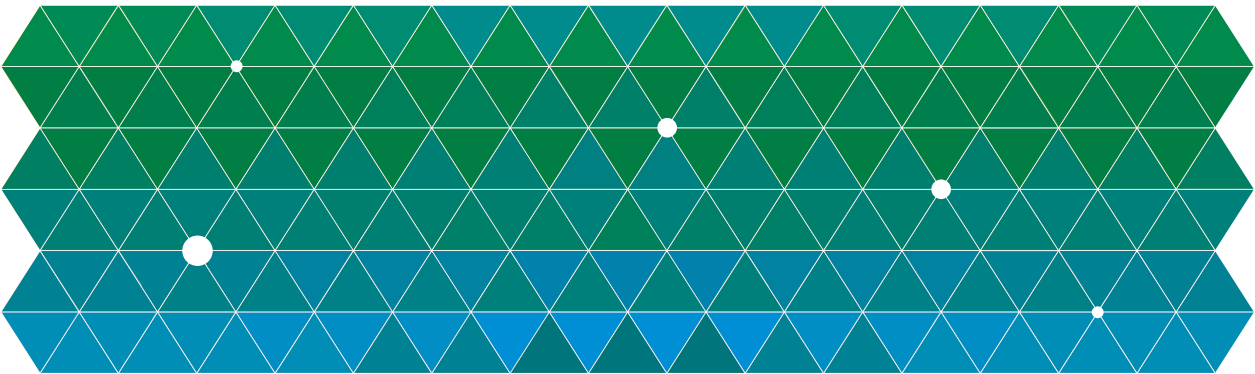


# GUIDELINES FOR DEBATE

WHAT IS A DRUG?






BY REBECA CALZADA

This edition of *Guidelines for Debate* aims to break incorrect schemes or misinterpretations around what is a drug, as well as the reasons behind their use. This, in order to better define and understand one of the key terms in the debate on drug policy and demystify misconceptions that have arisen around the topic.

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

The access to and use of substances that alter general states of consciousness have been a historical constant in all societies. Moreover, they have been commonly used in controlled contexts.<sup>1</sup> The range of substances and reasons of abuse increase day by day so that in a voluntary or involuntary, individual or social manner, society is more involved in this complex topic.

This increase requires considerable actions based on truthful information and resources that address the implied risks and consequences that involves consuming any substance. Ignorance towards and around drugs can result in individual as well as social risks. Therefore, basic concepts of the topics can help teenagers and young adults break the paradigm that society has about psychoactive substances and its use.

# ACTIVITY 1

You will need **A GROUP** of 5 to 20 people whose main purpose is to have a better comprehension about the concept of drugs. You will need a **FLIP-CHART/WHITEBOARD/WALL**, 100 **CARDS** of 10x20cm of at least three different colors and black or blue **MARKERS** for all the participants.

The facilitator should ask participants to choose **A COLORED CARD** and each one write down a feeling, concept or word that crosses their mind when they think about the term **DRUG**. Ideas written down on the cards should be **READABLE AND CLEAR**, preferably written with a maker, and using only one side of the card. It is easier if there is **ONE IDEA** per card and if it is clear and brief. For this activity you can use all the cards that you need in order to display all the ideas you have.

After having written down all the ideas, the facilitator will collect the cards and **ORDER** them, according to the topics in different **CLUSTERS**. It is important that all the participants decide how to name each of the clusters. Paste the cards on the flip-chart/whiteboard/wall, having as an option to connect the ideas using arrows or lines.

The facilitator and the group will now use the resulting clusters to make **A BRIEF ANALYSIS** summarizing the contributions made by the group and the reasons why they decided to divide the ideas that way. All the

ideas should be integrated and **COHERENTLY CONNECTED**. The purpose of this dynamic is to identify the group's perception of the term.

The analysis of the group's ideas will show that the term "drug" is a **HIGHLY COMPLEX** context involving different topics and parts of society. Moreover, the debate on the subject has **DIFFERENT APPROACHES**, therefore it can be analyzed on different levels, which determines and explains its complexity.

# ON WE GO

The perceptions that we have about drugs could be the result of different variables, such as cultural, ideological or social aspects. However, the concept “drug” seems to be ambiguous and imprecise, often referring to illegal substances only. According to the World Health Organization (WHO) a drug can be “all or any substance that when introduced to any organism is capable of modifying more than one of its functions”.<sup>2</sup>

The WHO points out that in medicine, the term drug refers to “any substance with the potential to prevent or cure disease or enhance physical or mental welfare”, and in pharmacology it refers to “any chemical agent that alters the biochemical or physiological processes of tissues or organisms”.<sup>3</sup>

Although the term often refers “to any psychoactive substance” and often more specifically to ‘illicit drugs’, the reality is that the level of regulation of a drug does not imply the potential impact it has or can have on health of an individual and society.<sup>4</sup>

## ACTIVITY 2

The purpose of this activity is to take the group's **INITIAL CONCEPT** of the term drug, and identify how far we are from **A CLEAR UNDERSTANDING** of it. This will require that the facilitator, along with all the participants, **DIVIDE** the ideas of the group into those that can be included in the definition suggested in this text and those which cannot.

With the ideas divided into those **CLOSER/FURTHER** from a clearer concept of the term “drug”, we will carry out an analysis and **A GROUP DISCUSSION** with the following questions:

- How far / close we were from the definition of drug?
- Do the differences among the ideas are marked?
- What kind of influence do you think the government, the media and the society exert over people's perception about the drug term?

On cards of a **DIFFERENT** color from the ones used in the first dynamic, the facilitator and the participants should write down their **FINAL IDEAS**, based on the previous analysis and discussion, and stick them on to the flip-chart/whiteboard/wall.

# ON WE GO

The various reasons behind drug use are quite varied, as the interaction between the user and the substance is multifactorial, and it may depend on different internal or external characteristics.

Amongst the most common drug uses are: to maintain certain status, relax the mind and/or the body, and socialize. To this we can add reasons like being intoxicated, promote group communication and connect with spirits. In other words, **DRUGS CAN BE USED FOR RECREATIONAL OR THERAPEUTIC PURPOSES, RITUALS AND/OR MEDICAL REASONS.**

Some people use drugs to stay awake, improve performance in certain activity, alleviate depression and/or enhance the environment, feeling euphoric and excited. Similarly, some people use drugs to lose weight, increase self-confidence, sleep, work, study and/or suppress hunger amongst many other reasons.<sup>5,6</sup>



## ACTIVITY 3

For this activity it is necessary to use the **THIRD** color of the cards as this time we will explore **THE REASONS** for using drugs. As in the first activity, the facilitator shall request all participants to write down on the card a **FEELING, CONCEPT** or **WORD** that crosses their mind when they think about the 'reasons for drug use'.

Ideas written down on the cards should be readable, clear and brief, there should be **ONE IDEA PER CARD** and the ideas must be written with a marker using just one side of the card. Remember that for this activity you can use **ALL THE CARDS** that you need in order to display all the ideas that you have about the reasons for drug use.

As in the first activity, after having written all the ideas, the facilitator will collect the cards in order to arrange them in clusters. Again, the classification can be carried out either by the facilitator or by all the participants using a flip-chart/whiteboard/wall, having as an option to join the ideas with **ARROWS OR LINES**.

After the classification, the facilitator will carry out, once more, a brief analysis that summarizes the contributions made by all the participants and the reasons that **JUSTIFY** the classification of the ideas. All the ideas should be integrated and coherently connected.

# ON WE GO

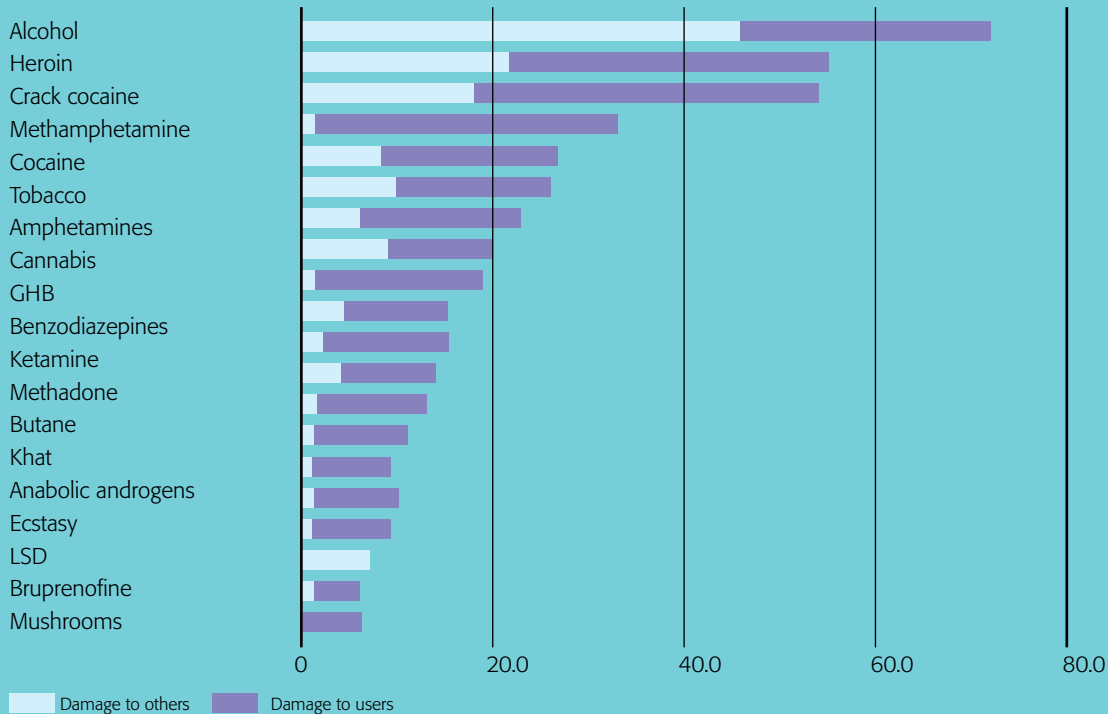
Drugs are commonly classified as *hard* and *soft*.<sup>7</sup> This 'classical' distinction, which is based on the potential impact<sup>8</sup> that certain substances may have, is hardly accurate as it responds to *other needs* (political or economic) rather than to the real levels of dangerousness. It is also influenced by the prejudices towards drugs and the legal or illegal status of certain drugs.

A study conducted in 2010 in the UK has proved the uncertainty of this by showing that some drugs considered not harmful, such as alcohol, are often the first in a list arranged by levels of dangerousness at an individual and social level.

During the study, drug experts classified 20 drugs –legal and illegal– according to their ability to damage both the user and the rest of society. Possible damages include: health damages, substance dependence, economic costs and crime and delinquency.<sup>9</sup>

The following table summarizes the findings of the study:

## DAMAGE CAUSED BY DRUG USE



Source: Nuut, D.; King, L.; Lawrence, P. (2010) *Drug Harms in the UK: A Multi-Criteria Decision Analysis*, The Lancet.

## ACTIVITY 4

This activity aims to generate a reclassification of drugs according to their dangerousness, and the surrounding community. **DO YOU REMEMBER THE MUSICAL CHAIRS GAME?** Then that's where we are headed. Make a circle with the chairs' back pointing inwards. The number of chairs should be equal to the number of participants minus one. Then write down on **POST-ITS** or **CARDS** the names of the drugs that appear on the table above and paste the name of **EACH DRUG** on the back of **EACH CHAIR**.

Participants will remain standing up, except for the facilitator who will be controlling the music. When the music starts playing, players should dance around the chairs at the rhythm of the music. As soon as the music stops, everyone will try to sit down in a chair. Whoever is left without a chair will have the duty to ask all participants to stand up, and then the participants will proceed to **REVISE** which drug they sat on. The person who has the most **DANGEROUS** drug will be **ELIMINATED**, not without giving his or her seat up to the person who remained standing.

Then, remove one chair, recreate the circle and continue playing the music. Repeat the game until the last round is done with a single chair and two players. The winner will be the one that ends seated on the last chair. He or she should make a **REFLECTION** about the place that the drug they have should occupy on the list. .

A drug is a substance capable of changing more than one of the functions of the organism. The concept as such represents an endless number of substances that increase every day. Although reasons and purposes of drug use are different, before making any judgment or assessment of the validity of these reasons, it is essential to highlight that drugs are a social constant. It is thus extremely important that we respond and address this reality through objective information and individual empowerment –especially for young people and for institutional strengthening.

1. Barra, Aram (2010) Progressive Perspectives: What Happens After The Lost War? The Debate of The Legalization of Drugs in Mexico. Friedrich Ebert Stiftung
2. Lexicon of Alcohol and Drug Terms [Online] Available at: [whqlibdoc.who.int/publications/9241544686.pdf](http://whqlibdoc.who.int/publications/9241544686.pdf). Checked on July 1<sup>st</sup>, 2013
3. Glosario de terminus de alcohol y drogas. World Health Organization [Online] Available at: [www.who.int/substance\\_abuse/terminology/lexicon\\_alcohol\\_drugs\\_spanish.pdf](http://www.who.int/substance_abuse/terminology/lexicon_alcohol_drugs_spanish.pdf). Checked on July 1<sup>st</sup>, 2013.
4. For more information related with drugs and other concepts, please read: [www.espolea.org/uploads/8/7/2/7/8727772/ddt-nombrandolasdrogas.pdf](http://www.espolea.org/uploads/8/7/2/7/8727772/ddt-nombrandolasdrogas.pdf)
5. Boys, A.; Marsden, J.; Strang, J. (2001) Understanding Reasons for Drug Use Amongst Young People: A Functional Perspective. Health Education Research, Vol. 16. no. 4, 2001. Pp. 457-469.
6. *Op. Cit.* Barra, Aram (2010)
7. According to this classification, *hard drugs* are the ones with higher levels of addiction and can cause more damage and to the contrary *soft drugs* are those with lesser levels of addiction and can cause less damage.
8. Measured by the addiction levels and the damages that can provoke at a social and individual level.
9. Nuut, D.; King, L.; Lawrence, P. (2010) Drug Harms in the UK: A Multi-Criteria Decision Analysis, The Lancet.

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 154A-1, 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)**

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