

# It is time to end the 'war on drugs' and redirect resources toward evidence-based policies underpinned by economic analysis

**LSE** [blogs.lse.ac.uk/euoppblog/2014/05/15/it-is-time-to-end-the-war-on-drugs-and-redirect-resources-toward-evidence-based-policies-underpinned-by-economic-analysis/](https://blogs.lse.ac.uk/euoppblog/2014/05/15/it-is-time-to-end-the-war-on-drugs-and-redirect-resources-toward-evidence-based-policies-underpinned-by-economic-analysis/)

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*Drugs and the problems associated with illicit drug markets are one of the major issues facing countries in Europe and elsewhere across the world. **John Collins** outlines findings from a report by an LSE Expert Group on the need for a new global drug strategy. He writes that the so called 'war on drugs' has led to significant negative outcomes in terms of public health, associated violence, and economic costs. The report calls for a new model which puts evidence-based policies built on rigorous economic analysis at the centre of approaches.*



Quantifying the enormous harms of the 'war on drugs' is an extremely difficult task. How to begin calculating the health epidemics, the violence associated with illicit markets and the tragedy of mass incarceration internationally? An LSE expert group attempted to begin counting the costs of the war on drugs in a new report, *Ending the Drug Wars: Report of the LSE Expert Group on the Economics of Drug Policy*. The report includes a call from some of the world's leading economists, including five Nobel Prize winners, to end the 'war on drugs' and experiment with alternative policies.

The key message of the report is that it is time to end the 'war on drugs' and massively redirect resources toward effective evidence-based policies underpinned by rigorous economic analysis. The report also emphasises that the current militarised and enforcement-led global drugs strategy has produced enormous negative outcomes and collateral damage. These include mass incarceration in the United States, highly repressive policies in Asia, vast corruption and political destabilisation in Afghanistan and West Africa, immense violence in Latin America, an HIV epidemic in Russia, an acute global shortage of pain medication and the propagation of systematic human rights abuses around the world.

One example of this damage is that as drug markets swell, so too does violence. In Colombia, for instance, the increase in the size of the drug markets observed between 1994 and 2008 (about 200 per cent) explains roughly 25 per cent of the current homicide rate in the country. This translates into around 3,800 more homicides per year on average that are associated with illegal drug markets and the war on drugs.

Traditionally, the goal has been to use law enforcement and even the military to suppress the illicit drug market, but such strategies have major drawbacks. Successful counter-narcotics programmes have only displaced the market elsewhere: for example shifting criminal gangs – and their associated violence – to Mexico, where the homicide rate increased threefold within a period of just four years. Even interdiction and drug seizures can

have major unintended consequences. The report notes that in Colombia, more efficient interdiction strategies may account for 21.2 per cent and 46 per cent of the increase in homicides and drug related homicides, respectively, experienced in the north of Mexico.



Credit: James Gardner (CC-BY-SA-NC-3.0)

This is not to say that there is no place for law enforcement in global drug policy. The problem is with the pursuit of a 'war on drugs' strategy that fails to recognise the limits of enforcement and results in a severe misallocation of resources towards ineffective and often counterproductive policies. Often these come at the expense of far more effective public health policies which are generally underfunded and inadequate to meet needs.

The implications are clear. There must be a drastic reallocation of focus and resources toward proven public health policies based on access to treatment and harm reduction. Recent research has shown that treatment produces substantially larger benefits to society in monetary terms than it costs to administer. One [study](#) found a 7:1 ratio, with treatment costing an average of \$1,583 per person, but benefitting society to the level of \$11,487.

There are even greater returns on harm reduction initiatives such as substitution therapies, supervised drug consumption facilities, and needle and syringe exchange services. The World Health Organization, the UN Office on Drugs and Crime, and the Joint United Nations Programme on HIV and AIDS have previously [estimated](#) that for every dollar invested in opioid dependence treatment programmes, a return of between \$4 and \$7 can be expected in terms of reducing drug-related crime, criminal justice costs and theft. When savings related to health care are included, total savings can exceed costs by a ratio of 12:1.

The key conclusion from these findings is that governments must drastically reallocate resources away from damaging and counterproductive policies based on punitive and enforcement led policies. There should also be a shift from a supply-oriented focus on producer and transit countries, toward an illicit market impact-reduction focus. This means that nation states and the international community must aim at ensuring population security, economic development and protecting human rights, rather than blindly focusing on the quantities of narcotics seized or numbers of people arrested.

Finally, policymakers should pursue rigorously monitored policy and regulatory experimentation, as is currently underway in several states and jurisdictions with respect to cannabis regulation. A new strategy will take time to emerge, but the most immediate task is ensuring a sound economic basis for policies and reallocating international resources accordingly.

*For a longer discussion of this topic, see the full report [here](#)*

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*Note: This article gives the views of the author, and not the position of EUROPP – European Politics and Policy, nor of the London School of Economics.*

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