



Welcome to the September / October 2013 issue, particular welcome to our new members and readers.

Highlights:

- IDHDP independent organization and influential board of directors
- International Association for Hospice and Palliative Care (IAHPC)
- In the news
- New publications on the website
- Upcoming events
- IDHDP communications

IDHDP becomes an independent organization and attracts an influential board of directors

We are delighted to announce that on **20 September 2013** IDHDP registered as a Community Interest Company ("CIC") in the UK. A CIC is a limited company, with special additional features, created for the use of people who want to conduct a business or other activity for community benefit, and not purely for private advantage. Like a charity, a CIC is required to have a board of directors who oversee the governance while assuming overall responsibility and accountability for the organization.

We believe we have been very fortunate with the four people, listed below, who have accepted this role:

Dr Clare Gerada, who is currently RCGP Chair of Council, who has a wealth of experience in governance of a wide range of organizations, is a practicing GP and currently is the lead doctor at the Royal College of General Practitioners.

Professor Graham Foster, who some of you may know, is a Professor of Hepatology in London but well known internationally and is passionate about eradicating Hepatitis C.

Rakesh Bhasin, who is a senior solicitor within the Criminal Department. Rakesh has Higher Rights of Audience (Criminal) enabling him to represent clients both as a Solicitor and Advocate at all levels of Criminal Courts. He believes completely in health based policies, as well as insisting on good governance structures for organisations.

Dr Judith Yates, who has been a GP in inner-city Birmingham for the last 30 years, has worked tirelessly for good compassionate treatment for people who use drugs, fighting against stigma and for policy change and has been an active member of IDHDP since the beginning.

The first Board Meeting held on 14 October 2013 was uplifting - with four such distinguished individuals embracing the responsibility so enthusiastically.

IDHDP & International Association for Hospice and Palliative Care (IAHPC) initiate strategic policy partnership

Dr. Katherine Pettus, PhD, drug policy scholar & IAHPC representative at the International Drug Policy Consortium and the Vienna NGO Coalition:

International Association for Hospice and Palliative Care (IAHPC) is a global non-profit, organization dedicated to advancing palliative care around the world through education, research, and policy advocacy. Given that a cornerstone of best practice palliative care is pain relief, hospice and palliative care clinicians must have ready access to strong opioids, the primary one being oral morphine. Yet according to the latest WHO report, more than 83% of the world's population, largely in the Lower and Middle Income countries (LMICs), has low or no access to strong opioids for pain relief. Paracetamol is usually the strongest available analgesic for patients with advanced cancer pain, AIDS, post-surgical pain, gunshot wounds, etc. Because morphine and other opioid analgesics are controlled under the Single Convention on Narcotic Drugs, administered by the Commission on Narcotic Drugs (CND) in Vienna, aspects of the public health systems of UN member states requiring access to opioids are subject to international regulations. The primary (well documented) barriers to access in the LMICs, are fear of addiction, lack of clinician education, and inadequate health system resources to oversee and control the distribution of opioids as per international specifications. But since the objective of the international drug control conventions is (in the CNDs own words) to ensure adequate availability of narcotic drugs and psychotropic substances for medical and scientific purposes, and that objective has clearly not been met, IAHPC is involved in policy advocacy at the CND.

A robust strategic partnership between IAHPC and IDHDP is warranted to exponentially increase the civil society profile of physicians and clinicians concerned about access to medical opioids for palliative care and harm reduction medications in the leadup to the 2016 UN General Assembly Special Session on Drug Policy.

For more information on this and updates on the CND process, select the [link](#)

IAHPC Membership benefits include access to the CINAHL database with unlimited on-line access / downloads of full text articles from leading journals; eligibility for travel grants to learn or teach; access to regular policy and palliative care updates, as well as [Pallipedia](#), the common language for palliative care, and the [Monthly newsletter](#).

See the [website](#) for all the details.

In the news

The End of Marijuana Prohibition?

Andy Ko from Open Society Foundation reviews the 21st Amendment of the United States Constitution.

Proposal for New Drugs Laws in Argentina

The Beckley Foundation reviews the 11th National Conference on Drugs Policy in Buenos Aires, held on 29 and 30 of August 2013.

Why We Need Drug Policy Reform

Open Society Foundation state "that the current drug policies are failing and causing enormous harm to individuals and communities. Around the world, poorly designed drug laws that seek to punish production, possession, use, and even dependence have fueled violence, instability, and health crises. It's time for a new approach."

New publications on the website

HIV

There is much talk about an AIDS-free world but many writers forget about people who inject drugs. Unless this is addressed then there is little hope of stopping the epidemic. Here are a few recent reports, which confirm we need to do more.

UNAIDS report on the global aids epidemic 2013

UNAIDS's report states that recent data suggest little change has occurred in the HIV burden among people who inject drugs. HIV incidence among this population remains high, up to 28% in Asia and with people who inject drugs accounting for more than 40% of new infections in some countries. At least 158 countries reported injecting drug use and 120 countries have documented HIV among people who inject drugs.

Coverage of HIV prevention services remains low and uptake of voluntary HIV testing are extremely low among people who inject drugs and among 35 countries providing data in 2013, all but four reached less than 10% of opiate users with OST.

In addition to exceptionally low coverage, an effective AIDS response among people who inject drugs is undermined by punitive policy frameworks and law enforcement practices, which discourage individuals from seeking the health and social services they need.

HIV prevention among people who use drugs in East Africa

IDPC's briefing paper analyses the "barriers and opportunities for harm reduction, and provides recommendations to improve access to services in Kenya, Ethiopia, Uganda and Tanzania."

Availability of HIV prevention and treatment services for people who inject drugs: findings from 21 countries

Zaino Petersen et al. analyses the need to monitor the state of the "HIV epidemic as it relates to IDU and the availability of HIV treatment and harm reduction services in 21 high epidemic countries." With about a third of the global HIV infections outside sub-Saharan Africa related to injecting drug use (IDU), this paper calls for the need to monitor the state of the HIV epidemic as it relates to PWID.

(The overall proportion of HIV positive PWID in the selected countries ranged from 3% in Kazakhstan to 58% in Vietnam. While IDU is relatively rare in sub-Saharan Africa, it is the main driver of HIV in Mauritius and Kenya, with roughly 47% and 36% of PWID respectively being HIV positive).

HCV

Still poor access to HCV treatment in PWID although the most important group to target to effect the epidemic.

Global burden of disease attributable to illicit drug use and dependence: findings from the Global Burden of Disease Study

Prof Louisa Degenhardt, et al. aim to assess the prevalence and burden of drug dependence on health. Worldwide opioid dependence was the largest contributor to dependence and injecting drug use as a risk factor for HIV, as a risk factor for hepatitis C and suicide. Countries with the highest rate of burden included the USA, UK, Russia, and Australia. Hence illicit drug use is an important contributor to the global burden of disease. Efficient strategies to reduce disease burden of opioid dependence and injecting drug use, such as delivery of opioid substitution treatment and needle and syringe programmes, are needed to reduce this burden at a population scale.

Hepatitis C treatment access and uptake for people who inject drugs: a review mapping the role of social factors

Magdalena Harris et al. review the "social science and public health literature pertaining to HCV treatment for PWID, with a focus on barriers to treatment access, uptake and completion. A two step search was taken, with the first step pertaining to literature on HCV treatment for PWID and the second focusing on social structural factors." Evidence documents show that hepatitis C virus (HCV) treatment outcomes for people who inject drugs (PWID) are successful yet HCV treatment among PWID remains suboptimal. This review seeks to map social factors mediating HCV treatment access. And concludes that combination intervention approaches need to encompass social interventions in relation to housing, stigma reduction and systemic changes in policy and health care delivery.

Drug Policy

The temporal relationship between drug supply indicators: an audit of international government surveillance systems

International Centre for Science in Drug Policy report demonstrates that "during the past two decades, the supply of major illegal drugs has increased, as measured through a general decline in the price and a general increase in the purity of illegal drugs in a variety of settings." And concludes that "These findings suggest that expanding efforts at controlling the global illegal drug market through law enforcement are failing."

How the East Influenced Drug Prohibition

"In much of the academic literature drug prohibition is often described as an American, or at least a Western, construct." This paper by James Windle shows how "prohibitions were enforced in

Asian countries while the United States and Western Europe were routinely trading opium. The concept of prohibition being a distinctly American construct is, therefore, flawed.

Licensing and Regulation of the Cannabis Market in England and Wales: Towards a Cost/Benefit Analysis

The Beckley Foundation state in the report that drug policy reform would provide the "UK government with the funds to address negative impacts while leaving considerable money to spend on prevention. Furthermore, it would give police more resources to go after violent criminals, rather than being preoccupied by ineffective—and even discriminatory—policing practices."

Coffee Shops and Compromise: Separated Illicit Drug Markets in the Netherlands

Open Society Foundation's Global Drug Policy Program reports on the history of the Dutch approach to drug policy and describes the ongoing success of the country's drug policy. "Including the impact of the Dutch "separation of markets," which potentially limits people's exposure and access to harder drugs."

The Drug Policy Reform Agenda in the Americas (version 2)

IDPC analyses the regional debate and national-level reforms in the Americas and offers recommendations to maintain the drug policy reforms.

Drugs: regulation & harm

Professor David Nutt talks about the politics and idiosyncrasies of UK drug regulation and describes a more logical alternative.

UNODC SMART update 2013

Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme "enhance the capacity of Member States in priority regions to generate, manage, analyse, report and use synthetic drug information to design effective policy and programme interventions."

Harm reduction

Harm reduction approach in Egypt: the insight of injecting drug users

Study by Dr Oraby (IDHDP member) describes the "current harm reduction interventions in Egypt and highlights the insights of active IDUs and service providers interacting with them as regards their ability to address their needs." She concludes that the "epidemiological reality of HIV infection in Egypt favors prioritizing efforts to the high risk groups rather than the general population. Hence, harm reduction should be at the core of interventions targeting HIV."

Overdose day

- It is estimated that over 70,000 lives were lost to drug overdoses in Europe in the first decade of the 21st Century.
- Drug overdose was responsible for 38,329 deaths in the US in 2010. US overdose deaths have increased for 11 successive years
- Deaths from opioid drugs in Australia are rising steadily

Most if not all of these are avoidable.

Breaking worse: The emergence of krokodil and excessive injuries among people who inject drugs in Eurasia

Russia, Ukraine and all other former Soviet countries share a long history of injection of home produced opioid and stimulant drugs that dates back to before the demise of the Soviet Union. Krokodil, a homemade injectable opioid, gained its moniker from the excessive harms associated with its use, such as ulcerations, amputations and discolored scale-like skin, krokodil use is prevalent in Russia and the Ukraine.

NB: Krokodil is a homemade drug, which feels like heroin. It combines codeine (active ingredient desomorphine), lighter fluids, gasoline, paint thinner, alcohol, and other ingredients and its cheap.

Beyond 'peer pressure': Rethinking drug use and 'youth culture'

Hilary Pilkington et al. use the "original empirical research in Russia to develop an understanding of young people's drug use that synthesises structural and cultural explanations of it. It does this by situating young people's narratives of their drugs choices in the context of local drugs markets and broader socio-economic processes."

Criminal Justice

IDHDPs second aim states "Racism pervades the sentencing of drug users" see below for some of the evidence.

The numbers in black and white: ethnic disparities in the policing and prosecution of drug offences in England and Wales

Release demonstrates in this report that drug policing and prosecutions of drug possession offences in England and Wales is dominated by stop and search, that much of this activity is focused on low level drug possession offences and that black and Asian people are being disproportionately targeted.

Also it looks at racial disparity rates of arrest, prosecution and sentencing and clearly demonstrates that the drug laws in the UK are a major driver of the disproportionality that exists in our criminal justice system in relation to the black community.

- Over 50% of stop and searches are for drugs, 10% are for offensive weapons and less than 1% are for guns.
- The police in England and Wales stop and search someone for drugs every 58 seconds.
- Of the more than half million stop and searches for drugs carried out in 2009/10 only 7% resulted in arrest.
- Black people are arrested for a drugs offence at six times the rate of white people, and Asian people are arrested at almost twice the rate of the white.
- Black people are more likely to receive a harsher police response for possession of drugs. In 2009/10 78% of black people caught in possession of cocaine by the Metropolitan Police were charged for this offence and only 22% received cautions. In comparison 44% of white people were charged for the same offence and 56% received cautions.
- Black people caught in possession of cannabis by the Metropolitan Police are less likely to receive a cannabis warning than white people, and are charged at 5 times the rate of whites.

National Association for the Advancement of Colored People (NAACP)

National Association for the Advancement of Colored People (NAACP) criminal justice fact sheet. Includes the following drug sentencing disparities in the US:

- About 14 million Whites and 2.6 million African Americans report using an illicit drug
- 5 times as many Whites are using drugs as African Americans, yet African Americans are sent to prison for drug offenses at 10 times the rate of Whites
- African Americans represent 12% of the total population of drug users, but 38% of those arrested for drug offenses, and 59% of those in state prison for a drug offense.
- African Americans serve virtually as much time in prison for a drug offense (58.7 months) as whites do for a violent offense (61.7 months).

Other newsletters

SMMGP July / August Policy Update 2013

SMMGP give an update on current policy documents in England and Scotland from July / August 2013.

IDPC October Alert International Drug Policy Consortium (IDPC)

IDPC October alert includes their activities, publications and news.

Drugnet Europe 83 EMCDDA July - September 2013 newsletter.

In this issue: Screening for hepatitis B and C infection in Europe | Second international conference on novel psychoactive substances | EMCDDA report explores models of addiction | New Zealand enacts innovative regulatory system on new drugs | 5-IT recommended for control at EU level.

Upcoming events

*When planning to attend conferences and meetings please help us spread information on IDHDP, **Rebecca** can provide you with membership flyers and a presentation slide about IDHDP.*

What Will it Take to Achieve an Aids-free World? (3 – 5 November 2013), San Francisco, CA, USA

The conference aims to bridge the gap between clinicians and researchers focused on understanding, managing, preventing and curing HIV/AIDS. The ambition is to host a meeting

every year that will address the most pressing topics in transnational medicine.

International City Health 2013 Conference (4 – 5 November 2013), Glasgow, Scotland

This international event will examine current policy and practice in relation to public health in cities.

Prof Michel Kazatchkine, IDHDP patron and UN special envoy on HIV/AIDS in Eastern Europe, will present the **free public lecture on Monday, Nov. 4.**

Chris Ford will be attending the conference if you would like to meet with her she can be contacted on **Chris Ford**

Eighth Annual Conference of the International Society for the Study of Drug Policy, (21 - 23 May 2014), Rome, Italy

The conference will be of interest to policy makers, practitioners and academics from a wide array of disciplines who are engaged in drug policy research pertaining to drug markets, the harms caused by both the supply of and demand for drugs, and the intended and unintended consequences of policy.

Policy, Society, Alcohol and Novelty in Addiction, (24 - 26 June 2014), Rome, Italy

The conference will focus on the impact on the society of addiction, including policy initiatives targeted at dealing with the difficulties associated with addictions.

IDHDP activities: A plenary symposium and members meeting will be organised at the event. Further information will follow.

This is only a selection of events. To view more visit the [website](#).

IDHDP communications

Twitter

Follow us on Twitter. We have **1400 followers!**

If you are a member of Twitter you can search for us at **@idhdp**, or if you do not wish to join Twitter, you can check the IDHDP home page to read our latest tweets, but we do recommend that you do consider joining Twitter as it is a great way to keep up to date on current articles and publications

Newsletter

Please send the newsletter on to your colleagues and encourage them to **join IDHDP**.

