FINAL REPORT
(DRAFT)

THIRTEENTH MEETING OF THE GROUP OF EXPERTS ON
DEMAND REDUCTION

WASHINGTON, DC
The Thirteenth Meeting of the Group of Experts on Demand Reduction was held in Washington, DC from September 27 to 29, 2011, under the chairmanship of the United States, represented by Mr. David Mineta, Deputy Director for Demand Reduction at the Office of National Drug Control Policy. The Vice Chair of the Group was Brazil, in the person of Dr. Paulina do Carmo Arruda Vieira Duarte, Director of the National Secretariat for Drug Policies (SENAD). The meeting was attended by experts from the following countries: Argentina, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Ecuador, Guatemala, Haiti, Jamaica, Mexico, Panamá, St. Kitts and Nevis, Suriname, Trinidad and Tobago, Uruguay, and the United States. Experts in the agenda’s respective thematic areas were also present at the meeting (see Annex I, List of Participants).

The purpose of this meeting was to discuss the four thematic areas identified in the work plan of the Experts Group that was approved at CICAD 49 in Paramaribo, Suriname in May 2011. These four areas include integrated communities (community coalitions), drugged driving, data collection, and preventing prescription drug abuse. The group also reviewed outlines of three documents (see Annex III) that address these areas, with data collection being a cross-cutting theme:

2. Recommendations to fill information gaps and strengthen policies aimed at reducing drugged driving.
3. Guidelines on how to develop a national educational campaign to prevent prescription drug abuse/misuse.

Day One

On the first day of the meeting (see Annex II, Agenda) work centered on the topics of data collection and drugged driving. During the opening session, CICAD Executive Secretary Paul Simons welcomed the participants, underscoring that CICAD’s new Hemispheric Drug Strategy and Plan of Action recognizes addiction as a chronic disease and that the Strategy should guide the organization’s efforts to strengthen institutional development, public policy, the sharing of best practices, and program monitoring and assessment. Paulina do Carmo Arruda Vieira Duarte, Vice-Chair of the Experts Group, emphasized the importance of involving civil society in addressing substance abuse by implementing grass-roots community-based efforts. Adam Blackwell, OAS Secretary of Multidimensional Security, noted that substance abuse is a multi-faceted issue and that social development must be addressed in order to make a difference. ONDCP Deputy Director for Demand Reduction David Mineta, Chair of the Demand Reduction Experts Group outlined the meeting objectives:

- Review preliminary work done to date on addressing the four major topic areas;
- Share our respective experiences and knowledge base related to these areas;
- Provide recommendations as to further work needed in each of the areas; and
- Identify specific next steps required to complete work on the products described previously.

Gil Kerlikowske, U.S. Director of National Drug Control Policy, concluded the opening session by addressing the participants and reaffirming the need for a balanced, comprehensive approach based on the
concept that addiction is a disease. Director Kelikowske emphasized that the efforts of all nations to address drug use and its consequence are made stronger through international cooperation.

Following the opening session, Ambassador Simons provided a historical overview of the Demand Reduction Experts Group’s work since its inception in 1999. Deputy Director Mineta followed with a more detailed explanation of the meetings agenda and objectives. The substantive presentations commenced with a panel discussion on national experiences moderated by Alexandra Hill of the Executive Secretariat’s Demand Reduction section. Panel participants included Argentina, Barbados, Brazil, Chile, Ecuador, Haiti, Panama, and Trinidad and Tobago. The discussion centered on such themes as:

- the need for an integrated demand reduction strategy that engages all sectors of society;
- the important role of NGOs;
- the key role of national information systems in supporting program development;
- challenges posed by large and diverse geographic areas;
- the importance of proper training for demand reduction personnel;
- the value of disseminating best practices, and
- the effectiveness of locally-based efforts.

The data component of the day’s agenda commenced with a presentation by Dr. Wilson Compton of the U.S. National Institute on Drug Abuse. Dr. Compton emphasized the fact that addiction is developmental—an individual’s early childhood environment plays a critical role in brain development that can ultimately lead to negative behaviors such as drug use. Screening and brief intervention can lead to the identification of problems early and can direct those with severe conditions into treatment.

Following Dr. Compton’s presentation, three speakers from the CICAD Executive Secretariat took the floor to discuss the importance of scientific evidence in developing demand reduction policies and programs. Francisco Cumsillé, Director of the Inter-American Observatory on Drugs, described the role of the Observatory in generating information, collecting, analyzing, and organizing existing data, and disseminating it to inform policy making in the hemisphere. Pernell Clark and Marya Hynes of the Inter-American Observatory illustrated a framework for demand reduction based on scientific theory, empirical data, and monitoring/evaluation at both the programmatic and the policy level.

The first day concluded with a discussion of the issue of drugged driving. Rita Notarandrea of the Canadian Centre on Substance Abuse provided a presentation on the results of the International Symposium on Drugs and Driving that was held in Montreal, Canada in July 2011. A key finding of the Symposium was that laws and standards vary widely among different countries, demonstrating the need for a more consistent approach. Flavio Pechansky of the Federal University of Rio Grande do Sul in Brazil described the results of the a roadside survey conducted in Brazil that has served as an important source of information on the extent of the problem, especially with regard to the differences in the kinds of drugs used by different types of drivers. The day concluded with a presentation on the outline of Recommendations to Fill Information Gaps and Strengthen Policies Aimed at Reducing Drugged Driving, presented by Dr. Terry Zobeck of the U.S. Office of National Drug Control Policy. The Experts Group will use the outline as a basis for its work during the next twelve months to draft a complete set of recommendations related to research and policy development to address drugged driving.

Day Two
The second day of the Experts Group meeting focused on preventing prescription drug abuse and integrated communities (community coalitions). The morning session began with a presentation by Cejana Passos, General Coordinator for International Affairs at the National Drug Policy Secretariat of Brazil. The presentation highlighted the online management system Brazil has implemented that requires pharmacies to upload information every seven days to prevent the diversion of prescription drugs to illicit use. Jocelyn Kula of Health Canada followed with a presentation on the prescription drug monitoring framework in Canada, which is a shared federal and territorial/provincial responsibility. The prescription drug abuse session concluded with a presentation by Regina LaBelle, Policy Director at the U.S. Office of National Drug Control Policy. Ms. LaBelle’s presentation focused on the new U.S. prescription drug abuse prevention plan, which emphasizes education, prescription monitoring, proper medication disposal, and enforcement.

The integrated communities (community coalitions) portion of the agenda began with a presentation by Jack Claypoole, Administrator of the Drug Free Communities support program in the U.S. Office of National Drug Control Policy. The presentation highlighted the importance of mobilizing community leaders and focusing on environment change to reduce drug use at the local level. Javier Sagredo of the CICAD Executive Secretariat’s Institution Building section then discussed CICAD’s approach to community participation within the social integration framework. Eduardo Hernandez-Alarcon of the Community Anti-Drug Coalitions of America (CADCA) followed with a discussion of success stories related to developed and sustained community coalitions around the world, such as in Lima where the approach started with six organizations five years ago and has now grown to 40 coalitions. The important topic of evaluation in community participation programs was addressed by Fernando Salazar, Dean of Cayetano Heredia University in Peru. Alfonso Abarca followed up on this topic with a discussion of CICAD’s work to develop a user-friendly non-web-based computer monitoring system using Microsoft Windows.

The day’s sessions concluded with a presentation and discussion on the outline for *Hemispheric Guidelines for the Development of Community-Based Substance Abuse Prevention, Early Intervention, Treatment, Recovery And Social Integration Programs*, moderated by Maria Paula Luna of CICAD’s Demand Reduction section.

**Day Three**

The final day of the Demand Reduction Experts Group meeting commenced with a visit to a substance abuse prevention coalition in Alexandria, Virginia, where participants saw first-hand how a representative community coalition operates in the United States. Upon the participants’ return to the meeting site, a panel of experts including Eugenio Mata of Costa Rica, Celina Alvear of Mexico, Esther Best of Trinidad and Tobago, and Alfonso Alabarca discussed the PROCCER training and certification program, which is aimed at strengthening community participation programs in prevention, treatment, rehabilitation, and social integration. The Experts Group meeting concluded with a guided discussion moderated by the Chair and Vice-Chair, which focused on next steps for the Demand Reduction Experts Group. It was agreed that the three outlines that were presented and discussed during the meeting would serve as the basis of the group’s work during the next twelve months to develop a:

1. Guide for the development of integrated communities in the hemisphere,
2. Recommendations to fill information gaps and strengthen policies aimed at reducing drugged driving, and
3. Guidelines on how to develop a national educational campaign to prevent prescription drug abuse/misuse.
Final drafts of these documents will be presented for approval at the 14th meeting of the Demand Reduction Experts Group in 2012, and will be submitted for final approval at the subsequent regular session of CICAD.

The meeting closed with remarks from the Chair, Vice-Chair, and CICAD Executive Secretary Paul Simons.
ANNEX I

THIRTEENTH MEETING OF THE
GROUP OF EXPERTS ON DEMAND REDUCTION
WASHINGTON, DC

September 27-29, 2011

LISTA DE PARTICIPANTES/
LIST OF PARTICIPANTS

COUNTRIES

ARGENTINA
KARINA CECILIA CASAL
GRACIELA AHUMADA
ROBERTO CANAY
CARLOS VIZZOTTI

BARBADOS
BETTY HUNTE

BOLIVIA
MARIA DEL ROSARIO VALENZUELA

BRASIL
PAULINA DO CARMO ARRUDA VIEIRA DUARTE
FLAVIO PECHANSKY
CARLA DALBOSCO
CEJANA PASSOS

CANADA
JOCELYN KULA

CHILE
FRANCISCA FLORENZANO
CHILE
FABIOLA MARÍN GARRIDO
CHILE

COLOMBIA

CAMILA PATIÑO

ALDEMAR PARRA

ORLANDO SCOPPETTA

COSTA RICA

EUGENIA MATA

ECUADOR

CRISTINA ALEXANDRA DELGADO RIVERA

GUATEMALA

EDGAR CAMARGO

HAITI

MARTINEAU GUERRIER

JAMAICA

ELLEN GRIZZLE

MEXICO

CARLOS TENA TAMAYO

LUCERO GARCÍA RIVAS

ARTURO REVUELTA HERRERA

ADRIANA ARÁOZ PONCE

CELINA ALVEAR SEVILLA

ALEJANDRO SÁNCHEZ GUERRERO

ENRIQUE DE JESUS ACEVES ARCE

PANAMÁ

MARTHA GÓMEZ SOLÍS

CALIXTA A. DE BALMACEDA
REPÚBLICA DOMINICANA
DIÓGENES CHECO

ST. KITTS
DR. SHARON HALLIDAY

SURINAME
EDITH ELIZEE – TILON

TRINIDAD AND TOBAGO
MARGARET FARREY
WENDY-ANN WATTIE
ESTHER BEST

URUGUAY
JULIO CALZADA

UNITED STATES
R. GIL KERLIKOWSKE
DAVID MINETA
MARTHA GAGNE
TODD ROBINSON
NANCY PETTIT
JAVIER CORDOVA
GINA COSTANTE
L. BRAD HITTLE
ROBERT L. HOLMES
BRIAN MORALES
RICHARD O’CONNOR
JACK STEIN
TERRY ZOBECK
JACK CLAYPOOLE
REGINA LABELLE
WILSON COMPTON
NATALIA WAUGH

OTHER INSTITUTIONS

CANADIAN CENTER FOR SUBSTANCE ABUSE
CCSA

RITA NOTARANDREA

RED IBEROAMERICANA DE ONG QUE TRABAJAN EN DROGODEPENDENCIAS
RIOD

ENRIQUE GABRIEL BRAVO MENA

MARÍA FLORENCIA DI MASI ALCONADA

COMMUNITY ANTI DRUG COALITIONS OF AMERICA
CADACA

EDUARDO HERNÁNDEZ

CENTROS DE INTEGRACIÓN JUVENIL
CIJ

ENRIQUE DE JESÚS ACEVES ARCE

CARIBBEAN COMMUNITY
CARICOM

BEVERLY RAYNOLDS

PERUVIAN UNIVERSITY CAYETANO HEREDIA

FERNANDO SALAZAR

ORGANIZATION OF AMERICAN STATES
SECRETARIAT FOR MULTIDIMENSIONAL SECURITY
INTER AMERICAN DRUG ABUSE CONTROL COMMISSION

ADAM BLACKWELL
SMS/CICAD
PAUL E. SIMONS
CICAD/SMS/OAS

RAFAEL FRANZINI
CICAD/OAS/SMS

GLORIA WRIGHT
CICAD/OAS/SMS

FRANCISCO CUMSILLE
CICAD/SMS/OAS

ALEXANDRA HILL
CICAD/SMS/OAS

MARIA PAULA LUNA
CICAD/SMS/OAS

PERNELL CLARKE
CICAD/SMS/OAS

JAVIER SAGREDO
CICAD/SMS/OAS

ALFONSO ABARCA
CICAD/SMS/OAS

ARENA ORTEGA
CICAD/SMS/OAS

LUIS VILLALOBOS
CICAD/SMS/OAS

MARIA JULIANA LUJÁN
CICAD/SMS/OAS

YANIQUE CAMPBELL
CICAD/SMS/OAS
TUESDAY, SEPTEMBER 27th

8:00 – 08:30  Participant Registration

08:30 – 09:30  OPENING CEREMONY

Ambassador Paul E. Simons
Executive Secretary
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

Paulina do Carmo Arruda Vieira Duarte
Vice-Chair, Demand Reduction Experts’ Group
National Secretary, Drug Policy
National Drug Policy Secretariat (SENAD)
Brazil

David K. Mineta
Chair, Demand Reduction Experts’ Group
Deputy Director, Demand Reduction
White House Executive Office
Office of National Drug Control Policy (ONDCP)
United States of America (USA)

R. Gil Kerlikowske
Director
Office of National Drug Control Policy (ONDCP)
White House Executive Office
United States of America (USA)

09:30 – 10:00  Coffee Break
10:00 – 10:30  CICAD DEMAND REDUCTION EXPERTS’ GROUP FROM 1999 - 2011

Ambassador Paul Simons
Executive Secretary
OAS/CICAD

10:30 - 11:00  REVIEW THE AGENDA AND OUTLINE THE MEETING OBJECTIVES

David K. Mineta
Chair, Demand Reduction Experts’ Group
ONDCP/USA

11:00 – 13:00  Member States’ Presentations: National Experiences

Moderator
Alexandra Hill
Specialist/Program Manager
Demand Reduction Section
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

Presentations:

Argentina
Barbados
Brazil
Chile
Ecuador
Haiti
Panama
Trinidad and Tobago

13:00 – 14:00  Lunch

14:00 – 14:30  BRINGING THE POWER OF SCIENCE TO BEAR ON DRUG ABUSE AND ADDICTION

Wilson Compton, MD., M.P.E.,
14:30 – 15:00 STANDARDIZED INDICATORS FOR PROGRAMMING DEMAND REDUCTION AND THE ROLE OF SCIENTIFIC EVIDENCE IN THE PROCESS OF POLICY AND DECISION MAKING

Francisco J. Cumsille
Director
Inter-American Observatory on Drugs
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

15:00 – 15:30 DEMAND REDUCTION: A PROPOSED INFORMATION FRAMEWORK FOR PRACTICE

Pernell Clarke
Specialist
Inter-American Observatory on Drugs
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

Marya Hynes
Specialist
Inter-American Observatory on Drugs
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

15:30 – 16:00 OUTCOMES FROM THE INTERNATIONAL SYMPOSIUM ON DRUGS AND DRIVING

Rita Notarandrea
Deputy Chief Executive Officer
Canadian Centre for Substance Abuse (CCSA)
Canada

16:15 – 16:45 THE USE OF ALCOHOL AND OTHER DRUGS ON BRAZILIAN ROADS AND OTHER STUDIES: The Drugged Driving Experience in Brazil

Flavio Pechansky
16:45 – 17:30 RECOMMENDATIONS REGARDING FILLING INFORMATION GAPS AND STRENGTHENING POLICIES ON DRUGGED DRIVING:
Outline and Discussion

Terry Zobeck
Associate Director
Office of Research and Data Analysis
Office of National Drug Control Policy

Cocktail Reception hosted by the Chair of the Expert Group and the Executive Secretariat of CICAD

06:30 pm
Lobby of the Terrace Level
General Secretariat Building of the OAS (GSB)
1889 F. St. NW
Washington DC, 20006

WEDNESDAY, SEPTEMBER 28th

09:00 – 09:30 A COMPREHENSIVE SYSTEM TO PREVENT PRESCRIPTION DRUG DIVERSION AND MISUSES

Cejana Passos
General-Coordinator for International Affairs
National Drug Policy Secretariat (SENAD)
Brazil

09:30 - 10:00 PRESCRIPTION DRUG ABUSE PREVENTION PLAN

Jocelyn Kula
Manager, Regulatory Policy Division
Office of Controlled Substances
Healthy Environments and Consumer Safety Branch
Health Canada
10:00 – 10:45  PRESCRIPTION DRUG CONTROL AND PREVENTION AND GUIDELINES ON DEVELOPING A NATIONAL EDUCATIONAL CAMPAIGN TO PREVENT PRESCRIPTION DRUG ABUSE/MISUSE

Regina LaBelle
Policy Director
White House Executive Office
Office of National Drug Control Policy (ONDCP)
United States of America (USA)

10:45 – 11:00  Coffee Break

11:00 – 12:00  Presentation
INTEGRATED COMMUNITIES AS PROBLEMS SOLVERS

Jack Claypoole
Administrator, Drug Free Communities Support Program
Executive Office of the President
Office of National Drug Control Policy
United States

12:00 – 12:30  Presentation
CICAD’S APPROACH TO COMMUNITY PARTICIPATION WITHIN THE SOCIAL INTEGRATION FRAMEWORK

Javier Sagredo
Specialist
Institutional Building Section
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

12:30 – 13:00  Presentation
SUSTAINING INTEGRATED COMMUNITIES

Eduardo Hernández-Alarcón
Vice-President
International Programs
Community Anti-Drug Coalitions of America (CADCA)
13:00 – 14:00  Lunch

14:00 – 14:30  Q & A

14:30 – 15:30  Presentation

COMMUNITY PARTICIPATION PROGRAM EVALUATION

Fernando Salazar
Dean
Cayetano Heredia University
Peru

INFORMATION SYSTEMS AS A TOOL FOR THE EVALUATION OF SUBSTANCE ABUSE PREVENTION PROGRAMS

Alfonso Abarca
Inter-American Drug Abuse Control Commission (CICAD)
Secretariat for Multidimensional Security (SMS)
Organization of American States (OAS)

15:30 – 16:00  Q & A

16:00 – 16:15  Coffee Break

16:15 – 17:30  Presentation

CICAD HEMISPHERIC GUIDELINES FOR THE DEVELOPMENT OF COMMUNITY BASED SUBSTANCE ABUSE PREVENTION, EARLY INTERVENTION, TREATMENT, RECOVERY AND SOCIAL INTEGRATION PROGRAMS

Maria Paula Luna J.
Specialist
Demand Reduction Section
Secretariat for Multidimensional Security (SMS)
Inter-American Drug Abuse Control Commission (CICAD)
Organization of American States (OAS)

THURSDAY, SEPTEMBER 29th

08:45  Gather at the entrance of the OAS’s Main Building (MNB)
Corner of 17th Street and Constitution Ave., N.W.

*Buses will depart at 9:00 am.

09:15 – 10:00  Travel to the Substance Abuse Prevention Coalition
Alexandria, Virginia

10:00 – 12:00  VISITA
Q & A session

*Coffee and refreshments will be served

12:00 – 13:00  Travel back to the OAS Main Building (MNB)
Washington, D.C.

13:00 – 14:00  Lunch

14:00 – 15:00  TRAINING AND CERTIFICATION PROGRAM (PROCCER) FOR
THE STRENGTHENING OF COMMUNITY PARTICIPATION
PROGRAMS IN PREVENTION, TREATMENT, REHABILITATION
AND SOCIAL INTEGRATION

Eugenia Mata
Demand Reduction Coordinator
National Drug Council
Costa Rica

Celina Alvear
General Director
National Centre for Addictions Prevention and Control
CENADIC
Mexico

Esther Best
Chair
PROCCER Caribbean Advisory Council

Alfonso Abarca
CICAD/SMS/OAS

15:00 – 16:00  Guided Discussion
DEMAND REDUCTION EXPERT GROUP: Next Steps

David K. Mineta
ONDCP/USA

Paulina do Carmo Arruda Vieira Duarte
SENAD/Brazil

16:00 - 16:30  CLOSING SESSION

Paulina do Carmo Arruda Vieira Duarte
Vice-Chair, Demand Reduction Experts’ Group
SENAD/Brazil

David K. Mineta
Chair, Demand Reduction Experts’ Group
ONDCP/USA

Ambassador Paul E. Simons
Executive Secretary
CICAD/SMS/OAS
Outline: CICAD Hemispheric Guidelines for the Development of Community-based Substance Abuse Prevention, Early Intervention, Treatment, Recovery and Social Integration Programs

1. Introduction

2. Background

   2.1. CICAD Hemispheric Anti Drug Strategy (2010)
   2.3. Multilateral Evaluation Mechanism (MEM)
   2.4. 49 CICAD Regular Session
   2.5. CICAD Guideline for Social Integration (Institutional Building/Demand Reduction approach 2011)

3. Policy Framework

   3.1. Recommendations of the Expert Group on Demand Reduction
   3.2. Recommendations to the Member States
   3.3. Recommendations to CICAD’s Executive Secretariat
   3.4. General Considerations

4. Principles of Community Based Promotion, Early Intervention, Prevention, Treatment, Recovery and Social Integration Programs

   4.1. The Demand Reduction Continuum

      4.1.1 Promotion
      4.1.2 Prevention
      4.1.3 Early Intervention
      4.1.4 Treatment
      4.1.5 Recovery
      4.1.6 Social Integration

   4.2. Risk and Protective Factors **

      4.2.1 Individual Risk and Protective Factors
      4.2.2 Community Risk and Protective Factors**

   4.3. Screening and Brief Intervention

      4.3.1 Screening tools

   4.4. Treatment
4.4.1 Behavioral Treatment
4.4.2 Medication Assisted Treatment

4.5 Recovery
4.5.1 Recovery Support Services

4.6 Social Integration.

5. Community Mobilization to Address Local Public Health Issues

5.1. The Support System for Local Problem Solving
5.1.1. Federal/National Government
5.1.2. State/Local Government
5.1.3. Non-Governmental Organizations
5.1.4. Defining the Movement

6. Components of Community-Based Coalition Building

6.1. What is a "Coalition"?
6.1.2. Who will the coalition serve?
6.1.3. Where will the coalition serve?

6.3. Identifying the Problem(s)
6.1.1. Data/Information Collection
6.1.2. Understanding the Problem by Analyzing Data

6.4. Mobilizing the Community Around the Identified Problems(s)
6.1.1. Identifying Membership
6.1.2. Specific Individuals
6.1.3. Specific Organizations & Agencies
6.1.4. Specific Skills
6.1.5. Membership Recruitment & Retention Planning

6.5. Identifying Strategies and Activities to Address Identified Problems
6.1.1. Building Awareness & Creating Community Response
6.1.2. Environmental Prevention Strategies

7. Evaluation of Community-Based Coalitions and Other Programs
7.1. Drug Free Communities National Cross-Site Evaluation
7.2. Community-Based Participatory Research
7.3. SAMHSA's National Register of Evidence-Based Programs and Practice
Outline: Recommendations to Fill Information Gaps and Strengthen Policies Aimed at Reducing Drugged Driving

The terrible consequences of drunk driving are well known to people around the world. However, less attention has been paid to the threat of drugged driving, despite the fact that drugs have adverse effects on judgment, reaction time, motor skills, and memory. The potential scope of the problem is illustrated by roadside survey data from the United States in which a nationally representative survey by the National Highway Traffic Safety Administration (NHTSA), found that in 2007, approximately one in eight weekend, nighttime drivers tested positive for illicit drugs. As new data emerges illustrating the scope of the threat posed by drugged driving to public safety in several countries in the hemisphere, CICAD has committed itself to addressing this issue in its recently approved *Hemispheric Drug Strategy and Hemispheric Plan of Action on Drugs*, calling on countries to "Develop inter-institutional strategies aimed at preventing drugged driving."

In light of these findings and in furtherance of the *Hemispheric Drug Strategy and Hemispheric Plan of Action on Drugs*, the Demand Reduction Experts Group offers the following recommendations to fill information gaps and strengthen policies aimed at reducing drugged driving in the hemisphere:

1. Encourage collaboration among government agencies, academia, and the private sector to identify and define valid and reliable data regarding the problem of drugged driving; and to collect and apply such data routinely and sustainably.

2. Pursue the development of standard screening methodologies for drug testing labs to use in detecting the presence of illegal drugs.

3. Publicize data showing the prevalence of drugged driving to raise awareness among both policy makers and the general public about the problem of drugged driving.

4. Based upon available information on the prevalence of drugged driving, set realistic, measurable, and attainable goals to reduce drugged driving.

5. Encourage collaboration among government agencies at all levels to explore legislative action to empower governments to reduce drugged driving, such as per se laws that make it illegal for individuals to drive after taking illicit drugs.

6. Deliver access to information, training and associated resources to parents and community leaders about the threats posed by drugged driving so that they can communicate effectively with drivers to dissuade them from drunk and drugged driving.

7. Provide increased training to law enforcement officers to enable them to identify drugged drivers and prevent drivers from injuring themselves and others. Examples of such training initiatives include Drug Recognition Expert programs and the online ARIDE module.
8. Engage in public awareness campaigns to educate the public about the dangers and consequences of drugged driving.

9. Provide information on drugged driving to Departments of Motor Vehicles to use in their educational materials for new licensees.
Outline: Guidelines on Developing a National Educational Campaign to Prevent Prescription Drug Abuse/Misuse

Prescription drugs have great potential for relieving suffering, but also potential for abuse. In many countries of the hemisphere, prescription drug abuse has emerged as one of the fastest growing drug problems. Any policy in this area must strike a balance between maximizing legitimate access and use of these medications while minimizing their diversion, misuse, and abuse. CICAD has committed itself to advancing such balanced policies in its recently approved Hemispheric Drug Strategy and Hemispheric Plan of Action on Drugs, calling on countries to "...prevent the diversion of pharmaceutical products with psychotropic properties to illicit use", while also urging them to "Ensure the adequate availability of narcotics required for medical and scientific uses."

In light of the rising threat of prescription drug abuse and in furtherance of the Hemispheric Drug Strategy and Hemispheric Plan of Action on Drugs, the Demand Reduction Experts Group offers the following Guidelines on Developing a National Educational Campaign to Prevent Prescription Drug Abuse/Misuse.

1. Research has shown that a significant proportion of people who abuse prescription drugs obtain them from friends and family. Educational efforts should be focused on parents to ensure they understand the danger of prescription drugs and know how to properly control prescription drugs in the household. Efforts should also teach parents to talk to their children about the dangers of prescription drug abuse.

2. Educational efforts should also be focused on pharmacists, nurse practitioners, physicians, and other medical professionals to ensure they are properly trained in the prescribing of opiate and other potential dangerous medications.

3. Governments should work with the pharmaceutical industry to develop educational programs for both prescribers and patients about the benefits and risks of medications.

4. Epidemiological studies should be designed and evaluated to address changing patterns of prescription drug abuse.

5. Research should be promoted to develop pain treatments with no abuse potential as well as to develop abuse deterrent formulations for prescription drugs with abuse potential.

6. Procedures should be established for safely disposing of unused prescription drugs and these programs should be publicized widely through such events as "take-back days".

7. Prescription drug abuse should be addressed as part of comprehensive community-based prevention efforts as well as anti-drug media campaigns.

8. Professional associations and medical and healthcare boards should be encouraged to require educational curricula in health professional schools and continuing education programs to
include instruction on the safe and appropriate use of opioids to treat pain while minimizing the risk of addiction and substance abuse.