

GREEN PARTY DRUG POLICY: Q&A FOR THE DOORSTEP

Summary of Green Party Drug policy:

- In October 2019, the Green Party of England and Wales adopted an evidence based policy, based on the principles of harm reduction, community safety and an opposition to profiteering.
- The Greens' new national approach would mean that drug supply will be regulated by the government, instead of organised criminals and alcohol and tobacco corporations who all have a financial interest in people using drugs harmfully. Adults who do choose to use drugs will be able to buy them from licensed outlets, with access to health and support services for those that need them.
- Significant new revenue streams from legal sales of drugs will be directed to local authorities and the treasury. New policies such as a ban on marketing and stricter limits for alcohol and other drug driving will be overseen by a new body, the Advisory Council for Drug Safety, which will also be responsible for establishing trading relations with producers in developing countries, ensuring that international humanitarian and environmental standards are met.

Here are some potentially tricky questions people might ask about our Drug Policy on the doorstep, and some handy answers:

Q: Doesn't the government have a responsibility to protect people from their own and others' potentially unhealthy or risky behaviour?

A: A government's responsibility to protect individuals and society from harm must be balanced with individual and collective rights and freedoms. Currently the UK government recognises that adults have the right to consume and enjoy alcoholic drinks, while putting certain conditions and restrictions – through taxation, licensing laws, age limits, drink driving legislation, etc – to limit use and alleviate potential harms. The current legal distinction between alcohol and other drugs is based on cultural and historical bias rather than evidence of potential for harm, so it makes sense to treat other drugs in a similar way.

Q: Alcohol isn't a drug. It's part of our traditions. Why do you propose to regulate alcohol as if it were like heroin or crack?

A: The Green Party recognizes the popularity and cultural importance of alcohol in many communities in England and Wales, and the cultural place of pubs as social meeting places. But we also recognize that alcohol use is linked with violent crime, domestic violence, child neglect and accidents. In England and Wales, alcohol consumption significantly increases the burden on our emergency services. We propose to end the exceptional treatment of alcohol consumption and regulate the substance in line with other drugs that are used safely by adults in most circumstances but are also subject to misuse.

Q: People who use drugs are dangerous and cause a lot of anti-social behaviour. Won't drug reform increase this problem?

A: About 90% of people who use drugs do so safely. Problem drug use is often the result of socio-economic deprivation, trauma and/or mental and physical illness. A public-health approach to drug use would provide support for people who use drugs problematically at the same time that it would address concerns about the impact of drug use on wider communities. For example, providing Safe Consumption Rooms for people who inject drugs would provide greater safety for users while decreasing the number of discarded needles in parks and other public places. In addition, much crime associated with problematic drug use would decrease if drugs could be accessed legally.

Q: Drugs cause huge damage to individuals and society and put a burden on the state. Shouldn't we aim to eliminate all drug consumption through tough laws?

A: Drugs, including alcohol, have been produced and consumed for millennia in many societies around the world, often in association with rituals and spiritual traditions. In the modern world problematic drug use is often associated with poverty, deprivation and other social problems. It is also made worse by the so-called "war on drugs," which results in massive loss of human and animal life and environmental damage. Rather than try to eradicate drugs themselves we should deal with the social and political issues that drive problem drug use and its associated harms, as well as the violence associated with the illegal drug trade.

Q: Aren't coffee and sugar drugs too? Are you seeking to regulate them as well?

A: The Green Party defines "drugs" as synthetic or plant-based substances that have a substantial psychoactive and /or physiological effect, direct or indirect, on the human body. We recognize the potential harms of substances such as sugar and caffeine but do not seek to regulate them under this policy.

Q: If we provide children with education about illegal drugs, aren't we encouraging them to do drugs?

A: There is no evidence that educating children and adults about the potential dangers of a drug leads to greater use. There *is* evidence that promoting ignorance leads to harm. The failure of the "Just say no" campaign in the US in the 1980s demonstrates that by lumping all drugs together into one category and failing to consider the causes of drug use among young people, such campaigns put young people at risk of problematic drug use, arrest and incarceration. We advocate teaching young people about the effects and potential harms of different kinds of drugs (including alcohol), the best ways to use drugs safely (including not using them at all) and how to seek support when needed without the risk of a criminal record.

Q: Isn't the best way to teach young people the lesson that drugs are wrong is a heavy hand?

A: The "heavy-handed" approach to drug use is ineffective and discriminatory. The Royal College of Surgeons and British Medical Association support an end to the criminalisation of people for minor drug possession charges, and several police forces in England and Wales recognise the value of diversion schemes which divert people with minor possession charges away from the criminal justice system, saving public money and protecting young people from a criminal record that would scar

their future. The policing of drug possession, including stop and search, targets Black and minority ethnic youth disproportionately, even though white people use drugs at higher rates than Black people in Britain. An end to heavy-handed policing of drugs is an important part of the Green Party's commitment to a racially just and egalitarian society.

Q: The NHS is already overburdened and facing cuts to crucial services. How can we afford to spend more scarce resources on supporting people who choose to use drugs?

A: The law-and-order approach to drugs has cost successive governments billions of pounds over the past decade and has failed to end the production, trade and problem use of drugs. The negative health and social impacts of problem drug use, including crime, cost many more billions every year. By reallocating funding away from law enforcement to health and education, and by addressing the causes of problematic drug use, decriminalisation and regulation would not only save lives and improve the quality of life of those affected by problem drug use, but also save billions in public funds.

Q: How can you justify spending scarce NHS funds on prescribing dangerous illegal drugs such as heroin to addicts who refuse to quit?

A: People who use heroin problematically have a right to health services just as everyone else. Not everyone who uses heroin in a problematic way is able to reduce their use with therapies such as opioid substitutes (methadone). Evidence from countries such as Switzerland demonstrates that prescribing heroin through Heroin Assisted Therapy (HAT) is an effective way of helping people to manage and reduce their use. HAT can also help to reduce the harmful and costly side-effects of unsafe heroin use, including overdose from unregulated supplies, the use and discarding of infected needles in public, and the recourse to crime to obtain money to buy drugs.

Q: Crack prescription on the NHS??

A: Regulating the supply and use of crack cocaine is difficult because the drug can easily be made from powder cocaine; if cocaine is available, so is crack. Most people who use crack problematically also use heroin, and Heroin Assisted Therapy (HAT) has been shown to help people manage/reduce their crack cocaine use as well. Prescribing crack cocaine directly has proven less effective than prescribing heroin, but prescriptions offer the opportunity for people who use the drug to get it legally and safely from medical professionals, removing them and others from the risks and harms associated with buying illegal supplies.

Q: County lines recruit and exploit vulnerable people, including children. Shouldn't they be shut down through proper policing in order to protect those people?

A: "County lines" is a term used by the National Crime Agency and parts of the media and which highlights the harms to young people of Organised Criminal Groups (OCG). The term is usually used in order to justify a prohibitionist approach to drugs and does not educate the public about the reasons some young people are vulnerable to recruitment by OCG, or about the huge profits made by such groups as a result of the criminalisation of the drug trade. The Green Party aims to reduce the numbers of young people and others vulnerable to exploitation through its policies around social welfare, education, youth services, housing and wellbeing rather than heavier policing, which typically targets working class, Black and migrant communities disproportionately.

Q: What about middle-class cocaine users? Shouldn't they be punished for their hypocrisy instead of getting away with using expensive drugs that come through a violent and exploitative supply chain?

A: Some middle-class people do use cocaine, but the claim that they are directly responsible for the exploitation of vulnerable people by Organised Criminal Groups is a media and police myth that is typically used to argue in favour of a law-and-order approach to drugs. There is no evidence that the cocaine used by middle-class people or anyone else is part of the same supply chain used by so-called "county lines". The Green Party tries to avoid sensationalist language and stick to the evidence. We do not believe anyone, regardless of their socio-economic status, should be stigmatised for using drugs.

Q: Millions of people suffer violence and die in Latin American as a direct result of drug use by people in wealthy countries, including the US and Britain. Shouldn't we eliminate drugs as a form of international solidarity?

A: Most of the violence, including environmental degradation, related to the production and trade in drugs is a result of the so-called "war on drugs". In Columbia, for example, where Andean peoples have grown and used coca leaves for millennia, American military intervention has destroyed the crops and livelihoods of rural communities and criminalised their traditions. The Green Party recognises that communities in the global south have the right to grow and sell their own crops, including opium and coca, and that the best way to support the economic and human rights of these communities, as well as to promote environmental safety, is through fair trade.

Q: Ecstasy is a very dangerous drug that kills many young people every year. Why make it legal?

A: The deaths of young people who have taken ecstasy are tragic and tend to attract more media attention than the much more frequent deaths caused by alcohol use or tobacco. Most deaths that result from the use of ecstasy (MDMA) are caused by poor/unknown quality or purity and/or ignorance about the dangers of dehydration or overhydration when using ecstasy. These potential dangers would be greatly reduced through regulation of supply and better education.

Q: Doesn't cannabis use cause psychosis?

A: There is some evidence of a link between the use of high-strength cannabis and psychosis, but there is no evidence of causation. In contrast, CBD (one of the elements in cannabis) has many potential health benefits and cannabis has a long history of use as a medicine. Since 2000, many governments in the world have decriminalised or legalised cannabis and there is no populational evidence to suggest a rise in harmful effects to wider society.

Q: Who will profit from the legalisation of cannabis?

A: As Greens, we want the economic benefits of cannabis legalisation to empower communities through cannabis social clubs and small business. We propose to follow the social equity approach used in Illinois, with licenses for cannabis sales preferentially given to people whose lives have been adversely affected by prohibition/the war on drugs. Therefore, we will create commercial licences for co-operatives and social enterprises to cultivate cannabis to be sold either directly to the consumer (licensed sales) or to manufacturers of other cannabis-based products, but not to license large-scale enterprises for profit.

Q: What about those metal cannisters kids throw out on the street after using so-called laughing gas? Will your policy help to eliminate that nuisance?

A: Nitrous oxide (NO) or 'laughing gas' is currently classed as a psychoactive drug covered by the 2016 Psychoactive Substances Act, meaning it is illegal to give away or sell. A recent report from Northwest England indicates that the 2016 law is not working, in part because NO is sold for other purposes legally. The Green Party would therefore treat NO as a household and industrial product, restricting its sale to those under the age of 18 where the seller/supplier has reasonable cause to believe they it will be used for purposes of intoxication.

Q: What about prescription drugs? Aren't they just as dangerous as illegal drugs in many cases?

A: The drug policy follows common practice in the area of drug reform by focusing on the decriminalisation and regulation of drugs currently subject to legal prohibition and aiming to eliminate the harmful effects of the war on drugs. Prescription medication, including safety and public health issues, is covered by the Green Party Health Policy. There is no straightforward dividing line between drugs prescribed for medical purposes and those used in currently classified substances. The rise in harms associated with certain prescription drugs, including the appearance of prescribed opiates in street heroin, underlines the need for careful communication across different areas of policy.

Q: How much taxation might be raised from the decriminalisation and regulation of drugs? What will the positive economic contribution be?

The driver for legalising and regulating previously illegal drugs in the UK is harm reduction, not revenue raising. Nevertheless, we plan to adopt the principle that any harm and other social cost caused by the use of drugs (or any other substance) should be paid for from the proceeds of the sale of those drugs. This is similar to the 'Polluter Pays Principle' and is both a fair and effective way to meet any costs/harm to society of the decriminalisation of drugs. This is outlined in the Green Party's Tax and Fiscal policy, which also states that taxation should be used, where appropriate, to discourage harmful behaviour and encourage sustainable behaviour. The level of taxation will be tied to the expected social and economic cost caused by the production, trading or consumption of specific substances. Details of how different substances will be taxed under a decriminalised and regulated system are available in Appendix 1 to the Drug Policy.

The full policy is available here:

<https://policy.greenparty.org.uk/du.html>

To get involved in the Green Party's Drug Policy Working Group:

Social media: <https://linktr.ee/GreenDrugPolicy>

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