

# Adding nuance to drug control: Britain shouldn't be afraid to move away from the flailing international drug regime

**John Collins** sets the current hegemonic drug prohibition regime in its historical context and suggests that Britain has an opportunity to radically rethink its attachment to this failed model, and begin instituting more pragmatic, beneficial and cost effective policies.



The [House of Commons Select Committee on drug policy](#) provides Britain with an excellent opportunity to break with past failures and embark on a new set of drug policies that are grounded in genuine science and pragmatism. For much of the past century, the world has been governed by a drug prohibition regime that has largely pursued a supply-centric and criminalisation approach. In spite of widespread calls for policy experimentation and change, this regime and its treaty structure has served to deter both of these in the name of 'international legal obligations.'

In actuality, this regime's model has failed to reduce the supply of drugs, their potential for abuse or their negative social outcomes. In many ways this prohibitionist model has created its own problems, such as perversely ensuring a lucrative black market in which, as Milton Friedman once argued, "the role of the government is to protect the drug cartel."

Meanwhile, far from minimising the violence accruing to society from drug use, an International Centre for Science and Drug Policy (ICSDP) [study](#) states that "the existing evidence strongly suggests that drug law enforcement contributes to gun violence and high homicide rates."

To understand what drives current drug policy in the UK, one needs to understand the story of the evolution and survival of its governing norms.

## Historical Context

The forces which installed strict supply control as the governing and unquestioned paradigm for international efforts are legion and complex. They included: geostrategic posturing; economic self-interest; bureaucratic inertia and a moralism that tended towards Manichaeism.

Leveraging British economic self-interest after WWI and geopolitical uncertainty during the interwar years, the US was able to exploit divisions among the Old Powers and enmesh its conception of drug control within the developing international regime – then administered by the League of Nations. The tectonic power shifts that occurred during WWII ensured the final blows to the old system. America used its wartime leverage to extract a promise from Britain and the Netherlands to end their colonial monopolies and institute complete prohibition on opium smoking in their Far Eastern territories.

The strict control model would be codified in the United Nations Single Convention (1961) which would then set the basis for the next half century of control. By this stage, however, the failures of the supply control model – failures that many had predicted in 1909 and beyond – were readily apparent, but easily ignored or dismissed by a control regime whose interests had become inextricably tied to the supply-centric norm.

The US, having found its stride in its decades long battle to universalise a strict supply control approach, had little time for such nuances. Furthermore, anything which addressed issues of demand (short of an increasing emphasis on incarceration), was viewed as an attempt to water

down control efforts and therefore to be avoided at all costs. As such, the regime evolved a vast overemphasis on supply issues while never developing an adequate ability to address issues relating to demand.

## Going Forward

Since the ratification of the Single Convention the regime has been buttressed by a number of mutually reinforcing aspects. In particular, individual states have continued to adhere because they were part of an intact treaty structure; meanwhile the treaty structure remained intact because individual states continued to adhere. This feature was then reinforced by aggressive American drug diplomacy using a robust arsenal of carrots and sticks.

Now the regime is wearing at the seams and risks being pulled apart by centrifugal forces. Most apparent is the fact that states in Latin America are beginning to [seriously buck](#) against it. Meanwhile, these states will only draw encouragement as the United States pursues a less bombastic foreign policy and makes apparent its own contempt for international laws which conflict with its emerging domestic desires – witness for instance individual states’ continued drives towards varying forms of Marijuana regulation.

Against this backdrop Britain shouldn’t be afraid to chart a new path in its own domestic controls. An historical appraisal of the regime shows it as an anachronistic and simplistic approach to one of the most dizzyingly complex social issues. The current model of control arose in response to opium (and to a far lesser extent coca) and their derivatives. As the array of drugs, and their societal interaction, has grown more complex, regime advocates have assumed a strong defensive posture against any shift away from a criminalisation and supply-centric model. Meanwhile they have failed to address the role of drugs in some of the great public health crises of recent decades and have done little to thwart the spread of diseases like HIV/AIDS and Hepatitis.

As I have written [elsewhere](#) “the regime has survived two world wars and the geopolitical tides of the twentieth century. In the pantheon of international cooperation it certainly qualifies as one of the great survivors.” Nevertheless, It will be forced to change when states outside the traditional circle of European [pragmatists](#) begin to seriously question its foundations. Both Britain’s current [Prime Minister](#) and [Deputy Prime Minister](#) are on record as accepting the need for a radical rethink and experimentation in this field. Britain can and should use the Select Committee as an opportunity to begin instituting more pragmatic, beneficial and cost effective drug policies instead of hiding behind the strictures of failed international efforts.

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[John Collins](#) is a PhD Candidate in the Department of International History at the LSE where he researches the history of international drug control. He spent a year in New York and Washington D.C. working with the Drug Policy Alliance on issues related to U.S. domestic drug policy reform, and is the programme assistant for the Transatlantic Relations Programme at LSE IDEAS.



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