

“So Why Don't You Go to Soros?”

That's what funders say about drug policy reform.

Here's why more foundations should care about the war on drugs.

BY MARY M. CLEVELAND

Aron Wilson, associate director of the Partnership for Responsible Drug Information, calls the president of the New York League of Women Voters. He asks if the league will include drug policy questions in its debates during the upcoming election cycle. “Oh no,” says the president, “Drug policy isn't a partisan issue. Everyone's against drugs, so what's there to debate?”

What's there to debate?

How about this: Should the United States continue—and escalate—the “war on drugs”? The harshest drug control policy of any western democracy? As a March 13, 1999, *New York Times* editorial puts it,

Almost 70 years after the failure of Prohibition, the much-trumpeted “war on drugs” begun more than a decade ago has itself hugely misfired...School systems deteriorate while tax dollars build new prisons...Municipal police forces have grown so militarized that drug warrants are served in armored personnel carriers. Young mothers are imprisoned for years for simple drug possession...In their obsession to control drug use by making war on it, federal and state legislators have turned the world's greatest democracy into its largest prison system....

If drugs are bad, the *Times* suggests, the drug war is worse. So why don't foundations support drug policy reform?

Lone Supporter

Among the major foundations, only George Soros's Open Society Institute (OSI) provides significant support for alternative views and approaches. In 1998, OSI spent about \$1.8 million on its own drug policy “think-tank,” the Lindesmith Center. It spent close to another \$1 million on various OSI-initiated projects such as two conferences on opiate treatment at the New York Academy of Medicine. OSI rarely funds outside drug policy projects.

Inquiries to other foundations bring a return-mail response: “Drug policy reform is not one of our program areas.” A couple of sympathetic foundation staffers tell me, “It's not on the radar screen. Most foundation staff won't even discuss drug policy reform with you because their boards haven't voted to consider it. Too controversial!”

“Controversial?” snorts a professional fundraiser I telephoned. “Drug policy isn't controversial! Controversy means two sides. Abortion is controversial. Drug policy has only one side—the official side—and that's ‘zero tolerance.’”

Usually my complaints about a lack of interest in drug policy reform simply puzzle members of the foundation community: “So why don't you go to Soros?” they keep asking.

What Do Drug Policy Reformers Want?

Drug Czar General Barry McCaffrey accuses critics of wanting to “legalize

drugs and make them more available.” Actually, the core drug reform agenda consists of moving United States policy toward the more pragmatic and public-health-oriented policies of other western democracies, including our close relatives, England, Canada and Australia.

In fact, the same major foundations that sidestep “drug policy reform” have awarded bits and pieces of funding to most items on the reform agenda—as part of support for ostensibly nondrug projects. For example, recent Public Welfare Foundation grant recipients include Families Against Mandatory Minimums, which opposes harsh mandatory criminal penalties for minor drug offenses, and the Sentencing Project, which compiles statistics documenting racial bias in arrests, convictions and sentencing for drug and other offenses.

What's going on here? Foundations actually do support some projects to mitigate drug war damage, but don't acknowledge it.

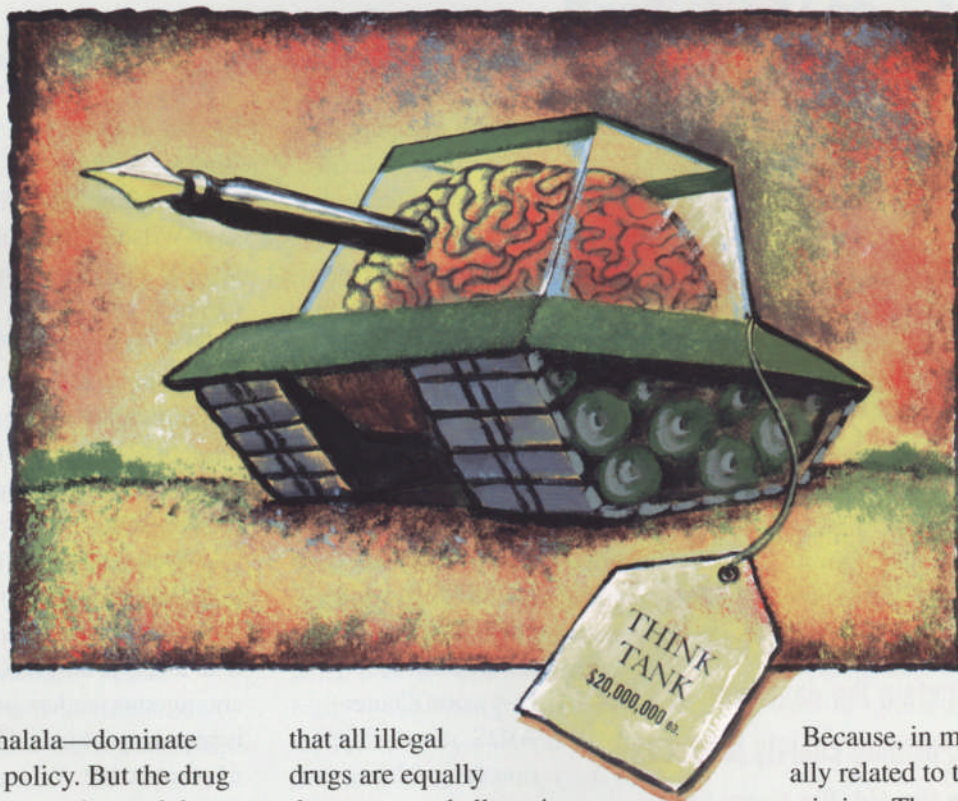
I think the reason is less a fear of controversy and more that they don't see the forest for the trees. They don't connect the damage they're trying to alleviate to the pervasive assumptions and policies that sustain the drug war. It's like providing charity to blacks in the old Jim Crow South, while not recognizing—let alone daring to challenge—the assumptions and policies that made blacks second-class citizens in the first place.

To the bafflement of our European allies, moral crusaders—including President Clinton's Secretary of Health and Human

Services, Donna Shalala—dominate United States drug policy. But the drug war enjoys broad support beyond the moralists, and near-unanimous support of public officials. Misinformation, intolerance and fear generate this support.

Public officials and the media routinely spread drug misinformation. So do well-funded antidrug nonprofits like the Partnership for a Drug-Free America or Joseph Califano's Center on Alcoholism and Substance Abuse at Columbia University. Much misinformation is spread innocently, or with the sincere good intention of scaring children away from drugs. Or scaring their parents. Or because it makes a good sensational story on the evening news. Or, unfortunately, because it confirms white fears of poor inner-city blacks.

The greatest misconception is that illegal drugs seriously threaten American society. Federal statistics show that alcohol users (heavy and light) outnumber marijuana users ten to one. They outnumber hard drug users over 100 to one. Some misconceptions are blatant, such as the official dogma



that all illegal drugs are equally dangerous and all use is abuse. Others are more subtle, like that creature of parents' nightmares, the "pusher," who hangs around school yards whispering inducements to naïve youngsters. Until recently, Partnership for a Drug-Free America public service announcements depicted the "pusher" as a young black man in shades and dreadlocks.

Policies adopted in haste and fear have spawned a drug-industrial Godzilla. Every year, mandatory sentencing laws lock away several hundred thousand more state and federal offenders—and ensure a lucrative boom in prison construction. "Asset forfeiture" laws authorize law enforcement to seize property like cash, cars, boats and houses for "drug offenses"—often without even charging the owners with a crime. Conspiracy laws make persons minimally involved in drug transactions just as culpable as central players. And mandatory drug-testing laws fuel the billion-dollar drug testing industry—which now further stokes parents' fears

in TV ads designed to sell home drug-testing kits.

Reread Your Mission

Why should foundations support drug policy reform?

Because, in many instances, it is actually related to the foundation's stated mission. The ever-widening drug war threatens programs many foundations have sustained for decades. For example, consider what's happening in two areas that a large number of foundations fund—civil rights and public health:

Civil Rights. The current "racial profiling" scandal in New Jersey has forced state officials to admit that troopers selectively stop black motorists for drug searches. That's just one example of widespread discriminatory enforcement of drug laws. The Sentencing Project reports the following:

- Although blacks constitute 13 percent of all monthly drug users, they represent 35 percent of arrests for drug possession, 55 percent of convictions and 74 percent of prison sentences. Convictions for violent offenses are not nearly as skewed.

- Approximately 67 percent of crack users are white or Hispanic. Yet persons convicted of crack possession in federal courts in 1994 were 85 percent black, 10 percent white and 5 percent Hispanic. Nationally, nearly one in

three black men in the age group 20–29 is under criminal justice supervision on any given day—in prison or jail, on probation or parole. In California, it's one in two.

Most states temporarily (during probation or parole) or permanently disenfranchise felony offenders. Permanent disenfranchisement occurs mostly in the South. Nationally, about one in seven black men cannot vote due to a felony conviction; in Alabama and Florida it's close to a third.

Public Health. What issue could be more apple pie to foundations than public health? Surely health funders should sound the alarm when the drug war obstructs HIV prevention!

Sharing of contaminated syringes spreads HIV and hepatitis among injection drug users, and to their sexual partners and children. To prevent sharing, other western nations not only permit over-the-counter sale of syringes but often distribute them free.

Research by prestigious organizations like the National Research Council and Institute of Medicine confirm that providing clean syringes not only doesn't encourage drug abuse, but actually helps bring abusers into treatment. Yet in America, most states forbid pos-



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session and purchase of syringes, federal and often state and local governments deny funding for syringe distribution, and authorities harass and shut down volunteer-operated "needle exchanges."

Among injection drug users, blacks are five times as likely to get AIDS as whites, according to a recent report from the Dogwood Center. AIDS, mostly injection drug-related, is the leading cause of death for blacks between the ages of 25 and 44.

Only Soros's Open Society Institute provides significant funding for syringe distribution—\$1 million last year, dispensed by the Tides Foundation.

Blind to the threat, most foundations still take no interest at all in any activities described as related to "drug policy reform." Foundations that make small scattershot grants for drug war mitigation are bailing the Titanic with a soup can.

What Will It Take?

The Partnership for Responsible Drug Information's Aaron Wilson calls Dr. Smith, head of a prestigious research institute (Smith is an amalgam of a dozen such academics we've talked to), to invite him to be included in the PRDI Drug Policy Resources Directory for the

Media. Smith is hesitant, suspicious. Finally, he blurts out, "Where do you get your funding?" "Private donors," says Wilson. "What about Soros?" "No." "Ah," says Smith, "in that case, I can help you..."

The Open Society Institute fires a lone popgun at drug war artillery. OSI's isolation allows drug war supporters to demonize Soros and other outspoken reformers, effectively silencing moderate opposition.

What will it take to legitimize drug policy reform? According to sympathetic foundation staffers I spoke to, it will take a few prominent, determined, courageous leaders on foundation boards to persuade their colleagues that it's time to act. When that time comes, drug policy reform will finally join education, health, civil rights and other important social justice issues on the agendas of American foundations. ■

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