## The Telegraph

## Drug laws and evidence-based policy: it's time to start doing experiments on the British people

By Tom Chivers - October 15th, 2012

What's the best way to reduce the harm caused by drugs? Because, let's not pretend otherwise, drugs are extremely harmful for some people. What's the most effective way to achieve our goals with drug policy? In fact, what are our goals? Do we want a) to reduce drug use no matter what, or b) to reduce the harm caused by drugs, without necessarily caring how many people take them?

And do we draw distinctions? Are we happy with a nation of drinkers, or caffeine addicts, but not of weed-smokers or pillheads? Which drugs cause real harm, and which are largely harmless? Which ones mainly cause harm only to the taker, and which to society at large?

I'm asking these questions to show that it's a complicated business, the "War" on "Drugs". Complicated and multilayered, so much so that it's almost silly to think of it as a single "war" (if we must insist on the martial metaphor) on a single entity called "drugs". Anyone with a simple, straightforward answer – "Legalise everything" or "String 'em all up", usually – is almost certainly completely wrong.

Today, a group of well-known scientists and policymakers involved in the UK Drug Policy Commission have written to our paper. They call for a change in the law, saying that drug use is like junk food or gambling and should be treated as a public health issue rather than a crime. But the interesting bit is when they argue that of the £3 billion or so that we spend a year on drug problems (plus an unspecified but much larger amount on related problems, including crime and health), a small amount should be set aside to fund a body to "collect and promote the evidence for what works". This is an extraordinarily good, not to say vital, idea.

Of course, people have been trying, diligently, methodically and with the best of intentions, to determine what works and what does not. I've written before about what they've found: they've looked at different nations, compared law enforcement strategies to drug-abuse levels, examined the public health situation in countries that have more or less stringent drug laws. What they've found, in studies by the WHO, the BMJ and the Cato Institute, is that drug abuse levels are not tied to how strictly drug laws are enforced – ie being tough on drugs does not

seem to work – and that countries such as Portugal which have loosened their drug laws have seen an improvement in public health.

But opponents can, rightly, say that because something works in other countries doesn't mean it'll work here; they can also say that these aren't controlled experiments, and it's not easy or always technically possible to tease out causation from correlation. They could, reasonably, say that until there is better evidence, the status quo isn't so bad that we should risk it with a sweeping new drug regulatory system.

For them to say that, however, they need to do precisely what the UKDPC people are calling for: create a body which will do real experiments, on real people, to see what works best. I know that "experimenting on people" is a bit of a hot-button phrase, but as Sir Mark Walport, director of the Wellcome Trust, says on a different topic: "It's not unethical to do experiments ... It's unethical not to." Better to experiment, and find what really works, than blunder about with gut feeling and received wisdom.

An easy experiment would be, say, for judges to be able to put people arrested on drug possession charges into a randomised controlled experiment, instead of sentencing them. Then they would be randomly assigned either to a punishment group or a treatment group, and the results of the two would be compared. For a more complicated one, a few randomly determined boroughs would be assigned to start behaving as mini-Portugals, with an emphasis on treatment, while others could be assigned to more draconian methods. (There would be obvious difficulties with that experiment, because drug users might simply move boroughs to avoid punishment, but there may be ways of managing it so that the problems are reduced.)

Well-designed real-life experiments would remove the "would it work in Britain" or correlation-causation concerns. We could go ahead with changes to the drug laws, whether those changes are towards liberalism or enforcement, confident that we are taking the best, most cost-effective measures to achieve the goals we have set. My own, confident, prediction is that the evidence would support what we already have — that punishment is frequently unproductive and expensive, and that a cleverly introduced, multi-tier system of regulation of drugs from caffeine to heroin would be the most effective way of reducing harm. But let's do the experiments, and find out.

By the way – with weary predictability, the Home Office have released a statement on the subject. What are they going to do? "Our ambitious approach to tackling drugs – outlined in our Drugs Strategy – is the right one. Drug usage is at its lowest level since records began. Drug treatment completions are increasing and individuals are now significantly better placed to achieve recovery and live their lives free from drugs." So, more of the same it is, then, and not

even the faintest interest in finding out what works. Well done there, guys, great stuff.

Tom Chivers is the Telegraph's assistant comment editor. He writes on science, culture and anything that crosses his mind. Read older posts by Tom here.