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Preventive Psychology as Political Psychology: Illicit Drugs and Alcohol

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Title: Preventive Psychology as Political Psychology: Illicit Drugs and Alcohol

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Abstract. This article describes ideological elements behind scientific positions on the primary prevention of illicit drug and alcohol abuse.

One long-term controversy about the primary prevention of illicit drug and alcohol abuse concerns the efficacy of so-called "scare tactics." Some prevention advocates and researchers believe that not only the worst of the truth must be presented--e.g., graphic depictions of physical damage and detailed descriptions of behavioral dysfunctions--but also that the truth may be stretched into outright lies in the service of prevention.

Some of these advocates and researchers believe that a crucial intermediary variable from prevention program to successful results comprises fear, anxiety, horror, and even terror. In other words, no pain, no gain.

Others of these advocates and researchers act in the service of various deductive, sequential rationales such as the following. (1) Illicit drugs and alcohol should be not be used. (2) They should not be used because they cause harm. (3) The more and the more graphic and detailed is the information about the harm allegedly caused by illicit drugs and alcohol, the more people will believe in this harm. (4) If people knew that illicit drugs and alcohol caused harm, they would not use them. (5) The more harm people believed was caused by them, the more people would not use them (6) Therefore, "scare tactics"--even without the scare--should be effective prevention techniques. In other words, 5 pounds of information works better than 2 pounds, while the more severe information works better than the less severe.

Still others of these advocates and researchers do not strongly believe in the need for an intermediary and noxious emotional variable nor for more information of a severe nature. Instead, they harbor the belief that not to highlight the most, the most noxiously emotional, and the most severe is to encourage and even induce illicit drug and alcohol use.

That all these advocates and researchers remain in the scientific catbird seat--as to government funding and support of the general public worldwide--is due to at least two factors. First and foremost, the "scare tactics" crowd concurrently exploits and is exploited by common social sciences epistemologies. Data seeming to support hypotheses are less likely to be construed as artifacts and anomalies, while data that seem not to support said hypotheses are more likely to be so construed. As with many epistemologies, there appears to be an abyss between that which might be the truth and that which might be persuasive as truth-like. Second, a Puritan streak permeating United States (US) national consciousness--the US being the primary source of preventive research--helps fuel the primacy of "scare tactics." According to a Puritan reading, anything but hail and brimstone must be in the service of the Devil. Empirical and experimental findings to the contrary often are held to much higher standards of analytic and methodological rectitude, while their purveyors frequently suffer the slings and arrows of hellish personal attributions.

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In addition, the very language of scientific discourse has been contaminated through these factors and the seeming reification of "scare tactics." Illicit drugs are said to be abused as opposed to used, as if all and any use brings with it physical and/or psychological pain and damage as well as behavioral and/or social dysfunction. As well, the separation of "drugs" and "alcohol" as two separate categories belies the psychoactive properties of both and baldly offers a tortuous distinction based on historical, legal, and business components more than on science.

Yet, there is a significant research literature on the efficacy of "non-scare tactics." Such tactics include dispassionately describing the consequences of illicit drug and alcohol abuse, at times minimizing such consequences or the incidence and prevalence of use and abuse, at times even comprising paradoxical intervention wherein people are told to do the opposite of what the primary preventers truly desire these people to do--as before, lying in the service of prevention. But this literature often falls victim to the politics of acceptable public discourse on drugs and alcohol.

The ultimate scare tactic in all of this may be the communication of the political and business interests having a stake in certain belief systems and not in others. Such communication may not lead to a rejection of these interests and the embracing of revolutionary behavior that could follow. Instead, the interests will remain seemingly intractable to change. Is this an example of telling the truth to retard living in truth? (See Hittner, J. B., Levasseur, P. W., & Galante, V. (1998). Primary prevention of alcohol misuse: Overview and annotated bibliography. *Substance Use and Misuse*, 33, 2131-2178; Hogue, A., & Liddle, H. A. (1999). Family-based preventive intervention: An approach to preventing substance use and antisocial behavior. *American Journal of Orthopsychiatry*, 69, 278-293; Maxwell, J. C., Wallisch, L. S., Farabee, D., Spence, R. T., & Liu, L. Y. (1997). A model for assessing primary prevention needs and resources. *Journal of Primary Prevention*, 17, 315-334; Novakova, D. (1999). Prevention of drug misuse for first grade primary school pupils. *Drugs: Education, Prevention and Policy*, 6, 367-371; Zernike, K. (October 3, 2000). New tactic on college drinking: Play it down. *The New York Times*, pp. A1, A21.) (Keywords: Alcohol, Illicit Drugs, Political Psychology, Primary Prevention.)