Limiting the Damage: the Elites' New Approach to the Drug Problem

TAKIS FOTOPOULOS

As I have tried to show in the past[1], the "war on drugs", which some conspiracy theorists have claimed to be an important foundation of the New World Order (!), was, in fact, an attempt by the elites to control the huge expansion of drug abuse in the last 40 years or so, for mainly pragmatic reasons which had to do with the negative implications of drug addiction on productivity and social spending. However, after the flourishing of neoliberal globalisation, from the 1980s onwards, these reasons began to lose their significance, with the introduction of "flexible" labour markets, which gave almost unlimited powers to employers, and the parallel gradual disintegration of the welfare state, which had previously covered the expenditure involved in supporting those addicted to drugs, through taxes mainly paid by the privileged social groups.

As a result, a gradual change in state policy concerning drugs began to take shape. Instead of the "war" and repression, this policy began to focus on the need to "limit the damage" and regard the addicts as "patients". However, "damage" in this case was not considered to be the destructive social consequences caused by the drugs themselves, as a result of the fact that a significant number of young people who were directly suffering the consequences of neoliberal globalisation were beginning to internalise their problems through drugs, privacy and passivity — something that was obviously seen by the elites as a beneficial effect of the mass spreading of drugs. Instead, the kind of social damage worrying the elites was the explosion of crime — following widespread drug abuse— an explosion which was indeed due, to a large extent, to repression and the addicts’ efforts to cover their "need" at any cost. At the same time, the victims of a system that was pushing many people to drug addiction (although drugs were, of course, in use even before the rise of this system, mainly for ceremonial or recreational purposes and never on the same mass scale) were being called "patients", and the phenomenon of drug addiction itself was being blamed on psychological or biological factors.

It was not, therefore, surprising that one of the main promoters of a drug liberalisation policy was Milton Friedman, the guru of neoliberalism, according to whom the poor and the addicts, were to be blamed for their own poverty and drug addiction respectively. However, what was even stranger was that a similar stand was adopted by some "libertarian" supporters of drug legalisation, who declared that "the right to be the master of my body is a central element of my freedom as an individual". Thus, according to this distorted liberal or pseudo-libertarian conception of freedom, youngsters who become addicted in order to forget the social insecurity which they feel in a system that cannot even
guarantee them a stable job, adults who cannot stand the stress of everyday life created by the system itself, or who cannot bear the stifling "existential void" created by the present consumer society and young women from Eastern Europe who sell their bodies in order to survive are all simply exercising their right to be the masters of their own bodies!

Thus, over the last decade in particular, one by one the main Western European countries began "liberalising" their drug policies, effectively abandoning the "war on drugs". However, lately, even some sympathetic liberals have been forced to do an about-turn on the matter, despite the fact that this turn was contrary to the trends currently dominant among the Western European elites. A typical example is the well-known British newspaper The Independent, which, ten years ago, launched a campaign to decriminalise cannabis—considering it to be a relatively harmless "soft" drug— a move which culminated in a 16,000-strong pro-cannabis march to London's Hyde Park that forced the Government to downgrade the legal status of the drug. The same newspaper has now reversed its landmark campaign for cannabis use to be decriminalised[2] because, as it has stressed, there is increasing evidence that cannabis is far from harmless. Record numbers of British teenagers are requiring drug treatment as a result of smoking highly potent cannabis strains (skunk) that are 25 times stronger than cannabis sold a decade ago. Thus, more than 22,000 people were treated last year for cannabis addiction—and almost half of those affected were under 18, while doctors and drug experts are warning these new cannabis strains can be as damaging as cocaine and heroin, leading to mental health problems and psychosis for thousands of teenagers. Furthermore, statistics from the British NHS National Treatment Agency show that the number of young people in treatment almost doubled from about 5,000 in 2005 to 9,600 in 2006, and that 13,000 adults also needed treatment.

Very recent research published in the British medical journal Lancet showed how cannabis is more dangerous than LSD and ecstasy. This conclusion was drawn following an analysis by experts of 20 substances for addictiveness, social harm and physical damage and the "development of a rational scale assessing the harm of drugs of potential misuse".[3] Furthermore, other experts in the field, like Professor Colin Blakemore, chief of the British Medical Research Council, who backed the original Independent campaign for cannabis to be decriminalised, has also changed his mind and recently stated that "the link between cannabis and psychosis is quite clear now; it wasn't 10 years ago"[4]. Other medical specialists who agree that the debate has changed, draw similar conclusions. Robin Murray, for instance, professor of psychiatry at London's Institute of Psychiatry, estimates that at least 25,000 of the 250,000 schizophrenics in the UK could have avoided the illness if they had not used cannabis, while Professor Neil McKeganey, from Glasgow University's Centre for Drug Misuse Research, stresses that "Society has seriously underestimated how dangerous cannabis really is...We could well see over the next 10 years increasing numbers of young people in serious difficulties"[5]. Finally, a 10-year study—the first of its kind to compare drinkers of alcohol with cannabis users—showed that people who start using cannabis as teenagers are more likely than drinkers to suffer from mental illness, have relationship problems and fail to get decent qualifications or jobs[6]. These findings, from Melbourne University's Centre for Adolescent Heath, which were published in the April '07 issue of Addiction journal, are particularly significant, as they demolish the usual myth of the anti-prohibition campaigners that alcohol is more harmful than cannabis.

In conclusion, the above do not imply, of course, that the solution to the problem of drug
abuse is the penalisation of use and the imprisonment of the victims of a system which pushes them to addiction in the first place. As I have showed elsewhere, although no long-term radical solution to the problem is feasible within the system of the internationalized market economy and its political complement, representative "democracy", there are steps that could be taken in the right direction, even within the short to medium term, provided that our aim is not simply the systemic aim of "damage limitation" but, instead, drug treatment and prevention. These aims could well be achieved through a wide-ranging programme of drug prevention that should be accompanied by society’s moral disapproval of drug abuse. Such disapproval could be expressed through the imposition of non-penal sanctions against proven drug addicts (for instance, in the form of the obligatory attendance of free "dry" drug treatment programmes, which do not involve the use of drug substitutes like methadone etc. —which do not work anyway), as well as the expansion of specialised medical units within the health system to deal with critical incidents, so that deaths from drug abuse may be minimised.

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