



Exploring new and emerging drug trends and developments in CELAC countries

Joint report from the EMCDDA and COPOLAD workshop on trendspotter methodology

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Introduction

The Second Annual Meeting of the Cooperation Programme between Latin America, the Caribbean and the European Union on Drugs Policies (COPOLAD II) and National Drugs Observatories (NDOs) took place in Lisbon between 13 and 17 November 2017. This meeting focused on a number of drug monitoring and data collection themes, and was attended by officials of NDOs of countries in the CELAC region, as well as invited experts from selected European countries, and regional and international organisations working in the field of drugs.

During the meeting, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and COPOLAD held a two-day workshop on the use of the EMCDDA trendspotter methodology, with participation from the Community of Latin American and Caribbean States (CELAC) countries. The workshop included an introduction to the trendspotter approach, plus a simulation exercise engaging the country representatives in an example of the method in action. This involved country engagement in data gathering and an analysis on the topic of new and emerging drug trends and developments in the Latin American and Caribbean regions. This report summarises the workshop. Firstly it presents the background, purpose and introduction to the trendspotter methodology in summary form (Part 1), followed by some indicative results from the simulation exercise (Part 2).

About COPOLAD II, the EMCDDA and the CELAC region

COPOLAD is a cooperation programme funded by the European Commission through EuropeAid. The programme is implemented between the CELAC and the European Union (EU) countries, helping to forge drug policies supported by objective monitoring instruments and based on reliable and effective strategies. Its second phase was launched in 2016. The EMCDDA, a collaborating institution for the implementation of COPOLAD II, is the central source and confirmed authority on drug-related issues in Europe, and the manager of the European Network on Drugs and Drug Addiction (Reitox). The EMCDDA supports the programme by: sharing its experiences in setting up competent, sustainable and stable NDOs; contributing to the development of key indicators and monitoring tools; and establishing practices for monitoring new psychoactive substances (NPS) and new drug trends.

The Community of Latin American and Caribbean States consists of 33 sovereign countries in the Americas representing roughly 600 million people: Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Chile, Colombia, Costa Rica, Cuba, Dominica, Ecuador, El Salvador, Guatemala, Grenada, Guyana, Haiti, Honduras, Jamaica, Mexico,

Nicaragua, Paraguay, Peru, Panama, Dominican Republic, Saint Kitts and Nevis, Saint Vincent and The Grenadines, St. Lucia, Suriname, Trinidad and Tobago, Venezuela, and Uruguay.

It does not include Canada, the United States of America (USA), or the overseas territories in the Americas of France (Overseas departments and territories of France), the Netherlands (Dutch Caribbean), Denmark (Greenland) and the United Kingdom (British Overseas Territories).

Part 1

Workshop on the trendspotter methodology

The two-day trendspotter workshop was organised within the framework of the Second Annual Meeting of National Drugs Observatories and it gave the country representatives a chance to directly learn about, and engage with, the trendspotter methodology.

The trendspotter methodology in a nutshell

The trendspotter method was developed to explore important new and emerging drug trends in a timely manner, in areas where little routine data is available. It utilises a range of different investigative approaches and data collection from multiple sources. An individual trendspotter study involves four key elements: planning, data gathering, analysis and reporting. Data gathering and analysis takes place in two stages: the first involves both qualitative and quantitative methods (literature review, online expert survey), the second takes place in the context of a structured expert meeting with presentations and facilitated expert group discussions. A preliminary analysis is conducted after the first round of data gathering and analysis, with the expert meeting used to enhance and fine tune the study's analysis and results. Finally, a concise report is produced in a timely manner, to feed into other formal reporting mechanisms.

The methodology is designed to critically explore the available information on emerging threats or developments, and has been previously applied to investigate new methamphetamine trends in Europe (EMCDDA, 2014), the emergence of fentanyl in Europe (Mounteney et al., 2015), the internet and drug markets (EMCDDA, 2015), responses to new psychoactive substances (EMCDDA, 2016a), trends in the European MDMA/ecstasy market (EMCDDA, 2016b), and high-risk drug use and new psychoactive substances (EMCDDA, 2017).

Although this approach can provide timely and valuable insights, it nevertheless has some limitations. For example, as the focus is on new trends, the data available on the subject will necessarily be partial and/or incomplete, and therefore caution will always need to be exercised in interpretation. Furthermore, the limitations of reliance on qualitative data and expert opinion must be acknowledged. In this methodology the continuous triangulation of data, in particular the 'soft' expert opinion with routine and published sources, helps to enhance validity (Mounteney et al., 2010).

The CELAC workshop

The workshop simulated the expert meeting phase of a trendspotter study, and provided participants with hands-on experience of using the method. The event was attended by 42 representatives of 32 CELAC countries who took on the role of experts in the study. Specifically, the workshop covered the following:

- EMCDDA presentation of the trendspotter methodology;
- National presentations on drug trends by ten countries Argentina, Belize, Bolivia,
 Chile, Colombia, El Salvador, Guatemala, Haiti, Peru and Uruguay;
- EMCDDA presentation of results from a literature review and the online survey;
- Discussion and analysis of the findings by national representatives in eight facilitated groups;
- Summary and conclusions.

The primary aim of the CELAC trendspotter exercise was to map and increase understanding of recent and emerging trends in drug use, drug-related public health threats and drug markets in the region. The focus was only on illicit drugs, with alcohol and tobacco, as well as the use of inhalants and prescription drugs, out of its scope.

In particular, the exercise focused on the following areas:

- Recent changes (increases or decreases) in the prevalence of use of illicit psychoactive substances (cannabis, cocaine, heroin and other opioids, synthetic stimulants and hallucinogens), and possible regional trends;
- Recent changes (increases or decreases) in the market of illicit psychoactive substances (cannabis, cocaine, heroin and other opioids, synthetic stimulants and hallucinogens), and possible regional trends;
- Emerging use of NPS;
- Changes in perceived health threats associated with drug use;
- Underlying factors and/or possible explanations for the reported changes.

The exercise largely followed the trendspotter method with a large part of the workshop used to simulate a trendspotter 'expert meeting'. Specifically:

- Prior to the workshop, a team assigned to the exercise conducted a non-systematic review of published and grey literature, and available monitoring data, in both English and Spanish. The literature search was limited to the last five years, in an effort to focus only on the most recent trends, but also taking into account the various timeframes of data from the different countries;
- The team also sent out an online survey to the COPOLAD representatives attending the training. This asked respondents for evidence of recent changes in illicit drug use, drug markets and public health consequences in their countries. The recall period for the survey was up to two years, to cover unpublished or unreported insights. Of the 32 CELAC countries contacted, 27 responded to the survey. To assist the analysis, quantitative results were summarised in a grid and supported by a series of maps. This allowed common patterns and trends to be identified across the region. The EMCDDA team presented this analysis at the workshop.
- During the workshop, 10 countries provided national overviews of new trends and developments in the drugs field. Results from the aforementioned analysis and national presentations were further discussed in facilitated groups, and findings from all sources fed into the overall conclusions.

Part 2 of this report summarises the main findings from the data-gathering exercises and analyses which took place prior to and during the workshop.

Part 2

Main findings from the CELAC simulation exercise

This part of the report presents in summary form some of the findings from the simulation exercise with CELAC countries. The focus is on identifying the most recent trends and developments in the region with regard to drug use, harms and markets. Bearing in mind that a) this was a training exercise and b) this method is primarily used to explore topics where hard data is lacking, all findings are partial and must therefore be viewed as indicative and incomplete. Nonetheless, findings are presented here to demonstrate the potential of the trendspotter methodology for providing important insights into complex situations. The findings are presented by substance, beginning with some more general background information, and followed by a number of new developments presented in bullet point format.

Where results are based on the literature, references are cited; otherwise findings are based on the qualitative sources described above.

In brief: both stability and change in regional and national drug markets

This study points to a relatively stable or slowly developing overall situation with the established cannabis and cocaine markets in the CELAC region not showing radical changes in recent years. Nevertheless, the global drug market has become more complex in recent decades, bringing to light new concerns, trends and shifts in policy approaches, and necessitating that professionals 'keep a finger on the pulse' to rapidly respond to any emerging threats. This analysis indicates a gradual but continuous expansion of the cannabis market in much of the CELAC region, as seen by some recent increase in reports of cannabis use and seizures. Cocaine production may be on the rise in some countries, while cocaine trafficking measures are becoming increasingly diversified and complex to sidestep due to increased control in the main production countries. At the same time, some countries now report that synthetic drugs, such as MDMA/ecstasy and NPS, are becoming increasingly popular as drugs of choice for young people and in some emerging cultural environments. However, there is considerable uncertainty regarding the actual chemical composition of the drugs sold, as the substances are frequently disguised as 'established' drugs. The use of heroin and other opioids, and injecting drug use in general, remain at relatively low levels, while some countries report recent trends which call for closer monitoring of the situation. Moreover, polydrug use appears to be a cause for concern across the board. Although alcohol has not been a subject of this study, it is regarded as a very important factor in the region. Certain new trends appear to be linked to sociodemographic changes, like the reduction of the gender gap in drug use and treatment demand, or the influence of migration on new patterns of (problematic) use. In addition, new drug policies and continuous debates over existing policies, particularly on cannabis, are seen as both important developments in the countries' drug strategies, but also as drivers for a possible decline in drug use risk perception. The following sections look at the study findings for each drug individually.

Cannabis dominates the market and attracts most drug policy debate

Significant levels of herbal cannabis are produced in countries in Central America and the Caribbean, and some of this is trafficked within the region or to other parts of the world. Mexico, one of the leading countries in the world in terms of quantities of cannabis products seized, remains the main cannabis supplier to the USA, while Jamaica is the main producer in the Caribbean region.

Cannabis remains the most commonly used drug in the region and the drug for which treatment is most frequently sought (UNODC, 2017a). Available data suggest that less than 3 % of the general adult population in the Caribbean and South America used cannabis at least once during the last 12 months, with Chile reporting the highest prevalence rates among both the adult population, and also secondary school children (UNODC, 2017a). Moreover, cannabis is common in polydrug use patterns, alongside alcohol and cocaine.

What's new?

The study suggests some recent changes in the cannabis market and/or cannabis use for 29 CELAC countries. A majority of these countries reported an overall increase in some of the market indicators, such as rises in both production and seizures of cannabis products, intensified trafficking, and/or increased prevalence of cannabis consumption. Moreover, the global discussion surrounding cannabis policy has echoed in the CELAC region, leading to significant policy changes in a number of countries and resulting in some specific actions at sub-regional levels. Thus, the Caribbean Community (CARICOM) has set up the Marijuana Commission (¹) to comprehensively assess social, economic, health and legal aspects of herbal cannabis and to draw recommendations for its future legal status and accessibility.

The information collected through this trendspotter study suggests the following new developments in the cannabis market:

- International reports point to intensified cannabis trafficking via the Caribbean routes (INCB, 2017);
- Widespread cannabis eradication campaigns in Jamaica and Mexico in recent years (INCB, 2016) may have reduced crops in both countries. At the same time, Guatemala has reported an emergence of new crop areas in the last years, which is attributed to decreased production in Mexico;
- Among countries with regular general population studies, some documented an increase in cannabis use in the most recent survey. Thus, Argentina reports an increase between 2010 and 2017 (Sedronar, 2017); Chile shows an increase over the period 2010 and 2015 (Ministerio de Interior et al., 2015) and Uruguay also records increases over the period 2001 and 2014 (UNODC, 2017a). Information reported from Colombia suggests a recent increase in cannabis use among university students;
- Increasingly, new cannabis consumption patterns have been observed. The study suggests a higher consumption of mixes of substances, such as cocaine and

^{(1) &}lt;a href="http://caricom.org/marijuana-commission/">http://caricom.org/marijuana-commission/

- cannabis (e.g. 'spranel'), tobacco-like products (e.g. 'beady' and 'grabba'), cannabis and ecstasy ('Xotic'), and cannabis and alcohol ('liquor cool'). Other forms of ingestion, such as edibles in the form of sweets, oils and vaping, or bottled drinks containing cannabis, have also emerged;
- Uruguay has recently established a regulated cannabis market (²); Belize and
 Jamaica have decriminalised the possession of small quantities of cannabis; Jamaica
 and Chile legalised the possession of limited numbers of cannabis plants for personal
 use (Publimetro, 2016); and Argentina, Colombia and Peru have legalised
 therapeutic (medical) cannabis;
- There are some signs indicating a potential 'normalisation' of cannabis use among
 the general population in a number of countries, with anecdotal data of the initiation
 age of drug use lowering and increased popularity of large events promoting
 cannabis use, for example ganja festivals in Jamaica.

Cocaine: a dynamic market with diverse consumption trends

Cocaine is produced, trafficked and consumed across the CELAC countries. Colombia reports the largest coca bush cultivation in the world, with estimated cultivation areas of up to 100 000 hectares in 2015 (UNODC, 2017a). Significant areas of coca cultivation in Bolivia and Peru are consistently reported, and other countries play a role in trafficking and refinement of various coca-based products. The available data suggest that less than 1 % of the adult population had used cocaine in any form (except chewing coca leaves) during the last 12 months (UNODC, 2017a). However, regional consumption patterns exist, with coca base paste more prevalent in South America, and crack more common in the Caribbean and Central American countries. In Brazil, a major consumer of crack cocaine, its use is associated with serious health and social consequences.

What's new?

Eighteen countries participating in the study noted a recent increase in market availability for cocaine (powder and/or crack/base), while less than half of the countries involved in the study reported a recent change in cocaine powder use, and available data suggest a possible downward trend in cocaine powder use in South America. At the same time, data on the use of crack/base cocaine indicate varied trends in the region, with some countries in the Southern Cone (Argentina, Chile, Paraguay), in the Caribbean (Grenada, St. Kitts and Nevis, St. Lucia, Trinidad and Tobago) and also Brazil reporting an increase in recent years.

⁽²) Ley No 19.172, published D.O. 7 Jan/014 — Nº 28878, Marihuana y sus Derivados: Control y Regulación del Estado de la Importación, Producción, Adquisición, Almacenamiento, Comercialización y Distribución, https://legislativo.parlamento.gub.uy/temporales/leytemp1994590.htm (accessed on 11 January 2018).

In particular, the study highlighted the following new developments in the cocaine market:

- Colombia, and recently also Bolivia, report an increase in coca cultivation areas. The
 trend in Colombia is attributed to the negotiations for a peace agreement with the
 Revolutionary Armed Forces of Colombia (FARC) (UNODC, 2017a; INCB, 2017).
 Furthermore, both the recent ban of crop eradication through aerial spraying (2015),
 as well as producers moving to national parks (which are off limits to spraying) also
 played a role;
- In Bolivia, the Special Force to Combat Drug Trafficking reported seizing a higher amount of cocaine during the first semester of 2016 than the total amount seized in 2015 (UNODC, 2017c);
- Peru has reported a reduction in its coca cultivation areas since 2011, mainly resulting from extensive eradication actions and alternative development strategies (UNODC, 2017a);
- Central American and Caribbean countries increasingly play a role as both
 warehouses and transit points for shipments bound for US markets, but also Europe.
 Some diversification in established cocaine production and trafficking patterns across
 the region were reported in recent years (INCB, 2017). Costa Rica, El Salvador and
 Honduras reported increases in cocaine shipments and seizures;
- The study found signs of increased experimentation with new ways of smuggling cocaine. There is evidence that unprocessed cocaine is increasingly trafficked to other countries (mainly Central America) closer to the main consumer markets, where it is converted into hydrochloride at local production facilities;
- The available reports indicate a significant increase in cocaine base as well as in powder use in Central America (UNODC, 2017a). Thus, part of cocaine seized in Costa Rica, El Salvador and Honduras in recent years was probably destined for the local market;
- In March 2017, the Bolivian government introduced new rules for protecting coca
 bush production for traditional use, while prosecuting any cultivation or economic
 activity outside of this regulatory framework (3). This is an example of the new focus
 of some regional governments to facilitate an appropriate infrastructure for alternative
 economic activities, rather than merely incentivising the substitution of crops.

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⁽³⁾ Ley General de la Coca, Ley no. 906, 8 de Marzo de 2017, Estado Plurinacional de Bolivia (available at http://www.ruralytierras.gob.bo/leyes/LEY%20GRAL%20COCA%20ovp.pdf).

Heroin and other opioids: need for close monitoring and appropriate responses

Large scale production of heroin is on-going in a few of the CELAC countries. Opium poppy cultivation takes place mainly in Mexico, the third largest producer of opium in the world, and Colombia. Both countries are the main heroin suppliers to the US market (UNODC, 2017a). Reports from Guatemala also indicate the existence of poppy cultivation areas. Furthermore, there have also been reports of several heroin manufacturing labs.

Available information from Colombia indicates that the purity of heroin at street level remains highly variable, ranging from 10 % to 90 % in different cities (MJD/ODC, 2015).

Mexico remains a significant transit country for illicit opioids smuggled into the USA. Furthermore, Mexico is the only country with any reports of illegal production of synthetic opioids, most likely a response to an increased demand of medication such as tramadol and fentanyl in the USA. There are, however, no indications of internal markets for synthetic opioids in the CELAC region; nevertheless, this phenomenon requires close monitoring. There is also no data suggesting spill over of opioid medicine misuse from North America.

Although Colombia and Mexico have been producing heroin for decades, heroin use in the region remains relatively low compared to other regions worldwide. Last year prevalence in the adult population is estimated to be less than 1 %.

Heroin and other opioids are usually injected, and therefore seen as main drivers behind drug-induced deaths and related infectious diseases. There is limited information about high-risk drug use and related consequences in the region. However, data on specialised treatment centre entrants is available, and when considered alongside other indicators, can inform understanding of the nature and trends in high-risk drug use. Some traditional beliefs indicated during the study, such as a 'fear of injection', are likely to be preventing the engagement into drug injecting, especially in the Caribbean countries.

What's new?

The study indicates that in general, the heroin and other illicit opioids market, as well as consumption of these substances in the CELAC region, has remained stable in recent years. However, there are signs of diversification of heroin production and other illicit opioid trafficking routes, which is accompanied by the emergence of new consumption patterns in some CELAC countries. Ten countries in the study provided their assessment on the recent trends in heroin and other illicit opioids market: three of these indicated a decrease in the market and three an increase. Six out of 13 countries for which information about recent trends was collected indicated an increase in consumption. In particular, the study suggests the following new developments in the heroin and other illicit opioids market:

- Mexico reported a substantial reduction in poppy cultivation areas over the period 2013-15 (INCB, 2017), following a massive eradication campaign. The reduction of poppy production in Mexico is suggested as a possible reason for emergence of new opium cultivation areas in neighbouring countries, like Guatemala;
- Colombia reported an increase in seizures destined for markets in Europe and the USA in 2015 (INCB, 2017);
- The emergence of new smuggling routes for illegal opioid medications through Mexico, and an increase in seizures, such as a recent fentanyl seizure at the Mexican-US border (Vela and Michael, 2017);
- Another novelty is the appearance of adulterated heroin ('H-drug') first reported in Ecuador, and later in Colombia. The Ecuadorian reports indicate that it is a mix of heroin and cocaine base paste, amongst other adulterants. It is primarily marketed towards adolescents and its appearance in just two countries suggests that the product is mixed in Colombia and smuggled to Ecuador;
- The online availability and access to heroin and other opioids was highlighted during the study and requires further monitoring;
- There are indications that in a few countries in the region with well-established scenes of heroin users, there are shifts into injection. Available reports suggest an increase in heroin injecting in Colombia in recent years, which may have been linked to an increase in human immunodeficiency virus (HIV) and other drug-related infectious diseases (MJD/ODC, 2015; Berbesi et al., 2013; CICAD-OEA/CND, 2013). Moreover, the available information on treatment demand indicated a five-fold increase in treatment requests due to primary heroin use in Colombia over the period 2007 to 2014 (MJD/ODC, 2015);
- Venezuela also reported a recent increase in heroin use, however prevalence remains low, with less than 1 % of the population and secondary school students having ever used heroin (UNODC, 2017a);
- Lastly, a 2013 report indicated an increase in treatment demand due to heroin use in the Dominican Republic, with over 2 000 patients treated (CICAD-OEA/CND, 2013).
 Around six out of 10 people admitted to treatment had initiated heroin use abroad, mainly in the USA. However, the report also highlighted the emergence of an internal market and the need to scale up treatment and care services for this population.

Synthetic stimulants, new psychoactive substances and hallucinogens: a volatile market requiring innovative monitoring approaches

Although synthetic stimulants include a wide range of drugs, the study focused on trends in amphetamines, MDMA and NPS in the CELAC region. Available reports indicate that the amphetamines market is mainly concentrated in Central America and Mexico, while the MDMA market is focused in South America.

Mexico is the largest methamphetamine producer and the main supplier to the USA, but also to Canada and some Asian countries. Belize, Guatemala, Honduras, Jamaica and Nicaragua have also reported dismantling laboratories intended for production of synthetic stimulants (INCB, 2016; UNODC, 2016).

In general, synthetic stimulants are less commonly used among the general population than cannabis and cocaine. Last-year use of amphetamines and prescription stimulants is estimated to be at 0.86 % in the Caribbean, 0.71 % in Central America and 0.25 % in South America. Around 0.16 % of the general population in the Caribbean and South America and around 0.06 % in Central America had used MDMA during the last 12 months (UNODC, 2017a). The lifetime prevalence of use of MDMA amongst secondary school students ranged from 0.02 % (Bolivia) to 4.7 % (Chile) (UNODC, 2017a).

Information on the use and availability of NPS remains limited in the region. A few countries have established an early warning system (EWS) (4) which allows for a more systematic collection of data and reporting on new substances. The reports from the existing national EWS indicate the presence of ketamine, synthetic cannabinoids, phenethylamines, piperazines, synthetic cathinones and NBOMe in the drug market (SAT/ODC, 2017). There have been very few reports of synthetic fentanils in the region, however the increasing number of synthetic fentanyl derivatives in the European Union in recent years means that any appearances in the region should be closely monitored.

What's new?

Data on recent trends in the synthetic stimulants, NPS or hallucinogens market are available from 17 countries while 29 countries reported on the recent trends in consumption of these substances. Overall, the study suggests that the MDMA market is the most dynamic and there are signs of increased availability and consumption across the region: 13 countries indicated an increase in consumption and six countries an increase in market availability in recent years. More than half of the countries who responded reported a stable market situation for amphetamines, and one third indicated stable consumption. Less than one third

⁽⁴⁾ Four countries: Argentina, Chile, Colombia and Uruguay have established EWS so far and other countries are expected to form their EWS in the near future.

of countries in the study identified information on the NPS market or consumption, and available data indicate that for the majority of countries for which information exists, there has been an increase in the market and consumption of these substances. Information on hallucinogens was available only for a few countries, and indicates a rather stable market with a possible increase in consumption for some countries where the market for these substances is established.

In particular, the study found the following new developments in stimulants, NPS and hallucinogens markets:

- Available reports suggest a substantial increase in production of amphetamines in Central America in recent years, with reported amounts of seized amphetamines increasing from 1.5 tons in 2014 to 12.7 tons in 2015. Moreover, in 2015 Mexico reported a substantial increase in the number of dismantled clandestine laboratories (INCB, 2017). Since 2013, a number of dismantled laboratories have also been reported by the Guatemalan authorities (UNODC, 2016) as well as an increase in the number of seizures;
- Rising popularity of MDMA-like substances is mainly reported among secondary school and university students, as well as in electronic music parties, mainly in South America. Some Caribbean countries reported an increased use of MDMA linked to tourists arriving with their own supply at their holiday destinations;
- The available data indicate that NPS are frequently sold in the region as established drugs. For example, NBOMe was reportedly sold as lysergic acid diethylamide (LSD) (e.g. Chile, Colombia) or ketamine and other substances sold as adulterant for 2C-B (SAT and ODC, 2017).
- Colombia indicated an increase in lifetime LSD use among university students and
 Uruguay has observed an increase in LSD use among the general population (15-65
 years) since 2011. LSD was the second most common drug used among the general
 population in last 12 months (3.8 %) (OUD/JND, 2016). However, taking into account
 that some NPS are sold on the market as LSD, the prevalence rates obtained
 through self-reported surveys should be treated with caution, particularly in the
 context of increased availability of NPS (Suárez and Rossal, 2015);
- Finally, some countries have put in place alternative monitoring tools to collect information on the use of NPS and other synthetic substances. For example, a wastewater analysis at a music festival in Uruguay indicated the presence of synthetic cannabinoids when there was no knowledge of the substance being used in the country (JND/OUD, 2016).

Health and social consequences and challenges for practice

The drug trade historically is associated with high levels of violence and crime, which remains a cause for concern (Chelala, 1997; UNODC 2010, 2012). For some countries in the region (e.g. Colombia, Jamaica, Mexico), the violence associated with drug-related crime, specifically the organised crime groups (Bagley, 2012) and gangs (Grillo, 2016), has remained the main drug-related harm. In these countries, drug production and trafficking are often connected with criminal activities such as kidnapping (The Economist, 2015), homicides (Watts, 2015; WOLA, 2016), and extortion (ICG, 2017). However, it is not clear if there is an increase or a decrease in these activities.

Information on health-related harms remains scarce. Data on treatment entrants can further inform understanding of the nature and trends in high-risk drug use. According to available information, cannabis and cocaine are the main illicit substances responsible for treatment demand in the region (UNODC, 2017b). However, recent increases in heroin-related treatment demand were noted in a few countries. A raising concern in some countries is an increase in the number of cases of drug-related infectious diseases and deaths, especially those linked to increasing trends in injecting drug use, e.g. heroin in Colombia. Moreover, the gender differences in use are becoming less prominent, with steadily more females reporting drug use and entering treatment.

Other harms noted during the study were driving under the influence of alcohol and drugs, and mental health/co-morbidity and suicide.

One of the challenges the discussion highlighted is a lack of resources to provide quality prevention and treatment services, or to contend with drug-related harms. In practice, services should be adapted to the diverse needs of the clients in terms of substances used, their social status and gender.

What are the drivers of change?

The previous sections have outlined the changes and trends in the region and partially revealed the drivers behind these phenomena, which may include new policies, globalisation, technology, migration, culture and nature. The changes in drug policy and legal frameworks, such as new legalisation or decriminalisation policies, as well as stronger pro-cannabis movements throughout the region, were described as the key drivers of changing drug market patterns and responses. Some countries report that advocacy groups favouring legalisation of cannabis are particularly vocal and influential. Participants in the study also highlighted other factors including reduced risk perception and normalisation of cannabis use.

For the cocaine markets, a number of factors may play a role, including the peace process in Colombia, alternative development and crop eradication strategies in main producing countries, as well as profitability. The peace negotiations in Colombia between the FARC and the government have had the effect of opening previously occupied lands to Colombian coca farmers, and destabilising drug prices due to oversupply (UNODC, 2017a; INCB, 2017). In 2015, Colombia banned crop eradication through aerial spraying, with the new Colombian National Plan of Territorial Consolidation prioritising manual eradication of coca plants and alternative development projects. At the same time, the Peruvian National Strategy to Fight Drugs 2012-16 (PCMP /DEVIDA, 2012) aimed to establish 'the economic, social, political, and environmental conditions that allow the population to disengage from the illicit cultivation of the coca leaf and favour the development of a legal economy, promoting sustainable economic activity and social inclusion' within comprehensive and sustainable alternative development axis aims.

In countries where large criminal organisations control the drug supply, other illegal activities, such as weapons trafficking, often occur in tandem. Payments with cocaine or other drugs are also common, contributing to the establishment of inner markets in transit countries.

Technological advancements play an increasing role in new market developments. In recent years, online markets (including the darknet and cryptomarkets) have acquired a growing portion of supply, and expanding mobile phone networks facilitate access to, and communication between, dealers and customers. In addition, the development of user forums, social media and television are influencing people's opinion and knowledge on drug use and availability, especially young people. This phenomenon may require closer observation, as a number of countries reported a lowering of the age of initiation for drug use. Apart from being an information source, social media has been used for 'microtrafficking,' (e.g. in Peru). The information from Colombia, Ecuador and Mexico suggests that micro-trafficking is more commonly orchestrated through smaller organisations rather than cartels.

In parallel, hotspots such as tourist destinations, universities, and increasing numbers of electronic music venues and festivals have emerged as drivers of new trends in drug use patterns.

Natural disasters in the region were also mentioned as potential drivers of change: the two devastating hurricanes that took place in 2017 in the Caribbean region had an impact on local cannabis production in a few severely affected countries, fostering import from other regions and an increase in alcohol consumption.

Finally, the migration to and from surrounding countries — especially the USA — remains a significant driver shaping consumption patterns. A number of reports detail citizens' initiation of drug use in the USA, and upon return or deportation either bringing with them an established drug use problem or the development of one. This presents both social and health issues: local service providers will be unprepared and this may lead to the creation of new markets for substances in the home country.

Conclusions: what are the challenges and opportunities for monitoring systems?

While some features of the overall drug situation may be relatively stable, the exercise highlighted a range of new developments and challenges for drug markets in the CELAC region. From the perspective of drug monitoring, these present a range of opportunities. For example there is an increasing concern regarding the purity and composition of illicit substances, specifically high-purity drugs, toxic adulterants or additional substances (usually NPS) of which the user is not aware. These have been linked to increased mortality and morbidity, and while certain steps have been taken to increase capacity and law enforcement and toxicology infrastructures, limited forensic capacity remains a challenge in the region. A number of countries have set up national EWS, which allow for reporting on new trends and detection and reporting of new substances.

Many countries also report the development of new national drug strategies. These include a stronger emphasis on a public health approach to drugs, providing fresh opportunities to integrate monitoring practices into drug strategies.

However, resources to establish robust and comprehensive drug monitoring systems are limited in the region. While data on persons seeking treatment for drug use are increasingly available, information on high-risk drug use remains very limited, with most surveys focusing on drug use among the general (adult) population or among specific subgroups of young people. These core data sets need to be further implemented and standardised across the region. Nevertheless, to allow detection and a timely response to emerging drug trends, they may be complemented by new monitoring methods, such as trendspotter studies, facility surveys or data collection of forensic drug analyses and wastewater analysis.

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