

By Ethan Nadelmann

# DRUGS

Prohibition has failed—again. Instead of treating the demand for illegal drugs as a market, and addicts as patients, policymakers the world over have boosted the profits of drug lords and fostered narcostates that would frighten Al Capone. Finally, a smarter drug control regime that values reality over rhetoric is rising to replace the “war” on drugs.

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## “The Global War on Drugs Can Be Won”

**No, it can't.** A “drug-free world,” which the United Nations describes as a realistic goal, is no more attainable than an “alcohol-free world”—and no one has talked about that with a straight face since the repeal of Prohibition in the United States in 1933. Yet futile rhetoric about winning a “war on drugs” persists, despite mountains of evidence documenting its moral and ideological bankruptcy. When the U.N. General Assembly Special Session on drugs convened in 1998, it committed to “eliminating or significantly reducing the illicit cultivation of the coca bush, the cannabis plant and the opium poppy by the year 2008” and to “achieving significant and measurable results in the field of demand reduction.” But today, global production and consumption of those drugs are roughly the same as they were a decade ago; meanwhile, many producers have become more efficient, and cocaine and heroin have become purer and cheaper.

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It's always dangerous when rhetoric drives policy—and especially so when “war on drugs” rhetoric leads the public to accept collateral casualties that would never be permissible in civilian law enforcement, much less public health. Politicians still talk of eliminating drugs from the Earth as though their use is a plague on humanity. But drug control is not like disease control, for the simple reason that there's no popular demand for smallpox or polio. Cannabis and opium have been grown throughout much of the world for millennia. The same is true for coca in Latin America. Methamphetamine and other synthetic drugs can be produced anywhere. Demand for particular illicit drugs waxes and wanes, depending not just on availability but also fads, fashion, culture, and competition from alternative means of stimulation and distraction. The relative harshness of drug laws and the intensity of enforcement matter surprisingly little, except in totalitarian states. After all, rates of illegal drug use in the United States are the same as, or higher than, Europe, despite America's much more punitive policies.

High in demand, Prohibition does little to stem the desire for drugs.



## “We Can Reduce the Demand for Drugs”

**Good luck.** Reducing the demand for illegal drugs seems to make sense. But the desire to alter one’s state of consciousness, and to use psychoactive drugs to do so, is nearly universal—and mostly not a problem. There’s virtually never been a drug-free society, and more drugs are discovered and devised every year. Demand-reduction efforts that rely on honest education and positive alternatives to drug use are helpful, but not when they devolve into unrealistic, “zero tolerance” policies.

As with sex, abstinence from drugs is the best way to avoid trouble, but one always needs a fallback strategy for those who can’t or won’t refrain. “Zero tolerance” policies deter some people, but they also dramatically increase the harms and costs for those who don’t resist. Drugs become more potent, drug use becomes more hazardous, and people who use drugs are marginalized in ways that serve no one.

The better approach is not demand reduction but “harm reduction.” Reducing drug use is fine, but it’s not nearly as important as reducing the death, disease, crime, and suffering associated with both drug

misuse and failed prohibitionist policies. With respect to legal drugs, such as alcohol and cigarettes, harm reduction means promoting responsible drinking and designated drivers, or persuading people to switch to nicotine patches, chewing gums, and smokeless tobacco. With respect to illegal drugs, it means reducing the transmission of infectious disease through syringe-exchange programs, reducing overdose fatalities by making antidotes readily available, and allowing people addicted to heroin and other illegal opiates to obtain methadone from doctors and even pharmaceutical heroin from clinics. Britain, Canada, Germany, the Netherlands, and Switzerland have already embraced this last option. There’s no longer any question that these strategies decrease drug-related harms without increasing drug use. What blocks expansion of such programs is not cost; they typically save taxpayers’ money that would otherwise go to criminal justice and healthcare. No, the roadblocks are abstinence-only ideologues and a cruel indifference to the lives and well-being of people who use drugs.

## “Reducing the Supply of Drugs Is the Answer”

**Not if history is any guide.** Reducing supply makes as much sense as reducing demand; after all, if no one were planting cannabis, coca, and opium, there wouldn't be any heroin, cocaine, or marijuana to sell or consume. But the carrot and stick of crop eradication and substitution have been tried and failed, with rare exceptions, for half a century. These methods may succeed in targeted locales, but they usually simply shift production from one region to another: Opium production moves from Pakistan to Afghanistan; coca from Peru to Colombia; and cannabis from Mexico to the United States, while overall global production remains relatively constant or even increases.

The carrot, in the form of economic development and assistance in switching to legal crops, is typically both late and inadequate. The stick, often in the form of forced eradication, including aerial spraying, wipes out illegal and legal crops alike and can be hazardous

to both people and local environments. The best thing to be said for emphasizing supply reduction is that it provides a rationale for wealthier nations to spend a little money on economic development in poorer countries. But, for the most part, crop eradication and substitution wreak havoc among impoverished farmers without diminishing overall global supply.

The global markets in cannabis, coca, and opium products operate essentially the same way that other global commodity markets do: If one source is compromised due to bad weather, rising production costs, or political difficulties, another emerges. If international drug control circles wanted to think strategically, the key question would no longer be how to reduce global supply, but rather: Where does illicit production cause the fewest problems (and the greatest benefits)? Think of it as a global vice control challenge. No one expects to eradicate vice, but it must be effectively zoned and regulated—even if it's illegal.

## “U.S. Drug Policy Is the World's Drug Policy”

**Sad, but true.** Looking to the United States as a role model for drug control is like looking to apartheid-era South Africa for how to deal with race. The United States ranks first in the world in per capita incarceration—with less than 5 percent of the world's population, but almost 25 percent of the world's prisoners. The number of people locked up for U.S. drug-law violations has increased from roughly 50,000 in 1980 to almost 500,000 today; that's more than the number of people Western Europe locks up for everything. Even more deadly is U.S. resistance to syringe-exchange programs to reduce HIV/AIDS both at home and abroad. Who knows how many people might not have contracted HIV if the United States had implemented at home, and supported abroad, the sorts of syringe-exchange and other harm-reduction programs that have kept HIV/AIDS rates so low in Australia, Britain, the Netherlands, and elsewhere. Perhaps millions.

And yet, despite this dismal record, the United States has succeeded in constructing an international drug prohibition regime modeled after its

own highly punitive and moralistic approach. It has dominated the drug control agencies of the United Nations and other international organizations, and its federal drug enforcement agency was the first national police organization to go global. Rarely has one nation so successfully promoted its own failed policies to the rest of the world.

But now, for the first time, U.S. hegemony in drug control is being challenged. The European Union is demanding rigorous assessment of drug control strategies. Exhausted by decades of service to the U.S.-led war on drugs, Latin Americans are far less inclined to collaborate closely with U.S. drug enforcement efforts. Finally waking up to the deadly threat of HIV/AIDS, China, Indonesia, Vietnam, and even Malaysia and Iran are increasingly accepting of syringe-exchange and other harm-reduction programs. In 2005, the ayatollah in charge of Iran's Ministry of Justice issued a *fatwa* declaring methadone maintenance and syringe-exchange programs compatible with *sharia* (Islamic) law. One only wishes his American counterpart were comparably enlightened.

## “Afghan Opium Production Must Be Curbed”

**Be careful what you wish for.** It’s easy to believe that eliminating record-high opium production in Afghanistan—which today accounts for roughly 90 percent of global supply, up from 50 percent 10 years ago—would solve everything from heroin abuse in Europe and Asia to the resurgence of the Taliban.

But assume for a moment that the United States, NATO, and Hamid Karzai’s government were somehow able to cut opium production in Afghanistan. Who would benefit? Only the Taliban, warlords, and other black-market entrepreneurs whose stockpiles of opium would skyrocket in value. Hundreds of thousands of Afghan peasants would flock to cities, ill-prepared to find work. And many Afghans would return to their farms the following year to plant another illegal harvest, utilizing guerrilla farming methods to escape intensified eradication efforts. Except now, they’d soon be competing with poor farmers elsewhere in Central Asia, Latin America, or even Africa. This is, after all, a global commodities market.

And outside Afghanistan? Higher heroin prices typically translate into higher crime rates by addicts. They also invite cheaper but more dangerous means of consumption, such as switching from smoking to injecting heroin, which results in higher HIV and hepatitis C rates. All things considered, wiping out opium in Afghanistan would yield far fewer benefits than is commonly assumed.

So what’s the solution? Some recommend buying up all the opium in Afghanistan, which would cost a lot less than is now being spent trying to eradicate it. But, given that farmers somewhere will produce opium so long as the demand for heroin persists, maybe the world is better off, all things considered, with 90 percent of it coming from just one country. And if that heresy becomes the new gospel, it opens up all sorts of possibilities for pursuing a new policy in Afghanistan that reconciles the interests of the United States, NATO, and millions of Afghan citizens.

## “Legalization Is the Best Approach”

**It might be.** Global drug prohibition is clearly a costly disaster. The United Nations has estimated the value of the global market in illicit drugs at \$400 billion, or 6 percent of global trade. The extraordinary profits available to those willing to assume the risks enrich criminals, terrorists, violent political insurgents, and corrupt politicians and governments. Many cities, states, and even countries in Latin America, the Caribbean, and Asia are reminiscent of Chicago under Al Capone—times 50. By bringing the market for drugs out into the open, legalization would radically change all that for the better.

More importantly, legalization would strip addiction down to what it really is: a health issue. Most people who use drugs are like the responsible alcohol consumer, causing no harm to themselves or anyone else. They would no longer be the state’s business. But legalization would also benefit those who struggle with drugs by reducing the risks of overdose and disease associated with unregulated products, eliminating the need to obtain drugs

from dangerous criminal markets, and allowing addiction problems to be treated as medical rather than criminal problems.

No one knows how much governments spend collectively on failing drug war policies, but it’s probably at least \$100 billion a year, with federal, state, and local governments in the United States accounting for almost half the total. Add to that the tens of billions of dollars to be gained annually in tax revenues from the sale of legalized drugs. Now imagine if just a third of that total were committed to reducing drug-related disease and addiction. Virtually everyone, except those who profit or gain politically from the current system, would benefit.

Some say legalization is immoral. That’s nonsense, unless one believes there is some principled basis for discriminating against people based solely on what they put into their bodies, absent harm to others. Others say legalization would open the floodgates to huge increases in drug abuse. They forget that we already live in a world in which psychoactive

drugs of all sorts are readily available—and in which people too poor to buy drugs resort to sniffing gasoline, glue, and other industrial products, which can be more harmful than any drug. No, the greatest downside to legalization may well be the fact that

the legal markets would fall into the hands of the powerful alcohol, tobacco, and pharmaceutical companies. Still, legalization is a far more pragmatic option than living with the corruption, violence, and organized crime of the current system.

## “Legalization Will Never Happen”

**Never say never.** Wholesale legalization may be a long way off—but partial legalization is not. If any drug stands a chance of being legalized, it’s cannabis. Hundreds of millions of people have used it, the vast majority without suffering any harm or going on to use “harder” drugs. In Switzerland, for example, cannabis legalization was twice approved by one chamber of its parliament, but narrowly rejected by the other.

Elsewhere in Europe, support for the criminalization of cannabis is waning. In the United States, where roughly 40 percent of the country’s 1.8 million annual drug arrests are for cannabis possession, typically of tiny amounts, 40 percent of Americans say that the drug should be taxed, controlled, and regulated like alcohol. Encouraged by Bolivian President Evo Morales, support is also growing in Latin America and Europe for removing coca from international antidrug conventions, given the absence of any credible health reason for

keeping it there. Traditional growers would benefit economically, and there’s some possibility that such products might compete favorably with more problematic substances, including alcohol.

The global war on drugs persists in part because so many people fail to distinguish between the harms of drug abuse and the harms of prohibition. Legalization forces that distinction to the forefront. The opium problem in Afghanistan is primarily a prohibition problem, not a drug problem. The same is true of the narcoviolence and corruption that has afflicted Latin America and the Caribbean for almost three decades—and that now threatens Africa. Governments can arrest and kill drug lord after drug lord, but the ultimate solution is a structural one, not a prosecutorial one. Few people doubt any longer that the war on drugs is lost, but courage and vision are needed to transcend the ignorance, fear, and vested interests that sustain it. **FP**

### [ Want to Know More? ]

**Drugpolicy.org**, the Web site of the Drug Policy Alliance, offers statistics, arguments, and information about drug policies worldwide. Ethan Nadelmann and Peter Andreas examine the politics of global crime control in *Policing the Globe: Criminalization and Crime Control in International Relations* (New York: Oxford University Press, 2006).

Joseph Westermeyer’s classic article, “**The Pro-Heroin Effects of Anti-Opium Laws in Asia**” (*Archives of General Psychiatry*, Vol. 33, No. 9, September 1976), proved how banning opium in Asia stimulated heroin production and use. For up-to-date analysis on the extent of drug use around the world, see the Web sites of the **Transnational Institute** and the **International Harm Reduction Development Program**.

In *Illicit: How Smugglers, Traffickers, and Copycats Are Hijacking the Global Economy* (New York: Doubleday, 2005), *FP* Editor Moisés Naím documents the ways in which globalization bolsters the illegal trade of drugs and other contraband products. Christopher Hitchens proposes the end of the U.S. narcotics prohibition in “**21 Solutions to Save the World: Legalize It!**” (*FOREIGN POLICY*, May/June 2007).

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