think that tells you something.

Billie Holiday, Judy Garland, and Joe McCarthy were all addicts. Judy Garland was told to take slightly longer vacations, and Anslinger reassured the studio she was going to be fine. Joe McCarthy was given a safe and legal prescription for opiates from a pharmacy in Washington, D.C. And Billie Holiday was stalked onto her deathbed, arrested, and completely destroyed.

In 1939 Billie Holiday first sang "Strange Fruit," the famous anti-lynching song. That night the Federal Bureau of Narcotics told her to stop singing the song, because according to Anslinger, it represented everything that was wrong with America.

S. Harris: He had an incredible antipathy toward jazz as well. Didn't he consider it a sign of some sort of moral failure?

J. Hari: He saw it as a sign of chaos and disorder. It's really funny going through his files—bleakly funny—because he got these reports from his agents quoting jazz lyrics. They said things like (I'm paraphrasing) "The negro jazz singer sang, 'When he gets the motion, he thinks he can walk across the ocean.'" And Anslinger writes, "He really does believe that." He

thought jazz was just crazed babble. At one point he said he was going to lead a crackdown on musicians. Then he said, “Not the good musicians, the jazz type.” He really wanted a kind of pogrom of all jazz musicians.

But a fascinating thing about the jazz world is that it had an extremely high degree of solidarity, and no one would snitch. The one exception was Billie Holiday’s scumbag pimp husband, who did, in fact, inform on her to Anslinger.

The Bureau gives this order to Holiday to stop singing her anti-lynching song. She had grown up in Baltimore when it was a segregated city, and she had promised herself as a little girl that she would never bow her head to any white man. So she said, in effect, “F*** you. I’m an American citizen and I’m going to sing my song.”

That’s the point at which Anslinger resolved to break her. He hated employing African Americans, but you couldn’t really send a white guy into Harlem to stalk Billie Holiday. So he employed this African American agent named Jimmy Fletcher.

Fletcher followed her around for two years, and Holiday was so amazing that Fletcher fell in love with her. For the rest of his life he was ashamed of what he did. He busted her, and she was put on trial. She said, “The trial was called ‘The United States vs. Billie Holiday,’ and that’s how it felt.” And she went to prison.

But the cruelest thing is what happened next. She got out, and there was hardly anywhere she could sing anymore, because you needed a license to perform anywhere where alcohol was served. Her friend Yolande Bavan said to me, “How do you best act cruelly?...It’s to take something that’s the dearest thing to that person away from them.” That’s what we do to addicts in Britain and America every day—we give them criminal records that cut them off from any access to the legal workforce.

Billie Holiday relapsed on heroin and alcohol and fell back into a very bad addiction problem. In her early 40s she finally collapsed and was taken to the hospital. She was convinced that Anslinger’s men were going to come for her in the hospital, and she was right. She said to one of her friends, “They’re going to kill me in there. Don’t let them. They’re going to kill me.” I spoke to the last surviving person who had been in the room with her. Holiday was handcuffed to the bed. The police knew she had liver cancer by this point, but they handcuffed her to the bed and didn’t let her friends in to see her. They took away her record player, her candies, and everything else. One of her friends managed to insist that she be given methadone because she had gone into heroin withdrawal—which is very dangerous when you’re as weak as she was. Once on the methadone, she started to recover—but then they cut off the methadone and she died.

I think this story tells us so much about the origins of the drug war—the degree to which it was about race, then and now, and how they prefigure what we do to addicts today. People who are addicts are in terrible pain—Billie Holiday was raped and prostituted as a child—and we take these people and inflict more pain and suffering on them, and then we’re surprised they don’t stop taking drugs.

S. Harris: We’ll talk about the phenomenon of addiction, and discuss the novel understanding of it you arrive at in the book. But first I think we should acknowledge that drugs and alcohol can cause social harms that every society has an interest in preventing. It’s not hard to see why some people think that the appropriate response to the chaos these substances often cause is to prohibit them.

Consider alcohol. We know, of course, that Prohibition was a disaster. But when you consider what cities were like before the Women’s Christian Temperance Union got working—with men abandoning their jobs and families, spending all day in

saloons, and winding up just hammered in the gutter—it's not hard to see what people were worried about. Ken Burns's [documentary on Prohibition](#) explains this history in a very colorful way. As you and I race to the conclusion that prohibition of all sorts is both unethical and doomed to fail, I think we should acknowledge that many drugs, alcohol included, have the potential to ruin people's lives.

And it wasn't completely crazy to think that banning the use of specific drugs might be a good way, ethically and practically, to mitigate their harms. But ever since Prohibition we've known that the cure is worse than the disease. When you ban substances that people enjoy using so much that they'll break the law to do it, you create a black market with huge profits. And since purveyors of illicit drugs have no legal way to secure their investment, the trade will be run by increasingly violent criminals.

In a single stroke, therefore, prohibition creates organized crime and all the social ills attributable to the skyrocketing cost of drugs—addicts are forced to become thieves and prostitutes in order to afford their next fix. Why isn't the stupidity of prohibition now obvious to everyone?

J. Hari: What's fascinating is that it was obvious at the time. The drug war really began in the 1930s, when Harry Anslinger was the first person to use the phrase “warfare against drugs”—and it was massively resisted across the United States and across the world. This is a forgotten and suppressed history, and I was startled to uncover it.

I tell it mainly through the story of this extraordinary doctor, Henry Smith Williams, who at the birth of the drug war prophesied all of it. It's worth remembering that when drugs were first banned, doctors resisted to such a degree that 17,000 of them had to be rounded up and arrested because they insisted on continuing to prescribe to drug addicts. The mayor of Los Angeles stood outside a heroin-prescribing clinic and said, effectively, “You will not close this down. It does a good job for the people of Los Angeles.” The early drug war was hugely contested, and many people rightly pointed out why it wouldn't work. This is a really important thing to remember. And one of the most fascinating things for me was seeing how much the arguments at both the beginning of the drug war and in societies where they have finally ended have echoed each other.

I'll give you an example that happened in California. When drugs were first banned, in 1914, a big and deliberate loophole was written into the law that said it did not apply to addicts. Addicts could go to a doctor and get a prescription for these drugs. So what happened was that in loads of places doctors just kept on prescribing drugs to basically anyone who wanted them, because they figured, “Well, it's better you get it from me than from a gangster who's going to f*** up the product and potentially kill you.”

So this carried on, and it was shut down state by state, mainly by Anslinger. One of the last states to shut it down was California, and we now know why. The Chinese drug gangs in California were really pissed off, because the authorities in Nevada had stopped doctors from prescribing opium, so addicts had to go to gangsters to get their drugs. But in California they could still go to a doctor—so the gangsters were losing that big, profitable chunk of business. So the Chinese drug gangs bribed the federal narcotics agents *to introduce the drug war faster*, because it worked so well for them.

It tells you something. The only people who have ever won from the drug war are the armed criminal gangs who are handed the whole industry.

In Colorado, I saw the same pattern playing out. For example, Steve Fox is a great guy who was one of the leaders of the

legalization campaign in Colorado. He wanted to go on the radio during the campaign and say, “One of the great advantages of legalization is we’ll bankrupt the cartels.” A radio station in Colorado was too afraid that the cartels would come and hurt them in Colorado to let him say that on the air.

I think what you said a little bit before this is really important and true: It’s not inherently irrational to look at the harm caused by drugs and think the solution is to ban them. I think one of the reasons the debate about the drug war is so charged is that it runs through the hearts of each of us as individuals. There are times when I look at the addicts in my life and I think, “Someone should f***ing stop you, and someone should stop you by force.”

We all have a Harry Anslinger inside us. And if we’re decent people, we have a compassionate side to us as well. So I think that these emotions are very natural. And I also think this debate is slightly different from, say, the gay rights debate. People like you and me, who believe in the equality of gay people, are ultimately—when we clash with homophobes—arguing with people who simply have irreconcilably different beliefs from ours. Obviously, we should try to persuade them, we should try to win them round, but ultimately there’s a chasm between us and them on a fundamentally different moral value. We think gay love is equal to heterosexual love; they don’t. We have to prevail over them.

I actually don’t think that’s quite the case with the drug war. If you look at the reasons people give for supporting the drug war, one of the things that strikes me is that their goals drive me, too: They don’t want kids to use drugs, they don’t want people to become addicted, and they want to reduce the amount of criminality in the world. Actually, I’m passionate about every one of those goals.

The only disagreement is about how to achieve them. And I think we can prove—by looking at places that have pursued alternatives—that in fact those goals are better achieved by a very, very different approach. The drug war makes all the problems that all sides want to deal with far worse, for reasons I can talk about, if you like. But I think you’ve gone to a really important part of the debate, which is that this is actually a narrower disagreement than a lot of the political arguments that you and I engage in.

S. Harris: Yes, except I would say that some of the hostility toward drugs does resemble homophobia—and is, to a significant degree, inspired by religion. Homosexuality is anathema because it entails, by definition, a search for sexual pleasure independent of a desire to have children. And pleasure and piety have always had a very uneasy relationship. Many religious people will support unconscionable misuses of state power to prevent their neighbors from enjoying themselves in harmless but irreligious ways. As I wrote in my first book, *The End of Faith*, this is essentially a concern about idolatry—which is viewed as a distraction from the most important task of life, which is to love God and fully submit yourself to His will.

So I agree that many people are worried about dysfunction and the obvious waste of human life that one sees with certain forms of drug use. But that doesn’t account for all the opposition to drugs. If one were really concerned about harm, one would ban cigarettes long before banning drugs like MDMA and LSD.

J. Hari: I think that what you’ve just said is really important. But I would put it slightly differently. I would say that if you look at it historically, you see that what the religious tend to fear in drug use is a rival sense of transcendence.

For example—I talk in the book about this—at the Temple of Eleusis, every year for 2,000 years there was a kind of revelry, and many very famous people, such as Sophocles, Aristotle, and Cicero went there. It would look very familiar to somebody

who has been to Burning Man. Huge numbers of people would attend, and what we now know was a hallucinogenic fungus would be passed around, and people would go into a kind of Dionysian frenzy, and anyone could go, and so on.

It shut down when Constantine converted to Christianity and imposed it as the official state religion. This 2,000-year party crashed into official Christianity and was shut down and never came back—although people have been building their own private Temples of Eleusis ever since, one way or another.

Another good example is the arrival of the Spanish settlers in Latin America—or, rather, their invasion of Latin America, as we should think of it. They discovered that the indigenous peoples had access to all these different psychoactive substances and hallucinogenic plants, and part of forcibly Christianizing them was stamping out their use of indigenous plants. What the Spanish said at the time really reeks of fear of a rival. These plants gave the indigenous peoples the sense they were getting close to God—but of course the only way they were allowed to get close to God under state-imposed Christianity was through the official rituals.

So I think you're totally right. It's very dangerous for religious groups if people realize you can get all that ecstasy and transcendence and none of the f***ing religion and theology.

Harry Anslinger was fanatically religious. He loved Seventh-Day Adventists. They were his main supporters. He said he wanted his successor at the Federal Bureau of Narcotics to be a Seventh-Day Adventist. There is definitely an element of puritanism there. Oscar Wilde defined puritanism as the fear that someone, somewhere, is having a good time.

But it's worth thinking about how quickly puritanism can bleed away. Rightly, you referred earlier to alcohol prohibition, and the movement for that was one of the largest mass movements in American history. It's quite hard to get our heads around how enormous the movement for Prohibition was, driven by exactly these motives. And then it just evaporated—Daniel Okrent's history of Prohibition brilliantly details this. Once alcohol prohibition was over, virtually no one ever argued for it to come back. This entire mass movement, based on this puritan distaste for alcohol, was tested to destruction and evaporated.

You can say, "Oh, the puritanism transferred to other substances." And there's some truth in that. But actually I think it does tell you that that kind of puritanism is not immutable—it can be dissolved and discredited.

S. Harris: That's very interesting. And it does seem that with respect to both drugs and gay marriage we've made considerable progress in the past few years. How hopeful are you that we're seeing the light at the end of the tunnel on these issues?

J. Hari: I am optimistic—for reasons I can give—but I don't think the drug war is anything close to over. I think in the analogy of the gay rights movement we're at 1970, which is a lot better than being at 1950, but we've got a long way to go before we get to 2015. I would say that it entirely depends on the size of the movement of ordinary citizens that forms to oppose the drug war.

The best way I can describe what needs to happen now is through a story I tell in the book about the most inspiring person I met—and that means something, because I met a lot of inspiring people in the process of researching the book.

In 2000 there was a homeless street addict in Vancouver named Bud Osborne, who was watching his friends die all around

him. He was in the downtown east side of Vancouver, which was notorious for having the highest concentration of addicts in North America, quite possibly in the world.

Addicts there would shoot up behind Dumpsters so that the cops wouldn't see them. But obviously if you're hidden away and you start to overdose, no one can see you. You just die. Bud thought, "I can't just watch this happen—I can't just watch my friends die all around me—but what can I do? I'm just a homeless junkie." Those are the terms he would have used. He had a really simple idea. Basically, he got together a lot of the addicts and said (I'm paraphrasing), "When we're not using"—which even for hard-core addicts is most of the time—"why don't we just draw up a timetable, and we'll patrol the alleyways, and when we spot someone overdosing, we'll just call an ambulance."

The addicts started to do this. And within a few months the overdose rate started to plummet in Vancouver, which was an amazing thing in itself, because it meant people were living who would otherwise die. But it also meant the addicts started to think about themselves differently. They started to think, "Oh, maybe we're not pieces of s**t. Maybe we can do something."

They started to turn up at public meetings convened to discuss the menace of addicts. Bud and his friends would sit at the back, and after a little while they'd put up their hands and say (all this is paraphrasing; Bud's exact words can be heard on the book's website), "Oh, I think you're talking about us. Is there anything we can do differently?" Sometimes people would be angry, and sometimes they'd ask for specific things, such as "Go and pick up your needles." And Bud would say, "Fine, we'll go and do that."

But what's really interesting is what happened next. I think it's one of the keys to how we unlock this. Bud started reading about how in Frankfurt, in Germany, they had safe injecting rooms for addicts, and overdose had virtually ended in Frankfurt. And he thought, "Well, we've got to do that here." But there had been nothing like that in America since Anslinger went to war against the doctors in the 1930s.

So the addicts, a very large and active group of addicts and their friends and families and supporters, decided to start stalking the mayor of Vancouver, Philip Owen—a right-wing, very rich businessman who said the addicts should all be taken and detained at the local military base. If you picture Mitt Romney, you've got some idea of who Philip Owen was. For two years they stalked Philip Owen everywhere he went, and they carried a coffin, which said something like "Who will die next, Philip Owen, before you open a safe injecting room?"

For two years this went on, and they got really disheartened because nothing was changing. After two years, to his credit, Philip Owen one day just said, "Who the f*** are these people?" He went incognito to the downtown east side and met with addicts. And he was totally blown away. He had no idea their lives were like this.

Owen went to meet with Milton Friedman, the Nobel Prize-winning economist, who was really good on this issue, partly because he had grown up in Chicago during Prohibition. When he came back, Owen held a press conference with the chief of police, the coroner, and some of the addicts. He said, "We're going to open the first safe injecting room in North America. We're going to have the most compassionate drug policy in North America. Just you wait and see."

He opened the first safe injecting room in North America in 70 years. His right-wing party was so horrified that they de-selected him. But his party was then beaten by the left-wing candidate, who kept the injecting room open. When I went to the downtown east side, it was 10 years since it had opened. Overdose was down by 80%, and the average life expectancy of

a downtown east sider had improved by 10 years, which is virtually unheard of in epidemiology. You only get that when wars end. Which is what this was.

Philip Owen told me it was the proudest thing he ever did, and that he would sacrifice his whole political career all over again. Bud died last year, after I got to know him—and when he died, they shut down the streets of the downtown east side where he had lived as a homeless person. They had this incredible memorial service, with loads of people in that crowd who knew they were alive because of what Bud had done.

What I would say about Bud's story—I think it's a really interesting model—is that it's very like the gay movement. You had a movement of ordinary, deeply stigmatized citizens, and lots of good and decent people who had nothing to do with their struggle except that they recognized that they, too, were human beings. They didn't wait for a leader, they didn't wait for permission from the top, they just started. And you also had Philip Owen, not someone I would normally be politically sympathetic to, who had the decency to eventually listen to them.

I think we need both ends of that. We need citizens' movements of people demanding this. Some will be marijuana users demanding liberty, and some will be heroin addicts demanding the right to life, and there will be all sorts of different people on the spectrum in between. But you need to start somewhere, and you need a movement of people demanding it. Virtually every civilizing improvement in the democratic world happens because ordinary citizens demand it, not because politicians decide to hand it down. What is it Frederick Douglass said? "Power concedes nothing without a struggle."

So I think things are absolutely ripe for ordinary democratic citizens to demand this thing. The polling shows overwhelmingly that people know the drug war has failed. They know it doesn't work. What they need is for our voices to be louder than the voices of the forces who support the drug war, like the private prison industry; the alcohol industry, which doesn't want competitors; the prison guard unions, and so on and so on. We also need to persuade people that their totally legitimate fears about the alternatives are in fact not matched by the evidence in societies that have actually tried the alternatives.

S. Harris: Perhaps we should speak about that. What about Portugal? When we pass through the looking glass and invert all our drug laws, where do we arrive?

J. Hari: I think one of the most important things to say about this is that it's not an abstract conversation. Too often when we talk about the alternatives to the drug war, people start using this slightly weird and arid philosophical tone of voice, where it's all kind of hypothetical. There's no excuse for hypothetical conversations on this subject. The alternatives have been tried, they are being tried across the world, and the results are in, and they are unambiguous.

So I could talk about a few places, and Portugal is one. In 2000 Portugal had one of the worst drug problems in Europe. One percent of the population was addicted to heroin, which is kind of extraordinary. Every year they tried the American way more and more: They arrested and imprisoned more people, and every year the problem got worse. One day the prime minister and the leader of the opposition got together and in effect said, "We can't go on like this. We can't have more and more people becoming heroin addicts. Let's figure out what would genuinely solve the problem."

They convened a panel of scientists and doctors and said to them (again I'm paraphrasing), "Go away and figure out what would solve this problem, and we will agree in advance to do whatever you recommend." They just took it out of politics. It was very smart. It was as if Obama and Boehner agreed in advance to abide by whatever the panel on drug reform said. It's

hard to imagine Obama and Boehner agreeing on the time of day, but grant that thought for a moment.

The panel went away for a year and a half and came back and said: “Decriminalize everything from cannabis to crack. But”—and this is the crucial next stage—“take all the money we used to spend on arresting and harassing and imprisoning drug users, and spend it on reconnecting them with society and turning their lives around.”

Some of it was what we think of as treatment in America and Britain—they do do residential rehab, and they do therapy—but actually most of it wasn’t that. Most of it, the most successful part, was really very simple. It was making sure that every addict in Portugal had something to get out of bed for in the morning. It consisted of subsidized jobs and microloans to set up small businesses.

Say you used to be a mechanic. When you’re ready, they’ll go to a garage and they’ll say, “If you employ Sam for a year, we’ll pay half his wages.” The microloans had extremely low interest rates, and many businesses were set up by addicts.

It’s been nearly 15 years since this experiment began, and the results are in. Drug use by injection is down by 50%, broader addiction is down, overdose is massively down, and HIV transmission among addicts is massively down.

Compare that with the results in the United States over the past few years. In Portugal I interviewed a guy named Joao Figueira, who was the leader of the opposition to decriminalization at the time—the country’s top drug cop. He said a lot of the things a lot of people reading this will totally reasonably be thinking. Surely if you decriminalize all drugs, you’ll have all sorts of disasters? Figueira told me that everything he had predicted would happen didn’t happen—and everything the other side predicted came to pass. And he talked about how ashamed he felt that he’d spent 20 years arresting and harassing drug users, and he hoped the whole world would follow Portugal’s example.

One thing that is most striking to me: Everywhere I went that had moved beyond the drug war, it was hard to find people who wanted to go back. It was like Prohibition when it was over and people saw the alternatives in practice. It’s very similar to what you see in the polling on marijuana legalization. I’m sure your readers know that Colorado and Washington both have legalized marijuana, by 53%. The polling in Colorado and Washington after they had seen it in practice showed much higher margins supporting legalization. Once people see these things in practice, they discover that it’s not the kind of scary anarchy they had imagined.

Switzerland, a very conservative country, legalized heroin for addicts, meaning you go to the doctor, the doctor assigns you to a clinic, you go to that clinic every day, and you inject your heroin. You can’t take it out with you. I went to that clinic—it looks like a fancy Manhattan hairdresser’s, and the addicts go out after injecting their heroin to their jobs and their lives.

I stress again—Switzerland is a very right-wing country, and after its citizens had seen this in practice, they voted by 70% in two referenda to keep heroin legal for addicts, because they could see that it works. They saw that crime massively fell, property crime massively fell, muggings and street prostitution declined enormously.

I think one of the really important things, particularly in winning the debate in America, is to look at what arguments won in these places and what arguments didn’t. We found that in the places that successfully decriminalized or legalized, liberty-based arguments for ending the drug war were very unpopular. I’m philosophically sympathetic to the argument that it’s your body and you’ve got a right to do what you want with it. But it turns out that’s a politically toxic argument—people

really don't like it, and it only works with people who already agree.

The arguments that work well in persuading the people we still want to reach are order-based arguments. I think the Swiss heroin referenda are good models for that. Basically, what they said was drug war means chaos. It means unknown criminals selling unknown chemicals to unknown users, all in the dark, in our public places, filled with disease and chaos.

Legalization is a way of imposing regulation and order on this anarchy. It's about taking it away from criminal gangs and giving it to doctors and pharmacists, and making sure it happens in nice clean clinics, and we get our nice parks back, and we reduce crime. That's the argument that will win. And it's not like it's a rhetorical trick—it's true. That is what happens.

S. Harris: And the virtue of that argument is that it separates the problem of drug dependency from all the associated criminality and chaos that isn't intrinsic to the act of taking drugs, whatever one's level of dependency. The fact that drugs are as expensive as they are, necessitating the desperate and dangerous efforts we see addicts making to obtain them, is entirely the result of their legal status. Once the laws change, and we have well-behaved people showing up at clinics to get legally prescribed medication, then we can talk about whatever medical, psychological, and social problems remain. We shouldn't confuse the problem of taking the wrong drugs, or the right ones too often, with the problem of criminal gangs and their associated violence, or with the misbehavior of desperate addicts trying to get their fix.

I think it's a great insight to emphasize the pragmatic case for legalization, as opposed to the ethical one. It is always tempting to try to lead people through the door of personal liberty, arguing that peaceful, honest adults should be free to seek any experiences they want, as long as they don't harm others in the process. I still think that this is the deeper argument to make. But it is, as you point out, very often ineffective.

J. Hari: Yes. As you say that, I think of all the horrors that come from the drug war, and I saw many of them. I went out with a chain gang of women in Arizona who were forced to wear T-shirts saying "I was a drug addict" and dig graves. I spoke to survivors of the gulag that is built for drug addicts in Vietnam. I could give you a long list here—they are all told through human stories in my book. But of all the horrors, far and away the worst is what you are alluding to—the violence created by drug prohibition.

I learned that mainly from Chino Harden, a transsexual former crack dealer in Brownsville, Brooklyn, whom I got to know over three and a half years, and from Rosalio Reta, who was a hit man for the deadliest Mexican drug cartel. From the age of 13 to 17, Rosario killed—best estimate—about 70 people, butchered and beheaded them. I tell their stories in the book, and they really helped me to understand how drug prohibition drives this part.

The best way to explain it is this: If you and I go to your local liquor store and try to steal the beer or the vodka, they'll call the cops, the cops will take us away, and that's fine. That liquor store doesn't need to be violent or intimidating. But if we go up to a local weed dealer or coke dealer and try to steal what they've got, obviously they can't call the cops. The cops would arrest *them*. So they have to fight back. Now, obviously, as a dealer, you don't want to be having a fight every day, so you establish a reputation for being so terrifying that no one will dare to f*** with you.

The sociologist Philippe Bourgois says that prohibition creates a culture of terror. These people have to be frightening. I really saw that with Chino. Chino is one of the wisest people I know, and one of the most empathetic people I know, and yet he committed heinous acts of violence to maintain his position in this drug war hierarchy on his block in Brownsville. It's what the system we have created demanded of him.

And Rosalio, not a person I admire, was nonetheless forced into much more extreme acts of violence than he would have committed otherwise, as I learned when I interviewed him. Sometimes we look at the Mexican drug war violence, which is like something out of the *Saw* movies, and it just seems like psychosis. It seems like Jeffrey Dahmer–style madness. It’s not. It’s important for people to understand that. It is created by prohibition: In the culture of terror created by prohibition, if you are prepared to push the moral limit a little bit further than the other guys, you gain a brief market advantage, because people will back off when they’re scared.

If you’re the first person who says, “We’re not just going to kill our opponents. We’re going to kill our opponents’ pregnant wives,” you get a brief competitive advantage. If you’re the first person to say, “We’ll not only kill their pregnant wives, but we’ll film it and put it on YouTube,” you get a brief competitive advantage. If you’re the first person to say, “We won’t just do that, we’ll cut off their faces, sew their faces onto a football, and post it to their families”—and this is a real thing that happens—you gain a brief competitive advantage.

I tracked how this dynamic works through the story of Rosalio, who is in constant solitary confinement in Texas. It is insane violence. But it’s insane violence within the structure and demands of prohibition. It is caused by prohibition.

There’s a very interesting study by Professor Paul Goldstein that I cite in the book, because it looks at one of the big distortions, where people often talk about “drug-related violence.” They look at the violence associated with the drug war and they think that somehow it’s *caused* by drugs themselves.

S. Harris: Yes, people sometimes imagine that the perpetrators of this violence are actually *on* drugs while they’re committing it.

J. Hari: Exactly. It’s like thinking that Al Capone was drunk and that’s why he shot people. It’s an error of judgment, and we can measure it exactly. Professor Goldstein did a study of all the murders that were described as drug-related in New York City in 1986. What he found is that in 7.5% of the killings, somebody was on drugs. (That doesn’t necessarily mean the drugs made them kill, of course.) In a further 2% an addict was committing property crime in order to feed his habit and got caught or it went wrong, and he killed someone.

All the rest, the vast majority, were rival drug gangs killing each other to control their patch, or to gain control of a patch, or to fend off rivals, or somebody getting caught in the cross fire between them.

Well, none of that is drug-related. That’s drug war-caused. If we banned milk and people still wanted milk, the milk trade would work that way. We wouldn’t call it milk-related violence, but it would make as much sense. Milton Friedman calculated that there are 10,000 additional murders every year in the United States as a direct result of this drug war violence. That’s a figure from the 1980s; we expect it to be somewhat lower now, because overall murder rates are lower, but the underlying dynamic remains the same. Look at the news from Chicago any day of the week—it happened under alcohol prohibition, and it happens in the same place under drug prohibition. So I think what you’re saying is exactly right.

This is atrocious enough. But now apply that to Mexico. Imagine a housing project in Brownsville, where Chino is from. Let’s say 5% to 10% of that economy is in the hands of armed criminal gangs. That will be a miserable place to live. In Ciudad Juárez, where I went, on the Mexican side of the US border, 70% of the economy is in the hands of armed criminal gangs. That doesn’t just cause horrific violence—it means that these gangs can outbid the state.

One of the most chilling moments for me in the research for the book was being shown around by Julian Cardona, the Reuters correspondent in Juárez, who was my fixer. He kept telling me stories of people who had been killed by the police. At some point I said, “Well, Julian, this is important, but I’ve got to meet the families of people who have been killed by the cartels.” And Julian just laughed and said words to the effect of “No, you don’t understand, Johann—when the cartels want to kill someone, they pay the police to do it. They’re not separate forces.”

S. Harris: That’s very depressing.

J. Hari: The state works for the cartels. Michelle Leonhart, the head of the Drug Enforcement Administration, was asked about the 60,000 civilian deaths in Mexico over the past seven years. That’s an underestimate, that figure. And she said—these were her exact words—that they were “a sign of success in the war on drugs.”

That should be a national scandal, that someone whose wages you pay describes the death of innocent civilians as a sign of success. She’s should be forced to explain—what do we gain for this mass slaughter of innocents? Are fewer drugs getting into the United States? No—we know that because the price hasn’t gone up.

S. Harris: What was it like to spend time in Juárez? How concerned were you for your own safety?

J. Hari: I’ve been to lots of dangerous places before, like Iraq, the occupied territories, the Congo, the Central African Republic, and various other places. Generally, I would stay overnight in El Paso and walk across the bridge every day into Juárez, which was itself a fascinating thing. That bridge is such a weird place. When you walk over it, the first thing you see is this sign to the left that says something like “Welcome to Historic Downtown Juárez” and shows the old tourist map. But the map is just covered with images of missing women. It’s a perfect symbol of what’s happened to Juárez.

I was with a journalist, Julian, whom I deeply respect, and who I knew would not take me into any situation that was needlessly dangerous. I think this is an important enough subject that people need to know about it. It was of course scary, but I knew there was no way I could get the story in full except by going in.

And that goes generally to what I wanted to do with the book, which is related to what we were saying before. I think part of the curse of how this subject is discussed is that it’s discussed in this abstract way, as if we were in a philosophy seminar. Now, as you know, I’ve spent a lot of time in philosophy seminars, and I love them, but that’s not a sensible way to talk about this subject.

I went into this because of the people I love who are addicts. What I wanted to do was sit with real people whose lives have been affected by this one way or another, all over the world, and listen to them about what has happened to their lives, and convey to readers who they are. They are an amazing range of people—from a transsexual crack dealer in Brooklyn searching for what happened to his mother, to a scientist feeding hallucinogens to a mongoose to see what would happen, to the president of Uruguay, who was kept at the bottom of a well for two years and emerged to end the drug war in his country. I did it this way because I think the drug war can continue only because we’ve dehumanized the people it’s harmed, whether they’re drug users, drug dealers, cops, or the people who live along the supply routes.

I think if we acknowledge that the people whose lives are being destroyed are in fact people with hopes, dreams, and fears just like ours, it’s much harder to support this war and the massive horror that it causes. I think if most people in America had met Chino, or Bud, or Leigh Maddox, the cop I met in Baltimore who very bravely came out against the drug war, or

President Mujica of Uruguay, and had heard their stories, they couldn't support the continuation of this war. I think the main job we have in ending the drug war is to re-humanize the people at its heart.

S. Harris: Part of the problem is that it has been happening in the dark, as far as most people are concerned. At one point people were being locked up for *decades* for marijuana possession. I'm talking not about hardened criminals but about paraplegics and cancer patients, and owners of garden supply stores whose customers were caught growing marijuana. And our property-seizure laws were just ruining people. A woman whose grandson was found to be growing pot in her basement would lose her home, with no recourse. It was just insane, and very few of us realized that peaceful people were having their lives destroyed in this way. In fact, I may be out of touch on this point myself, because I haven't followed how our laws have changed nationwide in much detail. I can't imagine anyone's being locked up for years today for marijuana possession, but I could be wrong about that.

J. Hari: Oh, they are. A lot of that is still going on. The wonderful [Drug Policy Alliance](#)—which I urge anyone who cares about this to sign up with and support—has been doing some documentation on this. Some of these cases are absolutely outrageous. I saw this for myself when I went to Estrella Women's Jail, better known as Tent City, in Arizona, where the women in chain gangs I mentioned were incarcerated.

S. Harris: Were they recently incarcerated, or had they been convicted years ago?

J. Hari: No one's in Tent City for more than two years, and I was there a bit more than two years ago. These were recently incarcerated people. And for the prison system in the United States, some of the figures are extraordinary. I give this stat in the book: The United States has such an enormous prison population relative to any other human society there's ever been, and rape is so endemic in its prisons, that the US today is almost certainly the only society in human history where more men have been raped than women. There's a shining Tent City on a hill for you.

One of the things that blew me away when I was in Arizona was my interview with a woman named Donna Leone Hamm, an amazing woman who works for prisoners' rights in Arizona. I asked her my standard question, "Tell me about something that shocked you." She went down this long list, and somewhere down the list she said something like "There was the time they put that woman in a cage and cooked her. That was quite bad." And then she carried on with her list. I said, "Sorry, Donna, could you go back a second?"

She told me about this woman named Marcia Powell, about whom very little was known when I started doing the research, who was a chronic meth addict. She kept being put in prison either for having meth or for prostituting herself to get meth. One day she woke up in prison and she was suicidal. The doctor refused to believe she was suicidal, but to shut her up they put her in a holding cage, which is literally a cage exposed to the desert, and left her there. She begged for water, and she shat herself, and in the end she collapsed. By the time they called an ambulance, she had been cooked.

No one was ever criminally prosecuted for what they did to Marcia Powell. To me, this tells you so much about how we've devalued addicts' lives. There's been a hashtag—[#BlackLivesMatter](#)—which I entirely endorse, and it's made me think we need a [#AddictsLivesMatter](#). We need to really absorb that truth, because what other minority group could you just brazenly murder a member of without there being any proper investigation? I think addicts are one of the most outlying of all minority groups.

S. Harris: This brings us to the topic of addiction. Is addiction an easily defined physiological state that is purely a matter of

which substance a person takes and how regularly he takes it? Or is it largely the product of external variables? In your book, you make the latter case. And I think most people would be surprised to learn that in a context where drug use is more normalized, a heroin addict, for instance, can be a fully productive member of society. There's nothing about regularly taking heroin that by definition renders a person unable to function. So let's talk a bit about what addiction is and the various ways it changes with its social context.

J. Hari: This is the thing that most surprised me in the research for the book. I thought I knew quite a lot about addiction, not least because I've had it in my life since I was a child, with my relatives. But if you had said to me four years ago, "What causes, say, heroin addiction?" I would have looked at you as if you were a bit simpleminded, and I would have said, "Heroin causes heroin addiction."

For 100 years we've been told a story about addiction that's just become part of our common sense. It's obvious to us. We think that if you, I, and the first 20 people to read this on your site all used heroin together for 20 days, on day 21 we would be heroin addicts, because there are chemical hooks in heroin that our bodies would start to physically need, and that's what addiction is.

The first thing that alerted me to what's not right about this story is when I learned that if you step out onto the street and are hit by a car and break your hip, you'll be taken to a hospital where it's quite likely that you'll be given a lot of diamorphine. Diamorphine is heroin. It's much more potent than what you get on the street, because it's medically pure, not f***ed up by dealers. You'll be given that diamorphine for quite a long period of time. Anywhere in the developed world, people near you are being giving loads of heroin in hospitals now.

If what we think about addiction is right, what will happen? Some of those people will leave the hospital as heroin addicts. That doesn't happen. There have been very detailed studies of this. It doesn't happen. You will have noticed that your grandmother was not turned into a junkie by her hip operation. We know that. I just didn't know what to do with it.

I didn't know until I went and interviewed Bruce Alexander, who's a professor in Vancouver and, I think, one of the most important figures in addiction studies in the world today. He explained to me that our idea of addiction comes in part from a series of experiments that were done earlier in the 20th century. They're really simple experiments, and your readers can do them at home if they're feeling a bit sadistic. You get a rat, you put it in a cage, and you give it two water bottles: One is water, and the other is water laced with heroin or cocaine. The rat will almost always prefer the drugged water and will almost always kill itself. So there you go. That's our theory of addiction. You might remember the famous Partnership for a Drug-Free America ad from the 1980s that depicted this.

But in the 1970s, Bruce Alexander came along and thought, "Hang on a minute. We're putting the rat in an empty cage. It's got nothing to do except use these drugs. Let's try this differently."

So he built a very different cage and called it Rat Park. Rat Park was like heaven for rats. They had everything a rat could possibly want: lovely food, colored balls, tunnels, loads of friends. They could have loads of sex. And they had both the water bottles—the normal water and the drugged water. What's fascinating is that in Rat Park they didn't like the drugged water. They hardly ever drank it. None of them ever drank it in a way that looked compulsive. None of them ever overdosed.

An interesting human example of this was happening at the same time; I'll talk about it in a second. What Bruce says is that

this shows that both the right-wing and left-wing theories of addiction are flawed. The right-wing theory is that it's a moral failing—you're a hedonist, you indulge yourself, all of that. The left-wing theory is that your brain gets hijacked, you get taken over, and you become a slave.

Bruce says it's not your morality and it's not your brain. To a much larger degree than we've ever before appreciated, it's your cage. Addiction is an adaptation to your environment.

The good human example I just mentioned was called the Vietnam War. In Vietnam 20% of American troops were using a lot of heroin. And if you look at the reports from the time, they were really sh***ing themselves, because they thought, "My God, we're going to have hundreds of thousands of junkies on the streets of the United States when the war ends."

Actually, this was studied very closely, and the overwhelming majority—95%—of the men who had been using lots of heroin in Vietnam came home and just stopped. They didn't go to rehab, didn't get any treatment. They just stopped. Because if you're taken out of a hellish, pestilential jungle where you could die at any moment, and you go back to your nice life in Wichita, Kansas, with your friends and your family and your human connections, that's the equivalent of being taken out of the first cage and put into Rat Park.

This has enormous implications for the drug war. What we do at the moment is take people who are addicted because they are isolated, distressed, and in pain, and inflict more isolation, distress, and pain on them in the hopes that it will make them stop. Think about what we did to Billie Holiday, and all those women I met in Arizona—they're never going to work again in the legal economy.

When I went to that prison in Arizona, they took me to the segregation unit, which they call The Hole, and I saw these women who are addicts put in these tiny little stone cages for a month. I thought, "Wow, this is the closest you could possibly get to a literal human re-creation of the cages that guaranteed addiction in those rat experiments." And we think this will stop addiction?

Gabor Mate, a doctor in Vancouver, said to me, "If you wanted to design a system that would make addiction worse, you would design the system that we have now." We can understand why the Portuguese system works so well, because it's all about reconnecting people with the collective, with the group, with the society, giving them a purpose. We can see why that works so much better than either prohibition or even residential rehab, which has a pretty poor success rate.

But this has much wider implications for the way we live—much wider than drug policy. We've created a society where life for a lot of our fellow citizens is more like that first cage and less like Rat Park. Bruce discusses how we talk a lot in addiction circles about individual recovery, and that's really important, but we need to think much more about social recovery. Something's gone wrong with us not just as individuals but as a group.

I'm interested in thinking about this in relation to religion and atheism—issues you and I obviously care about a lot. I haven't thought about them in anything like as much detail as I've thought about stuff in my book, but I'd be interested to know if you think this frame would apply in some way to religion. I wonder if isolation and distress and pain drive people toward addiction and also play a crucial role in driving them toward religious belief. What do you think, Sam?

I don't think it's a coincidence, for example, that Scandinavia is the least religious society in the world, and Somalia is the most religious society in the world. Scandinavia looks a lot like Rat Park, and Somalia looks a lot like the worst rat cages

you can imagine. Scandinavia has very low levels of insecurity and very high levels of social solidarity and social engagement. Somalia is obviously an anarchic nightmare. I wonder if there's some connection there. I haven't teased it out in my mind, but I suspect it has implications for how atheist campaigning and fighting should proceed. What do you think?

S. Harris: I'm worried that they're not actually analogous. The one thing that jumps out at me immediately is that many people overcome their social isolation *through religion*—indeed, community is one of its main selling points. The most theocratic societies tend to engender profound social cohesion. In many places on this earth, one need only shout the words “She burned the holy Qur'an!” to summon a lynch mob. So a lack of social cohesion is the least of one's problems here.

But the basic claim is that, in “Rat Park,” most people can have all drugs available to them without becoming addicts.

J. Hari: Yes, and that shouldn't seem surprising to people if they relate it to their own lives. While we're talking, I've got a bottle of water in front of me, and you've probably got a drink in front of you. Forget the drug laws for a second. You and I could both be drinking vodka now, right? You and I have probably got enough money in the bank that we could spend the next year drinking vodka and never stop. We could just be drunk all the time. But we don't. And the reason we don't is not because someone's stopping us but because we want to be present in our lives. We've got relationships. We've got friends. We've got people we love. We've got books we want to read. We've got books we want to write. We've got things we want to do. Most of addiction is about not wanting to be present in your life.

And by the way, that's true not just of drug addiction. If you've ever known a gambling addict, you see that the pleasure he's getting is not the pleasure of the specific bet. It's the pleasure of not being present in his own life. It's the pleasure of being taken out of himself, even to what I regard as a very squalid and depressing world. It's the same with sex addiction. There's a continuity between drug addictions and other addictions that I think tells you something fundamental.

For the book I went—with the permission of the people present—to a Gamblers Anonymous meeting in Vegas, at a gambling addiction treatment center. It was just like a meeting of Narcotics Anonymous—it was really so analogous, I felt I was looking at the same thing. And yet no one thinks that you snort a roulette wheel or inject a game of craps. Most people now acknowledge that you can have all of the addiction and none of the chemicals. Well, that tells you something about the degree to which addiction is driven by things other than chemical components.

That's not to say that there's no chemical component. It's important to stress that. The chemical component is real—and we can measure it. There's no need, again, to have an abstract conversation about it. There's a broad scientific consensus that one of the most physically addictive drugs available to us is tobacco. And we've isolated the part that's chemically compelling—it's nicotine. So when nicotine patches were invented in the early 1990s, there was this massive wave of optimism: Great, you can give smokers all the drugs they're addicted to without the filthy carcinogenic smoke. Progress. You will see a huge fall in smoking.

Actually, the US surgeon general's report found that only 17% of smokers stopped with nicotine patches. Now, it's important to stress that 17% is a lot. It's not nothing. That tells us that 17% of these addictions are chemically driven—or at least that 17% of people can stop when the chemical component is met. That's huge. That tells us that the story we've been told up to now is not false. But it also tells us that it's only 17% of the story, and that 83% has to be explained in some other way. These social and environmental factors should be a very big part of the conversation and the discussion.

S. Harris: Isn't it also true that addiction to a drug like heroin, in a legal context, can still be compatible with living a decent

life?

J. Hari: I guess there are two things to say about that. It will seem weird to people to hear that you can be an addict, you can take quite a lot of a drug, and you can carry on having a pretty functional life. But actually, that was the norm in the United States. There was a study, which I cite in the book, that was done by the US government before drug prohibition really kicked in—a study of addicts, not users. It found that heroin addicts prior to drug prohibition were no more likely to be poor than the rest of the population. They were spread throughout the population. They were no more likely to be criminal than the rest of the population. They were of course debilitated by their addiction to some degree, as a functional alcoholic today is. But they weren't what we now associate with heroin addiction.

And yet, of course, as you were saying before, when it's banned, instantly the price skyrockets. That's because gangsters charge higher prices, because they've got to take the risk of going to prison in order to sell the product—so they demand a quite high risk premium. Everyone along the supply chain demands that risk premium, so the price goes way up. Therefore, you suddenly have two crime waves. One is the organized crime and all the violence that comes with it—as we were discussing. The other is the crimes that addicts have to commit in order to meet this massively inflated price—prostitution, property crimes, and so on.

So you're totally right. One of the best ways to understand that is to look at the start of the drug war and then at places where the war has ended. In Switzerland, where they legalized heroin, when you start on the program, you set your own dose of heroin, and you can stay on it for as long as you want. There's never any pressure to stop, which surprised me. I actually was taken aback by that. So anyone on that program can just stay on it their whole life, right? You can just carry on. The program's been running for 20 years. But it's interesting—there's almost nobody on the program now who was on it at the start.

I said, "Well, how come that happened?" And they said that the chaos of street use, of scrambling to pay this grossly inflated price, ended, because people were given heroin as a medical prescription. The people in the clinic support you, they help you get housing, and they help you look for a job. So the majority of the people there get jobs, get homes, so they choose entirely of their own will to gradually cut down their heroin use over time, and eventually they stop. Because their lives become more bearable. Because they want to be more present in their lives. Because their lives slowly improve.

I thought that was significant, because sometimes in the drug debate you get polarization between the people who are in favor of abstinence and the people who are in favor of what's called maintenance prescription—giving people the drugs they're addicted to. Those are presented as opposites.

Actually, what was so revealing about talking to the doctors and addicts in the clinic in Switzerland and looking at the studies from there was that maintenance leads to reduced use or abstinence in a lot of cases. It leads to a significant reduction in drug use eventually, because most of the people who stop heroin then go on to methadone and then reduce their methadone.

S. Harris: You said before that people who are given diamorphine—heroin—in hospitals don't become addicts. I take your point, but perhaps we should acknowledge that addiction to prescription pain medication is, in fact, a huge problem. Is that a wrinkle for your argument?

J. Hari: I asked myself that question a lot, and I talked to a lot of experts about it, and what I learned suggests that this

debate about prescription pain medication—which is a crucial one—has been quite deeply misunderstood.

What I thought before my research was that when people take minor opiates like Oxycontin, they succumb to the chemical hooks and that's how they become addicted. It's like the story I believed about heroin. That's the story that lots of people addicted to, say, Oxy tell themselves—it's the only story our culture offers them.

But then it was explained to me that Oxy and the other painkiller opiates are milder than heroin. Similar, but milder. How could it be, then, that the stronger opiate doesn't cause addiction when it's given out medically, but the weaker opiate does? That doesn't make sense. So what is really going on?

Once you understand Rat Park and everything that flows from it, this issue looks different. Why has there been such a big rise in addictions to Oxy and other opiates since 2008? Is it because the chemical hooks have become more potent? That's not the case. Or is it because there's a great deal more distress in America—much more insecurity because of the economic collapse, much more psychological pain that people are trying to self-medicate for? Through history, there have been spikes in addiction when there were spikes in suffering. In the 18th century, in England, people were driven off the land into vile urban slums—and the Gin Craze happened. In the eighties, you had the collapse of urban America and its jobs, and the crack epidemic occurred. The meth epidemic ripped through rural America after it was economically devastated.

So I think the evidence suggests that we've seen a big rise in prescription painkiller addiction because we have a big rise in psychological distress. It actually predates 2008, because the middle class in particular has been in collapse for longer than that.

You can well understand why people don't see it that way yet. They've never been told this story about addiction. They don't know it. All they know is that addiction is caused by the drug. So they explain their addiction using the only story to hand: It must be that I accidentally got hooked. When you actually speak to those people, though, you find that they were in a state of profound stress and distress and isolation from meaning. You don't have happy, connected, bonded people with a strong sense of meaning who “accidentally” get hooked.

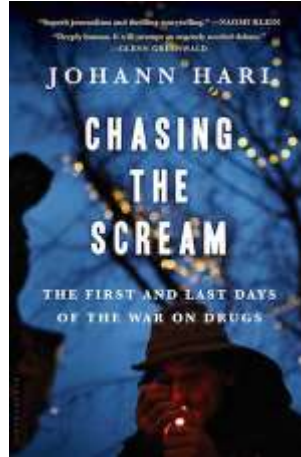
There are two ways of dealing with this that I discuss in the book, and we need both. One is the Swiss way. In Switzerland, they prescribe heroin *to treat addiction*. In the US, the opposite approach is taken. The moment a doctor discovers you are using Oxy or Percocet not for physical pain but because you are addicted, he or she is required by law to cut you off. Doctors can go to prison as drug dealers if they don't—that has happened. So the first step I would take is to extend the Swiss model to cover prescription drugs in the US. If you're addicted to Oxy, you should be prescribed Oxy—while being given support to turn your life around. That would end all these tragedies of people holding up pharmacies to get their next fix, and so on.

The second step is much deeper. We need to create a society where people are less isolated and distressed. There are places in the world where that exists: Addiction is very low in Sweden, because it's a very connected society with very low levels of insecurity. We can learn from that.

S. Harris: Well, this has been fascinating, Johann. Of course, there is much more we could talk about, but I think we should leave it there. People ought to just go read [your book](#).

J. Hari: Sam, I really enjoyed talking to you. And thank you so much for engaging with the book so deeply.

Note 11/1/15: For a look at how pervasive heroin addiction is in the U.S., see this report from *60 Minutes*: [Heroin in the Heartland](#).



Notes

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