

Pleasure and Panic

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Introduction

Problems with Pleasures

Dan Malleck

Mind-altering, mood-changing substances permeate our culture and absorb our attention. We talk about booze, dope, smokes, and weed. There are intoxicants, hallucinogens, psychotropics. You can have a habit, addiction, vice, or dependency. These terms are threaded through our lives, sometimes surreptitiously, often blatantly in mass and social media, weekend parties, and at the local watering hole. Politicians debate cannabis legalization; public health officials scrutinize safe injection sites; police bust illegal drug rings; government officials contemplate broadening tobacco restrictions; community organizations try to address street-level drug use; media wring their hands about dangerous new party drugs; public health officials condemn e-cigarettes and vaping; physicians wrestle with protocols for prescribing addictive opioids. It is an understatement to say that drugs, alcohol, and tobacco modify modern life.

Each of the above narratives draws upon established meanings and values, while forging new ones. Legal or illegal, recreational or medicinal, personal or social, these substances have implications that supersede their chemical or biological effects and that make sense only when we consider historical precedents. Restrictions on non-medical drug use, for example, although they may have occurred in distinct moments in time (when the legislation passed, when regulations were enacted), were the end result of broad change. They were not merely about politicians or officials deciding

that the non-medical use of certain drugs should be restricted, but rather the outcome of a combination of factors, including the gradual development of ideas about what it meant to use a substance exclusively for pleasure, the growing medical authority over psychoactive chemicals, and expansive social movements against recreational substance consumption.¹ Moreover, possibly the best-known legislative curtailment of substance use, the liquor prohibition in Canada and the United States in the first part of the twentieth century, was not a moment of cultural madness but the result of the convergence of historical dynamics driven by social movements, industrialization, policy modification, and legal innovations in attempt to contain the effects of drinking and drunkenness on society.²

Such stories illustrate how many factors influenced the shift both in popular understanding of drugs and alcohol and in the way governments dealt with them. Ideas about why addiction is considered a problematic state, questions about why governments are interested in regulating or prohibiting substances that simply give pleasure, and the phenomenon of intense social opprobrium directed towards people who consume things for fun: these issues can be informed by looking at the long history of drugs and alcohol. In this way, even so-called designer drugs, however new they are, draw upon earlier understandings of what it means to consume a mind-altering substance. The idea of enjoyment, as philosopher Richard Klein notes, seems illegitimate when it comes to both policy formation and the cultural interpretation of substance consumption.³ Indeed, the emphasis upon harm reduction to deal with criminalized drug use is based in historical understandings of drug prohibition, informed by sociological theories of deviance, restriction, and criminalization.⁴ Such panic-oriented analyses must be paralleled with the understanding of substance use as a pursuit of pleasure, and the production and sale as actual businesses, whether legal or otherwise. This volume examines the different ways that ideas of drink and drugs affected and were affected by the culture in which they were being discussed and observed, and the people who had the power to define fact and value.⁵

Historians normally trace the modern concern with recreational substance use to the rise of temperance sentiment at the beginning of the nineteenth century. The overconsumption of alcoholic beverages had been the focus of periodic moments of panic prior to that time – such as the “Gin

Craze” of the first part of the eighteenth century, which was caused and eased by government regulation and taxation – but the nineteenth century ushered in a sustained push against drink and drunkenness in general.⁶ Some historians have linked this with industrialization and the growth of automation in factories, some have seen the temperance movement as a manifestation of status anxiety among a middle-class population that saw its place in society as tenuous. This early temperance movement was literally so: it encouraged moderation, and provided a hierarchy of drinks of varying value or dangers. Benjamin Rush placed beer, porter, cider, and light wines among the valuable beverages, whereas spirits would lead to ruin.⁷ American military surgeon Edward Cutbush understood that water was the best beverage for soldiers to drink, but knowing they would not confine themselves to that rather unexciting tipple, listed the benefits of beer, cider, wine, and other beverages, leaving aside, as had Rush, spirits as singularly problematic.⁸

As the movement grew, temperance drew a wide range of adherents. North American evangelicals, inspired by episodic Great Awakenings, saw their role in society as one of actively reforming and elevating their fellow citizens. In the United Kingdom, the teetotal movement was led by liberal reformers who sought to lift their working-class compatriots from the degradation caused by drink. Workers saw a temperate approach to drinking as a pathway to financial stability, and bound together in proto-self-help organizations such as the Washingtonians, to support the weaker of their fellow citizens.⁹ Regardless of the origins, by the middle of the century the acceptability of consuming a substance for simple recreational purposes had become suspect. These movements grew and expanded, drawing new participants to a campaign that saw drink as one of the worst dangers and outcomes of industrial society. Places like Manchester, a rapidly growing industrial town, became an epicentre for innovative approaches to temperance. Moreover, women, often sidelined in the early years of the temperance movement, became more socially and politically active, with their socially proscribed role as stewards and protectors of the home serving as justification for their movement into the public realm to protect all homes from liquor. Such efforts were manifested most notably in the creation of the Woman’s Christian Temperance Union (WCTU) in North America, which spread around the world (and was affiliated with the British Women’s Temperance Association).¹⁰

Yet alcoholic beverages were not driven from the world, no matter how hard some reformers pushed, and the reason lay in the complicated nature of the substance itself. Many people rejected the “capital-T-total-temperance” view of temperance leaders like Joseph Livesey, and later evangelical groups like the WCTU, the UK Alliance, the Dominion Alliance, and the Anti-Saloon League.¹¹ Many viewed moderation as a more reasonable approach. So as temperance became equated with abstinence, views hardened. Indeed, alcohol was not viewed as entirely without its virtues. For much of the century, medicinal alcohol was ubiquitous; its many often contradictory physical and neurological effects (it could both stimulate and relax while also warming and giving energy) meant that it remained a valuable component of the *materia medica*.¹² Although they recognized concerns with overdrinking, many physicians saw the benefits of alcohol in precise application, and general usefulness. Even as the century came to an end, and various forms of legislative restriction limited the reach of the liquor industry, medical use was an excepted, and accepted, form of alcohol consumption.¹³ This exception caused problems for pharmacists, who were given the authority to sell drink as medicine but did not always colour inside the lines of the law.

The rising temperance movement drove several key changes in the way people viewed substance use for personal recreation. First, pleasurable drinking became constrained. Some argued that there was no good limit of drink, while others, like Dr. Francis Anstie, used research to argue that in fact there was a precise limit of absolute alcohol that could be consumed before it became dangerous.¹⁴ Nevertheless, such measurements were developed in a period when drinking had ceased to be a social norm for many people. Such attitudes leaked into ideas of other substance use. Opium was long known to have habit-forming properties, and many reformers vilified the account of Thomas De Quincey, the “English opium-eater,” as encouraging rather than cautioning against recreational opium use. De Quincey’s *Confessions of an English Opium-Eater* caused a stir when it was first published in a serialized form in the 1820s. The image of the problematic laudanum drinker, whose drug use began as a combination of therapeutic and recreational application but became pathologized as he was unable to escape the bondage of his habit, provided a trope for pathologized substance use.¹⁵ Combine this with the sense of responsibility

that individuals were expected to have for their physical selves, and the rise of a rational recreation movement that encouraged people (especially the working class) to use their leisure time in a productive manner, and the casual use of such substances – opium, brandy, spirits, even beer – became even more problematic.¹⁶

Nevertheless, it persisted. Brewers and distillers, however much they were in competition with each other, often banded together to resist the pressures of temperance. This was especially the case in the United Kingdom, as the “drinks question” took on a partisan character, with the Tories representing the drinks industry (the wets) and the Liberals supporting temperance (the dries).¹⁷ In North America, such divisions were not so stark, and numerous political parties attempted to play both sides of the field.¹⁸ Nevertheless, it is worth noting that histories of the politics of the drinks industry are much less robust than those of the temperance movement, a phenomenon that may be the result of limited availability of primary sources rather than a lack of activity by the wets. Indeed, the constant failures, or at least limited success, of many prohibition campaigns illustrate how powerful, albeit subtle, the drinks industry’s political and social influence could be.

By the end of the nineteenth century, the organizations advocating temperance and lobbying for prohibition had grown into a remarkably robust international movement. Drinking was being constrained, new regulatory approaches were being investigated, and medical organizations to research inebriety and develop ways to treat it had begun to unite the concerns over drinking and those over drug habits. Combined with these movements, new drugs that held tremendous therapeutic promise quickly transmogrified into social menace of their own. First cocaine, lauded as a valuable stimulant and potential treatment for opium and alcohol habits, and later heroin, an opioid that was originally believed to be a non-addictive replacement for morphine and a treatment for the habit, joined opium and alcohol as problematic substances.¹⁹ Many laws that restricted drug use, and also laws that placed restrictions on the expansion of the proprietary medicine industry, focused on opiates (including morphine and heroin), cocaine, and alcohol as the three worst problems in a generally unregulated industry.²⁰

These issues of predominantly domestic drug use were intricately connected to a broad international concern about opium smoking in Asia. First

discussed by evangelical missionaries in Asia and then exacerbated by the British imposition of opium trade in China, the opium traffic inspired a large anti-opium movement first in Great Britain and later across the globe.²¹ With Chinese people immigrating around the world, often as low-paid labour in dangerous workplaces like mines and railways and as sailors in port cities, concern about the introduction of opium smoking to “white” populations intensified concern about the recreational use of drugs. As several historians have explained, western observers did not accept the possibility that Chinese people smoked opium for therapeutic purposes, and instead saw opium smoking as an indication of the degraded state of the Chinese as a race.²² Thus, numerous early anti-opium laws began as bans on opium used for smoking laws. In Australia, this had a further racial component since the first anti-opium law was a prohibition on selling to indigenous people. By the end of the first decade of the twentieth century, laws banning opium smoking were in place in Australia (1905), Canada (1908), the United States (1909), and elsewhere.²³

Heavy restrictions on opium for non-medical use were part of a pattern of increased restriction on recreational substance use in general. Local option laws allowed municipalities to prohibit the sale of alcoholic beverages, and also placed restrictions on the sale of medicinal alcohol. In the United States, some states implemented prohibition through constitutional amendments.²⁴ During the First World War, the United Kingdom instituted as tight state management of liquor sales, something unheard of before the war and quickly dismantled when it ended.²⁵ Canada passed prohibition legislation in 1917, although many provinces had already enacted prohibitory laws of their own.²⁶ This prohibition persisted in many provinces after the war. Canadian prohibition was limited, however, allowing liquor to be manufactured as long as it was sold in large quantities or shipped outside the province. American prohibition came in the form of a constitutional amendment, so manufacture was also prohibited. When prohibition ended in Canada, provincial governments introduced government-run distribution systems (not unlike the one that the United Kingdom had put in place during the war).²⁷ In the United States, the end of prohibition resulted, in many states, in a much more liberal system.²⁸

By this time, there was no longer a question in the minds of most legislators that the recreational use of drugs was not to be sanctioned, and that the

recreational use of liquor was acceptable but within specific and narrowing parameters. In Canada, provincial licensing boards created regulations about how, when, and by whom liquor could be sold, but were dedicated to instilling a responsible relationship with drink in the citizenry. At the same time, the beverage industry doubled down on its self-image as responsible, moderation-minded corporate citizens, with campaigns such as Seagram's "Pay Your Bills First" advertisements reinforcing this message.²⁹ Industry representing respectable drinking, individuals encouraged to drink less and more responsibly, public health reminding us of the apparent dangers of drinking: Michel Foucault would call the process "biopolitics," which actively encouraged people to represent good citizenship through the way they used and treated their bodies. Here drinking and using drugs, even personal consumption and in private, was a statement about one's citizenship.³⁰

As the century progressed, drug and alcohol use, although treated differently, continued to share elements of constraint based upon the views of regulatory officials. In the case of new drugs, such as lysergic acid diethylamide (LSD) and the re-emergence of older drugs such as cannabis, governments identified indulgence as problematic without considered investigation, and attempted to restrain their use. Nevertheless, these drugs and their consumers were part of a broader cultural shift, a movement away from older ways of viewing the self and the management of the individual within society. The use of such drugs was therefore seen as a necessary manifestation of countercultural identity. In a world where many people saw authority as overbearing and illiberal, the use of drugs to "free the mind" was both a cultural marker of individualism and a break from earlier regulated constraints.³¹ Governments hoping to address this phenomenon needed to place it in its cultural box, and often saw drug use, regardless of the effect of the drugs, as deeply problematic. Such ideas were based in earlier notions of the dangers of opium and cocaine, and the movement to curtail the damage caused by drunkenness.

As this historical overview has illustrated, the negative connotations of drugs and counterculture have deep roots in social movements concerned with the consumption of mind-altering substances, especially by young people, as endangering society. One of the fears generated by opium dens was over the potential for young westerners to become corrupted: it was a

key conceit in fiction such as Oscar Wilde's *The Picture of Dorian Gray* and other, less elegant and more alarmist propaganda and yellow journalism through the nineteenth century and into the twentieth.³² By the 1960s, drug users represented, either through criminalization and labelling or the appeal of escapism in a politically troubled decade, an alternative way of viewing the world. Although the sixties are often remembered fondly as a quirky time of change, counterculture was a manifestation of anti-authoritarian critiques of power and authority. To the hegemon, such critiques were likely more threatening than the drug use itself. Yet here drug use represented the same kinds of decline and moral catastrophe that the temperance movement saw in drunkenness a century earlier and reformers implied in the opium dens. The connection of drunkenness with economic and moral decline from the 1820s onward were not casual observations; to many people they were genuine and imminent dangers to society. In this way, we see continuity across time and substance. Thus, when authorities observed the drug use at music festivals, or when an artsy hippie community manifested itself in New York City's Greenwich Village or Toronto's Yorkville, or officials interviewed John Lennon and Yoko Ono during their pot-scented "Bed-ins for Peace," they saw genuine threats to the social order on brazen display.

Much of the history of drugs and alcohol has focused on these substances as problems, rather than as commodities people have enjoyed for centuries. Whether it was nineteenth-century concerns over drunkenness, iatrogenic opium use, Chinese opium smoking, or patent medicines; or twentieth-century concerns over cannabis, LSD, and counterculture itself, histories of drugs and alcohol have tended to reiterate the problem framework in which these substances were widely discussed. Less prominent have been the academic histories of production. Outside of official histories of pharmaceutical companies and pharmacies, the business side of opium and other drugs is difficult to uncover given the illicit nature of these substances from the beginning of the twentieth century, and thus the tendency of producers not to leave a paper trail. There has been more work on the history of alcohol, however. Much of it has been written by amateur historians with an eye to hagiography or celebratory studies of brewers and distillers, but some more nuanced research on the alcoholic beverage industry has emerged. More recently, scholars have begun engaging in

detailed and sophisticated examinations of several key beverage industries, both as businesses themselves and as they reacted against the predations of temperance.³³ In the United Kingdom, this was an especially potent field, since the temperance movement and the drinks industry coalesced around different political parties and solutions to the drink question normally involved market-based strategies to reduce consumption rather than prohibition.³⁴ The drinks industry in the United Kingdom was more openly allied against temperance than the industries in Canada and the United States, although this apparent phenomenon may also be the result of a dearth of evidence for North American jurisdictions rather than actually different historical patterns. The wets, be they individuals with an economic interest in the continued sale of liquor or individuals who simply saw prohibition as antithetical to liberty and liberal governance, were able at times to unite and actively repel prohibitionist campaigns, especially against local option (the process whereby electors in individual municipalities voted their communities dry).³⁵

In the last decades of the twentieth century and into the twenty-first, new legal approaches to drugs and alcohol have begun to reconsider strict prohibition and overly stringent criminal regimes. Some of this is the result of public health advocates' efforts to push for harm reduction, an approach that recognizes that most of the worst harms of illegal drug use are the product of prohibition rather than characteristics of the drugs themselves. Needle exchanges and safe injection sites, begun by activists and supported at times by the courts, changed understandings of drug use and, more crucially, affected a perception of criminalization as more harmful than helpful. Moreover, activists for cannabis decriminalization contrasted their drug of choice with legal intoxicants (usually alcohol and tobacco) and argued that "Mary Jane" was a friend, had numerous medical applications, and moreover could treat conditions that were eluding contemporary pharmacology. As a result, both harm reduction and cannabis activism began to change public perceptions of these drugs and led to concerted discussion about the problems of criminalization. In Canada, as early as the 1970s the Royal Commission on the Non-medical Use of Drugs (the Le Dain Commission) argued that cannabis criminalization made no sense and that it would be better to decriminalize.³⁶ Subsequent Conservative governments have tended to roll back discussion on drugs,

pushing it further into the problem framework. Thus Prime Minister Stephen Harper's argument that harm reduction was meaningless because taking drugs was harmful and you couldn't reduce harm while allowing people to do harmful things was part of an attempt to dismantle the InSite safe injection clinic by deploying discourses rooted in established moral categories of drug use shaped by prohibition.³⁷ These attempts failed because the advocates for InSite argued successfully before the Supreme Court of Canada that InSite was vital to the protection of "life and the security of the person" provisions of the Canadian Charter of Rights and Freedoms. In a 9–0 decision, the justices ruled that the government needed to pay attention to "the balance between achieving public health and public safety."³⁸ Health was a key consideration in rewriting national drug laws.

Ironically, the public health arguments that so heavily influenced the change in attitudes about drug criminalization have often been used to restrict and heavily curtail access to a range of intoxicants. Bolstered by the success in banning smoking in public places, health campaigners have turned their eyes to restrictions on alcohol. The smoking bans came about when public health advocates were able to recast arguments about the freedom to smoke into arguments about the freedom to be smoke-free. Liberty was involved in both, but the freedom to smoke in public was presented as imposing upon the same sorts of freedom for "life and the security of the person" because of the demonstrated carcinogenic effects of second-hand smoke (also called passive smoking).³⁹ Yet as British libertarian economist Christopher Snowden has argued, the success of the campaign against second-hand smoke has emboldened reformers to reach further into the lives of individuals. Fat, sugar, salt, and alcohol were placed into the same type of problem framework that succeeded for tobacco.⁴⁰ Various states and provinces have contemplated or enacted various labelling restrictions on alcohol, including warning labels similar to those on cigarette packages, and signs in bars warning women that drinking will harm your child, notwithstanding the more nuanced understanding provided by research on drinking while pregnant suggesting that heavy and persistent drinking was the real problem.⁴¹

Such mission creep by an increasingly activist public health industry also infected discourse around cannabis legalization in Canada. Advocacy for legalizing the medical use of cannabis, enabling people with conditions

ranging from glaucoma to cancer to post-traumatic stress disorder to use it for therapeutic purposes with a doctor's approval, further softened opposition to its continued criminalization. If something could do that much good, the argument went, how could it be so bad? This health-focused impetus persisted in the Liberal Party of Canada's support for full legalization of non-medical cannabis. The two main justifications reiterated that balance of public safety and public health, with the prime minister, the health minister, and the public safety minister all explaining that it would undercut criminal gangs and keep cannabis out of the hands of children, while following "public health principles." Consequently, policy briefs from various sectors across the country emphasized the potential health harms of cannabis consumption. That fine line seemed impossible to tread.

In many ways, the stories of tobacco restriction, cannabis legalization, and the harm reduction strategies of safe injection sites harken back to Victorian-era temperance. None too subtly, the temperance movement argued that pleasure for pleasure's sake was antithetical to realizing the moral nation. This was especially an argument of evangelical Protestant temperance advocates (in Canada, the temperance movement was dominated by Methodists), who were at the centre of the push for legislated prohibition. Nevertheless, with an eye towards personal temperance, establishment churches (Anglican and Roman Catholic) also urged their members to practise moderation in all things.⁴² Controlling human passions was central to Christian theology, and pleasure for pleasure's sake was a distraction from good self-discipline and restraint. Such condemnation of pleasure seeking through substance consumption remains, but morality is replaced by health, and responsible citizens are expected to protect and nurture their health, thus embodying the ideals of the state as law-abiding moderate consumers of such substances. As long as drugs and alcohol are framed as undermining that bodily integrity, they will continue to be looked at askance.

Connecting the Essays

This collection assembles new work by emerging and established scholars studying drugs and alcohol in history, to explore some of the connections and disconnections between the stories. It emerged from a symposium held at Vancouver Island University in which each researcher's work was

discussed in detail. In the process of discussion and reflection, valuable interconnections and patterns emerged. Current arguments over medical and recreational cannabis are reflected in stories of advocacy for medical heroin in hospice care and in debates among pharmacists over how to deal with restrictions on medical liquor. The nuances in contemporary debates about the role of government in regulating and managing individual substance use appear in stories of nineteenth-century brewery adulteration cases and the twentieth-century Le Dain Commission inquiry into recreational drug use. What on the surface seem to be disparate topics, then, emerge in connections previously unforeseen. Such thematic convergences are essential components of historical and, we contend, contemporary understanding of the complex issue of substance misuse, abuse, regulation, and restriction in our society.

Although a variety of mind-altering substances have been part of human society for millennia, alcohol has been arguably the most contested in the Anglo-American world for the past few centuries. Essays by Jonathan Reinartz and Matthew Bellamy consider how the brewing industry dealt with competition and regulation. Reinartz looks at a seemingly odd case of challenges to the British brewery Flowers when rumours circulated that the brewery used horse meat in the brewing process. He expertly teases out the way that such charges can gain traction, and how the brewery reacted to the suspicions of what can only be considered distasteful and problematic modification to its beer. The story connects to issues of adulteration, both industry and government regulation over the process of brewing, and the cultural meaning of horses in British society. Bellamy looks at the brewing industry in Canada roughly a century later. Whereas Reinartz considers the travails of a single brewery in the face of challenges in a highly competitive market, Bellamy looks at how the brewing industry itself reacted to and collaborated to help shape government regulation of its businesses. In the decades after liquor prohibition in Canada, brewers, more than distillers and vintners, used their considerable clout to ensure that Canadians could have easy and unfettered access to their products, and that government regulations stayed out of the way.

Government regulation can reveal any number of cultural and social idiosyncrasies, and Sarah Hamill's study of liquor regulation and race in post-prohibition Alberta demonstrates the complexity of social

assumptions in the face of community realities. Liquor regulations forbade Chinese Canadians from holding a liquor licence, yet Hamill's work explores an exception to that rule, and how it reveals both ongoing racial tensions between Chinese and non-Chinese residents and also the bureaucratic machinations that often led to adjustments in the rules according to local community needs and demands. Connections between race and drink in Canada usually involve discussions of Indigenous people and alcohol use, which was heavily restricted prior to the 1950s. But racial restrictions were fluid. Indigenous soldiers who entered Ontario beverage rooms were sometimes permitted to drink despite legal prohibitions, because their race was considered by staff and regulators to be eclipsed by their status as soldiers (itself a problematic category of drinker, as Renée Lafferty-Salhany notes in her chapter).⁴³ Similarly, in Hamill's work the Chinese hotelkeeper should not have been granted a licence to sell liquor, but he was a well-respected member of the community and considered such an excellent licensee that authorities made an exception. His racial difference was not as important as his ability to conform to expectations of the state. Nevertheless, when he attempted to expand his business, his outsider status trumped his respectable comportment.

The challenge of liquor regulation stemmed from the embedded ideas about the dangers of liquor. Many of these were shaped by the temperance movements of the nineteenth and early twentieth centuries. Yet just as the complexity of brewing and regulation reveals the story to be more nuanced than popular notions might suggest, so the story of the temperance movement has many facets. Cynthia Belaskie's chapter on the activities of the Manchester branch of the British Women's Christian Temperance Association (WCTA) explores how the members of this organization sought to affect the politics of the community to facilitate more temperance-oriented public policies. The women of the WCTA undertook a broad array of activities, some of which, such as working with the families of drunks, were well within the accepted work of active community-minded middle-class women. Other activities, however, such as lobbying and organizing around local politics, took the women into less traditional areas, in which some felt comfortable whereas others were unsure of their proper role.

Women and drink have been an oft-analyzed topic, and the images of the fallen woman, the pathetic wife of a drinker, and the noble rescuer

of the downtrodden are three tropes that have appeared constantly in literature against drinking. Building upon her classic examination of the perceptions of women drinkers in Victorian and Edwardian Canada, Cheryl Krasnick Warsh explores the way that women who were “under the influence” have been viewed from the middle of the nineteenth century up to the present. She explodes the simplified tropes of women who embodied virtue, victim, or vixen. Most notably, she explores how medicinal alcohol complicated the issue of women and drink, and how medicine legitimized certain forms of drinking as well as drug consumption, but also how such substance use could lead to other forms of illness and deviance. Warsh’s original 1993 essay inspired extensive discussion for a generation of students, and its expansion here should engender ongoing discussion of society’s complicated understanding of women, drink, and drugs.

Women drinkers were considered to be a problem because drinking was anathema to womanhood, but when looking at soldiers and drink, issues of gender and respectability have a different meaning. In Lafferty-Salhany’s examination of ideas of drink in the armies of the War of 1812, issues of physiology of drink, respectable manhood, proper soldiering, and military camaraderie all intersect in a complex appreciation of the meaning of drink in a military context. Much of the medical knowledge of alcohol discussed by US military physician James Mann was based upon observation of the use of alcohol in the military setting, extant physiological and philosophical understandings of the body and its processes, and the physician’s distaste for liquor as anything but a medicine. This in turn shaped his ideas on how to reform the army, both with regard to the drinking practices of officers and enlisted men and in the authority granted to medical personnel to effect change.

The medicinal quality of liquor discussed by James Mann featured in many discussions of drink in culture, and Dan Malleck’s essay on the way pharmacists dealt with restrictions on liquor sales demonstrates that regulation of liquor was often accompanied by intensely fraught discussions of its medical usefulness. In Ontario from the 1870s, government regulation of liquor reached into medical chests and pharmacy storerooms, restricting sales, limiting access, and, in the views of pharmacists, challenging their professional autonomy. At the heart of the issue was who determined the proper medical use of liquor, who could sell it, and when such medical use

transmogrified into deviant consumption. It would have been a much less problematic issue if all pharmacists fit the idealized notion of a professional gentleman that the pharmacy leadership envisioned, but many pharmacists were interested in maintaining profitable businesses first, and following some idealized notion of a noble profession second, or third, or fourth. So inside and outside the pharmacy profession, the issue of medicinal liquor sales challenged both the professional identity and sometimes the financial viability of neighbourhood pharmacists.

Purchased at the pharmacy, alcohol was a medicine, in effect a drug dispensed to treat illness. Indeed, the twentieth-century drug laws restricting access to psychotropic substances were rooted in the pharmacy laws of the nineteenth century. Yet these medicinal roots often disappeared as the century progressed. In the last half of that century, and into the twenty-first, the easy, often simplistic, and clearly socially framed distinction between legal and illegal, medicinal and recreational, and legitimate and illegitimate substance use came under increasing scrutiny. In Canada in the late 1960s and early 1970s, official investigations of non-medical drug use revealed many of the challenges to government action. The association between drug use and people considered part of a deviant subclass was challenged by examinations of casual usage and the power of celebrity. Eric Fillion's chapter on surveillance of drug use in youth counterculture explores how some governmental and non-governmental agencies sought to define youth counterculture and its drug use. Fillion considers the formation of knowledge through such agencies as the print media and police, and how this knowledge was structured by the authority of the observers. This in turn drove certain ways of viewing and challenging youth drug use. These authoritative voices then attempted to drive the narrative of the Le Dain Commission, with a certain degree of success.

But the Le Dain Commission was not singular in its investigation, and other voices, whose authority was rooted in popular culture, also held sway. As Greg Marquis's chapter demonstrates, the commissioners were not immune to the power of celebrity. Their interviews with John Lennon and Yoko Ono during their iconic Bed-in at the Queen Elizabeth Hotel in Montreal helped provide additional perspectives on the use of recreational drugs, and the ways that such drugs are framed by various agencies, voices, and ideals. Marquis demonstrates the intersection of popular culture, drug

use, and government regulation, and the importance of understanding this remarkable cultural shift. Lennon and Ono were symbolic of this cultural moment, and it was not the cult of personality but rather cultural personification that encouraged the commissioners to seek the input of international superstars.

Discussions of drug use and the cultures of drugs can often be romanticized along with the popular culture in which it often takes place, but drug use was neither a throwaway behaviour nor one of marginal importance. Counterculture activists may have used drugs, but the drugs they used, as with alcohol a century earlier, were often also medicines. LSD is a good example of this, emerging as it did from pharmaceutical attempts to address psychotropic illnesses such as schizophrenia, and only then gaining the attention of the counterculture as a way of “expanding the mind.”⁴⁴ This tension between medicine and recreation was exacerbated when activists attempted to treat the problems created by psychotropic drug use. Christian Elcock’s examination of the Chicago LSD Rescue Service and its founder, George Peters, is a study of the challenges that groups who attempted to mitigate some of the harms of drug use faced in the early years of harm reduction. Peters’s efforts involved skating on the margins of legality, often acting illegally, and all in the interest of the welfare of individuals whose drug use led them into dangers. Peters’s work involved both myth debunking and political activities to help those whose experience with drugs was not the romanticized experience of mind expansion touted by people like Timothy Leary. It was an important struggle to reframe drug use as something that should not just be ignored or demonized, but may even require help and thoughtful strategies to avoid the worst excesses of drug use.

Complicating Themes

In assembling this collection, we had numerous debates about how best to arrange the essays, debates rooted in the social and cultural complexity of drugs and alcohol. A careful reader of this introduction will see how other connections could be made, other groupings formed, and other themes explored. On a broad level, many of these essays illustrate the perpetual tension between things that are legal but unsavoury or culturally marginal, and those that are illegal but culturally appropriate. For

example, drinking alcohol might be legal, but when, if ever, was excessive consumption considered appropriate? Consuming certain drugs might be illegal, but within certain subcultures it might be entirely appropriate or expected. In some jurisdictions, cannabis might be legal when administered under a physician's professional scrutiny, but not when self-administered, even if it is for the same neurological experience. John Burnham captured this tension in *Bad Habits*, exploring how the "vice constellation" connects a variety of activities (smoking, drinking, swearing, gambling, drug taking, and sexual impropriety) with overlapping notions of legality and propriety.⁴⁵ Illegal gambling was connected to drinking and smoking, drinking to illegal prostitution, and all activities to swearing, which was not illegal but was socially distasteful (and, depending upon the words used, possibly even illegal, or at least immoral). David Courtwright has recently examined these activities as forms of "limbic capitalism," with big business harnessing the reward systems in the human brain for profit: to drugs, alcohol, sugar, and tobacco he adds gambling, pornography, Internet gaming, and numerous other apparently addictive activities.⁴⁶ Whenever we consider substances that have some accepted application but can be also used for pleasure, we encounter such complicated considerations. It is beyond the scope of this introduction to cover all such connections, but we encourage readers to think about how both the context of and reason for an individual's use of a substance informs and drives the meaning of that use. Medical versus non-medical, public versus private, therapeutic versus recreational, amateur versus professional – these are some of the many interconnections and thematic overlaps that inform the structure and inclusion of essays in this collection. Given how the histories of substances are often histories of this tension between proper and improper use and misuse, and the meaning of that use, whether it is drinking soldiers or drinking women, pot-smoking rock stars or pot-smoking hippies or an LSD-using subclass, liquor-vending pharmacists or liquor-selling Albertans of Chinese origin, these substances, sought for recreation, medication, socialization, and palliation, remain problematic pleasures.

Notes

- 1 Virginia Berridge, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth Century England* (London: Free Association Books,

- 1999); David Musto, *The American Disease: Origins of Narcotic Control*, 3rd ed. (New York: Oxford University Press, 1999); Dan Malleck, *When Good Drugs Go Bad: Opium, Medicine, and the Origins of Canada's Drug Laws* (Vancouver: UBC Press, 2015); Desmond Manderson, *From Mr. Sin to Mr. Big: A History of Australian Drug Laws* (Oxford and Melbourne: Oxford University Press, 1993).
- 2 Craig Heron, *Booze: A Distilled History* (Toronto: Between the Lines, 2003); Ann-Marie E. Szymanski, *Pathways to Prohibition: Radicals, Moderates, and Social Movement Outcomes* (Durham: Duke University Press, 2003).
 - 3 Richard Klein, *Cigarettes Are Sublime* (Durham, NC: Duke University Press: 1993); Richard Klein, "What Is Health and How Do You Get It?" in *Against Health: How Health Became the New Morality*, ed. Jonathan Metzl and Anna Kirkland (New York: NYU Press, 2010), 15–25.
 - 4 A good amount of this came about through the work of people like Robin Room and his colleagues at the Addiction Research Foundation.
 - 5 Paul Starr uses the term "define fact and value" in explaining Max Weber's notion of cultural authority. Starr applies it in his analysis of the rise of the US medical profession but suggests that this authority was limited. Paul Starr, *The Social Transformation of American Medicine: The Rise of a Sovereign Profession and the Making of a Vast Industry* (New York: Basic Books, 1982).
 - 6 Patrick Dillon, *Gin: The Much-Lamented Death of Madam Geneva* (Boston: Justin Charles and Company, 2002); Jessica Warner, *Craze: Gin and Debauchery in an Age of Reason* (New York: Basic Books, 2002). On the push for regulation, see Dan Malleck, "Regulation and Prohibition," in *A Cultural History of Alcohol in the Age of Industry, Empire and War, 1850–1950*, ed. Deborah Toner (London: Bloomsbury Academic Press, 2021): 65–86.
 - 7 Harry G. Levine, "The Discovery of Addiction: Changing Conceptions of Habitual Drunkenness in America," *Journal of Studies on Alcohol* 15 (1978): 493–506. On debates about the primacy of Rush, see Roy Porter, "The Drinking Man's Disease: The 'Pre-History' of Alcoholism in Georgian Britain," *British Journal of Addiction* 80 (1985): 385–96; Jessica Warner, "'Resolv'd to Drink No More': Addiction as a Preindustrial Construct," *Journal of Studies on Alcoholism* 55 (November 1994): 685–90; Peter Ferentzy, "From Sin to Disease: Differences and Similarities between Past and Current Conceptions of Chronic Drunkenness," *Contemporary Drug Problems* 28 (Fall 2001): 363–90; James Nicholls, "Vinum Britannicum: The 'Drink Question' in Early Modern England," *Social History of Alcohol and Drugs* 22 (Spring 2008): 6–25.
 - 8 Edward Cutbush, *Observations on the Means of Preserving the Health of Soldiers and Sailors* (Philadelphia: Thomas Dobson, 1808).
 - 9 William White, *Slaying the Dragon: The History of Addiction Treatment and Recovery in America* (Bloomington IL: Chestnut Health Systems, 1998) 8–14; Katherine Chauvigny, "Reforming Drunkards in Nineteenth Century America: Religion, Medicine, Therapy," in *Altering American Consciousness: The History of Alcohol and Drug Use*

- in the United States, 1800–2000*, ed. Sarah Tracey and Caroline Jean Acker (Amherst and Boston: University of Massachusetts Press, 2004), 108–23; Crowley and White, *Drunkard's Refuge: The Lessons of the New York State Inebriate Asylum* (Amherst: University of Massachusetts Press, 2004), 8–10. For a hagiographic examination of the Washingtonians, see Christopher M. Finan, *Drunks: An American History* (Boston: Beacon Press, 2017): 25–53.
- 10 Ruth Bordin, *Women and Temperance: The Quest for Power and Liberty, 1873–1900* (Philadelphia: Temple University Press, 1981); Jack S. Blocker Jr., *American Temperance Movements: Cycles of Reform* (Boston: Twayne Press, 1987); Barbara Epstein, *The Politics of Domesticity: Women, Evangelism, and Temperance in Nineteenth-Century America* (Middletown, CT: Wesleyan University Press, 1981); Carol Mattingly, *Well Tempered Women: Nineteenth Century Temperance Rhetoric* (Carbondale: Southern Illinois University Press, 1998); Jack S. Blocker Jr., *Give to the Winds Thy Fears: The Women's Temperance Crusade, 1873–1874* (Westport, CT: Greenwood Press, 1985); Sharon Anne Cook, *Through Sunshine and Shadow: The Woman's Christian Temperance Union, Evangelicalism, and Reform in Ontario, 1874–1930* (Montreal and Kingston: McGill-Queen's University Press, 1995); Ian Tyrrell, *Women's World/Women's Empire: The Woman's Christian Temperance Union in International Perspective, 1880–1930* (Chapel Hill, NC: University of North Carolina Press, 1991). There is some evidence that women were not as prominent in temperance politics as the historiography might indicate. See Darren Ferry, ch. 3 in *Uniting in Measures of Common Good: The Construction of Liberal Identities in Central Canada* (Montreal and Kingston: McGill-Queen's University Press, 2008); Dan Malleck “The Problem with the Problem of Alcohol in Canada's History,” *Intersections* 3.3 (Fall 2020): 11–12.
 - 11 Annemarie McAllister, *Demon Drink? Temperance and the Working Class* (Kindle edition, 2014); Brian Harrison, *Drink and the Victorians: The Temperance Question in England, 1815–1872* (London: Faber and Faber, 1971).
 - 12 See Harry W. Paul, *Bacchic Medicine: Wine and Alcohol Therapies from Napoleon to the French Paradox* Clio Medica: Studies in the History of Medicine and Health Series (Amsterdam: Brill Rodopi, 2001).
 - 13 Normally, liquor laws made special exemption for alcohol for medicinal, scientific, industrial, and sacramental uses.
 - 14 Francis E. Anstie, *On the Uses of Wines in Health and Disease* (New York: J.S. Redfield, 1870); Arthur Baldwin, “Anstie's Alcohol Limit: Francis Edmund Anstie, 1833–1874,” *American Journal of Public Health* 67 (July 1977): 679–81; James Kneale and Shaun French, “Moderate Drinking before the Unit: Medicine and Life Assurance in Britain and the US c.1860–1930,” *Drugs: Education., Prevention and Policy*, 22 (2015): 111–17.
 - 15 Berridge, *Opium and the People*; Alethea Hayter, *Opium and the Romantic Imagination* (London: Faber and Faber, 1968); Howard Padwa, *Social Poison: The Culture and Politics of Opiate Control in Britain and France* (Baltimore: Johns Hopkins University Press, 2012).
 - 16 Peter Bailey, *Leisure and Class in Victorian England: Rational Recreation and the Contest for Control, 1830–1885* (New York: Methuen, 1978, 1987).

- 17 John Greenaway, *Drink and British Politics since 1830* (Basingstoke, UK: Palgrave Macmillan, 2003); David W. Gutzke, *Protecting the Pub: Brewers and Publicans against Temperance* (London: Royal Historical Society, 1989); James Nicholls, *Politics of Alcohol: A History of the Drink Question in England* (Manchester: University of Manchester Press, 2009).
- 18 Szymanski, *Pathways to Prohibition*; Blocker, *American Temperance Movements*.
- 19 Joseph Spillane, *Cocaine: From Medical Marvel to Modern Menace in the United States, 1884–1920* (Baltimore: Johns Hopkins University Press, 2000).
- 20 See Dan Malleck, “Proprietary Medicines and the Nation’s Health,” ch. 7 in *When Good Drugs Go Bad*, 167–93; Dan Malleck, “Regulating Proprietary Medicines,” ch. 8 in *When Good Drugs Go Bad*, 194–213; Dan Malleck, “Pure Drugs and Professional Druggists: Food and Drug Laws in Canada, 1870s–1908,” *Pharmacy in History* 48 (2006): 103–15; John Parascandola, “Patent Medicines in Nineteenth-Century America,” *Caduceus* 1 (Spring 1985): 1–41; R.G. Guest, “The Development of Patent Medicine Legislation,” *Applied Therapeutics* 8, 9 (September 1966): 786–89; Glenn F. Murray, “Cocaine Use in the Era of Social Reform: The Natural History of a Social Problem in Canada, 1880–1911,” *Canadian Journal of Law and Society* 2 (1987): 29–43; Glenn F. Murray, “The Road to Regulation: Patent Medicines in Canada in Historical Perspective,” in *Illicit Drugs in Canada: A Risky Business*, ed. Judith C. Blackwell and Patricia G. Erikson (Toronto: Nelson Canada, 1988), 72–87.
- 21 Berridge, *Opium and the People*, 173–205; David Edward Owen, *British Opium Policy in China and India* (Cambridge: Yale University Press, 1934); David Anthony Bello, *Opium and the Limits of Empire: Drug Prohibition in the Chinese Interior, 1729–1850* (Cambridge, MA: Harvard University Press, 2005); Harry G. Gelber, *Opium, Soldiers and Evangelicals: Britain’s 1840–42 War with China, and Its Aftermath* (Basingstoke, UK: Palgrave Macmillan, 2004); Julia Lovell, *The Opium War: Drugs, Dreams and the Making of China* (London: Picador, 2011).
- 22 This perspective has been scrutinized in some detail by Yangwen Zheng, *The Social Life of Opium in China* (Cambridge: Cambridge University Press, 2005); Frank Dikötter, Lars Laamann, and Zhou Xun, *Narcotic Culture: A History of Drugs in China* (Hong Kong: Hong Kong University Press, 2004); Richard Newman, “Opium Smoking in Late Imperial China: A Reconsideration,” *Modern Asian Studies* 29 (1995): 765–94.
- 23 The US law was a weak approach to legislation; the more significant law was the Harrison Act of 1914. Musto, *The American Disease*, 24–48.
- 24 See Szymanski, *Pathways to Prohibition*; Blocker, *Retreat from Reform: The Prohibition Movement in the United States, 1890–1913* (Westport CT: Greenwood Press, 1976).
- 25 Robert Duncan, *Pubs and Patriots: The Drink Crisis in Britain during World War One* (Liverpool: University of Liverpool Press, 2013).
- 26 Heron, *Booze*, 235–66.
- 27 *Ibid.*, 269–96.

- 28 Twiley Wendell Barker Jr., *State Liquor Monopolies in the United States* (PhD diss., University of Illinois, 1965).
- 29 Lisa Jacobson, “Navigating the Boundaries of Respectability and Desire: Seagram’s Advertising and the Meaning of Moderation after Repeal,” *Social History of Alcohol and Drugs* 26 (Summer 2012): 122–46.
- 30 On liquor control and biopolitics, see Dan Malleck, *Try to Control Yourself: The Regulation of Public Drinking in Post-Prohibition Ontario* (Vancouver: UBC Press, 2012), especially the introduction.
- 31 Marcel Martel, *Not This Time: Canadians, Public Policy, and the Marijuana Question, 1961–1975* (Toronto: University of Toronto Press, 2006); Erika Dyck, *Psychedelic Psychiatry: LSD from Clinic to Campus* (Baltimore: Johns Hopkins University Press, 2008).
- 32 For three examples, see Allen S. Williams, *Demon of the Orient and His Satellite Fiends of the Joints: Our Opium Smokers as They Are in Tartar Hells and American Paradises* (New York: printed by the author, 1883); H.G. Cole, *Confessions of an American Opium Eater: From Bondage to Freedom* (Boston: James H. Earle, 1895); and Frederick J. Masters, “The Opium Traffic in California,” *Chautauquan* 24 (1896): 54–61.
- 33 Amy Mittelman, *Brewing Battles: A History of American Beer* (New York: Algora Publishing, 2008); Maureen Ogle, *Ambitious Brew: The Story of American Beer* (New York: Harcourt, 2006); James Sumner, *Brewing Science, Technology and Print, 1700–1880* (Pittsburgh: University of Pittsburgh, 2013); Matthew Bellamy, *Brewed in the North: A History of Labatt’s* (Montreal and Kingston: McGill-Queens University Press, 2019). Scholarly treatment of distilling is still limited, but try Karl Raitz, *Making Bourbon: A Geographical History of Distilling in Nineteenth-Century Kentucky* (Lexington: University Press of Kentucky, 2020); Ronald Weir, *The History of the Distillers Company, 1877–1939: Diversification and Growth in Whisky and Chemicals* (Oxford: Clarendon Press, 1999).
- 34 Gutzke, *Protecting the Pub*; Nicholls, *Politics of Alcohol*; Greenaway, *Drink and British Politics since 1830*.
- 35 Syzmanski, *Pathways to Prohibition*; Gutzke, *Protecting the Pub*.
- 36 Martel, *Not This Time*.
- 37 Gloria Galloway, “Harper Takes Aim at Drug Culture,” *Globe and Mail*, October 5, 2007.
- 38 *Canada (Attorney General) v PHS Community Services Society*, 2011 SCC 44, [2011] 3 SCR 134, <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/7960/index.do>. See also Kirk Makin, Sunny Dhillon, and Ingrid Peritz, “Supreme Court Ruling Opens Doors to Drug Injection Clinics across Canada,” *Globe and Mail*, September 30, 2011.
- 39 Jarrett Rudy, *The Freedom to Smoke: Tobacco, Consumption and Identity* (Montreal and Kingston: McGill-Queen’s University Press, 2005).
- 40 Christopher Snowden, *Kill Joys: A Critique of Paternalism* (London: Institute of Economic Affairs, 2017).

- 41 Janet Golden, *Message in a Bottle: The Making of Fetal Alcohol Syndrome* (Boston: Harvard University Press, 2006); Elizabeth M. Armstrong, *Conceiving Risk, Bearing Responsibility: Fetal Alcohol Syndrome and the Diagnosis of Moral Disorder* (Baltimore: Johns-Hopkins University Press, 2008).
- 42 Although there were some strong and passionate Catholic opponents of drink, most notably Father Charles Chinquy in Canada and Father Theobald Matthew in Ireland, the dry city on the hill remained an Evangelical Protestant dream. Jan Noel, *Canada Dry: Temperance Crusades before Confederation* (Toronto: University of Toronto Press, 1995); Elizabeth Malcolm, "Ireland Sober, Ireland Free": *Drink and Temperance in Nineteenth-Century Ireland* (Syracuse, NY: University of Syracuse Press, 1986).
- 43 See Malleck, *Try to Control Yourself*.
- 44 Dyck, *Psychedelic Psychiatry*.
- 45 John C. Burnham, *Bad Habits: Drinking, Smoking, Taking Drugs, Gambling, Sexual Misbehavior and Swearing in American History* (New York: NYU Press, 1994).
- 46 David T. Courtwright, *The Age of Addiction: How Bad Habits Became Big Business* (Cambridge, MA: Belknap Press of Harvard University Press, 2019).

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Library and Archives Canada Cataloguing in Publication

Title: *Pleasure and panic : new essays on the history of alcohol and drugs* / edited by Dan Malleck and Cheryl Krasnick Warsh.

Names: Malleck, Dan, 1968– editor. | Warsh, Cheryl Krasnick, 1957– editor.

Description: Includes bibliographical references and index.

Identifiers: Canadiana (print) 20220213216 | Canadiana (ebook) 20220213305 |

ISBN 9780774867511 (hardcover) | ISBN 9780774867535 (PDF) |

ISBN 9780774867542 (EPUB)

Subjects: LCSH: Drugs of abuse—Canada—History. | LCSH: Drugs of abuse—United States—History.

Classification: LCC RM316 .P54 2022 | DDC 616.86—dc23

Canada

UBC Press gratefully acknowledges the financial support for our publishing program of the Government of Canada (through the Canada Book Fund), the Canada Council for the Arts, and the British Columbia Arts Council.

Set in Minion Pro and Helvetica Condensed by Apex CoVantage, LLC

Copy editor: Frank Chow

Indexer: Matthew MacLellan

Cover designer: Alexa Love

UBC Press

The University of British Columbia

2029 West Mall

Vancouver, BC V6T 1Z2

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