Drug misuse constitutes one of the main problematic issues in the UK, attracting fast and seemingly ongoing changes in policies. Despite the fact that certain drugs – currently classed as illegal – have been known to mankind for thousands of years, discussions and debates on the contemporary drug problem often project a distorted picture of its history and invariably assign limited insights into the contexts of its emergence. In like manner, current drugs policies did not develop in a vacuum; rather they can be traced back through a long history of discursive and practical attitudes towards drugs. Whatever forms and contexts that drugs policy changes have taken, they have at least in theory been justified as imperative to the control of drug demand and drug supply. An examination of the historical transition in policy related to drug demand and drug supply is imperative in order to put into perspective the practical implications of drugs policy for the black community. As will be demonstrated in subsequent sections, respective policy and practice approaches to drug demand and supply have continually adopted differing positions in relation to the black community.\footnote{Whilst acknowledging that there is not just one ‘Black community’ in Britain but rather a plurality of people of African and African Caribbean descent, in this chapter I use the term Black to signal the fact that we are in the realm of a particular racialised discourse and praxis which tends to mark out ‘Black’ people for singular treatment.}

Whilst black people have continued to remain highly prominent in the legislative and law enforcement attack on drugs supply, they have in contrast remained relatively marginalized in the strategy towards drug treatment and drug prevention.

3.1 The Black Community in the Drugs Discourses of the 19th and 20th Centuries

Despite the strong association between drugs and the black community in contemporary Britain, there was a time in history when black people were invisible in discursive and policy responses to drug use and drug supply. Even though black people already had a presence in the UK as far back as the 16th century (Fryer 1984), they remained absent from popular reactions to the drug scene even at a time of growing concerns over working class use of opiate towards the latter part of the 19th century. ‘Race’ at the time was signified in expressed concerns about Chinese ‘opium dens’, the spread of Chinese opium smoking into white middle-class groups, and calls by the anti-opium movement to stop what was considered an ‘alien vice’ (Berridge 1988). Nevertheless, it seemed that class was a more prominent concern. There was a demarcation in perceptions between white middle- and white working-class opium consumption. In contrast to the ‘bad habit’ thesis that had justified middle-class opiate use and addiction, working-class opiate addiction was viewed and interpreted as a ‘problem’ and a ‘vice’. Thus blame was placed on availability and the ease with which drugs could be procured for recreational purposes; the solution was focused on the need to curtail supplies. While working-class drug consumption influenced drug prohibition policies, drug use amongst their middle-class counterparts influenced drug treatment policies. To a significant extent, the recreational use of opium by the working-class influenced the passing of the 1868 Pharmacy Act (Berridge and Edwards 1981), which placed restrictions on opiate sales through a pharmacy. On the other hand, the ‘disease’ theory developed by the medical profession in the late 19th century to explain alcoholism was applied principally to explain middle-class addiction to opium and its perception as a problem of habituation. This view called for treatment via maintenance prescribing and gradual withdrawal.

Moving into the early 20th century, the black community continued to remain non-existent in discussions about drugs. However this was to change in the post-war years following the influx of Caribbean immigrants into Britain in the late 1940s and in the 1950s. The black community was gradually becoming deeply intertwined with class in explanations surrounding the use of a ‘new’ type of drug – cannabis. Britain had her first experience of large numbers of people smoking cannabis following post-war black immigration (Plant 1987). Cannabis had already come under legislative controls under the 1925 Dangerous Drugs Act (Dorn et al 1992). The sanctions on cannabis, as with other drugs legislation passed between 1920 and 1964, were meant to meet international demands.

Despite the criminalisation of cannabis, prosecutions for drug offences between 1929 and 1948 mainly involved heroin and cocaine, which may imply that cannabis attracted relatively less attention during this period.