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Portugal's drug policy

Treating, not punishing

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The evidence from Portugal since 2001 is that decriminalisation of drug use and possession has benefits and no harmful side-effects

Illustration by Peter Schrank



IN 2001 newspapers around the world carried graphic reports of addicts injecting heroin in the grimy streets of a Lisbon slum. The place was dubbed Europe's "most shameful neighbourhood" and its "worst drugs ghetto". The *Times* helpfully managed to find a young British backpacker sprawled comatose on a corner. This lurid coverage was prompted by a government decision to decriminalise the personal use and possession of all drugs, including heroin and cocaine. The police were told not to arrest anyone found taking any kind of drug.

This "ultraliberal legislation", said the foreign media, had set alarm bells ringing across Europe. The Portuguese were said to be fearful that holiday resorts would become dumping-grounds for drug tourists. Some conservative politicians denounced the decriminalisation as "pure lunacy". Plane-loads of foreign students would head for the Algarve to smoke marijuana, predicted Paulo Portas, leader of the People's Party. Portugal, he said, was offering "sun, beaches and any drug you like."

Yet after all the furore, the drug law was largely forgotten by the international and Portuguese press—until earlier this year, when the Cato Institute, a libertarian American think-tank, published a study of the new policy by a lawyer, Glenn Greenwald.* In contrast to the dire consequences that critics predicted, he concluded that "none of the nightmare scenarios" initially painted, "from rampant increases in drug usage among the young to the transformation of Lisbon into a haven for 'drug tourists', has occurred."

Mr Greenwald claims that the data show that "decriminalisation has had no adverse effect on drug usage rates in Portugal", which "in numerous categories are now among the lowest in the European Union". This came after some rises in the 1990s, before decriminalisation. The figures reveal little evidence of drug tourism: 95% of those cited for drug misdemeanours since 2001 have been Portuguese. The level of drug trafficking, measured by numbers convicted, has also declined. And the incidence of other drug-related problems, including sexually transmitted diseases and deaths from drug overdoses, has "decreased dramatically".

There are widespread misconceptions about the Portuguese approach. "It is important not to confuse decriminalisation with depenalisation or legalisation," comments Brendan Hughes of the European Monitoring Centre for Drugs and Drug Addiction, which is, coincidentally, based in Lisbon. "Drug use remains illegal in Portugal, and anyone in possession will be stopped by the police, have the drugs confiscated and be sent before a commission."

Nor is it uncommon in Europe to make drug use an administrative offence rather than a criminal one (putting it in the same category as not wearing a seat belt, say). What is unique, according to Mr Hughes, is that offenders in Portugal are sent to specialist "dissuasion commissions" run by the government, rather than into the judicial system. "In Portugal," he says, "the health aspect [of the government's response to drugs] has gone mainstream."

The aim of the dissuasion commissions, which are made up of panels of two or three psychiatrists, social workers and legal advisers, is to encourage addicts to undergo treatment and to stop recreational users falling into addiction. They have the power to impose community work and even fines, but punishment is not their main aim. The police turn some 7,500 people a year over to the commissions. But nobody carrying anything considered to be less than a ten-day personal supply of drugs can be arrested, sentenced to jail or given a criminal record.

Officials believe that, by lifting fears of prosecution, the policy has encouraged addicts to seek treatment. This bears out their view that criminal sanctions are not the best answer. "Before decriminalisation, addicts were afraid to seek treatment because they feared they would be denounced to the police and arrested," says Manuel Cardoso, deputy director of the Institute for Drugs and Drug Addiction, Portugal's main drugs-prevention and drugs-policy agency. "Now they know they will be treated as patients with a problem and not stigmatised as criminals."

The number of addicts registered in drug-substitution programmes has risen from 6,000 in 1999 to over 24,000 in 2008, reflecting a big rise in treatment (but not in drug use). Between 2001 and 2007 the number of Portuguese who say they have taken heroin at least once in their lives increased from just 1% to 1.1%. For most other drugs, the figures have fallen: Portugal has one of Europe's lowest lifetime usage rates for cannabis. And most notably, heroin and other drug abuse has decreased among vulnerable younger age-groups, according to Mr Cardoso.

The share of heroin users who inject the drug has also fallen, from 45% before decriminalisation to 17% now, he says, because the new law has facilitated treatment and harm-reduction programmes. Drug addicts now account for only 20% of Portugal's HIV cases, down from 56% before. "We no longer have to work under the paradox that exists in many countries of providing support and medical care to people the law considers criminals."

"Proving a causal link between Portugal's decriminalisation measures and any changes in drug-use patterns is virtually impossible in scientific terms," concludes Mr Hughes. "But anyone looking at the statistics can see that drug consumption in 2001 was relatively low in European terms, and that it remains so. The apocalypse hasn't happened."

*"Drug Decriminalisation in Portugal: Lessons for Creating Fair and Successful Drug Policies." By Glenn Greenwald.

