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**DRUGS:
TREATMENT
WORKS**

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Managing Editor:

Shannon Brown

Layout and design:

UNOV, Publishing, Referencing and English Section, Electronic Publishing Unit

Pictures and publications:

Melitta Borovansky-König

Distribution:

Marie-Therese Kiriaky

Contact information:

Advocacy Unit
United Nations Office on Drugs and Crime
Vienna International Centre
P.O. Box 500
A-1400 Vienna
Austria

Tel.: +(43) (1) 26060 4108

Fax: +(43) (1) 26060 5866

E-mail:

Shannon.Brown@unodc.org

Melitta.Borovansky@unodc.org

Marie-Therese.Kiriaky@unodc.org

Web site: www.unodc.org

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“Drugs: treatment works” is the theme of UNODC’s year-long campaign launched on 26 June,

emphasize the importance and effectiveness of drug treatment—to drug dependent individuals, as

the International Day against Drug Abuse and Illicit Drug Trafficking. The goal of the campaign is to

well as to the general public. Additionally, UNODC hopes to diminish the stigma attached to drug users by showing the possibilities for a positive future using the stories of individuals who have successfully undergone treatment and are engaged in a productive life.

Treatment successes

Rita Rovelo-Martínez, 23, is from Tuxtla Gutierrez, Chiapas, Mexico.

“My drug problem began at 16 when I tried marijuana. After that, I used cocaine, mushrooms, heroin and pills.

My parents looked for support in many different institutions until my father heard of a new centre that provided professional help and therapy. That is how I joined the Ixbalanqué Centre where I got the help I needed.

Through therapy, I discovered what made me happy. I also developed my ability to paint, and I took up sports again, which I had liked as a young girl.

When I left Ixbalanqué, I returned home with my mother and brother. I exercise in the mornings, and I help my mother in a business she owns at Tuxtla Gutierrez’ Airport. I got a job in the afternoons, and it helps



me be independent and to provide for my expenses. I still go once a month to Ixbalanqué for consultation, and I am happy with my life”.

Erlan Dusembin is an IT specialist in Pavlodar City, Kazakhstan. As a student, he smoked marijuana, later turning to cocaine, crack, LSD and heroin.

“I tried to quit drugs several times. God is a witness, it was very hard.

Eventually, I came to a treatment centre. I didn’t know what to do, but I knew that I wanted to live. This idea helped me a lot during treatment and rehabilitation.

In the social rehabilitation phase of treatment, I spent a lot of time on the computer learning new software and programs. There was no time to think about drugs.

Now, I work 15-18 hours a day. I like my work, and I get a chance to help guys who have had similar problems”.



UNODC launches local media campaign in over 40 countries to assist victims of human trafficking

As part of its global human trafficking awareness campaign, UNODC has joined forces with partners in over 40 countries to produce customized versions of its latest video spots. Each of the versions includes a local telephone hotline number where victims can receive assistance and concerned citizens can find out what they can do to help.

The latest UNODC video spots target countries and victims at the end of the trafficking route. Earlier spots in the campaign were designed to raise awareness about the human trafficking issue by focusing on the trafficking of women for sexual exploitation and on the trafficking of men, women and children for bonded and forced labour.

Human trafficking is a growing global phenomenon with 800,000 to 900,000 people trafficked across international borders annually, according to reports from the United Nations and the United States Department of State. The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, which supplements the United Nations Convention against Transnational Organized Crime,

promotes international cooperation to prevent and fight trafficking.

The United Nations Protocol calls on countries to protect and assist victims in legal proceedings and provide social assistance in areas such as counselling, housing, education and health care. Additionally, the Protocol points to the need to improve the social conditions that lead to human trafficking and to raise awareness about the issue through public information, such as UNODC's television campaign.

UNODC has established partnerships in the following countries: Argentina, Albania, Austria, Belarus, Belgium, Benin, Bosnia and Herzegovina, Bulgaria, China/Hong Kong SAR, Colombia, Costa Rica, Croatia, Czech Republic, Denmark, Dominican

Republic, Finland, Georgia, Guatemala, Honduras, Hungary, Italy, Iran (Islamic Republic of), Kyrgyzstan, Latvia, Lebanon, Lithuania, Mexico, Netherlands, Nicaragua, Nigeria, Poland, Portugal, Republic of Moldova, Serbia and Montenegro (3 partners), Slovenia, Sri Lanka, Spain, Switzerland, Tajikistan, the former Yugoslav Republic of Macedonia, Ukraine, United States of America, Uzbekistan.

"By adding the hotline telephone number of its NGO and government partners to the videos, UNODC is helping these organizations maximize their resources in order to reach a larger number of people",

**Antonio Maria Costa,
Executive Director, UNODC.**



NGOs share their experiences to help focus the fight against human trafficking

UNODC's efforts to fight human trafficking got a boost from NGOs during a UNODC-sponsored workshop in Vienna, Austria, in April. Sixteen Central and Eastern European NGOs, who have partnered with UNODC for local mass media campaigns to combat human trafficking, came together to discuss and map out strategies to fight human trafficking and HIV/AIDS in that region.

The workshop used the experiences of the NGOs and the lessons they have learned in running their own awareness raising campaigns to select effective designs and texts for stickers, postcards and posters to be used to fight human trafficking in Central and Eastern Europe. These posters and other materials complement the two new video spots on the empowerment of victims that

UNODC released this year as part of efforts to take the fight against human trafficking to the local level through partnerships with NGOs, governments and other relevant entities. The German Agency for Technical Cooperation (GTZ) provided funding for the campaign, and a Vienna-based public relations company, Men on the Moon, offered pro-bono support.

Interview with Marija Andjelkovic

Ms. Andjelkovic is the coordinator of the NGO Anti-Sex Trafficking Action (ASTRA) in Serbia and Montenegro.

In 2002-2003 ASTRA ran a mass media campaign including video clips, radio jingles, posters, leaflets for girls and institutions, and stickers, which were distributed through the ASTRA network of NGOs in Serbia and Montenegro.

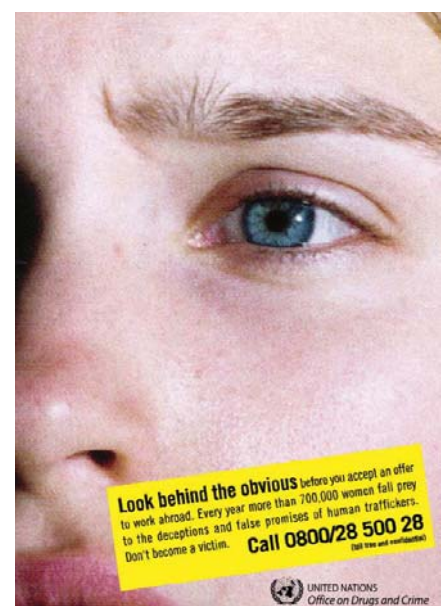
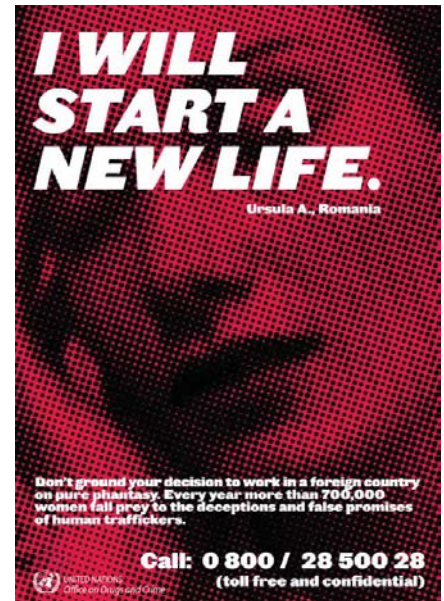
What kinds of activities were particularly successful?

The greatest lesson we learned was that in spite of careful planning, you cannot foresee everything. Besides your own engagement, the campaign depends on your partners, the political situation, the public climate regarding the topic of the campaign, etc. After the broadcasting of our

second video clip, the number of calls doubled, implying that we hit the target audience.

How were you able to determine whether your campaign was reaching the target audience?

Calls to ASTRA's SOS hotline were the best qualitative and quantitative indicators, because they clearly showed the impression made by the campaign materials not only on (potential) victims, but also on the general public who called us. Also, through these calls we were in a position to follow trends in trafficking in Serbia and on that basis to create a strategy for future activities.



Interview with Dr. Paulo Teixeira

Dr. Teixeira is a senior adviser with the World Health Organization (WHO) HIV/AIDS Department. He is involved with the "Treat 3 Million by 2005" (3 by 5) Initiative, which aims to provide antiretroviral therapy to three million people by 2005.



"We also need to be very courageous, because we need to break some legal and social rules that are preventing drug users from being part of these health initiatives, particularly when they are in prisons."

**Dr. Paulo Teixeira,
Senior Adviser,
World Health Organization**

What is the relevance of WHO's 3 by 5 Initiative with respect to drug use and drug dependence treatment?

The 3 by 5 is extremely relevant for all people affected by the HIV infection. In general, even when you have initiatives related to access to treatment, drug users systematically in many—or almost all—countries have been excluded based on arguments that they are not compliant, that they are not responsible. What we see is that that is not true.

We have experiences from Brazil, from developed countries like France, showing clearly that if we provide adequate services and prepare the professional support for drug users, they can be involved strongly, not only in treatment, but also in prevention.

We see also that when we have an integrated approach providing support for drug users—for example, to adopt substitution treatment—their compliance with antiretroviral treatment increases. The opposite is also true. When we have antiretroviral services involving aspects related to drug dependence, the compliance of this person with the health services is better.

What are the main obstacles to achieving 3 by 5 in relation to drug users?

The first is the myth around drug users that they are out of society and that they are not capable of being part of any kind of programme.

The second is the adoption of extremely conservative policies by many countries linking drug use almost exclusively to legal and police questions.

The third is a consequence of the first two. Many drug users—and in some countries they are the majority of those in need—are excluded from any initiative related to antiretroviral treatment.

Considering these three situations, we need to have a very strong policy mobilization, we need to involve more community organizations working on drug dependence, and we need to convince authorities—particularly health authorities—that this is mainly a public health problem. If we provide an integrated approach considering all aspects related to drug users, then these users can be involved in any programme.

Can you give examples of where these efforts are taking place?

Unfortunately, we don't have, particularly in developing countries, many authorities adopting a more flexible approach to the question of drug use. We have some very good experience, particularly in Western Europe, that all these possibilities that have been developed—like substitution treatment, harm reduction strategies (exchange of needles and syringes), promotion of safe sexual behaviour, etc—show clear and concrete positive results in the health fields and in the social scenario because this kind of approach—more flexible, more comprehensive, more integrated—makes these people more part of society. All the questions related to criminality tend to be reduced and, specifically with antiretroviral treatment, this can contribute to the control of AIDS policy. We need to show more results, more data to national authorities so that more countries adopt progressive policies.

What are the possibilities for 3 by 5 related to the criminal justice system?

The 3 by 5 intends to use existing positive approaches, like that adopted

by Spain, where all strategies related to harm reduction, treatment, substitution, etc, include drug users who are in prisons. Unfortunately, we don't have many experiences worldwide in this direction.

In developing countries this is a problem that needs to be solved, not only considering the component related to drug dependence but the component related to HIV and AIDS infection. For injecting drug users, we need to adopt a more aggressive, comprehensive and integrated approach. We also need to be very courageous, because we need to break some legal and social rules that are preventing drug users from being part of these health initiatives, particularly when they are in prisons.

Fortunately, we already have some clear direction—I refer to Spain as one case—but we need to be very clear that this approach has been the only one to have success when talking about injecting drug users.



Source: World Health Organization.

Glossary of terms

Antiretroviral drugs: Inhibit the replication of HIV. When antiretroviral drugs are given in combination, HIV replication and immune deterioration can be delayed, and survival and quality of life improved.

Drug substitution (substitution therapy): Administration under medical supervision of a prescribed medicine, pharmacologically related to the one producing dependence, to people with substance dependence for achieving defined treatment objectives.

Harm reduction: Aims to prevent or reduce negative health consequences associated with certain behaviours. In relation to drug injecting, "harm reduction" components of comprehensive interventions aim to prevent transmission of HIV and other infections that occur through the sharing of non-sterile injection equipment and drug preparations.

Needle exchange: Aims to reduce the transmission of infectious diseases by the repeated use and sharing of needles. The concept involves providing clean needles/syringes in exchange for used needles/syringes which are then safely disposed of.

"Treat 3 Million by 2005"

(3 by 5) Initiative: World Health Organization (WHO) created initiative with the goal of getting three million people on antiretroviral therapy (ART) by the end of 2005.

Anti-money laundering web site and databases get a facelift

The International Money Laundering Information Network (IMoLIN) has a new look and feel to make it easier for users to access information on anti-money laundering and counter-financing of terrorism law.

In the last three years, countries' laws and policies have changed rapidly to keep pace with the global terrorist threat and legal developments in issues related to organized crime and corruption. IMoLIN's new look coincides with the incorporation of all such changes to national law into its on-line legal library, possibly the largest of its kind in the world.

The Anti-Money Laundering Information Database (AMLID) on IMoLIN, which provides analyses of national legislation, has also undergone changes and has incorporated new features, like



on-line registration. Officials use AMLID to assist them in international cooperation with other countries by helping them identify the

legislative norms their counterparts have in place and how to respond to them.

UNODC administers IMoLIN on behalf of the United Nations, the Asia-Pacific Group on Money Laundering, Caribbean Financial Task Force, Commonwealth Secretariat, Council of Europe, Eastern and Southern Africa Anti-Money Laundering Group, Financial Action Task Force, Interpol and the Organization of American States.

Visit IMoLIN at www.imolin.org.

World Drug Report released

This year, the United Nations introduces its first two volume edition of the World Drug Report. The first volume covers market trends and provides in-depth trend analysis, and the second volume compiles detailed statistics on all of the drug markets. Together they provide the most complete picture yet of the international drug problem.

The total number of drug abusers worldwide is estimated at some 185 million, equivalent to 3 per cent of the global population or 4.7 per cent of the population aged 15 to 64. The new estimates confirm that cannabis is the most widely abused substance (close to 150 million people), followed by amphetamine type stimulants (about 38 million people).

In terms of health impact, as measured by the demand for

treatment services, opiates remain the most serious problem drugs in the world. They account for 70 per cent of drug treatment in Asia, 64 per cent in Europe and 62 per cent in Australia.

The Report is available at www.unodc.org in English. French and Spanish versions will be available in October.



Drug treatment courts work

In 1989, judges, prosecutors and treatment providers in the United States initiated drug treatment courts as a way of stopping drug-related crime by dealing with the underlying drug abuse. Fifteen years later, the United States now counts almost 1,100 drug treatment courts in operation and another 400 in the planning stage. Activities in the United States catalysed the development of drug treatment courts in a growing number of jurisdictions in Europe, North America, South America, the Caribbean, Africa and Oceania.

Drug treatment courts deal with drug-related offences and offenders through court-directed diversion into drug treatment and rehabilitation programmes. The traditional criminal process is usually held in abeyance pending successful completion of the programme. In dispensing justice, an integrated multi-disciplinary team, including law enforcement, prosecution, defence, treatment, probation, prisons and parole services, assist the judge and are committed to the common goal of breaking the drug-crime cycle.

Some of the key outcomes of recent evaluations of drug treatment courts

worldwide show that drug use and criminal behaviour are substantially reduced while participants are engaged in the programme and significantly lower when participants have graduated from the programme. Drug treatment courts also generate cost savings from reduced prison use, reduced criminality and lower criminal justice system costs.

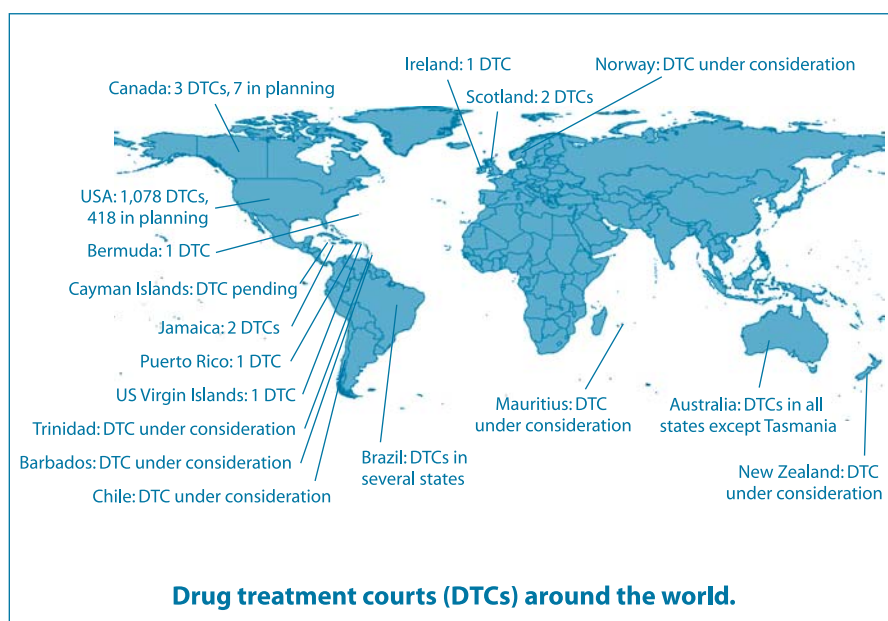
UNODC, together with IADTC, the United States-based National Association of Drug Court Professionals and other partners, provided technical assistance to help plan, establish or operate a number

of courts and built a drug court practitioner network that enabled initiatives like the December 1999 Expert Working Group on Drug Courts, since used to guide a number of drug court start-ups.

For more information, visit www.unodc.org/unodc/en/legal_advisory_courts.html.

“Perhaps the most important lesson learned was that we couldn’t do it alone. Neither the criminal justice system nor the treatment providers could provide the comprehensiveness, motivation or resources necessary to move the drug-using offender towards sobriety. Drug courts provide an integration of criminal justice and rehabilitative approaches for drug-using offenders”

**Judge Jeffrey Tauber,
chair of the International
Association of Drug
Treatment Courts
(IADTC) in 1999.**



A drug treatment court (DTC) is any court dealing, in whole or in part with drug-related casework, that implements universal best practice principles described in UNODC’s Expert Working Group Best Practices Report.

New television campaign raises awareness about corruption

UNODC released two 30-second video spots against corruption in a press event in conjunction with the Thirteenth Session of the Commission on Crime Prevention and Criminal Justice, held in Vienna, Austria, 11-20 May. This year's Crime Commission included a session focusing on international cooperation in criminal justice to strengthen the rule of law, including combating corruption and new types of crime.



With corruption, everyone pays.

The new video spots show corruption as an international problem and aim to raise worldwide visibility of the issue in order to encourage governments to take anti-corruption measures, such as ratifying the United Nations Convention against Corruption signed in December 2003.

The spots are available in English, Spanish, French, Russian, Chinese and Arabic, as well as in Portuguese, Swahili, Hausa, Igbo, Yoruba and Bahasa (Indonesia), and will be distributed to national and international networks. UNODC is also partnering with Transparency

International, the leading international non-governmental organization devoted to combating corruption, in the distribution of the video spots.

The television spots against corruption build on the successful experience of UNODC's three-year television awareness campaign against human trafficking, which includes four spots highlighting different aspects of that growing problem.

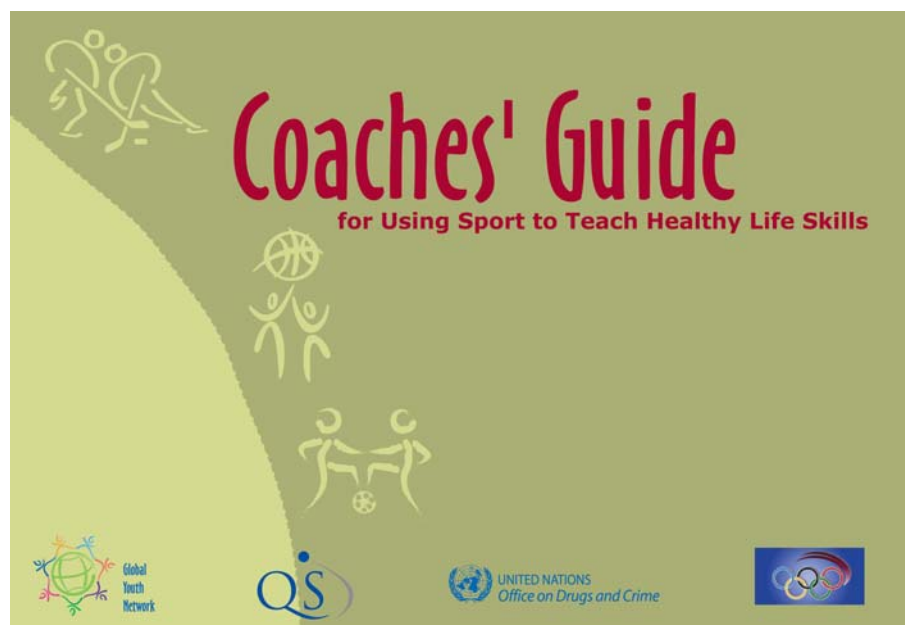
To view the spots, visit www.unodc.org/en/multimedia.html.

Coaches' Guide for Using Sport to Teach Healthy Life Skills

The Coaches' Guide is a CD-ROM containing a training package for use by coaches to help them maximize the potential of sport. This training aims to encourage young people to examine their decisions off the playing field in light of the ethical values that they learn from these sessions.

The information included is a guide for coaches in all sports (or teachers and youth leaders) in conducting an active and fun training for youth aged 10-14 to increase their awareness of the ethical decisions they make in sport, and to practice making decisions based on fair play values.

The CD-ROM provides everything a coach needs to conduct the training, including handouts, forms to be filled out and a detailed guide. In addition, the information contains tips on how best to deliver these sessions, such as practical suggestions for conducting role-plays and activity-oriented techniques to really engage young people on the topic of fair play.



Centre reaches out to youth in need

In the port city of Itajaí in the south of Brazil, youth with psychological problems—many related to drug abuse—are receiving free treatment at the Children's Psychosocial Attendance Centre (or Centro de Atendimento Psico-Social Infantil—CAPSi), a UNODC project in partnership with Brazil's National AIDS Programme. Begun four years ago, CAPSi has already worked with 350 patients, with 41 per cent of cases directly related to drug use, mostly crack.



The boys who come to CAPSi are particularly affected as a result of their involvement with drug trafficking, which often leads to drug dependence. Among girls, drug abuse is linked to prostitution, stimulated by truck drivers working in the port area. Such risky situations help spread HIV/AIDS among Itajaí's youth. Twenty per cent of the HIV/AIDS cases in the city can be traced to injecting drug use as the mode of transmission.

CAPSi works to promote mental and physical health, reducing risk factors and social exclusion. Its therapeutic project offers medical and psychological support, discussions about sexuality and drug use and pedagogical workshops that involve

the parents and relatives of the youth. The goal is to strengthen the patient's health values, increasing recovery chances. Itajaí's CAPSi also conducts harm reduction activities, which are helping to reduce the city's HIV/AIDS epidemic associated with drugs.

"Our therapeutic project has received positive evaluations from the adolescents and their relatives", says one of CAPSi's coordinators, psychologist Verônica de Marchi. She emphasizes that it is necessary to understand the specific characteristics of each individual, because people have health problems beyond those simply related to drug abuse.

CAPSi works mainly with youth from deprived areas where the majority of families have a monthly income lower than US\$ 160 and where unemployment is high. Additionally, drug use by patients' relatives occurs in 77 per cent of cases. The centre intends to expand its services to try and improve the mental health of children and adolescents from Itajaí.



New publications



The Bulletin on Narcotics

Provides information on developments in drug control at the local, national, regional and international levels for the benefit of the international community. The Bulletin (vol. LIV, Nos. 1 and 2, 2002) is devoted to the science of drug abuse epidemiology. The issue (vol. LV, Nos. 1 and 2, 2003) deals with the practice of drug abuse epidemiology.

http://www.unodc.org/unodc/en/bulletin_2002-01-01_1.html

http://www.unodc.org/unodc/en/bulletin_2003-01-01_1.html



Manufacture of Narcotic Drugs, Psychotropic Substances and their Precursors

Lists the manufacturers authorized by governments to produce narcotic drugs and manufacture psychotropic substances under international control, as well as the manufacturers of scheduled precursor chemicals. (ST/NAR.4/2003/1)



Competent National Authorities under the International Drug Control Treaties

Provides information to facilitate the cooperation between competent national authorities who are empowered to issue certificates and authorizations for the import and export of narcotic drugs and psychotropic substances, and who regulate or enforce national controls over precursors and essential chemicals in accordance with the international drug control treaties. (ST/NAR.3/2003/1)

Calendar of events

30 May–3 June

Meeting of Heads of National Drug Law Enforcement Agencies (HONLEA), Africa, Fourteenth Session, Cairo, Egypt

3 June

Vienna NGO Committee on the Status of Women, Vienna, Austria

7 June

Vienna NGO Committee on Aging, Vienna, Austria

26 June

International Day against Drug Abuse and Illicit Drug Trafficking; 2004 theme: "Drugs: Treatment Works"

28 June–9 July

Conference of the Parties to the United Nations Convention against Transnational Organized Crime and its Protocols, first session, Vienna, Austria

12–16 July

Expert Working Group on Extradition, Vienna, Austria

19–21 July

Second Technical Conference for Drug Control Research, Vienna, Austria

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