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Is there



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We are fast approaching an historical moment in which proposals for a radical reformulation of drug policy will actually begin to be taken seriously by society at large.

As public interest begins to percolate through to the political class, important choices must be made and clear positions indentified.

The present document represents a first approximation to some of the principal questions involved in this process.

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ssentially, I will argue that we must overcome narrow sectoral interests - whether these be the just demands of particular drug using social groups, or the private objectives of established professional institutions. In order to prevent the dilution of our force for change into a series of piecemeal initiatives, we should embrace the need for a campaign which emphasizes both the specificity of the drugs question, and the broader implications in terms of its transcendence of ingrained Left/Right, North/South political divisions.

Are drug producers and users our only constituency?

In focusing on the repeal of drug prohibition, one must firstly avoid the question being clouded by the imposition of extraneous political agendas.

Whether they be sociologists pressing

for integrated rural development, economists promoting the rescheduling of international debt, social workers demanding better government services, or medical personnel insisting on more sophisticated facilities, the tendency of many commentators is to mix the specific drug related issues with a wide range of traditional professional concerns.

Of course, we can recognise that the use and production of psychotropic substances is related to a wide range of social, political and economic factors. But the relation is not the one simple cause and effect, and no particular magic wand - "development", "education", "improvement of social conditions" - offers the sole key to resolving the contradictions generated by drug prohibition. Indeed, it is worth re-stating the rather obvious point that the only cure for the ill-effects of prohibition must

be, in the terms of the strictest logic, a radical reversal of repressive anti-drug legislation, quite irrespective of the relative harm or benefit caused by the consumption of each individual substance.

A similarly forthright position is necessary in dealing with the perspectives of drug users themselves, many of whom tend to promote one drug to the exclusion of all others. The traditional image of drug reformers as a consumer interest group - whether of cannabis users, hard-core "junkies", or exponents of psychedelic religions has performed a distinct disservice to the drug legalization movement. This is not, as "straight" reforming opinion would have it, because it is naive and irresponsible to defend the intelligent use of psychoactive substances. Quite the contrary, a serious discussion of the positive benefits of certain forms of drug

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use is indispensable in the development of a clear strategy for drug legalization.

We will return to this point later, however, since it is not the crucial consideration here. Rather, the principal reason why drug legalization should not be led by consumer pressures is "political" in the most traditional structural sense. Any movement which is clearly identified with a sectoral interest - in this case drug users - can only be as strong as the sector it represents. And, despite the fact that the majority of adults in most Western societies have experimented with illicit drugs at one point or another in their lives, drug users do not form a sufficiently cohesive or organised group to bring about changes as the result of their own specific political weight.

The same is equally true of drug-producer pressure groups; whether these be coca-growing peasants, opium war lords, trafficking syndicates, or indoor cannabis gardeners. By now it should be clear that strategies derived from trade-union militants - or from corporate lobbies, for that matter - do not offer the best model for how the legalization movement should proceed. Rather than sow division by adopting specific class or sectoral interests, we should seek to build broad international alliance focused on the common adversary: drug prohibition.

Do we have a single body of belief?

The exponents of drug prohibition can count on two firm bases of support: a clear ideology - abstinence, conformism, "single consciousness" - and the back up of strong public and private institutions. We, in comparison, are entirely bereft of such support. Not only are antiprohibitionist institutions at a very embryonic stage; also, the very idea of being against something (prohibition) conveys to many the false impression that there must exist a definite antiprohibitionist theory.

In fact, such a theory is conspicuous only by its absence. Rather than manifesting a seamless body of opinion, anti-prohibitionism offers little more than a hasty, and often uncomfortable, marriage between groups and individuals with widely differing ideological agendas. North/South, Left/Right: it is hard to see, for example, how the laissez-faire platform of European conservatives can be reconciled with the corporate-socialist demands of Andean peasant organisations.

In this contradiction, the politics of

anti-prohibition offer a significant challenge: that of understanding the emergence of new forms of political action which, unlike the arm-wrestling of highly-organised class or sectoral interest groups, depends precisely on the building of bridges between disparate and often divergent strands of opinion. In attempting to reconcile social imperatives with a respect for the individual free spirit, anti-prohibitionism must pioneer a form of politics particularly suited to the onset of the third millenium, in which real respect for autonomy becomes the basis of collective action.

Certain features of this marriage between collective interest and individual freedom may be seen in many of the experiments in drug policy reform. One distinguishing feature of those European cities which have embraced innovative drug policies - Liverpool and Amsterdam in particularis the surprising degree of sympathy which has been forged between police drug squads and illicit drug users, groups which would have been at daggers drawn twenty years ago, and are still at war today in most Western capitals, notably in the Americas.

For this antagonism to have been overcome, both groups have had to shed ingrained prejudices. Users have had to overcome their understandable resentment towards the law-enforcement community, and the police have had to accept that classic policing by consent methods is simply inoperable when faced by victimless crimes. The emerging consensus favours a degree of mutual accommodation (mutual "respect" would probably be overstating the case); even in the climate of the early 1990s, when many of the cautious advantages of the previous decades are beginning to be reversed elsewhere. there is little enthusiasm among police officers in these cities for a return to the old repressive scenario.

Should we pursue an electoral strategy?

The emergence of tacit support for antiprohibitionism within the organisations designed to bear down on drug users, traders and producers, illustrates a further difficulty in advancing the case for legalization. Not only do legalizers not share a common theory or common class interests, they also do not necessarily all support the same political tactics. Behind the scenes influence may do more good in Holland or Great Britain than stringent campaigning. On the other hand, overt electioneering may

play a significant role in advancing the public debate in southern Europe and Latin America, as has recently been the case in Italy.

What are the dangers of purely electoral strategy? Other than the obvious one - the appropriation of "broad front" anti-prohibitionist opinion by sectarian party interests - a more fundamental contradiction still remains unsolved. As the legalization of drugs creeps onto the agenda of a growing number of political parties, so also do the risks increase of the anti-prohibitionism becoming bogged down in entrenched ideological antagonisms.

Rather than promote change, such an outcome could lead to the same immobilism which characterized the nuclear disarmament movement for so many years. This is a risk which antiprohibitionism must nip in the bud: building political platforms acceptable to left, right and green, and avoiding the precipitated use of the electoral card where this is likely to divide antiprohibitionists, or to alienate the support of established political parties.

Should we endorse calls for an "open debate" on drugs?

In the current effort to produce a strategy designed to deprive the War on Drugs of its legitimacy, two distinct approaches are beginning to define themselves. The 'no holds barred' legalization approach is one, the gradualist decriminalization process another - less satisfactory, for sure, but nevertheless better than no change at all. More acceptable to orthodox opinion than either of these, however, has been to join the chorus in an oftenrepeated call for an "open debate" on the effects of drug prohibition.

A large number of the more astute operators in the field, accustomed to paying lip service to whatever ideas are currently fashionable, do appear to be moving in this direction. While in some cases this tactic is determined by legal necessity - in order to avoid charges of promoting illicit drug use - as a serious intellectual position it somewhat lacks consistency. Value-neutral fence sitting, sustained for decades in the face of accumulating evidence of the destructiveness of prohibition, can only be seen as a means of maintaining seminar addiction, of defusing a real political face-to-face and of protecting the narrow interests of drugs experts as a professional body.

An "open debate", so long as it remains simply a debate, does not necessarily threaten prohibition; on the

contrary, well managed and controlled, a debate may lend prohibition a spurious credibility, by appearing to address the alternatives, and by allowing minor changes in policy before reconfirming the orthodoxy. In this context, antiprohibitionists have a clear responsibility: to participate in "open debates", of course, but themselves to call for legalization, and not simply yet more debate.

So how do we control the use of drugs?

In the face of the obfuscation of the "open debaters", anti-prohibitionists have a strong card: outright legalization. This is a clear political demand, straightforward in terms of ending the War on Drugs, but complex in terms of what to replace it with. It is here, I believe, that the truly interesting debate on drugs is located. Unlike ultralibertarians who wince at the very use of the word "control", I find it both legitimate and desirable that societies discuss means of controlling the use of substances that may, under circumstances, cause some harm to some people.

As an anthropologist, the concept of control does not necessarily arouse in me visions of a police state, or even of the prosecution of the War on Drugs by less heavy handed, more liberal means. Cultural and social controls are present in a thousand different ways; it should be our purpose to discover which ones work best, and at least cost to individual liberty. At a most primary level, such considerations raise a number of questions about the organisation of a legal market in drugs.

The ongoing theoretical debate between free-marketeers and defenders of a State monopoly is a challenging and stimulating one, and one which we should seek to encourage. However, even the most cursory study of the development of other legal drug markets shows to what extent they are determined by preceding ways of doing business. Will legal cannabis and opium (both of them annual crops) tend towards the old Asian model of "spot" markets, with auctions organised to sell actual physical stocks of the drug, as had traditionally been the case with wines. tobacco and tea? Will coca, on the other hand, tend to follow the precedent of coffee, whose erratic harvest and cycles of over production have combined with ingrained habits of New World commodity speculation to produce sophisticated futures markets?

One can only speculate on such

matters, but the speculation may well be fruitful in avoiding - not only for the consumer, but for the producer as wellthe worst effects of both unfettered free trade and stringent state control. The Dutch, as ever, seem to have confirmed their historic role in developing new drug markets; it is singularly appropriate, as well as socially beneficial. that cannabis should have been domesticated through the same institution - the Amsterdam coffe house which earlier introduced chocolate. coffee, tea and tobacco. It is also interesting that the Amsterdam model involves a successful marriage of private enterprise - at the level of coffee house ownership and small scale dealing - with discreet state intervention in the wholesale market.

Must we therefore, become advocates of the "beneficial plants" approach?

The economic organisation of a legal drug market, in itself, only sets the stage for those much more profound cultural processes involved in lending meaning to the use of psychoactive substances. Such processes, too, have deep historical roots. Significantly, in all the examples which have resisted the scourge of prohibition, we find a remarkable congruence on the essential point - the need to promote a "good model", to provide positive orientation in the use of drugs.

Recognised in our society with respect to alcohol, tobacco, and the caffeinated beverages, similar mechanisms exist in other cultures with regard to coca, opium, cannabis and a host of other drugs. Of course, traditional societies tend to have access only to relatively crude vegetable products, and there is certainly reason to value the pharmacology of herbal preparations over that reason to value refined or synthetic chemicals. Does this mean, however, that we must champion coca against cocaine, opium against heroin, guarana and khat against the amphetamines, the religious use of mushrooms and ayahuasca against the purely hedonistic use of LSD or MDMA?

As a means of medical prevention, or of promoting relatively healthy drug habits, there is much to recommend this position, in essence similar to the pipe/cigar/snuff argument in the face of cigarettes. However, taking a broader sociological view, there is indisputable evidence that the same mechanisms of cultural control found in highly structured forms of plant based shamanism are also present, albeit in

summary versions, among intravenous heroin users, cocaine base smokers, and so on. What is necessary for the development of coherent drug-related policies, is to establish the degree to which these mechanisms are recognised by the participants, capable of intelligent evolution, and reactive to the introduction of new conditions and threats such as the spread of HIV.

A recognition of the importance of informal social and cultural mechanisms for controlling drug use leads, therefore, rather obviously to a position which acknowledges the need for drug advocacy, that is, for the positive reinforcement of the use of drugs in their most beneficial, or least problematic, forms. I should stress that I understand "least problematic" in primarily social terms, referring to such factors as crime, violence and the spread of communicable diseases. And I should add that "most beneficial" may involve such paradoxes as the use of drugs to encounter a personal sense of meaninglessness, to explore a private vision raised to the level of acute paranoia, and to pursue intensity to the point of confrontation with one's own biological death.

In short, rather than subscribe to the easy talk about legalization being a first step to "discouraging" the use of drugs by other means, I think antiprohibitionists should face squarely the uncomfortable political fact that what we are defending is actually the right to alter your consciousness if you want to, and without any obligation to do so in some spiritually uplifting manner.

Naturally, this must be subject to all the reasonable constraints on behaviour which may harm other people. The hard core of the anti-prohibitionist position, however, lies not in some updated form of social medicine, but in the assumption of a position which recognises both the usefulness and the dangers of each individual form of drug consumption and which accepts, without moralistic posturing, both blissful transcendence and the dark side of the human condition.