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Breaking the Monopoly System: American influence on the British decision to prohibit opium smoking and end its Asian monopolies, 1939-1945.

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Abstract: The colonial opium monopoly systems remained a major point of international contention in the decades prior to World War II, driving a major wedge between British and US drug diplomats in particular. The issue typified the deeper divide between Anglo-American drug diplomacy in Asia. The British approach stemmed from imperial realities and a self-perception of pragmatism aiming for gradual suppression of opium consumption via regulation. In contrast, the US approach remained grounded in a disdain for British (and broader European) imperialism in Asia and a moralistic, self-interested zeal driving towards absolute and immediate prohibition in the region. After decades of dispute, in 1942/3 the US Federal Bureau of Narcotics initiated a campaign to force a change in British and Dutch colonial opium policies in Asia. The British were reluctant to pursue prohibitionist policies, which they feared would be politically destabilising, fiscally detrimental and difficult to implement. However, they eventually acquiesced. This paper systematically examines the US policy advocacy campaign, the British response and Britain’s reasons for agreeing to a major shift in colonial opium policy in the region. In so doing it aims to develop a new and deeper understanding of determinants of this policy change.

Key Words:

Opium, colonialism, World War II, Britain, United States of America, Asia.

1. Introduction:
The British and, to a lesser extent, Dutch decision to end their opium monopolies and enact prohibitions on supply in colonies under Japanese occupation during WWII has rightly been viewed as a major turning point in international drug policy. However, the causes of the shift in British policy have received relatively little attention and are not fully developed within current historiography on this topic. This is surprising given that the opium monopolies served as a clear flashpoint in the Anglo-American alliance during the war and highlighted deeper fissures in the Grand Alliance, which broader Asian and Anglo-American historiography has completely missed. The extensive Anglo-American historiography has a significant blind spot surrounding narcotics control in general. None of the tomes associated with mainstream historiography give any significant coverage to the role of the narcotics trade – although some give minor coverage to the tobacco trade.

This paper evaluates the collapse of the Asian opium monopoly system during World War II and the Anglo-American role in that shift. Key tomes in the history of twentieth century Anglo-American relations in Asia make no reference to this key issue, particularly those most closely associated to the wartime period of study. In his broader history of twentieth century drug diplomacy, William McAllister briefly examines the issue; however this article challenges his core conclusions about British motives for policy change based on a more in-depth review of relevant British archival materials. William O’Walker’s seminal study on ‘Opium and Foreign Policy’ also references the shift in British and Dutch opium policies, however, as this paper will highlight, O’Walker constructs an inaccurate account of the episode and the motivations of key actors. Others, such as Ethan Nadelmann, offer a broad overview of drug control in the twentieth century although deal with this issue in passing. James Windle provides much insight into the political economy of the drug trade in South and Southeast Asia, which this article seeks to supplement. Although, a number of accounts exist, which address the end of monopoly systems in Asia, this paper employs a

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5 McAllister, Drug Diplomacy in the Twentieth Century: An International History.
comprehensive examination of archival materials to provide a new interpretive take on this policy shift.\(^8\)

At the outbreak of war in 1939, international drug control efforts, centred around the League of Nations Opium Advisory Committee (OAC), stood as a mixture of contradictions and uncertainty. A typology based on three broad international positions can be derived from various national positions. On one side were the strict control advocates, led by the US.\(^9\) Having exploited League insecurities to push their hard-line conception of control, they struggled to encourage compliance with, and widespread acceptance of, their approach. On another side were the producer states, agrarian countries whose economic, cultural and political systems were entwined with, and often partially dependent upon, the very drugs the system sought to limit. Success for control advocates was often a function of how much leverage could be brought to bear on producer states.\(^10\)

In the middle were the old colonial powers, of which Britain was the most prominent example for a number of reasons. First, Britain was the leading imperial power. Second, Britain had a long and chequered history of engagement with the drug trade, exemplified by the Opium Wars and its complex relationship with the international drug conventions. For example, James Mills argues that Britain was one of the earliest advocates for a global regulatory system while simultaneously seeking to protect its colonial interests, which often had a complex relationship with opium. Further, Britain was a key manufacturing State, requiring global market access and a cheap supply of raw opium.\(^11\) Britain also recognised the role that addiction and the opium economy and monopolies played within many of its Asian colonies. London sought to balance its desire for international cooperation, which required US interests in this issue to be encouraged, with the realities of imperial governance and commercial interests, which militated against radical changes in policy.\(^12\)

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\(^9\) McAllister, *Drug Diplomacy in the Twentieth Century: An International History*.

\(^10\) Ibid., 2–3.


William McAllister suggests a typology of control advocates, producer States, manufacturing States and consumer States. This typology is, however, complicated by differing domestic policy interests and imperial silos. For example, Britain and the US had strong domestic ‘humanitarian’ lobbies advocating the end of the opium trade. The US witnessed bureaucratic division between various arms of the Federal Government, thereby undermining the coherence of its global policy advocacy. Britain, meanwhile, witnessed divisions based on political and economic interests, for example the India and Colonial Office pushing for a more accomodationist array of opium policies, while the Home and Foreign Offices pushed for more immediate suppression efforts. Nevertheless, McAllister’s typology serves as a useful, if simplified, division of global interests for analytical purposes.

World War II fundamentally reshaped international drug control and set much of the basis for the system enshrined in the 1961 Single Convention on Narcotic Drugs, which endures to this day. For the first and only time in its history the evolution of the system was determined more by bilateral, rather than multilateral, efforts. Moreover, it was US-led bilateral efforts, underpinned by US wartime leverage, which confined other States to a largely rear-guard defensive action. Further the war reshaped the normative and policy approach to opium in Asia. None of this was predetermined. While the rising US “geopolitical star” facilitated this shift, it was in many ways the result of aggressive diplomatic manoeuvring on the part of the US Federal Bureau of Narcotics (FBN) Chief, Harry Anslinger, and key members of the Washington drug control lobby.

The most radical policy departure, as this paper will argue, occurred in 1943 when Britain and the Netherlands promised to adopt a policy of total prohibition of opium smoking and monopolies in their territories in the Far East upon repossession. This shift was the direct outcome of an aggressive and risky strategy of bluff by Anslinger and his Washington-based allies. Neither Britain nor the Netherlands believed their colonial interests were best served

16 Ibid., 38–100.
by the immediate prohibition of monopolies. Nevertheless, owing directly to US pressure both Britain and the Netherlands eventually caved and announced their intention to end the monopoly system. Their acquiescence helped ensure that the post-war control system would not revert to the same deadlock of the interwar years. Instead the system could emerge as a reinvigorated supply control framework underwritten by traditional, hard-line, control advocate States and newly supply-focused colonial powers. It would also ensure that America could bring new pressure to bear on the system’s recalcitrant states, such as Iran and Afghanistan, which had traditionally rejected new international obligations around opium control, and thereby help set the stage for a post-war production limitation treaty. This paper tells the story of the shift in British policy and the US role in effecting that shift.

2. Prologue: Diverging Anglo-American Approaches to Opium, 1900-1939:

The American paradigm for international drug control solidified around the turn of the twentieth century. It encapsulated both moral concerns and economic interests. These included a latent progressivism that sought to cleanse society of its evils, particularly those seen as being bred by intoxicants. This desire was not merely restricted to the US homeland, but also stretched to territories in the Pacific sphere and those with whom the US had trading interests. Further, the US sought to garner favour with the Chinese population and State apparatus, which saw opium as embodying all they detested about the European colonial powers since the Opium Wars. The Americans sought to utilize these sentiments to ameliorate their own largely immigration-related tensions with the Chinese business community and open the market to American commerce.

The first tangible manifestation of this approach occurred in the Philippines after the Spanish-American War. By ending the opium monopoly begun by the Spanish administrators half a

17 Ibid., 39.
18 For a discussion of Iran and Afghanistan see: Ibid., 67–70.
century earlier, Washington instituted a policy of prohibition, save for medicinal purposes, on its new colony.\textsuperscript{21} This was to serve as the American test case for prohibition and eventually the model it envisioned for the rest of the European colonial world.

The first US efforts to internationalise prohibitions came with its convening of the Shanghai Opium Commission in 1909. The delegates had no plenipotentiary powers, yet immediately clashed. The US and China pushed a strong prohibitionist agenda and the European colonial powers dismissed it. Instead, the colonial powers defended the ‘quasi-medical’ opium use in the colonies (as they called opium eating and smoking). Meanwhile, the drug-producing States argued that manufacturing States were being hypocritical by seeking to restrict opium production while leaving their own pharmaceuticals unhindered. The Commission’s relatively intangible and toothless recommendations were then largely ignored. Britain, for its part, was in the midst of its 1907 Ten Year Agreement for phasing out opium exports from India to China and desired to be left alone to administer its own colonies as it saw fit.\textsuperscript{22} Undeterred, the US threw its weight behind a plenipotentiary conference.\textsuperscript{23} The resultant Hague Convention of 1912 was a relatively weak document with no real enforcement mechanisms. Its preamble stated that the international community was ‘determined to bring about the gradual suppression of the abuse of opium, morphine and cocaine’ and their derivatives.\textsuperscript{24}

The accession of Sir Malcolm Delevingne (see below) as Under-Secretary with responsibility for the drug issue at the Home Office in 1913 helped to bring British policies closer into line with the US.\textsuperscript{25} However, the outbreak of World War I placed the 1912 treaty on hold until 1919 when its ratification was included in the Paris Peace Treaties at the behest of both Britain and the US.\textsuperscript{26} Despite the US not becoming a member of the effective guardian of the fledgling international control system, the League of Nations, two new plenipotentiary

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\textsuperscript{21} McAllister, \textit{Drug Diplomacy in the Twentieth Century: An International History}, 27.
\textsuperscript{22} Ibid., 24; 28–30.
\textsuperscript{23} Ibid., 30–31.
\textsuperscript{25} Taylor, \textit{American Diplomacy and the Narcotics Traffic, 1900-1939: A Study in International Humanitarian Reform}, 141–44.
\end{flushright}
conferences were called for 1924 - 1925 in an attempt to build a practical implementation framework for the system. A central driver of this was an internationalist desire to vindicate the League of Nations. If progress could be shown on drug control, an issue the US cared greatly for, then perhaps the US could be convinced the join the League. Within Washington D.C. the Foreign Policy Association lobbied under this belief. Within the League efforts were made to build a workable framework for negotiation. Without direct US leadership and the US occupying a relatively radical position on the issue, Britain took the lead in forging a consensus framework.27

British policy, steeped in a century and a half of imperial history, was inevitably more complicated than that of the US.28 It represented an evolving mix of normative desires and practical concerns. In the end, practicalities usually carried the day. London officially condemned the practice of opium smoking, but it was permitted within several British Far Eastern colonies, and its sale contributed significant (albeit declining) revenues to their administrations through government-run monopolies.29 Efforts by Sir Malcolm Delevingne to end ‘quasi-medical’ opium use in British colonies in anticipation of the 1924 Conferences eventually pitted the Home and Foreign Offices on one side and the Colonial and India Offices on the other.30

Delevingne was a strong supply control advocate. This paradigm held that by strictly limiting production to ‘legitimate’ requirements, the illicit traffic would eventually disappear.31 He was supported by the Foreign Office, which was uncomfortable with sustaining an apparent hypocrisy on the international stage.32 The Colonial Office, however, remained concerned

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28 Alfred McCoy lists 1773 as the beginning of Opium’s modern era. This was the year when the British East India Company imposed a monopoly over the sale and production of opium in northeast India. Alfred W. McCoy, *The Politics of Heroin: CIA Complicity in the Global Drug Trade, Afghanistan, Southeast Asia, Central America, Colombia*, 3rd ed. (Brooklyn, NY: Lawrence Hill Books, 2003), 5.
31 Ibid., 19; McAllister, *Drug Diplomacy in the Twentieth Century: An International History*, 61–63.
with the practical problems surrounding prohibition. They feared that China would serve as a regional hub for a reinvigorated illicit trade, which would be politically destabilizing to the British colonies. Further, they were concerned about the fiscal ramifications involved and the potential poly-drug consequences as consumers substituted heroin for opium.33

The Cabinet eventually sided with the Colonial Office, with the Prime Minister concluding that, ‘Although we wish to see an end to the [opium] traffic, we cannot ignore practical difficulties which Americans, in particular, must be made to understand.’34 The policy chosen was one of gradual suppression over a 15-year period, on course to coincide with the outbreak of the next world war. However, a wide loophole was written into the commitment making full prohibition contingent on China effectively suppressing the trade.35 The policy flew in the face of the uncompromising US stance.

The two 1924 Conferences met but achieved little tangible progress on the ‘quasi-medical’ question. The US delegation, demanding immediate prohibitions, eventually walked out of proceedings and ceased cooperation with the control system for the remainder of the decade. The resulting 1925 Conventions instituted the first, albeit weak, international regulatory mechanisms for the opium trade and created the Permanent Central Opium Board (PCOB).36

By 1930 the appointment of Harry Anslinger, in combination with his fiery, State Department ally Stuart Fuller, saw the US determined to re-engage with the international system.37 Anslinger would come to dominate American, and at times international, drug control efforts for the next three decades. An extremely capable bureaucrat, he possessed a shrewd political instinct and an ability to cultivate the media and loyal domestic constituencies (known as ‘Anslinger’s Army’) and use them to forward his agenda.38

34 Quoted in: Ibid., 71.
35 Meyer and Parsinnen describe the policy as a ‘masterpiece of hypocrisy.’ Ibid.
Within the League, meanwhile, the sense of collective responsibility to vindicate international cooperation, particularly regarding arms control, led delegates to try to surmount the seemingly large obstacles to another drug control agreement.\(^{39}\) The result was a compromise treaty, which regulated international drug manufacturing, and, for the first time, marked a clear distinction between legal and illicit traffic. It also saw the creation of another international oversight body, the Drug Supervisory Body (DSB).\(^{40}\)

The optimism proved short lived. Delevingne retired from the Home Office (albeit remaining active within the system’s apparatus until 1948),\(^{41}\) London refused to enact radical policy changes in its colonies and the US quickly weared of compromise.\(^{42}\) A rapid growth in the illicit market accompanied the 1931 Convention, highlighting flaws in the international supply control framework.\(^{43}\) Meanwhile political events in Europe and Asia corroded the League of Nations. The last major act on the control front was the 1936 Illicit Trafficking Conference during which, Anslinger and Fuller attempted but failed to win criminalization of all non-medical production and distribution. The pair subsequently mocked the proceeding and eventually refused to sign the 1936 Convention.\(^{44}\)

As the decade drew to a close the League Opium Advisory Committee (OAC) became consumed with designing a production limitation treaty but war intervened. In the meantime Britain had ignored US efforts to impose a specific timeline for eliminating both its opium monopolies and the practice of opium smoking in its colonies.\(^{45}\) Anslinger would look to the confusion of wartime to effect a change in policy, particularly following a wave of international condemnation of Japan’s opium policy towards China in the late 1930s, where opium appeared to be used as a weapon of war against Chinese populations.

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\(^{39}\) McAllister, *Drug Diplomacy in the Twentieth Century: An International History*, 110.

\(^{40}\) Ibid., 95–96.

\(^{41}\) Ibid., 100.

\(^{42}\) Ibid., 106–9.


\(^{44}\) McAllister, *Drug Diplomacy in the Twentieth Century: An International History*, 123.

\(^{45}\) Ibid., 127.
3. The Early War – September 1939 – 1943:

When war broke out, the League drug apparatus hoped to remain aloof of the fighting. The PCOB requested all governments to continue sending statistics and the vast majority complied.\(^{46}\) Britain remained strongly supportive of maintaining the entire League system.\(^{47}\) The US maintained official relations with the PCOB and DSB (both independent treaty bodies) but not the League of Nations Opium Advisory Committee (OAC). In October 1939 the US State Department publicly affirmed that:

> *It is upon the operation of these two boards ... supplementing and coordinating the efforts of independent nations, that the entire fabric of international drug control ultimately rests and the American Government regards it of the highest importance ... to the entire world, that they should be enabled to function adequately, effectively and without interruption and should enjoy the cooperation of all nations.\(^{48}\)*

With the fall of the Netherlands and France, evacuation of the PCOB and DSB from Europe to the US soon appeared to offer the best hope for the system’s survival.

Britain was ‘strongly in favour of the transfer of as many officials as possible concerned with narcotics to the US’.\(^{49}\) Initially, the State Department appeared likely to refuse, however, a quiet Washington lobbying campaign led by Herbert May (Vice President of the PCOB; the Acting Chairman of the DSB; and Board member of the Foreign Policy Association (FPA)) eventually won State Department support.\(^{50}\) Political and logistical constraints ensured minimalist functioning and they were officially titled as ‘branch offices’ of the Geneva Headquarters. Nevertheless, Washington became the centre for international drug control.

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\(^{46}\) Extract from: Acting Sec-Gen Report on the Work of the league 1941-1942, FBNA/ACC170-74-12/Box171/File 1230-8, PCOB (1940-67);

\(^{47}\) Makins to Chatterjee, 11 September 1940, PRO, FO371/24749.

\(^{48}\) Quoted in Renborg memo: ‘Note on the Importance of the Estimate System…’, 6 July 1942, FBNA/ACC170-74-12/Box171/File1230-8, DSB (1940-67).

\(^{49}\) FO to Kelly (Berne), 7 August 1940, BNA-FO371/24749; File Minutes, 3 April 1942, Proposed Meeting of the PCOB, BNA-FO371/28075.

\(^{50}\) Lothian to FO, 5 September 1940; Chatterjee to Makins, 3 September 1940; Makins to Chatterjee, 11 September 1940; Makins to Chatterjee, 25 September 1940, BNA-FO371/24749.
efforts for the remainder of the war, with London serving as a weak counterweight. Further, with increased US patronage came increased influence. The PCOB and DSB Secretariat members provided statistics and political intelligence to Anslinger, while becoming a core part of his wartime ‘inner circle’. The 'inner circle,' a term originated by William McAllister, was a group of Washington D.C.-based control advocates and lobbyists during World War II. It played an instrumental role in securing the survival of the system, worked to circumvent more conservative elements of the old League apparatus, advocated an end to the opium monopolies and drove discussions around the post-war drug control system.

The ‘inner circle’ included Helen Howell Moorhead, who chaired the FPA Opium Research Committee, and number of Anslinger’s chief international allies, particularly Colonel Clem Sharman of Canada and Dr. Victor Hoo, China’s Vice Minister of Foreign Affairs from 1942-45. George Morlock of the Division of Far Eastern Affairs was Anslinger’s chief ally and counterpart at the US State Department. It also came to include Arthur Elliott Felkin, the diligent and earnest PCOB Secretary and former British bureaucrat and Leon Steinig, an exiled Jewish Austrian who had escaped Nazi occupation to the US and served as the main secretariat figure in the DSB.

With the technical apparatus saved, but the OAC and the League drug secretariat placed in limbo, the system’s political momentum ground to a halt. Anslinger and his allies continued vital behind the scenes efforts to circumvent and make redundant the OAC and its secretariat, which they viewed as ineffective and overly consensus-oriented institutions. Political struggles also quickly shifted to bilateral interactions, largely independent of the multilateral framework. The US would take the lead whilst the old colonial powers fought a stumbling rear-guard action. The colonial issue represented the key battleground in this wartime policy theatre.

51 Memorandum: ‘Activities of the [PCOB],’ 15 March 1941; Herbert May to Anslinger 26 June 1941; numerous files in FBNA/ACC170-74-12/Box171/File1230-2 PCOB (1939-48).
52 McAllister, Drug Diplomacy in the Twentieth Century: An International History, 90.
54 McAllister, Drug Diplomacy in the Twentieth Century: An International History, 90.
55 Ibid., 138 & 149.
4. Drug Control in Asia - The Colonial Issue:

Article 6 of the Hague Opium Convention of 1912 committed States Parties to the gradual ‘suppression of the manufacture, the internal traffic in and the use of prepared opium in so far as the difference conditions peculiar to each nation shall allow.’ The US continued to push for immediate suppression similar to that enacted in the Philippines. The European colonial powers established government monopolies and pushed gradual suppression measures. Many in Britain and the Netherlands argued that consumption was diminishing as a direct result of the monopoly system. Further, they claimed it was an effective mechanism to prevent the illicit traffic ‘which stimulates consumption.’

At the outbreak of war opium smoking under proscribed conditions was legal in the East Indies, Malaya, the Unfederated Malay States, Brunei, Sarawak, Burma, India, Ceylon, North Borneo, Hong Kong, Indochina and Thailand. States with monopolies maintained they were acting in line with the 1912 Convention and that State control was preferable to total prohibition. The US and China demanded the immediate abolition of opium smoking as a mechanism to reduce global supplies and enable an enforceable production limitation agreement to be reached. The British and Dutch maintained that a production limitation agreement was first needed to reduce the leakages into the illicit market from China and Persia, following which the abolition of opium smoking and eating might be possible, ‘provided that a reasonable transitional period is allowed’.

For the US, China and, to a lesser degree, Canada the causality was reversed: the monopoly system sustained the illicit market, addiction and non medical-scientific usage while stalling production limitation. By solving this question, forward momentum on a production limitation convention could be enabled.

4.1. China:

During the interwar period China disintegrated into warlordism, civil war and later war with Japan. Some of the political and economic difficulties likely arose as a direct result of a

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premature opium suppression effort, which only exacerbated political fragmentation.\
Political and economic chaos fuelled a process whereby local politics and the black market grew in symbiosis, as all sides used the illicit trade to finance military operations. By the beginning of the 1930s China remained the epicentre of the global trade and the key to control in the region. Meanwhile, a League Commission of Enquiry reported in 1930, ‘[c]ontact with Chinese Immigrants has in other Far-Eastern territories usually been the cause of the indigenous population acquiring the opium-smoking habit.’

In 1935 Chiang Kai-shek and the nationalists began the most vigorous anti-opium campaign they would ever undertake. This Six-Year Opium Prohibition Plan aimed for total suppression by 1940 but was largely unsuccessful due in part to the outbreak of war with Japan in 1937. Nevertheless, the Government began declaring victory in areas it controlled, while claiming that in the areas under Japanese control conditions were getting worse and that China’s successes were being undermined by ‘places where opium is openly sold by the local governments.’

The situation in China caused a division between Britain and the US. Britain was deeply sceptical of Chiang Kai-shek’s claims, while the US privately recognised that facts on the ground were more complex and that generals and local politicians loyal to Kai-shek were likely complicit in the trade. Nevertheless, US public statements remained effusive in their support of Kai-shek. For the US, the narrative served as a useful tool to bludgeon the Japanese, while also building Chinese goodwill. Such statements became harder to sustain as the war went on.

4.2. Ending the Colonial Issue:

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64 See extensive US FBN files: FBNA/ACC170-71-A-3554/Box16/File0660, China Folders 14-18 (1936-46); For British accounts see: BNA-FO371/34546.
By 1942 the ‘inner circle,’ led by Helen Moorhead and Herbert May, were examining principles for post-war control and achieving the US goal of the ending of colonial opium monopolies. On the other side were what Col. Clem Sharman of Canada described as the ‘“wait and see” army’ led by Malcolm Delevingne and Bertil Renborg head of the League drug Secretariat. Delevingne and Renborg suggested that States should: first explore consolidating the existing drug conventions into ‘a single instrument’; second, evaluate the efficacy of specific convention provisions; and third, plan to re-establish international controls when hostilities ceased.

Both Sharman and Anslinger despised Renborg, viewing him as emblematic of the old League of Nations apparatus, which they wanted to kill off. They had no intention of engaging with Renborg and George Morlock, Anslinger’s counterpart in the US State Department, agreed that the US should not become embroiled in discussions until America’s broader post-war policies were clear.65

Anslinger also viewed ‘Sir Malcolm’s ideas’ as ‘typical of British Imperial policy’ and suggested to Sharman that the US and Canadian governments ‘march along together on a concrete plan involving the abolition of smoking opium after the war and limitation of production’. He went on, ‘if we do not get agreement with the British Government before the war is over, we might as well give up the idea of progress as they will fall back to the pre-war tempo.’ Sharman agreed but argued that mid-1942 was ‘the worst possible time to take the initiative’ as ‘the dice would be loaded more heavily’ against them. He suggested bringing the Soviet Union on board while they charted a path forward.66 Anslinger let the matter stall, but in September 1942 developed a plan. He wrote to Sharman:

I have been asked to instruct naval officers who are being trained to take over administration in occupied territories in the South Pacific, on narcotic administration. The thought occurred to me that it would be a good thing to indoctrinate them well with the idea of abolishing the monopolies immediately after they take over. Victor Hoo called the same day with the same idea, stating that the

65 Renborg to Sharman, 29 July 1942; Sharman to Renborg, 1 August 1942; Morlock to Anslinger, 6 August 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #2.
66 Sharman to Anslinger, 6 July 1942; Delevingne to May, 25 April, 1942; Anslinger to Sharman, 1 July 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
Chinese intended to take similar action and that if we also took this action and the monopolies were out during the armistice period, one, two, or three years, the British could hardly re-establish these institutions if, as, and when they regain possession.\(^67\)

Sharman agreed ‘whole-heartedly’. However, Anslinger’s strategy involved a great deal of bluff. The US would have the right to establish any form of government in areas in which they had unilateral control. In areas of joint control, the US could not act unilaterally. Morlock was dissuaded from further pursuit of the issue under pressure from the State Department, but privately suggested that Anslinger pursue it with the War and Navy Departments by claiming that closing opium dens was a US legal obligation.\(^68\)

4.3. The League Old Guard:

In the meantime, Renborg had drafted two memos outlining post-war planning options. These arose from meetings of the PCOB and DSB in London during 1942, which the ‘inner circle’ had largely boycotted. Renborg sought to circumvent the ‘inner circle’ by gaining the support of the Acting Secretary-General of the League, Sean Lester. The latter had expressed an interest but intended to reserve his decision until he received the final plans. Renborg set to work consolidating them and finally forwarded them on to Anslinger and Sharman on December 28, two full months after the London meeting. By this stage Anslinger and the ‘inner circle’ had their own plans in motion and had little intention of supporting Renborg.\(^69\)

Renborg’s vision focused on consolidating the treaties, continuity of function of the ‘system of estimates’ trade monitoring system under the PCOB and DSB and the wholesale transfer of the League apparatus. Regarding the monopolies and quasi-medical consumption, he dismissed radical action, arguing ‘prohibition could not be expected by itself to bring about the desired result’ and suggesting further study.\(^70\) Upon receipt of the documents Anslinger wrote back angrily:


\(^68\) Sharman to Anslinger, 5 September 1942; Morlock to Anslinger, 11 September 1942; Anslinger to Chamberlain, 3 October 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.

\(^69\) Renborg to Anslinger, 28 December 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.

\(^70\) Renborg Memorandum Concerning Preparation for the Post-War Period, August 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
the two most important subjects in a post-war world, namely, limitation of opium production and abolition of smoking opium monopolies, were given the same treatment which they have had in the past—the old political run around. It is my opinion that if any progress is to be made...the approach will have to be entirely different from that set forth in the vague program.\textsuperscript{71}

Sharman responded with similar criticisms. Renborg moved quickly to assuage doubts claiming that the informal ‘consensus’ was that opium smoking would be abolished and that effective measures would be included in any peace settlement. Sharman and Anslinger remained unimpressed.\textsuperscript{72}

4.4. Towards an ‘Inner Circle’ Strategy.\textsuperscript{73}

Over a series of three meetings between December 1942 and March 1943, Anslinger and the ‘inner circle’ pushed ahead. The meetings were held unofficially under the independent and unthreatening banner of the Foreign Policy Association (FPA), but choreographed to suggest US government backing – for example being held in Anslinger’s office, ostensibly because FPA conditions were too cramped. In December 1942, Anslinger (FBN), Helen Moorhead (FPA), Professor Chamberlain (FPA), Herbert May (PCOB; DSB; FPA), Dr Victor Hoo (China), Dr Liu Chieh (Minister Counsellor of the Chinese Embassy), and George Morlock (US State Department) met to strategize.

At the first meeting it was agreed that all meetings would need to remain unofficial since the US government had not reached a consensus on post-war planning, let alone the drug issue. The FPA could convene meetings and eventually work to offer ‘independent’ recommendations to the State Department and thereby drive US policy. Given the proximity of the expected allied drive on Burma they agreed that the country should represent the focus of discussions. Dr Hoo suggested that, although the British would argue it was a civilian health issue, it was arguably ‘a military necessity for the safety and welfare of troops.’ This

\textsuperscript{71} Anslinger to Renborg, 21 December 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.

\textsuperscript{72} Sharman to Renborg, 4 January 1943; Renborg to Anslinger, 18 January 1943; Renborg to Sharman, 18 January 1943; Sharman to Anslinger, 21 January 1943, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.

\textsuperscript{73} This section is drawn from memo: ‘Meeting in the Office of the Commissioner of Narcotics’, 4 December 1942, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
became the core of the argument for both the US and China. Attendants decided to hold another meeting in early January 1943.

The ‘inner circle’ then worked to develop a Pacific consensus to isolate the British and the Dutch. Sharman, given the political complications and afraid to step too far ahead of Canadian government policy, sat out the second meeting. The FPA secured the involvement of the ‘obviously unaware’ Australia and New Zealand. At the meeting Anslinger and Morlock sounded-out the two governments and suggested that the US administration was merely deciding how to approach relevant governments, i.e. the British and the Dutch. Little substantive progress was made at the meeting, however, and it was agreed to convene another meeting on March 17 including representatives from Britain, the Netherlands, China, Canada, Australia and New Zealand.74

The Dutch quickly agreed to send an ‘observer’ to the third meeting from their Washington Embassy.75 On receipt of its invitation, the UK Foreign Office solicited the Home Office’s thoughts in a largely routine manner.76 Delevingne, who was by this stage of the war acting as the Foreign Office’s main opium advisor, immediately rang alarm bells. He read the American move as a bureaucratic flanking manoeuver intended to bypass the old League structures and warned it was ‘certain’ that opium smoking would be raised. He pointed out that the Government of Burma was already looking at the question and that Malaya and Hong Kong would have to examine it closely before Britain could formulate a coherent position, let alone have a lay, Washington Embassy official discuss it.77

Consequently, London refused to be represented but gave the Ambassador discretion to send ‘an observer.’ The Foreign Office expressed curiosity as to the official attitude of the US Government to the unofficial meeting and quickly opened what was to prove a long and vigorous inter-departmental discussion by soliciting the Colonial Office’s views.78 The latter called the question ‘premature’ given wartime uncertainties. They expected Japan was

74 Memo: Meeting in the Office of the Commissioner of Narcotics, 13 January 1943; Sharman to Anslinger, 24 December 1942; Chamberlain to Dixon, 7 January 1943; Anslinger to Sharman, 8 February 1943, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
75 Minister Plenipotentiary to Anslinger, 12 March 1943, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
76 Williams (FO) to Harris (HO), 18 February 1943, BNA-FO371/34545.
77 Delevingne to Harris (HO), 28 February 1943, BNA-FO371/34545.
78 FO to Halifax, 4 March 1943, BNA-FO371/34545.
‘fostering’ opium smoking and preferred a regional solution, based on a convention with surrounding territories.79

Lord Halifax, anxious to oblige the request and unaware he was wading into a flammable area of the Anglo-American relationship, opted to send an observer. It was a decision he came to regret. In reporting back to London he sent a stern pre-emptive defence of his decision, citing the Washington culture of ‘unofficial’ and ‘exploratory’ conferences at a time of ‘great and growing importance of the United States in International Affairs.’ He also requested a full statement of policy for his future reference.80

His representative had been blindsided at a meeting that was clearly choreographed to force the colonial issue.81 Choosing his words carefully, Anslinger said ‘one cannot have the Four Freedoms and still sell opium.’ He then attacked past British colonial opium policies, while Herbert May suggested Britain had the worst international reputation regarding opium. Moreover, they warned that the US press was snooping around the issue and viewed it as linked with other international problems.

Anslinger pointed to China’s supposedly enormous successes and claimed that in the event of an occupation of Burma, China would enact strict prohibition on the sale of smoking opium. Sharman and Chamberlain closed ranks and also praised China’s domestic control efforts. Sharman, however, was careful to make explicit that the views expressed were his own and that a formal Canadian policy had not yet been discussed. Anslinger then argued that China’s policy could lead to a clash with the British. Vouching it as his own opinion, he said that American forces would follow a similar policy of immediate suppression in areas they occupied.82

Anslinger was bluffing. The State, Treasury, War and Navy Departments had not yet expressed a specific policy, let alone suggested that they would override their uniform occupation policies already agreed by the Western Allies’ Combined Chiefs of Staff. Indeed,

79 Gater (CO) to Harris (HO), 6 April 1943, BNA-FO371/34545.
80 Halifax to Anthony Eden (FO), 26 April 1943, BNA-FO371/34545.
81 Williams’ minute, File: Minutes of Informal Meeting of the [FPA], 25 May 1943, BNA-FO371/34545.
82 Minutes of Meeting in the Office of the Commissioner of Narcotics, 17 March 1943, BNA-FO371/34545.
initial official responses had suggested strong caution. The US government would try to ‘persuade’ their allies to follow US policy but unilateral measures were not envisaged. Further, a precedent had already been set in North Africa where the French had reopened their hashish monopoly, while the US could merely forbid its occupation forces from using the monopoly’s shops. In a broader sense, the Roosevelt administration, and Secretary of State Cordell Hull in particular, were careful to avoid airing alliance politics publicly at this time. George Morlock sat in silence at the meeting as Anslinger set the US up for a potentially embarrassing climb-down should the colonial powers refuse to fold. His silence, however, helped create a perception within the Foreign Office that Anslinger spoke for a unified US Government.

Anslinger’s portrayal of China was labelled the work of ‘foreign and Chinese propagandists’ back in London. They maintained that the main obstacle to total prohibition in the colonies adjacent to China remained ‘smuggling by and on behalf of the Chinese communities resident therein.’ London saw itself as at least being honest in refusing to enact a policy it could not enforce. One Foreign Office official, unaware that the American drug apparatus was staffed with many unreconstructed alcohol prohibitionists and highlighting the Foreign Office’s lack of institutional knowledge on the drug issue, argued that, ‘Americans with their experience of prohibition should be the first to appreciate the importance of avoiding a situation where the law itself is brought into contempt.’ China, on the other hand, was seen as publicly enacting broad laws of suppression, while privately allowing profitable monopolies to function under the name of an ‘Opium Suppression Bureau,’ which marketed the drug as ‘anti-opium medicine.’

The Dutch observer took a conciliatory attitude at the meeting but soon after requested the minutes be changed to express his defence of the Dutch monopoly system as the best means

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83 Draft: Hamilton to Dr. Thompson, 8 March 1943; Morlock to Anslinger, 25 March 1943; Hamilton to Dr. Thomson, 20 March 1943, FBNA/ACC170-74-5/Box124/File1230-A, Postwar Narcotics Problems #1.
84 McAllister, Drug Diplomacy in the Twentieth Century: An International History, 150–1.
86 Halifax to Anthony Eden (FO), 26 April 1943, BNA-FO371/34545.
to prevent smuggling. Further, he sent on an article by former Dutch OAC member, DeKat Angelino, which justified the Dutch position. It claimed the results of prohibition in the Philippines were not ‘encouraging,’ and criticised those arguing for immediate prohibition as misguided. It argued that the current Dutch policy prevented: the growth of the illicit traffic; corruption; and opium consumers from turning to cocaine and heroin.88

Anslinger dismissed it as ‘the old opium bloc argument.’ By June 1943 the ‘inner circle’ had no idea whether their strategy was a success. They awaited further communication from Victor Hoo, had no sense of official Australian or New Zealand policy, or whether the official Canadian policy would echo the US. Furthermore, British and Dutch reactions to the meeting suggested ‘a repetition of their former position.’ Anticipating little progress, they began to examine ‘further avenues.’89

4.5. British Policy Shifts:

Foreign policy goals quickly outweighed practical administrative concerns for the Foreign Office. Anthony Eden accepted the difficulties but hoped to avoid ‘unfriendly criticism’ by accommodating Sino-US goals. The Foreign Office recognised the political capital China would draw from British intransigence and the ‘disproportionate importance’ placed on the issue in the US.90 Aware that this was an issue upon which it was ‘clearly are not very well informed,’ the Foreign Office solicited views from the Home, Colonial, Dominions, Burma and India Offices.91 Those involved in the discussions soon decided more concrete measures were necessary.

A core reason for the shift in British policy was a change in the costs and benefits around opium policies in the colonies. After the 1925 Conventions the colonial governments in Borneo and Malaya had imposed a system of registration and rationing for smokers. Gradually rations were reduced, while efforts were made to improve social conditions. Registration for the Malayan monopoly was effectively closed in 1934 and the expectation

90 Roberts to Under-Secretary of State, 15 June 1943, BNA-FO371/34545.
91 Roberts’ minute, File: Minutes of Informal Meeting of the [FPA], 25 May 1943; Paskin (CO) to FO, 16 June 1943, BNA-FO371/34545.
was that the existing addiction would shrink, while usage would not spread to a new generation. Meanwhile, the role of, and controversy attached to, India in the global opium trade had declined drastically during the 1930s, as it effectively ceased to be a global exporter by 1936. In the face of international criticism, particularly from the US and China, as well as domestic British sentiments, India had reduced its reliance on the trade to the point where opium revenue represented a relatively negligible 1.1 per cent of India’s revenue by the mid-1930s.

Hong Kong, however, was unable to enact clear opium suppression due to its proximity to mainland China. During the 1920s, civil disorder in China caused an influx of black market opium. Rather than suppression, the goal of government policy became merely to coerce consumers into buying monopoly opium. Further, the fiscal benefits of the monopoly militated against efforts to change the system. However, with these fiscal benefits and the concerns about administrative practicalities muted by the Japanese occupation, the desire to appease American demands in 1943 outweighed these former obstacles. This wartime logic applied across the various British territories occupied by Japan.

The Dutch unilaterally decided to acquiesce to US demands in August 1943, but postponed an announcement to allow Britain to make one in parallel. The Dutch decision, according to the Secretary of State for India and Burma, made it ‘difficult to resist American proposals.’ Britain was at risk of becoming a regional pariah on this issue. In September 1943, the Interdepartmental Opium Committee convened at the Home Office. A broad policy of suppression was agreed along with a draft public statement (after subsequent tweaking) that the UK:

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92 FO to Washington Embassy, 2 November 1943, BNA-FO371/34546.
94 Ibid.
96 Minutes of the Thirty-Third Meeting of the Inter-Departmental Opium Committee, 7 September 1943, BNA-FO371/34545; It is unclear from the archival material how much coordination took place between the British and Dutch governments. The lack of official correspondences coupled with the strong coordination suggests informal discussions between the British government and the Dutch government in exile likely took place.
97 Secretary of State to Government of India, 25 October 1943, BNA-FO371/34546.
98 For example see, Delevingne to Reynolds, 25 October 1943, BNA-FO371/34546.
‘has decided to adopt the policy of total prohibition of opium smoking in the British and British protected territories in the Far East which are now in enemy occupation and, in accordance with this policy, the prepared opium monopolies formerly in operation …will not be re-established on their reoccupation [emphasis added].’

Acutely aware of the US public fears of opium and the US Government’s desire to protect its troops, London no longer felt in a position to say ‘no’ to the US on this question. Moreover, Britain feared a public relations disaster should the American public blame the opium monopolies for infecting their soldiers with addiction. Further, they expected a public relations windfall in the US following the announcement, which could help alleviate broader colonial policy tensions. Simultaneously, the administrative costs of prohibition were viewed as significantly less than they had been in the decades prior, particularly as the Japanese occupation had removed the administrative benefits. Finally, sacrificing the monopolies in British territories occupied by Japan would help appease American demands before they were extended to cover the more problematic case of India.

The policy shift would not apply to India, where the traditional method of opium consumption was by eating, not smoking. Mainland India was also not ‘in enemy occupation.’ Burma proved the most complicated case and would drag on into the post-war era. Consequently, reiterating previous reservations, the 1943 statement explicitly warned that success would ‘depend on the steps taken to limit and control the production of opium in other countries,’ especially China.

4.6. Crossed Cables:

Anslinger was uncertain of the outcomes of the FPA meetings and initiated a public relations offensive in the US, stoking fears of a resurgent heroin trade after the war if the monopoly system was re-established and allowed to infect US troops. Britain became acutely aware

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99 Parliamentary Question and Answer, 10 November 1943, BNA-FO371/34546.
100 Wright to Clarke, 6 October 1943, BNA-FO371/34545.
101 Tomkins to Williams, 12 April 1944, BNA-FO371/39366.
102 Tomkins to Williams, October 1943, BNA-FO371/34546.
103 Minutes of the Thirty-Fourth Meeting of [IOC], 27 October 1943; Minutes of the Thirty-Third Meeting of [IOC], 7 September 1943, BNA-FO371/34545.
during this time that any perceived increase in US troop consumption of opium in Burma and other territories would be blamed on them and were anxious to avoid being implicated. Congressman Carroll Reece gave a widely publicised speech in the House of Representatives, mimicking Anslinger’s talking points, about the monopoly system being incompatible with the ‘Four Freedoms’ and highlighting the dangers of a resurgent trade. Anslinger also worked with his international allies, particularly Dr Hoo, to forge a Sino-US response to expected Anglo-Dutch intransigence. Simultaneously, Anslinger’s domestic allies exerted political pressure in both the US and UK. The FPA reached out to the British Council of Churches and fished for intelligence on Whitehall inter-departmental discussions. Even if successful, Helen Moorhead wanted a change in policy to seem ‘the result of British opinion, not American pressure’ to help ‘save their face.’ Ultimately, this overture seemed to go nowhere and there is no indication that British public opinion and domestic lobby groups played a notable role in determining government policy around opium. Many have highlighted the role of ‘moral entrepreneurs’ in influencing both US and (arguably to a lesser extent) British opium policy. This paper finds no evidence whatsoever that domestic pressure in any way influenced British decision-making on this specific policy episode and instead found all evidence pointing to internal bureaucratic processes.

The federal government eventually formed a consensus that the US would do everything possible to effect suppression, however, this was not something that could technically be forced upon the colonial powers. Anslinger and his domestic allies focused only on the first part of the consensus policy and declared victory. Helen Moorhead congratulated Anslinger that his actions had ‘proved sound and wise both in timing and strategy’ and that he had accomplished ‘steady forward movement.’ The State Department issued a polite aide-memoire to London, the Netherlands, China and Portugal restating US views and

104 ‘Remarks by Congressman Carroll Reece’, 7 July 1943; Carroll Reece to Anslinger, 4 September 1943; Anslinger to Carroll Reece, 16 September 1943; Telegram from American Embassy, Chungking to State Department, 10 August 1943; FPA to Mr. Paton, 19 August 1943; Moorhead to Anslinger, 18 August 1943, FBNA/ACC170-74-5/Box124/File1230-A, [LON] Postwar Narcotics Problem #2 (1942-3).


106 War Secretary Stimson to Treasury Secretary Morgenthau, 11 August 1943, FBNA/ACC170-74-5/Box124/File1230-A, [LON] Postwar Narcotics Problem #2 (1942-3).

107 Helen Howell Moorhead to Anslinger, 18 August 1943; Anslinger to Dr. Hoo, 13 August 1943, FBNA/ACC170-74-5/Box124/File1230-A, [LON] Postwar Narcotics Problem #2 (1942-3).
suggesting they limit opium use to strictly medical and scientific purposes. They also asked the British government to consider ‘a common policy’ for forces under allied command, while reserving the right to take any independent measures ‘deemed necessary for the protection of the health’ of US forces.\textsuperscript{108}

The receipt of this document sparked confusion in London and mild panic in the Washington embassy. The Embassy, unaware of the policy shift already agreed in London, read it as a ‘threat … which the Americans might easily put into effect, with the full support of their public opinion.’ Furthermore, the Embassy feared it could ‘compromise the position which is being slowly built up, of leaving control of civil affairs in British territory to British authorities.’ The Embassy asked that it be ‘considered urgently’ warning that ‘the people interested here are fairly unscrupulous in their methods’ and ‘if there is what seems to them undue delay they may start some kind of propaganda campaign which might be damaging to us.’\textsuperscript{109}

The Embassy’s reaction must be read in the context of the aftermath of the Institute of Pacific Relations Conference, which took place at Mont-Tremblant in December 1942. Colonial issues emerged as a major point of contention. Indeed, William Roger Louis argues ‘American anti-colonial sentiment reached its wartime peak.’\textsuperscript{110} Emerging from the hostility of this conference as a respected voice of British colonial interests was Lord Hailey, a retired Governor of the Punjab and the United Provinces of India. He offered a stern but pragmatic defence of British policies. He went on a public relations offensive in the US during the winter of 1942-43, becoming one of the most effective propagandists for British colonial policies.\textsuperscript{111} It seems his progress was part of the ‘position’ that the Embassy feared would be undone by the opium issue. Back in London, officials read the State Department memo’s reference to strict ‘medical and scientific’ usage as an escalation of US demands. Initially, it sparked mild bureaucratic confusion. Departments worked to ensure that the public relations offensive would address the concerns highlighted, but on points of substance, it was eventually ignored.\textsuperscript{112}

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\item[108] State Department Aide-memoire, 21 September 1943, BNA-FO371/34545.
\item[109] Wright (Washington Embassy) to Clarke (FO), 6 October 1943, BNA-FO371/34545.
\item[111] Ibid., 11–14.
\item[112] See BNA-FO371/34546.
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The Embassy’s fears were the most alarmist expressed by British officials on paper. Moreover, the policy shift had already been decided upon and, even with the misinterpretation of the aide-memoire, London was still not willing to forcibly restrict supply and consumption to solely ‘medical and scientific needs.’ Given these points, it is hard to conclude that fears of losing control of colonial civil affairs drove British policy from the start. William McAllister argues that Britain and the Netherlands feared that the US ‘might delay or terminate plans for returning civil administration to the previous colonial masters.’113 This may be true in a broader sense, but at no time was it made explicit as a reason for the policy shift on opium. William O. Walker plausibly suggests that a fear of being pushed out of Asia weighed on the British policy makers regarding this matter. He does, however, incorrectly suggest that the policy shift was not decided upon until after the aide-memoire was received.114 These concerns were likely present, and consciously fanned by Anslinger, for example, through his carefully chosen use of the ‘four freedoms’ phrase. However, these concerns existed in a broader context of British weakness - given that it would be bargaining over territories currently out of its possession – and the existence of strong anti-colonial sentiments within the US. At no point, other than the later panic within the Washington embassy, did there appear an imminent fear that opium would be the trigger for America to thwart British repossession of its colonies.

Overall, it was a decision largely based on a cost-benefit analysis, one which included many variables including economic interests, colonial policy, impacts on Anglo-American relations, bureaucratic interests and domestic politics. The British government had not been a long way from enacting some form of suppression prior to the 1924 Conferences. At that time, the administrative costs of prohibition outweighed the public relations benefits and the Colonial Office’s concerns held more weight than the Foreign Office's desire to win international credibility. By 1943, the equation had reversed. Negative publicity and the alienation of powerful figures in the US government could adversely affect broader foreign policy goals. This was at a time when none of the administrative benefits of the monopolies were being felt. Anslinger had pushed hard while the British were at a weak point and their resistance quickly gave way. Had Anslinger not forced the issue, it seems unlikely that Britain would have embarked on such a broad and coherent policy shift upon retaking its

113 McAllister, Drug Diplomacy in the Twentieth Century: An International History, 151.
possessions. The situation on the ground would more than likely have called for a recreation of the monopoly system and the pre-war status quo, in the short term at least.

4.7. Announcements and Outcomes:
London began choreographing its statement to obtain ‘the fullest possible publicity value, especially in the US.’ The Colonial Office wanted to hold off informing the State Department in case it tried to pre-empt the British announcement and steal the public relations coup. The Foreign Office, professing little faith in the Colonial Office’s publicity skills, cautioned over the ‘inflammable nature of this question.’ It feared that attempting to ‘jump’ the State Department would lead to criticism of the announcement as inadequate, ‘irritate them … and incidentally undo some of the patient work … [of] the last year and half at getting the Far Eastern Division of the State Department to consult and act with us whenever we can.’ In the end, the Foreign Office decided to inform the State Department, but explicitly ask it not to pre-empt London’s announcement.

By 16 September both Anslinger and Sharman were celebrating. As Sharman described it:

>This is the most happy solution to what might well have proved ... a major conflict of policy between the United States and Great Britain at or before the Peace Conference ... I am abundantly satisfied that your personal influence, as also your action in having the unofficial show down meeting in Washington last March, was by far the most influential factor.

Anslinger labelled it ‘the first concrete post-war agreement for which Treasury is responsible.’

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115 Dudley Minute, File: Control of opium in Far Eastern Territories freed from Japanese occupation, 18 October 1943, BNA-FO371/34545. Also numerous documents in BNA-FO371/34546.
116 Paskin to Williams, 21 October 1943, BNA-FO371/34546.
118 FO to Washington Embassy, 30 October 1943, BNA-FO371/34546.
On November 10, 1943, in response to a prepared question in the House of Commons, the Secretary of State for the Colonies recited a statement two paragraphs in length. It was accompanied on the same day by the Netherlands’ announcement. The US Acting Secretary of State noted the announcements ‘with satisfaction’ and gushed that ‘the problem of smoking opium should now be susceptible of solution.’ Drug control advocates went to work drawing press attention in the US. The story was initially overlooked, a fact that was decried as ‘outrageous’ by long-time US drug control activist Elizabeth Washburn Wright. A month later The Washington Post concurred, writing in an editorial that it had not ‘received the attention it deserves.’

Kai-shek’s government responded to Britain’s poke at ‘other countries’ by publicly welcoming the announcements and painting China alongside the US as the ‘principal advocates’ for total prohibition. Britain was infuriated at being placed ‘on the defensive’ and the Foreign Office privately cursed the Chinese as ‘hypocrites’ who ‘cleverly … conceal their hypocrisy!’ Delevingne wrote an opinion piece in The Times claiming that it would ‘make a not unimportant contribution to the cause of Anglo-American cooperation particularly in the Far East.’ Congressman Carroll Reece, in a speech on the House floor, described how Anslinger, through his informal negotiations, was ‘largely responsible for this diplomatic triumph.’

Behind the backslapping, voices of dissent surfaced in Britain. For example, Mr Clifford Bellairs wrote in a letter to The Times:

*I have had some 30 years’ experience of the opium trade and this I can prophesy with certainty: if the Government merely prohibits the import and sale of smoking opium in the Far East the illicit traders, smugglers and dope peddlars will return en masse to make enormous profits to spread the vice, and it will not end the comparatively*

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121 Opium smoking, Far Eastern Territories, 10 November 1943; Statement by Acting Secretary of State, 10 November 1943, BNA-FO371/34546.
innocuous smoking of opium ... but will open up further fields for the illicit consumption of morphine and cocaine, each a hundred times more deadly.\textsuperscript{126}

Another major domino fell in 1945 when the French announced a policy of prohibition in their colonies.\textsuperscript{127} However, fears of social unrest and inability to implement prohibitions meant that highland groups were exempted and an unofficial opium monopoly continued.\textsuperscript{128} Nevertheless, the paradigm for the post-war multilateral drug control world was being shaped. Successful prohibition in one country depended on successful prohibition in all countries and Britain now had a more coherent vested interest in securing universal and effective supply controls throughout Asia. It seemed that much of the deadlock of the inter-war years was headed for extinction. Having won this wartime coup, Anslinger had earned significant leverage both at home and abroad. He quickly turned his sights towards the Middle East and Iran in particular.

5. Conclusion:

The years 1939-43 had caused a significant earthquake in the international drug control system. With London’s blessing, the League drug apparatus had fled to Washington and had subsequently witnessed an increased American influence. Simultaneously, a set of relationships had developed in London that would serve as an information exchange and counter-weight to this new US influence. Nevertheless, the leverage that the war afforded America, coupled with a rapidly evolving strategic arithmetic for London, allowed the US to influence British drug policy to an extent that would have been unthinkable in the pre-war years. With Anslinger having successfully bluffed a high level of resolve within the US government, Britain came to view its options in rather stark terms. The first option was to continue a fight to sustain monopolies in colonies it did not currently hold, and whose benefits it did not currently feel. Moreover, this would involve fighting for a system that many individuals within the British government viewed as unsustainable in the face of their pre-existing international commitments. The consequences of this would be to potentially, seriously alienate American public opinion, and thereby anger their single most important

\textsuperscript{127} McAllister, Drug Diplomacy in the Twentieth Century: An International History, 152.
ally and friend, upon whose future cooperation they were growing ever more dependent as the war dragged on.

The second option was to agree to US demands as far as possible, ignore administrative problems until after the colonies were firmly back in their hands, and reap what public relations victories the change in policy would afford, both within the US and China. Faced with this arithmetic, it is unsurprising that the British chose the latter option. Nevertheless, had Anslinger not used his wartime leverage and pushed the issue it is unlikely that such a resolution would have occurred. Consequently, by the close of 1943, the Commissioner could justifiably feel that he had gambled and won. He could now begin prodding producer States into joining the international opium trade system, strengthening domestic production controls, instituting and enforcing prohibitions and pushing towards a global production limitation agreement. Furthermore, the shift in policy would have major ramifications for drug control in Asia, fundamentally changing the trajectory of drug control. Much of the continued evolution in Asian drug policies over the remainder of the century and beyond could be traced to this historical inflection point and perhaps helps explain the embrace of prohibitionist policies during the period of decolonisation going forward.

Bibliography:


