

Danny Kushlick

An eloquent silence

Evidence for prohibition

The government boasts of evidence-based policymaking, yet there seems to be little or no evidence available to support the current policy of prohibiting drugs

In 1996 I wrote to Michael Howard, the then Home Secretary, in an attempt to elicit from the Home Office an evidence base for the continuing policy of criminalisation of drugs. My letter asked for data that showed the benefits of prohibition.

After three-and-a-half months I received a reply outlining the government's reasons for not supporting the legalisation of cannabis and questioning the link between drugs and crime.

Similar enquiries to agencies supportive of enforcement-based policies have received now familiar responses more akin to silence than answers. Perhaps that silence is more eloquent than it might at first appear. One would have expected a policy that has been in place for more than 100 years to have at least a modicum of evidence to support it.

Cynically perhaps, I expected the Home Office to throw some figures into the ether and make an attempt to blind me with science. But four years on I am still attempting to find out if there is an evidence base to support the continuation of drugs prohibition.

As the 'New Labour' government extols its agenda as evidence-based policymaking, the yawning chasm between aims and outcomes in drug policy becomes ever more apparent. The pursuit of the elusive evidence has become a unicorn hunt.

Detective Sergeant Geoffrey

Monaghan, Deputy Secretary to the drugs sub-committee of the Association of Chief Police Officers (ACPO), told me: 'there are many areas where the research conducted does not even approximate cost/benefit analysis.'

Prohibition's effectiveness in controlling illicit drugs is more than a sacred cow. Until very recently it was a myth, with moral trappings for extra tabloid appeal. For a number of years, the evidence has been piling up to show that drugs prohibition (like US alcohol prohibition in the 1920s and '30s) has served only to make matters much worse on virtually every indicator.

Toughest laws

The UK has some of the toughest enforcement of drug laws in Europe and, according to the European Monitoring Centre for Drugs and Drug Abuse (EMCDDA), some of the highest levels of drug use and misuse. This would not seem to support drugs prohibition, so what is the basis for criminalising drugs?

'Drugs are bad, m'kay' is the mantra of the school counsellor from South Park. Until very recently moral arguments along these lines have been enough to maintain funding and political support for criminal-justice-led projects. But recent documents from the EU and the UN Drug Control Programme show that anti-drugs initiatives have, for decades, had no cost effectiveness

review – or any other review.

Pressure is now being brought to evaluate them.

In 1998 the UN General Assembly Special Session met under the banner 'A drug free world, we can do it.' World leaders from all over the globe met to reiterate their commitment to the war on drugs.

The explicit aim of the conference was the eradication of coca, opium and cannabis from planet earth within ten years. The UK Anti-Drugs Co-ordination Unit (UKADCU) pragmatically lowered its sights and aimed for a reduction of 50 per cent in the availability of cocaine and heroin in the UK by 2008.

These aims continue the long held belief that by making drugs illegal we can stop people using them and eventually get rid of them entirely. This has led to the development of species-specific fungi (with scientific and financial support from the UK) to attack coca and opium poppy crops in producer countries. This is probably the first attempt by humankind to eliminate entire plant species. Only time will tell whether this attempt contravenes biodiversity treaties.

Before the UN summit, some outspoken individuals expressed concerns about the thrust of this policy. One of them was Keith Hellawell in *The Guardian*, May 1994, when he was Chief Constable of West Yorkshire: 'The current policies are not working. We seize



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more drugs, we arrest more people, but when you look at the availability of drugs, the use of drugs, the crime committed because of and through people who use drugs, the violence associated with drugs, it's on the increase. It can't be working.'

One has to ask, what has changed since then? It is doubtful that anyone from Brixton or Bogota has noticed any significant changes.

Last December Cleveland Police Chief Barry Shaw put his name to a report, concluding that, 'if prohibition does not work, then either the consequences of this have to be accepted, or an alternative approach must be found. The most obvious alternative is the legalisation and subsequent regulation of some or all drugs.'

Meanwhile, a US DEA representative told delegates at a Release conference this year that cocaine use in the US is at its lowest since the '50s. Barry McCaffrey (the US drug czar) informed the world, after returning from the Netherlands that the murder rate there was twice that of the US (he'd accidentally added the attempted murder rate to the Dutch figures).

Political concerns

Amidst the rhetoric, concerns over the lack of evidence are shared by politicians of all hues including Jenny Tonge MP (Clare Short's shadow in the Lib Dems): 'I'm not convinced that prohibition is working. History shows us that US alcohol prohibition led to crime and drugs prohibition is probably no

different. We must take a fresh look at all the options.'

Labour MP Paul Flynn has said: 'Prohibition is totally based on moralising rather than rationality and is entirely evidence-independent. There are few areas of life where we spend such colossal amounts of money with no evidence of its effectiveness.'

This view has been echoed by Labour MP Brian Iddon as well as by Tory peer Ben Manscroft.

Is prohibition effective?

To see if prohibition is effective we need a frame of reference. There are six basic methods of distributing drugs – four of them enable regulation and control – two do not. There is plenty of evidence of the relative merits of these methods.

1. Mother Nature – freshly picked magic mushrooms, poppies, fly agaric toadstools, datura, morning glory seeds. No controls, legal or otherwise.
2. Over-the-counter sales – aspirin, paracetamol, glue, St John'swort. Limited controls at point of sale.
3. Licensed sales – beer, spirits, tobacco. Controls over licensees, and purchasers age, state of intoxication.
4. Pharmacy sales – Kaolin and morphine, codeine linctus. Controls over pharmacists.
5. Doctor's prescription – tranquillisers, anti-depressants, methadone, chlorpromazine, anti-psychotics, thalidomide, diamorphine. Controls over doctors.
6. Criminal marketplace (prohibition) – LSD, heroin, cannabis,

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speed, opium, crack. Legal bans on production, supply and possession.

From all the evidence, which of these methods produces the most effective policy? The answer depends on the criteria used to assess effectiveness.

Let us assume that there are common goals for an effective drug policy:

- Reduced drug-related ill health.
- Reduced drug-related crime.
- Extended honest and effective drug education and information.
- Extended taxation of drug trade and maximised effectiveness of government's drug-related expenditure.

● Increased regulation and control of drugs trade.

● Protected civil rights of drug users and non-users.

● Inclusion of all communities in national and international drug policy formation

How does prohibition fare on these indicators?

● Health: levels of illegal-drug-related illness, addiction, fatalities and emergency room admissions continue to rise every year. There has been a ten-fold increase in heroin users in the last ten years.

● Crime: a few hundred thousand heroin users are said to commit half of all property crime. Four million tranquilliser users commit none of it. A third of the prison population is there for committing crime to support an illegal habit.

● Regulation and control: so-called 'controlled' drugs are subject to less control than any other drugs. There are no controls on price, purity or point of distribution. Control is exercised by organised crime and unregulated dealers. The Chancellor of the Exchequer can alter the price of alcohol by a few pence on every pint, not so a ten bag.

● Expenditure and revenue: all of the £8 to £20 billion spent on street drugs is untaxed in the UK. The cost of enforcing the drug laws is over £1 billion a year.¹ The global market amounts to 8 per cent of international trade – about £300 billion each year.²

● Education and information: like sex education 20 years ago, much drugs education is based on fear with little attention given to the pleasure

or normalisation of drug use.

- Civil rights: millions of people have their human rights abused for a consumer choice to use drugs prohibited by a law which was initially enacted at the beginning of the 20th century.

- Community involvement: prohibition leaves the bulk of policy-making processes with central government criminal justice policy framers. Only at the margins can local communities make key decisions about managing drug use and misuse.

But, different indicators might find evidence of effectiveness – ACPO again: ‘... enforcement tactics can be effective in achieving stated goals ... in Operation Welwyn [a test purchase operation] in Kings Cross [London] the conviction rate is about 98 per cent.’

Professor Gerry Stimson identified some more appropriate indicators during his speech at the ‘Methadone and beyond’ conference last year: ‘An unhealthy policy stigmatises, stereotypes and marginalises. A healthy policy, on the other hand, seeks to work with people, to enable them to lead healthy lives, has respect for human dignity, and respect for human rights.’

We all have a responsibility to make it clear which indicators we wish to prioritise.

Audit enforcement

This was Commander John Grieve of the Criminal Intelligence Unit, Scotland Yard, in 1997: ‘If the [drug] problem continues advancing as it is at the moment, we’re going to be faced with some very frightening options. Either you have a massive reduction in civil rights or you have to look at some radical solutions. The issue has to be: can criminal justice solve this particular problem?’

It is a very good question and one that deserves more than a partisan, yes or no.

The National Treatment Outcome Research Study (NTORS) in 1998 showed that for every £1 spent on

treatment, we save £3 on criminal justice expenditure. Despite this we currently spend four times as much on enforcement as we do on treatment.

At the time of the publication of the UK National Drug Strategy in 1998, Dr Nicholas Dorn, then of the Institute for the Study of Drug Dependence, suggested it was high time to audit the enforcement of our drug laws: ‘Why not relate the research agenda to the objectives (or to the methodologies for achieving

sold out and forgotten his previously liberal stance, he stated that the 60-odd per cent of the drugs budget spent on enforcement (when he was appointed drug czar) had been, ‘devoted to getting it wrong.’

Again, what has changed? Is the majority of the drugs budget that we now spend on enforcement being allocated wisely? If we have any doubt – and there is enormous evidence to show this expenditure is dubious in the extreme – then we must find out if prohibition is



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them)? Whatever happened to the commitment to understand ‘what works?’ in drug enforcement?’

To fully assess the effect of enforcing drug laws we need to develop a series of key performance indicators (KPIs). Keith Hellawell’s unit has done groundbreaking work to build structures and a methodology for developing and assessing the effectiveness of central and local government initiatives. But, their choice of indicators is inadequate, the local structures are unwieldy and communities are generally excluded.

The system has failed to provide policymakers with accurate and necessary feedback. Civil servants I spoke to in recent weeks are embarrassed by the deficient baseline data they have received. They expressed a lack of confidence in local and national structures to deliver the evidence base required.

The more things change . . .

At a recent presentation on international drug policy Keith Hellawell, UK drug czar, showed that his basic criticisms of UK policy haven’t changed. Despite claims that he has

working or not.

Our ACPO spokesperson told me: ‘Facets of drug policy and enforcement are intended to inflict “harm” on offenders – “harming” their liberty and the proceeds of their crime. But policing does not aim to promote social or medical harm.’ The problem is that this is what prohibition would appear to do.

It was prohibition in the first instance that caused or exacerbated much of the harm that Drug Reference Groups, Drug Action Teams and Jack Straw are attempting to reduce.

Such evidence that we have only shows the ineffectiveness of prohibition. But there are still gaps in our knowledge. For this reason we need an independent audit of the enforcement of the drug laws – domestically and internationally.

The National Audit Office or some other independent outfit could start this within a year. Only then will we be able to fill the deafening, but eloquent, silence which emanates from those government departments that ought to know why they are spending billions of pounds of public money on drugs prohibition.

UKADCU, Home Office and UNDCP were all approached for comment on whether an evidence base exists for the prohibition of drugs. None of them replied ■

1. Straw J. *Breaking the vicious circle: Labour's proposals to tackle drug related crime*. London: Labour Party, 1996

2. International Criminal Police Organization (INTERPOL) *International illicit drug traffic 1974*. Buenos Aires: INTERPOL, 1975.