

## THE ENCOD BULLETIN

NR. 2. FEBRUARY 2005

### THE NEW EU DRUG STRATEGY

*A European Union strategy on drugs is mostly a symbolic commitment, as decision-making on drug policy remains primarily a prerogative of national governments. Of course symbolic commitments can also be meaningful - a question of reading between the lines - and such is the case of the new 8-year EU Drug Strategy that was adopted by the European Council of Ministers on 17 December 2004. The document gives an alarming picture about the incapacity of European governments to face a problem that is considered of high political priority by many European citizens.*

In the past 6 months, the representatives of 25 EU Member States have tried again to reach some kind of consensus between the rather different approaches and attitudes that exist on the continent regarding drugs. It has become largely a discussion between proponents and opponents of harm reduction as a basic fundament of drug policies. Better said: between those who see drugs as a health issue, and those who consider it to be a matter for law enforcement. To the disgrace of the governments of the European Union, the latter seem to have won the argument this time.

In the first draft of the strategy, published by the Dutch EU Presidency in July 2004, the basic aim was to “reduce drug related damage as a threat to health, wellbeing and social cohesion”. In the final version of the document that was approved in December, “drug related damage” had been replaced by “drug use”. The result is that the EU Strategy now ignores completely the cases in which the use of drugs (like coca leaves or medicinal cannabis) actually has been a crucial factor in improving people’s health, wellbeing and social cohesion. No sensible person with some knowledge of the drug issue would deny that anymore, yet the EU Council still does.

Another issue that was sacrificed by the European Council is the creation of ways in which non-governmental actors can contribute to the decision-making process on drug policies. On the one hand the Council strategy concedes great relevance to concepts as information, evaluation and co-ordination, but on the other hand, the idea of consulting qualified outsiders or affected groups is demoted to a token measure, a clumsy effort to be politically correct.

However, the lack of external consultation in the elaboration and evaluation of drug policies is becoming more and more the problem. The process of implementing and evaluating policies, as well as drawing the conclusions for future policies is completely dominated by governmental and EU institutions with an incestuous relationship to each other. As a result, evaluation becomes a hollow concept.

In October, the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA), on the basis of a thorough evaluation of the previous EU Drug Strategy (2000 - 2004), concluded that there has been no reduction whatsoever of demand nor supply of drugs, the basic aims of EU drug policy.

Two months later, the only comment of the politically responsible agency for this policy, the EU Council, is that these facts “underline the necessity of an active stand on drugs for the coming years”. No mention is made of any effort to understand why the policies have not been effective. Instead, the new strategy calls for more “precise objectives” in order to measure future policies, and hopefully have better evaluation results.

But what are precise objectives? For instance, in the field of supply reduction, the Strategy gives this example of a concrete, identifiable result to be obtained by 2012: “A measurable improvement in the effectiveness (...) of law enforcement interventions and actions by the EU and its Member States targeting production and trafficking of drugs.” What kind of indicators does the Council imagine can be used to evaluate this result? Will an increase in confiscations of illicit drugs be such an indicator? In that case, law enforcement has already become more effective during the past decades, as the volume and amount of seizures has increased all along. However, most European policemen working in drug squads know that they have never had the good fortune to confiscate more than 15 % of the total estimated volume of illicit drug shipments - and they also know that in order to be effective in discouraging the traffickers, they need to seize at least 70 %.

When reading the strategy, one gets the impression that the drug issue is a problem that should be treated as a virus, which can be detected, isolated and eliminated. Concerning drug consumption, this is an absurd approach, as health experts know. Problematic drug use can never be treated apart from other problems. But even in law enforcement this approach will never work. Drug production increases in areas and countries that are marginalized, where formal society and economy are failing to fulfil people’s needs. Without treating the roots of this marginalization, it makes no sense to make optimistic pledges about new forms of co-operation to reduce drug supply.

In short, the EU Drugs Strategy describes a virtual reality. And the question is if the European Council cares about the real reality at all. Due to the lack of outsiders and the domination of the law enforcement lobby the Strategy has become a non-document that will get further non-results, a text without past or future, an effort to keep everybody happy while things get worse.

Such is not the case of the European Parliament report on drugs that was approved two days before, on 15 December. Unexpectedly, this report does include several recommendations that, if taken seriously by EU authorities, would automatically lead to a more rational approach to drugs. It is now the task of the European Commission to merge both documents into a new 5 year Action Plan in the coming months. It remains to be seen how the Commission will tackle this challenge. ENCOD will be following this process very closely.

Joep Oomen  
[www.encod.org](http://www.encod.org)