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HOW CAN INTERNATIONAL DRUGS POLICIES SUCCEED?
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International drugs policies: future prospects and possibilities

1. The 10-year review period proposed at the United Nations Special Session on Drugs (UNGASS) in June 1998 reaches its conclusion in 2008. The Commission on Narcotic Drugs (CND) began formal discussion of the options for the review procedure at the start of its 49th session in 2006. However, progress so far has been limited due to a lack of consensus on the substantive components of the review: should it, for example, focus solely on the measures contained in the 1998 UNGASS Political Declaration, as favoured by a number of EU member states? As a result of political dialogue around the CND process, some of it in the margins of the core session, three main options have emerged. First, adhere to the 1998 timetable and ensure that the review is completed in 2008, recognising that variations in data collection methods would most likely result in an incomplete dataset at this time. Second, undertake the review in 2009 to ensure that a full ten-year cycle of data is available. A third and final option envisages the presentation of interim analysis to the 51st session of CND in 2008 followed by a period of further analysis to assess options and add new data, culminating in an intergovernmental ministerial conference in 2009 to finalise a course of action. Whilst the latter option has been gaining support within UN circles no formal decision

has been taken and the matter will be addressed during the 50th session of CND commencing in March 2007.

2. In just over eight and a half years since UNGASS 1998 it is clearly possible to discern the emergence of more and more national drug control strategies that endorse a comprehensive multidisciplinary approach to drug problems. To suggest that UNGASS has been the principal catalyst for this would, however, be an overstatement. The effect of UNGASS, in common with other high-profile UN conferences on other specific issues (notably on HIV/AIDS), considerably raised both the issue profile and the pressure for political action around the time it was held. The challenge of maintaining political commitment without such events is considerable, though the huge cost of staging conferences has now become prohibitive. With that in mind and the consequent realistic assessment that the UNGASS review process outcome will be addressed via ministerial dialogue and not a follow-up UN special session, there are a number of factors that will determine the likely outcome. First, avoidance of repetition in light of the fact that many programme options already exist. Second, the need to avoid the tendency to merely renegotiate existing texts. Third, new thinking is required to stimulate responsibility for individual actions by certain countries and also regions where specific problems can be identified. Fourth, a genuinely new language is needed to reinvigorate action. Fifth, the role of the UN Office on Drugs and Crime (UNODC) needs to be reassessed in terms of its strengths as a consultative body and knowledge repository. However, unless more non-earmarked funds are forthcoming these strengths may be severely constrained. Governance issues must be seen as an integral part of the UNGASS review process rather than as unrelated matters. Improvements to governance arrangements within the UN drug control system and a more flexible basis for financing projects on a multilateral basis are the dynamic elements in any process to improve the effectiveness of stated UN aims regarding drugs.

3. The lack of discussion on Afghanistan under the auspices of the CND is a cause for concern, given the scale of present counter-drug actions in that country. However the dual objective of counter-terrorism alongside counter-drug activity is a political choice that made discussion of the drugs issue in isolation somewhat complex and strictly outside the remit of CND.

4. There are broader questions about the overall efficacy of current international regulatory arrangements. The establishment of norms is a clear outcome from UN activities, but the implementation process and consequent programmes is far less consistent. A review of the role of the UNODC as a centre of excellence could be considered on the presumption that implementing the drug conventions (1961, 1971 and 1988) is its primary task.

5. The UNGASS review process has had its shortcomings but it is necessary to have realistic expectations and to recognise the limitations. As a corollary, some aspects of the review needed to be initiated and achieved outside the UN. There is a need to explore further the practical implications and to consider examples of the type of measures involved.

International drugs policies: the UK perspective

6. The UK government regards international drugs policies as an integral part of its broader foreign policy, encompassing good governance and relations between sovereign governments. A tripartite strategy is applied at the international level combining, first, diplomatic and political engagement; second, capacity building actions; and, third, operational measures. Whilst the latter have the primary objective of disrupting the drug supply chain to the UK, the range of actions involved is tailored to the specific circumstances. Hence approaches vary across producer and transit countries, drawing upon a range of measures such as alternative livelihoods, demand reduction and strengthening judicial and law enforcement capacity. At present, Afghanistan is the focal point of UK activity, in support of the Government of Afghanistan's National Drug Control Strategy (NDCS). With opium generating more than 30 per cent of the Gross Domestic Product of Afghanistan it is clearly a very significant factor, hampering the reconstruction efforts which are widely supported by the international community. Joined up multilateral delivery is the preferred approach of the UK government, exemplified by recent border management projects in Iran (in conjunction with UNODC) and the Central Asian Republics, especially Tajikistan (in conjunction with the European Union, the US and the Organisation for Security and Co-operation in Europe [OSCE]). The UK is aware that success in countering drug activity in one place can lead to displacement, sometimes creating even greater challenges.

For example, effective interruption by the Jamaican government of cocaine flows through its territory, leading to a significant reduction in the last few years, has prompted criminal diversification within Jamaica itself as well as increased trafficking via Trinidad and Venezuela, with drugs increasingly routed via West Africa. The UK government recognises that drugs seizures alone are insufficient in deterring traffickers and believes that criminal profits from drugs must be more aggressively targeted. Current measures of success, such as seizure data, are at best proxy indicators. Hence a desirable and valuable outcome from the UNGASS review would be real innovation in measurement criteria and tools used to define success, in line with the aims of the conventions.

7. Caribbean countries are faced by severe resource pressures and the issue of corruption within law enforcement is an ever-present challenge. Certain countries, such as Jamaica, Trinidad and Tobago, and St. Lucia, have resorted to innovative bilateral measures such as direct recruitment of external expertise in the form of UK/international law enforcement officers. Whilst there are tentative indications that this strategy has been effective it may not be sustainable in the long term. A multilateral, externally-funded programme at the regional level, drawing in appropriate expertise in full-time positions would be welcomed by Caribbean states. This might usefully provide the precursor for a Caribbean-wide police service, or a Caribbean Europol, simultaneously fostering the development of indigenous capacity and raising standards to counter corruption. Canada currently supports a law enforcement seminar programme in the Caribbean under the auspices of the Inter-American Drug Abuse Control Commission (CICAD), although its remit is necessarily restricted to a much more limited – though welcome – exchange of ideas and methods.

8. Efforts to control precursor chemicals often highlight the role played by countries which are neither direct drug producers nor on major transit routes. More attention and concerted international action are needed to address this matter if it is not to undermine wider initiatives.

Beyond UNGASS: what are the next steps?

9. The UNGASS review process offers a pause for reflection. The deeply politicised nature of the international drug control system colours the sense of what can be done

with the tools that are available. There is no shortage of tools and, in many cases, considerable overlap between them. However, their effectiveness is often hampered by unpredictable financing arrangements and political interference in that process. Nonetheless, the three UN drugs conventions stand as a remarkable diplomatic achievement and a clear statement of common interest. There are, however, growing signs of ambiguity in some parts of the world in terms of the enthusiasm with which drug prohibition is implemented. In Europe, whilst there is neither a lack of effort nor ambiguity towards drug abuse, a degree of scepticism exists about the effectiveness of policies that rely on interdiction, enforcement and incarceration rather than prevention and treatment. The role of government as moral arbiter highlights a tension between individual choice and the pursuit of drug goals in the context of criminal justice. Independent monitoring of how best to cope with deeper social changes and their impact on the drug control regime offers a valid method to articulate the effect of ideological views that shape different governmental approaches.

10. The hallmark of international drug policy deliberations, including the UNGASS review, is conservatism whenever change is discussed, allied to a disproportionate influence exerted by some member states. This should not detract from the objective observation that each contributor to the process is acting on the basis of an obligation to act within their own frame of responsibility. Looking beyond UNGASS, member states must reflect that there are two critical institutions in a position to shape change and define the next steps, but it is member states and Non-Governmental Organisations (NGOs) that have the capacity to stimulate discussion of the options. The first of the key institutions, UNODC, has a difficult task made near impossible by the inextricable ties between funding choices and the preferences of member states for the vast majority of its work. The Vienna NGO Committee favours a more strategic role for UNODC whereby it provides leadership but on the strict understanding that policy decisions are for member states alone. New mechanisms to introduce transparency and multilateral vision into UNODC would be welcomed, in turn helping to redefine CND and create a shift away from proscriptive policy decisions. Second, the CND itself is hampered by a rapid turnover of delegates, resulting in a rather narrowly conceived and resolution-based mode of operation. However, with the mechanisms in place to link CND to civil society via the NGO forum, there is an opportunity to move beyond the traditional sense of first loyalty to government that is an inherent facet of UN working.

Tentative signs of greater engagement with NGOs show that there is an opportunity to enhance this process still further and generate a more widely informed basis for strategic thinking. More generally, looking beyond the UNGASS review it will be important to ask if it has examined the three conventions and asked some searching questions, notably: are the conventions meeting their objectives? What unintended consequences have arisen? How does implementation affect their efficacy? Why are some activities defined as non-discretionary and others as discretionary? If reflection on these points does not emerge then there is a risk that the post-UNGASS trajectory will inexorably follow the same template as before.

11. The international drug policy arena has profound impact on national policies hence the UNGASS review affords an opportunity to adopt a realism that focuses on what has not succeeded in specific national contexts. This opens up questions such as why is perceived availability of drugs higher in one country than another? Which factors determine this perception and what are the implications for policy? Engaging civil society in the process of deciding on next steps is a critical component of any evaluation.

How should success be defined?

12. Internal evaluation is routinely used within the UN system but in the drugs policy area it has had a greater impact on programme and project management than on policy development. Senior management can all too easily adopt a ritualistic and superficial approach to discussion of the findings that emerge, and consequently recommendations from objective, evidence-based evaluation are – at best – implemented only at programme level. Governing bodies too are afflicted by a tendency to examine recommendations with an interested air but coupled with a deference and faith in management to implement recommendations. To address this deficiency, structures and systems are needed to ensure that governing bodies require management to report back on implementation of recommendations. In addition, governing bodies (with CND a prime example) need formally to require direct input from evaluation units on how evidence from evaluation has been used in policy formulation. Donors also have an important role to play and can and should also demand from agencies such as UNODC that evaluation is given greater prominence in determining policy.

A legacy of failure to act on several previous evaluation recommendations calling for policy shifts represents a powerful indication that open and forceful action will be needed to ensure that evaluation is used to its full potential in future.

13. Portugal provides an example of how evaluation has been made an intrinsic component of public policy development based on the experience of developing its 1999-2004 National Drugs Strategy and to assess the success – or otherwise – of follow-up plans. The main institutional innovation used to develop the evidence base for National Drugs Strategy decision makers, lay in the formation of a multi-disciplinary group chaired by an independent expert. Furthermore, the expert was deliberately chosen from a field outside of drug policy to maximise objectivity. In reviewing the operation of the 1999-2004 Strategy a critical aspect of judging its success lay in clear drafting of terms of reference for external evaluators, under the supervision of a working group supervised by the National Coordinator. After a six-month process of internal and external evaluation the National Coordinator and the Minister of Health presented results in public session. This process had limited data for some aspects but the wide engagement of professionals, drug user groups (via a survey), NGOs and the general public was viewed as positive. Specific recommendations then shaped the subsequent National Plan 2005-12 and National Action Plan 2005-2008 (each designed to align with EU drug policy cycles). The learning from the 2004 evaluation exercise had a direct influence on the National Action Plan 2005-2008 leading to much fewer and more pragmatic objectives (reduced from 200 in 2001 to 60 in 2005). Whilst the task unquestionably created significant time demands on many participants, it won political approval – crucial for its overall success – and a commitment to transparency by ensuring that all evaluation material is officially published.

14. Experience from the World Bank, where the submission of evaluation reports direct to the governing body is favoured, highlights that earmarked funding consistently gives rise to political difficulties that preclude critical commentary. More generally, it is observed that, whilst greater transparency has emerged in terms of evaluation, this has raised the political stakes to the extent that an inverse reaction has begun to occur, with evaluation becoming less public. This should be resisted, and the role of the media in drawing attention to policy actions is critical.

Issues for source and transit countries: Afghanistan

15. The government of Afghanistan faces a well documented challenge in addressing problems linked to opium. Opium poppy cultivation increased by 59 per cent in 2006, undermining the ability of the authorities to govern, establish the rule of law, and develop the economy. As well as fuelling corruption and criminality the situation is also stimulating the conditions for a growth in drug addiction amongst a new generation. Implementation plans across seven pillars of the National Drug Control Strategy (NDCS) have been approved at Presidential level and will shape the work of the Ministry of Counter Narcotics for the next five years. In some provinces there has been an improvement in the security situation and positive developments in terms of governance and development and stabilised, or in some cases reduced, poppy cultivation has been observed. These developments contrast strongly with the less stable provinces, highlighting the need to promote improved provincial capacities. The NDCS cannot succeed if it is purely driven from the capital. It is vital to mobilise the support of local officials, elders, mullahs, police chiefs, and others with local community influence to ensure long term success. Recognition of the cross-cutting nature of drug policies has also prompted the engagement of a broad range of government ministries; for instance, the Ministry of Women's Affairs is leading a drug awareness programme active in five provinces. The government of Afghanistan cannot succeed without the support of the international community but the extent of the problem – in the President's own publicly expressed view – is such that a sustainable elimination strategy (the official goal) will be at least ten years in coming to fruition.

16. The use of aerial spraying to eradicate poppy crops is currently in abeyance until at least 2008 following a Presidential decision, but manual crop eradication will be used in some circumstances in the meantime. There are concerns as to the potential long-term use of chemical eradication both in practical terms and from a public health and environmental perspective.

17. Recent data show how limited overall progress has been, leading to some scepticism as to how effective the existing strategy (broadly in place since 2004) has been to date. More specifically, the failure to identify cogent reasons for a lack of progress is seen as a major concern.

This raises the question whether a critical point for change could be identified in the light of the various factors, but consensus on this point is not forthcoming.

18. The government of Afghanistan believes that cooperation with neighbouring countries that form key transit routes is currently insufficient, and that this is both regrettable and a highly important factor that needs to be addressed positively.

The impact of international drugs policies on the streets

19. Placing a financial figure on the costs associated with drug problems in the UK provides at best only a rudimentary estimate of the real impact, which encompasses many intangible social costs. Nonetheless, a figure of around £15 billion per annum has been imputed, as well as a notional figure for the value of the turnover of the illegal drugs industry in the UK of around £6 billion per annum. The magnitude of these figures reflect significant shifts in the nature of drug trafficking groups in the past decade or so, which have become smaller and more willing to cooperate across borders and outside traditional preferences for close ethnic membership. The decision to create the UK Serious Organised Crime Agency (SOCA), operational since 2006, in part reflects a belief in the imperative to tackle the supply of drugs, but to do so in a more rigorous and innovative manner. SOCA seeks to develop a more sophisticated understanding of the dynamics of the international drug trade and at the same time cultivate and expand partnerships, embracing non-traditional partners in the process. Developing global and regional standards is regarded as a critical factor in improving the impact of supply side policies, particularly in terms of common criminal intelligence models and in the task of creating minimum anti-corruption standards, with the latter viewed by SOCA as a critical component. The use of peer review to raise standards and identify weak points that are exploited by criminals is also a technique for which extended use is advocated.

20. In the Andean region government policies operate in a context where around 50 per cent of citizens live at or below the poverty line. The presence in several countries (e.g. Colombia) of prominent groups willing to use violence to further their ends has exposed a number of contradictions between the pursuit of objectives relating to counter-drug and counter-terrorism policy actions. As a result of these joint imperatives – prompted and favoured by outside pressures – reform of the legal environment

relating to drugs has been given a low priority. A lack of political will exists to tackle the deeper problems underlying drug production, especially extended social marginality, deep poverty and a lack of job opportunities. International policies on drugs are inflexible in the sense that they do not allow for more radical approaches to be applied in specific national circumstances, such as those of the Andean countries. It can be argued that the prevailing international orthodoxy, that is, calls for a more security-based approach within national boundaries, merely fosters more repressive, legal and enforcement-led strategies that are disconnected from the fundamental causes underpinning the place of drugs in contemporary Andean societies. To overcome this there is a need to reconfigure thinking about the impact of international drug policies, and recognise that they impinge upon the human rights of citizens in countries which are the focal point for international pressure and calls for action against drug production and trafficking. Unless greater freedom is permitted for Andean countries to follow more radical policy approaches, particularly in relation to criminal justice, the cycle shows no sign of being broken. The current trend toward increased use of imprisonment for drugs offences in Andean countries does not offer a solution to wider problems related to cultivation, consumption and delinquency in these societies.

21. When assessing the environmental costs of drug production in the Andean region the use of marginal – and often secluded – land for drug cultivation and the consequent destruction of natural habitat must also be included. Equally, this must be set against numerous other causes of environmental degradation in the region. Proper evaluation of crop destruction using spraying is needed and this must recognise its long-term environmental impact and quantify these effects. It should also ask the most pertinent question of all: what difference has it made?

22. One of the main challenges for law enforcement activity concerning drugs is the lack of common standards and limited jurisdictional access in certain regions. Enhancing cooperation in these areas, including facilitating cross-border investigation teams, shared databases and more use of peer review are all examples of how approaches can be made more effective, providing there is political support for them.

23. Whilst figures imputing the costs of drug use in a significant drug consumer society such as the UK are available, there is a need for these to be set against the cost of alternative policies in order to stimulate new policy thinking. In Andean producer countries it is critical that coca growers (*cocaleros*) are further drawn into political participation and do not feel marginalised, if the causal factors underlying production are to be addressed.

National strategies: does the punishment fit the crime?

24. Thailand has long faced problems related to drugs, notably heroin trafficking from the Golden Triangle, but in more recent times methamphetamine has created significant problems related to its use and trafficking. In 2002 a record number of almost 96 million methamphetamine tablets were seized in the country. The rising incidence of methamphetamine use was the primary reason behind a reconstituted national drugs strategy introduced in February 2003. The first phase (1 February – 30 April 2003) saw an intensive effort to target drug supply, achieving measurable reductions in drug availability and demand for drugs according to government data. A further three phases of strategy implementation have been designated, each with a different emphasis. Phase 2 (1 March – 30 September 2006) continues to target traffickers, especially the largest groups, alongside measures targeted at treatment and rehabilitation of those with addiction problems. Phase 3 (1 October 2006 – 30 September 2007) entails the implementation of a nationwide information network to monitor the ongoing scale of the problem, as well as building capacity in rural communities in border areas. Phase 4 (1 October 2007 – 30 September 2008) marks the culmination of the overall strategy, which aims to make Thailand free of illicit drug production by 2008. Thailand has some of the strictest drug laws in the world, and, controversially, applies the death penalty for certain drug-related offences, including production and trafficking. What are the lessons from Thailand's experience in implementing its new strategy since 2003? Targets are strictly monitored, and ministers have the power to call managers for interview when they are not met. Finally, the media has strongly influenced the National Drugs Strategy to focus on 'kingpins', and this has contributed to a series of failures in implementation.

25. In the United States there are wide variations in the manner of supervision applied to those convicted of drug-related offences.

Academic studies have been undertaken of two innovative US programmes which aim to minimise the circumstances in which non-violent offenders are incarcerated. The first, *Proposition 36 (Substance Abuse and Crime Prevention Act – California)*, is targeted at the approximately 70,000 individuals sentenced for drug offences in the state each year. Analysis in April 2006 indicated positive results, in that those on the programme ensured an annual saving estimated at around US\$800 million (US\$300 million in reduced prison costs). Despite these findings the policy was discontinued following a decision by the state Governor in January 2007. The programme was hampered by insufficient resources within the state probation service, thereby limiting supervision, and around one third of those on the programme failed to comply with the terms of their treatment. The use of the sanction of short (2-3 days) jail stays for non-compliance was built in so as to minimise the impact on family relationships and preserve employment, although some working in the treatment field were against this measure and it was not applied. The second programme, the *Hope Probation Project*, based in Hawaii, did utilise this strategy and results showed a 90 per cent reduction in jail stays, deemed to provide strong support for the idea that limited but credible sanctions offer a very effective device to ensure compliance.

26. Since the implementation of *Proposition 36* California crime trends have levelled out, hence refuting the suggestion from some quarters that it would lead to an increase in crime.

The role of the media

27. In Germany drug policy is no longer a fashionable topic in the media and in politics more generally. There is a parallel with the emergence of HIV/AIDS in Western hemisphere countries in the 1990s, in that coverage of the issue gradually shifted from a concern with morality towards that of preserving public health. The public acceptance of medically supervised injection facilities for intravenous drug users is cited as an example of the way in which the debate has moved to a point whereby media discussion of these issues is effectively over. However, there is the possibility of a new shift in the media debate, to examine the consequences of significant demand for drugs in the Western hemisphere and how the costs of this phenomenon are spread across the globe.

***Khat*: a case study**

28. There are useful findings from field studies into the production, distribution and consumption of *khat* in East Africa and across the Somali diaspora more widely. *Khat* is grown in the so-called 'khat belt' encompassing Yemen, Ethiopia and parts of Kenya. Chewing *khat* has a stimulant effect on the central nervous system, prompting a ban on its sale and use in the United States, Canada and Sweden, for example. In contrast, *khat* is legal in the UK; a position upheld following a review undertaken by the Advisory Council on the Misuse of Drugs (ACMD) in 2005. The ACMD considered a range of factors in reaching its decision, concluding that evidence on the health and psychiatric effects of the drug was limited and that banning the substance without addressing demand factors may cause new problems to arise. In the UK, local factors such as relations between police and the Somali community were also taken into account, as well as the fact that many users appeared to be older and not UK-born, suggesting that a cultural change across generations may be occurring. In East Africa the *khat* economy has a number of features that signify its importance. For example, *khat* is the second largest cash crop behind coffee in Ethiopia. *Khat* prices are less volatile; it is produced by smallholders often on land that is marginal for cultivation; and it has a related packaging industry. These factors make the production and distribution of *khat* an important means of sustaining employment in the region. The international community is therefore faced with choices, with regulation a significant option in this case.

HIV/AIDS in the Context of Harm Reduction

29. It is argued that the automatic association of harm reduction and drug legalisation is an incorrect and unhelpful one. Outside Africa, evidence indicates that 30 per cent of new HIV infections are due to the use of dirty needles, with Eastern Europe showing the highest rate of growth in this respect. Whilst evidence points to the effectiveness of harm reduction measures such as needle exchange and substitution therapy in reducing infections, the politicised nature of the drugs debate has ensured that the actions tend to be narrowly conceived and described as a response to HIV/AIDS rather than a response to drugs. The emergence of a self-help community of HIV-positive individuals implementing pragmatic measures reflects a reluctance to address a broader agenda

whereby the wider needs of drug users in health and social terms are given specific attention. Barriers to reconstituting policy appear to be strongest in Eastern Europe, Central Asia and the Middle East.

Tackling trafficking: disrupting the flow or diverting the problem?

30. In Ghana in 2006 a series of incidents caused a major reassessment of the impact of drugs on the country and the public policy response required. In 2006, the seizure of two large shipments of cocaine (totalling over 1,500 kilos) on Ghanaian soil, plus the reported loss of another shipment of around 2,300 kilos from a merchant vessel bound for the country, highlighted that Ghana had become a significant drug transit country. Prior to 2006, perceptions of the scale of drug problems in the country were restricted by a poor flow of information from national criminal justice and law enforcement bodies, leading to a prevailing opinion that Ghana's drug problems were much less significant than in nearby Nigeria. In fact, arrests and prosecutions of drug traffickers had been considerable in the 2002-2006 period and drug use was showing an increased trend. It was known that Ghana had a drug problem but the extent of that problem was uncertain. However, the events of 2006 prompted significant debate and the subsequent adoption of a new strategic approach. The approach cohered around new laws to ensure that bail would not be granted for anyone suspected of drugs offences. This was coupled with a commitment to a retrospective review of drug cases. Measures aimed at ensuring secure destruction of confiscated drugs and better anti-money laundering systems were also put in place. An ongoing re-organisation of the national Narcotic Control Board (NCB), established in 1990, has also been implemented.

31. The new strategy has brought about a number of positive outcomes. Law enforcement cooperation and intelligence sharing with other countries has improved, as has local intelligence. The more stringent legal framework has made law enforcement more effective. The impact on Ghana as a transit country is multifaceted, but four factors stand out. First, there is a correlation between increased transit of drugs and rising drug consumption in Ghana. Second, other forms of organised crime have increased at the same time. Third, the humanitarian effect on Ghana as crime and negative public health consequences have arisen. Fourth, the damage created abroad to the image of Ghana as a safe and stable society for foreign investors.

The example of Ghana highlights some important evidence concerning the effect of successful disruption activities. There is evidence that street prices for drugs have risen, and that traffickers are shifting their activities to other neighbouring countries. In spite of the new strategy Ghana has limited resources to support it, and international support both in terms of financial and technical assistance and increased intelligence sharing is needed to enhance the effectiveness of the country's counter-drugs policy. To date, only limited conclusions can be drawn as to whether the renewed vigour in tackling drug problems in Ghana has led to their disruption or to diversion. Empirical evidence to support any conclusions remains limited.

32. In Ghana treatment meted out to drug couriers reveals that, in this specific social and cultural setting, couriers are generally given an unsympathetic reaction by the media, fuelling a policy view premised on deterrence. Furthermore there is limited knowledge about inter-ethnic ties between organised crime groups operating in Ghana, although the presence of nationals from several Latin American countries was now scrutinised more closely than before. Cross-border law enforcement cooperation with key partners, notably Nigeria, remained limited.

33. There is some scepticism, reflected by a lack of evidence, that intervention in drug producer and transit countries leads to market disruption in major consuming countries. However, this scepticism presupposes that intervention should be regarded from the perspective of the impact on drug consumers, when an alternative perspective could be adopted ie. the impact on countries that are the recipients of intervention. Colombia has received significant US funding to combat drugs, averaging around US\$1 billion to US\$1.5 billion per annum. This should be seen in the context of total current US public expenditure on drug policy of around US\$35-40 billion per annum. The implementation of Plan Colombia in 2000 embodied two US goals: reducing the US cocaine problem and restoring full democracy in Colombia. Theory has long held that effective intervention would raise consumer prices by restricting supply. However, there is no evidence in the US that cocaine prices have risen post-2000. This period has also seen a strengthening of the link between guerrilla and paramilitary organisations and the drugs trade in Colombia, especially in terms of growing coca. This has provided a basis for an increased merging of what were previously separate mandates, addressing issues related to drugs and to Colombia's civil conflict.

Crop eradication has become a centrepiece of the strategy, with direct implications for the displacement of farmers. The evidence on how external intervention has helped develop Colombian society is inconclusive. Overall, there is a case to ensure that the frame of evaluation should measure intervention in terms of success in relation to development assistance in producer countries rather than in terms of changes to the situation in consumer countries. Analysis should ask what degree of permanent change the policy creates in a producer country.

34. The market system can be seen as the location of the intractability of drugs problems. Measures targeting drug consumers/users had some chance of success, whereas increased intervention may have had the unintended consequence of strengthening the resilience of drug markets by forcing those involved to be more efficient and innovative. The so-called medicalisation model, offered the chance to achieve micro-level reductions in terms of drug problems, albeit not a macro-level transformation. It is also argued that real change can only stem from a reduction in drug demand, in both established and growing drug consumer markets.

Setting future strategies

35. International drug policy has acquired a monolithic quality: it is now presented as the means to tackle a problem of global proportions. There are strong arguments for a more flexible approach that differentiates explicitly between countries in vastly different circumstances, moving away from the idea of a homogenous global policy. This would require the acceptance of different, tailored policy measures in order to meet the needs and concerns of different countries. There is broad support for better-funded and targeted assistance to transit countries and regions. Equally it is accepted that drug policy cannot be divorced from other policy domains, which have a direct bearing on poverty, poor governance and weak institutions, and lack of security, especially in producer and transit countries. The task of this wider development agenda is beyond the scope of the narrowly focused international drug policy institutions, which must be better integrated with regional and multilateral frameworks that exist to address development and ensure better coordination if real progress is to be achieved. The UNAIDS model is a positive example of coordination.

36. The definition of success is contentious, although the 1998 UNGASS objectives can, and should, provide a workable basis for a measurement standard. The reduction of drug use is a laudable objective but some favour a shift to a more accommodating, tolerant stance on drug use. The current drug control framework is largely oriented toward law enforcement and there is pressure to force compliance at a national level. In spite of this, the value of the conventions is broadly recognised, with their implementation and the institutions that facilitate them, warranting specific attention. This should not, however, rule out an evaluation of the efficacy of the conventions, based on objective evidence on different types of intervention. Serious consideration should be given to the reconstitution of the current drug policy framework on a public health model.

37. The UN international drug policy institutions – the International Narcotics Control Board (INCB), UNODC and CND – are fundamentally embedded in current policy preferences but there are options to foster change. The INCB can be seen as having a negative role based on admonition. A move to a more supportive and objective stance would be preferable. There is some support for the notion of reconstituting the role of the UNODC as a centre of excellence. Further discussion is needed on the precise form this should take. The current UNODC mandate can be characterised as an unusual and, in some ways, a daunting one. The CND needs member states to play a more active role if it is to be invigorated, and the impact of national veto should be critically examined, alongside consideration of a shift to majority voting.

38 Finally, there is the issue of the public saliency of drug control. There is a need for greater public debate to raise the pressure on politicians, in part to overcome the sense that, outside the policy community, the profile of the drugs issue has diminished.

39. As of 2007, the challenges linked to drugs are well defined for governments, for societies, and for individuals. These problems are distributed differently across the world and hence any solutions require inherent flexibility to be effective. The current state of international drugs policy has a number of salient features. First, debate is politicised and vested interests are deeply entrenched. The UNGASS review process is currently the subject of bureaucratic debate as to the precise form it should take. Second, criticisms of the UNODC appear to stem from a degree of uncertainty as to its

precise role. Earmarked funding for the majority of its activities places a significant limitation on the ability of UNODC to undertake policy shifts that may contradict donor preferences. Third, whilst evidence-based evaluation is being produced, policy-makers appear reluctant to make policy shifts on such a basis. It is important that policy is not homogenous, but allows for more flexible solutions that look beyond the familiar reiteration of principles in the form of 'action plans' and detailed recommendations.

40. To what extent can the available choices be defined in terms of potential solutions? Diplomatic and political efforts are vital in providing leadership, but the wider context of alternative development requires particular, longstanding commitment in the form of assistance and direct aid funding. One model to guide the future direction of drug policy is based on a system of two sets of four variables that in turn require careful coordination. The first four key variables are: information, prevention, proactivity and partnerships. There are compelling arguments for the greater use of evidence based analysis, even though it may conflict with other political objectives. The first four key variables have to be implemented at all levels: local, national, regional and international. Once in place, effective coordination is required. This should not be based on narrow national interests but on the sharing of good practice, an examination of effectiveness and the potential for application in another setting. Leadership, vision and clarity of communication will be needed at all levels, with flexibility as the guiding principle.

41. The research base for drug policy decision-making remains a problematic one, and inherent politicisation works against the notion of introducing more technocratic decisions into a well-defined arena such as demand reduction. The weakness of evidence leads to default policy solutions wherein a combination of value-based judgements is coupled with current practice. Success remains elusive and clearly relates to the inability to reach consensus on the goals of international drugs policy: is it a drug-free world or a pragmatic attempt to reduce harm?

42. Drug problems are deeply rooted in a cycle of poverty. Policy coordination risks becoming a mere process debate in this context. Without major resource reallocation the issue of policy ownership is of limited significance.

The ability of poor countries to break the cycle that feeds involvement in the drugs trade will always be the limiting factor, unless they are able to find the resources to make real improvements to economic and social conditions.

43. Diametrically opposed views persist as to how drug use and abuse should be addressed. Some conflate the two terms and regard them as synonymous, viewing the essence of the issue as a disease that requires intervention on the basis of moral duty, with a consequent notion of protection of vulnerable individuals. Others reject this position and make a clear distinction between drug addiction, which they regard as an illness requiring medical treatment, and drug use, which they do not consider to be in this category. These diverse views have a direct bearing on policy outcomes and shape the approaches followed in different countries, which exhibit perhaps the greatest diversity in relation to measures designed to prevent drug use and treat those who use drugs. One example of diversity is shown by the fact that the US has implemented student drug testing programmes, whereas in other countries there are ethical concerns about the principle of such a policy.

44. International drug policy continues to be driven by values, evidenced by the preference amongst many Afghans for a ban on alcohol that was overridden by the preferences of international donors whose priority is opium. To overcome entrenched viewpoints, creative policy solutions are required, with HIV/AIDS programmes (for instance as supported by the World Bank) representing perhaps the most overt case of the reframing of drug policy solutions in order to circumvent political opposition.

45. The diverse responses to the conference theme highlight the continuation of sometimes divisive language, yet also reveal a mutual sincerity in wanting to minimise the impact of drugs on the world. Values and rhetorical language remain hallmarks of the policy debate, but there is a clear and pressing need for ongoing argument and a genuine commitment to objective evidence to find better solutions than presently exist.

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