

The Drug Problem - and how to solve it

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Prohibition does not work; this was amply demonstrated in the USA during the prohibition of alcohol, (1920-1933). Prohibition puts up the price of the addictive substance without reducing the demand, thus encouraging organised crime and supplying it with vast and unlimited income. One could speculate that there were supporters of organised crime in the US government whose primary objective was to make the alcohol trade more profitable. If this was the case, they succeeded.

Drugs, of themselves, do not cause a great problem. There are some damaged and dysfunctional individuals who become even more dysfunctional when taking the drugs; wean them off drugs, and they still remain dysfunctional people. They have a self-destructive tendency and will find a means of self-destruction even when drugs are removed from their lives. Many people, however, continue to function well when taking addictive quantities of drugs. My own father died of cancer. During the last two years of his life, he was taking increasing quantities of diamorphine, (almost identical to heroin), he continued to function normally. During the last phase of his disease, he was taking enough of the drug each day to kill a non-addicted person. It is not the drugs themselves that cause the problems, it is the fact that they are illegal.

Up until the 1950's, drugs such as cocaine derivatives and opiates were not illegal in the UK, and could easily be obtained at an affordable price. Some people were addicted. This had very little effect on society as a whole. I have known doctors, dentists and lawyers, clergymen, engineers and builders who were addicted and yet continued to perform satisfactory work.

I should add that I have never taken drugs, but I have suffered the effects of addiction by having my house burgled by addicts.

By making the drugs illegal, the price goes up and organised crime gets involved in the importation and control of the supply chain. People who need the drugs are driven to crime to support a habit that they cannot control. The whole of society suffers the consequences: burglaries, gang wars, muggings, and the effects on our own children unknowingly caught in the cross-fire. The drugs supplied are of variable quality and can lead to serious health problems for addicts, not because of the drugs themselves or the addiction but because of the contaminants used to "cut" or dilute them.

So what do we do? The important thing is to stop feeding vast quantities of money into organised crime. The easiest way to do this is to supply clean drugs at an affordable price to all that need them. This should be under the control of the government, and be supported by recovery programmes for those with the need to end or control their addiction.

I propose that "In The Arm", (ITA), Centres should be set up in areas where there is currently wide-spread illegal drug-dealing. People should be able to attend these centres completely anonymously, pay a small fee to cover the costs, and receive clean drugs of their choice in hygienic conditions. The drugs should be administered either orally, by injection or by inhalation through a "hole in the wall" system to prevent medical staff being put under duress. With this system, drugs can never be taken off the premises in resalable form. This may mean that an addict would need to attend such a centre several times a day.

At first, drug dealers in the area will be resentful of their loss of income and may try to discourage addicts from attending such centres. It may be necessary to step up security

in these areas until the lack of demand makes the dealers give up. Once the source of income is gone, the dealers will start to use the centres to satisfy their own needs.

This process needs to happen across the whole country to be truly effective. A trial programme in just one area would lead to huge numbers of addicts migrating to the trial area simply to take advantage of the availability.

So how would this work in practice? I propose that a hardened portable cabin that can be transported on a lorry should be placed in the high drug usage area. A converted shipping container could be suitable. One end has a waiting-room for addicts with a door to the outside and a small treatment room. The other end has a wash-room and toilet, a staff-room with comfortable seats and basic cooking facilities: microwave and kettle. There is also a secure drug-store.

The ITA needs to be available 24 hours a day, 7 days a week, and 52 weeks in the year. A van needs to attend once a day to service the facilities, swap the chemical toilets, empty waste bins, top up the water supply, clean the waiting area and provision the food supply. A more secure van would restock the drug store and the supply of syringes. Staff would be on a shift system and a secure police vehicle would need to bring them to and from for shift changes and recreation breaks. A police presence may be needed.

Addicts may prefer to attend in groups for reasons of personal security, as the drug gangs, seeing a threat to their income, will probably attempt to discourage people from attending the centre. Some additional police presence in the area may be needed to prevent addicts being put under duress. Once the money supply dries up, the dealers will obtain their own drugs from the cabin, as dealers are also addicts and only deal to pay for their habit.

Addicts are guaranteed anonymity and are put under no pressure in the centre. They name their drug of choice, pay the affordable fee and wait their turn in the queue. In the treatment room, the drug is either taken orally and washed down with water, inhaled or injected into a suitable vein. No drugs are taken away for later consumption; nothing leaves the centre in a resalable form. Each patient is asked to wait for a minute or two in case of an adverse reaction to the drug, and the staff are equipped to treat overdoses as patients accustomed to street drugs may have been misled as to how much they have really been taking. No substitute drugs, such as methadone, are used; they do not fill the deeply-felt need, but a limited range of pharmaceuticals: a suitable opiate and a cocaine derivative plus some of the commoner party drugs are provided. Most of the so-called designer drugs are substitutes for opiates or cocaine derivatives and are not required if the real thing is cheaply available.

The waiting area will have posters advertising addiction recovery services and patients may ask about these in the treatment room, however there is never any pressure to make use of them.

Such a scheme would take the income away from organised crime; these organisations would have to turn to other income sources: people trafficking, sexual services, protection rackets and gambling perhaps, to feed their greed for money and power. However, similar approaches to these problems could be adopted to take the money away from the illegal, (and thus exploitation-ridden), provision of those services.

It is completely legal to operate such a scheme with the law as it is at present, as the addict cannot take drugs away from the centre in resalable form.

The advantages of this system: the connection between drugs and crime would disappear; the piles of needles and drug paraphernalia in children's play parks would disappear; unused buildings would cease to be taken over and used as drug dens; and

addicts would be treated with compassion instead of being automatically regarded as criminals, shunned and treated with suspicion.

The most important benefits, in my opinion, are these:

- The billions of pounds leaving the country's economy to pay for the illegal importation of drugs would cease.
- A huge quantity of police time and resources is expended in a futile fight against the drug problem and in dealing with its consequences. This wastage of a valuable resource would disappear.
- The biggest cause of corruption in politicians, civil servants, police and prison officers is a consequence of illegal drug use. This problem would reduce significantly.
- Domestic and personal crime would reduce and consequently insurance costs would reduce.
- People would become more trusting and trustable.