



DRUG POLICY AND CHRISTIAN ETHICS

A consultation held by St George's House and Transform Drug Policy Foundation

INTRODUCTION

In May 2022, Transform Drug Policy Foundation and St George's House convened a meeting to discuss Christian doctrinal and ethical positions on drug policy. Members of several Christian denominations in the UK attended the two-day event. It provided a space for participants to openly discuss drug policy and reform from a Christian perspective, explore the existing levels of Christian engagement with the issue of drugs and drug use, and identify both the opportunities and barriers for generating support from Christian faith communities for drug policy reform including harm reduction, decriminalisation, and options for the legal regulation of drugs. Participation did not imply, or require, agreement on the principle of legal regulation of drugs, and the input of participants reflected this. Participants came from a range of backgrounds and brought different views on the question of drug policy reform. All views were personal and did not represent formal positions of the denominations of the Christian church.

Across Christian denominations, engagement with the issue of drugs largely centres around concerns for the harms of drug use; for some this is a matter of charity and compassion, aiming to alleviate the harms, for others it is an issue of sin and judgement, or a combination of the two. There is, however, a lack of clarity on the positions of various Christian denominations regarding the harms associated with current prohibitionist drug policy. Over the last fifty years, vast resources have been directed towards enforcing prohibition in the UK and globally while drug consumption, numbers of people criminalised, and drug-related deaths have all increased dramatically. Yet global consensus on achieving a 'drug-free society' through prohibition has broken, as countries across the world have begun to treat drugs as a public health issue rather than a criminal justice issue. Instead, many states are now implementing harm reduction measures such as Overdose Prevention Centres, decriminalising the possession of drugs for personal use, and legally regulating drugs such as cannabis and implementing Heroin Assisted Treatment. Most participants believed that the UK on the other hand has fallen behind the curve on the issue of drugs by continuing to double down on an enforcement approach.



GENERAL PRINCIPLES DRAWN FROM THE DISCUSSIONS

There was collective agreement among participants that current drug policies were not achieving their intended goals and that the prevailing prohibitionist system is having detrimental effects on individuals and communities. There was a major concern for the disproportionate targeting of socio-economically disadvantaged communities and communities of colour. While agreeing that some form of drug policy reform is urgently needed, participants were keen to stress that drug policy operates as part of a complex system and lies at the intersection of multiple social problems which are having an adverse effect on society. For this reason, it was deemed key that drug policy should be considered as part of a system-wide issue rather than in isolation.

This report summarises the consultation held over the two days and draws out the key themes which emerged. The consultation concluded with the group forming eight principles, rooted in Christian values, on which it was agreed that drug policy should be based.

'We believe that drug prohibition in the UK has failed and has caused harm to many lives. Drug policies in the UK, and the Misuse of Drugs Act in particular, must be reformed as a matter of urgency. We believe that this is something which should be widely supported by people of the Christian faith.'

Drug policy should...

- Be treated as a public health issue, aiming to reduce harm to individuals, communities, and the public
- Be informed by those most affected by prohibition, including users and those criminalised
- Be pragmatic
- Be transparent
- Be evidence-based

- Be understood as one piece of a system-wide problem. Drug reform is not the only solution but will help to alleviate societal harms
- Lead to the legal regulation of drugs, which would make drugs as safe as possible, while ensuring social and economic justice
- Make reparations to those affected by drug prohibition

STRUCTURE

This report identifies and brings together the key themes that emerged out of discussions over the course of the two days, and is divided into four sections:

- 1. Supporting drug policy reform on the principle of justice
- 2. Christian theology on drugs
- 3. Unconditionally supporting people who use drugs
- 4. Morality, recreational use, and the law

SUPPORTING DRUG POLICY REFORM ON THE PRINCIPLE OF JUSTICE

An observation was made at the beginning of the two days: people who use drugs and others who have been negatively affected by drug policy have not received the attention and support that other social issues such as LGBTQ rights and Black Lives Matter have over time, both among the public and within the Christian faith. For example, participants identified that there is relatively little public outcry when every year the UK announces another rise in drug-related deaths. Drug use continues to be shrouded in stigma and moral condemnation; this has remained largely unchallenged and has frequently stifled debate on system-wide change to alleviate suffering. Members of the group agreed that the issue of stigma contributes to anxieties around advocating for drug policy reform. The group intermittently returned to the issue of morality and drugs, wrangling with the different doctrinal objections to their use and whether drug policy reform could be supported within this belief. To bring Christian denominations together in support of drug policy reform, members of the group suggested that drug policy should be discussed as an issue of justice. Where there may be discord on the theological understanding of drugs, there can be agreement on the theology of justice, a principle of the Christian faith.

Prohibitionist policy over the last half-century has led to a huge record of injustices globally, from the Philippines' state-approved genocide of people who use drugs, the struggle of poor farming communities growing coca leaves to survive while being persecuted by the state, the disproportionate policing of Black communities, to the exploitation of children in county lines run by organised crime. The issue of justice helps to consider the broader impact that prohibition has had on society. Going beyond the concern for drug use, many members agreed this perspective enables the inclusion of those linked to the illegal drug market, from production through to supply and use, as well as other members of society that have been targeted and oppressed through drug policy. This was considered an important point that the group came to in the concluding session - focusing solely on the harms of drug use, which has tended to dominate, means the other victims of prohibition are not being considered. The group agreed that even if there

THE ISSUE OF JUSTICE HELPS TO CONSIDER THE BROADER IMPACT THAT PROHIBITION HAS HAD ON SOCIETY is a moral objection to drug use and its consequences among Christians, space ought to still be made to call out a punitive policy under which injustices are being carried out. It doesn't have to mean drug use is condoned but does allow condemnation of prohibition and support for reform.

A few participants expressed their concern with prevailing drug policy as it appears to be one of few frameworks that allows such a legitimised violent expression of stigma and racism. The traumatising experience of Child Q in the UK was recounted to the group. This child experienced violence and trauma at the hands of police due to suspected possession of cannabis. The group discussed the injustice the victim experienced during this event under the guise of a policy which is supposed to protect members of society. Considering this case, some emphasised that members of the Christian faith have a responsibility to question the injustices inflicted upon individuals under prohibition. If the injustices of our current drug laws outweigh the benefits, can it be morally defensible to stand by and not criticise them? The group agreed it cannot be justified, and that it brings into question who current drug policy is benefiting. Participants believed that the current execution of justice in drug policy serves a very narrow pool of people and Christian communities should feel able to speak up against this problem. Justice is a strong Christian ethic, and the group agreed there was a need for Christian churches to question whether prohibition is executing proper justice and to be open to an alternative form of policy that moves away from enforcement which is exacerbating harms.

CHRISTIAN THEOLOGY ON DRUGS

Most of the current debates we have around drug policy, morality and harm were originally rehearsed around alcohol. Issues of both dependency and social justice were raised as part of the 19th-century temperance movement and strong parallels can be drawn between it and the current public discourse around drugs. 'Drugs', the drugs that are currently illegal or 'controlled' under international prohibition, are not mentioned in the Bible. Yet, across Christian denominations, there is disapproval of drugs and their use. By contrast, the Bible contains multiple references to alcohol. These references evidence complexity: alcohol can cause immorality and violence, but it can also elicit feelings of joy and communal pleasure. This is evidenced in Christ's first miracle during the wedding at Cana where Jesus delivers water into wine. It is also central to Jesus' actions during the Last Supper and the sacramental practices that followed.

The group was asked whether, once taking away the legal distinction, there were any theological reasons why the apparent ambiguity around alcohol within the Bible could not be similarly applied to drugs. Participants were interested in this argument and thought it raised an important point about distinguishing between law and theology on the issue of drugs. They discussed whether the judgement of drugs was being driven by their legal distinction rather than by condemnation from the teachings of the Bible. Participants agreed that the Bible's references to alcohol could be viewed as ambiguous and therefore the position of drugs could be regarded similarly. Some participants, however, cautioned that doctrinal interpretation of alcohol can differ significantly between different Christian denominations. Alcohol is not unanimously tolerated. Yet this centres on the perceived immorality of consumption and the following intoxication of alcohol rather than a moral issue with the substance itself.

"AND GOD SAW EVERYTHING THAT HE HAD MADE, AND, BEHOLD, IT WAS VERY GOOD."

GENESIS 1:31, KING JAMES BIBLE

One participant expanded on the discussion of whether the substances themselves should be seen as sinful by asking the group to consider the belief that no God-created substance is in and of itself bad. The Bible teaches that God looked at everything that He made, and it was good. Following this teaching would suggest that drugs cannot in themselves be considered

'bad' or 'evil' substances. This observation stimulated a discussion on where the line is drawn between, in simplistic terms, good and bad. This, the group agreed, was rooted in the way a substance was used and is what distinguishes a drug from being a medicine or a poison. The example was given that an ingredient in the foxglove plant can strengthen the heart yet, in high doses, is severely toxic and can cause death. The same reasoning was applied to the opium poppy, from which morphine is derived and used medically to treat pain. yet, on the other hand, it is frequently linked to harmful use.

Therefore, the group agreed that an argument can be made to allow Christians to accept that drugs have the same potential benefit or harm as other entities. There was general agreement that based on this principle the abuse of a drug does not take away the ability for someone to use it safely. It was acknowledged that a critical problem with this framing is that it risks creating a dichotomy between medicine, e.g., medicinal cannabis and poison e.g., high potency skunk, without considering the in between, the non-medical use. Participants said it was important to recognise three types of drug use: medical, non-medical (recreational) and dependent. It was agreed that more education is needed on the different levels of drug use, as current Christian dialogue centres almost exclusively on dependence to illegal drugs.



UNCONDITIONALLY SUPPORTING PEOPLE WHO USE DRUGS

Concluding there is no definitive theological objection to drugs as a substance clarified that the moral concern is with how they are used and their effects. The question of what the defined parameters of abuse are, from a Christian perspective, is crucial. Is drug use bad because it leads to bad things e.g., harm or violence, or is intoxication itself sinful? There is a clear tension between Christian engagement with people who use drugs dependently and those who use non-medically (recreationally). For some, drug use itself is a sin regardless of the effects however, it was agreed, and reiterated throughout the consultation, that it is important for members of the Christian faith to offer compassion to people who use drugs. Yet, it was acknowledged that where there is support among Christians, it is mostly confined to supporting individuals who are struggling with dependent drug use, often predicated on the understanding that drug use is a sin and individuals need to be absolved of sin. This dedication to reducing harm, it was agreed, is an extremely important role for Christians to fulfil but the group discussed whether this compassion could be given without judgement.

There were concerns that drug policy reform, which offers alternatives to a recovery framework for reducing harm, could be viewed as controversial to prevailing approaches. The 12-step recovery programme, for example, is rooted in Christian teaching, encouraging an individual to a place of abstinence using doctrine as a guiding set of principles. It was suggested that a position that is not based on recovery could come into conflict with the Christian belief in salvation - being delivered from sin. It was proposed that healing people needed to be done in a non-condemnatory way and exploring alternatives to abstinence could be seen as a part of the same journey towards salvation from sin. Members of the Christian faith could also help an individual towards safer use while reducing their experienced harm without any other condition being placed. Participants considered Jesus' teachings to offer unconditional compassion - Jesus did not condemn sinners while he sought to prevent them from sinning. Participants concluded that, in the case of people who use drugs dependently, the role of the Christian faith is to lead by example without any condition placed upon change.

The principle of compassion without condition offers an opportunity for Christian churches to be advocates of harm reduction. It was agreed that instead of taking a paternalistic approach, people who use drugs should be met where they are. The group

agreed that if individuals aren't willing to do this, then it makes it harder to offer help. Participants were shown a video documenting a visit to the recently opened Overdose Prevention Centre (OPC) in New York City, the first of its kind to be opened in the United States. OPCs offer safer sterile spaces for people to use drugs under supervision to prevent overdose and overdose deaths. Almost 200 are in operation across the world, with no overdose deaths recorded on any site since the first opened in the 1980s. Attendees reflected on this video - if the purpose is to reduce the harm of drugs, then interventions such as these could be an integral part of the Christian value system to offer unconditional support. Some suggested there is a collective responsibility for Christians who engage on the issue to put their moral positions aside and to strive to understand the perspective of people who use drugs, understanding what they need.

Morally speaking, if there is an obstacle in the way of allowing this, such as the law, it could be opposed. One participant suggested that since Christians believe in the sanctity of life then life-saving interventions such as OPCs should not be objected to. Going further than this, the moral duty may lie in condemning the laws which are preventing the reduction of harm. Reducing harm should be based on meeting people where they are; within this people should have the right, if they are using drugs, to use them as safely as possible and harm reduction initiatives can be one way of supporting that.

MORALITY, RECREATIONAL USE, AND THE LAW

The stigma associated with drugs and drug use impacts current attitudes towards drug policy reform among Christian faith communities as well as the wider public. Indeed, there was general agreement that the attached stigma has made it easier for Christians to not talk about or act on the issue beyond supporting people with dependent drug use. This, however, means that not all individuals and communities that have suffered or



are suffering from the harmful effects of prohibition are always considered. The group heard from Anyone's Child campaigner Anne-Marie, who shared her story of the tragic death of her daughter Martha who, at fifteen, took ecstasy not knowing it was dangerously pure and subsequently died. Martha, despite having taken the precaution to search online for how to consume ecstasy safely, could never have known that there was little way of safely consuming ecstasy that was 90% pure.

For some of the participants, this story drew attention to the omission of non-medical use in Christian discourse. The support offered to people who use dependently is not necessarily helpful for people who are using recreationally. Only 10-15% of the people who use drugs are using dependently. There is a clear need, therefore, also to be talking about the much larger proportion of people who, less likely in need of treatment, are at risk of other harms including risky substances of unknown purity, as well as the threat of criminalisation. This combination puts individuals' lives at risk but also, due to the fear

of criminalisation, significantly increases the chance they will not seek help if something goes wrong. Some of the group suggested that for this reason, non-medical use needed to be a part of Christian concern if they sought to keep people safe and reduce harms. It became clear to many in the group that these harms were a product of a system that, rather than protecting society, was failing it instead. There was acknowledgement that it is not enough to encourage a 'just say no' approach for people who are using drugs.

SUPPORTING A MOVE AWAY FROM PROHIBITION DOES NOT HAVE TO MEAN THAT CHRISTIAN DENOMINATIONS CONDONE DRUG USE These observations stimulated a discussion on the moral objection to intoxication, how it can be an obstacle to accepting recreational use as a reality and supporting measures to make it safer. The fundamental concern regarding intoxication lies in its potential to cause harm to an individual and their community by taking away the ability to make moral decisions. Despite Christian

denominations agreeing to various degrees that non-medical use is sinful, it was questioned whether that necessarily meant that Christian communities believe drugs should be illegal. There was consensus that there needed to be a distinction between what is moral law and what is civil law. Consequently, supporting a move away from prohibition does not have to mean that Christian denominations condone drug use. It is instead recognising that continuing to criminalise people who use drugs and driving the control of the drug market further into the hands of organised crime is causing greater evil than intoxication. As most participants suggested, the health of society should be placed above doctrinal beliefs. Christian churches can accept that the world within the Christian faith is different to the world outside.

The law on drugs should not be there to condemn moral acts, it should be there to protect people. The 20th-century US prohibition of alcohol represented a high-water mark of an argument that justice was best served by the state acting as a steward of individual morality. However, it quickly became apparent that it made alcohol, and the illegal market which grew up around it, far more dangerous without necessarily discouraging use. Supporting the law of prohibition because drug use is considered immoral is not a value neutral claim. The argument that the state removing individual choice (through prohibition) is the best way to reduce moral failings and associated harms of intoxication fails to consider whether the state's interference is preventing harm or instead exacerbating it. Further to this point, the group was reminded that the decision to prohibit certain substances was not based on evidence of those substances' levels of harm. It is accepted that it is the state's responsibility to create a safer society - drug policy is its tool to achieve this outcome however, it is not necessarily achieving this outcome for all members of society. The group further discussed whether it is easier for Christian communities to currently not query the law and to form their moral views around it. If the law says that drug use is illegal because, in principle, the law is there to protect, then the legal condemnation of drugs (prohibition) is supported. However, it was pointed out at this thinking leads to an uncritical approach to state and law. It shouldn't be assumed that the law is necessarily always doing the right thing by society and members of the Christian faith should feel able to speak truth to power.

Participants returned to the point made around dependent drug use - reducing harm should be based on meeting people where they are, and this should be the case for recreational use as well. The group questioned whether it mattered what the Christian moral position is on recreational use in terms of drug policy reform. The law does not exist to condemn individual sin, it is there to protect society. In the parable of the Good Samaritan, the focus has always been on learning from the benevolent actions of the Samaritan, but the road he walks on could also be made safer. Here, drug policy is the road. The system of prohibition has exacerbated multiple harms and, it was collectively agreed, change through reform needs to happen to alleviate them.

CONCLUSIONS AND CONSENSUS

Discussions over the two days of this consultation were wide-ranging and detailed. It was agreed that prohibition in the UK has failed, and drug policy reform was necessary and urgent to address the harms. There was a high degree of consensus on the fundamental values that should underpin reform. In the final discussion we sought to capture these points of consensus by asking groups to complete the following statement:

Drug policy should...

This produced a range of responses from which the eight values that should underpin drug policy were chosen. They are listed below in no particular order:

- Reflect the whole system problem: producers, suppliers, users, those dealing with times of fall out (protecting all)
- Make reparations for prohibition (e.g., expungement of criminal records)
- Include legal regulation
- Not cause harm
- Be taken out of the Home Office and treated as a public health issue
- Be taken seriously
- Include a truly independent drug policy advisory group not appointed by the Government
- Be informed by voices of lived experience
- Be supported by the church
- Support justice in its outcomes, not just as part of its goals
- Be inclusive for everyone
- Reflect the reality of the complexity and nuanced nature of drug use

- Be understood as only one part of a whole system of inequality and social justice issues\
- Listen to and empower drug users and others affected by drug policy currently
- Be pragmatic
- Review what alternative regulation could look like
- Reflect the 21st century and modern society
- Protect the vulnerable and most dependent users
- Be transparent
- Not sit in isolation, it should be treated as part of a whole system approach that focuses on both cause and consequence
- Invest taxes from the regulated market into rehabilitation, health, and reparation programmes
- Be pragmatic rather than absolutist
- Reduce harm across production, supply, and use
- Include a grown-up discussion on the pros and cons of regulation

PARTICIPANTS

Lee Ball, Territorial Addictions Officer, The Salvation Army Martin Blakebrough, Chief Executive Office, Kaleidoscope Project Courtney Borwn, Founder and CEO, Father 2 Father CIC Rev'd Jon Caness, Lantern Initiative Lead, Newcastle Cathedral Anne-Marie Cockburn, Drug Policy Campaigner,

Anyone's Child: Families for Safer Drug Control

Katherine Cox, Psychotherapist

The Rev'd Canon Peter Dobson, Canon for Outreach and Discipleship, Newcastle Cathedral

Alex Feis-Bryce, CEO, Transform Drug Policy Foundation

Elizabeth Henry, Advisory/Consultant

Rt Rev'd Christopher Hill, Retired Bishop of Guildford, Church of England

Des Hunter, Peer Advocate, EBE, Lantern Project St Nicks CE

Howard Jacobs, Trustee, Transform Drug Policy Foundation

Ester Kincová, Public Affairs and Policy Manager, Transform Drug Policy Foundation

Rachel Lampard, Leader, Methodist Social Justice Project, The Methodist Church

Rev'd James McCartney, Executive Directory and Founder, T.H.O.M.A.S (Those on the Margins of a Society)

Martin Murray, Lecturer in Adult Nursing, University of the West of Scotland

Dr James Nicholls, Senior Lecturer in Public Health, University of Stirling; Trustee, Cranstoun

Catherine Pepinster, Freelance Research Consultant

Ben Ryan, Home Affairs Adviser, Church of England

Jane Slater, Deputy Chief Executive, Transform Drug Policy Foundation; Manager, Anyone's Child: Families for Safer Drug Control



ABOUT US

WHO WE ARE

WE ARE AN INDEPENDENT CHARITY WORKING TOWARDS A JUST AND EFFECTIVE SYSTEM OF LEGAL REGULATION FOR ALL DRUGS.

Our vision is a world where drug policy contributes to **safer and healthier** societies.

To achieve this, we educate the public and policymakers on effective drug policy; we develop and promote viable alternatives to prohibition; we provide a voice for those directly affected by drug policy failures; and we support policymakers and practitioners in achieving positive change.

Our current system of drug prohibition fails everybody. That is why we believe currently illegal drugs should be legally regulated through a system of risk-based licensing. 0117 442 0880 THE STATION, SILVER STREET, BRISTOL, BS1 2AG

In addition to our long-term goal, we work actively to support pragmatic changes to drug policy that can save lives today. These include police diversion schemes, overdose prevention centres and drug safety checking.

Drug policy harms affect people across society. Through our Anyone's Child campaign, we provide opportunities for people with personal experiences of drug policy failures to be heard.







ST GEORGE'S HOUSE