



IDPC DRUG POLICY GUIDE

3RD EDITION



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Abbreviations

ACMD	Advisory Council for the Misuse of Drugs (UK)
ATS	Amphetamine-Type Stimulant
BUZA	Dutch Ministry of Internal Affairs
CAHR	Community Action on Harm Reduction
CAM	Co-ordination Centre for the Assessment and Monitoring New Drugs (Netherlands)
CCDU	Compulsory centre for drug users
CND	Commission on Narcotic Drugs
COIP	Comprehensive Organic Criminal Code (Ecuador)
DMT	<i>N,N</i> -Dimethyltryptamine
EC	European Commission
ECDD	Expert Committee on Drug Dependence of the World Health Organisation
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
ENACO	National Coca Enterprise (Peru)
EU	European Union
HIV	Human Immunodeficiency Virus
IDPC	International Drug Policy Consortium
INCB	International Narcotics Control Board
INEGI	National Institute for Statistics and Geography (Mexico)
INPUD	International Network of People who Use Drugs
LEAD	Law Enforcement Assisted Diversion (USA)
LSD	Lysergic acid diethylamide
MDMA	3,4-methylenedioxy-methamphetamine
NGO	Non-Governmental Organisation
NPS	New Psychoactive Substance
NSP	Needle and Syringe Programme
NYNGOC	New York NGO Committee on Drugs
OHCHR	Office of the United Nations High Commissioner for Human Rights
ONDCP	Office of National Drug Control Policy (USA)
OST	Opioid Substitution Therapy
SDGs	Sustainable Development Goals
UK	United Kingdom
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Program
UNGASS	United Nations General Assembly Special Session
UNODC	United Nations Office on Drugs and Crime
UPP	Police Pacification Unit (Brazil)
USA	United States of America
USAID	United States Agency for International Development
VNGOC	Vienna NGO Committee on Drugs
WHA	World Health Assembly
WHO	World Health Organisation

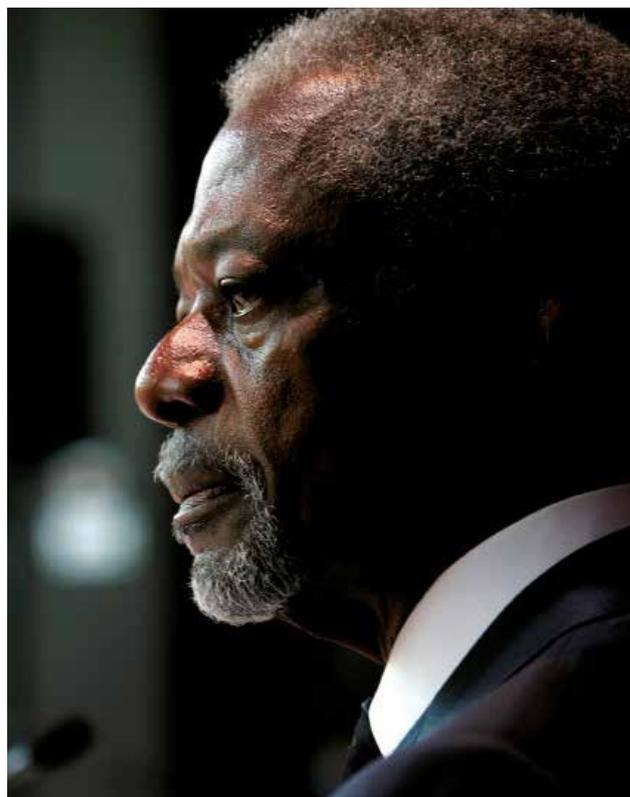
Foreword

I believe that drugs have destroyed many lives, but bad government policies have destroyed many more. A criminal record for a young person for a minor drug offence can be a far greater threat to their wellbeing than occasional drug use. What the United Nations Office on Drugs and Crime has called 'unintended consequences' of our policies over the last 50 years include mass incarceration and the creation of a huge, international criminal black market that fuels violence, corruption and instability. Sadly, drug policy has never been an area where evidence and effectiveness have driven decisions. All too often it appears to be ideological arguments which prevail. However, the original intent of drug policy, according to the UN Convention on Narcotic Drugs, was to protect the 'health and welfare of mankind'. We need to refocus policy on this objective.

In 2011, the Global Commission on Drug Policy set out to break the taboo on debate of drug policy reform in mainstream politics. We concluded that the global 'war on drugs' has not succeeded. We need to accept that a drug-free world is an illusion and focus instead on ensuring they cause the least possible harm to the least possible number of people. This means making sure that fewer people die from drug overdoses, not that more small time offenders end up in jail where their drug problems become worse. The use of drugs is harmful and reducing those harms is a task for the public health system, not the courts.

We have argued that it is scientific evidence and a deep concern for health and human rights which must shape drug policy. It is time for a smarter, health-based approach to drug policy. This means ending the criminalisation and demonisation of people who use drugs and non-violent, low-level drug offenders. These people should be offered support, not punishment. We need a balanced system which emphasises public health, human rights and development as well as law enforcement.

At this moment in time, we are at a crossroads in how the world responds to the issues of drugs. The UN General Assembly Special Session on drugs in April 2016 is an important milestone on the journey towards a more humane and more effective approach. I congratulate the International Drug Policy Consortium on its tireless work to guide this journey, providing a collective voice and visibility for its civil society members and a wide range of partners – including the Kofi Annan Foundation in its work on drug policies in West Africa. The role of



Credit: Eric Lefevre

civil society in questioning, evaluating and influencing drug policies has grown immeasurably in recent years. Indeed, the Consortium is celebrating its 10th anniversary this year, and has become an established and valuable source of analysis and expertise on drug policies, and an asset for many government officials and policy makers around the world.

I therefore welcome the third edition of the International Drug Policy Consortium's Drug Policy Guide. This edition of the Drug Policy Guide is the culmination of a decade of analysis and experience in the field – a most comprehensive repository of best practice on drug policies which reflect the three pillars of the United Nations: peace and security; development; and rule of law and respect for human rights. The Drug Policy Guide represents the collective work of authors from around the world who bring together a wealth of evidence and experience into a concise and readable format for policy makers. This guide will be a valuable help as they approach the task of reviewing and modernising their drug policies and programmes.

Kofi Annan

Chairman and founder of the Kofi Annan Foundation

Introduction from IDPC's Executive Director and Chair of the Board

It brings us great pleasure to present the third edition of the IDPC Drug Policy Guide as the IDPC network celebrates its 10th anniversary. This edition is more comprehensive and forward looking than ever before, and embodies the breadth and diversity of the consortium, which has grown both geographically and in thematic diversity since IDPC's inception ten years ago.

This Guide brings together global evidence, best practice and experiences to provide expert analysis across the spectrum of drug policy. This analysis has been made possible through the contributions from many IDPC members – including networks of key affected populations – and is the only document of its kind to provide such a broad and comprehensive investigation of what works and what doesn't in drug control policies.

The need for constructive policy analysis and guidance that builds on evidence and experience is greater now than ever in a rapidly changing and reforming drug policy environment. It is an exciting time as the calls for the reorientation of drug policies to ensure alignment with human rights, public health, development and human security are stronger now than they have ever been, and progressive reforms have been implemented, or are being considered, in a number of countries around the world.

Yet, in too many cases, drug policies remain driven by ideology rather than science and evidence. Governments have tended to give too great an emphasis on reducing the illicit drug market through largely punitive and repressive measures, despite the lack of progress that has been achieved through this approach. The inconvenient truth is that drugs are more widely used, and are more easily available, as affordable and as potent now as they have ever been – it has proven impossible to significantly and sustainably impede illicit drug markets despite the billions of dollars invested towards this end. Furthermore, the serious collateral damage caused in pursuit of eradicating the global drug trade can no longer be justified. This collateral damage includes, but is not limited to, HIV and hepatitis epidemics among people who inject drugs; the mass incarceration of millions of people for minor, non-violent drug offences; the erosion of basic livelihoods of subsistence farmers growing crops destined for the illicit market; and in some parts of the world widespread violence and insecurity fuelled by a “mano dura” government response to drug cartels.

Governments have a responsibility to develop policies and programmes that represent the most effective use of public funds to protect the health and welfare of their citizens, and to ensure that policy responses

do not exacerbate social and economic vulnerability or result in violations of human rights. It is therefore time to modernise our responses to the contemporary and rapidly diversifying global drug market.

The evidence shows that drug-related harms can be effectively managed through more balanced and humane policies that prioritise public health and human rights. This requires revisiting national drug control laws and policies – a process which this Guide is intended to support – as well as shifting narratives around drugs, and making the international drug control system fit for purpose.

In each section, we provide recommendations and further reading intended to help a wide audience of policy makers and civil society partners to promote effective, balanced and humane drug policies at the national, regional and international levels.

Each chapter of the Guide introduces a specific policy challenge or principle, and presents advice and recommendations:

- Chapter 1 describes the five core policy principles to which all IDPC members agree as the basis for our collective advocacy work
- Chapter 2 outlines the key issues related to public health – from scheduling and access to essential medicines, to drug prevention, harm reduction and treatment services.
- Chapter 3 offers guidance on the criminal justice system – including alternatives to incarceration, proportionate sentencing, regulated markets and decriminalisation, as well as policies in prisons.
- Chapter 4 finally turns to development, alternative livelihoods and the rights of indigenous groups.

Through its global network of members and experts, IDPC can also provide policy makers with specialist advice and support for local contexts – including written materials, presentations, dialogues with policy makers, study tours, and capacity building. For more information, please contact us at contact@idpc.net. We look forward to your feedback about the Guide, and are committed to continuing to update, refine and improve this document.



Ann Fordham



Mike Trace