

# A public health approach as a base for Drugs Policy

## The Portuguese Experience

(More than just decriminalisation!)

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# The history of drug use in Portugal

**1970 / 1974**

It began much latter than in the other Western European Countries

Closed and isolated country

Citizens' limited mobility; censorship

Society unprepared to deal with drugs

Colonial war – use was tolerated

**1974** – Democratic Revolution

Explosion on experimentation



# The history of drug use in Portugal

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## As a consequence:



- **It developed very fast, cross cutting society**
- Drug use spread, still under European average level
- But a considerable number of “problematic drug users” appeared and, during a long period of time, had no access to treatment
- Small gap between “total” and “problematic” drug users
- Onset of AIDS and HCV epidemics
- By the end of the 20th Century, Portugal had one of the highest prevalence of Problematic Drug Use, at European Level (1% of total population -100 000 problematic drug users)
- At the same time, the social burden associated to drug use was very relevant – major political concern

# The history of drug use in Portugal

## 1975 / 1998 PUBLIC RESPONSES

**1975**

Ministry of Justice: **prevention/ treatment centers – 3 major cities**

**1987**

**Projeto VIDA** - Cabinet of Prime Minister

**1987**

**Centro das Taipas:** Lisbon

**1990**

Ministry of Health: **SPTT : approx. 40 treatment centres, nationwide**

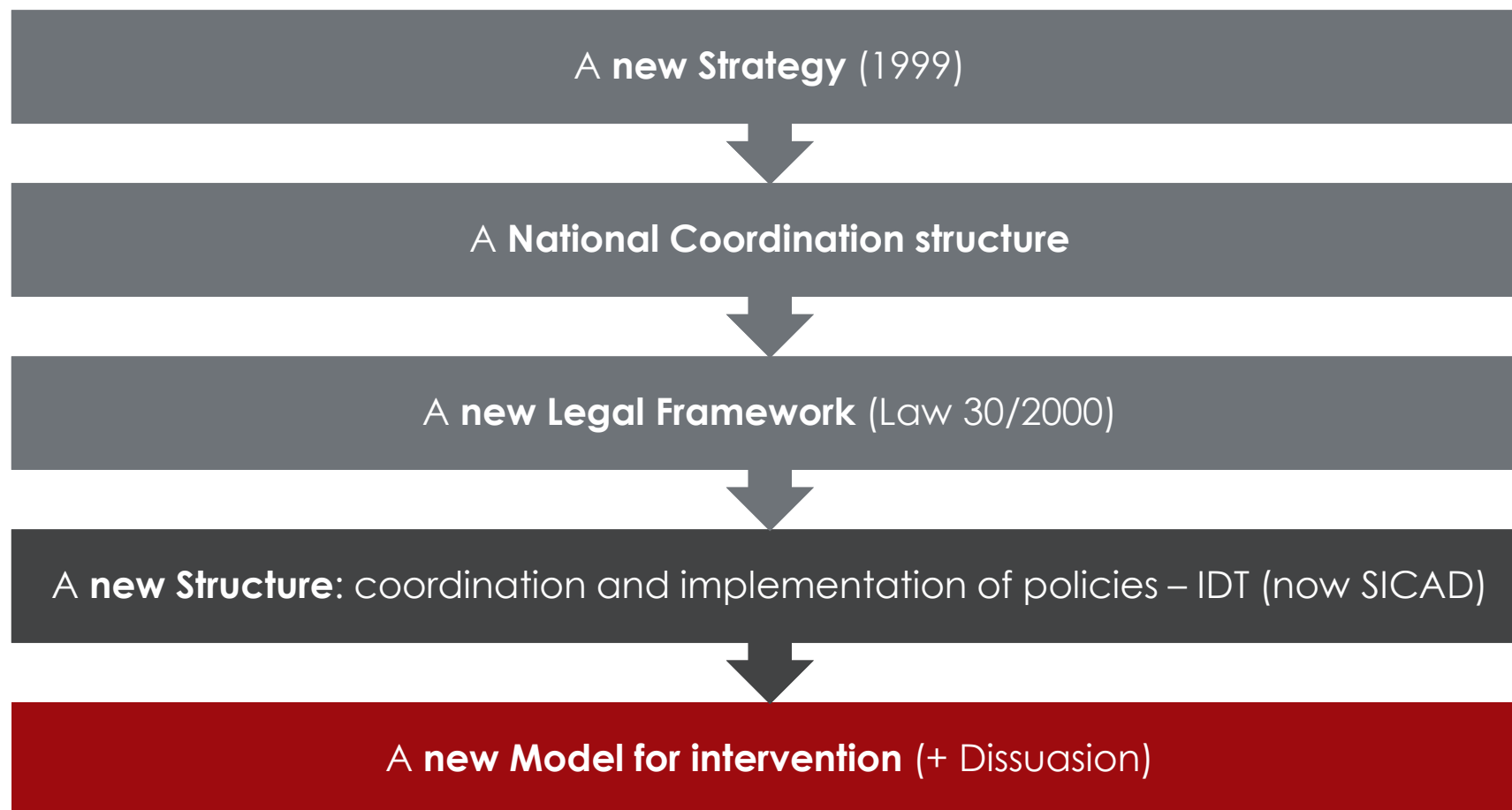
**1993**

- Decree Law 15/93 ("Drug Law")
- Needle and Syringe Exchange Programme
- EMCDDA established; inaugurated in Lisbon in 1995

**1997**

**Law 7/97:** defines **public network of treatment:** inpatient and outpatient treatment centers, nationwide coverage, public and private units

## National Strategy on Drugs 1999



# National Strategy on Drugs 1999

## A New Legal Framework

### Decriminalisation of drug consumption and possession for use

Portuguese Drug policy was based on consumption's criminalisation

Imprisonment or fee (the most common sentence imposed on 1<sup>st</sup> time offenders) didn't deter drug abuse

In the case of 1<sup>st</sup> time offenders or occasional users, imprisonment is likely to generate counterproductive effects

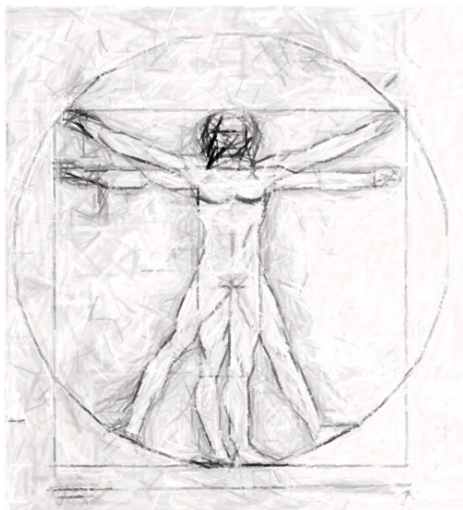
Need to liberate resources for the fight against drug bulk trafficking

# National Strategy on Drugs 1999

## PRINCIPLES

### Humanism

Recognition of the drug user citizen's full dignity as a human being, that should be understood within the framework of the complexity and relevancy of his/her individual, family and social history, and must take into consideration the health and social conditions



# National Strategy on Drugs 1999

## PRINCIPLES

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### Pragmatism

Attitude of openness towards innovation, rejecting dogma or pre-conceived ideas vis a vis scientific proven results of experiences conducted in the different domains

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# National Plan to Reduce Addictive Behaviours and Dependencies 2013 – 2020

(Illicit drugs, NPS, anabolizers, alcohol, gambling, screen, etc.)

## Cross-cutting Areas

**Coordination**

**International Cooperation**

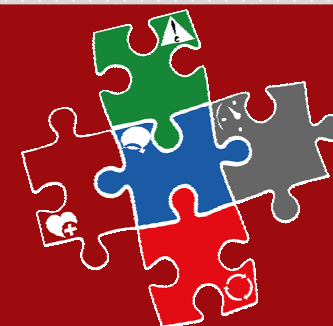
**Information, Research, Training and Evaluation**

**Legal Framework Review**

## Mission Areas

### Demand Reduction

- Prevention
- Dissuasion
- Harm Reduction
- Treatment
- Reintegration



### Supply Reduction



## National Coordination Structure



## Law 30/2000

**The consumption, acquisition and possession for own consumption of plants, substances or preparations constitute an administrative offence and can not exceed the quantity previewed for individual use for a 10 days period.**

**Exceeding this quantity, criminal procedures take place**

**The drug user is considered a person in need of health and social care**

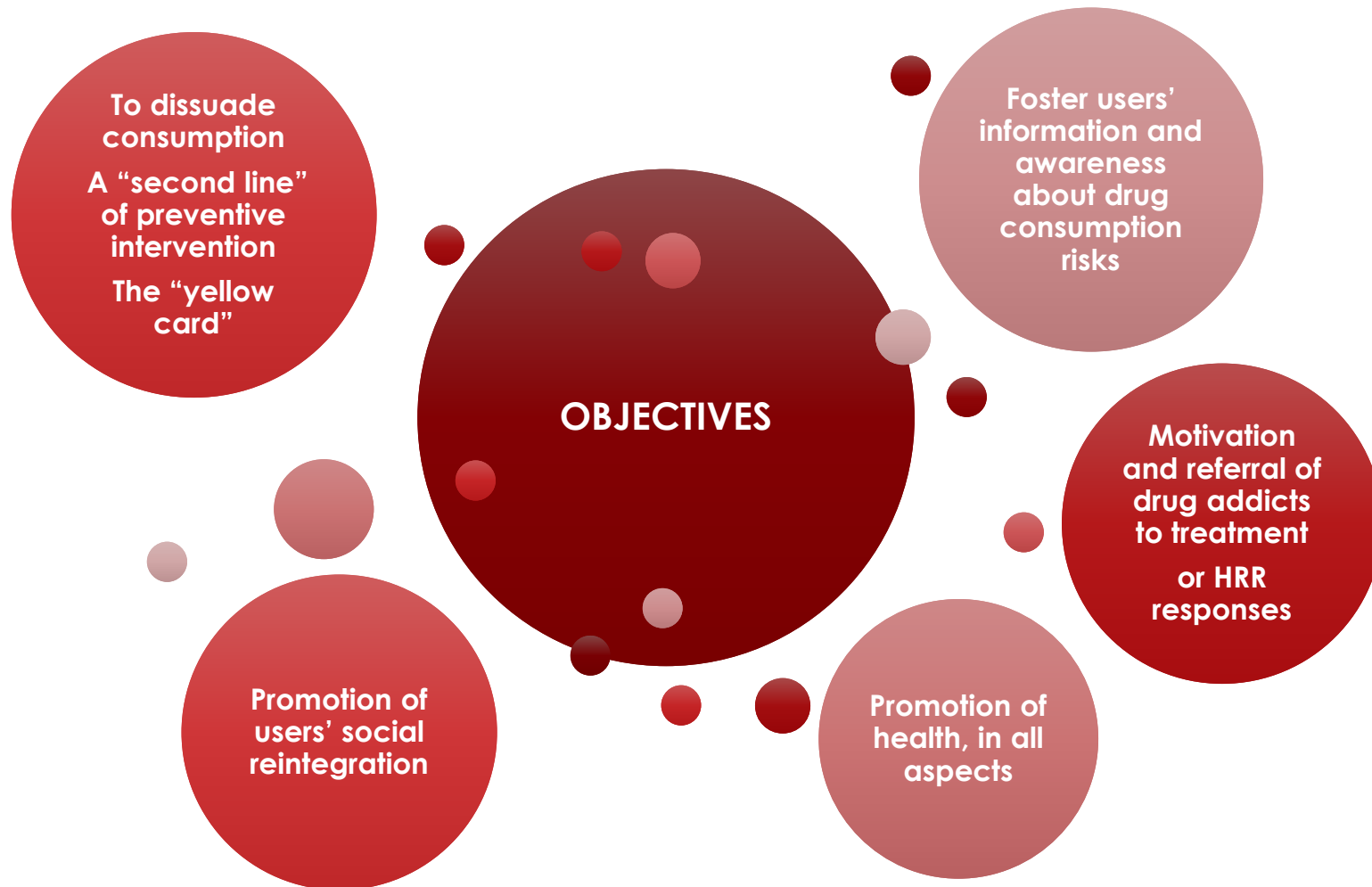
**The dissuasion intervention provides an opportunity for an early, specific and integrated interface with drug users**

**The dissuasion intervention is aimed and targeted at the drug users' characteristics and individual needs**

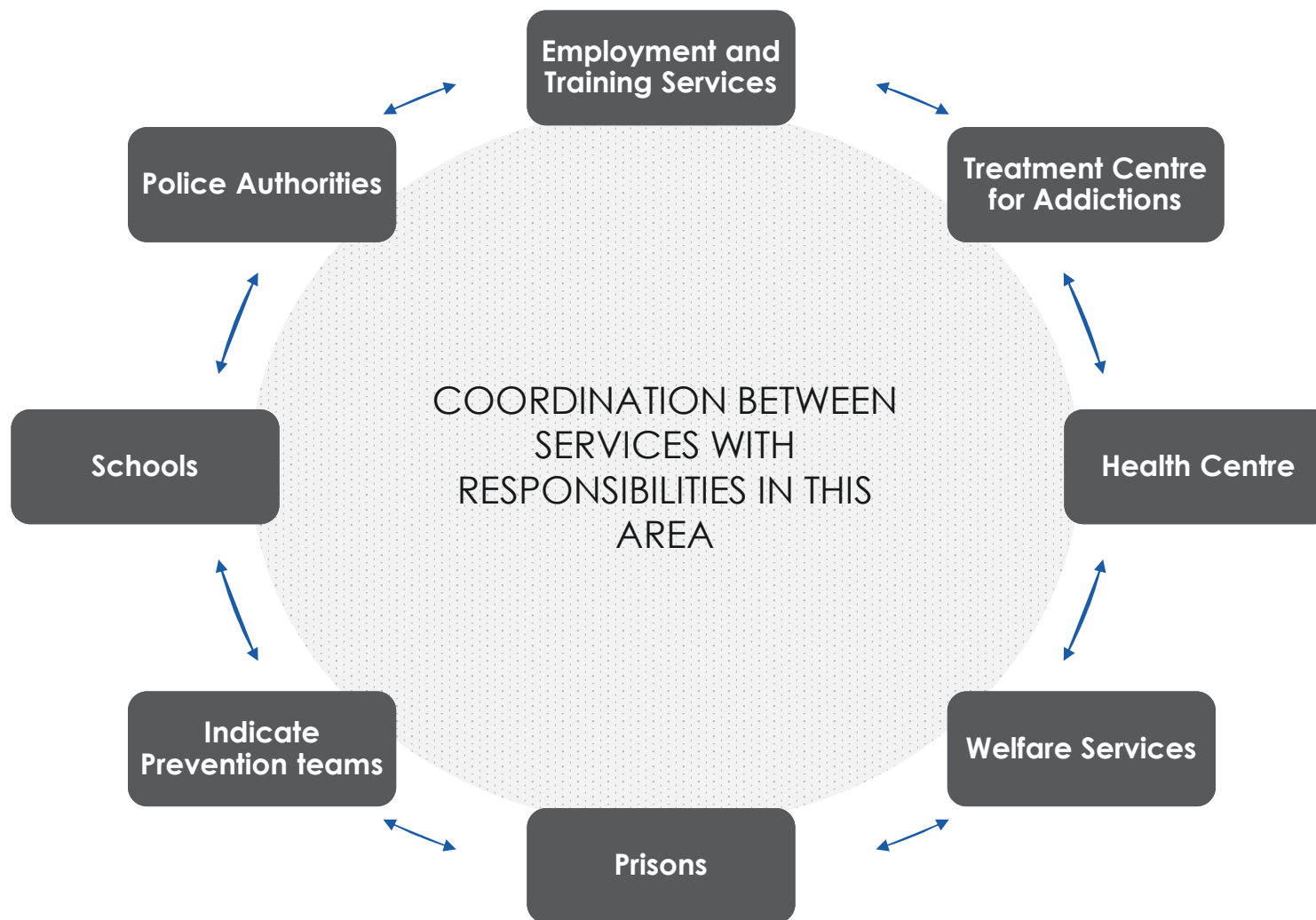
## Law 30/2000

ILLICIT SUBSTANCE	GRAMS
Heroin	1
Methadone	1
Morphine	2
Opium	10
Cocaine (hydrochloride)	2
Cocaine (methyl ester benzoilecgonine)	0.3
Cannabis (leaves and flowers or fruited dons)	25
Cannabis (resin)	5
Cannabis (oil)	2.5
LSD	0.1
MDMA	1
Amphetamine	1

# Dissuasion



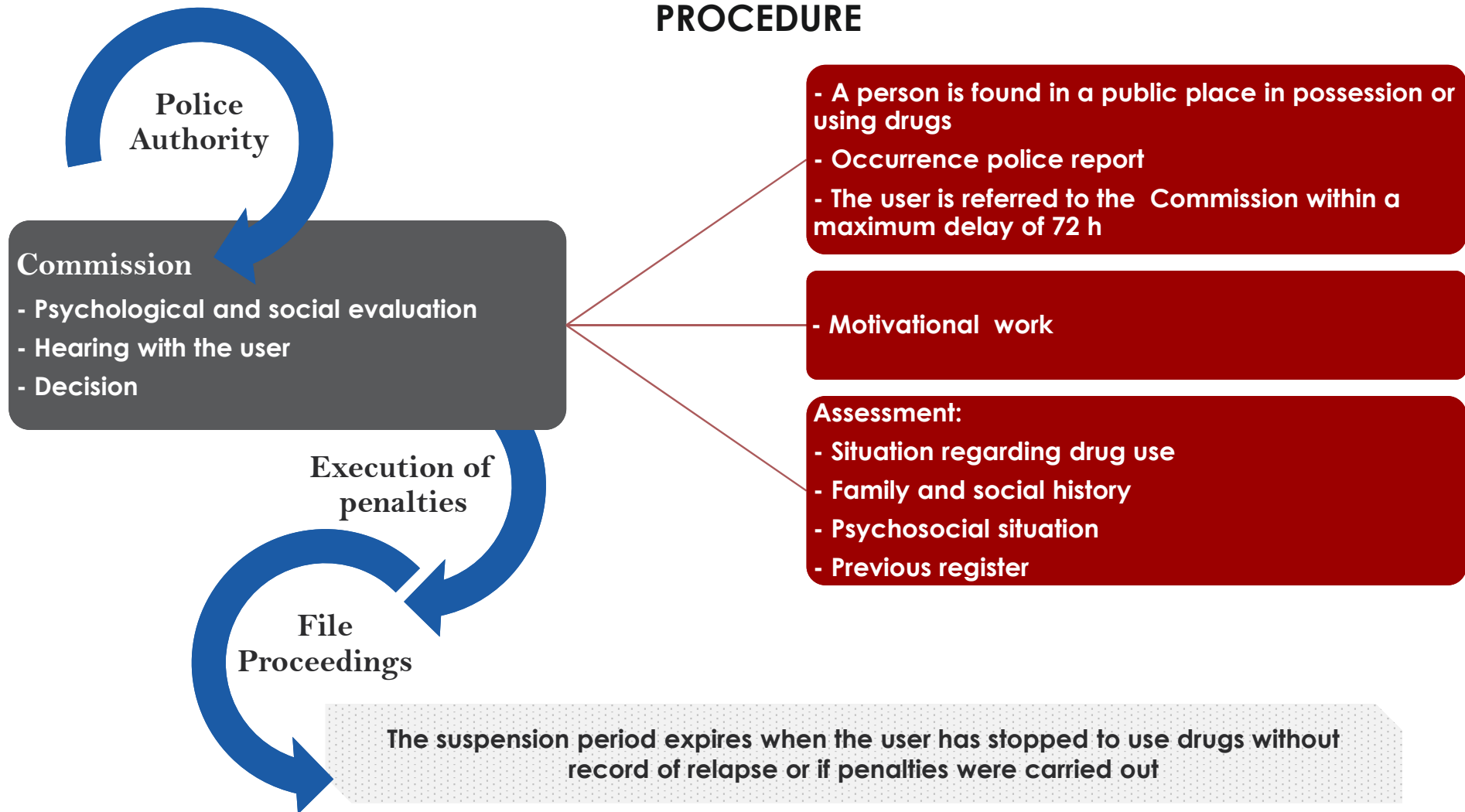
# Dissuasion Network



# Dissuasion



## PROCEDURE





## DECISIONS and SANCTIONS

### Provisional Process Suspension

if suspension conditions are not met or if citizen refuses to engage with measures determined by the **Commission**:

Periodic presentation to the Dissuasion Commission or to other services (hospital, health centre)

Admonition, Warning

Community Service

Forbiddance of attending certain places or meeting certain people

Seizure of objects

Interdiction to travel

Interdiction of receiving subsidies or other monetary social grants

Monetary fee (only for non-addicts)

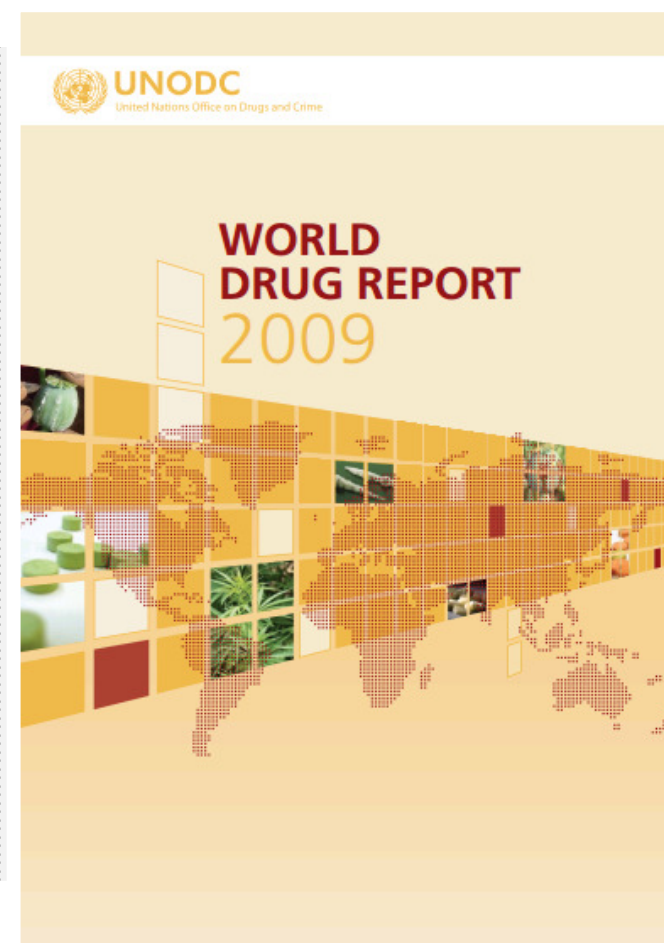


# Portuguese Policy on Drugs

## UN very critical after the decision

But, in 2009:

"Portugal is an example of a country that recently decided not to put drug users in jail. According to the International Narcotics Control Board, Portugal's "decriminalization" of drug usage in 2001 **falls within the Convention parameters**: drug possession is still prohibited, but the sanctions fall under the administrative law, not the criminal law."



# Portuguese Policy on Drugs



INTERNATIONAL NARCOTICS CONTROL BOARD

## The Portuguese Approach and the International Drug Control Conventions



**UNGASS 2016**

Side event of Portugal

A public health approach as a base for drugs policy: the Portuguese case

Werner Sipp, President of INCB  
Public Health and drugs policy - the Portuguese Case

**New York, 20 April 2016**

# Portuguese Policy on Drugs



INTERNATIONAL NARCOTICS CONTROL BOARD



## Legal Framework in Portugal

**Portuguese approach is a model of best practices:**

fully committed to the principles of the drug control conventions

putting health and welfare in the centre

applying a balanced, comprehensive and integrated approach

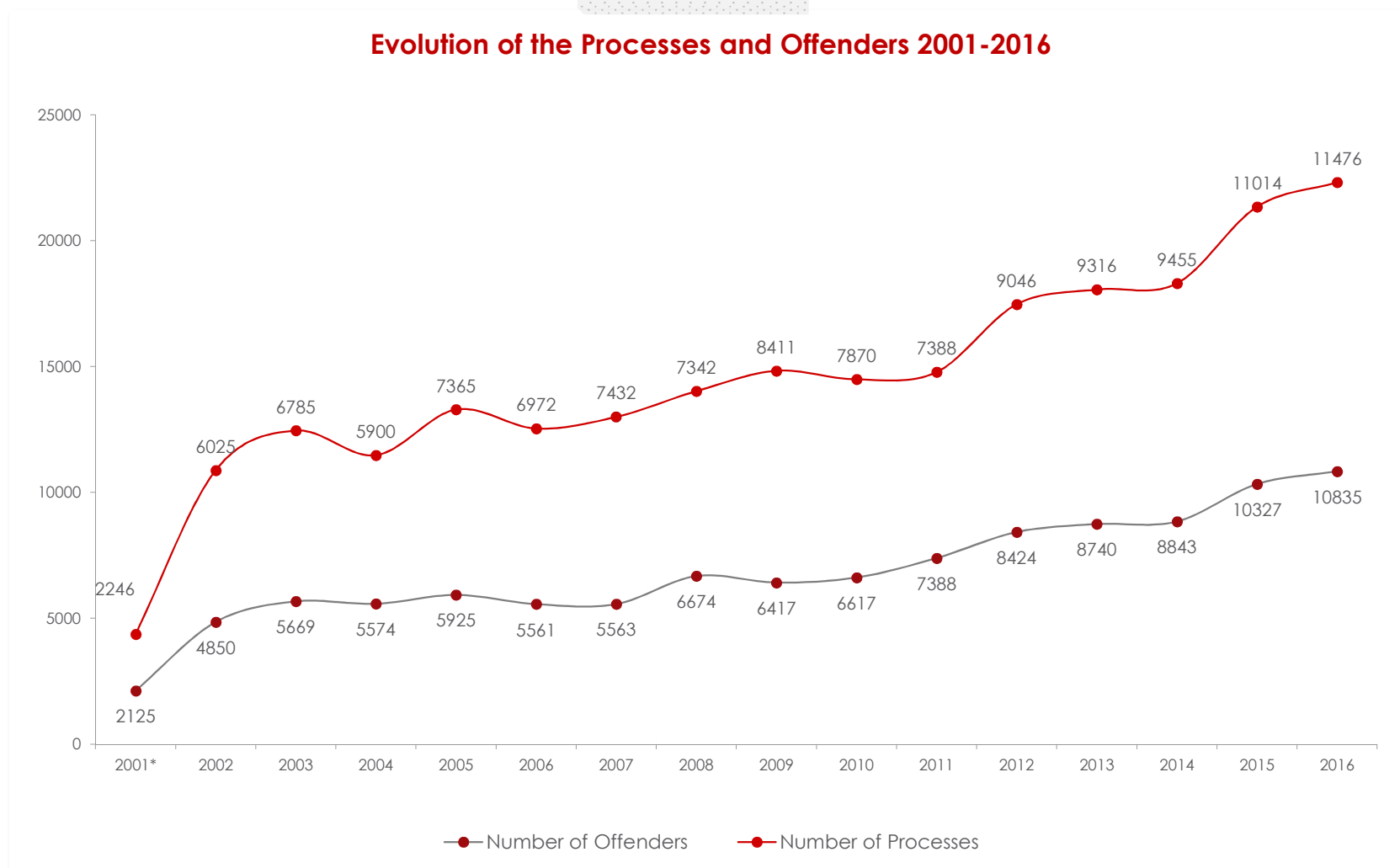
based on the principle of proportionality and the respect for human rights,

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# Processes and Offenders

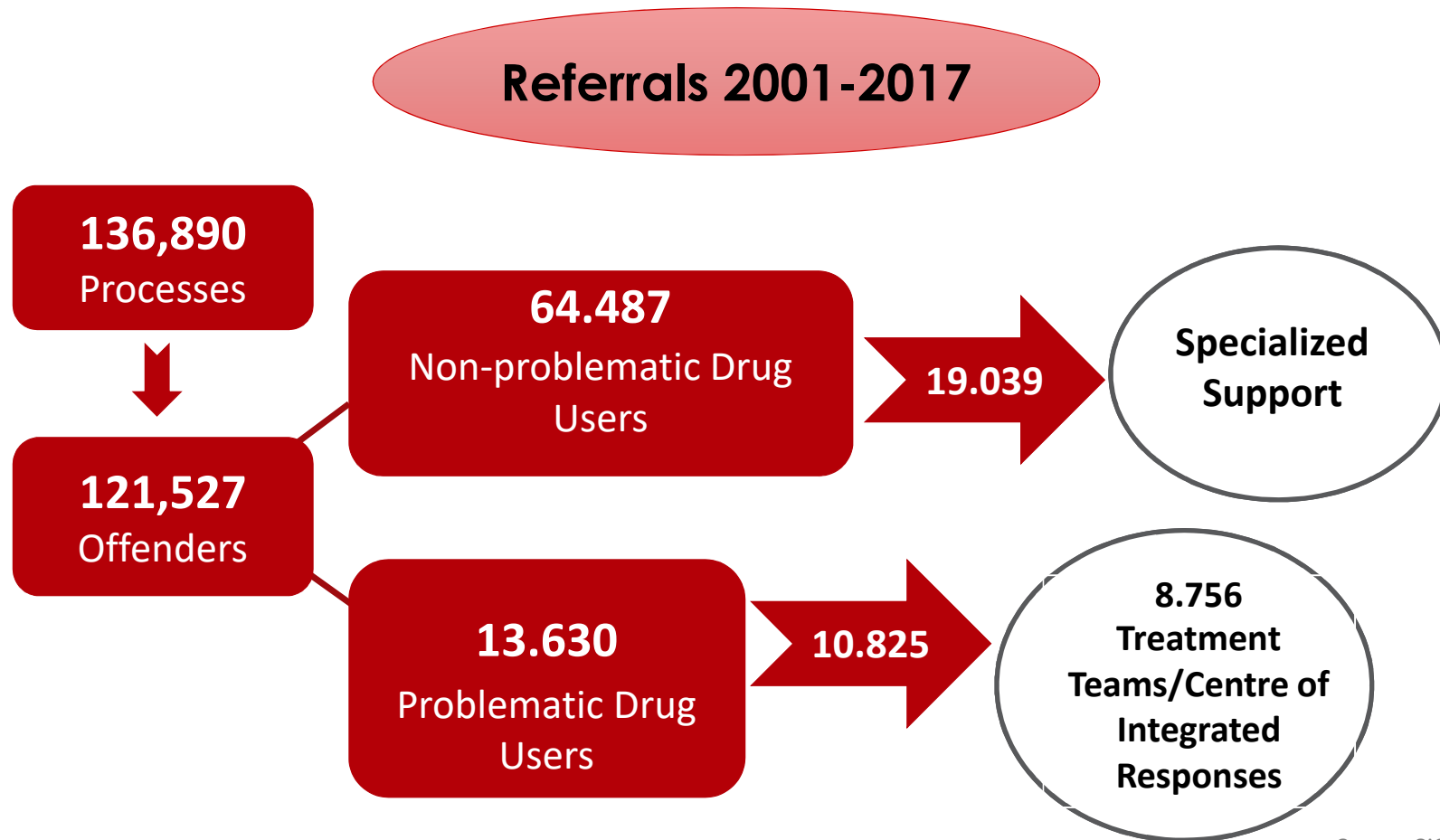
2001 - 2016

Evolution of the Processes and Offenders 2001-2016



Source: SICAD

## Intervention in Dissuasion



Source: SICAD: EMCAD

## Comprehensive public health-oriented approach

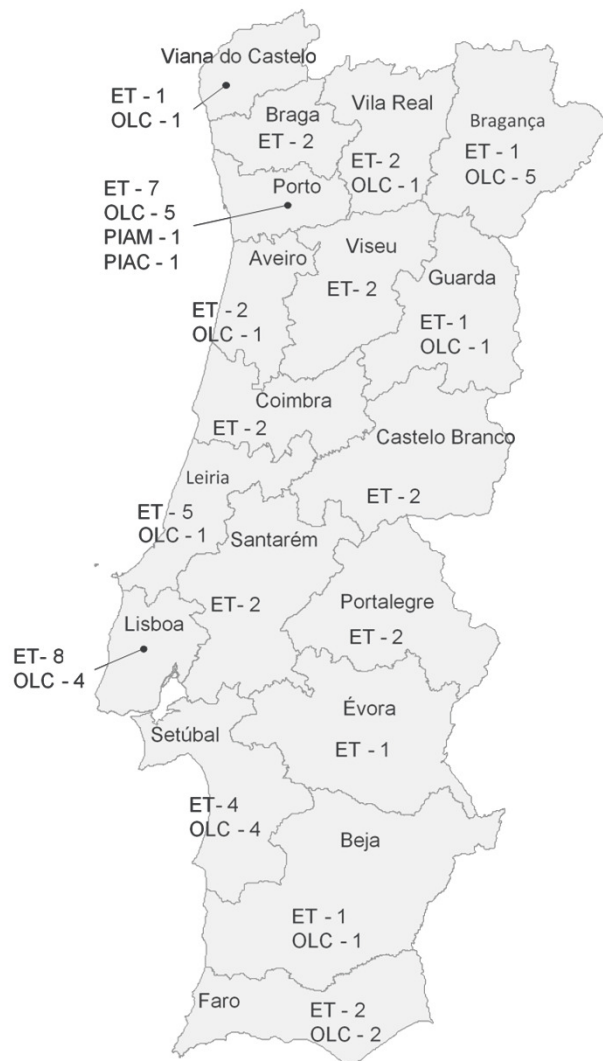


# Treatment



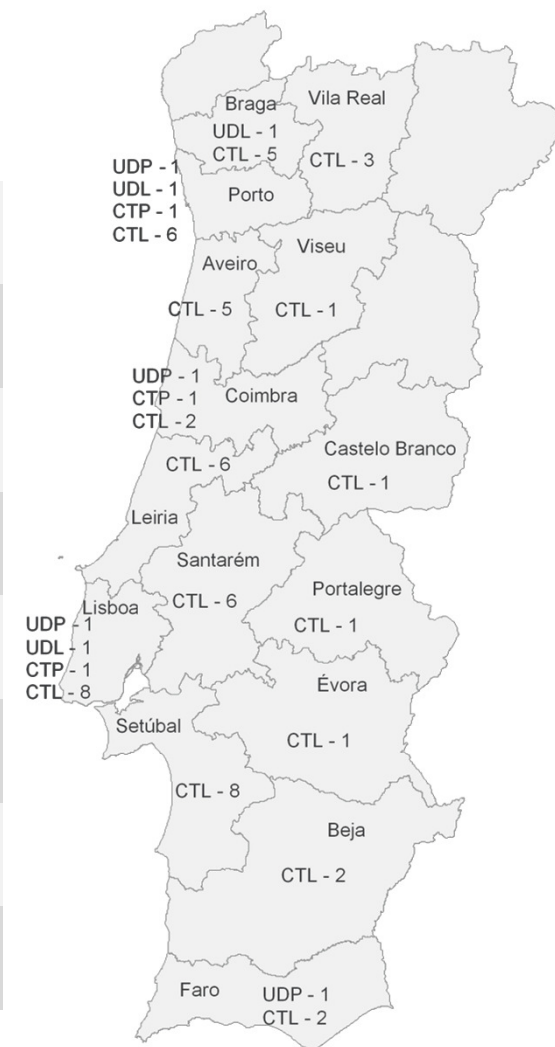
# Treatment

## Public Treatment Network 2016



<b>ET</b>	<b>Specialized Treatment Teams</b>
<b>OLC</b>	<b>Decentralized Consultations</b>
<b>PIAM</b>	<b>Integrated Project Integrated to maternity care</b>
<b>PIAC</b>	<b>Integrated Project for Community Support</b>
<b>UDP</b>	<b>Public Detox Units</b>
<b>UDL</b>	<b>Private Detox Units</b>
<b>CTP</b>	<b>Public Therapeutic Communities</b>
<b>CTL</b>	<b>Private Therapeutic Communities</b>

Sources: ARS/Unidades Licenciadas





# Patients in treatment in the year, new admissions and readmitted - Illicit Substances

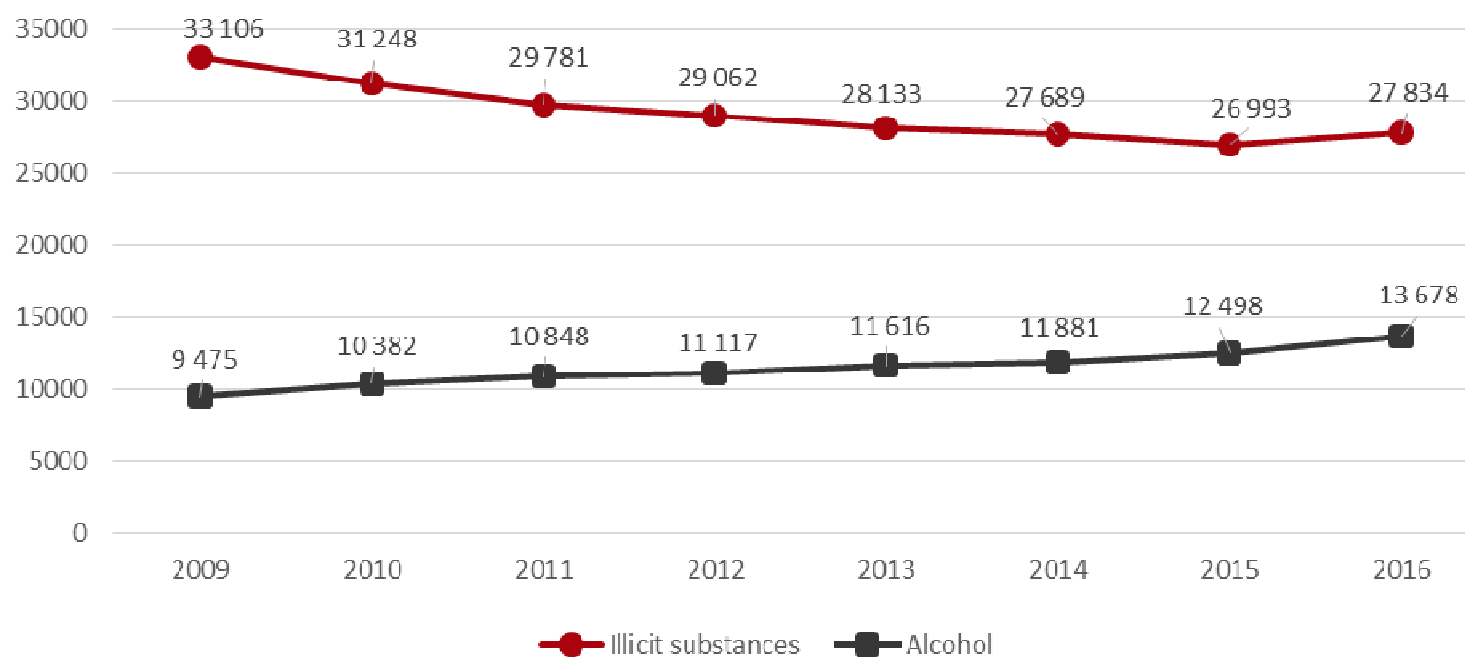
Public Network of Outpatient Services (Portugal Mainland)  
2010 - 2016



Source: ARS/SICAD

## Evolution of n° of patients in treatment in the year - Illicit substances vs Alcohol

Public Network of Outpatient Services (Portugal Mainland)  
2009 - 2016



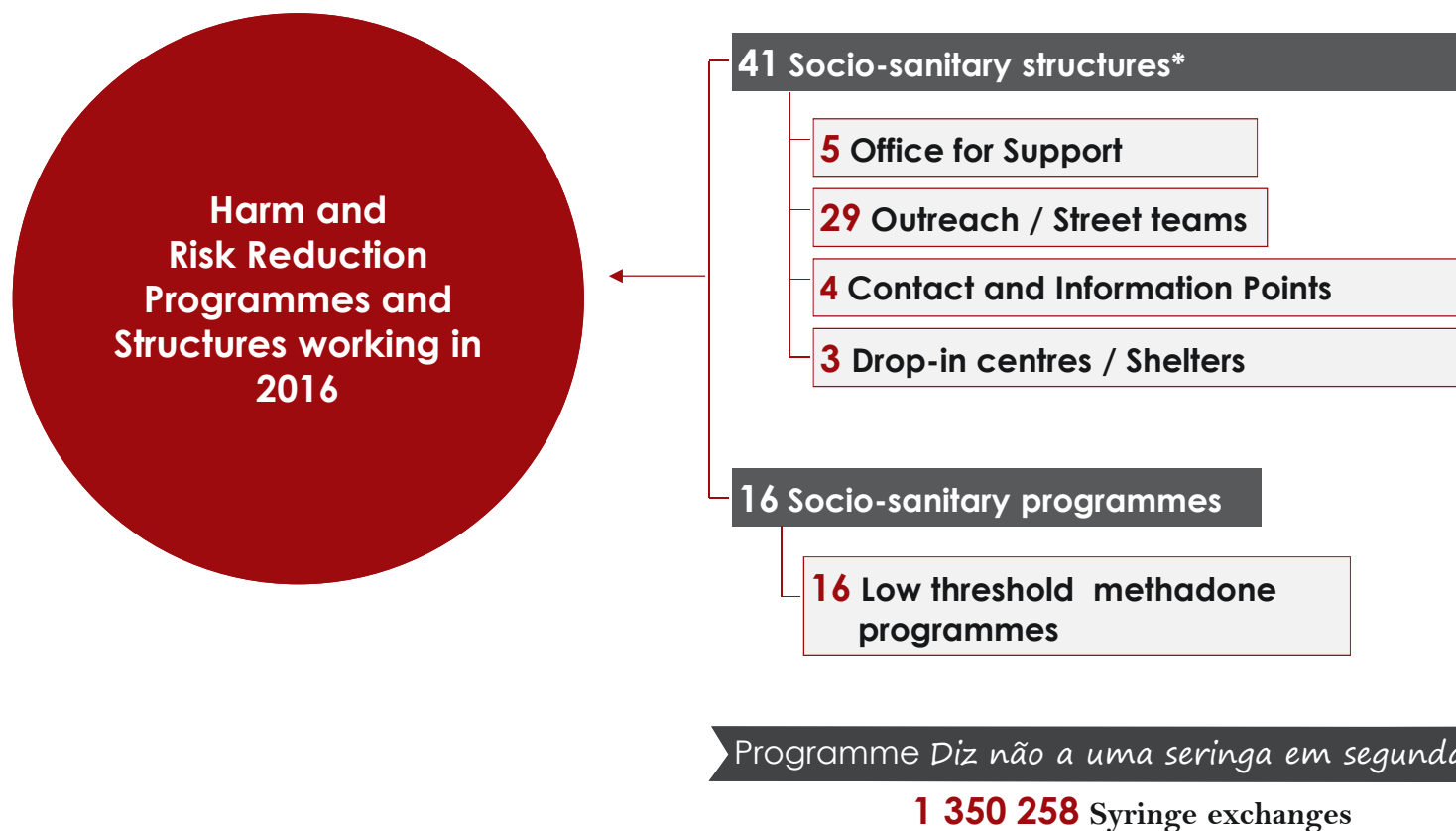
Source: ARS/SICAD

# Harm and Risk Reduction



# Harm and Risk Reduction data

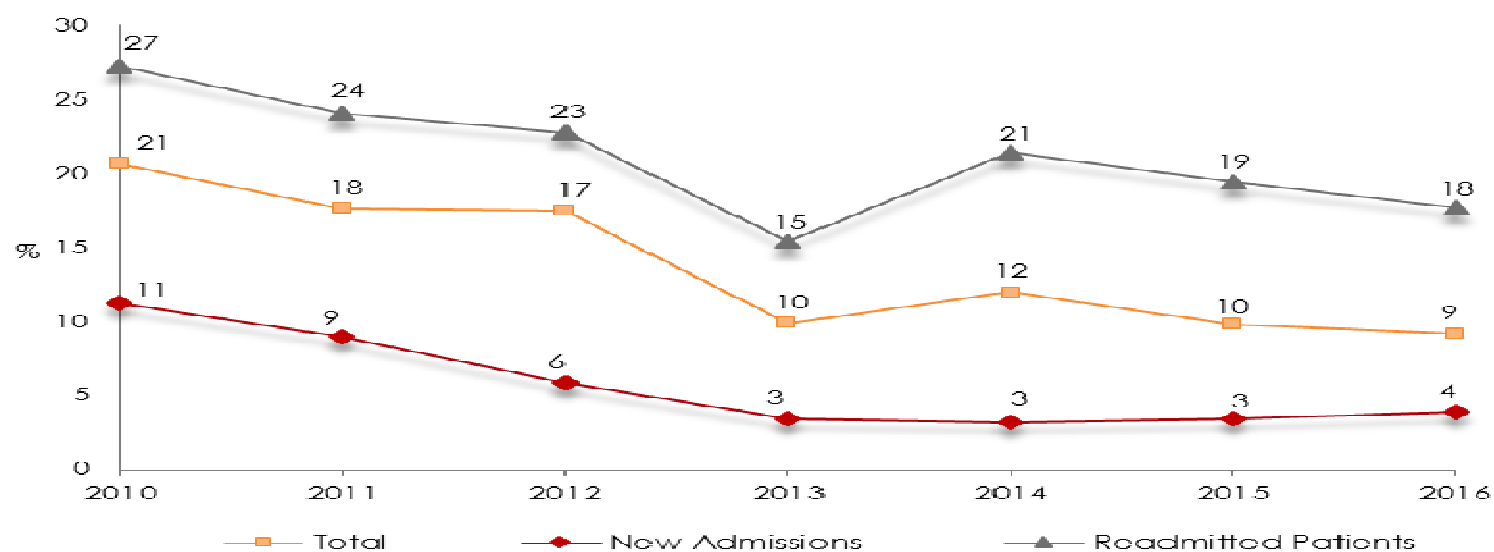
2016



\* In these structures works the National Needle and Syringe Exchange Programme

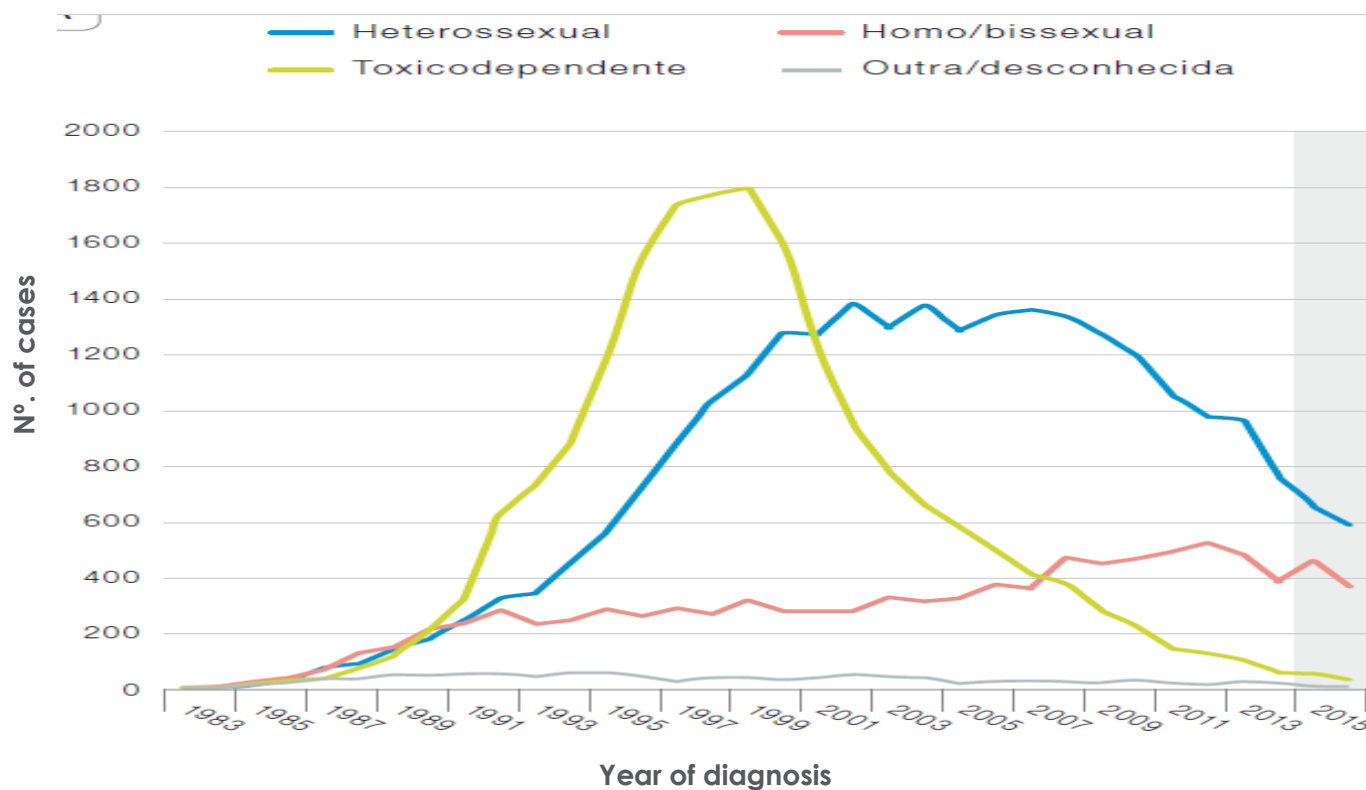
## New admissions: Use of IV route in the past 12 months, by year

### Public Network of Outpatient Services (Portugal Mainland) 2010 - 2016



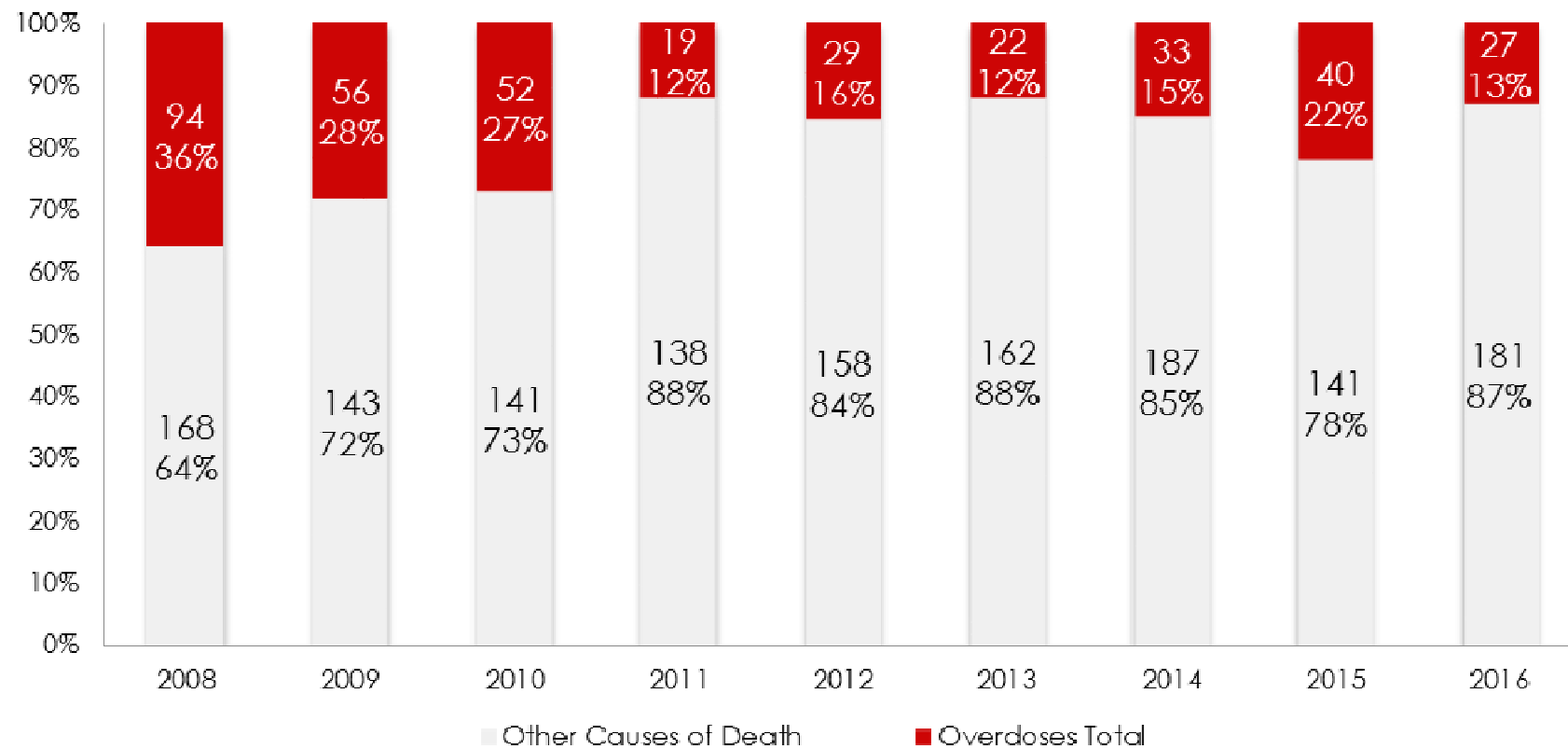
Source: ARS/SICAD

## Diagnose of HIV infection by characteristics of sampled population, Portugal 1983-2015



Source: INSA, IP (2016). Infeção VIH/SIDA: in Portugal a 31 de dezembro de 2014. Lisboa: Instituto Nacional de saúde Doutor Ricardo Jorge, IP

## Reduction of drug-related deaths



Source: SICAD - DEI

# Addictive Behaviours and Dependencies

## NEW CHALLENGES

### New Psychoactive Substances

Indicators show a low level of NPS use in Portugal, but:

increasing number of such substances identified in Europe

trade of NPS via the internet

data from other countries show an increasing use of NPS

### Ageing

Significant group of patients retained in the services, long treatments, failing to achieve autonomy

Age-related diseases emerged, interacting with the original addictive disease => new set of bio-psycho-social problems

Specific programs for these patients: Therapeutic Communities - Long Term Program

Relapses as a consequence of the financial/social crisis



## Trends since 2001

Small increases reported on illicit drug use amongst adults

Reduced burden of drug offenders on the criminal justice system

Reduction in opiate-related deaths and infectious diseases

Increase in the amounts of drugs seized by the authorities

Reduction in illicit drug use among adolescent, since 2003

Reduction in the prevalence of injecting drug use

Reduced stigmatization of drug users

Reduction in the public burden caused by drugs

## CONCLUSION

There is a coherent articulation among  
**ALL THE PORTUGUESE POLICY AND ACTIONS**  
based on the idea that **DRUG USER** is a **PERSON**  
with **health and social needs**  
instead of a  
**“CRIMINAL or a DELIQUENT”**.

Until now, the global drug situation in Portugal seems to have a positive evolution in all the available indicators

## Some ideas to share:

**Scientific consensus** that criminal sanctions are ineffective and counter-productive; they do nothing to address drug use consequences



Nowhere the **International Drug Conventions** require that personal use should be criminalised

**HEALTH PROTECTION  
INSTEAD OF PUNISHMENT**

Drug policies should be based on **health** and not on punishment

# Thank you for your attention!

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