

Children of the Drug War

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Perspectives on the Impact of Drug Policies on Young People

Damon Barrett, editor

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Foreword

In 1971, U.S. President Richard Nixon officially launched a “war on drugs,” declaring drug abuse to be “public enemy number one,” and requesting Congress to commit nearly \$400,000,000 to national and international efforts to address “drug abuse control.” A key justification for this commitment? Protection of children. As Nixon stated in his Congressional address announcing the war on drugs,

Narcotics addiction is a problem which afflicts both the body and the soul of America. . . . It comes quietly into homes and destroys children, it moves into neighborhoods and breaks the fiber of community which makes neighbors. . . . We must try to better understand the confusion and disillusion and despair that bring people, particularly young people, to the use of narcotics and dangerous drugs.¹

Forty years—and more than \$1 trillion later—there is widespread consensus that the war on drugs has failed, not just in the United States but also worldwide.² Notwithstanding, governments worldwide continue to support the same costly programs that do not work, and do so with policy support from UN drug control agencies. The justification, against all evidence of their effect to the contrary, continues to be child protection. As U.S. Department of Homeland Security Secretary Janet Napolitano recently stated,

This is something that is worth fighting for because drug addiction is about fighting for somebody’s life, a young child’s life, a teenager’s life, their ability to be a successful and productive adult. . . . If you think about it in those terms, that they are fighting for lives—and in Mexico they are literally fighting for lives as well from the violence standpoint—you realize the stakes are too high to let go.³

What Napolitano did not mention in her speech was that today, in the city of Juárez, Mexico, alone, there are 10,000 children who have been orphaned by the drug war violence.⁴ Napolitano’s comment highlights key flaws in drug war efforts to “protect” children. Not only has the war on drugs proved a costly failure in addressing drug addiction or use overall, including among young people, it has also caused significant harm to the health and lives of children and young people. Children are, indeed, “fighting for their lives”—but in many

cases, due to the very drug control efforts that are adopted in their name.

As some of the essays in this book describe, and as Human Rights Watch's work in Cambodia, the United States, Russia, and Thailand has shown, children often experience a wide range of human rights violations linked to drug control efforts. These include torture and ill treatment by police; extrajudicial killings; arbitrary detention; and denial of essential medicines and basic health services. Existing drug control policies, and accompanying enforcement practices, often entrench and exacerbate systematic discrimination against people who use drugs, and impede access to controlled essential medicines for those who need them for therapeutic purposes.

In some countries, children are detained in compulsory drug detention centers together with adults, and denied appropriate health, education, and other social services. In 2008, nearly one-quarter of detainees in Cambodia's compulsory drug detention centers were aged eighteen or below. They were detained alongside adults, forced to work, and physically abused.⁵ A sixteen-year-old detainee in one center reported "[A staff member] would use the cable to beat people. . . . On each whip the person's skin would come off and stick on the cable."⁶

Restrictive drug policies have not only had a pervasive effect on people who use drugs for recreational purposes or have a dependency on them, but also on those who need them for pain management. The World Health Organization estimates that 80 percent of the world's population, including tens of millions of people worldwide who suffer from moderate to severe pain, do not have adequate access to pain treatment. Much of their suffering could be prevented if morphine, an inexpensive, effective, and safe medication that is generally not difficult to administer, was available. However, in more than 150 countries around the world, access to morphine is virtually nonexistent,⁷ in part due to excessively strict drug control regulations.⁸ Children are doubly victimized by government failure to ensure access to pain relief: on the one hand, those who suffer pain cannot access direct relief and, on the other hand, children of parents denied treatment are denied parental support.⁹

Severe drug laws resulting in mass incarceration deprive thousands of children of their parents, and, in some cases, their access to social benefits, including public housing;¹⁰ and in some countries, a

disproportionate share of those incarcerated are poor racial or ethnic minorities.¹¹

Scant attention has been paid to whether drug control efforts are consistent with human rights protections, or indeed, to what extent they affect children and young people. *Children of the Drug War* makes a critical contribution to addressing this gap. Its mix of academic, journalistic, and first-person essays, and the wide-ranging, often hidden, issues they cover illustrate the many ways in which the war on drugs affects the lives and health of children, from production and trade through use. By placing children and young people at the forefront of this inquiry, this book compels us to consider, in a comprehensive way, the diverse ways in which drug policies affect them. It should also foster critical thinking and debate about whether current policies are indeed protecting children as government officials claim, and if not, how this approach could prove important in shaping emerging policy and practices. Every policymaker and decision maker should read it before defending current drug policies in the name of children.

Rebecca Schleifer
Advocacy Director
Health and Human Rights Division
Human Rights Watch, New York

Endnotes

1. President Richard Nixon, "Special Message to the Congress on Drug Abuse Prevention and Control," www.presidency.ucsb.edu/ws/?pid=3048/.
2. See, for example, United Nations Office on Drugs and Crime, *Drug Control, Crime Prevention and Criminal Justice: A Human Rights Perspective*, E/CN.7/2010/CRP.6–E/CN.15/2010/CRP.1, March 2010.
3. Martha Mendoza, "U.S. Drug War Has Met None of Its Goals," Associated Press, May 13, 2010, www.msnbc.msn.com/id/37134751/ns/us_news-security/.
4. Adriana Gómez Licón, "Juárez Violence Leaves Thousands of Children Orphaned, Traumatized," *El Paso Times*, October 10, 2010, www.elpasotimes.com/news/ci_16301040/.
5. Human Rights Watch, *Skin on the Cable: The Illegal Arrest, Arbitrary Detention and Torture of People Who Use Drugs in Cambodia*, January 25, 2010, www.hrw.org/en/reports/2010/01/25/skin-cable/.
6. M'noh, aged sixteen, describing whippings he witnessed in the Social Affairs "Youth Rehabilitation Center" in Choam Chao (Phnom Penh, Cambodia), in *ibid.*, 41.
7. Statement of Sevil Atasoy, president of the International Narcotics Control Board, to the United Nations Economic and Social Council, July 30, 2009, www.incb.org/documents/President_statements_09/2009_ECOSOC_Substantive_Session_published.pdf.
8. See Human Rights Watch, "'Please Do Not Make Us Suffer Anymore': Access to Pain Treatment as a Human Right," March 3, 2009, www.hrw.org/en/reports/2009/03/02/please-do-not-make-us-suffer-any-more/.
9. See Human Rights Watch, *Needless Pain: Government Failure to Provide Palliative Care for Children in Kenya*, September 9, 2010, www.hrw.org/en/reports/2010/09/09/needless-pain/; and Human Rights Watch, *Unbearable Pain: India's Obligation to Ensure Palliative Care*, October 28, 2009, www.hrw.org/en/reports/2009/10/28/unbearable-pain-0/.
10. See, for example, Human Rights Watch, *Collateral Casualties: Children of Incarcerated Drug Users in New York*, June 22, 2002, www.hrw.org/en/reports/2002/06/22/collateral-casualties-0/.
11. In the United States, for example, African-American men and women are sent to prison for drug charges at rates many times that of their white counterparts and the application of mandatory minimum sentencing often subjects them to equal or harsher penalties than the principals of the drug trade. See Human Rights Watch, *Decades of Disparity: Drug Arrests and Race in the United States*, 2009; Human Rights Watch, *Targeting Blacks: Drug Law Enforcement and Race in the United States*, 2008; American Civil Liberties Union, *Break the Chains*, and the Brennan Center at New York University School of Law, *Caught in the Net: The Impact of Drug Policies on Women and Families* (New York, 2006).

Introduction: Counting the Costs of the Children's Drug War

Damon Barrett

The drugs law will save our children and young generation . . .

Andi Mattalatta,
Indonesian Law and Human Rights Minister¹

We are all children of the drug war. While the term was coined by President Richard Nixon in the 1970s, the seeds of the “war on drugs” had been sown many decades earlier. International drug conventions began to be adopted at the turn of the twentieth century, and the bedrock of the international system of drug control, the Single Convention on Narcotic Drugs, is fifty years old in 2011.² Certainly, for any of those born in the latter half of the twentieth century, whether they noticed it or not, they were growing up in the midst of the war on drugs.³ Whether they noticed depends on many things, in particular, where they grew up and under what conditions. For some it depends on who they are. This book is about the impact of the war on drugs on children, young people, and their families today, and the policy questions raised when children are placed at the forefront of the debate.

Whether or not to reform drug laws is not the focal debate of this book. That is a debate that has been widely covered.⁴ Indeed, at the time of writing it is high on the agenda in various parts of Europe and Latin America, as well as the United States and Australia.⁵ In October 2010, the UN Special Rapporteur on the Right to Health, Anand Grover, submitted a report to the UN General Assembly calling for an overhaul of the international drug control system.⁶ At present, more than 17,000 individuals and organizations, including ex-presidents and Nobel laureates, have signed the Vienna Declaration—a global call for a fundamental shift in drug policy in order to tackle HIV/AIDS.⁷ And in November 2010, Californians went to the polls to vote on proposition 19 to legalize, tax, and regulate cannabis sales. It lost by a narrow margin, and is expected to be tabled again in 2012, along with similar propositions in multiple states.

It is accepted that change is needed, but how should laws and policies be reformulated if children and young people are, this time, to

be at the forefront? What must be avoided? What must be taken into account? What principles would underpin those policies? The chapters in this book deal with these questions in various ways—some directly, others indirectly by looking at specific issues and concerns. Though the book is divided into four thematic sections, three crosscutting questions may assist in guiding the reader through each section and chapter:

- What have been the costs to children of the “war on drugs”?
- Is the protection of children from drugs a solid justification for current policies?
- What kinds of public fears and preconceptions exist in relation to drugs and the drug trade?

In each case, the policy implications of asking and answering these questions should be considered.

Counting the Costs

To begin with there is a basic need to take stock—to count the costs.⁸ This necessitates a closer look at what really matters in terms of outcomes.⁹ Indeed, it is the way in which “success” has been measured in drug control that has led to some of the strongest criticism. The number of people who use drugs, the amount of kilos of drugs seized, prosecutions secured, and hectares of illicit crops eradicated are some of the key indicators in this regard.¹⁰ But while these indicators can be useful,¹¹ they are, for the most part, indicators of means, not ends. This is not often recognized, and in the prominence given to such measurements, drug control has, over time, become self-referential and self-perpetuating; a positive feedback loop in which the fight against drugs is an end in itself.¹²

Counting the costs to children is about breaking that loop as the process of investigating the harms of the war on drugs can help to delineate between means and ends and provide an insight into the question of meaningful outcomes. Children’s and families’ involvement in drug production and trade, for example, is a mix of coercive forces, often driven or even necessitated by poverty and social neglect.¹³ These drivers are all but ignored and even exacerbated by current drug policies that focus on eradication and interdiction, as some of the chapters in this book show.¹⁴ Success in dealing with

production and trade is for the most part measured in prosecutions, kilos, and hectares. But given such social and economic determinants of involvement in the trade, are these appropriate responses and metrics?

A similar question arises in the context of drug dependence, given contemporary theories about structural and social determinants of dependence and drug-related harm.¹⁵ Are criminal laws an appropriate response? Is the number of people who use drugs an important indicator, or should we be more concerned about drug-related harms such as overdose, crime rates, and blood-borne viruses? These questions pose important challenges to current approaches to drug control, given the international framework and the national systems it has spawned, because they demand that we revisit priorities.¹⁶ In short, counting the costs of the children's drug war both challenges current approaches and contributes to the debate around what goals drug policies should be striving toward. It is no easy task, and requires more qualitative analyses alongside a framework of indicators that relates more closely to quality of life and well-being.

Looking beyond the limits of international drug laws, and refocusing the debate back to what drug control should be achieving, Steve Rolles, in "After the War on Drugs," considers alternative models of control and how such models would better protect children from drugs. The rhetoric of "protecting children" from the "scourge" of drugs is, however, a strong barrier to even beginning these discussions.

The Rhetoric of "Threat"

For many the "war on drugs" is a fitting analogy for the scale of the damage policies have caused, their transnational nature, and the financial and human costs. For some, however, the war is all too real, as some of the chapters in this book illustrate.¹⁷ For critics, the war on drugs is used in the pejorative to draw attention to a disastrous, international error, or to highlight a ruse adopted in the pursuit of hidden agendas.¹⁸ Children often provide a trump card against such criticisms, justification for whatever policies may be employed in the name of tackling addiction and fighting the drug trade. Children, after all, are our future, "our most precious asset."¹⁹ Nothing less than our very way of life is at stake in combating this "evil." This is not an overstatement of the political rhetoric. It is reflected in the core

international drug control treaties ratified by almost every state on the planet.²⁰

Of course, it is difficult to think of a better goal than the protection of children. But the rhetoric of protecting children from drugs can be unhelpful if it obscures reality. For policymakers and politicians the simple message is useful. It is more easily understood by the general public than some of the more counterintuitive yet evidence-based responses available, such as harm reduction.²¹ It makes for engaging press copy. It speaks to our fears (particularly as parents), to our prejudices, and to our ignorance. As such it is misleading. It does not speak to the complex realities of drug use (including culture, peer pressure, sex, pleasure, aspiration, experimentation, and fashion) or to the underlying determinants of dependence and drug-related harm such as social exclusion, mental health, inequality, and poverty. These concerns, while acknowledged in various international declarations, are often mere footnotes in actual responses, overshadowed by the law enforcement–based responses necessitated by the rhetoric of struggle against a perpetual threat.

While the reasons for drug use among young people remain hotly debated,²² the assumption underpinning most countries' responses to drug use is that it is in all cases aberrant or deviant behavior, and always harmful, always a threat. But while drug use among young people can be an indicator of later problems, experimenting with drugs is becoming increasingly common among young people, and most young people who experiment with drugs or use them recreationally do not develop serious drug problems.²³ While universal prevention measures have little role in preventing drug use among those at most risk of dependence and drug-related harms,²⁴ measures that focus on the worst-case scenario fail to speak to the lived experiences of recreational users.²⁵ Accepting this reality and responding to it, however, may require a level of tolerance in policy that the current rhetorical posturing does not readily allow.²⁶

Fears, Preconceptions, and Policy

Public support for “get tough” policies is widespread. A 2010 poll, for example, showed that 80 percent of the Mexican public supports the government's militarized confrontation of the drug cartels despite the violence that has ensued.²⁷ In Thailand, in 2003, a government-

sanctioned war on drugs left over 2,000 people dead—many with no connection to the drug trade.²⁸ Again, this had widespread public support. In Mauritius, during the 2010 elections there was widespread support for reintroducing the death penalty for drug trafficking. The fears and ideas that underlie moral panics relating to drugs and result in instinctive support for crackdowns are understandable. But when unpacked and challenged, they provide important insights into current drug policies. Through the diverse chapters in this book, especially those in which personal perspectives are presented, it is hoped that some of these preconceptions and assumptions around drugs and those involved in the drug trade will be challenged, and discussion of the policy implications of challenging them encouraged.

There is no doubt, for example, that problematic parental drug dependence places children at increased risk of neglect and abuse.²⁹ But for many it is difficult to accept that not all people who use drugs are bad parents, or that drug use and child neglect is not a straightforward equation. “Ants Facing an Elephant,” by Kathleen Kenny and Amy Druker, considers an aspect of this debate, focusing on women who have lost custody of their children to child protection services.

Many see the massive, violent, and destructive drug trade as simply organized crime run by evildoers. Far more troubling is the reality that it is a function of prohibition itself, though this is accepted as fact at high levels.³⁰ In turn, people involved in the production of illicit crops are frequently equated with drug traffickers, seen as greedy, willful criminals. “In the Shadows of the Insurgency in Afghanistan” is a case study on the scale of poverty in which opium poppy farmers live, while “Real Life on the Frontlines of Colombia’s Drug War,” based on interviews with children and young people in Colombia, tells a similar story in relation to coca production.

The idea of drug users and dealers as some form of “other” is common.³¹ It is easier to accept the shadowy “drug pusher” lurking on the school playground³² than the reality that most young people experience drug use for the first time via their siblings, sexual partners, or peers.³³ But this is the reality for many and it questions who the “enemy” is in this “war.” On this issue, see “Under Cover of Privilege” on college drug dealing by A. Rafik Mohamed and Erik Fritsvold, set against “Getting the Message,” Deborah Peterson Small’s study of messages about the impacts of the drug war on black and Latino communities told through

hip-hop. Through these chapters we get an insight into those young people who experience the drug war, and those for whom it is of no concern.

“Dancing with Despair,” “Mothers and Children of the Drug War,” and “Between Diego and Mario,” meanwhile, focus on the effects of law enforcement and incarceration on families in the United States, Ecuador, and Indonesia. In these personal stories, the users, dealers, mules and prisoners are by no means “other.” They are parents, siblings and children.

Structure of the Book

With the exception of one chapter,³⁴ *Children of the Drug War* consists entirely of original pieces. The chapters are diverse in many ways: geographic origin, discipline, and, of course, subject matter. Each author has his or her own writing style. Some pieces are academic, others are interview-based; still others are more narrative or journalistic. Most of the chapters were included following a call for papers in late 2009. Others were invited, and three are based on interviews specifically commissioned for the book.³⁵

There are four thematic sections: production and trade; race, class, and law enforcement; families and drug policy; and children, drug use, and dependence. Many chapters could sit comfortably in a different section; some could straddle three or even all four. They were, however, the best way to group an array of very different contributions in a manner that covered drug control from production to use, and that helped to highlight important policy considerations. The themes are interrelated and should be read as such, bearing in mind the three broad, crosscutting questions raised in this introduction.

Part 1, *Frontlines: Production and Trade*, focuses on production and eradication, trade and interdiction, and the debate around alternative frameworks of legal regulation of drugs. These are well-worn topics, but the chapters presented here offer new insights, focusing entirely on children and young people and the specific risks and harms they face.

The chapters in Part 2, *Targets: Race, Class, and Law Enforcement*, consider the situation of children and young people who are the targets of drug law enforcement, and those who, by virtue of pedigree,

race, or economic status, are not. They paint a picture of soft-target law enforcement, disenfranchisement of new generations, and the privilege of race and class in escaping the drug war.

Part 3, *Home Front: Families and Drug Policy*, is central to the drug policy discussion relating to children. The family, after all, is crucial to the child's development and well-being. The chapters in this section consider the effects of policies on families, rather than drug use or the drug trade per se. A main focus is incarceration, while policies relating to child custody, policing, and drug dependence are also touched upon.

The final section, Part 4, *Justification: Children, Drug Use, and Dependence*, contains a collection of essays asking what we know and what we do not know about drug use among young people, and what the answers to these questions mean for policy responses. The chapters tackle three broad areas: recreational use, which makes up the majority of drug use among young people but is largely neglected in policy responses; problematic drug use around which most demand reduction policies and harm reduction interventions are framed; and finally, access to opiates for palliative care, which has suffered due to a range of factors including overly strict narcotics laws and a disproportionate focus on addiction.

Each part begins with a more detailed introduction to present its chapters and the issues raised. It is not intended, however, nor is it possible, to cover all aspects of this enormous debate. The book is clearly not comprehensive. Readers are encouraged to bear in mind not just the problems of the present, but what these questions mean for the policies of the future. As such, each part concludes with questions for further study and debate.

The diversity of the subject matter covered in this book is intentional. Very often issues relating to drugs are considered in isolation. While it is easy to see the connections between drug use, sale, transit and production as a supply chain, the harms associated with these various stages and the policies aimed at dealing with them are not so often connected. HIV related to injecting drug use, for example, is rarely connected to production issues, while drug related violence in Mexico or Brazil is not seen to be related to public health concerns such as the lack of access to controlled medicines for palliative care. But these harms are interconnected. And only when they are seen in this way is the scale of the drug war visible. These connections are not drawn

explicitly below, however. It is for the reader to identify them and draw his or her own conclusions.

Endnotes

1. Andi Mattalatta, Indonesian Law and Human Rights minister on the adoption of the country's much criticized narcotics law of 2009. "Indonesia's Parliament Enacts Drugs Law," *Xinhua*, September 14, 2009. One of the many provisions of concern to human rights groups included potential imprisonment of parents for six months for not reporting their children's drug use to the authorities. See *Jakarta Post*, "Drug Addicts Branded as Criminals Under New Law," September 15, 2009.
2. The Single Convention codified numerous international drug conventions dating back to 1912, and extended their scope. Not all of them, however, adopted the approach we see today. The 1931 Opium Convention, for example, created a model of state-controlled supply.
3. "War on drugs" is not used officially by many governments and was recently abandoned by the Obama administration. It is used here to collectively describe the international punitive and prohibitionist approach to drug control, rooted in law enforcement and supply reduction, which has dominated international and national policy for many decades.
4. See, for example, K. Malinowska-Sempruch and Sarah Gallagher, eds., *War on Drugs, HIV/AIDS and Human Rights* (New York and Amsterdam: International Debate Education Association, 2004).
5. For an overview of media coverage of the "decriminalization" debate in the United Kingdom in August 2010, see <http://transform-drugs.blogspot.com/2010/08/follow-up-prof-ian-gilmore-for-de.html>.
6. UN General Assembly, *Report of the Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health*, UN Doc. No. A/65/255, August 6, 2010.
7. See www.viennadeclaration.com.
8. See www.countthecosts.org.
9. See UN General Assembly, *Report of the Special Rapporteur*, para. 71 and 72. See also D. Barrett and M. Nowak, "The United Nations and Drug Policy: Towards a Human Rights-Based Approach," in *The Diversity Of International Law: Essays in Honour of Professor Kalliopi K. Koufa*, ed., Aristotle Constantinides and Nikos Zaikos, 449–77 (Hague: Brill/Martinus Nijhoff, 2009), 468, 469.
10. See the annual *World Drug Report* produced by the UN Office on Drugs and Crime for examples of such figures. In 2009, the report improved on previous years, which contained data weaknesses. It includes a section dedicated to young people. The *World Drug Report's* summaries of drug-trafficking routes are very useful—though different in character from the indicators referred to here. The annual world drug report is available at www.unodc.org/unodc/en/data-and-analysis/WDR.html?ref=menuaside/.
11. For example, those relating to drug use among young people. Early drug use can lead to later negative social and health outcomes, while young people's drug use is also a useful gauge of drug trends. See UN Office on Drugs and Crime, *World Drug Report 2009*, 23.
12. See further in Barrett and Nowak, "The United Nations and Drug Policy"; and D. Barrett, "Security, Development and Human Rights: Legal, Policy and Normative Challenges for the International Drug Control System," *International Journal of Drug Policy* 21 (2010): 140–44.

13. See chapters 1 on Colombia, 3 on Afghanistan, 5 on the United States, 7 on Brazil, and 9 on Ecuador. Materialism, however, and the desire of wealth and status cannot be discounted. See chapter 6 on college drug dealing.
14. See for example chapters 1, 3, and 7.
15. See, for example, B. Alexander, *The Globalisation of Addiction: A Study in Poverty of the Spirit* (Oxford: Oxford University Press, 2008); R. Wilkinson and M. Marmot, *The Social Determinants of Health: The Solid Facts* (Geneva: World Health Organization, 2003), 24–26; T. Rhodes, “Risk Environments and Drug Harms: A Social Science for Harm Reduction Approach,” *International Journal of Drug Policy* 20, no. 3 (2009): 196.
16. The 2009 Political Declaration on drug control adopted by the UN Commission on Narcotic Drugs and approved by the General Assembly makes some small progress in this regard due to the efforts of a number of states seeking better-informed and more rights-based policies. See, for example, sections D.3 and D.4 on alternative development. “Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem,” adopted at the High Level Segment of the UN Commission on Narcotic Drugs, March 11–12, 2009.
17. See, for example, chapter 2 on drug-related violence in Mexico, as well as chapter 1 on Colombia and chapter 7 on Brazil.
18. Among these, strengthening foreign positions and scoring easy political points are frequently cited. Indeed, many politicians around the world have run on a “tough on drugs” platform. Recently, the Mauritian prime minister, for example, ran for reelection promising to reinstate the death penalty for drug trafficking. He was duly reelected.
19. “Preamble. Political Declaration and Plan of Action.”
20. See the preambles to the 1961 Single Convention on Narcotic Drugs and the 1988 Convention Against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances. The 1961 Convention, for example, recognizes that “addiction to narcotic drugs constitutes a serious evil for the individual and is fraught with social and economic danger to mankind.” Single Convention on Narcotic Drugs, 1961, New York, March 30, 1961, United Nations, *Treaty Series*, vol. 520, p. 151 and vol. 557 (corrigendum on vol. 520), p. 280; Convention Against Psychotropic Substances, February 21, 1971, United Nations, *Treaty Series*, vol. 1019, p. 175; Convention Against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances, December 2-. 1988, United Nations, *Treaty Series*, vol. 1582, p. 95.
21. See International Harm Reduction Association, *What Is Harm Reduction?* 2010, www.ihra.net/what-is-harm-reduction/.
22. See, for example, the analysis of the “normalization” debate in F. Measham and M. Shiner, “The Legacy of ‘Normalisation’: The Role of Classical and Contemporary Criminological Theory in Understanding Young People’s Drug Use,” *International Journal of Drug Policy* 20, no. 6: 502–8.
23. European Monitoring Centre on Drug and Drug Addiction, “Drug Use Amongst Vulnerable Young People: Prevention Strategies Need to Target Young People Most at Risk,” 2003, www.emcdda.europa.eu/publications/drugs-in-focus/vulnerable-young/. See also chapter 12 by Catherine Cook and Adam Fletcher.
24. European Monitoring Centre on Drug and Drug Addiction, *Drug Use Amongst Vulnerable Young People*. See also chapter 14 on random school drug testing.
25. “There is an openness among youth to information, if it is factual and does not contrast too sharply with their personal experience of drugs. Scare tactics used in some information material do not serve the purpose for which they are intended, but rather significantly reduce the trust that youth may have in the advice of adults and in some case even encourage risky behaviours.” UN Commission on Narcotic Drugs, *Youth and Drugs: A Global Overview*, Report of the Secretariat, UN Doc. No. E/CN.7/1999/8, para. 65(f).
26. See chapter 13 by Michael Shiner.

27. Pew Research Centre, *Mexicans Continue Support for Drug War*, August 12, 2010, <http://pewglobal.org/2010/08/12/mexicans-continue-support-for-drug-war/>.
28. Human Rights Watch, "Not Enough Graves: The War on Drugs, HIV/AIDS, and Violations of Human Rights," vol. 16, no. 8(C) (June 2004), www.hrw.org/en/reports/2004/07/07/not-enough-graves/.
29. For more on this, see the introduction to Part 4.
30. See UN Office on Drugs and Crime, *Making Drug Control Fit for Purpose: Building on the UNGASS Decade*, UN Doc. No. E/CN.7/2008/CRP.17, March 7, 2008.
31. On this, see the speech of former executive director of the International AIDS Society, Craig McClure, "Harm Reduction 2009: Harm Reduction and Human Rights," International Human Rights Association's Twentieth International Harm Reduction Conference, Bangkok, April 2009.
32. The 1988 Convention Against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances includes in its list of "particularly serious crimes" the sale of drugs in, or in the immediate vicinity of, schools. Article 3(5)(g).
33. See chapter 15 on the life stories of eight heroin users in Serbia.
34. Chapter 6 is based on a book, and was invited for this collection. A. Rafik Mohamed and Erik Fritsvold, *Dorm Room Dealers: Drugs and the Privileges of Race and Class* (Boulder, CO: Lynne Rienner, 2009).
35. Chapters 1, 3, and 10.