

Peyote and the Ensuing Moral Panic
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The use of psychoactive drugs has been an integral part of human civilization. Humans appear to have an inherent need to change their awareness and alter their state of mind (Weil & Rosen, 2004). For thousands of years, peyote has been used by the Native Americans (Mosher & Akins, 2014). Peyote was first demonized by Spanish settlers and the Roman Catholic Church who saw the drug as evil and immensely harmful (Weil & Rosen, 2004). The spread of peyote to the United States produced opposition by the public and government agencies (Weil & Rosen, 2004). The intense opposition prompted the Native Americans to create a formal church in which their ritualistic use of peyote would not be persecuted (Mosher & Akins, 2014). As peyote and other hallucinogenic drugs grew in popularity, government agencies became concerned and started making outrageous claims about the dangers of the drug (Weil & Rosen, 2004).

In an effort to protect their religious practices and use of peyote, the Native Americans created the Native American Church (Mosher & Akins, 2014). As a formal and organized religion, the Native Americans' First Amendment rights and the use of peyote for religious ceremonies would be protected (Mosher & Akins, 2014). Since 1965, U.S. federal law has protected the Native Americans' use of peyote for religious purposes (Mosher & Akins, 2014). The increasing fear and hostility that resulted from the media weighed heavily on policy, and in 1970, the Federal Government enacted the Controlled Substances Act and labeled peyote as a Schedule I drug (Drug Enforcement Administration, 2013). As of today, the use of peyote remains illegal and only the Native Americans are allowed to use it under the American Religious Freedom Act of 1994 (Mosher & Akins, 2014).

The claims and exaggerated beliefs about peyote gave way to yet another moral panic. A moral panic occurs when specific group practices or behaviors receive negative attention (Coomber, McElrath, Measham, & Moore, 2013). The media portrays these behaviors as problematic and as an increasing problem that must be addressed (Coomber et al., 2013). Moral panics have been a part of the United States, beginning with opium in the early 1900s and most recently with methamphetamine in the 1990s (Mosher & Akins, 2014). One of the least known panics, but most controversial, is peyote. This paper will analyze media sources from before peyote was criminalized and media from the last 10 years to show how the outrageous claims created a moral panic that allowed the government to take action against so called "deviant" behaviors. The paper will examine academic research that will show how the moral panic around peyote and the Native Americans was socially constructed. This social construction consisted of labeling their behavior as deviant, establishing it as a social problem, and

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deeming it necessary to take action against the Native Americans and their use of peyote. Lastly, the paper will address how this panic stirred the criminalization of peyote and led to a series of U.S. Supreme Court cases (e.g., *Employment Division v. Smith*, 1990; *City of Boerne v. Flores*, 1997), in which Native Americans were fighting for their freedom of religion and their liberty to use drugs.

Creating a moral panic

Fears of the detrimental effects peyote would have on American society were first portrayed in newspaper reports in the early 1900s. A series of newspaper articles in the late 1910s and early 1920s, warned that peyote was an evil addicting substance that caused irrational and violent behaviors, endangered White settlements, destroyed marriages, and threatened morality. Herbert Welsh's (1918) *Peyote-An Insidious Evil* and the articles "Peyote Bean Causes Frenzy" (*Los Angeles Times*, 1919) and "Peyote Used as Drug in Indians' 'Cult of Death'" (*The New York Times*, 1923) claimed peyote was evil and the most powerful drug known to man. Welsh (1918) claimed that peyote caused more harm than whiskey, gambling, and all other substances. The newspapers described peyote as producing a state of drunkenness and inebriation that could not be compared with any other drug. The state of drunkenness produced only required a small dose and often lasted for days. The *NY Times* article claimed that some of the Native American users were forced to rest in bed for days in order to recover from the inebriation.

Peyote was believed to be so powerful and addicting that it was referred to as a vice, menace, and curse that plagued the Native Americans (*Times*, 1923; Welsh, 1918). Peyote addiction was described as so severe that it required the Native Americans to take "at least twice the ordinary dose of stimulants" (*The New York Times*, 1923, para. 9). The same articles mentioned that when users were hospitalized, the stimulants used by the hospital had no effect.

The effects described were greatly exaggerated. According to Mosher and Akins (2014) "there is little or no evidence" linking peyote to severe reactions and dependence such as the ones described in the media (p. 144). In small doses, peyote produces feelings of euphoria and can produce longer lasting effects in higher doses (Ray & Ksir, 2004). Despite claims that peyote has no medical value, research has shown that peyote has been used to treat alcoholism, and it might even be useful in treating the mentally ill (Albough & Anderson, 1974; Mosher & Akins, 2014).

In addition to the strength of the drug, these early media reports claimed that peyote use had many harmful, physical effects (*The New York Times*, 1923; Welsh, 1918). Among them were tremors, convulsions, paralysis, rapid breathing, visual disturbances, hallucinations, and even death (*The New York Times*, 1923; Welsh, 1918). A string of 25 deaths in 2 years among the Utes were attributed to the use of peyote (Welsh, 1918). Although there is no conclusive evidence of peyote-related deaths, research seems to indicate that it is unlikely given that peyote use has no serious effects or reactions (Mosher & Akins, 2014). Carstairs and Cantrell's (2010) study on the effects of peyote reviewed a California Poison Control System database from 1997-2008 and concluded that no deaths had been attributed to the use of peyote (Carstairs & Cantrell, 2010).

Welsh (1918) claimed that the physical effects caused by peyote were not only severe but were more apparent and detrimental to those who were depressed or weak.

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He argued that peyote caused immediate muscle paralysis and made it impossible for women to give birth to a child. While those effects are not supported by research, a few other claims made concerning the physical effects of peyote were accurate, such as rapid breathing, hallucinations, nausea, and vomiting (Mosher & Akins, 2014). Other effects, such as “pupil dilation and increased body temperature, pulse rate, and blood pressure,” will only occur when high doses are consumed (Mosher & Akins, 2014, p. 143-144). But, “there is little or no evidence of physical problems, dependence, or series adverse reactions to peyote” (Mosher & Akins, 2014, p. 144).

The negative effects of peyote –including nausea and vomiting –tend to be specific to the set and setting of the peyote using experience. The Native Americans who use peyote claim “that with repeated use, especially in religious ceremonies, nausea and vomiting do not occur” (Weil & Rosen, 2004, p. 125). Dr. Zinberg’s (1984) *Drug, Set, and Setting: The Basis for Controlled Intoxicant Use* supports the Native Americans’ claims. Dr. Zinberg (1984) argues that the effects of a drug depends on the set (how the person is feeling) and setting (where the drug is used). The ceremonial setting limits the effects of peyote to a degree that suits the religious ritual.

The early media claimed that the psychological effects of peyote included irrationality and mind-control. Peyote also made concentration impossible, destroyed judgment, destroyed aspirations, and interrupted intellectual development (*The New York Times*, 1923). News reports claimed that the drug made the Native Americans so irrational that they refused any medical treatment (Welsh, 1918). After consuming peyote, the Native Americans would believe that they had superhuman knowledge and that peyote was the only remedy that could cure every illness (*The New York Times*, 1923; Welsh, 1918). According to Welsh (1918), the use of peyote also created “false notions in the minds of the users, preventing sound logic and rational thought with which to meet the problems of their daily lives” (p. 4). The claim was that peyote had a mind controlling effect over its users.

Peyote-using parents, the reports claimed, spread these ideas to their children (*The New York Times*, 1923). Thus, the youth also believed that they did not need treatment from doctors because peyote was the cure for every illness (*The New York Times*, 1923). Furthermore, children of peyote-using parents were described as undeveloped, dull, irresponsible, and unreliable (*The New York Times*, 1923). However, research has not shown a direct link between peyote and cognitive problems (Halpern et al., 2005).

Perhaps the most outrageous claim was that peyote was “responsible for 100% of the insanity cases at that time” (*The New York Times*, 1923, para. 9). Recent research showed that there is no direct link between hallucinogenic drugs and mental health problems (Krebs & Johansen, 2013). The study actually showed that in some cases, those who had previously used peyote and/or psychedelic drugs showed lower rates of mental health deficiencies (Krebs & Johansen, 2013). Halpern, Sherwood, Hudson, Yurgelun-Todd, and Pope (2005) also provided support against the exaggerated claims made about the psychological effects caused by peyote. Their study revealed that no evidence shows that peyote causes psychological or cognitive problems in users.

The most feared effect of peyote was that the high of peyote made Native Americans violent persons who would come after Whites and their settlements. The article “Peyote Bean Causes Frenzy” (1919) claimed the Native Americans would go on violent sprees after using peyote and target residents and White establishments. In a

wild state of intoxication, a Native American reportedly went on a rampage in which he grabbed a weapon and went around town shooting everyone in sight. Many of the wars and acts of violence in which the Native Americans were involved were attributed to their use of peyote (*Los Angeles Times*, 1919). Research does not support any of these claims. Richard Schultes' (1938) study concluded that when using peyote, "there is no tendency to commit acts of violence" (p. 702).

The effects of peyote were also seen as a threat against the traditional values and morals of the White man. Peyote was seen as having a negative effect on morality. The use of peyote would make the women promiscuous and destroy marriages (Welsh, 1918). The media described peyote as a threat to the Christian Church, and accused the Native Americans of replacing the significance of the Bible with peyote (*The New York Times*, 1923). The Native Americans were accused of using religion as an excuse to get high. By claiming that peyote was a part of a religion, it could be used as often as desired. The reports warned that this would eventually result in a church revolving around cocaine and other drugs (*The New York Times*, 1923). Despite these claims, Mosher and Akins (2014) describe how peyote is used in controlled formal religious ceremonies.

The moral panic subsides

In comparison to 100 years ago, the media representation of peyote in the 2000s has shifted. The language and overall tone of the articles that discuss the drug is much more affirmative, highlighting its successful medical uses and portraying the peyote-induced experience as fun.

Peyote has received a lot of attention from physicians who seek to study its medical benefits (Flam, 2003; Krans, 2013). Doctors and researchers agree that it is important to study the efficacy and safety of hallucinogenic drugs to understand their effects and expand the tools in the medicine arsenal (Flam, 2003; Kerns, 2013). While the media clearly indicated 100 years ago that many harms resulted from peyote use, studies demonstrated little or no long-term effects on the brain from using peyote and other hallucinogenic drugs. Rather, peyote can be an effective treatment for alcoholism (Halpern et al., 2005), and peyote users actually show a lower rate of mental health problems than nonusers (Krans, 2013; Krebs & Johansen, 2013). Use actually lowers the risks of mental illness (Flam, 2003; Kerns, 2013). Furthermore, news reports indicate that over the past 100 years, peyote has had no history of abuse, trafficking or addiction, contradicting many of the early portrayals (Flam, 2003).

Views on peyote have also shifted when it comes to music and television. An episode of *The Sopranos* (2007) showed the main character Tony and his mistress Sonya consuming peyote in a casino hotel room. The way peyote use is portrayed in the episode is consistent with the most common effects of the drug (Weiner & Chase, 2007). The characters are seen eating a small dose of peyote, which makes Tony nauseous and makes him vomit (Weiner & Chase, 2007). After vomiting, Tony experiences euphoria and is able to continue with his regular activities. Tony and Sonya actually go to a casino and manage to win money gambling without any problems other than the fact that they are constantly laughing (Weiner & Chase, 2007). Contrary to the exaggerated views of the early media, the characters do not experience paralysis or any adverse effect. Rather, peyote use is portrayed in *The Sopranos* (2007) in a light and comical way. None of the initial effects (nausea, vomiting) persisted.

The positive outlook on peyote has allowed music festivals and social events such as Coachella and Burning Man to also be portrayed in a positive way. Despite the known use of psychedelic drugs, like peyote, these musical events are not advertised negatively (Krans, 2013). The Multidisciplinary Association for Psychedelic Studies (MAPS), which was created to promote harm reduction among users of psychedelic and hallucinogenic drugs (Doblin, 1999), was present at Burning Man to provide assistance to users. While the early media would represent these volunteers as promoters of drug use, current media stress that although MAPS was available to provide services, no one required medical assistance during the festival (Kerns, 2013).

Elements of the peyote moral panic

The United States has experienced many moral panics over the years, as was the case with opium, cocaine, and crack cocaine. The moral panics have had severe consequences mostly on racial relations and policy. The moral panics have resulted in racist and prejudicial policies that lead to the marginalization of minorities (Cohen, 1972; Mosher & Akins, 2014). Despite the number of moral panics experienced, many have been narrowly avoided. According to Goode and Ben-Yahuda (1994), if the discussion around an activity does not fit five different criteria—*concern, hostility, consensus, disproportionality, and volatility*—then it does not amount to a moral panic. Given the representation of the portrayal of peyote in the early 20th century, a moral panic was afoot. However, neither moral panic nor a drug scare around peyote exists currently.

The first element of a moral panic is concern. This element is characterized by an increasing concern among the public about a behavior exhibited by a group of people (Goode & Ben-Yahuda, 1994). In the case of peyote, a heightened concern emerged when non-Indians began to notice that the Native Americans regularly used peyote. The issues quickly spread to the media, which began to publish exaggerated claims about its effects. These outrageous claims created a great amount of concern, which resulted in fear and eventually led to the second element of a moral panic.

Hostility, the second element of a moral panic is described as “an increased level of hostility toward the category of people seen as engaging in the threatening behavior” (Goode & Ben-Yahuda, 1994, p. 157). The emerging hostility resulted from fear of Native Americans. The early media portrayed the Native Americans as drug users who would become violent, go on maniacal killing sprees, and try to take over the White man’s land after consuming peyote (*Los Angeles Times*, 1919). Morality was also at risk because the use of peyote was reported to make women promiscuous and cause marriages to end. In fear of the Native Americans and their use of peyote, the public met them with hostility and sought to separate from them.

The increasing hostility and fear towards the Native Americans and their use of peyote created a general consensus (third element) among the public. The majority of the public believed that peyote was an extremely harmful drug that caused Native Americans to become maniacs who were capable of anything (Welsh, 1918). It became clear that actions needed to be taken in order to prohibit the use of peyote and to prevent the Native Americans from destroying society. The increasing hostility also led the Native Americans to take action on their behalf. The Native Americans created the Native American Church (NAC) in order to protect the religion and their use of peyote

(Mosher & Akins, 2014). This aggravated the public's fear because it was seen as an excuse to use drugs and a threat to Christianity.

The alarming negative consensus against peyote and the Native Americans quickly sparked the interest of physicians and researchers. Researchers began to study the effects of peyote and began to notice how disproportionate the fear against peyote and Native Americans was compared to the effects of the drug on the Native Americans. This is precisely the fourth element of a moral panic. Disproportionality is characterized by the realization that the problem was "grossly exaggerated" and the fear and hostility was disproportionate to the nature of the problem (Goode & Ben-Yahuda, 1994, p. 158).

The fifth element is volatility. Moral panics are described as volatile events, which suddenly emerge, quickly disappear and suddenly re-emerge. As it relates to peyote, the moral panic appears to be more localized than other moral panics. The fear surrounding peyote quickly spread and gave way to a moral panic, but it has yet to re-emerge.

Nonetheless, this moral panic around peyote and the Native Americans did its damage. The extreme negative attention was the perfect way to generate fear among the public. The media portrayed the Native Americans as drug users who used religion as a scapegoat to continue their drug use (*The New York Times*, 1923). Native Americans were labeled as maniacs who preyed on innocent people as a result of their drug use (*Los Angeles Times*, 1919; *The New York Times*, 1923). Hostility was imminent. In the end, the moral panic achieved its goal: the criminalization of peyote and control over the drug and the Native Americans.

Policy implications

The Native Americans had been consuming peyote in religious ceremonies for thousands of years. It was not until peyote began to receive negative attention that their traditions were jeopardized. In order to secure their religious practices, the Native Americans decided to create a formal church which would be protected under the First Amendment of the U.S. Constitution (Mosher & Akins, 2014). The Native Americans created the Native American Church (NAC), a formal organization in which peyote could still be used (Weil & Rosen, 2004). The federal government acknowledged the Native Americans efforts and "since 1965, the religious use of Peyote by Native Americans has been protected by the U.S. federal law" (Mosher & Akins, 2014, p. 143). Since the use of peyote was only protected by federal law, many Native Americans had to continue their efforts to extend their rights to the state level (Mosher & Akins, 2014).

Weil and Rosen (2004) claimed that "the explosion of the psychedelic movement among Indians generated intense opposition by non-Indians" (p. 124). The emerging moral panic made it easy for the federal government to enact a law against the use of peyote. The early media had an enormous impact on the public by effectively instilling fear and promoting hostility towards the Native Americans. As a consensus began to form, the federal government enacted the Comprehensive Drug Abuse Prevention and Control Act (Controlled Substances Act) in 1970 (Mosher & Akins, 2014). Under this Act, the Drug Enforcement Administration created the Federal Drug Schedules, in which peyote was classified as a Schedule I drug (Mosher & Akins, 2014). Schedule I drugs are thought to have no medical value and have the highest potential for abuse (Mosher & Akins, 2014). No evidence exists to support the placement of peyote as a level one drug. As research has shown, there is no evidence of dependence when referring to peyote (Mosher & Akins, 2014). As early as 1938, research showed that there is no link

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between violence and the use of peyote (Schultes, 1938). The scheduling of drugs was clearly based on the public's consensus about peyote and not on scientific evidence.

The American Indian Freedom Religious Act of 1978 further protected the use of peyote and the free exercise of religion of Native Americans (Mosher & Akins, 2014). The American Indian Freedom Religious Act (1978) protected and preserved the Native American's First Amendment right to exercise their religion, possess sacred artifacts, have access to sacred sites, and worship through ceremonies. In 1990, the Native Americans challenged their right to use peyote at the state level (Oregon) in the case, *Employment Division of Oregon vs. Smith* (Mosher & Akins, 2014). The case centered on two persons (NAC followers) who were fired from their jobs because of their use of peyote. The court case began because the two NAC followers wanted to receive unemployment benefits. In its second decision in the case, the Oregon Supreme Court held that sacramental peyote use violated the state law prohibition, but also that the prohibition itself violated the Free Exercise Clause of the Constitution. The United States Supreme Court subsequently held that the Free Exercise Clause permits the state to prohibit sacramental peyote use and deny unemployment benefits to the two NAC followers. The fall-out from the decision was the 1994 amendments of the 1978 American Indian Religious Freedom Act. The 1994 amendments extended the Native Americans' rights to the state level. The use, possession, and the transportation of peyote were now protected by federal and state law.

Despite the numerous laws and amendments protecting the Native American's right to use peyote, it remains a Schedule I drug. The government does not recognize all of the possible medical benefits. Although research has showed that there is no evidence of dependence, peyote is still regarded as having a high potential for abuse.

Conclusion

While a vast amount of research has shed light on the possible medical uses and benefits of peyote, there is still no clear consensus on the drug. Peyote has remained obscured from the public in recent years. One can infer that this is directly related to the fifth and final element of a moral panic. Volatility, the fifth element, defines a moral panic as a sudden eruption, which can emerge and disappear at any time (Goode & Ben-Yahuda, 1994). The moral panic around peyote was not as volatile as those with other drugs such as marijuana and crack cocaine. The moral panic around peyote emerged slower than most other moral panics and disintegrated slowly after peyote was prohibited but had the same effects. Recent support of peyote by physicians and research indicating the possible medical benefits have prompted what many call the 'New Era' on peyote (Flam, 2003). Despite these findings, peyote remains a controlled substance and subject to the punitive laws of the United States.

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