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Why Trump's Wall and the War on Drugs Have "Nothing to Do With Drugs"

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On Feb. 15, 2019, President Trump declared a national emergency along the southern border so he could move forward with his campaign promise and favorite shiny object: a wall running along the U.S.-Mexico border.

Trump has been spinning sordid narratives about people living south of the border since he rode down the Trump Tower escalator to announce his candidacy in 2015: “They’re sending people that have a lot of problems, and they’re bringing those problems [to] us. They’re bringing drugs. They’re bringing crime. They’re rapists. And some, I assume, are good people.”

Even though Congress had given him \$1.4 billion toward wall construction in order to end the historically long 35-day government shutdown, declaring a national emergency bypasses Congress, which traditionally holds the purse to taxpayer funds.

Simply put, for Trump to get more money, he had to declare an emergency to get it. A coalition of 16 states have already filed lawsuits challenging Trump’s plan, arguing that there is no evidence of an emergency at the border, and that his declaration is, in fact, unconstitutional.

Shortly after his emergency declaration, Trump told a group of governors gathered at the White House, “We do have an emergency. We have an emergency of people pouring into our country that we don’t want — criminals, smugglers. We have drugs pouring into our country. We can’t have it.”

In Trump’s quest for \$8 billion dollars, his administration is planning to pull funds from several programs: \$1.375 billion from Homeland Security appropriations; \$3.6 billion from the Department of Defense (DOD) military construction account; \$600 million from the Treasury Department drug forfeiture fund; and \$2.5 billion from the DOD drug interdiction program.

Pulling funds from the DOD drug interdiction program seems incredibly counterintuitive — after all, these programs are intended to prevent illicit drugs from reaching the U.S., and are key to countering the negative consequences of organized criminal groups, as defined by the U.S. State Department.

Michael Collins - director of national affairs at the Drug Policy Alliance, an organization whose mission is to advance policies that reduce the harms of drug use and prohibition - thinks that transferring money from drug interdiction programs to fund wall construction ironically points out the uselessness of drug interdiction programs generally.

“I think the fact that they can take the money and repurpose it means that they aren’t programs that are existentially important to the U.S. This money was kind of being thrown down the toilet,” said Collins. “If it was from Trump’s security, they wouldn’t do it. They’re taking money

from a really useless program, destructive even, and putting it into wall construction, which we also know doesn't work. It's not even about drugs. It's about Trump's xenophobia and a campaign promise."

Inge Fryklund - a former assistant state's attorney in Cook County, Illinois - spent five years working with national, provincial and municipal governments in Afghanistan, which is home to a thriving poppy trade, and observed firsthand the detrimental effects of U.S. drug policy on local people and governments. "The only reason drugs come into the U.S. is because the U.S. people want them," she said. "We insist that Mexico be on the front lines of our Drug War, and we don't care that natural and predictable consequences are corruption and violence."

Fryklund believes that no amount of wall building will prevent drugs from crossing the border. "The vast amount of heroin and cocaine comes in through legal ports of entry concealed inside a vehicle or inside a load of vegetables. We do not have the resources at the border to search every vehicle that comes through," she explained. "If you want to stop heroin coming in, put the efforts at the legal ports of entry. Building a wall takes money from the places that we know would do some good."

She suggests that instead of erecting more fencing, money could be better spent on x-ray equipment, drug sniffing dogs, and air quality sampling, but that financial resources have not, and are not, being appropriately allocated. "There's not much money at the border, which is why the people at the border are not apprehending the drugs that are coming through."

A recent analysis from David Bier at the Cato Institute, a Libertarian think tank, found that miles of border fences do not prevent drugs from coming into the U.S., and that cannabis legalization has "cut marijuana smuggling between ports of entry [i.e. where a wall would go] 78 percent, from 114 pounds per agent in 2013, to just 25 pounds per agent in 2018."

In other words, if Trump was genuinely interested in cutting off the drug supply into the U.S., he would work with lawmakers to devise a comprehensive federal cannabis legalization policy.

And as far as Collins and Fryklund are concerned, the real national emergency lies within our borders, where opioids — both prescription and illegal forms like heroin and illicit fentanyl — kill people at the rate of 130 per day.

"The big picture here is that we're in the midst of a real overdose crisis that requires a serious public health solution, and this [Trump] administration is asleep at the wheel," Collins said. "The only thing they're talking about is the wall, and any public health solution will tell you that this will not keep out drugs. To spend all this energy on these pet projects like the wall, we all know that the wall has nothing to do with drugs, but about keeping out and suppressing immigrant communities. The War on Drugs has never been about drugs."

In the meanwhile, members of the House of Representatives recently passed a resolution to stop Trump's national emergency declaration, and the Senate is expected to take up the issue in the coming weeks. Trump has indicated that he will veto any resolution to stop his actions, which will likely leave the whole imbroglio in the hands of the courts.