

Substance Abuse and Violence

23rd September, 2011 at the “*European Caravan for Legality*”

My thinking on this topic is formed both by my experience as a probation officer working with offenders (many of whom used and abused illegal substances) and my training as a criminologist.

The terms “substance abuse” and “violence” conjure up dramatic and menacing images. On the production and distribution side, we think in terms of Afghan warlords controlling 90 per cent of the world’s heroin and Columbian drugs cartels fighting each other for market share. On the consumption side, we think of the crack-head or the junky literally incapable of reason, but nonetheless heavily involved in opportunistic and predatory street crime to secure the next fix. These images of drug abuse and violence are inextricably linked in the popular imagination, and the media distorts and presents an over-simplified account of reality of the “common enemy”; that is the international organized criminal, the street-level pusher and the off-his-head drug user.

It is the job of the criminologist to cut through the sensationalism and prejudice, unpick the myths and explore what lies beneath the tabloid headlines. I would like to start by exploring the extended family of psychoactive substances and violence. Then I will argue that the so-called war on drugs that has been fought ... and lost. And this allows me to offer a triple-barrelled approach to regulation and control, abuse and addiction – and the violence that goes with the latter.

[1] The extended family of psychoactive substances and violence

Most psychoactive substances that produce mind-altering effects are associated with violence. The association between crack-cocaine and street crime in New York during the 1970s and 80s is a standard example of violence between gangs and drug trafficking networks. Russia has 2 million heroin users and contaminated needles have led to over 1 million being HIV positive and others have hepatitis C; both leading to early deaths. Just as clear is the well-proven relationship between alcohol and spousal / partner abuse, as is the relationship between alcohol and dangerous driving. For instance more than 40,000 motor vehicle deaths are attributed to alcohol each year in the United States alone. The self-harm argument can be taken even further to smoking and over-eating.

This is a continuum where consumption starts by giving pleasure, which may well have beneficial consequences – for example, the anti-oxidant properties in red wine, or the pain management properties of marijuana. However, pleasure and usefulness can give way to abuse – as in the “need” for another cigarette, another drink, another “snort” or another injection; and here we enter the territory of addictions. The final part of the continuum is where repeated and excessive usage is associated with violence to others – as in the case of violent street crime to feed heroin addiction; domestic violence fuelled by over-drinking; or the various types of self harm. The mechanism of moving from pleasure, through usefulness and on to abuse, addiction and violence is the same across all mood-altering and mind-altering drugs. This has important implications for control.

[2] Losing the war on drugs

There is a need to recognise that world-wide current drug control legislation and law enforcement is no longer fit for the purpose. Dating from President Nixon in 1971 the so-called “war on drugs” has been a forty year failure of epic proportions. There is no evidence to suggest that it has curtailed crime, cut distribution or acted as a disincentive to consumption. Enforcement also has little credibility in the eyes of young people, the main users. And it has been a massive drain on the public purse.

Years of prohibition have resulted in a steady rise in the number of people regularly using drugs, which the UN currently estimates at around 250 million worldwide. Opiate use has grown by around 35 per cent in the past decade, while world consumption of cocaine and cannabis has risen 27 and 8.5 per cent respectively.

The proliferation of designer drugs makes enforcement much more difficult. For example, there are now more than 600 substances controlled under the Misuse of Drugs Act in the UK and the number looks set to increase. According to data presented to the Independent Scientific Committee on Drugs, an unprecedented 40 new substances were produced in the Far East and sold in the UK in 2010. In addition, Europol and the Lisbon-based EMCDDA identified 41 new psychoactive substances across the EU in 2010. These new drugs are appearing at an unprecedented pace that far outstrips the capacity to control them.

[3] New thinking and new approaches

The failure of the war on drugs has seen new approaches emerge that include three key components:

- Decriminalisation;
- Education or rehabilitation; and
- New forms of regulation that replace law enforcement with consumer protection legislation.

Together they hold the key to control use, limit abuse and minimise violence.

First, there are now well established examples of de-criminalisation – as in the case of Portugal, Holland and Australia; and there is evidence in all three countries that consumption has fallen. The US is very cautiously moving in the same direction.

In 2009 a study by the Cato Institute found that the number of heroin-related deaths was halved and the number of people in drug treatment programmes more than doubled. These experiments are worth studying and taken seriously. But ... and this is a big but ... decriminalisation per se is not the whole answer. It is only a useful starting point as other components need to be added-in.

Secondly, the prestigious Global Commission on Drug Policy, along with former presidents of Brazil, Mexico and Colombia as members, argued in June 2011 that governments must experiment with “legal regulation of drugs.” More importantly, the report also recommended a new emphasis on preventive drug education and treatment programmes that proved to curb

addiction rates and prevent health problems among users. Overwhelming evidence from Europe, Canada and Australia “demonstrates the human and social benefits of treating drug addiction as a health rather than criminal justice problem.” This is an important change of emphasis that is moving beyond de-criminalisation.

Thirdly, and perhaps most importantly, there is a need to re-think how best to control potentially dangerous substances. There is no question that some form of regulation is required. In May 2011 the UK’s Drug Policy Commission produced a report arguing that government considers controlling the supply of new psychoactive drugs through existing consumer protection legislation, rather than relying on the criminal law and law enforcement. Legislation would limit the number of vendors supplying controlled substances and compelling them to demonstrate that their products meet certain standards or sell them with information on dosage levels and side effects. Civil and criminal sanctions could be brought against those breaking the law. As a police spokesman said: “It might be time to say that those who seek to sell new substances should have to prove their safety, rather than that the government should have to prove otherwise.”

Drawing these threads together, decriminalisation is a necessary and useful starting point; but factoring-in education and treatment is one step better. Decriminalisation-with-rehabilitation which is also under-pinned by consumer protection legislation makes the package even stronger. In these directions substance abuse can be secured without the harms of abuse and addiction and the associated violence.

Thank you for your attention.

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