FREQUENTLY ASKED QUESTIONS ABOUT ENDING PROHIBITION

Q: Are you saying that you want to legalize all drugs?

A: No – Market regulation means actively controlling drugs; they are now widely available on the illicit market. Our current system allows uncontrolled access. We want to control this market in a way that reduces harm to individuals, families and our city as a whole. Seeing drug use as a health issue not a criminal issue allows us to explore a wide range of tools to manage the problems in a more effective way.

Q: What about methamphetamine?

A: The fact that a drug is dangerous is the best reason to regulate and control it. The current situation is one where mainstream society has no control. Crystal Meth of unknown dosage and purity is widely available through criminal organizations. We do not control the drug, or its use. In a regulated market we could have control. The degree of regulation would be matched by the harmfulness of the drug, and various means of regulation could be introduced incrementally. The effects of these incremental changes would be documented in a research paradigm where the information about the changes (both individual and societal) would be widely available. Some individuals involved with this program may be engaged and supported to pursue abstinence options and other may be supported to take weaker, oral, less harmful preparations.

Q: Why not be more harsh with drug users and hire more police?

A: Studies from many countries reveal that there is no connection between levels of enforcement and levels of drug use. Jails have lots of drugs in them. If prohibition does not work when people are imprisoned it will not work on our streets. Prohibition, and the use of criminal sanctions and punishment, has never worked and can never work. It did not work for alcohol and it does not work for drugs.

Q: What about the youth?

A: Current studies tell us youth can access drugs easier than alcohol. If we used better controls on drugs than we do for alcohol we could reduce access to youth. Under the illicit market system youth often sell to each other. Drugs exist in all schools. Both the easy availability and attraction to easy money keep youth connected to the drug scene.

Q: How about pressure from the USA?

A: The USA has done a historically unprecedented social experiment by putting more people in jail per capita than any other country in the history of the planet, many of them for drug crimes (60% of federal prisoners). In spite of this they have more drug use than all of the European countries. While they push us to fight the drug war, the real lesson is that prohibition does not work.

Q: Are you suggesting that drugs be sold openly in stores?

A: No – this is not about selling crack at the local store or kilo's of heroin at the supermarket. This is about finding ways to regulate and control distribution of drugs in a way ensures less harm to individuals and society, and that takes drugs out of the hands of organized crime. The drugs can be packaged with no branding (lots of warning labels) and we can specify who can purchase them and where they can be used.

Q: Would drug use go up in a regulated system?

A: We need to distinguish use from abuse. We predict that abuse will not go up, and with regulations based on public health principles, we can reduce the harm for people who abuse drugs and for the wider community. We expect that for a brief period of time there will be more experimenters but we can control this by making changes incrementally and studying the effects of each change. In Amsterdam where cannabis is sold openly they have half the per-capita use than in the US where it is criminalized.

Q: Are you just surrendering to drugs and throwing in the towel?

A: No – we are going to use more constructive tools to reduce the harms to society. Drug prohibition is a failed social policy and we need to find better ways of dealing with this problem using the tools of public health.

Q: *Isn't this just enabling drug addicts?*

A: No – due to the fact that prohibition is not based on evidence and it creates and supports clandestine behaviours, it fosters denial, dishonesty and disconnection. Regulating the market is all about public health, honesty and increasing social connections. Regulation enables those who use currently illegal drugs to be accepted as valued members of society, just as people who use "legal" drugs such as codeine or Prozac are, rather than being marginalized as criminals.

Q: What effort will be made to discourage use?

A: It is important to note that all use need not be discouraged, only problematic use. Educating people on the reality of drugs and drug use, and teaching them about safe and proper use, can discourage abuse and assist people to use drugs in a healthy manner. In addition to sound education, discouraging abuse requires a collective response to social conditions that move people into harmful patterns of use, such as poverty, dislocation, absence of community, violence, etc.

Q: What about drug use and pregnancy?

A: Illegal drug use is only one of many factors that influence maternal outcomes. It is well documented that when pregnant women are offered non-judgemental, comprehensive prenatal and infant follow-up, maternal outcomes improve. In fact, it is poverty that is the one known factor that has a negative effect on pregnancy. Myths related to "crack babies" have been widely exaggerated. Abundant research has observed that the legal drug alcohol is clearly more dangerous to infants than illegal drugs.

Q: What about drugs and parenting?

A: A host of research demonstrates that illegal drug users can be adequate parents. Illegal drug use in itself does not equal abuse.

Q: But aren't some drugs just too addicting to be legal?

A: It is not the drug itself, but our relationship with it, that shapes patterns of use. Of course the illegal status of some drugs also shapes use in relation to having to buy on the illegal market, quality of drugs, cost, fear of arrest, etc. Prohibition paradoxically creates an illicit market which makes drugs which have potential for harm widely available. The harmfulness of some drugs is a central reason to regulate and control these substances.

Q: Would a public health approach to illegal drugs be expensive to the taxpayer?

A: The global black market for drugs is estimated to be \$400 billion and the BC bud industry is estimated to be the largest industry in British Columbia. If all this illegal money were funneled into prevention, treatment and public health programs, such a housing for the homeless, our health costs would drop and this would be a substantial tax savings.

For more information, contact ...



against Drug Prohibition

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