

778th CONFERENCE WILTON PARK
DRUG ABUSE: HOW IT CAN BE REDUCED
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PRESENTATION

Under the title: Drug abuse, how it can be reduced?, a wide range of topics were considered in the Wilton Park Conference, being a diverse conference with multiple actors and experiences from different countries. Attending the Chatham House Rule, the following report will include the topics and conversations held during the three days conference, but it will not attribute any of those statements to the participants. However, it must be said that discussions were not such surprising coming from officials, international agencies, research institutes, or particular governments and countries.

In order to preserve the anonymity, this report does not contain names, but it will make reference to the countries, or the agencies that were represented, although as mentioned before, sometimes people talked on their own behalf. In general, this report tries to make sense of the numerous topics in the conference, but also, trying to present a rich picture of what are the conversations about drugs and drug policies in the perspective of an international system for their regulation.

Drug abuse: how can it be reduced> what policies are working?

In the first presentation the history of drug policy is analysed in the context of other drugs and the context of development issues. The agenda in the drug field has been focused on the very difficult aim of having a 'significant reduction in drug prevalence'. In this presentation, a brief history of the multilateral drug system was presented, although in the total population of the world a 5% of people can be considered as drug users, compared to the 30% of tobacco consumers, still the topic of drugs is seen as a major priority in this international system. Some of the aspects that are major interests in this aim are related to: a. data availability; b. focusing on young people as the most vulnerable and c. to limit the use of narcotic and psychotropic substances to the medical and scientific use.

While still wondering if there is any universal panacea for reducing drug demand and offer, the only alternatives seem to be prevention and treatment, for the former, and eradication policies are implemented without considering the countries of the development countries. Two factors are mentioned here: the structure of population (i.e. young population vs. ageing population) and the organisational context (i.e. urban vs. rural settlements).

A second problem to be considered is the issue of evaluation in relation to three aspects: (1) Input—Output in terms of intervention: Particularly the question about whether an intervention will get those or other results and the logic framework for evaluation: national? Local? Or supranational?. (2) Unintended effects or displacement: In some cases, success in one country might displace the production to other countries. (e.g. China opium during the 50s or the coca production in Peru and Bolivia, displaced to Colombia during the 1990s.). (3) Paradoxical aspects: In general, it seems to be a vicious circle: on one hand it is expected that

reducing the production of drugs will impact the consumer option by increasing the price. But the same price rise is an incentive for drug traffickers to get involved in the business, no matter the risk. In general, it is required more empirical research that goes along changes and dynamism in both production and consumption. Unfortunately, governmental and international reactions to those changes tend to take longer.

Key policy dilemmas in coca and opium reduction strategies

In relation to the paradox of the current drug policy, this presentation is an overview of the situation of drugs regarding how a solution can become a problem. In general, this presentation emphasise the failure of the current drug policies, focused on the supply reduction, which is not an end by itself. In fact enforcement activities are not affecting the market, and although it is forecasted a 'serious impact' in the markets, evaluation based on the available information cannot conduce to fewer drugs available. For instance, the most of programs for eradication and aerial spraying of coca fields in Colombia, has not affected the purity of cocaine in the market, and consumers are not complaining about a rise in the prices. While Afghanistan seems to be struggling against opium, the number of hectares has increased and China looks as a very fruitful market for heroine and cocaine.

In addition to these failures, there are other aspects that must be considered while implementing enforcement activities, which are damaging fundamental human rights. Despite the noble purposes from UN and other agencies about reducing poverty and respecting human rights, some drug control are not compatible with human right standard. In most of the cases, communities are affected by those enforcement activities, in terms of humanitarian disasters when dissembling their livelihood or even being affected by the herbicides of the aerial spraying.

Ironically, the market is shifting from heroin use to other pharmaceutical opioids. There is a strong dynamism between licit and illicit drugs markets, indeed, the expansion of the licit market can overcome the illicit market. Some cases reported in North India show that strong adulterated heroin is being replaced by 'speed' in its injecting way. In all of these examples there is the wrong assumption that reducing supply automatically reduces consumption.

The proposal of this presentation is to take coca as a natural plant from the international treaties. In this way the acknowledgment of its traditional use can be accepted and the conflict around it being minimised. Other option is to have a regulated licit governmental production of those substances, such as India, in the case of opium for pharmaceutical purposes.

Colombia and the Andean Region

This is a picture of the situation in the Andean Region. After 10 years of eradication programs, production displaces as a reaction to harder implementation of eradication programs in some of the countries. The case of Peru shows how a decrease of hectares of coca plantation from 200.000 in 1995 to 35000 in 2000, can not be necessarily considered as a success indicator. The complex narco politics and the control of cocaine market, make that such a decrease resulted in a lucrative price in the market.

In the case of Colombia, the dismembering of the Colombian cartels (i.e. Medellin Cartel and Cali Cartel) did not affect the business, since paramilitary and left wing groups took control of the production and trafficking. At the moment, while negotiating peace with the paramilitars, the issue of legalisation of those lands which were occupied and used for drug trafficking will represent a major money laundering process in the name of peace... on the other hand, the increasing money dedicated to combat left wing guerrillas in the name of the odd relationship between war on drugs and war on terrorism after 9/11 is a major factor in the political instability of the country. Paradoxically, it is said officially that almost 140.000 hectareas have been sprayed with glisofate (best known as Round-up), and approximately there are 150000 hectares of coca cultivated in Colombia, which means that 98% of the cultivated area is being sprayed, but still there is no effect in the price of cocaine in the street market.

Finally, the case of Bolivia shows how despite the Plan Dignity, ironically implemented by General Banzer (who was closely related to drug trafficking) will result in a political struggle that resulted in the resignation of the last president 'Goni'. Cocaleros (coca growers) claim the traditional use of coca and therefore a minor cultivated area (cato de coca) and the possibility of having a cocalero president, if Evo Morales wins the coming elections.

In general, it can be said that the production is moving faster than the eradication. In one hand productivity has increased by a more density in the plantation, there is higher concentration of cocaine in the plants, and even it is said that there are glosofate resistant coca plants!

The proposal of this presentation, backing the last presentation (TNI-Netherlands) is to move coca from Schedule I to Schedule III. The fact of coca remaining illegal is a source of conflict between white and indigenous communities in some countries like Peru and Bolivia. In this way coca can be used in a traditional place and a legal market of coca will restore dignity to indigenous communities.

Reducing supply from producing countries.

Lessons from Afghanistan

In a very official presentation a dramatic picture of the damage that opium has done to Afghan people is offered: not just the physical infrastructure destroyed but the risk of becoming a 'narco state'. It is said that 67% of GPB come from opium cultivation, which at the time support terrorist activities. BUT, since February 2005 more attention is given to this terrible menace, and actually the official assures that there has been 'a significant drop in the opium production in the last few months'.

The strategy is concentrated in eight points:

- Institutions
- Information
- Alternative livelihood
- Interdiction
- Criminal Justice
- Eradication
- Treatment
- Regional cooperation

Under a very specific enforcement approach, there will be a special police force (Afghan special narcotic force) dedicated to eradicate opium poppy flowers, in addition to a 'balanced' information campaign for opium growers to quit this activity, by providing alternative livelihood.

The official emphasised the necessity for donors and the collaboration of western countries for funding this strategy: 'drugs are a threat for the national health and reputation of Afghanistan. . After this speech, a promotional video about the problem of opium is shown.

Afghanistan: Reducing supply for domestic and international use?

This presentation is focused on the macro economic aspects of opium production in Afghanistan; it posits the problem of drug production as a development issue. Some facts are presented:

- Unlike other producer countries in Afghanistan opium production is major part of their economy.
- The size of opium economy is bigger on the supply side than the demand problem.
- These characteristics require a prioritisation of objectives and strategies from the intervention.
- The problem of corruption, which suggests that people in key governmental positions should be part of the interdiction effort.
- The necessity of sending strong signals to the farmers, in order to persuade them to quite the opium cultivation, by providing alternative livelihoods to oppose the short-term benefits of the opium economy.
- The necessity of a realistic view on time and resources.
- The balance strategy (in terms of reduction of production and supply)

Research from the micro level-Afghanistan Taliban Ban

This presentation focuses on the micro level of opium production and particularly on the effects of the taliban ban of opium in 2001-2002. After this fundamentalist ban, the production of opium which in 1998 had reached a top point of almost 130.00 has, abruptly declined to less than 40.00 has in 2001. However, the decrease was temporal, and the following years were recovered to get to the point of almost 140.000 has for 2004. What were the implications of this apparent success in reducing production?

- Food security... although opium was replaced with wheat cultivation, they did not increase other food cultivation. Food was scarce and also there were problems in accessing to water.
- With the taliban ban, there was a massive price increasing. Opium had become a kind of exchanging current, with the ban, those opium debts were converted to money valuable for the increased price of the opium at the time. The result, increasing debt impoverished farmers and lost of properties and assets.
- Opium is an alternative not only for land owners, but as an off farm income. As a consequence of the ban, there were numbers of labourers unemployed. This changed

the socio-economic diversity of the landowners, and just some few winners have capitalised from the opium debt.

- As mentioned before, assets had to be sold as a consequence of debts. Assets are normally ox, land, houses and daughters...which in addition to their traditional disadvantage were traded as part of business and money arrangements
- In addition to the already tyrannical style of the taliban, the situation around opium caused political discontent. This became an issue between tribes and against taliban regime.

Some aspects to be taken into account in a re-established drug policy in Afghanistan:

- The acknowledgement that households are very dependant on opium, as their only source of income.
- The realm of alternative livelihood, related to state building, strategic alternative livelihood, regional planning.
- The necessity of a sustained effort of interdiction, eradication (in the zones where alternative livelihood has been provided), and the action regarding public awareness through central messages and local examples.

Learning from the heroin drought in Australia

This presentation analyses the reaction from the government and agencies regarding the sudden drought of heroin in the Australian market. The causes of that reduction are not very clear, but what can be learnt from this case is how government and agencies can react and take advantage of this situation in terms of treating and attending the most urgent cases. In terms of the governmental approach in drug policy during the last few years can be called a 'whole government approach' in which there is a multiagency approach, open communication at the national and local level, and the balance between enforcement and control.

During the heroin drought, the reaction was to attend people harmed by the reduction of quality in heroin, and also to send them to treatment and other social services such as employment, health, education, social working, etc. In this way, what could have been a major disaster was managed and controlled until certain extent. However, it must be said that the geographical location of Australia, posits very particular conditions, as well, as their own public services system, which cannot be replicated in other parts of the world. On the other hand, there are not enough evidence about the current prevalence of drug use, and if it was a temporal situation that is changing under actual conditions.

Learning from Opium suppression in India and Ritual use of cannabis in India

In this very interesting presentation, the researcher explains the case of opium and cannabis in India, a large and diverse country with multiple languages and cultural differences. Firstly, a distinction between drug use and drug management is proposed. In India, the term drug abuse or drug use as a problematic issue has a recent history because opium and cannabis have been used in a controlled environment linked to tradition and ritualistic use of those substances. With a rural population of almost 77% living in rural areas it is not surprising that cannabis and opium are key substances for a traditional system of medicine.

However, in 1971 when India joined the international conventions, the country was forced to eradicate cultural use in 35 years. In 1985 with the Narcotic Control measures were tightened to suppress opium and cannabis, and the concept of disease was installed, when talking about those substances. Although since 2002 penalties for cannabis possession were formulated (6 months as minimum), but it has been almost impossible to apply them. With this situation, judges and legislators were puzzled and the fact is that it is not possible to eradicate cultural use of those substances.

In the case of cannabis used in religious context there is a controlled way of using the substance and there are strong regulations about it. This is what the presentation emphasises: that there are cultural managed use experiences, therefore a necessity of reconsidering general regulations. However, UN regulation's do not include these possibilities. In those contexts senior people guide the use of cannabis. For example, there are limitations in the age of initiation, and it is very common that people begin to use cannabis in their mid 20s. In some areas in the South it is very common to distribute cannabis in weddings, since it will bring prosperity to the new weds.

Cannabis in its form of *bhang* is related to praise Lord Shiva, and in those temples it is possible to find the beverage containing cannabis flowers. While keeping those traditions and regulating the use by religious or traditional authorities, the consumption acquires a greater dimension than the use itself.

Another example is how cannabis is used by the sadhus, who live in the forest to meditate and concentrate. For them, sensual desires can be controlled and the use of cannabis helps them to meditate and get concentrated with divinity. In those cases, their lifestyle prevents health illness. Nevertheless, cannabis is not restricted to these communities. It is very common to have cannabis after a long working day, normally shared with friends as a social activity. In this context, group use is easier to be controlled, and there is another complete different meaning in the use of cannabis.

In all those examples, the idea of abuse or drug problem is completely out of the picture; instead, notions such as management, social control and meaningful use of cannabis are crucial for this understanding.

Nevertheless, other substances such as heroin are replacing cannabis and opium in the consumption patterns. Unfortunately heroin in India is normally 3/5% pure, which presents serious problems, although it is more profitable for illegal business. One thing to mention is that illegal drug use is not very common in India, is more common in big cities, but it is not an extended problem.

In general, it is interesting to note that those experiences of management of use are related to specific cultural frame of mind. For the west, the focus is on the substance, while for the east, the focus is on the mind of the user.

Changing drug laws: lesson from Russia

The rapid change from the ex-soviet union countries to a new political and economic regime has brought also a lot of changes in illegal drug use. This has created a necessity for reviewing and creating drug related legislation. There has been an increase in the number of users since the 1990s. It is calculated that 3.5 to 7 million people are using illicit drugs in Russia. From

them, 2-3 million are injectable users. In the Russian legislation, possession of any quantity of drug is sentenced by 2-5 years in prison. This has created a huge problem of people with HIV in prison, calculated about 200.000.

In response to that there is treatment, that basically includes detox, and it is popular for parents but in reality there is not enough popularity amongst users to be treated in this way. On the other hand, heroin is the most popular drug in Russia, but there was not an accurate legislation regarding what are the doses of this drug. In general, the legislation estimates that less than 10 doses of any drug is not prosecuted, from 10-15 there can be a fine or imprisonment, and more than 20 doses are cause of prison.

However in the case of heroin it was estimated that 0.1 mg of heroine was 1 dose, therefore 1 mg of heroine was cause of prosecution. Because there were not so much information, drug users were consulted about this, providing important insights about the reality of drug scenario.

In general, there is tension between the Minister of Health and the Minister of Justice about the domain of the drug issue. In the meanwhile disasters can happen, for example, when releasing 32000 inmates with drug problems, the level of over dosages increased rapidly, as well as other related damages. Limitations in street heroin make people shift to penitin a kind of home made heroin, and there is also home made opium. All this cases are compelling to have a public health approach more than a punitive approach.

The dilemmas and tensions are similar to other parts of the world, and also related to the development of drug policies. On one hand there is the necessity for a revision of the criminal code, but in that there is a trend to adopt a repressive approach. On the other hand, the number of heroin users in risk of HIV, in the street or in prison, represents a problem of major attention, which still seems to be neglected by the prohibitionist approach of repression.

Overcoming the challenges transit countries face in reducing supply: Lesson from Jamaica

In addition to the problem of the producer countries, the case of Jamaica illustrates that there are other actors in the drug trafficking chain. Although Jamaica was itself a major producer of marijuana during the 1970s, during the 1990s there has been a shift to cocaine, due to marijuana eradication and other source of supplies.

Due to its geographical location, Jamaica is a privileged place for the transit of different commodities, especially drugs coming from the Andean region through Colombia and the Caribbean. It can be aerial or maritime transit, and both are used by drug traffickers. On the other hand, there are related problems such as weapon smuggling, money laundering by used car dealerships and construction projects.

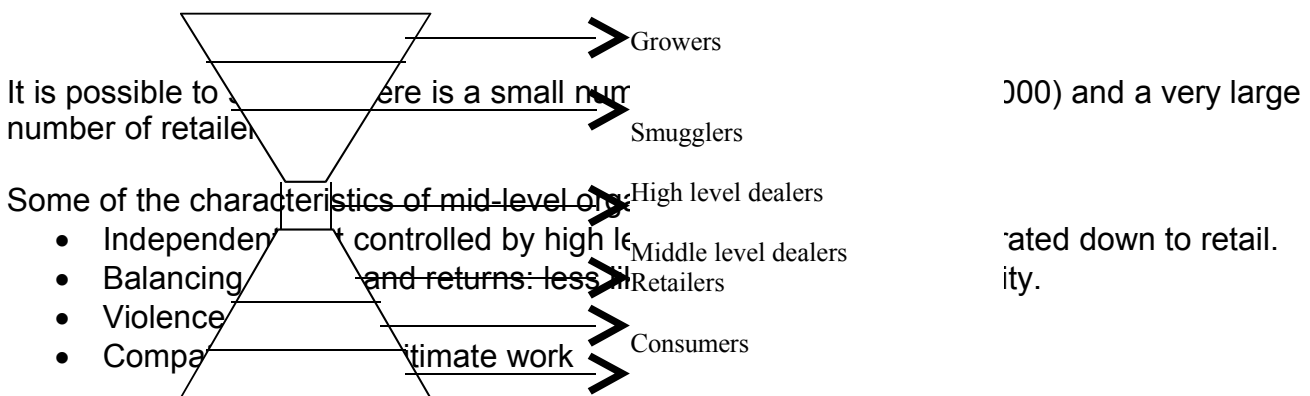
The following examples show how the Jamaican government is committed in the War against Drugs:

- Eradication of marijuana plantation from 991 has in 1995 to 307 has in 2004 (Source Narcotics Office 1997)
- International cooperation with the United Kingdom: Operation Air bridge and Ion scan and EMIT

- Operation Kingfish, in which 7 metric tones of cocaine have been seized, which represents US\$ 3,5 jamaican dollars.
- Domestic legislation against drug trafficking from 1994 (i.e. legal assistance, 1995; money laundering 1996, etc.)
- Jamaica is also signatory of the international conventions (1961 Single convention and 1971 Convention of psychotropic)

Between exporter and retailer: Setting enforcement targets

In this presentation some of the facts related to the enforcement policy and its modest effects in reducing drug availability are presented . From 1980 to 2000 cocaine and heroine prices have decreased, although the number of prisoners have increased during the same period. In general, his proposal is that targets serve national market but it underestimate the action of middle market. As it can be shown, they represent a small but significant part of the production and consumption chain.



The relationship between countries of production, transit and consumption

The question of : ‘Should the consumer countries bother in intervening on the producer and transit countries’ is addressed in this presentation. Arguments in pro and against are presented.

Against intervention, it can be argued, that:

- Efforts must be concentrated in managing demand at home
- There is a small chance to achieve very much if focusing in supply reduction, just the 15% of supply is intercepted.
- Never be able to caught the criminals, they have more money than the agencies, they are fastest, more modern and it is quite expensive.
- It would be better to liberalize the market... (although this option was not contemplated as valid)

But on the other hand, arguments supporting intervention can be presented as follows:

- a. Our people bad habit creates victims in other countries like in Colombia....middle class people should be ashamed as it was proposed by the chief constable of Met Police some months before.

- b. We must keep a certain element of risk to the traffickers... the example of the reduction of almost the 86% of air mules from Jamaica to UK
- c. Even if we stop 15% by engaging with transit countries will have a side effect on those countries (e.g. nation building).

IN short the answer is YES, we should engage with actions in producer/transit countries. Now the question is what can we expect to achieve:

- a. Reduce cultivation, a difference can be made. The case of Colombia with the reduction from 130.000 hectares to 80000 in 2004.
- b. Increase the capacity of those countries to enhance law enforcement and to interdict criminal organisations.
- c. Provide intelligence from consumer countries.

What need to be in place?

- a. Alternative livelihood and enforcement
- b. Regional actions
- c. Engage politically with their governments
- d. International community need to be joined up too.

The EU dimension

7 principles for cooperation :

1. Shared responsibility means that responsibility starts at home. Reducing demand is still a priority.
2. Missed...
3. Understand that drug cultivation has political, social, economical aspects linked with poverty and governance.
4. Transnational nature of the drug problem requires regional cooperation
5. Demand control also is a problem in producer and transit countries.
6. harm reduction is an important component of drug policies
7. Crop eradication must be supported on alternative development programs.

Demand reduction in the United States

This presentation shows the current American approach in demand reduction. People with the disease of addiction must be treated, always that they look for treatment. In general, the emphasis now is on reducing the incentive for using any drugs. In this sense, there is a new focus on the non-dependant users.

On a general basis, drug addiction is an attributable disease of the brain. It is believed that drug use in any part of life is damaging. They distinguish three types of people:

- a. Non users: 'Those who choose *correctly* not to use never, or never again'
- b. Non dependant users: 'sometimes refer as recreational users, we reject the term recreational use'
- c. Drug abusers or dependant: who are offered opportunities to recover.

In particular, the group of non dependant users is a new group in terms of creating policy, since they have not experienced yet the consequences of drug abuse. Regular use has a profound impact in their families, which without outside intervention those problems can be escalated. The purpose of the policy is: (a) stop initiation of drug use by reinforcing the non use; (b) change the risk benefit perception of drug use and (c) providing early treatment.

Sweden

This presentation establishes a relationship between supply reduction and demand reduction as two interdependent issues. The INCB report emphasises the need to create a balance integrate social policy. In the EU the aim of demand reduction on is related to (a) stop use, (b) prevent experimental or occasional use to become regular use and (c) provide treatment. For Sweden, treatment has been a key aspect of their policy. In the case of Sweden, treatment is a key answer to the drug problem.

In general, Sweden presents a relative low lifetime prevalence, of a 7% compared with other European countries; however, this is a significant problem for 'our country'. This mean that 93 of 100 people have never tried drugs, and also, that teenagers grow up in an environment in which there is a negative attitude to illicit drugs among the public. Although it can be said that Sweden is a dry use culture, there is criminalisation of drug use. Criminalisation is not the punitive function but the normative function of the law, but it helps maintaining a non abusing norm in society.

In their strategy they have identified the maintenance and strengthening of non using drugs as the main aspect.

a. Campaign of the many reasons for not doing drugs. In this sense, music festivals, skateboarders and other youth activities are approached with the idea of 'Peace on Earth'. The message is that 'I don't want to take cocaine, not only because it is dangerous, but also because I don't want to contribute to the exploitation of the farmers in Colombia'. So this is the kind of arguments that we are providing.

b. Preventing experimenting occasional use to become regular use. Much more research has been done some years ago about the link between conduct disorders in early years particular increases the risk of subsequent drug use. Adolescences with problems are also more likely to have drugs than adolescent without, and also increase they meet the criteria for mental disorders. Communities suffer of those conduct disorder and mental health disorder associated with alcohol and other drugs. We need drug policy for habitants to be protected from violence and drug dealing.

One example of early intervention is:

- a. Identifying risky behaviour from early ages.
- b. Minor disorders are used as an indictor for major mental illness
- c. There has been provided a small office in police stations, where the police can interrogate young people who are suspected to be in possession. They are motivated and their parents invited to take part of counselling and prevention programs.

Hungary

This presentation introduced the question of what is best practice and how the current approach of prohibition is not necessarily the best thing to do in drug policy. The case of Hungary shows how a punitive system can bring more problems than solutions. The fact that drugs are criminalised makes that hundred of 15-16 years old youngsters are under criminal investigation. Some paradoxes are presented here:

- The paradox that alcohol and tobacco kill more people, but still the first enemy is illegal drugs.
- Lifetime prevalence is a minor issue compared as the overdosing, crime related and the increasing number of non violent offenders in prison.
- The trend in which cannabis users are forced to treatment.
- The current view in which drug users should not be considered as criminals but people who need help.
- The abuses of the instant medical examination practiced in urine samples in open dance events, when the police identify youngsters to be 'high' and practice the test on them.

The problem is that coming from an ex-soviet regime, there is no experience with drugs in the older generation. Drug policy is based on prejudice, fear and morality, with a lack of respect for human rights. The prevalent practice of demand reduction option is responsibility of the police and the home office, both pursuing a law enforcement approach. Why a police in uniform is preferred to an expert trained in the specific field of drug issues.

In the context of development countries, drug abuse is not necessarily related to mental but economic conditions.

Comment: Harm reduction can provide answers to the drug problem. However, in an environment of prohibition, harm reduction are so low covered that it is unable to fulfil its aim.

Reducing demand in developing and transition countries PANEL

Afghanistan

This presentation highlights the main problems related not only with the production of opium, but also the consumption of opium and heroine. First of all, it must be noted the low human development index in Afghanistan, in terms of economic conditions. The underlying factors can be causing drug use in this country. Increased insecurity, instability, poverty and disparities are driving to chronic mental health problem: expressed in anxiety and depression, and therefore, there is an increasing case of self medication with a wide range of psychoactive drugs. When asked why you began to use drugs, the answer normally is peer pressure, coercion or free drug.

There are some aspects to consider:

(1) In Iraq people seeking attention for depression after February 2004 has increased rapidly. It is estimated a 30% of families using opium. Some reasons can be established:

- a. depression
- b. economic factor: debt with opium dealers

- c. the relationship between dealers and users
- d. Historical use of opium

(2) Ironically, the substitute for opium is coming from pharmaceutical drugs that come from other countries. There is an increase in availability of pharmaceutical drugs due to:

- a. lack of medical prescription
- b. global internet sales
- c. Increased interest in pharmaceutical drugs by organised crime
- d. In Afghanistan, Pakistan substances such as pentazocine, valium, ativan, methaqualone, phenobrabitol, dipyson, bupremorphine are available from pharmacies and even retailers in the local bazaar.

(3) The necessity of changing labels

- a. Move away from drug abuser as a bad person or drug addict to a problem drug user.
- b. Decrease stigmatisation
- c. Decrease social exclusion
- d. Retain dignity, humanity and human rights.

(4) Integrate approaches to problem drug use

- a. Integrate abstinence and harm reduction approaches
- b. Harm reduction is much more than strategies with IDU and HIV/AIDS.

IRAN

Once again the problem of drug demand and drug supply is placed in the context of development. This presentation point out some of the issues related:

- a. Poverty
- b. Conflict and crisis
- c. Lack of access to health care and education

This cooperation agency works according to the four pillars of German drug policy i.e

1. Primary prevention
2. Treatment and rehabilitation
3. Enforcement (?not very sure)
4. Harm Reduction

In this sense the development of technical cooperation includes:

- a. Capacity building, b. Strengthen education and health c. self help communities.

Some of the reasons for drug demand reduction within development cooperation can be stated as follows:

- a. Increased prevalence and problematic drug use in development and transit countries
- b. Socioeconomic consequences of drug use
- c. International agreement
- d. Millennium development goals

The challenges are:

- Getting the balance right, following UNGASS meeting 1998.

- Limited resources and technical staff to deal with dynamic drug problems
- Competition with other health and drug control priorities (i.e. HIV, Infection diseases, law enforcement, alternative development)
- Developing gender based approaches

BRAZIL

The case of Brazil illustrates how harm reduction approach can become a national policy in the context of the Single Health System. The particular feature is that drug policy is associated to mental health national policy, following WHO and other countries. Health services are organised in local networks, in defined areas.

Interestingly, the current Brazilian legislation that is strongly criminalizing. Therefore there is this dilemma amongst 'criminalization', 'medicalization' or 'psychiatrisation' of drug use problem. Some changes have been experienced in the legislation: firstly, the increasing pressure for an attenuation of the negative effects from criminalising legislation; the provision of alternatives to incarceration of drug users. However, the Federal Government is still very unclear about those issues, oscillating amongst the criminalisation and public health approach.

ON the other hand, harm reduction tend to focus not only on illicit drugs but also in alcohol. Basically there is a program of syringe exchange, which has contributed to an important reduction of AIDS and Hep C. Harm reduction has a tradition of almost 12 years of development which coincides with the Brazilian psychiatric healthcare reform.

Some of the principles of HR are: the respect of human rights, social participation, abstinence is not a condition for treatment and the cooperation with health systems. In addition, it has been observed that the health policy has the virtue and potentiality to promote a politic occupation of territories in conflict as in the Brazilian slums.

Identifying best practice in Prevention

What can education and prevention deliver? How can success be measured?

Independent NGO

The central argument of this presentation is to take into account young's people perspective in prevention and education. Two questions can be asked; Why do young people take drugs? And How can we influence this behaviour.

Drug use in young people is associated to other contributory factors:

- Chaotic home environment
- Parents users
- Behavioural problems
- Lack of parental guidance
- Schools
- Poor coping skills
- Friendship with deviant peers
- Early age of initiation

- Being labelled as a drug user

In this sense, intervention should target the following aspects:

- Family support
- Parenting
- School
- Poverty
- Discrimination
- Education
- Aspiration
- Positive role models
- Tackling discrimination
- Time out

In terms of evaluation, it is argued that it must be: integral, adaptable plan, focused on process and outcomes, appropriate scale and sharing information. Particularly studies and research about what works in drug prevention are encouraged to be shared and documented.

CONCLUDING SESSION

The unwelcome truths:

- i. Factors that influence young people to use drugs are not easily controllable by government (e.g. poverty, family relations, discrimination)
- ii. The traditional supply production has not fundamentally change the illegal market
- iii. Supply measures have possible negative effects e.g. poor farmers and income.
- iv. In some circumstances the most effective things does not reduce drug use. Reducing harms does not impact reducing the market.

THE MULTIPLE DILEMMAS

(My) Synthesis

Being such a complex issue, the problem of drugs, seem to remain in the relationship between production/trafficking and consumption, and consequently between producer countries and consumer countries. In both cases, it is aimed to reduce demand and offer. However, this economic definition excludes much of the complexity and particularities of countries, situation, type of drugs, realms of the policy making, cultural and socio economical aspects or even the subtle division between legal or illegal substances. A persistent division based on the dichotomy production / consumption, matches with the distinction between developing countries and the developed countries, or the North/South – West/East polarity.

In this context, the problem of drug production, mainly cocaine and heroine, tends to be located in the producer countries, most of them developing countries, and therefore, drug production is linked to the issue of development. However, it can be asked why some western countries are becoming major producers of other illegal drugs such as cannabis and ecstasy, and they are not experiencing development problems, conflict or political instability. It is clear that many of

the taken-for-granted concepts of our current drug policy and discourse must be questioned, as some of the presentations will do.

On the other hand, the problem of drugs cannot be restrained to the natural drugs: cocaine, cannabis or heroine (coming from natural plants) but increasingly the so-called design drugs or pharmaceutical drugs are gaining a big portion of the legal and illegal market. Drug use is dynamic and instable, and therefore there is no way of predicting or proposing long term strategies.

Nevertheless, the '*mantras*' of prohibition and supply and demand reduction are repeated without considering rational evaluations of the consequences of those actions in users and producers, which seem to be weakest actors in the complex chain of money, power, infrastructure, intelligence and corruption, of the drug trafficking business. Some of the experience with eradication in the Andean region has brought more instability to old conflicts, affecting basic human rights and exacerbating the war. In the meanwhile enforcement efforts in Afghanistan have not been able to stop the increasing production linked to a complex socio economic problem, in which other victims are still neglected.

Paradoxically echoes of the Vienna meeting about the discussion about if using or not the term 'harm reduction' as if it were not a proved strategy, but just a word that some people do not like; but in the meanwhile there are still million of vulnerable people in risk of HIV/AIDS or other diseases. The cases of Hungary, Russia, China and other ex-soviet countries represent a time-bomb that can explode in the following years, while politicians and international meetings discuss if it is 'nice' or not to use harm reduction or not.

As expected in a conference of this level, there are many topics covered, nevertheless they correspond to the central argument of producing countries in need of help by developed countries that are also consumer countries. This relationship is changing rapidly in the case of drugs, and it is not very easy to point out who are the producers, who are the consumers in developing or developed countries, or what is in between. In my opinion, there were also missing points in the discussion:

- a. The markets of violence, as a middle level concept which may illustrate why conflict and drug trade are linked in some of the countries.
- b. An analysis of the dynamism and the market of drugs, and changes in the legal and illegal market, including pharmaceutical drugs.
- c. The gender approach. Not a single reference to the difference between men and women, as consumers or part of the production process.
- d. The absence of an articulated systems approach to drug policy issues. In this sense, it is likely that new solutions create new problems.

As presented in this report, different topics were developed, and the reader is able to judge him/herself about the complexity of the issues proposed, some of the main arguments, and the schism created by prohibition that still denies alternatives to be discussed and developed in the drug policy field.

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