

DRUG POLICY IN THE ANDES

SEEKING HUMANE AND EFFECTIVE ALTERNATIVES



SOCORRO RAMÍREZ AND COLETTA YOUNGERS

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Foreword

The threat posed by drugs, delinquency, and organized crime is one of the most serious challenges that Andean democracies face today. Although efforts to counter the problem have made some inroads, many obstacles remain.

The Carter Center and the International Institute for Electoral Assistance (International IDEA) have supported a dialogue forum among prominent citizens from the five Andean countries and the United States. The members of the forum have noted with concern how drug policy has monopolized the diplomatic and economic agenda between the countries, contributing to tensions among the governments and impeding cooperation on other crucial priorities, such as safeguarding democratic processes from criminal networks.

As an outcome of the dialogue initiative, two members of the group developed this report to contribute to open debate to improve the current situation. The report draws on the unique dialogue taking place among the forum members, in-depth interviews with a wide variety of actors in all five Andean countries, and existing research.

The two authors of the report examine the principal drug-related challenges confronting the Andean nations. They take a hard look at the contradictory context that the “war on drugs” has generated in the hemisphere and describe the state of the regional debate on drug policy. The authors recommend that the discussion on alternative drug policy be broadened and inclusive and that dialogue and agreements among Andean countries be consolidated. They also recommend that resources be redirected towards integral rural development and adjusted to each local context in order to reduce the crops destined for illicit markets; that strong education and health policy be developed to prevent consumption and improve treatment; and that alternatives to incarceration for those who commit minor, non-violent offenses be explored. Furthermore, the authors recommend that mechanisms to protect democratic institutions be strengthened in order to protect them from illicit political financing via drug trafficking. We encourage the governments in the Andean countries and the United States, the media, and citizens to consider the recommendations presented by the authors of this report.



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Preface and Acknowledgements

During the four decade-long “war on drugs,” there have been few battlegrounds harder hit than the Andes. For many years Colombia’s image was inextricably linked to drug trafficking, having suffered the devastating impact of drug-related violence and the hijacking of key democratic institutions. Two other Andean countries —Peru and Bolivia—have felt the impact in terms of conflict with coca producers, the presence of organized crime and instances of human rights abuses. The drug trade has also affected non-coca producing countries such as Ecuador and Venezuela; the effects of the Colombian conflict have spilled over into their territory and there are signs that drug-related organized crime is using these countries as a transit point. Consumption is on the rise in each of the Andean countries.

When The Carter Center and International IDEA created the Andean-U.S. Dialogue Forum in 2010, members were asked to define the themes that impede cooperation between the countries for the group to tackle over the next two years. Drug policy was quickly identified as a top priority, along with two others: development and the media. While Forum members considered it important to “denarcotize”* the Andean-U.S. relationship, there was consensus that the current policy was in urgent need of fresh reflection and new alternatives.

A working group on drug policy was formed and set to work interviewing experts and carrying out national consultations on drug policy in each of the Andean countries. Two members of the group —Socorro Ramírez and Coletta Youngers— have developed this report, relying on task force inputs as well as their own extensive background on the subject.

While credit for the report’s analysis and recommendations goes to its authors, The Carter Center and International IDEA focused their efforts on facilitating a safe space for reflection and exchange on this controversial topic. We believe that moving beyond the current impasse in relations between the Andean sub-region and the United States can only take place through meaningful dialogue on tough issues.

The Carter Center and International IDEA would like to thank the authors of this report for their tireless efforts aimed at taking a new look at a seemingly intractable problem. Additionally, the efforts of the Forum’s working group provided key reflections and insight. While the report has benefited from their input, individual Forum members do not necessarily endorse the findings of the report. Karin Andersson’s support in coordinating this process is much appreciated. Camila

* The Carter Center and International IDEA, *Toward a Common Agenda for the Andean Countries and the United States*, 2011.

Lanusse coordinated the working group on drug policy and assisted the authors. Additionally, María Inés Calle, Barbara Fraser, David Traumann, Enrique Bossio, Kelley Friel, Carolina Teillier, Ruperto Pérez Albela and Richard Gaines all provided valuable support during the production phase of the report.



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Executive Summary

The Andean-U.S. Dialogue Forum, which is supported by The Carter Center and the International Institute for Democracy and Electoral Assistance (International IDEA), met in 2010 and 2011 with the participation of 35 prominent citizens who are involved in various social processes and the shaping of public opinion and dialogue with governments. Participants came from a variety of sectors in six countries (Bolivia, Colombia, Ecuador, Peru, the United States and Venezuela). The working group on drug policy and organized crime was established at the first meeting of the Forum and implemented a plan for national consultations through meetings, events and interviews in the five Andean countries, to analyze drug policy successes, failures and alternatives. Two members of the working group, Socorro Ramírez and Coletta Youngers, were asked to develop a report as a contribution to the current discussion of the issue and efforts to develop effective, humane policies.

Fifty years after signing the United Nations Single Convention on Narcotic Drugs, and 40 years after the U.S. government declared a “war on drugs,” many obstacles remain despite the partial successes of efforts to counter the problem.

Organized crime tied to drug trafficking continues to rise, aggravating violence that involves gangs and hired assassins, murders and arms trafficking. These criminal organizations take advantage of all forms of illicit interaction with the state: corruption, impunity and infiltration. They also try to block action by police and the courts by co-opting or assassinating public officials, legislators and prosecutors. A growing symbiosis between the state and organized crime spreads insecurity and weakens democratic institutions.

The election of Barack Obama raised expectations that Washington would acknowledge the urgent need for a change in drug policy. It is fair to highlight a shift in language and tone under the Obama Administration, which has stopped using the term “war on drugs” and has acknowledged the need to treat drug use as a public health problem. It is also noteworthy that the White House is taking a less interventionist stance in response to alternatives emerging in the region. Specific policy reforms have yet to be defined, however.

The regional dynamic has changed with the “left turn” that has occurred in the majority of South American countries, as well as the diversification in these countries’ international relations. Countries are seeking their own platforms, such as the Andean Community (CAN) and the Union of South American Nations (UNASUR), to discuss policies and respond to priority issues on the international agenda.

The limitations of the current drug policy is causing increasing frustration, leading policy makers, experts and activists in the region to seek new strategies to contain the escalation of illicit markets and minimize the harm done to people, communities and states by drug production and use.

The work of the Latin American Commission on Drugs and Democracy and of the Global Commission on Drug Policy has begun to break the taboo that has blocked progress in discussions of policy assessment and alternatives. In the present report, the authors describe a series of alternatives being considered and, in some cases, implemented in Latin America. These alternative policies are reflected in the following recommendations.

The authors recommend that governments, shapers of public opinion and civil society in the Andean countries and the United States:

1. Take the proposals of the Latin American Commission on Drugs and Democracy and the Global Commission on Drug Policy as points of departure when formulating drug policy, and launch an educational and media campaign to help remove ideological biases from the debate while promoting a more evidence-based and regional approach to drug policy.
2. Include additional state institutions (not just those related to police or military activities) in this shared task, along with the widest possible range of eminent individuals, communications media, health experts, non-governmental organizations, civil society and community organizations, churches and academics.
3. Support the Global Commission on Drug Policy’s call for a deeper debate on new approaches that focus on reducing the harm caused to the most vulnerable sectors of society affected by the production, trafficking and consumption of drugs, which would benefit the Andean countries in their efforts to develop humane and effective policies.
4. Take into consideration efforts to implement new policies based on specific national situations and local cultural or social circumstances.
5. Support the August 10, 2009, declaration by the governments of the UNASUR countries, in which they “recognize that the chewing of coca leaves is an ancestral cultural manifestation of the Bolivian people which must be respected by the international community.”

6. Strengthen dialogue and agreements among the Andean countries and within the frameworks of CAN and UNASUR, and ensure the participation of civil society in these regional entities; implement UNASUR's South American Council on the World Drug Problem; and hold a regional meeting to discuss the development of a common agenda on drug policy.
7. Implement solid drug use prevention, treatment and harm-reduction policies that respect human rights and offer adequate care to those who need it, treat drug use as a public health problem rather than a crime, and allocate the necessary resources to achieve this goal.
8. Support the recommendation of the Latin American Commission on Drugs and Democracy to evaluate "the convenience of decriminalizing the possession of cannabis for personal use."
9. Decriminalize personal consumption, use alternatives to incarceration for perpetrators of minor, non-violent crimes, and apply humanitarian considerations to confront the devastating impact the increase of women incarcerated for drug trafficking is having on their lives, their families and their communities.
10. Advance towards an agreement among the Andean countries to end the forced eradication of small farmers' crops and redirect resources toward rural development.
11. Adopt an "alternative livelihoods" approach that involves an appropriate sequence of actions: once other sources of income are established, crops for illegal markets can be reduced. This strategy implies decriminalizing relations with small farmers, instead making them partners in the effort to foster integrated rural development.
12. Redirect law-enforcement efforts toward dismantling criminal organizations and networks linked to drug trafficking, improving and targeting intelligence activities, transforming the exercise of politics, strengthening institutions, confronting corruption and empowering communities—especially those located in border areas.
13. Strengthen mechanisms to protect democratic institutions from the corrosive influence of illicit political financing from drug trafficking, thus leveling the electoral playing field through measures such as public financing for parties and candidates, financial transparency during campaigns and sanctions against parties that include confirmed "narco-candidates" on their tickets.

List of Acronyms

ALBA	Bolivarian Alliance for the Americas (Alianza Bolivariana para los Pueblos de Nuestra América)
ATPDEA	Andean Trade Promotion and Drug Eradication Act
CAN	The Andean Community (Comunidad Andina)
CICAD	Inter-American Drug Abuse Control Commission (Comisión Interamericana para el Control del Abuso de Drogas)
CONALTID	National Council for the Fight against Illicit Drug Trafficking, Bolivia (Consejo Nacional de Lucha contra el Tráfico Ilícito de Drogas)
CONSEP	National Council to Control Narcotics and Psychotropic Substances, Ecuador (Consejo Nacional de Control de Sustancias Estupefacientes y Psicotrópicas)
CORAH	Special Project to Control and Reduce Coca Cultivation in Alto Huallaga, Peru (Proyecto Especial de Control y Reducción de Cultivos Ilegales en el Alto Huallaga, Perú)
CRS	Congressional Research Service
DEA	Drug Enforcement Administration, United States
DEVIDA	The National Commission for Development and Life without Drugs, Peru (Comisión Nacional para el Desarrollo y Vida sin Drogas, Perú)
EC	European Commission
ECOSOC	Economic and Social Council of the United Nations
EU	European Union
FAO	Food and Agricultural Organization of the United Nations
FATF	Financial Action Task Force
FESCOL	Friedrich Ebert Stiftung in Colombia
FLASCO	Latin American Department of Social Sciences (Facultad Latinoamericana de Ciencias Sociales)
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit (German Society for International Cooperation)

G8	The eight most industrialized countries in the world (Canada, France, Germany, Italy, Japan, Russia, the United Kingdom and the United States). The G8 was replaced by the G20 in 2009.
HIV	Human Immunodeficiency Virus
IDPC	International Drug Policy Consortium
INCB	International Narcotics Control Board
INCSR	International Narcotics Control Strategy Report
NGO	Non-governmental Organization
OAS	Organization of American States
ONA	The National Anti-Narcotics Organization, Venezuela (Organización Nacional Antidroga de Venezuela)
ONDCP	Office of National Drug Control Policy, United States
PAHO	Pan-American Health Organization
TNI	Transnational Institute
UDESTRO	Corporation for Economic and Social Development in the Tropics (Unidad de Desarrollo Económico Social del Trópico, Bolivia)
UN	United Nations
UNASUR	Union of South American Nations (Unión de Naciones Suramericanas)
UNDCP	United Nations Drug Control Programme
UNDP	United Nations Development Programme
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
WOLA	Washington Office on Latin America

Introduction

The Andean-U.S. Dialogue Forum, with support from The Carter Center and the International Institute for Democracy and Electoral Assistance (International IDEA), held a series of meetings in 2010 and 2011 with the participation of 35 individuals who are linked to various social processes, help shape public opinion and are in contact with their respective governments. They come from a number of different sectors in the six participating countries (Bolivia, Colombia, Ecuador, Peru, the United States and Venezuela). The dialogue took place amidst strong discrepancies and tension between some of these countries—in certain cases, diplomatic relations had been severed or ambassadors called back. In plenary sessions and in working groups on development, communications media, and drug policy and organized crime, members shared their knowledge about the situation in their countries and sought to develop a common agenda to improve relations both among the Andean nations and between the United States and the five Andean countries.

The working group on drug policy and organized crime was established at the first Dialogue Forum meeting, held in Atlanta (February 2010). At the second meeting, which took place in Lima, Peru in June of that year, a national consultation plan was designed and subsequently implemented that included meetings, events and expert interviews in the five Andean countries. At the third meeting in Washington, D.C. (September 2010), the group met with top government and congressional officials and representatives of academic institutions and non-governmental organizations (NGOs) specializing in the issue in the United States. In addition, the working group participated in the Inter-regional Dialogue on Organized Crime and State Capture,³ which took place in Lima on February 7-8, 2011. At that time, its members developed a number of initiatives to synthesize the results of the national consultations and evaluations about the failures of drug policies to date and offer possible alternative strategies, with the aim of participating in the international drug policy debate.⁴

This report takes this process, begun by the Dialogue Forum's working group on drug policy and organized crime, as a point of departure and incorporates other aspects of the current debate, and the viewpoints of other actors, into the analysis. It takes into consideration one of the first

evaluations to come out of the Andean region in 1992,⁵ which provided evidence that certain tendencies were being exacerbated by the advance of the lucrative illegal drug trade, such as a persistent weakness of the state and wavering societal attitudes on the issue.⁶ In addition, the report includes opinions on the situation in the region that have been put forth in other reports and research, including studies by the International Crisis Group,⁷ as well as articles that appeared in the social science journal *Nueva Sociedad*.⁸ Finally, it includes aspects of the evaluation of the “war on drugs” in the Andean countries carried out in 2009 by Juan Gabriel Tokatlian, which included each of the five Andean countries as well as Brazil, the United States and the European Union (EU).⁹

This paper is not the result of systematic research and fieldwork, as are some of the above-mentioned publications that were consulted as this text evolved; rather, it reflects the results of the processes described and other contributions to the debate. Above all, this effort is intended to describe and synthesize the unique dialogue taking place among individuals from the five Andean nations and the United States. Thus, it takes into account the ideas and proposals put forth at events organized by the Dialogue Forum group in Colombia,¹⁰ Peru,¹¹ and Venezuela.¹² It is also based on information gathered by research assistants¹³ and systematized by the authors. In addition, interviews were carried out in Bolivia, Ecuador, Peru and Venezuela¹⁴ with persons knowledgeable about drug policy issues in their respective countries. Interviewees represented a variety of backgrounds—including academia, NGOs, communications media, multilateral or bilateral organizations—and some had held public office (elected and unelected).

The gathered materials provide a range of different opinions regarding drug control policy in the Andean sub-region, the main geographical area in which drug policy is implemented. The paper also represents an effort to go beyond a mere description of what is happening in each country; it includes recent thematic studies that analyze the impact of these policies on the countries involved, the outcomes of which have on occasion been positive, but which in general have been extremely negative. The problem, as it has manifested in the region, is contextualized in terms of the new hemispheric realities and the evolution of the international discussion regarding alternatives to the current paradigm, and explores sub-regional or regional opportunities to change the policy.

This report was presented and debated at the meeting of the Andean-U.S. Dialogue Forum in Lima on August 2-3, 2011. The meeting benefited from the participation and involvement of the former president of Colombia and former secretary general of the Organization of American States (OAS), César Gaviria—in his capacity as a member of the Latin American Commission on Drugs and Democracy and the Global Commission on Drug Policy—and of Susana Villarán, mayor of Lima. The main objective of this document is to contribute to the current debate on drug policy in the Andean sub-region and to the search for humane and effective policies.

The text begins with an analysis that chronicles the partial and transitory successes of the relevant drug policies, but also the major failures and the high cost paid by the Andean countries that have implemented these policies. Second, it examines the contradictory context created by the new

realities in the current relations between the United States and Latin America, which both stimulate progress in and create barriers to examining current strategies. Along the same lines, the contributions made by the Latin American Commission on Drugs and Democracy and the Global Commission on Drug Policy are described. Third, the authors analyze the degree of international openness surrounding the discussion of alternative policy proposals and offer examples of efforts to apply harm reduction policies in Europe, the United States and Latin America. Finally, a number of specific recommendations are made, which are directed towards governments, the media and civil society in the Andean sub-region and in the United States.



1 Andean assessments

The increase in the demand for drugs in the United States after the Vietnam War and its subsequent expansion to other parts of the world created supply-side opportunities in some Andean countries, first for cannabis and later for cocaine and, to a lesser extent, heroin. Indigenous communities have cultivated coca for ritual, cultural and medicinal uses since time immemorial. However, the economic, institutional and social conditions in the sub-region were conducive to cultivation of the crop for the manufacturing and trafficking of drugs.

In response to the increase in drug use in the United States, the Nixon Administration launched the “war on drugs” in 1971. Since then, Washington has carried out a policy of eradication and crop substitution, interdiction of shipments and criminalization of consumption. In 1986, President Ronald Reagan officially stated that illicit drugs constituted a threat to U.S. national security, and in 1989, President George H. W. Bush launched the “Andean Initiative,” which increased U.S. aid to the military and police in “source” countries Bolivia, Colombia and Peru. At the same time, the U.S. Congress tapped the Department of Defense as the “lead agency” in charge of detecting and monitoring illicit drug shipments to the United States. Although not everyone in the Pentagon agreed with the expansion of its role, the war on drugs became a means of legitimizing the presence and influence of the U.S. Southern Command in the region after the end of the Cold War.¹⁵ During this militarization of the war on drugs, some Andean governments expressed concern about the mission assigned to the military, which went far beyond external defense and allowed them to participate in maintaining domestic public order; they also disagreed with the increased presence of U.S. military forces in their countries and in the region in general.

For many years, the war on drugs has focused almost exclusively on supply. The main idea is that if drugs are eliminated in their “place of origin” by eradicating coca and poppy crops, thus eliminating or reducing the production of illicit drugs, and interdicting drug shipments, it will be harder for illicit drugs to reach the United States. Attacking the supply abroad would reduce availability, and scarcity would raise the price of illicit drugs and discourage demand, according to the theory behind this approach. After four decades and billions of dollars, however, it is clear that focusing on the

supply has not worked. Street prices of illicit drugs in the United States have dropped to historical lows and consumption has remained steady there while increasing significantly in other parts of the world.

Behind the distinction between producer and transshipment countries, on the one hand, and consumer countries on the other, lie realities such as the leading U.S. and European role in the production of cannabis and synthetic drugs, for example. So although the United States played a decisive role in imposing the “war on drugs,” it must share responsibility for the perverse dynamic that has resulted.¹⁶ The Andean countries’ adoption of that policy was an element of their alignment during the era of bipolar conflict. After the end of the Cold War, the Andean countries—particularly the government of Hugo Bánzer Suárez in Bolivia continued to wage the “war on drugs.” Later, after 9/11, when the drug war became more closely tied to the anti-terrorism crusade, the government of Andrés Pastrana in Colombia took the same position, under pressure from the country’s military and the country’s financial situation; President Álvaro Uribe subsequently entrenched Colombia’s support for a militarized approach because of the escalation of conflict in the country and his own convictions. U.S. resources strengthened Colombia’s military response to a strong armed offensive by the country’s guerrillas.

The U.S. government’s drug policy has created a common structure of institutions and policies in individual countries. But the institutions responsible for implementing drug policy have little influence on the policies themselves,¹⁷ while the policies and their bilateral management complicate coordination between Andean neighbors—which is crucial for addressing a problem that crosses borders—and lead to tensions in and the “narcotization” of relations between them. A review of studies to date also shows that the impact of current policies has been uneven. There have been local, partial and short-term successes, but in the long run, failure has prevailed.

This chapter analyzes elements of the Andean situation and the sub-regional implementation of the “war on drugs” in six main areas: the drug policy promoted by the United States; forced eradication; crop substitution and alternative development; consumption, prevention and treatment; incarceration and imprisonment; and the destruction of laboratories, interdiction and control of money laundering. The chapter concludes with a look at the increase in organized crime connected with illegal drug markets.

1.1 Drug policy in the Andes

The U.S. government has tried to implement its drug policy in the Andes by offering military resources and linking access to preferential trade benefits with certain targets in the drug “certification” process. Since 1986, the law has required the president of the United States to identify the most important drug producing and transshipment countries (*drug majors*) each year and

determine whether they are implementing the UN conventions and agreements with Washington to combat drugs.¹⁸ The president can decertify countries that, in his judgment, have not fully cooperated in that fight, and, until changes occur in the process described below, decide whether they will be subject to any of the following sanctions: suspension of bilateral assistance, except humanitarian aid or assistance related to drug trafficking; automatic denial of loans from multilateral banks; or trade sanctions in the form of higher tariffs or exclusion from exemptions.¹⁹ On the grounds of national interest, he can also certify or authorize the continuation of aid to countries that do not cooperate strongly enough. This “vital national interests” option eliminates the sanctions carried by complete decertification, but retains the intention of stigmatizing the country. With this mechanism, policy was imposed by pressure, rather than as the result of prior consultation. Country- or region-specific situations related to problems of mutual interest were not generally considered when making decisions about certification.²⁰

In 2002, this law became more flexible. Decertification, now called a “determination,” is applied to countries that have “failed demonstrably,” rather than those that have not “fully cooperated,”²¹ effectively reversing the burden of proof so that countries are automatically certified unless the administration indicates a lack of cooperation. The decision also assesses cooperation with international conventions, rather than U.S. strategies, and eliminates certain sanctions. The determinations and the list of *drug majors* are now published at the same time (September 15). There has also been a change in the role of the U.S. Congress, which can no longer overrule the president’s decision by a two-thirds majority vote, which has increased political influence in the process.²² The current process is better than the previous one, but it still allows the U.S. president to sanction a country when he believes it has not implemented drug policy.

As Table 1 shows, four of the five Andean countries have been decertified, or certified because of national interests, at some point, or have been subject to a “determination,” but sanctions have not been imposed because of U.S. national interests.

Table 1
Latin American Countries Declared “Non-cooperating”

Fiscal year	Decertification/Determination	Sanctions not imposed because of national interests waiver
2012		Bolivia and Venezuela
2011		Bolivia and Venezuela
2010		Bolivia and Venezuela
2009		Bolivia and Venezuela
2008		Venezuela
2007		Venezuela
2006		Venezuela
2004		Haiti
2003		Guatemala and Haiti
2002		Haiti
2001		Haiti
2000		Haiti and Paraguay
1999		Haiti and Paraguay
1998		Colombia and Paraguay
1997	Colombia	
1996	Colombia	
1995		Colombia and Peru
1994		Bolivia, Panama and Peru
1993		Bolivia
1989	Panama	
1988	Panama	

International Narcotics Control Strategy Reports published by the Department of State, Congressional Research Service Report (2005).²⁹

Defenders of certification may have seen this as a positive step because it forced governments to implement policies that they might not have adopted otherwise.²⁴ Critics note that the “decertification” and subsequent “determination” processes undermine the idea of cooperation, have a negative impact on the “decertified” country²⁵ and provide an incentive to arrest innocent people and petty criminals to demonstrate compliance with targets set by the U.S. government.²⁶ For those reasons, the determination process is rejected in all the Andean countries, as the consultations and interviews carried out for this study repeatedly showed. Nevertheless, the Obama Administration has followed its predecessor’s policy much more closely in this area than on any other issue related to the sub-region.

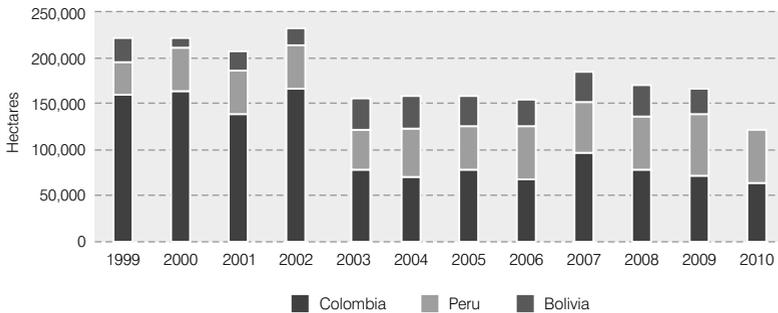
The most notable case is that of Bolivia, which produces about 20 percent of all Andean coca crops (the rest is produced in Peru and Colombia). The government of Evo Morales has increased cocaine interdiction and implemented a strategy for controlling coca crops, taking the country’s cultural characteristics and economic factors into consideration. In response to the expulsion of the U.S. ambassador (who was accused of interfering in Bolivian affairs) from Bolivia in September 2008 and the removal of the U.S. Drug Enforcement Administration (DEA) in November of that year, Washington decertified Bolivia four times (for fiscal years 2009, 2010, 2011 and 2012, which was issued on Sept. 15, 2011). It also suspended Bolivia’s access to the Andean Trade Promotion

and Drug Eradication Act (ATPDEA); in the proposed budget for 2012, funds for interdiction in Bolivia were cut by 50 percent to US\$10 million. Venezuela has been decertified six consecutive times amid political disagreements between the two countries.

1.2 Crop eradication

Forced eradication (manual or mechanical, militarized or by spraying) of coca and poppy crops was imposed as the cornerstone of the strategy to control supply, and the main criterion for measuring the compliance of the three Andean producer countries. Despite these efforts, the amount of coca cultivated there has remained above 150,000 hectares over the past eight years, according to the UN Office on Drugs and Crime (UNODC). And because of improvements in the cocaine production process made in recent years, more illicit drugs can be produced with fewer coca leaves (see Figure 1).

Figure 1
Coca Cultivation in the Andean Region



Source: Compiled by the Washington Office on Latin America with statistics from the 2011 UNODC report. At the time this graph was prepared, UNODC had not published its 2010 estimate for Bolivia.

In Bolivia, Law 1.008 on coca and controlled substances, which has been in effect since 1988, put a ceiling of 12,000 hectares on coca grown for traditional consumption. The rest was considered excess to be eradicated. Forced eradication was initiated with economic and other assistance from the U.S. government. The expansion of the Bolivian armed forces' role in drug control increased social conflict, caused confrontations between the army and police and the coca growers, and led to human rights violations. Because it offered no alternative income sources, the forced eradication policy also exacerbated poverty, leading small farmers to go back to planting coca.²⁷

When he took office in January 2006, President Evo Morales—a leader of the coca growers—adopted a policy of “coca yes, cocaine no.” In addition to emphasizing a consensus-based approach to reducing coca crops, the Morales Administration has continued to implement other strategies. The number of interdiction and confiscation operations has been significantly higher than under the preceding government, even after the expulsion of the DEA. Since taking office in 2006, the Morales Administration has announced its intention to replace Law 1.008 with two different laws, one related to coca and the other to drug trafficking, to call attention to the crucial difference between the natural leaf and illicit substances.

Bolivian government policies on coca production are based on recognition of the leaf’s cultural and religious significance and other positive attributes, the industrialization of coca leaves for legal uses and cooperation efforts to reduce coca crops that supply the illicit market. Forced eradication occurs only rarely and in national parks and areas of expansion, where the government prohibits coca cultivation. With some exceptions, the new approach has eliminated the violence and conflict that characterized earlier eradication efforts.

The Morales government has continued a policy adopted in 2004, under President Carlos Mesa, who signed an agreement with coca growers in Chapare, allowing each family to produce a *cato* (1,600 square meters) of coca. There is ambiguity about the scope of this provision, because the government calculates *catos* by family, while coca grower organizations assume that one *cato* is allowed for every coca grower who is affiliated with an organization of coca producers. The monthly income ensured in this way offers an economic cushion that enables coca growers to engage in other income-producing activities. Compliance with the rule is based on a policy of “social control,” which appears feasible in Chapare because of the strength of the coca growers’ federations, which must monitor crops and sanction anyone who does not meet the conditions; ultimately, failure to comply could lead to the confiscation of land.²⁸ The government expanded its effort to reduce coca crops to other coca-growing regions. Nevertheless, it has been more difficult to achieve compliance in areas such as the traditional coca-growing area in the Yungas region of La Paz. Despite the expansion of coca crops that supply the illicit market, growers in the Yungas have traditionally cultivated coca for legal consumption and have thus defended their right to grow it and have rejected—at least in the past—the idea of “alternative development.”

Some people interviewed in Bolivia consider these constraints on and social control of coca crops a success, while others say the policy has effectively promoted coca without stimulating rural development. The Bolivian government has been able to eliminate the violence associated with forced eradication while stabilizing and maintaining overall coca production at some 31,000 hectares. In contrast, coca cultivation has nearly doubled over the past 12 years in neighboring Peru. Despite the routing of Bolivian coca to the illicit market, as noted previously, the country produces only about 20 percent of the coca cultivated in the Andean region, according to UNODC statistics for 2009.

Peru has had a long history of forced eradication, with occasional interruptions. Nevertheless, the amount of coca grown in the country has been increasing steadily, reaching 61,200 hectares in 2010, according to the most recent UNODC statistics. As in Bolivia, there have been cycles of confrontation between government agencies and coca growers, followed by negotiations. Governments have almost never fulfilled their promises of alternative development, however, and the confrontations have recurred and the vicious circle continues. Unlike Bolivia, Peru lacks a strong coca growers' movement.

In 2007, Peru's agriculture minister tried to carry out eradication by first talking with farmers. In March, the minister agreed to suspend forced eradication, which had led to violence in the past, and review the "alternative development" that was failing because it required farmers to give up their coca crops. In May, the minister also agreed to promote the withdrawal of Peru from the 1961 UN Single Convention on Narcotic Drugs, which penalizes the ritual use of the coca leaf. But President Alan García subsequently refused to implement the agreements signed with the striking coca growers, rejecting the accords signed by the minister in 2007 in Tocache (San Martín) and La Convención (Cusco). Three months later, the minister was pressured to resign and the agreements were shelved.²⁹ At the end of the García Administration, eradication continued to be conducted by the Interior Ministry's unit for the "Control and Reduction of Coca Crops in the Upper Huallaga" (CORAH, for its Spanish initials), which led to social upheaval in the upper Amazon region.³⁰

In July 2011, Ollanta Humala was sworn in as president of Peru and announced significant changes in drug policy, such as the adoption of a development approach in coca-growing areas, and reoriented law enforcement efforts to target criminal networks connected with drug trafficking. Both Bolivia and Peru have therefore challenged the strategy of forced coca eradication and are experimenting with more effective policies and strategies for reducing the amount of coca going to illicit markets.

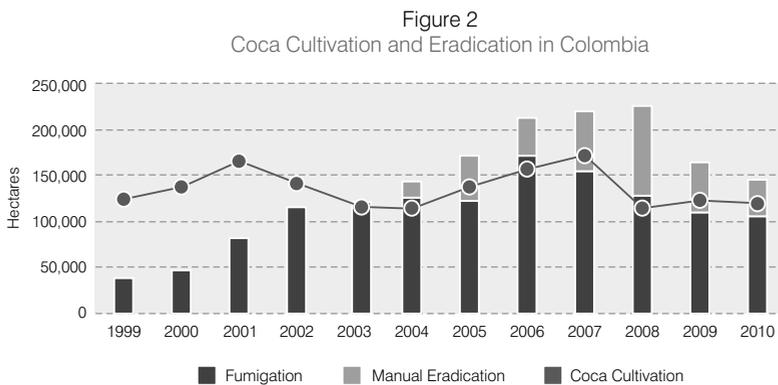
In Colombia, the government's spraying of more than half a million hectares³¹ and manual eradication of some 3,000 hectares has not dissuaded growers, but has caused environmental and social harm and created security problems. Where spraying has occurred, living conditions for poor farmers have become even more tenuous. Food crops or alternative crops have sometimes been affected. Displacement has increased, adding to that caused by irregular groups battling for land and crops for the illicit market. One study submitted for review by the U.S. Agency for International Development (USAID) in April 2009 acknowledged that displacement caused by eradication and the armed conflict made those people more likely to become involved in coca cultivation in an effort to solve their problems.³²

Spraying also contributed to the expansion of the guerrillas' grassroots base and strengthened large-scale growers (particularly armed groups), who have the economic and military capacity to avoid eradication and move their crops from place to place. Coca crops have spread to such an extent that while they were being grown in 11 of Colombia's 34 departments in 1999, by 2008 that

number had expanded to 23, precisely during the implementation of Plan Colombia, which emphasized spraying as a priority. Spraying in Colombia also contributed to an increase of coca crops in Peru and Bolivia and to the deterioration of relations with Ecuador, which took Colombia to the International Court of Justice over spraying near the border.

UNODC found that the total area under coca cultivation shrank by 18 percent between 2007 and 2010, while in the last decade (2000 to 2010), the decrease was 33 percent.³³ But the lack of agreement between UNODC figures for crops for illicit drug markets and those of the U.S. Office of National Drug Control Policy (ONDCP)—the data sometimes differ by as much as 20 percent—makes it impossible to determine the exact extent of the decrease and leads to contradictory conclusions. In a 2005 assessment and a 2008 report by its director, UNODC stated that there is little evidence that eradication reduces the amount of cultivation in the long run.³⁴ Besides an increase in productivity, factors other than eradication or spraying could explain a decrease in cultivation. In Colombia’s Putumayo region, for example, “financial pyramids” helped reduce coca crops for a time, as people preferred to invest their goods or savings in those illegal schemes, which had massive payouts, and stayed in urban areas, keeping their money there.

In June 2011, the U.S. government issued its estimates of coca crops in Colombia. Figure 2 shows those statistics since 1999, the year before the start of Plan Colombia (yellow line). The bars show the amount of coca eradicated each year by spraying (red) and forced eradication (blue). According to Adam Isacson of the Washington Office on Latin America (WOLA), despite a billion dollars in U.S. aid and a massive eradication campaign, there has been little change in the coca crop.³⁵



Compiled by Adam Isacson, Washington Office on Latin America

Various studies show that the relative success of eradication, and especially of spraying, creates conditions for the return of the crop. Any decrease tends to be temporary, because by raising the price of the coca leaf, eradication leads to increased production of the crop, and its expansion and

dispersion to more remote areas to avoid detection or eradication. The effects can be measured in the destruction of forests and water sources.³⁶

Pressure to suppress coca and poppy crops has led to the criminalization of the plants that provide the raw material for the production of cocaine. Coca was included in the list of the most dangerous narcotics in the 1961 United Nations Single Convention on Narcotic Drugs. In Colombia, the official advertising campaign “Don’t plant the plant that kills” was broadcast widely between 2008 and 2010, until a legal case filed by an indigenous leader successfully showed that it violated the constitution and indigenous people’s individual and collective rights because of the cultural importance of the coca leaf for their communities.

1.3 Crop substitution and alternative development

Coca crop substitution and so-called alternative development have been the other pillar of drug policy, but their results have been minimal, temporary or counterproductive. One leader of a coca growers’ organization who was interviewed for this study complained that drug policy in Peru “is a vicious circle that, in the long run, lines the pockets of those involved in the war on drugs, but hurts the small farmer, because they eradicate his crop and the next day he has nothing to eat, because those famous alternative development projects haven’t worked at all.”

The three Andean countries in which coca is grown have tried various methods of eradication (including manual eradication before compensation and forced eradication without compensation) and crop substitution and alternative development programs. The vast majority of funds have been devoted to eradication and law enforcement, rather than to economic assistance, in coca-growing areas. In Colombia, for example, researchers have identified four phases during which only two methods were actually used: crop substitution as a complement to spraying (1982-1993); alternative development as both a part of the drug control strategy and a response to agrarian problems (1993-1998); reorientation of crop substitution and its inclusion in Plan Colombia (1998-2002); and crop substitution with aid conditioned on prior—complete—proven eradication (2002-2010).³⁷

Whichever method has been used in the three Andean countries, crop substitution and alternative development efforts to date have done more to set eradication targets than resolve agricultural problems such as land tenure and land use, infrastructure, transportation, basic and social services, commercialization of farm products, local and regional markets, governance and citizen security. The lack of a sustainable rural development strategy that addresses rural poverty strongly contributed to the spread of coca crops for illicit markets and increased the movement of settlers, with the cutting and burning of forests for new coca crops and monocropping of export products.³⁸

In initiatives designed by USAID between 1997 and 2003 for Bolivia's Chapare region, farmers could only receive assistance after crops were eradicated completely. Although most of the coca is grown by small farmers, USAID focused on export crops—such as bananas, citrus fruits, pineapple, palm and timber—from large farms that use capital more intensively than labor, and large-scale infrastructure projects (referred to as “white elephants” by local farmers), which have negative environmental impacts. It also promoted private businesses, which failed to help small farmers. In short, the projects created a few poorly paid jobs, often without benefits, and generated debt. Because of the lack of roads, transportation and markets, it was cheaper for small farmers to let the alternative crops rot in the field than sell them.

These initiatives were implemented without meaningfully consulting potential beneficiaries; instead of involving the coca growers' organizations, they required farmers to resign from the organizations, report neighbors who continued to grow coca, and participate in parallel associations. Most of the funds went to administrative costs and payments to foreign consultants. In 2008, coca growers in Chapare announced that they would sign no more agreements for new USAID-funded alternative development projects in Chapare because of the poor design and failure of those efforts.³⁹

In Peru, according to Hugo Cabieses, the current Peruvian vice minister of the environment, information provided to farmers underestimated the costs of alternative crops and overestimated the potential income from them. There was no rural credit on favorable terms, and no stimulus for farming, forestry or livestock activities that would be sustainable for a small farming family. The products that were promoted were aimed not at building local and regional markets, but at the export market—even in agro-ecological zones in the upper jungle that were unsuitable for that type of agriculture. There were also shortcomings in the choice of the technological-productive package for small farmers whose main available resource was family labor, which affected yields and led people to return to coca production. Crops that were more profitable than coca in the short run—rice, beans, palm, cacao, sesame seeds and barbasco—lacked solid, sustainable markets. While there have been some success stories in one area (the “miracle of San Martín”), the initiative has had a limited impact because only one-quarter of the producers in that area replaced coca crops with cacao, coffee, palm oil or sugar cane. However, high-volume monocropping on large tracts of land in a bio-diverse area has had serious environmental impacts and depends on the fluctuating international prices of the promoted products.⁴⁰ And the 2011 UNODC report shows that four times more coca was grown in San Martín in 2010 than in 2009.

The case of Colombia is very significant. As Darío Fajardo of the National University points out, traditional land policy and alleged rural development have caused structural problems that have encouraged the cultivation of crops for illegal markets. Historically, these policies—aimed at protecting large landholdings, concentrating land ownership and squeezing out small farmers—have been a tool for exclusion and war. The blocking of land distribution efforts led to settlement on agricultural frontiers, which were later caught up in booms of extractive industries or crops for illicit markets controlled by irregular groups. Meanwhile, the supposedly promising subsidized crops

took shape, benefiting members of alliances that were made up, in many cases, of local businesspeople, agro-industry, financiers, paramilitaries and drug traffickers. These “productive alliances” for crops such as African palm oil, for example, left small farmers even more vulnerable: they were criminalized for their connections to coca production, left with tenuous land tenure, and displaced and replaced by people adept at paramilitary control. The result was weakened production of farm products for direct consumption and a decreased availability of food products;⁴¹ the “program to combat illicit crops,” under way since 2003 in 11 regions of Colombia,⁴² has not solved those problems.

An April 2009 evaluation of Plan Colombia prepared for USAID acknowledged the negative effects of that policy in Nariño: “Forced eradication in the absence of alternative livelihoods fosters a positive relationship between the population and the armed actors, despite the population’s resentment against the brutality of the armed actors and the lack of appeal of the vestiges of their ideology. Eradication without alternative livelihoods thus pushes the population into the hands of belligerents.” It goes on to say: “For many, coca cultivation or other illegal activities present the only perceived opportunity for social advancement or at least marginal improvements in socio-economic conditions.”⁴³

Similarly, in 2005, the World Bank stated that unless alternative livelihoods “are already in place, premature eradication can alienate the affected population and damage the environment for rural development.”⁴⁴ The German cooperation agency, *Deutsche Gesellschaft für Internationale Zusammenarbeit*, or GIZ (formerly GTZ) has shown that forced eradication is incompatible with development and creates distrust among donors, government agencies and receiving communities. The EU also concludes that without alternative livelihoods, forced eradication could undermine sustainable solutions and fail to achieve its goals.⁴⁵

Various studies show that the vast majority of growers are poor farmers who do not grow rich on crops that go to the illicit drug market and whose families barely survive on their income from coca crops. Destroying coca crops, without first establishing alternatives, further erodes their living conditions, pressuring them to return to growing crops for the illicit market and increasing their dependence on that source of income because of a lack of real livelihood opportunities.

1.4 Consumption, prevention and treatment

Interviews carried out for this publication showed that in very diverse sectors of all the Andean countries, consumption is on the rise and will continue to increase. These comments are based on empirical observations, due to the lack of reliable data about drug consumption in most countries in the sub-region. Data in reports by UNODC and the Inter-American Drug Abuse Control Commission

(CICAD) refer to “prevalence of use,” or the percentage of people who report having used a drug in the past year. That information offers an idea of the number of people who have consumed drugs, but says nothing about the percentage of frequent or problematic users, the size of the market or the amount of drugs consumed. Actual consumption data are much more difficult to obtain; official figures about total consumption in the United States have not been published in the past 10 years. Existing data do indicate that prevalence of use rates for cannabis and cocaine in the Andean countries are much lower than in the United States and European countries. They also show that alcohol use is much greater than drug use. Even in countries where possession for personal consumption is legal, consumption is perceived to be associated with crime spurred by dealers or consumers who commit crimes to get the money to buy drugs. And in all countries that have drug dealing in poor neighborhoods, drug use tends to be associated with public safety problems.

Even in countries where consumption itself is not criminalized—such as Peru and Ecuador—police often treat consumers as if they were traffickers. In Colombia, after years of effort, the government of Álvaro Uribe won a reversal in 2009 of a 1994 Colombian Constitutional Court ruling that had decriminalized possession for personal consumption, blaming it for increased drug use (the studies cited in this paragraph show that this was not the cause). It also implemented regulations aimed at prohibiting consumption, which imposed harsher sentences for drug dealers and mandatory medical treatment for users.⁴⁶ Even before the reform, police temporarily and repeatedly detained people for drug possession and consumption, especially indigent people and poor youth, treating them as potential sources of violence.⁴⁷

Venezuela is currently conducting a broad survey on consumption. Although the data will not be available until December 2011, the director of the National Anti-Drug Organization (ONA) told the forum in Caracas (summarized in endnote 12) that they show a 30 percent increase in drug consumption. The director of drug prevention studies at the Pedagogical Institute of Caracas said that data also show an increase in the consumption of multiple substances among school-age children, motivated by peers; a decrease in the age of consumers; a connection between alcohol and drugs; and the transformation of some problematic drug users into dealers or thieves to acquire drugs. Referring to prevention, various interviewees in the Andean sub-region said the sporadic campaigns directed at school students or in the mass media lack planning, targeting and an understanding of the reasons for consumption. Because there are few programs, and those that exist do not link demand reduction to treatment, and instead employ simplistic messages such as “just say no,”⁴⁸ the impact is insignificant. So-called preventive education tends to be limited to showing “drug hell,” without distinguishing between casual or occasional consumers, who constitute the majority, and problematic users, who need treatment.

We could not document any systematic efforts in the Andean sub-region to treat problematic users. One expert interviewed in Ecuador, however, noted that there are 370 centers for people who are dependent on drugs; many operate outside the law and function, in practice, as clandestine jails that limit patients’ freedom and human rights. Several interviewees in Bolivia agreed that there are few effective efforts at prevention, assistance or reintegration into society for problematic users.

In the forum in Caracas, it was notable that one of the few points of agreement was the tendency of all speakers—civilian and military, from the government or NGOs, from the ruling party or the opposition—to defend the importance of prevention, treatment and education. Venezuela has designed a plan (2009-2013) with policies and strategies to prevent and comprehensively reduce the demand and supply of drugs, to be implemented with the participation of families, communities, schools, workplaces, the media, special groups and through virtual means. It has also created a treatment system for problematic drug users in eight clinics, which seeks to move away from a view of patients as passive, paying recipients of a treatment that replaces one drug with another to an interdisciplinary approach to adaptation and reintegration. Implementing the plan, however, is very complicated, incipient and expensive. The Caracas city government commission responsible for matters related to drug use is working on a type of treatment that, rather than controlling the consumer, tries to address the human drama, relapses and overdoses.

The interviews and studies that were examined for this report indicate that in the Andean sub-region, the predominant treatments are stigmatizing and repressive and are often implemented against a person's will, which alienates dependent users. The discussion at the meeting of the Andean-U.S. Forum in Lima in August 2011 showed that without a strong investment of resources in health and education, there will be no substantive change in prevention and treatment.

1.5 Punishment and incarceration

Despite the increase in drug production in most of the Andean nations, and in trafficking and consumption in all, traditionally weak countries have not been preparing to address these issues.

A report by WOLA and the Transnational Institute (TNI) by experts from eight Latin American countries documents the impact of harsh drug laws on judicial and prison systems, as well as on the lives of prisoners, their families and their communities. Although there are significant differences between countries in their roles in the drug trade, in their internal political dynamics and their vulnerability to international pressure, the report identifies common elements from which 12 conclusions can be drawn, illustrated here with examples from Andean cases:⁴⁹

1. Within the framework of the three UN conventions on narcotics and the U.S. "war on drugs," the Andean countries were forced to adapt their national legislation, criminalizing all activities related to the illicit market for controlled substances.
2. Harsh laws and disproportionate sentences were introduced in countries at times when the drug market was small. Ecuador's current law does not differentiate between levels of participation in drug trafficking and establishes minimum and maximum

sentences of 12 and 25 years, respectively, for anyone accused of drug trafficking; the maximum sentence for murder is 16 years. As a result, a small-scale trafficker could be imprisoned longer than a murderer.

3. Sentences do not distinguish between types of substance or degrees of involvement, and small-scale dealers, “drug mules” or “couriers” are treated the same as large-scale traffickers.
4. The indiscriminate increase in incarceration on drug charges is a key factor in the rise in overcrowding and overpopulation in prisons.
5. Preventive detention for people suspected of drug crimes is abused. In Bolivia, Ecuador and Peru, it is mandatory during trials for minor or major drug crimes. Peruvian law allows for initial preventive detention by the police for 24 hours for most crimes, but 15 days for drug-related crimes.
6. People accused or convicted of drug crimes are generally denied alternative sentences, and in most cases, people detained on drug charges are not granted procedural benefits that could lead to their early release.
7. The penitentiary system does not guarantee minimal living standards for prisoners. Health and nutrition problems exist in prisons in all the countries.
8. A high percentage of people are stigmatized, harassed or detained for simple possession or use of small amounts of drugs, even in countries where it is not considered a crime. No distinction is made between consumers and drug traffickers.
9. Most people imprisoned for drug crimes are not kingpins; they are detained on lesser charges and receive harsh sentences. According to calculations done for the study, in Colombia only 2 percent of people imprisoned on drug charges are middle- or high-level traffickers; people at those levels of the drug trade generally enjoy impunity.
10. The weight of the law falls on people who are poor and have little education, and are unemployed or work in the informal economy. In Bolivia’s San Pedro Prison, prisoners told stories of poverty or of suffering family or health crises when they were offered the chance to transport drugs to earn money to solve their economic problems.
11. More foreigners and women are being detained on drug charges for serving as drug “mules.” In 2009, 80 percent of the women in El Inca, Ecuador’s largest women’s prison, were serving time for drug-related crimes. The consequences are devastating for their families, especially their children.

12. The quantity and quality of information from government sources is unreliable and irregular. In Ecuador, the 2008 prison census was a marked improvement in government data collection.

In Venezuela, according to figures from the ONA, the percentage of prisoners being held on drug charges rose from 8.89 percent in 2000 to 34.68 percent in 2008. The Venezuelan congresswoman who participated in the forum in Caracas called it a monstrosity that prisons are full of people arrested for carrying small amounts of drugs. Venezuela faces a serious crisis because of overpopulation, overcrowding, poor conditions and violence in its prisons.

Andean courts are especially overloaded with drug-related cases. Prisons are plagued by overcrowding, drug consumption, crises and corruption that allow some prisoners to continue committing crimes while in prison. Incarceration has not decreased drug trafficking, because those who are sentenced are low-level dealers (who are easy to replace), while the mid- and high-level traffickers go unpunished. Instead of decreasing, crime levels escalate: the overwhelming number of people who are sentenced have no direct connections with drug-trafficking organizations when they go to prison, but end up involved in criminal networks.

1.6 Destruction of laboratories, interdiction of traffic and control of money laundering

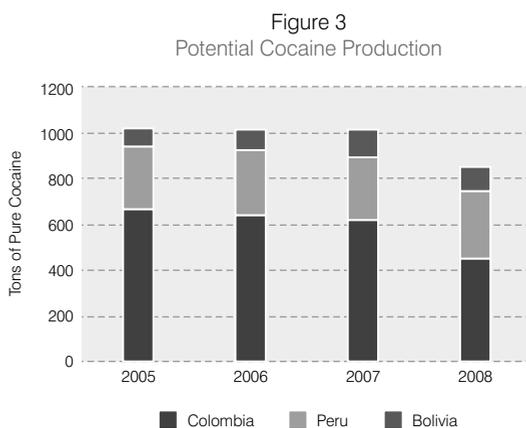
For many years, most of the cocaine originating in the Andean sub-region has been produced in Peru and Colombia. Studies and interviews in Bolivia show that both coca paste and cocaine hydrochloride are being produced there, and that production of the latter has increased because of changing dynamics in drug trafficking, increased consumption in Brazil and improved production processes. It is no longer necessary to dig a maceration pit or to set up a large-scale laboratory; drugs are prepared in small “kitchens” and the process requires less labor, fewer precursor substances, and less risk and time. Although Ecuador is mainly a transshipment country for illicit drugs, some interviews carried out for this study indicated that cocaine production is increasing there.

In all five Andean countries, there has been an increase in seizures of both cocaine and the precursor substances used to manufacture the drug, which could indicate increased interdiction capacity and/or a rise in drug production and trafficking. In 2009, Colombia registered the greatest interdiction of cocaine and inputs.⁵⁰ In Venezuela, seizures doubled from 30,258 kilos of cocaine and cannabis in 2000 to 60,555 in 2009.⁵¹

UNODC's 2011 report states that worldwide cocaine seizures have held relatively steady, and that since 2006, seizures have shifted from consumption markets in the United States and Europe to

source areas in South America. In other words, the region's countries appear to be improving their ability to intercept illicit drugs. The report also notes that high levels of seizures could indicate a significant increase in cocaine production, because traffickers have made clandestine laboratories more efficient. UNODC acknowledges, however, that it is difficult to measure that efficiency.

The following figure (Figure 3) shows UNODC estimates of potential cocaine production in Bolivia, Colombia and Peru. Due to a review of its reporting procedures, UNODC did not present specific statistics for 2009 and 2010, but gave ranges of 842-1,111 metric tons for 2009 and 786-1,054 for 2010. If the highest figures in those ranges are used, the estimate of the amount produced has not varied much in recent years, which contradicts information previously cited by UNODC about a possible increase in production.



Source: Compiled by WOLA with statistics from UNODC

One key problem is that the data are not reliable. In late 2010, U.S. government statistics showed that the amount of cocaine produced in the Andes had fallen from 875 tons in 2006 to 690 tons in 2008 and 2009. Nevertheless, Adam Isacson of WOLA calculated that federal agents, according to their own figures, seized 495 tons of cocaine on U.S. soil and in producing or transit countries in 2009. However, if 690 tons were produced and a minimum of 495 tons were intercepted in these countries, only 195 tons at most were left to meet the global demand for cocaine, which in the United States alone amounts to 250 tons a year. That figure for the available supply could be even lower, because the 495 tons did not include U.S. seizures in international waters, seizures carried out in the United States by state or local police forces, or confiscations in Europe, Asia or other regions. According to those figures, Isacson points out, cocaine seizures would have exceeded production.⁵²

The interviewees and studies consulted agree that instead of attacking coca crops in places where profits are low and serious socio-economic problems exist, it is much more effective to focus on

interdiction⁵² and strike at the profitability of the business.⁵³ But the peaks of “efficiency” in interdiction have not made a substantial dent in the cocaine supply. Even better strategies have a limited chance of success if the global demand for drugs holds steady or continues to increase. Efforts to reduce the demand for drugs should therefore take a much higher priority in all countries with a consumption problem.

1.7 Organized crime

Like a “shadow globalization,” crime expands at the same rate as technology, communications and global markets. It involves various types of contraband, networks and illegal flows, such as weapons, organs, human trafficking, prostitution networks, etc. Although it is not limited to drug trafficking, it includes drugs, and drug trafficking is its main catalyst. Drug trafficking gave impetus to delinquency, organized crime and the accompanying violence—which involves gangs and hired killers, murder, extortion and arms trafficking—as highlighted in many interviews and consultations carried out for this report.

Thus it is important to have a better understanding of the relationships between violence, crime and drug trafficking in the Andean sub-region. For example, there are several interpretations of violence related to drug trafficking in Ecuador. Sandra Edwards, a research associate for WOLA and TNI, notes in an interview for this report that in Ecuador, violence among drug traffickers rarely targets ordinary citizens. Nor is there much violence by problematic drug users. Most of the violence comes from gangs organized to commit robberies, and many of those robberies are violent and involve murders. Violence that is directly related to drugs is rare, and occurs more frequently on the border, where there are turf battles among drug traffickers. On the other hand, Fernando Carrión of Flacso says the increase in violence (homicides) in Ecuador is associated with the expansion of drugs in the country. There is, however, no empirical basis for a better understanding of the situation.

In Bolivia, there is concern about the increase in drug trafficking and related crimes, particularly in Santa Cruz, as noted in some of the interviews. Because of its strategic location on the border with Brazil, the Santa Cruz region has been a drug-trafficking base since the 1980s. The situation appears to be worsening due to several factors: a significant increase in the consumption of cocaine and its derivatives in Brazil and Argentina, the increase in Peruvian cocaine passing through Bolivia, the emergence of West Africa as an entry point for drugs being shipped to Europe and the arrival of traffickers from Brazil and Colombia. Until now, small family groups, which are harder to detect, were the country’s main drug traffickers. Although rates of violence and crime are still lower in Bolivia than in other countries in the Andean sub-region, the Bolivian government appears to be facing an expansion of drug trafficking and organized crime. There are similar concerns in Peru, where the

government of Alan García paid little attention to combating drug-related organized crime and reducing the high levels of corruption that allowed drug trafficking to grow.

As long as organized crime in the Andean sub-region takes advantage of all types of illicit interaction with the state (corruption in public administration; impunity; infiltration to block action by the police and the courts; and the co-opting or assassination of public officials, legislators and prosecutors), in addition to increasing crime and violence, it will end up perverting politics, destroying institutions and capturing states. There is also a “reverse capture,” in which criminal operations and networks emerge from positions of power that have been co-opted by criminal groups, which then increase their control over the political system and further their private interests. That was the “narco-strategy” of Vladimiro Montesinos⁵⁵ in Peru that he managed from a position in the government, which enabled him to pull the strings of organized crime while controlling the country’s drug policy. In Colombia, political, economic and security networks—along with criminal organizations—have used power, land, drug trafficking and violence to accumulate resources, to try to partly reconfigure the state, to influence elections and reelections, to paralyze political reform and to neutralize part of the actions against organized crime.⁵⁶ “War on drugs” strategies do not address the convergence of drug trafficking, paramilitarism and politics.⁵⁷

Because they claim to be victims, rather than part of the problem, transshipment countries tend not to examine the conditions in their countries that allow the operation of networks connected to the flow of various types of illicit goods. At the forum held in Venezuela, the opposition congressman who participated stated that local conditions enabled transshipment and helped create criminal organizations, citing the case of Walid Makled, who was extradited from Colombia on May 9, 2011, at the Venezuelan government’s request to face charges related to drug trafficking and organized crime. The congressman said that Makled had penetrated the state to gain an advantage in his involvement in various facets of drug trafficking—obtaining IDs from security and intelligence agencies and concessions for urea (a cocaine precursor), controlling activities in Puerto Cabello and the company Aeropostal, acquiring petroleum bonds and intervening in politics by distributing goods. The congressman therefore proposed bringing charges against public officials and private figures who facilitate drug traffickers’ activities. Interviews in Peru revealed the complicity of certain sectors of the state with drug trafficking, particularly the judiciary and the armed forces. Several interviews in Bolivia mentioned the case of Gen. René Sanabria, former head of the Special Anti-Drug Forces, who was arrested in Panama for drug trafficking.

Discussion in the event on organized crime, described previously, showed that taking specific actions against money laundering or criminal gangs is not enough if ties between organized crime and political parties and those in political or economic power are not addressed. Regardless of who captures whom, the symbiosis between the state and organized crime exacerbates the weakness of the state, citizen insecurity and constraints on democracy. And although responses to transnational crime will have to be appropriate for each situation, participants insisted that in general, it is crucial to: move away from an overemphasis on military action and criminalization of the

weakest links in the chain; increase intelligence; take power away from criminal networks; break up the alliances between politics and crime; give power to communities, especially in border regions; and strengthen institutions.⁵⁸



2 A contradictory context

Fifty years after the signing, in 1961, of the UN Single Convention on Narcotic Drugs, and 40 years after the U.S. government declared its “war on drugs,” the scenario has changed. Many studies show that there are elements of continuity, but also of change, in the situation in the hemisphere and in the debate over the failures of and alternatives to the current prohibitionist paradigm.

These new, undeniable situations are occurring in a contradictory context. This is the topic of chapter two, which is organized around three main themes: the situation in the United States, changes in Latin America, and the contributions of the Latin American Commission on Drugs and Democracy and the Global Commission on Drug Policy.

2.1 The debate in the United States

When control of narcotics was established in international law (the Opium Convention of 1912 and the conventions of 1961, 1971 and 1988), the United States essentially became the main player in the definition and oversight of drug policies worldwide.

The election of Barack Obama raised expectations that Washington might acknowledge the failure of current drug control strategies, the harm they have caused and the urgent need for policy change. But so far, President Obama has not promoted a reform of the strategy. Most of his efforts have focused on the country’s serious economic crisis and internal political polarization, as well as wars in Iraq, Afghanistan and Libya and the situation in the Middle East. Nevertheless, under his administration, the focus on drugs as an alleged threat to U.S. security against which war must be waged (a view strengthened after September 11, 2001) has been attenuated. There have also been some shifts in rhetoric and in some drug control policies.⁵⁹

As he had promised during the election campaign, in August 2010 the Obama Administration and the U.S. Congress took an initial step with a fair sentencing law that reduced part of the sentencing disparity between users of crack (80 percent of whom are African Americans) and cocaine powder, and eliminated the mandatory five-year minimum sentence for simple possession. To fulfill another campaign promise, the State Department announced in the autumn of 2009 that it would end the harsh application of federal drug laws in states that had adopted laws legalizing cannabis use for medical purposes. Raids on therapeutic cannabis centers fall under the DEA, however, which expressed its disagreement with the measure and continued the raids, although less frequently than before. Obama also fulfilled his third campaign promise. In late 2010, he signed a law that lifted the prohibition on the use of federal funds for needle exchange and sterilized needle programs for HIV prevention.

The first National Drug Control Strategy Report fully prepared by the Obama Administration, released in the spring of 2010, emphasized community-based prevention and the inclusion of treatment for problematic drug use in health care programs to expand access to such services, and indirectly acknowledged the collateral damage caused by current policies when referring to “promoting and supporting alternatives to incarceration.” Later, in a YouTube video, President Obama gave legitimacy to the debate over U.S. drug policy. The federal budget for drug policy has also been made more transparent, and there is a slight increase in funds for treatment and education. It is also significant that the Obama Administration has taken a more diplomatic approach, as demonstrated in UN debates, and has shown signs of moderation in responding to progressive reform efforts on the part of Latin American governments.⁶⁰

It is also only fair to point out the change in tone and language. For example, the head of ONDCP, who is responsible for guiding official drug policy, announced that the term “war on drugs” would not be used, and spoke of the need to treat drug consumption as a public health problem. When asked what indicator would be used to measure the results of the drug control strategy, the ONDCP director replied: “Reducing the number of deaths and the number of young people who come into emergency rooms as a result of drugs is important.” Other government officials have also insisted on the need for a greater emphasis on demand and increased attention to the problematic use of drugs as a health, rather than a security, problem.

The most significant change in drug policy, two and a half years into the Obama Administration, started in March 2009 in Afghanistan. It began with statements by a special envoy, who called the poppy eradication campaign in that country “the most wasteful and ineffective program I have seen in 40 years,” and added that it was counterproductive, created political support for the Taliban and undermined nation-building efforts.⁶¹ A month later, at a summit of the G8 countries, he added: “The poppy farmer is not our enemy, the Taliban are, and to destroy the crops is not an effective policy. And the U.S. has wasted hundreds and hundreds of millions of dollars on this program and that is going to end. We are not going to support crop eradication.”⁶² That same year, the U.S. government stopped funding forced eradication of poppy plants in Afghanistan and channeled resources into interdiction and economic development.

Those changes, however, have had little impact on actual policy implementation beyond Afghanistan. The bureaucracy that made a career out of the “war on drugs” and drug control programs is still in place. The officials responsible for eradication in Afghanistan are divided on the issue, and there has been tepid political support in Congress for the change of strategy in that country. In addition, the allocation of federal funds has not changed: three-fifths of the funding goes to controlling drug supply—including coca crops in Bolivia, Colombia and Peru—and only two-fifths to prevention and treatment programs. Official assessments of the effectiveness of U.S. drug policy are still based on arrests, seizures and incarceration, not on social, health or crime indicators.

Although there is a growing consensus in the U.S. Congress about the failure of drug policy, debate has stalled. The outcome of the November 2010 elections has led some Republicans to pressure the Obama Administration to maintain the *status quo* in the “war on drugs” and the targeting of military and police aid toward drug production and trafficking. The debate has focused on a possible spillover of drug-related violence from Mexico into the United States and on whether to add the Mexican cartels to the list of terrorist organizations to illustrate the connection between drugs and terrorists. All indications are that as of mid-2011, the creation of a commission to evaluate drug policy, an initiative that has been approved by both houses of Congress but has not become law, had stalled in both the House of Representatives and the Senate. Another initiative proposed in 2010, aimed at evaluating the U.S. criminal justice system and drug control policies, was languishing in the Senate at the time of writing.

While continuity continues to prevail over change in current Washington policy, new situations in the United States are creating room to discuss the failure of prohibitionism and examine alternatives. Because of the economic crisis and the existence of other priorities, there are fewer resources available now for drug control programs. The belief that eliminating or reducing production could decrease the availability and use of illicit drugs in the United States has been seriously questioned, and studies show that repressive policies instead make distribution more threatening and dangerous. By mid-2011, 22 states had decriminalized marijuana consumption or adopted laws allowing its therapeutic use, or both. Proposition 19 on cannabis regulation was supported by nearly half of the voters in California, and new referendums are in the works. Although comprehensive reform of drug policy is not forthcoming from the highest political spheres in Washington, debate and a search for alternatives are under way in society, in the states, and in Europe and Latin America.⁶³

By mid-2011, the only significant shifts in U.S. drug control policy in Latin America were in amounts and targets, as reflected in the 2012 federal budget presented to Congress. That budget includes a 15 percent reduction in funds for Plan Colombia for military supplies and some shifting of resources toward social and economic problems. In the Mérida Initiative, there is greater emphasis on institutional reforms and strengthening community-based prevention.

Although modifications in U.S. drug policy have not translated into substantive changes in its Latin American strategy, the White House appears to be taking a less interventionist approach to

alternatives that are emerging in the region. Aside from the fact that President Obama is more open to dialogue, however, the United States is not demonstrating great interest in a region whose stability it cannot continue to guarantee. Above all, fewer countries in the region appear willing to take orders from Washington. The problem, as Juan Tokatlian points out, is that if the United States maintains its strategies of denial, exaggeration and stigmatization of the drug problem, the growing divide between approaches and actions in the United States and Latin America could have a negative impact on U.S. relations with countries in the region.⁶⁴

2.2 Latin America seeks rapprochement

The prohibitionist, criminalizing approach to drugs was orchestrated by Washington and adopted by Latin America,⁶⁵ where most of the cocaine and part of the heroin consumed in the United States originates. Although the drug control strategy has come under scrutiny and has been questioned, as we have seen, it is still being implemented in the Andean region. But weariness with an effort that increasingly appears futile and seriously harmful has led to an evolving—and also contradictory—situation in Latin America.

Since the beginning of this century, a “left turn” has taken place in most South American and Central American countries. This change of direction was spurred, in part, by the earlier implementation of a neoliberal economic model that promised prosperity, but brought structural adjustments with serious social and regional impacts, giving rise to discontent and strong social protests. Another factor in the shift was the crisis of traditional political parties, which brought leaders to power from sectors other than the dominant elites: former military officers in Venezuela and Peru, a blue-collar worker in Brazil, an indigenous man in Bolivia, a bishop in Paraguay, a professor in Ecuador, and members of former guerrilla movements in Uruguay, Nicaragua, El Salvador and Brazil.⁶⁶

In some Latin American countries, this unprecedented and simultaneous change in voter preferences has been accompanied by efforts to gain more maneuvering room for international actions. Taking advantage of the revenues generated by high prices for mineral, energy and agricultural exports, their domestic policies now have a greater social emphasis. Part of the change is reflected in the inclusion of new stakeholders, the implementation of constitutional reforms and the renegotiation of contracts with the multinational corporations that exploit their natural resources. At the same time, most of the governments express interests and positions that are different from those of Washington on certain issues, particularly drug policy. In addition, new regional groups—the Union of South American Nations (UNASUR), the Bolivarian Alliance for the Americas (*Alianza Bolivariana para los Pueblos de Nuestra América*, ALBA), the Latin American and Caribbean Community and the Latin American Pacific Rim—are taking shape in an effort to resolve issues of mutual interest within the region.

Most South American governments are diversifying their relations, forging ties particularly with Asian countries, mainly with China—which has become the second most important trading partner for many countries in the region, and whose demand for natural resources has pushed up prices for raw materials exported from Latin America—but also with Russia and Iran, for economic and military reasons, or out of a desire to bolster a multipolar world. Another significant factor in the changes in Latin America is Brazil's new role in the region and the world, partly because of its size and population, but also because of its economic performance and political interest. Brazil's new role and its transformation into a strong investor in and trade partner of many countries in the region has begun to counterbalance, to some extent, the decline in U.S. presence in Latin America and has enabled Brazil to promote mechanisms for regulating regional affairs.⁶⁷

The United States continues to focus on its own interests, especially those related to the economic crisis, trade and security, while much of Latin America has been focusing on greater social justice, economic development and diversification of international relations, particularly with Asia. As the preceding chapter showed, the Obama Administration has continued the drug decertification (now called “determination”) of two South American countries; three of the five Andean countries—Bolivia, Venezuela and Ecuador—do not have U.S. ambassadors and lack high-level representation in Washington, and the DEA was expelled from two of them. Although regional expectations have decreased, President Obama is still well regarded in the region, which constitutes an opportunity for discussion of issues of hemispheric interest, such as drugs.

In the first decade of the 2000s, this change in context did not involve all South American countries. National political interests led to significant differentiation among governments, increased regional fragmentation, revived obstacles to democracy, security problems and tensions between neighbors. Colombia's recent shift in foreign policy has led to the normalization of diplomatic relations with its neighbors, revived its interest in Latin America, proven its commitment to South American integration processes and changed relations with the United States, which are no longer reduced to security and drugs.⁶⁸ The president of Colombia, the country that most enthusiastically adopted the “war on drugs” model, accepted the Global Commission's report, giving legitimacy to discussion of all alternatives.⁶⁹

The change in Colombia was followed by the election of Ollanta Humala as president of Peru, as a result of voter discontent in the highlands, Amazonia and southern Peru. During his campaign, Humala proposed a social correction to the model of economic growth, to make it more inclusive, and suggested a different approach to the issue of drugs. These changes in Colombia and Peru could usher in a phase of greater Andean and Latin American dialogue, as well as consensus building within bodies such as UNASUR, based on the countries' different situations and national interests.

The Latin American context, however, is contradictory. The severity of the situation in Mexico and Central America appears to allow no leeway for examining the effectiveness of actions taken to address organized crime, for which drug trafficking is highly profitable. Most governments believe

the problem in Central America can be reduced to the displacement to that region of cartels from Mexico and Colombia as a result of Plan Colombia and the Mérida Initiative; however this simplistic explanation ignores internal factors in the sub-region that facilitate the operation of criminal organizations. That was the prevailing view at the International Conference in Support of the Central America Security Strategy, held June 21-22, 2011, in Guatemala, with the participation of all the presidents from the isthmus and from Mexico and Colombia, as well as the U.S. Secretary of State and the foreign minister of Spain.

Despite these circumstances and fears, some sectors in Mexico are seeking alternatives. In Central America, some voices insist that instead of reproducing Plan Colombia and the Mérida Initiative, it is important to identify the lessons learned from those programs. There is a growing awareness of the way in which weak states, corruption, and ties between politics and crime are conducive to the development of various types of businesses linked to organized crime, which makes those countries easy prey. In El Salvador, there has been an effort to lower the homicide rate through judicial reform and preventive measures. The government has spoken of the need for a comprehensive approach to the problem, including capacity building—and greater transparency and democratic institution building—especially of police and security forces and the institutions responsible for justice and inclusive development. At the International Conference, Costa Rican President Laura Chinchilla said:

That is why improving security in Central America is still conditioned on the need to strengthen democracy, consolidate the rule of law, promote social justice and overcome poverty, combat corruption and put an end to impunity. Without a decisive effort to do those things, combating crime and violence will never have the success we desire.

She also stressed the importance of having:

A discussion of some aspects of our policies of criminal persecution. It is obvious that there will not be enough room in prisons if we persist in criminalizing drug use instead of treating it as a public health problem and if we concentrate on locking up the people at the bottom of the crime pyramid, letting those at the top go unpunished.⁷⁰

Others in the region have made similar comments. In response to the publication of the report produced by the Latin American Commission on Drugs and Democracy, figures such as former Mexican President Vicente Fox and Mexican President Felipe Calderón have spoken out in favor of a deeper debate. The taboo that previously blocked discussion of policy assessments and alternatives has begun to break down.

In this changing Latin American context, however, many obstacles complicate a frank examination of the failure of drug control policy. The main impediment is the legitimate concern of families, communities and governments about the negative effects of problematic drug use and, especially, organized crime, which affects public security. Interviews carried out for this study reflect the fear in

Andean countries that debate over drug policies or more flexible approaches could lead to increased drug use and violence and weaken efforts to combat organized crime. The growing wave of crime creates public demand for harsher policies.

There is also still widespread support for prohibitionism, which has proven resistant to change. This support is nourished by collective prejudices, personal tragedies and thorny dilemmas for governments. It is also fed by ignorance and a lack of knowledge, which makes it difficult for the media to take a more informed approach, resulting in the persistence of sensationalistic or moralistic coverage. Much of the support for prohibitionist and criminalizing policies is due to the limited dissemination of systematic studies about the failures of drug policy and the lack of public debate about evidence of the beneficial effects of some alternatives.

Other significant obstacles stem from the governments and agencies that implement “drug war” strategies and defend the *status quo*, as well as political and economic elites who expect solutions from outside and who are not willing to correct the structural problems that underlie ties between their leaders, and those of their societies, with illegal economies and organized crime.⁷¹

Another factor that makes it difficult to change the approach to drug policy is the complex design of international conventions and their approval by the vast majority of countries, which took a century; these agreements have become a straitjacket that makes significant change nearly impossible. When the UN drug oversight system insists on defending the conventions, it blocks the necessary assessment of and adjustment to policies based on scientific studies and changing circumstances. It is also an obstacle to redefining the criteria for measuring success and for taking into account recurring failures and considering new approaches that would be more in tune with national or regional situations. The UNODC’s timid acknowledgement of the need to balance and modernize the system meets fierce resistance.

2.3 From the Latin American Commission on Drugs and Democracy to the Global Commission on Drug Policy

A turning point in the debate over drug policy came with the report *Drugs and Democracy: Toward a Paradigm Shift*, published in Rio de Janeiro in February 2009 by the Latin American Commission on Drugs and Democracy. The Commission is led by former presidents Fernando Henrique Cardoso of Brazil, Ernesto Zedillo of Mexico and César Gaviria of Colombia, with the participation of former ministers, writers and other regional figures.

The report discussed both the “war on drugs” and the fear of evaluating it. It proposed breaking the silence about the failure of that policy, debating its consequences and analyzing alternatives. Among

the alternatives suggested were: treating drug consumption as a public health issue, launching innovative information and prevention campaigns (especially targeting youth), focusing law enforcement actions on organized crime, reorienting repressive strategies for controlling crops, and using advanced medical science to analyze the advisability of decriminalizing the cultural use of coca leaves and the possession of cannabis for personal consumption.⁷² It also recommended discussing not only alternative crops, but social development in rural areas, as well as jobs, democratic education and the participatory design of solutions.

In June 2011, the Global Commission on Drug Policy, made up of 19 members who represent various sectors from all regions of the world, and with support from scientific and advocacy networks involved in the issue, presented its report in various international forums.⁷³

The mere existence and nature of the Global Commission, as well as the content of the report, helped revive and invigorate international debate on the issue. In the most important European, U.S. and Latin American media, there has been a proliferation of editorials and articles by public figures and columnists who have commented on the Global Commission report and examined in greater depth the failure of the global war on drugs, the consequences for individuals and societies and the need for a change in approach. The Global Commission has also received support from a wide range of professional networks, including judges from across Latin America, whose Rome Declaration of 2011 addressed public policy on drugs and human rights.

A second area in which the Global Commission has made a valuable contribution is in legitimizing the discussion of alternatives. Among the eight cases examined by the Commission and presented to illustrate its principles and recommendations are five that exemplify the negative effects of the current policies and three that show concrete progress in the design and implementation of alternatives. The latter highlight the relationship between early implementation of harm reduction and public health strategies and a decrease in HIV transmission among intravenous drug users, and effective and more humane management of problematic drug use by treating users as patients rather than criminals. The Commission also compared best practices in decriminalization, which have not increased drug use.

A third significant contribution is the Commission's recognition of the need to investigate the outcomes of both the policies implemented and the alternatives tried, to ensure that drug strategies are based on scientific evidence, rather than on ideology or political expediency. Also noteworthy is its effort to glean best practices from successful models and its call to "break the taboo on debate and reform" because "the time for action is now."

A fourth point that merits attention is the insistence that shared international responsibility for the drug problem cannot overshadow each country's political, social and cultural situation, on which drug policies must be based. It also cannot block experimentation and the development of alternatives that reduce harm and respect the rights and needs of people affected by the production, trafficking and use of drugs.

A fifth contribution is the Global Commission's leadership in stimulating widespread debate involving diverse sectors: not only those who have traditionally dominated the discussion from a security standpoint at the national and international levels, but also other governmental sectors and multilateral bodies involved in human rights, health and development, as well as academics, non-governmental networks, communities affected by the production and use of drugs and civil society. The inclusion of former presidents and former secretaries general of the UN and OAS—as well as former high-level government officials and representatives of business and social sectors—on the Commission has been very important.

In the United States, Latin America and around the world, a new consensus appears to be emerging about the urgent need for debate about the prohibitionist strategy and the “war on drugs,” as well as the crucial need to learn lessons not only from the failures, but also from the positive outcomes of harm reduction and risk control policies.



3 The regional debate on alternatives

The failure of current drug policies to make a dent in the illicit drug trade —while at the same time generating a range of political, social and economic costs— is leading policy makers, experts and activists across the region to search for new strategies to contain the scale of illicit markets and minimize the harm caused to individuals, communities and states by drug production and consumption —and by the drug policies themselves. In the search for a new paradigm, there is a growing recognition that drug policies should be evidence based and grounded on human rights, public health and social development principles. The region's evolving paradigm no longer relies on a militarized approach stemming from national security concerns, but on public health and welfare concerns and the recognition of the need to build strong communities.

At the same time, confronting organized crime requires effective, transparent and uncorrupt law enforcement agencies. The drug issue cuts across several sectors of society; therefore a range of state and local institutions need to be strengthened, including law enforcement agencies, judiciaries, public defenders and other offices designed to protect civil and human rights, and ministries and agencies that provide services or promote economic development in poor areas. Similarly, establishing a civilian state presence in areas where coca and poppy crops are cultivated and drug production and trafficking flourishes is crucial. In short, effective drug policies are intricately intertwined with the promotion of good governance, the rule of law and equitable economic development.

This approach calls for recognition that reducing drug production and consumption is a long-term project. Too often, politicians implement short-sighted policies in order to demonstrate immediate results. In the absence of longer-term strategies, any gains that are made are quickly reversed. This approach also requires recognition of the limitations on resources and expectations (i.e., what can reasonably be achieved). As pointed out by Andean Forum member Jorge Ortiz:



In recognizing that the problem exists, we must also be conscious that as much as we want resources to confront this problem, they will always be limited. In other words, we cannot do everything, we cannot eradicate all of the crops, we cannot stop the distribution chain, and we cannot provide services to all consumers because resources are limited. What we need to do is be efficient.

The Latin American Commission on Drugs and Democracy has, for the most part, achieved one of its fundamental objectives: the taboo on drug policy debate in Latin America is being lifted. A range of policy alternatives is being considered and, in some cases, implemented. Ten specific alternative policies that are currently being debated in the region and in the United States are discussed below.

3.1 Develop drug policies rooted in the reality on the ground, while recognizing the importance of regional cooperation

To date, the international drug control system has generated a one-size-fits-all approach to dealing with all facets of drug production and trafficking. Hence, national governments have been constrained in their ability to experiment with policies that may be more suited to their local political, economic, social and cultural situation. The Andean countries need international flexibility to develop their own policy approaches—without the threat of reductions in international assistance or trade.

While the Andean countries see the U.S. government as a valuable partner that should be consulted, many Andean officials and experts clarified that Washington should participate as an equal in drug policy debates, and demonstrate respect for local realities and cultures. They also pointed out that as the world's largest consumer of illicit drugs, the United States has a shared responsibility to address the problems generated by drug production and trafficking and, in particular, to reduce the U.S. demand that fuels the drug trade, as well as money laundering. In fact, the Obama Administration has recognized this co-responsibility.

Several of those interviewed for this report referred to the need to “nationalize drug policy.” In the Andean region, only two countries to date have sought to do this. On taking office, the Correa government ended the long-standing U.S. military presence at the Manta base and renegotiated anti-drug agreements to put the Ecuadorian government in direct control of anti-drug forces and operations over which the U.S. government had significant influence. In Bolivia, the Morales government initiated the “coca yes, cocaine no” strategy described previously; however, this change in strategy generated significant tensions in bilateral relations with the United States. The Bolivian experience illustrates the difficulty of just one country questioning the prevailing drug

control strategies, and points to the need for an agreement among Andean countries on basic principles that should guide these policies.

Given the reductions in U.S. economic assistance for anti-drug operations in Bolivia and its expulsion of the DEA, which took effect in early 2009, the Bolivian government has sought greater levels of support from the EU and other countries, including Brazil, the United Kingdom and France. It has also strived to increase drug control cooperation with neighboring countries, including information and intelligence sharing. As a result, Bolivia has not only replaced the country's traditional reliance on the DEA for intelligence gathering along its borders, but has also worked with its neighbors to reinforce regional drug control mechanisms and increase the effectiveness of joint operations and other efforts to thwart the activities of criminal organizations.

Finally, key components of developing an Andean regional approach to drug control are the strengthening of the role of the Andean Community (CAN) and the creation of UNASUR's South American Council on the World Drug Problem. Although the institutional architecture for UNASUR and its various commissions is still under development, many South American officials have highlighted its value as an alternative political space for enhancing regional dialogue and collaboration. Venezuela, Bolivia and Ecuador have been among the most enthusiastic supporters of UNASUR. Colombian President Manuel Santos has also been more involved than his predecessor, and has promoted the candidacy of his compatriot, Maria Emma Mejia, for Secretary General. Most recently, the new president of Peru, Ollanta Humala, has shown an interest in strengthening the role of UNASUR. In short, the Andean countries are well positioned to shape UNASUR's positions on key issues, help create an effective institutional structure and ensure that it becomes a lead actor on important regional and global issues.

3.2 Treat drug consumption as a public health, not a criminal, issue

The prevailing zero-tolerance approach to drug control is based on the premise that harsh punishment will deter people from consuming drugs, but a growing body of evidence demonstrates that the threat of harsh sanctions does not deter drug use.⁷⁴ The decriminalization of drug consumption—removing criminal sanctions for possession of drugs for personal use—is among the most widely discussed reforms today. Advocates of decriminalization argue that it is both more humane and more effective. One legal expert interviewed for this report said, “We don't put alcoholics in jail, so why should we put drug users in jail?” Within UN and other forums, more and more actors are calling for an end to the stigmatization and marginalization of those who consume drugs but cause no harm to others—and for respecting their human rights. Providing health and treatment services to those in need—rather than incarceration—offers a better chance of reducing the number

of problematic drug users and the associated delinquency, and improving health indicators. In addition, treatment is less costly than incarceration.

Distinguishing between recreational and dependent drug users is important in developing sound treatment programs. The vast majority of drug users worldwide are casual users who cause no harm to themselves or others. Some dependent or problematic drug users engage in criminal behavior—such as low-level dealing, property crime or prostitution—to support their drug habit. The goal of policy makers should be to get problematic users into treatment and to implement social reinsertion strategies to ensure that they do not return to drug use and/or criminal activity.

In 2001, Portugal began an experiment to decriminalize drug use and possession. More than ten years later, numerous studies document the positive impact of this reform; treatment has been shown to be an effective alternative to prosecution and incarceration. At the time the reforms were adopted, critics claimed that drug use and drug-related crime would increase, and that the country would become a Mecca for drug tourists; however, this did not happen. A comprehensive evaluation by Caitlin Elizabeth Hughes and Alex Stevens found “reductions in problematic use, drug-related harms and criminal justice overcrowding.” While they found small to moderate increases in reported drug use among adults, these were comparable to trends in other European countries, and they found a significant drop in injecting drug use.⁷⁵ According to the Portuguese government, problematic drug use has been cut in half, which in turn has led to a significant decrease in the incidence of deaths related to drug use and HIV/AIDS and other infectious diseases. Far more drug users are now receiving treatment.⁷⁶ In order to implement this approach, the Portuguese government has invested significantly more resources in treatment, risk reduction strategies and the social reinsertion of former dependent drug users. Government officials stress that the focus on treatment is crucial to the success of the decriminalization model.

Moreover, the new Portuguese approach has led to a significant drop in drug-related crime and has freed up law enforcement agencies, which are now able to focus on controlling drug trafficking organizations. It has also helped alleviate prison overcrowding, as the number of incarcerations for drug-related crimes has declined. Hughes and Stevens report an increase in intelligence operations and illicit drug seizures as indicators of how the decriminalization approach has enhanced law enforcement efforts.⁷⁷

In Latin America, a variety of decriminalization reform efforts are underway. Brazil passed a law in 2006 that replaces prison sentences with mandatory treatment and community service. This was a partial decriminalization, as drug offenses are still handled by the criminal justice system. Subsequently, in 2008 a Sao Paulo judge ruled that imposing sanctions for possessing drugs for personal use is unconstitutional. Some Brazilian lawmakers are working on another drug law reform that would completely decriminalize the possession of drugs for personal use. In Argentina, the Supreme Court has opened the door for a decriminalization effort. In August 2009, it ruled that imposing criminal sanctions for the possession of small amounts of drugs for personal use is

unconstitutional. Various proposed laws to that effect are pending before the Argentine Parliament, and Argentine analysts believe that there is a good possibility that after the October 2011 elections, legislation will be approved that decriminalizes drug possession for personal use and allows the cultivation of cannabis for personal use. Mexico also enacted legislation in 2009 that decriminalizes the possession of very small amounts of drugs for personal use and mandates the provision of treatment and prevention programs.

In the Andean sub-region, Ecuador is the first country to constitutionally mandate treating drug consumption as a public health issue. Article 362 of the 2008 Constitution, in its section on health, states:

Addictions are a public health problem. It is the State's responsibility to develop coordinated information, prevention and control programs for alcohol, tobacco, and psychotropic and narcotic substances; as well as offer treatment and rehabilitation for occasional, habitual, and problematic users. Under no circumstance shall they be criminalized or their constitutional rights violated.

However, since implementing legislation has not yet been enacted, the present law, which is ambiguous regarding consumption, remains in effect. Due to a reform of Law 108, it is no longer illegal to carry small amounts of drugs for personal use. This reform, however, does not define what is an acceptable amount of drugs, leaving it up to judges' subjective determinations about what constitutes drug trafficking. In Ecuador, all drug-related crimes require the immediate detention of the individual without the right to bail. Moreover, President Correa has criticized the new constitution for offering too many "guarantees" and, after having begun the process of changing the drug law as part of a broader reform of the penal code (for example, to make the punishments proportional to the crime), has backpedaled on the modification of these laws and other reforms to current drug policies in order to maintain a harder line. Therefore, the real impact of Article 362 is still not clear.

3.3 Invest more resources in evidence-based prevention and treatment programs

Preventing and treating drug dependence is a key responsibility of governments that has often been overlooked in Latin America. Private services are poorly regulated, and coercive and abusive practices are frequently carried out in the name of treatment. Government funds for prevention and treatment programs are sorely inadequate and international donors provide only miniscule support for domestic, demand-related programs in the Andean countries. In the interviews conducted for this report, increasing the resources for prevention and treatment programs was the most cited recommendation for improving drug policies in the Andean sub-region. Those interviewed also

underscored the importance of including tobacco and alcohol in drug prevention and treatment programs.

According to the International Drug Policy Consortium (IDPC), drug prevention “aims to increase awareness of drug-related risks and to change personal, social and environmental factors through actions promoting health and well-being” in order to “delay or avoid the onset of drug use and its progression towards drug dependence.”⁷⁸ The lessons learned to date show that the most successful prevention programs are incorporated into broader strategies to improve the socio-economic situation and health services offered in communities at risk, and involve dependent drug users, their families and affected communities in developing public policies.⁷⁹ IDPC also recommends that prevention programs “identify those most in need of treatment; offer a balanced menu of services incorporating different models, settings and levels of intensity; and develop smooth mechanisms for individuals to move between different elements as circumstances change.”⁸⁰

One community activist interviewed for this report emphasized that, “Successful models of prevention have tended to target at-risk groups, including gang members, children in trouble with school or police, and prisoners.” A crucial component of drug treatment is ensuring that individuals can be reintegrated into society—in other words, providing educational and employment opportunities and living situations to help the person avoid the temptation to return to drug use.

In recent years, significant controversy has erupted over the use of the term “harm reduction” as a treatment strategy. “Harm reduction” refers to policies, programs and practices oriented towards reducing the adverse health, social and economic consequences of drug use—without necessarily decreasing consumption. Those opposed to this approach assert that it sends the wrong message of tolerance of illegal activity, which could increase the consumption of drugs. While the term itself has become highly ideological, the reality is that such programs have had a good track record in decreasing deaths and health problems related to problematic drug use. Perhaps the best known harm reduction practices are needle and syringe exchange programs, which have proven to be very effective in reducing the spread of HIV and other blood-borne infections, and in preventing skin and soft tissue infections caused by sharing needles. A more controversial harm reduction strategy is the provision of safe injection sites, or “consumption rooms.” These are supervised facilities that provide drug users with a safe place to consume drugs in order to offer them health and other services and take them off the streets. Australia, Switzerland, Germany, Spain and Canada have all established safe injection sites—all with good results. Studies of the Swiss program show that it significantly reduced consumption among the heaviest users, decreased the size of the heroin market and reduced the incidence of property-related and other crimes carried out by drug users.⁸¹

3.4 Implement legal reforms to ensure proportionality in sentencing, abolish mandatory minimum sentencing, and expand alternatives to incarceration for low-level, non-violent offenders

The comprehensive study carried out by WOLA and TNI referred to in the first section of this report documents how countries across the region have filled their prisons with low-level, non-violent drug offenders with extremely high sentences. “Certain reforms to drug laws and how they are implemented,” the report states, “could help alleviate prison overcrowding while protecting public safety and respecting civil and human rights.”⁸² These include the following:

Ensure proportionality in sentencing. Sentences should be proportionate to the gravity of the crime committed. Drug laws should distinguish between: low-, medium- and high-level offenses; the ranks or positions of the accused in drug trafficking networks; violent and non-violent offenses; and different types of drugs and the dangers they pose to society. A “mule”—someone transporting drugs—earning a small amount of money should not be treated the same as a drug trafficker linked to organized crime who controls the profits gained from the illicit business.

In July 2008, the Ecuadorian government implemented a national pardon that covered all persons who had been sentenced for trafficking, transport, acquisition or possession of illegal substances and met the following criteria: the prisoner had been convicted, it was a first-time offense, the amount of the illegal substance involved was 2 kg or less and the prisoner had completed at least 10 percent (or at least 1 year) of the sentence. According to the Public Defender’s Office, 2,300 people were released through the pardon. In addition, the Constituent Assembly later reinstated a *two for one* sentence reduction. Although it covered all crimes, it was especially welcomed by the large percentage of women serving long sentences for drug offenses who did not qualify for the pardon. This measure, combined with the pardon for small-scale traffickers, greatly helped to alleviate prison overcrowding in Ecuador and significantly improved the living conditions of the remaining prisoners. However, these were intended to be temporary measures pending more profound reforms. As President Correa has backtracked on the reform process, the prison population is once again becoming extremely over-crowded.

As required by the new Ecuadorian constitution, a new penal code was drafted that incorporated drug trafficking offenses. The draft legislation eliminated mandatory minimum sentences, giving judges more discretion and the ability to take into account the circumstances in which a crime was committed, and proposed guidelines to ensure that sentencing reflects the gravity of the crime committed. As of the end of July 2011, the government’s proposals had been revised numerous times, and the fate of the drug policy reforms originally proposed by the Correa government was far from clear.

Abolish mandatory minimum sentences. The sentences for crimes committed in Ecuador, described previously, provide a vivid illustration of the injustices that can be created by mandatory minimum sentences. For the most part, Andean governments have adopted these with the encouragement—if not the outright insistence—of the U.S. government. Yet even in the United States, there are increasing calls for an end to mandatory minimum drug sentencing—and the most egregious example has been overturned. In 1986, when crack consumption became the focus of intense media attention, the U.S. Congress adopted legislation requiring anyone convicted in federal court of possession of 5 g of crack to receive a mandatory sentence of five years; 10 g resulted in 10 years. The threshold amounts for those mandatory sentences were 100 times higher than those for powder cocaine. Given that approximately 80 percent of those convicted on crack charges are African-American, the sentencing disparity was for years widely denounced as unjustified and racist. After the inauguration of President Obama, the U.S. Justice Department worked with members of Congress to eliminate the sentencing disparity, resulting in the Fair Sentencing Act, which reduces the crack/powder ratio to 18:1—the ultimate compromise necessary for congressional approval. The Act, signed into law in August 2010, also eliminates the five-year mandatory minimum sentence for simple possession. According to Marc Mauer of the Sentencing Project, this change in legislation “is expected to benefit about 3,000 defendants a year, with an average sentence reduction of 27 months.”⁸³ In July 2011, the U.S. Sentencing Commission ruled that the Fair Sentencing Act should be applied retroactively; approximately 12,000 federal prisoners are now eligible to have their sentences reduced.⁸⁴

Another very significant change in U.S. mandatory minimums was the repeal of the notorious Rockefeller drug laws (state laws, as opposed to the federal law just described). Named after former New York Governor Nelson Rockefeller, the 1973 drug laws were the most draconian of any U.S. state, though other states later followed New York’s example. Under the Rockefeller drug laws, the penalty for selling 2 oz or possessing 4 oz of any drug resulted in a minimum 15-year sentence to life in prison, and a maximum 25-year sentence to life in prison. As a result, someone caught with 4 oz of any drug, including marijuana, could be given the same sentence as someone convicted of second-degree murder. For years, critics from across the political spectrum denounced the myriad of injustices created by applying such harsh sentences to what were often more minor crimes, including the long-term imprisonment of dependent drug users. The laws were also widely decried as racist, as African-Americans and Latinos are incarcerated at a much higher rate than white Americans. The Rockefeller drug laws were first modified in 1979, when mandatory minimums were reduced for the possession of cannabis. In 2005, another round of reforms led to reductions in mandatory sentences for non-violent drug offenders, among other changes. Finally, in April 2009, the mandatory minimums were overturned altogether.

Establish and expand alternatives to incarceration for those charged with low-level drug offenses. Alternatives to incarceration include any kind of sanction or treatment that does not involve jail time; most often these involve drug treatment programs for dependent drug users, education or employment training, or community service. Ideally, these programs also address the complex

issues of family and social reinsertion for dependent drug users and low-level offenders. According to the U.S.-based NGO Families Against Mandatory Minimums:

Just because a certain punishment does not involve time in prison or jail does not mean it is “soft on crime” or a “slap on the wrist.” Alternatives to incarceration can repair harms suffered by victims, provide benefits to the community, treat the drug-addicted or mentally ill, and rehabilitate offenders. Alternatives can also reduce prison and jail costs and prevent additional crimes in the future.⁸⁵

Many countries in Latin America have drug laws that prohibit alternatives to incarceration for anyone accused or convicted of a drug offense. For example, Brazil's 2006 drug law specifically prohibits substituting prison with alternative sentences, even though Brazilian law allows this for other non-violent offenses, which are often very similar to drug offenses. However, in September 2010 Brazil's Federal Supreme Court ruled in favor of an appeal by a person accused of trafficking 13.4 g of cocaine, and determined that the prohibition of alternatives to incarceration as established in the 2006 law was unconstitutional and that the possibility of substituting the penalty of imprisonment should be considered on a case-by-case basis. The application of this decision may benefit other low-level traffickers and help reduce the nation's overflowing prisons.

3.5 Reorient law enforcement efforts towards medium- and large-scale drug traffickers and dismantling criminal organizations, rather than targeting consumers, small-scale farmers, low-level dealers and “mules”

As the problems associated with organized crime, including drug trafficking, continue to grow, there is an increasingly urgent need to reorient law enforcement efforts towards dismantling criminal networks. Local police tend to target low-level offenders for two reasons: 1) the need to meet arrest quotas or provide quantitative indicators to their superiors encourages them to go after those easiest to detain; or 2) low-level drug offenders, particularly those involved in robberies, are targeted as a response to community concerns about citizen insecurity and crime. However, numerous case studies show that on the contrary, reducing the focus on low-level offenders frees up scarce resources and time to allow law enforcement agencies to do the difficult detective work necessary to detain and prosecute drug traffickers. As already described, Portugal provides a good example of such an approach. The United Kingdom also adopted a policy of diverting dependent drug users, including those engaged in crimes such as property theft to support their drug habit, into drug treatment centers rather than prison. The evidence shows that this resulted in increased numbers of problematic drug users in treatment and a significant decrease in drug-related crime.⁸⁶

Increasingly, experts agree that as long as the demand for drugs continues, law enforcement efforts will never be able to totally eliminate illegal drug markets. Hence the focus, according to IDPC, should be on “curtailing the operations of those groups and individuals who are causing the most harm to society, whether it be through the corruption of officials and institutions, violence and intimidation against law-abiding citizens, or the distortion or undermining of legitimate economic activities.”⁸⁷ This means re-orienting resources away from militarized policies toward solid police investigative work, with a clear focus on improving the capacity of investigative units and intelligence gathering capabilities. As one interviewed expert said, results are achieved “by intelligence gathering, in order to penetrate such networks and obtain information that allows for (law enforcement) action.”

Profound police and justice sector reforms are at the heart of putting more effective drug policies into place. Police need to be able to provide judges with sufficient high-quality evidence for courts to convict those who are guilty, and courts must have the resources and technical capacity to handle complex cases involving organized crime—as well as the legislative tools needed for convictions in such cases. Particularly in the case of Latin America, however, which has a long history of disregard for basic human and civil rights, these efforts must be carried out with full respect for such rights and the rule of law.

Two other strategies are necessary for effective law enforcement against drug trafficking in the Andean sub-region:

Disrupt the flow of precursor chemicals. The production of drugs such as cocaine and methamphetamines (a growing problem in Latin America) requires an enormous quantity of precursor chemicals. However, these also have many legitimate uses, so a balance must be found between preventing precursors from being channeled into illicit markets and allowing them to reach legal markets. Controls include registration requirements, record keeping and suspicious order reporting for importers, exporters, manufacturers and distributors of retailers.

Go after the profits; disrupt the flow of drug money. In 1989, the G7 set up the Financial Action Task Force (FATF), a freestanding body created to address the money laundering issue. The next year, the FATF issued 40 recommendations to governments on how to curtail money laundering. According to FATF:

A great deal can be done to fight money laundering, and, indeed, many governments have already established comprehensive anti-money laundering regimes. These regimes aim to increase awareness of the phenomenon—both within the government and the private business sector—and then to provide the necessary legal or regulatory tools to the authorities charged with combating the problem. Some of these tools include making the act of money laundering a crime; giving investigative agencies the authority to trace, seize and ultimately confiscate criminally derived assets; and building the necessary framework for permitting the agencies involved to exchange information among themselves and with counterparts in other countries.⁸⁸

In its February 2011 assessment of countries' commitment and ability to deter money laundering and terrorist financing, the FATF upgraded Ecuador's status in recognition of that country's development of an action plan to improve its compliance with the FATF recommendations. Bolivia is the only Andean country assessed by the FATF as not having made sufficient progress.⁸⁹ Nevertheless, the Bolivian government recently adopted Supreme Decree 0910, which includes improved control of the financial system to try to stop laundering of assets.

At the same time, it is important to recognize the limitations of aligning international legislation in order to prevent money laundering. According to Francisco Thoumi and Marcela Anzola, the "lack of congruence" among international legislative models and domestic environments has failed to obtain the desired results in Andean countries. Thoumi and Anzola point out that while international legislation focuses on the financial sector, "in those countries money laundering transcends the financial sector...a significant part of the influence of money gained from this activity consists of importations of contraband, which is sold in the domestic market." These countries rely on a very considerable informal sector, which "does not comply with many laws and norms." As a result, international legislation should harmonize "with institutional particularities and weaknesses of the countries," and focus more on institutional issues than on mere legislative changes.⁹⁰

Finally, organized criminal networks depend on their relations with people in the "legal world," such as politicians, businessmen, judges and prosecutors, and law enforcement and military personnel. As Juan Carlos Garzón reports, "government forces are vulnerable to being corrupted by criminal groups in scenarios where wages are low, institutions are weak, impunity is the norm, and response capacity is weak, especially at the local level," a situation that describes each of the Andean countries. "Organized crime's new ways of operating," he asserts, "demands new responses on the part of governments. These responses must come in the form of new legislation that provides mechanisms not only for pursuing criminals and taking them to court, but also for dismantling their support networks."⁹¹

A particularly disturbing dimension of organized crime is its influence on institutions of political representation (political parties and parliaments). Money is essential in democratic systems, allowing citizens to organize political parties, groom new leaders and present proposals in electoral campaigns. Wherever illicit funds are channeled to specific candidates or parties, the concept of free and fair elections is at risk. The most well known case is that of Colombia, which has been shaken by more than one such scandal, as illustrated by the financing offered by drug traffickers to the presidential campaign of Ernesto Samper and the investigation of more than one-third of the members of Congress between 2006 and 2010 for illicit political financing provided by drug cartels. In the parliamentary sphere, bribes from criminal interests can potentially influence legislation. After the April 2011 parliamentary elections in Peru, accusations emerged (although they have not been confirmed) of a "narco-delegation" composed of ten legislators whose campaigns were supposedly financed by drug traffickers. Similar problems can also be found at the local level.

Ways to alleviate the complex situation of corruption include offering public financing to campaigns and sanctioning parties that include (confirmed) “narco-candidates” on their lists.⁹²

The ultimate impact of all of the proposed policy reforms suggested above will be limited if intelligence gathering, interdiction or other actions are compromised by official corruption. Examples of successful efforts to combat corruption are scarce, particularly in Latin America, but rooting out such corruption is one of the most important tasks faced by all of those interested in reducing drug production and consumption.

3.6 Explore options for developing legal, regulated cannabis markets

Drug laws across Latin America fail to adequately distinguish between types of drugs and the health and other risks they pose. Hence, cannabis is treated the same as cocaine. A disturbingly high number of people incarcerated on drug offenses are marijuana consumers. Yet numerous studies have shown that cannabis is less harmful than most other licit or illicit recreational substances to individual health and to society more broadly.⁹³ Studies also show that efforts to reduce cannabis consumption and production have had little impact; there is no evidence that criminalization reduces marijuana use or that relaxing cannabis legislation leads to increased use.

A report from the Global Cannabis Commission, composed of five internationally renowned academics and experts, entitled *Cannabis Policy: Moving Beyond Stalemate*, concludes that while cannabis is a more benign illicit substance and is more commonly traded within social networks than other illegal drugs, its illegal status generates tens of billions of dollars for organized crime and results in high levels of violence in some countries. Moreover, considerable harm is caused to those consumers who end up in the criminal justice system. The Commission presents a range of policy alternatives, from decriminalization (where consumption remains illegal, but possession is punished with administrative, rather than criminal, sanctions) to partial prohibition (where cannabis use and possession are no longer illegal, but commercial activities related to its large-scale production and sale are prohibited by law).⁹⁴

The debate in the region was advanced significantly by the Latin American Drugs and Democracy Commission, which recommended to “evaluate from a public health standpoint and on the basis of the most advanced medical science the convenience of decriminalizing the possession of cannabis for personal use.”⁹⁵ The Global Commission goes even further by recommending the encouragement of “experimentation by governments with models for legal regulation of drugs (with cannabis, for example) that are designed to undermine the power of organized crime and safeguard the health and security of their citizens.”⁹⁶

In the United States, approximately three-quarters of a million citizens are arrested every year for simple marijuana possession, often causing significant harm to the person arrested and necessitating a huge expenditure of funds by the criminal justice system. As states face tighter and tighter budgets and new generations come of voting age, attitudes in the United States on this issue are changing. A Gallup Poll in October 2010 found that 46 percent of Americans are in favor of legalizing the consumption of cannabis, and 50 percent are opposed. Even greater support is evident on the West Coast, where the Gallup Poll found 58 percent in favor of legalizing cannabis use. Demographic trends suggest a tipping point; a majority of Americans are likely to support cannabis legalization in the not-too-distant future.

The issue of marijuana decriminalization was first put on the U.S. political agenda by former U.S. President Jimmy Carter. As he wrote recently in *The New York Times*:

In a message to Congress in 1977, I said the country should decriminalize the possession of less than an ounce of marijuana, with a full treatment program for addicts. I also cautioned against filling our prisons with young people who were no threat to society, and summarized by saying: "Penalties against possession of a drug should not be more damaging to an individual than the use of the drug itself." These ideas were widely accepted at the time. But in the 1980s President Reagan and Congress began to shift from balanced drug policies, including the treatment and rehabilitation of addicts, towards futile efforts to control drug imports from foreign countries.⁹⁷

More than three decades after former President Carter's initiative, U.S. lawmakers have introduced legislation, "Ending the Federal Marijuana Prohibition Act of 2011," which would prevent the federal government from criminally prosecuting adults for the possession of cannabis for personal consumption. According to *The Hill's* Congress Blog, "It marks the first time that members of Congress have introduced legislation to eliminate the federal criminalization of marijuana since the passage of the Marijuana Tax Act of 1937."⁹⁸

At the state level, however, reforms have steadily advanced. To date, 22 states have either decriminalized marijuana consumption, adopted medical marijuana laws or both. An additional 7 states have cities or counties that have decriminalized marijuana consumption. In other words, 29 out of 50 states have significantly loosened marijuana laws (see Figure 4).

3.7 Implement an “alternative livelihoods” approach to reducing the cultivation of crops for illicit markets and end aerial and manual forced eradication

The Andean sub-region has now had several decades of (for the most part) unsuccessful experience in implementing alternative development projects. Apart from some isolated success stories, short-term gains in coca and poppy cultivation are quickly reversed if viable economic alternatives for poor farmers are not in place. A coca grower leader interviewed for this report explained: “The alternative development that they offer is simply roads, or perhaps improvements in health care, or maybe simply sports facilities or schools. But there isn’t an alternative from which one can live.”

A growing body of evidence shows that a project-specific alternative development approach is insufficient; rather, comprehensive, sustainable rural development strategies are needed. This “alternative livelihoods” method offers a more promising long-term approach to reducing the crops that make their way into illicit markets. According to a report by WOLA, such an approach is:

Based on improving the welfare of poor farmers via comprehensive development strategies that include improving local governance and citizen security, combined with voluntary reductions in cultivation of crops deviated to the illicit market. Implemented in tandem with effective demand reduction strategies to contain and eventually shrink the global cocaine and heroin markets, the “development first” approach has the potential to gradually achieve sustainable reductions in coca and opium poppy cultivation by reducing poor farmers’ reliance on such crops.⁹⁹

Numerous international donors have promoted this approach.¹⁰⁰ These donors believe that the underlying structural conditions faced by small farmers must be addressed and their overall quality of life improved—including access to education, housing, health care, etc.—and the rule of law and effective governance must be developed. As noted by GIZ, alternative livelihoods refers to “improving living conditions in the cultivation region as a whole, to reducing violence, and to integrating areas that have been excluded from the life of the rest of the country.”¹⁰¹ According to the EU, “development assistance in illicit crop producing areas should be undertaken in full compliance with the overall aims of human rights protection, poverty alleviation, conflict prevention and resolution, peace building and human security.”¹⁰² Such efforts should be carried out with respect for local cultures and should build upon local knowledge and practices. They should also be environmentally sustainable.

Proper sequencing is a fundamental principle of the alternative livelihoods approach; farmers must have sufficient sources of income **prior** to significant crop reductions. According to expert Hugo Cabieses, “The reduction of crops should be a consequence of development and not a prerequisite for it.”¹⁰³ Even UNODC advocates such an approach, recommending that member states “ensure that eradication is not undertaken until small-farmer households have adopted

viable and sustainable livelihoods and that interventions are properly sequenced.”¹⁰⁴ Once alternative sources of income are available to small farmers, governments and international donor agencies can work with them to encourage the reduction of crops that end up in the illicit market. Also fundamental to this line of thinking is that coca or poppy farmers should not be considered the problem, or criminalized, but rather treated as a major part of the solution. The success of any development program depends on meaningful community and farmer participation and support, from the conception of the strategies to their implementation and evaluation. For these reasons, development assistance should **not** be contingent on crop reductions.

The classic alternative livelihoods success story is Thailand, which virtually eliminated opium poppy cultivation through economic development and nation-building efforts carried out over a 30-year period. The Thai government's goal was to integrate highland communities into the nation state, and it was willing to invest significant resources in rural development efforts—including large investments in infrastructure, health, education and other services and institutions. The result was steady improvements in the local quality of life and increased opportunities in new agricultural markets and off-farm employment. Crop reduction efforts only began after 15 years of such efforts and were carried out in collaboration with the local population. In his comprehensive evaluation of opium reduction efforts in Thailand from 1970 to 2000 for the UNODC, Ronald Renard concludes that one of the primary lessons of the Thai experience is the importance of local community involvement in all stages of the development process and crop reduction strategies.¹⁰⁵ Nonetheless, as a result of the gains made in Thailand, poppy and illicit drug production shifted to neighboring Burma and Laos, and eventually to Afghanistan. “Thailand's experience,” according to Youngers and Walsh, “illustrates the limitations of supply-side strategies without simultaneous attention to reducing demand in world markets.”¹⁰⁶

The only country in the Andean sub-region that has adopted a similar approach is Bolivia—though its strategy is based on the country's own experience of years of forced eradication campaigns that have generated social conflict and violence and pushed poor farmers deeper into poverty, as well as recommendations put forward for years by Bolivian coca grower federations. As described earlier, the Bolivian government adopted a coca “rationalization” strategy that replaced forced eradication. In addition, the government has increased economic development resources, particularly in the Chapare region. Local mayors there have also proven to be very dynamic in getting international assistance and implementing their own economic development projects. The Bolivian government's efforts include infrastructure development and improvements in basic services such as health care and education. While it is too soon to determine the medium- and long-term impact of the government's development efforts, it has to date been successful in containing coca production. It has consistently met its target of eliminating 5,000 hectares of coca annually through cooperative crop reduction. Moreover, overall coca production has remained relatively stable in Bolivia—in contrast, for example, to neighboring Peru, where coca production has increased steadily in recent years. According to UNODC, 28,900 hectares of coca were produced

in Bolivia in 2007; 30,500 in 2008; 30,900 in 2009; and 31,000 in 2010. And it has achieved this without the high social, economic and political costs of forced coca eradication.

3.8 Respect the traditions and practices of local cultures: recognize the traditional, cultural, medicinal and other attributes of plants such as the coca leaf in international conventions

Andean peoples have consumed the coca leaf for centuries. Coca chewing is an integral part of traditional and religious ceremonies and it has many beneficial attributes, such as helping to alleviate the symptoms of high altitude, cold and hunger. It is a mild stimulant and has nutritional value. *Mate de coca*, or coca tea, is widely consumed. Coca chewing is popular in middle class, urban areas of Bolivia and in northern Argentina. In Bolivia, Peru and Colombia, a variety of coca-based products are available, including soft drinks, coca flour (used for making bread and muffins) and lotions and creams.

Nonetheless, the 1961 Convention on Narcotic Drugs includes coca in its List 1 of dangerous narcotics, along with cocaine and heroin. Moreover, article 49 states that “coca leaf chewing must be abolished” within a 25-year period (which expired in 1989). The position taken by the international community at the time was based on the findings of the UN’s 1950 Coca Leaf Enquiry Commission. Its report was later criticized as racist, inaccurate and culturally insensitive.¹⁰⁷ The position was subsequently debunked by scientific research showing that consumption of the coca leaf in its natural state can in fact be beneficial.¹⁰⁸ The 1988 Trafficking Convention sought to address this error by stating that any measures “shall take due account of traditional licit uses,” but at the same time limited its application by stating that this could not undermine obligations assumed under previous treaties. As a result, the International Narcotics Control Board (INCB) continues to berate countries such as Bolivia in its annual reports for allowing the continued licit use of the coca leaf.

Since 1961, the UN has also promoted much stronger protections for indigenous and cultural rights. Article 31 of the 2007 UN Declaration on the Rights of Indigenous Peoples states that “indigenous peoples have the right to maintain, control, protect and develop their cultural heritage, traditional knowledge and traditional cultural expressions.” In May 2009, the Permanent Forum on Indigenous Issues, an advisory body to the UN Economic and Social Council (ECOSOC), stated that it “recognizes the cultural and medical importance of coca in the Andean sub-region and other indigenous regions of South America” and recommended “the amendment or abolishment of the sections of the Convention relating to the custom of chewing coca leaf that are inconsistent with indigenous peoples’ rights to maintain their traditional practices in health and culture enshrined in Articles 11, 24 and 31 of the Declaration.”¹⁰⁹

IDPC points out that: “Peru has always maintained a legal coca market and the National Culture Institute declared coca chewing as immaterial cultural patrimony in 2005. Colombia allows traditional use of coca in its indigenous reserves and Argentina also legally recognizes coca leaf use and protects the rights of its consumers.”¹¹⁰ However, Bolivia is the first country to enshrine recognition of the importance of the coca leaf in its national Constitution. Its 2009 Constitution declares coca to be a “cultural patrimony” and stipulates a period of four years for the government to “denounce and, in that case, renegotiate the international treaties that may be contrary to the Constitution.”

In 2009, the President of Bolivia sent a letter to the UN Secretary-General requesting an amendment to the Single Convention by removing Article 49, which obligates an end to the practice of coca leaf chewing. If no countries objected over an 18-month period, then the proposal would have been accepted. However, the U.S. government—fearful that any modifications to the conventions could open a Pandora’s box of additional reforms—rallied 17 other countries to its side in opposing the Bolivian proposal.¹¹¹ All South American countries signed the August 2009 Presidential Declaration of Quito, which expresses support for the Bolivian proposal and calls on the international community to respect the ancestral cultural practice of coca leaf chewing.¹¹² Mexico was the only Latin American country to oppose the Bolivian initiative.

While ECOSOC had yet to take a formal decision on the Bolivian proposal, the number of objections, including all of the G8 countries, provided a clear indication that it would ultimately be defeated. As a result, the Morales Administration, backed by the Bolivian legislature, decided to withdraw from the 1961 Convention and re-accede with a reservation. On June 29, 2011, the Bolivian government formally notified the UN Secretary-General of its withdrawal from the 1961 Single Convention on Narcotic Drugs (as amended by the 1972 protocol). The day this goes into effect, on January 1, 2012, Bolivia will re-adhere to the convention with a reservation on the coca leaf and its traditional uses. Thirty days later, Bolivia will formally be a state party to the convention again. However, if over one-third of member states object over the next 12 months, then the reservation would be considered invalid.¹¹³

Many countries have already informally expressed their support for Bolivia’s decision to withdraw and re-accede to the 1961 Convention. However, a longer-term solution would be to bring the Convention in line with international agreements regarding indigenous and cultural rights, by eliminating Article 49 and removing coca from List 1 of dangerous narcotics. As noted by Bolivia’s former Ambassador to the United Nations, Pablo Solón:

The idea that the international drug control regime cannot be changed—and that any amendment, however reasonable or minor—is a threat to the integrity of the whole system is shortsighted. As with all multilateral agreements, the drug conventions should be constantly reviewed and modernized in light of changing circumstances and variables.¹¹⁴

3.9 Adopt new measures for evaluating success, based on human development and socio-economic indicators

The 1961 UN Single Convention on Narcotic Drugs states that the ultimate objective of the international drug control regime is the improvement of the “health and welfare of mankind.” Yet that is not how drug policies are evaluated. At the present time, the “success” of counter-drug efforts is measured in terms of activities or processes: the number of hectares of coca eradicated, the number of cocaine processing labs destroyed, the number of drug traffickers arrested, the amount of cocaine seized and the like. While such indicators may show the extent to which countries or agencies are engaged in counter-drug programs, they do not illustrate the impact of policies or programs on the drug trade or on the “health and welfare of mankind.” A new paradigm is needed for measuring the performance of drug policy strategies.

For several decades now, the U.S. government has relied on such statistics for determining whether or not countries are cooperating with U.S. drug control goals. Both UNODC and the OAS’s CICAD ask countries to fill out elaborate questionnaires detailing such information. Increasingly, however, international actors are recognizing the limitations of such data and are starting to suggest the need to rethink evaluations of drug policy strategies. Various UNODC studies and documents point to the need for a new set of indicators that measures the well-being of society, including measuring improvements in education, health, employment and the environment; gender-related issues; institution building and governmental capacity; and reductions in violent crime.

For example, in the case of strategies to reduce the cultivation of coca and poppy crops, evaluations should take into account human development indicators that shed light on the living conditions of the local population and assessments of the extent to which viable economic alternatives are available for small farmers. This is precisely what Thailand did in its efforts to develop highland communities where poppy cultivation and opium consumption proliferated. The Bolivian government has also called for the use of human development indicators to gauge progress in its coca growing regions. For the most part, however, governments and international bodies have failed to adopt more meaningful measures of success with regards to crop reduction or other drug strategies.

The Global Commission on Drug Policy suggests that indicators should demonstrate the impact of drug policies on individuals—including the levels of drug dependence in communities, overdose deaths, and HIV or hepatitis C infections among drug users—and on affected communities. The community-related indicators should include the number of victims of drug market-related violence and intimidation, the level of corruption generated by drug markets and the level of petty crime committed by dependent users.¹¹⁵

3.10 Democratize the debate by involving a broad cross-section of society

Historically, drug policy-related decisions have been made by a small group of executive, military and police officials, with the limited involvement of legislatures. The focus on a supply-side approach to drug control has resulted in a situation in which, more often than not, officials involved in social and health programs are not included in decision-making processes or planning for drug control programs. Perhaps of greatest concern, the United States and other governments have often discouraged participation by civil society organizations and even local communities. As a result, the small farmers who grow coca or poppy have been stigmatized to the point where their participation in designing effective crop reduction strategies is now all but impossible, with the exception of Bolivia. The lack of transparency surrounding counter-drug programs and operations, particularly with regards to U.S. economic, law enforcement and military assistance, further thwarts the involvement of members of Congress and civil society organizations in drug policy debates.

The kind of information that is disseminated by much of the media on drug policy-related issues has further stifled reasonable debate; reporting is often sensationalist and emphasizes violence with graphic images. Far too often, reporters who are willing to investigate the intricacies of the workings of criminal organizations or their collaboration with state agents are threatened and killed. Countries such as Argentina and Ecuador, which have proposed significant drug policy reforms, have faced serious political opposition—often supported by the mainstream media—as the drug policy debates are caught up in bigger ideological battles. Both those advocating reforms and those wedded to present policies tend to have strong views and therefore experience difficulty in communicating effectively with one another.

Fortunately, this situation is changing; space is opening up for meaningful debate on drug policy issues, and civil society actors are playing an increasingly active role in that debate. Of particular significance in the region is the work done by the Latin American Commission on Drugs and Democracy, which has sought input from drug policy experts and NGOs, creating linkages between the members of the Commission and people working on drug policy issues on the ground. The Global Commission on Drug Policy also adopted this model, and has sought significant input from a range of groups and actors. Through the work of these two commissions, more and more high-profile individuals from across the political spectrum are advocating more humane and effective drug policies. In Latin America, a drug reform movement has taken root, as more NGOs and coalitions have begun working on these issues or have been created precisely for this purpose.

Too often, the drug policy debate has been cast as a choice between legalization and zero-tolerance-oriented prohibition. Yet the growing discussion in the region on drug policy issues reveals that there is a range of options that falls in between, all of which should be on the table for

discussion. Many of those interviewed for this report underscored the need for open and vigorous public debate for the development of more effective drug policies. They argue that in the absence of government-led debate, citizen groups must take the lead. The support of communities and citizens is essential for the design and implementation of more effective public policies related to drug production and consumption.



4 Conclusions and recommendations

The adoption of the following recommendations—put forth for consideration by governments, public opinion, civil society in the Andean countries and in the United States—would lead to humane and effective drug control policies:

1. The debate on international drug policy has increased significantly, due to the perceived need to assess the impact of such policies on the 50-year anniversary of the adoption of the 1961 UN Single Convention on Narcotic Drugs and the 40-year anniversary of the launching of the U.S. government's "war on drugs." **We recommend that these proposals be the point of departure when formulating drug policy. They should form the basis of an educational and media campaign to help reduce ideological biases in the debate while promoting a more evidence-based and regional approach to drug policy.**
2. The urgent need to evaluate progress and redirect efforts and resources creates a propitious opportunity to democratize the debate. **We recommend including additional state institutions in that debate (not only those that are exclusively related to police or military activities), as well as the widest possible range of eminent individuals, communications media, health experts, NGOs, civil society and community organizations, churches and academics.**
3. Policy makers, experts and activists in the region are searching for new strategies to contain the escalation of illicit markets and minimize the harm to individuals, communities and countries that is generated by both the production and consumption of drugs and the policies themselves. **We recommend supporting the Global Commission on Drug Policy's call for a deeper debate on new approaches that focus on reducing the harm caused to the most vulnerable sectors of society by the production, trafficking and consumption of drugs in order to help the Andean countries in their search for humane and effective policies.**

4. The results of alternative health- and rights-based approaches should be examined with an open mind, not from a perspective marred by prejudices and fear. Some governments and societies have dared to experiment with new policies designed to reduce the risks related to drug production and consumption—with encouraging results. **We recommend taking into account these attempts to adopt policies based on specific national situations and local cultural or social circumstances.**
5. Nature must not be the object of moral value judgments that define the existence of good or bad, legal or illegal plants. In 2009 Bolivia proposed an elimination of the 25-year prohibition (which expired in 1989) of the ancestral indigenous practice of chewing coca leaves from the 1961 UN Single Convention on Narcotic Drugs. As this proposal appeared to be blocked, Bolivia withdrew from the Single Convention on July 1, 2011, with the intention of requesting its readmission with a reservation regarding the coca leaf and its traditional uses. **We recommend supporting the declaration of the governments of the UNASUR countries, which on August 10, 2009, stated they “recognize that the chewing of coca leaves is an ancestral cultural manifestation of the Bolivian people which must be respected by the international community.”**
6. A one-sided point of view and the bilateral path embarked upon by Washington with each of the Andean countries with regards to its drug policy has made understanding and coordination between these countries, as well as with the United States, more difficult. Yet both are indispensable in dealing with cross-border phenomena such as drug trafficking and organized crime. **We recommend strengthening the dialogue and agreements between neighboring countries and within the frameworks of the CAN and UNASUR, and ensuring the participation of civil society in these regional entities. Additionally, we recommend implementing UNASUR’s South American Council on the World Drug Problem and holding a regional meeting to discuss the development of a common agenda on drug policy.**
7. Drug consumption is on the rise in all countries, and prisons are overcrowded with people caught transporting drugs or small-scale traffickers, many of whom themselves become problematic drug users and/or part of criminal organizations during their imprisonment. **We recommend implementing solid drug use prevention, treatment and harm reduction policies that respect human rights and offer adequate attention to those who need it. Likewise, we advocate treating drug consumption as a public health problem rather than a crime, and recommend that the necessary resources are made available for such programs.**
8. In 1977, Jimmy Carter, then President of the United States, proposed decriminalizing the possession of less than 1 oz. of marijuana and offering treatment programs for problematic users, pointing out that the penalties should not be more damaging to a

person than the consumption itself. More than three decades later, movements in the United States and Latin America are gaining momentum in favor of reforming cannabis laws. **We recommend supporting the proposal of the Latin American Commission on Drugs and Democracy to evaluate the “convenience of decriminalizing the possession of cannabis for personal use.”**

9. Prisons in the region are filling up with drug carriers or small distributors who have received extremely long sentences, many of whom end up becoming dependent users involved in crime while in prison. **We recommend decriminalizing personal consumption, applying proportionality to prison sentences, and implementing alternatives to incarceration for minor, non-violent offenders. Furthermore, we recommend applying humanitarian considerations to confront the devastating impact the increase of women incarcerated for drug trafficking is having on their lives, their families and their communities.**
10. The forced eradication strategy, and fumigation in particular, has not had sustained results and is counterproductive and socially and environmentally harmful. It has also affected relations between countries that share borders. **We recommend advancing towards an agreement among Andean countries to end the forced eradication of small farmers' crops and redirecting resources towards rural development.**
11. The substitution of crops that end up in illegal markets and “integrated development” are not successful strategies when pursued from a punitive perspective, as part of forced eradication and without real alternatives for income generation and the provision of basic services. **We recommend an “alternative livelihood” approach with an appropriate sequence of actions: once other sources of income are established, the crops destined for illicit markets can then be reduced. This strategy implies decriminalizing relations with small farmers, instead making them partners in the effort to foster integrated rural development.**
12. Criminal behavior linked to drug trafficking takes advantage of all possible illicit interactions with the state—such as corruption, impunity and the infiltration of government institutions—in order to hamper police and judicial efforts. This includes co-opting or assassinating officials, legislators and prosecutors. The existing symbiosis between the state and organized crime further undermines already weak states and contributes to increasing insecurity and constraints on democracy. **We recommend redirecting law enforcement efforts towards dismantling criminal organizations and networks linked to drug trafficking, improving and targeting intelligence activities, transforming the exercise of politics, strengthening institutions, confronting corruption and empowering communities, especially those located in border areas.**

13. The symbiosis between the state and organized crime deepens institutional weakness and insecurity and constrains democracy. **We recommend protecting democratic institutions from the corrosive influences of illicit political financing from drug trafficking by leveling the electoral playing field through measures such as public financing for parties and candidates, financial transparency during campaigns and sanctions against parties that include confirmed “narco-candidates” on their tickets.**

End notes

1. Professor at the Universidad Nacional de Colombia and member of the Andean-U.S. Dialogue Forum.
2. Principal Advisor for the Washington Office on Latin America (WOLA), Representative of the International Drug Policy Consortium (IDPC), and member of the Andean-U.S. Dialogue Forum.
3. Organized by the New York University Center for International Cooperation, International IDEA, the Netherlands Institute for Multi-Party Democracy and the Open Society Institute.
4. Two initiatives were launched: 1) a presentation of some of the group's proposals to the Ministry of Foreign Relations and the Office of the Vice President of Colombia (host country of the next Summit of the Americas), as well as to participants at the preparatory meeting held in Bogotá on 13 March 2011; and 2) monitoring of the current debate in the U.S. Congress on the creation of a commission with the mandate to evaluate current drug policy.
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9. Juan Gabriel Tokatlían, *Op. Cit.*, n6.
10. Fernando Franco, Socorro Ramírez and Marco Tobón (eds.), *¿Fracasaron las políticas antidrogas en el continente americano?* Universidad Nacional de Colombia, Caribbean and Amazonian campuses, Amazonian Research Institute (Imani), with support from The Carter Center and International IDEA, May 2011.
11. Organized by Santiago Mariani. Participants from International IDEA and the Peruvian Forum group were Kristen Sample, Rafael Roncagliolo, Ricardo Vega Llona, Jorge Ortiz and Cecilia Blondet, as well as Rómulo

Pizarro, head of the National Commission for Development and Life without Drugs, Peru (*Comisión Nacional para el Desarrollo y Vida sin Drogas*, DEVIDA), Ricardo Soberón, director of the Drugs and Human Rights Research Center, Hugo Cabieses, associate for drug-related issues at Transnational Institute (TNI), Jaime Antezana, drug trafficking analyst and Jorge Morelli, journalist.

12. The meeting, called by Eleazar Díaz Rangel as part of the fora held by the newspaper *Últimas Noticias*, brought together top-level government officials responsible for drug policy (General Néstor Reverol, Vice-minister of Citizen Security), the Venezuelan Congress (deputies Iris Varela and Julio Montoya), the Office of the Attorney General (Leoncio Guerra, director of the Office against Organized Crime), public organizations (Rafael Sánchez, president of the José Félix Ribas Foundation), academia (Hernán Matute Broncés, coordinator of the Drug Prevention at the Caracas Pedagogical Institute), and social organizations (Mary Mogollón, president of the Comecuid Metropolitan Commission, which works on drug use prevention and the education and treatment of drug users).
13. From the Carter Center: Richard Gaines, Katuska Lourenço da Silva, Joel Covelli and Emily Cohen; from WOLA: Adam Schaffer.
14. This paper benefited from the support provided by Camila Lanusse, José María Paz and Griselda Colina, who held 35 interviews, of which 21 were in person, 8 by telephone and 6 by written reply. Two were not recorded by request of the interviewees.
15. Juan Gabriel Tokatlian, "La 'guerra antidrogas' y el Comando Sur. Una combinación delicada," in *Foreign Affairs Latinoamérica*, Vol. 10, No. 1, January-March 2010.
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17. The national entities responsible for drug policy have not played a significant role or coordinated the state institutions involved in the issue. In an interview, Ricardo Soberón stated that DEVIDA has not orchestrated the Peruvian government's efforts and has been completely dependent on international cooperation, especially from The U.S. Agency for International Development and the U.S. Embassy. Colombia's National Narcotics Office is being liquidated because of corruption related to confiscated property. Bolivia established the National Council to Combat Illicit Drug Trafficking (*Consejo Nacional de Lucha contra el Tráfico Ilícito de Drogas*, Conaltid), but as noted in one interview, it was so inoperative that when it acted, it seemed like an NGO seeking funds for projects. In Ecuador, Consep has not been able to take the lead in drug policy and lacks the political capacity to manage the many drug-related policies, as noted in Adrián Bonilla and Hernán Moreano, "Lucha contra el narcotráfico en Ecuador," in Juan Gabriel Tokatlian, *Op. Cit.*, n6.
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During the four decade-long “war on drugs,” few battlegrounds have been harder hit than the Andes. The threats derived from drugs, delinquency and organized crime are now among the most serious challenges facing the sub-region’s democracies, afflicting society at all levels, from individuals and families, to communities and governments. If the Andean countries are to confront these problems, the time has come for dramatic change to the current policy.

When The Carter Center and International IDEA created the Andean-U.S. Dialogue Forum in 2010 to enhance understanding, improve relations and the ability to address shared problems, its members – influential social and political leaders from Bolivia, Colombia, Ecuador, Peru, Venezuela and the United States – quickly identified drug policy as a top priority. A working group was formed to assess current drug policy and propose more effective and realistic alternatives. The efforts of the working group on drug policy served as a point of departure for two members to draft the present report.

The authors chronicle the partial and transitory successes of current drug policy, documenting the high social costs which undermine its very sustainability. The authors present the case for potentially more effective, sustainable and humane policy proposals now under discussion in Latin America, the United States and Europe. The document ends with a number of compelling policy recommendations directed towards governments, the media and civil society.

International IDEA

International IDEA is an intergovernmental organization with 27 member countries. The Institute supports democratic institutions and processes worldwide by providing resources to strengthen capacities, developing policy proposals and supporting democratic reforms. International IDEA’s main areas of expertise are electoral processes, political party systems, constitutional processes, gender and democracy.

The Carter Center

The Carter Center was founded in 1982 by former U.S. President Jimmy Carter and his wife, Rosalynn, in partnership with Emory University, to advance peace and health worldwide. A not-for-profit, nongovernmental organization, the Center has helped to improve life for people in more than 70 countries by resolving conflicts; advancing democracy, human rights and economic opportunity; preventing diseases; and improving mental health care.

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