



**DEBATING  
DRUGS**

**HOW TO MAKE THE CASE  
FOR LEGAL REGULATION**



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**A CONCISE GUIDE  
TO THE ARGUMENTS**

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## **TRANSFORM DRUG POLICY FOUNDATION** GETTING DRUGS UNDER CONTROL

Transform Drug Policy Foundation is an international, charitable think tank with staff in the UK and Mexico. We are working to get drugs under control by advocating for strict regulation of all aspects of the drug trade. We aim to equip policy makers and reform advocates with the tools they need to fundamentally change the current approach to drugs and create a healthier, safer world.

Transform emerged in response to the increasingly apparent failings of current national and international drug policy. We draw attention to the fact that drug prohibition itself is the major cause of drug-related harm to individuals, communities and nations, and should be replaced by effective, just and humane government control and regulation. We provide evidence-based critiques of the war on drugs, new thinking on alternatives to the current enforcement-oriented regime of prohibition, and expertise on how to argue for reform. In addition to working with a broad range of media, civil society and professional groups globally, we advise national governments and multilateral organisations, and hold ECOSOC special consultative status at the UN.

**TRANSFORM**  
Getting drugs under control

[www.tdpf.org.uk](http://www.tdpf.org.uk)

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# INTRODUCTION

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## ABOUT THIS GUIDE

This is a guide to making the case for the legal regulation of drugs from a position of confidence and authority. Organised into 12 key subject areas, it provides an at-a-glance summary of the arguments for legal regulation, followed by commonly heard concerns and effective responses to them. For a more detailed exploration of the issues and arguments covered in this guide, please see the publications and other resources available at [www.tdpf.org.uk](http://www.tdpf.org.uk) and [www.countthecosts.org](http://www.countthecosts.org).

## WHY LEGALLY REGULATE DRUGS?

Before setting out the arguments for legal regulation, it is often useful to clarify some common terms, in order to avoid confusion. 'Legalisation' is merely a process – namely, of making an illegal drug legal – but 'legal regulation' refers to the end point of this process: the controls that will be put in place on the production, supply and use of the drug once it has been legalised. In addition, 'decriminalisation' typically refers only to the removal of criminal penalties for personal drug possession, with production and supply remaining illegal.

It is also useful to explain what motivates those who support legal regulation. Transform, along with most other reform advocates, propose that drug policy should:

- protect the young and vulnerable;
- reduce crime;
- improve health;
- promote security and development;
- provide good value for money;
- and protect human rights.

The experience of the past 50 years demonstrates that prohibition cannot achieve these aims, and in fact actively undermines them. This guide shows how, by contrast, models of legal regulation such as the five listed below, can better realise these aims.<sup>1</sup>

- **Prescription** – The riskiest drugs, such as injectable heroin, are prescribed to people who are registered as dependent on drugs by a qualified and licensed medical practitioner. This model can also include extra tiers of regulation, such as the requirement that drug consumption takes place in a supervised medical venue.

- **Pharmacy** – Licensed medical professionals serve as gatekeepers to a range of drugs – such as amphetamines or MDMA – dispensing rationed quantities to people who wish to use them. Additional controls, such as licensing of purchasers, could also be implemented.
- **Licensed sales** – Licensed outlets sell lower-risk drugs at prices determined by a regulatory authority, in accordance with strict licensing conditions, such as a ban on all forms of advertising and promotion, no sales of non-drug products, no sales to minors, and health and safety information on product packaging.
- **Licensed premises** – Similar to pubs, bars, or cannabis ‘coffee shops’, licensed premises can sell lower-risk drugs for on-site consumption, subject to strict licensing conditions similar to those for licensed sales, described above. Additional regulation, such as partial vendor liability for customers’ behaviour, may also be enforced.
- **Unlicensed sales** – Drugs of sufficiently low risk, such as coffee or coca tea, require little or no licensing, with regulation needed only to ensure that appropriate production practices and trading standards are followed, and that product descriptions and labelling (which includes use-by dates and ingredient lists) are accurate.

All of these regulatory models already exist and are in operation, in various forms, around the world. They are used to control the entirely legal distribution of a range of medical, quasi-medical and non-medical psychoactive substances. The type of regulation that Transform proposes is therefore far from radical and can in fact be seen as a middle-ground position – located between the two extremes of a legal, commercialised market and absolute prohibition.<sup>2</sup>

## IDENTIFY YOUR AUDIENCE AND ESTABLISH COMMON GROUND

When using the material presented here, it is important to first ask yourself three questions: Who is your audience? What do you want them to do? and What content and tone do you need to use? By answering these questions, you should be able to select the arguments that are likely to be most effective at convincing your audience or, when appropriate, wrong-footing your opponents.

Finally, it is useful to establish common ground with your opponents or audiences, in order to demonstrate that you all want the same things from drug policy. By establishing shared aims (such as the six listed above), you can create a useful starting point from which the key issues can then be better explored. This allows you to discuss whether current policy actually delivers these aims, and to move the debate on to possible alternative approaches that could produce better outcomes. As an overarching position, we can always agree that we want to get drugs under control.

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# 1. WHAT IS LEGAL REGULATION?

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Responsible governments already legally regulate many risky activities and other drugs effectively, including alcohol, tobacco and pharmaceuticals. So, far from being 'radical', legal regulation is in fact the norm. In reality, it is prohibition that is the radical policy.

CONCERN	RESPONSE
<p>Legal regulation would mean a drugs 'free-for-all', in which everyone has easy access to any drug they like</p>	<ul style="list-style-type: none"><li>• Although the legal regulation of drugs is sometimes characterised as a 'liberalisation' or 'relaxation' of the law, it is in fact the opposite: it is about bringing the drug trade within the law, so that strict controls can be applied. Such controls are impossible to impose under prohibition</li><li>• Legal regulation enables responsible governments to control which drugs can be sold, who has access to them, and where they can be sold. Under prohibition, it is criminals who make these decisions</li><li>• Anyone can buy any drug they like while criminals control the trade. Drug dealers don't ask for ID</li><li>• Under a system of legal regulation, many activities, such as sales to minors, would remain illegal and subject to sanctions</li><li>• It is a caricature of the reform position to say that advocates of legal regulation want drugs to be freely available – sold, for example, in supermarkets. It is irresponsible in the extreme that alcohol and tobacco are already sold in this way. We should aim for better, stricter regulation of both legal and currently illegal drugs</li></ul>

CONCERN	RESPONSE
<p>The legal regulation of drugs would be a dangerous leap into the unknown</p>	<ul style="list-style-type: none"> <li>• Prohibition was the leap into the unknown. There was never any evidence that it would be effective. But now, after more than half a century of this policy, we know that it is costly and counterproductive</li> <li>• We already legally regulate many risky activities and substances effectively. Even some drugs prohibited for non-medical use – including opiates, amphetamines, cocaine and cannabis – are produced safely and securely for medical use without any of the chaos, violence and criminality of the illicit trade</li> <li>• There would be no ‘one-size-fits-all’ approach: the riskier the drug, the stricter the controls that should be placed on it. Some less risky drugs, for example, would be sold by licensed retailers, while more risky drugs would only be available via medical prescriptions for people registered as dependent users. The supply of the most risky preparations, such as crack cocaine, would remain prohibited</li> <li>• We can apply the lessons learned from the control of other risky substances and activities – such as alcohol, tobacco, prescription drugs, gambling and sex work – to ensure that regulation promotes public health and safety</li> <li>• Change will not happen overnight – it will be phased and cautious, based on experimentation, with policy carefully adapting and evolving in response to emerging evidence. If policies do not work they can be revisited and, where necessary, reversed</li> </ul>
<p>It is naïve to think legal regulation is a panacea or ‘silver bullet’ for the problems caused by drugs</p>	<ul style="list-style-type: none"> <li>• This is a strawman argument. No one is claiming that legal regulation is a silver bullet for all the problems associated with drugs. It is, however, a silver bullet for many of the disastrous problems caused by drug prohibition</li> <li>• To meaningfully address the wider challenges posed by drugs, legal regulation must be complemented by improvements in public health, education, prevention, treatment and recovery, as well as action on poverty, inequality and social exclusion</li> </ul>

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## 2. LEVELS OF DRUG USE

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More than 50 years of prohibition, and over a trillion dollars spent on enforcement, have failed to prevent a dramatic rise in illicit drug use, with over 240 million people using drugs worldwide today. This is hardly surprising given that research consistently shows criminalisation does not deter use. Contrary to some claims, legal regulation simply means the availability of drugs is controlled, not increased. However, even if levels of drug use did continue to rise under legal regulation, overall social and health harms would still fall significantly.

CONCERN	RESPONSE
<p>Without criminalisation to act as a deterrent, drug use will dramatically increase</p>	<ul style="list-style-type: none"><li>• Comparative studies of drug laws around the world show no link between harsh enforcement and lower levels of use.<sup>3 4</sup> The theory that criminalisation has a significant deterrent effect, which underpins the policy of prohibition, is not supported by evidence</li><li>• In the Netherlands, where the possession and retail supply of cannabis is legal in practice, rates of cannabis use are almost the same as the European average<sup>5</sup></li><li>• When Portugal decriminalised the possession of all drugs in 2001, drug use did not rise dramatically, as some feared. Over ten years on, levels of drug use remain below the European average<sup>6</sup></li><li>• In many countries, tobacco use is half what it was 30 years ago.<sup>7</sup> This reduction has been achieved without blanket bans or criminalising smokers; it is the result of health education and stricter market regulation, only possible because tobacco is a legal product</li><li>• Levels of drug use are often equated with levels of drug harm, but the vast majority of drug use is non-problematic. Rather than narrowly focusing on reducing use, policy should seek to reduce overall harm</li></ul>



CONCERN	RESPONSE
<p>Legal regulation will increase the availability of drugs</p>	<ul style="list-style-type: none"> <li>• Legal regulation means controlled, not increased, availability, with tight controls on what can be sold, where it can be sold, and to whom. Under prohibition, there are no such controls</li> </ul>
<p>Large, profit-motivated corporations will commercialise drug markets and aggressively promote drug use</p>	<ul style="list-style-type: none"> <li>• Drug markets do not have to operate along commercial lines. Options exist for state-run institutions or non-profit organisations, to manage the drug trade effectively, in ways that remove the financial incentive to increase or initiate use</li> <li>• We can learn from the mistakes of alcohol and tobacco control. Levels of alcohol and tobacco use are the result of decades of commercial promotion, often in largely unregulated markets. With currently illegal drugs, we have a blank slate: we can put in place optimal regulatory frameworks from the start, controlling all aspects of the market</li> <li>• We have a choice: the drug trade can be controlled by criminals or by doctors and pharmacists. There is no third option in which drugs don't exist</li> <li>• Criticisms of some commercial companies are entirely legitimate. However, unlike organised crime groups, they are regulated by government bodies, pay taxes, are answerable to the law, unions and consumer groups, and do not use violence in their daily business dealings</li> </ul>
<p>Drug use is currently falling. We shouldn't risk reversing this trend by legalising</p>	<ul style="list-style-type: none"> <li>• The current number of people who use drugs is so high that it constitutes a significant public health, crime and security problem. Even if some drug use is declining, prohibition leaves too many people using unregulated drugs in unsafe ways, and a vast market in the hands of organised crime</li> <li>• Research consistently shows that rates of drug use are primarily driven by changing cultural, social or economic trends, not by the intensity of enforcement<sup>8</sup></li> </ul>

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### 3. THE YOUNG AND VULNERABLE

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Rather than protecting the young and vulnerable, the war on drugs has placed them at ever greater risk – from the harms of drug use, and the risks of being caught up in the violence and chaos of the criminally controlled trade. We want a market legally regulated by responsible government authorities, combined with the redirection of enforcement spending into proven health and prevention programmes aimed at young people.

CONCERN	RESPONSE
<p>Prohibition keeps drugs out of the hands of many young people. Legal regulation would simply increase their access to drugs</p>	<ul style="list-style-type: none"><li>• Prohibition has proven highly ineffective at restricting young people's access to drugs</li><li>• Effective legal regulation, which includes age restrictions, can limit young people's access to drugs</li><li>• We should obviously do all we can to prevent young people from taking drugs. However, if minors do obtain legal drugs intended for adult use, they are at least better protected because the drugs are quality controlled and carry dosage and health and safety information – as legal pharmaceuticals do now</li><li>• For those young people caught using drugs, criminalisation can restrict their life chances and further marginalise them</li><li>• Criminal production and supply maximises the dangers associated with drug use, by encouraging young people to consume risky products in risky environments</li></ul>
<p>The UN Convention on the Rights of the Child requires a zero-tolerance approach to protect children from the dangers of drugs</p>	<ul style="list-style-type: none"><li>• The UN Convention on the Rights of the Child calls for the protection of children, not punishment and criminalisation. The war on drugs is at odds with the emphasis placed by the UN on human rights and health, and it is these considerations that should shape the development of drug policy</li></ul>

CONCERN	RESPONSE
<p>Criminal drug laws send out the message that drug use is dangerous and unacceptable</p>	<ul style="list-style-type: none"> <li>• It is not the job of the criminal justice system to send messages on public health, and when it has tried to, it hasn't worked</li> <li>• Savings from enforcement budgets and tax revenue from legal drug sales could be used to fund more effective, targeted drug education programmes</li> <li>• Legal regulation, and the control it gives us over packaging, vendors and outlets, provides far better opportunities to send messages about the dangers of drug use</li> <li>• The decline in tobacco use in many countries<sup>9</sup> demonstrates that the threat of criminalisation isn't required to make people aware of the risks of drug use. Stricter regulation and better health education are more effective and humane ways of encouraging people to make healthier lifestyle choices</li> </ul>
<p>Prohibition protects the most vulnerable and marginalised in society. Legal regulation would simply put them at greater risk</p>	<ul style="list-style-type: none"> <li>• Prohibition actively fuels the marginalisation of vulnerable people. It is a policy that stigmatises and discriminates against people who use drugs, the poor, women, young people and, in particular, ethnic minorities. Despite the fact that black people and white people use drugs at almost identical rates, black people are dramatically more likely to be arrested, prosecuted and incarcerated for drug offences<sup>10 11</sup></li> <li>• While people living in poverty are no more likely to use drugs than the rest of the population, poor people are far more likely to be harmed as a result of their drug use<sup>12</sup></li> </ul>

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## 4. CRIME

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Rather than reduce crime, prohibition actively creates it. The illegality of drugs has created a kind of alchemy, turning plants into consumables worth, in some cases, more than their weight in gold. This provides a huge profit motive for criminal groups to enter and control the trade. These inflated prices also fuel low-level street crime, as people who are dependent on drugs are forced to steal and rob to support their habits. Finally, through its punitive response to drug use, prohibition makes criminals of millions of otherwise law-abiding people – particularly the most marginalised and vulnerable.

### CONCERN

Taking the drug trade away from criminal groups won't cause them to disappear; they will simply exploit other criminal opportunities

### RESPONSE

- Where other criminal opportunities are available, they are already being taken, often funded by the profits from illegal drugs. Legal regulation would remove one of the largest criminal opportunities in the world, now and in the future
- This concern implies we should maintain drug prohibition to keep criminals occupied with drug-related crime. Following this logic, we would not attempt to prevent any crimes, in case people went on to commit other offences instead
- Even if there is some diversion into other criminal activity, overall there will be a significant net fall in crime. It will also end ineffective enforcement measures that simply push drug production and transit – and all the associated crime and violence – into new areas, rather than eliminating them (the so-called 'balloon effect')
- Ending prohibition will free up resources to tackle other crimes. And this challenge will become easier because as criminals' illegal drug profits shrink, so does their power

CONCERN	RESPONSE
<p>Legal regulation means being soft on crime</p>	<ul style="list-style-type: none"> <li>• Legal regulation is tough on crime. The people who most strongly oppose it are the criminals who make vast profits as a result of prohibition</li> <li>• A significant proportion of acquisitive crime is committed by people who are dependent on drugs stealing to feed their habits. When Switzerland provided a legally regulated supply of heroin to people dependent on drugs, rates of burglary fell by half<sup>13</sup></li> </ul>
<p>We would of course reduce crime by legalising drugs. But in that case, why not legalise murder too?</p>	<ul style="list-style-type: none"> <li>• There is simply no moral or legal equivalence between adult drug use and murder. The former is a consensual activity that involves a personal decision about what individuals do to their own bodies. The latter, by definition, is a non-consensual activity, committed against individuals' wishes, with the express intention of causing them harm</li> </ul>

## 5. HEALTH AND RISK

Prohibition has led to a public health disaster. By leaving potentially harmful substances in the hands of organised criminals, and by criminalising and marginalising people who use drugs, prohibition maximises the health risks associated with drug use. Legal regulation protects health: governments can control availability and ensure drugs are of known strength and purity. Consumers are aware of what they are taking and have clear information on health risks, and how to minimise them.

CONCERN	RESPONSE
<p>Drugs are dangerous – that is why they are illegal</p>	<ul style="list-style-type: none"> <li>• We should regulate drugs precisely because they are dangerous, not because they are safe</li> <li>• While it is clearly true that all drug use, both illegal and legal, carries risks, these risks are dramatically increased when drugs are produced and supplied by criminal profiteers</li> </ul>

CONCERN	RESPONSE
	<ul style="list-style-type: none"> <li>• Prohibition maximises the health risks associated with all drug use. It pushes the market towards riskier, more potent (and therefore more profitable) products like crack cocaine, leads to the use of contaminated drugs of unknown strength, encourages high-risk using behaviours, pushes consumption into unsafe environments, and forces people who use drugs to come into contact with a potentially violent criminal underworld</li> <li>• Under prohibition, the threat of criminalisation means drug users are reluctant to seek medical attention when they need it</li> <li>• Doctors are often unable to provide appropriate emergency treatment, because even their patients cannot know what was in the substance they took</li> <li>• Ever-increasing spending on counterproductive drug law enforcement has reduced budgets for proven health interventions like prevention, harm reduction and treatment</li> </ul>
<p>Drugged driving would increase, and employees would go to work under the influence of drugs</p>	<ul style="list-style-type: none"> <li>• Driving while impaired by alcohol or other drugs is rightly illegal and would remain so regardless of any drug's legal status</li> <li>• In many countries, significant reductions in rates of drink driving have been achieved through public education and effective enforcement. Alcohol has not been prohibited</li> <li>• Employees would still be bound by employment contracts that forbid them from working while impaired by the use of any drug. Impairment should be the key concern, not legal status</li> </ul>

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## 6. SECURITY

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Treating drugs as a security threat and prohibiting them has inadvertently empowered organised criminals and corrupt officials, who can accrue both the wealth and the firepower to challenge legitimate state and government institutions.

CONCERN	RESPONSE
<p>Drugs and organised crime are a threat to the security of whole regions, so we must fight them</p>	<ul style="list-style-type: none"><li>• Drugs <i>per se</i> are not a threat to security – any more than alcohol, tobacco or pharmaceuticals are. The threat arises as a result of prohibition, which abdicates control of the market to organised criminal groups, who have in some cases become so powerful they are undermining national and regional security. Ending prohibition and putting governments in control of the market would significantly reduce this threat</li><li>• The use of the military and extreme policing techniques to tackle organised crime actually undermines security, with the public getting caught up in the increased violence between the authorities and criminals, or between rival gangs</li><li>• Law enforcement measures simply push drug production and transit – and all the associated crime and violence – into new areas, rather than eliminating them (the so-called ‘balloon effect’)</li></ul>

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## 7. DEVELOPMENT

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Prohibition is hindering development in drug producer and transit regions. It funds and empowers organised crime groups who then corrupt politicians, undermine institutions, deter investment, and cause valuable resources to be wasted on counterproductive law enforcement. Legal regulation would reverse this trend.

CONCERN	RESPONSE
Drugs and organised crime are a threat to the development of whole regions, so we must fight them	<ul style="list-style-type: none"><li>• Prohibition fuels corruption and violence that actively undermines development</li><li>• The extent and power of organised crime groups has meant that some regions are now comparable to armed conflict zones. The longer the conflict continues, the harder the process of post-drug-war reconstruction becomes</li><li>• Involvement in the illegal drug trade further marginalises already vulnerable populations, and the hidden nature of their activities often makes them invisible to policy makers and public debate. Stigmatisation arising from links to the criminal economy also creates obstacles to implementing effective development initiatives</li></ul>
In many countries, state institutions are too weak to regulate drugs	<ul style="list-style-type: none"><li>• Many state institutions are actively undermined by the corruption and violence that prohibition has generated. Reducing drug-related corruption and violence would help create an environment more conducive to institution-building in the longer term</li><li>• Some form of drug regulation is far better than no regulation at all, which is what happens when markets are left entirely in the hands of organised crime</li><li>• Regulation may not be required everywhere. For instance, little illicit opium poppy will be grown in Afghanistan when most of the global demand for opiates is met through a legal supply</li></ul>



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## 8. MONEY

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In addition to costing over \$100 billion a year, the global war on drugs produces disastrous secondary costs, both financial and social. The shift to legal regulation would free up wasted drug-war budgets to be spent on other enforcement priorities or other policy areas, such as education and healthcare.

CONCERN	RESPONSE
<p>Legalising drugs would be far too costly, both in terms of the enforcement of any new regulatory framework and the health costs resulting from increased rates of drug use</p>	<ul style="list-style-type: none"><li>• While there will be costs associated with a shift to a regulated approach, they are tiny in comparison to the costs of enforcing prohibition</li><li>• Legal regulation means not only saving a vast amount of money by no longer fighting a futile and counterproductive drug war, but also that money can be generated through taxes</li><li>• Under prohibition, finite resources are spent on counterproductive drug law enforcement, at the expense of proven health interventions</li><li>• Any revenue generated from legally regulated drug sales can help support health interventions such as drug prevention, treatment and harm reduction</li><li>• Even if use increases, health harms and financial costs will decrease, providing a substantial net benefit to society overall</li></ul>

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## 9. HUMAN RIGHTS

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By prioritising enforcement goals above all else, human rights have been marginalised under prohibition, leading to widespread and systematic abuses in the treatment of people who use drugs and in drug law enforcement itself. Police and military actions related to drug law enforcement are rarely subject to human rights scrutiny, and abusers are rarely held accountable. Drug policy should protect and guarantee human rights, not undermine them.

CONCERN	RESPONSE
<p>The human rights of people who use drugs shouldn't be prioritised over the health and wellbeing of society</p>	<ul style="list-style-type: none"><li>• The war on drugs is in reality a war on people, one that impacts on whole sectors of society, particularly the most marginalised and vulnerable. These include not only people who use drugs, but women, young people, the poor, indigenous communities and ethnic minorities too</li><li>• While there is no specific legal right to take drugs, the criminalisation of consenting adult drug use impinges on a range of internationally recognised legal rights, including the rights to privacy, health, culture, and freedom of belief and practice</li><li>• Drug laws that criminalise personal use are at odds with the law for comparable activities that involve risk-taking or self-harm by consenting adults, such as dangerous sports, unsafe sex, and the consumption of legal drugs, including alcohol and tobacco. These activities may not be wise, and they may even be actively discouraged, but they should not be criminalised</li></ul>
<p>Prohibition protects the human rights of those who do not wish to take drugs</p>	<ul style="list-style-type: none"><li>• The lack of human rights scrutiny in many producer and transit regions has created a culture of impunity in which torture, enforced disappearance, rape, executions and other serious rights violations have become normalised as a way of exercising authority</li></ul>

CONCERN	RESPONSE
	<ul style="list-style-type: none"> <li>As conflict situations intensify, the ability of citizens to exercise their rights is progressively undermined. Civil and political rights, economic, social and cultural rights, indigenous and environmental rights have all suffered to varying degrees</li> </ul>
<p>Various UN treaties dictate that a harsh response to drugs is necessary to protect the world's citizens</p>	<ul style="list-style-type: none"> <li>Much of the international legislation on drugs is hugely outdated. The main UN drug treaty, for example, was drawn up over half a century ago. We need a modern international drug control framework that is fit for purpose and respects – rather than undermines – health and human rights</li> </ul>

## 10. MORALITY

While some may believe that drug-taking is immoral, it should not be a crime. Other activities, such as gambling, adultery, or even homosexuality, are judged by some to be immoral, but they are not criminalised in modern societies.

CONCERN	RESPONSE
<p>It is wrong to take drugs, so it would be wrong to encourage their use by legalising them</p>	<ul style="list-style-type: none"> <li>Supporting legal regulation is not the same as endorsing drug use, or somehow being 'pro-drugs'</li> <li>Civilised and tolerant societies should not use criminal sanctions to impose their moral judgements on adults whose actions do not negatively impact on others</li> <li>Putting in place a drug policy that is healthy, just and humane is the most moral response to drug use – and that means legal regulation</li> </ul>
<p>People shouldn't buy drugs that are known to come from a violent and destructive criminal market</p>	<ul style="list-style-type: none"> <li>People shouldn't buy consumer products that are produced or sold in ways that cause significant harm. But given that people will continue to buy drugs, the only way to eliminate this harm is by ending prohibition and having governments legally regulate their production and sale</li> </ul>

CONCERN	RESPONSE
	<ul style="list-style-type: none"> <li>As we see with tobacco and alcohol, given a choice, most people who use drugs would not buy them from a violent criminal market. So if we are genuinely concerned about the destructive effects of the illicit trade, we should give people who use drugs an ethical alternative</li> </ul>

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## 11. POLITICAL CONTEXT

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The primary role of responsible governments is to look after their citizens. By following the policy of prohibition, governments do precisely the opposite, putting people's health and wellbeing at risk. Legal regulation is the responsible way to protect citizens from the potential harms of both drug use and the drug trade.

CONCERN	RESPONSE
<p>Only a small minority of the population support legalisation</p>	<ul style="list-style-type: none"> <li>In many countries, support for reform is growing rapidly, including in the US, where over 50% of the public are now in favour of the legal regulation of cannabis<sup>14</sup></li> <li>In a growing number of US states, citizen-led initiatives have resulted in the legal regulation of cannabis</li> <li>This is an issue of political leadership. In Uruguay, for example, politicians have led the debate, introducing a strict system of legal cannabis regulation, despite an initial lack of public support</li> <li>Both sitting and former world leaders are increasingly advocating reform, without being vilified in the media, as it becomes more and more clear they are on the right side of history</li> </ul>

CONCERN	RESPONSE
<p>Global powers and the UN conventions are insurmountable obstacles to reform</p>	<ul style="list-style-type: none"> <li>• Both the US and Uruguay already have legally regulated cannabis markets, despite being signatories to the UN drug treaties</li> <li>• There is now open dissent at the highest level over global drug prohibition, and debate and actual reforms are taking place all over the world. It is just a matter of how, not whether, the global drug control system should be reformed</li> <li>• The power of the US to impose a war on drugs approach around the world has diminished as American states like Colorado and Washington have legally regulated cannabis, and its global influence has declined</li> <li>• While UN member states have a range of longstanding international obligations, they also have a responsibility to change policies that have clearly failed and actively cause harm to their citizens</li> </ul>

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## 12. FIGHTING HARDER OR SMARTER?

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For over 50 years, global drug prohibition has been a disaster. Fighting harder can only make matters worse, but there are important steps that can reduce some drug-war harms. These include reorienting policy towards health goals, decriminalising possession of drugs, and strategically targeting the most violent criminals. However, because it is prohibition itself that creates the illegal market and all its harms, the only long-term solution is to replace the war on drugs with responsible legal regulation that protects children, improves health, reduces crime, and saves money.

CONCERN	RESPONSE
<p>The drug war can be won if we fight it harder, by investing greater resources and imposing harsher criminal penalties</p>	<ul style="list-style-type: none"> <li>• The criminal justice-led approach to drugs is already imposing disproportionately harsh sentences and filling prisons with users and non-violent drug offenders. Doing more of the same will not produce different results</li> </ul>

CONCERN	RESPONSE
	<ul style="list-style-type: none"> <li>• Where there is high demand for drugs, prohibition just creates a criminal profit opportunity. Any interruption of drug production and supply simply increases prices, motivating more criminals to enter the market. So no matter how many drug crops are burned or smuggling networks are smashed, they will always be replaced</li> <li>• Criminalisation and mass arrests give a false sense of security. They allow politicians to be seen to be 'doing something', but rather than address the problem, they drain scarce resources and simply fuel the marginalisation of at-risk groups and vulnerable communities</li> </ul>
<p>The current approach is not a 'war on drugs'; it is a comprehensive strategy that includes treatment, prevention, education, as well as enforcement</p>	<ul style="list-style-type: none"> <li>• Treatment, prevention and education are essential parts of any effective drug policy. But such proven health interventions are actively undermined by punitive enforcement aimed at the very populations we are simultaneously trying to help. Highlighting the evidence base for health interventions cannot obscure the absence of evidence supporting enforcement</li> <li>• In many transit and producer countries, the impacts of prohibition are so devastating that the situation is indeed similar to a warzone. And in many consumer countries, the vast majority of the drugs budget is spent on punitive enforcement and incarceration</li> </ul>
<p>We agree that punishing people who use drugs is not the right approach, which is why many countries have decriminalised drug possession and use. But we have a duty to go after drug suppliers</p>	<ul style="list-style-type: none"> <li>• Decriminalisation of drug possession and use is a positive first step towards reforming the current prohibition regime. Yet decriminalisation alone does not address many of the greatest harms of prohibition – such as high levels of crime, corruption and violence, massive illicit markets, and the harmful health consequences of drugs produced in the absence of regulatory oversight<sup>15</sup></li> </ul>

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## REFERENCES

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1. For more information on how legal regulation could work in practice, see 'After the War on Drugs: Blueprint for Regulation'. <http://www.tdpf.org.uk/resources/publications/after-war-drugs-blueprint-regulation>
2. For a graphical representation of this drug policy spectrum, see 'How to Regulate Cannabis: A Practical Guide', p. 28. <http://www.tdpf.org.uk/resources/publications/how-regulate-cannabis-practical-guide>
3. Degenhardt, L. et al. (2008) 'Toward a Global View of Alcohol, Tobacco, Cannabis, and Cocaine Use: Findings from the WHO World Mental Health Surveys', *PLoS Medicine*, vol. 5, no. 7. <http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.0050141>
4. European Monitoring Centre for Drugs and Drug Addiction (2011a) 'Looking for a relationship between penalties and cannabis use'. <http://www.emcdda.europa.eu/online/annual-report/2011/boxes/p45>
5. European Monitoring Centre on Drugs and Drug Addiction (2013) 'Prevalence maps — prevalence of drug use in Europe'. <http://www.emcdda.europa.eu/countries/prevalence-maps>
6. European Monitoring Centre for Drugs and Drug Addiction (2011b) 'Drug policy profiles — Portugal', p. 20. <http://www.emcdda.europa.eu/publications/drug-policy-profiles/portugal>
7. For example, the adult smoking rate in England was 20% in 2010, compared to 39% in 1980. Health and Social Care Information Centre (2013) 'Statistics on Smoking: England, 2013'. <http://www.hscic.gov.uk/catalogue/PUB11454/smok-eng-2013-rep.pdf>
8. See references 3 and 4.
9. See reference 7.
10. Human Rights Watch (2009) 'Decades of Disparity: Drug Arrests and Race in the United States'. [http://www.hrw.org/sites/default/files/reports/us0309web\\_1.pdf](http://www.hrw.org/sites/default/files/reports/us0309web_1.pdf)
11. Release (2013) 'The Numbers In Black And White: Ethnic Disparities In The Policing And Prosecution Of Drug Offences In England And Wales'. <http://www.release.org.uk/publications/numbers-black-and-white-ethnic-disparities-policing-and-prosecution-drug-offences>
12. Hannon, L. and Cuddy, M. M. (2006) 'Neighborhood ecology and drug dependence mortality: an analysis of New York City census tracts', *American Journal of Drug and Alcohol Abuse*, vol. 32, no. 3, pp. 453-63. <http://www.ncbi.nlm.nih.gov/pubmed/16864473>
13. Killias, M. and Aebi, M. F. (2000) 'The Impact Of Heroin Prescription On Heroin Markets In Switzerland', *Crime Prevention Studies*, vol. 11, pp. 83-99. [http://www.popcenter.org/library/crimeprevention/volume\\_11/04-Killias.pdf](http://www.popcenter.org/library/crimeprevention/volume_11/04-Killias.pdf)
14. Swift, A. (2013) 'For First Time, Americans Favor Legalizing Marijuana'. *Gallup Polling*, 22/10/13. <http://www.gallup.com/poll/165539/first-time-americans-favor-legalizing-marijuana.aspx>
15. Adapted from: Drug Policy Alliance (2014) 'Why is Marijuana Decriminalization Not Enough?'. <http://www.drugpolicy.org/resource/why-marijuana-decriminalization-not-enough>

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### AUTHORS (in alphabetical order)

Danny Kushlick, George Murkin, Martin Powell, Steve Rolles and Lisa Sánchez

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George Murkin

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**AND MEMBER OF THE GLOBAL COMMISSION ON DRUG POLICY**

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