# Policy principle 1:

## Drug policies should be developed through an objective assessment of priorities and evidence

The complexity of factors that affect the levels and patterns of drug production, supply and use in any particular territory means that governments need to take a comprehensive approach to developing effective and balanced drug policy responses. The process for policy making at the national level should include the following components:

### Researching the problem

There is a severe lack of data around levels and patterns of drug production, trafficking and use across the world. In order to develop an informed drug policy, it is necessary to collect as much data as possible on the illicit drug market through wide consultation. This should include government officials, but also experts, academia, NGOs and those people most directly affected by drug policy (such as people who use drugs and subsistence farmers).

### Identification of high-level objectives

The pursuit of a drug-free world or nation is unrealistic and counter-productive: no country has even come close to achieving this objective. However, a policy focus on eradication and elimination of illicit drug markets leads to widespread negative consequences, collateral damage, human rights violations and public health harms. Given that drug markets are not inherently dangerous or harmful, the objectives of drug policies should flow from an assessment of which consequences of drug markets and use are most harmful to society in a specific context. An assessment of the main drug-related harms, and therefore the selection of priorities for action, should be done with the participation of civil society and affected communities, in particular representatives of people who use drugs and subsistence farmers.

### Selection of the activities that the government will pursue and support to meet these objectives

There is growing evidence to guide policy makers in developing policies and programmes that are most effective in achieving the outcome objectives described above. For example, the availability of a range of evidence-based drug treatment programmes can reduce dependence and property crime (see Chapter 2.5),[1] while needle and syringe programmes have reduced HIV and hepatitis C infections (see Chapter 2.4).[2] Although the range and extent of activities will inevitably be constrained by available resources, the provision of effective measures will lead to greater savings by reducing the financial costs associated with health and social problems and crime – and will achieve better health and social outcomes.[3]

### Clarification of the role of departments or agencies responsible for these activities, and coordination mechanisms between them

A society's drug problems cannot be solved by one government department or agency alone. A comprehensive and integrated strategy requires cooperation and coordination between many government bodies, including the departments of health, social affairs, justice, education and foreign affairs. Successful programme delivery should take place in partnership with local authorities, community and faith groups, civil society organisations, and affected communities such as people who use drugs and subsistence farmers.

### Allocation of resources to support these activities

National drug strategies differ significantly in terms of the resources allocated to drug control and its different components. Furthermore, expenditures on areas such as general healthcare, education, criminal justice and law enforcement may be hard to ascertain, and their impact on achieving drug strategy objectives may not be explicitly evaluated. Policy makers need to take account of the 'proactive' amount spent on funding drug policy measures (i.e. law enforcement activities, prevention programmes, harm reduction and drug dependence treatment services), and the consequent savings that could be made on 'reactive' expenditure (i.e. in responding to drug-related crime, loss of economic activity, treatment for HIV and other blood-borne diseases, etc.). In most settings, the largest share

Outreach testing during Hepatitis Testing Week 2015, IN-Mouraria Harm Reduction Centre, NGO GAT, Lisbon, Portugal

of available funds is provided to law enforcement agencies – with tens of billions of dollars estimated to be spent globally on enforcement-led policies each year.[4] Other sectors, such as public health, often receive far less attention – leading to a global funding crisis for evidence-based harm reduction services.[5] Yet shifting just a fraction of the drug law enforcement expenditure towards public health would have huge impact on drug-related harm.[6]

### Articulation of the scope and timescale of the strategy

Learning from drug policy successes and failures requires that strong mechanisms be established to assess the impact of drug strategies. This involves setting goals and timescales, and committing to carrying out objective and structured reviews on a regular basis (e.g. every five years). Although some countries have created comprehensive national drug strategies that include clear objectives, very few have reviewed their strategy in a systematic, objective and transparent manner. The absence of scientific evaluations can lead to the continuation of ineffective policy measures, and missed oppor-

tunities to introduce more effective approaches. Since no country has managed to fully resolve the problems associated with illicit drug markets and use, policy makers should continuously search for better policy responses, by referring to evidence and experience instead of being influenced by ideology, political interests or a reluctance to change.

### Identification of adequate indicators to evaluate progress

The evaluation of drug policy achievements has tended to focus on indicators of process in implementing drug law enforcement strategies – that is, the number of arrests, seizures or punishments. These have not proven to be a good guide to the achievement of real reductions in drug-related health or social problems. Even the rise or fall in overall drug use does not in itself indicate whether health and social outcomes are being achieved. Depending on local contexts, these priority outcomes for a national drug strategy should be framed in terms of minimising health and social problems, and maximising social and economic development (see Policy principle 2 below for more details).