

international organisations were placed in a difficult position where dominant member states opposed harm reduction - for example, the US objections to the UNODC - and that the political constraints that they were under should not be underestimated, particularly given their dependence on the major donor countries.

*Dr. Sandeep Chawla, Head of Policy Analysis and Research Branch at UNODC*, agreed that if we were to take the debate forward constructively it was important to look inside 'the black box of policy'. One dimension of the politics of drug policy was that governments sometimes adopted different - and even contradictory - positions, depending on their audience - for example, advocating positions in international fora that differed from their national policies.

*Cindy Fazey, Professor of International Drug Policy at Liverpool University, UK*, said that it was important not to underestimate the extent of US control over international drug policy. When the US encountered a harm-reduction programme in South East Asia within which needle exchange was one component, it went to the UNODC and said that if this project was not stopped, it would withdraw all funding from Asia. The US has the financial power to maintain a tight stranglehold on international policy.

*Daniel Wolfe, Deputy Director of the International Harm Reduction Programme at the Open Society Institute*, complained about the manufacture of scientific uncertainty by the United States. The US routinely disputed powerful evidence for the effectiveness of needle exchange on the basis of a few small - often non-peer reviewed - studies, similar to the way it responded to uncomfortable research findings in the environmental sciences. Other countries fail to challenge the US and have remained silent in the debate about harm reduction - notably, the countries of the former USSR.



AFTERNOON SESSION

IMPACT OF INTERNATIONAL DRUG CONTROL SYSTEMS  
ON SCIENTIFIC AND MEDICAL RESEARCH

CHAired BY PROF COLIN BLAKEMORE