

Policy principle 2:

Drug policies should focus on reducing the harmful consequences of illicit drug use and markets, rather than on reducing their scale

Governments have focused much of their drug control efforts on reducing the scale of drug markets through punitive means, believing that this would eventually reduce drug-related harms.⁷ At the time of the drafting of the UN drug conventions, these health and social objectives were assumed to be best achieved through stopping the illicit supply of drugs, and incarcerating people who use, produce or supply drugs. These attempts have been unsuccessful: despite all the political and financial investment in repressive policies over the last 50 years, internationally controlled substances are more available and more widely used than ever before.⁸ Theoretically, reductions in the scale of drug markets could lead to a reduction in harms, but in practice the opposite has generally occurred. For example, successful operations against a dealing network can increase violence as competing gangs fight over the vacant 'turf';⁹ and an action against a particular substance can lead people to switch to substances that may be more harmful.¹⁰

Government data also show that there is very little correlation between the numbers of arrests, seizures or crops eradicated, and the price and purity of drugs on the street.¹¹ The correlation is even more absent for outcomes that matter to people and communities – such as better public health, increased security, and community well-being. Simply

pursuing the long-term objective of a 'drug-free society' is not a sustainable policy and has led to the misdirection of attention and resources towards ineffective programmes, while the health and social programmes that have been proven to reduce drug-related harms are starved of resources and political support.

In consumer markets, the mass arrest of people who use drugs does not decrease drug use, but does cause or exacerbate health and social problems. Criteria such as the number of arrests, or of clampdowns on particular drugs or dealing networks, are therefore of little relevance to the achievement of the desired outcomes. Policies should aim instead to reduce drug-related crime, improve community safety, and reduce drug-related health problems such as overdoses, HIV and hepatitis C infections.

Similarly, crop eradication campaigns in producing countries do not stop the flow of drugs into consumer markets, but do lead to significant social, economic, health and environmental problems in the communities where crops destined for the illicit drug market are cultivated. The process measures applied in the field of supply reduction – the size of areas of crops eradicated, and levels of drug production – are also poor indicators of achievement. As these eradication programmes have ebbed and flowed in their local



Credit: Adam Schaffer, WOLA

Field of coca crops fumigated in Guaviare, Colombia

Box 1 What success looks like: Outcome indicators for national drug strategies

When understanding the effectiveness of different drug strategies and programmes, it is important to be clear from the outset on the objectives that the policy is designed to achieve. Drug policy is best viewed as a contributor to wider social goals under the headings of health, development and security. Governments are encouraged to articulate a set of objectives and outcome indicators that are appropriate to their particular circumstances, but a general guide to possible domains would include:

- **Health** – A reduction in the number of deaths from overdose; a reduction in drug-related HIV or hepatitis infections; a reduction in the number of citizens experiencing drug dependence; and better management of pain relief and palliative care through improved access to essential medicines.
- **Human rights** – The elimination of the imposition of the death penalty for drug offences; the closure of compulsory centres for people who use drugs; improved access to justice for victims of human rights abuses linked to drug law enforcement operations; improved access to gender- and youth-sensitive health and social services.

- **Development** – Strengthened governance and legitimate authorities; the development of licit economies; relief of poverty in areas of concentrated drug production, trafficking or retail sale – via rural and urban development strategies that encompass access to education, employment, land, social support, improved infrastructure and better access to licit markets, etc.
- **Security** – A reduction in drug market-related violence; a reduction in the power and reach of organised crime; a reduction in corruption and money laundering; a reduction in internal displacements related to supply reduction measures; a reduction in the numbers and proportion of people imprisoned for minor, non-violent drug offences; a reduction in property and violent crimes associated with drug dependence – with a focus of law enforcement efforts on the most harmful aspects of the illicit drug market, rather than on low-level and non-violent dealers, people who use drugs and vulnerable farming communities.

Any drug control strategy or programme should be explicitly evaluated on the extent to which they achieve (or contribute to) these outcomes.

impact, the overall market for the drugs produced remains largely unaffected, as the areas and methods of production improve and move around in response to law enforcement action.

People involved in the lowest levels of the trafficking chain have also borne the greatest costs of prohibitionist policies. These policies have led to mass incarceration and have exacerbated poverty and social exclusion – disproportionately affecting women involved in the illicit market as drug mules,¹² as well as for youth and ethnic minorities (see Chapter 3.4 for more details).¹³

In this context, policies should aim to reduce violence by targeting the most violent and damaging aspects of illicit drug markets instead of focusing on those at the lowest levels of the drug chain. Drug policies should also seek to improve the social and economic development of vulnerable and marginalised communities.

The concept of harm reduction – best defined as a set of policies, programmes and practices that aim

primarily to reduce the harms of drug use without necessarily reducing drug consumption itself¹⁴ – has been shown to be effective in improving health and social outcomes for people who use drugs, and should be applied to all aspects of drug policy. Policy makers should be explicit in articulating the specific harms that they are aiming to reduce; should design and provide resources for policies and programmes that have a reasonable evidence base for reducing these harms; and should evaluate them to ensure that they deliver the desired outcomes.¹⁵

This requires moving away from law enforcement process measures (such as arrests and seizures) to indicators of actual harm – such as levels of violent crime and corruption associated with drug trafficking, social and economic development indicators for communities in drug cultivation areas, and improvements in health and social-economic welfare.