

The War on Drugs has been lost. It's time to try something else

About 15 years ago, Portugal began treating drugs as a medical rather than mainly criminal problem. In that time, drug use has declined by 75 per cent

by Conrad Black



The principal initiative undertaken by the Trudeau government has been the legalization of marijuana under tight rules still being elaborated. I have had a good deal of exposure to the American policy of the so-called War on Drugs, from my time dealing with many pushers and users as students for secondary school matriculation when I was in prison in the United States. I had long been a skeptic about the War on Drugs, which has cost the United States over a trillion dollars and caused the imprisonment of more than two million people (but very few of the kingpins), all while illegal drug use has increased appreciably. The price of drugs has not risen much; supply has not been strained, despite increased use among a growing population.

It is an immense industry, largely in the hands of the most dangerous criminal gangs and syndicates at every stage of growth, refinement and transport. Mexico and Colombia have been conducting virtual civil wars with the drug gangs, and "drug-busts" in Mexico sometimes involve armoured vehicles and helicopters on both sides, and at one such occasion several years ago, after a two-day pitched battle, the gang-leader escaped in a submarine. The Colombian drug war entirely subsumed a long-running Marxist rural insurrection, which was effectively tucked under the wing of the drug cartel and has

pursued its relatively quaint and pastoral ambitions with the bemused protection of the drug-lords. It has also become much easier to make drugs by assembling legally available medicines in the United States and blending and refining them carefully.

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The War on Drugs in the United States has not been a war at all. Of course, the greatest military power in the world could prevent drugs entering the country if it deployed military units along its borders and in air space adjacent to it in adequate force. The inspection system for incoming people by every method could be made much tighter, but that would require the deployment of far more personnel to prevent unreasonable delays for legitimate commerce and visitors. In practice, the "war" has consisted of putting bone-cracking pressure on Colombia and Mexico and leaving the U.S. borders relatively porous, while practically ignoring middle class and academic drug abuse and conducting endless trolls through poor Latin and African-American districts and inflicting draconian sentences on street-corner pushers who can easily be replaced and rarely include senior drug-dealers.

The result has been to increase the number of incarcerated people over 40 years in the United States by a multiple of five to six, at immense cost to the country (almost \$100 billion dollars annually), without reducing drug use at all. The United States now has six to 12 times as many incarcerated people per capita as other flourishing large democracies (Australia, Canada, France, Germany, Japan and the United Kingdom); conviction rates in prosecutions generally have risen from 70 per cent to 99 per cent, because of the tilting of criminal procedural rules in the prosecutions' favour, and the endless drag-nets for street corner pushers in low-income areas. (The U.S. has five per cent of the world's population and 25 per cent of its incarcerated people.) U.S. deaths from

drugs last year were 64,000, compared to 40,000 deaths in automobile accidents and more than the total of all American military deaths for the last 65 years (including Vietnam and all Middle East conflicts where the U.S. has been engaged).

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This intensified focus on drugs began about 45 years ago. About 15 years ago, Portugal embarked on a bold experiment in the same field, by treating drugs as a medical rather than mainly criminal problem. Dealers are still imprisoned when convicted, but users are sent to a "Dissuasion Commission," which generally prescribes treatment, including free access to substitutes and aids that assist in breaking down addiction. While not legalized, drug possession is only subject to a small fine and obligatory attendance before the Dissuasion Commission, whose task is to prevent the casual user from becoming an addict and help the addict kick the habit, and stabilize the lives of those in treatment. A vast public education program has been conducted on the dangers of drug use, as part of an attack on the problem on all fronts: interdiction and punishment of supply, medical treatment and supervised registration and treatment for users.

Trucks dispensing methadone (an opioid substitute and long part of most anti-addiction treatment programs) cruise the streets of Lisbon and other cities, providing free dispensation to those trying to get clear of drugs. This different approach assures that all abusers of hard drugs in Portugal receive treatment, where the total in the U.S. of those receiving treatment is only about 10 per cent. Most Portuguese in treatment are able to maintain jobs and relatively stable personal lives, while analogous people in the United States receive lengthy sentences in prisons where there is no official effort to help them kick the drug habit (and drugs are reasonably available in most U.S. prisons), and

they are not trained to make a living in a legal and gainful occupation when they are finally released.

In Portugal, trucks cruise the streets and freely dispense methadone to all those trying to get clear of drugs

The Portuguese plan focused on specific high-risk groups such as prostitutes, young unemployed, and specific immigrant ethnic groups. Decriminalization also removed the fear of incarceration from those who might otherwise seek help in combating their addiction. Naturally, Portugal has spared itself the vast expense of the law enforcement process the United States shoulders in the implementation of its drug policy, and Portugal only spends about \$10 per citizen per year on its entire drug program. The entire anti-drug effort is made easier by the fact that Portugal is a country with tight gun control, which is frequently a complicating factor in the United States where everyone who wants a firearm can easily lay hands on one. Portugal is, it need hardly be emphasized, a much smaller and less complicated country than the United States, but the fact that drug use in its population has declined by 75 per cent in 15 years is very impressive.

Canada has, with other drugs than marijuana, taken a path much closer to the Americans, and the former Harper government stiffened penalties for all drug offenses. Portugal has not taken the logical next step of shouldering out the dealers and taking over controlled distribution of drugs itself. This is the path that Canada and the American states of Colorado and Oregon have embarked upon with marijuana.

The Canadian motive seems to have been philosophical, where the American states seem to be chiefly concerned with thirst for revenue. In a similar evolution, western governments have, as their desire to buy popularity with more extensive services has combined with political fear of general tax increases,

moved from discouragement of alcoholic beverages and gambling, to feeding their own addiction to tax and spend by extracting greater revenue from those sources. This is the strongest possible motive for greater indulgence of drugs, but the Portuguese experiment shows that it is good policy on its own merits. As it prepares the rules for marijuana sales and use, the federal government should examine the Portuguese model, as well as the disastrous drug war in the U.S.

A final note: the Portuguese program was designed by Antonio Guterres, now secretary-general of the United Nations. He will find chronic addiction to bad habits there too.

First published in the