Surveillance, addiction, and policy: the examples of South Africa and Afghanistan

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The surveillance of addiction must be understood in the context of domestic and foreign policies influencing the growing and selling of drugs. Certainly, at least since the Opium War, policies regarding drugs have had at least as much to do with geo-political control as public health (Waley 1958). As a result, any attempts at surveillance will be thwarted unless one understands the politics of drugs.

In a conventionally epidemiological analysis, one would want to examine the factors that contribute to exposure and susceptibility when attempting to understand addiction. However, the exposures that lead to addiction are predicated upon the availability of a consumer product, drugs. In a society where a given drug is not widely available, addiction is not likely. Thus we find alcoholism rare in Islamic countries, but the consumption of drugs like qat, while not available in the United States, widespread in Yemen. The monitoring of legal drugs is simple; the drug companies themselves monitor their sales and distribution as part of their marketing. The sales and consumption of illegal drugs, while subject to more complicated forces, must also be monitored, because without monitoring, public health relinquishes a key tool in anticipating drug-related problems and addiction.

Illegal drug markets are much more volatile than their legal counterparts. Illegal drug markets must adapt to legal and policy contingencies. They are often compared to balloons, where when one presses on one side, the air shifts to the other. Likewise, the markets rarely disappear but they will shift to accommodate political changes that necessitate change. Those changes may happen at any place in the chain from growing to processing to distribution and sales, but when they occur, the players adapt accordingly. The changes and the subsequent adaptations offer clues about how surveillance, in turn, should change and adapt.

One example of such change would be the shift in consumption in the Republic of South Africa. Prior to the late 1990s, the primary illicit drugs available were cannabis and Mandrax. In 1997, drug consumption shifted to heroin and crack, and that shift has been attributed to the crackdowns on Nigerian dealers at the Lagos airport. When their work was curtailed in Nigeria, some of them transferred their operations to RSA. This spillover has massively transformed the nature of the drug problem in RSA (Rothberg 1997; Garson 1997).

War is a major catalyst for market shifts. During the Vietnam War, opium production was promoted by the C.I.A. in its efforts to enlist and finance locals as combatants. Heroin, manufactured from Golden Triangle opium made its way, via body bags and other war related mechanisms, to the urban streets of the United States (McCoy 1981). More recently, under the rule of the State Law and Order Restoration Council (SLORC) in Burma, production of heroin and methamphetamines have become the mechanism for the financing of war for both the central government and for ethnic opposition governments. Burma is second only to Taliban controlled Afghanistan in opium production (Lintner 1994; Breyer 1998). In 2000, the Taliban issued a ban on opium production, and was later rewarded for this ban by $46 million from Washington D. C. During the ban, the Northern Alliance took up a larger percentage of the Afghanistan market (Anonymous 1999). Now, with the war following the events of September 11, 2001, financing for both sides is apt to be dependent upon the export of opium. According to a drug treatment psychiatrist in Quetta, "with the war, it is going to get a lot worse for everybody – us and the west. The only people who will profit are the traffickers" (Pomfret 2001). The conflict in Afghanistan, like other wars, will be fueled by money from drug trafficking. The drugs, in

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turn, will find their way to drug consuming nations in Europe, as well as to the United States and Australia. Distribution within countries also follows geopolitical strife and migration. People who have compatriots in drug producing or refining countries are able to tap into the drug economy in consuming countries. Columbian dealers in New York City in the 1980s could distribute cheap cocaine produced by the Colombian cartels (Williams 1989). This cocaine, processed to crack cocaine, made possible the national epidemic of smokable cocaine. Immigrants can make the necessary linkages between nations to allow markets to grow. This observation should not be interpreted as a xenophobic or anti-immigration polemic, since only a minute number of immigrants participate in the drug trade and that non-immigrant distributors and consumers hugely overshadow their numbers. However, immigration patterns can offer a clue about when and where certain drugs become available. This can be useful information for public health people attempting to understand the dynamics of addiction. The psychology and physiology of addiction are widely studied in public health. They must continue to be studied so that we can better understand the susceptibility end of its epidemiology. But equally, we should study the political economy of drugs, a market commodity with profound geopolitical importance. Only through following the pathways of the drug market, can we ever anticipate where drug will travel and which communities may be at risk for new epidemics of addiction.

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References

Anonymous (1999). International Narcotics Control Strategy Report, 1998: Afghanistan. Washington, DC: The U.S. State Department.

Breyer C (1998). War in the blood: sex, politics and AIDS in Southeast Asia. New York: Zed Books.

Garson P (1997). Dire warnings on drugs and violence. Weekly Mail and Guardian, Johannesburg, April 18.

Lintner B (1994). Burma in revolt: opium and insurgency since 1948. Boulder: Westview Press.

McCoy AW (1981). The politics of heroin: CIA complicity in the global drug trade. Brooklyn, NY: Lawrence Hill Books.

Pomfret J (2001). Drug trade resurgent in Afghanistan: opium and heroin flood into Pakistan, complicating efforts against Taliban. The Washington Post; October *23*: A16.

Rothberg R (1997). War and peace in Southern Africa. Washington DC: Brookings Press.

Waley A (1958). The Opium War through Chinese eyes. Stanford, CA: Stanford University Press.

Williams T (1989). The cocaine kids. New York, NY: Addison Wesley.