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**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION**

CICAD

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**Intervention from Gabriela B. de Luca,
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at the Open Society Foundation**

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at Open Society Foundation

Good afternoon, ladies and gentlemen. Thank you for your attention. I would like to offer a brief comment to the last session on alternatives to incarceration.

There is international law and a strong international consensus providing for alternatives to criminal sanctions for some drug offenses, but there is nothing that requires court-determined and court-supervised treatment as the alternative mechanism. Evidence shows that coercion and abstinence-mandated treatment simply do not work.

Some important questions to consider when crafting alternatives to incarceration are: What are people being diverted to –considering that most countries in the Americas have little treatment options available and what is available is not evidence-based? If the objective is to treat the individual then why, for example, are urine tests often used as a measure of compliance? Are judges equipped to make medical decisions? In the US, for example, where opioid dependence has long been a public health crisis, some drug court judges have arbitrarily decided that medication assisted treatments with methadone and buprenorphine are not an appropriate option for court supervised therapy.

In spite of good intentions, drug courts cannot be called effective if they undermine health and human rights, if they put health decisions in the hands of judges and prosecutors who reject clinically indicated treatment, or if they impose punishment for relapses that are a normal part of drug dependence. Other alternatives to incarceration should be considered, such as pre-arrest diversion, health and social service interventions, and legislative changes to remove these infractions from penal codes.