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communicating international development research

Tackling drugs to reduce poverty

The United Nations Office of Drug Control claimed in 2006 that 'Drug control is working and the world drug problem is being contained'. Yet the scale and diversity of the illicit global drug trade has increased in the last decade, as have rates of drug use in most countries.

Global estimates suggest there are nearly 200 million illicit drug users (five percent of the world's adult population) and over 13 million injecting drug users (IDUs), of whom 80 percent live in developing or transitional countries. The true magnitude of the global drug use problem is probably far greater. Around 10 percent of new HIV infections worldwide are linked with drug injecting, whilst 0.5 percent of deaths globally are due to illicit drug use and almost nine percent from tobacco.

The links between drugs and development

Drug use and production and attempts to control them are connected to poverty. International drug control efforts are based largely on the premise that enforcement against drug producers, traffickers and users may lead to the reduction and eradication of illicit drug markets and associated social, health and economic harm. Yet there is increasing concern about the balance between policies favouring eradication and those accepting the need to better manage drugs production and use in order to reduce risks to health and development. For example, crop eradication programmes in South-East Asia, Colombia and Afghanistan have been linked with increasing poverty among poppy and coca farmers, accelerated deforestation and social discontent, and in some instances have exacerbated armed conflict. Crop eradication without effective development initiatives threatens to reduce development potential. Tough law enforcement may aggravate the social and human costs of illicit drug use and related trade.

This issue of *id21 insights health* debates the links between drugs and development. **David Mansfield** reminds us that development initiatives are often blind to the economic plight of illicit drug



producers. **Kelley Lee** highlights how tobacco farmers too are often exploited in their attempts for economic survival. **Susan Beckerleg** argues that the khat industry in East Africa is at 'full capacity', with eradication attempts potentially causing greater overall harm than a well regulated industry. As **Axel Klein** describes in St. Vincent, law enforcement interventions can bring unintended negative consequences for health and development.

Equally important, **Chris Lyttleton** and **Patrick Griffiths** highlight how mainstream development sometimes worsens existing drug problems. The

Lancing opium poppy in the Chaghcharan district of Ghor province in central Afghanistan. Carefully selecting and cutting opium poppy requires skill and experience. In Ghor knowledge of the crop is limited and in 2006 the crop largely failed. In Ghor both plants and capsules are small and the yield is typically less than 5 kg per hectare David Mansfield, 2006

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pressures of increasing engagement with the global economy have led to new markets for illicit and legal drug use. **Sheryl McCurdy** and colleagues report how in sub-Saharan Africa rapid social and economic change in the 1980s and 1990s have increased alcohol consumption. **David Macdonald** and **Mohammad Zafar** illustrate how 25 years of conflict in Afghanistan has sustained drug use and production and has required strategies that integrate both demand and harm reduction.

These articles highlight firstly the importance of integrating drug control within a development framework, and secondly, the need to give greater commitment to the reduction of drug-related harm alongside an existing tradition of law enforcement

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Development in a drugs environment

Many illicit drug growers are poor, vulnerable to unfair laws and arrangements and exploited by criminals and corrupt officials. However, many development programmes still ignore their plight. How can policymakers and practitioners help these forgotten people?

Illicit drug growers are often subject to inequitable land tenure and credit arrangements that mean they receive only a share of the final crop or are even forced to sell their share in advance at prices well below the harvest time rate.

Growers pay high rates for inputs and receive low prices for their opium poppy or coca crops due to their distance from legal markets and lack of regulation. Growers find themselves 'taxed' by criminals, insurgents or warlords, or even government officials. The end result is that the gross returns per hectare do not reflect the actual incomes received by the majority of opium poppy and coca producing households.

- In Myanmar and Lao People's Democratic Republic (Lao PDR), opium producing households earn around US\$200 a year.
- In Vietnam, highland communities growing opium poppy have the lowest household incomes in the country.
- In Buner and the Eastern Dir valley in Pakistan, the average per capita income was half the national average at a time when opium poppy cultivation in these areas was at its most prolific.
- In Afghanistan, even the relatively wealthy who may receive a higher return on opium poppy through their control of land and financial assets, still earn little more than a dollar a day in cash income per head of household.

In Afghanistan, opium poppy cultivation is most concentrated amongst households with limited access to irrigated land. These areas have the highest population densities and the highest levels of food insecurity. Provinces where cultivation is concentrated, as in Helmand and Nangarhar, are remote with few government services and where farmers are exploited by local warlords.



There are few income opportunities apart from growing opium poppy. Indeed, in many areas of intense cultivation, opium poppy farmers are given preferential, if not sole, access to land, credit and off-farm income.

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In Nangarhar, Afghanistan, 11 year old Awaz Khan weighs a chunk of opium, wrapped in leaves, which was given to him by his father as pocket money. It's worth about US\$40, money that he will use to buy new clothes, a tea glass and presents for Eid, the celebration of the end of Ramadan. He also wants to throw a party for his friends Jeroen Oerlemans/Panos Pictures, 2004

In Colombia, poverty is more prevalent in areas where people grow coca illegally. Narino, Meta and Caqueta are all areas of intensive coca cultivation, with many people in extreme poverty, high infant mortality rates and widespread malnutrition. Infrastructure, access to water and government health and social services are limited.

While over 90 percent of households in drug crop growing areas depend on agriculture for their livelihoods, the farming sector is structurally weak, with poor marketing, small landholdings, no credit facilities, and little irrigation. A combination of environmental degradation and poor agricultural practices also means low quality inputs or low yields, leading to greater reliance on opium and coca as a means of ensuring survival.

In countries like Colombia, Myanmar and Afghanistan, illicit drug crop cultivation has become closely connected with conflict. This conflict typically takes the form of disputes over resources between socioeconomic and ethnic groups. However, in places like Lao PDR, Peru, Pakistan and Thailand, armed conflict has occurred in

US-funded anti-drugs road being constructed at the northernmost tip of Lao PDR near the China border. Roads are being constructed to improve access to remote villages as part of integrated rural development projects that seek to provide viable alternative livelihoods for some of the poorest rural communities.

Chris Stowers/Panos Pictures

areas of illicit drug crop cultivation leaving farmers vulnerable to intimidation and violence from the state and other groups.

Taking action

The so-called 'lucrative' drugs trade has not led to economic and social development. Those growing illicit drug crops continue to fall outside the mandate of mainstream development and are a problem for many policymakers and practitioners. Does engagement with the drugs issue fit the values and remit of development organisations?

Development workers often assume opium poppy and coca producing households are wealthy. This ignores unfair land tenure, labour and credit arrangements, and the detrimental impact these have on the economic returns from agriculture. There is much to be done to convince the wider development community to engage in an area where it has a clear mandate.

No single project can address the many motivations and factors that influence illicit drug crop cultivation (even at a local level). The elimination of coca and opium poppy depends on the achievement of broader development goals, including: establishing the institutions required for formal governance and promoting civil society; strengthening social protection mechanisms; and encouraging legal income opportunities.

There is a need for a broader ownership of the drug control agenda by national, bilateral, multilateral and non-government organisations, not just specialist drug control agencies. Already, development practitioners and experts are referring to 'development in a drugs environment': an approach that seeks to mainstream drugs control as a cross cutting issue within national development programmes.

The objectives are to:

- ensure that, where relevant, development programmes address the causes of the illicit drug problem in source countries
- ensure that development programmes are designed and implemented to maximise their potential impact on containing production, trade, and consumption of illicit drugs
- ensure that projects or activities don't worsen the existing drugs problem
- work in areas where opium poppies and coca are grown or with socio-economic groups most dependent on opium poppies as a source of livelihood
- help build cooperation between activities that might maximise development and counter narcotics impact

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See also

'Responding to the Challenge of Diversity in Opium Poppy Cultivation in Afghanistan', by David Mansfield, in *Afghanistan: Drugs Industry and Counter Narcotics Policy*, UNODC/World Bank: Kabul, edited by William Byrd and Doris Buddenberg, November 2006

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Growing cannabis in St. Vincent and the Grenadines

It is estimated that the island of St. Vincent in the Caribbean, with a population of just over 100,000, has more than 2,500 cannabis cultivators, mainly in the foothills of La Soufrière Volcano. After the demise of the banana economy in the early 21st Century, marijuana has become a safety net for many islanders.

Marijuana cultivation is initially attractive because three crops can be produced each year, with small holders earning up to US\$10,000. After harvest, the marijuana is transported to the coast and sold to exporters, many from nearby islands. This is a risky business, with farmers often cheated by traders, arrested by security forces or robbed by rivals or pirates at sea.

Illicit drugs export has exposed the government to international pressure. Eradication exercises, supported in 1998 and 1999 by United States military helicopters, have pushed farmers further up the mountains, causing deforestation, the loss of topsoil, the silting up of rivers and marine sedimentation. In the late 1990s, with an increase in rural poverty, urban crime and the importation of cocaine, marijuana farmers staged organised protests. A new government promised change and has engaged with marijuana cultivators through an Integrated Forest Management Programme. The programme promotes the sustainable use of forest resources and alternative livelihoods for marijuana planters.

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The scheme has had some success in getting farmers into alternative work such as charcoal burning. Farmers are happy to trade in the profits from marijuana for the security of alternatives. However, after being arrested on marijuana possession charges, many are unable to find employment in the service sector or to emigrate: the traditional exit strategy for rural poor people across the Caribbean.

Combined law enforcement measures have had unintended consequences:

- They have created a class of disenfranchised young men with few alternatives in the legal economy.
- In the hills, farmers face chronic insecurity, and have little opportunity to leave the marijuana economy.
- Eradication is driving farmers further into the rain forest.

Policymakers need to shift their focus from the illicit drug to developing alternative livelihoods, managing forest resources and engaging with

young people. Options include:

- a ban on all cultivation above 1,000 feet and in low lying water catchment areas
- recruit marijuana farmers into reforestation activities
- train farmers in forest resources management and alternative crops
- divert young and drug offenders from prison and rehabilitate them in the community to prevent reoffending.

In the past development partners have concentrated upon eradication and law enforcement at the expense of alternative development. Donor agencies must engage with the main cultivators and carefully consider the livelihoods of rural communities, while intervening in urban areas to prevent the steady trickle of young offenders into the marijuana hill farms.

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See also

'The Ganja Industry and Alternative Development in St. Vincent and the Grenadines', by Axel Klein, pages 224-244, in *Caribbean Drugs, From Criminalization* to *Harm Reduction*, London: Zed, edited by Axel Klein, Marcus Day and Anthony Harriott, 2004

The khat industry at full capacity in eastern Africa

Khat (Catha edulis), a plant found Across much of highland eastern Africa, is chewed for its stimulant and euphoric qualities. It is legal in Ethiopia, Djibouti, Kenya and Uganda, but is illegal in Tanzania. It is imported into Somalia daily, but has been blamed for fuelling the war and chaos there.

Controversy surrounds khat with some arguing that using it seriously affects the health, sanity and social well-being of consumers and their families. Others deny that khat causes any significant harm, arguing that it provides much needed income to those who produce and trade the plant.

As the consumption of khat has increased. the supply of khat leaves and twigs has kept pace with growing consumer demand. In the Ethiopian region of Harerege the production of khat has grown steadily over the past 50 years, while coffee production has declined over the same period. In 1975, khat and coffee each covered 6.6 percent of the land under cultivation. By 2000, khat had risen to 18.4 percent compared to 4 percent for coffee. Ethiopian khat farmers have been found to have a higher level of food security than non-khat growers. In 2004, 25.4 percent of Ethiopian khat growers were self-sufficient compared to 11.4 percent of non-khat growers.

In Kenya, khat production, centred mainly in the Nyambene Hills, is responsible

for the economic prosperity of the Igembe and Tigania clans of the Meru. However, growing areas in Kenya are spreading beyond the Nyambene Hills and drawing more people into the industry. Wild khat is also harvested in parts of Kenya and Uganda.

One striking aspect of the khat industry is the remarkable distribution system that links producer and consumer. Khat must reach consumers

rapidly because cathinone, an active ingredient, degrades within 48 hours of it being picked. It is transported by road and air to cities and remote hamlets. It is also exported from Nairobi and Addis Ababa to London and other markets in Europe and North America. The UK government recently decided to keep khat legal. However, upon reaching many European countries and North America, khat becomes contraband.

In its main production countries, khat is a legal substance that contributes to the local economy. Khat production, distribution and production takes place without the benefit of agricultural extension services, tax breaks, or any other conventional development assistance. The distribution system should be the envy of any logistics officer working in eastern Africa. It is an industry that operates at full capacity.

Rather than ignoring or trying to suppress



In the remote, arid and insecure Karamoja region of eastern Uganda income is derived from khat brought down from the mountains and sent to towns across the country Susan Beckerleg, 2005

the khat industry, governments should consider the potential economic benefits of supporting khat production. A well regulated industry will produce tax revenues and boost export income, as

in Ethiopia. However, khat is not harmless and users require accurate information concerning the likely effects of prolonged heavy use

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See also

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'A View from the Refugee Camps: New Somali Khat Use in Kenya', *Drugs and Alcohol Today* 5(3), pages 25-27, by Susan Beckerleg and Nuur Sheekh, 2005 www.pavpub.com/pavpub/journals/DAT/index.asp

Uneven development stimulates drug consumption in South-East Asia

United Nations-supported development policies have focused on eradicating the production and trade of illicit drugs in South-East Asia. However, tensions between development initiatives and those seeking to control the trade have created changing patterns of drug consumption.

Since the mid-1990s, donor-funded alternative development programmes in Lao People's Democratic Republic (Lao PDR) have attempted to reduce opium cultivation and use amongst ethnic highlanders. In addition to local consumption, they grew opium poppies as an economic buffer against rice shortages. Substitution projects were mostly unsuccessful until the government, backed by the United Nations, insisted on almost total eradication in 2003.

Highlanders have had to find alternative ways to make a living. In northern Lao PDR, this has prompted people to migrate to lowland areas in search of wage labour employment. It has also encouraged new forms of substance use that help highlanders deal with lowland life. Highlanders take methamphetamines to help them deal with the pressures of their changing work environments and greater engagement with the market economy.

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The impact of development on drug consumption is often overlooked. The Nam Theun 2 dam project in Lao PDR is one example. Extensive social risk assessments considered the project's associated sexually transmitted HIV threat, but paid no attention to possible drug use. This is despite the dam being built close to heroin routes into Viet Nam, which is likely to attract workers from Viet Nam, where heroin injection is more common.

Looking to the future?

Viet Nam provides clues as to what Lao PDR's post-opium HIV environment may resemble. Coinciding with regional geopolitical changes, transport modernisation, the growth in plastic syringes and forced opium eradication, heroin flooded Viet Nam in the mid-1990s. As in Thailand and Myanmar, the growth in heroin injecting in Viet Nam increased the risk of HIV infection. Seroprevalence rates among injecting drug users who tested positive for HIV in Viet Nam had been declining until 1996. However, rates rose to between 60 and 85 percent in several provinces as easy-to-use heroin replaced liquid opium, which had been injected by mainly older men. Development agencies were too slow in responding. Fears are now growing that methamphetamine dealers will target Viet Nam's young people.

Experiences from across South-East Asia suggest that:

- drugs must be placed at the centre of development agendas
- development planning must anticipate changing patterns of drug use within new risk environments rather than reproducing falsely optimistic goals of universal eradication

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Pushing tobacco control up the development agenda

Tobacco kills around 5 million people each year and remains the leading cause of preventable death worldwide.

Smoking causes approximately 25 diseases including numerous cancers. Yet despite the wealth of knowledge about its harmful effects, the public health community continues to struggle to control tobacco use.

Today, tobacco companies are earning record profits, largely by shifting their attention to 'emerging markets' such as China and Central Asia. By 2030, 70 percent of the 10 million tobacco-related deaths predicted will occur in developing countries. Tobacco control needs to be understood as a development issue, requiring policy action beyond the health sector. How can the development community help tackle what the World Health Organization calls the global tobacco pandemic?

Tobacco and exploitation

Internal tobacco industry documents reveal several ways that development is undermined by tobacco. Research shows a clear link between using tobacco and poverty, with the cost of consumption falling on poor people and countries. Research by the London School of Hygiene and Tropical Medicine (LSHTM) also shows that the production of tobacco contributes to poverty. Research in Uzbekistan, Kenya and Brazil found that companies pay unnecessarily low prices to contracted tobacco farmers. In many countries, farmers are also obliged to purchase seed and other inputs, including hazardous pesticides, from these companies.

This ability to exploit farmers comes from the increased concentration of ownership in the hands of a few transnational companies. This has undermined the capacity of small farmers to negotiate better working conditions and prices. This is evident in the takeover of numerous state-owned monopolies across Asia, Africa, Latin America and the former Soviet Union, facilitated by promises of foreign investment and job creation. However, World Bank research indicates that the tobacco industry inflicts a net cost on societies when all social and environmental factors are fully considered. This challenges the argument that tobacco makes good economic sense to developing economies.

The tobacco industry's portrayal of itself as a responsible investor in the developing

world is further undermined by internal documents describing its complicity in cigarette smuggling. LSHTM

Workers in a cigarette factory in Surabaya, Indonesia. Each cigarette is trimmed at either end by hand. The tobacco industry is Indonesia's second largest employer after the government. Tobacco is the Indonesian government's largest source of revenue after oil, gas, and timber. The WHO estimates that 57,000 Indonesians die each year as a result of tobacco use. *Chris Stowers/Panos Pictures* research in Viet Nam describes how British American Tobacco (BAT) used the promise of import substitution and export growth to negotiate a joint venture. At the same time, documents describe how BAT supplied billions of cigarettes to transit agents for smuggling into Viet Nam, undermining the country's tax and health policies.

A development approach to tobacco control should address:

- measures to control the supply and demand of tobacco
- the full economic, social and environmental costs of tobacco
- strong measures to tackle smuggling including more effective systems for detection, tracking and punishment
- implementing the Framework Convention on Tobacco Control as a foundation for effective multi-sectoral and global collaboration

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Alcohol production and use in Africa

Socio-economic changes have Sinfluenced an increase in alcohol consumption in Africa during the last half of the 20th century. Public health problems linked to alcohol have also risen. How has alcohol consumption in Africa changed and what have been its effects?

In the 1960s and 1970s drinking patterns in Africa began to diverge. Abstainers, brewers and drinkers responded in various ways. Emerging middle classes had more money and leisure time for drinking more bottled alcohol. Alcohol use became a recreational activity unconnected to rituals and unsupervised by elders.

In many places, alcohol consumption is associated with masculinity

Changing socio-economic factors in the 1980s and 1990s, rapid technological advances and globalisation placed new pressures on people's lives: they developed new networks, roles, practices and obligations. In many places, alcohol consumption is associated with masculinity: men meeting for drinks in the evening is increasingly common.

Whilst drinking with friends is pleasurable, it also gives men the chance to build networks as they express their generosity and wealth by buying rounds of drinks. Some women, as increased earning capacity gives them greater freedom and social stature, are also consuming more alcohol. Parents who misuse alcohol may buy drink instead of food or clothing their children.

The 'Sunrise Restaurant' in the Delanta Plateau of Ethiopia's Central Highlands. Tsehay Mewcha, the restaurant owner and member of the Oxfam community saving and credit scheme, makes Talla, a local barley-based beer. The waste residue is fed to cattle and helps fatten them. Crispin Hughes I

Panos Pictures

Government regulations dictate the types of drinks available at drinking establishments and the hours they can operate. Monitoring and controlling them

Bottling Guinness at the Sierra Leone Brewery in Freetown. The brewery opened in 1962 and currently employs 130 people, mostly locals. The brewery produces well-known drinks such as Guinness and Heineken, as well as the popular local Star brand. Its new bottling facility has the capacity to produce 25,000 bottles per hour. Jon Spaull/Panos Pictures, 2002



As people's inhibitions are lowered by alcohol, they may be more likely to practice risky sexual behaviour. Men and women are also more likely to engage in or fall victim to intimate partner violence.

Demand for alcohol is high:

- In sub-Saharan Africa bottled alcohol constitutes between 10 and 50 percent of the market. Home brewed alcohol (legal or illicit), travellers' imports, cross-border shopping, smuggling and alcohol from industrial sources make up the rest.
- In Ghana, Mauritius and Zimbabwe there is two or three times more home brewed alcohol than commercially bottled alcohol.
- In Kenya 80 percent of the alcohol consumed is non-commercial. In Tanzania and Uganda the figure rises to 90 percent.

Home brewed alcohol helps sustain many people, especially women, who depend on it for their livelihoods. While it costs less than bottled alcohol, the strength of home brewed beverages varies in volume between two and eight percent, with spirits ranging between 40 and 50 percent. Impurities can lead to cases of methanol poisoning and toxic levels of nickel, manganese and aflatoxins.

Alcohol policies

is a challenge, however, and attempts to legislate and police consumption may drive it underground. There are signs that religious practices influence alcohol consumption in some communities. There are also gender differences: many women still abstain.

Public health measures to raise awareness of the harmful effects of alcohol may persuade some to reduce heavy and binge drinking practices. Interventions to improve an individual's economic circumstances by for example, providing microfinance loans may have the most success in motivating people to reduce their heavy drinking

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See also

Alcohol in Africa: Mixing Business, Pleasure and Politics, Heinemann: New Hampshire, edited by Deborah Fahy Bryceson, 2002

Liquor and Labour in Southern Africa, Ohio University Press: Athens, edited by Jonathan Crush and Charles Ambler, 1992

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Reducing drug demand in Afghanistan

fter 25 years of conflict and displacement, many Afghans now use a wide range of drugs, including alcohol, opium and tranquillisers, to cope with the stress of daily life.

In 2002, after a transitional government had replaced the Taliban, a priority of the new national Counter Narcotics Directorate (CND) was to establish a policy framework for drug control. In 2003, a National Drug Control Strategy was adopted that incorporated all aspects of demand reduction, including the provision of harm reduction services to injecting drug users to prevent the transmission of HIV and other blood borne viruses. This was followed in May 2005 by a National Harm Reduction Strategy for injecting drug use and HIV prevention signed by the Ministry of Public Health and the Ministry of Counter Narcotics, which replaced the CND.

> Drug treatment guidelines that set minimum standards are needed for governmental and nongovernmental agencies

This period of policy and service development in post-conflict Afghanistan highlighted a number of lessons:

 National Drug Control and Harm Reduction Strategies are required so that there is systematic coordination of policy at national, provincial and local levels to ensure the development of a rational comprehensive system. This reduces the risk of duplicating services and wasting scarce resources, and allows for mutual support and information sharing between service providers.

Useful web links

The Beckley Foundation: Drug Policy Programme www.internationaldrugpolicy.net

The Centre for Research on Drugs and Health Behaviour www.lshtm.ac.uk/crdhb/index.html

The Drug Dependence Research Center www.ihr.chula.ac.th/e3.html

Institute of Alcohol Studies www.ias.org.uk

National Institute on Drug Abuse: International Program international.drugabuse.gov

Open Society Institute: International Harm Reduction **Development Program** www.soros.org/initiatives/health/focus/ihrd

Transnational Institute: Drugs and Democracy www.tni.org/drugs/index.htm

United Nations Office on Drugs and Crime www.unodc.org/unodc/index.html

World Drug Report www.unodc.org/unodc/en/world_drug_report.html

World Health Organization: Management of Substance Abuse www.who.int/substance_abuse/en

- Drug treatment guidelines that set minimum standards are needed for governmental and non-governmental agencies implementing services for drug users and their families.
- Recognising that different drug problems need different approaches and interventions made the rapid assessment of problem drug use a priority.
- A standard list of technical terms, such as 'problem drug use', 'drug dependency' and 'detoxification' in local languages encourages common understanding and discourse.
- The quality and support of staff is crucial. Staff are selected on merit, whilst their training aims to reduce reliance on external advisors or consultants. All those working with problem drug users receive basic skills training and systematic follow-up and evaluation.

Moving forward

With increased recognition of problem drug use in Afghanistan and its related health, social and economic problems at the individual, family and community levels, more resources are becoming available for demand reduction interventions. It is important to:

- ensure continuing coordination, networking and information sharing between demand reduction service providers
- scale-up harm reduction measures, including needle and syringe access and disposal programmes and work to prevent opium and heroin smokers switching to injecting
- regulate and control the illicit trade in pharmaceuticals, such as painkillers and tranquillisers
- ensure proper aftercare, follow-up and relapse prevention programmes for those undergoing treatment programmes
- develop culturally appropriate primary prevention materials and activities for the country's large youth population

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