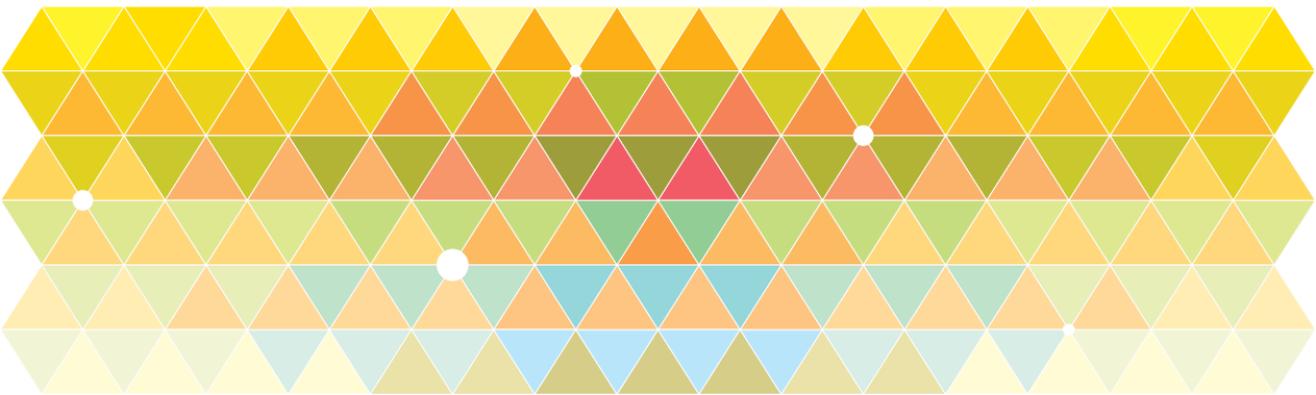


# GUIDELINES FOR DEBATE

WHAT IS DRUG POLICY?





BY ARAM BARRA

This edition of Guidelines for debate seeks to help define what drug policy is and provide guidelines to challenge its design and impacts from a youth perspective while respecting human rights. To this end, the paper proposes a dynamic discussion from which to rethink the current debate to respond to the phenomenon of drugs and the policies that govern them.

*In memory of Rami Nasr who, at a young age,  
struggled to understand drug policies.*

**The aim of the series **GUIDELINES FOR DEBATE** is to influence the formulation, implementation and evaluation of programs and policies through guidelines that foster the debate of ideas from a progressive approach. The collection features a cool exchange of data and theoretical and methodological tools for analysis and action aimed at emerging political generations.**



# OFF WE GO

Historically, all societies that have had access to substances that alter the general state of consciousness, have used them in one form or another under regularly controlled contexts. Whether it's for status, to relax the mind, recreationally, to enhance group communication or to communicate with spirits or for magic, drugs are a social constant.<sup>1</sup> More importantly for our discussion, it is to say that for centuries the subject was traditionally treated immediately by the local community where drugs are consumed. That is, drug policy was a policy dictated by the community that had to immediately deal with the issue.

However, the last 100 years have changed this dynamic. After the Opium Wars in the mid and late nineteenth century, the hypothesis of controlling drug use through norms established locally, was modified. The argument was simple: "[...] when the market was local, each country could have its own forms of control, but now it is not possible"<sup>2</sup> Thus, the classical idea of facilitating international relations built upon the idea that all countries have responsibilities and they therefore must set certain basic standards, began to be used to address the drug phenomenon and the policies that govern them.

It was in this context that the 1961 Single Convention on Narcotic Drugs was discussed and signed under the Economic and Social Council of the United Nations. This Convention was later supplemented by the Convention on Psychotropic Substances (1971) and the Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), given the inability of the original text to keep pace with the advance of the market for new substances. The international community today, in line

with international policy-making trends at the UN system, use these three documents as the foundation and direction of drug policy all around the world.

However, the simplistic answer of the 'war on drugs' has failed in its key objectives to eradicate illicit drug markets and reduce prevalence of drug use. At the same time, there is increasing evidence that the current system of drug control has led to serious negative consequences for development, public health and human rights. That is, the dynamics of creating a global political response to the impact generated by international production, trafficking and drug use seems to have found a crossroads where its cost-effectiveness comes under question. Countries such as Afghanistan, Mexico and Russia are just some of the cases where the cost in human lives and human rights violations make us question the status quo of global politics in the matter, and the prohibitionist strategy thus far applied.

On the other hand, examples such as Portugal, Uruguay, USA and Canada (although the latter only at the state level) show that the debate about drugs and regulating policies is one that is worth having and raising locally. In fact, during the last 10 years or so, a new generation of drug policies have begun to be raised at this level off the hand of progressive political groups seeking to efficiently and effectively meet the needs of their communities.

But before delving into the historical conditions that led to this point, and the various political formulas found elsewhere to respond to the drug phenomenon, we must return to the original question: What is drug policy?

# DYNAMIC 1

Gather a group of **5 TO 20 PERSONS** intending to **REFORM** drug policy in your community or country and sit in a spacious and comfortable location. Prepare the room in advance with **ONE HUNDRED CARDS, 10CM BY 20CM** on **THREE DIFFERENT PASTEL COLORS** and **MARKERS** for **ALL** participants.

The first task as facilitator of the group is to **ASK** participants to write a **CONCEPT, WORD** or **FEELING** that comes to mind when they think of 'drug policy' on **ONE OF THE COLORED CARDS** (whatever color the group chooses, all participants must use the same color). It is important that ideas are **LEGIBLE AT A DISTANCE** of at least **6 METERS**, with only **ONE IDEA PER CARD**, which is clearly written, only with **THICK MARKER** and on **ONE SIDE OF THE CARD**. Participants can use all the cards they want to express the various ideas that they have.<sup>3</sup>

The person in charge of facilitating the exercise shall **COLLECT IDEAS** from the group and **SORT** the cards in a thematic manner of affinity fields (**CLUSTERS**). The classification of ideas can be done silently by the facilitator while picking up the cards, or s/he can invite the group to organize the whole of the resulting materials on a **BLACKBOARD, WALL** or **SCREEN** using pins or tape.<sup>4</sup>

# ON WE GO

From the resulting blocks of ideas, the facilitator shall make a brief analysis summarizing the various contributions of the group and the reasons why the ideas were divided the way they were. It is vital to visually integrate all ideas presented in regards to one another based on participant's context. Moreover, it is up to participants to chose a name that adequately describes each category.

By applying this technique in various groups of young people around the world, Espolea has learned that answers tend to be grouped into four main categories: 1) human rights, 2) public health and access to medical services, 3) law enforcement or the legal implementation by police forces or others, and 4) drug policy reform, legalization or regulation of the market and related topics.

It is important to reflect on the many ideas, issues and political agendas that are packed into the concept "drug policy" and how this may change depending on the group. Are there issues that the group missed that are important to the discussion? Are there problems when you want to discuss 'drug policy' without being explicit about the particular issue we address? Is there a group consensus on what 'drug policy' mean?

## DYNAMIC 2

The person facilitating the discussion group should now **ASK** how does 'drug policy' **AFFECT YOUNG PEOPLE**. You must use the same technique of **VISUALIZATION OF COMMUNICATION** used in dynamic 1, with cards of a different color than before and making sure to exhaust all ideas in the group. The new cards should be arranged, **PARALLEL TO THE FIRST COLOR IDEAS** on a whiteboard, wall or screen so that **ALL PARTICIPANTS CAN SEE** them.

Because the group held a discussion about the meaning of 'drug policy', it is common that the responses are directed to seek impacts or consequences to the same groups of ideas or clusters defined by the group beforehand. With this, the analysis or group discussion -even if strangers to one another- create common reference to basic consensus about the drug phenomenon, its current policy and obstacles to be solved collectively. Therefore, the task at this point of the process is simply to think about ideas in the context drawn by the group itself, complementing with verbal examples or instantiations by the group when deemed necessary.

By now, you shall have a better idea of what 'drug policy' is and you have found various impacts it has on younger generations. Thus, a natural direction for the group discussion now is: What do we do about it?

Take a short break if the group sees fit, breathe deeply and put on your most creative and innovative hats on.

**By the time this exercise will be over, the group will have generated a good idea of the implications of drug policy, the difficulty of its creation and the many variants or factors affecting their development and implementation.**

## DYNAMIC 3

Depending on the number of people, the group will now be divided into smaller sub-groups to **DISCUSS** a block of ideas or **CLUSTER**. Ideally, there will be sufficient sub-groups as blocks of ideas (**BETWEEN 4 AND 5** regularly). Otherwise, participants can **SELECT** the block of ideas they want to discuss first and may take up another block of ideas later if they wish.

With the **LAST** color card **AVAILABLE**, the facilitator will ask the participants, divided into sub-groups for discussion, to come up with a **COUPLE OF IDEAS** to meet any needs they have identified in a given cluster. The group will have **BETWEEN 20 AND 30 MINUTES** to **DISCUSS** and **AGREE** on new ideas that will be positioned **PARALLEL** to the other two color cards on a whiteboard, wall or screen.

Upon completion, the group will return to plenary and choose a person as **REPRESENTATIVE** of each sub-group to **PRESENT THE IDEAS** discussed and agreed on by the group. While participants **LISTEN** to ideas presented, they should be indicated to **PAY PARTICULAR ATTENTION** for none of the proposals to **VIOLATE HUMAN RIGHTS** and question whether they affect discriminately young men or women and/or if they have any plausible **UNDESIRED IMPACTS**.<sup>5</sup>

# IDEAS FOR ACTION

Since the group has generated innovative ideas to add to the debate on drug policy in the world, you can now define what to do with these proposals. If the group so wishes to, the proposal can now move on from discussions to the drawing board to become policy or regulation subject to be analyzed and advocated for.

Perhaps the idea or proposal does not require a formal governmental political process, but refers to an action, series of activities or research campaign that people in the group can perform in their own sphere of action. If so, you can search for organizations specializing in the subject, such as Espolea, to help you channel your proposal or approach them with other institutions that can help them do so.<sup>6</sup>



Drug policy -like any public policy- should be subject of public scrutiny and analysis. It is the role of the community itself to decide whether the rules governing them should be one way or another. Similarly, is the task of citizens to identify and monitor whether a policy is not effective or efficient and pose amendments or substitutes for it.

Now that you know what 'drug policy' is all about, your role is to help build or deconstruct it as you think will best serve your community.

### **ARE YOU READY TO MAKE BETTER DRUG POLICIES?**

1. Escobedo, Antonio. (2002). "Historia de las drogas". Alianza. Madrid.
2. Thumi, Francisco (2009). "La normatividad internacional sobre drogas como camisa de fuerza". Nueva Sociedad. Buenos Aires.
3. A more in depth explanation of how to use the Metaplan technique may be found at: Aguilar Rivero, Margot. "Metaplan. Una técnica de visualización para la comunicación grupal". Los talleres de Solaris, S.C. (2003).
4. An introduction to the art of facilitating groups and building clusters of ideas may be found at: González Martínez, Alfonso. "El arte de la facilitación. Principios, método e instrumentos". Los talleres de Solaris, S.C. (2003)
5. For a complete list of human rights in summary, refer to: Map of human rights, available online (Spanish): <http://bit.ly/Apdyhe>
6. If you wish, you can send us your results of group discussion to [ideas@espolea.org](mailto:ideas@espolea.org)



The views expressed in the text, as well as the analyses and interpretations contained therein, have not been subjected to editorial review and are the sole responsibility of their authors. They do not necessarily reflect the views and stance of Espolea A.C.

**Espolea A.C.**

**Mazatlán 152A-4, Col. Condesa, 06140, México, D.F. Tel. +52(55) 6265-4078**

**[www.espolea.org](http://www.espolea.org) [info@espolea.org](mailto:info@espolea.org)**

ISBN: 978-607-9162-05-4

First edition: 2012. Printed in Mexico. Design and Layout: Enrico Gianfranchi

