

# Science, Social Justice and Drug Policy



# Scientific Method

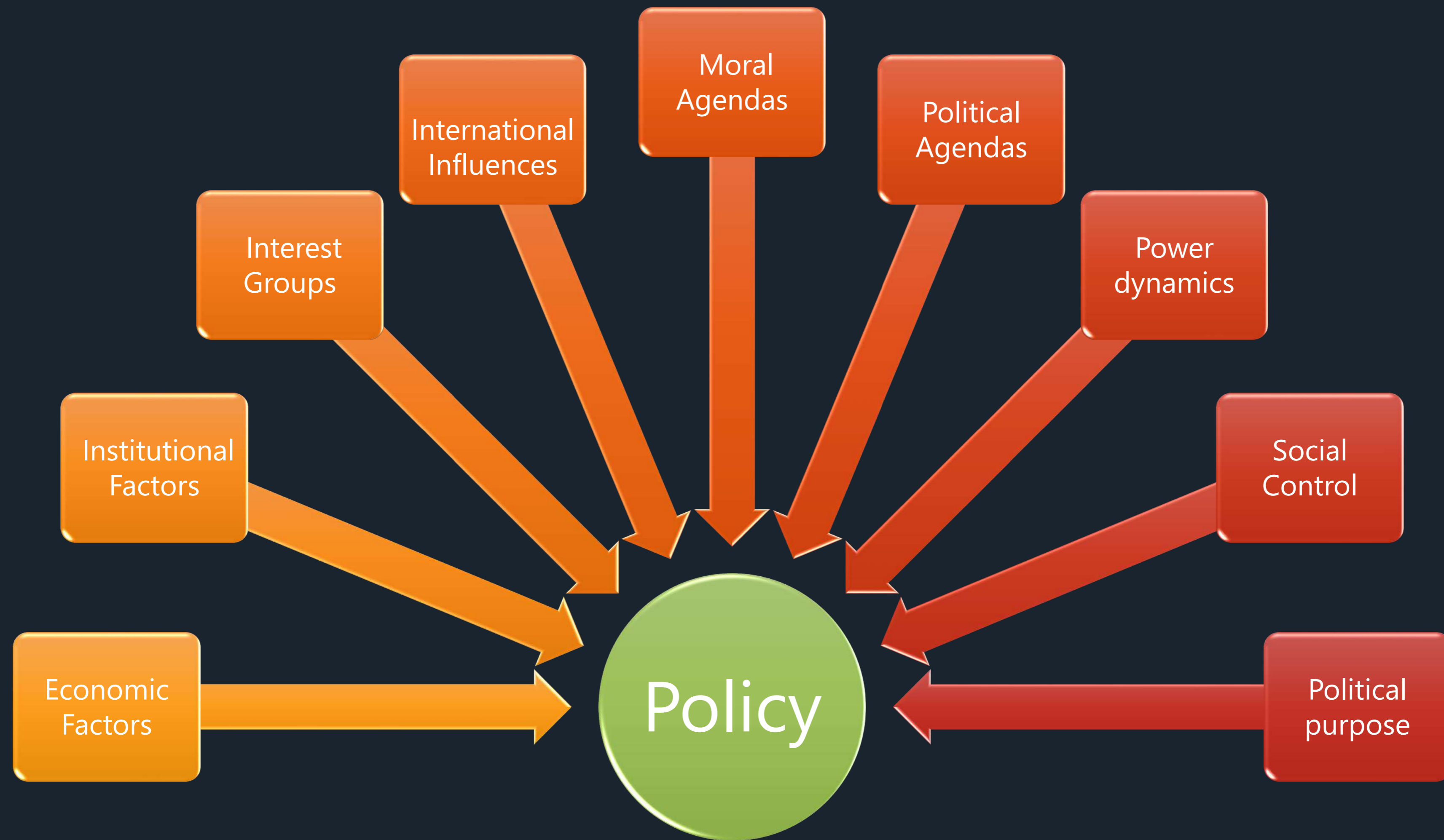
- 1 Problem
- 2 Review
- 3 Hypothesis
- 4 Data Gathering
- 5 Analysis
- 6 Conclusion
- 7 Publication

# Policy Making

- 1 Problem
- 2 Consultation
- 3 Formulation
- 4 Implementation
- 5 Monitoring
- 6 Evaluation
- 7 Repeat/Terminate

“Policy formation is a complex iterative process between policy analysts/advisors, subject matter experts, politicians and external stakeholders. It is easy for science to be quickly ignored or separated from other considerations. Yet the essential need is to try and ensure the place and integrity of science-based input throughout the process. .”

*Professor Sir Peter Gluckman*





# Drug policy

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Health & welfare of mankind...

## A single Convention

Single Convention on Narcotic Drugs 1961 (as amended by the 1972 Protocol) (30 March 1961), UNTS vol. 520 no. 7515. [hereinafter 'Single Convention'];

1971 Convention on Psychotropic Substances (21 February 1971) UNTS vol. 1019 no. 14956. [hereinafter '1971 Convention']; UN Convention against the Illicit

Traffic in Narcotic Drugs and Psychotropic Substances (20 December 1988) UNTS vol. 1582 no. 27627..



# A single Convention

Recognizing that addiction to narcotic drugs constitutes a **serious evil** for the individual and is fraught with social and economic danger to mankind,





# Evil

Conscious of their duty to prevent and combat this **evil,** Considering that effective measures against abuse of narcotic drugs require **coordinated and universal action,**







BECAUSE DRUGS ARE **DANGEROUS?**



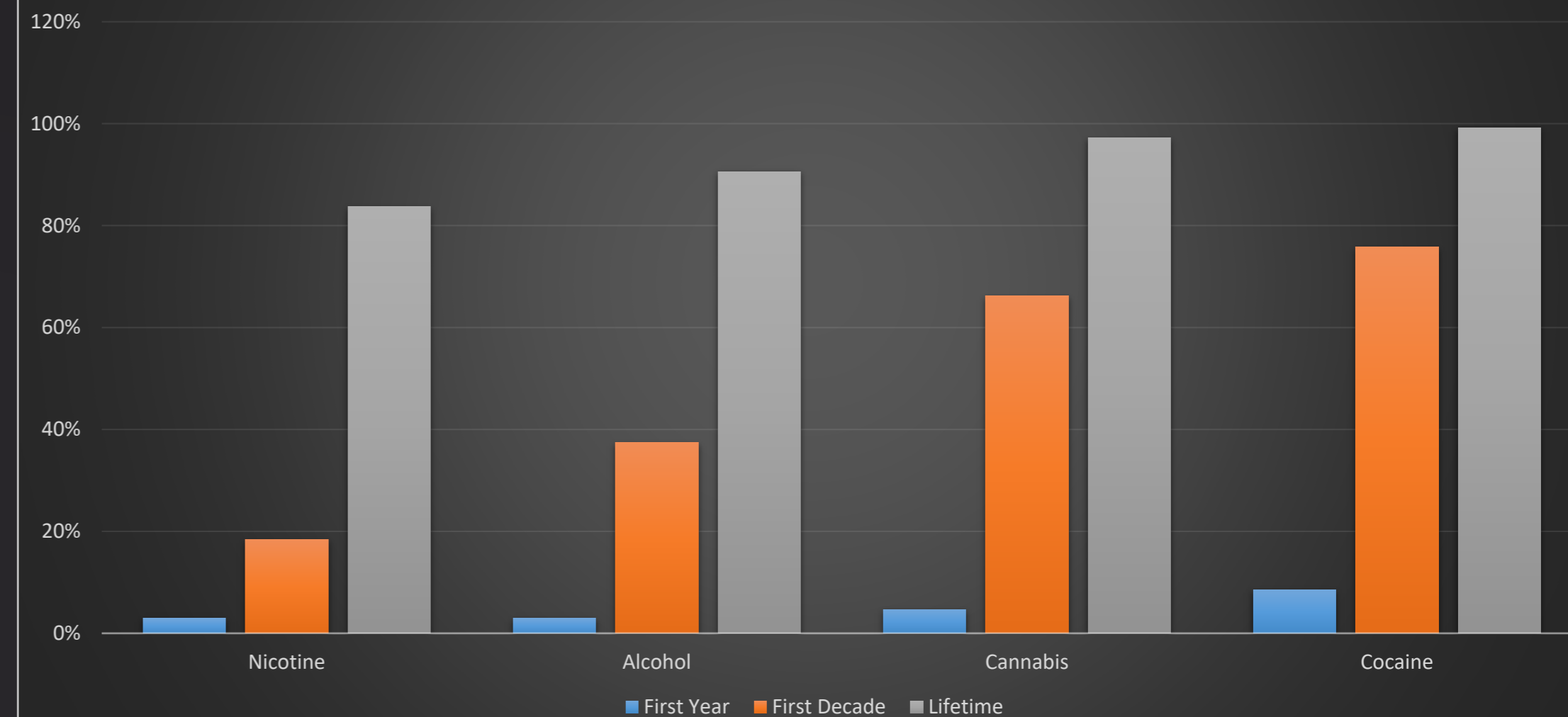
IF YOU REPEAT A  
LIE OFTEN ENOUGH  
IT BECOMES TRUTH

politics



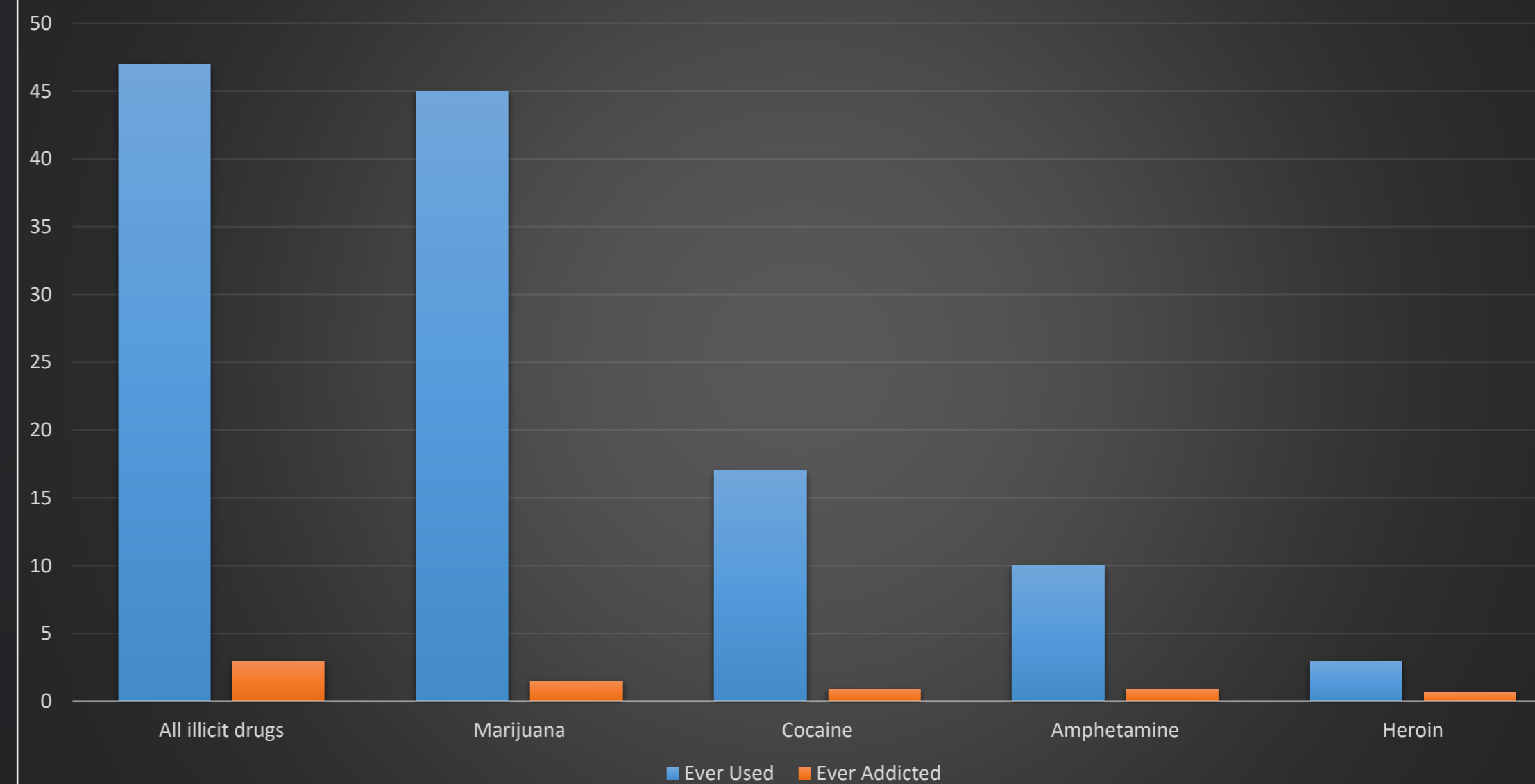
### Probability of Remission

White, 2012



### Lifetime Use & Addiction

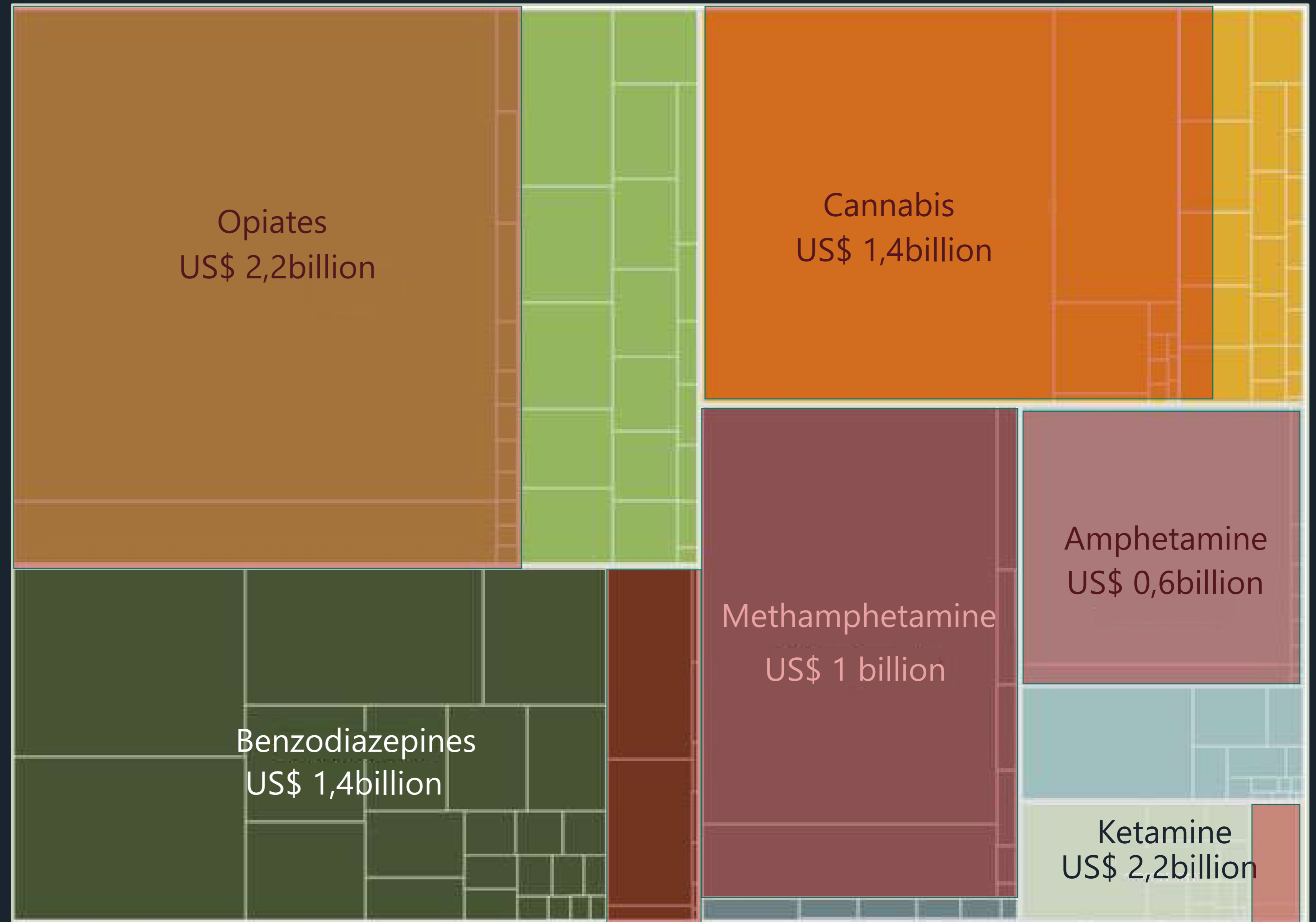
Conway et al., 2006



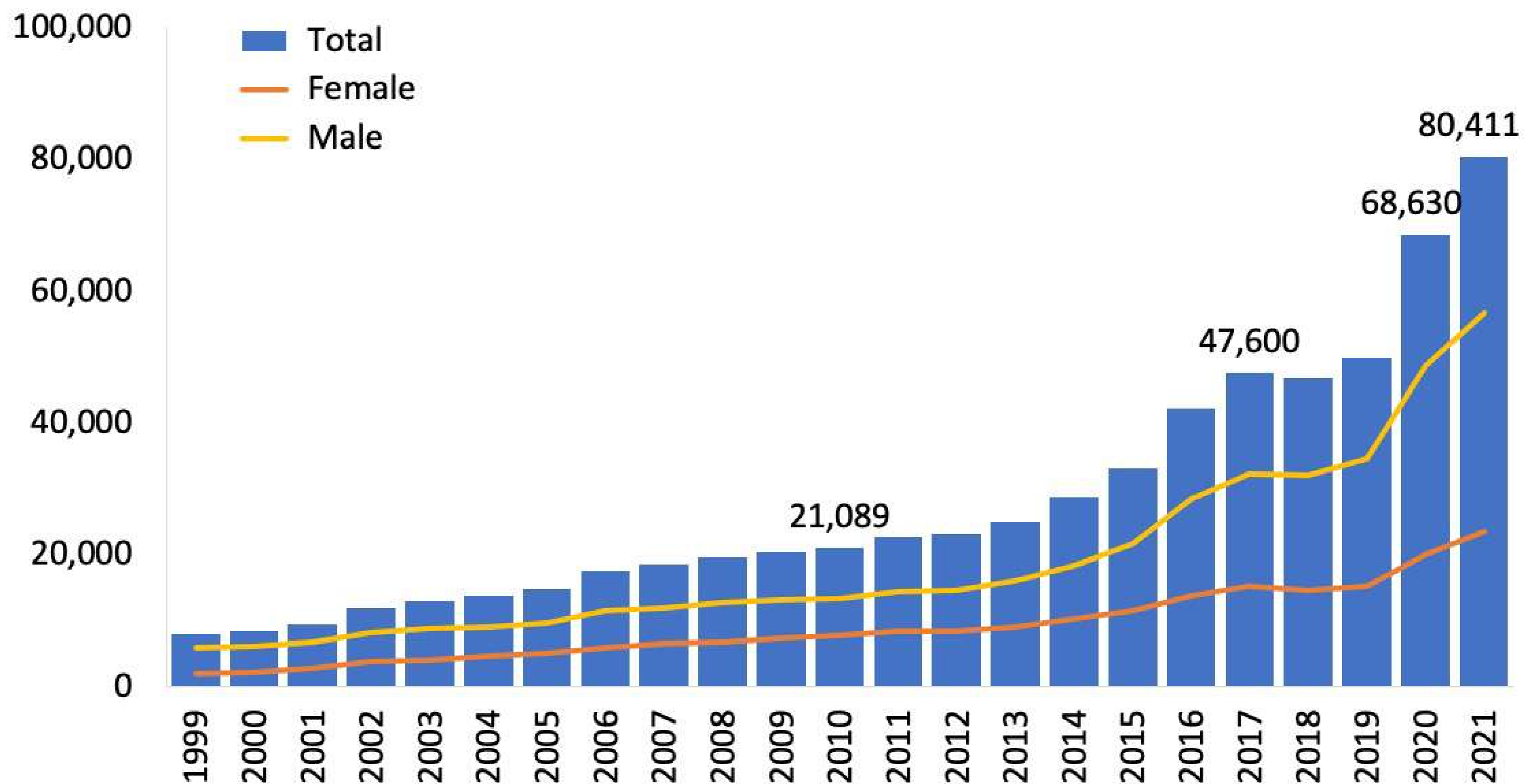
# Drug Research Breakdown

: Federal grants  
2008-2014

"Abuse"

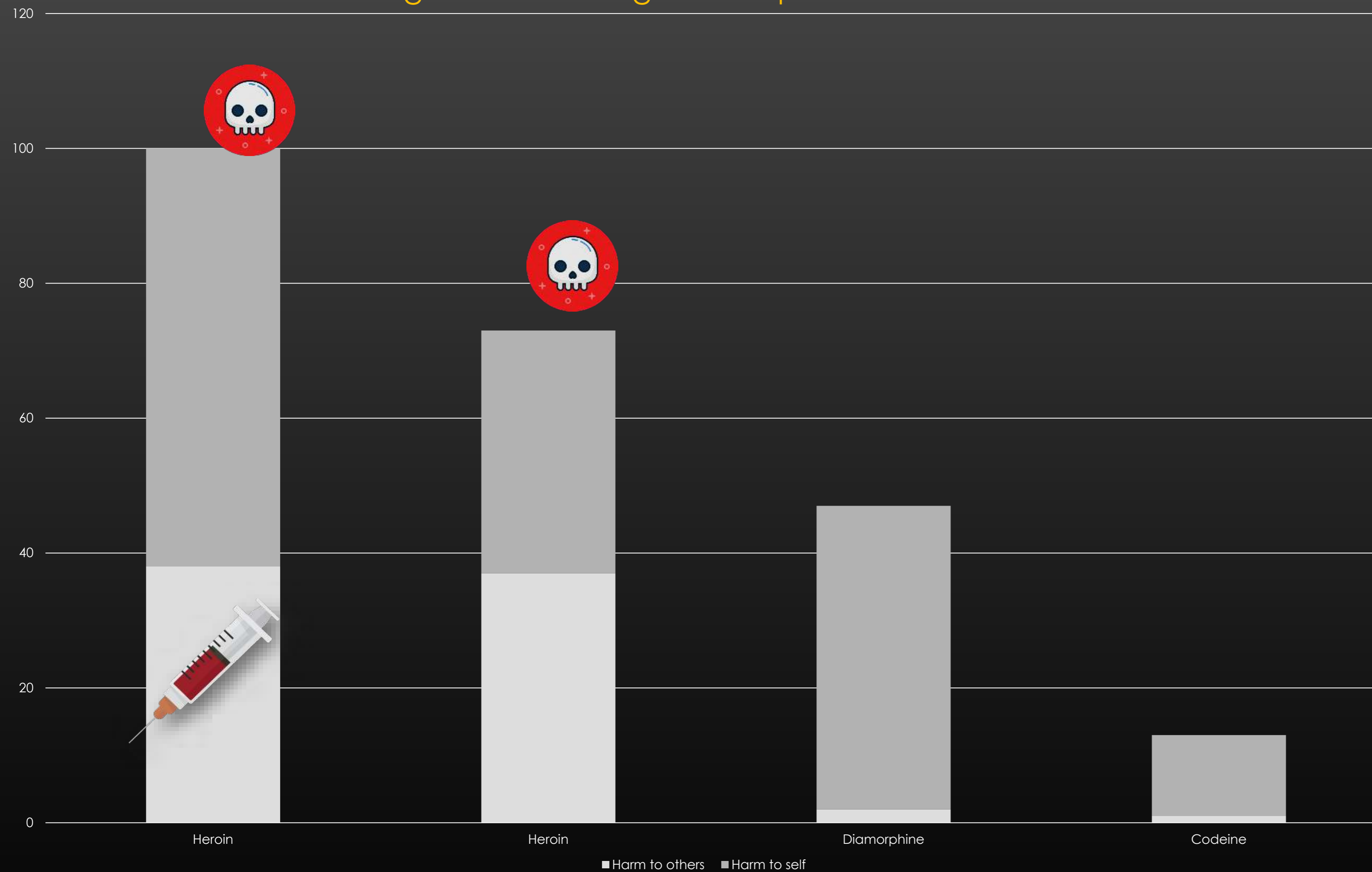


### Figure 3. National Overdose Deaths Involving Any Opioid\*, Number Among All Ages, by Gender, 1999-2021



\*Among deaths with drug overdose as the underlying cause, the “any opioid” subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

## Regulated vs unregulated opioids



van Amsterdam, J., Phillips, L., Henderson, G., Bell, J., Bowden-Jones, O., Hammersley, R., ... & van den Brink, W. (2015). Ranking the harm of non-medically used prescription opioids in the UK. *Regulatory Toxicology and Pharmacology*, 73(3), 999-1004.



**“This body of research has clearly shown that HAT is a viable and effective treatment for a sub-group of heroin users who do not respond well to methadone. The evidence is now robust and rigorous.”**

Seddon, Toby. "Prescribing heroin: John Marks, the Merseyside clinics, and lessons from history." *International Journal of Drug Policy* 78 (2020): 102730.

LET THEM  
EAT CRACK

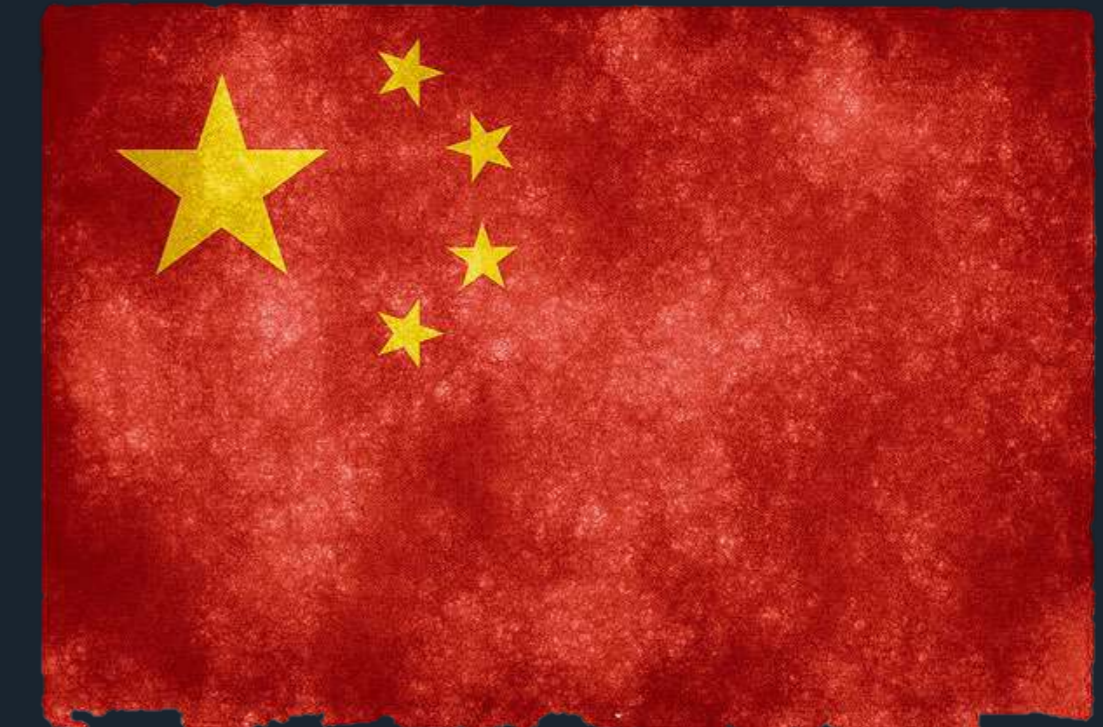
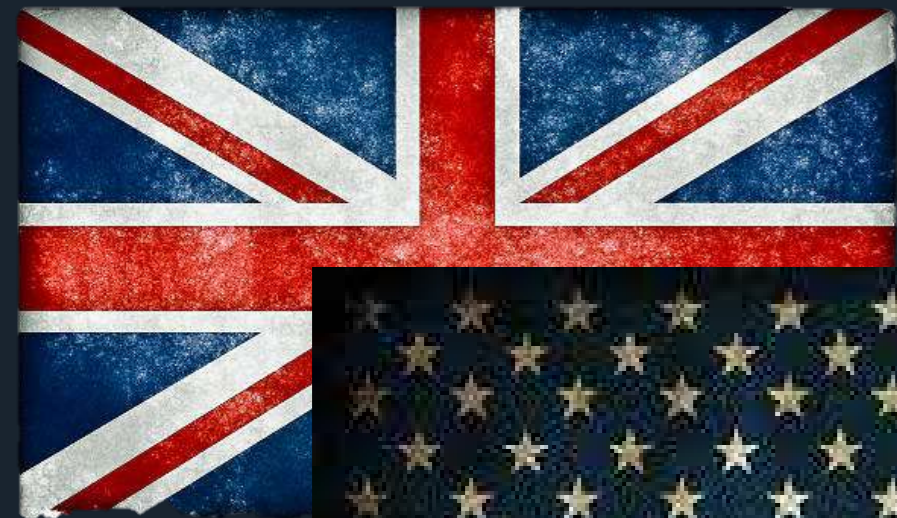




**It is all a distraction.**



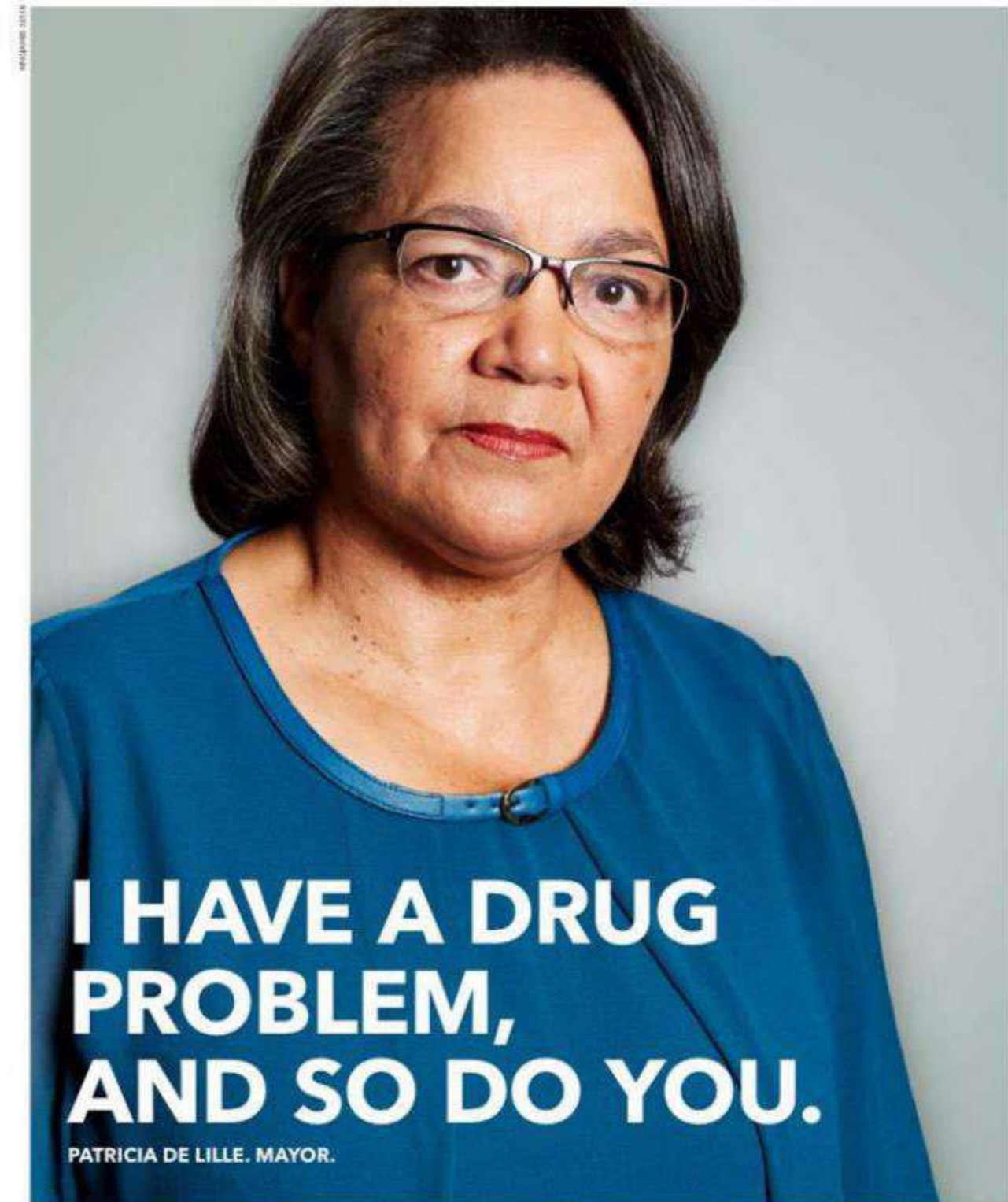
# UNDUE INFLUENCE



The perpetuation of the colonial and imperial through the myth of the international.



**MY NAME'S  
OMAR AND I  
HAVE A  
DRUG  
POLICY  
PROBLEM.**



**I HAVE A DRUG  
PROBLEM,  
AND SO DO YOU.**

PATRICIA DE LILLE. MAYOR.

**WE MAY NOT USE THEM, BUT THEY STILL AFFECT US.**

Drug addiction controls more than just addicts. It has power over the safety, well-being and future of our kids, our families, our communities. And because it doesn't stop there, it has to stop today. That's why I'm calling on all Capetonians to join forces in helping me face and fight our drug problem.

If you or anyone you know needs help, or you want to report a dealer, call our free anonymous drugline.

**24HR HELPLINE: 0800 4357 48**



CITY OF CAPE TOWN  
ISIXEKO SASEKAPA  
STAD KAAPSTAD

Making progress possible. Together.

26

**24HR HOS LYN: 26-27-28-PHAKAMISA**



**SHITY IN MY TOWN  
AKUKHO THEMBA  
GEEN WERK**

**Making recidivism probable. Forever.**



- *“If you don’t want us to militarise, to take over your neighbourhoods, keep us out of areas that require us to solve your social problems. But because the police have the biggest footprint across the country we are being called on to solve problems for other departments which are weak or insufficiently organised. So we end up trying to control what we shouldn’t be controlling.”*



General Jeremy Vearey

# Prisoner or Patient

A more insidious side to the same coin?

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Keeping prisons full is good for the economy, but costs the state money.  
Then somebody worked out you could charge a patient.



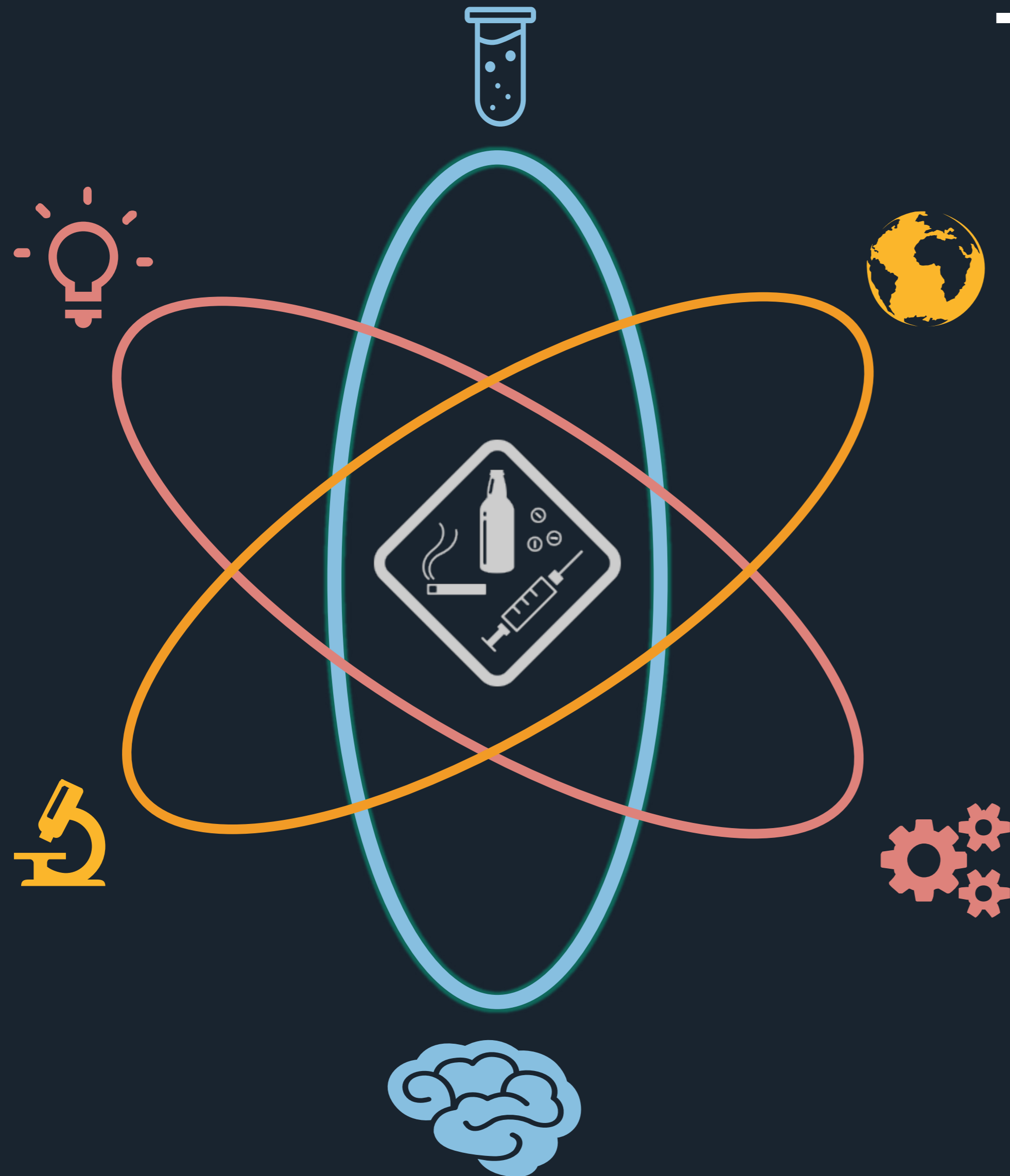
- ❌ **Drug courts**
- ❌ **Coerced treatment**
- ❌ **Disease prophecy**
- ❌ **Late interventions**
- ❌ **Stigma**





# Fields of Study

Areas of reduction?



## BRAIN SCIENCE



Neurochemistry  
Neurobiology



## SOCIAL SCIENCE



Macro-system  
Micro-system



## BEHAVIOURAL SCIENCE



Thoughts  
Behaviours



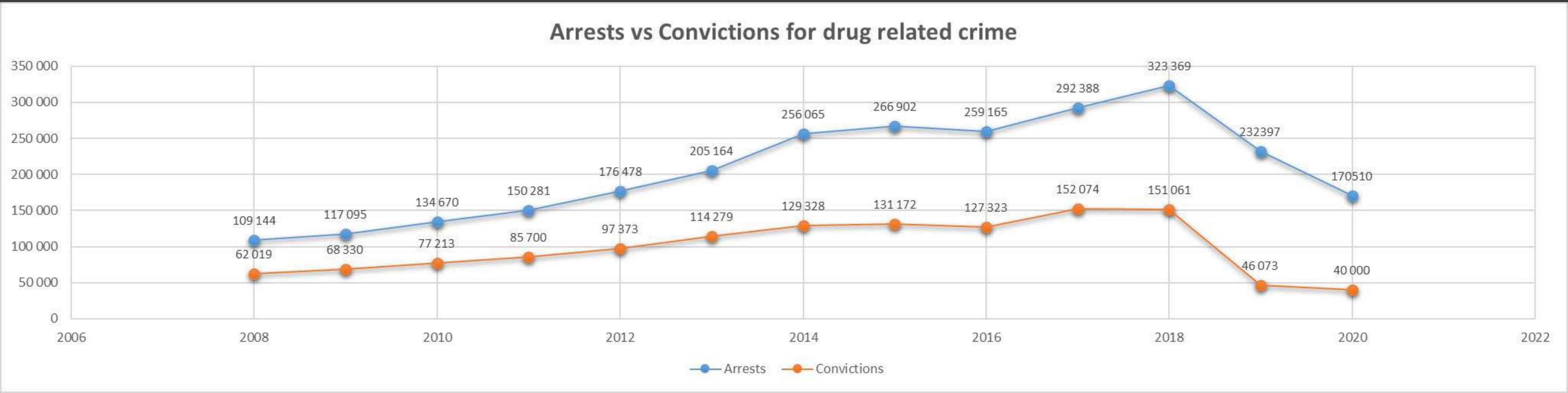
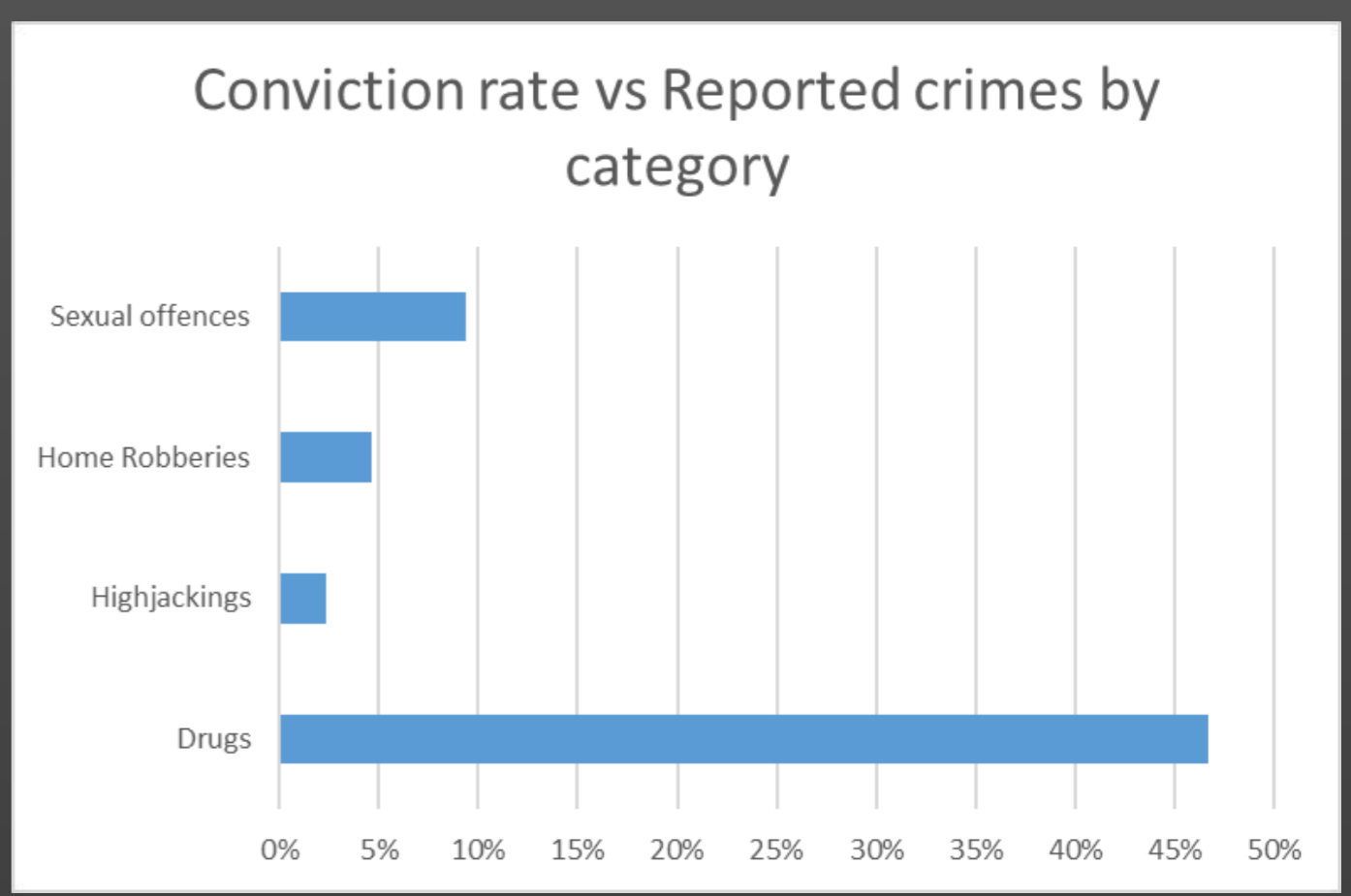
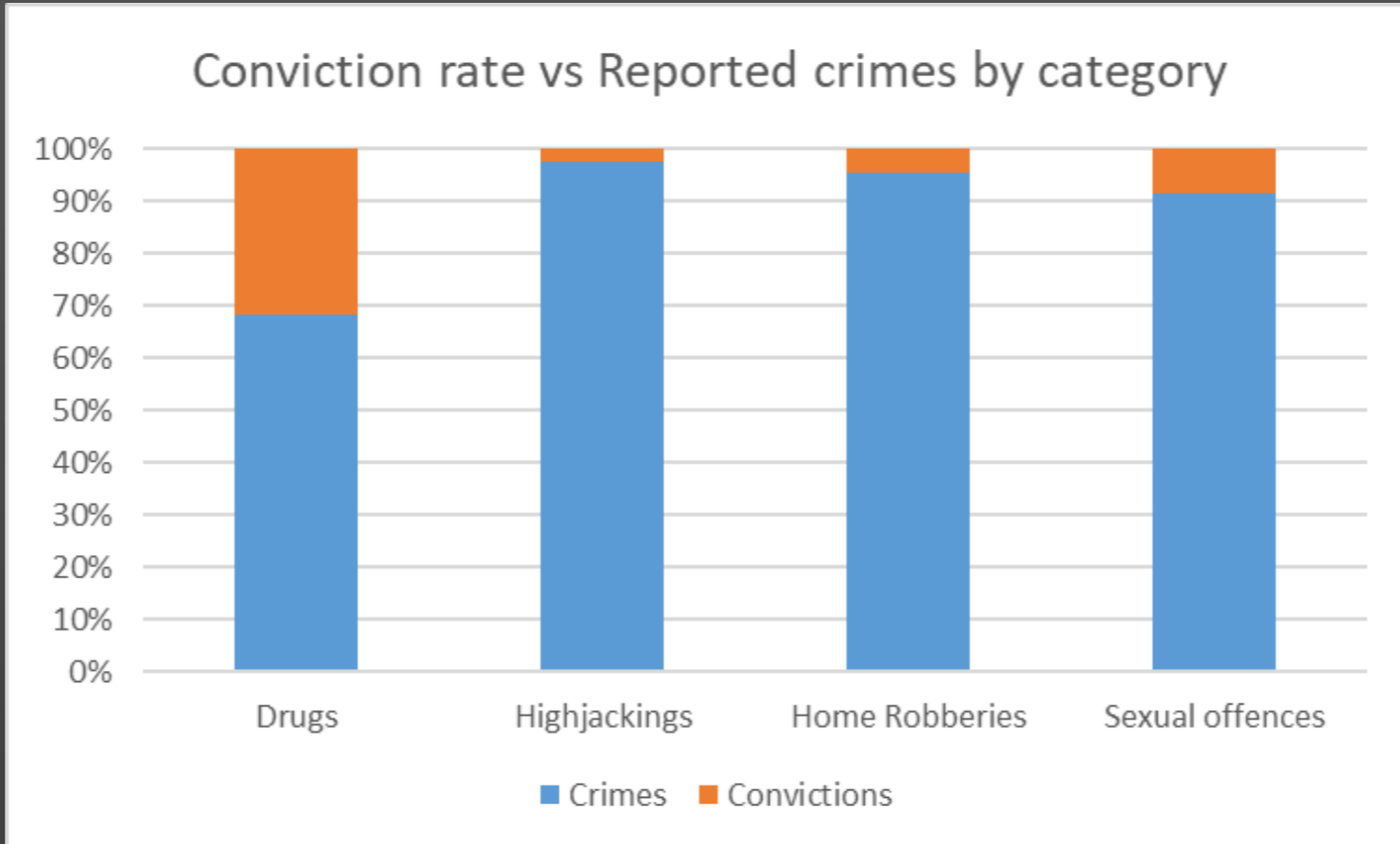
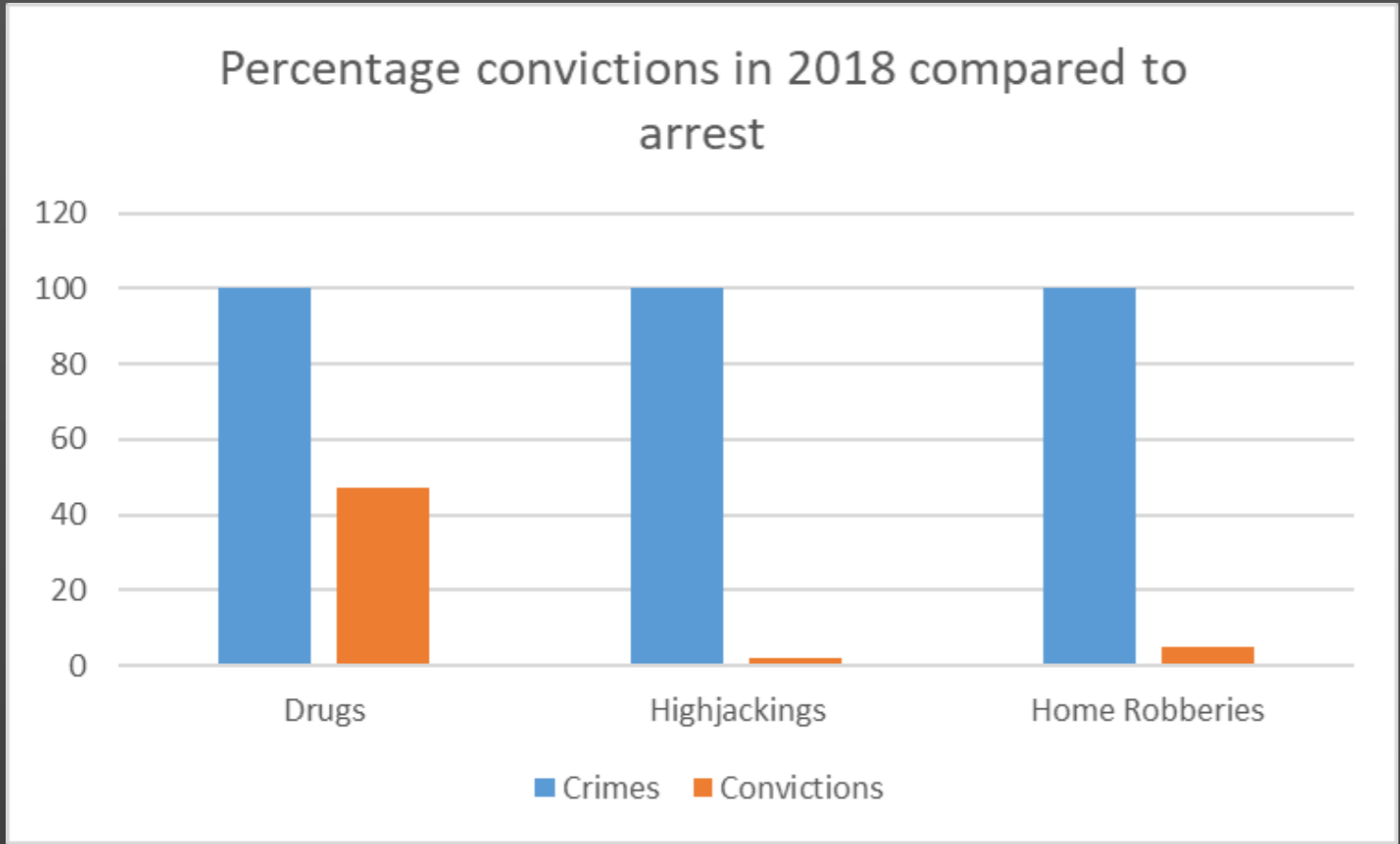
I SEE HUMANS  
BUT NO HUMANITY



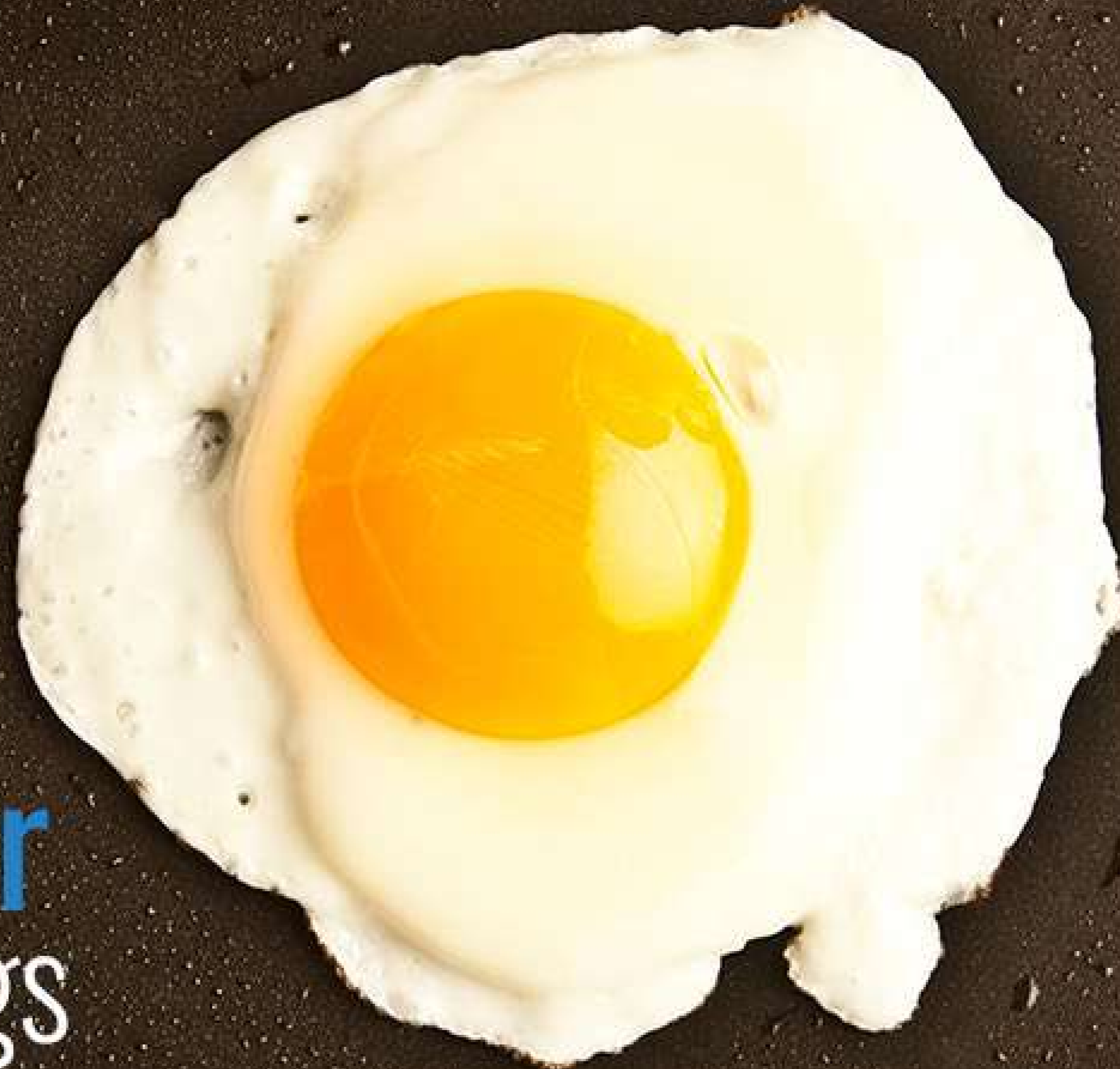
**Science without social justice  
can lead to misguided and  
harmful interventions.**

| <b>More likely</b> | <b>Less likely</b>        |
|--------------------|---------------------------|
| Educated           | Lower levels of education |
| Employed           | Unemployed                |
| Women              | Men                       |
| Married            | Unmarried                 |
| Motivated          | Mental health issues      |
| Family support     | Arrest                    |
| Purpose            | Early onset               |
| <b>TREATMENT?</b>  |                           |

Moos, R. H., Nichol, A. C., & Moos, B. S. (2002). Risk factors for symptom exacerbation among treated patients with substance use disorders. *Addiction, 97*(1), 75–85.



**This is Your**  
Brain on Drugs





**EVERY DAY CAN BE  
BRING YOUR BEER  
TO WORK DAY.**

**#NowYouCan**



At least  
**95%**  
less harmful

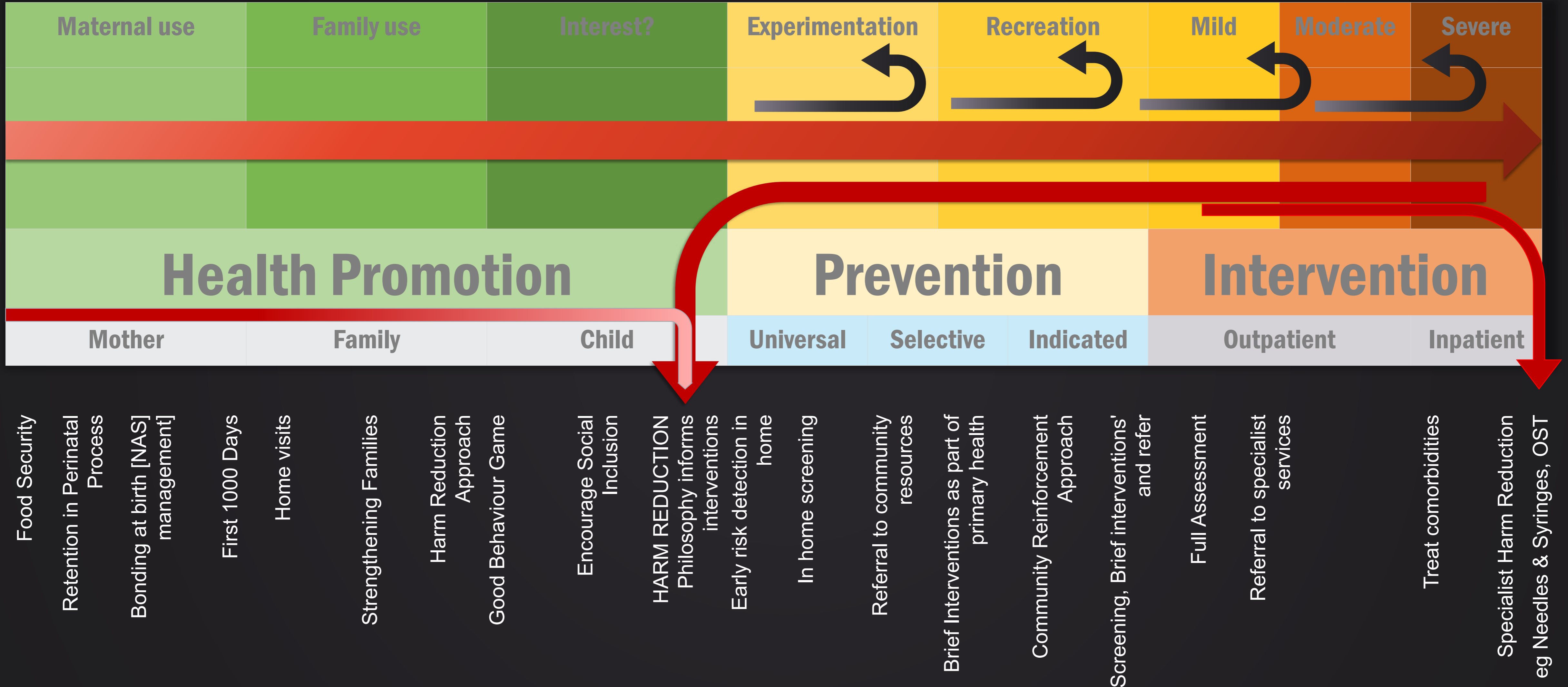


E-cigarettes are not risk free but  
are far less harmful than cigarettes





# Continuum of drug & alcohol use





YOU TALK WE DIE



# People.

# who use drugs



**Decriminalise** the use of all drugs immediately. Introduce a community based, harm reduction-informed, peer led **continuum of care.** Move towards **intelligent regulation** for commercial production and sales of all drugs.





Prohibition-focused drug policy remains one of the fundamental barriers that we must remove before we can achieve an open, just and equitable society in South Africa, Africa and internationally.

**The principles of social justice can be informed by science, but science must also pursue the principles of social justice.**

**Social justice must be the bedrock on which all policies are built.**

**We need to put aside our biases and beliefs, and seek the truth, no matter how inconvenient it is.**