

Preface

“From its inception, the drug war has become the longest, most costly, and destructive war in American history.”(American Drug War)

This quote represents the significance of the war on drugs, a war that has lasted 39 years. Because of this war, people have been killed, arrested, and left in poverty.

The American war on drugs is the official campaign to remove the use of dangerous narcotics from the world by whatever means necessary. It has brought power to organized crime and drug lords because it allows them to take control of the economy of these substances, a control once held by the government. Drug cartels commit among the most violent acts in order to keep the profits they are producing from these substances.

The purpose of this report is to explore the effects, history and possible solutions to the “war on drugs.”

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Summary

This report was researched via search engines, including Google, Yahoo, and Bing; government reports, including official policy papers of Canadian and United States governments, and information publications from various narcotics agencies; news articles, from sources such as BBC, CBC, CNN and, PBS; documentaries, such as The American Drug War: The Last White Hope, and printed books, such as Jack Herer's The Emperor Wears No Clothes.

Background

Mind altering substances have been present in almost every society in recorded history. Recently, however, there has been a huge push, mainly by the United States, to remove these substances from the world. (Canadian)

Throughout recent United States' history, the government has pushed for narcotics laws, both within its borders and abroad. After the War on Drugs was declared in 1971, all narcotics use was handled aggressively, in the form of severe punishments. Many protesters rallied against the drug laws in the United States. However, despite the rallying, the drug war continues to be an issue in the United States. (Frontline)

The War on Drugs not only affected those in the United States, drug laws were encouraged in other countries, including Canada. Although drug prohibition in Canada has gained less publicity and global involvement as the United States, there is still an active opposition to drug laws and regulation. Many laws have been altered because of the opposition, including the removal of anti-paraphernalia laws. Recently,

Canada has been moving towards the acceptance of narcotics use as a medical and social issue. (Canadian)

For a complete timeline of American and Canadian involvement in the War on Drugs, see Appendix viii.

Many groups have protested and fought against the prohibition of narcotics since its inception. One argument focuses on the medical qualities of the controlled substances, such as the medical marijuana movement. Another support for legalization focuses on the economic benefits that are associated with the legalization and taxation of substances such as marijuana and cocaine. Many argue against prohibition claiming it is a violation of civil rights. (Canadian)

The war on drugs, from the beginning, has relied on the use of “propaganda.” Films such as “Reefer Madness” have been used to develop and instill a fear of mind altering substances. The war has been accused of being a tool for racism, profit, and political influence.

(American Drug War)

Despite criticism, the drug war has brought awareness of the presence of narcotics into the public eye. It has led to public awareness campaigns, education, and social services. (American Drug War)

Robert L. DuPont, M.D.

Robert DuPont graduated from Emory University and received his M.D. Degree from Harvard Medical School in 1963. He has published more than two hundred articles and fifteen books on multiple subjects regarding health. (Robert)

Before the studies by Dr. DuPont, the drug problem was considered to be a triviality. In his interview with Fronline, he said, "The establishment at that time, in mental health and in public health, was very dismissive of 'the drug problem' and saw it as a very minor problem." His work changed the way the health industry viewed drug addiction. (Interviews)

From 1968 to 1970, he was the Director of Community Services for the District of Columbia (D.C.) Department of Corrections, an agency responsible for the correctional facilities in the D.C. area; he oversaw parole and half-way house services. (Robert) While working as the Director, he studied heroin addiction in the prison and showed a direct correlation between heroin addiction and crime. In a later interview with Fronline, DuPont said the work he did while studying heroin ad-

diction in 1969 changed the way people thought about the crime problem. He observed that many of the prison inmates struggled with heroin addiction. He also noticed that very little was being done to treat their addiction. He and a group of college students went to the jail and took urine samples for the month of August. They found that forty four percent of the inmates tested positive for heroin while incarcerated. The study, he said, showed a direct tie between the rise of crime and the rise of heroin addiction, in Washington, DC. (Interviews)

From 1970 to 1973, DuPont became an administrator of the D.C. Narcotics Treatment Administration, a municipal treatment program that eventually became the model for the federal government's program to treat drug abuse. (Robert) While he served as administrator, he studied the use of methadone as a treatment for heroin addiction. (Interviews)

In 1978, DuPont founded the Institute for Behavior and Health, Inc. The organization's primary purpose was to "identify and promote effective new strategies to reduce the demand for illegal drugs." (Robert)

He was the first Director of the National Institute on Drug Abuse (1973-1978), an organization whose mission was "to lead the [United States] in bringing the power of science to bear on drug abuse and addiction" (Science). (Robert)

DuPont was also the second White House Drug Chief, a position later named Drug Czar, a position responsible for all the drug control policies in the United States. (Robert)

During his interview with Frontline, when asked about the evolution of his position on the decriminalization of marijuana, he said, "When I came to the White House, Richard Nixon said, 'You're the drug expert, not me, on every issue but one, and that's decriminalization of marijuana. If you make any hint of supporting decriminalization, you are history. Everything else, you figure it out. But that one, I'm telling you, that's the deal.'" Eventually, he said he became uncomfortable with this position and, when Gerald Ford took office, spoke out, as the Drug Czar, on the decriminalization of marijuana. He spoke at a NORML conference, saying that not only possession should be legalized, but also growing for personal use. He never suggested that marijuana was safe, he believed, however, that criminal law should not be used to solve health problems. He believed that the use of drugs such as marijuana could be curbed through education, called the policy of discouragement. While serving as the head of the National Institute on Drug Abuse, he received a letter from Keith Schuchard, a woman who became a prohibition activist when she saw marijuana being used at her teenage daughter's birthday party. In this letter she emphasized the

need for a distinction between marijuana for adults and marijuana for kids. She said that DuPont's support for decriminalization of marijuana inadvertently communicated a "pro-pot," message. As a result of Schuchard's letter, DuPont adopted her stance against marijuana decriminalization. However, Jimmy Carter, the then president, would not allow DuPont to publicly oppose decriminalization because Carter's campaign platform had emphasized a decriminalization policy.

Robert DuPont left the government in 1978, and held a press conference saying, "I was wrong. I made a mistake. Decriminalization is a bad idea. Marijuana is not non-addictive. In many ways, it's the worst drug of all the illegal drugs." (Interviews)

Control

Due to the potentially lucrative benefits related to controlling substances, there is motivation to control the situation and profit from it.

There are beneficiaries who are directly supported by the prohibition and criminalization of substances. Drug lords who run cartels generate extremely large quantities of money from illicit substances, then break down the profits to growers and producers, smugglers and traffickers, and eventually the dealers. Many farmers in developing countries such as Morocco, Afghanistan, and Columbia are enticed by the relatively large profits to be made from controlled substances in comparison to legal products.

Conversely, the criminalization of substances directly benefits legitimate companies and produces jobs in the areas of law enforcement, addiction treatment, and criminal detention. Pharmaceutical companies also profit by producing prescription drugs to aid in the rehabilitation of illicit drug dependency. However, various studies suggest that prescription drugs are more addictive than the illegal drugs they are replacing (American Drug War).

Aside from those directly involved in the drug trade, many others also indirectly benefit. For example, the privatized prison industry in America is one of the fastest growing industries in the world. These private prisons ultimately require inmates in order to be profitable. Thus, any policies that allows for more arrests and longer sentences are beneficial, "statistics reveal that the United States holds 25% of the world's prison population, but only 5% of the world's people." In 1972, the number of inmates did not exceed 300,000, but by the year 2000 the number was over 2 million. (Palaez) Since inmates are required to work, the production of marketable goods increases the prison's profitability:

The federal prison industry produces 100% of all military helmets, ammunition belts, bullet-proof vests, ID tags, shirts, pants, tents, bags, and canteens. Along with war supplies, prison workers supply 98% of the entire market for equipment assembly services; 93% of paints and paintbrushes; 92% of stove assembly; 46% of body armour; 36% of home appliances; 30% of head-phones/microphones/speakers; and 21% of office furniture. (Palaez)

In 2002, a survey on prisoners showed that 25.5% of all United States inmates were drug offenders. (Karberg) This survey is significant

because it shows that as much as one quarter of the prison labor force is comprised of drug offenders.

The criminalization of any substance produces an artificially raised demand for that substance. There is a positive correlation between the artificially raised demand for a substance and the potential for profit from that substance. Anywhere profits are to be made, there will be people and corporations fighting for that control. (American Drug War)

Drugs In Religion

Some people are opposed to the legalization of controlled substances because they believe these substances are morally wrong, therefore, it is important to know what different religions teach about these substances. Below is a list of religions that teach, in part, that certain controlled substances are not morally wrong.

Shintoism:

Shinto is an ancient religion of Japan. About 84% of the population of Japan follows both Shinto and Buddhism. Shinto religion tells of Kami, or deities. The Kami, however, are different from the gods of monotheistic religions. (World) In Shintoism, cannabis is used to ward off evil spirits. It creates laughter and happiness in marriage. (Herer)

Buddhism:

Buddhism, a religion founded by Siddhartha Gautama, is widely considered the fourth largest religion. It is found throughout Tibet, India, China and other countries in Asia. Buddhism believes in karma, the sum of an individual's actions, and reincarnation, the rebirth of a living being after death. (World) Cannabis is used for initiation rites and mystical experiences by many Chinese Buddhist Sects. Cannabis is considered the most holy plant of some Tibetan Buddhists. A number of tradi-

tions, writings, and beliefs suggest that Siddhartha Gautama ate only hemp seeds for six years before his enlightenment and becoming the Buddha.(Herer) Examples of these traditions include the consumption of Bhang, a mild paste made of the dried leaves and flowering shoots, or Ganja, a usually smoked substance made from the resin of the dried pistillate flowering tops (Shipe)

Hinduism:

At 13% of the world's population, Hinduism is the third largest religion. Hinduism is not a religion in the sense of Christianity or Islam, but relatable to the spirituality of Native Americans. Hinduism shares with Buddhism a belief in karma and reincarnation Hinduism is a way of life. Hinduism does not have a single founder, a single deity, a single holy text, a single system of morality, a single religious authority, or the concept of a prophet. (World) In Hinduism, the God Shiva "brought cannabis from the Himalayas for human enjoyment and enlightenment." (Herer)

Zoroastrianism:

Possibly the first monotheistic religion, once the religion of Persia, Zoroastrianism is considered one of the most influential religions of the world. Most religious historians consider Zoroastrianism to be the roots

of Abrahamic beliefs of God and Satan, the soul, heaven and hell, the virgin birth of the savior, slaughter of the innocents, resurrection, final judgment... (World) Zoroastrianism considers the use of the cannabis plant the most important part of a religious ceremony. It is also the most important medicine. Zoroastrianism centered, at least outwardly, on the cannabis plant. (Herer)

Shamanism:

Shamanism is not a single religion, but rather a belief in the ability to transcend reality and communicate with the spiritual world. Shamanism relies heavily on hallucinogenic plants for rituals involving the transcending of reality. (Harner)

Old World Entheogens:

The Fly Agaric Mushroom is possibly one of man's oldest hallucinogens. There are theories that this mushroom's hallucinogenic effects contributed to mankind's first concepts of deities. The mushroom grows in the northern regions of both the New World and the Old World, however the New World variant does not contain the strong hallucinogenic effect of the old world variant. The mushroom's use in shamanism was discovered in several isolated groups in western Siberia and north-east Siberia. Not only did these tribes eat the mushroom,

but they also practiced a ritualistic drinking of the urine from people who have been intoxicated with the mushroom. The drug passes through the body and is still active after urination. This method allows many people to make use of a few mushrooms. (Schultes)

Agara is a tall tree in Malaysia and Australia. Natives drink a tea made of the leaves and bark of Agara and the leaves of another plant, Ereriba. When consumed, the natives become intoxicated and fall into a sleep accompanied by visions and intense dreams. (Schultes)

Kwashi is a psychoactive plant used by tribes in Botswana, a country in Africa. The bulb of the plant is rubbed over cuts in the head and induces visual hallucinations. (Schultes)

Galanga is a plant used by natives in New Guinea. When eaten, a certain part of the plant acts as a hallucinogen. It is also used as a medicine to heal burns and wounds. (Schultes)

Turkestan Mint is a plant used for centuries by the Tajik, Tartar, Turkoman, and Uzbek tribes. It is used as medicine and as an intoxicant. (Schultes)

Syrian Rue grows in many places such as India, Mongolia, and the Mediterranean. Everywhere it grows it is used as medicine. The seeds of the plant contain a hallucinogen. Many peoples of Asia use this plant

which leads to the assumption that it may have been used for religious reasons, although no proof has been established through literature.

(Schultes)

Kanna is a South African plants used by the Hottentots to induce visions. Two hundred years ago it was reported that they chewed the roots of the plant and "their animal spirits were awakened, their eyes sparkled and their faces manifested laughter and gaiety. Thousands of delightful ideas appeared, and a pleasant jollity which enabled them to be amused by simple jests. By taking the substance to excess, they lost consciousness and fell into a terrible delirium." (Schultes)

Dhatara is a hallucinogenic plant that has been known and valued as far back as prehistoric India. There is evidence of Dhatara being responsible for the smoke associated with the Oracle of Delphi.

(Schultes)

New World Entheogens:

Puffballs are hallucinogens that affect the perception of sounds. They are used by the Mixtec Indiicins of Oaxaca, Mexico. The natives hear voices and echos after consuming the fungus. There is no apparent ceremony connected with the puffballs. (Schultes)

Mushrooms are used as hallucinogens by the Aztecs. They called them teonanacotl which translates from the Nahuatl Indian language to “the flesh of the gods.” (Schultes)

Sweet Flag is a plant that grows in temperate regions. There is some evidence that aborigines of northern Canada used the plant as a medicine, stimulant, and hallucinogen. If taken in large doses, it can cause powerful visual hallucinations. (Schultes)

Virola is a tree with glossy dark green leaves and tiny yellow flowers. The bark of the tree yields a red resin which makes a powerfully intoxicating substance or snuff. The use of this snuff in the tribes of Columbia is restricted to only the shamans. The tribes of Brazil and Venezuela allow the substance to be used by all adult males. (Schultes)

Jurema is a shrub with hallucinogenic roots that are made into a drink. Many tribes in eastern Brazil drink this at ceremonies.

Case Study #1: Morocco

The Kingdom of Morocco is a country located in North Africa. It has a population of approximately 32 million people. A strait to the north of Morocco separates the country from Spain. It borders Algeria to the East, and Mauritania to the South. Morocco's primary illicit narcotic is a form of cannabis known as hashish, an extract of the cannabis resin. (Regions)

Moroccan hashish, also known as Kif, has been grown and cultivated since the 15th Century. The plant has adapted well to the environment in the Rif Mountains and provides livelihood for the farmers in many areas of Morocco. Hashish is a large component of the European marijuana industry and Morocco is the largest supplier of hashish worldwide. (Morocco's War)

For many centuries, Kif has been an important part in Moroccan culture and economy. Moroccan hashish cultivation in the Rif Mountains predates the arrival of the Arabs into Morocco. Cannabis legalization is a major issue because cannabis is deeply connected to the lifestyle and history of the Moroccan people. (Debate)

Even though it is illegal to buy and sell, many tourists report being offered Kif within minutes of walking down busy streets. Hashish is im-

portant for the survival of many Moroccans. The price of marijuana is artificially inflated due to its illegal status, therefore, it is much more profitable to grow cannabis than other crops. The hashish trade in Morocco nets approximately 2 billion dollars annually, and over 800,000 Moroccans have at least part of their income directly related to hashish production and sale; this does not include the tourist economy attracted by Kif. Many more Moroccans benefit indirectly from cannabis profits. For example, farmers who grow cannabis must purchase food from the market. This creates a micro-economy in small farming villages. (Debate)

Since the start of the 21st century, European countries, especially Spain, have been pressuring Moroccan officials to enforce drug laws. Large amounts of Moroccan marijuana enter into the European market illegally; because of this, European countries have encouraged Morocco to adopt and enforce strict drug laws. This European pressure was effective and authorities began actively pursuing hashish users and cultivators. The Rif mountains are extremely difficult to police, and as a result, enforcement has been heavily focused on eliminating the exportation of illicit substances. For example, high-tech scanners have been implemented at ports to scan for hashish exports. These improvements were successful and over 88 tonnes of cannabis were seized from Mo-

roccan runners in 2007. Their government reported that crop production has been reduced by 50% between the years 2004 and 2007. Government plans in 2007 projected that the hashish trade would be eliminated within a year. (Morocco's War)

Morocco's new enforcement of drug laws has been devastating many people who rely heavily on that source of income. There are multiple reports of entire villages being jailed for growing and cultivating hashish (Morocco's War). Human rights activist Al Khyari claims that the government's "50% reduced crop production" is an exaggerated statement. He says that there are many new fields arising and that the government does not include in its figure. (Debate)

Al Khyari believes that the only practical solution is to legalize and regulate cultivation in Morocco. This would allow the government to control the exportation of hashish to the European countries which have de-criminalized the substances, whilst still allowing the farmers to earn an income from the product. He believes that the controlling of these substances should be approached as a social issue, not a criminal issue. (Debate)

Case Study #2: Afghanistan

Afghanistan is a landlocked country located in the middle east. For seven years, from 1994 to 2001, the Taliban, a fundamentalist Muslim group, controlled over 95% of the country. (Regions)

In 2001, the Taliban supreme leader, Mullah Mohammed Omar, declared opium poppies to be strictly forbidden under the Islamic religion. Taliban forces destroyed heroin factories, and jailed poppy farmers until they agreed to grow other crops. In the year 2000, the opium poppy fields surpassed 12,600 acres. In 2001, after the Taliban's ban on opium, the total area of poppy fields was estimated at only 17 acres. This ban on opium significantly damaged the livelihood of farmers who relied heavily on opium profits. The Taliban almost wiped out opium production in 2001. (Afghanistan)

When the U.S. Forces overthrew the Taliban, in 2001, the opium production spiked drastically. A historic high of opium production occurred in 2006 and there has been a surplus since. The opium growing area increased by 61% from 2005 to 2006. (Washington)

Currently, Afghanistan is the source of over 90% of the world's opium. Opium products represent $\frac{1}{3}$ of the country's gross domestic product. There is heavy suspicion that the opium economy is providing

funding for the Taliban, despite the Taliban's previous condemnation of it. The number of opium addicts in Afghanistan has skyrocketed from 900 thousand in 2005 to 1.5 million in 2008. (CNN) Due to a surplus caused by the downfall of the Taliban, there are an estimated 10 thousand tonnes of opium in stockpiles, enough to supply the world's demand for two years. These stockpiles have caused the price of opium to decline drastically and, thus, the number of farmers who grow opium also decline. (CNN)

The Taliban's solution to the opium problem is similar to the official U.S. Policy: destroying the plants will end the problem. The premise is that if the opium plants are banned, the farmers will be forced to produce legitimate goods, and the opium industry will fall apart without Afghan opium products. However, the Taliban were significantly more efficient at destroying the opium trade in Afghanistan because they declared poppy cultivation forbidden under Islamic law. When the United States took control of the country they did not have the same ability to enforce anti-drug laws, due to the fact that they did not have religious influence. This led to an explosion of poppy fields throughout Afghanistan. (CNN)

Some argue that a strictly regulated decriminalization of opium poppies would allow farmers to grow opium for medical research, mor-

phine and codeine production. However, many farmers do not support government involvement and regulation, and prefer criminalization, because any regulation or legalization would cause the prices to drop significantly, and consequently the profits. Whilst opium growth is illegal, the farmers who risk growing it stand to gain a higher profit. Currently, the profits to be made from opium exceeds 12 times the profits from traditional crops per acre (Washington).

Some support the legalization and taxation of opium without any government sanctioning. This allows opium farmers to continue selling without fear of persecution from the government, but must pay a tax. These taxes could go anywhere from infrastructure to addiction relief. (Washington)

The opium trade in Afghanistan is highly profitable. If any significant declines in opium growth are to be expected, the policy should be focused on lowering potential profits from opium, this will discourage farmers from producing it. (CNN)

Case Study #3: Columbia

The Republic of Columbia is a country located in South America. Columbia was once occupied by indigenous people before the arrival of the Spanish in 1499. (Regions)

Cocaine, a drug made from coca leaves, is one of Columbia's major sources of income. In 1993, the total earnings from cocaine were about \$7 billion. In the same year, the total earnings from legitimate products were \$7.6 billion. (Cocaine Production's)

Arguably, the reason the cocaine trade is so powerful in Columbia can be attributed to a man named Pablo Escobar. Born on December 1, 1949, he became the most powerful, wealthy, and violent drug lord in the world by the mid 1980's. He retained his power through a policy of 'plata o plomo,' silver or lead. He would bribe law enforcement agencies and politicians, and if they did not cooperate, he would kill them. Escobar won the hearts of the people by using drug money in the funding of schools, parks, churches, and even housing for poor Columbians. On December 2, 1993, Pablo Escobar was killed by Colombian authorities as he resisted arrest. (Minister)

With the collapse of Escobar's cartel, the drug trade changed into smaller, more controllable groups. It is estimated that there are over

300 active drug smuggling organizations in Columbia today. These smaller groups are significantly harder to find and infiltrate than large cartels, such as Escobar's. The fall of the Escobar cartel did not result in the diminishing of the cocaine trade, only a transformation of it. (Frontline)

Coca has been cultivated by Columbian natives for at least 4,000 years. The leaves of the coca plant are chewed to bring stimulation, reduce hunger, cure sicknesses, and provide essential vitamins. Coca is significantly less dangerous than its concentrated product, cocaine. Coca growth is a part of native culture and traditions, however, it is illegal to grow in Columbia due to its ability to be turned into cocaine. This causes many problems with the natives who grow coca for traditional use, and law enforcement agencies that burn coca fields in the prevention of cocaine production. (Cocaine Production's)

There are several environmental issues that arise from coca production. Because of cocaine's illegal status, many coca farmers were forced to move their crops into the Amazon, where it was easier to avoid detection. Due to this, over 700,000 hectares of forest was destroyed for coca fields from 1970 to 1985. Furthermore, to avoid detection, it is necessary for farmers to move their fields after each harvest. The necessity of relocation does not encourage farmers to use soil

preservation methods, thus leaving the ecosystem permanently damaged. To make matters worse, the herbicides used by the American forces to destroy the coca fields were highly potent and contaminated water basins. This makes it extremely difficult for animals and plants to gain nutrients from the water, which is crippling to huge areas of the forest. (Cocaine Production's)

In hopes of escaping poverty many Columbians resort to the cocaine trade. There is more money to be made growing, producing, and trafficking cocaine than any other crop in Columbia, and most of the money is made by exporting. In Colombia a kilo of cocaine sells for \$2,000, where in the United States it sells for \$60,000. The profit margin is huge for traffickers, however, of the near \$60,000 profit, only \$20,000 goes to the Colombian traffickers while \$40,000 goes to the American dealers. Despite this, cocaine is still a highly lucrative trade in Columbia. (Salas)

Two primary ways of controlling the cocaine trade is either by controlling supply or demand. The current policy of the American and Columbian government is to control the supply. By spraying the fields and arresting coca farmers, the authorities control the supply of coca being transformed into cocaine. However, this causes problems with natives who have been growing coca for nutrients and medicine for

thousands of years. (Tate) Also, despite all the efforts by authorities, Columbia currently produces over 80% of the world's cocaine supply, in comparison to the 13% it provided in 1992. (Cocaine Production's)

One solution is to provide more funding and equipment for the destruction of coca fields and the arrests against traffickers. This can be manifested into better weapons, more spray-planes, and more border patrol. However, numbers have shown that, despite increased funding, the cocaine trade is still thriving. (Tate)

Another solution is to legalize and regulate the growth of coca, whilst generating taxes. This would encourage farmers to relocate from within the Amazon, which would reduce deforestation and encourage better soil preservation methods. This would not only repair the ecosystem, but regulate the profits of coca. A less exaggerated profit from coca may inspire farmers to grow legitimate products. (Tate)

International Organizations

Drug laws are primarily controlled by the federal government of a country. Because of this, international organizations play a much smaller part in the enforcement of drug laws than the internal organizations of the country. International organizations, rather, focus on the spreading of information related to drug operations and the training of enforcement agencies in other countries.

The World Health Organization:

The World Health Organization provides help and information to the United Nations on the subject of drug abuse. It provides guidance on the dangers of substances by producing medical and scientific evaluations on the dependency of different substances. (Expert)

Interpol:

“The primary drug-control role is to identify new drug trafficking trends and criminal organizations operating at the international level and to assist all national and international law enforcement bodies concerned with countering the illicit production, trafficking and abuse of cannabis, cocaine, heroin and synthetic drugs by:

- collecting and analyzing data obtained from member countries for strategic and tactical intelligence reports and disseminating these reports to the concerned countries;
- responding to and supporting international drug investigations;
- helping to co-ordinate drug investigations involving at least two member countries;
- organizing operational working meetings between two or more member countries where INTERPOL has identified common links in cases being investigated in these countries;
- organizing regional or global conferences on specific drug topics, the aims of which are to assess the extent of the particular drug problem, exchange information on the latest investigative techniques and strengthen co-operation within law enforcement communities.”(Drug Sub-Directorate)

The Drug Enforcement Agency International Training Section (TRI):

“The DEA International Training Section provides consultation and instruction to the law enforcement agencies of other countries. TRI provides training governments wanting to develop new narcotic law enforcement programs, organizational infrastructures, and judicial reform. The five objections of the International Training Section are to:

1. Upgrade the drug law enforcement capabilities of foreign law enforcement agencies.
2. Encourage and assist key countries in developing self-sufficient narcotics investigation training programs.
3. Increase cooperation and communication between foreign law enforcement personnel and DEA in international drug trafficking intelligence and operations.
4. Provide foreign officials with motivation, as well as the necessary skills and knowledge required to initiate and continue high-level international drug investigations.
5. Develop regional cooperation between countries and encourage long-range strategic planning to enhance enforcement and intelligence operations.” (International)

United Nations Office on Drugs and Crime (UNODC):

“The Office on Drugs and Crime was established in 1997 to be a global leader in the fight against illicit drugs. UNODC is present in every region of the world through field offices. The UNODC works in three main areas:

- Field-based technical cooperation projects to enhance the capacity of Member States to counteract illicit drugs, crime and terrorism
- Research and analytical work to increase knowledge and understanding of drugs and crime issues and expand the evidence base for policy and operational decisions
- Normative work to assist States in the ratification and implementation of the relevant international treaties, the development of domestic legislation on drugs, crime and terrorism, and the provision of secretariat and substantive services to the treaty-based and governing bodies.” (UNODC)

The Drug War in Canada

The war on drugs in Canada is extremely complex because Canada is not a developing country. The war on drugs is less about poverty and more about human rights and health.

Recently, the decriminalization of marijuana in Canada has been under passionate debate. Many of the laws under which cannabis was made illegal were written into law due to poor understanding. There were many controversies as to the danger of marijuana at the time, and there are still misconceptions today. The source of this misconception is a large amount of conflicting evidence. One source states that marijuana is a source of carcinogens (NIDA), but another source will state that there has never been a documented case of cancer due to marijuana smoking (Myths).

The prohibition of drugs in Canada is not only costly, but inefficient. In 1994, 28.5% of Canadians stated that they had consumed illicit drugs in their life; by 2004, only ten years later, the figure jumped to 45%. Many people attribute the growth in percentage of drug users to a misplacement of priorities in funding, "73% of the \$368 million spent by the Canadian government on targeting illicit drugs in 2004-2005 went toward law enforcement rather than treatment, prevention, or harm reduction." (CBC. "Canada's Anti-Drug Strategy a Failure)

In 2010, an EKOS Research Associates took a poll that found that 50% of Canadians support the decriminalization, where only 30% oppose it, and 20% remained undecided. Activists for decriminalization say that a country needs to accurately represent its people, and if more than half of the country are against the prohibition, the prohibition should end. (Half)

Canada has legalized and regulated the use of marijuana for terminally ill patients. A person must fall under strict requirements from the Canadian government to qualify. If they do qualify, they will receive medical marijuana from one of the Canadian licensed medical marijuana growers. (CBC Medical)

Not only has medical marijuana been legalized, a highly controversial “supervised injection site” has been opened in Vancouver. The safe injection clinic allows clients to “inject pre-obtained illicit drugs under the supervision of nurses.” The users will also receive access to clean injection equipment, cookers, and filters. This location allows a safe place for addicts to use without fear of infection or fatality. Over 400 overdoses have occurred at the facility this year alone, but no fatalities resulted. An important feature of the safe injection clinic is the onsite detox, which allows users to come down from a high before being released back into the public. (Supervised Injection) However, many peo-

ple are opposed to the clinic because it encourages the use of illicit narcotics. The injected drugs, such as heroin, are considered to be among the worst of all narcotics. They produce strong addictive properties and a potential for violent behaviour. The people of Vancouver are opposed to encouraging the attraction of heroin addicts into the city. (Maqueen) The safe injection clinic is, potentially, an important step for the drug war in Canada. It represents a move toward the treatment of narcotic addiction rather than criminal penalization. (Maqueen)

The Canadian drug economy relies heavily on exportation. According to the U.S. State Department, Canada is the primary source of ecstasy in the United States. (CBC Canada) In 2007, 50% of the ecstasy produced in Canada was exported. In the same year, "Japan identified Canada as the single biggest source for seized ecstasy tablets. (CNN Illegal)" The export of illegal drugs is not isolated to ecstasy. In 2007, "83 per cent of all methamphetamine seized in Australia came from Canada. In Japan, the figure was 62 per cent. (CNN Illegal)"

The official policy of Canadian foreign affairs related to drug laws states that the Canadian government will work through Non-Government Organizations (NGO). The Canadian government believes

that NGOs that are focused on drug policy will be better able to use funds effectively. The key policy principles are:

1. Drug policy decisions should be informed by the best available evidence.

2. Drug policies decisions should not result in violations of the human rights of any individuals.

3. Drug policies should be developed through a partnership of governments, international bodies, NGOs, and affected groups.

4. Drug policies should balance the needs for demand reduction, harm reduction, and supply reduction within a broad public health perspective.

(Why Should Canadian)

The drug war in Canada is a complex issue based on human rights, morality, health, and economy. Many argue on both sides of the debate, and each presents a unique solution.

Solutions

There are many views on narcotics and narcotics laws. All these views can be classified into three potential solutions:

Criminalization:

Currently, all narcotics are criminalized in Canada and in many countries around the world. Criminalization means strict penalties and criminal records for anyone who uses narcotics in these countries. Because criminalization reduces the supply of the substance, narcotics are more profitable than they would be if they were not criminalized. This profitability of narcotics is commonly considered as an important cause of organized crime. (Drug Control)

Criminalization is extremely expensive as it not only requires law enforcement agencies to enforce the laws, and detain people who break them, it makes an extremely profitable trade illegal and, thus, non-taxable. (Drug Control)

Enforcing an agenda of criminalization is extremely difficult; some say impossible. All information shows that since the beginning of the war on drugs, all narcotics made illegal by the war on drugs have multiplied in use and production. (Drug Control)

Criminalization policy requires the government to take an aggressive stance on narcotics by destroying the crops and production houses, and detaining the producers and users. Punishment for breaking these laws are usually extremely strict in order to prevent use and production. (Drug Control)

Countries that support criminalization require cooperation with other countries so no unwanted narcotics are imported. This presents many problems because it requires countries to be involved and active with other countries' internal affairs. Countries such as Afghanistan, Morocco, and Columbia have extreme narcotics problems due to poverty. A solution to the poverty that is causing farmers to grow narcotics is to provide aid and support to farmers who choose to grow legitimate crops. However, this will increase the demand for narcotic crops, and, thus, increase the profit to be made from narcotics. Which will result in either, a collapse of the aid program due to insufficient funds, or increasing the amount of aid money given to farmers of legitimate crops. The latter would cause the process to repeat. (Drug Control)

One potential improvement to the policy of criminalization would require better drug education policies. Clearly state which drugs are worse than others, and change the penalties to reflect this. If people see less harmful drugs in the same category as extremely harmful

drugs they may feel as though both are equally as harmless, either less harmful or more. For example, the United States drug policy puts marijuana and meth in the same category; people who've used marijuana and felt it is a safe drug may then consider using meth. A factual system of drug education may help the case for criminalization. (Drug Control)

De-Criminalization:

The decriminalization of narcotics is a policy that transfers punishment from a criminal offence to a civil offence. This policy would eliminate any criminal record.

This policy is potentially extremely profitable because it eliminates federal funding for the enforcement of drug laws, and it allows the narcotics to be taxed. The taxation of narcotics could potentially bring in at least \$2 billion annually, not including exportation taxes. (Should)

Decriminalization of narcotics would remove the need and profit from organized crime operations. This would drastically reduce crime in Canada and in many other countries as well. Also, law enforcement agencies will have a greater budget to pursue other criminal offences, since they are no longer pursuing drug offenders. (American Drug)

With the decriminalization of narcotics, current penalties such as jail-time would be reduced to a possible fine and addiction counseling. A model for this is the Netherlands which consider drug addiction to be a health concern, not a criminal issue. This allows drug addicts to be treated for addiction, and be allowed to use their drugs in a safe location. Allowing heroin users to have supervised access to clean needles reduces the spread of disease, and increases public safety. (American Drug)

The overall use of narcotics in countries that have decriminalized narcotics is significantly smaller than those who have not decriminalized them. A study showed that in the United States, 42.4% of the people questioned admitted to having used marijuana. The same study showed that in the Netherlands, only 19.8% have used marijuana. This is less than half the United States' figure. (Mirken)

A decriminalization policy produces a government controlled and regulated substance, it would be much more difficult for minors to attain and use narcotics. It would be similar to the laws on alcohol where only licensed providers can sell it to people who show IDs. This is much safer than a dealer who is tied with criminal organizations providing narcotics to anyone with money, including minors. (American Drug)

One main argument within decriminalization is in determining what substances will be decriminalized. Many people agree that “softer drugs,” such as marijuana and other non-synthesized drugs, should be decriminalized while keeping the “hard drugs” such as meth and cocaine illegal. However, some people disagree with selective decriminalization on the grounds that people who are using these hard drugs need to be treated medically, not criminally. (American Drug)

Legalization:

Legalization of narcotic substances is very similar to decriminalization except that no civil penalties would be given to users. A legalization policy would treat narcotics in the same way the government currently treats alcohol. (American Drug)

Legalization would allow people who use narcotics to use them openly and, if addicted, receive help without fear of criminal persecution. (American Drug)

Since legalization removes the profit from drug trafficking, it would reduce the number of organized crime related incidents. (American Drug)

The prohibition and criminalization of narcotics is a global issue. One which many people have fought and died because of. There are no easy solutions that will benefit everyone. Currently, the issue is under debate in the media, and more potential solutions are underway.

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Appendix

Terms:

Tolerance: An effect of the body “becoming used to” a drug so, in effect, a higher dose is required to achieve the same effect.

Psychological Dependence: When a person becomes dependent on a drug for emotional reasons. A person may have a psychological dependence on anything, e.g. money.

Physical Dependence: When a person’s body becomes dependent on a drug. This person may receive withdrawal symptoms as the body adjusts to live without the drug. This is most commonly considered “addiction”, e.g. tobacco.

According to Health Canada there is six groups of drugs:

Hallucinogens: A drug, often referred to as a “psychedelic,” that affects the perception of senses, environments, and emotions. Hallucinogens can create sensory images much like a dream. The most known hallucinogen is LSD. Currently there are no “accepted” medical uses involving hallucinogens. In the past, however, hallucinogens, such as LSD, were tested to treat psychiatric disorders.

Central Nervous System Depressants: A drug that causes the central nervous system to slow down. Low dose effects include a relaxed state of being. High dose effects may produce heavy intoxication, possibly unconsciousness, coma, or death. The most common depressant is alcohol.

Stimulants: A drug that causes the central nervous system to speed up. Usually desired, side effects include: increased energy, decreased appetite, good feelings, and alertness. Stimulants may produce a powerful psychological dependency, an example of this is caffeine, and nicotine, and cocaine addiction.

Cannabis: A drug produced from the plant cannabis. This group includes marijuana, hashish, and hash oil. Cannabis, although very closely related to hallucinogens, can also produce depressant effects or increased heart rate. This group is the most widely used of all illegal drug usage.

Antidepressants: A drug used to treat clinical depression, panic attacks, obsessive compulsive disorders, and eating disorders. Antidepressants are designed to increase mood in many different ways. Ironically, many antidepressants share properties with central nervous system depressants.

Anabolic Steroids: A drug designed to enhance performance. This drug is used to treat a few human disorders. Steroids are known for their use as muscle development.

Entheogen- A chemical substance, typically of plant origin, that is ingested to produce a non ordinary state of consciousness for religious or spiritual purposes.

(Straight)

Illicit drugs in Canada include, but are not limited to:

PCP: A hallucinogen in the form of a solid powder, crystals, liquid, tablet, capsule, or paste. PCP was originally developed for human use as an anesthetic. Short term effects may last from three hours to eighteen hours and they may include intoxication, a sense of one being separated from the environment, distorted perception, difficulty in concentration and communication. Long term effects may occur such as speech problems, depression, anxiety, or severe psychological damage similar to acute schizophrenia. Regular use of PCP may increase tolerance. Continuous users may develop a psychological dependency, however, PCP does not cause physical dependence. In Canada, possession of PCP may be punishable by up to seven years of imprisonment, and a fine of up to \$1000 on first offence.

LSD: A hallucinogen, also known as acid, sold in the form of drops on paper, gelatin sheets, tablets, capsules, or liquid. LSD is produced from lysergic acid found in a fungus that grows on grains. There are currently no recognized medical uses for LSD. Short term effects may range in length from two hours to twelve hours and they include: intensified perception, such as brighter colours, more defined objects, and distortion; altered awareness of time and distance; the feeling of lightness or heaviness; and extreme mood swings ranging from joy to terror. There are no known deaths caused by an LSD overdose, however, confusion due to intoxication has caused serious injury and deaths. Long term effects of LSD may include depression, anxiety, and reoccurring highs up to weeks after the original. After using LSD, a few days are required before a reaction to the drug can be obtained

again. Continuous users may become psychologically dependent, however, LSD can not cause physical dependence. A First time offence may result in a fine of up to \$1,000 or imprisonment for up to six months.

Psilocybin: A hallucinogen often contained in mushrooms, but may be contained in capsules. There are a few species of psilocybin containing mushrooms that grow throughout Canada. Short term effects of psilocybin last for several hours and may include a relaxed feeling, the feeling of being separated from the environment, the feeling of heaviness, distorted perception, discomfort in the abdomen, numbness of the mouth, nausea, and sweating. There has been no known deaths directly due to an overdose of psilocybin, but behaviour due to intoxication can result in injury and possibly death. First time offence may result in a fine of up to \$1,000 or imprisonment for up to six months.

Opium: A central nervous system depressant sold in the form of dark brown chunks or powder. Although it has been used for centuries, there are currently no accepted medical uses for opium. Short term effects include pain relief, good mood, relaxed state or drowsiness, nausea, sweating, itchy skin, and slowed breathing. If overdosed the breathing may slow down to the point of completely stopping, which results in death. Long term effects may occur for continuous users and include lung problems, abscesses, cellulitis, liver damage, tetanus, or brain damage. Complications during pregnancy are common as opioids pass through the placenta. Tolerance develops quickly. Opium is highly addictive and may result in physical dependency.

Withdrawal symptoms include anxiety, insomnia, sweating, muscle spasms, chills, shivering, and tremors. Symptoms are usually over within a week, but up to six months may be necessary to fully recover from withdrawal symptoms. First time offence may result in a fine of up to \$1,000 or imprisonment for up to six months.

Morphine: A central nervous system depressant in the form of tablets or an injectable solution. A painkiller made from opium. Morphine has been used as a painkiller since the 19th century. Effects, tolerance, withdrawal symptoms, and penalties for unlawful possession are the same as opium.

Heroin: A central nervous system depressant in the form of white or brown powder. Heroin was made from morphine to relieve people of morphine addiction in 1898, but showed to be more addictive. It is an effective painkiller, but because it is highly abused its medical use is limited in Canada. Some countries are experimenting by prescribing heroin for the treatment of heroin addiction. Effects, tolerance, withdrawal symptoms, and penalties for possession are the same as opium. However, it may be important to note that Heroin use is especially dangerous because dosage can only be guessed, and the usage of needles allows for the passing of STDs.

Methadone: A central nervous system depressant that is usually distributed in an orange flavoured mixture. Methadone can be prescribed in Canada by specially authorized doctors to treat people dependent on other opium products. The effects, tolerance, withdrawal symptoms, and penalties for unlawful possession are the same as opium.

Cocaine: A stimulant distributed in a fine white powder, often mixed with sugar, cornstarch, talcum powder and other substances. Cocaine can be sniffed, absorbed through the mouth, smoked, or injected. Crack cocaine is the smokable form of cocaine. Crack is made by adding baking soda to the cocaine solution and then drying the mixture. Short term effects include euphoria, energy, alertness, rapid heart beat, rapid breathing, sweating, a decreased appetite, paranoia, violent behaviour, tremors, hallucinations, headache, pain in the chest, nausea, blurred vision, fever, muscle spasms, convulsions, and potentially death. The substances used as a "filler" in street cocaine may produce an allergic reaction that can cause fatality. Long term effects include mood swings, restlessness, sleep disorders, hallucinations, eating disorders, and impotence. Tolerance may build with continuous use of cocaine. It can produce a very powerful psychological dependency, and is believed to have the most powerful dependency producing properties of all psychoactive drugs. Physical dependency is also possible. Withdrawal symptoms include fatigue, disturbed sleep, strong hunger, irritability, depression, and violence. First offence is punishable by a \$1,000 fine and up to six months in prison.

Meth-amphetamine: A stimulant, most commonly referred to as Meth, that is distributed as a powder. It can be injected, smoked, or consumed orally. Meth was developed in the 1920s to treat depression and obesity. It can be used in the treatment of narcolepsy, ADHD, and Parkinson's Disease. Short term effects include energy, good feelings, decreased appetite, rapid

heartbeat, rapid breathing, sweating, dry mouth, restlessness, aggressiveness, hostility, paranoia, and hallucinations. A possibility of death is found in a burst blood vessel in the brain, heart failure, or a very high fever. The leading cause of death related to meth, however, is violence. Long term effects may include malnutrition and severe mental disorders similar to schizophrenia in continuous users. Increased violent behaviour, kidney damage, lung problems, stroke, and tissue damage can occur. Tolerance seems to develop in the mood elevating effects, but other effects do not appear to develop a tolerance. First offence is punishable by a \$1,000 fine and up to six months in prison.

Marijuana: A plant in the cannabis group that is used for its flowering tops and leaves. Smoked in a pipe, cigarette, water smoking device, a vaporizer, a tea, or ate in food. It has been claimed to relieve symptoms of nausea, multiple sclerosis, epilepsy, and glaucoma. Short term effects last for two to four hours and include relaxation, loquaciousness, short term memory impairments, enhanced perception of colours and sounds, a distorted concept of space and time, increased appetite, red eyes, dry mouth, impaired balance, and potentially paranoia. Long term effects are debatable, but may include decreased motivation and interest, difficulties with memory. These problems tend to stop when regular use stops. The respiratory system is damaged by smoking. There is much more carcinogens and tar in cannabis smoke than tobacco smoke. However, "There have been no reports of lung cancer related solely to marijuana, and in a large study presented to the

American Thoracic Society in 2006, even heavy users of smoked marijuana were found not to have any increased risk of lung cancer” (Drug Policy).

There is some evidence that a tolerance develops in users who continuously use high doses. Psychological dependence may occur, and physical dependence is highly debatable. Possession under thirty grams is punishable by a fine of up to \$1000 and a sentence of up to six months. Possession of over thirty grams can result in a prison sentence of up to five years.

(Straight)

Drug War History:

1908- The Opium Act is established, in Canada, banning the manufacture, import, or sale of opium products for non-medical purposes. This act passes without any opposition in the House of Commons or the Senate. (Canadian)

1911- The Opium Act, mentioned above, becomes the Opium and Drugs Act; this new act includes Cocaine and Morphine. (Canadian)

1914- The Harrison Tax Act is passed in America, making cocaine and opium products illegal.

1923- The Opium and Drugs Act is amended to include Marijuana. (Canadian)

1937- The Marijuana Tax Act is passed in the United States. This act makes possession of cannabis, excluding medical and industrial uses, illegal throughout the U.S.(The Marihuana Tax) In Canada, the Marihuana Tax Act is passed as well. This act taxes all persons who deal, prescribe for medical use, or possessed marijuana. A sentence of five years in prison, a \$2,000 fine, or both could be given if the person did not have a Tax stamp. (Canadian)

1938- The Opium and Drug Act is amended to forbid the production of cannabis in Canada. (Canadian)

1942- The Opium Poppy Control Act is passed in the United States. This act bans the growing of poppies without a license. (Frontline)

1954- a new offence is established, in Canada, to differentiate between personal possession and trafficking of any illicit substance; the latter offence is classified as possession with intention to distribute. (Canadian)

1961- The Canadian Narcotic Control Act is passed. This act classifies simple possession and production of cannabis as a criminal offence. It also raises the minimum penalty for growing marijuana from seven years to fourteen. (Canadian)

1960s- Recreational drug use becomes commonplace amongst middle class families in America.

1968- The Bureau of Narcotics and Dangerous Drugs (BNDD) is founded which combines several drug agencies into one. This is designed to remove tension between multiple agencies.

1969- A study by Dr. Robert DuPont connects heroin addiction to violent crimes, subsequently he is given permission to treat heroin addicts with methadone. (Frontline)

1970- The National Organization for the Reform of Marijuana Laws is founded in America, by Keith Stroup, to campaign for the decriminalization of marijuana. On October 27th congress passes the Comprehensive Drug Abuse Prevention and Control Act which combines earlier drug laws. Within this act is the Controlled Substances Act which categorizes illicit drugs into five “schedules” based on medical value and addiction potential. (Frontline)

June 17th, 1971- President Nixon stated that drug abuse is “public enemy number one in the United States.” He then declares a war on drugs. “During the Nixon era, for the only time in the history of the war on drugs, the majority of funding goes towards treatment, rather than law enforcement”. (Frontline)

1972- The Office of Drug Abuse Law Enforcement (ODALE) is founded to “fight the drug trade at street level.” (Frontline) In Canada, the Commission of Inquiry into the Non-Medical Use of Drugs, also called the Le Dain Commission, supports the end of charges for cannabis possession and cultivation. The political powers at the time, including Prime Minister Trudeau and Joe Clark, support decriminalization. (Canadian)

1973- President Nixon creates a new agency to manage all aspects of the drug problem: the Drug Enforcement Administration (DEA) which combines the BNDD, Customs, the CIA, and the ODALE. (Frontline)

1974- President Nixon resigns from office; Gerald Ford is inaugurated as president. (Frontline)

1975- The White Paper on Drug Abuse, released by the Ford administration, re-classifies marijuana in a lower priority than heroin, amphetamines, and barbiturates. On November 22, Columbian police capture a small plane carrying 600 kilos of cocaine, the largest cocaine seizure at the time. As a reaction to the seizure, the drug cartel kills 40 people in Medellin, Columbia in one weekend; this becomes known as the Medellin Massacre. This event is an indication of the power held by Columbian cartels. (Frontline)

1976- Jimmy Carter campaigned for the U.S. Presidency on the platform to remove criminal penalization for possession of up to one ounce of marijuana. In the same year, Keith Schuchard and Sue Rusche form Families in Action, the first parents' organization against teenage drug abuse; they write a letter to Dr. Robert DuPont causing him to abandon his support for the decriminalization of marijuana. (Frontline)

1978- The Comprehensive Drug Abuse Prevention and Control Act is amended in the United States, allowing law enforcement to now appropriate all money intended to be exchanged for an illegal substance, in addition to the drugs. (Frontline)

July 11th, 1979- A shootout at a Miami Mall between Columbian drug traffickers alerts U.S. Law enforcement of the growing violence between the Columbian cocaine lords. (Frontline)

1982- A deal between Pablo Escobar, a Columbian drug lord, and Manuel Noriega, the dictator of Panama, is made to allow Escobar to transport cocaine through Panama at \$100,000 per load. On March 9th, a load of 3,906 pounds of cocaine, valued at over \$100 million, is seized in a Miami Airport hanger. It is recognized that such a large quantity of cocaine could not be trafficked by any lone cartel, thus alerting U.S. Law enforcement that the Columbian traffickers are working together. (Frontline)

1984- Nancy Reagan's "Just Say No" anti-drug campaign, which focuses on middle class children, begins. On March 10th, the DEA and Colombian law enforcement discover Tranquiladnia, a large cocaine operation in the jungle of Columbia. The police then destroy 14 laboratory structures, containing 13.8 metric tons of cocaine, 7 airplanes, and 11,800 drums of chemicals, all estimated at \$1.2 billion. On November 6th, the DEA and Mexican law enforcements raid a marijuana operation in Mexico; between 5,000 to 10,000 tons of marijuana, worth \$2.5 billion, is destroyed. Time magazine names this "the bust of the century." (Frontline)

1985- A smokable form of cocaine, termed Crack, is developed and becomes prominent in the New York area. (Frontline)

1986- On October 27th, President Reagan signs the Anti-Drug Abuse Act of 1986, which allocates \$1.7 billion to fight the war on drugs; \$241 million for treatment, \$200 million for drug education, and \$97 million for the construction of new prisons. The bill also applies a mandatory minimum penalties for offences: possession of at least one kilogram of heroin or five kilograms of cocaine requires at least ten years in prison, the sale of five grams of crack cocaine requires a minimum of five years in prison. (Frontline)

1988- The Parliament of Canada passes into law “Censorship Cannabis.” Section 462.2 of the Criminal Code of Canada which states that promoting or providing literature for an illicit drug is a criminal offence. Penalties for a first time offence is a fine of up to \$100,000 and a prison sentence not exceeding six months; second time offence is up to \$300,000 with a prison sentence not exceeding a year. (Barnhorst)

1992- The founder of NORML, Keith Stroup, is criminally charged, under section 462.2, for passing out brochures regarding the legalization of Marijuana. The charges were later dropped by the police, and he filed for section 462.2 to be changed due its violation of his freedom of speech. (Canadian)

December 2, 1993- Pablo Escobar is killed by the Columbian police, using American aid to find his location. (Frontline)

1994- The Ontario Court of Justice agrees that section 462.2 violates the right to freedom of speech, and therefore removes the part of the law which bans the distribution of literature. (Canadian)

2000- Clinton provides Columbia with \$1.3 billion to help combat drug traffickers. (Frontline) In Canada, Ontario’s Court of Appeals rules that banning cannabis for medicinal purposes is a violation of the Canadian Charter of Rights and Freedoms. (Canadian)

2001- Canada becomes the first country to legalize medical marijuana for terminally ill patients and chronic conditions. (Canadian)

2003- A safe injection clinic opens in Vancouver, Canada. This clinic allows addicts to safely use pre-obtained drug. (Supervised Injection)