2.2 Effective drug law enforcement

Law-enforcement agencies need to focus on a broader and more balanced set of objectives, which target drug-related crime, health and social problems, instead of seeking to reduce the overall scale of the drug market.

Why is an effective law-enforcement strategy important?

The UN drug control conventions and the majority of national drug control systems are based on the belief that the strong enforcement of laws prohibiting drug production, distribution and use will eventually eliminate the supply and demand of controlled drugs, and therefore eradicate the illicit market. Police forces, specialised drug-enforcement agencies and, in some countries, even the military, have therefore played prominent roles in developing and implementing drug policies. So far, law-enforcement strategies to reduce drug demand and supply have mainly consisted of:

- production controls, including eradication and violent measures against manufacturers and growers
- operations to disrupt drug smuggling operations
- investigation and incarceration of people suspected of high-level trafficking
- arrest and punishment of people involved in retail drug markets
- arrest and punishment of people charged with possession or use of controlled drugs.

Law-enforcement tactics against producers and traffickers have been focused on physically restricting the supply of drugs to consumers, while actions against consumers have focused on deterring potential drug use through the threat of arrest.

These strategies have been unsuccessful in reducing the overall scale of illicit drug markets, and many of the activities behind these strategies have had serious negative consequences (see Section 1.3: Focusing on the harms associated with drug markets and use, for more details). In 2011, the Global Commission on Drug Policy (see Box 1) produced an analysis report showing...
that the world market for controlled drugs had grown, despite the escalation of law-enforcement measures in the past five decades. The focus of law-enforcement strategies needs to be reoriented in order to reduce drug-related harms to the health and social welfare of communities.

Box 1. Abstract from the Global Commission on Drug Policy report

‘When the United Nations Single Convention on Narcotic Drugs came into being 50 years ago, and when President Nixon launched the US government’s war on drugs 40 years ago, policy makers believed that harsh law enforcement action against those involved in drug production, distribution and use would lead to an ever-diminishing market in controlled drugs such as heroin, cocaine and cannabis, and the eventual achievement of a “drug free world”. In practice, the global scale of illegal drug markets – largely controlled by organized crime – has grown dramatically over this period’.

Limitations of current strategies

On a global scale, successive campaigns and commitments to eliminate or significantly reduce drug markets have failed to achieve their objectives, despite widespread political and financial support. Operational successes in particular countries, or against particular trafficking groups, have quickly been offset by the ‘balloon effect’ (see Box 2). The illicit activities that have been eradicated by law-enforcement efforts are quickly replaced in different areas, by different groups or with different substances, often creating greater problems than those that existed before.

Box 2. The ‘balloon effect’

The ‘balloon effect’: an intervention succeeding in suppressing a drug-related activity merely pushes the same activity to another part of the drug market. Figure 1 below illustrates this phenomenon – law-enforcement activities aimed at the Caribbean region have only resulted in new trafficking routes being created for drugs produced in Latin America for consumption in Europe to be transported through West Africa. Similar trends appear for drug production and consumption – successful law-enforcement activities that eradicate drug production in a specific region lead to an increase in production in another area (e.g. a reduction in opium poppy cultivation in Thailand led to an increase in cultivation in Afghanistan) and law-enforcement activities targeting people using a specific substance have resulted in users turning to other, sometimes more harmful, substances, such as ‘legal highs’.

Figure 1. Switching trafficking routes for cocaine, 1998–2008

- Main cocaine producers
- Cocaine trafficking (in metric tons)
- Cocaine consumption (in metric tons)

*main routes
These strategic dilemmas for policy makers do not mean that law-enforcement agencies should give up their attempts to control drug markets. Rather it means that policy makers have to adopt more effective law-enforcement strategies that minimise any ‘unintended negative consequences’ (see Section 2.1: Drug law reform).

New objectives and indicators for law enforcement

At the heart of reviewing existing drug strategies is the need to reconsider the objectives and priorities for law-enforcement action against drug markets and drug use. At a fundamental level, it is the duty of police and other law-enforcement agencies to protect the health and welfare of citizens. The assumption of many policy makers and law-enforcement managers has been that the best way to protect citizens

Box 3. Comparison of the United States’ high arrest rate and the prevalence of drug use

Figure 2 shows the estimated number of adults incarcerated for drug offences in the USA over a 30-year period. According to the graph, the numbers of incarcerated adults increased by 1,000% between 1972 and 2002. As can be seen in Figure 3, a snapshot of the prevalence of drug use among young American students shows that there is no correlation between the levels of incarceration for drug offences and the prevalence of drug use.
from drug-related harm was to focus on eradicating illicit drug markets. As a result, the success of law-enforcement strategies has been measured in terms of steps towards the goal of eradication, such as the area of crops destroyed, amount of drugs or precursors seized, and number of arrests of people who use drugs or of low-level dealers.

Unfortunately, none of these indicators has been an accurate measurement to whether the overall scale of the drug problem is being reduced. Nor are they a relevant barometer of the health and welfare of mankind, as envisaged in the Preamble of the 1961 Convention. For example, successful operations to disrupt trafficking organisations have not led to sustained reductions in drug availability, and widespread crop eradication has not led to a reduction in the overall global drug production. Similarly, there is no correlation between the number of people who use drugs arrested in a given country and trends in the prevalence of drug use (see Box 3).

Setting more effective objectives and indicators

It is no longer possible to rely on the claim that strategies and tactics focusing on seizures, arrests and punishments will solve the drug problem. Instead, law-enforcement resources should be targeted at reducing drug-related crime and health and social harms, in order to better achieve the ultimate goal of securing the health and welfare of citizens. Law-enforcement strategic objectives should be more focused on the consequences – whether positive or negative – of the drug market, rather than its scale. To evaluate the progress of law-enforcement agencies in reaching these revised objectives, new indicators need to be developed:

- **indicators of drug markets that focus more on the outcomes of law-enforcement operations:**
  - have law-enforcement operations reduced the availability of a particular drug to young people (measured by the level of use or ease of access)?
  - have law-enforcement operations affected the price or purity of drugs at the retail level? If so, has this had positive or negative effects on the drug market and people who use drugs?

- **indicators measuring drug-related crime:**
  - have the profits, power and reach of organised crime groups been reduced?
  - has the violence associated with drug markets been reduced?
  - has the level of petty crime committed by people dependent on drugs been reduced?

- **indicators measuring the law-enforcement contribution to health and social programmes:**
  - how many people dependent on drugs have law-enforcement agencies referred to drug-dependence treatment services?
  - how many people have achieved a sustained period of stability as a result of treatment?
  - has the number of overdose deaths been reduced?
  - has the prevalence of HIV and viral hepatitis among people who use drugs declined?

- **indicators evaluating the environment and patterns of drug use and dependence:**
  - how did law-enforcement activities impact on affected communities’ socio-economic environment?
  - have patterns of drug use and dependence changed as a result of law-enforcement actions?
These are possible indicators for measuring law-enforcement’s contribution to reducing the negative impacts of drug markets, and which can also be more realistically achieved. If law-enforcement strategies and activities are to be guided by a different set of objectives and indicators, it does not mean a reduction in the role of law enforcement in drug control efforts. Rather, enhancing the objectives and indicators for law-enforcement strategies will strengthen the capacity of law-enforcement agencies to develop more effective responses – particularly in the areas discussed below.

**Tackling organised crime**
Law enforcement will never be able to fully eradicate the illicit drug market (long and costly operations to disrupt one group only lead to its replacement by another). Strategies and interventions should therefore focus on curtailing the operations of those criminal organisations and individuals whose actions are causing the most harm to society, whether it be through the corruption of officials and institutions, violence against and intimidation of law-abiding citizens, or the distortion or undermining of legitimate economic activities. Actions against organised crime groups need to be based on quality intelligence, focusing on how their operations impact on society. This may lead to difficult decisions on priorities, focusing on the most harmful aspects of their operations rather than solely on seizures and arrests, and encouraging markets to be conducted away from public places or reliant on non-violent friendship networks (for more information, see Section 4.2: Reducing drug market violence). As this is a transnational issue, international co-operation will often be required.

**Law enforcement efforts should focus on:**
- Tackling organised crime
- Tackling the problems associated with retail markets
- Reducing availability to young people
- Reducing petty crime committed by people dependent on drugs
- Supporting health and social programmes.

**Tackling the problems associated with retail markets**
Retail drug markets can operate in many different ways: in public or private spaces; concentrated or dispersed; and controlled by a small number of dominant groups or a large number of social networks. Different types of retail markets can have vastly differing impacts on the levels of harm caused to the community, through their visibility, violence or intimidation. Law-enforcement efforts that focus indiscriminately on any visible aspect of the market can result in changes to the market that actually increase community harms. The most common example is where a successful operation against one trafficking organisation leads to increased violence through battles over the vacated ‘turf’, or the rise to prominence of a more violent organisation. Similarly, a raid on private premises where drug trafficking is concentrated can result in the market moving to a more public or dangerous location. While the circumstances in each area are unique, retail markets are generally more harmful when they take place in public areas, are concentrated and involve groups and individuals who are prepared to use violence, intimidation and corruption to protect their trade. Law-enforcement strategies against retail markets therefore need to be based on good intelligence about the local market, and seek to influence the shape of the market in order to minimise consequential harms (for more information, see boxes 4 and 5 and Section 4.2: Reducing drug market violence).
Box 5. Law enforcement in High Point, North Carolina, USA
Another illustration is provided by the city of High Point, North Carolina, where the police applied the Boston model. Over a long period of time, the police gathered data on young dealers in the local drug market, contacted their parents and other people likely to influence them, then approached the dealers with the information. The police made the dealers aware that they were at high risk of imprisonment if they continued their activities. This initiative resulted in fewer arrests after two years and a 25% decrease in violent and property crime. Today, the local market is no longer in operation.

Reducing availability to young people
While it is not realistic to expect law-enforcement authorities to stifle the overall availability of drugs in a particular country or city, it may be possible to influence the retail market in ways that minimise the risk of young people coming into contact with the market. Law-enforcement agencies must focus their actions on shaping the local drug market so that it is less likely to be accessible to young people. For example, they can crack down on dealing in parks and playgrounds, or encourage markets to be run from private premises.

Drug policy agencies may consider instituting the supply of drugs to children or involvement of minors in dealing as an aggravating factor in sentencing. This approach has been adopted in the Czech Republic, Estonia, Denmark and the USA, but it has often led to increasingly disproportionate sentencing. For example, in the USA, people most likely to deal near schools are usually poor and black, because they usually live in highly populated urban areas where large numbers of schools happen to be concentrated. The costs and benefits of these ‘aggravating factors’ therefore need to be carefully considered.

In a regulated market, availability to young people could be easily reduced by applying strict regulations on drugs, such as those that apply tobacco, alcohol or pharmaceutical drugs (see Box 7 of Section 2.1: Drug law reform).

Reducing petty crime committed by people dependent on drugs
The most common forms of drug-related crime are theft, fraud, commercial sex work and robbery offences committed by people dependent on drugs, to raise money to pay for drug purchases. Many countries have found that people dependent on drugs account for a significant proportion of the overall rates of certain petty crimes. Those that have implemented initiatives to identify the most active offenders and refer them to evidence-based treatment programmes for drug dependence have found that it is...
a cost-effective mechanism for reducing individual crime rates. As law-enforcement agencies come into regular contact with these offenders, these agencies are well placed to play this identification and referral role. Arrest referral schemes, court diversion schemes and prison drug treatment programmes have all been effective in moving people dependent on drugs away from a lifestyle of petty offending and drug dependence (for more information, see Section 2.3: Reducing incarceration). Law-enforcement agencies should therefore put greater emphasis on referring these people to services and treatment rather than on the more expensive process of prosecution and imprisonment.

**Supporting health and social programmes**

Because of the current drug control regime, people who use drugs are often forced to live on the margins of society. Poverty and alienation are often contributing factors in the initiation to drug use and development of drug dependence (harsh living conditions and emotional trauma can increase vulnerability to drug dependence) and, in turn, drug dependence exacerbates these problems.

Some governments have adopted drug policies that tend to increase social exclusion. Arresting and punishing people who use drugs, or denying them access to employment and education, for example, can add to the marginalisation they already experience. In these circumstances, drug use can result in significant health risks, including overdose and blood-borne infections such as hepatitis or HIV. In many countries, the HIV epidemic is driven by the sharing of contaminated injection equipment, and public health authorities are engaged in a global response to scale-up HIV prevention services targeted at people who use drugs. Many of these measures, such as the distribution of sterile needles and syringes, work within the context of continuing drug use, and seek to keep people who use drugs stay alive and healthy, while encouraging them to consider treatment options. Many law-enforcement agencies have been reluctant to support these initiatives, as they mistakenly believe them to be condoning or perpetuating drug use.

The lack of clear support from law-enforcement agencies for social and health initiatives targeting people who use drugs is a serious policy barrier. Law-enforcement agencies can and should support the referral of people who use drugs to appropriate health and social services, in order to improve public health, specifically in efforts to reduce HIV transmission and overdose deaths. As police and court officials, in particular, come into regular contact with people who are vulnerable to HIV infections, they can play an important role in the provision of advice and information, facilitating access to harm reduction services as well as rapid responses to overdoses. In cases where law-enforcement and health agencies have worked together towards common objectives, they have been able to demonstrate clear success in reducing HIV transmission and overdose death rates (see Box 6).

**Box 6. The ‘Four pillars policy’ in Switzerland**

In 1994 the Swiss government adopted a new drug strategy that integrated public security, health and social cohesion objectives. It comprised four pillars: prevention, treatment, harm reduction and law enforcement. The strategy was developed on the basis of consultations with members from the law-enforcement, public health and community sectors. The new policy involves prescribing opiates (notably heroin) to treat dependence on opiates. The progressive implementation of this policy resulted in a significant decrease in problems related to drug consumption. First, heroin use plunged radically between 1990 and 2005. Second, the policy brought about a significant reduction of overdoses and deaths indirectly related to drug use, such as from AIDS-related illnesses and hepatitis. Between 1991 and 2004, the drug-related death toll fell by more than 50%. Third, levels of injection drug use-related HIV infections were reduced by 80% within 10 years. Finally, the frequency of crimes against property and hard-drug trafficking by users on the heroin prescription programmes dropped by 90%, and shoplifting by 85%.15
Recommendations

1) Law-enforcement strategies should be reviewed and refocused, moving away from a singular focus on seizing drugs and arresting users towards working in partnership with relevant agencies to reduce health and social harms.

2) A new set of strategic objectives and success indicators for law enforcement should be adopted.

3) Actions against criminal organisations must be based on quality intelligence, and resources concentrated on the most harmful aspects of organised crime rather than on seizures or arrests of low-level dealers.

4) Law-enforcement strategies against retail markets must be based on good intelligence assessments of local market dynamics, and seek to shape these markets in order to minimise their consequential harms.

5) Policies and strategies that minimise the potential for young people to come into contact with the illicit drug market need to be developed. This can be achieved if enforcement actions are implemented against local drug markets in a way that shapes the market so that it is less accessible to young people.

6) Evidence-based and cost-effective mechanisms for referral of drug offenders to appropriate services, such as community-based drug dependence treatment services are needed. Law-enforcement agencies can identify and refer dependent drug users to these facilities.

Key resources


European Monitoring Centre for Drugs and Drug Addiction (2007), Drug use and related problems among very young people (under 15 years old) (Lisbon: European Monitoring Centre on Drugs and Drug Addiction), http://www.emcdda.europa.eu/attachements.cfm/att_44741_EN_TDSl07001ENC.pdf

Jelsma, M. (2009), Legislative innovation in drug policy (Latin American Initiative on Drugs and Democracy), http://www.drogasedemocracia.org/Arquivos/Legislative%20Innovation_Martin_Eng.pdf


### Endnotes


9. Closed retail markets are often associated with a reduced level of drug-related harms. Law-enforcement efforts do have the potential to ‘train’ markets to become closed.


12. These drug-related crimes are usually specific to the different types of illicit drugs: Bennet, T. & Holloway, K. (2009), 'The causal connection between drug misuse and crime', *The British Journal of Criminology*, 49: 513–531, [http://bjc.oxfordjournals.org/cgi/content/abstract/aaz014](http://bjc.oxfordjournals.org/cgi/content/abstract/aaz014)

13. See, for example, Hughes, C.H. & Stevens, A. (2010), 'What can we learn from the Portuguese decriminalization of illicit drugs?', *British Journal of Criminology*, 50: 999–1022. However, this approach has not yet been effective in reducing the overall crime rates. This suggests that the latter will be more influenced by wider social factors (such as inequality, poverty or social marginalisation) than by the drug markets. Similar effects have been observed in China. See: Yin, W., Hao, Y., Sun, X., et al (2010), 'Scaling up the national methadone maintenance treatment program in China: achievements and challenges', *The International Journal of Epidemiology*, 39(2): 29–37
