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Psychedelics Inc.

SPECIAL ISSUE

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MICHAEL T. KLARE

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Cover illustration: JOSH GOSFIELD
HE WAR IN UKRAINE HAS REACHED A DANGEROUS AND PRECARIOUS MOMENT. HAVING FAILED IN
their initial attempt to overcome Ukrainian resistance through a conventional ground
assault, the Russian invaders are now resorting to indiscriminate shelling and bombing of
urban areas, producing an ever-growing toll of civilian casualties. As we go to press,
Russian armored columns are attempting to encircle Kyiv and other major cities, cutting
off access to food, water, and power in a brutal drive to force their surrender. Adding
to the danger, Moscow has declared that further Western arms
shipments to the Ukrainian defenders are a “legitimate target”
of Russian attack—a threat made all too real when Russian mis-
soles struck a Ukrainian training base near the Polish border on
March 13. We stand on the precipice, then, of a major war in
Europe—and one that would entail a significant risk of nuclear
escalation. Preventing such an outcome and bringing relief to
the suffering people of Ukraine must therefore be the world’s
overriding objectives at this critical moment.

Vladimir Putin ordered his unlawful and unjustified invasion
in the mistaken belief that the Ukrainians would put up minimal
resistance, that heavily armed Russian forces would deliver a rapid
victory, and that the West would respond in an incoherent, ineffec-
tual fashion. He was wrong on every count: The Ukrainians have
mounted an unexpectedly strong resistance; numerically superior
Russian forces proved incapable of seizing the strategic advantage;
and the West responded in a unified and vigorous fashion.

In response to these setbacks and humili-
ations, Putin appears determined to increase
the pain being inflicted on Ukraine by his
forces—producing more casualties every
day, eliciting ever-greater anger and punitive
moves from the West, and causing more hard-
ship for his own people. The daily images on
Western TV of Ukrainian cities under attack
and civilians running in terror have aroused
dreadful anti-Russian sentiment, stoking the war
hawks’ calls for direct US military involvement and making any
future normalization of relations with Moscow increasingly remote.

As a result of his reckless escalation, Putin has brought us closer
to the outbreak of a Europe-wide war than at any time since the Ber-
lin crises of the 1960s. In those earlier confrontations, a precipi-
tous NATO response could lead to uncontrolled escalation, possibly
triggering the early use of nuclear weapons—something Putin has
already suggested he might resort to. The growing use of NATO
bases in Poland to supply arms and ammunition to the Ukrainian
military represents a significant threat to Russian forces and could
prompt a lethal response, with obvious escalatory implications, al-
though Moscow has so far limited its attacks to Ukrainian bases near
the Polish border. If NATO imposes a no-fly zone over Ukraine, as
called for by many in Washington, we should expect shoot-outs be-
tween opposing aircraft and inevitable losses, prompting counter-
measures by each side and the likely commitment of main battle
forces. Once that occurs, Russian and US military doctrine both
envision the potential use of nuclear weapons to stave off a battle-
field defeat. Putin—already feeling cornered by the forces arrayed
against him—could prove especially trigger-happy.

Avoiding such an outcome must be the world’s paramount ob-
jective at this incredibly dangerous moment. However great our
sympathies for the victims of Russian attacks, US and European
leaders must resist the pressure to impose a no-fly zone or to
otherwise become directly involved in the fighting. Such a move
would only prolong Ukrainian suffering and expose more of Eu-
rope to the bloody costs of war—and deepen the risk of a nuclear
conflagration that would leave no part of the globe untouched.

Rather, the primary objective now must be to stop the fighting
as soon as possible, spare Ukrainian cities from further bombard-
ment, and allow for the safe evacuation of refugees. This will require high-level nego-
tiations between the belligerents themselves, aided where appropriate by prominent fig-
ures who enjoy the trust of both sides—perhaps some combination of President
Erdogan of Turkey, President Xi of China, and Prime Minister Bennett of Israel. These
intermediaries must convince Putin that a
continuation of the war will only bring him
further shame and humiliation and expose his country to financial
ruin; they must also convince Ukrainian President Volodymyr
Zelensky that continued fighting, however useful in securing
Western aid, will not ensure the safety of his citizens. With nei-
ther side able to achieve its ultimate objectives through further
combat, both have powerful incentives to halt the fighting.

As soon as Russian forces cease combat operations and begin
their withdrawal, the main priority should be restoring essential
services to Ukrainian towns and cities, tending to the sick and
wounded, and beginning the process of reconstruction. The
2 million–plus refugees in Poland and other European Union
nations will have to be settled in a humane fashion and
helped to return to their homes when it is safe and prac-
tical to do so. Ideally, Russia should pay a lot of this—
perhaps the seized assets of Russian oligarchs can be used for this purpose—but we in the West should contribute what we can.

Once the fighting has stopped, it should be possible for Russia and Ukraine to work out the parameters of their future relationship. It is not for us, distant from the fighting, to dictate the terms of that relationship. But from what is already known of the two sides’ positions, we can envision a future Ukraine that espouses some form of NATO-free neutrality, perhaps on the model of Finland or Switzerland, and with the predominantly Russian-speaking regions in the east enjoying a significant degree of autonomy; Russia, for its part, must guarantee Ukraine’s security, sovereignty, and territorial integrity.

As this process unfolds and with Russian forces withdrawn, it would then be possible to consider other priorities. These could include measures to aid Americans and Europeans suffering from high oil and natural gas prices and ordinary Russians experiencing economic pain, despite having no role in Putin’s war. The relaxation of sanctions in the energy sector would increase the flow of oil and gas to Europe, helping Europeans overcome shortages there and slowing the implosion of the Russian economy. Meanwhile, investments in energy efficiency and renewable energy in Europe should be vastly expanded—both to slow the pace of climate change and to prevent future energy crises brought on by excessive reliance on a single major provider of fossil fuels.

Accompanying all of this, it will be essential to begin construction of a new security order in Europe—one designed to make the outbreak of wars like the one in Ukraine less likely. It is tempting, in retrospect, to assign blame to one side or another—or some combination of both—for the current calamity, but surely the crucial point is that the systems put in place to prevent or deter armed conflict have failed catastrophically. We must learn from these failures and devise new measures offering a better chance of success. These could include new or expanded systems of common security plus “deconfliction” measures—hotlines, military-to-military consultations, tank and artillery exclusion zones—intended to reduce the risk of accidental or inadvertent escalation. Such initiatives could lead, in time, to the resumption of nuclear arms control talks with Moscow, where it could be demonstrated anew that arms limitations are mutually beneficial.

Finally, we must recognize that the world has just undergone a historic transition—much as the end of the Cold War and 9/11 occasioned such transitions. Right now this new world appears far more polarized and militarized than the one it is replacing: US military spending, for example, could rise by as much as $100 billion this year—and keep rising in the years ahead. We will have to work much harder, then, to resist the tide of militarism, reduce the risk of nuclear war, and slow the pace of climate change. But we also have an opportunity—perhaps a once-in-a-generation opportunity—to renew the appeal and mobilizing power of peace. We have been reminded—once again and all too vividly—of the true costs and horrors of war. We have also witnessed the incredible bravery of anti-war demonstrators in Russia, thousands of whom have been arrested by the authorities. All this should make the pursuit of peace even more compelling.

FROM THE EDITOR/D.D. GUTTENPLAN

The Nation on Drugs

Our special issue considers the casualties of the War on Drugs, as well as the unprecedented opportunities to make amends.

WHAT DID YOU DO DURING THE WAR ON DRUGS, Daddy?”—that question terrified many a boomer parent. Especially since, in my case at least, the truthful answer would have been: everything. If you could sniff it, smoke it, snort it, swallow it, or inject it, then I probably did. Having passed between the Scylla of addiction and the Charybdis of HIV/AIDS—losing friends to both—into respectability, I can admit that dumb luck, and white privilege, had a lot to do with my survival. Like Tavian Crosland, who found that dealing weed was his only shot at economic independence (page 36), I also sometimes sold drugs. Because even on a full scholarship and with a work-study job, I needed the money just to pay my bills in college. Thanks to Nelson Rockefeller’s punitive drug laws, getting caught back then could mean life in prison.

Of course, the front line of the drug war lay elsewhere. As Richard Nixon’s adviser John Ehrlichman later admitted, and as Zoe Cormier notes in this issue (page 20), the War on Drugs was aimed squarely at Black America and at the emerging counterculture. It also helped demonize Mexican immigrants and drew the US into decades of complicity with Latin American dictators and the death squads they relied on to remain in power. But as Bill Clinton’s 1994 crime bill (sponsored in the Senate by Joe Biden) demonstrated, the war—and the mass incarceration it led to—was always a bipartisan project.

This is why any real attempt to end the hostilities must begin with reparations—to the individuals and communities whose lives were maimed—and restitution. The coming consumer boom, previewed here by Aída Chávez (page 28), offers opportunities for treatment, recreation, and rehabilitation—plus the tax revenue to fund repair. But only if corporate greed can be restrained.

P.E. Moskowitz’s powerful cautionary tale (page 30) offers a stark warning of what happens when Big Pharma’s capitalist incentives skew research and treatment, while Jessica Loudis illustrates why, when it comes to corruption, the illegal drug trade remains very much a Global North problem (page 44).

However, as Karen Polinger Foster, Diana Stein, and Sarah Kielt Costello vividly remind us (page 40), there has always been another way. Kali Holloway highlights the hidden Black history of psychedelics (page 16).

Aldous Huxley’s Brave New World of a passive populace too stoned on Soma to resist state control might not be our future. We are, writes Maia Szalavitz in this special issue’s introductory essay (page 10), in the midst of a sea change. Let’s make it a change for the better.

4
A More Dangerous Cold War

Many have forgotten the perils of nuclear war.

On March 3, Senator Lindsey Graham went on Hannity on Fox News and called for the assassination of Vladimir Putin. To make clear this was no slip of the tongue, Graham tweeted the same day, “Is there a Brutus in Russia? Is there a more successful Colonel Stauffenberg in the Russian military? The only way this ends is for somebody in Russia to take this guy out.”

It doesn’t require much imagination to conjure up the global holocaust that could ensue from a US senator calling for the murder of a Russian leader who sits on top of a vast nuclear arsenal. Graham’s words earned rebukes even from right-wingers like Fox News’ Laura Ingraham and Senator Ted Cruz.

Unfortunately, even if outright calls for assassination were rare, many other powerful and influential voices were nearly as reckless as Graham, using incendiary language that could easily turn the already terrible situation in Europe into a much larger war.

Putin’s invasion of Ukraine is a crime that threatens the peace of the world. His thinly veiled threats of nuclear retaliation both underscore his criminality and make clear the existential stakes. Any unprovoked attack on a sovereign state—whether Iraq in Kuwait, the United States in Iraq, or Russia in Ukraine—should be regarded as an attack on the international order and the core concepts of human decency.

Russia’s actions have properly earned worldwide rebuke, with 141 nations supporting a UN resolution condemning the invasion (only five voted against the resolution and 35 abstained). The Europeans have strongly rallied in response to this attack, taking the lead in imposing strong sanctions on the Russian economy. There has been a welcome effort, shared by many governments, to assist the over 2 million Ukrainian refugees (marred, alas, by the racism inflicted on people of color in Ukraine who were part of the flight).

Less salutary, but certain to give Putin pause, is the fact that Germany and France have committed to steep increases in military spending, while in Sweden and Finland—both firmly neutral throughout the Cold War—there is increasing public support for joining NATO. Putin’s push for a revival of Russia as a regional hegemon has already failed. Russia will come out of the war diplomatically isolated, economically weaker, and facing a much larger and more unified alliance of hostile states. For the foreseeable future, Russia will be a pariah nation.

But if the long-term prospects for Russia are bleak, the world as a whole still faces a blighted future. An isolated Russia remains a nuclear power. Putin’s recklessness should make us all the more wary about the risks of a wider conflict. The narrow and perilous path to safety requires both standing up for Ukrainian sovereignty and avoiding nuclear brinkmanship. That means finding an off-ramp for all sides that allows for de-escalation and negotiation.

In the early days of the invasion, the main Western powers, including the United States, seemed mindful of the dangers of a wider war. The Biden administration was quick and brusque in rejecting calls for the creation of no-fly zones—a move that could require American fighter jets to shoot down their Russian counterparts. Such toe-to-toe battles between two nuclear powers could easily escalate to an apocalyptic conclusion.

But the justified outrage over Russian aggression has led to war fever. The usual jingoistic frenzy that accompanies militarization is now in full swing, with a film festival in Glasgow canceling Russian films (even though the directors of two of the movies bravely condemned the invasion) and Russian cats being temporarily banned from cat exhibitions by the Fédération Internationale Féline. What influence Russian kittens could have in curbing Putin’s revanchist foreign policy is unclear.

Sadly, Biden’s prudence wasn’t shared by the press or the American political class. Influential swathes of public opinion quickly moved past calibrated responses like sanctions to calls for collective punishment and regime change. As with so many wars, reason has been sidelined, with little thought given to which measures might actually help Ukraine and which are merely moralistic posturing (albeit very destabilizing and dangerous posturing). In early March Radek Sikorski, the Polish chair of the European Parliament’s EU-USA delegation, told Axios that the goal of sanctions should be regime change in Russia. On March 2 Michael McFaul, a former ambassador to Russia under Barack Obama, tweeted: “There are no more ‘innocent’ ‘neutral’ Russians anymore. Everyone has to make a choice—
support or oppose this war. The only way to end this war is if 100,000s, not thousands, protest against this senseless war.”

The Russians who are already protesting are very brave, and we should all welcome a wider revolt. But suggesting that ordinary Russians are guilty of Putin’s sins is not only unjust, but a dangerous demonization that opens the door to viewing civilians—theirs as well as ours—as legitimate targets. Mainstream journalists like Richard Engel, a foreign correspondent for NBC News, are still busily advocating for a no-fly zone, with little or no regard for the risks of nuclear war.

Putin’s nuclear saber-rattling is bad enough. It shouldn’t be matched by equally irresponsible voices in the West. Although metaphors of the Cold War are everywhere (with Putin frequently described as a Soviet leader), the key lessons of the Cold War have been forgotten. While the United States engaged in plenty of nuclear brinkmanship until the Cuban missile crisis of 1962, that near miss sobered up policy-makers, leading to the creation of a nuclear hotline so brinkmanship could give way to diplomacy and de-escalation. After John F. Kennedy and Nikita Khrushchev, Cold War leaders were aware that superpower peers had to be careful about playing chicken with the fate of humanity.

Much of the Western elite seems to have forgotten these lessons. Joe Biden was on the cusp of turning 20 during the Cuban missile crisis. It was surely a formative event, and we can only hope and pray the lessons have remained with him.
New Joint Pill Trounces Leading Products In Clinical Studies

Breakthrough joint performance ingredient is shown to be a safer and more effective way to support mobility, comfort, and flexibility. Users reported results in just 72 hours.

Researchers at Seattle based American Global Health Group, a supplement maker that’s been around for over 20 years, have announced a game-changing breakthrough for supporting comfort, mobility, and flexibility.

Sold under the name VeraFlex, it features a patented ingredient called UP446, providing clinically proven, fast-acting benefits that experts believe will transform the way joints are supported. And for good reason…

The secret behind VeraFlex is backed by over $2 Million in safety studies. It’s featured ingredient has also undergone two double blind placebo controlled clinical trials.

In the first, 60 participants were randomly placed into four groups. The data collected by researchers was stunning.

The groups taking the VeraFlex ingredient were shocked at its effectiveness over a 30-, 60-, and 90-day periods of testing that included flexibility, comfort, and joint mobility.

A second study was conducted to ensure the data was accurate. But this time, the study was done to see how quickly it worked, and again, the results participants experienced while taking UP446 blew away researchers.

Shockingly, both men and women experienced results in as little as 3 days. At the end of the day 7, the subjects scored highly for joint comfort and passed their walking tests with flying colors.

One of the most respected joint management specialists in the US, Liza Leal, MD, has enjoyed the benefits of VeraFlex so much she has become the product’s spokesperson. She explains why.

A New Approach for Joint Performance

“Maintaining mobility and joint health isn’t all about age, research has shown it has a lot to do with supporting immune and enzyme health,” explains Dr. Leal. “And if you cannot stay active it can make life hard.”

The VeraFlex formula is the only known joint formula available today that targets the 3 enzymes known to support mobility, comfort, and flexibility. It’s no wonder the potent featured ingredient possesses eight US patents.

Most joint supplements target a single enzyme for joint health. VeraFlex targets all of them, which is why it works so effectively and for so long.

“This is a great new approach,” adds Dr. Leal, “it is so well studied.”

“I have recommended VeraFlex to patients on a Monday, and they have called me back on Friday to thank me.”

Dr. Leal appreciates the science and safety behind VeraFlex. “There are more than 20 published studies, including human clinical trials, and lots of safety studies.”

VeraFlex also contains super-antioxidants that help support your bodies maintain cartilage health.

Even with the most skeptical users, VeraFlex almost immediately becomes trusted.

Everyday Americans Are Thrilled

Results are not just for the clinical study participants. Since hitting the market every day uses are thrilled too.

Been using Veraflex because it works! – B.

Great Product - helps keep my Joints Comfortable. Love the Product. - A.

My experience has been good. It definitely makes a difference. This allows me to keep walking comfortably. - A.

These are great. Totally different than your typical joint supplements. I can seriously feel a difference in my movement. Definitely recommend for supporting comfort and mobility. – Paula J.

Developed Using a Super Computer

By deploying triple-action support for joint wellness, including COX-1, COX-2, and LOX-5 enzymes, combined with 24/7 support for health oxidative stress levels, VeraFlex users report amazing results.

Like the research subjects in clinical trials, you too, can benefit in as little as 72 hours!

Unlike older joint care ingredients developed decades ago, the VeraFlex formula was created by the Phytologix system.

The system identified two time-proven medicinal herbs, scutellaria baicalensis and acacia catechu, for their ability to rapidly support healthy enzyme function.

It resulted in the award winning and featured ingredient of VeraFlex called UP446®. VeraFlex gets an additional boost from an Aloe Vera powder called Alopren® that has been studied for supporting gastric health, enhanced nutrient absorption, and good gut flora (gut flora is linked to too many health benefits to list but joint health is one of them…)

Together, these potent ingredients are combined at a leading American facility that is GMP certified with pharmacy grade testing for capsule purity before being shipped to your door.

Sold in Research Level Doses

Each dose contains 250mg of UP446 and 160mg of Alopren®. When taken as directed users get the same precise dosage levels used by clinical researchers and participants in peer-reviewed, independent clinical research over a ten-year period. And you’ll be surprised by how little it costs.

VeraFlex is offering a risk-free opportunity to support your joints, digestion, and energy.

100% Satisfaction Guarantee

Test this fast acting, joint breakthrough with VeraFlex’s 100% Satisfaction Guarantee. For a limited time, we’re also offering up to 3 FREE bottles with every order.

How To Get A FREE 3 Month Supply

Simply pick up your phone now and dial 1-800-908-2991 and one of the company’s US based and friendly agents will make sure you get the bottles of VeraFlex you need … and enjoy the same results as so many other users – in as little as 72 hours!

Don’t delay… Powerful Ingredient Means Limited Supplies

Please make sure to call right now. We are advertising in select regions. Users all over are excited to get their hands on VeraFlex. The Special Offer, along with the patented ingredients in VeraFlex, means that supplies are limited. So, go ahead and call 1-800-908-2991 now.
challenges. The idea of a common project gives a special resonance to the collective appeal: an advantage the straight corporate sloganeer can only envy.

“Project” was once a potent term for existentialists. It brought ethical commitment into anxious relation with chance and gamble, and thus lent a note of romantic uncertainty (as well as hard-bitten realism) to the everyday notion of a plan of life. As Sartre put it in *Existentialism Is a Humanism*: “Man is nothing more than his own project. He exists only to the extent that he realizes himself, therefore he is nothing more than the sum of his actions, nothing more than his life.” Great as are the demands of human solidarity, “we are left alone and without excuse.” Sartre believed there was such a thing as too much belonging.

By contrast, the therapeutic catchwords that pervade our contemporary chatter about society all agree on the good of working, thrashing things out, and deciding in groups. Why? “People console themselves,” Adorno wrote in *The Jargon of Authenticity*, “by thinking that something has already been done about what is oppressing them when they talk about it.” Hence the importance of conversation, in an expanded sense, which, Adorno went on to say, “becomes an end in itself.” And in the new regime, the conversation must continue—even when a participant is threatened with expulsion.

Accordingly, the three indicia of group membership cataloged by Albert O. Hirschman—exit, voice, and loyalty—have been joined by a fourth: apology. Listen to a contemporary virtuoso of belonging, Philip Gwyn Jones, publisher of Picador, the British book imprint, as he responds to criticisms from sensitivity readers:

I now understand I must use my privileged position as a white middle-class gatekeeper with more awareness to promote diversity, equity, inclusivity, as all UK publishing strives to put right decades of structural inequality. I believe in the crucial necessity of this change.

Notice that this is a “crucial necessity”—occurring at a crux, a crossroads, a once-in-a-lifetime moment of passage into a redeemed society. The stakes are as high as the delivery is humble.

The locus classicus of this mode was A.O. Scott’s 2018 essay “My Woody Allen Problem.” Scott had credited and taken to heart the charge by Dylan Farrow against her father. “Mr. Allen’s films and writings,” he noted, “are a part of the common artistic record,” and yet, “I don’t mean this as a defense, but an acknowledgment of betrayal and shame.” Why, though, should Scott beg the world’s pardon when he did nothing worse than watch those films in his unguarded youth? Because their harm was incalculable. “I will not blame you,” he concluded, “if you want to stop watching Woody Allen’s movies,” but he vowed for his part to do the work: “I also think that some of us have to start all over again.” The catch in the throat at “some of us” and “all over again” would not be lost on the sensitive.

Apology, it seems, is endless, and perhaps it should be, but narcissism has many rest stops for the ego to graze in, and the self-denying self-acquittal affords a boost as satisfying as any athletic exertion. It means that your missteps are now more than accidental, and more than important. They have become essential to the larger social project of belonging. There is a mirror on every wall and, just possibly, a microphone behind the mirror.

---

Sanctioning Oligarchs

Yes, Putin’s Russian oligarchs have lots
Of London mansions, not to mention yachts.
A yacht that’s seized brings pressure hard to bear—
Unless, of course, that Russian has a spare.
It’s not a walker. It’s not a rollator. It’s the So Lite™ Glide!

For millions of Americans, the simple pleasure of taking a stroll has become an impossibility. Age, injuries and a variety of conditions have diminished their strength and stamina, making walking a challenge… and even a health risk. Traditional walkers and rollators leave you hunched over and shuffling along. Now, medically-minded design engineers have created a product that enables almost anyone to walk upright, and to have a place to sit and rest when they need it. Best of all, it weighs only 19 ¼ pounds, so it’s practical and easily portable.

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NNAPOLIS POLICE CHIEF ED JACKSON WAS RAISED BY A SINGLE mother in a Baltimore housing project. “Police officers weren’t seen as our friends,” he recalls. He and his five siblings were driven by “never wanting to disappoint” their protective mom, he adds—and this helped keep them in school and off the streets.

After Jackson graduated from college, a buddy who had joined the police force suggested that he do the same. He saw a chance to both do some good and pay down his student loans. He never expected to make a career of law enforcement.

Nor did he ever expect to become an advocate for the more lenient treatment of drug use. He describes himself as originally being a “traditionalist” who saw the War on Drugs as “noble and right.” Even now, he says, “I believe firmly in law and order.”

Today, however, he is also an outspoken member of the Law Enforcement Action Partnership (LEAP), which favors decriminalizing drugs and treating addiction as a health issue, not as a police matter.

Jackson’s personal evolution mirrors that of much of our political leadership—on both the left and the right. The change since the 1980s and ’90s is striking: Political rhetoric, at least, has done a 180. Back then, mainstream politicians were unapologetically all-in on drug policing, whereas now it has become almost obligatory to say, “We can’t arrest our way out of this.”

Back then, Democrats and Republicans tried to outbid each other in terms of who could create the longest, harshest sentences for drug offenses and the most onerous corollary consequences, like banning formerly incarcerated people from public housing, student loans, food stamps, and other welfare programs. But today candidates vie to appear more compassionate—even Donald Trump signed a criminal justice reform bill.

In 1989, then-Senator Joe Biden criticized President George H.W. Bush’s call for more police and prisons to fight drugs as not “tough enough.” The year before, polling had shown that 90 percent of the population favored the drug war.

Now, however, 18 states have fully legalized marijuana. Oregon decriminalized the possession of all drugs in 2020, with more states looking to follow suit. And a bill for full federal decriminalization has been introduced in the House.

Jackson’s story helps explain this sea change—and what it has taken to challenge America’s unquestioning enthusiasm for a drug policy dominated by law enforcement.

JACKSON PATROLLED HIS first beat in Baltimore in 1983. “Part of academy training,” he says, “is that they indoctrinate you. You learned early on that drugs were evil, drug dealers were evil, and people who were addicted or sold drugs are burdens on society.”

Growing up, he saw what he viewed as “the ravages of drugs” all around him. Some kids he knew started using or selling, and their lives became a cycle of street, jail, prison, parole, and back. More than one died of an overdose.

At first, Jackson saw little reason to question the drug war. “I had this very myopic view about the end result,
Sea change: The public has increasingly come to understand that the drug war imposes harms of its own.
“You learned early on that drugs were evil, drug dealers were evil, and people who were addicted are burdens on society.”

—Annapolis Police Chief Ed Jackson

because it was sold to me that drugs were bad because they destroyed people’s lives…. I didn’t think as critically about it as I should then.” Essentially, he didn’t distinguish between the harms caused by the substances themselves and those caused or exacerbated by drug policy.

Nor did most politicians—or journalists. In the 1980s, Democrats had signed on to the War on Drugs for strategic reasons: Their goal was to start winning elections and stop being dismissed as immature hippies who were soft on crime.

Even most Black politicians—who might have been expected to protest a policy that would inevitably criminalize people of color—bought in. While members of the Congressional Black Caucus were overrepresented among the few resisters—including Representatives John Conyers and George Cockett, both of Michigan—most felt that drugs were such a threat to their constituencies that they had no choice but to get tough.

In fact, one of those who pushed longest and hardest for more enforcement was Harlem Democratic Representative Charles Rangel, a cofounder of the caucus. Even before Richard Nixon declared an “all-out offensive” against drugs on June 17, 1971, Rangel had urged the president to crack down. He would chair the House Select Committee on Narcotics Abuse and Control for 10 years.

Rangel and his allies framed the issue as one with no middle ground: Either you supported increased policing and harsher sentencing, or you supported heroin and crack and thought it was fine to sell drugs to children.

In the 1980s, most of the tiny minority who argued for less punitive policies were white men. Both Black and white drug warriors derided them as egghead academics who didn’t understand how drugs affected low-income communities and just wanted permission to smoke weed.

Nonetheless, one of the most prominent early drug war dissenters was Black. In 1988, Baltimore Mayor Kurt Schmoke tore up a speech he’d planned to give at a meeting of the US Conference of Mayors. Instead, he made a case for decriminalization, arguing that the drug war was wasting billions of dollars and treating a health problem as a crime.

“I knew that I was basically ending some options for my political career,” says Schmoke, who is now president of the University of Baltimore. “But I just thought that it was an opportunity that I couldn’t pass up to get both the big-city mayors and big-city police chiefs thinking differently.”

The response from the stunned audience was “overwhelmingly negative,” Schmoke recalls. Even though his speech was grounded in fact and backed by his own experience as a former assistant US attorney, most listeners weren’t ready for his message.

However, at least one member of Schmoke’s own police force did agree: Ed Jackson. By that point, Jackson was working his way up the ranks. He knew firsthand that the people getting arrested for drugs weren’t drug barons or kingpins; they were mostly hapless young men who’d grown up where he did. “I’m thinking, ‘Boy, many of these people are victims for a lot of reasons—and this is not what I thought it was,’” he says.

Around 1995, Jackson made lieutenant. After hearing Schmoke’s speech, he’d started to study the history of drug laws. He got a master’s degree in applied behavioral science from Johns Hopkins, which “opened my eyes to how the world works and how America works,” he says. Back then, he felt that he couldn’t speak out publicly if he wanted to stay in law enforcement. He’d seen what happened to those who did, including Schmoke, who’d probably lost any chance of a national political career. (After three terms as mayor, Schmoke decided not to seek reelection or higher office in 1999.)

HBO’s iconic show about the drug trade in Baltimore, The Wire, which ran from 2002 to 2008, was based in part on real events, including some that Jackson had witnessed. According to Jackson, The Wire’s “Hamsterdam” storyline—in which a police commander declares one area a safe zone for drug use and sales and cracks down everywhere else—was based on a real proposal. It was never implemented, but the officer who’d suggested it was ostracized and permanently sidelined, Jackson says. Jackson took note and became increasingly concerned about how to change drug policy.

For Jackson and many other Black leaders, a major turning point came in 2010, when the New Press published civil rights attorney Michelle Alexander’s The New Jim Crow: Mass Incarceration in the Age of Colorblindness. The paradigm shift that this book spurred in the Black community would drive reform elsewhere as well.

Scholars and activists had previously noted the extreme racial disparities in the enforcement of drug laws. None, however, had made their analysis as accessible as Alexander’s, which connected the mass criminalization of Black people under the guise of the drug war to Jim Crow laws that had used the criminal legal system more overtly to suppress Blacks.

Jackson encountered the book when he was teaching at Baltimore City Community College. “Word spread like wildfire” among students and academics, he says. Soon he began to hear about it in neighborhood meetings and from people recovering from addiction. “It was written in a way that people could relate to,” says Jackson, who as chief of police in Annapolis, Md., now supports programs and policies that treat addiction as a health problem rather than a crime.

“It changed the game for me,” says the Rev. Dr. Frederick Douglass Haynes III, the pastor of the 12,000-strong Friendship West Baptist
Church in Dallas. At the time, Haynes was cochair of the Samuel DeWitt Proctor Conference, a network of Black clergy devoted to social justice. They invited Alexander to speak—an invitation that would soon lead to dozens of others.

“She exposed the fact that mass incarceration had taken place on the backs of Black men in this so-called drug war,” Haynes says. “And I was especially reminded of Tupac Shakur, who had already put it in rap terms. He said, ‘Instead of war on poverty, they got a war on drugs so the police can bother me.’”

Alexander backed her argument with facts and data. She gave context to ideas that had been put forward by rappers and radicals but had not found mainstream acceptance—especially within the Black church, where drug use tended to be viewed as an individual sin and those who engaged in it were often rejected as a threat to “respectable” Black people.

Haynes described organizing an anti-drug march before he read The New Jim Crow. “Our theme was ‘Dreams Over Drugs,’” he says. “I won’t say we were supporting the drug war, but definitely, as far as I’m concerned, we were allies because of our ignorance.” After encountering Alexander’s work, Haynes saw the problem very differently. Police officials he knew confirmed what she had written about how whites sell and use drugs at least as much as Black people do—but rarely go to prison.

Haynes changed his ministry almost immediately and would preach dozens of sermons on the issue. Knowing how African Americans—along with other marginalized groups like Hispanics and Indigenous people—were targeted, he began to feel far more compassion for those who were addicted and incarcerated, he says.

After Alexander spoke at his church, Haynes recalls, a woman described the epiphany it brought her. For years she’d been angry with her brother, who had been imprisoned. Listening to Alexander, she realized that her anger was misplaced and needed to be focused instead on the system of mass incarceration.

People all over the country were reaching similar insights. Alexander feared that her book wouldn’t have currency when America had just elected its first Black president, and indeed, when it was first published, she had trouble finding audiences for her message, and the book received few reviews. But it became a best seller once community and church leaders like Haynes began to spread the word. “I would tell my colleagues that this is your companion to the Bible if you are serious about social justice,” he says. He personally handed out more than 50 copies. Hundreds of groups began to discuss it and figure out how to take action.

The New Jim Crow also inspired activism within prisons, prompting many to try to ban it, some successfully. It kick-started a movement led by formerly incarcerated people, who were now being given a more sympathetic hearing. Susan Burton, herself formerly incarcerated and in recovery from addiction, founded and runs a nonprofit called A New Way of Life, which helps women like her.

“I started ordering the book just so I could give copies away to people,” Burton says. “I gave it to the legislature. I gave it to my city council person. I gave it to my board of directors. I ordered so many that the publisher couldn’t keep up.” (The same press would later publish her award-winning memoir, Becoming Ms. Burton.)

The book also laid the groundwork for new coalitions that brought together traditional civil rights organizations like the NAACP and drug and criminal justice reform advocates. Until then, most white-led reform groups hadn’t prioritized anti-racism. And as hard as it is to imagine now, most Black-led civil rights groups hadn’t prioritized fighting mass incarceration, preferring instead to work on issues like affirmative action, education, and housing discrimination.

“In 2009, I was asked to be the first criminal justice director in NAACP history,” says Robert Rooks, who is now the CEO of the Reform Alliance, which is focused on probation and parole. The NAACP program emerged out of an initiative started by the organization’s president at the time, Ben Jealous.

Rooks began educating the leadership of local NAACP chapters, whose communities were being harmed by police violence, about the need for change. When Alexander’s book came out, he immediately recognized that it could make his case for him. “I bought Michelle’s book and gave it to every board member at the NAACP,” he says, adding that the connection she made between Jim Crow and the drug war was crucial to changing minds.

In 2011, the NAACP officially endorsed ending the drug war. And new alliances were being forged not only within the Black community: White faith groups seeking racial justice also began to read the book. At the same time, funders who otherwise disagreed on nearly everything, like George Soros and the Koch brothers, agreed that the drug war was expensive and ineffective.
Critically, rising Black opposition to harsh drug enforcement policies also meant that the remaining Democratic support for these measures cratered. Once African American leaders began calling out drug enforcement as racist, it became much harder for whites to argue otherwise.

**Simultaneously, extreme racial disparities in the way addiction was treated by the criminal justice and medical systems became even more obvious, as journalists reported on the massive increase in prescription opioid addiction and overdose deaths over the past two decades.**

In the media, opioids were portrayed as a white middle-class problem: Innocent users had gotten hooked thanks to the misdeeds of rapacious physicians and corrupt pharmaceutical companies. This wasn’t exactly accurate: Prescription drug addiction hit the working class and poor hardest, and 80 percent of new users started by taking the medications illegally, obtaining them from friends and family, not doctors. But the perception garnered sympathy.

Meanwhile, for several decades, a small cadre of activists, including what is now the National Harm Reduction Coalition, the Drug Policy Alliance, and local needle exchange providers, had been working tirelessly for drug sentencing reforms and compassionate harm reduction measures to reduce the spread of HIV. They argued that policy should focus on pragmatic ways to reduce damage, rather than seeking the impossible goal of a “drug-free America.” They met with little success: Politicians did not want to “send the wrong message” about drugs, regardless of whether softer approaches could save more lives.

As the concern about prescription opioids began to rise, though, the resistance to harm reduction began to fall. When white middle-class parents thought it was their kids who might die or be incarcerated for decades, harm reduction no longer felt like “sending the wrong message”—it seemed like the right thing to do. “All of a sudden, with the opioid crisis, we now see it as a public health crisis because there’s a white face attached to it,” Haynes says. “We did not do that with the crack cocaine epidemic.”

This noticeable shift toward compassion made Alexander's point almost as strongly as her book had. “I think the concept of harm reduction was important,” says Kassandra Frederique, executive director of the Drug Policy Alliance, “and I think it became more effective when we got the idea that harms are not just associated with drugs but with drug prohibition. What *The New Jim Crow* laid out really incredibly was the harm.”

**Meanwhile, change was also brewing on the right.** Most conservatives who began rejecting the drug war were not influenced by *The New Jim Crow*. Instead, many revised their position via a process that political scientists call “identity vouching.” Essentially, the idea is that the persuasive capacity of an argument depends in part on the speaker’s identity: If the speaker is “one of us,” the argument will carry much more weight than it would if the speaker is “one of them.”

In their book *Prison Break: Why Conservatives Turned Against Mass Incarceration*, David Dagan and Steven Teles describe how identity vouching was crucial to this reversal in attitudes on the right. Chuck Colson is a prime example: He served time in prison for his role in Watergate and also founded a prison ministry. But his conservative and religious credentials helped him convince influencers on the right that America’s prison binge had gone too far. While libertarians had long been concerned about the costs of the drug war, that argument alone rarely convinced culture warriors. Colson, portraying reform as an issue of justice for the Christian right, helped convert staunch right-wingers like Newt Gingrich and Grover Norquist.

Identity vouching also helps explain the success of *The New Jim Crow* among Black leadership and faith groups, which had previously avoided taking on the drug war. Arguments made by white policy reformers or radical Black activists often failed to move Black churchgoers. But by describing her own path from skeptic to acolyte on the issues in her book—in her introduction, Alexander recounts how the first time she saw the drug war compared to Jim Crow, she considered it a polarizing overstatement—she was able to bring far more people along. By 2011, even Charles Rangel had cosponsored a bill to legalize marijuana.

The rise of the Internet also allowed perspectives that the mainstream media had ignored to reach larger audiences. Because the early users of the Internet—mainly academics, libertarians,
Deadheads, and computer geeks—were hardly in favor of drug crackdowns, drug policy reformers have long had an outsize voice online. Internet discussion boards, fictional shows like *The Wire* and *Breaking Bad*, and documentaries like *Thirteenth* and *The House That I Live In* all complicated the binary view that drug policy could only be either an all-out war or a hyper-capitalist dystopia where Philip Morris is selling fentanyl at Walgreens.

“When I think about the shift in attitudes that has occurred around drugs over the last 20 years, a lot of it has been community advocacy and the work of grassroots groups, but it’s also been a shifting in our cultural narrative,” says activist Deborah Peterson Small, who worked for years to roll back New York State’s draconian “Rockefeller laws,” which mandated 15-year-to-life sentences for low-level marijuana, cocaine, and heroin offenses. These campaigns, in New York and dozens of other states, also helped reduce the political salience of the drug war by showing that reforms actually didn’t result in the criminal free-for-all that prosecutors claimed would occur. In a campaign driven by conservatives, Texas became a pioneer in reducing its prison population. California initiatives that were popular with voters and drove decarceration also proved reassuring. The failure of the sky to fall as state after state legalized marijuana didn’t hurt, either.

And the Black Lives Matter movement, galvanized by Derek Chauvin’s murder of George Floyd, is in some sense a culmination of the work of those who were inspired by *The New Jim Crow* to fight mass incarceration as a racial justice issue. The Breathe Act, sponsored by the movement, endorses decriminalization, harm reduction, and the abolition of the Drug Enforcement Administration.

Frederique, of the Drug Policy Alliance, notes that Alexander’s work was critical to the movement because the drug war “was a policy that was created to lessen the value of Black lives.” The fact that Chauvin’s attorneys and others tried to use Floyd’s own drug use to discredit him and argued that it was partly to blame for his death is not coincidental.

The national prison population grew nearly 700 percent between 1972 and 2009. More recently, from 2019 to 2021, it has fallen by around 17 percent and stood at nearly 1.8 million people as of 2021. From 2007 to 2016, the number of people in prison for drug offenses dropped by 26 percent. These reductions were accompanied by a 27 percent reduction in violent crime between 1999 and 2017. With crime dropping, it became much easier to recognize punitive drug policies as overkill.

Indeed, around two-thirds of Americans now favor completely legalizing marijuana, and the same proportion support ending arrests and incarceration for the personal possession of any drug, according to recent polls. And 83 percent consider the drug war to be a failure—nearly the same proportion that supported it in the 1980s.

But now, as the media and some politicians are beginning to use pandemic-era increases in gun crime and homicide to stoke fear again, this progress is fragile. If voters see the pandemic-related rise in violence and overdose deaths—which have hit red and blue states alike—as the temporary result of a unique upheaval, it seems unlikely that we’ll see a full return to drug war hysteria.

The task now is to avoid a backlash led by people who benefit financially or politically from the current system and use specious arguments to scare the public about change. We also need to do more than just stop arrests and incarcerations; we must replace those harmful tactics with approaches that actually do fight addiction, mental illness, and homelessness.

We’re starting to see change in Oregon, which is currently distributing $270 million to expand addiction recovery, housing, and harm reduction resources as it decriminalizes drug possession. New York has become the first city to allow overdose prevention and supervised consumption sites, where people can take drugs with medical support, and others are working to open similar spaces. Although millions of injections have taken place at these sites in dozens of cities around the world, there has not been a single fatality. According to the organization OnPoint NYC, which operates the safe injection sites, New York has already seen the reversal of more than 100 overdoses.

Decriminalization and overdose prevention sites, however, are not a cure for a drug supply that is poisoned by illicitly manufactured fentanyl and similarly potent synthetic opioids. To really reduce harm at scale, we need to stop pushing people out of the medical system and into suicide or onto street drugs by ending their prescriptions without offering effective alternatives.

Instead, we need to provide a safer supply, for both those who need opioids for pain and those who have addiction. This will be a tough fight, but equally difficult battles have been won in the history of harm reduction. On the pain front, the Centers for Disease Control is currently revising its opioid prescribing guidelines, which are widely recognized to have resulted in thousands of people being cut off from medication and at least hundreds of suicides.

All of drug policy—whether related to policing, incarceration, medical care, or rehab programs—must first ensure that every aspect of every strategy minimizes rather than maximizes harm. To spur lasting reform, activists can’t let up. Americans can’t be allowed to forget that the War on Drugs is and always has been a fig leaf for systemic racism and political manipulation—not a way to help people with addiction or to protect lives.
Research on psychedelics, then and now, has been riddled with medical racism and exclusion. But that hasn’t stopped Black people from finding creativity and solace through such drugs.

BY KALI HOLLOWAY
BORN OF AMERICA’S COLD WAR PARANOIA THAT THE SOVIETS HAD achieved breakthroughs in the development of mind control drugs, Project MK-Ultra was the CIA’s covert counter-operation to locate the ultimate “truth serum” for interrogations, as hearings on the project later described it. Approved in 1953 by then–CIA director Allen Dulles, MK-Ultra primarily involved the secret—and highly illegal—“administration of LSD to unwitting individuals,” according to the Senate Select Committee to Study Governmental Operations With Respect to Intelligence Activities in its 1975 investigative report. In 1977, roughly 16,000 pages of misfiled documents were unearthed showing that the “25-year, $25-million effort by the [CIA] to learn how to control the human mind,” in The New York Times’ description, not only saw the US government dose thousands of American (and Canadian) citizens with LSD without their knowledge or consent, but also disproportionately target those “who could not fight back,” as one CIA official admitted.

“Black Americans were uniquely exploited during this first wave of psychedelic research,” concluded the authors of a 2021 University of Ottawa study of abuses in the early trials of LSD. Overwhelmingly, the African American victims of MK-Ultra were drawn from prisons and hospital mental wards, including the National Institute of Mental Health’s Addiction Research Center (ARC), which tested LSD and some 800 other psychoactive drugs on an inmate population that was almost exclusively Black. In numerous other MK-Ultra experiments, according to the study, “participants were subject to differential and torturous treatment and dosing dependent on race.” In one 1960 study, “‘Negro’ men convicted on drug charges…were recruited from prison and given LSD in a research ward,” while a comparison group made up of “professional White people at Cold Spring Harbor, living freely,” took LSD in “the principal investigator’s home ‘under social conditions designed to reduce anxiety.’”

“In the 1950s and ’60s, researchers weren’t thinking about the need to take extra precautions with vulnerable populations,” says Dana Strauss, a PhD candidate in psychology at the University of Ottawa and a coauthor of the 2021 study. “Whether or not those researchers were explicitly targeting Black Americans, they drew their participants mostly from prisons where Black Americans were overrepresented because of racism in arrests, charges, incarceration, and sentencing.”

Just as the mistreatment of marginalized Black folks in MK-Ultra demonstrates the dangers of medical racism, so, too, does their exclusion from contemporary research into the effectiveness of drugs such as psilocybin, ketamine, and MDMA to treat trauma, anxiety, and depression. As what’s been called the “psychedelic renaissance” in psychotherapy blooms, this is a key moment to acknowledge that, while the popular face of “tripping” has been stark white since the days of Timothy Leary, Ken Kesey, and flower power, Black folks have long found creativity and solace in the intentional and consensual use of psychedelics. But the War on Drugs complicated that relationship.

Described in a 1977 New York Times article as an “eager experimenter” for the CIA, Dr. Harris Isbell was the research director at ARC when MK-Ultra launched. The facility billed itself as a hybrid hospital/addiction-science lab forging new ground in drug rehabilitation. In practice, it worked more like a prison—where Isbell, preying on the addictions of his overwhelmingly Black male patient population, conducted MK-Ultra experiments from the early 1950s to the ’60s. “The deal was pretty simple,” Dominic Streatfeild, author of Brainwash: The Secret History of Mind Control, writes. “The CIA needed a place to test dangerous and possibly addictive drugs; Isbell had a large number of drug users in no position to complain.” Referred to as “volunteers,” the patients who signed up for Isbell’s experiments, as hearings on the project later described it. Approved in 1953 by then–CIA director Allen Dulles, MK-Ultra primarily involved the secret—and highly illegal—“administration of LSD to unwitting individuals,” according to the Senate Select Committee to Study Governmental Operations With Respect to Intelligence Activities in its 1975 investigative report. In 1977, roughly 16,000 pages of misfiled documents were unearthed showing that the “25-year, $25-million effort by the [CIA] to learn how to control the human mind,” in The New York Times’ description, not only saw the US government dose thousands of American (and Canadian) citizens with LSD without their knowledge or consent, but also disproportionately target those “who could not fight back,” as one CIA official admitted.

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the trial, evaluating psychiatrists unanimously concluded he suffered from “severe psychiatric disorders.” In 1980, Congress publicly apologized to Thornwell and granted him a $625,000 payment. Four years later, he drowned after a suspected epileptic seizure.

By 1960, MK-Ultra head chemist Sidney Gottlieb’s faith in the experiments was flagging, as evidenced by a memo in which he noted “no effective knockout pill, truth serum, aphrodisiac or recruitment pill was known to exist,” though the CIA would continue the program for years. Nearly two decades later, Senator Walter D. Huddleston would confirm at a congressional hearing that “any information that was gathered was apparently useless and not worth continuing.”

Edward M. Flowers, who had been an unwitting subject of MK-Ultra experiments at ARC when he was 19, testified at the 1975 hearing at which Isbell appeared. By then, Flowers had become the assistant director of a different rehabilitation and reeducation program for addicts. Years later, he recalled the hearings as the moment he recognized the full scope of his betrayal. “I really got a firsthand insight about some things when we had the hearings, because then the bigger picture kinda showed. Then I got in touch with the fact that the CIA was behind all this,” Flowers said in a 2004 interview, adding, “They used my ass and took advantage of me.” Despite the violations of the Nuremberg Code’s research ethics, no one associated with MK-Ultra was ever punished for their involvement.

A 2018 study found that in 18 trials of psychedelic-assisted psychotherapy, 82 percent of the participants were white.

Cold War drug experiments under Operation Third Chance, deployed primarily against unknowing Europeans abroad. The only American dosed with LSD was James Thornwell, the lone Black soldier at his station in France. Thornwell had been accused of stealing classified documents and was subjected for more than three months to an interrogation in which he was “physically abused,” “terrified with threats of...death,” and “degraded by a steady stream of verbal abuse, including racial slurs and accusations of sexual impropriety,” by members of the Army Counter Intelligence Corps, according to his legal complaint. After 99 days, a team from Operation Third Chance showed up and surreptitiously gave Thornwell LSD, then continued the humiliation and torment. Thornwell, whom Army notes describe as having an “extreme paranoiac reaction” that was “almost incapacitating,” was terrified; unaware that he had been dosed and unfamiliar with LSD or its effects, he thought he was losing his mind. Thornwell’s Army abusers told him they had the power to “extend this state indefinitely, even to a permanent condition of insanity.” He fainted from the trauma, came to, and was finally sent home. An officer on the intelligence team concluded that the Army had “satisfaction evidence of subject’s claim of innocence” from the sadistic session. Four months later, Thornwell was given a general—though not honorable—discharge.

It took 16 years before he learned what the Army had done to him. In a 1979 lawsuit, Thornwell said the experience had turned him into “an isolated social and emotional cripple.” He described a life of headaches, depression, and nightmares. During the trial, evaluating psychiatrists unanimously concluded he suffered from “severe

and morphine—the same drugs for which they were supposedly receiving addiction treatment.

A 1956 article by Isbell describes four distinct and excruciating LSD experiments on ARC patients. His notes reveal that Black patients in some of these studies were fed more than twice as much LSD as white patients. What’s more, as the University of Ottawa study observes, “white participants endured only 8 days of LSD administration, while Black participants endured chronic administration for up to 85 days.” In a letter, Isbell states that in one experiment he gave “seven Negro subjects” daily doses of LSD, which he would double, triple, or quadruple to keep them from building a tolerance, all “without the patient’s knowledge.” Isbell reports that this torture continued for a staggering 77 days; a lengthy New York Times piece published after the 1977 document drop states that “a mental patient” at ARC “was dosed with LSD continuously for 174 days.” Isbell, who was given the US Public Health Service Meritorious Service Award in 1962, would tell a Senate subcommittee in 1975, “The ethical codes were not so highly developed and there was a great need to know in order to protect the public in assessing the potential use of narcotics...and to make recommendations about the need for control of these drugs. So it was very necessary, and I personally think we did a very excellent job.”

The US Army conducted its own MK-Ultra and the presidency of Richard Nixon, who launched the War on Drugs in 1971. The Controlled Substances Act, another Nixon legacy, made psychedelics Schedule I drugs, categorizing them as having “no currently accepted medical use.” The designation effectively shut down research into LSD until the late 1990s, when public interest in psychotropic drugs was reignited. That movement has gained momentum in the past few years, but just as in the 1960s, when psychedelics were closely associated with white hippie culture, the popular image of their use has been overwhelmingly white—which perhaps explains why recreational use has been portrayed as rebellious and visionary. Among those credit with the current resurgence are Silicon Valley gurus like Tim Ferriss, who in 2015 claimed that every billionaire he knows takes “hallucinogens on a regular basis.” But the idea that only white folks are taking part in psychedelic mind-expanding experiments isn’t true. From ASAP Rocky, who has publicly touted LSD for helping him “cope with life,” to Chance the Rapper, who has said that recording his aptly named 2013 mixtape Acid Rap involved “30 to 40 percent...
LSD in the studio, to the scenes in the film Black Panther of Prince T’Challa eating a psychedelic leaf that teleports him into the realm of his ancestors, a new generation of Black artists is embracing hallucinogens. And while the image of psychedelic users was whitewashed in the 1960s and ’70s, Black psychedelic rock artists—Love, Jimi Hendrix, Sly and the Family Stone, Shuggie Otis—were creating trippy sonic experiments that pushed at the boundaries of the genres they incorporated to forge something altogether new. The long-standing rumor that Funkadelic’s 1970 album Free Your Mind… and Your Ass Will Follow was made because the band wanted to “see if we can cut a whole album while we’re all tripping on acid” was established by George Clinton himself. The inheritors of this legacy are the Afropuffurists, from Missy Elliot to Janelle Monáe.

And yet the psychedelic renaissance seems to be as whitewashed as its predecessor. A 2018 study found that in 18 trials of psychedelic-assisted psychotherapy, 82 percent of the participants were white, while just 2.5 percent were African American—a “lack of inclusion” by an overwhelmingly white field of researchers that “goes directly against federally mandated efforts to report and recruit diverse samples in clinical trials.” “We have a long way to go,” Strauss, the University of Ottawa PhD candidate, says.

In 2017, the FDA gave a green light to the Multidisciplinary Association for Psychedelic Studies to sponsor Phase 3 clinical trials for MDMA-assisted therapy, the last hurdle before approval. Monnica Williams, a Black clinical psychologist who is one of the foremost researchers in psychedelic-assisted therapy, led the first—and thus far the only—study focused solely on examining the healing possibilities of MDMA for people of color. “Because of the criminalization of all these substances and the fallout from the war on drugs, African-Americans face a lot of danger when it comes to using drugs or even talking about them in a way that isn’t true for white people,” Williams said in a 2019 interview, discussing the challenges of recruitment in clinical trials. “Black people have to be a lot more careful, and particularly those of us, for example, who are clinicians and are licensed.”

That remains true even as the laws around psychedelics are loosened. In 2019, Denver became the first US city to decriminalize psilocybin mushrooms, with Oakland, Santa Cruz, Seattle, and four cities in Massachusetts following soon after. Oregon decriminalized psilocybin and legalized its use in psychotherapy in 2020, and ayahuasca, mescaline, and psychedelic mushrooms were decriminalized in Washington, D.C., last year. But disproportionate criminalization remains. A 2020 study by the ACLU found that “in every state that has legalized or decriminalized marijuana possession, Black people are still more likely to be arrested for possession than white people.” The stigma attached to Black drug use under the War on Drugs also means that “whites have the privilege of publicizing psychedelic use with lesser consequences than minorities and therefore some participants may feel excluded from these experiences.” “For Black people, the punishment for using illicit substances is so much higher,” Sonya Faber, a clinical psychologist who has written about psychedelic-assisted therapy, told me. “So, culturally, we’ve been told to stay far away from those things, because you don’t get a second chance if you get in trouble with drugs.”

There’s also a long history of medical racism that contributes to Black hesitancy to get involved in psychedelic trials. “Often, just in trying to access health care, Black people are routinely met with bias,” Strauss told me. “And these same biases exist in mental health care.” Studies have found that Black folks in state psychiatric hospitals are nearly five times more likely to be diagnosed with schizophrenia than their white peers. They’re also given more antipsychotic drugs and in higher doses than white patients. The anxiety and depression caused by racial trauma, which creates its own post-traumatic stress disorder, as a study led by Williams found, can go unrecognized by clinicians who overemphasize psychotic symptoms. That’s particularly disheartening considering that a 2021 study led by Williams found that “people of color in North America report improvements in racial trauma and mental health symptoms following psychedelic experiences” and that “trauma-related symptoms linked to racist acts were lowered in the 30 days after an experience with either psilocybin, LSD or MDMA.”

Any legal use of those drugs will be tightly regulated. People who have a diagnosis of PTSD may get access, but the price is expected to be up to $15,000 per treatment round. Those who are insured may have that cost reduced. For others, the cost is prohibitively expensive. Kwasi Adusei, a psychiatric nurse practitioner and cofounder of Mindlumen, says he hopes there will be alternative ways of offering therapy to those who need it most.

“No matter how amazing these tools such as MDMA are, if we don’t deal with the issues of the system itself, all we do is widen health disparities,” Adusei told me. “For those who do want access to psychedelics, getting their way into clinical models is going to be really difficult unless you’re designing it for it. If you can design for the people who are the least able to access these services, you offer a system that’s accessible for literally everybody.”

“We’ve been told to stay away from [drugs], because you don’t get a second chance.”

—Sonya Faber, clinical psychologist

The architect: Project MK-Ultra head chemist Sidney Gottlieb.
Psychedelics

The brave new world of legalized psychedelics is already here—and so are the profiteers.

BY ZOE CORMIER

...
that’s how they’ve always operated,” says Dr. Eduardo Schenberg, a Brazilian neuroscientist. So we shouldn’t be surprised to see such strategies become commonplace with psychedelic start-ups, no matter how edgy their origins.

Many in the old vanguard—including some of those responsible for the very studies that newcomer start-ups are now monetizing—worry that traditional business strategies, driven by shareholder profits instead of patient needs, could jeopardize the future of the entire field. As an editorial published last month in the *Journal of the American Medical Association* bluntly put it, “The first wave of psychedelic research was disrupted by conflict between cultural and political forces. The current wave of psychedelic research could be susceptible to an emerging conflict between entrepreneurial enthusiasm and scientific deliberation.”

The roots of the psychedelic start-up boom can be found in the square 1950s, when LSD was legal and psychiatrists were free to explore its potential to treat alcoholism, depression, anxiety, and other afflictions. Long before it leaked from the lab and became a notorious party drug, psychiatrists were using acid not just to probe the mind but to attempt to heal it. Albert Hofmann, the Swiss chemist who first synthesized LSD while working at Sandoz Chemicals in 1943, believed it could revolutionize psychiatry and inspire a generation of artists and intellectuals.

Some of the early trials were promising. Consider, for instance, the studies carried out at the Weyburn Mental Hospital in Saskatchewan by Dr. Humphry Osmond—the British psychiatrist who gave mescaline to Aldous Huxley, inspiring the book *The Doors of Perception* (1954).

Osmond and other psychiatrists believed they could cure alcoholism by using LSD to induce the symptoms of delirium tremens, the shakes, seizures, and hallucinations that accompany alcohol withdrawal. Patients would be scared straight by the experience, they hoped. In fact, the opposite happened, though with the same intended outcome: Patients found their acid trips invigorating and rejuvenating, reducing their desire to drink and restoring their desire to live.

This echoed the way Hofmann himself described his first LSD experience: “A sensation of well-being and renewed life flowed through me,” he said.

Between 1954 and 1960, Osmond treated more than 2,000 problem drinkers with LSD at Weyburn. Over 40 percent of them were still sober a year later. Compare that with the 12-step program Alcoholics Anonymous, which (despite the myths) has a success rate of less than 8 percent.

Cary Grant—who took LSD more than 100 times to process his childhood trauma—may have put it best: The drug, he said, provided “an immeasurably beneficial cleansing.”

But the dream that LSD could revolutionize psychiatry fell apart in the 1960s with the counterculture explosion and its attendant backlash. Scientists, therapists, politicians, and parents were all alarmed. Hofmann—who was a great fan of LSD, enjoying it himself until the age of 96—despaired, calling the drug “my problem child.”

In 1971, as part of the Nixon administration’s War on Drugs—and on Black America and the counterculture—lawmakers in the US deemed LSD to have “no medical value” and shunted it into Schedule I of the Controlled Substances Act, the most restrictive category of drugs. Clinical studies evaporated. Therapists retreated into the shadows.

For decades, underground therapists, drug reform activists, and optimistic scientists quietly kept the flame alive, hoping one day to bring these drugs back into respectable research. Therapists treated clients in secret. Reformers slogged through bureaucratic paperwork. Scientists toiled over tiresome grant applications.

Now their efforts are finally bearing fruit. The reemergence of psychedelics into mainstream medicine is one of the biggest medical news stories of the past two years. Those who diligently worked for 50 years toward this goal are finally seeing their dreams realized.

Last April, a long-awaited trial from Imperial College London demonstrated that psilocybin is just as effective as escitalopram (better known as Lexapro) a common SSRI, at combating depression, with the results published in the world-renowned *New England Journal of Medicine*. Less than a month later, another long-anticipated study, examining how MDMA could aid in the treatment of post-traumatic stress disorder, was published by *Nature Medicine*. And in the past three years, Ann Arbor, Denver, Oakland, Washington D.C., and the entire state of Oregon have all voted to decriminalize psilocybin to lay the groundwork for legal therapeutic use.

Regulatory agencies have taken note. The Food and Drug Administration granted “breakthrough status” to psilocybin-assisted psychotherapy for “treatment resistant depression” in 2018, thus recognizing the treatment as a “substantial improvement” over conventional therapies. By treating depression with a completely new mechanism of action, psilocybin-assisted therapy has changed the playing field—and thus will be sped through regulatory hurdles for further study and eventual approval. MDMA-assisted therapy for PTSD has received the same status.


Rick Doblin, founder of the nonprofit Multidisciplinary Association for Psychedelic Studies (MAPS), has worked for decades to achieve such a breakthrough. And he’s not worried that we’ll see a backlash like we did in 1971.

“Society is in a fundamentally different place compared to 50 years ago,” he says. “Back then,
taking psychedelics meant you were against the war in Vietnam. Now we have bipartisan support from Republicans and Democrats for the treatment of veterans with MDMA for PTSD.”

Doblin points to Rick Perry, the former governor of Texas, and Jeff Shipley, an Iowa state representative, as two Republicans who have endorsed psychedelic therapy for traumatized soldiers.

**Psychedelics have long had the ability to be all things to all people:** therapeutic tools, creative lubricants, weapons of warfare. As psychedelic therapy pioneer Stan Grof put it, they are “non-specific amplifiers.”

As such, they have always attracted a wide range of fans, including the conservative and the powerful. In 1955, the straitlaced British politician Christopher Mayhew took mescaline as part of an experiment and had his experience filmed by the BBC. (Sadly, the episode never aired.)

And before the hippies got their hands on it, the US military and intelligence agencies had their own love affair with LSD, documented in delightful detail in Martin A. Lee and Bruce Shlain’s 1985 book *Acid Dreams.* At one point the CIA ordered 100 million doses of LSD directly from Sandoz Chemicals—enough for every citizen of the United States. The agency’s intention? Nobody knows.

However, we do know that thousands of CIA employees consented to being dosed with LSD in the 1950s to explore how the drug could be used as an interrogation tool, a torture aid, and an enemy “destabilizer.” As one employee put it, “surprise acid trips became an occupational hazard.” Yet despite dropping acid dozens or hundreds of times, these CIA employees remained committed to the military-industrial complex. So much for Leary’s claim that kids turned on to LSD “won’t fight your wars.”

If Leary had known his history, he would have been well aware that psychedelic use is by no means an impediment to violence. In the Middle Ages, when gearing up for raids, Scandinavian explorers would routinely gorge on *Amanita muscaria,* or fly agaric mushrooms.

In Central America, Mayan priests were high on a teonanacatl mushroom brew during the ritual sacrifice of hundreds of live victims, including infants. And throughout the Amazon, ayahuasca was used to aid in witchcraft, curses, and raids on neighboring villages. The modern era, too, has seen its fair share of psychedelic-dropping murderers and maniacs, the most famous being Charles Manson—but in recent years, plenty of others have come to light.

Now, with so much money on the table and breathless headlines celebrating psychedelics as miracle cures, the newcomers jumping into the industry are stranger and more diverse than ever before.

**“Fifty years ago, taking psychedelics meant you were against the war in Vietnam. Now we have bipartisan support from Republicans and Democrats.”**

—Rick Doblin

Silicon Valley has long been enamored with psychedelics and their counterculture origins. Tech CEOs love to cite Steve Jobs’s (dubious) quote that LSD was “one of the most important things” he’d ever done—and have long been fascinated by ayahuasca, summed up nicely in an *Onion* headline from 2016: “Ayahuasca Shaman Dreading Another Week of Guiding Tech CEOs to Spiritual Oneness.” For years, executives have come back from the jungle bearing tales of enlightenment—and plans to make a killing. A group called Entrepreneurs Awakening has provided psychedelic-assisted executive coaching since 2012—including a 10-week Amazon Ayahuasca Mastermind Retreat Program.

But you might be surprised to learn that mining companies are also getting in on the action. A four-part series published by the nonprofit organization Psymposia in 2020 documented the new wave of Canadian mining companies investing in psychedelics. Why these firms in particular? As Russell Hausfeld of Psymposia summarizes, “Canada has lots of failed mining companies littering its stock exchanges that are ripe for takeover.” For psychedelic enthusiast investors, acquiring a bankrupt or nonoperational mining company—which still exists as a legal entity—allows for instant access to the stock market and the ability to raise abundant funds without the scrutiny that an IPO would bring.

In this way, publicly traded psychedelic entities can appear instantly on the Toronto or Vancouver stock exchanges—even when the executives lack any experience with pharmaceuticals, psychedelics, or any other kind of drug.

Take Toronto’s Field Trip Psychedelics, created in a 2020 reverse takeover of the Canadian oil and gas company Newton Energy Corporation—and now worth close to $253 million.

Or consider Numinus Wellness Inc., a Vancouver psychedelic company with a market cap of $126 million created in a reverse takeover of the mineral exploration outfit Rojo Resources Ltd. Google Numinus and you’ll see it was ostensibly “founded” in 1964, long before serious corporations would go anywhere near psychedelics. Numinus is the first start-up to ink a deal with psychedelic institution MAPS, which was founded in 1986—decades before these new companies existed (and, indeed, years before many of their CEOs were born). But it probably won’t be the last.

The list goes on. The psychedelic start-up Mind Medicine—MindMed for short—grew out of a reverse takeover of the mineral exploration outfit Rojo Resources Ltd. Google MindMed and you’ll see it was ostensibly “founded” in 1964, long before serious corporations would go anywhere near psychedelics. MindMed is the first start-up to ink a deal with psychedelic institution MAPS, which was founded in 1986—decades before these new companies existed (and, indeed, years before many of their CEOs were born). But it probably won’t be the last.

The list goes on. The psychedelic start-up Mind Medicine—MindMed for short—grew out of a reverse takeover of Broadway Gold Mining Corp. NovaMind Ventures Inc. went public in a reverse takeover of Hinterland Metals Inc. And throughout the industry, executives who used to steer the direction of mineral extraction and other mining companies are now in high positions with some of the leading names in psychedelics.

Professional athletes, too, have been hopping on the
“Most of these companies are simply driven by commercial gain rather than the need to treat patients.”

—David Nutt

confirmed that psychedelics, which bind to the serotonin receptor—including psilocybin and DMT—can repair nerve endings.

Then there are the religious freedom advocates, who argue they deserve access to psychedelics as a First Amendment right—just as the União do Vegetal and Santo Daime churches in Brazil successfully argued for their right to use ayahuasca in the US.

Hankfully, some of the eccentric characters from the last psychedelic wave are still around. One of the most noteworthy is Amanda Feilding, Countess of Wemyss and March. Nearly 80 years old, Feilding lives in a Tudor manor in Oxforshire featuring three moats. Years before most VCs, tech bros, and financiers expressed any interest in psychedelics, Feilding supported research into the compounds with her charity the Beckley Foundation.

“But nobody wants to give me any credit, because I’m a woman, I’m old, I’m an aristocrat, and I’ve got a hole in my head,” she complained to me in 2015.

You read that correctly: Feilding has a hole in her head.

In 1966, Feilding was introduced to the ancient art of trepanation—the strange practice of boring holes into the skull that has cropped up in cultures across the globe, from China to Africa and Central America.

Feilding believed increasing blood flow to the brain by relieving the pressure of the skull would allow her to achieve a permanently enhanced state of consciousness. Unable to find a surgeon in London willing to perform the procedure, she did what any sensible person would: She did it to herself. With a dentist’s drill. On acid.

Unfazed, she then wrapped her head in a colorful scarf and headed to a party.

Effusive young millionaires hoping to cash in on the psychedelic boom might get more airtime with noisy press conferences about patent portfolios or stock market valuations, but none of those joiners can come close to matching Feilding’s contributions. She may have a hole in her head, but she deserves enormous credit for pouring large volumes of energy, blind faith, and—above all—raw cash into psychedelic research in an age when few others would fund or pursue it.

Feilding’s not the only one to see their contributions overshadowed now.

“You’ve got all these new companies that have been set up by people I’ve never heard of...people who have never done any research in this space until they saw psychedelics as vehicles for investment. And it does concern me,” complains David Nutt, the director of the Neuropsychopharmacology Unit in the Division of Brain Sciences at Imperial College London, who has partnered with Feilding and the Beckley Foundation for many years.

“Most of these companies are driven simply by commercial gain, rather than the need to treat patients,” Nutt says.

Psychedelic bandwagon. Some, including Mike Tyson, have vouched for the efficacy of psychedelics in treating traumatic brain injury. Predictably, the headlines tend to focus on celebrities like the tattooed boxer (who, let’s not forget, is also a convicted rapist). But the science behind his claim is solid. Many studies, such as one that appeared last year in the journal *Frontiers in Neuroscience*, have

when few others would fund or pursue it.

Karen Feilding (left) and her daughter in 2001.

Amanda Feilding and Rebekah Mercer, founders of the Beckley Foundation.

When I began researching the history of psychedelic therapy 10 years ago, it was hard to imagine that there had been a time, before the War on Drugs, when these molecules were seen as miracle cures and investigating them wasn’t considered career suicide.

Now every day a psychedelic start-up announces plans to “revolutionize health care”—backed by a war chest of millions (or billions) of dollars.

It’s widely acknowledged that many of these newcomers are in this only for the short term and will prove to be nothing more than old-fashioned pump-and-dump schemes. Given that the start-ups who bark the loudest on social media are also the youngest, this is easy to believe.

“They only exist to ride out the current boom without having any substantial concerns about the science,” Nutt says.

Still, the net worth of some of these companies is staggering, especially considering that they are marketing drugs that are still in the research stages and have not even passed clinical trials.

Take Toronto’s Cybin, worth an estimated $278 million. New York’s MindMed comes in at $924 million. GH Research in Dublin and Compass Pathways in London are valued at $1.3 billion each. And, of course, there’s Angermayer’s ATAI Life Sciences, at an eye-watering $1.9 billion.

Moreover, the provenance of that money has raised eyebrows. It comes not only from the predictable tech industry figures who have long touted the performance-enhancing virtues of “microdosing” (for which there is little evidence), but also, curiously, from figures on the far right.

Take Rebekah Mercer (whose family has financed Donald Trump, Steve Bannon, and Breitbart News), who donated $1 million to MAPS.

Or consider the billionaire Peter Thiel, who owns a 7.5 percent stake in the psilocybin giant Compass Pathways. Last November he casually plowed another $12 million into ATAI Life Sciences, keeping the German firm at the forefront of psychedelic start-ups. Thiel, to refresh your memory, founded not only PayPal but also Palantir, the data analytics firm responsible for facilitating the National Security Agency’s surveillance of the whole world and the separation of migrant children from their families at the Mexican border. Not exactly the guy you’d imagine selling shrooms.
Hippie paens to “mystical experiences,” “ecological empathy,” and “embracing oneness” have been supplanted by talk of “vertical integration,” “technology additions,” “target populations,” “evergreening,” “product hopping,” and “precision psychiatry.”

For those of us who have followed this field for many years, the whiplash can be severe. Ten years ago, scientists and activists who understood the power of these molecules struggled to have their voices heard. Now they’re being drowned out by the venture capitalists, the financiers, and all the other newcomers who see psychedelics as the next big market opportunity.

Any in the psychedelic scene find the injection of cash anathema to the ethos of psychedelic culture and worry about the new start-ups’ adopting the tactics of Big Pharma. Yet you’d struggle to find a scientist focused on psychedelics who hasn’t partnered with one of them. This includes Nutt, who has made his discomfort with “companies driven by commercial gain” clear. Widely seen as an elder statesman in the field, Nutt sits on the board of the controversial Compass Pathways (see “The Ceasefire,” page 28), his research heavily sponsored by Angermayer and Thiel.

Nutt defended his position to me three years ago for a short piece in Medium. “My view is straightforward,” he told me then. “Most of the people who will benefit from our research will never even have heard of Peter Thiel—they want a medicine that will help them when other medicines won’t. If, at present, the only way to get that medicine is through a for-profit company, then that is how it has to be. Maybe it’s not ideal, but we spent 50 years doing nothing, and it’s time we did something.”

Which is a fair point. It’s easy to understand why scientists opt to take the money—even if it comes from a character as ludicrous as the Bitcoin-loving Angermayer: These people have spent decades toiling with little funding, getting nowhere. Now they are being offered the kind of cash that can pay for expensive clinical trials and for the medical-grade psilocybin needed to conduct them.

“I don’t see this as a gravy train for neophytes involved in pharma,” Nutt says. “To be honest, I’d quite like to have Big Pharma involved, because then at least we would have good quality control on the compounds.”

But does the cash spoil the broth? Are profits being put above patient needs? Just about every financier in the rainbow of psychedelic start-ups will say the same thing: They want to provide essential life-changing remedies to those who need them while making a fair profit, and they have no desire to stifle healthy competition. But take a closer look, and the holes in that narrative soon start to appear.

Consider Universal Ibogaine, a Vancouver start-up looking to commercialize extracts from Tabernanthe iboga, a central African psychedelic shrub, to treat opioid addiction. Last year the company hired biochemist Rami Batal as its new CEO. Batal had previously worked for Purdue Pharma—the firm that created OxyContin, the drug that helped precipitate the opioid epidemic. Purdue pleaded guilty to criminal charges and will end up paying billions in fines. Yet in an interview with Proactive, Universal Ibogaine’s founder, Shayne Nyquvest, called Batal “the right person for the right job” because of his “pharmaceutical experience.” One could say that appointing an executive from Purdue to a top position with a start-up seeking to treat opioid addiction isn’t just giving the fox the keys to the henhouse; it’s handing the fox a fork and knife.

Batal has since been replaced—but the fact that he was appointed in the first place reveals much about Nyquvest’s business strategy.

And through casual slips of the tongue, many of the new breed of psychedelic capitalists seem to have shown their true colors. When MindMed went public on Nasdaq last April, its founder, J.R. Rahn, proudly proclaimed, “Forty percent of the country is suffering—that’s a big, big market.”

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In line with their embrace of big pharma’s exploitative ethos, psychedelic start-ups have eagerly adopted one of the industry’s most reliable tactics: aggressive patents. To lock out competitors and ensure exclusivity in the future, companies have been attempting to erect legal fences around new chemicals, new chemical formulations, and new applications (in layman’s terms: new drugs, new ways to make the drugs, and new ways to use the drugs).

In theory, patents provide an incentive to innovate. In reality, they often incentivize companies to concoct dubious excuses for laying exclusive claim to something they plainly didn’t invent. For instance, psilocybin, mescaline, and DMT are all found in nature—DMT is even found in the human body. None of them can be patented, and the patents on LSD’s chemical makeup expired in 1963. But a tiny modification—an extra hydrogen atom or carbonate group—to the molecular makeup of each is enough in the eyes of a patent office lawyer to stake a claim, even though new analogs rarely have new effects.

Every day, I receive a press release from some company announcing a patent for a new chemical tweak. To take just one example, MindMed recently saw its shares rise by 25 percent in a single day after patenting a “proprietary LSD analog.” It is also researching a combination of LSD and MDMA. Back in my day, we called this a “candy flip.” (If MindMed’s executives would like to pay royalties to my friends, I would be delighted to make an introduction.)

“Everyone is going for tiny changes in molecules, or tiny changes in formulation, because if they can get those approved through the FDA, then they have a regulatory shield around
they which keeps anyone from doing anything,” says Graham Pechenik, a patent attorney who founded the psychedelics IP firm Calyx Law and runs the Psilocybin Patent Tracker.

However, like most other sedatives, such as alcohol, morphine, and Valium, ketamine’s history of recreational abuse has demonstrated it is extremely addictive. Moreover it has an extremely high “tolerance profile”—meaning regular users require higher and higher doses to feel the same effect. Addicts have been known to snort five grams a day—or even 12.

When I arrived in the UK in 2003, ketamine was everywhere. Legal, cheap, weird, powerful, and quick (trips typically last less than 15 minutes), it was the drug of choice for people who wanted to get out of their heads without signing up for the nine hours you might need to devote to an acid trip.

Fans of the drug had to find out the hard way how addictive it was—and how caustic. Ketamine is profoundly corrosive, much more so than anything else you might shove up your nose, such as speed or cocaine. It has an unparalleled capacity to mangle septums, sinuses, and teeth.

Heavy and repeated use of ketamine can also lead to painful bladder inflammation. Dr. Celia Morgan, a psychologist at the University of Exeter, has worked with teenagers—teenagers—who required bladder transplants before they were old enough to vote. “This is now a huge problem in Taiwan, and we are still seeing bladder problems in the UK. I’ve seen 16-year-olds who are now infertile and wearing colostomy bags for the rest of their lives because of ketamine,” she says. “Yet I’ve spoken to people who run ketamine clinics in Canada who confidently tell me that ketamine addiction ‘isn’t a thing’ and they’ve ‘looked at it.’ It is definitely a thing, and people are minimizing the risks for corporate gain.”

Anyone who spent time in the UK’s festival or rave scene 15 years ago will recall the epidemic of ketamine addiction—in particular around 2007, when it could be found for £5 a gram. For me the ubiquity of ketamine’s wave of destruction is summed up in a remark by a friend: “It seems everyone in Bristol has to sit on a plastic doughnut these days” (because their nether regions were so inflamed.)

Now, in the US, an explosion of ketamine infusion clinics (complete with plush waiting rooms, fancy furniture—and soft cushions) are minimizing the risks for corporate gain.

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and “I Was Paralyzed by Severe Depression. Then Came Ketamine.” America is now home to at least 600 ketamine infusion clinics, with more popping up every month, led by the stock market darling Field Trip Psychedelics, which charges $750 for a two-and-a-half-hour personalized session (including the dose of ketamine plus “integration therapy”).

Why should a drug that has caused teenagers to lose their bladders be so enthusiastically promoted as a therapeutic treatment?

First, ketamine does indeed produce a “fast-acting antidepressant effect,” according to studies: People suffering from depression feel immediate relief, in striking contrast to SSRIs, which can take weeks to produce any effect (if they work at all). Second, ketamine is already legal in medical settings—unlike psilocybin or LSD, which are still ranked as Schedule I drugs. Combine these factors, and it is easy to understand why investors see ketamine—despite not being a true psychedelic and despite its addictive and corrosive qualities—as a low-hanging fruit.

But perhaps most important, America never experienced an explosion in ketamine addiction like the UK. Therapists in Canada and California I respect who endorse ketamine therapy have admitted to me that if they’d seen what we saw in Britain, they would view the drug differently.

Hence the proliferation of clinics.

And advertising. Take, for instance, the helpful billboard from the Charleston Ketamine Center in South Carolina shown on the opposite page. Who needs the messy data of peer-reviewed studies when handy diagrams like this can simplify the equation for us?

Not everyone charges $750, of course. In the free market of privatized American health care, competitors may reduce prices however they wish. The average clinic charges around $300 per treatment—but if you wish to pay less, you can.

Slashing prices, though, means cutting costs. And the easiest way to do that is to reduce therapy and counseling time—anything involving expensive, pesky humans. An abundance of ketamine clinics will welcome you through the doors, jack you full of horse tranquilizer for a couple hundred bucks, and send you on your merry way without any psychological support or even a cursory conversation. Assembly-line ketamine therapy, after all, produces the highest profits for the lowest operating costs.

The most appropriate descriptor I have heard for clinics that skimp on therapy while doling out the drug—“opium dens”—comes from Rafael Lancelotta, a PhD student and “somatic-focused, trauma-informed therapist” at Ohio State University, who previously worked at a private clinic in Colorado using ketamine and cannabis in combination with therapy.

And there’s the catch—which no clinic advertises: The antidepressant effects of ketamine do not last more than a few weeks—sometimes just a few days. A 2019 review of 14 independent studies found that “maximum efficacy [was] reached at 24 hrs. Its effect lasted for 1–2 weeks after infusion, but a longer-term effect is little reported.” More damning was a longitudinal follow-up study in the journal Molecular Psychiatry: “There is...little evidence of meaningful therapeutic benefit for most drug doses after day five.”

So you wind up right back where you started.

Do the math. What would happen if you had suffered from severe depression for decades, went to an upscale center for help, and after just one session experienced the kind of serenity and happiness you hadn’t felt for years—maybe ever? What would you do if that feeling evaporated a few weeks later? You’d want to feel it again. And if you wanted to dodge the scrutiny of the first clinic, you could easily find another. And then another.

If money were no object, you could visit a different clinic every week. And if money were an object, you might eventually figure out how to take the drug at home—by yourself.

In fact, you already can. Legally. Numerous start-ups currently provide ketamine therapy—mailed right to your door!

Mindbloom, for example, offers “breakthroughs that don’t cost the bank” at a starting price of “$99 per month” for six treatments. Key phrase: “per month.” Because the money isn’t in the cure; it’s in the treatment. Mindbloom is far from the only start-up that will deliver ketamine. My Ketamine Home and Nue Life will also mail you the drug. The two companies have much in common—including the same stock photo and design on their websites.

I wager these ketamine clinics will spawn the next wave of addiction in America. Today we’re calling it a wonder drug—in five years we’ll be calling it the next OxyContin.

As always, history is instructive. In 1895, Bayer marketed a “nonaddictive” opiate known as diamorphine, which it claimed did not have the potential for abuse and dependence that morphine did. Today we call it heroin. In the 1950s, “mother’s little helper” was marketed as a nonaddictive cure-all. Today, Valium and other benzos are renowned for their capacity to induce dependence. And, of course, OxyContin was aggressively marketed by Purdue Pharma as a “nonaddictive” painkiller—and we all know how that story played out.

This is not to deny that ketamine has a legitimate role: For people suffering from catastrophic depression, experiencing a relief from their psychic prison—call it heroin. In the 1950s, “mother’s little helper” was marketed as a nonaddictive cure-all. Today, Valium and other benzos are renowned for their capacity to induce dependence. And, of course, OxyContin was aggressively marketed by Purdue Pharma as a “nonaddictive” painkiller—and we all know how that story played out.

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focus primarily on the therapy, rather than adopt the pharmaceutical industry’s standard approach: viewing pills themselves as a cure.

Ketamine clinics exhibit many of the same problems we can expect to see with future clinics using legal psychedelics: risks insufficiently communicated, corners cut, therapy time reduced.

While skimping on therapy is the easiest way to cut costs (time with qualified professionals is expensive), the quality of the therapy is not just an important factor—it is the most important factor.

A curious thing happened after that groundbreaking psilocybin study was published in The New England Journal of Medicine last year. Even though the study showed psilocybin was as effective in treating depression as escitalopram, the results were profoundly disappointing to many in the psychedelic field. Some of the new startups even saw their stock values plummet.

This was because many had expected psilocybin to be phenomenally more effective than the boring old SSRI—not merely equally effective. Both groups of patients improved, whether they received psilocybin or escitalopram, but perhaps the most important factor was that both groups were given nearly 40 hours of psychotherapy—far more than a typical patient in a typical SSRI trial would receive. And certainly far more than the average person prescribed an SSRI would receive from their GP.

“The more I do this, the less I care about psychedelics, because I actually find their role to be rather small,” Lancelotta says. “Relationships—including the relationship you have with your therapist—are what heal you. Psychedelics are just tools that can help bridge connections.”

As for the startups, everyone in the old guard may take comfort from the fact that it’s quite likely many will go bust. And fast. Many of the new psychedelic capitalists will waste phenomenal amounts of money on pricey lawyers in drawn-out patent wars. But more crucially, they seem totally unprepared to deal with some of the challenges that psychedelics can present. Unlike with an SSRI or an antibiotic, the effects of psychedelics are unpredictable—a person can become angry, weepy, or, of course, psychotic. Without preparing adequately for bad trips and much worse, things could get very ugly for many of these inexperienced startups.

“Psychedelic therapy is not scalable by definition,” says Dr. Jack Allocca, a pharmacologist. “Injecting it into a scaled model, that of traditional capitalistic product development, in the long term is a death sentence…. Eventually, something truly catastrophic will happen—and somebody will have to pay the consequences.”

After 50 years of prohibition, some states are starting to challenge the federal government’s policy on psychedelic drugs.

**BY AIDA CHÁVEZ**

In November 2020, voters in Oregon passed a pair of historic drug policy ballot measures. The first was Measure 110, a proposal to decriminalize low-level drug possession, with 58 percent in favor; the second was Measure 109, a proposal to grant legal access to psilocybin (the psychoactive component in magic mushrooms) for mental health treatment, with 56 percent in favor. It was an unprecedented turn of events in drug policy. But as always in the United States, businessmen were waiting in the wings.

Compass Pathways, a biotech firm backed by the right-wing Silicon Valley billionaire Peter Thiel, had been preparing for a “psychedelic revolution” and the subsequent investor windfall, accumulating patents here and abroad for its synthesized formulation of psilocybin and its use in therapy. In a patent application the same year as the Oregon ballot, Compass Pathways filed claims for specific aspects of psychedelic therapy, including “the room is decorated using muted colors” and “the room comprises a bed or a couch.” The claims also included behaviors like holding hands, the therapist providing “reassuring physical contact,” and the use of breathing exercises. This attempt to commodify the basic elements of psychedelic therapy, or trip sitting, signals that psychedelics are the latest trend to catch Big Pharma’s eye.

Compass Pathways was cofounded by George Goldsmith and Ekaterina Malievskaia, a wealthy married couple. The London-based company started as a nonprofit but quietly transitioned to for-profit status in 2017, a move that was criticized by a number of experts and researchers in the psychedelic community, as Quartz reported in 2018. After building its business
of five years. With the science around psychedelics still evolving, Blumenauer said, casting such a broad net with patents intended to forestall competition “would be a tremendous step backward.”

The rise of Compass Pathways and other for-profit psychedelic therapy start-ups has raised questions about the future of the potentially life-saving treatment—as well as about the ethics of profiting off a mind-altering substance that humans have been using for centuries. Medicalizing psychedelics has played a crucial role in the effort to decriminalize and provide legal access to these drugs, but it brings its own set of contradictions and risks. Ismail Lourido Ali, the director of policy and advocacy for the Multidisciplinary Association for Psychedelic Studies (MAPS), a nonprofit research group, believes that the commercialization of psychedelics is a growing concern, “not necessarily just because of the companies involved, but because of the way that the US health care system is structured.”

America’s crackdown on psychedelic drugs and research began under President Richard Nixon as part of a deliberate strategy to win reelection and maintain political power through the repression of the urban poor. Nixon officially launched the War on Drugs at a press conference in June 1971, in a speech that marked the rise of the US police state and the modern era of violent drug policy. To fight “America’s public enemy No. 1,” the president said, the country would have to “wage a new, all-out offensive.” So he asked Congress for an additional $155 million—about $1 billion in today’s dollars—to do just that.

The Nixon administration’s anti-drug crusade destabilized entire communities and drastically altered the public perception of psychedelics, laying the groundwork for the decades of increased criminalization that followed. It was also a war on scientific research: The Controlled Substances Act of 1970 classified LSD, magic mushrooms, and other psychedelics under Schedule I, the most restricted category, prohibiting their use for any purpose. Legal restrictions at the national and international level led to ongoing scientific suppression. Research into the therapeutic potential of psychedelics was largely stalled, and only recently has it resumed.

In 2019, Denver became the first US city to effectively decriminalize psilocybin, with voters narrowly approving a ballot initiative to declare psychedelic mushrooms the city’s “lowest law enforcement priority.” Since then, the movement has picked up steam, with cities like Seattle, Oakland, Calif., and Washington, D.C., moving either to decriminalize or to deprioritize the enforcement of laws against their use. Oregon went even further, becoming the first state to legalize psilocybin therapy in November 2020. And legislators in Pennsylvania, Oklahoma, Virginia, and New Hampshire have filed similar bills.

At the national level, New York Representative Alexandria Ocasio-Cortez has twice offered an amendment to promote research into the use of psychedelics in the treatment of diseases like PTSD, depression, and addiction. When she first introduced the measure as a freshman lawmaker in 2019, some of her colleagues laughed at the idea, and it was defeated in a 331-91 vote. Ocasio-Cortez introduced the amendment again two years later; though it didn’t pass, it gained 49 additional supporters.

Blumenauer believes that Congress has been slow to catch up with local and state movements because people have only recently begun to rediscover the history and potential of these drugs. “The federal government’s frozen in time,” he said. “It’s incoherent and creating all sorts of problems, because they

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Breaking Off

My Chemical Romance

About 19 years ago, at the age of 21, Mark Horowitz was very unhappy. He was studying to be a psychiatrist, but he felt his life was falling apart. Horowitz went to a family doctor and asked for a prescription for antidepressants. “She gave it to me in about 30 seconds,” he said. He cycled through a few different ones, each with its own side effects, before settling on escitalopram, known in the United States as Lexapro, a selective serotonin reuptake inhibitor, or SSRI.

In medical school in Sydney, Australia, Horowitz had heard the gospel about antidepressants and believed in the drugs. “I thought, ‘This is going to be the answer,’” he told me. “I read things on the Internet, in textbooks. I thought, ‘This is going to solve it for me.’”

The escitalopram seemed to work, but shortly after starting the drug, he became chronically tired and was diagnosed with narcolepsy. The drowsiness prevented Horowitz from working full-time. It affected his relationships. Slowly he noticed that his memory and concentration had become worse too. By 2016 he’d been prescribed Ritalin to stay awake and zolpidem (also known as Ambien) on the theory that it would help improve his sleep at night, so he’d be less drowsy during the day.

In 2010, Horowitz took a break from his career to work on a PhD at the Institute of Psychiatry, Psychology, and Neuroscience in London. He was still taking the antidepressants,
and he was curious about how they were affecting him, so he focused his graduate school research on the neurobiology of depression. One day he came across an article on withdrawal from antidepressants. He’d never been told about withdrawal before, and as he continued studying antidepressants, his rosy view of them began to change.

So in 2015, Horowitz decided to come off the drugs, slowly. But when he got close to 0 milligrams, something in his brain chemistry shifted radically. “I’d get a couple of hours of very broken sleep,” he said, “and I would absolutely dread waking up, because I knew when I woke up, I would wake up to surging panic. I felt like I was on the edge of a cliff being chased by an animal.”

Horowitz felt so disabled by the withdrawal that he ended up moving back home to Sydney to live with his parents. “I was a 35-year-old male lying on my parents’ floor like a child, almost crying,” he recalled. He felt trapped. He knew getting back on the drugs would make his memory and sleep issues worse, but the withdrawal was unbearable.

Eventually he felt he had no choice but to resume their use. In 2018, he began tapering off the antidepressants again, this time even more slowly. He’s now in his third year of the taper. It’s tolerable, but still hard. Each time he reduces his dosage he has trouble concentrating, and sometimes he’s struck by the unsettling feeling that life isn’t real. “I find it very disturbing,” he said.

Horowitz’s experience sounded remarkably like that of others I talked to who’d been on antidepressants—and remarkably like my own. He went from being a true believer in the drugs to seeing the antidepressant industry as similar to Big Tobacco in its funding of research and academics who favor its profit margins. He’s more determined than ever to get off the drugs completely. “I hope whatever adverse effects I’ve had will fade away over time,” Horowitz said. “That’s what kind of drives me.”

It’s impossible to say how many people like Horowitz exist—people who once believed in SSRIs, or their close cousins the SNRIs (serotonin–norepinephrine reuptake inhibitors), as near-miracle-treatments for depression and have now changed their minds. But if you go by the hundreds of Facebook pages, Web forums, and subreddits dedicated to negative experiences with antidepressants, it becomes obvious that at least tens of thousands of people feel their lives have been negatively affected, or in some cases ruined, by the drugs. And those are just the ones who feel strongly enough to post about their experiences.

The field of psychiatry itself may be going through a similar reckoning. A wave of research suggests that the drugs are less effective and more dangerous than many previously believed. And some medical professionals are concluding what until recently felt too heretical to say out loud: Antidepressants may often cause more harm than good. They constitute some of the world’s most popular drugs—there were more Prozac prescriptions in 2019 than prescriptions for the antibiotic amoxicillin.

And yet we don’t know much about how they work, or even if they work for many of the people who take them. The theory that antidepressants correct a chemical imbalance of neurotransmitters like serotonin and norepinephrine is not a proven fact. Their basic functioning has not been definitively established. The story we all know is more marketing than science. And the incentive to find out whether they are indeed the best way to treat depression does not exist. In a world where so much scientific research is conducted by pharmaceutical companies and the entities they back, if drugs are making a profit, there’s little reason to question them.

**“I was a 35-year-old male lying on my parents’ floor like a child, almost crying.”**
—Mark Horowitz

P.E. Moskowitz runs Mental Health, a newsletter about capitalism and psychology, and is the author of the forthcoming Rabbit Hole, a reported memoir on drugs and American life.
I n 1998, Irving Kirsch, then a psychology professor at the University of Connecticut, and Guy Sapirstein, then a graduate student working with Kirsch, published one of the most controversial papers on antidepressants. Analyzing 19 studies that included 2,318 participants who were given either an active medication or an inactive placebo, Kirsch found that 75 percent of the effect of antidepressants could be attributed to the placebo effect. He concluded that the act of taking pills was more effective than the active ingredients in the pills and that much of the remaining 25 percent of effect could be attributed to the very knowledge you were on something at all—given antidepressants’ side effects, it can be easy for participants to know which side of the clinical trial they’re on and set their expectations accordingly.

Kirsch is not a fringe scientist. He’s the associate director of the Program in Placebo Studies at Harvard University, and he's published research on the placebo effect for many ailments, including back pain. The idea that the placebo effect is an important factor in pain relief (whether physical or mental) isn’t particularly controversial: A 2014 study, for example, found that a placebo was more than 50 percent as effective as real medication in reducing pain from a migraine.

But Kirsch’s research on antidepressants was attacked from every angle. People claimed the dataset he used was skewed and that his findings were warped to fit his biases. One response paper claimed Kirsch’s study used “a minuscule group of unrepresentative, inconsistently and erroneously selected articles arbitrarily analyzed by an obscure, misleading effect size” to reach its conclusions.

Kirsch responded at length to these arguments and kept researching antidepressants. He used the Freedom of Information Act to obtain the data from unpublished trials on antidepressants conducted by various drug companies. In a 2008 paper, he showed that nearly half of the studies the companies performed were never published and that the overwhelming majority of them found little to no effect for their SSRIs and SNRIs. In the resulting analysis, Kirsch revealed that when these studies were included, the placebo effect accounted for 82 percent of the response in trial participants.

Since then, some reanalyses have shown slightly better effects for antidepressants, and some agree with the conclusions of Kirsch’s original studies. But even the research that contradicts Kirsch shows nothing close to a cure for depression. A reanalysis of Kirsch’s data by two European researchers, for example, found a better efficacy for antidepressants, especially SNRIs, than he did. But several of the antidepressants still fell below the threshold of clinically significant improvement over a placebo. The question for some researchers is not whether antidepressants are an improvement over placebo but whether that improvement is large enough to clinically matter in patients’ lives. The strongest evidence for the beneficial effects of antidepressants applies to people with the most severe depression.

The main argument between pro-SSRI and anti-SSRI researchers is the cutoff for what is considered effective. Do a few points more on a scale that measures patients’ quality of life matter clinically? If so, what is the precise cutoff for “effective” versus “ineffective”? Researchers largely agree that antidepressants give a small bump on the standard Hamilton Depression
I was terrified. The thing I’d enjoyed most in life was deadened, and I felt robbed. I started reflecting on my experience taking Effexor. I weighed myself—I’d gained 25 pounds in a matter of months. I realized that I had begun to have less sex, and the sex I did have was less enjoyable. It took forever to orgasm, and even when I did, that, too, was a kind of muted experience. That foam padding had tamed my harshest anxieties, but it had also tamed everything else.

I swiftly tapered off the drug and felt fine, surprised that I had experienced virtually no withdrawal except for a few “brain zaps”—the bizarre feeling that your head has been hit by a tiny jolt of electricity, combined with the sense that you’ve jumped ahead in time by a millisecond.

And then, one day about four months after my taper, I woke up shaking, with a sense of impending doom like nothing I’d ever experienced. The best I’ve heard it described is by Andrew Solomon in his book Noonday Demon: It’s like the adrenaline rush of terror you feel when you trip while walking and realize what’s happened just before you hit the ground. It was like that. Every second. Twenty-four hours a day. For months. I got close to making plans to end my life.

Through therapy, I could grasp parts of what was causing my pain—but not all of it. What I was feeling was not a return of my depression and anxiety. It was something much, much worse.

Desperate for answers, I began searching online for camaraderie, and I found it on forums like Surviving Antidepressants. In post after post, people wrote about their withdrawal from antidepressants, an experience that made them suicidal or caused their limbs to shake uncontrollably. They described not being able to leave their bed. Even in bed, they detailed a hell much worse than the one they had been in before starting antidepressants. I was relieved, in part, to know I wasn’t alone. But mostly I was horrified that so many thousands of people could be going through so much pain. “I am so lost and feeling so hopeless,” one typical poster wrote after being put on several different antidepressants over a few years. “I have a 3-year-old and a job, and I feel like I am losing everything.”

It turns out that the side effects of antidepressants are much more common than I was told. In one study, 60 percent of people reported sexual dysfunction while taking them. And that feeling of deadening, the feeling that ruined my favorite music for me, was common enough to have a name: tardive dysphoria.

The critics of SSRIs and SNRIs have theories about why the effects of withdrawal can be so serious and long-lasting, namely that your body down-regulates its serotonin production once it
becomes accustomed to the drugs—and when you get off them, your brain doesn’t know how to recalibrate. The brain zaps, shaking limbs, and other physical symptoms suggest that a critical neurotransmitter like serotonin is not working as it’s supposed to. One study in rats treated with fluoxetine (brand name: Prozac) found that their serotonin receptors had become significantly less sensitive after a few weeks on the drug.

My mental breakdown was so severe and unrelenting that I gave up and went back on Effexor. Within a day of restarting, many of my withdrawal symptoms receded. I spent a few more months on the drug and then got off again, this time much more slowly, eventually switching to Prozac and then slowly tapering off that. It’s a process I learned not from doctors but from forum posters, who realized that Prozac takes longer than Effexor to leave your bloodstream and thus is easier to taper off from using. (The half-life of Effexor is just a few hours; the half-life of Prozac is several days.) The “Prozac bridge” worked, though I still sometimes feel not fully back to my old self, and I don’t know why.

I asked several scientists and psychiatrists I interviewed for this story whether my mental breakdown could be at least partially related to my antidepressant use. They said it was plausible, that they’d heard similar stories many times.

Studies show that over half of the people who quit taking SSRIs report withdrawal effects, and nearly half report them as severe. SSRIs have been shown to increase the risk of mania. Other studies have found an increased risk of heart conditions and death for those taking antidepressants.

Some of the researchers I spoke with pointed out that we have a much more balanced view of most other drugs. We know that benzodiazepines, for example, can be helpful for panic attacks, but we also know that they can worsen symptoms and that if people use them chronically, their brains adapt to them, leading to a terrible withdrawal. Why, it’s reasonable to ask, would antidepressants be any different?

Jessica Gonzales is stable and does not take antidepressants. This is, in many ways, a novel mental reality for the 36-year-old. In 2004, Gonzales went to college at the University of Southern California. She had just left a terrible relationship. Her parents had recently begun divorce proceedings. She was, by the most basic diagnostic criteria, depressed: She cried all the time; she couldn’t get out of bed.

She went to the school’s mental health center and saw a therapist and then a psychiatrist. Soon enough, she became one of the tens of millions of Americans to take an antidepressant. “I had no trepidations about going on them whatsoever,” Gonzales told me. “I was just like, ‘I feel like shit. Give them to me. I’ll do anything.’”

She tried several medications, including Zoloft. Then she switched to the SNRI duloxetine (brand name: Cymbalta). And for a while, she might have made a good candidate for an antidepressant commercial: The medication worked; she felt less depressed. She was majoring in psychology and learning the traditional chemical imbalance model of depression. These medications, she believed, helped correct that imbalance, and her life was proof of that. Gonzales stayed on the drugs for years.

Slowly, a slew of symptoms of something—though for the longest time she couldn’t figure out what—began creeping in. Years after starting antidepressants, Gonzales could no longer function without eight to 10 hours of sleep, plus a nap in the middle of the day. Her memory became unreliable—she’d blank on basic facts, like the street she lived on or her best friend’s name. She wanted to be an actor, but she couldn’t remember her lines.

Confused and frustrated, Gonzales saw doctor after doctor. They prescribed her other drugs—Wellbutrin (an atypical antidepressant that prevents the reuptake of dopamine instead of serotonin) and Adderall (a combination of amphetamines used to treat ADHD) to help with her constant tiredness. But by 2017, Gonzales felt inert—not like herself onstage or anywhere else. She wanted to get off the drugs, because she had nothing to lose. She wanted to remove any confounding variables and figure out what was wrong with her.

So in 2018, Gonzales began tapering off from her antidepressants. She would take two months to do so, at the advice of her doctor, who told her to drop her SNRI dosage by 25 percent every two weeks.

She soon began to suffer from terrible anxiety. Her stomach hurt. She experienced brain zaps. She began searching the Internet for answers and found thousands upon thousands of people who had experienced something similar. Most of them also said the only solution was to taper off the drugs, only much more slowly. So she slowed her taper. But things still got worse.

One night she woke up with stomach pain so intense she felt like she was being stabbed. She stood up and fainted. She came to, crawled to the kitchen, stood up to get water, and fainted again. Then she dragged herself to the bathroom and fainted a third time. She lay on the floor sobbing.

Gonzales had never experienced an episode like this until attempting to get off her medication. Her story mirrors many others heard by psychiatrists who specialize in antidepressant withdrawal.

It would take years for Gonzales to feel normal again. Even after the most acute pain went away, she felt overly sensitive to all stimuli. Her stomach hurt constantly. She still sometimes doesn’t feel fully like herself—mostly during bouts of insomnia and anxiety. “I think what I experienced during withdrawal is outside the scope of what a human is capable of feeling without chemical manipulation,” she told me. “Our language doesn’t have the words to describe it.”

Gonzales choked up as we talked. She said

“What I experienced during withdrawal is outside the scope of what a human can feel without chemical manipulation.”

—Jessica Gonzales
she used to feel angry—angry that no one was there to address the underlying reasons for her sadness when she was put on antidepressants, like her past relationships or her struggles during college. And she was angry because she believes that the drugs she thought were helping her had incapacitated her for many years instead.

“It’s like you’re in a car, and you have this ‘check engine’ light, because your car is about to fall apart,” she said. “And someone comes up and is like, ‘I have this great solution.’ And they just turn off the light. And meanwhile your car is smoking and on fire.”

The history of modern psychiatric medications—pills that are mass-produced and mass-marketed for mental health ailments—is a short one, and it’s largely a history of cycles of overenthusiasm followed by reckonings. As detailed in Anne Harrington’s Mind Fixers, in the early 1900s, the industrial chemical industry found that some synthetic fabric dyes could affect people’s bodies and minds. After a flurry of mergers between industrial companies and small-scale pharmacies, these new corporations began experimenting with psychiatric medications. In 1954, the FDA approved chlorpromazine, aka Thorazine, the first ever antipsychotic medication. Thorazine was a commercial hit, and new sedatives followed. By the end of the 1950s, another tranquilizer, meprobamate (marketed as Miltown), accounted for one in every three prescriptions in the US. The media hailed it as a wonder drug, capable of curing anxiety in anyone and everyone.

But then the backtracking began. The tranquilizers caused weight gain, involuntary limb movements, and facial tics. In 1961, it was estimated that nearly 40 percent of schizophrenia patients put on the tranquilizers suffered from these side effects. But mostly the drugs went out of fashion (though not completely; they’re still used today) because they were replaced with new drugs that were once again hailed as miracles. Benzodiazepines like Valium quickly outstripped sales of the older tranquilizers. These new drugs followed a similar path: Soon the media had sounded the alarm that benzos were highly addictive. By 1975, Valium was regulated by the FDA as a Schedule IV narcotic.

And that provided the opening for antidepressants—drugs that could treat the same ailments as benzos but without, at least theoretically, the side effects and physical dependence. The idea that depression and a host of other ailments were caused by a chemical imbalance that could be corrected by the drugs was in some ways a response to the PR crisis caused by the widespread addiction issues of benzodiazepines.

“The chemical imbalance theory is the pharmaceutical industry’s way of trying to revive the reputation of these drugs,” said Joanna Moncrieff, a British psychiatrist and a founder of the Critical Psychiatry Network, a group of psychiatrists and trainees who are skeptical of the mainstream narrative of chemical imbalance and chemical cure. “We have a disease-centered model of antidepressants, so we have this idea that they’re rectifying an underlying abnormality, and we don’t pay any attention to the psychoactive effects that they might have.”

Josef Witt-Doerring, a 31-year-old psychiatrist in Utah, was taught the same theory about antidepressants as most other med school students. He also worked for a year at the FDA as a medical officer, where he saw how psychiatric medications were approved and the challenges regulators faced in detecting any adverse drug reactions. “Most people think that medications that are FDA-approved [are] free from life-altering adverse reactions. That’s not true,” he told me. “Serious problems can be missed for years, especially if they’re subtle or could conceivably be attributed to the condition the drug treats.”

Witt-Doerring received virtually no training in medical school on the possible adverse reactions to psychiatric drugs, and so he began doing his own research on SSRIs and other medications after stumbling upon Anatomy of an Epidemic, a popular book critical of SSRIs. He came to believe that many of the problems he was seeing in patients—everything from suicidality to sexual dysfunction to tinnitus—were actually caused by the drugs used to treat them. “So many of the patients I’d see would be on four or five psychiatric medications,” he told me. “Once you start being prepared to say, ‘Maybe one of these drugs is actually making people worse,’ you start asking a lot of questions…and then you begin to notice patterns.”

Witt-Doerring also had more and more patients who wanted to get off psychiatric medications, including antidepressants. Helping them to do so and then manage the adverse effects now accounts for about 75 percent of his practice. He still prescribes SSRIs, but only after carefully informing his patients of the possible benefits and drawbacks. “I find it very difficult to prescribe them,” he said. “It’s a very serious decision for me.”

(continued on page 49)
As white businesses flood the legal weed market, what happens to all the Black faces that once made the industry hum—and suffered for it?
I'm a Black high school student who goes to Brooklyn Tech. I'm from Harlem. School is interesting, with lots of different people from what I'm used to. I found a group of guys I think are my friends. We smoke at Fort Greene Park after school. I started selling weed when a white lady said we smelled good and was wondering if any of us could supply her with some. Now I buy a dub uptown to smoke half and sell the other half for a dub at school. I've never had my own money, so it's cool.

I'm a Black twentysomething from the Bay in Cali. Being an actor on Broadway is what motivated me to move to New York City. I'm taking free acting gigs but hopefully I'll get lucky and find one paying on Craigslist. It's hard to be in the city alone, but I am gaining a network and found some people I can actually kick ends meet and meet new people. It's scary, but I have to live my dream.

All my life, I've seen black faces making my city move like the people flickering past on a subway as it leaves the station. The bustling at the surface rides the undercurrent of the hustle right below it. Taking the 3 train from Rockaway Avenue to my first job, I'd watch all these black people huddle, the look of the grind on their faces. I'd wonder where all of us would get off and what we'd do, no doubt in the posture of service. As we slid toward Manhattan, the car would begin to empty—a track worker at Atlantic Avenue, a 911 operator at Nevins Street, a nurse at Borough Hall, a janitor at Wall Street, a barista at 34th Street. I got off at 42nd Street—security guard.

As we scrambled to make our way in the city, many of us did other jobs too. On the books, off the books, some legal, some not, but no less legitimate for it. These jobs weren't just the ones that white people didn't want; they were the ones that white people had deemed illegal but whose benefits they were still happy to reap. You know the ones I'm talking about. They took different forms for different people, but for me, it always meant cannabis.

Weed has always been the purest of passions for me. It's been different things at different junctures in my life—hobby, vocation, income—but it has always been my thing. In high school, I smoked with my buddy in Fort Greene Park. I met my first “Cali connect” answering a Craigslist ad. As far back as the early aughts, I remember taking the two-hour trips from Brownsville, deep in Brooklyn, up to Audubon Avenue in Washington Heights at the tip of Manhattan. At that time, Dominicans up there had the best haze in the city. The long trips didn’t stop there. I covered the country, and sometimes beyond, always in my search for the best.

Still, pure as my passion was, the fact of weed’s black-market status followed me. While anyone who spends time in a criminalized world faces some danger, that danger has always been magnified for Black people, warped out of all proportion by the racism of the American justice system. From the anti-“marihuana” craze of the 1930s to the brutality of the War on Drugs, Black and Afro-Latinx people have been harassed, frisked, arrested, and jailed for their association with cannabis. In my own home city, Black people have been arrested for low-level marijuana offenses at eight times the rate of their white counterparts.

At long last, however, some of that has begun to change as the call for legalization has grown from a rising chorus, lifted up largely by Black voices, to something big and loud and national. Marijuana distribution and use are now, for the most part, considered to be innocuous. Plenty would say that weed is a net-positive consumer product, economically and socially. It has long been a powerful medicine, and it is relatively safe compared with other recreational narcotics. It should be legal—legal to use, grow, and sell—and, slowly, that’s what’s happening.

Thirty-seven states have now approved the use of marijuana for medical purposes, and 18 of these states—from California to Maine, as well as Guam and Washington, D.C.—have legalized marijuana completely. Last year, New York State made marijuana legal for adults over 21, throwing open the gates to what could become a $4.2 billion industry. There’s even been movement at the federal level: In 2020, the House of Representatives passed legislation that would remove marijuana from the Controlled Substances Act.

But as legalization takes place, the makeup of the industry has begun shifting, from a majority Black and Afro-Latinx space—direct to consumer, mass distribution, mom-and-pop shops, and everything downstream from production—to an almost entirely white enterprise. “Legal Cannabis Is Almost Entirely White,” blared a headline in Forbes, and they weren’t exaggerating. When I go to Colorado and Washington, always in my search for the best, it is white faces I see in dispensary after dispensary.

So where do all those Black and Afro-Latinx faces go? The cannabis market has supported the economic well-being of families, neighborhoods, and small businesses. Numerous informal mom-and-pop cannabis shops already exist, and in some states have been serving marijuana smokers with great care and safety. A significant number of these small businesses can be found in Black and Afro-Latinx communities. If nothing changes, those communities face two scenarios, neither of them happy: They risk losing an important source of income as an entire economy shifts into the hands of a predominantly white ownership and white workforce, or they risk getting stuck in a parallel unlicensed

The cannabis market has supported the economic well-being of families, neighborhoods, and small businesses.

Tavian Cresland is an anti-racist thinker, creator, and cannabis consultant from Brooklyn.
Almost all the people I came across weren’t looking to be drug kingpins. If anything, they were just doing capitalism to make ends meet.

We know our local markets better than anyone and have the user base. And when the time comes that cannabis is legal federally, there is an existing national distribution network poised to help grow the sector. The new titans of the industry might think they can forge ahead without this knowledge, but what will be lost in the process? What will the industry be without us?

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I’m a Black queer woman from New Orleans. My soul moves with the ease of the South, but my heart keeps firing like the high bats of a trap beat. I love music. I love the scene—jamming, writing, working with all the other brilliant artists—and so I have to make a space in this city. Music is a grind, so I’m grinding. I like to curate an experience. Have only the finest and some flare: packaging, marketing, parties, and performance. Build a brand and don’t compromise the product, damn the numbers. I can’t help but create. Weed has been a way for me to reach and teach in the spaces I need to be.

Here are a host of reasons why someone participated in the legacy cannabis market. I can only speak from my experience, but almost all the people I came across weren’t looking to be drug kingpins. If anything, they were just doing capitalism to make ends meet. I think about my homie girl who moved here from the South, following her passion for music, or an elder I know who fell victim to the criminal justice system when he was younger for “trafficking” weed. He’s free now and making a life for himself, but there isn’t a great pension plan for an ex-con, so he does what he knows.

As for me, my reasons have changed over the years, shifting as I’ve matured. Today I work 9 to 5, 40 hours a week. I’m a dad or a personal assistant. My son’s itinerary dictates my time more than my own—as my wife she pencils in our next date night. Cannabis is still a passion as well as a vice. It’s also a meditation, a medicine, and a habit.

I know what cannabis has meant to me, meant to my friends, but unfortunately, there’s not a lot of good data to validate our years in the industry—the families supported, rents paid, communities sustained. Since the cannabis market has long been an informal one, it has been hard to accurately depict consumption and expenditures compared with a regulated substance like alcohol, and all the more so in the case of Black and Afro-Latinx communities. Nonetheless, research done by the RAND Corporation found that the black market for cannabis generated some $40.6 billion in 2010. That’s just an estimate, and it comes from more than a decade ago, but it gets the message across:

Marijuana is big money.

And it’s getting bigger. Nearly a decade after Colorado and Washington became the first two states to give their blessing to recreational marijuana, the country is in the grips of a full-blown green rush. Today, cannabis is one of the fastest-growing industries in the country, with a robust job market. By the end of 2021, it employed some 428,000 people full-time. And the economic churn of all this newly legal labor is impressive, reaching $25 billion in sales last year. By 2028, the legal marijuana market is projected to pull in $70.6 billion, according to Grand View Research.

My friends, my community, should be able to access some of this abundance, but getting in on the green rush isn’t easy. Sure, we’ve kept the industry spinning for years, but most of us don’t have the credentials or resources to navigate the onerous licensing process. Plus it’s expensive—more expensive than many mom-and-pop entrepreneurs can afford—and thanks to our long exclusion from the banking system, most of us can’t access the financial institutions that guard the capital that could help us get our businesses going.

And so, as I look at this vast new landscape—one that is increasingly populated by a new breed of Big Weed bros—I have to wonder: Where do I fit in? I have dreams of starting my own business, but the oddsmakers will tell you that the number of Black-owned legal cannabis businesses is blindingly small. In 2017, a survey by Marijuana Business Daily found that only 4.3 percent of legal marijuana business owners were Black, while 81 percent were white, with the remaining 15 percent Hispanic, Asian, or other (and yeah, Marijuana Business Daily thought these figures weren’t actually that bad). More recently, Leafly, an online cannabis marketplace with a research wing, put the number of Black-owned legal cannabis companies at 2 percent.

So, after all this time—at all the dangers faced, the lives ruined—is this what our brave new cannabis world will look like?

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I’m a Black man. I’ve been out for two years now. Met the love of my life. I’m so thankful for love and freedom. I went up on weed charges. Possession with the intent to sell. Sentenced to seven years. Crazy. Could have made more money selling crack for all that time. I got out with no skills, no education, and no pathway to being a law-abiding citizen. So I made the only way I knew how. That put me back in...
Life is good now, though. I'm over 60 and creating the best life I could have imagined from my bunk bed those years ago. I still make weed deliveries for this young cat who has a hyper-focused business mind. I'm hoping to save some money to actually own my own home. Who'd have thunk it? I knew the risk, but my life opportunities were limited from the day I got locked for an ounce of weed.

Let's talk, for a moment, about the dangers faced by Black people in the weed industry. As I said, weed has been different things to me at different points in my life, and from my various perches, I've witnessed all the moving parts of the underground marijuana industry in the US and even abroad.

Two years ago, I went to Barcelona. I’d heard good things about the city’s cannabis clubs, so I was eager to see how their weed stacked up. But it didn’t take long for me to spot a familiar sight in a bower-like open-air eatery: a Black dude saying, “Coffee shop! Coffee shop!” It took me right back to my old neighborhood, seeing a Black dude serenading the block with “Sour! Sour!” The only difference was this Black man was African, not African American. As I phased back into the present, I thought about how familiar this encounter was. In Barcelona, I saw a Black man doing the same job as us: the one with the risk.

Throughout the history of the modern weed industry, Black and Afro-Latinx men have been relegated to the most unsavory assignments, and often suffered the consequences. Although Black and white people use cannabis at nearly identical rates, a recent ACLU study for the years 2010 to 2018 found that Black people were 3.64 times more likely to be arrested for marijuana than white people—and that in one Georgia county, Black people were almost 100 times more likely to be arrested than their white peers.

The Black community didn’t need these studies to tell us that we’ve had a target on our backs. The long arm of the law has always been reaching for us. In contrast, the white people I knew in the industry had it easier. In my experience, it was mostly white men who grew marijuana, and this labor was not assigned the same criminality as trafficking or selling a dime bag. In the regions where marijuana was grown domestically, like Northern California, law enforcement would let producers cut their crop and just wave a finger, according to the stories I heard. Even white dealers have not incurred the same systemic risk as Black dealers. I knew them too: a laid-back Jewish skateboarder kid—he would kick and push from Midtown to downtown in the city; a cool-ass white girl born and raised in the East Village—he hustled out of her apartment right across the street from a police precinct; a part-time model living in the West Village—he would stroll around with his gym bag filled with pounds of marijuana and not a care in the world. Their lives were different.

A few years ago, I was walking up Eighth Avenue in Midtown when suddenly I was stopped by the police for “fitting the description” of some suspect. I asked what the description was and learned that not only was I wearing a different-colored shirt but also different-colored jeans from the person they were hunting. I didn’t “fit” the description. I protested the stop and was allowed to go. But being let off does not lessen the indignity of a stop-and-frisk or ease the constant fear Black and Afro-Latinx people suffer because of law enforcement. According to the US Sentencing Commission, 84 percent of the more than 2,000 cannabis offenders federally sentenced in 2018 were Black or Afro-Latinx. In contrast, only 11 percent were white. Yeah, those white dealers’ lives were different.

I am a Black man with 25 years of experience in the legacy market and no “credentials” to speak of. With the passage of cannabis legalization in my hometown, I want to make the most of my passion and expertise, but I can’t simply update my résumé. There is no way for me to own my knowledge. My 25 years were spent under the enormous pressure of the law and the streets. I’ve been held at gunpoint by the police and by another Black person just trying to get ahead. All these years later, having my own business is a dream—but it’s so much more than that. It’s a chance to right the multiple wrongs of the “War on Drugs.”

By now it’s obvious that we’re still a long way from the golden age of cannabis so many of us have dreamed of. But there is a way to get there, an alternative approach that recognizes that legalization isn’t just about chic dispensaries and legal highs; it’s about restitution—about recognizing the long history of Black and Afro-Latinx people in the cannabis trade and the steep price we’ve paid.

So far, we’re not seeing a ton of this, but in an attempt to right old wrongs, a number of legislatures have started creating “social equity” programs that, among other things, set aside a certain number of licenses for “marginalized” communities. In California, a number of cities and counties have launched such programs, funded with grants from the state. New Jersey has created “impact zones.” New York has gone biggest of all, with a goal of allocating 50 percent of cannabis licenses to social equity applicants—“minorities,” women, disabled veterans, financially strapped farmers—while reinvesting 40 percent of the tax revenue in communities most harmed by the War on Drugs. It’s also tried to structure the process to avoid the kind of corporate infiltration that’s squashed mom-and-pop ventures in other states.

This all sounds nice, but beyond the fact that these kinds
of efforts are far from universal, there's a big difference between talking a good equity game and playing one, and early reports suggest there's a lot more talk than action. In California, the Los Angeles Times recently reported, "a lack of funding, shifting requirements and severe delays in processing applications" have stalled equity efforts, "often creating additional hardships and roadblocks instead of removing them." In Colorado, the head of the Black Cannabis Equity Initiative recently accused the state of creating a program that's "only really helping white people qualify." As for New York, it's starting strong, with Governor Kathy Hochul recently announcing that the first 100 licenses will go to applicants who've been convicted of a marijuana-related offense or whose relatives have. But even so, I've got my concerns.

For instance, who will make sure the state doesn't stop at those first 100 licenses? Who will make sure the very idea of a "social equity" applicant isn't diluted to mean any "minority," regardless of how seriously their community was targeted? Who will insist that Black and Afro-Latinx communities are made whole?

A few months back, I attended a webinar for cannabis entrepreneurs hoping to get a license in the state. The seminar, which was hosted by a new-business incubator in partnership with a university, focused on best practices for fundraising and financing. It offered some great information and expertise. But as I listened to the experts—all white, all from the legally existing cannabis market—I wondered if this was a sign of what "equity and inclusion" would look like in New York. Here were a bunch of well-positioned white folks, split-screened on my tablet, all of whom had stepped out of other fields into the legal cannabis market with absolutely no cannabis experience. Each introduction went something like this: "So you were a successful [input white-collar occupation] and you risked it all to go into legal cannabis. What made you want to do it?" The answer: They were able to parlay their "credentials" as doctors, venture capitalists, or CPAs to capture highly competitive licenses or cannabis industry dollars.

Then there was me, the social equity applicant. I've lived the War on Drugs; I've earned my stripes in the cannabis field. I don't know precisely how New York can achieve the equity goals it's set—or even better, blast past them—but I do know this: The North Star is economic justice. Economic justice for the Black and Afro-Latinx communities that were the chief casualties of the War on Drugs. We should not overlook the wealth that could be generated by the marijuana industry. We should also acknowledge that this industry has not appeared as a result of innovation, as the dot-com sector did. If we want to claim to be making progress, then we need to take this opportunity to build wealth in long-targeted communities. We need to do the action of anti-racism instead of reproducing anti-Blackness. This would be poetic in its justice. If this makes you uncomfortable... think of your weed guy.
Imagining the ecstatic past:
A modern artist’s vision of antiquity’s waking dreams and psychedelic imagery.
Ecstatic experience was a complex phenomenon, assiduously managed and commemorated, that held societies together.

Perishable; organic substances tend to be ephemeral; finds illicitly dug up have lost their contexts, while others await archaeological recovery in as yet unexcavated sites.

Thus we cannot, and should not, expect the world of the distant past to give us an abundance of unambiguous proof for widespread or ritual drug use. Such headline discoveries as the cannabis and frankincense burned on an eighth-century BCE altar in Israel are few and far between. What we can do is lift our eyes from the narrow lens of canonical texts and major monuments to consider the cumulative knowledge gleaned from the widest possible range of information—from archaeobotanical analyses to ethnoarchaeological work with living populations. In addition, cross-cultural and cross-temporal triangulation is invaluable for interpreting what makes the most likely sense for the phenomena we study, or for changing our minds when new data surface.

Take, for example, two recent revelations about opium. It’s been recognized for a while that certain archaeobotanical Cyprid juglets of the mid–second millennium BCE bear a striking resemblance to the poppy’s seed pod. Are these vessels the earliest containers designed to advertise their contents? Did they actually hold opium? Successive residue analyses performed on unsealed juglets were inconclusive and cast doubt on the theory. Then researchers at the British Museum and the University of York tested a sealed vessel—and there the opium alkaloids were.

So 3,500 years ago in the eastern Mediterranean, savvy opium traders thought about product marketing in a way that seems modern (or should we say timeless?) in its approach.

From ancient Afghanistan comes fresh insight into the opium trade’s stakeholders there. In the heart of the Bactrian kingdom of the late first millennium BCE to the early first millennium CE, a Soviet-Afghan archaeological team in the late 1970s found six intact tombs at the site of Tillya Tepe. Their treasures, caught up in decades of war and occupation, have recently received renewed scholarly attention. We now see that many of the gold and turquoise ornaments worn by the elite women in four of the tombs have motifs of poppy flowers and seed pods, whose gold granulation evokes the bead-like appearance of raw opium droplets, oozing out after harvesters have scored the pods. Since neither the warrior nor the very young woman buried in the other two tombs had any such ornaments, there is good reason to think that these notable women were prominent in the opium business, part of a long history of women entrepreneurs in other spheres, stretching back at least to third-millennium Mesopotamia.

A few years ago, it occurred to the three of us that it was time to try to put these and other puzzle pieces together to create a holistic picture, organized thematically across time and space. The resulting volume of essays, Ecstatic Experience in the Ancient World, presents for the first time cutting-edge research on what psychoactive substances were used in antiquity, how drugs and ecstatic experience related to the numinous, and what their presence signifies in specific settings. What emerges is an overwhelming sense of the centrality of ecstatic experience for ancient peoples and cultures. This was not the stuff of marginal groups, foreign migrants, or subversive elements, nor of random consumption, haphazard activity, or spontaneous experience. Rather, it was a complex phenomenon, assiduously managed and commemorated, that held societies together, defined their distinctive shared traits, and melded the individual and the collective into a coherent whole.

Over the millennia, people throughout the ancient world came to recognize that certain plants had desirable culinary or healing properties and could usher their consumers into altered states of consciousness. Archaeobotanical remains, magico-medical texts, visual records, and ethnobotanical observations point to the widespread awareness and use of opium, cannabis, saffron, fly agaric mushrooms, henbane, harmala, mandrake, coriander, danel and, and ephedra, among other plants.

To cite one example, the saffron crocus was particularly meaningful on the Aegean island of Thera (modern-day Santorini). In the wall paintings preserved in a building buried by the island’s cataclysmic volcanic eruption in the mid–second millennium BCE, we see women in crocus-adorned finery gathering the blossoms in baskets. A bejeweled woman presides on a dais, attended by a monkey and a leashed Griffin (a raptor-headed, winged lion). On the level above are psychedelic murals of dizzying red and blue spirals, rosettes, and lozenges, while elsewhere in the building monkeys play musical instruments, a woman self-mortifies, and nude males bear vessels, to describe just some of the images.

Saffron, a mind-altering neurotoxin if taken in quantity or used in conjunction with psychedelic and other sensory stimuli, could certainly have produced the dramatic hallucinations depicted in this building’s art and architecture. The small red and blue shapes painted in the whites of both female and male eyes likely give further signs of their altered states. In addition, as a labor-intensive crop, saffron must have commanded as high a price then as it does today, doubtless accounting for its major role in Thera’s economic, social, and ritual life. Again, women seem to have been prime movers in the entire venture.

The heirloom marble bowl found in this particular Thera building may well have contained a psychoactive potion, as perhaps did the vessels the nude males bring. In the ancient Mediterranean and the Middle East, wines, beers, and grogs provided an agreeable liquid in which to dissolve the active ingredients of psychotropic substances, to describe just some of the images.
plants. They also, of course, had their own intoxicating properties, vividly described in drinking songs, mythological tales, and other literature. Numerous cuneiform texts from Mesopotamia document every process in the manufacture of these beverages, keeping scrupulous track of the amounts of materials used and produced. Residue analyses have yielded traces of alcoholic drinks in presses, vats, and cups, many of them linked to burial and sanctuary rituals as far back as 13,000 years ago. Periodically, experimental archaeology tries its hand at re-creating these beverages, based on their chemical signatures.

A motif commonly seen in the seal art of greater Mesopotamia is the so-called banquet, in which attendees sit side by side or facing each other, sipping liquids through long tubes. While this may have aided in filtering impurities, it is also likely that the practice accelerated and intensified intoxication and other effects. The absence of feasting in these scenes suggests that they show funerary or sacrificial drinking rites, attested archaeologically by the assemblages of cups and flasks found in graves and temples.

A gold version of one of these drinking tubes, conveniently bent at one end, was found among the wealth of goods recovered from the mid-third millennium BCE tomb of Puabi at Ur in southern Iraq. Perhaps a queen or high priestess, Puabi and several of the other notables buried in the cemetery were accompanied by scores of retainers. Precisely how these courtiers died en masse is uncertain. Later Mesopotamian texts document the preparation of psychoactive plants for narcotic or lethal purposes, so it is possible these people were drugged before meeting their deaths.

While at Ur these substances may have been part of state funerary practices, elsewhere they frequently promoted political, religious, and social agendas for the living. A splendid example of this comes from a cuneiform tablet of the early 18th century BCE found in the archives of the palace at Mari, located on the Euphrates in present-day Syria. The text gives a rare full account of a royal and community ritual in honor of Ishtar, the principal goddess in the Mesopotamian pantheon, who was responsible for the investiture of the king at Mari, among her other offices.

The ritual began in the evening, with the king spending the night in Ishtar’s bed in her temple. The next day, her statue was set up outside, along with those of minor deities and divine emblems, all flashing in the sun. The king made his entrance, magnificently attired, and was seated on a special throne. Hours of chanting, music, and performances of strength and skill ensued in a prescribed sequence. For participants and audience alike, the experience was a multimedia spectacle, arousing highly charged states of mind and body, and surely enhanced by the consumption of psychoactive substances. At the ritual’s conclusion, Ishtar was gratified and the religio-political compact renewed, with the king acknowledged as the divinely sanctioned intermediary between the goddess and his subjects.

At one point, there appeared an “ecstatic” or “prophet.” Such individuals, both men and women, while they were in an altered state of consciousness (or, as the Mesopotamians termed it, “not in equilibrium”), uttered “the speech of the gods,” often concerning the personal welfare of the king and the security of his government. The cuneiform tablets found in the Mari archives record many of these speeches verbatim, together with remarks on the ecstatics’ behavior. How they entered an altered state is not specified. Suggestively, though, several texts describe giving a beverage of some sort to men and women referred to as “answerers,” who were then asked questions of a political nature, to which they were to reply with a simple yes or no. Presumably this drink contained psychoactive substances, perhaps mixed with wine, as Mari was a key center in the wine trade.

We find no ancient evidence for hostility or stigmatization. Instead, drug use seems to have been an integral feature of community life, as well as an accepted way, on occasion, for some to shed societal constraints. By the same token, it seems clear that the principal and most significant use was in carefully orchestrated constellations of events and purposes, typified in the vignettes we’ve given here.

As for our skeptical colleagues, we would encourage them to start looking beyond the usual suspects to see in past Western civilizations an ancient world diverse in its beliefs, elastic in its practices, and exuberant in its celebrations of the human mind and spirit. We see no need to abandon the rationalist (continued on page 49)
By the Boatload

How the Netherlands became the epicenter of the world’s cocaine trade.

BY JESSICA LOUDIS
In February 2021, customs authorities at the port of Hamburg, Germany, received a tip from colleagues in the Netherlands about a container ship that had recently arrived from Paraguay on a stopover to Amsterdam. With flights grounded because of the pandemic and maritime supply chains backlogged for months, ports around the world were already dealing with unprecedented logistical challenges. In northern Europe, however, they were also under another kind of pressure. In less than a decade, cocaine seizures in the major Baltic ports had gone from being an occasional problem to a frequent phenomenon. When Hamburg officials inspected the Paraguayan containers, which were reported to hold more than 1,700 tons of construction putty, they stumbled upon 17.6 metric tons of cocaine. (By comparison, all the cocaine intercepted either in or en route to Europe in 2020 amounted to just over 100 tons. And in 2021, the US Border Patrol seized about 44 tons.) After Belgian authorities were notified that the same company had another shipment headed to Antwerp, police there found an additional 7.2 tons, bringing the total to 23 tons—the largest cocaine seizure in European history.

While the scale of the discovery was shocking, the fact of it was not. The number of cocaine seizures in Europe has been rising steadily, quadrupling between 2009 and 2019. With these hauls representing a fraction of what is actually being trafficked, Europe has become the “epicenter of the global cocaine trade,” in the words of the investigative nonprofit InSight Crime. Most of these shipments go through Antwerp and Rotterdam, the Netherlands, which boast two of the continent’s largest ports. (Antwerp became the main cocaine hub after Rotterdam started tightening security, but an estimated 80 percent of Belgium-bound cocaine still ends up in the hands of Dutch traffickers.) For criminal groups, the ports’ world-class transportation infrastructure makes servicing the nearly 500-million-person European Union market as convenient for them as app-based delivery services are for their customers.

In the Netherlands, the surge in trafficking has coincided with spectacular violence. In 2016, the severed head of a drug dealer was found outside a hookah café in the capital, and every Dutch person knows the story of Peter R. de Vries, a celebrity crime journalist who was assassinated last July in downtown Amsterdam in what was believed to be a mob hit. The spread of trafficking has forced lawmakers and law enforcement to choose between aggressive crackdowns and a more socially enlightened public policy response. And while this is being debated, the traffickers’ influence is expanding, with effects that extend far beyond the Port of Rotterdam.

The explosion in cocaine trafficking is the result of several recent developments. In Colombia—one of the three countries, alongside Peru and Bolivia, in which coca is grown on a large scale—political and agricultural changes have created a boom in supply. After the fall of Pablo Escobar and the big Colombian cartels in the 1990s and the demobilization of rebel factions following the 2016 peace agreement that ended Colombia’s civil war, traffickers reorganized into smaller and nimble groups, moving into coca-growing regions that had previously been monopolized by bigger organizations. These newcomers began specializing in different aspects of the manufacturing and distribution processes, even bringing in foreign experts to advise them. Unlike their predecessors, who were happy to dress up as narco cowboys and intimidate authorities, the new generation of traffickers, according to journalist Jeremy McDermott of InSight Crime, are “immensely sophisticated,” moving “through the world looking like highly educated and capable businessmen.” And they have much more product to work with. Since 2015, the year Colombia’s government stopped aerially fumigating coca crops, coca cultivation has increased by more than 150 percent.

It would be a mistake to think of cocaine importers as members of “American-style ethnic mafias,” Damian Zaitch, a criminologist at Utrecht University, told me. Rather, the business runs on what he called criminal freelancers—entrepreneurial types who put together ad hoc networks of associates with the money and skills to buy, smuggle, and distribute bulk shipments. Wouter Lammers, the author of the book Macro Maffia, likened the model to the way individual investors purchased shares in Dutch East India Company expeditions during the colonial era. “That’s exactly how this works,” he said. “It’s a lot of guys putting in money, sharing the risk.”

But no matter one’s role in the cocaine supply chain, the primary factor driving the shift toward Europe is the same: It’s smart business. A kilo of cocaine commands an estimated $41,731 from wholesale buyers in Europe, as opposed to $28,000 in the United States.

Moreover, traffickers see the EU as an easier place to operate. Mexican cartels don’t have a stranglehold on the market, and unlike the US, EU member countries have never waged an official war on drugs, have historically been more lenient when it comes to sentencing, and are uninterested in extraditing foreigners. As an added perk, European law enforcement agencies haven’t been prepared to deal with the resourcefulness of today’s traffickers. Whereas a courier might once have been flagged at Amsterdam’s Schiphol Airport with a few kilos of coke in a suitcase, shipments are now hundreds of times bigger and transported via container ships, meaning that investigations are often too complex and time-consuming to bother pursuing.

But unlike in the US or Mexico, which have been profoundly altered by the War on Drugs, the verdict is still out on how the boom in trafficking will transform the Netherlands. While

The number of cocaine seizures in Europe has been rising steadily year over year, quadrupling between 2009 and 2019.

Jessica Loudis is a writer and editor in Berlin.
Do violence and corruption come naturally in the wake of drug trafficking, or do they emerge in response to the ways that police try to stop it?

Alexandre Afonso, an associate professor of politics and shipping sectors. The ensuing “Dutch Miracle” made the Netherlands a continental success story and positioned the country to benefit handsomely from the boom in online retail. Warehouses linked to the port now dot the Dutch countryside. “If you order something from anywhere in Europe, there’s a quite big chance that it will go through distribution centers somewhere in the Netherlands,” said Alexandre Afonso, an associate professor of public policy at Leiden University.

This, of course, includes cocaine. At the Port of Rotterdam, anti-trafficking efforts are overseen by the Hit and Run Cargo Team (HARC), an 18-person unit made up of officers from the local police prosecutor’s office, the port police, and the customs department. Because of the port’s sheer size and the quick turnaround times between shipments, only about 1 percent of the more than 15 million containers that arrive each year are physically examined, according to Jan Meeus, a veteran crime reporter with NRC Handelsblad. As with security screenings at airports, Meeus said, some are chosen at random, but the vast majority are selected through a process of “pre-arrival” risk analysis, in which customs agents consider a variety of factors—the country of origin, the contents of the load, the company sending it—to ferret out the most suspicious. An IKEA container from China will likely be waved through, for instance, while a shipment of bananas from Brazil may get a closer look.

Integrating their own processes into existing frameworks is one way that criminal networks have managed to stay ahead of police. As trafficking organizations have gotten more sophisticated, they’ve become especially good at making use of the global maritime supply chain. The classic method for doing this is the “rip-on, rip-off” technique, in which smugglers hide drugs in shipping containers without the knowledge of the senders, replace the seal to disguise tampering, and have workers intercept the drugs at their destination. But heightened security has called for more innovative techniques. In recent years, officials have found cocaine packed in metal tubes soldered to the bottoms of ships; stashed in cargo tanks and engine rooms; hidden in “cloned” containers that are exact replicas of legitimate ones, proper serial numbers and all; and chained to the exteriors of ships. Because smugglers like to dump packages of cocaine into the ocean before reaching the port (always weighted; otherwise they would float), the Rotterdam customs police has a diving team to search for underwater drug drops.

As drug seizures started to increase at Rotterdam, police turned the port into a fortress. Cameras are everywhere, and all visitors are stringently vetted. These and other security measures were put in place after 2015, when it transpired that a handful of customs agents were supplementing their salaries—which top out at 4,615 euros ($5,240) a month—with kickbacks from traffickers. That set off a national conversation about port corruption that continues to this day, enlivened by the occasional high-profile arrest. While Meeus believes that the problem is more or less under control among customs officers, it hasn’t gone away entirely. “There is corruption at different levels of government,” he

The heart of cocaine trafficking in the Netherlands is just over an hour’s drive south of Amsterdam, in a historic trading city that was rebuilt after World War II. Splitting the city itself into north and south, the Port of Rotterdam snakes through an artificial canal connecting the Rhine and Meuse rivers and continues across a man-made archipelago before jutting out into the North Sea. As the largest deep-water port in Europe and one of the main drivers of the country’s economy, Rotterdam is a hive of perpetual motion. It is home to five oil refineries, nine terminals (including a fully automated, nearly workerless “ghost” terminal), state-of-the-art flood barriers, one of the world’s largest wind turbines, and more than 180,000 employees. The complex is spread across 25 square miles, roughly the area of Newark, and is connected to a dense transit network of rail services, river barges, trucks, ferries, and pipelines that can reach almost any point on the continent within 24 hours.

Rotterdam is the place to look when trying to understand how cocaine physically enters Europe, and it’s difficult to imagine an infrastructure better suited to trafficking. Not only was the port designed to receive and process enormous amounts of goods every day—far more than authorities are able to physically inspect—it’s also the culmination of a national effort to reengineer the Dutch economy around the free flow of global trade.

That initiative goes back to the 1980s, when, in an attempt to climb out of a severe recession, trade unions and the government joined forces to develop the logistics and shipping sectors. The ensuing “Dutch Miracle” made the Netherlands a continental success story and positioned the country to benefit handsomely from the boom in online retail. Warehouses linked to the port now dot the Dutch countryside. “If you order something from anywhere in Europe, there’s a quite big chance that it will go through distribution centers somewhere in the Netherlands,” said Alexandre Afonso, an associate professor of public policy at Leiden University.

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There have been horrific acts of drug violence committed, the country remains one of the safest in the world. The murder rate has dropped significantly over the past decade and now averages 125 a year. It’s estimated that between 20 and 30 of these murders are “liquidations,” as the Dutch call gangland assassinations. In 2020, with the pandemic keeping people inside, the number of these killings fell to 10. “We don’t have bodies dangling from bridges,” as Laumanns put it. Moreover, Transparency International, a nonprofit anti-corruption organization, recently ranked the Netherlands as the eighth-least-corrupt country in the world, above the US and Germany. All of this raises a question: Do violence and corruption come naturally in the wake of drug trafficking, or do they emerge in response to the ways that police typically try to stop it? And on the ground, the situation raises another, more urgent one: Is the Netherlands’ spike in drug trafficking an aberration, or does it represent the new normal?

There is corruption at different levels of government,” he
said, “but it’s always individual cases.” These days, criminal groups tend to aim lower, bribing dock-workers for uniforms or access cards—renting one for a day costs an even 500 euros—or simply hiring locals to break into the complex and spend a few days hiding in a container before sneaking out with the cocaine.

Drug trafficking exploded onto the front pages of Dutch newspapers in the late 2010s, thanks to a series of brutal killings carried out by the “Mocro,” or Moroccan mafia, which controls much of the country’s cocaine trade. Suddenly, the neatly swept streets of affluent cities were seemingly under threat from what prosecutors referred to as a “well-oiled murder machine,” and moral panics erupted about whether the Netherlands was at risk of becoming a “narco-state.” (It wasn’t.) Arrests ensued, including that of kingpin Ridouan Taghi, who was apprehended in Dubai and extradited to the Netherlands in 2019. Taghi and 17 other mobsters are now defendants in the so-called Maren-go trial, one of the highest-profile criminal cases in Dutch history.

The group does resemble an old-school mafia in certain ways, but the journalists and academics I spoke with took pains to explain that “Mocro” is a potentially dangerous misnomer, a term that associates the Netherlands’ current struggle with criminality with its 1950s-era Moroccan guest workers. “The community was small, unmanageable affronts to the law, Dutch police infiltrated the traffickers’

long-standing adherence to harm reduction. “Unless there is some kind of violence,” low-level drug runners “will not get very big sentences,” noted Zaitch, the Utrecht University criminologist. His point was echoed by Laumans, who said the Dutch police are more interested in going after “the killings [than] the kilos.”

This approach dates to 1971, when the government commissioned the criminologist Louk Hulsmans to lead a report on the country’s illegal drug trade. His findings became the basis of the “tolerance” policy toward marijuana (which, confusingly, made it effectively legal to sell in coffee shops but illegal to sell to coffee shops) as well as the generally humane stance toward drug sentencing. According to a 2021 report commissioned by the government, “Dutch drug policy since its development has been primarily aimed at keeping the problems of use and trafficking manageable. Policy makers were under no illusion that drug use was eradicable.” While different administrations took slightly different approaches over the years, the model has stayed basically the same.

The current generation of traffickers entered the trade around 2006, when Dutch Moroccan kids established contacts in Colombia and began using the old Mediterranean hashish shipping routes to smuggle cocaine into the Netherlands from North Africa. (Taghi allegedly inherited a relative’s hash route and used it to found his own empire.) Before that, trafficking in the Netherlands was a modest affair, dominated mostly by Colombian émigrés who kept a low profile. “The community was small, very easy to see,” said Zaitch, whose early work focused on Colombian organized crime in the Netherlands.

Back then, for new arrivals, assimilating into the community meant adapting to Dutch norms. Zaitch told me that while he was conducting his research, he heard anecdotes about Colombian gangsters carrying knives on the streets of Amsterdam, only to be told by their colleagues to put the weapons away; violence wasn’t how things were done in Europe. Bribery, too, was a dead end: “They came with this idea that you just pay people and were told, ‘No, it doesn’t work like this here.’”

Traffickers quickly learned that the benefits of working in the Netherlands lay in its relative calm—there was no violence, no corruption, no obvious flows of drug capital that might attract the attention of law enforcement. In keeping with this, Zaitch said, the successful operators were the ones who managed to keep their heads down and to embed their workflows within legal avenues.

That began to change in the 2010s, when the shipments got much bigger. In December 2012, two men were killed in a shootout that resulted in a high-speed chase through Amsterdam, with the assailants firing at police. “You have to consider this is Europe, not America,” Laumans said, explaining that never before had the Netherlands experienced “young guys running around with AK-47s and shooting each other.” When a mafia member agreed to testify against his former crew, his brother and his lawyer were subsequently murdered by paid assassins. In 2021, de Vries, the crime journalist, was shot dead in a parking lot in downtown Amsterdam after signing on as the man’s media adviser. In response to these previously unimaginable affronts to the law, Dutch police infiltrated the traffickers’

“Everybody works happily together. As long as there’s money to be made, nobody gives a shit what color you are.”
—Wouter Laumans

Last respects: People gather to mourn investigative journalist Peter de Vries, who was assassinated in July 2021.
The Netherlands’ approach to trafficking has always been highly administrative, toggling between national and regional police and a word salad of government-appointed task forces that are forever being created and disbanded, occasionally leading to public spats between police and government law enforcement. In the 2010s, as reports of “antisocial behavior” and “street terror” among young Moroccans became a fixture in the Dutch media, drug and criminal justice policies began increasingly to overlap, with both becoming more punitive. In 2017 Prime Minister Mark Rutte unveiled the framework that is still in place to this day, which focuses on “undermining” or combating “subversion”—mostly through heightened policing. Technically defined as any activity that “weakens or abuses social structures and leads to the decay of [the country’s] foundation and constitution,” subversion is, like pornography, often identified on an “I know it when I see it” basis. Policymakers tend to disagree over what exactly meets this standard, but factors typically include the intensity of an event (such as a public murder), the amount of money in question, and whether the money is being integrated into legal channels (for instance, filtering drug money into campaign donations). In tandem with targeted attacks on criminal communications and financing, the idea is not only to make the Netherlands a less pleasant place for organized crime but also to prevent young people from being absorbed into its networks.

One of the most effective ways to do this has simply been to place more restrictions on how traffickers can move their money. In 2015 Dutch law enforcement began focusing more on the financial side of organized crime, setting up stand-alone task forces and implementing policies to make Dutch banks a less hospitable home for ill-gotten cash. About five years ago, Zaitch told me, officials decided to radically expand the definition of money laundering to encompass any transaction carried out by a criminal. “So if you go, for example, to the pharmacy and use money that you gained illegally, that’s called ‘money laundering’ under Dutch law,” he explained. Any transaction of more than 3,000 euros in cash must be reported to customs authorities. (Though oddly, a loophole that allowed people to send shipping containers full of cash without having to declare the amount was closed only last year.) Dutch banks have also weathered huge fines for failing to comply with anti-money-laundering rules, but since the criminal code was changed, they are now able to share information with one another about suspicious clients.

As a result, Dutch banks are now used primarily as stopover points for money coming in from abroad that will ultimately end up in a friendlier jurisdiction, such as Hong Kong or Turkey. Once the money is settled in a foreign bank, traffickers might use it to pay loans or mortgages for fake companies, or simply park it in restaurants or real estate. Traffickers also rely on Hawala banking, an Islamic money-transfer system centered around global networks of brokers, to move money out of the Netherlands, and they also use shell companies and trusts to mix illegal money flows with legitimate ones. Increasingly, Laumans said, Dutch traffickers are operating from abroad. It enraged the government, he said, referring to the Taghi case, that “all these guys were partying in Dubai and using the crypto funds to order shipments of cocaine into Rotterdam—and if something went wrong, they could organize violence from there as well.”

The aim of all this—the networking, the illegal shipping, the recruitment, the money laundering—is, of course, to keep cocaine flowing. And that’s where things get fuzzy. It’s impossible to know exactly how much of the cocaine being trafficked is intercepted by police; some experts I spoke with put the number at around 60 percent, while others told me it was closer to 10 percent. But that number is what makes the difference between a region remaining a hot spot for organized crime and traffickers deciding that it isn’t worth their time and moving on.

The Netherlands has long played a kind of cat-and-mouse game with its drug policy, allowing citizens to indulge without reason and stepping in when abuse becomes a problem. In a sense, this is also how lawmakers are handling the cocaine problem: targeting the violence, the banks, and the shipping containers, and applying a somewhat lighter hand to the vulnerable people most likely to be exploited by traffickers. While this approach has made it more difficult for criminals to do business through Dutch institutions, there’s no way of knowing whether the measures have been onerous enough to send mobsters hunting for their next port. In the meantime, as Dutch officials learn to match the evolving techniques of transnational traffickers, life in the Netherlands for most people will not change dramatically. The streets will stay safe and clean, the cities picturesque, and the social welfare state will continue to hum along. And to many, drugs will remain a distant reality. After all, more than 90 percent of the cocaine shipped to the Netherlands has a different final destination. Among the Dutch, there just isn’t much demand.
have not dealt with access, with research, with taxation. I think, as a practical matter, this has not been on people’s radar screen. I’ve had an opportunity because of the ballot measure in Oregon, which set up a pilot project for assisted psilocybin therapy in a controlled setting…. It has sort of a checkered past, because it got hijacked, you know, by Timothy Leary and [Ken] Kesey’s Merry Pranksters, and it was not dealt with by most people as a serious therapy. But that’s changing.”

The push to broaden access to psychedelic therapies has even won conservative allies. Last year, Texas—a state long controlled by Republicans—enacted a law authorizing research into how psilocybin could help veterans with PTSD. Former governor Rick Perry, a Republican who, in his own words, has “historically been a very anti-drug person,” championed the bill to expedite the research, despite his broader opposition. “All of that properly done in the right type of clinical setting will save a multitude of lives,” Perry told The Texas Tribune last year. “I’m convinced of it. I have seen it enough [in] these young men.”

VEN IF A MORE HUMANE POLICY WINS THE DAY, THE health care industry remains a powerful force. Without efforts to prevent monopolization, MAPS’s Ali said, psychedelics will soon end up like most other mainstream medical treatments. “I have very real concerns about the influence of the profit motive,” he stressed, “and how the seeking of profit affects health care in general and then access to substances like psychedelics.”

The future of psilocybin may be visible in the status of ketamine. Best known as either a party drug or a veterinary medicine, ketamine was approved as an anesthetic by the Food and Drug Administration in 1970 and used by the US military to treat soldiers during the Vietnam War. It has exploded in popularity over the past several years as an off-label treatment for depression. Administered intravenously or through intramuscular injection by a trained professional, ketamine has rapid antidepressant effects that can last days or weeks, specifically in patients with severe depression and suicidality. In 2019, the FDA approved Johnson & Johnson’s Spravato, a nasal spray that contains esketamine (the active component of ketamine) for difficult-to-treat depression. The pharmaceutical giant set a list price of $590 to $885 per treatment session for its spray and an annual list price of $32,400. In-person ketamine clinics charge between $400 and $800 per infusion. But as many casual users can tell you, ketamine is dirt-cheap to manufacture.

Ketamine therapy and some psilocybin products are now firmly enmeshed in the creepy world of targeted ads, with sponsored messages from health care start-ups popping up on Instagram, Facebook, and YouTube. Start-ups focused on attention-deficit hyperactivity disorder have also been caught promoting medication, telemedicine, and self-diagnosis on platforms like TikTok, aiming their advertisements at young users. There’s the obvious question of safety, especially when it comes to telemedicine, as these loosely regulated services use personal data to target people who are looking for relief. These companies are incentivized to pathologize every facet of human behavior, including the complexities of our relationships and lifestyles and the unpleasant but ordinary aspects of being alive. Like Big Pharma, organized religion, and “wellness” brands like Goop, venture capital is trying to convince us that we need its products for self-growth, optimization, well-being, and spiritual rebirth.

“There is no question that one of the reasons we have so much mental health distress is because of a failure of social systems,” Ali said. “You can see that as a failure of capitalism, or as a failure of the government, the failure of some combination of both, or the legacy of colonialism and racism.”

Without a broader policy change to end the federal government’s disastrous War on Drugs, or at least the complete decriminalization of personal use and possession, there’s a good chance we’ll end up with a system in which only those who can afford to drop thousands on a psilocybin session to treat a medical condition get access to the help they need.

Witt-Doerring and Mark Horowitz might be indicative of ripples of change within psychiatry. But the change is still mostly relegated to Internet forums and small pockets of the medical establishment. Antidepressant prescriptions are as high as they’ve ever been. Drug companies still do research on them. And most people struggling with depression don’t see a psychiatrist—nearly 80 percent of antidepressant prescriptions come from primary care doctors. Studies suggest that therapy is just as effective as medication over the long term for treating depression, but it’s more expensive and often not covered by insurance. For many people in the throes of depression, SSRIs are the only option.

Barring systemic change to how we deal with mental health in this country (and in most other Western capitalist nations), many of us may be stuck taking antidepressants while knowing the drugs sold to us are not some kind of magic bullet, but rather flawed tools that, like benzos and tranquilizers before them, could suddenly fall out of favor and be replaced by something else. Until then, the least we deserve is a full picture, one that has space for all the conflicting science and the thousands of personal stories of triumph and harm.

Karen Polinger Foster, a retired lecturer at Yale University, specializes in the art of the Aegean, Egypt, and the ancient Near East. Diana Stein, associate lecturer at Birkbeck, University of London, specializes in seals and sealing practices in the ancient Near East. Sarah Kielt Costello, associate professor of art history at the University of Houston–Clear Lake, focuses on early Mesopotamian and Cypriot art and archaeology. Their anthology Ecstatic Experience in the Ancient World was published by Routledge in December 2021.
Mission Creep

What are the lessons of the United States’ 20-year war in Afghanistan?

BY CHARLIE SAVAGE

OW THAT WE KNOW HOW THE UNITED States’ generation-long misadventure in Afghanistan ended, one Army officer’s experience in 2005, recounted in Craig Whitlock’s excellent and depressing The Afghanistan Papers: A Secret History of the War, takes on an elevated salience. About four years into the conflict, Maj. Charles Abeyawardena, a strategic planner based at the Army’s Center for Lessons Learned at Fort Leavenworth, Kan., flew to the war zone to study the ill-fated effort to create a modern Afghan army. The task was already proving to be difficult, but the US government remained hopeful—as it would, officially at least, for another 15 years—that the nascent Afghan security
forces would eventually become capable of keeping the country stable on their own, enabling the United States to withdraw with honor.

Abeyawardena’s mandate was to interview the Americans and senior Afghan officials involved in the work of recruiting, training, and deploying the Afghan army. But he took it upon himself to talk as well to some rank-and-file Afghan soldiers. When Abeyawardena asked them why they’d enlisted, the answers they gave were not unlike the reasons American troops typically cited: They were seeking a solid paycheck, or they wanted to serve their country, or they were taking advantage of a chance to do something new and different. Yet when Abeyawardena probed further, Whitlock writes, the responses foreshadowed serious trouble:

When he followed up by asking whether they would stay in the Afghan army after the United States left, the answers startled him. “The majority, almost everyone I talked to, said, ‘No,’” Abeyawardena said in an Army oral-history interview. “They were going to go back and grow opium or marijuana or something like that, because that’s where the money is. That threw me for a complete loop.”

A decade and a half of grinding counterinsurgency warfare and expensive nation-building efforts later, President Donald Trump made a deal with the Taliban under which the United States would withdraw its forces in 2021. In return, the Taliban promised not to let Afghanistan again become a safe haven for Al Qaeda or other terrorist groups. They also promised that, in the interim, they would stop attacking American troops and engage in peace talks with the Afghan government. Then, after Trump’s successor, Joe Biden, made it clear that he would follow through on most of the major aspects of the deal, setting the date for planned withdrawal only four months later than initially agreed on, the Afghan national army swiftly abandoned the battlefield, permitting the Taliban to take the capital, Kabul, essentially without firing a further shot.

Amid the ensuing chaotic effort to evacuate Westerners who had ignored earlier warnings to get out and Afghans who had helped the American-led NATO effort, officials at the Pentagon and the White House offered a rather sheepish excuse for the evident lack of planning and preparation for this endgame: The intelligence assessment had been that the Afghan government would likely endure for a much longer period after the withdrawal, leaving more time to get people out of harm’s way. If so, the lesson arising from Maj. Abeyawardena’s research had not been learned: The Afghan army risked becoming a Potemkin organization whose function was as much about absorbing American cash as providing an enduring security foundation for that country’s future.

The same can be said about the hollow government the army was supposed to be propelling up. Even the puppet regime that the Soviet Union left behind in 1989, after Moscow ended its own occupation of Afghanistan, had managed to limp along for another three years before collapsing. Yet with twice the time spent trying to create stability in Afghanistan—and at the cost of more than $2 trillion, more than 7,000 dead American and allied troops and contractors, and more than 69,000 dead Afghan troops and police, along with more than 46,000 Afghan civilian casualties—the United States found that the Afghan state and armed forces it had created were not even capable of enduring long enough for the last American troops to finish getting out.

The synthesis of these materials is not a comprehensive, one-stop-shopping history of the Afghanistan War. Instead, he declares that his purpose is "to explain what went wrong and how three consecutive presidents and their administrations failed to tell the truth."

For this reason, Whitlock is not concerned with recounting particular battles or the evolution of military operations and counterinsurgency and counterterrorism tactics in Afghanistan. He barely mentions important policy matters that spun off from the conflict, like the use of indefinite detention and military tribunals for prisoners taken in Afghanistan and sent to the US prison at Guantánamo Bay, Cuba, or the paradigm-shifting development of routine drone warfare. Nor is it surprising, given the date ranges of the oral histories on which his book is primarily based, that the later chapters—which recount events that took place after the available archives dried up—are less compelling. But Whitlock’s relentless, laser-like focus on the misjudgments and challenges in the early and middle years of the war delivers big-picture clarity. The Afghanistan Papers deserves to be counted among the small number of books, out of the many about the conflict published over the past two decades, that will still be read by future generations when they seek to understand America’s longest war.

The title of Whitlock’s book, which it shares with the original Post series, was inspired by the Pentagon Papers, the US government’s secret history of the Vietnam War, which was leaked by Daniel Ellsberg in 1971. Based on internal military documents, the classified Pentagon study similarly revealed that a generation of political and military leaders under administrations of both parties had been lying to the public about the war in Indochina by putting forth a far more positive spin than they privately believed. Many of Whitlock’s chapters follow a similar pattern, one that stokes outrage at first before the reader becomes numbed by repetition: He quotes officials at the White House, the Pentagon, or the State Department making a positive public statement about some aspect of the Afghanistan War effort and then reveals that, behind the scenes, plenty of people understood that it was actually going poorly, as they admitted in their officially sanctioned oral-history interviews. As Whitlock notes:

Unedited and unfiltered, [these interviews, documents, and transcripts] reveal the voices of people—from those who made policy in Washington to those who fought in the mountains and deserts of Afghanistan—who knew that the official version of the war being fed to the American people was untrue, or aggressively sanitized at best. Yet in public, almost no senior government officials had the courage to admit that the United States was slowly losing a war that Americans once overwhelmingly supported. With their complicit silence, military and political leaders avoided accountability and dodged reappraisals that could have changed the outcome or shortened the conflict. Instead, they chose to bury their mistakes and let the war drift.

The impression of the war put forward here is that it was twice cursed: first because the effort to remake Afghanistan was executed incompetently, and second because that goal was a fool’s errand anyway. But it is worth disaggregating these two issues. Was there something the United States could have done differently that would have changed the war’s outcome?

In line with the old adage that getting involved in a land war in Asia is a classic geopolitical blunder, the ultimate error of the Afghanistan War was, arguably, to invade the country in the first place. At the same time, after Al Qaeda had murdered nearly 3,000 people on 9/11, the United States was assuredly going to counterattack, both to send a deterrent message to others and to dislodge this particular group of terrorists from their secure base in a country whose government tolerated their operations. There was also a popular and political thirst for vengeance that a one-off lobbing of cruise missiles at training camps would likely not have satisfied. Notably, every congressional lawmaker but one voted to authorize the use of military force against Al Qaeda and its Taliban hosts.

Even if some kind of invasion was inevitable, though, was there a real-world alternative in which the United States carried out a punitive expedition and then swiftly got out of the country? A key focus of The Afghanistan Papers is the Bush administration’s decision to embrace mission creep: Going beyond the limited objective of destroying Al Qaeda’s stronghold, it tried to build a functional modern state in Afghanistan. Years later, officials who’d played a role in the war said that in hindsight, the United States had invaded without any real idea of what it was trying to achieve or any exit plan specific enough to be meaningful. “What were we actually doing in that country? We went in after 9/11 to defeat al-Qaeda in Afghanistan, but the mission became blurred,” an unnamed US official who worked with the NATO Special Civilian Representative to Afghanistan from 2011 to 2013 said in a Lessons Learned interview. “Also blurred were our objectives: what are our objectives? Nation building? Women’s rights?”

There is a certain irony here, in that the fear of getting too heavily involved in Afghanistan may have thwarted the best chance to get out quickly. Wary of a major occupation, the decision-makers in the Bush administration who were running the initial phase of the war—Defense Secretary Donald Rumsfeld and Gen. Tommy Franks—developed a “light footprint” strategy that would primarily combine American airpower with ground forces supplied by the Northern Alliance. Then, in December 2001, Osama bin Laden and his top lieutenants were cornered in Tora Bora but managed to slip away. Critics blamed the escape on the Pentagon’s failure to surround Tora Bora with American ground troops, instead outsourcing the job to unreliable local forces. And as Whitlock observes, in the context of the 2011 raid into Pakistan that finally killed bin Laden, “As long as the al-Qaeda leader remained free, no president could realistically consider ending U.S. military operations in Afghanistan.”

So the United States stayed in Afghanistan past the Battle of Tora Bora to keep hunting for bin Laden, and in the meantime became ever more entangled in the country’s efforts to rebuild. Within a few years, Al Qaeda’s surviving members...
had largely moved on to other countries, Whitlock writes, which meant the main battlefield enemy in the effort to stabilize Afghanistan became the Taliban, along with the other regional and ethnic militias that worked with it—none of whom had carried out the 9/11 attacks. The United States would never have invaded Afghanistan simply to keep the Taliban at bay, but now it had to stay and fight them because it was already there.

Meanwhile, off the battlefield, The Afghanistan Papers argues, there were many other errors by which the United States drove itself deeper into the quagmire. It was a mistake, the interviewees cited by Whitlock insisted, to block the Taliban from taking part in the negotiations among the country’s various factions to form a new government. “One of the unfortunate errors that took place after 9/11 was in our eagerness to get revenge we violated the Afghan way of war,” said Todd Greentree, a Foreign Service officer who spent years in Afghanistan. “That is when one side wins, the other side puts down their arms and reconciles with the side that won. And this is what the Taliban wanted to do.” He added: “Our insistence on hunting them down as if they were all criminals, rather than just adversaries who had lost, was what provoked the rise of the insurgency more than anything else.”

It was a mistake as well to push the Afghans into creating an American-style government that concentrated power in one person—President Hamid Karzai, who grew increasingly hostile and erratic over time—and a centralized bureaucracy. “The only time this country has worked properly was when it was a floating pool of tribes and warlords presided over by someone who had a certain eminence who was able to centralize them to the extent that they didn’t fight each other too much,” said Richard Boucher, the former chief spokesman for the State Department. “I think this idea that we went in with, that this was going to become a state government like a U.S. state or something like that, was just wrong and is what condemned us to fifteen years of war instead of two or three.”

Bush’s subsequent decision to invade Iraq in 2003 was obviously a catastrophic mistake in many ways, but a major one was its impact on Afghanistan. The new war required the Bush administration to pull some of the best professional military units out of the country before the job there was done and replace them with less able National Guard units that cycled through on rotations. “There are certain sorts of basic policy conclusions that are hard to legislate,” said James Dobbins, an American diplomat who helped negotiate the initial agreement that created a new Afghan government. “First, you know, sort of just invade only one country at a time. I mean that seriously.”

And in the early years of Barack Obama’s presidency, amid the “surge” of troops intended to stabilize Afghanistan ahead of a hoped-for withdrawal, the United States erred in pumping far more aid money into the country than it could absorb, constructing roads, schools, rural government buildings, and clinics that soon fell into disrepair—and whose ultimate beneficiaries were the contractors and corrupt local officials whose pockets were lined along the way. US reconstruction spending soared from $6 billion in 2008 to $17 billion in 2010, Whitlock informs us. “It’s like pouring a lot of water into a funnel; if you pour it...
hitlock covers most of this high-level territory in his opening chapter. He follows with deep dives into the more specific difficulties of particular periods and themes, such as corruption and opium. A recurring motif is how the real-world conditions in Afghanistan gave rise to an endless procession of dilemmas and problems, making it hard to imagine how even the most competently executed mission would have been able to succeed. It was not just that Afghanistan shares an insecure 1,500-mile border with Pakistan, which allowed insurgents to easily slip back and forth into the country from the haven of Pakistan’s lawless tribal areas. It was also that there was much about Afghanistan that made it a poor fit for rapid rebuilding in a Western mold, and the effort by the United States and its NATO allies was further crippled by their failure to understand Afghan history and society.

However, the real talk from the war’s participants that Whitlock’s book quotes does not just consist of unvarnished observations about American mistakes and ignorance: It also includes numerous passages of candid disdain for Afghanistan’s backwardness. Few of the Afghans that the American forces were trying to train could read or tell time, let alone drive a vehicle or operate complex machinery. Maj. Alvin Tilley, an African American soldier, recalled passing through villages where the inhabitants had never seen a person with black skin before, and Tilley “said he was just as stunned by the sight of so many primitive mud huts without power or water.” Maj. William Burley, an Army civil-affairs team leader, spoke of delivering aid to villages so isolated that it was common for people to marry their first cousins. “I hate to say it,” Burley recounted, “but there was a lot of inbreeding. The district chief had three thumbs.” US troops were there was a lot of inbreeding. The district chief had three thumbs.” US troops were there was a lot of inbreeding. The district chief had three thumbs.”

At times such passages verge on third world shaming: Suffering the consequences of deep poverty, cultural isolation, and a lack of education was not the fault of those unlucky enough to be born in war-torn Afghanistan. But reading the litany of such observations from those who were there, one cannot escape the conclusion that the effort to rebuild Afghanistan was doomed from the start. “Why does the U.S. undertake actions that are beyond its abilities?” said Jeffrey Egggers, a Navy SEAL who served in Afghanistan and worked as a White House staffer under Bush and Obama. “This question gets at strategy and human psychology, and it is a hard question to answer.”

In their time as president, both Obama and Trump wanted to remove US forces from Afghanistan but were talked out of it by generals and other national security officials, who warned that exiting would risk disaster. Indeed, the catastrophic rise of ISIS in Iraq and Syria, taking advantage of the vacuum left by Obama’s withdrawal of troops from Iraq in 2011, provided a stark demonstration of what could go wrong if the United States detached too soon from a fragile country whose previous government it had overthrown. But the unsparing portrait of the war that emerges from The Afghanistan Papers suggests that the whole enterprise was so misbegotten that it was always going to end badly, so each president’s decision to postpone the withdrawal merely left it to his successor—ultimately, Joe Biden—to assume the mantle of scapegoat.

The case put forward by some national security and foreign policy specialists critical of Biden’s decision to withdraw rests, not surprisingly, on a different interpretation. Some of their arguments are transparently weak: They tend to cite, for example, the lack of American combat deaths in the war’s final phase—at least until 13 service members were killed while guarding the Kabul airport during the August 2021 evacuation, in a horrific ISIS-K suicide bombing that also killed at least 170 Afghans—thus suggesting that the United States could have stayed on indefinitely without incurring significant new casualties. This argument glosses over the inconvenient fact that the lack of US combat deaths was due to the cease-fire component of Trump’s withdrawal agreement with the Taliban, who certainly did not stop killing Afghan soldiers in the interim. Reneging on that deal and staying—let alone carrying out strikes targeting the insurgents to keep them from overrunning Afghan cities—would have immediately started a bloody new cycle of conflict.

Such critics also tend to dwell on how the withdrawal was botched, and especially how the military left behind some people who needed to get out, in a way that avoids addressing the more disputed issue at the heart of what they think: that Biden should not have withdrawn at all. As I understand this line of thought, it questions the premise that the costs of staying on indefinitely would have exceeded the costs of getting out. From a humanitarian perspective, the luckless people of Afghanistan will now suffer a new era of misrule by religious extremist, likely with particularly dire consequences for women and girls. From a counterterrorism perspective, the United States is now dependent on the Taliban to live up to their claim that they will not let Afghanistan be used again as a base for global terrorist attacks by Al Qaeda or some successor group. If the Taliban renege, Biden’s plan is to use “over the horizon” air-based surveillance and drone strikes from faraway bases. But this plan has serious drawbacks: The lack of a
robust ability to gather on-the-ground intelligence will increase the risk of bad strikes that kill civilians, and it leaves the US dependent on neighboring Pakistan for consent to transit its airspace. This quandary speaks to a larger dilemma the United States faces, which is how to respond to the Middle East's seemingly unending cycles of conflict between corrupt authoritarians and religious zealots—an engine of chaos that keeps sending troubles, from terrorist attacks to refugees, into the broader world.

A similar lack of an obvious good answer complicates the core critique in The Afghanistan Papers of how the war evolved into a nation-building project. Many believe that a contributing factor to the 9/11 attacks was the United States' earlier decision, after the Cold War ended, to abandon Afghanistan. Having helped fighters there resist Soviet occupation in the 1980s, the US looked the other way in the 1990s as Afghanistan sank into a civil war that set the stage for what followed. So it is not hard to imagine that even if the Bush administration had managed to kill or capture bin Laden in late 2001, there would nevertheless have been bipartisan pressure to stay on afterward and help Afghanistan rebuild. In the world of counterterrorism strategy, it sometimes seems that every available door leads to its own version of the same doom.

For Biden, who in his eight years as vice president had watched Obama struggle with Afghanistan, the need to finally bring an end to the war's demonstrated pathologies outweighed the risks. Whitlock concludes his book with excerpts from a speech that Biden delivered in April 2021, when he made it clear that the United States was going to get out. Noting that the US had killed bin Laden a decade earlier and yet stayed on, even as the terrorist threat had dispersed to many other countries, Biden argued that “keeping thousands of troops grounded and concentrated in just one country at a cost of billions each year makes little sense to me and to our leaders. We cannot continue the cycle of extending or expanding our military presence in Afghanistan, hoping to create ideal conditions for the withdrawal, and expecting a different result. I’m now the fourth United States President to preside over American troop presence in Afghanistan: two Republicans, two Democrats. I will not pass this responsibility on to a fifth.”

In the Balance

American women at work

BY BRYCE COVERT

Working women are at a crossroads. While they earned 82 percent of what men did in 2018, at the end of that year they made up half the paid workforce. “Women are not just working,” Claudia Goldin states in her new book, Career and Family. “They have meaningful careers that many manage, or intend, to combine with a family in an equitable marriage…. In all of world history, this has never happened before.”

Yet despite this temporary triumph, women’s employment suffers from a dearth of policy support and remains vulnerable to economic shock. In fact, the participation of American women in the labor force has actually stalled over the past two decades, thanks largely to a lack of paid family leave and affordable child care. This has proved particularly painful during the pandemic, as Covid shuttered day cares and threw schools into chaos. The delicate balance that many working mothers had previously established has become undone. According to government data, there were 1.2 million fewer women in the labor force in November 2021 than
Goldin’s book examines the ways that women’s career aspirations have clashed with their efforts to raise young children over the past century. Charting the history of educated professional women in the United States, she breaks her book up into distinct eras that, she says, demonstrate a mostly forward momentum. Women have come a long way over the past 150 years. Yet equality remains out of reach today, Goldin argues, because employers demand too much of our time, putting work in conflict with having a family. It’s not a problem that can be solved by women on their own. Both women and men have to start demanding that employers give us back our lives if anyone hopes to achieve success while also raising children.

Yet despite its convincing argument that the imperative to work ever-longer hours is a key remaining roadblock to women’s equality, Goldin’s book proves short sighted in many ways. The history she traces is that of elite, college-educated, and mostly white women, so she fails to give us a full accounting of how women have struggled to balance motherhood and work and achieve economic parity with men. After all, women hold two-thirds of the lowest-paid jobs, and yet the women who make up this segment of the labor force fall outside the purview of Goldin’s study. Goldin also insists that what she calls “greedy work”—work that pays a premium for extra hours put in on the job and rewards in-person time and being on call—is the only remaining barrier to workplace equality between men and women. Straight-up bias, she argues, has disappeared. But asking employers to cut back on hours won’t fix the fact that women are often seen as worth less than men when they’re on the clock—receiving fewer promotions and raises while continuing to endure both outright and subtle harassment and discrimination. She appears to see the fact that women are still the default caretakers in their families as a genuine choice. On the whole, her book lacks any assessment of the power dynamics and social forces that warp women’s experiences at both work and at home.

Goldin divides her history of American women into five parts. Each examines a different cohort of “career women.” Cohort one is made up of women born between 1878 and 1897, who graduated from college between 1900 and 1920 and had to choose either a career or a family. Jeannette Pickering Rankin is an exemplar: Born in 1880 and graduating from the University of Montana in 1902, she won a seat in the US House of Representatives in 1916, becoming the first woman to hold a federal office. Rankin never married and had no children. That’s the path taken by about half of this cohort; the other half had a family and rarely worked. In other words, these women had to choose.

Cohort two comprises those who were born between 1898 and 1923, graduated in the 1920s, ’30s, and the first half of the ’40s, and held jobs before then having families. They’re “a transition group,” Goldin writes, that started out with low marriage and birth rates but, toward the end of the era, had high rates of both. Even though the majority in this cohort had some kind of job before getting married, few kept working once kids arrived. The problem was not just that having children sucked up their time and attention. They lived through the Great Depression, and out of that catastrophe came many restrictive policies, such as ones that barred married women from a number of jobs. Time-saving technology like refrigerators and laundry machines did mean women didn’t have to devote quite so much time to tending their homes, and so they also began to develop white-collar careers. Betty Friedan, who married and had children, was a member of this cohort, as was Zora Neale Hurston, who never had kids.

Cohort three consists of women born between 1924 and 1943, who graduated in the late 1940s, ’50s, and early ’60s and largely flipped the earlier pattern by first having families and then pursuing careers. This group married young and had lots of children as “Americans became marriage- and family-crazed” during the baby boom, Goldin writes. Some of the on-paper employment barriers had been lifted, so most of these women worked in low-level jobs until they had children. What held them back from establishing careers more consistently were social norms that dictated that mothers of young children shouldn’t work outside the home, coupled with a dearth of child care. Many of these women returned to the workforce after their children were grown and then established careers. Goldin points to a figure like Grace Napolitano, elected to the House of Representatives in 1999, as well as Phyllis Schlafly, “who made a career of trying to curtail other women’s careers” after her children became older.

Cohort four, who were born between 1944 and 1957 and graduated from college in the late 1960s and ‘70s, established careers and then pursued families. Their experiences were shaped by coming of age at the height of the women’s movement, which prompted many more of this group’s members to aspire to careers. “Group Four women thought they could do better than Group Three women,” Goldin writes. Their plan was “to get on the career track first and have the family later,” and they aspired to prestigious jobs and big paychecks. They were aided by a history-changing technology: the contraceptive pill, which became widely accessible in the 1970s, allowing women to delay marriage and children and therefore invest in their educations and careers. “Feminism gave [us] the desire to work, but effective contraception gave [us] the ability to work,” in the words of Betty Clark, a petroleum geologist and member of this group.

While Goldin doesn’t take us fully up to the present, her fifth cohort is composed of the many women currently working in white-collar jobs. Born between 1958 and 1978 and graduating from college between 1980 and 2000, the women in cohort five are supposedly going for it all now, pursuing a career and a family simultaneously. They are also, Goldin notes, having children at much later ages.

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Goldin’s history is a useful way of charting what some women have faced and surmounted as they became a more central part of the American workforce, but unfortunately it doesn’t encompass all working women. Goldin is interested in college-educated women because “they have had the most opportunities to achieve a career,” she argues. But “career” seems to be more of a signifier for a certain class of women: doctors, writers, accountants, and other such professionals, whose work is “long-lasting” and “shapes one’s identity.” It also entails, for Goldin, having an income over a certain threshold.

But what about all the other forms of work that are just as demanding or long-lasting but that fall outside the ambit of these white-collar jobs? Are they not sought after and central to who one is? Where does a “job” end and a “career” begin? Who’s to say that someone who works in a restaurant isn’t devoted to her work or that a law firm partner isn’t just grinding through it for the paycheck? And more important, what gets lost when we examine the question of work and family only as it affects women with college degrees and those with the most means?

Such a singular focus means the story that Goldin tells is not just about wealthy women but often only about white women. In cohorts one and two, Black college graduates “worked, married, and had children,” she notes as an afterthought; otherwise, we hear very little about women of color in the workforce in these eras. We learn nothing about the racial barriers that Black women have faced—from Jim Crow policies to the ever-present forms of racial bias today. Any examination of workplace gender equality is unfinished if it looks only at certain jobs and certain women—and if it doesn’t consider how race and class are also vectors for discrimination, ones that intersect and intermingle with gender.

This shortcoming is perhaps why Goldin has such a seemingly reductive answer for what afflicts most “career women” today—i.e., greedy work. The career occupations with the biggest gender wage gaps, she finds in her research, are those that require in-person work, require workers to meet strict deadlines, and require interpersonal (and in-person) interaction. Workers have a hard time subbing in for one another under such conditions because everything is so customized, making it very difficult to step away in an emergency.

In Goldin’s view, greedy work puts equally educated and high-achieving heterosexual couples in a bind: They must forfeit the extra financial premium if both parents only put in regular hours or seek more flexible arrangements, so they tend to “specialize” by having the man go after the big bucks and the woman scale back so she can do more at home. This arrangement benefits neither parent, Goldin writes: “Both are deprived: men forgo time with family; women forgo career.”

Goldin frames this problem as not located solely in the home or at work—a useful addition to how we think about gender inequality. One sphere directly informs the other, she points out: “Career and family are each trying to occupy the same space, and something has to give.” Also, “when couple equity is abandoned, gender equality in the workplace tends to follow.”
The solution to greedy work, Goldin maintains, is to allow workers to become seamless substitutes for one another. If high-end employers no longer insisted on creating individualized client relationships or tying high-stakes compensation to personal perseverance, then both women and men could leave work early to attend a parent-teacher meeting or detach from e-mail on the weekends if others could pick up their slack.

The problem, then, isn’t just about women, nor can it be solved only by women. Goldin argues that if men started demanding higher wages for working long, erratic hours, it would incentivize employers to limit those hours and allow everyone to tend to their family and personal lives: “For women to achieve career, family, and equity, fathers will have to make the same demands at work that women make, and they will have to take charge at home so women can take charge at work.”

Goldin also advocates for a larger set of policies: She wants lawmakers “to lessen the cost of childcare” and make it more accessible, noting that “our work and care structures are relics of a past when only men had both careers and families.”

For a writer charting the obstacles women face, Goldin is strangely optimistic. Or a writer charting the various obstacles that women have faced over the centuries, Goldin has a strangely optimistic (verging on obtuse) view of our current era. “For much of the twentieth century,” she writes, “discrimination against women was a major bar to their ability to have a career.” She points to bans against hiring married or pregnant women, antidiscrimination laws that banned hiring wives at the same institutions as their husbands, and hiring policies that explicitly said women weren’t allowed to apply as the “smoking guns” of discrimination.

Yet Goldin insists that this discrimination, which hindered women from getting white-collar-collar jobs in the past, has basically evaporated. “There are many who...point to the ways women, especially mothers, are consistently robbed of their careers, pushed off ladders, and sideswiped by male colleagues,” she writes. “Many speak about a ‘failed revolution.’” She concedes that there might still be individuals who face discrimination on a “case-by-case basis.” But “to regard the journey women have been on for the past century as failed,” she adds, “suggests an extremely limited vision.”

It is possible to celebrate the incredible progress that women have made over the years without suggesting that they no longer face systemic sexism. The fact that women with MBAs often work part-time or end up self-employed, or that women with law degrees shift out of private firms, work part-time, or leave the workforce altogether, is definitely about greedy work, but it’s also about whom we as a society—including managers and bosses—see as dedicated workers and whom we see as unworthy and unreliable. If a boss is already making it hard for you to be heard and advance, it becomes that much easier to nominate yourself as the parent who steps back from work when it starts conflicting with the demands of raising children. Children pull women out of paid work, but sexist bosses who devalue their contributions also push them out.

Goldin also endorses the idea that women who cut back their time at work or take a different career path are doing so purely by choice. Women “naturally take off more time from employment and often scale back their hours when their children are young,” she writes; also, “women—especially mothers—prefer some jobs to others, and gravitate to them, even if the positions pay less.” But there is nothing naturally ordained about these phenomena, and nowhere does Goldin interrogate the constraints under which women make these so-called choices.

There is plenty of evidence that women, and mothers in particular, are still undervalued, mistreated, and generally thought of as less human. Forty percent of women say they’ve experienced sexual harassment at work. Between 2011 and 2015, nearly 31,000 people filed charges alleging pregnancy discrimination, and the most commonly cited reason was being fired for getting pregnant. There are numerous studies finding that people of all genders undervalue women when it comes to their work and whether they should get ahead. Mothers in particular are seen as unreliable and less competent. A recent paper even examined the gender wage gap and found that it was driven more by discrimination than by women pursuing different career paths. None of this has to be written down in laws explicitly barring women from certain professions for it to prevent them from achieving equality with men.

Covid has presented us with an opportunity to reassess the workplace. But if we don’t grapple with all of that sexism at the same time that we examine workplace structures, we’ll end up no better off on the other side of the crisis, whenever it comes. Covid, Goldin tells us, provided “an alarming magnifying glass” on the unequal burden of family demands that falls on women and how they conflict with paid work. It also rearranged many workplaces, particularly white-collar ones, as employees worked from home. “Working from home can still mean that the employee is presumed to be available at odd hours, and available whenever the client or the manager wants a job done,” Goldin notes.

But “there is always the glimmer of hope that our gender norms will be altered by our compulsory trial with at-home work, and that the penalty for not going into the office will decrease.”

More workplace flexibility, and men who are able to carve out time to care for their children, would represent meaningful progress. But that wouldn’t end women’s quest for equality inside and outside of their homes. The most glaring omission in Goldin’s book is an analysis of power. She doesn’t wrestle with the dynamics that keep things as they are or the struggle it would take to change them—to turn the Covid experimentation with flexible work into lasting workplace progress, to ensure that people aren’t at the whims of their bosses’ desire for long hours, to liberate low-wage women from sexual harassment and ever-fluctuating schedules and pay. She claims that changes that have benefited women in, as one example, the pharmacy field weren’t due to “revolution, social movement, or upheaval.” Yet for most women, it will take these very forces to achieve any real and lasting transformation. Without mass action and solidarity, women’s economic equality will continue to be transitory and fragile.
E

MILY ST. JOHN MANDEL’S 2014 NOVEL STATION ELEVEN chronicles the travails of a group of interconnected strangers before and after a fictional pandemic rages the globe and lays waste to 99 percent of civilization. Mandel doesn’t shy away from the mass death and social collapse implicit in her novel’s apocalyptic premise, but she uses it mainly to examine the potential for culture to survive the demise of society. Even as so much infrastructure, technology, and collective memory disappear, Mandel argues, art can continue to sustain and nourish.

The sales for Station Eleven have spiked in the past couple of years, for obvious reasons: It’s easy to recognize the pre-pandemic dread and uncertainty in the chapters chronicling the initial wave of the Georgia Flu, which is as if the 2009 swine flu had “exploded like a neutron bomb.” The sections spent in a fictional Michigan airport, where the healthy passengers of a delayed flight create a permanent settlement, reflect the eerie stasis of 2020’s self-quarantine efforts. Mandel’s descriptions of lonely deaths will resonate with anyone haunted by the undignified losses and deferred bereavements of this early decade. And while modern society remains somewhat intact, those who spent the pandemic re-watching old movies or listening to music from their youth might find comfort in a novel about how culture can still have value amid so much upheaval.

A television adaptation of Station Eleven, which aired on HBO Max in December and January, serves a similar function by shining a light on our current pandemic world, albeit via a more immediately doomsday version of it. Much attention has been paid to the series’ first episode, which follows the rapid spread of the Georgia Flu in the city of Chicago, as a brutal evocation of the early days of Covid. Station Eleven creator, showrunner, and writer Patrick Somerville and director Hiro Murai’s dramatization of the event, complete with scenes of overcrowded hospitals, eerily empty stores, and metastasizing sickness, generates a timely sense of anxiety. In the novel, Mandel’s matter-of-fact prose required imagination for its horrors to sink in, whereas the TV show has the benefit of a real-life referent to help it achieve maximum emotional impact.

At the same time, the Station Eleven series follows the novel’s tack by focusing on the relevance of culture when all semblance of the status quo has evaporated. Shakespeare, music both classical and contemporary, and science fiction still hold sway over a world without a traditional social structure or economic framework. Whenever any work of fiction advocates for art’s inherent power or significance, it risks falling prey to its own self-importance, even without the apocalyptic stakes. Somerville’s Station Eleven occasionally grates in this regard, especially if you have an allergy to the self-involved behavior of theater kids. But like other successful art-focused shows before it, such as the Shakespeare-driven Canadian series Slings & Arrows and David Simon and Eric Overmyer’s post-Katrina New Orleans show Treme, Station Eleven mostly avoids these traps by emphasizing community and craft. After all, the people who create and promote art are also the ones who imbue it with meaning.

A prime example of successful adaptation, Station Eleven improves and expands on its source material while retaining the broad strokes of Mandel’s vision. Like the novel, the series opens with the sudden death of actor Arthur Leander.
(Gael García Bernal), who suffers a heart attack during a production of *King Lear* on the night the pandemic spreads in Chicago. Arthur represents the fulcrum for *Station Eleven*’s disparate characters. His young costar Kirsten (Matilda Lawler), left without a chaperone in the immediate wake of his death, meets Jeevan Chaudhary (Himesh Patel), an audience member who tried to save Arthur’s life. Meanwhile, Arthur’s second wife, Elizabeth (Caitlin FitzGerald), his estranged son Tyler (Julian Obradors), and his best friend, Clark (David Wilmot), all become stranded at the Severn City Airport on the way to his funeral the next day. Kirsten and Tyler are also connected by Arthur’s first wife, Miranda (Danielle Deadwyler), who wrote and illustrated a self-published sci-fi graphic novel titled *Station Eleven*, which Arthur gives to both just before his death.

Twenty years after Arthur’s death, and long after civilization has collapsed, an adult Kirsten (Mackenzie Davis) tours as an actress with the Traveling Symphony, a nomadic theater company that stages Shakespearean productions around what is left of the Great Lakes region. On their latest tour, they cross paths with a suspicious man, who calls himself “the Prophet” and leads a cult whose beliefs are rooted in the mythology of *Station Eleven*. Kirsten and Tyler ultimately intersect on their way to the Severn City Airport, which has become a self-sustaining community over the previous two decades as well as the home of the Museum of Civilization, a gallery of bygone technological artifacts now run by an elderly Clark.

Beyond these narrative elements, Somerville’s series diverges from Mandel’s novel in productive ways. Some choices, like converging disconnected characters and altering others, are made to better fit the medium of television. In the book, Kirsten and Jeevan meet briefly in the first chapter and then separate; his subsequent appearances are scenes focused either on his inner state or his somewhat contrived intersections with the other characters. In the series, Kirsten and Jeevan are inextricably linked, as they’re forced to shelter in place at the apartment of his brother Frank (Nabhaan Rizwan) in the aftermath of the pandemic, which brings Jeevan closer to the main action. Meanwhile, in the novel Tyler is a David Koresh–like figure who collects “wives” and conquers various towns. In the series, Somerville reframes him as someone who channels his childhood alienation into creating a death-of-memory cult whose followers are primarily children. Together, they futilely attempt to erase any lingering trauma by erasing the past entirely.

Mandel’s literary strengths lie primarily in world building, which was transposed wholesale to the series, but too much of the novel is bogged down by clichés, both in the plot and in certain characterizations. The Traveling Symphony, ostensibly the symbol of artistic renewal, feels too indistinct, a mere vehicle for ideas rather than a believable ensemble. (That they are Shakespearean actors is almost entirely nonessential.) The Prophet is cast as a one-dimensional obstacle whose connection to Arthur seems almost incidental. The motto of the Traveling Symphony is “Survival Is Insufficient,” a spare line of dialogue from an episode of *Star Trek: Voyager*, but the irony is that the novel excels only when it’s focused on survival, such as in the chapters involving the Severn City Airport survivors or Jeevan’s isolation. The actual day-to-day living part never quite feels believable.

By contrast, the series’ greatest coup is fleshing out the novel’s thematic core by centering community as a means for living beyond mere survival, something that Mandel only gestures at. In the series, the Traveling Symphony feels—occasionally to a fault—like an actual band of self-aggrandizing theater nerds who firmly believe in their social utility. The Shakespearean element is better integrated into the series as well, with sizable sections of *Hamlet* performed over the course of the 10 episodes. Plus the series takes a more comprehensive view of the kinds of art that survive an apocalyptic event: Shakespeare sits side by side with the music of Franz Liszt and Gladys Knight. Most of all, Somerville and the other writers take pains to demonstrate that collaboration extends not just to artistic creation but also to communal living and care. By sheer circumstance, there’s now an imperative to help one another in order to stay alive in a world that’s hostile to existence, let alone creativity.

However, Somerville also goes to some lengths to illustrate that the flip side to this collective necessity is the tendency of society to devolve into insular factions. Each community in *Station Eleven* has its own elements of extremism to which the group’s members are blind. Kirsten becomes enraged whenever anyone decides to leave “the Wheel,” the map of towns through which the Symphony travels. Tyler and Clark find themselves on opposite ends of a stubborn commitment to kill the past and the future, respectively; any attempt to deviate from this goal is met with anger, if not violence. There’s a tendency for the characters in *Station Eleven* to recklessly commit to a cultish ideology ostensibly to endure, but mainly to cope with the ephemeral nature of life after the apocalypse. It’s not terribly difficult to find a similar dogmatic paranoia in the contemporary world, and we don’t have the excuse of widespread technological failure.

It’s also why a totem like the *Station Eleven* graphic novel holds sway over Kirsten and Tyler. Stray lines of dialogue repeat like mantras across the series: “I remember damage”; “To the monsters, we’re the monsters”; “You’re going to die, and I can’t stop it.” For Kirsten, the graphic novel is a haven to return to when the world feels fragile, a literary escape hatch that she uses when holed up in isolation with Jeevan and Frank. But for Tyler, it’s a mythology that he uses to captivate his child soldiers. Their divergent readings of the story are indicative of how cultural interpretations dictate worldviews and how escapism exists on a continuum, from harmless to disastrous.

My feelings toward *Station Eleven* have continued to fluctuate since I finished watching the series. I resisted its charms initially, mainly because I wasn’t a fan of the novel and have become skeptical of storytelling about trauma. The supposed goal of these narratives is to convey the possibilities of closure by way of exhuming repressed emotions, which can feel frustratingly reductive. So it was easy for me to focus on *Station Eleven*’s flaws, because the series is frequently rough around the edges: Some actors lagged behind or were out of sync with the others, especially among the Traveling Symphony. Also, the writing can be strained with barefaced metaphors and creaky sym-
bolism, and the emotional payoffs were sometimes forced. Much as in the novel, the narrative contrivances tested my patience. I also resent on principle any show about societal breakdown whose primary takeaway seems to be that we all need to hug each other more.

Yet the series had a cumulative effect that lingered in my mind much longer than I expected. Some of this can be attributed to its episodic structure, which successfully operates like building blocks, with each character interaction or visual cue subtly accumulating weight. Station Eleven’s editing, which shuffles the three time lines (the pre-pandemic era, the first 100 days of the plague, and 20 years after its end) like a deck of cards, was distracting at first but eventually proved to be emotionally effective. Instead of exclusively presenting the scenes from each period linearly, the narrative strategy is to often have them triggered by a character’s recollection. They are flashbacks in both the narrative and the psychological sense, visually conveying how grief can suddenly recur depending on external factors.

It’s a somewhat obvious idea executed well, which describes many of Station Eleven’s best qualities. So many of the series’ strongest scenes might seem clichéd on paper, but they come alive in practice, largely because of the strength of certain performances that reach a fever pitch across a number of scenes.

I’m thinking of the moment when Frank, in an attempt to stave off the freezing winter and boredom in the aftermath of the pandemic, loops a piece of audio from his tape recorder and performs an impromptu rendition of A Tribe Called Quest’s “Excursions,” with Rizwan effectively selling the joy and desperation behind Frank’s performance. Or when Miranda’s colleague, previously characterized as a callow businessman indifferent to the realities of the pandemic, vulnerably confesses his fear of dying. Or the scene in which Kirsten tries to connect with Tyler at the Severn City Airport moments before he’s about to commit a callous act of destruction: She fails to get through to him, and we watch him tearfully execute a terrorist plot, soundtracked by Bill Callahan’s wistful “One Fine Morning.” Station Eleven exploits emotional power because it embraces anguish in its most unpleasant shades.

It is the series’ willingness to stare unblinkingly at the ugly, incomprehensible aspects of mortal existence that saves it from becoming maudlin. Station Eleven remains affecting because its earnestness never feels less than hard-won. Somerville doesn’t shrink from the bleakness baked into the series, which ultimately lends power to every tearful reconciliation or unlikely act of heroism or dramaturgical therapy. I firmly believe that collective action and artistic creation are necessary tools for sustaining life, but I’m naturally distrustful of having those beliefs fed back to me like pabulum. For all its faults, Station Eleven rarely conveys these ideas lightly, implicitly understanding what a difficult sell they are in such a cruel, indifferent world.

Whenever a work of fiction advocates for art’s inherent power or significance, it risks falling prey to its own self-importance.

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A Brief Guide to Trip Sitting

There is often a tendency to overpower the tripper with our insights or knowledge. Let go of this impulse.

Just be with, listen, and observe. Respond when needed, but do not take over.

Try to engage in calm conversation, responding gently to fear and anxiety.

Create a space where it’s possible to be open—one that is warm, safe, and beautiful.

If letting go triggers a crisis in the tripper, you can simply sit quietly with them. Make them feel safe.
Martin Luther King Jr.
“The Last Steep Ascent”

John Steinbeck
“Dubious Battle in California”

Howard Zinn
“Finishing School for Pickets”

Toni Morrison
“No Place for Self-Pity, No Room for Fear”

Naomi Klein
“Capitalism vs. the Climate”

Ralph Nader
“The Safe Car You Can’t Buy”

Carlos Fuentes
“Mexico: Land of Jekyll and Hyde”

Ralph Ellison
“Tell It Like It Is, Baby”

Bill McKibben
“Too Hot to Handle”

Tony Kushner
“A Socialism of the Skin”

Michelle Alexander
“Why Hillary Clinton Doesn’t Deserve the Black Vote”

Langston Hughes
“The Negro Artist and the Racial Mountain”

Hannah Arendt
“What Is This New Philosophy They Call ‘Existentialism’?”

Freda Kirchwey
“One World or None”

Gore Vidal
“Some Jews & the Gays”

Arthur Miller
“Our Bloodless Coup”

Laila Lalami
“Against Easy Stories”

James Baldwin
“A Report From Occupied Territory”

Melissa Harris-Perry
“Trayvon Martin: What It’s Like to Be a Problem”

Noam Chomsky
“Magna Carta Messed Up the World, Here’s How to Fix It”

Kai Bird
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Kurt Vonnegut
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Aileen Mioko Smith
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James Agee
“The Salt of the Earth”

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