

Magnificent seventh

Reviews

■ **Blaine Stothard.**
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We can probably assess how long someone has been in the UK drugs arena by knowing which edition of *Living with drugs* is on their shelves. Mine's the fifth, bought and read on publication, when I was extending my horizons beyond the school-based 'prevention' activities I'd previously focussed on. So it's a tribute to the quality and comprehensiveness of Michael Gossop's text that it's newly available in a seventh edition, ready to inform and inspire those now joining the field.

There is constancy and consistency in the book's contents – the chapter headings are identical in this and the two previous editions – and this book is a reminder that the wider cultural, psychological and socio-economic factors affecting drug use are frequently discounted in public debate.

Media coverage of the ACMD's May 2013 open meeting concentrated on the numbers of 'new' drugs being reported. It failed to mention the silence of HM Government following its receipt three years ago of the ACMD's report on foil use and heroin; the dis-investment in drug and alcohol services already becoming apparent since the ending of ring-fencing of drug and alcohol funding; or the 'disengagement' of the Department for Education from inter-departmental work on drugs. The immediate – and the sensational – have taken over from the important.

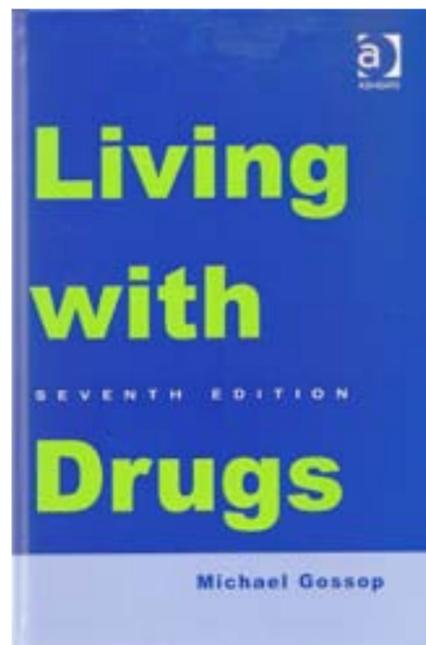
The opposite is the admirable characteristic of Gossop's book. His reflection on new psychoactive substances is that they are a predictable result of the prohibitionist approach to drug use. To ban is

to challenge suppliers to re-formulate their existing products. More regrettably, the moves to ban newly emerging substances and compounds are frequently linked to media coverage which is all too often partial, inaccurate and misrepresentative. Gossop lets us draw the conclusion that such activity at the edge of the drug use spectrum gives an impression of 'doing something' which ignores or disregards wider realities and contexts, and focuses on symptoms, not causes.

LIVING WITH DRUGS

Michael Gossop
7th edition, Ashgate, 2013

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Gossop recognises the different narratives existing around drugs, at one point acknowledging that what – and how – he is writing will not be well-received or accepted in some quarters. And he ends his seventh edition, as before, with the statement: 'Drug taking is here to stay and one way or another we must all learn to live with drugs.' His patient, well-argued and non-judgemental style leads up to this summarising statement, but clearly – and at times explicitly – he rejects the prohibition approach and the 'war on drugs.'

HIS REFLECTION ON NEW PSYCHOACTIVE SUBSTANCES IS THAT THEY ARE A PREDICTABLE RESULT OF THE PROHIBITIONIST APPROACH TO DRUG USE. TO BAN IS TO CHALLENGE SUPPLIERS TO RE-FORMULATE THEIR EXISTING PRODUCTS.

Apart from the patient and thoroughly argued style and content, what can the reader – lay and professional – expect from *Living with drugs*? Tellingly, the lengthiest chapters are those on alcohol, tobacco and the control of drugs – with some provocative mention of sugar.

'Junkie myths' includes discussion on anti-drugs campaigns and propaganda. His examples range from the well intentioned, the misinformed and misinforming, to the grotesque, mendacious and xenophobic. Here too is discussion on the impact of stigma about drug use and drug users, willingly, it seems, encouraged by much of the media. The conclusion that is hard to resist is that the majority of the harms arising from drug use has social and not chemical origins. The role of governments in perpetuating rather than countering myths is implicit here, reinforcing the claim of the Norwegian criminologist Nils Christie: 'The most dangerous use of drugs is the political.'

Those established in the drugs field will look to see what's new in this seventh edition and find the discussion and argument retained. There is careful, thoughtful and comparative exposition of all factors, including historical and geographical drug use and production, with relevant inclusion of recent developments around drug control and new psychoactive substances. Those whose copies have wandered will want to replace them. New readers, as they say, could do a lot worse than start here. Prepare to have your knowledge extended and preconceptions challenged!

Social injustice

Drugs, Crime and Public Health focuses on evidence and its role in policy making. Having 'heard and read a lot of nonsense', Alex Stevens aims to challenge conventional wisdom on such matters, something he is well placed to do as Professor of Criminal Justice and an experienced drugs researcher.

By way of scene-setting, Stevens dismisses free-market 'solutions', which he argues would likely increase drug-related harms, and distances himself from the 'Foucauldian position' because of its tendency to see all public health initiatives as exercises in disguised coercion. Insisting on the primacy of human rights, Stevens maintains that public health interventions may promote freedom and protect people's health by facilitating informed choices. This leads him to a 'political economic approach'.

By focusing on such arrangements, Stevens challenges 'blinkered discussions' that 'close off consideration of social issues that are at the root of many of the harms for which drugs and laws have been blamed.' While drug use does not seem to be linked to deprivation, Stevens shows that dependence and associated harms are, forming one of the 'afflictions of inequality'. This evidence is then used to challenge prevailing notions that drugs cause crime, as it is noted that such claims cannot explain the social distribution of drug-related harms.

As an alternative, Stevens develops the notion of 'subterranean structuration', incorporating individual motivations, while also helping to explain why drug-related harms are concentrated amongst those 'who have suffered most from deindustrialisation and the advance of socio-economic inequality.'

Having identified the social conditions associated with drug-related harms, Stevens documents how they are routinely silenced and suppressed. Through his experiences as a policy adviser on a placement within the UK civil service, he identifies practical, professional and political barriers to the translation of evidence into policy. Although evidence had a certain cachet among his civil service colleagues, Stevens argues it was routinely air-brushed to remove ambiguity and support ideologically favoured positions. In particular, the need for 'totemic toughness' resulted in 'selective policy stories' that talked up the drug-crime link, while minimising the inequality-harm link.

The distorting influence of politics is further illustrated in a series of case studies, which show how evidence is used to support a particular world-view. By dividing drugs and their users into the 'safe' and the 'threatening', this view militates against 'a more fully rational use of evidence' and supports the greater penal exclusion of some drug users. The result is 'a sorry picture. Millions of pounds wasted. Thousands of people deliberately harmed.'

Turning to the international evidence, Stevens

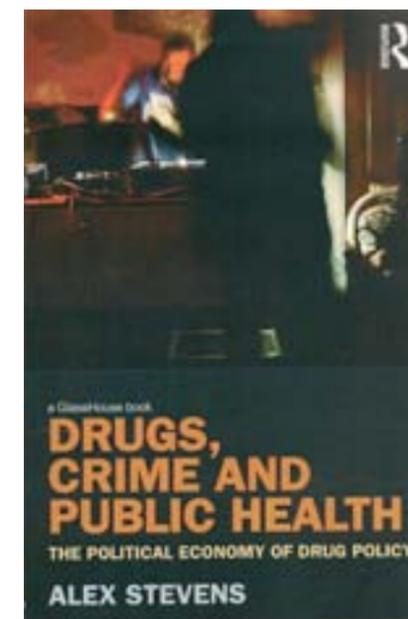
Reviews

■ **Michael Shiner**
Senior lecturer in social policy and criminology, London School of Economics and Political Science.

DRUGS, CRIME AND PUBLIC HEALTH: THE POLITICAL ECONOMY OF DRUG POLICY

Alex Stevens
Routledge-Cavendish, 2011

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concludes that drug policy appears not to be the most important determinant of drug use or related problems. Inequality and social support, he argues, are probably more important in alleviating such problems. If governments have the drug problems they deserve 'it is not because they have neglected to enforce their drug laws, but because they have failed to protect their citizens from the malign effects of inequality.' While drug policy may accentuate harms, it follows that long-term solutions lie elsewhere.

As a way forward, Stevens points to reduction of inequalities, reform of international law, and 'a gradual, evidence-dependent shift towards the decriminalization and regulation of currently illicit drugs.' While recognising the apparent remoteness of some of this, Stevens insists that 'justified scepticism' about political uses of evidence should not prevent us from creating and using knowledge to improve drug policy. Such action should, however, 'complement initiatives to create wider social justice' by 'building coalitions between drug users, researchers, campaign groups, unions and politicians in ways which build support for greater equality and reduce the perceived electoral dangers of less punitive drug policies.'

Drugs, Crime and Public Health provides a powerful diagnosis of the drug problem and is a must-read for anybody seriously interested in

the subject. The analysis is thoughtful and nuanced, yet refreshingly concise and clear-sighted. Rather than academic dissembling, the political implications are laid bare, though the call for 'more reliable evidence on which to build drug policy' is tinged with irony. Stevens' own analysis suggests the evidence he presents will be unpalatable to those best placed to act on it and will almost certainly be subject to the processes of selectivity and silencing he describes. That said, the call for a progressive coalition has an air of realpolitik about it, encapsulating what might be taken as the book's core manifesto – drug policy is inevitably political, but is too important to be left to politicians and their advisors.