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Philip Robins
Published online: 28 Mar 2014.

To cite this article: Philip Robins (2014) Narcotic Drugs in Dubai: Lurking in the Shadows, British Journal of Middle Eastern Studies, 41:2, 151-166, DOI: 10.1080/13530194.2014.878502

To link to this article: http://dx.doi.org/10.1080/13530194.2014.878502

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Narcotic Drugs in Dubai: Lurking in the Shadows

PHILIP ROBINS*

ABSTRACT Over the last two decades, illicit drugs have emerged as a growing social problem in the Arab Gulf states. Dubai is no exception, in spite of its reputation as an economic success story. Dubai has been affected in two ways: through the increased use of hard drugs, notably heroin, especially among its nationals; and through the role of transnational organised crime in moving illegal drugs through the sovereign space of the Emirate and onwards to larger markets. In spite of this growth, the authorities have been slow to respond. Where policy development has taken place it has emphasised the supply side, within which it has privileged law enforcement. There has been a zero tolerance approach on the demand side, which is only now beginning to soften at the edges. State provision for detoxification and rehabilitation is plainly inadequate. Wider society is to some extent complicit in this reality, as Emirati nationals tend to frown on such ‘weaknesses’.

Introduction

Narcotic drugs have long featured as one commodity among many in the political economy of smuggling in the lower Gulf. Prior to the 1980s, domestic consumption in Dubai was modest and mainly limited to migrant workers. Dubai was a link in a chain of wider distribution, though at a modest level. The 1980s proved to be a transformational decade in three respects. First, the target demographic in the Emirate changed, as Emirati citizens of Dubai became more likely to be the consumers of narcotics. Second, the balance in the type of drugs being abused in the Emirate shifted from hashish to heroin. Third, the role of Dubai in a wider trafficking network was transformed as the volume of the contraband being smuggled grew exponentially.

As drug consumption emerged as an established pursuit, the state began to grapple with it. In doing so, it has developed two responses. First, it has adopted a punitive, zero tolerance policy on drug use, an approach that it has implemented in a highly selective way, to the benefit of nationals and the disadvantage of expatriates. Second, there has recently been a growing flexibility of approach in such matters at the edges of state jurisdiction, with law enforcement and the courts playing a significant role. Looked at together, these responses indicate the degree

*St Antony’s College, University of Oxford, UK — 62 Woodstock Road, Oxford, OX2 6JF. Email: philip.robins@sant.ox.ac.uk

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to which a supply-side strategy, with law enforcement at its heart, has dominated policy to the detriment of demand-side action.

Narcotics in the Middle East is a generally under-developed field of research. Issues of illicit drugs in the Gulf are similarly so, the case of Dubai included. This is perhaps surprising, both because of the historical experiences of the Gulf as a conduit for the movement of drugs, and because of the emergence of Afghanistan over the last four decades as the main centre of opiate production. This article seeks to unpack some of the experiences of Dubai, as far as the trafficking, consumption and the broader impact of illicit drugs in the lower Gulf is concerned. It will look at the changing nature of drugs before and after 1980, explaining why these new trends have taken place. It will examine the way in which the state and the leadership of the Emirate have approached such matters and the evolution of policies that have taken place over time.

This article will make two basic arguments. One, that Dubai has been slow to respond to the increase in circulation of narcotic drugs, both at the level of domestic consumption and in relation to transnational organised crime, and has been largely ineffectual in its efforts in both these areas. Two, that the treatment of the drugs issue in Dubai is symptomatic of other, broader issues, where society is marginalised, the state only partially effective and the decision makers largely disengaged.

Sultanism in Dubai

Before embarking on the analysis described above, it is necessary to give the reader some sense of the socio-political dynamics of Dubai. After all, the policy political context is vital to the way in which a subject like narcotic drugs in all of its ramifications is viewed. Most importantly, such a subject raises the issue of whether a more effective treatment of the drug smuggling/drug consumption challenge is predicated on the need for political reform in the way that the Emirate is organised and administered.

In Dubai, there are five social actors of consequence: the tribes; the merchants; the institutions of the state; the ruling family; and the neighbouring Emirate of Abu Dhabi. The relationship dynamic among them is fundamental to the nature and emergence of policy.

The tribes are divided on kinship grounds. They are co-opted through the distribution of land by the ruler. Their children leave school with low attainment levels. They benefit from royal patronage by being recruited into the police and the military, in which there is acute under-employment. A cloak of secrecy envelops a range of drug-related issues. A small number of the sheikhly lineages have been co-opted into high office, either becoming royal allies at the top of the state, or directly through their participation in Emiri business projects. It is the tribal constituency, with its bored younger males, that is most susceptible to radical mobilisation, but also to drug consumption. With Islamism spreading through this group, the need for the ruler to keep them co-opted or at least quiescent has never been greater.

The merchants mostly came to Dubai at the instigation of the ruling family. Many of their number are of Iranian origin, arriving at the end of the nineteenth century or after the Iranian revolution. Others arrived from Oman and East Africa. Some of the Iranian descendants in particular have gone on to be
disproportionately well represented in decision-making structures, notably as advisors to the ruler. They have prospered on the back of the re-export trade, especially with Iran, with contraband a component of this exchange. This group has been increasingly affected commercially by the US-inspired sanctions against Iran’s assumed attempts at nuclear weaponisation.

There are a small number of Emirati nationals who hold senior office in the state, either for meritocratic reasons or because of their firm political support for the ruling Al-Maktoum clan, or both. The public face of the state has been subject to growing ‘Dubai-isation’ over the last couple of decades. Foreign faces are intentionally less visible at the top of public sector organisations, because of the influence they wield with both the decision makers and their placemen. Westerners are still to be found occupying crucial specialised niches, such as regulatory positions in the likes of the Dubai International Financial Centre. Below the top ranks, there are many foreigners working for the state, drawn mainly from among Arab expatriates and workers from the Indian sub-continent.

Both economic and political power lies with the ruling family in Dubai. It does so partly because of the economic acquisitiveness of the leadership, and partly because of the activity and focus of the regime’s public diplomacy. It has bestowed legendary status upon Sheikh Rashid bin Said, invariably presented as the founder of modern Dubai, and ensures that deference is paid in full to the current ruler, Sheikh Mohammed bin Rashid. Until as recently as the 1950s the Al-Maktoum clan was the subject of fractious division, and its ruling line was vulnerable to competition from a lively political reform movement. Today, its position is apparently unassailable, based in part on the enduring robustness of the Dubai brand. Ironically, with the ‘Arab Awakening’ presenting a new model of liberal political transformation to the region, Dubai has never been so archaically run. The ruler is an absolute monarch; the Emirate has no elected institutions; senior state officials are appointed and fired at the discretion of the ruler; there is no constitution. Rather than its enduring reputation for being the most liberal entity in the Gulf, it is arguably the least so.

Abu Dhabi is the fifth component of the structure of political power in Dubai, because of its control of oil-generated financial power, overwhelming in magnitude compared to Dubai. Although traditional rivals within the confederation of the United Arab Emirates (UAE), the credit crunch of 2008/9 demonstrated the precariousness of Dubai’s financial power compared to its neighbour’s. Dubai had to rely on Abu Dhabi for successive financial bail-outs because of its otherwise unsustainable debt overhang. Sheikh Mohammed symbolically acknowledged this power inferiority by unexpectedly renaming the Dubai Tower (the tallest structure in the world) the Khalifa Tower (burj khalifa) after the ruler of Abu Dhabi on the very day of its opening.1

In view of the realities of the above, the model of politics that best enshrines the essence of rule in Dubai under the Al-Maktoums in the twenty-first century is that of sultanism. This notion has most definitively been encapsulated by Juan Linz and Alfred Stepan, as follows:

In sultanism, the private and the public are fused, there is a strong tendency toward familial power and dynastic succession, there is no distinction between a state career and

personal service to the ruler, there is a lack of rationalized impersonal ideology, economic success depends on a personal relationship to the ruler, and, most of all, the ruler acts according to his own unchecked discretion, with no larger, impersonal goals.²

Historical Backdrop

There is a long tradition of smuggling along the land and sea routes connecting Dubai with its neighbours and beyond. Over time, the nature of the contraband has changed, according to such factors as economic demand and, in the case of narcotic drugs, the encroaching international regime that came to define them as illicit. Significant trade in opium was certainly taking place in Dubai in the 1930s.³ According to one local report, it was the British army that brought marijuana to the UAE.⁴ Whatever the veracity of this source, the situation in Dubai prior to the 1980s was that there was a tradition of taking non-life-threatening drugs, but predominantly within the Indian, Iranian and Pakistani communities. The consumption of drugs among locals seemed to be confined to ‘a few older UAE nationals’,⁵ possibly drawn disproportionately from among the Iranian merchant population that had decamped to Dubai in the late nineteenth century, smoking opium being a familiar leisure pursuit in rural Iran.

During this period, Dubai played a significant role as a regional entrepôt. This function was based on attempts to avoid local tariffs in the case of the gold trade with India. The twilight legality of the drugs trade meant that at first less scrutiny was brought to bear upon it, notably hashish and opium smuggling from its proximate neighbours, Afghanistan and Iran. As a result, during the 1950s and 1960s Dubai and Sharjah became major centres for the re-export of narcotics.⁶ Periodic evidence surfaced suggesting that such flows were permitted or even encouraged by the political establishment in Dubai, with the emir himself complicit. For example, in the summer of 1956, following the seizure of a large quantity of drugs, Sheikh Rashid chose to dismiss the customs officials who made the find, rather than the director of the department, who favoured ignoring the seizure. Just three years later, Rashid acknowledged to a British minister in London that his Emirate largely supported itself on ‘uncertain smuggling’.⁷

The situation on the ground was to change markedly on the cusp of the decades. In 1967 Dubai formed its first dedicated anti-drug units within the Criminal Investigation Division of the Dubai Police. With full section status being achieved two years later, it was only a matter of time before the logic of the extension of this net of criminality was reflected in prosecutions. In June 1969, in the first recorded drugs offence in the history of the Emirate, the police arrested a Pakistani national who was charged with smuggling 25 grams of hashish. This proved to be the shape

⁵ Sarhan, ‘Drug Abuse in the United Arab Emirates’, p. 3.
⁶ In his 29-minute documentary film Dubai (1969), Rodney Giesler, the film’s director, drew attention to the trade in dried fish as having initiated sea trade between Dubai and the wider world, whereas ‘now’, he said coyly, trade covered ‘anything you care to name’. See Giesler, St Antony’s College, Middle East Centre collection, GB165-0508.
of things to come. The legal framework became more sophisticated and far reaching. A year later Abu Dhabi issued its first Dangerous Drugs Act, with Dubai following suit in 1971, and the other five Emirates of the UAE adopting the legislation implemented in Dubai. The growing vilification of narcotic drugs meant that the economic margins to be made on the smuggling of such commodities grew rapidly. Drugs, and in particular hard drugs like opiates, increasingly emerged as the contraband of choice, as the returns on such trafficking easily came to outstrip such other parts of the informal trade domain, such as sugar and tea.

Drugs and Consumption

From the 1980s onwards, the consumption of drugs in Dubai began an inexorable rise. There was of course an overall increase in the volume of drugs consumed, as a reflection of the expansion in the population—national and expatriate—resident in the Emirate. No method of evidence collection on drugs is fool proof anywhere in the world. Consequently, inferences about the consumption of drugs have to be drawn with the utmost care. The fact that drug seizures in Dubai in 2009 increased by 39 per cent from the previous year was an important pointer. There was also a steeper growth in the number of Dubai nationals taking a range of different drugs, compared to the country’s foreign workers. One authoritative source on narcotics in Dubai estimates that between 10 and 20 per cent of the adult population are regular users of some form of illicit drugs. This would equate to between 15,000 and 30,000 nationals, if one bears in mind that approximately 50 per cent of the population is under the age of 15 (reckoned to be roughly the age of initiation into drugs consumption). Some commentators have placed the overall figure as high as 50 per cent, or 75,000. An estimated 5.4 per cent of adults in the UAE are regular users of hemp drugs.

By 1990 around 65 per cent of drug ‘addicts’ in the UAE were nationals, while 20 per cent were non-Arab expatriates. In 2011 in Ajman, 80 per cent of drug abusers were nationals. By the early 1990s, heroin was the most commonly used drug among UAE nationals, with smoking the preferred method of consumption. The use of the stimulant Captagon (generic name fenethylline) has risen in Dubai since the year 2000, in common with a pronounced trend in Saudi Arabia and some of the other smaller Gulf states.

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9 These estimates are based on a figure of roughly 300,000 Dubai nationals, 150,000 of whom would be over the age of 15. Interview with local journalist in Dubai, 13 December 2010.
10 Interview with local journalist in Dubai, whose upper estimate was the 50% figure, 13 December 2010.
12 Any study of narcotic drugs requires some clarification regarding terminology. The only places in this article where the term ‘addict’ will be used are when cited or quoted from another source. The media is fond of the term, but a lack of familiarity with individual cases precludes the use of such a term. Here, ‘addict’ will be better covered by terms such as ‘regular user’ or ‘abuser’.
13 Khaleej Times, 23 March 1990. Note that the figure for non-Arab expatriates may be an under-estimate, owing to the punitive penalties that would accrue in the event of such people admitting guilt.
14 This is according to Lt. Col. Majid Salim Al Nuaimi, the head of the CID in the Ajman police. Cited in ‘Dubai—Majority of Ex-addicts Return to Drugs’, Khaleej Times, 28 June 2009.
In Dubai the bottom line is that drug addiction ‘remains a taboo in many circles’. Within society at large there is a strong social stigma attached to drug dependence. That is a leading reason why it is so difficult to devote resources to those suffering from its effects. The mainstream view among nationals in Dubai is that sufferers are undeserving. There is a marked gap between official and de facto responses. Notionally, drug abusers who surrender themselves to the authorities for the first time are supposed to be treated benignly and not criminalised. In reality, the reaction of the police is unpredictable and can be draconian. Dubai operates a methadone programme for those suffering from heroin addiction, in spite of the illegality of the drug. In the absence of a dedicated rehabilitation facility for those who have been substance dependent, the Dubai Police have taken responsibility for the follow-up monitoring of at least some of those who have detoxified. The police have adopted such a role in some other countries in the Middle East, notably Jordan. The police also carry out random tests among this group in a determined attempt to keep them ‘clean’. The continued involvement of the police is patchy and can have an intimidatory effect.

A combination of the essential illegality of drugs, the closed nature of Emirati society, together with the extensive surveillance techniques put in place by the state, works against the collection of reliable research data. It is therefore difficult to determine some of these trends and tease out their causes. One survey produced by YOU.GOV with a local partner for ALAAN TV concentrated on youth and drugs. It found that 71 per cent of the residents of the UAE believed that drug consumption among adolescents was increasing, while only 10 per cent maintained that it was falling. This suggested that the routine reassurances of the law enforcement agencies in places like Dubai were ineffectual. The survey also investigated the motivation for the initial consumption of drugs by young people. It found that those factors mentioned by its sample, in descending order, were: peer pressure; curiosity; repressed anger and unhappiness; personal problems; to feel more grown up; to achieve a ‘high’.

The problem of drug taking among nationals in Dubai is not confined to the illicit street or hard drug sectors. A rough and ready study by local sociologist Amal al-Fuqaei, an expert with the police, has helped to highlight the emergence of ‘prescription drugs’ as a significant source of substance dependence, and the weakness of the system in ensuring that only the deserving can gain access. So, for example, Fuqaei found that of the predominantly Emirati nationals who are dependent on pharmaceutical drugs, 29 per cent obtained their pills from pharmacies in Dubai without providing a prescription chit, even though such a procedure is required by law. Police sources confirm this significant leakage in

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21 Nationals in Dubai tend to live in the same areas, places like Satwa, and in close physical proximity to one another. There are notoriously few opportunities for fraternisation between nationals and expatriates.
22 For an example of such techniques, see Al-Ameen Service, ‘Eye of Dubai’, provided by Dubai Police, which invites any resident to call in with sensitive information of a security-related nature (http://www.eyeofdubai.net/).
the system. Related problems include the repeated use of the same prescription, prescriptions being prepared by non-specialists, and prescriptions being submitted to multiple pharmacies in order to obtain pharmaceuticals before the prescriptions show up on IT systems as having been ‘cashed’. This cluster of concerns does not even begin to address the problem of *bona fide* doctors being ‘prescription happy’, a particular problem in Abu Dhabi.

Given the absence of reliable research on drug-related issues, there are unsurprisingly disagreements of interpretation regarding the size, distribution and cause of this growing trend in substance abuse. The Fuqaei study, for example, placed importance on deprivation as a cause of drug abuse. She pointed to the poorly educated and unemployed as being most at risk, with those suffering from social harm such as family breakdown being particularly vulnerable. By contrast, Sarhan found that Emirati drug takers tended to correlate with low education attainment and high salaries, thereby removing penury as a barrier to consumption of certain substances. Both studies agreed on some of the same conclusions, notably that youthfulness and maleness typified the profile of early abusers of substances.

Of course, separating the domestic drugs market according to the ethnicity of Dubai’s long-term residents is to some extent misleading. Such an approach ignores the symbiotic nature of the relationship between supplier and consumer in Dubai. The source of hashish and opiates like opium and heroin in Dubai tends to be from land-locked Afghanistan, which relies on routes through Iran and Pakistan in order to reach markets in Dubai. Because Dubai nationals tend not to have developed first-hand, drugs-related networks in neighbouring countries, they rely on expatriates from such countries in order to generate supply. For example, Baluchis have a reputation for delivering the best heroin. The shape of this practice is supported by the figures on arrests in the UAE. Between 1972 and 1985, just 489 of 3536 arrests made were of nationals, just under one-seventh of the overall total. It is safe to assume that this includes a serious under-reporting of nationals involved in drugs-related, criminal activity. Regular drug takers in Dubai are more likely to fund their abuse by selling a proportion of the drugs they order to ‘street-level’ retailers.

**Drugs and Trafficking**

In June 2010, the Anti-Narcotics Department (AND) of the Dubai Police admitted what many had already long suspected: that Dubai was ‘being used as a hub for drug traffic’. The words were uttered by no less a person than the director of the

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26 Interview, 14 December 2010.
27 Sarhan, op. cit. p. 175.
28 Confirmed by interview, 13 December 2010.
29 ‘Baluchi’ is a catch-all, ethnic term in the Gulf that is relatively under-researched. The term covers at least three categories: people who came to the Gulf from Baluchistan, a poorer, peripheral land, parts of which today lie in Iran and Pakistan; people who came to the Gulf from Oman, their families having originally come from Baluchistan; and people who came to the Gulf from East Africa, their families having originally come from Baluchistan. While some Baluchis are wealthy as a result of trade, on the whole the title reflects a modest social standing. The status of some Baluchis in Dubai is uncertain. Even those who have passports usually do not possess family books, thereby only giving them the more modest ‘right of abode’.
AND, Major-General Abdul Jalil Mahdi. They caused a sensation within Dubai. Mahdi did not, however, lose his job. He was speaking with at least tacit permission. Indeed, he said nothing on the record that police spokesmen had not already shared on a non-attributable basis for at least a couple of years.\textsuperscript{32} Drug flow professionals at the United Nations Office of Drugs and Crime (UNODC) had felt for a few years that the Gulf countries had become of increased importance in drugs trafficking.\textsuperscript{33} This was the leading reason why the UNODC opened a regional office in Abu Dhabi in 2010.

Before it got carried away with the development of its high-end real estate, Dubai’s main comparative economic advantage was as a hub for regional trade. It intentionally put itself forward as a low-tax, generally lax regulatory environment in order to attract a disproportionate part of the region’s business.\textsuperscript{34} For instance, local merchants say that it is possible to sail from India to Al-Garhoud,\textsuperscript{35} the commercial district in Deira, the oldest part of Dubai, without having one’s load checked. In providing such an environment, Dubai has been startlingly effective, with some 65 per cent of the goods entering Dubai either in transit or for re-export.\textsuperscript{36} In 2006, Dubai was the world’s third largest re-exporter, after Hong Kong and Singapore.

The airline and port provisions in Dubai are the best illustrations of how this flexibility works in practice. They are very attractive as far as the illegal drugs domain is concerned. By the end of the 2000s, Dubai airport was a hub for over 100 foreign airlines, seeing nearly 25 million passengers per year pass through its facilities and travel to more than 150 destinations. By 2011, Dubai airport was pronounced the second busiest hub in the world.\textsuperscript{37} Emirates airline alone, which had only been established in 1985, had a fleet of 137 aircraft, with 700 flights departing from Dubai every week.\textsuperscript{38} Ominously, there is now a regular air connection with Argentina and Brazil, cocaine trafficking routes having been unstable over the last few years. This diversity in air networks provides virtually endless permutations as far as the routes on which drugs couriers can be deployed are concerned.

The same may be said for the region’s main port of Jebel Ali, occupying 48 square kilometres,\textsuperscript{39} and the largest man-made port in the world.\textsuperscript{40} It is home to over 6000 commercial units. It is the gateway for most of the 9 million containers that enter Dubai every year. Given its size and volume, it provides a strong temptation for transnational organised crime, especially for those criminals involved in the smuggling of contraband, notably in container shipping. Jebel Ali container trafficking involves a complex formula of shell companies, false

\textsuperscript{33} This is according to Thomas Pietschmann, a longstanding employee of the Vienna-based organisation. See ‘Dubai Becoming Major Center for Drug Smuggling’, \textit{The Media Line}, 30 June 2010.
\textsuperscript{34} That does not mean to say that Dubai has the most lax regulatory framework within the UAE. The Free Zone in Ras al-Khaimah, for example, is notorious for being considerably more lax.
\textsuperscript{35} Al-Garhoud itself is close to the international airport in Dubai. It is beloved by the staff of Emirates, whose pilots prefer to be located there. It is an area generally known for its nightlife.
\textsuperscript{36} Interview with Mohammad Matar al-Marri, the executive director of the cargo operations division at Dubai Customs, quoted in James Reinl, ‘UN Raises Concern over Dubai Port’, \textit{The National}, 17 July 2009.
\textsuperscript{37} This was stated by the Centre of Asia Pacific Aviation in a report published in August 2011.
\textsuperscript{38} See ‘The Emirates Story’ at \url{www.emirates.com}.
\textsuperscript{39} Jebel Ali Free Zone (Jafza) (\url{www.jafza.ae/}).
paperwork and repackaging. Customs officials are in any case disinclined to go looking for illicit activities, as it is their primary responsibility to keep the merchandise trade flowing, not to hold it up. Dubai’s attractiveness is built precisely on the light regulatory regime that it administers. The economic activity generated at Jebel Ali is estimated to account for around a quarter of Dubai’s GDP.

A third entry point of assumed importance is the land border between Dubai and Oman. Much less is written or spoken about drugs secreted in motor vehicles making this crossing. Yet with a physical barrier since the mid-2000s literally enclosing land access to the whole of the UAE from its neighbours, legitimate points are at very least of notional importance. The discreet nature of land border access raises concerns about the possible existence of racketeering. If institutional criminality characterises the operation of land access borders, it is difficult to conceive of their effective and continuing existence without some form of political protection.

All of these facilities are advantageous as far as the trafficker is concerned. In expanding upon his controversial remarks, Mahdi described Dubai as a place that enjoys numerous points of entry and departure. This gives the drug smugglers a variety of options in terms of the time and direction that the drugs are moved into and out of the Emirate, with ports and the airport being most used. According to Mahdi, this has resulted in a ‘game of bluff and counter bluff’, with drug smugglers trying to outwit the anti-narcotic professionals.41

It is safe to assume that all manner of illicit drugs are moving through Dubai’s space. Heroin from Afghanistan travels via Iran and Pakistan before entering Dubai and exiting for Asia or Europe. Dubai has now become part of the new routes for cocaine trafficking from Latin America. The successes that US anti-drug law enforcement has had against the movement of cocaine in the Caribbean and Central America have resulted in the opening up of new routes through West Africa and on into markets in Asia and Europe. These, however, are only the most obvious routes. While a trafficker may wish to limit the number of times his merchandise crosses an international boundary, as this is when it is most vulnerable to interdiction, it is also beneficial if a state’s authority has no cognition about drugs flowing in a particular direction. The Dubai authorities also seize other illegal substances as varied as opium,42 crystal meth43 and counterfeit medicines.44

State Responses: Zero Tolerance

The response of the authorities in Dubai towards the growth of the domestic consumption of illicit drugs has been uncompromising,45 justified on the grounds

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41 Mustafa, ‘Dubai “Being Used as Hub for Drug Traffic” Say Police’.
43 The final destination of one consignment of meth was Kuala Lumpur, via Singapore, where arrests were made as a result of cooperation between the two sides. ‘Dubai Customs Foils Attempt to Smuggle 113 kg of Crystal Meth Drug’, 9 December 2010, http://www.uaeinteract.com/docs/Dubai_Customs_foils_attempt_to_smuggle_113_kg_of_crystal_meth_drugs/43646.htm (accessed 22 December 2010).
44 ‘Dubai Customs Seizes 7 Million Counterfeit Pills in a Private Company Warehouse in Dry Port’, Emirates News Agency (WAM), 1 June 2010.
45 Judge Ali Al-Kaladari, interviewed by 7Days, says of Dubai’s strict drugs laws that they were ‘designed as a deterrent’. He went on to say: ‘These laws help discourage anyone from carrying or using drugs. Even if the amount of illegal drugs found on someone is 0.05 grams, they will be found guilty’. See ‘State of Temptation: British Hedonists Get into Trouble in Dubai’, The Independent, 15 February 2008.
of deterrence. At least, that has been the formal position of the state in Dubai, as expressed mainly through the actions of the courts and the police. In reality, there has been a highly differentiated, binary response to the possession, consumption and selling of illegal drugs. This distinction has depended on whether those falling foul of the Emirate’s drugs laws are nationals or expatriates. Foreign workers, especially those from the Indian sub-continent, have largely been shown zero tolerance towards any infringement of the law. The odd exception does exist, but only from among the wealthy and well connected: a Pakistani international cricketer, Muhammad Asif, was expelled from Dubai after two weeks in custody without prosecution in June 2008 for possession of opium.

Most drug offences carry a minimum prison term of four years, no matter how small the quantity concerned. The penalty for smuggling with intent to distribute is 10 years and a fine of around $13,000. In 1995, federal UAE law on drugs was dramatically ramped up, to include capital punishment for certain types of trafficking offences. Executions have occasionally taken place in the more egregious of cases. Nevertheless, no distinction is made between drugs as varied as hashish and heroin, in spite of the differing impacts that such drugs have in terms of the health of the user. Drug offences are the single most frequent area of prosecution in Dubai. They account for 47 per cent of all incarcerated prisoners in the country, well ahead of those prosecuted for murder (14 per cent), violence and sexual offences (both 9 per cent).

Offenders are immediately expelled from Dubai and blacklisted once they have served their sentence. Dubai nationals literally cannot be expelled, thereby making some form of differentiation in the system almost inevitable. But there is strong evidence to suggest that nationals do not face the mandatory periods of incarceration associated with statute book drugs offences meted out to expatriates before their final expulsion. Those members of leading families in Dubai involved with drugs would be unlikely to see their misdeeds come to court. Given these extremities of experience, in great part based on ethnicity and nationality, it is difficult not to come to the conclusion that discrimination is the only variable that explains the grossly uneven application of the Emirate’s law.

The most evident demonstration of the zero tolerance approach has been seen among those entering Dubai via its international airport. There is extensive scrutiny of this flow of arrivals because of the large number of drugs couriers passing through the Emirate. But in focusing so squarely on this cohort, there is also discomfort. Some experts believe that the airport focus is nothing less than a sop on the part of the authorities to those governments and international organisations that are uneasy with Dubai’s record as far as illegal drugs are

48 The UAE is one of 20 countries that has capital punishment on its statute books for drug offences.
50 The feeble responses mooted for Dubai nationals have included the likes of cancelling the driving licences of persistent offenders. See Sara Janahi, ‘Drug Offenders in Dubai May Lose Driving Licenses’ gulfnews.com, 4 October 2010.
concerned. It is certainly true that the vast majority of drug ‘mules’ are witless, vulnerable individuals who have been drawn into criminal activities and who have no strategic control over criminal drug movements. Drug smugglers are expendable, and can easily be replaced by criminal gangs, while airport interdiction helps Dubai law enforcement to bump up its arrest numbers and its seizure volumes.

Such law enforcement operations have occasionally been rigorous to a risible degree. Arrests for hemp drug possession have been made where the volume concerned has been ‘like dust’. In the most infamous of cases, such as that of Keith Brown, who was given a four-year jail sentence for having 0.003 grams (estimated as less than the weight of a grain of sugar) of cannabis attached to the sole of his shoe, there has been no question of the drugs being brought in for resale, or hardly even for personal use. Nevertheless, the authorities in Dubai have forged ahead with prosecutions even where their country’s public diplomacy has been ill served by such actions, such as the French couple who arrived to spend their honeymoon in the Emirate and swapped two weeks in the bridal suite for four years in a crowded jail.

The Ruritanian nature of some of these arrests, together with the celebrity background of some of those incarcerated, has led to periodic and uncomplimentary coverage by the foreign press. The fact that this response has been applied even to those carrying small amounts of banned substances for personal use has belied Dubai’s piously liberal reputation in the West. It has, for example, exposed the dubious worth of Dubai’s attempts to lure younger people as tourists. By staging desert raves, with suggestive names like ‘Desert Rock Fest’ and ‘Dubai Muzik Week’, that is to say with definite drug culture connotations, the impression is conveyed that the authorities are unwittingly trying to ensnare young people.

Dubai’s tight regime on drugs has not been confined to hard drugs and hemp drugs. The list of banned substances has been extended by the authorities to cover a wide range of pharmaceutical products, ones that would tend not to be criminalised in most other countries. These have included the likes of codeine, which is pharmacologically close to opiates, many well-known anti-depressants and even some cold and flu medications. The possession of anti-depressants can lead to a jail sentence if not accompanied by a doctor’s written prescription. Restrictions have also included obviously benign substances, notably jet lag medicine and poppy seeds. Such has been the concern that Dubai-bound foreign tourists might unconsciously end up being accused of the possession of illicit substances that the respected international non-governmental organisation (NGO), Fair Trials International, has been moved to act preventively in publishing a full list of Dubai’s banned substances on its website.

51 Interview with local journalist, 1 July 2011.
53Arguably, the best-known celebrity to get caught out by Dubai’s draconian drugs laws was the BBC DJ and ‘godfather’ of drum ‘n’ bass, Raymond Bingham, aka Grooverider, who served just under one year in jail before being quietly pardoned and expelled.
55Tracey Wilkinson, 45, was held in custody for eight weeks for the possession of codeine before being released. See ‘Tourists Warned of UAE Drug Laws’, BBC News, 8 February 2008.
56 Campbell, ‘Drug Laws’.
57 See www.fairtrials.net, which has separately highlighted the case of Amir Azam in order to highlight a series of shortcomings in the nature and implementation of the legal system in Dubai.
Forgetting ethical issues for a moment, such a zero tolerance response has been of dubious effectiveness. The draconian measures that operate in Dubai have acted as a disincentive to foreign workers to cooperate with the authorities over the illicit aspects of trafficking, distribution and consumption. To cooperate is to invite suspicion of conspiracy in any of these areas, and to risk scrutiny or even summary expulsion by the authorities. Add an element of perceived racism to the equation and sub-continental expatriates may well feel that they will not receive a fair hearing if they choose to share their knowledge with those in charge. By contrast, the treatment of Emirati drug abusers in a more differentiated—though not necessarily more successful—way has damaged claims that the Dubai judicial system runs according to the principles of the rule of law.

Issues of competence also apply as far as the subject of narcotics in Dubai is concerned. As with so many countries, developed and developing, there is a structural problem of inter-institutional cooperation. The existence of long-standing competition between the police and customs has resulted in “an uneasy relationship.”58 The customs arm of the state has perennially been the poor relation. Historically, the police have been better resourced and have consistently enjoyed the higher profile. The upper echelons of the force are occupied by nationals; the middle ranks are filled by loyal Arabs, notably drawn from among Jordanians and Yemenis. The police presence per capita is said to be significantly greater than London’s. There seems to be widespread agreement that there is no institutional corruption in the police in Dubai. Neither are there any Emirati mafias in Dubai running prostitution rings; these are run by gangs from outside. The police do, however, enjoy a reputation for being “a bit militaristic”59 and policemen are not above slapping the odd suspect, making them, in the opinion of one diplomat, comparable to the British police of the 1970s.

Demand Side: Policy Abstinence

There is hardly a country in the world that does not privilege supply-side action over the demand side, such is the way that anti-drugs policies have emerged and evolved since the 1970s. It is more palatable for a society and regime narrative to point to the push effect of a flow of drugs from outside than to admit that there is a persistent internal demand or pull effect for such substances at home. In the case of the developing world, the way that the state has invariably been established, with its priority for coercive institutions like the intelligence, the military and the police, means that law enforcement is invariably a dominant function within the state and a siphon of central resources. In a context where supply-side activity has dominated public policy-making on the subject, as in the case of Dubai, it is not difficult to maintain such a priority.

Dubai is institutionally and experientially poorly placed to develop an effective strategy of demand-side activism. As in most of the Gulf Cooperation Council (GCC) countries, the in-country voluntary sector is chronically under-developed.60 The powers on high would rather look to international organisations than trust their own people in the development of expertise and

58 Interview with local journalist, 13 December 2010.
59 Interview with Dubai-based foreign diplomat, 12 December 2010.
60 See, for example, Dubai’s decision to revoke the operating licence in 2011 of the Gulf Research Centre, run by a Saudi national, even though the organisation is generally viewed as being successful by regional standards.
policy options. This is important, as it is to the ‘third sector’ of NGOs that governments will often look when they wish to develop social partnerships in such areas. In Lebanon, for example, a lively NGO sector in the anti-drugs field has been successful in making the state aware of the latest versions of global best practice in the sector and adopting them. NGOs have also been effective at generating good-quality public campaigning against drugs. In Dubai, such matters are old fashioned in their treatment, and likely ineffectual in practice, such as periodically requiring Imams to sermonise on the moral threat posed by drugs.

Of course, this is not to say that there are no organisations focused exclusively on the issue, but those that exist are structurally flawed. For example, in 1987 the UAE Council of Ministers established a National Committee for Combating the Illegal Use of Drugs and Alcohol (NCCIUDA). This organisation enjoys profile, and no doubt an inside track in its dealings with state institutions. But that is to miss the point. The NCCIUDA is first and foremost a state innovation itself, rather than being the product of civil society. The fact that it is headed by a senior figure in the Ministry of Interior, and consists of representatives from nine other ministries, means that the law enforcement state approach will inevitably continue to dominate. Dubai-based experts observe that there are no independent NGOs working in the anti-drugs field.

The absence of effective, knowledgeable, local and independent anti-drugs NGOs in Dubai means that there is no serious debate about the desirability of introducing ‘harm reduction’ measures, one of the most controversial aspects of drugs policy. Though needle exchanges, free syringes and the like may be too bold a move for a conservative and introspective society like Dubai’s, such debates are being won and lost by default, not as a result of reasoned and informed exchange. With heroin the most often-used drug in the Emirate, albeit consumed primarily by smoking rather than intravenously, fears are already rising about the dangers of HIV and hepatitis B infection, with rates already assumed to be spiking owing to Emirati male sex tourism in Asia and the widespread use of prostitutes locally. Such a development would be serious not least because HIV/AIDS remains a greater taboo in Dubai even than hard drugs. In a conservative, closed society, it would be even more difficult to identify and treat sufferers at an early stage of illness.

If harm reduction is a policy platform that is several steps away as a practical option for policy-makers, it is much more surprising that Dubai lacks even a basic medical facility specialising in the rehabilitation of substance abusers, although one is said by officials to be on the way. Dubai shares this dubious distinction with all of the other Emirates in the UAE, except Abu Dhabi. The latter opened a dedicated medical centre for rehabilitation in 2002 and is in the process of expanding this initiative by opening a 250-bed facility in conjunction with the

61 The leading and most effective examples of which are Um al-Nour, Soins Infirmiers Developpement Communautaire (SIDC), Youth Against Drugs (JAD) and Skoun.

62 Together with TV programmes and SMS messaging, such sermons seem to have been at the heart of a six-month anti-drugs campaign. See Awad Mustafa, ‘Anti-Drug Theme for Friday Sermons’, The National, 7 January 2010.

63 Owing to an ‘alarming rise’ in cases of HIV and tuberculosis in particular, the authorities in the UAE began testing for such infections from autumn 2011. However, the focus on the testing was on expatriates rather than nationals, with testing being made for new workers and those submitting visa renewals. See ‘Steep Rise in TB, HIV among Newcomers’, gulfnews.com, 29 September 2011.

UNODC. Of course, Dubai and Shajah both claim to have dedicated addiction centres. However, these are located within existing psychiatric hospitals, notably Al-Amal Psychiatric Hospital in Dubai, where the focus of the health provision is on mental health rather than drug or substance dependence. The quality of treatment in Al-Amal leaves a lot to be desired. In such circumstances, the medical provision on offer is not tailor-made with substance abuse in mind.

State Responses: Flexibility at the Edges

The last three years or so have witnessed the emergence of a somewhat more flexible approach on the part of some members of the Emirati establishment to the drugs issue. This seems to have been prompted by developments on both the demand and supply sides of the Dubai market. There are at least two factors linked to the former. One is the realisation that the growing level of drug abuse in Dubai and its impact upon society has made the continuing suppression of this reality untenable. Two is the emergence of a handful of individual cases that have shocked the small and tightly knit Emirati society. The death of a young Emirati man as a result of a heroin overdose while being held in a police holding cell is one such example. In many ways this growing concern over the availability and consumption of narcotic drugs has reflected changes on the supply side of the equation. The last couple of years have seen a pronounced increase in the number of arrests for drug trafficking in Dubai, and the volume of drugs apprehended.

The shock of this upward trend in both demand and supply has elicited a number of responses from the state. The first has been to be more open about the challenges. For example, the state has moved to try to raise the quality of its responses. A new general department for combating narcotics was established as part of the police system in 2009, with better staff and more independence than its predecessor. This complemented the reform of the Customs Department, which has been taking place since 2003. In Jebel Ali port, the largest in the Gulf and, as a Free Zone, institutionally vulnerable to a range of international criminal activities, much money has been spent on new x-ray machines and increased staff training. Dubai is a participant in the Container Security Initiative, spearheaded by the US in 2002.

The international airport has also been subject to greater scrutiny and the provision of new hardware, although the impression persists that interdiction at the airport is more about easy seizures. This has complemented the qualitative increase in policing provisions, through the surveillance and interdiction role partially ceded to the Serious and Organised Crime Agency (SOCA) of the UK by the national authorities. For those arriving with very small quantities of drugs, obviously only for personal use, friendly Western governments believe that they have persuaded the Dubai authorities simply to expel and blacklist such people rather than prosecuting them and imposing the four-year prison penalty.

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65 Interview with Dr Anas Fikri, National Rehabilitation Centre, Abu Dhabi, 14 December 2010.
66 The man’s name was not given in the local press, as is common practice, as it would have caused humiliation for his family.
67 This tragedy occurred in January 2009.
69 US customs officials are also stationed in UAE ports.
70 Interview with a senior Western diplomat, 12 December 2010.
The state has acted pragmatically in seeking to alleviate drugs-induced pressure points on the ground. News that over half of all criminal cases being heard by the judiciary in Dubai involve drugs issues has resulted in the establishment of a temporary, specialist anti-drugs court. This move mirrors other pragmatic, organisational changes that have been made in the past when one area of business threatened to dominate court proceedings. Commercial activities are one illustration of a parallel process in practice. The judiciary has also been part of a more active response to drug traffickers using the international airport. A team of three full-time prosecutors has been established on site in order to deal with the continuing volume of business, at the instigation of Sheikh Ahmad bin Saeed Al-Maktoum, the president of the Dubai Civil Aviation Authority. This vignette signals how easily, in a sultanist political system like Dubai’s, political will may be galvanised when a senior Al-Maktoum is committed to a particular policy course.

Conclusion

According to the Dubai Police, more than 80 per cent of the country’s persistent drug abusers return to drug dependency after they have received detoxification treatment. The police attribute this recidivism to three reasons: the malpractices of private clinics; problems with psychiatric hospitals; and the standards of conduct of some pharmacies. This article would agree that all three factors are substantive and significant, although if Dubai has no public sector rehabilitation provision and is poor in its regulation of the private sector then surely it is the state, of which the police is a part, which is at least partly to blame. To confess to an 80 per cent failure rate, however, strongly implies that there are yet other factors to take into account, factors of a more institutional nature.

First, the issue of substance dependence and the associated problem of HIV/AIDS need to be taken out of the shadows of private conduct and public policy-making, and treated with transparency, priority and expertise. Second, this must involve the medicalisation of such problems in order to ensure that both the physiology and the psychology of addiction are addressed. This will require associated resource allocation decisions, both to ensure the availability of dedicated, short- and long-term facilities for recovering drug abusers, and to pay for outreach workers in order to identify at an early stage those who are ‘at risk’ and those who are already subsiding into dependency, abuse and ill health. Every effort must be made to encourage a partnership, admittedly never easy, between health and law enforcement professionals in order to achieve a balanced policy response. An oversight responsibility by the Emiri Diwan would generate the necessary political will to ensure that such a partnership has a good chance of working in practice.

Even these developments, though long overdue, would not on their own be a sufficient response. For effective mobilisation against the socially corrosive impact of drugs, an even more wide-ranging social and political transformation is required. Dubai needs to take the risks associated with drugs—both consumption and trafficking—more seriously than has hitherto been the case. Furthermore,

72 Sheikh Ahmad is the highly respected uncle of the current Emir, who is also the head of Dubai World.
there needs to be less of a yawning gap between expatriates and nationals in their experience of the legal and the medical systems in Dubai, both for ethical reasons and to incentivise the full cooperation of non-nationals in criminal matters with the appropriate agencies, free from fear. Finally, the authorities in Dubai need at the very least not to block the emergence of an organised and effective civil society in order to be able to partner the state in both preventing and combating the impact of illicit drugs in sectors as varied as education, medicine and social development.

Acknowledgements

The research for this article was made possible by a grant from the British Academy, for which the author is most grateful. The author would like to thank Dr Ahmed Al-shahi for his comments on an earlier version of this article.