

THE FUTURE OF DRUG POLICY

PREVENT.
DON'T PROMOTE.



PREVENTDONTPROMOTE.ORG

To promote public health and public safety it is essential that governments adhere to the three main drug control treaties of 1961, 1971 and 1988, as well as the Convention of the Rights of the Child.

The UN drug treaties provide the best framework for reducing nonmedical drug use and its many negative consequences. All member states should recognize that these treaties create a solid foundation on which to build future drug policy innovations.



Drug Policy Futures (DPF) is a global platform to address drug policy, with a perspective grounded in principles of science and public health. DPF rejects the false dichotomy of “legalization versus incarceration,” and advocates for evidence-based strategies to promote public health, safety and the well-being of society, including those addicted to drugs and their families.

This publication represents a summary of certain aspects of the report **Future of Drug Policy – Real Solutions Grounded in Global Evidence**, which is available for download at

<http://drugpolicyfutures.org/>.

THE GLOBAL DRUG PROBLEM

“Drug use is a risk factor for a wide range of negative outcomes including mental and other illness, school dropout and academic failure, road accidents, unemployment, low life satisfaction and relationship problems. Drug use and other social and health problems are intertwined so that drug use is associated with and commonly exacerbates other problems.”

Although drug use commonly begins in adolescence and is often most intense among the disadvantaged, the young and the mentally ill, it is not just these groups or those with particular genetic vulnerabilities who run the risk of serious drug problems. The risk of substance use disorders is universal.

A dramatic shift in drug use took place in the 1960s and 1970s, when for the first time entire populations were exposed to numerous addictive drugs. Options for drug users became virtually limitless, with addicts using higher doses of multiple drugs (often simultaneously) becoming common. And due to the striking increase in drug demand, the supply and distribution of drugs became global and far more effective than ever before.

This trend has continued over the past two decades, and acquired new dimensions. A serious public health epidemic of prescription drug abuse has emerged in some places, with the nonmedical use of opiate pain medicines driving up

the rates of overdose deaths. New psychoactive substances have also appeared as a new frontier of “innovation” in illegal drugs, creating hundreds, if not thousands, of new products—many of whose properties and impact are unknown. And today’s cannabis is hardly the “soft” drug of the past. Its average potency has risen more than six-fold since the 1960s in many parts of the world, and is also widely available in edible and concentrated forms with potencies reaching 95%.

Compounding these problems, a global movement has emerged, working to normalize nonmedical drug use and sale. Well-funded efforts by global elites are working to legalize—and commercialize—drug sales and use. Their strategy holds up alcohol and tobacco, two drugs that have yielded a global public health disaster, as a model to commercialize the for-profit sale of other deadly substances such as heroin and cocaine. (Although the vanguard of these efforts has focused on legalization of cannabis, their ultimate goal is clear: the

legalization and commercialization of all illegal drugs.)

Drug Policy Futures strongly disagrees with proposals to legalize production, sale and use of drugs of abuse. As one can already see from experiments in the United States and elsewhere, drug legalization (1) normalizes and facilitates use, sharply increasing the number of users and addicts, and (2) inevitably leads to commercialization of addictive substances for profit.

Indeed, this trend can immediately and unmistakably be seen by examining the market for the two most common legal drugs: tobacco and alcohol. Their commercialization has led to use levels far surpassing those for illegal drugs, as one clearly sees in the chart below.

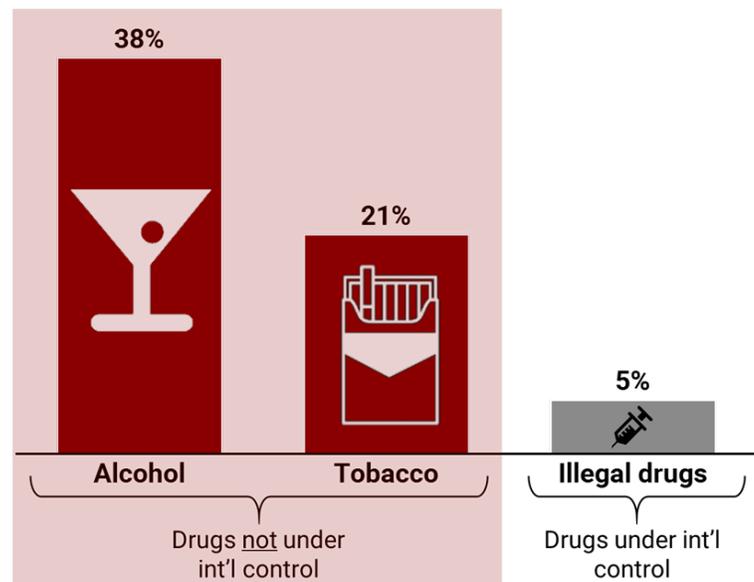
Moreover, a quick look at advertisements for these products shows how for-profit multinational companies target the most vulnerable—children for whom alcohol and tobacco use is ostensibly illegal. These multinational enterprises, headquartered almost exclusively in the industrialized world, have grown to such size that they are able to influence and manipulate policy in the Global South. For example, Philip Morris International, the world’s fourth-largest tobacco company, had net revenues of US\$77 billion in 2012, well in excess of the GDP of Uruguay.

These companies leverage this financial power with international investment treaties that allow them to challenge domestic public health and safety regulations.

These challenges are sometimes heard in secret by private international arbitration panels, thousands of miles away from the domestic courts of the country in question. There is little to no accountability, which also may explain why tobacco remains one of the most profitable sectors worldwide.

We can do better. Decades of research show that public health and welfare is best served when the overarching goal of drug policy is to limit the damage done by nonmedical drug use to the lowest level practically possible. While it is too late to turn back the clock on tobacco and alcohol, we can prevent other addictive drugs from turning into global commercial empires that profit from promoting addiction. That’s also why we give our latest initiative, a partnership with other like-minded organizations across the globe, the title “Prevent. Don’t Promote” (www.preventdontpromote.org).

Percentage of people worldwide who used drugs in the past year (ages 15+)



Source: WHO & UNODC (alcohol data from 2014; tobacco data from 2012; illegal drugs data from 2013)

PREVENT. DON'T PROMOTE.

“The first task of a public-health-oriented drug policy is to prevent drug-related problems from occurring. Environmental strategies that discourage drug use and reduce the availability of illegal drugs are a central element of prevention. Community-based strategies that promote drug-free environments and supportive social norms are shown to reduce the use of both legal and illegal substances.”

There is no single cause of drug use and abuse. And consequently, no single, easy solution exists that would eradicate substance abuse. If it did, the world would have already have implemented it.

What we do know, however, is that a strong program of drug prevention that addresses risk factors for addiction as early in life as possible, can minimize the adverse impact substance abuse has on global public health. Waiting until later in life, e.g., until adolescence, to intervene is too little, too late—by then, the impact of drug use on the developing brain can be very challenging, and in some cases impossible, to reverse.

An effective drug prevention strategy consists of an integrated range of evidence-based interventions and policies, in multiple settings, targeting relevant ages and levels of risks. Given the complex interplay of protective and risk factors for substance abuse and other risky behaviors, a single intervention is never sufficient. Moreover, the overarching goal is to support

the healthy and safe development of individuals. An effective prevention system delivers added value to communities.

- Support children and youth throughout their development and particularly at critical transition periods where they are most vulnerable, e.g. infancy and early childhood, and at the transition between childhood and adolescence.
- Target the population at large (universal prevention), but also support groups (selective prevention) and individuals (indicated prevention) that are particularly at risk.
- Address both individual and environmental factors of vulnerability and resilience.
- Reach people through multiple settings (e.g. families, schools, communities, the workplace, etc.).

DRUG CONTROL & HUMAN RIGHTS GO HAND-IN-HAND

“There is no inherent conflict between the international drug control regime and international human rights law: indeed, the two are more closely linked than some opponents of drug control like to believe.”

There is no human right to abuse drugs, and the suggestion that the choice to abuse drugs is somehow fundamental to an individual’s identity, on the same plane as one’s political opinion, religion, or sexual orientation, is unconvincing. What is clearly a human right—and one often overlooked by opponents of drug control—is the right of children to grow up free of psychotropic drugs. Article 33 of the Convention of the Rights of the Child (CRC) provides that state parties must “take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances....”

Further, widespread human rights abuses often occur in countries with weak state and societal institutions, and problems with rule of law. More importantly, such abuses are not coextensive with efforts to reduce drug trafficking, and vice-versa. To imply that the former necessarily equates to the latter is misleading and incorrect. Finally, the argument that the international drug conventions require mass incarceration represents a so-called “straw man” created by legalization advocates for the sole purpose of tearing it down. In reality, the conventions neither require nor recommend mass incarceration as a method of drug control—and the model has only been adopted by a small number of countries.



LEGALIZATION COULD CREATE “BIG MARIJUANA”

“The vast majority of the world population does not use drugs. Even for the most widely used illegal drug, cannabis, only 4% used it at least once in the past year, compared to over 40% for alcohol.”

Legalizing cannabis creates the potential for broad scale development, manufacture, and marketing of marijuana products. Unfortunately—and this is a critical point—there is a powerful financial incentive for the cannabis industry to encourage heavy use, especially among minors. Researchers estimate that 20% of marijuana users (those who use on a daily or near-daily basis) consume about 80% of all marijuana sold. In other words, marijuana companies must target heavy users to remain competitive.

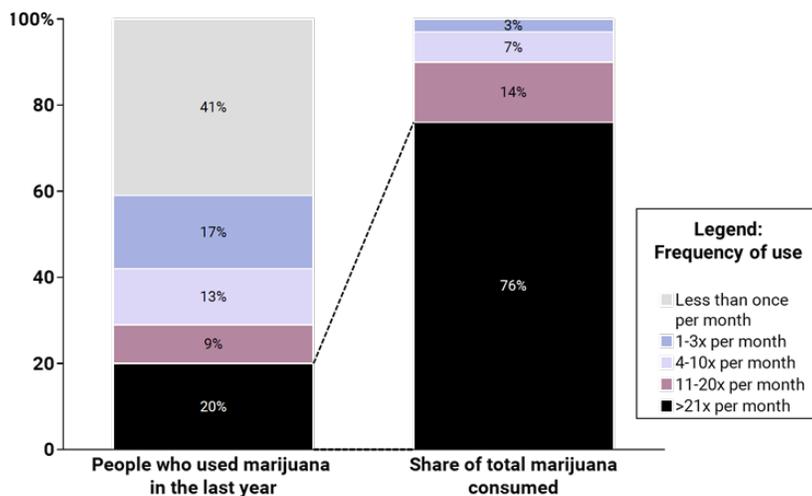
This dynamic becomes even more

pernicious when coupled with the higher addiction rates among underage marijuana users. One of the best ways to develop and capture heavy users is to encourage use at the earliest age possible, when dependence is more likely to develop. This mirrors business strategy by the multi-billion-dollar tobacco industry.

It is therefore no surprise that the marijuana industry is borrowing another page from the tobacco playbook by marketing colorful, kid-friendly edible marijuana products. These “edibles,” such as the ones shown on page 6—including marijuana-laced candies, lollipops, gummy bears, and sodas—already account for roughly 50% of the Colorado marijuana market.

Additionally, these market dynamics explain the marijuana industry’s efforts to drive potency of its products as high as possible. As noted earlier, the average potency of smoked marijuana has increased at least six-fold since the 1960s (to around 14% in the US), with edibles and concentrates pushing the rate even higher, up to 95%. The industry has also opposed recent attempts to cap potency at 15% in Colorado.

Heavy marijuana users make up almost 80% of the marijuana market



Source: Jonathan Caulkins

RECOVERY FROM DRUG ADDICTION

“There is a growing focus on the importance of ensuring that drug treatment services are focused not so much on reducing the harm associated with individuals continuing drug use, but on the individual’s full recovery.”

Recovery from drug use should be the goal of any treatment regime. While simply entering treatment is often a necessary first step to recovery, it cannot be considered an end in itself. Today, the world recognizes that treatment services should work towards maximizing opportunities for the individual’s recovery, and the possibility of a life without addiction. Seen this way, treatment has moved from an end goal to a stepping-stone, aimed at allowing people to participate more fully in society.

Partially driving this shift in policy and practice is evidence showing that a large segment of drug users seeking treatment services want help with the desire to live drug-free. Having a drug-free life as a goal does not exclude the use of medication-assisted treatment as an option or risk-minimization strategies as steps on the road to full recovery. Such interventions can and do form part of the overall treatment “toolkit” that societies should consider.

LAW ENFORCEMENT’S CRUCIAL ROLE

Drug treatment courts work: some examples

45%

In the U.S., drug treatment courts **reduce crime as much as 45% more** than other sentencing options.

80%

For methamphetamine addicts, drug treatment courts **increase treatment program graduation rates by nearly 80%**

Source: National Association of Drug Court Professionals (NADCP)

LAW ENFORCEMENT'S CRUCIAL ROLE

“Law enforcement plays an integral role in drug use prevention by protecting public safety, reducing the availability of drugs and discouraging drug use in the population. Alternative sanctions that require enforced abstinence, but also reduce the use of imprisonment for drug-related offenses should be developed, e.g. Drug Treatment Courts. Instead of being an obstacle to recovery, the criminal justice system should become a powerful engine of recovery. Alternative sanctions should empower people to become drug-free, crime-free and integrated members of society.”

The idea that the only options for drug control are legalization on the one hand, and mass incarceration on the other, is a false and misleading dichotomy. Between those two extremes lies a whole spectrum of policy options that leverage the justice system in a sensible manner to reduce supply and demand for drugs, while still protecting human rights.

The role of the justice system is most clearly seen when addressing criminal activity distinct from, but fueled by, drug consumption and addiction (e.g., robberies committed to fund a drug habit). Legalizing drugs does nothing to address such problems, and can actually aggravate them by driving up drug use and addiction rates. Instead, the justice system, hand-in-hand with public health experts, must work together to (A) address the drug use underlying the criminal activity, as well as (B) deliver justice to the victims. A number

of successful approaches have already been developed, including addiction treatment courts that are now operating across the Americas and beyond.

More broadly, many jurisdictions have reassessed both traditional practices in the criminal justice system, including the role of potential alternatives to incarceration, to more effectively address the problems of drug use and associated criminal activity in their communities. These new paradigms see courts as focusing not only on justice, but also on rehabilitation and therapeutic objectives. Such multidisciplinary, collaborative synergy between the legal and health professions creates powerful opportunities for comprehensive system reform, saving money and human lives, improving public health, and advancing the principles of international drug control conventions and human rights.

TACKLING INTERNATIONAL DRUG TRAFFICKING

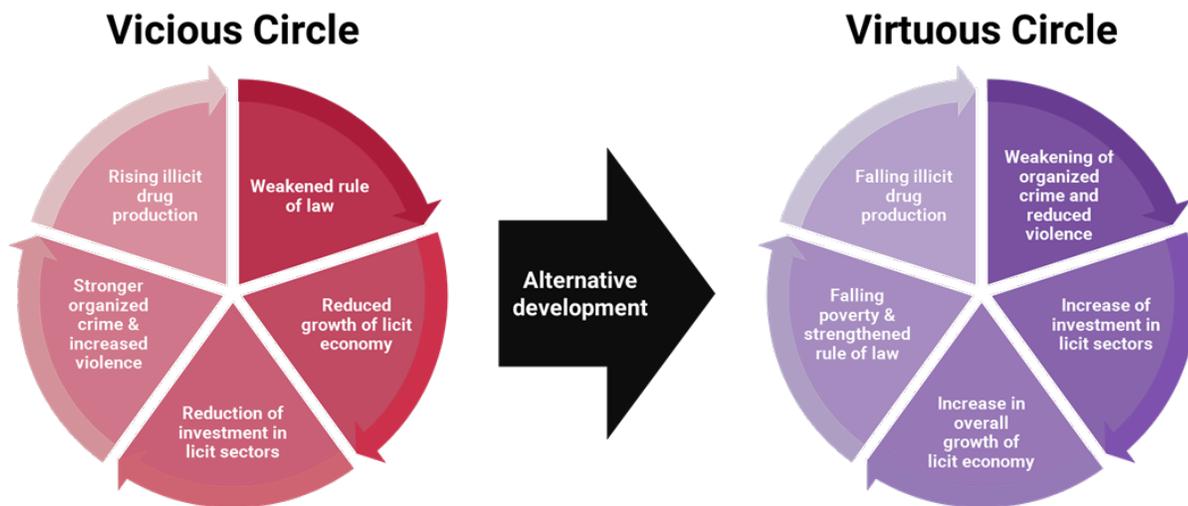
“Tackling the world drug problem requires strong international collaboration. The current international drug control treaties establish an international framework to combat drug-related harm by reducing both drug supply and demand. However, more can be done to reduce any unintended consequences of the current regulatory regime and to ensure access to vital medical treatment and medications. We also believe that further international collaboration is needed to address the problems arising from the criminal drug markets, e.g. combating money laundering, corruption and international crime.”

Public policies that successfully push back against drug trafficking and related violence must go beyond drug control, because the transnational criminal organizations (TCOs) that traffic drugs are involved in much more than drug businesses. Instead, they are tremendously diversified organizations whose operations extend into many other areas. While some of these other activities are focused on other illegal markets, such as trafficking in persons, many involve perfectly legal sectors of the economy, such as mining, logging, cigarette sales, and casino gambling.

For example, in 2013, Mexican officials indicated that the top three revenue sources of a major Mexican TCO were mining, logging, and extortion. Similarly, in July 2015, the President of Colombia declared that the criminal organizations involved in illegal gold mining were generating more revenue than drug trafficking in his country.

Thus, in reality, drug-related violent crime and corruption is part of a larger cycle of state fragility, conflict and weak rule of law in which organized crime challenges both the security and development of

TACKLING INTERNATIONAL DRUG TRAFFICKING



states. As noted in the previous examples, these challenges can take place in both legal and illegal sectors of the economy.

A good starting point for any discussion and subsequent action to counteract drug trafficking and organized crime is to ask how the vicious circle can be turned into a virtuous one, in which both security and development reinforce each other.

This can be accomplished through a twofold approach of shared responsibilities; since both producers and consumers of illegally

produced goods are part of the problem. Countries that primarily consume drugs need to shrink the demand for drugs—and other products of organized crime, such as illegally mined resources—and thereby diminish the criminal market for them. Countries primarily producing drugs need to strengthen state institutions and civil society, creating fair and effective institutions. And the global community should build institutional legitimacy, restore public confidence in the justice system and governments, fight corruption, and ensure funding for social programs.

THE WAY FORWARD

The world needs better action on drugs. A large and growing volume of scientific evidence and best practices exists from which to build effective and practical policies to ameliorate current problems.

So instead of casting our gaze towards the past, blaming current policies for failure to reach international targets and ignoring the numerous successes we have had in preventing addiction, we should view the 2016 Special Session of the UN General Assembly as an opportunity to ask ourselves how we can better implement the spirit of the international drug conventions. How can we better work to address the global drug problem together?

Empirical evidence indicates that any solution should include the following parameters:

- The overarching goal should always be to prevent—not promote—drug use.
- Prevention, treatment, rehabilitation and social reintegration should remain central to any solution.
- Human rights should always be respected in the implementation of national drug policies—including the right of children to be protected from drug use.
- We must strike a balance between supply reduction and demand reduction.
- Treatment for drug dependency must be accessible and affordable for people who are dependent on drugs.
- Governments must ensure adequate access to essential medicines for scientific and medical purposes.
- The judicial and public health systems must be better coordinated with respect to reducing drug use and its impact on public health and public safety.