

# INTERNATIONAL DRUG POLICY CONSORTIUM

PROMOTING OBJECTIVE AND OPEN DEBATE OF DRUG POLICIES

#### **IDPC POLICY PRINCIPLE NUMBER 2**

### "DRUG POLICY OBJECTIVES SHOULD INCREASINGLY FOCUS ON THE **CONSEQUENCES OF DRUG USE"**

#### INTRODUCTION

The International Drug Policy Consortium (IDPC) is a global network of NGOs and professional networks that specialise in issues related to illegal drug production and use. The Consortium aims to promote objective and open debate on the effectiveness, direction and content of drug policies at national and international level, and supports evidence-based policies that are effective in reducing drug-related harm. It produces occasional briefing papers, disseminates the reports of its member organizations about particular drug-related matters, and offers expert consultancy services to policymakers and officials around the world.

IDPC members have a wide range of experience and expertise in the analysis of drug policies, and have contributed to policy debates at national and international level. Several members have been involved in the creation or evaluation of drug policies and strategies in an official government or academic role. Following a review of currently available evidence, Consortium members have agreed to promote 5 fundamental drug policy principles in our advocacy work with governments and international agencies. These principles are summarised in a short position paper (http://www.idpc.info/docs/IDPC 5 Principles.pdf) that is available on the Consortium website (www.idpc.info).

This paper expands one of these five principles - that governments and international agencies should increasingly be shifting the focus of drug policies and programmes from objectives related to the reduction in the scale of the illegal drug market, to objectives that directly address the harmful consequences of illegal drug use in terms of human health and welfare

#### **BACKGROUND**

Since the beginning of international drug control, the focus of policy objectives and activities has been the scale of the illegal drug market. Successive United Nations agreements, national drug policies, and local actions have concentrated on the need to minimise the level of production of illegal drugs, their distribution to consumer markets, and the number of users. The logic behind this approach has been that the best way to reduce the problems caused by the use of illegal drugs is to minimise the scale of the drug market. Objectives that have been set within these strategies have therefore been broadly of three types:

- Those seeking a reduction in production of drugs or their precursors, for example a reduction in area under cultivation of coca or opium – the key objectives of current international programmes in Afghanistan and Colombia.
- Those seeking a reduction of the flow of illegal drugs across borders, or within countries. These objectives are measured by the UN, and most governments, through the proxy indicator of the amount of drugs seized.
- Those seeking a reduction in the number of citizens using illegal drugs. These objectives are measured through surveys of target populations, that present data on the proportion of respondents who report using particular substances over a variety of time periods.

Notwithstanding the difficulties involved in accurately measuring progress against these objectives, the IDPC believes that an overly rigid focus on these types of drug policy objectives is damaging, in that it underplays the importance of reducing the consequential harms associated with drug use, and can lead to the pursuit of ineffective policies and programmes. The continued emphasis (by policymakers, and media) on what is unhelpfully termed the 'War on Drugs' leads also to a cycle of apparent failure and disillusionment as successive political promises, targets and objectives are not met, and the media and political opponents seize on every rise in production or prevalence as proof of a comprehensive failure in drug policy, when the issue of policy effectiveness in this field is complex and multi-faceted. For example, Report Two of the Beckley Foundation Drug Policy Programme (www.internationaldrugpolicy.net/reports/BeckleyFoundation Report 02.pdf) refers to the plethora of prevalence targets in USA national strategies over the last 25 years, almost all of which have been missed, leading to a widespread disillusion regarding the potential effectiveness of all aspects of that country's drug policy. Another example is the media coverage in the UK following a recent report tracking progress against policy objectives set in 1998. The UK has made good progress in reducing drug related crime, keeping drug related HIV infection at low levels, and in minimising the impact of local drug markets on the quality of life in communities. The overall prevalence of drug use has meanwhile remained stable, against (wildly optimistic) political promises and targets for its reduction. Responding to this review, the media confidently reported the total failure of UK drug policy. A similar process is regularly played out in other countries, and at the United Nations. A much more reasoned, and constructive, dialogue is possible through a more balanced articulation and discussion of policy objectives.

#### **OBJECTIVES DRIVE RESOURCE ALLOCATION**

In addition to the presentational difficulties created by a focus on markets and prevalence, there is the direct impact on resource allocation and programme development. It is quite right that government resources should be directed at achieving stated objectives, so it is important that the setting of these objectives, and the design and implementation of programmes for their achievement, is carefully thought through. All too often in the history of drug policy, however, the instinct to seek a simple reduction in market scale leads inevitably to the focusing of scarce resources on programmes that aim to reduce the supply of illegal drugs, or to dampen demand. In every analysis of government drug policy expenditures, a consistent conclusion is the high proportion of expenditure on programmes that address the scale of the market:

- If reduction in production is the objective, investment in programmes in source countries is the priority. An estimated \$10 billion has been spent over the last 10 years on attempts to reduce coca cultivation in the Andean region, while over the past four years over \$2 billion has been invested in counternarcotics efforts in Afghanistan.
- If reducing the flow of illegal drugs is the objective, interdiction activities of customs and law enforcement agencies are the priority. Levels of government investment in these functions vary widely, but are significant in most developed countries.
- If reduction in the number of users is the objective, programmes of primary prevention and deterrence are the priority. While many countries are recognising the limited impact on prevalence of 'Just Say No' style mass media or educational campaigns, these are still championed in many other countries, and within the UN system. Similarly, while the deterrent impact on overall prevalence of arresting users and applying harsh penalties seems to be marginal at best, many governments are still pursuing these tactics as the focus of demand reduction strategies.

If the focus on programmes that aim to reduce the scale of the market was producing positive achievements, then there may be an argument for continuing that approach – if governments were successfully reducing supply and demand, leading to a much diminished illegal drug market, then (all other things being equal) a reduction in health and social problems should be the result. However, as our understanding of the nature of drug problems, and the impacts of policies, increases, it is clear that this is not the case: The ability of governments and international agencies to stifle the global market in drugs such as cannabis, heroin and cocaine has been limited. Despite localised successes, and the increased concentration of opium production in Afghanistan, and cocaine production in Colombia, the scale of the global trade in these substances increased massively in the second half of the twentieth century, and has remained stable at best over the

last 10 years. At the same time, the supply mechanisms for drugs such as cannabis and amphetamine-type stimulants (ATS) have become significantly more diverse – with a vast number of small scale production and dealing operations, and increasing levels of home production – making them less vulnerable to national or international enforcement efforts. On the few occasions when supply of a particular drug from a particular source has been stopped, suppliers quickly move to another source, or users move to another drug. Measured in terms of price, purity or ease of availability, illegal drugs are now more accessible in most parts of the world than they were 10 years ago, when we set out on the latest global strategy, that promised significant progress in '…eliminating or reducing significantly the illicit cultivation of the coca bush, the cannabis plant and the opium poppy....'.

#### **FOCUSSING ON CONSEQUENCES**

While drug policy has traditionally focussed on the scale of the market, it is reducing the health and social consequences of drug use that most directly impacts on the lives of citizens, and contributes most directly to the fundamental objectives of the international community – the promotion of human health and welfare. There are broadly three types of consequences of illegal drug use that have received attention in this context:

- The direct health consequences of drug use deaths from drug related overdoses or accidents, transmission of infections such as HIV or Hepatitis, increases in mental health problems, and diseases arising from users' poor nutrition or hygiene.
- The crime associated with drug use or drug markets property crimes committed by drug addicts to pay for the purchase of drugs, crimes committed under the influence of drugs, and violence and disorder associated with drug markets. In production and transit countries, this disorder can extend to the widespread institutional corruption and threats to the rule of law and national security.
- The social and relationship consequences of drug use loss of workplace productivity, break up of family life, reductions in educational performance.

While these consequences are often difficult to measure, it is important that they are given greater prominence in drug policy formulation.

As mentioned above, it may be that the most effective way of minimising these harmful consequences is to minimise the overall scale of the illegal drug market. However, there is little evidence that governments and international agencies have been able to undermine the natural operation of the market for these substances. In addition, many governments are achieving positive results with policies and programmes that do not directly aim to reduce the scale of the market, but focus on minimising the harmful consequences. The key objectives of these policies and programmes are the reduction of the consequential harms, rather than the reduction of drug use itself.

Many governments now explicitly recognise in their national and local strategies that a certain level of drug use in their societies is inevitable, and that their prime responsibility is to minimise these harmful consequences. This position has been strengthened by an expanding evidence base demonstrating that properly designed and implemented public education, health promotion, and crime reduction programmes can be effective in mitigating the most negative consequences of drug use. Over the last 10 years in particular, many national drug strategies have increasingly attempted to strike a balance between objectives targeting overall market reduction, and those focussing on harmful consequences. The Australian government's drug strategy, for example, "implements a comprehensive and balanced approach between the reduction of supply, demand and harm associated with the use of drugs across sectors and jurisdictions." In continental Europe, meanwhile, the Czech Republic observes in the foreword to its 2005-2009 drugs strategy document that "like any modern drug policy within the EU, it is based on balanced intervention in reducing demand (prevention, treatment and resocialization), minimizing risks, and suppressing supply (curbing the availability of drugs)." The increasing support for programmes that focus on consequences has, however, led to a growing disconnect between the domestic policies pursued by many governments, and the continued emphasis on supply reduction policies and investment that is promoted through international mechanisms.

Applying a greater focus on consequences would also improve the effectiveness of programmes in source and transit countries. While these countries experience all the problems associated with harmful patterns of drug consumption, they also face more acute challenges that result directly from the existence of a large illicit market. In these countries, the key consequences that need to be tackled can include:

- Economic and social relations reliant on the illegal trade in drugs.
- Environmental degradation associated with drug cultivation and production.
- Extensive presence and influence of criminal organisations, with the associated use of violence and intimidation against ordinary citizens.
- The financing of illegal armed groups with the proceeds of the drugs economy.
- Extensive corruption at all levels of government.
- Limited influence of legitimate government authority and rule of law.

At present, drug policy objectives in these countries focus heavily on reducing the scale of the drug trade, even where programmes designed to achieve these objectives tend to worsen the consequential problems, for example by entrenching the power of criminal organisations, or reducing the support for legitimate government authority. By articulating the objectives in terms of consequences - for example, stemming the flow of drug money to armed groups and corrupt officials, or reducing the power of criminal organisations - policymakers can more clearly assess which set of policies and programmes are most likely to be effective. This approach would also bring drug policies more in line with development and human rights objectives, and be much more likely to demonstrate some positive achievements.

#### A BALANCED SET OF DRUG POLICY OBJECTIVES

In order to achieve an effective allocation of drug policy resources, authorities at local, national and international level need to clearly articulate a set of objectives that strike the right balance between addressing the scale of the market, and addressing its consequences. We propose that the following short list of headline drug policy objectives would achieve this balance:

#### - TO REDUCE THE AVAILABILITY OF ILLEGAL DRUGS.

Rather than focussing on indicators of enforcement operational performance (for example, crops eradicated, drugs seized, users or dealers arrested), the true measure of successful supply reduction lies in the impact on consumer markets. Methodologies exist that allow the tracking of progress against this objective according to price, purity, or the ease with which potential users can gain access to particular drugs. If a drug is harder or more expensive to obtain, this is a probable indicator that supply-side measures are contributing to reducing the market. Simply reporting that cultivation has been reduced, or more drugs seized in transit, or more users arrested, does not give any clear indication as to whether the consumer market is reduced.

## - TO REDUCE THE NUMBER OF YOUNG PEOPLE WHO ARE REGULAR USERS OF ILLEGAL DRUGS.

This is a version of the prevalence indicators that are seen in most existing drug strategies. We include it here as levels of young people's use can be a useful proxy indicator for some of the consequences that are the most difficult to measure (for example, drug use impacts on educational attainment and family relationships), and focussing on regular users avoids the numerically significant, but less policy relevant, group of experimental or occasional users. Further targeting of this objective can be achieved by specifying the most harmful drug types, or sub-groups of young people who are of most concern.

#### - TO REDUCE DRUG RELATED DEATHS.

This is now established as an indicator of drug policy effectiveness in many parts of the world, but rarely receives prominence in resource allocation or public debate. Work is progressing to agree international standards for the definition and measurement of drug related deaths, and researchers are finding that, in many countries, these constitute a significant proportion of all early deaths, in some countries on similar levels to road accident fatalities.

#### - TO REDUCE DRUG RELATED INFECTIONS.

The transmission of HIV and Hepatitis through drug injection is a major public health threat in many parts of the world. This objective is therefore well established in some countries' drug policies, but remains strongly resisted in other countries, and does not feature at all in current United Nations drug policy objectives.

#### - TO REDUCE DRUG RELATED CRIME.

This set of consequences of drug use and markets has been even more overlooked in national and international policymaking. Most governments are now waking up to the close relationship between drug use and property crime, and the links between drug markets and violence and corruption. In source and transit countries, this objective would focus on indicators addressing the power and reach of criminal organisations involved in the drug trade and of illegal armed groups benefitting from it. Methodologies are developing that allow the measurement of trends against the objective of reducing both of these consequences, which have direct and serious impacts on quality of life.

Setting and measuring progress against this set of objectives entails all sorts of methodological and presentational challenges, but they do represent a clear and logical expression of the high level aspirations of a national or international drug policy.

#### A BALANCED APPROACH FOR FUTURE POLICIES

To our knowledge, no current national or international drug strategy has achieved an entirely logical set of outcome objectives along the lines of those described above. Many national strategies, and the vast majority of political statements on drug policy, continue to focus on reductions in supply or demand or, even worse, simply on operational law enforcement indicators. As more comprehensive drug strategies have been developed in recent years, many countries have started to use a mixture of supply, prevalence, and consequence indicators to judge the effectiveness of their policies – the challenge now is to produce a clear 'logical framework' for setting and reviewing high-level objectives in future national and international strategies.

Many national governments are now in the process of evaluating or reviewing drug strategies that were created in the late 1990s or early this century. This process provides an opportunity to create a more logical framework for objective setting and resource allocation, and to achieve a balance between objectives and activities that focus on supply, demand or consequences. The relative priority given to these areas of activity will depend on the nature of the drug problem in any particular country – for example a country with a relatively small and emerging drug problem may focus more on minimising supply and demand than a country with an established drug market and culture, where action against the consequences would appropriately receive more priority. Whatever the national situation, the refinement of drug policy objectives, and the process by which these objectives are turned into actions, is entirely possible given the improvements in evaluation in recent years.

The European Union Drug Strategy faces a review point in 2008. Member States will consider the extent to which the action plan for the first four years of the strategy has met the objectives created for it. This evaluation process should include a rationalisation of the headline objectives in the EU strategy – at the moment, most of the key objectives referred to above are implicit in the text of the EU strategy, (representing an acceptance of the need for balance between market and consequence indicators) but they have yet to be clearly articulated as a set of headline objectives that can easily be understood by analysts and the general public.

The prime need for a more sophisticated objective-setting exercise lies, however, with the review of the United Nations drug policy and programme. While we recognise that the UN does not directly implement most drug policy interventions, and that exhortations in 1998 for the creation of a drug free world cannot be treated as a functional objective, the headline objectives agreed previously at the UN have been overly simplistic. Before 1998, objectives focussed almost entirely on supply reduction process measures, with reduction in cultivation, and levels of seizures and arrests dominating. At the 1998 General Assembly

Special Session on drugs, the international community succeeded in introducing the concept of a periodic evaluation of progress, and broadening the focus of objectives to include the reduction of demand. However, the reduction of demand has been framed simply in terms of the total number of people using drugs, with no reference to the potential harmful consequences of that use, or from the operation of drug markets or, indeed, of the unintended consequences of government action. The challenge for the international community at the upcoming review is therefore to incorporate objectives relating to crime and health consequences into a balanced set of objectives that helps member states to prioritise the set of activities most appropriate to their situation, and the UN system to work more coherently behind a unified vision.

The alternatives are clear – policymakers can continue to focus drug strategy objectives and resources on the ultimately unwinnable battle to significantly reduce the overall national or global scale of drug markets, or produce a more balanced and achievable set of objectives that clearly links drug policy to the fundamental objectives of the UN system as stated in the UN Charter and the Millennium Development Goals.

