

PORTUGAL SUCCESS? YOU BE THE JUDGE!

Portugal's drug decriminalisation in 2001 is touted as the positive example New Zealand should aspire to. The basis for such a proposition was based on a 2009 report by the libertarian think tank, the Cato Institute.¹ But the report has been shown to have many shortcomings and weaknesses.² Basically, decriminalisation did not trigger dramatic changes in drug-related behaviour because, as an analysis of Portugal's pre-decriminalisation laws and practices reveals, the reforms were more modest than suggested by the media attention they received.

Furthermore, in 2010, the Obama Administration essentially dismissed the Cato report stating it was *"difficult, however, to draw any clear, reliable conclusions from the report regarding the impact of Portugal's drug policy changes."*³

The reports limitations included:

- supporting analysis not definitive - sometimes focusing on prevalence rate changes as small as 0.8%.
- fails to recognize other factors - the report attributes favourable trends as a direct result of decriminalisation without acknowledging, for example, the decline in drug-related deaths that began *prior* to decriminalisation.
- adverse data trends not reported - adverse social effects – such as the increase in drug-related deaths in Portugal between 2004 and 2006 – is sometimes ignored, downplayed, or not given equal recognition.
- core drug-use reduction claims not conclusive - as "proof" of drug legalisation's success, the report trumpets a decline in the rate of illicit drug usage among 15- to 19- year-olds from 2001 to 2007, while ignoring increased rates in the 15-24 age group and an even greater increase in the 20-24 population over the same period. In a similar vein, the report emphasizes decreases in lifetime prevalence rates for the 13-18 age group from 2001 to 2006 and for heroin use in the 16-18 age group from 1999 to 2005. But, once again, it downplays increases in the lifetime prevalence rates for the 15-24 age group between 2001 and 2006, and for the 16-18 age group between 1999 and 2005.

Additional Studies Offer More Contradictory Evidence

Statistics compiled by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) indicate that between 2001 and 2007, lifetime prevalence rates for cannabis, cocaine, amphetamines, ecstasy, and LSD have *risen* for the Portuguese general population (ages 15-64) and for the 15-34 age group.

Drug-induced deaths, which decreased in Portugal from 369 in 1999 to 152 in 2003, climbed to 314 in 2007 – a number significantly higher than the 280 deaths recorded when decriminalisation started in 2001.

¹ <https://www.cato.org/publications/white-paper/drug-decriminalization-portugal-lessons-creating-fair-successful-drug-policies>

² https://www.law.berkeley.edu/files/Laqueur_%282014%29_-_Uses_and_Abuses_of_Drug_Decriminalization_in_Portugal_-_LSI.pdf

³ https://obamawhitehouse.archives.gov/sites/default/files/ondcp/Fact_Sheets/portugal_fact_sheet_8-25-10.pdf

Between 2012 and 2017 Lifetime Prevalence statistics for alcohol, tobacco and drugs for the general population (aged 15-64) have risen by 23%. The study saw an **increase** from 8.3% in 2012, to 10.2% in 2016/17, in the prevalence of illegal psychoactive substance use.⁴

“Claims that decriminalisation has reduced drug use and had no detrimental impact in Portugal significantly exceed the existing scientific basis.”⁵

Gil Kerlikowske, Director, US Office of National Drug Control Policy (ONDCP)

“A thorough report in 2011 by the European Monitoring Center for Drugs and Drug and Addiction (EMCDDA) presented a more nuanced picture. EMCDDA concluded that Portugal’s drug policy of depenalisation is not a “magic bullet” and that “the country still has high levels of problem drug use and HIV infection, and does not show specific developments in its drug situation that would clearly distinguish it from other European countries that have a different policy.”⁶

UNODC (United Nations Office on Drugs and Crime): Cannabis A Short Review (2012)⁷

“Our drug problems are not solved.”

João Goulão, director-general of SICAD: the Centre for Intervention on Addictive Behaviours and Dependencies. Known as Portugal’s ‘drug czar’.⁸

*There is a black market - “people don’t know what they are buying, what they are selling” - the system “is confusing”, with **many people believing that decriminalisation means that drugs are legal.***

Adriana Curado, project coordinator at the GAT Harm Reduction Centre⁹

It is also significant to note that Portugal recently voted down a bill proposing to legalise medicinal – including grow-your-own – cannabis, and opted for a more confined law allowing use of some medicinal cannabis.¹⁰

Portugal coerces treatment and rehab, as does Sweden which reduced its drug use from the late 1970s from the highest levels in Europe to the lowest in the developed world by the early 1990s.

⁴ <http://www.theportugalnews.com/news/alcohol-tobacco-and-drug-consumption-all-report-increases/43238>

⁵ Personal letter cited in Manuel Pinto Coelho, *Op. Cit.*, 2010

⁶ European Monitoring Center for Drugs and Drug and Addiction. (2011). *Drug Policy Profiles-Portugal*. Accessed November 2011 at <http://www.emcdda.europa.eu/publications/drug-policyprofiles/portugal>

⁷ https://www.unodc.org/documents/drug-prevention-and-treatment/cannabis_review.pdf

⁸ <https://thespinoff.co.nz/society/19-08-2018/arent-we-all-drug-users-after-all-what-drug-law-reform-in-portugal-can-teach-nz/>

⁹ <https://thespinoff.co.nz/society/19-08-2018/arent-we-all-drug-users-after-all-what-drug-law-reform-in-portugal-can-teach-nz/>

¹⁰ <http://www.theportugalnews.com/news/portugals-parliament-approves-use-of-cannabis-for-medicinal-purposes/45972>

DRUG ADVOCATES DON'T MENTION SWEDEN OR ICELAND

Sweden and Iceland have a proven success in solidly reducing drug use, where education and rehabilitation are central.

Sweden made coerced rehabilitation and school education centrepieces of their restrictive drug policy with the result that their drug use dropped from the highest levels in Europe to the lowest in the developed world. **Iceland** reduced its illicit drug use by 50% by concentrating on resilience-based education in their schools.

Drug use expanded in the 1960s and rising government concern prompted the formation the *Narcotics Drug Committee* (1965). By 1969, the government approved a ten-point program for increasing public efforts against drugs. It **concentrated heavily on law enforcement measures, but it also looked at demand reduction issues, particularly the provision of treatment services**, establishing a demand reduction program operated by youth organisations. An advertising and promotion campaign was launched with literature distribution, newspaper and media advertising. The maximum penalty for serious narcotics offences was increased.

Finally, in 1984 the government adopted its vision toward creating a 'Drug Free Sweden'. Organisations, political parties and youth organisations encouraged all the community to play an active role, stating: *"Everybody who comes in contact with the problem must be engaged. The authorities can never relieve [individuals] from personal responsibility and participation. Efforts by parents, family and friends are especially important. Also, schools and non-governmental organisations are important instruments in the struggle against drugs."*

A study conducted in 2000 supported the view that the new, tougher policy had had a preventive effect on drug use.¹¹ A report by the UNODC praised Sweden for having one of the lowest drug usage rates in the western world, and attributed this to a drug policy that **invested heavily in prevention and treatment** (including free community services), **as well as in strict law enforcement.**¹²

The Swedish drug policy has the support of Swedes. The priorities are:

- Coerced rehabilitation
- Education
- Maintenance of criminal sanctions

This means that decriminalisation of drug use is seen as an impediment to seeking a drug-free society.

Compiled by Family First, New Zealand

¹¹ http://www.popcenter.org/library/crimeprevention/volume_11/08-Knutsson.pdf

¹² http://www.unodc.org/pdf/research/Swedish_drug_control.pdf