

Meeting exposes deep US-UK splits over crack threat

The City of London's high profile crack conference last October ended with UK and US speakers trading insults and the organiser's options for a London-wide campaign ignored or rejected by practically all the British speakers.

Organising the conference was an attempt to draw London together in a "Community Against Crack", but the effect was to reveal deep divisions over the seriousness of the crack threat and how to deal with it.

The Corporation of London's plan was to galvanise London-wide local authority organisations into action, with the Corporation offering to occupy a "leadership" role. From the start, this ran into trouble when Margaret Hodges, chair of the Association of London Authorities, warned against assuming the US crack experience would happen here.

Her reaction to US speakers Bob Stutman and Mark Gold was even more downbeat. We should, she said, "be rational and not just shocked" by their "perception" of the US experience.

Stutman, a former US drug

enforcement agent now in business for himself, and Dr Gold, founder of the Cocaine-800 helpline, appear to be the twin leaders of the US 'crack will get you' tendency.

They described their years in the wilderness when their warnings were ignored. Now they come armed with slides, statistics and images, and the backing of the US nation from the President down, to prove they were right and (nearly) everyone else was wrong.

Gold chronicled the times when people still believed cocaine was not a physically addictive killer, deploying a rapid-fire volley of statistical and medical crack facts to ridicule their complacency.

Barry Price, who coordinates Britain's National Drug Intelligence Unit, came closest to Stutman's line that the UK was no more immune from crack than the USA. He explained that Britain too was a materialistic society with pleasure-seeking subcultures and areas of severe deprivation. Already, he said, Afro-Caribbean

criminal groups in Britain, were "showing interest" in crack.

He did not believe Britain would experience crack problems on the US scale, but neither did he discount fears that violence would come with the drug, echoing Stutman's dubious assertion that crack-related violence was a direct drug effect rather than mainly shoot-outs between dealer groups. Britain's police were, he reassured, ready to "stamp heavily" on any areas where a major crack problem begins to emerge.

Peter Spurgeon, chief inspector of the Home Office Drugs Branch, did a quiet but thoroughly effective de-escalation job on the US-inspired focus on crack. He placed Britain's cocaine/crack problem in the context of our much bigger and present problems with other drugs and with HIV.

In an invitation to manipulate the crack panic, he believed it may yet prove positive if by "jiu-jitsu" we can spread the extra resources it might extract across the range of Britain's drug problems.

It was the next speaker, Dr Andrew Johns of St George's Hospital, who lit the blue touchpaper. For Gold and Stutman, he was the embodiment of the complacent doubters they'd now routed in the States.

Gold made an immediate counter-speech. It was "cute", he said, of Johns to ridicule the relevance of rodent experiments, but monkeys too self-administer cocaine to the point of death. It was "dangerous and naive" to say crack does not produce violence — crack lowers the aggression threshold by inducing irritability.

Stutman was no less shocked by Dr Johns' "condescending" remarks. "I thought I was back in the States in the '70s," he said afterwards (*South London Press*, 3 November 1989).

Dr Johns' crime was to make explicit the dispute underlying the day's agenda — the relevance of US experience to the UK. To deny that crack causes violence is to "deny the American experience", Stutman had said earlier, but that's exactly what Johns did. "Local responses to local problems" was his motto.

For Stutman he was doing a "disservice" to the British population, but that's not how most of the audience and the panel of experts saw it when the proceedings came to a head in the

afternoon.

Clearly frustrated, the City's town clerk chairing the session heard speaker after speaker talk about the need for more resources and organisation to be put into London's existing broad-based response to all drug problems, rather than one-off crack videos.

The private sector would, the clerk complained, be prepared to support an anti-crack video for children — one of the City's proposals — but not such a "vague concept" as just putting more money into drug services.

The day ended with an address from the Lord Mayor. He'd had to leave for part of the day and came back with a resounding attack on the "doubting Thomases" in Britain. These were the "biggest problem" because they did not believe the clear evidence about crack — such as that three shots can "effectively kill the brain".

He must have been unaware that, to judge from the previous hour and a half, most of his audience were in the Thomas family. His call to arms — "Let's all stand together in London" — begged the question of just where everyone should stand — behind him and Dr Gold, or behind Dr Johns and sympathisers, for their positions on the crack spectrum are barely within radio contact.

■ While Stutman and Gold gave the most gripping performances, it was the account given by Don Gillies of how Boston defended itself against crack that gave practical leads to the British audience.

With a booming economy, Boston's business leaders were prepared to put money into programmes to keep the city's young free of crack and fit for work. The city's leaders appear to have united this relatively small community by offering real and positive alternatives to drug-based diversions.

In 1989 the Boston Against Drugs campaign guaranteed summer jobs and/or activities, and the availability of counselling help to every youngster in the city, based largely on voluntary contributions of time and money from the city's population.

For Gillies, a community work leader in Boston, the "root causes" of addiction were despair and poverty, so the answer was to provide positive opportunities to those at risk.

Chemistry/culture dispute over 'US experience'

Faith in biochemistry as *the* reality behind drug problems underpins predictions that the UK too could suffer crack problems on a US scale.

The argument is simple: human nature and the biochemistry of the human brain are the same here as in the States; so too is the chemistry of the drug. Mix the two and the results will be similar, modulated but not significantly altered by cultural influences.

At a crack conference last October (see above), US speaker Bob Stutman explained that crack was just as likely to take off here because "there is nothing inherently different about us as human beings".

At the same meeting Dr Gold of Cocaine-800 fame placed a scientific gloss over the same argument. We now, he said, had a biochemical "concept" of how cocaine withdrawal stimulates craving for more of the drug. Later this firmed up into support for the assertion that cocaine is a "parasite that kills the host" because it "stimulates

its own demand". The implications for Britain were spelt out by Dr Tuckson, Commissioner of Public Health in Washington, describing the effects of crack to Britain's chief police officers last September.

"Cultural differences are certainly not great enough to make me suspect that you have any inherent immunity to ... this drug ... I know there is nothing particularly unique about the water ... in your country that would prevent the neurotransmitters and the pleasure centres of the brains of your citizens [being] overwhelmingly affected by the instantaneous and powerful euphoria that this drug presents."

This vision of the human animal at the mercy of chemicals inside and outside its brain relegates cultural influences to secondary status. Hence US scepticism over British claims that cultural differences offer us a degree of protection against the severity of America's drug problems.