



European Humanist Federation

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RESPONSE TO EU CONSULTATION ON THE DOCUMENT “TOWARDS A STRONGER EUROPEAN RESPONSE TO DRUGS”

The European Humanist Federation (EHF) unites over 50 humanist and secularist organisations from over 20 countries across Europe. Through our members and affiliates we speak for many millions of European citizens who have no religion but support democratic, humanist and secularist values. We are recognised by the European Union as a partner in the dialogues (mandated by Article 17 TFEU) and are active in the European Parliament, the Fundamental Rights Agency, the Council of Europe and the OSCE.

The European Humanist Federation welcomes the opportunity to respond to the paper “Towards a stronger European response to drugs”¹. We believe that the opinions of civil society organisations are valuable insofar as many experts have a vested interest in the *status quo* which they might see as threatened by radical changes of policy.

This short submission will focus on general principles.

As citizens we need no expertise to see that the policies adopted now and for some decades have proved to be a gross failure. We therefore deeply regret that the paper proposes to reinforce those failed policies.

As Humanists, we support individual freedom coupled with mutual responsibility and hence we are reluctant to accept (but do not rule out) paternalistic interference by the state. We also strongly support reason as a principle in decision-making and therefore want government to adopt policies on the basis of evidence.

We therefore propose that the most serious consideration should be given to a radical change of policy based on decriminalisation, prevention, reduction of damage and respect for drug users. Supporting this approach does not mean that we ignore the risks linked to drug consumption, still less that we encourage the use of such substances. Our aim is to reduce the present serious damage to individuals and to society which is in our view caused not only by drugs themselves but also by current repressive policies.

¹ http://ec.europa.eu/justice/anti-drugs/files/com2011-6892_en.pdf

1: The failure of current criminalisation-based policies

Even a cursory examination of the evidence suffices to show that current policies on drugs are a gross failure.

Firstly, because they are ineffective and costly to the whole of society. They have not delivered a drug-free world or any substantial reduction in drug use. Fashions and market disruptions from police action swing use from one substance to another but overall drug use continues at a high level.

Present policies have been costly for society as a whole: compared to the cost of supplying maintenance doses of drugs to addicts, which is minimal, the cost of crime and of the system of legal enforcement - police, courts, prisons - is huge. The damage drugs inflict comes much less from the drugs themselves than from the crime they create and from the enforcement of misjudged laws. Especially in states that uphold the present policies most vigorously, addicts in need of cash to feed their habit are compelled into petty burglaries and other crime while huge profits flow into criminal enterprises that finance both other crime (such as people smuggling) and - more dangerously - superficially legitimate enterprises run by people with no scruples about what they do.

This approach undermines the rule of law.

It also precludes any measure of quality control, instead offering incentives for adulteration. Prohibition of drugs creates an illegal market in which dangers cannot be regulated or quality controlled and thus maximized the risks for users (HIV, hepatitis etc.).

Further, present policies inflict increasing damage on the countries where drugs are produced and through which they are trafficked. The near civil war in Columbia is coming under control just as Mexico suffers corruption, lawlessness and murder - of innocent civilians no less than of those involved in the trade - on an almost unimaginable scale. It is reported that as many as 12,000 people died there in drug-related violence in 2011.

Moreover, the escalation of penalties in some countries as each successive level of deterrence fails is morally insupportable in producing a gross disproportion of offence to the combination of the punishment itself and the damage it does to offenders' families and social networks.

Secondly, criminalisation-based policies have also increased collateral damage and insecurity for drug users. It has, after all, been demonstrated beyond doubt - both before current policies were adopted and in exceptional experiments conducted under the current regime - that it is possible for many people to live a satisfactory, stable life on maintenance doses of heroin, continuing in employment and supporting a family. It may not be a life many would envy but it is far less damaging to all concerned than a life in and out of courts and prisons, let alone one of stealing from family and friends and escalating criminal activities.

Thirdly, current policies have tended to generalise and exaggerate the dangers linked to drug consumption. It is plain that drugs are capable of doing harm to their users. Some are addictive, some are dangerous even for occasional use. Moreover, the harm done is not confined to the drug user but is often spread to family and friends, who suffer distress and often severe disruption of their lives. These are personal and social ills of a very serious nature.

But it is also true that there is a gradient from some recreational drugs used occasionally, where the risk of harm is slight, to highly addictive drugs used frequently, where harm of some kind is implicit and where at the extreme life can be at risk. Their dangers are often wildly exaggerated, as is realised by users, who continue to take them socially as a matter of choice and on a huge scale and become sceptical of “official” warnings and health education.

Fourthly, criminalisation-based policies for drugs are not coherent with political attitudes towards other addictive substances. The ground for repressive action against drugs is neither the deaths they cause nor their addictiveness, or else alcohol and tobacco would be banned. To take tobacco: smoking causes five million deaths a year and nicotine is probably the most addictive substance in common use - but tobacco is not banned. Why? Not because of the suffering that would be caused to smokers by its loss but because their addiction would rapidly create an uncontrollable black market in which - as is already true of the existing black market for branded counterfeits - cigarettes are usually more dangerous to health than any that are legally on sale under current restrictive legislation. Policies applied to other recreational drugs - most of which are much less dangerous than tobacco - are precisely those that are rejected for tobacco.

2: The need for a new political approach: decriminalisation and damage reduction

The counterproductive nature of current policies is now widely recognised. Politicians and senior police officers not infrequently speak openly of the damage being done by current practices. The Global Commission on Drug Policy, with a most eminent membership from the worlds of politics and finance as well as human rights, produced a devastating report last June which opened uncompromisingly: “The global war on drugs has failed, with devastating consequences for individuals and societies around the world”. Some states - such as the Netherlands and Portugal - have experimented with liberal regimes, eliminating much of the collateral damage that arises from criminalisation of drugs without incurring serious damage to the lives and health of drug users or other people.

These experiments point towards the sort of policy that we would wish to see adopted. We have no specific expertise and so we do not advocate any particular steps. But the direction of travel is plain: we need - the world needs - an approach that moves from enforcement of laws that seek to suppress and eliminate drug use (which the evidence shows has manifestly failed) to the sort of policy that the evidence suggests would work better: a more libertarian policy based on minimising all forms of damage, not just to drug users but to all other parties in both consuming and producing states.

This approach is coherent with the value we as humanists put on individual freedom coupled with mutual responsibility and with our wish to reduce paternalistic interference by the state. Our principles lead us to favour liberal social policies: paternalism is acceptable only if the loss of individual liberty it entails delivers a commensurate and guaranteed benefit. In our view, therefore, the freedom of choice of drug users deserves a measure of respect so long as it is a free choice. It may be objected that there should be no freedom to choose to use drugs since they bring damage to the user - but many unquestioned free choices likewise bring risk to life and limb, from smoking cigarettes to climbing mountains. Why should recreational drug use be any different, especially given the dire consequences of a repressive policy?

Such a new approach is also, of course, coherent with our advocacy of reason and evidence as

the proper basis for policy-making. The evidence of the failure of present policies is incontestable; that for a more liberal approach based on decriminalisation is suggestive but in need of further corroboration. It is plain that any new approach will therefore require careful preparation and planning, but meantime we should go no further down the present counterproductive path.

An early step should arguably be an easing of penalties for drug users. Beyond that, it seems plausible to us - though we stop short of firmly advocating it pending proper study - that staged moves towards decriminalisation and publicly controlled supply would do immeasurably less harm than present policies. We should, however, certainly oppose allowing any commercial exploitation of drugs, since this would inevitably (as at present) expand the size of the market. Any legal supply should therefore be publicly managed.

Supporting this legal route does not mean that we encourage drugs consumption. Instead, we think that public supply, perhaps at cost or only marginally more, would certainly deglamourise the habit and so make it less popular. It would allow the provision at point of sale of clear information on comparative risks, which would tend to promote (but not guarantee) a trend towards less damaging substances. We recognise that ultimately it would probably be necessary for the public supply to embrace all forms of drugs - including new ones - or else an alluring criminal market might again establish itself. The greatest care would be needed, however, to minimise 'leakage' from the public supply to existing users towards new users, though it would be unrealistic to imagine that such leakage could be prevented altogether.

Such policies should be combined with vigorously pursued public education and the most effective possible treatment to overcome addiction for those who want it.

We recognise that moves of this nature would entail a complete reversal of established policies. But these policies are not inevitable: they were the invention of the twentieth century; they have reached their present gross form only in the last few decades, and they are visibly failing.

Nevertheless, any single government considering such changes of policy will be faced almost inevitably with a hostile if irrational reaction not just from its domestic press and public but also from other countries. Moreover, there is the problem of the enshrinement of current policies in international treaties that will maybe need denunciation or amendment or repeal, but certainly discussion within the competent UN bodies (the International Narcotics Control Board, The Commission on Narcotic Drugs, UNAIDS, the World Health Organisation etc.).

It is clear therefore that the European Union is in a far better position to initiate such fresh thinking than any single government. It is less vulnerable to electoral pressure and press censure. Collective moves towards reform can more easily be presented as an evolving consensus; individual states making such moves are all too easily held up as defectors from the international consensus.

3: Conclusion and recommendations

These considerations make it seriously disappointing that in its strategy paper "Towards a Stronger European Response to Drugs" the EU shows no glimmer of fresh thinking, only a determination to press ahead with reinforcement of the failed policies of the past. We

therefore urge the EU Commission to acknowledge explicitly the limits of current policies and to take the lead in undertaking an open-minded analysis of alternative policies based on decriminalisation and reduction of damages.

The EHF strongly regrets the repressive orientation of the Commission's propositions. We obviously support the development of minimum standards of prevention, treatment and harm-reduction services. There must be work to reduce risks and damage. Information and education programmes are certainly needed to make citizens (and above all young people) aware of the health and social risks linked to drug use. Drug users must of course be provided with help to reduce harm to their health caused by illegal consumption, including supply of safe needles, substitution treatments and scientific analysis of substances on the illegal market. And people fighting their drug-dependence must be helped to reintegrate in society.

But these should not remain as now an ancillary part of the European response to drugs. They must constitute its core strategy, and they must be allied with a radical reappraisal of the failed policy of criminalisation and a serious consideration of a policy based on legal public supply as outlined above.

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