Welcome Message

from the Conference Host,
Karen Joe Laidler

It is our great pleasure to extend our warmest welcome to all of you in participating in the 1st Asia Regional Meeting of the International Society for the Study of Drug Policy and to our vibrant city of Hong Kong.

This is the first regional meeting to be held that specifically focus on drug related issues involving both academic researchers and frontline practitioners. Hong Kong is an ideal place to host this year’s meeting with the theme — “Drug Policy in Asia: Rights, Wrongs and Emerging Trends”. Hong Kong has been a city that has shown a determined effort towards practice and issues central to drug policies as noted in its’ longstanding methadone maintenance programme since 1970s.

Hong Kong’s methadone maintenance programme in Hong Kong marks the success of treating heroin dependence and controlling HIV, and also signals the cornerstone of the city’s harm reduction effort. The program has been recognized regionally and globally for how localities can study experiences elsewhere and adapt those experiences to local needs and expectations. Such effort can be seen in enhancing the drug treatment system in Hong Kong in response to the changing trends of substances used regionally and globally.

Over the past decade, as UNODC has observed, we’ve witnessed a growing market of synthetic drugs especially methamphetamine in East and Southeast Asia. In terms of drug trafficking, there have also been signs that transnational drug trafficking organisations are targeting East and Southeast Asian cities as a source, transit and destination for methamphetamine and other synthetic drugs. This trend has played a role in the globally expanding new psychoactive substances (NPS) market though the size of NPS market is still relatively small yet very complex. Similar trends have been observed in Hong Kong as in other East and Southeast Asian cities. Regular knowledge exchange between academic researchers and practitioners is necessary for informed policy and programmes.

The Centre for Criminology in University of Hong Kong, as the host for this first regional ISSDP event, is dedicated to providing a platform for academics, civil society and government to engage in dialogue on important issues related to crime, its prevention and investigation, and justice. Among its ongoing activities, the Centre has been providing regional training to practitioners through the Human Rights and Drug Policy Workshop in East and Southeast Asia 2015-2018. In hosting this 1st Asia Regional Meeting of the ISSDP we hope to provide a multidisciplinary platform for this discussion at a regional level and an opportunity to network, share and exchange with over 100 participants from many countries and various disciplines. We hope the 1st Asia Regional Meeting of the ISSDP offers an opportunity for vigorous discussion and debate on drug policy while also providing an environment conducive for new collaborations.

We would also like to invite you to enjoy the sights and sounds of this great city to the fullest. Our city of Hong Kong is a dynamic and sophisticated city with a unique blend of East-meets-West culture. We hope you’ll take the opportunity to enjoy the vibrancy generated by the legendary shopping opportunities, internationally renowned cuisine and meeting the friendly people of Hong Kong.

We hope this year’s Asia Regional Meeting will be a great sharing and learning experience for all.
About the Event

How to get here?

Arrival by Air

Airport Express Rail Service The Airport Express leave the Main Arrival Hall for Hong Kong Station in Central every 10 minutes. The journey from the airport to Hong Kong Station takes about 25 minutes and costs HKD 115 per trip. After getting off from Hong Kong Station in Central, guests can transfer to MTR at Central Station. Take the train Island Line (Kennedy Town direction), you will reach HKU Station in approximately 10 minutes. You can reach Hong KU Centennial Campus at Exit C1.

Taxis Taxis are readily available at the airport. A one-way journey to HKU Centennial Campus, which takes approximately 35 minutes, should cost about HKD 400 to HKD 450. Charges for extra luggage and a toll are applicable.

Public Bus The public bus connecting the airport to HKU Centennial Campus is number A10. The 45-minute, one-way journey costs HKD 48. Get off at Shek Tong Tsui Complex stop, then enter HKU Station at Exit B2 and you can reach HKU Centennial Campus at Exit C1. Useful Link: [https://www.hongkongairport.com/](https://www.hongkongairport.com/)

Arrival by Ferry

China Ferry Terminal Get on the bus number 973 along Canton Road outside China Hong Kong City and get off at Lady Ho Tung Hall, Pok Fu Lam Road stop. Walk down along Pok Fu Lam Road and you will see HKU Station on your left hand side.

Hong Kong-Macau Ferry Terminal Take MTR from Sheung Wan Station that is under the Terminal and take off at HKU Station, Exit C1 is just steps from HKU Centennial Campus.

Arrival by Train

Lo Wu Station Take the East Rail Line; change at Kowloon Tong Station; take Kwun Tong Line and change at Mong Kok Station; take Tsuen Wan Line to Central Station. Then you can change to Island Line to HKU Station, Exit C1 is just steps from HKU Centennial Campus. The journey takes about 70 minutes.

Hung Hom Station Take the West Rail Line to East Tsim Sha Tsui Station; walk to Tsim Sha Tsui Station and change to Tsuen Wan Line; change at Central Station to Island Line. Get off at HKU Station and Exit C1 is just steps from HKU Centennial Campus. The journey take around 30 minutes.

Hong Kong West Kowloon Station Walk to Kowloon Station and take Tung Chung Line; get off at Hong Kong Station and walk to Central Station; take Island Line to HKU Station, Exit C1 is just steps from HKU Centennial Campus. The journey take about 50 minutes.
Venue of the event

Room 2.16, 2/F, Run Run Shaw Tower, Centennial Campus, The University of Hong Kong

Registration

Registration will take place in room 2.17 (see map) every morning of the event, from 8am to 9am on Monday and from 8:30am to 9:30am on Tuesday. You will receive your name badge, which will give you access to the regular events.

Name badge

Being a means of identifications to colleagues, your badge will be required for admission to conference sessions and events. Room monitors will check name badges on admission to the session or event.

Poster presentations

Posters will be available for viewing and discussion on Tuesday, October 15th, from 1:30pm to 2:30pm, in room 11.31 (see map). Look out for signs and information at the venue to find the location.

Lunch and breaks

Snacks and drinks for breaks will be provided outside room 2.16 (see map).
Keynote Speakers

Cheung Yuet Wah

Yuet-wah Cheung is Distinguished Professor and Chairman of Department of Sociology, Hong Kong Shue Yan University. He received his B.S.Sc. from Chinese University of Hong Kong and Ph.D. from University of Toronto. Before joining Shue Yan University in 2016, he had taught in CUHK for thirty years and was former Chairman of the Department of Sociology there. His areas of specialization are deviance, drug abuse, and health care. Professor Cheung has conducted extensive research on substance abuse and drug policy in Hong Kong. He has published four books and over eighty book chapters and articles in peer-reviewed journals, including Social Science & Medicine, Journal of Adolescent Health, Journal of Marriage & Family, and Journal of Youth & Adolescence. His latest book, entitled Psychoactive Drug Abuse in Hong Kong: Life Satisfaction and Drug Use, was published by Springer in January 2018. He is a member of the editorial board of Substance Use & Misuse (Taylor & Francis) and International Journal of Comparative and Applied Criminal Justice (Routledge).

Liew Vui Keong

Datuk Liew Vui Keong is the Minister in the Prime Minister’s Department of Malaysia. The Batu Sapi Member of Parliament is fondly known as Datuk VK Liew. He graduated with a Bachelor of Laws (Hons) from University of North London, England and have a Diploma in Business Finance from Polytechnic of North London, England. He was admitted to the High Court of Malaya at Kuala Lumpur in 1990 and High Court of Sabah and Sarawak at Kota Kinabalu in 1992. Datuk Liew Vui Keong practiced as an advocate & solicitor from 1990-2008. He was a Member of Parliament for Sandakan from 2008-2013. Datuk Liew was born in Kota Belud, Sabah and speak fluently in seven languages that include most of the Chinese dialects apart from Mandarin, Bahasa Melayu, English, Bajau and Kadazandusun, the latter being the native languages of Sabah.

From 2008 – 2009 he served as a Deputy Minister of International Trade and Industry, Malaysia and Deputy Minister in the Prime Minister’s Department (Law & Parliamentary Affairs) from 2009 – 2013. From 2009 – 2013 he was the Chairman of the Malaysian Law Reform Committee. Currently he is spearheading institutional and legal reforms such as death penalty, independent commission of police conduct, freedom of information, common bar course and other human rights related issues.

Alex Stevens

Alex Stevens is Professor in Criminal Justice in the University of Kent's School of Social Policy, Sociology and Social Research, and also Director of Public Engagement for the Faculty of Social Sciences. He is a member of the UK Advisory Council on the Misuse of Drugs (the independent body which advises ministers on the classification of illicit drugs). He has worked on issues of drugs, crime and health in the voluntary sector, as an academic researcher and as an adviser to the UK government. He has published extensively on these issues, with a focus on the sociology of drugs and crime, on risk behaviours by young people, on the use of evidence in policy and on quasi-compulsory drug treatment. His published works include a book on Drugs, Crime and Public Health, studies of decriminalisation of drugs in Portugal, of the right to use drugs, on gangs and on the ethnography of policy making.
## Program Summary

### Monday, October 14th

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<td>09:00 - 09:20</td>
<td>Opening and Welcome</td>
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<td>09:20 - 10:20</td>
<td>Keynote Presentation: The Honourable Datuk Liew Vui Keong</td>
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<td>15:30 - 17:00</td>
<td>Third Presentation Session</td>
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### Tuesday, October 15th

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<td>16:00 - 16:30</td>
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<td>16:30 - 17:00</td>
<td>Concluding Remarks</td>
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## Detailed Program

### Day 1: Monday, October 14th

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<td>Keynote presentation: “Abolishing the death penalty in Malaysia”</td>
<td>By The Honourable Datuk Liew Vui Keong</td>
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<td>Drug production and exportation in Asia</td>
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<td>Jonathan Goodhand</td>
<td>Alex Stevens, Diana Kim</td>
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<td>Ahmad Masoud</td>
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<td>The mirage of peace; the SDGS, drugs and development in Afghanistan</td>
<td>Bikas Gurung &amp; Peter Xenos</td>
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<td>&quot;In the name of creating a DRUG FREE society&quot;: a qualitative investigation on implications of drug law enforcement on harm reduction programs and people who inject drugs in Kathmandu valley, Nepal</td>
<td>Bryce Pardo</td>
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<td>Ahsan Ahmad</td>
<td>Decriminalization of Illicit Drug Use in Malaysia</td>
<td>Linn Aung Thu</td>
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<td>David Mathieson</td>
<td>Adaptive Production Zones and Adapting to Market Shifts in Myanmar's Illicit Narcotics Trade</td>
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<td>Health-related discussions on drug policies and practices</td>
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<td>Alex Stevens</td>
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<td>Shen Tingting</td>
<td>The Dynamic Control System: compulsory registration of people who use drugs in China and its impact on human rights</td>
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<td>Atul Ambekar</td>
<td>A road map for evidence-informed drug supply control response in India</td>
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<td>Augusto Nogueira</td>
<td>Narcotics Drugs Policies in Nepal and its effectiveness</td>
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<td>Zhang Yunran, Jakob Demant</td>
<td>Gender matters in drug treatment and rehabilitation: Implications from a gender-specific analysis on illicit drug use in China</td>
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<td>Lohitha Jaikar</td>
<td>Study on Drug Demand Reduction Program in India</td>
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<td>Augusto Nogueira</td>
<td>10 years of NSP in Macau, challenges and progress</td>
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**Day 1: Monday, October 14th**

- **Furkan Hossain**
  - Evolution of drug use: History of four decades in Bangladesh

- **Rup Narayan Shrestha**
  - Drugs law/policy reform in Nepal: Challenges and Opportunity

- **François Lamy, Raminta Daniulaityte, Usha Lokala, Ugur Kursuncu, Amit Sheth, Monica J. Barratt, Ramzi W. Nahhas, & Robert Carlson**
  - Volume of synthetic opioids advertised on DreamMarket crypto market: the Asian share

- **Hai Thanh Luong, Toan Quang Le, Dung Tien Lam, Bac Gia Bac, & Huong Minh Tran**
  - Decriminalising Drug Use in Vietnam: Lessons and Recommendations

- **Sun Tun, B. Vicknasingam, Darshan Singh**
  - The Shift in Myanmar’s Drug Laws from an Enforcement to a Health-Based Response

- **John Buchanan**
  - Run to the Hills: Mainland Southeast Asia’s Post-World War II Opium Boom
### Day 1: Monday, October 14th

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<td>15:00 - 15:30</td>
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<td>Drug treatment and rehabilitation</td>
<td>Orhan Bhad: Study of factors related to the dropouts in Methadone Maintenance Treatment Programme of India (SOFARDMMT): A retrospective cohort study</td>
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<td>Policies and practices in dealing with drug users and the affected community</td>
<td>Ranjit Tiwari: Impact of Illicit Drug Use on Health-Related Quality of Life in Opioid Dependent Patients Undergoing HIV Treatment</td>
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<td>Drug policy in the Philippines under Duterte</td>
<td>Renaud Cachia &amp; Thura Myint Lwin: Methamphetamine use, self-regulation and user driven harm reduction in Myanmar, Thailand and Southern China</td>
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<td>CPD-2.16</td>
<td>JCT-11.03</td>
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<td>Chair</td>
<td>John Collins</td>
<td>Bikas Gurung</td>
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<td>Anjo Dela Peña, G. Galera, &amp; R. Hao</td>
<td>Karen Joe Laidler</td>
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<td>Who does what? Policy analysis of the Community-based drug rehabilitation program in the Philippines</td>
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<td>Claudia Stoicescu: The Impact of Drug Policies on the Lives and Health of Women Who Use Drugs in Southeast Asia</td>
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<td>Aaron Abel Mallari: Construction of Drugs and Discipline in Duterte's Philippines through social media: insights from exploring the posts of Mocha Uson Blog</td>
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<td>Emile Dirks</td>
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<td>Key People Management in China: Public Security Threats, Users of Drugs and the Roots of China's Muslim Surveillance Systems</td>
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<td>Gloria Lai</td>
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<td>10 years of drug treatment and rehabilitation in Asia: how has it evolved?</td>
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<td>Hermilia Banayat: A cocktail of ideas</td>
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<td>Keynote presentation: “Harm Reduction and Drug Policy in Hong Kong&quot;</td>
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<td>Diversity in drug policy: accommodating ethnicity, class, gender and culture</td>
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- David Brewster & Sho Sagara
  - Drug Treatment in Japan: An Overview

- Nang Pann Ei Kham
  - Reducing drug problems in Myanmar; from legal reform to changes on the ground

- Eric Ratliff
  - Becoming a “surrenderer”: Rhetoric, violence, and the assemblage of subjects in the Philippine anti-drug policy

- Hideki Ito
  - Drug Addiction Rehabilitation Centers (DARCs) and the Partial Suspension of the Execution of the Sentence

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AARON ABEL MALLAR

Construction of Drugs and Discipline in Duterte’s Philippines through social media: insights from exploring the posts of Mocha Uson Blog

One cornerstone of Duterte’s appeal from the period of his campaign to his eventual ascent to the Philippine presidency rested on his penal populist stance against criminality, particularly his promise to rid the country of its problem with illegal drugs. Corollary to this is the emphasis on discipline and how this could propel Filipino society to better heights. In order for Duterte to win in the electoral arena and continue amass support, it was thus necessary to construct meanings attached to drugs and discipline that were important in maintaining his populist appeal. One key element we could cite that helped in this effort was the utilization of social media. In attempting to fully understand how the discourses around drugs and discipline were created, this piece argues that it is also important not only to look at the pronouncements coming from Duterte and the official channels of government; it is also relevant to take into account the populist publics and ‘populist influencers’ that conversed through social media, which could have also reinforced and fueled views about drugs and discipline.

Thus, this research looks at the ways in which drugs and discipline were described, and to an extent constructed, in the posts that appeared on the Mocha Uson Blog. Mocha Uson is a celebrity turned ardent supporter of Duterte during the 2016 presidential campaign and remains to be one of the more influential “populist influencers” that mediate the conversations within the DDS (Diehard Duterte Supporters). From the corpus of data mined from the Facebook page—ranging from status updates, videos, and photographs—this inquiry attempts to surface the relevance of understanding how the influential page (having more than 5 million followers) inadvertently reinforced official pronouncements about drugs and discipline leading to the further consolidation of support for Duterte’s war on drugs. This piece ultimately aims to join the conversations about drug policy, penal populism, the challenges to democracy and how we can further nuance the discussions by including the dimensions involving communicating policies and discourses through various means such as social media.

AHMAD MASOUD

The mirage of peace; the SDGS, drugs and development in Afghanistan

Progress towards achieving the SDGs in Afghanistan and other fragile and conflict affected states (FCASs) depends to a large degree on being able to address illicit drug economies, which tend to be a significant driver of conflict in war time and post war transitions. This paper, focusing on SDG 16, “Peace, Justice, and Strong institutions”, examines the relationship between illicit drugs economies and prevailing policies in Afghanistan aimed at tackling drugs and supporting a sustainable war to peace transition. The paper shows firstly that drug issues are a blind spot in current debates on the SDGs in Afghanistan. Secondly that there is a lack of evidence and analysis about the linkages between illicit drugs economies and wider processes of development and peacebuilding. Thirdly, there is a lack of reliable and systematic data that enables policy makers and researchers to understand the nature of these linkages and to influence them in order to support peacebuilding processes. Fourthly, in spite of the lack of systematic evidence, there is a growing body of work which points to the negative impacts of militarized counter narcotics policies which are likely to undermine the aspirations and goals embodied in SDG 16. This suggests an urgent need to incorporate drugs issues more explicitly into SDG debates in Afghanistan and to adjust policies accordingly.

The paper is divided into four parts: First, it provides an introduction to the ongoing Afghan conflict and explains how the illicit drugs and war economies are deeply embedded in processes of conflict and development. Second, it maps out the current debates on the SDGs in Afghanistan, with a particular focus on SDG16. Third, the paper highlights the blind spots and limitations in the operationalization of SDG16, given the challenge of transforming Afghanistan’s war economy into a peace economy. Fourth, in light of the analysis policy recommendations for national and international stakeholders are set out.
AHSAN AHMAD

Decriminalization of Illicit Drug Use in Malaysia

Malaysia has grappled with a drug problem for many decades that has led to a lost of thousands of lives and destroyed individuals, families and communities. Present drug policies that focus on punitive actions towards drug use have not only contributed to the negative harms but have also exerted large socio-economic and financial costs to the nation. Furthermore, decades of punitive drug policies have not only led to negative health and social consequences but have also not had the desired effect on reduction of drug supply within our communities. Evidence now exists on a pragmatic, health and rights based policies that can help minimize the harmful consequences of drug use. Instead of incarceration and punitive actions that can result in health risks such as infections, loss of employment, a criminal record and family and societal rejection, we propose that Malaysia adopts a policy that views drug use and addiction as a health and social issue. Malaysia's pivot towards a more health-based policy will require the oversight of a Multi-Sectoral Commission on Drugs, investment in the expansion of treatment and support programs and capacity building for all stakeholders including health and the criminal justice system. Malaysia must also undertake a review of laws and policies that have resulted in extensive incarceration of people for no crime other than personal and non-violent drug use. This shift in policy must also be accompanied by an effort to strengthen evidence based primary prevention programs including Family, School and Workplace programs. A critical element in this policy proposal is that we propose that people who use drugs be channeled into treatment and support instead of the criminal justice system through the establishment of a Drug Use Prevention and Treatment (DUPT) Commission that will evaluate each individual and propose relevant treatment and community support programs for the affected individuals. The success of this new policy will depend substantially on political will, cooperation amongst all stakeholders and a significant investment in capacity building and a focus on an evidenced based approach.

AJENG LARASATI

Women incarcerated for drug offences in Indonesia

Background
Indonesia's punitive policy on drugs has resulted in the country having the 4th most overcrowded prison in Asia, which has reached 188%. In 2013, 56,581 prisoners were convicted for drug offences. This number almost doubled by 2017, amounting to more than 99,000 prisoners. 5% of the prisoners are women, and 65.5% of them were incarcerated for drug offences. Under the masculine drug policy, women's rights and needs are often overlooked due to stigma, discrimination and other legal and social barriers.

Methodology
From 2017, LBH Masyarakat (Community Legal Aid Institute Indonesia – LBHM) carried out pioneering research on the situation of women incarcerated for drug offences in Indonesia. By using mixed quantitative and qualitative methodologies, LBHM visited four prisons in North Sulawesi, North Sumatera, and Central Java, and over a 12 month period collected data from 307 respondents and 10 interviewers.

Results
Of 307 respondents, 30% were charged for drug use, 24% for selling drugs, and 16% for delivering drugs, while the rest were charged for another type of drug offence. 42% were not assisted by a lawyer in all stages of their legal proceedings, while the rest were assisted in certain stages. Disturbingly, all respondents were disappointed with the quality of legal assistance they received. 25% of respondents said that they had experienced different forms of torture and ill-treatment.

Discussion
The combination of the drug charges faced and lack of legal assistance received often resulted in women serving long sentences of imprisonment. On average, a respondents served 84 months, or seven years of imprisonment, with the shortest being twelve months. This has worsened the relationship between respondents and their families, especially their children. Many of them lied about their situation, while the rest forbid their children to visit them to avoid further stigma against the children. The conditions of their imprisonment are also problematic, with basic necessities such as sanitary pads not provided. Access to healthcare is very limited with no available drug treatment programmes in the four prisons visited.
This research is only the first step. It showed that there is a need for analysis on how Indonesia's drug policy disproportionately affects women's rights and needs, as well as other intersectional issues such as the link between human trafficking and the trend of using women as drug mules.

**ALAAE MAJID**

*Dissociation of Social Bonds and Unfulfilled Primary Prevention Goals: The Case of Iran*

**Introduction:** The drawbacks in Iranian drug policies are thought to be mainly provoked by an imbalance between 4 pillars of drug policy (i.e. primary prevention, supply reduction, harm reduction, social attachment), and overlooking primary prevention that has been outweighed by strict counter-supply measures.

**Objective:** Adopting a sociological perspective, the paper is aimed at criticizing the dominance of medicalization of drug policies in the absence of the understanding that addiction is socially constructed, and is not a mere individual psychological disease. It is further attempted to provide explanation for how people are engaged in deviance such as drug abuse if they are not adequately socialized into conformity.

**Method:** Drawing upon the case of drug crisis in Iran by way of illustration, while taking into account Hirschi’s perspective of deviance, the paper discusses how key elements of social bonding theory, i.e. attachment, commitment, involvement and belief work effectively and collectively to prevent people from engaging in drug abuse. In this view, dissociation of social bonds seems to lie at the root of addiction.

**Discussion:** It proposes that there would be no panacea for drug abuse problem, unless primary prevention goes hand in hand with social integration and hence prioritized over harm reduction as the main pillar of drug strategy.

**ANJO DELA PEÑA, G. Galera, & R. Hao**

*Who does what? Policy analysis of the Community-based drug rehabilitation program in the Philippines*

**Background** | Community-based Rehabilitation Program (CBRP) is an integrated model which provides a continuum of care for services needed to meet a mild drug dependent’s need. In the Philippines, 90-95% of the total drug dependents can be provided with interventions at this level, however, mandates among government agencies and treatment options are unclear. This study identifies the policy challenges in CBRP implementation as a means to address the country's drug problem.

**Methods** | A scoping review of government agencies involved in CBRP implementation in the Philippines revealed five key players: DILG1, DOH2, DDB3, PDEA4, and DSWD5. A policy review was conducted examining their mandates and current program scopes. Thematic analysis of these mandates was utilized to understand the overlaps and unaddressed areas in CBRP.

**Results** | The scoping review revealed presence of strategic guidelines but absence of implementing guidelines to operationalize CBRP, as well as development of policies in silos. CBRP policies were also shown to focus on punitive action towards drug users versus promotion of public health goals. Review of policies also showed gaps in promoting access to medical care options at the community level.

**Conclusion** | Promoting CBRP has been a global response to addressing the drug problem with varied successes. The Philippine case reflects similar international experience of poor coordination between medical and non-medical communities. For CBRP to be successful, key government agencies need to explicitly harmonize efforts in policy making and implementation.

The views expressed are those of the authors and not necessarily those of the Department of Health.
APIL RAJ BOHARA

Narcotics Drugs Policies in Nepal and its effectiveness

Drug abuse among Nepalese youth is increasing day by day posing threat to safety and security of general public. Evidence suggests that drug abusers suffers from personal health and mental problem and also involved in crime knowingly or unknowingly

Background
Nepal is one of the poorest countries in the world in terms of human development (UNODC, 2005). Nepal’s human development indicators remain well below the average for the South Asia region: more than 40% of the Nepali population live below the national poverty.

Statement of the Problem
Research suggests that there is a strong association between poverty and problematic drug use.

1.1 Aims and Objectives
The main aim of the study is to assess the major policy gaps and limitation in proper implementation of National Narcotics Drugs Police in Nepal. Specific objective of this study are;
- To assess the impact of such abuse on safety and security of general public; and
- To make policy recommendation to bridge the existing policy gaps, if any.

2. Literature Review
3. Methodology
The study will use primary information collected from the drug users in Kathmandu valley. Sampling and sample Size. The study will survey 50 drug users and 20 general public. Therefore, total sample size will be 70 which is considered enough for statistical analysis to test the significance of the results.

3.1 Data Collection
A random sample of 50 drug users and 20 general public will be selected for the study.

3.2 Data Analysis
Both the quantitative and qualitative data will be analysed and inference will be made to fulfil the objective set out for this study.

3.3 Ethical Issues
All respondents will be informed about the purpose of the study and their verbal consent will be obtained before the interview or information will be kept anonymous and confidential.

4. Limitation of the study
The study will be confined about Narcotics drug Policy of Nepal and focus on drug related issues.

5. Anticipated Results
The result of this study should be timely in providing concerned authority an evidence based feedback on existing drug use situation and effectiveness of existing policy framework.

ATUL AMBEKAR

A road map for evidence-informed drug supply control response in India

Introduction: Recently available data on alcohol and drug use in India provides important leads for reforms in the laws and policies aimed at controlling the availability. This applies to legal as well as illicit products.

Methods: We examined the epidemiological data regarding use of alcohol and drugs as well as the relevant policies and laws governing their availability.

Results: Under the federal system of governance in India, Alcohol is regulated at the state (sub-national) level. Thus there are large variations in state alcohol policies. In general the trend is towards higher taxation of low-alcohol beverages (like beer and wine) as opposed to distilled spirits. India being a signatory to the three UN Drug conventions, has enacted the stringent Narcotic Drugs and Psychotropic Substances Act which criminalizes drug consumption and has subjected to equal degree of control, the socio-culturally sanctioned low-potency substances (like cannabis and opium) as well as the high-potency, more addictive substances (like heroin).

Discussion: There is an urgent need to put in place a graded and calibrated supply-control response according to the propensity of the drugs to cause public health harms. Bhang is a legal product in India with
government-regulated market in many states. This markets needs to be expanded since data shows higher prevalence of high-potency, illegal cannabis use, as compared to low-potency bhang, in the states with no legal, regulated bhang market. India had a thriving system of regulated supply of opium and poppy husk to registered users till few years back, which has been discontinued. It need to be revived to prevent escalation of the heroin market. Stringent controls over pharmaceutical products makes access difficult for the patients who need them for medical purposes. The alcohol tax policies need to be reformed to discourage consumption of high-potency beverages as compared to beer and wine. Overall there is a need to move from a criminal-justice led response to health and welfare led response to address drug problems. Decriminalization of drug use needs to be a priority agenda.

AUGUSTO NOGUEIRA

10 years of NSP in Macau, challenges and progress

Macau, before we set up the NSP, the number of IDUs with HIV were very low, basically insignificantly comparing with HK or Mainland China, however after a small study inside of the ARTM treatment center we find out that 100% was sharing needles and were not aware of the HIV. ARTM alert the government for this situation, unfortunately the government didn’t believe. Than an HIV outbreak occur in 2004, from zero new infections, we had 18 new infections among the IDUs. The government immediately create a Commission with NGOs, Health Services, Social welfare, police, Education Bureau, etc for discussion and suggestions. Was quite complicated due to Police will to just increase the jail sentences. ARTM suggest the implementation of the NSPs and to visit Australia. In 2008, ARTM open the first and the unique NSP in Macau, but during the first months, we only could collect used needles and syringes, yet, on the 1st December, against the law, but with the support of the Social Welfare and Health Services we start the distribution of the needles and syringes and other paraphernalia. In the process, we had issues with the neighbors, police, etc. but today, we have collect more than 300,000 syringes, we reduce from 60,000 syringes per year to 6,000 per year, we referral many IDUs to treatment, we have a good relation with the neighbors and the government have been always support the NSP, we create an innovative program of Food for Syringe, we have return rate of the Needles and Syringes of 90%. and currently for the third consecutive year we have zero new infections of HIV among the IDUs. In this presentation, we wish to express how important NSPs are, mainly in the region and how important it is for a mutual cooperation between civil society and governments to create effective programs.

BIKAS GURUNG & Peter Xenos

"In the name of creating a DRUG FREE society": a qualitative investigation on implications of drug law enforcement on harm reduction programs and people who inject drugs in Kathmandu valley, Nepal

Background: A polarized approach to drug use endures in Nepal. The Ministry of Home Affairs (MoHA) enforces criminal drug law to create a drug free society, while the Ministry of Health and Population (MoHP) advocates and endorses harm reduction policies to reduce drug-related harms, HIV and other BBI epidemics.

Methods: This study employed qualitative methods to explore the implications of drug law enforcement as possible barriers to accessing harm reduction services, human rights violations and risky behavior among PWID. In June 2016, 28 in-depth interviews were conducted with four distinct population categories [Policy level (1), national HIV program level (7), harm reduction service delivery level (5) and community level (15)]. A maximum variance sampling technique - strategy for purposeful sampling aimed at capturing and describing the central themes that cut across a great deal of variation was applied.

Results: Drug laws provided ultimate power to law enforcement authorities and concomitant fear to PWID. Abuse of such power resulted in range of human rights violations, including sexual harassment, brutal torture and financial hassle, in part due to a nexus between some field authorities and drug rehabilitation providers, and increased barriers to accessing harm reduction services as well as increasing risky behavior practices among PWID. Law enforcement was associated with high drug price, which often were associated with delinquent activities and risky behaviors. Findings suggested that most of the law enforcement related impediments were occurring due to lack of awareness, and failure in flow of information within government agencies and law enforcement authorities, and good monitoring and governance. Knowledge of harm reduction services resulted in changes in law enforcement activities, such as referrals and service intake while in custody.
Conclusion: Consistent coordination, monitoring mechanisms and education for law enforcement authorities should be initiated as an immediate response to improve the dire situation of PWID. However, the long-term health development of PWID cannot be envisaged without favorable policy and law reform around age of consent, appropriate police academy curricula and drug control law that recognizes public health implications, human rights and evidence-based harm reduction approaches, and a participatory process.

BRYCE PARDO

Contemporary Asian Drug Policy: Insights and Opportunities for Change

Changing patterns in drug use and supply can affect the well-being and development of Asian countries in many ways: The burden of disease from injection drug use, overreliance on the criminal justice system, and rise of drug-related crime can impede economic, environmental, and social development. Historically, countries in Asia have addressed illicit drug use and supply with harsh punishments, including compulsory treatment and the death penalty. The region has long espoused the goal of creating a drug-free society, a goal that has been abandoned in other parts of the globe for being infeasible.

This report describes the illicit drug policy landscape for the Association of Southeast Asian Nations (ASEAN) + 3 countries (China, Japan, and South Korea), which account for about 30 percent of the world’s population. The authors also present three case studies on the shifting drug policy landscape in Asia: (1) the violent crackdown on people who use or sell drugs in the Philippines, (2) Thailand’s move from a similar crackdown toward an alternative approach of reducing criminal sanctions for drug use and improving access to medication treatment and needle exchange, and (3) China’s emergence as a major source of many new chemical precursors and drugs, like fentanyl, that are exported outside Asia.

CLAUDIA STOICESCU

The Impact of Drug Policies on the Lives and Health of Women Who Use Drugs in Southeast Asia

Background
Women who use drugs in Asia face increased vulnerability to drug-related harms due to criminalisation, stigmatisation and social marginalisation. Asia is home to the largest numbers of women who use drugs worldwide, including those who inject drugs, yet this group has been largely unrecognised in drug policies, programming and research in the region.

Methodology
Key actions related to women in global and regional drug policy commitments were identified. An exhaustive search strategy was used to capture studies addressing risk environment influences on the health outcomes among women who use and inject drugs in Asia, which yielded 38 eligible records. The search strategy drew on published and grey literature, including observational and intervention studies, reviews, mixed-methods and qualitative research, as well as UNODC World Drug Reports, ASEAN, UN and civil society reports.

Results
Over the past decade, the well-being of women who use drugs and their access to life-saving health care, including harm reduction, appears to be severely compromised. Based on studies from 12 countries in the region and data from civil society, women faced a multiplicity of structural barriers to health and health service access. These included barriers in the physical environment (e.g. spaces where drug use and sex work occur, younger age, knowledge), social environment (e.g. unequal relationship dynamics, recent injection initiation, unemployment, poly-drug use, gender-based violence, compounded stigma and discrimination, lack of social support, poor availability of harm reduction services, poor ART quality and accessibility), economic factors (e.g. poverty and economic pressure, low educational attainment, access to legal aid), and legal barriers (e.g. punitive drug laws, migration status). These barriers are discussed in the context of punitive structures and the drug policies that facilitate them.

Conclusion
Findings suggest an urgent need for drug policy reform that supports the decriminalisation of drug use and sex work and considers the gendered nature of access to health care and harm reduction services in Southeast Asia. This Paper will discuss the structural interventions needed to tackle the multi-level,
interacting risk factors among women. It will also analyse some of the programmes and policy reforms aimed at scaling up provision of and access to gender-responsive health care to meet the specific needs of this underserved population.

DAVID BREWSTER & Sho Sagara

Drug Treatment in Japan: An Overview

Introduction
Contemporary formal approaches towards the use of illegal drugs in Japan is purportedly undergoing change, particularly in respect of drug treatment. The aim of this presentation is to provide a historical overview of drug treatment through identifying a set of competing dispositions and tendencies over the past 70 years.

Methods
The themes discussed in this paper are primarily based upon a review of Japanese and English-based research and policy-relevant literature. In addition, whilst not explicitly drawn upon in the presentation, these themes are further supported by ongoing empirical research concerning recovering drug users and policy practitioners based in public and private criminal justice, health, and welfare organizations at national and prefectural levels.

Results
Three ‘models’ of drug treatment can be identified. The first, an ‘individual’ model, arose out of a predominantly punishment-focused approach to illegal drug use from the 1950s. From around the 1980s, an ‘interactive’ model of treatment began to emerge with the spread of Non-Governmental Organizations such as Drug Addiction Rehabilitation Centers (DARCs). Over the past 20 years, there has been growing professionalization and specialization, culminating in the emergence of a ‘neo-individual’ model.

Discussion
The contemporary landscape of drug treatment in Japan contains points of departure from historical approaches whilst also reproducing dominant notions about illegal drug taking. On the one hand, there has been a gradual shift away from viewing drug use as a result of selfish individuality requiring criminal justice-based responses, to one which increasingly views drug use through the lens of addiction which in turn necessitates treatment and alternatives to punishment. This has been particularly legitimized by concerns over relapse and the research evidence underpinning the neo-individual model. Indeed, the influence of the neo-individual model has also resulted in greater legitimization and co-institutionalization of the interactive model into formal approaches. On the other hand, however, discourses and practices contained in the older individual approach have not been totally replaced. The role of criminal justice is still viewed as important, and in spite of shifts, there are commonalities across the approaches, such as a particular focus on correcting individual deficiencies and weaknesses and a commitment to the goal of abstention.

DAVID MATHIESON

Adaptive Production Zones and Adapting to Market Shifts in Myanmar’s Illicit Narcotics Trade

Introduction
Myanmar has emerged as a major producer of crystal methamphetamines supplying world markets, mostly in East Asia and the Pacific. What accounts for this market shift, and who are the actors involved? Does this mark the ‘third market shift’ of drug production in Myanmar? Opium/heroin first, when for a time Burma was a major world supplier of the drug, and then in the early 1990s, a move to amphetamine type stimulants for domestic and regional markets.

Two factors explain this current trend. First, changing patterns of drug supply and demand, globally, regionally, and the ability of narcotics entrepreneurs to discern changing international trends and respond accordingly. Second, unresolved governance, conflict and security issues in traditional drug production zones that make adaptation to changing consumption trends easier. In other words, both the drug trade and the conflict which surrounds it must be analyzed together, and not separately, to come to a clearer understanding of the resilience of the Myanmar drug trade to changing trends.
Methods
Leading on from research conducted in Northern Shan State between 2016 to 2019, which partly resulted in co-authoring the January 2019 International Crisis Group report *Fire and Ice*, investigating the narcotics trade involves on the ground research and interview with a range of actors close to the drug trade. This research is augmented by reviewing a range of government and UNODC policy material. I position this study in the broader political economy of the drug trade literature, Myanmar specific literature, which demonstrates that the broad patterns of drug demand and supply have not significantly changed since the 1970’s, and that the means of production have adapted to changing global trends.

Results
Myanmar has emerged in a short period of time as the major producer of crystal methamphetamines in Asia, mostly for export and not domestic consumption. This is partly explained by the unique characteristics of main production zones in Northern Shan State, which have seen long-standing state-supported militias provide privatized security services to transnational drug entrepreneurs, even as a complicated decades long civil war swirls around these, mostly unfettered activities. What role do non-state armed groups, state security forces, and regional states play in this trade, and how are these complex relationships explained over time and in three distinct drug market shifts?

Discussion
The explosion of crystal methamphetamines production in Myanmar must be understood not just as the response to regional market demand, but the unresolved political, development and security dynamics that have made Myanmar’s Shan State such a unique production and transit hub for illicit narcotics over several decades. International drug policy analysis of these markets need to include more detailed analysis of the security actors involved in this trade, and not simply trade in alarmist statistics of rising supply, monetary value, and illicit financing, but seek a finer understand of how complex security environments can be conducive to illicit enterprise, using Shan State as both hysterical and contemporary example.

EMILE DIRKS

Key People Management in China: Public Security Threats, Users of Drugs and the Roots of China’s Muslim Surveillance Systems

Background: How do Chinese government approaches to monitoring people who use drugs reflect broader changes in China’s justice system? This paper addresses this question by examining China’s Dynamic Control System as a feature of the Chinese government’s changing approach to crime.

In the early 2000s, the Chinese government began moving away from “strike hard” campaigns towards less punitive approaches aimed at addressing the underlying social causes of criminal behaviour. This was reflected in changing state attitudes towards PWUD and the slow embrace of harm reduction programs across the country. Around this time, the Ministry of Public Security unveiled the Dynamic Control System (DCS), an online database containing the personal and biometric data on all registered PWUD intended to reduce drug-related crime, deepen state monitoring of PWUD and improve access to community-based treatment.

Methodology: This paper draws on qualitative analysis of national laws and policies, and on interviews with former and current users of drugs conducted by one of the authors. Quantitative data are also taken from the China Drug, Crime and Detention Database Project created by one of the authors for the London School of Economics’ International Drug Policy Unit.

Results: The Dynamic Control System allows police to determine what combination of social assistance and punitive sanctions to apply to registered PWUD based on their personal background and social/medical needs. In this sense, it is an improvement over earlier “strike hard” approaches which uniformly led to the detention of PWUD. However, the DCS has created new forms of social control. By using their national ID to purchase a train ticket or book a hotel room, a registered PWUD triggers an automatic alert to the police, who can then visit the individual to interrogate them or compel them to take a urine drug test.

Conclusion: Like the move away from “strike hard” policing, the implementation of the DCS did not represent an unqualified softening of the government’s approach to drug use; rather, it created more precise forms of disciplinary control that the Chinese government now seems interested in extending to the wider population through the social credit system. By placing registered PWUD under the constant surveillance of
the police, the DCS disrupts the reintegration of PWUD into society and impedes access to public services and employment.

ERIC RATLIFF

_Becoming a “surrenderer”: Rhetoric, violence, and the assemblage of subjects in the Philippine anti-drug policy_

President Duterte rose to power by deploying inflammatory rhetoric against the use of shabu (methamphetamine), demonizing “addicts” by amplifying the dangers they pose to public safety and national sovereignty. State officials use such rhetoric to justify the violence of current Philippine anti-drug policy, where calls to respect human rights are countered with the rationale that weak policies on drugs violate the rights of those citizens who do not use drugs. “Addicts” exist outside the boundaries of citizenship and thus deserve death for the extreme threats they pose.

In this presentation, I will draw on theories of governmentality from Foucault, Deleuze, and Agamben to offer a critique of Philippine anti-drug policies and practices. This study is based on observations at local government meetings, conversations with officials, and examination of policy documents and news articles to compose an ethnography that captures the context and complexity of policy design as an assemblage of multiple, diverse components. I will focus here on the emergence of the “surrenderer” as a subject, showing how various discourses, institutions, spaces, and bodies continually interact to (re-)assemble policy.

Since the beginning of his presidency, Duterte has deployed the state’s security apparatus to pursue a simple, linear policy of killing “addicts” to eliminate the demand for shabu. In response to the violence, hundreds of thousands of Filipinos have surrendered to local authorities in hope of avoiding violent confrontations with the government and its supporters. The emergence of these “surrenderers” reveals how the state attempts to establish order through mass criminalization. Their rights are curtailed under a form of “carceral citizenship” where they are forced to undergo rehabilitation to regain full standing in their communities, although it is not yet clear if that will ever be possible. In practice, they are still treated as “addicts”, subjected to continuing surveillance and violence. Other subjects are included in the anti-drug assemblage to manage surrenderers: a nascent treatment community provides rehabilitation, local councils mobilize for surveillance, and families are enjoined to assist these efforts. The “surrenderer” continues to evolve with shifts in law enforcement, rehabilitation, and surveillance practices, altering the assemblage of anti-drug policy and forming new relations with other components in the process.

FRAÇOIS LAMY, Raminta Daniulaityte, Usha Lokala, Ugur Kursuncu, Amit Sheth, Monica J. Barratt, Ramzi W. Nahhas, & Robert Carlson

_Volume of synthetic opioids advertised on DreamMarket crypto market: the Asian share_

**Background:** The recent UNODC report on Synthetic Drugs in East and South-East Asia (2019) underlines the lack of information regarding illicit manufactured fentanyl (IMF) (e.g., fentanyl, carfentanil, “synthetic heroin”) and illicit synthetic opioids (e.g., U-47,700, MT-45, AP-237). These substances are of concern due to their potential use for traffickers to substitute or adulterate heroin used in the region. This lack of information could be partially resolved by monitoring their online sales. The Darknet, a subsection of the non-publicly available Deep Web, constitutes a unique space where illicit goods and drugs can be sold and purchased using cryptocurrencies. This research presents region-oriented results from the eDarkTrends project, which aims to collect and analyze ads related to opioids and “research chemicals” from the Darknet.

**Method:** Cryptomarket data were collected from March 2018 to February 2019 from Dream Market using a dedicated crawler. Crawled raw HyperText Markup Language files (HTML) of drug advertisements were then parsed and curated. A Named Entity Recognition algorithm was developed to identify and categorize the type of IMF and illicit synthetic opioids advertised on DreamMarket.

**Results:** 95,011 opioid-related and “research chemical” advertisements were collected. 3,965 (3.6%) ads were related to IMF and 691 (0.6%) were related to illicit synthetic opioids. Concerning IMF, 14.7% (n=15) of the IMF vendors were located in Asia, they posted 6.2% of the total IMF ads for 52.7% of the average volume of IMF advertised (3.4kgs out of 6.5kgs). Concerning illicit synthetic opioids, 63.3%
(n=14) of illicit synthetic opioids vendors were located in Asia, they posted 98.1% of illicit synthetic opioids ads for 99.0% of the average volume of illicit synthetic opioids (5.8kgs out of 6.1kgs).

**Conclusion:** Results suggest that vendors located in Asia are the main distributors of wholesale quantities of IMF and illicit synthetic opioids available through the Darknet. Cryptomarket data analysis can provide a complementary indicator to assess the type of Novel Psychoactive Substances (NPS) and their level of production in Asia. Further investigation is needed to systematically harness the Darknet environment to provide a complete picture of the volume of NPS advertised for sale on the Deep Web.

**FURKAN HOSSAIN**

*Evolution of drug use: History of four decades in Bangladesh*

**Background:**
According to the National Institute of Mental Health (NIMH), there are more than 7 million people are suffering in drug dependency in Bangladesh. Bangladesh has 160 million population (2018) and the prevalence of drug use is 0.2%. The trend is in up-raising and HIV and STDs among the injecting drug users are growing which is a great concern to policy makers.

**Methodology:**
A set of relevant documents and literature from 1970-2020 have been reviewed and program data of harm reduction, programmatic challenges of last 20 years considered, Key informants interview also conducted and triangulated.

**Findings:**
In Bangladesh, cannabis smoking, opium ingestion and drinking alcohol were the prime drugs till 1970. Codeine syrup ingestion and heroin smoking were the choice of drugs in early 1980s. Injecting drug (Buprenorphine, other pharmaceuticals and heroin) and heroin and amphetamine commonly known as ‘yaba’ had been the phenomenon in 1990s and 2010s respectively. There are three major approaches for dealing drug related issues in Bangladesh which are supply, harm and demand reduction. To reduce the supply of drugs law enforcement is tightened up including crop eradication and alternative development. Through needle and syringe program (NSP) drug related harm is being reduced and education, drug treatment and legal action are reducing the demand. In last two decades, program responded for the perspective of prevention of HIV/AIDS and targeted interventions implemented only for people who inject drugs (PWID). Drug resistance education funded by the international donors was run in all over the schools in last decade. Drug users living in prison were also intervened in a short scale. Department of Narcotics Control (DNC) is leading the drug treatment program. There are some privately operated centers. But overall rehabilitation program is not in a massive scale implementing in consideration of the prevalence.

**Recommendations:**
A comprehensive program including reforming drug related laws will be beneficial for a sustainable result and achieving the SDG. Massive community based interventions are required to engage community for reducing the drug dependency. Cross border programming is crucial addressing drug issue.

**GIADA GIRELLI**

*‘Alternative Facts’: Public Opinion Surveys On the Death Penalty for Drug Offences in Selected Asian Countries*

Out of 35 countries retaining the death penalty for drug offences in their legislation, 16 are in Asia. Since 2014, several of these countries have witnessed an intensification in populist discourses identifying the death penalty as a central tool of drug control.

Public opinion surveys play a critical role, being often cited as invaluable evidence of public support for the death penalty. Rather than discussing whether public support should be a relevant variable in any abolition process, this paper will address the very claim that the public supports capital punishment is; and the role of public opinion surveys in shaping this discourse.

Accordingly, the paper aims at providing a review and analysis of governmental and non-governmental public opinion surveys conducted in key countries in the region, comparing their design and their findings,
and assessing the relationship between the two. In doing that, specific attention will be dedicated to popular support for the death penalty for drug offences.

The analysis will point to the conclusion that public support for capital punishment – both in general and for drug offences specifically is dynamic, contextual, and reactive to the availability and dissemination of evidence concerning the use of capital punishment. The findings provide an insight into the most relevant arguments in support and against the death penalty as a tool of drug control, and for designing effective public campaigns on the death penalty for drug offences in Asia.

GIDEON LASCO

*Drugs and drug wars as populist tropes in Asia: Illustrative examples and implications for drug policy*

The Philippines may be the face of today’s ‘drug wars’, but its experience is by no means exceptional - as the contemporary examples of Indonesia, Bangladesh, and Sri Lanka show. While Rodrigo Duterte is widely viewed as the inspiration for regional leaders to adopt punitive drug policies, it is equally important to note that in the early 2000s Thailand's Thaksin Shinawatra also embarked on a ‘drug war’ with striking parallels to the Philippines’ in terms of death toll, human rights consequences, and failed outcomes.

This paper uses the framework of populism - defined as a political style (Moffitt 2015) to survey punitive drug regimes in Asia - and make sense of their social and political efficacies. It identifies the divisions mobilized and reinforced by populists as well as the ways in which they perform and spectacularize national crises. Four case studies are presented: two historical (1970s Philippines and 2000s Thailand) and two contemporary (Bangladesh and Indonesia) to show how this style travels across the region.

While drugs can be understood in terms of moral panics around them (see Tan 1995), we argue that individual political actors tap by exploiting public fear (Pratt 2007) and making knowledge claims about drugs and their bodily effects (Lasco and Curato 2019). This paper concludes by identifying points of intervention by scholars and communications experts.

GLORIA LAI

*10 years of drug treatment and rehabilitation in Asia: how has it evolved?*

**Introduction**

Over the past decade of drug policy in Asia, the provision of treatment and rehabilitation programmes for people who use drugs is often proclaimed as a priority by governments in the region. Treatment and rehabilitation interventions are enshrined as key priorities in regional pacts in both South Asia and Southeast Asia. However, despite these stated commitments and some efforts towards ensuring the provision of evidence-based drug treatment and rehabilitation, abuses and other human rights violations against clients in treatment and rehabilitation facilities remain widespread.

**Methods**

Desk-based research on national-level drug treatment and rehabilitation systems and policies in Asia from 2009 was carried out, with analysis focussing on the extent to which programmes accorded with international standards and guidelines, eg. voluntary entry and exit. The analysis extended to the drug policy context which can impact upon access to treatment and rehabilitation programmes, eg. criminalisation of drug use and possession for personal use, availability of diversion programmes. Data on the numbers of people held in detention in government-run drug rehabilitation centres in Asia, from 2012 to 2018, were also collated.

**Results**

Although several countries have decriminalised drug use or implemented diversion programmes for people who use drugs, the alternative responses implemented continue to violate basic human rights, eg. forced urine testing, corporal punishment, compulsory registration, and compulsory detention. Available data shows that between 2009 and 2018, there has been little progress in the transition from the use of rehabilitation in detention centres towards community-based drug treatment and support services.
Discussion
This paper discusses the state of treatment and rehabilitation throughout Asia, and highlights areas of concern. It is apparent that investment is needed to ensure evidence-based understanding of drug use and dependence amongst both health and policy professionals. It is needed to institute standards of treatment and rehabilitation that adhere to international guidelines, building workforce capacity to enable those standards to be met, monitoring of existing services to ensure compliance, and establishing accountability mechanisms to address incidents of abuse. Investment is also needed to ensure that drug policies support the provision of and voluntary access to quality treatment and rehabilitation programmes.

HAI THANH LUONG, Toan Quang Le, Dung Tien Lam, Bac Gia Bac, & Huong Minh Tran

Decriminalising Drug Use in Vietnam: Lessons and Recommendations

Background: In 2009, Vietnam declared officially to decriminalize drug use in their criminal law. From offender to patient, drug user has been still facing a number of challenges and vulnerabilities when Vietnam want to combine between harm reduction and supply and demand reduction.

Methods: To make clearly police's voices in the progress of decriminalizing drug use in 2009, the study used mixed methods research through conducting a content analysis of a number of core legislations in terms of drug policies and control in Vietnam and combining a interviewing of key informants from different backgrounds in Government and its related bodies, Non-government organization, United Nations and local police forces.

Results: While most interviewers assumed that decriminalizing drug use in Vietnam is considered as one of the most important milestones in drug policy's changes since 2009 till now, others still concern how government concretize effective policies to balance between three pillar strategies – supply, demand, and harm reduction. The initiative pilot of Hanoi’s authorities to implement the model of social and legal sssisted referral for drug users (Planning No.40) that could be considered as one of the practical recommendations to balance and prioritize harm reduction interventions with active involvements of law enforcement agencies in the process of decriminalizing drug use.

Conclusions: As the first study to review and assess the progress of decriminalizing drug use after one decade, the paper contributes to understanding more deeply about Vietnam's provisions to balance and improve harm reduction interventions in drug control.

HAI THANH LUONG

Why Vietnam Continue to Maintain the Death Penalty with Drug-Related Crimes?

In the recent three decades, abolishing death penalty in criminal law has increasingly become an inevitable tendency with almost nations around the world. After 25 years, only 16 countries have abolished the death penalty for all crimes since 1977, to date, this figure stands at 174 of the 193 States of the United Nations and more than two thirds of the countries in the world have abolished the death penalty in law or practice. Although almost nations have been moving forward on abolishment this punishment, a few, if any, continued to argue and debate maintain or not death penalty in their sentenced regulations. In the Southeast Asia, there are several states where illegal importing, exporting, trading, or possession of drugs can constitute a capital offence, resulting in the death penalty. To some extent, this paper focuses on three main parts to discuss and exchange death punishment in general and for drug-related crimes in particularly within Vietnam’s perspectives in a comparative context. The paper will analyze briefly practice on applying and executing the death penalty over 20 years, from 1993 to 2016, excluding 2003 and 2004 without data. One brief explanation to make clearly the process of minus death penalty in criminal code of Vietnam from 1985 (first version) to 2015 (current version), including drug-related offences. Besides that, the presentation will explain reasons why Vietnam utilized the de facto formation to maintain their information on imminent executions as a state secret since 2004. Based on basic principles, the final section argue why the Vietnamese government continues to maintain this sentence with drug-related crimes. Since these outcomes’ discussions, some implications for theories and practices and further research on this issue will be proposed when Vietnam has implemented the National Judicial Reform towards on 2020.
HERMILIA BANAYAT

A cocktail of ideas

In the Philippines, where a violent war on drugs was launched in 2016, people surrender themselves to law enforcement and to peace and order authorities, regardless of whether they are actually involved in the drug business or not. For the person who has very low awareness of her constitutional and human rights, inclusion in the “comprehensive” drug list as a person who allegedly uses drugs means being forced to submit to either (a) anti-drug abuse programs designed by local government officials or (b) prosecution for drug use.

The promise of protection is enough compulsion to “surrender” despite the fact that submitting one’s self to authorities is not an absolute guarantee of one’s safety and security. Those who submit themselves are called “surrenderees.”

Some local government officials have considered the input of surrenderees in designing anti-drug abuse programs. There is some leeway given to local officials so that surrenderees are given a “chance to change” before they are apprehended for drug-related cases. The point in time before apprehension, but after inclusion in the list, may present itself as the opportunity to consult those who know what is best for people who use drugs, i.e., people who use drugs.

This paper would explore the extent of the possibility of having a voluntary community-based program run by local government officials and designed by people who use drugs (surrenderees). Particularly, it would study the level of discretion given to local anti-drug abuse councils, and identify the extent of when it is comfortable to introduce harm reduction components in the context of the Philippine legal system.

It would also study the complications, if any, of the mixed composition of surrenderees, or the involvement of people who are alleged to be using drugs in designing programs meant for people who actually use drugs.

HIDEKI ITO

Drug Addiction Rehabilitation Centers (DARCs) and the Partial Suspension of the Execution of the Sentence

Introduction

In Japan, the Partial Suspension of the Execution of the Sentence (PSES) Act was enforced from June 2016. Under this law, some offenders are allowed to have some of their prison term suspended after serving a certain amount of time. Drug Addiction Rehabilitation Centers (DARCs), private rehabilitation facilities for drug dependents in Japan, have accepted many drug offenders on probation under PSES. Previous studies warned that DARCs’ support practices would be severely damaged if they were to accept offenders under PSES. This presentation aims to first show the characteristics of DARCs’ support practices, before going on to examine how DARCs’ support practices have been transformed from the start of PSES.

Methods

Fieldwork surveys have been conducted for approximately eight years in two DARCs in Japan. The findings of this presentation are based on the results of participant observations as well as interviews with DARC staff (n=3).

Results

Three main characteristics of DARCs’ support practices were identified. First, for members of DARCs, the center of their recovery approach was based upon a reconstruction of their self-narratives by participating in ‘12-step’ meetings. Second, DARCs’ members and staff considered drug re-use to be part of their recovery processes. Third, DARCs aimed to provide their members with unconditional ‘recognition’ and ‘life security’.

Discussion

Recently, and as witnessed in the two DARCs investigated, more drug dependents from prisons have been accepted than before, in part due to PSES enforcement. However, despite accepting offenders on probation, the two DARCs’ support practices have not changed significantly so far. The two DARCs keep conducting their everyday recovery practices as usual. These results suggest that DARCs give priority to
continuing their usual support practices over strict operation of the PSES. This negotiation and resistance is made possible due to their own interpretation of PSES.

JAY JORDENS & P. Higgs

The Khánh Hoà model: a case study of voluntary community-based drug treatment in provincial Vietnam

For almost three decades compulsory detention has dominated the landscape of public policy relating to illicit drug use in all 63 of Vietnam's provinces, detaining in any given year around 60,000 people who use drugs (PWUD). Compulsory treatment is underpinned by extensive law, and for its lifetime, has been shored up by the narrative of Vietnam's 'social vices' propaganda that has derided the moral character of PWUD and been used to ideologically justify the harsh and unjust conditions of the compulsory detention and rehabilitation regime.

The Vietnamese government adopted the Renovation Plan for Drug Treatment in 2013. It further commenced implementation of a new voluntary community-based treatment (VCBT) approach, initially piloting it in the provinces of Bác Giang in the north, Bà Rịa-Vũng Tàu in the south and Khánh Hoà in the central-south. The research that informs this paper set about exploring these challenges in the three 'early implementing' Vietnamese provinces.

This paper examines this new voluntary treatment system focusing on Khánh Hoà as a case study. The province aspires to build a quality voluntary community-based drug treatment service that incorporates professionals and those with lived experience. Provincial administrators apply a local interpretation of national drug treatment policy that differentiates PWUD in an effort to divert many of them away from compulsory detention and into VCBT. Norms of social organization and state intervention into citizen's lives frame the effort to de-institutionalize and de-stigmatize drug treatment and drug use. Likewise, local formulations of the meaning of 'voluntary' emerge from the interplay of law, practice, new methods and old traditions.

Khánh Hoà has been touted in Vietnamese state media as a potential model for nationwide roll-out of VCBT. This paper thus seeks to create a baseline understanding of what the VCBT model looks like in Khánh Hoà, and in doing so, enhance our understanding of the challenges faced by Vietnam as it attempts to transition out of the shadow of decades-long compulsory detention and treatment.

JENNA MAE L. ATUN, Ronald U. Mendoza, Clarissa C. David, Radxeanel Peviluar N. Cossid, & Cheryll Ruth R. Soriano

The Philippines' antidrug campaign: Spatial and temporal patterns of killings linked to drugs

Background: As soon as President Rodrigo Duterte assumed office in 2016, the Philippine government launched a nationwide antidrug campaign based on enforcement-led anti-illegal drugs policies primarily implemented by the national police. This was followed by a spate of killings resulting from both acknowledged police operations and by unidentified assailants. This study assembles a victim-level dataset of drug-related killings covered by the media during the Philippine government’s antidrug campaign, and presents a spatial and temporal analysis of the killings.

Methods: The dataset covers information on 5,021 people killed from May 10, 2016 to September 29, 2017. Data collected systematically through online search procedures and existing listings of media organizations detailing information about incidences of drug-related police operations and drug-related killings in 'vigilante-style' manner reveal patterns for who were being killed, where, and how.

Results: Over half of the killings were due to acknowledged police operations, and the rest were targeted in so-called 'vigilante-style' killings. The first three months after Mr. Duterte was sworn in were the deadliest months. Those who were killed were mostly low-level drug suspects.

The analysis of temporal pattern reveals the scale of killings in the country, with rapid escalation starting in July 2016 and lasting throughout the rest of that year. Observable declines occurred during periods when the 'drug war' was suspended and operations were moved to a non-police enforcement unit and rose again when police were brought back into operations. The spatial analysis indicates a large
concentration of deaths in the National Capital Region (40%) compared to the rest of the country with wide variations across cities and regions.

**Conclusions:** Overall, the Philippine ‘drug war’ exhibits similarities with violent wars on drugs waged in other countries such as Thailand, with heavily police-led interventions leading to fatalities in the thousands over a span of under two years. Findings of this study point to important policy adjustments that need to be made, including the role that local governments play in drug policy implementation, the disproportionate negative impacts of enforcement-led policies against drugs on urban and poor areas, the targeting of low-level suspected drug dealers and users, and the importance of proper data monitoring and transparency by the government to inform policy adjustments in the face of high costs to human life. We also discuss the importance of independent monitoring systems when the government reports conflicting information.

JOHN BUCHANAN

*Run to the Hills: Mainland Southeast Asia’s Post-World War II Opium Boom*

**Introduction**
A far-reaching transformation of the upland agricultural sector of mainland Southeast Asia took place between World War II and the early 1970s. Many farmers in eastern Burma, northern Laos and northern Thailand adopted opium as their principal cash crop. During this period, these three governments also ended the state-sanctioned sale of opium and banned its cultivation. Estimates indicate that levels of production rose from a pre-World War II output of roughly 60 tons per year so that by the early 1970s, the area had emerged as the world’s leading producer, with an estimated 800 tons per year.

What accounts for this transition? What makes farmers opt to grow drug crops rather than food crops? Research on opium production in this period focuses on armed drug trafficking groups and the role of prohibitions in stimulating production but often fails to examine the farmers who grow poppies. This paper examines farmers and the forces that structure their selection of crops by situating opium cultivation as a form of “escape agriculture,” described by James Scott, as a strategy designed to evade threats posed by appropriation.

**Methods**
In this paper, I employ “across case” comparisons of three opium producing regions (northern Laos, northern Thailand and eastern Burma) and “within case” comparisons of three sub-regions in eastern Burma during the period from World War II to 1973. My analysis draws on archival sources that include accounts by missionaries, leaders of armed resistance organizations and researchers, all of whom lived in opium-producing areas during this period.

**Results**
This paper shows that opium production was farmers’ response to threats to their security: Appropriation and warfare by states and other armed groups. Farmers fled or shifted their fields to remote areas in the uplands that were difficult for armed groups to access and also ill-suited for growing food crops. Many farmers adopted opium as a cash crop - which they exchanged for rice - as part of a strategy to address shortfalls in food production.

**Discussion**
By framing opium production as a response to threats to their security, my argument moves beyond a focus on the forces of market dynamics and regulation and their impacts on drug trafficking groups found in policy and academic research. Instead, it emphasizes the importance of dynamics in lowland areas involving warfare and appropriation by the state.

JULIAN MCMAHON

*Drug laws, politics and executions - Asia*

The purpose of the paper is to reveal and analyse the political nature of executions - or the call for executions - when arising from drug crime prosecutions. Despite the laws, and number of people sentenced to death - figures vary widely across Asia - the ultimate decisions about executions tend to be
political. This needs to be fully understood to be combatted. The political rhetoric of ‘deterrence’ and ‘public will’ is vulnerable to scholarship.

The paper will consider the language and political nature of what is ostensibly said to be a law and order issue. Countries discussed will be topical eg at least some of Malaysia, Indonesia, Singapore, Sri Lanka, Brunei, Pakistan, and EJKs in the Philippines - all are relevant to these issues.

The author is a barrister with wide experience in death penalty work, especially in the framework of drug offences.

**KHINE SU WIN**

*Impact of Drop in Center Closures on People who Inject Drugs: Lessons Learned from Yangon*

**Background:** HIV prevalence of people who inject drugs (PWID) in Myanmar is 34.9%. While harm reduction programming is supported by the government, the level of funding is scarce and more domestic support is required. This is especially the case in light of the withdrawal of international funding for harm reduction services, which in Yangon has had dramatic and negative impact on the health and lives of PWID.

**Methodology:** Asia Catalyst both supports marginalized, criminalized populations in Myanmar by providing them with essential human rights education, documentation and advocacy skills, and aims to improve community knowledge and skills in order for partners to effectively address key priority issues. Our local partner, Youth Empowerment Team (YET), a group composed of people who use drugs, has documented the impact that the closure of harm reduction drop-in centers has had on their community. Asia Catalyst and YET trained four peer educators who interviewed twenty seven individuals accessing daily methadone, anti-retroviral treatment, and clean injecting equipment at a drop-in centre in Yangon. The questionnaire was designed to capture information about accessing services from the government, NGOs, and community harm reduction clinics and the impact of drop-in centre closures on respondents.

**Results:** All interviewees reported limited access to essential services including HIV and hepatitis testing, methadone, and clean injecting equipment following the closure of drop-in centres. Fourteen worried about disease transmission from needle sharing. At least one fatal overdose occurred post-closure. All reported social isolation as a result of lacking the safe space and support provided by the drop-in centres.

**Conclusion:** Drop-in centres comprehensively address a myriad of the health, psychosocial, and other needs of PWID in Yangon. They experienced severe health and social impacts as a result of the closures. There is a need for spaces in which problematic drug use can be addressed as a health issue, particularly in a hostile legal environment like Yangon. Community-based and welcoming treatment centers like drop-in centres should be supported with sustainable local funding.

**LINN AUNG THU**

*For the People by the People! Knowledge and Opinions on the Changing Drug Law in Myanmar*

**Background**

Myanmar is confronted with a HIV/AIDS, viral hepatitis and drug use syndemic. It is estimated that there are 93,000 people who inject drugs (PWID), among PWID HIV prevalence is up to 61.4% and HCV 87.9%. Drug use is highly criminalized and incarceration rates up to 50%. We assessed the knowledge and opinions on the impact of the Law on Drugs among PWID and community members in rural conflict areas of Kachin State in Myanmar.

**Context**

Early 2018 the amended Narcotic Drugs and Psychotropic Substances Law (NDPS) was passed by Parliament (“Pyidaungsu Hluttaw”), the law showed improvements, albeit not in sync with the applauded public health oriented national drug policy. Critical issue is the exclusion of the “exemption” clause for personal use and possession (section 16 C); resulting possession of any quantity of substances is “punishable with imprisonment for a term which may extend from a minimum of 5 years to a maximum of 10 years”.

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Research Methods
This qualitative study used a mixed-method research design, data was collected in Bamaw Township through in depth interviews with 30 drug users and 4 focus-group discussions with 24 community members.

Findings
Of the interviewed random selected drug users 43% of had a history of incarceration for possession of drugs for personal use, of which 71% did not receive treatment continuation including HIV and MMT. 90% drug users underwent detox or rehab at least once, with 90% relapse rate, 53% did not find current drug law assist in accessing treatment and 57% felt a need for exemption of possession of predefined amounts. All community members agreed drug users need support and/or treatment to mitigate burden on communities and blood-borne infections. 75% favor psycho-social support, all respondents support MMT, 12.5% of the participants see NSP as solution. 58% of community members would accept exemption of possession, 71% of the FGD participants still preferred the complex old law.

Conclusion
The existing legislative, cultural and political circumstances in Myanmar makes an enabling environment and providing support and care to PWID/PWUD very challenging. Evidence suggest that there is mixed objections/resistance from community that exemption for possession and personal use would aggravate drug trafficking, dealing and drug use. The criminalization of drug use is heavily impacting the lives of drug users and their families, increases relapse, risky drug use behavior and basis for increased incarceration.

LOHITHA JAIKAR

Study on Drug Demand Reduction Program in India

India is a welfare-based nation; therefore, it has an embedded responsibility to protect the marginalized communities. However, drug dependency has always been a hidden phenomenon. Focusing on Indian scenario, this research critically analysed the implementation of the demand reduction programme, i.e. the National scheme of Assistance for Prevention of Alcoholism and Substance abuse which emerged from Section 71 of Narcotic Drugs and Psychotropic Substances (NDPS) Act. Although the NDPS Act is prohibitionist in its approach and has criminalized the use of drugs, it has inculcated Section 71 of NDPS Act that has stated that government can establish sufficient de-addiction centres for treatment and rehabilitation of drug dependents. This research has consolidated an in-depth analysis of the rationale of treatment and rehabilitation components of the scheme, its implementation mechanisms from the Centre to grassroots, its intervention processes at community level and the efficiency of monitoring systems.

The study was carried through participatory approach by including drug dependents, policy makers, lobbyists, Government bodies and de-addiction centres. The study brought out a national perspective by covering Chennai, Mumbai, New Delhi and Mizoram representing Southern, Western, Northern and North East regions of the country respectively. This approach was deployed to obtain a holistic understanding of the country.

Keeping intact the human rights aspect of drug dependents, careful analysis was made by including reflections and critics of all political and social actors in this field. The treatment and rehabilitation services were analyzed categorically and thematically by posing specific standards such as Availability, Accessibility, Quality and Protection of Human Rights.

It was learnt that at the regional and community level, no autonomous body was set up for implementation of treatment and rehabilitation, treatment was envisaged through correctional angle, huge gaps in extension of financial support to existing de-addiction centres, weak preventive measures, ineffective training of staff, restricted admission for high risk drug dependents, diverse cases of human rights violation, mismanagement of withdrawal symptoms and prevalence of minimal harm reduction measures.

However, on the positive side, the best practices are also being recorded with ongoing study such as positive impact of meditation, yoga therapy, life coaching based on emotional intelligence among other indigenous practices. The paper has summarized and submitted its specific recommendations to concerned ministries, regional level agencies and community stakeholders.
LU YIFEN

The Geography of Drug Use in Taiwan: Investigating Social Contextual Influences

Illicit substance use is a pervasive social problem that results in a massive cost of social assets and a significant stress on the justice system. The arrests for drug use were approximately accounted for one-tenth of total arrests and nearly one-quarter of newly incarcerated inmates were due to drug use given in the Crime Situations and Analysis Crime Trend Reports. A wide range of individual-level covariates of drug use have been investigated across a variety of samples in Taiwan over the years. Social contextual factors, however, are comparatively little known. This study examined geographic variation in the frequency of drug use in Taiwan over the period 2010-2015 and the association with various area-level characteristics. Drawing upon multiple official databases (e.g. police-recorded arrests of drug use, census data on city-level socio-demographics, and spatial data), secondary data analysis was undertaken based on multivariate statistical methods and techniques of geographic information systems (GIS) for visual images. Regional variation in frequency of drug use was found by cities. The substantial correlates accounted for the variance of drug use were the rates of unemployment, divorce, school dropout, and drug availability (i.e., manufacturing, selling, and transportation of drugs), as well as the averaged police expenditure per capita. Results suggest that the routine activities perspective might provide a better understanding of drug use inclination. Implications for drug use prevention were discussed.

MARIELLE MARCAIDA

Organized Crime, Illicit Economies, and the Philippine-China Relations under the Duterte Administration

Background: President Duterte's economically-motivated rapprochement with China has inadvertently shepherded the proliferation of organized crime, as witnessed from the smuggling of illegal drugs, rice, fake cigarettes, and undocumented workers, among others. The Philippines' weak institutions, lax regulations, and its roles as consumer, producer and transshipment points have served as conducive conditions for organized criminal activities. As a response to this, the bilateral economic, trade, and infrastructure cooperation of the Philippines and China has been accompanied by security cooperation to combat transnational organized crime.

Objective: This paper will describe and explore the changing state and nature of organized crime in the context of the Philippines-China relations under the Duterte's administration. It will problematize how the bilateral relations have 'greased the wheels' of organized criminal activities to the detriment of the country's economic, security, and political development. Furthermore, the study will seek to examine how these threats have reflected security cooperation arrangements, strategies, and efforts between the Philippines and China, and the foreseeable successes or failures thereof.

Design: This study is a descriptive and exploratory research. Qualitative method will be employed, and evidence will be drawn from expert interviews with relevant government and law enforcement personnel, police officers, judges, prosecutors, private businesses, and non-governmental organizations. Primary data shall be supplemented by document analysis of literature on the subject matter such as newspaper articles, scholarly works, police reports, and court documents.

Originality/Value: This study will aim to contribute to the relatively untouched issue area of organized crime in the Philippines, as well as the scant attention given to crime-state relations within the political science literature.

MICHELLE MIAO

The Efficacy of Legal Défense: Evidence from the Sentencing Process of Serious Drug-related Cases in China

Introduction
Chinese judges hold wide discretionary power during sentencing. For drug-related offenses, this results in the difference between life and death as well various lengths of incarceration. Along with other factors, it is assumed that how defence counsels investigate and present mitigating evidence to judges is pivotal to the latter's decision during the sentencing stage. Under an open-ended sentencing structure which is premised on policy-based factors, attorneys may play a particularly important role for judges to justify their exercise
of discretion in drug cases. Their performance is key to the persuasion of courts to grant mercy or impose harsh penalties in death penalty-eligible and other serious cases. Is this true?

Methods
The author provides empirical evidence to test the above hypothesis that the attorney’s performance, and the different types of attorneys (government appointed or privately hired) matters to the sentencing outcomes. The author employs quantitative analysis and qualitative data to explain whether the legal counsel could make a difference to the destiny of the defendant in drug-related cases.

Results & Discussion
The research seeks to answer the following questions: Do capital defendants represented by court-appointed attorneys receive comparative disadvantage? Are those who are incapable of securing an effective defence attorney during trial, appellate and review stages more likely to face capital punishment than those who are able to afford a competent attorney? What are the roles of class and wealth in the judicial construction of the execution-worthiness of capital defendants?

NANG PANN EI KHAM

Reducing drug problems in Myanmar: from legal reform to changes on the ground

Background:
The Government of Myanmar recently amended the 1993 Narcotic Drugs and Psychotropic Substances Law. While drug users previously faced 3 to 5 years prison penalties for failing to register at Government’s health center, the amended law instead mentions referral of drug users to treatment and rehabilitation services. Possession of low quantities of drugs for personal use continues to be punished with 5 to 10 years imprisonment. The Government also adopted its first National Drug Control Policy with inputs from government departments, UN and civil societies. While the policy prioritizes public health interventions for drug users, rural development programs in opium growing areas, and respect for human rights, in practice its implementation has yet to materialize. This input will provide an overview of the drug legal and policy framework.

Key Arguments:
The evolving legal framework signals the Government’s intention to move away from repression and adopt a more comprehensive approach to drug control. Unfortunately, the amended Law and the new Policy establishes contradictory priorities. The Law prescribes heavy prison penalties for both drug users caught in possession of small amounts of drugs for personal use and farmers cultivating poppy for their subsistence. However, the Policy suggests to decriminalize drug use and prioritize alternative development over the use of punitive measures against farmers.

Furthermore, the objectives officially pursued by the Government differ significantly with practices on the ground. In June 2018 just after adopting the new Policy, President’s Office created a new anti-narcotics department, which resulted in the arrest of primarily drug users caught with minimal amounts of drugs for their personal use. In Kachin State, the region with highest HIV prevalence among drug users in the country, harm reduction programs saw a 50% drop in the distribution of clean needles and syringes following these crackdowns. Moreover, some of the people arrested had to discontinue their ARV and methadone treatments, due to a lack of availability in prisons.

Conclusion:
The reform of Myanmar drug legal framework is still incomplete and is symptomatic of tensions between two different models of drug control: one based on repression, effectively a continuation of the current mainstream policies, and one that promotes a change of paradigm and is based on public health, human rights and development.
NEX BENSON

Perspectives from Emergent Actors in Cannabis Policy under Duterte: Policy Demands, Political Strategies, and Movement Dynamics

Purpose
Initially slated to become the first country in Southeast Asia to have legal access to medical cannabis, the beginning of the term of current President Duterte was marked by his willingness to support such regulation. This stands in stark paradox with his ongoing War on Drugs that, while largely focused on other drugs such as shabu (methamphetamine), has made use of extra-judicial killings across the country. Despite recent developments that indicate backtracking on this position, this initial promise for support facilitated the emergence of actors surrounding cannabis policy in the country. An empirical investigation of these actors is needed to understand recent developments and possibly imagine future trajectories within the country’s drug policy space.

Methods
Primarily through oral interviews of emergent actors, this paper seeks to describe and analyze nascent interests that range from recreational use to medical applications. Semi-structured confidential interviews collect data on organizational, network, and individual views on policy demands, political strategies, and other dynamics within the national cannabis policy reform movement.

Results
Even with an ongoing War on Drugs, most actors have become increasingly active in political arenas but are confronted by a collective challenge to change popular opinion. Medical cannabis remains a key focal point for other formative groups such as recreational and industrial interests but face particularly strong opposition from traditional medical actors. Moreover, there is little central coordination amongst movement actors that effectively impedes cross-organizational collaborations and collective mobilizations.

Conclusions
The relative collective weakness of these interests may be a minor contributing factor to why President Duterte eventually moved to a more consistent position with his War on Drugs. While prospects of progressive cannabis policies in the country remain bleak, it still holds potential to serve as an opening point for wider drug policy reform within the national government. One key hurdle to be resolved is the low level of formal organization among and between different interests that hinder the formation of a cohesive and coordinated social movement towards progressive cannabis policy in the Philippines.

NU NU LWIN

Drug law and policy reform in Myanmar – The impact on PWID health-related rights

Background:
In 2018, UNAIDS declared that the HIV epidemic is not controlled yet in Myanmar and remains concentrated among key populations such as people who inject drugs (PWID). Today, it is estimated that 224,794 people are living with HIV in country. Data estimates the total number of PWID up to 93,000 with a HIV prevalence of 34.9%, but within the rural Kachin State the HIV prevalence estimated to 45%. In February 2018, the Myanmar National Drug Control Policy highlighted the importance of the Harm Reduction concept and a human right based approach. At the same time, in June 2018, the President’s office announcement while reaffirming the criminalization of drug users with the creation of the Special Anti-Drug Reporting Centre (with a special complaint department and hotline to report suspicious drug activities) and the formation of an Anti-Narcotics Special Squads. This input will focus on the experiences from a harm reduction service provider.

Methods:
Since 1994, Médecins du Monde (MdM) has been implementing a pragmatic, non-judgmental medico-social response in Myanmar. Specifically, PWID in Kachin are exposed to rejection and violence by community members. Drawing on the results of a study on perceptions of drug use, MdM is supporting...
their right to access to health by tackling social, legal and normative barriers and obstacles to accessing care via a rights-oriented and community-based harm reduction network.

Results:
This harm reduction model largely promotes the role of the peer educators who deliver services to their communities, despite very strong stigma and resistance from the general population, and religious-based anti-drugs vigilante groups. However, the efforts made to tackle the HIV epidemic are jeopardized by a persistent criminalization of drug users and the recent police crackdowns on drug offenders. Between August and December 2018, whilst on their personal or professional duties four peer educators working for MdM in Kachin were arrested by the police.

Discussion:
To address the trend of the HIV epidemic, law and policies need to provide an enabling environment for the HIV affected communities and a strong support to effectively implement essential harm reduction programs. This starts with decriminalization of drugs users which gives them an equal access to health-related rights and social integration that leads to tackle health issues as well as social cohesion in Myanmar.

PATRICK ANGELES, Ma. Inez Feria, Abellaine Silva, Gideon Lasco, & Ferlie Anne Famaloan
Women, incarceration and drug policy in the Philippines

Background
The strict enforcement of punitive illegal drug policies, particularly in Southeast Asia, contributes to the high levels of incarceration of women for non-violent drug offences such as possession of illegal drugs or low-level selling. This Paper endeavored to examine and assess the specific situation of women charged with drug offences in the Philippines, especially in the context of its ongoing war on drugs under President Duterte.

Methodology
Local policies were reviewed, available statistical data from national government agencies were collated, and in-depth interviews were conducted with a total of 35 women incarcerated for drug offences in one prison in Quezon City.

Results
While incarcerated men outnumber women (38,990 vs. 2,854), the study found that more than 60% of women currently sentenced in prison are held for drug offenses, compared to only 15.1% for the population of men. Women detained while undergoing trial suffer from overcrowding (up to 600% nationally) and a slow criminal justice process (of those interviewed, the longest period of pre-trial detention was 9 years).

Many report engaging in the drug trade and using drugs for economic reasons and to improve the quality of life of their families. Respondents reported corruption at various stages of the criminal justice process, as well as difficulties in receiving satisfactory legal assistance, health services, and social services while in detention. While policies are in place to protect the specific needs of women, their implementation are insufficient. Jail and prison officials also acknowledged the need to further examine how gender sensitive current services are. Civil society, especially faith-based organizations, are attempting to fill the gaps, but lack coordination in their response.

Discussion
Ultimately, the situation in the Philippines is similar to those in other regions, further exacerbated by the country’s war on drugs. Existing services and policies, especially policies on illegal drugs, need to be examined from a gendered lens to ensure that they are responsive to the unique needs and vulnerabilities of women incarcerated for drug offenses. To make certain of this, the population of incarcerated women need to be meaningfully engaged throughout the process of developing, implementing, and evaluating said responses and services.
R. TEYA ADHITASYA

Justice for Wendra: Persons with Intellectual Disability trapped in the War on Narcotics

Progress towards achieving the SDGs in Afghanistan and other fragile and conflict affected states (FCASs) depends to a large degree on being able to address illicit drug economies, which tend to be a significant driver of conflict in war time and post war transitions. This paper, focusing on SDG 16, “Peace, Justice, and Strong institutions”, examines the relationship between illicit drugs economies and prevailing policies in Afghanistan aimed at tackling drugs and supporting a sustainable war to peace transition. The paper shows firstly that drug issues are a blind spot in current debates on the SDGs in Afghanistan. Secondly that there is a lack of evidence and analysis about the linkages between illicit drugs economies and wider processes of development and peacebuilding. Thirdly, there is a lack of reliable and systematic data that enables policy makers and researchers to understand the nature of these linkages and to influence them in order to support peacebuilding processes. Fourthly, in spite of the lack of systematic evidence, there is a growing body of work which points to the negative impacts of militarized counter narcotics policies which are likely to undermine the aspirations and goals embodied in SDG 16. This suggests an urgent need to incorporate drugs issues more explicitly into SDG debates in Afghanistan and to adjust policies accordingly.

The paper is divided into four parts: First, it provides an introduction to the ongoing Afghan conflict and explains how the illicit drugs and war economies are deeply embedded in processes of conflict and development. Second, it maps out the current debates on the SDGs in Afghanistan, with a particular focus on SDG16. Third, the paper highlights the blind spots and limitations in the operationalization of SDG16, given the challenge of transforming Afghanistan's war economy into a peace economy. Fourth, in light of the analysis policy recommendations for national and international stakeholders are set out.

RAJESH DIDIYA

An Effort toward Betterment

Background
Growing up in a community where everyone was doing drugs, my story no different to any other kid growing up in 90s. Belonging to a lower middle class family where parents expects you to go to school and study hard so that your future is secured. I was on a rampage of destruction for 15 years, contracting HIV & Hep C in the process. 15 Years is a long time and I was tired, I tried to quit many time but always failed. I went for a drug treatment & things started improving. Happiness was something that eluded me for many years and once I started staying drugs free, I was Happy. And that is the main reason that kept me going, no matter what.

Methodology
Once I was drug free I started looking for a job but unfortunately my past was against me, nobody was willing to give me a job. But ultimately it came as a blessing in disguise and Suruwat “The Beginning” was registered in 2007 and started providing various services to drug users. People after treatment were doing fine, they were staying drug free. To engage them for some work so that they have a focus on something as well as they make some money was very essential. With all these in mind we decided to start Organic Farming for drug users, PLHA and their family members. And the stigma & discrimination part continued, our arrival was in the business was not greeted well by other organic farmers. And lack of proper farming knowledge was not helping us either, our productions were not was selling well in local market. Realizing this was crucial situation and great challenge I decided to take practical training of agriculture and joined a course of Modern Farming in cash crops specially Tomato and Green Vegetables farming for one year. Since then our productions are selling well, drug users, PLHAs and their families are more and more involved in the farming project. Currently SURUWAT is earning enough for survival (earned USD 5000.00, USD 5000.00, and USD 6000.00 in 2016, 2017, and 2018 respectively.
Suruwat successfully conducted National Conference on IG focusing PLHIV and their family members in 2018. Since then a link has been developed and we been teaching other CBOs our model of survival.

Conclusion
Drug User can RECOVER as well as they can work like any normal people. They just need opportunity. They can live the dignified life and support in the mainstream development of the community and nation building.
RAKHITHA ASELA DISSANAYAKE

Lesson to Learn before Ending the Moratorium on Capital Punishment for Drug Offenders in Sri Lanka

Introduction
Abolition of illicit drug usage has been placed as one of the important objectives in the criminal justice system of Sri Lanka. Although, Sri Lanka has enacted and adopted various laws and policies such as Penal Code, National Authority on Tobacco and Alcohol Act, Poisons, Opium and Dangerous Drugs Ordinance, Drug Dependent Persons (Treatment and Rehabilitation) Act and the Sri Lankan National Policy for the prevention and control of Drug Abuse, the incarceration and recidivism rates of the drug offenders are still high. Therefore, there is a growing concern among the general public of Sri Lanka that death sentence shall be enforced again ending a 43-year moratorium on capital punishment.

Objective
The main objective of this study was to explore whether the sentence of death penalty really heals the causes for committing drug offences and it is a real solution to eliminate illicit drug usage that may cause to minimize the drug offenders, and harm reduction. Further, this research paper focused on justifiability, fitness and, fairness of executing the death penalty to drug offenders while seeking more appropriate solutions and policies to eliminate illicit drugs in Sri Lanka. Paper expects to evaluate of Asian perspective of imposing the death penalty for drug offenders with Sri Lankan context.

Methodology
The legal research methodology was adopted which is based on library research. The quantitative research method was also used where it is appropriate to establish research objectives. Field research includes interviews and discussions with Magistrates, Lawyers, Prison officers and Officers in charge of correctional authorities were conducted to facilitate the area of research.

Discussion/Results
It is noteworthy to conclude that implementing the death penalty for drug offenders cannot be justified comparatively and morally in the Sri Lankan context. However, the general public is constantly requesting to implement the death sentence to deter the drug offences since they are badly victimized from illicit drugs and related crimes in the country. There is a glaring gap between the public perception and criminal justice in the issue of implementing death sentence for drug offenders.

RANJIT TIWARI

Impact of Illicit Drug Use on Health-Related Quality of Life in Opioid Dependent Patients Undergoing HIV Treatment

Objective: To assess the impact of illicit drug use on health-related quality of life (health utility) among opioid-dependent, HIV-infected patients.

Design: Secondary analyses of data from the Buprenorphine-HIV Evaluation and Support (BHIVES) cohort of HIV-infected patients with opioid dependence in 9 U.S. HIV clinics between 2004 and 2009. Health status (Short Form-12 (SF-12)), combination antiretroviral treatment (ART) status, CD4 cell count, HCV antibody status, current drug use, and demographics were assessed at an initial visit and quarterly follow-up visits for up to one year. Short Form-6D health utility scores were derived from the SF-12. Multivariate mixed effects regression models were used to assess the impact of illicit drug use on health utility controlling for demographic, clinical and social characteristics.

Results: Health utility was assessed among 307 participants, 67% male, with median age 46 at 1089 quarterly assessments. In multivariate analyses, illicit opioid use, non-opioid illicit drug use, not being on ART and being on ART with poor adherence were associated with lower health utility. The observed decrement in health utility associated with illicit opioid use was larger for those on ART with good adherence (beta = -0.067; p<0.01) or poor adherence (-0.049; p<0.01) than for those not on ART.

Conclusions: Illicit opioid and non-opioid drug use are negatively associated with health utility in patients with HIV, however the relative effect of illicit opioid use is smaller than that of not being on ART. Postponing ART until initiation of opioid substitution therapy or abstinence may have limited benefits from the perspective of maximizing health utility.
RENAUD CACHIA & Thura Myint Lwin

Methamphetamine use, self-regulation and user driven harm reduction in Myanmar, Thailand and Southern China

Background
Drug policies implemented across Asia largely rely on the assumption that methamphetamine is so addictive that progression from experimental to problematic and dependent use is almost inevitable. The chemical properties of the substance are seen as the main responsible for user’s gradual loss of control, thus justifying the imposition of strict penalties to deter current and future drug use. While the mechanisms of addiction and the negative consequences of methamphetamine use have been the subject of numerous studies, little attention has been dedicated to self-regulation as a normative process. This study aims to shed light on strategies developed by people who use methamphetamine in the context of Southeast Asia to reduce harms and exert a better control over their use.

Methods
A qualitative approach was opted for to conduct this study. Semi-structured interviews and focus group discussions were held with a total of 38 people who use methamphetamine in Myanmar, Thailand and Yunnan Province in southern China.

Findings
Rather than a unique ascending trajectory starting with experimental and ending with dependent drug use, there is a variety of patterns and drug use histories. The study of respondents’ individual stories revealed that more often than not, these remained able to maintain some level of control over their methamphetamine use. Most were for instance able to reduce or even cease all methamphetamine use, at least for a period of time and under specific circumstances. More generally, participants continued to use methamphetamine for as long as they considered perceived benefits exceeded harms and negative consequences.

The majority had developed various strategies to minimise risks and optimise their methamphetamine use experience, and all were willing to share advice with other people on ways to reduce harms and make methamphetamine use safer.

Conclusion
Policy makers should adopt drug policies that aim to reinforce people’s ability to exert better control over their methamphetamine use, rather than undermine it. The experience of methamphetamine users can be leveraged to promote safer methamphetamine use practices and reduce harms associated with it.

RENIER LOUIE BONA

HIV Intervention in Dangerous Times: Examining the Impact of the Counter-Narcotics Campaigns in the Philippines – Implications for Human Rights, Harm Reduction, and Blood-Borne Virus Control

Background: Starting 2007, the Integrated HIV Behaviour and Serologic Survey of the Health Department of the Philippines started to include numbers for intravenous drug use. The rise in numbers was consistent until the last survey in 2016. This brought attempts to create harm reduction and other HIV intervention programs in areas with high concentration. However, in 2016, Philippine Pres. Rodrigo Duterte introduced war against drugs as a central policy. This war became a threat to identified drug users in the country.

Methods: This medical anthropological study involved a review of the present policies that serve as the circumstances surrounding HIV intervention in the lens of drug use. Done in 2017 to 2018, with interview participants from Metro Manila, the study’s methodology is ethnographic in nature, allowing key informant interviewees and group discusssants to illustrate their narratives and nuances in depth and within focus through a thematic analysis. Interviewees include persons who use drugs, HIV interventionists, public official who engages in the execution of a localized war on drugs, and non-government and community-based organizations.
**Results:** All of the interviewed persons who engage in intravenous drug use inject methamphetamine as their primary choice. Their drug initiation is cannabis. All, however, do not consider cannabis as a drug used for sexual activity.

The recurring theme as reason for drug use is “stress”. This is further examined to include stresses from unjust work conditions, from a dysfunctional family, from cyclical poverty, from an abusive relationship, from gender-based stigma and discrimination, from an HIV status, and from other social exclusions. These stresses are brought about by systemic political situations perpetuated by flawed policies of the country.

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All of the interviewed persons who use drugs agree that the war against drugs does not stop drug use. It only makes healthcare intervention inaccessible to them.

**Conclusion:** The war against drugs is not stopping drug use. It only pushes persons who use drugs into hiding, making healthcare interventions, including those HIV-related, disconnected and inaccessible. This also leads distrust among the community, and towards their supposed healthcare providers. The war is a barrier and is an obstacle towards achieving zero-stigma and zero-discrimination.

**RICKY GUNAWAN**

*Death Penalty and Extra Judicial Killings in Southeast Asia: The Way Forward*

**Introduction**

Draconian measures focused on eradicating drug markets in Southeast Asia has led to widespread human rights violations, including use of the death penalty and extrajudicial killings by law enforcement agencies. Abuses associated with punitive drug policies have negatively impacted the lives of millions in communities throughout the region, and pose a threat to their state of public health, rule of law and security.

**Methods**

To evaluate the impact of drug policies on human rights in Southeast Asia over the past decade, with an emphasis on the right to life, data on the number of deaths and alleged cases of extrajudicial killing has been gathered from reports by civil society organisations, academic institutions, media and human rights agencies. The Paper analyses the policies of governments in the region and the strategies adopted by civil society advocates that aim to counter violations against the right to life, by studying the documents and statements issued by them.

**Results**

In the past decade, more than 3,940 people globally were executed for drug offences. Asia is home to nearly half (16 out of 33, equating to 49%) of all states worldwide that retain the death penalty for drug crimes. However, during this period, some countries including Singapore, Thailand, Vietnam and Malaysia, have taken some steps to reduce use of the death penalty for drug offences.

Since 2016, the number of extrajudicial killings has risen rapidly with the launch of a renewed anti-drug campaign in the Philippines, resulting in the deaths of over 27,000 people allegedly suspected of using or supplying drugs. The campaign has appeared to influence other countries in Southeast Asia, especially Indonesia, where the number of people killed by police during drug operations increased from 16 in 2016 to 99 in 2017.

**Discussion**

This Paper presents some key factors to understanding drug policy developments in Southeast Asia that have impacted the right to life over the past decade. It also aims to promote understanding of the advocacy strategies undertaken by civil society to ensure the fulfilment by governments in the region of the right to life.
ROSHAN BHAD

Study of factors related to the dropouts in Methadone Maintenance Treatment Programme of India (SOFARDMIMT): A retrospective cohort study

Background:
Among various initiatives to deal with the opioid addiction in India, Methadone Maintenance Treatment (MMT) is the latest one, introduced in year 2013. However, little is known about retention in MMT in India. We compared socio-demographic and clinical parameters of MMT patients categorized as “current dropout” and “non-dropout” also estimated 5 year retention rate in the treatment.

Methods:
Following IEC clearance, a retrospective cohort study was conducted for opioid dependent male patients enrolled for MMT between 1 July 2013 and 30 June 2014 at the only MMT clinic in Delhi. Patients were categorized as “current drop out” if they failed to attend the MMT clinic in the preceding 30 days of starting point of the study; rest were categorized as “non-drop-out”. Data on socio-demographic, clinical parameters was extracted and in-depth interviews were conducted among drop out clients to study perceived barriers affecting adherence to MMT. Further the cohort was followed for 5 years till July 2018 with yearly assessment of retention, dose of medication and functioning

Results:
From our records 91 patients were included, with non-dropout group and drop-out group comprising 21 and 70 patients respectively. Non-dropout group was significantly older [33.1±12.6 vs 29.3 ±10.7 years]. Both the groups were similar on other sociodemographic parameters. Main factors negatively affecting adherence were service related factors such as distance from centre, inadequate dosing, client related factors e.g. fear of methadone dependence, side effects, lack of motivation. Perceived attitude of dispensing staff & perceived stigma didn’t affect the adherence to treatment in the study. Five year retention rate in MMT was about 40%.

Conclusion:
Older patients with longer duration of drug use & higher dose of methadone tended to be retained in treatment. It is important to address service related and client related factors to improve adherence and scale up MMT programme in India.

RUP NARAYAN SHRESTHA

Drugs law/policy reform in Nepal: Challenges and Opportunity

Nepal is in process of reformation of 4 decade old Narcotic Drugs Control Act and decade old National Policy on Narcotic Drugs. Existing Narcotic Drugs Policy includes various PUD’s friendly policies including harm reduction, risk reduction, demand control, supply control as well as collaborative activities between government, community and civil society. It also framed periodic strategic plan to implement that policy and acquired few affirmative result. Existing Narcotic Drugs Control Act has few provisions that ensure PUD’s rights including provision related to diversion from criminal justice system which has provision to refer PUDs to rehabilitation center and opportunity to waive possible criminal sanction. This law also provide ample of legal space for substitution therapy that approved from law and regulation.

Communities are enjoying above mentioned right as well as fighting on various right based issues i.e. segregation between PUD and drug dealer, decriminalization, health issues etc. Moreover, there are issues of medicinal marijuana (like in Thailand), relaxation of small dose of soft drugs (like in the Netherlands). However, political situation of Nepal along with 2/3 majority government with leftist ideology, community has fear of threat of regressive approach (Like in the Philippines). There is also threat of losing existing rights those are exercising since long ago. Language of proposed law and policy by the government which is regressive than existing law & policy indicating the same. Community people are trying to incorporate or ensure their right base issues and advancement from PUD’s perspective. And it is key issue that can we able to sustain existing legal and policy environment that at least allow criminal diversion for PUD’s case, window for legal space for substitution therapy without ensuring any rights, facilities that developed in outer world for the betterment of the PUDs.
This is high time for community, civil society as well as international community also to intervene to government of Nepal to make them realization on their commitment through various human rights instruments, constitutional obligation as well rights of PUDs.

SAI AUNG KHAM

Drug policy in Myanmar: the experience of people who use drugs

Background:
The Government of Myanmar recently amended the 1993 Narcotics Drugs and Psychotropic Substances Law and adopted its first National Drug Control Policy. Changes introduced were largely presented as marking a switch from repression towards a more balanced and evidence-based approach to drug control. Yet, the situation on the ground reveals a very different picture: in practice, police crackdowns and arrests of drug users continued unabated, while the provision of supportive health and social services remains scarce and inadequate. This input will focus on the views and experiences of people who use drugs.

Key Arguments:
• The amended 1993 law retains the possession of small quantities of drugs for personal use as a criminal offence punishable with 5 to 10 years prison penalties. Drug users as a result continue to be exposed to concrete risks of police harassment, arrest and incarceration. Every year, thousands of them are convicted to long-term prison sentences, and the number of arrests has further increased since the President formed a new anti-narcotics task force in June 2018.
• Harm reduction services for drug users are still insufficient, especially in northern regions where injecting drug use is highly prevalent and HIV rate has reached historical levels. Access to evidence-based drug treatment services is equally limited. Drug users willing to stop using drugs receive no or little support: the number of facilities is insufficient and community-based services are yet to be implemented. Despite a growing coverage, access to methadone remains inadequate and unnecessarily restrictive.
• Social reintegration services and vocational trainings for drug users are virtually inexistent. A great proportion of drug users with drug dependence problems come from disadvantaged socio-economic backgrounds, however little is done to support their access to housing, job and employment opportunities.

Conclusion:
Despite changes recently introduced to Myanmar’s drug legal framework, drug users continue to be exposed to the risk of long-term incarceration and have little access to supportive social and health services. Beyond advertising its intentions, the Myanmar Government and Law Enforcement Agencies are yet to show strong political commitment to actually implement their new National Drug Control Policy and prioritize public health and human rights over the use of repression.

SAI LONE

Towards a development first approach to address illicit poppy cultivation in Myanmar

Background:
Opium cultivation was introduced in Myanmar more than a century ago and has become a major source of livelihood for many ethnic nationality communities living in remote highland areas of eastern and northern parts of the country. These regions dominate the production of opium in the country, and Myanmar is listed as the second largest producer of raw opium in the world after Afghanistan. In 2006 opium cultivation was 21,000 hectares. By 2014 it had tripled to 57,600 hectares. In 2018 this was estimated at 37,300 hectares. This input will focus on the experiences and views of opium farmers.

Key arguments:
There is a common misconception that opium farmers grow poppy because it is highly lucrative. Opium is primarily used as a cash crop to buy rice and other basic necessities, to pay for health care and children’s education and to cover the costs of religious rituals and other social celebrations. More than financial gain, poverty, food shortages, armed conflicts, poor infrastructure and access to public services, or underdevelopment have been, historically, the key drivers of opium poppy cultivation in Myanmar.

Partly due to international pressure from China and the US, Myanmar Government and ethnic armed organizations have adopted policies banning opium poppy cultivation and foreseeing harsh punishments for
cultivators. These have sometimes been enforced very strictly, and forced eradication continues to be carried out without any sort of compensation. The implementation of such policies without ensuring that sustainable alternative livelihoods are in place has overall been devastating for local farmers and has only exacerbated poverty. Until now, development programs to support communities depending on opium cultivation have been very limited.

Conclusion: The government should promote and carry out Alternative Development (AD) strategies and programs aim at addressing the key drivers of opium cultivation. The UN guiding principles on AD notably stipulate the need for proper sequencing of policy interventions and the non-conditionality of aid. This implies that eradication of opium poppy is not undertaken until small-farmer households have adopted viable and sustainable alternative livelihoods, and that access to development assistance is not strictly conditioned to a reduction of opium poppy cultivation. The government should adhere to these principles, and change its policy direction into 'development first'.

SAMHITA BHUSHAN & Atul Ambekar

An exploratory study of pattern of drug use among legal cannabis (Bhang) users in India: A quantitative survey

Introduction India has a traditional use of cannabis mainly as “bhang” made from cannabis leaves and sold as the legal edible cannabis in licensed shops across the country. This ancient bhang market and its consumers have not been adequately studied yet.

Methodology We conducted a cross-sectional quantitative survey among bhang users (n=100), visiting the licensed bhang shops, in the pilgrimage city of Ujjain, India. After obtaining informed consent, we interviewed the respondents (>18yrs) using a semi-structure and WHO ASSIST screening questionnaire.

Results Respondents were almost exclusively males (99%) with about 63% having formal education and 87% employment rate. Apart from Bhang other substances used currently were tobacco (81%), alcohol (18%) opium and pharmaceutical sedatives (1%). WHO ASSIST scores revealed that 19% had cannabis use pattern in the high risk (score >26) while 75% were in the moderate risk (score 4-26). Major reasons cited behind initiating bhang use were ‘pleasurable effect’ (82%); ‘curiosity’ (77%); and ‘peer pressure’ (48%). Majority (63%) spent less than US cent 25 per day on procuring bhang. In general respondents considered bhang safer than tobacco or alcohol (86%), but 45% also agreed that it could cause mental disturbance. Only 30% believed that bhang increases the risk of use of other drugs.

Conclusion A small-scale yet pioneering study highlighting the trends in consumption of legal cannabis in India as well as its correlation with other substance use.

SHEN TINGTING

The Dynamic Control System: compulsory registration of people who use drugs in China and its impact on human rights

Introduction China’s law enforcement approach to drug policy focuses on punishment and isolation of drug users from their communities, which hinders evidence-based, comprehensive harm reduction services and creates the circumstances for widespread discrimination. This paper looks into the compulsory registration of people who use drugs in China, and the negative impact that the registration and related law enforcement actions having on PWUD.

Methods The paper is based on extensive desk research, including national laws, regulations and policies. The author also relies on other open sources, such as reports by Chinese and international organizations; as
well as published articles and media reports. Several interviews were conducted with former and current people who use drugs who subjected to registration.

**Results**

Established in 2006, the Dynamic Control System ("DCS"), is a national registration system for PWUD maintained by the Narcotics Control Bureau of the Ministry of Public Security. The system plays an important role in identification and management of PWUD by local police. The system monitoring location and movement of previously convicted or detained people who use drugs—routine, daily activities can trigger law enforcement notification of an individual’s presence in the community, which often leads to drug users being called in for questioning by local police, and to take urine tests. Practically speaking, this means every time a DCS registrant uses his/her identify card, to check into a hotel, a train or airline, they risk being called in for police questioning. PWUD have long been complaining that the DCS and the related law enforcement actions violates their right to privacy and human dignity.

**Discussion**

The DCS substantially disruption recovery and reintegration of drug users into society, it can also lead to discrimination in access to public services and employment. The use and disclosure of information from the DCS should be strictly limited, and clear criteria should be set up for people to exit from the system.

**SHO SAGARA**

*Drug Offenders’ Lived Experience of the Offenders Rehabilitation Facility*

**Introduction**

This presentation sociologically examines the lived experiences of treatment at Offender Rehabilitation Facilities (ORFs) with a focus on residents’ narratives. Recently, ‘desistance from crime and delinquency’ is regarded as a key social issue in Japan, particularly in respect of drug offenders. Under these conditions, there are increasing expectations for ORFs to provide drug treatment. There are 103 ORFs nationwide and their purpose is to provide support for offenders and facilitate reintegration into the community. This includes parolees released from penal institutions or juvenile training schools as well as persons who receive a suspended sentence but have no suitable accommodation. ORFs can be regarded as semi-private sector organizations and provide temporary accommodation and meals to residents. Additionally, expert-led treatment is provided for the purpose of preventing re-offending. Furthermore, from 2015, 25 ORFs were designated as specialist facilities for substance addiction treatment, with treatment based upon cognitive behavioral therapy. As a result, ORFs have become a key site of community-based drug treatment.

**Methods**

Semi-structured interviews were conducted with residents (n=4) of one ORF (ORF A) and staff (n=9) of six ORFs (including ORF A). All participating ORFs are designated as specialist facilities for substance addiction treatment. Interviews lasted between 60 to 120 minutes and were transcribed verbatim. Using these transcripts, narrative analysis was conducted to identify the characteristics and nature of the lived experience at ORFs.

**Results & Discussion**

Two main characteristics of drug offenders’ lived experience at ORF A were found. First, residents were trying to rebuild their lives through developing a trusting relationship with the staff of ORF A. Such a relationship was formed through participation in the drug treatment program and daily life in this facility. Nonetheless, the relationship between the residents was complex. Second, residents were skillfully using additional social resources (e.g. Narcotics Anonymous; Drug Addiction Rehabilitation Center) to maintain their recovery. However, continuing recovery after leaving ORF A presented significant challenges. One key implication of these results is that being able to consult in confidence about drug addiction is a key condition for maintaining recovery, and greater consideration should be paid to how this may be best enabled.

**SUN TUN, B. Vicknasingam, Darshan Singh**

*The Shift in Myanmar's Drug Laws from an Enforcement to a Health-Based Response*
Background: Myanmar previously had tough laws to deal with injecting drug users. However, the HIV epidemic shifted its drug policy from enforcement-based to a health-based response. To reduce HIV prevalence among people who inject drugs (PWIDs), the government introduced needle syringe program and opioid substitution treatment program. In addition, the government also revised the Burma Excise Act (1917) to decriminalise the unlawful handling of syringes by PWIDs and Narcotic Drugs and Psychotropic Substances Law (1993) to provide treatment to clients identified as drug users. This paper aims to understand if the legislative response is effective in addressing the illicit drug use problem in Myanmar.

Method: The cross-sectional study with a total of 210 respondents were recruited from five cities in Myanmar (Yangon, Mandalay, Lashio, Kawlin and Mohnyin). Stratified random sampling technique was used for selection of city to recruit participants. Within each city, a sample of 42 persons with minimum duration of 6-months in methadone treatment was recruited. A semi-structured questionnaire was used to collect data on methadone use history, opinion on the recent revised drug use legislature and illicit drug use history.

Result: Results indicate a mixed reaction from clients in Methadone maintenance Therapy (MMT) program towards the revised drug legislature; 36% (n=72) rated the changed as unacceptable, 34% (n=68) average and 30% (n=60) good. More than two-third (70%) (n=146) self-reported that they felt safe in their daily life. Meanwhile, 73.8% (n=155) tested positive for illicit drug use; 14.1% admitted receiving payments related to illegal activities in the last 30 days, and 13.5% were involved in petty drug negotiation trade. More than one-third (38.76%, n=82) have been arrested between 1 to 5 times and n=34 respondents were detained for drug-related offences. In addition, factors associated with incarceration include: HIV positive receiving anti-retroviral, needle sharing history, Hepatitis C infection, tuberculosis treatment, higher ASI score (mainly legal domain) and dissatisfaction with MMT program (p=0.05). There was significant risk of illicit drug use among HIV/HCV infected respondents who were engaged in criminal activities in the last 30 days (p<0.05).

Discussion and conclusion: Our findings indicate that the recently revised drug legislations did not appear to favour the needs of illicit drug users in Myanmar. While, incarceration tend to have a negative impact on the well-being of PWIDs. It is vital that policy makers understand the harms of incarceration among PWIDs.

VINCENT CHENG, Xiong Ye, & Chen Yang

Rituals, reintegration, and community capacity

It was estimated that there were 2.55 million drug users in China by 2016. While a large number of former drug addicts (hereafter referred to as “ex-addicts”) are discharged from drug detention centers and striving to make their way back to the community every year, most of them face a common obstacle – their shattered family relationships. Criminologists have recognized the important role of the community, including the family, in how it helps to maintain law and order. However, not much has been discussed as to how the ruined family relationships of ex-addicts can be restored. Similarly, although anthropological and sociological studies have repeatedly emphasized the important social functions of rituals, such as arousing emotions that in a way strengthen social bonds, alleviating collective negative emotions, and resolving conflicts, the potential use of rituals in restoring ex-addicts’ family relationships remains largely unexplored.

With data collected through extensive interviews with 21 ex-addicts in a peer education group in China, this paper addresses two important questions: (1) how drug addiction have affected the family relationships of the ex-addicts, and (2) how rituals may contribute to the reconciliation of family relationships. Results of the fieldwork data are in line with Maruna’s theory of reintegration, which argues that rituals have played a vital role in offenders’ social reintegration. This paper further highlights that with stronger family participation, rituals have the potential to facilitate offenders’ reintegration, in turn enhancing the community’s capacity in the governance of law and order.

XU PENG

The impact of law enforcement on patient accessibility to methadone maintenance treatment (MMT): Experiences from patient-organized documentation at a methadone clinic in Beijing, China
**Background:** In China, people who use drugs (PWUD) are subject to administrative penalties. Since 2008, the government has adopted a rehabilitation approach in which PWUD are considered patients and offered treatment. MMT was rolled out nationwide to reduce drug dependency and HIV. I have been a patient at the Beijing Puhuangyu methadone clinic since 2012. About 1000 patients received MMT in the clinic in 2016. Since 2017, only 200-300 people are enrolled. My research aimed to identify the cause of the problem and develop advocacy strategies to solve it.

**Methodology:** Beijing has twelve MMT clinics run by the government. My research took place at the Puhuangyu MMT clinic in eastern Beijing. I conducted interviews with fifty current and former clients of this clinic. Research participants were between 40-50 years old, with forty six males and four females taking part.

**Results:** 1) Strict rules at the clinic hinder patients’ reintegration into society. There are no take-home doses; patients can only access the clinic between 9:00am and 3:00pm. This leads some people try to take methadone out of the clinic or buy it on the black market. 2) Police surveillance at and near the clinic adversely affect enrollment. Police monitor people exiting, search and drug tests and question them. 3) Police access the MMT client lists and since 2018 have been in charge of approving MMT enrollment. 4) Increased security presence at the facilities has adversely affected patients’ experience.

**Conclusion:** This research describes attrition from an MMT clinic in Beijing and sought to understand attrition. Findings revealed MMT service uptake, safety, and quality are severely compromised by police involvement. Policies should be aligned to support public health goals and reduce human rights barriers to health for PWUD. In response, my organization will sensitize and mobilize lawyers to provide legal training, and will appeal to the Public Security Bureau to address the outlined barriers to treatment.

ZHANG YUNRAN, Jakob Demant

**Gender matters in drug treatment and rehabilitation: Implications from a gender-specific analysis on illicit drug use in China**

In criminology, both self-control theory and social bonding theory offer unique insights into the well-known controversy of gender disparity in crime and delinquency. Meanwhile, differential association (with drug-using friends) is a powerful and gender-specific variable widely used to explain substance use in empirical studies. However, extant studies are primarily conducted in western societies. The present study aims to test whether self-control, drug-using friends, and social bonds (attachments to family members) have predictive power for later illicit drug use by gender in a Chinese context.

The present study used self-report survey data collected in 2018, including 783 drug users (364 males and 419 females) from four compulsory drug rehabilitation centers in China. The respondents aged between 16 and 60 and the mean age of the sample is 32.4 years.

Multivariate regression results show that self-control is not a significant predictor of drug use frequency when controlling for other social correlates. It is further discussed how self-control may have a qualitatively different effect in a Chinese population vs. a western population due to the cultural meanings of control in the societies in general. This indicates that drug treatment emphasizing self-control improvement may be not efficient among Chinese drug users. Attachments to family members also have different explanatory power on drug use among males and females. Meanwhile, drug-using friends remain a stable and powerful predictor of illicit drug use across both gender groups. This indicates that keeping away from the drug-using friends circle could essentially protect both male and female drug users from further involvement into drug use and relapse.
ANJO DELA PEÑA

Journey of Legalizing Medical Marijuana in the Philippines: How Far Are We?

BACKGROUND. With the approval of House Bill No. 180 entitled “An Act Providing Compassionate and Right of Access to Medical Cannabis and Expanding Research into its Medicinal Properties”, the Department of Health has taken the lead to recommend its legality based on evidences as to health benefits and risks, cost-effectiveness, regulatory capacity of the concerned agencies, and the public health impact on the general population.

METHOD. Available policy issuances and literatures were reviewed related to the legalization of medical marijuana. Those providing topics for legislative reforms, regulatory policies and frameworks, clinical information and commercialization practices were selected from neighboring Asian countries to western countries.

RESULTS. In Asian countries like Singapore, Malaysia and Thailand, efforts to amend existing laws on cannabis for medical purposes were started and further expanding opportunity to treat certain disorders, research and development, agriculture, commerce, science and industry. Other countries like the United States of America, Brazil, Netherlands and Australia, they have already legalized medical marijuana with in-place regulations on manufacturing their own products, selling, possession of permitted quantity and even guidance documents for patients and physicians on its therapeutic use.

CONCLUSION. Following other countries direction must not subjectively affect the country's endeavor in the legalization of marijuana. Research studies must be conducted to weigh the viability of cannabis relative to its therapeutic potential and analyze economic implications. A strong regulatory framework must also be considered to prevent misuse and abuse.

ANJO DELA PEÑA

Drug-Free Workplace in the Philippines: An approach towards a healthy and drug-free workplace

BACKGROUND | Addressing the dangerous drug abuse in the Philippines has been a priority for the national government when the new administration came in 2016. It provided the Department of Health (DOH) the opportunity to address this long-standing health issue and to amend the 2009 issuance on Drug Free Workplace Program safeguarding the health, safety, and welfare of its personnel as well as reducing the health and safety risks of the public.

METHOD | A scoping review of government agencies implementing the DFWP in the Philippines revealed the following actors: Dangerous Drugs Board, Civil Service Commission, Department of Education, Department of Justice, Department of Social Welfare and Development, Department of the Interior and Local Government, and DOH were conducted to determine the DFWP being implemented in their workplaces. A policy review and thematic analysis were conducted examining their mandates and current program scopes to support in the development of an issuance amending the existing issuance of DOH on DFWP.

FINDINGS | It was found that mandatory testing of executive and managerial level positions differ in the guideline's coverage among national government agencies, where if they are found positive after a confirmatory test, shall be subjected to disciplinary / administrative proceedings with a penalty of dismissal from the service at first offense. On the other hand, other government agencies take a stand to rehabilitate the individual instead of being subjected to disciplinary or administrative proceedings.

CONCLUSION | With the disharmony on sanctions and stances on drug testing among national government agencies, collaboration with public and private sector is needed. This will enhance and improve the existing guidelines being implemented in different workplaces. Further, this will strengthen the country's resolve to promote healthy living, awareness of the perils of drug abuse, and responsibility for our actions.
Factors driving prescription opioid misuse among adolescents and young adults in the United States from 2015 to 2017: A Literature Review

Background: Prescription opioid misuse (POM) is an escalating and ongoing concern in the United States, particularly, among adolescents and young adults. According to a National Survey on Drug Use and Health in the United States, an estimated 16.7 million aged youth ages 12 and older abused prescription opioid drugs in 2012, with almost 2.6 million youth meeting diagnosis criteria of a substance use disorder. The objective of this paper was to identify protective and risk factors associated with POM among adolescents and young adults from published literature in the United States between 2015 to 2017.

Methods: A literature search was conducted in PUBMED and Google Scholar using the following search terms: “prescription opioid misuse adolescents”, “prescription opioid misuse protective factor”, “prescription opioid misuse young adult”, and “prescription opioid misuse risk factor”.

Results: The literature search resulted in 29 references that met inclusion criteria. The primary risk factors included: obtaining prescription opioids (PO) from a friend or relative for free; prior history of smoking, alcohol, or drug use; and being female. The primary factors that appear to protect youth from misusing PO include: attachment to parents, school, and/or communities; negative attitudes towards drug use; and no prior use of PO.

Conclusion: It is crucial to identify risk and protective factors that underlie patterns of use by focusing on the different levels of interaction within the microsystem, in order to inform primary and secondary prevention efforts. Future studies should explore how either decreasing risk factors or increasing protective factors will prevent diversion or mitigate drug use.

Decentralization of Methadone Maintenance Therapy in Vietnam: Impacts, Challenges and Ways Forward

Decentralization of Methadone Maintenance Therapy (MMT) proves essential to ensure accessibility and acceptability of service among patients. Vietnam started the decentralization of MMT service in late 2015, in which commune-based health clinics played the role of satellite district-level MMT service units.

With the purpose of assessing initial impact and identify barriers to the model implementation, the mid-term review consisted of site observations using checklists, client satisfaction interviews, stakeholder group discussions in the Thai Nguyen and Khanh Hoa provinces in late 2018. 6 decentralized service units, 3 full functioning district MMT clinics, 24 clients and 58 service providers and/or health managers were involved.

The findings indicated high feasibility and effectiveness of the model in the context of HIV and health. The model required minimum facility and staffing standards, well integrated into routine health care activities. The model proved to be effective in reducing burdens of the district MMT service units, helping them serve a larger amount of clients. Treatment adherence and retention rate were reported to be much higher by both service providers and patients. Acceptability and accessibility of service was assessed at good levels by all the interviewed patients.

The review suggested key challenges and limitations of the model implementation: 1) Low support from communal authorities for the decentralization of MMT; 2) Stigma and discrimination prevented a number of patients from choosing service in their local communes; 3) The connection between decentralized units and main treatment facilities needs improving to timely solve patients’ issues; 4) Low access to patient information system by service providers at the decentralized units, partly leading to disrupted or untimely information updates in the patient files/database; 5) The operation of decentralized units does not work well for a volume of 80 patients or more.

The programme review resulted in a number of recommendations: 1) Advocacy for increased support from local authorities; 2) Expansion of computerized MMT patient management systems to decentralized units; 3) Formalization of regular and ad-hoc communication channels between decentralized units and main facilities; 4) In-service training on HIV for medical staff at decentralized units; 5) Upgrading decentralized units with high volume of patients (80 or more) into full functioning facilities.
EDELIZA HERNANDEZ

*Heal not Harm: Assessing how health care program complements the current Philippine Anti-Drug Policy, Program and Practices*

The Philippines needs to have the conversation to find a just and lasting solution to the drug menace in the country – taking into account what worked, and what needs to be improved in terms of public health, and criminal justice.

This paper will examine how health program is in place in the drug policy of the government and how the current health system addresses the illegal drug problem in the country.

The Department of Health (DOH) holds the overall technical authority on health in the Philippines, as it is the national health policy-maker and regulatory institution. Under RA 9165 or The Comprehensive Dangerous Drugs Act of 2002 provides that the Dangerous Drug Board is in charge of the overall policy and oversight functions while the Philippine Drug Enforcement Agency (PDEA) remained responsible for enforcing all legal provisions related to dangerous drugs. The administration of all government-managed drug treatment and rehabilitation centers was transferred to the DOH.

Based on the Local Government Code, the Local Government Units (LGU) are tasked to oversee community-based drug rehabilitation projects. And as of July 2018, under the DOH program about 6,558 patients completing the government in-patient rehabilitation programs and under the DILG it has 59,836 surrenders' who have "participated" in their community’s rehabilitation program. The DILG's number is bigger than that of DOH because it is done in community (local) with the cooperation of all barangays with identified drug addicts and or voluntary declaration of drug users. However, from the Philippine National Police data there are about 1,274,148 surrenders ending June 30, 2018. Based on this data, it shows that not all has access to the existing rehabilitation programs whether facility or community based intervention program. Does this model of community based drug rehabilitation program being implemented by LGUs conform to international standards? Or does it at least provide the necessary services to address drug dependency through health and social interventions? There is really a need for the Philippine government to rethink its drug policy by focusing on the benefits of healthcare dimension in addressing drug abuse in the country.

INGRID IRAWATI ATMOSUKARTO

*Indonesia’s women’s agenda*

**Introduction:** Indonesia’s harm reduction journey started 2 decades ago. By 2006, a growing drug user movement, evolved into PKNI then recently a number of community networks. By 2018, there are 194 public clinics with NSP across the country, 79 MMT sites and ARV & Hepatitis C accessible and affordable. Yet, women issues remained invisible. Since 2007 there has been studies analysing multiple roles women take on in society and how drug use & dependency is affecting. Only in 2016, PKNI with the University of Oxford researched over 700 women in around 3 major areas in the country (of 33 provinces), revealing PWUD’s ordeal from physical, sexual and psychological violence, even from their intimate partners: 9 out of 10 women injecting drugs in that last year. This data, has been the single most extensive data of women who use drugs to date.

**Issues:** In Indonesia, 2 in 5 women experience violence in their lifetime, it is a surprise that WUD have not been through systematic effort to assess, design and implement custom-made programs. In 2008 worldwide PWUDs were calling for “nothing about us without us” demanding greater involvement-for almost a decade, women were left behind. Services are generically designed, disregarding women’s needs. Their burdens of violence by intimate partners, by law enforcement, by drug dealers and unavailability of women rehab-centres are not addressed. A comprehensive approach that puts women first is needed.

**Methods & discussion:** The task at hand: contesting a culture of sexual violence against Indonesia women. Countering society requires women educated on more than public health issues. WUD set up a joint 5 year plan facilitated by PKNI and nation-wide focal points were set up. In 2017, facilitated by UNWOMEN, gender and feminism capacity building for focal points proved instrumental. Amidst the training, personal stories were unveiled: a mother denied child custody, another beaten by her activist partner, another beaten while pregnant or under policy custody and many more. The first building block is solidarity – understanding
that no one is alone. Focal points, UNODC facilitated, are learning to advocate their needs to service providers. They also act as paralegals and counsellors at community levels. The movement is still in its infancy and continues to learn to grow stronger.

Results: Indonesia’s WUD much to do. Affected by PKNI’s organizational dynamic, focal points are working hard to remain relevant.

KANG KAI-HSIANG

An overview of the detected substances among all NPS seizures in Taiwan, 2008-2017

In recent years, there has been a large increase in the number of new psychoactive substances (NPS) abused and a cumulative over 888 different NPS reported to United Nations Office on Drugs and Crime (UNODC) established Early Warning Advisory (EWA) on NPS till Dec. 2018. With the markedly rising trend of NPS, all governments throughout the world have established relevant regulations and policies to manage these substances more efficiently. The Taiwan government has established a drug abuse supervising mechanism, which all certification analytical agencies or institutions reported the test results of seized specimens for drug abuse via the “Drug Abuse Report System” (DARS) to the Food and Drug Administration, Ministry of Health and Welfare. To get an insight to status of NPS abuse patterns and epidemic trends in Taiwan, we analyzed the data from the DARS and examine the statistical data providing a nationwide NPS status in Taiwan. Additionally, we made multi-country comparisons using the data from the UNODC EWA. Our results provided an evidence based data analysis of the prevalence of NPS and the most frequently detected substance among all seized sample listed in Taiwan. The information will be useful when planning and delivering NPS related policy.

KHINE SU WIN

Human Rights Documentation and Advocacy Program in Myanmar: Empowering People who Use Drugs for Evidence based Self-advocacy

Issues
Myanmar is reforming legal framework related to drugs as the first Myanmar National Drug Control Policy and the new Amended 1993 Narcotic Drugs and Psychotropic Substances Law were released on February 2018. Community strategic advocacy engagement in the reform process is crucial, however; representatives of people who use drugs (PWUD) have limited skills in documentation or evidence-based advocacy that is undermining meaningful community-led participation.

Setting
Asia Catalyst (AC) conducted a year-long program which aim to strengthen documentation and evidence-based advocacy skills of community-based organizations (CBO). Ten community leaders from four CBOs including the Youth Empowerment Team (YET), an organization led by people who use drugs and provides outreach harm reduction program, participated in series of workshops in Yangon.

The workshops, designed through a participatory peer-to-peer learning approach, centered on community-lived experiences and local contexts. CBOs were tasked to demonstrate sharing of their knowledge and skills with their communities. The sub-grants were provided to conduct documentation and advocacy projects aimed towards the implementation of the knowledge and skills learned. AC program staff held regular coaching via phone call or face-to-face meetings throughout the entire program.

Outcomes
YET conducted internal sharing sessions among their staff members and identified the most pressing issues. YET developed a powerful qualitative tool for evidence collection after documentation workshop and trained four peers to conduct interviews. A total of 25 interviews were conducted where barriers in accessing harm reduction services were identified post Drop in Center closure in Yangon. The findings were shared in different events such as press conferences and public campaigns. The findings were used in fundraising, resulting in plan of delivering an outreach harm reduction program with the support of international donor. AC’s program seeks to address capacity gaps of community leaders and to promote their meaningful participation pursuing advocacies.
RAJESH DIDIYA

A National Workshop Income Generation to support Individual PLHIV and NGOs working with key populations

Background:
Livelihood based on vegetable farming has been run by SURUWAT from 2016 AD. It was run in support of AHF knowing that agriculture is an age-old profession in Nepal and Drug User and their family can be trained and mobilized through this project to generate income and also sustain organization like SURUWAT. SURUWAT in support of AIDS HEALTHCARE FOUNDATION was also determined to promote the engagement of PLHA in vegetable farming. Its main aim was to enhance their quality living of Drug User and their families it can inspire others and could be replicated elsewhere in continuing the minimum services offered by local and national NGOs like SURUWAT in case of there are no any other sources to operate. Most importantly, SURUWAT want to inspire likeminded people and organizations in the third world and find the solutions to fight against rampant poverty targeting Drug User.

Methodology
Since 2016, SURUWAT is running a livelihood project in business model. It has developed and equipped existing farm and developed it as a common harvest collection center during the year trained 150 Drug User and provided seed money and other technical support to 2 PLHA. It has been running this project to empower the Drug User economically.

Conclusion
The livelihood empowerment programs through vegetable farming run by SURUWAT in support of AHF since 2016 has been meaningful to make the PLHIV self-reliant financially and to contribute them to live dignified lives. On the basis of the accomplishment so far, SURUWAT will organize one day conference/Work shop in Bhaktapur. The conference will primarily invite 20 beneficiaries of livelihood programs from 12 districts of Nepal. They assembly will be fruitful to share their success, challenges, learning and future opportunities. It will also be valuable platform to design future plan and strategies for future. It will also produce the list of recommendation which will be documented by SURWAT and AHF. These recommendations will be referred by SURUWAT and AHF and considered in its future plan and programs as well. In addition to it, both of the organizations will also lobby and advocacy with concernment government agencies to address the issue of PLHA who want to be success enterprise and run livelihood project on their own.

RANJIT TIWARI

Gains & Losses of Drug Policy: Admit, Accept and Assure

Abstract Issue:
Poster presentation is aims to dialogue on dimensions in which social institutions and public deal with DU by diminishing their responsibilities towards liberal stance of addiction as a chronic relapsing dependency like any other health problem for which any individual cannot be responsible. Rationale: Drug policies in Nepal came into existence with a sole purpose of controlling cultivation, production, trafficking the drugs. A rigorous list of categories of drugs drives punitive measures to clean countries and its territories from drugs with multi-attribute and mandatory abstinence.

Background:
A person is participated of the Second AHRDPP formed a consortium to examine the ‘factual knowledge’ from the respective country and present through paper abstract imposed coercion and manipulation that ignores new understanding on drugs and addictions, which thus is not reflected in the existing drug policies. In addition activist is explored instead of endorsing evidence base treatment approaches in the public health context

Methodology:
Presentation will bring a brief of respective country and comprehensive analysis of existing drug policy, law enforcement measures, availability and modalities of treatment & access Harm reduction services in the contexts of gains as per claims made by authorities and losses on the ground account of drug using community.

Country: Nepal

Drug Policies: Drug Control with Law Enforcement Measures

58
**Estimation:** Mostly unknown so coverage is questionable

**Ownership:** Classical confusion- Public Health, Law Enforcement and Public Expenditure

**Harm Reduction:** Low Service coverage - still seen as an isolated method

**Gains:** Huge public expenditure on criminal justice system, pending legal cases, heavy costs in prisons

**Losses:** Human lives criminalize of DU, added stigma at all levels of society, On a name of the treatment Mental, physical tortures in treatment center Custody, Political agenda Indonesia, Philippines

**Conclusion:** In the modern context of drug policy, several examples across the world have indicated that drug control and punitive measures are prioritized than any public health pragmatic approaches. There are examples in which more countries reported deterioration of drug treatment PUd's life and overall the impact of drug policy. This hampers expansion of capacity, broadening of the range of options and improvement in the quality of treatment service, easy access harm reduction service

**ROSMA KARLINA**

*Women Right is Human Rights*

Issues of women who use drugs in Indonesia

- The Organizing of women who use drugs which is still premature to not be able to actively participate, especially to control HR policies and implementation.
- No leadership among Indonesian drug users to voice WUD issues and needs;
- The Establishment of a forum for women's organizations for drug users to build a space for discussion, organization and concepts of empowerment
- The political situation which imposes initiatives to support advocacy movements and fulfill the needs of women who use drugs;
- No disaggregated data regarding women who use drug interventions, with a human rights perspective and gender sensitivity;
- The many problems of women who use drugs that are mostly related to their sexual and reproductive health rights lead them to lose their rights to children including their right to health.
- The omission of the HR program for women who use drugs for 20 years, can be seen from the dialogue activities. Marked by very little representation of women

**Aim**

A Legal protection for Indonesian women who use drugs through the fulfillment of their rights based on the human rights.

**SIDDHARTH SARKAR**

*Club Drugs In India: An analysis of newspaper reports*

Club drug use refers to consumption of certain psychoactive substances that are commonly taken during the raves or parties. These include stimulants like cocaine and methamphetamine, and entactogens like ecstasy. With growing affluence in Indian society, and changing landscape of drug availability and use, club drugs are likely to emerge as significant concern, especially in the young, college going population. Often the users of club drugs do not reach treatment settings as use is infrequent or situational, and use is clandestine. Yet, the adverse consequences of club drugs in terms of facilitating risky behaviours are well recognized. Since the treatment data and epidemiological driven studies are less likely to provide a comprehensive account of club drugs, newspaper reports can provide a supplementary source of information for the same. This work aims to conduct a thematic analysis of the newspaper reports pertaining to club drugs in English language dailies and magazines from India though a systematic online search. Information from published peer reviewed articles was also looked for, to gather more information. The accounts have primarily been available from a supply reduction perspective through reports of seizures and police actions. While innovative ways of packaging and distributing club drugs have been highlighted, the reports also draw attention to the locations and setting where such seizures took place, indicating the types of locations for their potential use. Information has been scant or rather lacking on the extent of use, or the actual harms associated with such club drug use. The growing number of reports calls attention to
the silent problem growing gradually, and preparedness from supply reduction, demand reduction and harm reduction approaches.

**SUN TUN**

*Lack of needle & syringes: A challenge for poly drug use?*

**Background:** Among estimated 93,000 people who inject drugs (PWID) in Myanmar, 12,550 (14%) were on methadone in 2017. Updated data from 2017 research revealed HIV prevalence among PWID was 34.9% and HIV/HCV co-infection was 26.8%. This study estimates illicit heroin injection and identifies risky behaviours of poly drug use among methadone patients in Myanmar.

**Method:** Total 210 patients with a minimum of at least 6-month methadone treatment were recruited from five cities (42 from each site) in 2017. Methadone sites selection was done with stratified random sampling. Personal interviews with survey questionnaires on social demographic and risky behaviours were explored and urine for methadone and illicit drugs were identified.

**Result:** Among methadone patients, 43.81% (92/210) had poly drug uses and their average dose was 85mg and average 33-month duration. Among poly drug users, 31.5% (29/92) were on antiretroviral therapy and 37.78% (34/90) had high-dose methadone (>80mg). Urinalysis showed 83.70% had heroin followed by Benzodiazepine (66.30%) Amphetamine-type-stimulants (51.09%) and Marihuana-THC (21.74%). 20.88% had HIV/HCV co-infection among poly drug users.

Poly drug use was associated with less availability of needle and syringes, working as peer worker, less addiction severity index on job, less addiction severity index on alcohol, less alcohol amount, high addiction severity index on legal and drug domains, higher frequent heroin injections, Hepatitis C infections (p<0.05). Stepwise logistic regression showed higher alcohol amount reduces poly drug use (OR=0.26, 95% CI= (0.09, 0.81)) while higher frequent heroin injections increases 2.8 times, working as peer worker as 5.7 times and who had high addiction severity index on drug uses as 6.1 times of being poly drug users (p<0.05). Poly drug use patients had estimated 2.3 times more heroin abuse than non-poly-drug user patients (IRR=2.3, 95% CI= (1.55, 3.34), p=0.000).

**Conclusion:** There are rooms to address the need of methadone patients on poly-drug use to reduce heroin injection significantly. To address the easy availability of needle and syringes which can reduce poly drug use issues and can also prevent unsafe needle sharing during heroin injection as “dual benefits” alongside with other harm reduction and development interventions for drug users on methadone.

**SUN TUN**

*Are methadone patients jobless? Employment status among people who inject drugs treated with methadone in Myanmar*

**Background:** There was an estimated 93,000 people who inject drugs (PWID) in Myanmar and HIV prevalence among PWID is high at 34.9%. Overall, 12,550 (15%) were on methadone in 2017 and this study aims to identify addiction severity due to employment and income status among people who inject drugs enrolled in methadone program in Myanmar.

**Method:** Total 210 methadone patients from five cities (42 from each site) with a minimum of 6-month treatment history were recruited in 2017. This survey had used stratified random sampling for methadone site selection. Personal interviews with survey questionnaires relating to the Addiction Severity Index (ASI) on employment, income and risky behaviours were explored. Urine for methadone and illicit drugs were identified. A higher score on ASI reflects a worse situation on employment.

**Results:** Respondents mean age was 33 years, while their average methadone duration was 28 months with average daily methadone dose was 83mg. Majority 209 (99.52%) were in the working-age group (between 18 to 60). Only 51 (24.64%) had full-time job though 71.14% (n=143) claimed to have an income in last 30 days. Meanwhile, 111 (53.11%) fell under 2USD/day; below the poverty line of the World Bank. About 14.08% (n=29) have earn some income through criminal activities in the last 30-days and 13.46% (n=28) were involved in the drug negotiation with an average income of 44USD (range 1.5-267 USD).
Average ASI employment resulted as 47.4 on 100 scale and 49.7% had a higher index on severity. Addiction severity on employment is higher among clients with HIV, currently on antiretroviral therapy, not married currently, low-income group, those shared needles within 30 days. Low ASI scores was noted among respondents who tested positive for urine morphine (p<0.05). Increased need for methadone dose was associated with the type of work especially for the general worker (p=0.0274) and less dose among full-time work pattern (p= 0.0199).

**Conclusions:** Our findings showed majority of methadone users in Myanmar do not have full-time employments. Better full-time job opportunities must be created to help clients in Methadone treatment program abstain from illegal income generating activities & injecting behaviours.

**TUN BRANG**

*Expanding Harm Reduction Services Coverage with Rural Community Acceptable Outpost Model*

In Myanmar, the HIV epidemic is driven mainly by injecting drug use (HIV prevalence 41% among PWID) and acquisition of HIV among the female partners of PWID. The declining trend in the number of annual new HIV infections among adults (15+) started slowing in 2010, and the number has remained quite high, suggesting insufficient control of the HIV epidemic. Moreover, to develop tailored strategies and plans to address the local HIV epidemic is recommended. (Source: Myanmar Subnational AIDS Epidemic Model 2016)

SARA (Substance Abuse Research Association), LNGO have been implementing the harm reduction interventions in Myitkyina, Kachin State, Myanmar since 2009. Based on over decade experiences, it noted that there was a vast gap to reach the harm reduction services among PWID population especially hard to reach rural remote areas.

On January 2018, SARA started its pilot outpost unit to increase harm reduction services coverage to meet the unmet need.

**Study Area:** Ti Yan Zug Village, Myitkyina in Kachin State, Myanmar.

**Methods:** operational case study of SARA January – October 2018. Cost effective analysis study (small scale) has applied.

**Key Findings:**

• Getting community truthiness and administrative support are the primary key to run like this kind of outpost unit.
• Cross-cutting Drug Use Prevention Program for the young generation was also contributing to enabling harm reduction environment.
• Outpost model can get much more community acceptable than mobile model since it can get more contact hour with clients as well as the community.
• This model could vigorously promote HIV testing among reached PWIDs (>90%).
• Nevertheless, there is still a barrier for ART accessible among positive clients. Unit cost for Prevention package alone could not support efficiently for ART, and unit cost should also be thinking about care and support cost.
• Based on cost effective analysis, this model showed that cost-effective and value for money.

**Conclusion:** this study is innovative and good practice to explore hidden, under-reported, underserve PWIDs living in rural remote area to get HIV epidemic control on effectively and efficiently.
1st Asia Regional Meeting of ISSDP Information
https://crime.hku.hk/1st-asia-regional-meeting-of-issdp/