

## IDPC Briefing Paper

# The Obama Administration's drug control policy on auto-pilot

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**The International Drug Policy Consortium (IDPC) is a global network of NGOs and professional networks that specialise in issues related to illicit drug production and use. The Consortium aims to promote objective and open debate on the effectiveness, direction and content of drug policies at national and international level, and supports evidence-based policies that are effective in reducing drug-related harm. It produces occasional briefing papers, disseminates the reports of its member organisations about particular drug-related matters, and offers expert consultancy services to policy makers and officials around the world.**

In a widely watched You Tube video, U.S. President Barack Obama is asked whether or not the drug war may in fact be counterproductive. Instead of the resounding NO that would have come from any of his recent predecessors, Obama responded: "I think this is an entirely legitimate topic for debate." He then qualified his remarks by adding, "I am not in favor of legalization."<sup>1</sup> Nonetheless, even acknowledging the legitimacy of debate on U.S. drug policy is a significant shift from the past, when successive administrations stifled discussion and routinely labeled anyone promoting alternative approaches to the so-called U.S. "war on drugs" as dangerous and surreptitiously promoting massive drug use and poisoning America's youth.

With over two years in office, the Obama administration has had time to begin to make its mark on the government's domestic

and international drug policies. But has the welcome change in tone been matched by a change in policies? The track record to date is disappointing, with far more continuity than change. The Obama administration, apparently less fearful of being criticized as "soft on drugs," has ratcheted down the rhetoric and has placed greater emphasis on the problem of demand and problematic drug use. Some necessary but modest changes have also taken place with respect to domestic drug policy. Yet broader drug policy reforms at the domestic level remain elusive and in the international sphere the U.S. "war on drugs" continues apace.

Shortly after being named to the post, Obama's chief drug policy official, R. Gil Kerlikowske, head of the Office of National Drug Control Policy (ONDCP), announced that he would not refer to the "drug war," as you cannot wage war on your own people. Kerlikowske, formerly a police official, regularly emphasizes the need to treat drug consumption as a public health problem and, for the first time, recognized experts on treating problematic drug use have been on the ONDCP's senior

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staff. Finally, far more emphasis is being placed on reducing demand for illicit drugs. As Obama said, “On drugs, I think that a lot of times we have been so focused on arrests, incarceration and interdiction, that we don’t spend as much time thinking about how we shrink demand.”<sup>2</sup> The administration has also tread more carefully overseas, at times showing a more collaborative approach in UN debates and showing restraint in reacting to progressive reforms undertaken by some Latin American governments. In short, the Obama administration has adopted a somewhat more diplomatic approach to drug policy.

Despite the change in discourse and diplomacy, however, international drug control policies remain largely intact – though Afghanistan provides an important exception – and the administration now appears poised to replicate what it views as the successful Plan Colombia in Central America. This continuity in policy is reflected in the federal drug control budget. Despite very modest increases in spending on treatment and education, approximately three-fifths of federal drug control spending continues to go to supply-side programs (including domestic law enforcement) and only two-fifths to demand-related programs.<sup>3</sup>

Two key factors help explain continuity in what is increasingly recognized as a failed policy. First, the drug war bureaucracy is large, well-entrenched and extremely resistant to change. For example, apart from Kerlikowske and new people he has brought in to work on domestic and demand-related policies at ONDCP, those working on international drug control policy remain largely the same and most are steeped in a drug warrior mentality; many have spent their careers implementing the U.S. “war on drugs.” This is true of the U.S. Department of State’s Bureau of International Narcotics and Law Enforcement Affairs (INL), the Drug Enforcement Administration (DEA) and other federal agencies with drug control responsibilities. Over the years, the U.S. government’s drug control agencies have

obtained a great deal of autonomy from the broader official policy making community and they continue to operate with little interference from other parts of the government bureaucracy, particularly at the international level.

Second, only high-level and committed leadership could begin to bring change to the existing federal drug war bureaucracy; yet that is not coming from this administration – and all indications are that drug policy reform is not likely to become a priority any time soon. Apart from the media attention around the vote on Proposition 19 in California in November 2010, drug policy is typically crowded off the political agenda. Internationally, only drug policy-related issues in Mexico and Afghanistan receive sustained attention. The Obama administration is engaged in enormous debates on a range of salient issues. It confronts an extremely complicated domestic situation, compounded by the slow economic recovery and the results of the November 2010 Congressional elections, in which the Republican Party took control of the House of Representatives and gained seats in the Senate. Internationally, the wars in Iraq and Afghanistan – and now Libya – have monopolized the administration’s attention. The dramatic changes unfolding in the Middle East ensure that sustained attention to international drug policy is not going to be on President Obama’s agenda. In short, drug policy continues to be a “third rail” issue and most existing drug policies continue on auto-pilot.

### **Modest changes in domestic drug policy**

On the campaign trail, Obama promised to undertake three initiatives related to drug policy: seek to remove the disparity in sentencing for crack and powder cocaine; reverse the federal government’s tough stand on state medical marijuana laws; and end the ban on federal funding for needle exchange.<sup>4</sup> He has met those promises to varying degrees.

The crack-cocaine disparity was adopted by Congress in the 1980s, near the peak of hysteria over crack consumption. According to the 1986 law, anyone convicted in federal court of possession of five grams of crack received a mandatory sentence of five years, and 10 grams resulted in 10 years. The threshold amounts for those mandatory sentences were 100 times as high as those for powder cocaine. Given that approximately 80 percent of those convicted on crack charges in recent years are African-American, the sentencing disparity was for years widely denounced as unjustified and racist, at least in effect if not in intent. After Obama's inauguration, the Justice Department worked with members of the U.S. Congress to eliminate the sentencing disparity, resulting in the Fair Sentencing Act, which reduces the crack/powder ratio to 18 to one – not the one to one ratio that proponents wanted, but the ultimate compromise necessary for congressional approval. The Act also eliminates the five-year mandatory minimum sentence for simple possession.

According to Marc Mauer of the Sentencing Project, the legislation marks a “watershed event in the long campaign for a more rational approach to drug policy” and “is expected to benefit about 3,000 defendants a year, with an average sentence reduction of twenty-seven months.”<sup>5</sup> To date, however, the Fair Sentencing Act does not apply to those convicted prior to it being signed into law in August 2010. It is now up to the U.S. Sentencing Commission to determine whether to apply the guidelines retroactively. Perhaps most significantly, the Fair Sentencing Act represents just the first step towards desperately-needed broader sentencing reform that includes an end to all mandatory minimums, proportionality in sentencing guidelines and alternatives to incarceration for low-level offenders.

Fulfilling Obama's second campaign promise, the Justice Department announced in the fall of 2009 that it would stop aggressive enforcement of federal drug laws in states

that have adopted laws legalizing marijuana for medical purposes. However, the task of raiding medical marijuana facilities in states where they operate legally is carried out by the DEA, which immediately and publicly expressed disagreement with the policy shift. Despite the directives from Washington, the DEA has continued to carry out raids on such facilities, though far less than before.

Obama fulfilled his third promise at the end of 2010, when he signed a law ending the prohibition on federal funding for sterile needle and syringe exchange programs (NSPs), which have long proven effective in reducing HIV transmission. Compromise language adopted by the U.S. Congress allows for the use of federal funds for NSPs, except in locations deemed “inappropriate” by local health department or law enforcement officials. The federal Department of Health and Human Services issued interim guidance in July 2010 on the use of federal funds for state and local health departments receiving federal HIV prevention funds and for a subset of federally-funded substance abuse treatment programs. The U.S. State Department followed suit, issuing revised guidelines allowing use of funds from the U.S. President's Emergency Plan for AIDS Relief (commonly known as PEPFAR) for NSPs in global HIV programs<sup>6</sup>. NSPs were also endorsed as an evidence-based intervention in the first National HIV/AIDS Strategy, and referenced in the 2010 National Drug Control Strategy. Due to the on-going budget crisis, implementation of the new policy has been slow, with relatively modest impact to date: only seven state health departments and one city health department have redirected federal HIV prevention funds to NSPs. The Center for Disease Control and Prevention (CDC) is developing fuller implementation guidance to be released in 2011, and the Surgeon General recently issued a rule allowing the main source of federal substance abuse prevention and treatment funds to be used for NSPs. However, the new Republican majority in the U.S. House of Representatives has already taken steps to reinstate the full federal funding ban.<sup>7</sup>

Other advances in the administration's approach to domestic drug control can also be found in its first National Drug Control Strategy Report,<sup>8</sup> released in the spring of 2010. (A previous report was published almost immediately after Obama took office and hence was written under the previous administration.) The initial Obama strategy document puts greater emphasis on community-based prevention efforts and integrating treatment for problematic drug use into mainstream health care in order to expand access to such services, and is the first strategy to recognize the collateral damage caused by present policy, for example, calling for "promoting and supporting alternatives to incarceration." ONDCP has also set numerical targets for reducing overdose fatalities and drug-related emergency room visits. In a recent interview, when asked "What is your measure of success," Kerlikowske stated, "Reducing the number of deaths and the number of young people who come into emergency rooms as a result of drugs is important."<sup>9</sup>

However, such declarations have yet to be followed up with meaningful changes in official evaluations of U.S. drug policy effectiveness, such that arrest, seizure and incarceration statistics are replaced by crime, health and social indicators. Given the tremendous bureaucratic and political obstacles to drug policy reform, from where ONDCP Director Kerlikowske sits, the changes that have taken place over the past two years may appear quite important. But from the perspective of the growing costs and consequences of U.S. drug policy practices, they are just a modest beginning.

### **Continuity in international drug control policy**

The administration's new strategy is even less encouraging when it comes to international drug control policy. Despite the growing recognition of the failure – and costs – of

the present approach to drug control, U.S. forced eradication efforts (including herbicide spraying or "fumigation" in Colombia) and interdiction programs in the Andean region of South America continue on auto-pilot. Moreover, development assistance continues to be predicated on crop reductions, despite a growing body of research showing that only when viable economic alternatives are in place, can farmers reduce their dependency on the income derived from the production of crops that end up in the illicit market.<sup>10</sup> Perhaps the only significant change in U.S. international drug control policy is its regional focus. As the drug trade and related violence has moved from the Andes, to Mexico and now to Central America, U.S. policy has followed suit. As Plan Colombia winds down, the U.S. government is now turning its attention to Central America, as described in greater detail below.

In one country, however, the Obama administration has dramatically changed course: Afghanistan. In March 2009, then-U.S. Special Envoy Richard Holbrooke described the opium poppy eradication effort in Afghanistan as "the most wasteful and ineffective program that I have seen in 40 years," adding that it was counterproductive, generating political support for the Taliban and undermining nation-building efforts.<sup>11</sup> One month later, at a conference of the G-8 countries, he said: "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."<sup>12</sup>

Following through on Holbrooke's declarations, in 2009 the U.S. government ceased its funding for forced eradication of poppy plants in Afghanistan, channeling the resources into interdiction and economic development programs (though some Afghan governors continue to carry out eradication programs). From the beginning, however,

U.S. government officials were divided on the new approach, which as a result has had only tepid political support. Supporters have feared that the lack of understanding among U.S. policymakers, and particularly on Capitol Hill, of the mechanics and implications of a long-term development approach which most likely will not yield immediate results could lead to a policy reversal. Holbrooke's untimely death in late 2010 may hasten that possibility.

Those concerned with the devastating consequences of forced eradication, including fumigation, were heartened by the shift in policy in Afghanistan. However, the Obama administration quickly made clear that it had no intention of transferring the lessons learned in Afghanistan to any other area of the world. U.S. officials argue that the same logic cannot be applied to Latin America, claiming that the existence of stronger institutions provides the conditions for successful implementation of forced eradication. Yet, as in Afghanistan, forced eradication in the Andean region has failed to achieve its desired objectives, while pushing people deeper into poverty and generating political instability, human rights violations, conflict and violence. Moreover, the much-touted reported decrease in coca production in Colombia has gone hand-in-hand with *reduced* eradication. From 2006 to 2009, aerial fumigation declined by 39 percent. In 2009, manual eradication efforts fell as well – precisely the year that the UNODC found a significant drop in coca growing, indicating that other factors have been the driving force behind reduced coca production in Colombia.<sup>13</sup>

While the Obama administration remains firmly committed to Plan Colombia, it has followed the path already set by the U.S. Congress of gradual reductions in overall levels of assistance, and shifting more resources from military and law enforcement efforts to economic and social programs. This trend continues in the administration's federal budget request for fiscal year 2012, which

includes a 15 percent decrease in funding for Plan Colombia as a result of overall funding cuts as the administration seeks to decrease the substantial U.S. deficit. Regarding the major U.S. drug assistance program for Mexico, the Merida Initiative, the administration has reduced funding for military hardware and put more emphasis on support for institutional reforms and community strengthening initiatives. However, surging drug-related violence in Mexico and fears that it will spill over into the United States have prompted calls for greater U.S. military support.

In September 2010, U.S. Secretary of State Hillary Clinton publicly compared Mexico's drug cartels to an insurgency. Although the Obama administration quickly backtracked, some analysts believe that Clinton's statements were intended to ensure continued funding for the Merida Initiative from a Congress more inclined to send guns and helicopters than deal with the intricacies of police and justice sector reform. Her sentiments were echoed in February 2011, when the Undersecretary of the Army (the second highest ranking civilian official in the U.S. army), Joseph Westphal, also described Mexican drug cartels as an "insurgency" right along the U.S. border. He retracted his statement, but also noted that he has shared his personal opinion on the matter with the White House.

As Central America has emerged as a growing drug transit hub and drug-related violence has escalated, particularly in Guatemala, the Obama administration has steadily increased anti-drug aid for the isthmus, promising approximately US\$200 million to date for the Central American Regional Security Initiative, CARSI. (While this represents a significant increase in aid to the region, it pales in comparison to the US\$6 billion spent in Colombia over the last decade or the US\$1.5 billion promised to Mexico.) In a visit to several Central American countries in early February 2011, U.S. Assistant Secretary of State, William Brownfield, who heads INL, stated

that the Obama administration is considering an anti-drug aid program exclusively for the region – what some are calling “Plan Central America.” There are also plans for a training role for the Colombian security forces, as has occurred with their Mexican counterparts.

Finally, perhaps nowhere is the continuity of a wrong-headed U.S. policy more evident than in Bolivia. Upon the election of President Evo Morales, a former coca grower, the Bolivian government ceased forced eradication of coca, instead relying on agreements with local coca growers federations to meet coca reduction targets. Although the government’s annual coca reduction targets are consistently met and illicit drug seizures have gone up significantly under the Morales administration, differences in the treatment of the coca issue in particular have resulted in significant tensions in bilateral relations. The Obama administration has continued down the path set by the Bush administration, issuing in September 2009 a “determination” that Bolivia had “failed demonstrably to make sufficient efforts to meet its obligations under international counternarcotics agreements.” Later that year, the administration refused to renew trade benefits suspended in 2008 in retaliation for the Bolivian government’s decision in September 2008 to expel the U.S. Ambassador, who was perceived as meddling in the countries’ internal affairs and supporting violent opposition groups, and the subsequent expulsion of the DEA in November of that year. The Obama administration has continued to “decertify” Bolivia every year since and trade benefits remain suspended.

U.S. officials also led the charge against a Bolivian proposal to remove a ban on the centuries-old indigenous practice of chewing coca leaves from the 1961 Single Convention on Narcotic Drugs. In 2009, the President of Bolivia sent a letter to UN Secretary General, Ban Ki Moon, requesting a minor amendment to the Single Convention by removing its requirement that “coca leaf chewing must

be abolished within a 25 year period,” which ended in 1989. The inclusion of the ban on coca leaf chewing in the Single Convention was based on a report that failed to take into account the rights of indigenous cultures and, according to Martin Jelsma of the Transnational Institute, “reads to us now like a relic from a long-gone era.”<sup>14</sup> Nonetheless, the U.S. government – fearful that any modifications to the conventions could open a Pandora’s box – rallied 17 other countries to its side in opposing the Bolivian proposal: the United Kingdom, Sweden, Canada, Denmark, Germany, the Russian Federation, Japan, Singapore, Slovakia, Estonia, France, Italy, Bulgaria, Latvia, Malaysia, Mexico and Ukraine. Its fate now rests in the hands of the UN Economic and Social Council.<sup>15</sup>

At the end of 2010, the Obama administration all but declared victory in curbing the supply of cocaine flowing out of the Andes. According to recently released U.S. government statistics, the amount of cocaine being produced in the Andes fell from 875 tons in 2006 to 690 tons in 2008 and 2009.<sup>16</sup> These statistics are rough estimates at best, as is evident in the often widely divergent estimates produced by the U.S. government and the UN Office on Drugs and Crime (UNODC), and have been widely questioned for years. However, this year’s U.S. government statistics are particularly suspect. Drug policy expert Adam Isacson estimates that in 2009, 495 tons of cocaine was seized by federal agents on U.S. soil and in producing or transit countries. Isacson notes: “If 690 tons were produced and 495 tons were interdicted in these countries, it would leave only 195 tons to satisfy global demand.” (To put that in perspective, estimated annual U.S. cocaine consumption is 250 tons.) He continues, “And these 495 tons don’t include any U.S. seizures on international waters, seizures on U.S. soil by state or municipal police, or seizures in Europe, Asia or elsewhere – which would reduce supplies still further...At first glance, then, the impossible was achieved... cocaine seizures actually *exceeded* cocaine

production.”<sup>17</sup> While impurity or exaggerated seizure estimates can account for some of this discrepancy, they cannot account for all of it. Rather, it appears that the U.S. government’s cocaine production estimates are just too low. That may be convenient for convincing the U.S. Congress to continue funding programs that are coming under increasing scrutiny, but it does not make for sound policy.

## The U.S. Congress

If the Obama administration is not prepared to fundamentally rethink U.S. drug control policy, the U.S. Congress could potentially take the lead. On the one hand, there is growing recognition on Capitol Hill that present policies have failed. While obvious to most outside observers, recognition of the fact on the part of those who have approved billions of dollars in spending – and have to justify that to their constituents – is a significant step forward. On the other hand, for the most part, debate on drug policies and possible reforms has stagnated.

The political landscape in Washington has shifted dramatically as a result of the November 2010 elections, which brought back to power in the House of Representatives members who have long championed the U.S. war on drugs. Key Republicans were already calling for more military and police aid to fight drug production and transshipment and their voices will be amplified in the Republican-controlled House. Yet Republicans have also pledged to slash the foreign aid budget; they therefore may not succeed in increasing drug war spending by much, but they will most likely be wedded to present policy. They will also likely ratchet up the rhetoric against those countries, such as Venezuela and Bolivia, who are perceived as not toeing the U.S. line.

Since the Republicans took control of the U.S. House of Representatives, the potential spill-

over of drug-related violence from Mexico into the United States has dominated much of the congressional debate. At the end of March 2011, Republican Representative Michael McCaul of Texas introduced legislation seeking to put six Mexican drug cartels on the U.S. government’s Foreign Terrorist Organization list. While this specific legislation is not likely to move forward, it is illustrative of how some members of Congress see the drug policy issue through a “narco-terrorist” lens. Similarly, in a February 2011 briefing on Capitol Hill, Republican Rep. Connie Mack of Florida (now chair of the Western Hemisphere Subcommittee of the House Committee on Foreign Affairs) repeatedly referred to the nexus between “drugs and terrorists,” broadly claiming that drug money is financing terrorist organizations in Latin America, hence the need for a counter-insurgency approach. This kind of discourse among influential members of the U.S. congress is moving the goal-post for drug policy reform even farther to the right.

An important effort was underway in the previous session of the U.S. Congress to create an independent commission to review and evaluate U.S. international drug control policy in the western hemisphere, as well as foreign and domestic demand-reduction policies and programs, and identify policy and program options to improve existing international and domestic drug policy. If the legislation were to have been approved, the commission would also recommend a multiyear interagency drug control strategy for the region. A bill was passed in the House in December 2009 and was introduced into the Senate one year later. The December 2010 press release announcing the Senate initiative illustrates the differing points of view of the Senators involved. Democratic Senator Robert Menendez of New Jersey clearly states the problem: “While we have had some notable successes in the hemisphere, the plague of narcotics and organized crime has surged in Mexico and Central America and remains an intractable problem in much of the rest of

the region. It is imperative that we assess our efforts at home and abroad to determine where we are succeeding and where we are not.”

However, at the same time the quote in the press statement by Menendez’s counterpart, Republican Senator Richard Lugar of Indiana, the senior Republican on the Senate Foreign Relations Committee, illustrates the extent to which politicians continue to seek a military solution to a perceived threat: “I am especially interested in efforts to bolster the role of the U.S. military and the intelligence community to help combat cartels headquartered in Mexico with reach in Central American countries, Venezuela and throughout the Region. New approaches might include ways to jointly deploy aviation, surveillance and intelligence assets where necessary. Ultimate victory in this war will require improving capabilities, adapting tactics to counter threats by cartels and building closer partnerships with the Hemisphere’s willing Governments.”

With a new session of Congress, the proposed legislation must now be reintroduced in both the Senate and the House of Representatives. If approved, it would provide an important opportunity to stimulate debate, as well as a platform for putting forward policy alternatives. However, because of the prevailing political winds in Washington, it is far from clear if it would actually result in meaningful drug policy reform. Another initiative proposed by Democratic Senator Jim Webb of Virginia to evaluate the U.S. criminal justice system, including drug control policies, generated significant bipartisan support in 2010, but ultimately failed to pass the Senate. Webb has announced that he will be retiring when his term ends in 2012, and the prospects for passage of the commission in the current Congress remain unclear.

## **Beyond the Obama Administration: pressure from below**

While all indications are that no major new drug policy initiatives are likely to come from Washington – either the Obama administration or the U.S. Congress – the same cannot be said for outside of the nation’s capitol. California’s Proposition 19, a voter referendum that would have legalized cannabis, allowing local governments to tax and regulate it, came close to passing in November 2010, garnering 46 percent of the vote. Though not approved by voters, it ignited a debate across the country on cannabis policy, with unprecedented news coverage. In short, Proposition 19 began to break down the taboo on an informed debate on drug policy – in this case, one that impacts millions of Americans. According to drug policy expert Sanho Tree, “With similar ballot initiatives expected again in California, in Colorado and possibly other states in the 2012 elections, the momentum from Proposition 19 is unlikely to dissipate anytime soon.”<sup>18</sup>

As new generations better acquainted with the effects of cannabis and less likely to be scared by “Reefer Madness” type tactics have become the majority of voters, public attitudes towards cannabis use in the United States are changing. Indeed, the U.S. government estimates that one-third of the U.S. population has tried an illegal drug at least once, cannabis being by far the most common. A Gallup poll in October 2010 found 46 percent of Americans in favor of legalizing the consumption of cannabis, and 50 percent opposed. Even greater support is evident on the West Coast, where, despite the rejection of Proposition 19, the Gallup Poll found 58 percent favoring legalizing cannabis use. Demographic trends point to a tipping point with a majority of Americans favoring cannabis legalization in the not too distant future. While adopting more rationale cannabis policies is a far cry from comprehensive drug policy reform, it would be a significant step forward down the path of reform.

Comprehensive drug policy reform in the United States will not likely result from political leadership at the top, but rather from debate and pressure from below. To its credit, the Obama administration has helped remove the barriers to more meaningful debate; it remains to be seen how it will respond to grassroots and state-wide initiatives, beyond Proposition 19. But ultimately, U.S. politicians (particularly members of the U.S. Congress) do tend to eventually follow public opinion.

### **Conclusion and policy recommendations**

While the long-term outlook may be more promising, in the short to medium term, U.S. drug control policy continues on auto-pilot. The administration's improved rhetoric has yet to be met with concerted action. While the modest initiatives with regards to domestic drug policy mark an important departure from past approaches, their effective implementation hinges on the administration's willingness to fund them adequately. So far, the Obama administration has not shown the political will to take on the bureaucratic battles such a shift in funding priorities would entail.

The Obama administration faces a myriad of complex domestic and international policy issues, compounded by near-gridlock in the U.S. Congress. Yet it cannot continue to ignore the costs and consequences of misguided drug policies for people and communities around the world. If the President is unable or unwilling to play a leadership role on drug policy reform, he should designate a high-level official within the administration to do so. Vice President Biden was initially tasked with overseeing the Obama administration's drug policy, but he has never taken a public role on the issue. Whether it is Vice President Biden, a cabinet member, or ONDCP Director Kerlikowske, that person must have the political clout of the White House clearly behind him or her.

The Obama administration should also initiate a comprehensive review of how drug control efforts are evaluated; in short, a new paradigm is needed for measuring success. Listing indicators of activities – such as the number of hectares of coca eradicated, the number of cocaine processing labs destroyed and drug traffickers arrested, and the amount of cocaine seized – reveals little about the impact of policy on the ground. What is important is whether these activities affect the availability and problematic use of illicit drugs, levels of crime and violence, and the socioeconomic well-being of the communities affected. Human development and socioeconomic indicators are far more useful for evaluating progress in areas where crops used for drug production are grown, and in communities where drugs are produced, trafficked or used.

Numerous actions could and should be taken immediately. Among these, the Obama administration should stop shunning the use of harm reduction strategies that have proven to be effective in reducing the costs associated with illicit drug use and the policies designed to address such use. In addition, the 2010 National Drug Control Strategy Report promotes alternatives to incarceration through the use of drug courts; the Obama administration should promote additional measures to keep problematic drug users out of the criminal justice system and to reduce the use of imprisonment for low-level, non-violent offenders.

With regards to international drug control efforts, the Obama administration should cease support for aerial fumigation and forced eradication and instead embrace alternative livelihood strategies that improve the welfare of poor farmers via comprehensive development strategies that include improving local governance and citizen security. It should also ensure proper sequencing in such efforts: only when viable economic livelihoods are in place can governments work with local communities to reduce the cultivation of

coca and poppy crops. The U.S. government should also change the way in which it views those engaged in small-scale coca and poppy production, treating them as partners in development, rather than criminals.

Finally, the White House should ensure that its representatives from the DEA, the State

Department and other agencies faithfully represent any new approaches in policy developments in international relations and programs. In adopting these measures, the Obama administration would start down the path toward the development and implementation of more humane and more effective drug control strategies.

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- 2 *Ibid.*
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- 4 Ethan Nadelmann, "Obama Takes a Crack at Drug Reform," *The Nation*, 26 August 2010.
- 5 Marc Mauer, "Beyond the Fair Sentencing Act," *The Nation*, 9 December 2010.
- 6 The U.S. President's Emergency Plan for AIDS Relief, "Comprehensive HIV Prevention for People Who Inject Drugs, Revised Guidance," July 2010, <http://www.pepfar.gov/documents/organization/144970.pdf>
- 7 This paragraph was provided by Daniel Raymond of the Harm Reduction Coalition.
- 8 <http://www.whitehousedrugpolicy.gov/publications/policy/ndcs10/index.html>
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- 15 For additional information, see [http://www.idpc.net/sites/default/files/library/IDPC%20Advocacy%20note%20-%20Support%20Bolivia%20Proposal%20on%20coca%20leaf\\_0.pdf](http://www.idpc.net/sites/default/files/library/IDPC%20Advocacy%20note%20-%20Support%20Bolivia%20Proposal%20on%20coca%20leaf_0.pdf)
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- 17 Adam Isacson, "The U.S. government's cocaine production estimates," "Just the Facts" blog, 20 January 2011, <http://justf.org/blog?page=1>.
- 18 Author interview, 11 February 2011.

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