ROME CONSENSUS
TOWARDS A HUMANITARIAN DRUG POLICY

GLOBAL COUNTRY POLICY REVIEW:
A HUMANITARIAN COMPARATIVE ANALYSIS ON DRUG POLICIES, ON THE BASIS OF THE ROME CONSENSUS 2.0

PROGRESS REPORT

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EXECUTIVE OVERVIEW

Project Objectives

This report advances our global understanding of drug policy by focusing on two key components: a bibliometric analysis and the creation of preliminary country profiles. We aim to identify trends, challenges, and opportunities within drug policy globally, emphasizing how these aspects can be better aligned with humanitarian principles, Rome Consensus 2.0, and Sustainable Development. Importantly, as the world has recognized the inability of the War on Drugs as a strategy to reduce drug use or drug-related crime, which is to say, to make us more safe and healthier (the two aims of the War on Drugs), this Project provides a new vision for where nations can go next that achieves the desired public safety and public health aspects all peoples want to see in their own communities and countries.

Methodology

An innovative, breakthrough, rigorous methodology is used for the project that combines bibliometric analysis with a detailed qualitative study of drug policies in several countries. In this case, the bibliometric analysis is understood as a "A bibliometric review of the biomedical literature could be essential in synthesizing evidence if thoroughly conducted and documented. Although very similar to review papers in nature, it slightly differs in synthesizing the data when it comes to providing a pile of evidence from different studies into a single document" (Montazeri, et al., 2023, p.3). This type of analysis provides an overview of the drug policy literature's predominant research trends and themes. At the same time, the country profiles offer specific insights into the implementation and effects of these policies at the national level.

Key Findings

- **Bibliometric Analysis:** The analysis focuses on harm reduction, decriminalization, and addiction treatment, highlighting a shift towards well-being and individual rights. After analyzing a refined sample of 24,917 open research inputs published between 2014-2023, the most mentioned substances are cannabis, alcohol, cocaine, heroin, and methamphetamines.
- **Preliminary Country Profiles:** To date, we have completed profiles for ten countries. This has already revealed some common themes in regard to anti-drug policies that rely mostly on punitive approaches to reducing drug use, which research has repeatedly shown are not effective at reducing drug use or drug-related crime. Other findings so far include the need to be more consistent in implementing harm-reduction strategies, for example. The scarcity of prevention, treatment, and alternatives to incarceration such as deflection and diversion highlights the urgency to reform toward health and human rights-oriented policies.

Preliminary Recommendations

Based on preliminary findings, we recommend a more integrated and evidence-based approach to drug policy. This includes expanding support for harm reduction initiatives, growing treatment and the treatment workforce, fostering international cooperation to address transnational illicit drug-trade challenges, and reevaluating policies that contribute to the stigmatization and marginalization of individuals.

Next Steps

This preview of the Global Policy Review (GPR) highlights the need for drug policy approaches that respect human dignity and the Sustainable Development Goals. GPR will be expanded the review to more UN member states and update it bi-annually

INTRODUCTION

Global Context

Between 2014 and 2023, global drug policies have evolved significantly from a predominantly enforcement-only and stigmatizing stance to an approach focused on protecting human rights and public health. This shift was motivated by the clear realization that previous strategies, focused primarily on law enforcement, had not been effective. This realization was driven by significant socio-political and technological challenges, such as the synthetic opioid crisis, the increased territorial power and cultural influence of Drug Trafficking Organizations (DTOs) a power that was exacerbated following the COVID-19 pandemic and subsequent economic crisis-as well as advances in predictive artificial intelligence models that facilitated the development of New Psychoactive Substances (NPS).

Pertinence of the Rome Consensus 2.0

The Rome Consensus 2.0 (RC2) GPR is the cornerstone of cross-national drug policy comparisons due to its comprehensive approach and evidence-based foundation. This framework is characterized by formulating principles and best practices to guide global drug policy reform, particularly in protecting human rights and human dignity. By highlighting the need to balance the control of substance abuse with the promotion of public health and the quality of life of individuals affected by the war on drugs, the Rome Consensus 2.0 is a critical tool for evaluating and reforming drug policies.

The relevance of the Rome Consensus 2.0 extends beyond its humanitarian principles, encompassing a global reach in its application and evaluation of drug policies. By focusing on improving health and quality of life in areas affected by drug trafficking organizations (DTOs), the problems of abuse of illegalized drugs, and addressing contemporary challenges such as the synthetic opioid crisis and the impact of artificial intelligence on the development of new psychoactive substances, the Consensus provides a framework for effectively and compassionately addressing today's global challenges.

In this sense, the Rome Consensus 2.0 is a standard for comparing drug policies across countries. Also, it stands out for its commitment to improving quality of life through approaches that respect human dignity and promote humane solutions to complex problems. This comprehensive and inclusive approach reflects a paradigm shift towards a more comprehensive, fair, and evidence-based drug policy, marking a step towards achieving sustainable development goals and strengthening social cohesion at the international level.

Objectives of the Global Drug Policy Review

The main objective of the Global Drug Policy Assessment is to periodically monitor and analyze drug policies from a humanitarian perspective. This assessment is an indispensable tool for governments everywhere, as well as policymakers, experts, and citizens. . Its distinctive value lies in its ability to discern which governments align with the RC2 principles and which are not, allowing us to focus efforts on joint initiatives and interaction with those that have yet to adopt these fundamental principles.

Methodology and Approach

For the conduct of bibliometrics and a comprehensive review of drug policy and related literature, this study adheres to the principles of CoARA. Our objective is to periodically monitor drug policy from a humanitarian perspective, using an approach founded on rigor, accessibility, and transparency. This methodological approach ensures the robustness and reliability of our analysis while remaining accessible to a diverse audience of stakeholders. In addition, we are committed to following the principles of open science, openly sharing our data, methods, and findings to enhance the transparency, replicability, and broader impact of our work.

Phases of the Methodology

The study incorporates a multidisciplinary approach that combines quantitative and qualitative analyses, as well as systematic literature reviews, structured in two main phases:

PHASE 1: BIBLIOMETRICS (2014-2023)

Objective and Scope
This phase aims to conduct a comprehensive bibliometric analysis of the evolution in global drug policy from 2014 to 2023, a period marked by significant shifts towards prioritizing human rights and public health over repression and stigmatization. This analysis will illuminate the impact of sociopolitical, technological, and global health challenges on drug policy discourse and practice.

Data Collection and Preparation
Sources: We will implement a systematic search strategy across a variety of open-access academic databases and public policy sources, including Knowmad Research Gateway, ZENODO, Open Aire Explore, UNESCO Digital Library, the United Nations Office on Drugs and Crime websites, SHERLOC (UNODC Case and Legislation Information System). These sources aim to compile an extensive collection of research articles, policy briefs, conference proceedings, and working papers to provide a diverse and comprehensive view of drug policy.

Database Compilation and Cleaning Process: From an initial dataset of 72,616 entries, a meticulous cleaning and preparation process refines this number to 24,912 pertinent entries. This includes a preliminary bibliometric analysis to identify patterns, trends, and networks in the literature, ensuring the dataset's integrity for in-depth analysis.

Analytical Focus
Key Aspects: The analysis concentrated on the annual growth of publications, citation metrics, identification of key contributors, regional research outputs, and prevalent research themes. This multifaceted approach provided a holistic view of the field's evolution and current state.

Tools and Techniques: Software tools such as Orange Data Mining and Python, utilizing libraries like Pandas for data management and Matplotlib for visualization, facilitated a robust quantitative analysis.

Alignment with Humanitarian Goals
The analysis seeks to align with the Rome Consensus 2.0, evaluating how current drug policies reflect its principles of health, equality, non-discrimination, and alternatives to criminalization.

The Rome Consensus 2.0's emphasis on improving health outcomes and quality of life, especially in territories impacted by Drug Trafficking Organizations (DTOs), underscores the urgency of reforming drug policies to address contemporary challenges like the synthetic opioid crisis and the emergence of New Psychoactive Substances (NPS).

This bibliometric analysis provides a valuable framework for understanding the dynamic landscape of global drug policies-related research inputs, offering insights into the shifts towards more humane and evidence-based approaches. By mapping the field's evolution, this phase lays the groundwork for in-depth country-specific policy evaluations in subsequent phases, directly informing recommendations for aligning national drug policies with the Rome Consensus 2.0 and Sustainable Development Goals.

PHASE 2: EVALUATION OF DRUG POLICIES OF UN MEMBER STATES

Data Collection

To ensure a thorough evaluation of drug policies across United Nations member countries, we systematically gathered data from multiple authoritative sources:

- **Drug Legislation:** Comprehensive legislation data were sourced from the SHERLOC (UNODC Case and Legislation Information System), offering insights into the legal frameworks surrounding drug policies.
- **SDG Index:** We utilized the SDG Index to obtain metrics on how countries are performing concerning the Sustainable Development Goals relevant to drug policy. This source provided a standardized benchmark for evaluating countries' progress towards global development objectives.
- **Rome Consensus 2.0:** This pivotal document, outlining best practices and principles for humane drug policy reform, served as a foundational reference for our analysis.
- **Review of Alternatives to Incarceration Efforts Worldwide 2021:** This report provided valuable insights into global initiatives aimed at implementing alternatives to incarceration, essential for assessing the commitment of countries to rehabilitative rather than punitive responses to drug offenses.
- **Country Data UNODC:** We accessed detailed country-specific data from UNODC to understand better each nation's approach to drug policy, including trends, statistics, and policy implementations.

Definition of Variables

- **Harm Reduction Focus:** Measures implemented to minimize the negative effects associated with drug use.
- **Decriminalization:** Existence of laws or policies that shift the focus from criminalization to treatment and rehabilitation.
- **Proportionality of Sentencing:** The extent to which penalties are proportionate to the seriousness of the drug-related offense.
- **Alternatives to Incarceration (ATI):** Alternative punitive measures to prison, such as rehabilitation programs and community service, among others.
- **Access to Appropriate Treatment:** Availability and accessibility of evidence-based treatment programs.
- **Substance Abuse Prevention:** Existence and effectiveness of prevention programs.
- **Community Involvement:** How communities are involved in drug policy formulation and implementation.
- **Alignment with Rome Consensus 2.0:** Level of alignment with Rome Consensus 2.0 principles.
- **Alignment with SDGs 3, 10, 16, 17:** Level of alignment with relevant Sustainable Development Goals.
- **Deflection:** Diversion strategies used by the police and other security forces before arrest, during adjudication, and post-adjudication.

Evaluation and Assignment of Numerical Value (A to I)

A scale of 0 to 5 was used, where:
0 = Meets no criteria
1 = Meets to a lesser extent
3 = Meets to a moderate extent
5 = Meets completely

The evaluation was carried out based on the data collected, and numerical values were assigned according to the degree of compliance with each variable. To calculate the overall country score, all the individual values provided are summed and then divided by the total number of variables evaluated. In this case, there are 9 variables evaluated. The formula would be as follows:

Overall Score = (Sum of individual values) / (Total number of variables)

Example: Overall Score = (0.5 + 0.5 + 1 + 1 + 1 + 1 + 1.5 + 0 + 1 + 0.5) / 9

Analysis

The information collected was analyzed in relation to the country's drug policies, their alignment with the Rome Consensus 2.0, and relevant SDGs. Recommendations were made based on the analysis to promote a more humane and health-based approach to drug policy.

Presentation

Information was presented in a standardized format that includes a country profile, policy analysis matrix, detailed analysis, and recommendations for policy reform in line with the principles of the Rome Consensus 2.0 and the SDGs.

Color palette

0.0: #FC3652 - Bright red
0.5: #F64672 - Pinkish red
1.0: #F15692 - Strong pink
1.5: #EC66B2 - Pale pink
2.0: #D23581 - Purple

2.5: #A65B9E - Medium Purple
3.0: #7A81BB - Lavender blue
3.5: #4E9FD9 - Sky Blue
4.0: #686ACC - Soft blue
4.5: #537EBF - Deep blue
5.0: #69E0A2 - Aqua gre

Recognition of Policy Limitations

An underlying theme of the analysis is the critical examination of existing drug policies' limitations, highlighting the need for reforms that prioritize human development, reduce marginalization, and eliminate poverty exacerbated by current drug control strategies.

Regular Update

Recognizing the dynamic nature of drug policy, we plan to update this analysis and review it every two years. This commitment to regularly updating will allow us to reflect on changes in drug policy and academic literature and ensure our work remains relevant and valuable to stakeholders.

To maximize the impact and accessibility of our work, we will adhere to open science practices. This will include publishing our data and analysis methods to enable replication and scrutiny of our work. We also plan to publish dossiers in English, German, Spanish, Italian, French, and Portuguese, as well as fact sheets and infographics to facilitate understanding and dissemination of our findings (Nisar et al., 2019).

We believe that this methodology will provide a rigorous and accessible analysis of drug policy and its alignment with the Rome Consensus 2.0, and we hope that it will be helpful to a wide range of stakeholders interested in drug policy reform and human dignity.

Ethical Considerations
This study is committed to following best ethical practices, including obtaining informed consent and ensuring the confidentiality of all participants and data (Emanuel et al., 2000).

Commitment to Open Science
To maximize the impact and accessibility of our work, we will adhere to open science practices, including publishing our data and analysis methods to enable replication and scrutiny of our work. In addition, we plan to publish dossiers in English, German, Spanish, Italian, French, and Portuguese, as well as fact sheets and infographics to facilitate the understanding and dissemination of our findings.

Importance of Humanitarian Intervention
In addition, the Rome Consensus 2.0 underscores improving people's health and quality of life in territories controlled by DTOs, positioning drug policy reform as an urgent humanitarian intervention in response to various global challenges.

This methodology provides a solid foundation for a rigorous and accessible drug policy analysis and alignment with the Rome Consensus 2.0. It is expected to be helpful to a wide range of stakeholders interested in drug policy reform and human dignity.

ADVANCES IN DRUG POLICY REVIEW

Phase 1: Brief Overview of Current Progress

The bibliometric analysis has focused on illuminating the evolution of global drug policy and its fields of study from 2014 to 2023, marked by significant shifts towards prioritizing human rights and public health over repression and stigmatization. This analysis has revealed how socio-political, technological, and global health challenges have impacted drug policy discourse and practice.

Data Collection and Preparation: A systematic search strategy was implemented through various open-access academic databases and public policy sources. An initial set of **72,616** research inputs was refined to **24,912** relevant research inputs, including a preliminary bibliometric analysis to identify patterns, trends, and networks in the literature, ensuring the integrity of the dataset for in-depth analysis.

Analysis and Framework: This analysis provides a valuable framework for understanding the dynamic landscape of global drug policy-related research, offering insights into shifts toward more humane and evidence-based approaches. By mapping the evolution of the field, this phase lays the groundwork for detailed country-specific policy assessments in the subsequent phase, directly informing recommendations for aligning national drug policies with the Rome Consensus 2.0 and the Sustainable Development Goals (SDGs).

BIBLIOMETRIC ANALYSIS

The period from 2014 to 2023 represents a crucial stage in the evolution of global drug policy, marked by a paradigm shift from repression and stigmatization to the protection of human rights and public health. A recent report by the Office of the High Commissioner for Human Rights (OHCHR) highlights the need for responsible and progressive regulation of currently illegal drug markets, proposing an approach that prioritizes health, equality, and non-discrimination, along with alternatives to criminalization and punitive measures (HRC, 2023; Zambrano, 2023).

Changes in the sociopolitical and technological landscape have profoundly influenced global drug policy. The proliferation of technology and social network evolution have changed how drugs are discussed and perceived in society (Tzanetakis et al., 2016). In addition, the economic crisis and the COVID-19 pandemic have exacerbated the problems associated with drug use and exposed the shortcomings of current policies (EMCDDA, 2020; UNODC, 2020).

This chapter embarks on a critical bibliometric analysis of these changes to provide a valuable framework for humanitarian reform in drug policy. Through this chapter's quantitative overview of publications in the field, we seek to align with broader humanitarian goals, contributing meaningfully to the discussion and reform of drug policy in line with Rome Consensus 2.0.

The methodology adopted for this bibliometric analysis is rigorous and encompasses multiple dimensions of the scientific field. A consolidated dataset containing selected and cleaned publications has been employed, covering the period from 2014 to 2023. This set was obtained through a rigorous process that included combining based on publication title, updating specific fields such as authors and year of publication, and adding new records, according to APA guidelines (American Psychological Association, 2020).

The analysis focuses on several key aspects, including annual growth of publications, citation analysis, identification of key players, research output by region, and research topics (Donthu et al., 2021; Global Health Research and Policy, n.d.). For quantitative analysis, software tools such as Orange Data Mining and Python were employed, using Pandas libraries for data management and Matplotlib for preliminary visualization (Wang et al., 2022; McKinney, 2010; Hunter, 2007; Donthu et al., 2021).

The Pertinence of Rome Consensus 2.0

The Rome Consensus 2.0 emerges as a landmark in drug policy, articulating best practices and principles and establishing a solid foundation for global drug policy reform. Its evidence-based and humane approach seeks to balance the need to control drug abuse with the protection of human rights and the dignity of those affected by the war on drugs.

Urgency of Humanitarian Intervention

The Rome Consensus 2.0 also emphasizes improving health and quality of life in territories controlled by Drug Trafficking Organizations (DTOs), positioning drug policy reform as an urgent humanitarian intervention in the face of global challenges such as the synthetic opioid crisis and the advancement of Artificial Intelligence in the development of New Psychoactive Substances (NPS).

Recognition of Limitations of Existing Policies

Over time, there has been a growing recognition of the limitations and unintended consequences of many existing drug policies, fueling the urgency for reforms (UNDP, 2016). Drug control policies have left an indelible mark on human development, fueling poverty, marginalization, and exclusion in many cases (UNDP, 2016).

This report outlines the progress made in our ongoing research project on drug policies from a humanitarian perspective. The research methodology is designed to be comprehensive, systematic, and data-driven, adhering to the principles of the Rome Consensus 2.0 and CoARA.

1. Data Preparation

Data has been compiled from various sources into a unified dataset for in-depth analysis. Data cleaning and preparation steps have been rigorously conducted to ensure the quality of the data. The initial total number of preliminary entries before concatenation and cleaning was 72,616. After cleaning, the number of entries that were filtered amounted to 47,704. The dataset we are currently working with, therefore, consists of 24,912 preliminary entries. These represent 24,917 research inputs already filtered, excluding duplicates and incomplete inputs; this sample has inputs of various types and accesses that include in their title, abstract or topics the keywords:

- Drug Policy

- *Política de Drogas*

- *Drogen Politik*

- *Abuso de Drogas*

- Drug Abuse

- *Drogenmissbrauch*

- *Drogenkonsum*

- Drug use

- *Consumo de drogas*

- *Delitos no violentos relacionados con drogas*

- Non-violent drug-related crimes

- *Nicht gewalttätige Drogenkriminalität*

- Harm Reduction

- *Reducción de Daños*

- Schadensminimierung

2. Visualizations and Analyses

2.1 Open Research Inputs Trends.

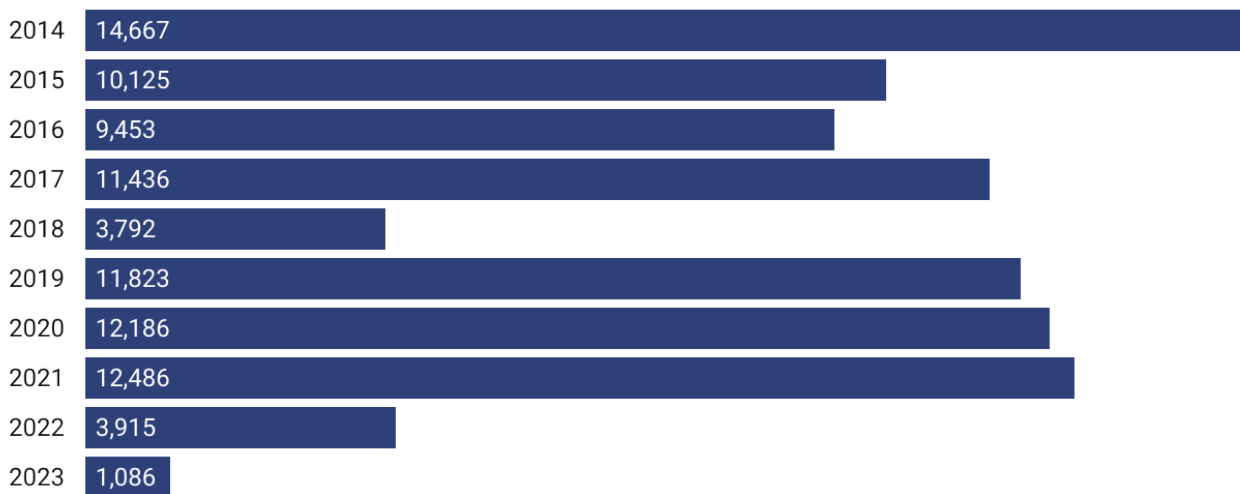| Year	Value
2014	14,667
2015	10,125
2016	9,453
2017	11,436
2018	3,792
2019	11,823
2020	12,186
2021	12,486
2022	3,915
2023	1,086

Figure 1: *Publication trends in the dataset from 2014 to 2023*

The bar chart illustrates the annual publication trends of open research inputs related to global drug policy from 2014 to 2023, revealing significant shifts, with rises and falls, notably in 2018, 2022, and 2023. These fluctuations may reflect the scientific community's response to global events and new research directions. The growing preference for open access plays a crucial role, potentially affecting research availability due to embargoes and the dominance of restricted-access publications, thus influencing observed trends. This summary provides a professional and educational perspective on the evolution of interest and research availability in the drug policy domain. This distribution underscores how publication trends mirror the interplay between academic evolution and global factors, such as embracing open science and significant events. Adopting a holistic view to fully comprehend these dynamics in the drug policy field is vital.

2.2 Sentiment Categories in Document Titles

The sentiment analysis depicted in the pie chart, confined to titles and abstracts, suggests a measured academic tone in most literature on drug policy, with a significant proportion reflecting a neutral stance.
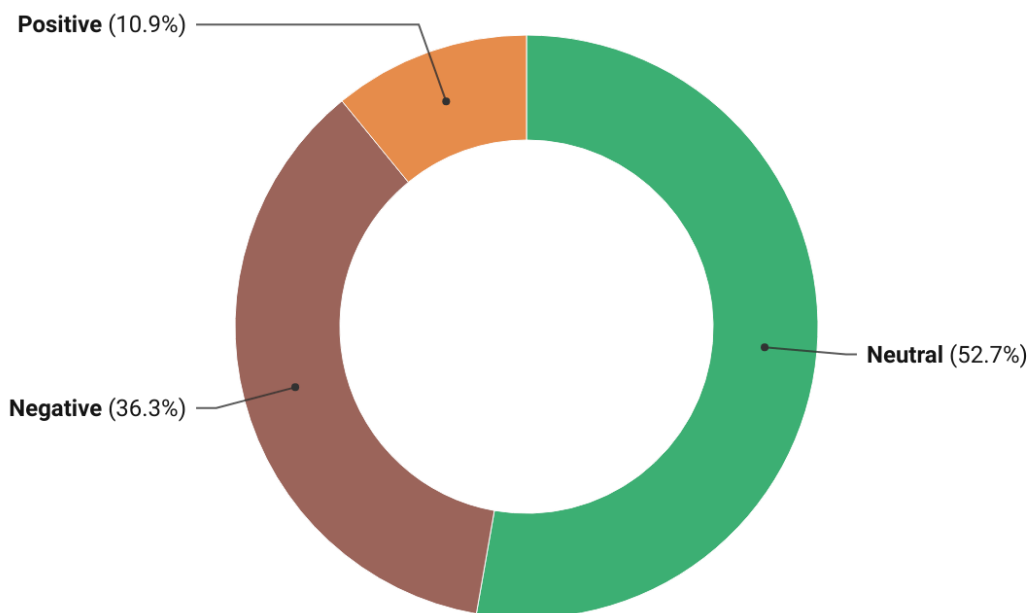

Figure 2: *Sentiment Categories in Document (Sample, 42,898 Research Inputs)*

The prevalence of negative sentiment, over a third of the dataset, likely underscores the scholarly focus on the harmful consequences and critical challenges within the realm of drug policy, echoing the need for reform as advocated by the Rome Consensus 2.0. The modest positive sentiment might indicate a gap in the literature, where successful policy outcomes or progressive initiatives are underrepresented. This analysis, although limited to preliminary research sections, provides a nuanced understanding of the discourse and highlights the necessity for a more balanced representation of drug policy impacts to foster a well-rounded approach to reform.
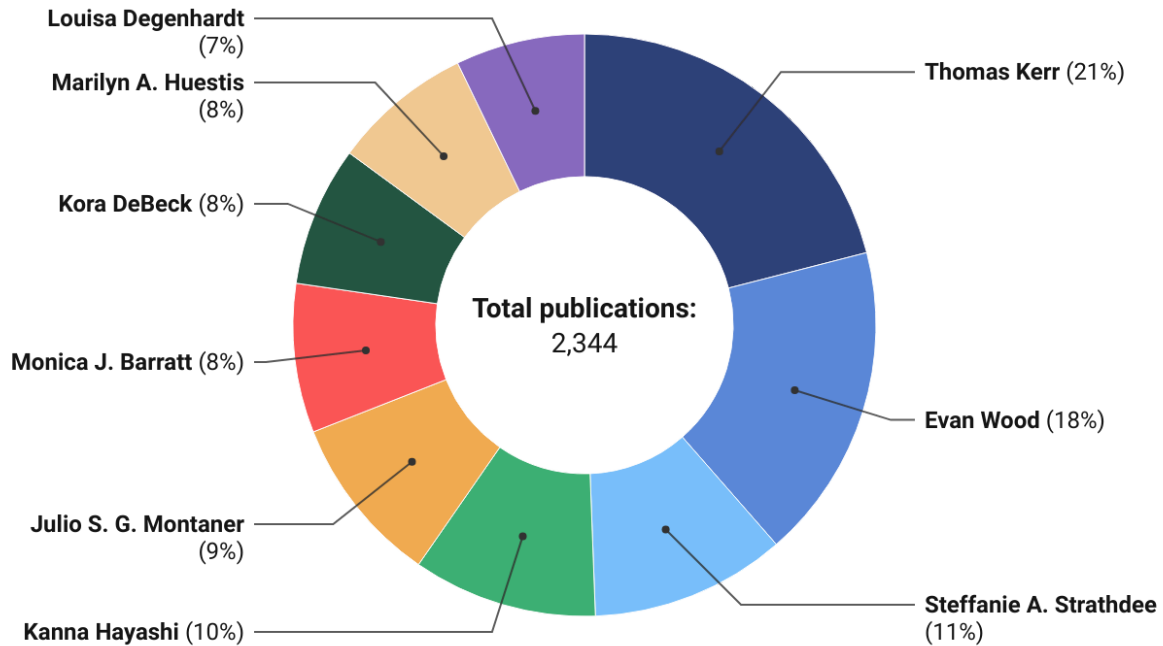
2.3 Top Authors by Number of Publications

Figure 3: *Top Authors by Number of Publications Number of publications between 2014-2023*

The number of publications between 2014 and 2023 reveals their outstanding productivity and contribution to the body of knowledge in their respective fields. These authors are affiliated with highly prestigious academic institutions in core countries, suggesting significant access to research resources, international collaborations, platforms for disseminating their work, and policies folded towards open science in their respective institutions. A detailed analysis based on this information and the authors' affiliations is presented below:

Thomas Kerr - University of British Columbia (UBC)

Country: Canada
Publications in sample: 492
Institution: Public

Within drug policy bibliometric analysis, Thomas Kerr stands out for his prolific contribution, with 492 publications from 2014 to 2023 and over 700 publications in his professional career. His affiliation with the University of British Columbia (UBC) in Canada and his role at the BC Centre on Substance Use underscore his leadership in public health, substance use, harm reduction, and HIV/AIDS research.

Kerr's work is noteworthy, especially in evaluating Insite, North America's first supervised injection facility. Thomas Kerr's profile contributes significantly to drug policy understanding and reform, aligning with the humanitarian and open science principles promoted by prestigious institutions in core countries.

Evan Wood - University of British Columbia (UBC)

Country: Canada
Publications in sample: 412
Institution: Public

Evan Wood is noted for his resilient track record and significant contributions to the field of public health, especially in HIV/AIDS and substance use research. With critical roles at the BC Centre for Excellence in HIV/AIDS and as Canada Research Chair in Addiction Medicine, Wood has been instrumental in influencing HIV treatment guidelines and promoting the implementation of supervised injection facilities. His pioneering, internationally recognized work supports evidence-based policy and improved clinical practice, aligning with humanitarian and open science objectives.

Steffanie A. Strathdee - University of California, San Diego (UCSD)

Country: USA
Publications in sample: 254
Institution: Public

Steffanie A. Strathdee is an infectious disease epidemiologist and distinguished professor at UCSD, with 254 publications in our sample and more than 700 in total. She excels in the study of HIV/AIDS and prevention in underserved populations. Her work includes leading research on HIV risk behavior on the U.S.-Mexico border and innovative efforts in phage therapy to combat multi-drug resistant infections, making a significant impact on global health and drug policy.

Kanna Hayashi - Simon Fraser University (SFU)

Country: Canada
Publications in the sample: 240
Institution: Public

Kanna Hayashi is a leading health researcher focused on public health, drug use, and harm reduction. From Simon Fraser University, in her role as Professor in Substance Use Research, she highlights her leadership in the study and her influence on evidence-based policymaking, contributing to community well-being.

Julio S. G. Montaner - University of British Columbia (UBC)

Country: Canada
Publications in the sample: 220
Institution: Public

In addition to his recognized work in HIV/AIDS, Julio S. G. Montaner has contributed significantly to the field of drug policy, specifically in harm reduction and prevention of HIV transmission among people who use drugs. His comprehensive and evidence-based approach has influenced public health policies worldwide, promoting access to treatment and the implementation of preventive strategies in vulnerable communities. Montaner has played a crucial role in transforming the approach to HIV management, promoting universal access to antiretroviral therapies.

Monica J. Barratt - University of New South Wales (UNSW)

Country: Australia
Publications in the sample: 194
Institution: Public

Monica J. Barratt is noted for her focus on the social and public health implications of digital technologies on illicit and emerging drug use. Her work, including research on online drug markets and the evolution of novel psychoactive substances, helps inform policy change, especially in digital contexts. With a significant track record in integrating digital communities into the policy and research conversation, Barratt drives the adaptation of drug policy towards more informed and humane approaches.

Kora DeBeck - Simon Fraser University (SFU)

Country: Canada
Publications in the sample: 182
Institution: Public

Kora DeBeck, with 182 publications in our sample, is recognized for her work in drug policy and public health, with a particular focus on vulnerable populations and harm reduction. Her position at Simon Fraser University and as a Research Scientist at the BC Centre on Substance Use reflects her dedication to studying the factors that influence the health and well-being of at-risk youth, using longitudinal cohort methodologies to inform and evaluate health and policy interventions.

Marilyn A. Huestis - Thomas Jefferson University

Country: United States
Publications in the sample: 182
Institution: Private

Marilyn A. Huestis excels in the field of toxicology, investigating the effects of illicit drugs on the body and brain, as well as during pregnancy. Her work at the National Institute on Drug Abuse and as an assistant professor at the University of Maryland School of Medicine reflects a deep commitment to the scientific understanding of substance abuse, contributing to essential advances in diagnostics and public health policy.

Louisa Degenhardt - University of New South Wales (UNSW)

Country: Australia
Publications in sample: 168
Institution: Public

Louisa Degenhardt, renowned in drug epidemiology and policy, is noted for her extensive contribution to public health and substance use research. Her work at UNSW and inclusion in the Highly Cited Researchers list reflect her global influence on policy making and understanding of drug epidemiology, contributing significantly to the global understanding of these critical intersections.

Some Considerations:

The interaction between the institutional affiliations of renowned public health and drug policy researchers, along with privileged access to advanced resources and global collaborative networks, is evident. By analyzing in detail the works of authors such as Thomas Kerr, Evan Wood, and Steffanie A. Strathdee, it is revealed that their association with institutions in the global north not only significantly increases their scholarly productivity but also crucially impacts the development of international public policy and clinical practice. Such impact is vital in public health and drug policy areas, where research can reshape prevention, treatment, and harm reduction strategies.

The linkage of these outstanding authors to institutions in the global north highlights the critical role that access to extensive resources, state-of-the-art infrastructure, and international collaborations play in fostering exceptional scholarly productivity. This elite group's contributions profoundly influence academic advancement and the shaping of public policy and clinical practice worldwide, with a particular focus on public health and drug policy. However, the homogeneity in the perspectives and disciplines of these researchers points to a disparity that negatively affects the global south, underscoring the imperative need for greater diversity in research.

2.4 Gender Distribution of Authors

Gender distribution among all authors in our sample is a critical metric for understanding gender diversity in this field.

The data indicate that approximately 81.3% of all authors are male, and 18.6% are female. This suggests a significant gender disparity among researchers contributing to the drug policy literature, with male authors being the predominant group.

The gender distribution among the most prolific authors reveals a female majority at 60%, contrasting with 40% of their male counterparts. This suggests progress toward greater gender diversity at the higher echelons of academic productivity.

Despite the gender balance observed among the most prominent authors, it is crucial to note that the vast majority of publications still emanate from male authors affiliated with institutions from central countries. This underscores the persistence of gender disparities in general authorship and reflects unequal power dynamics and access within the global academic arena.
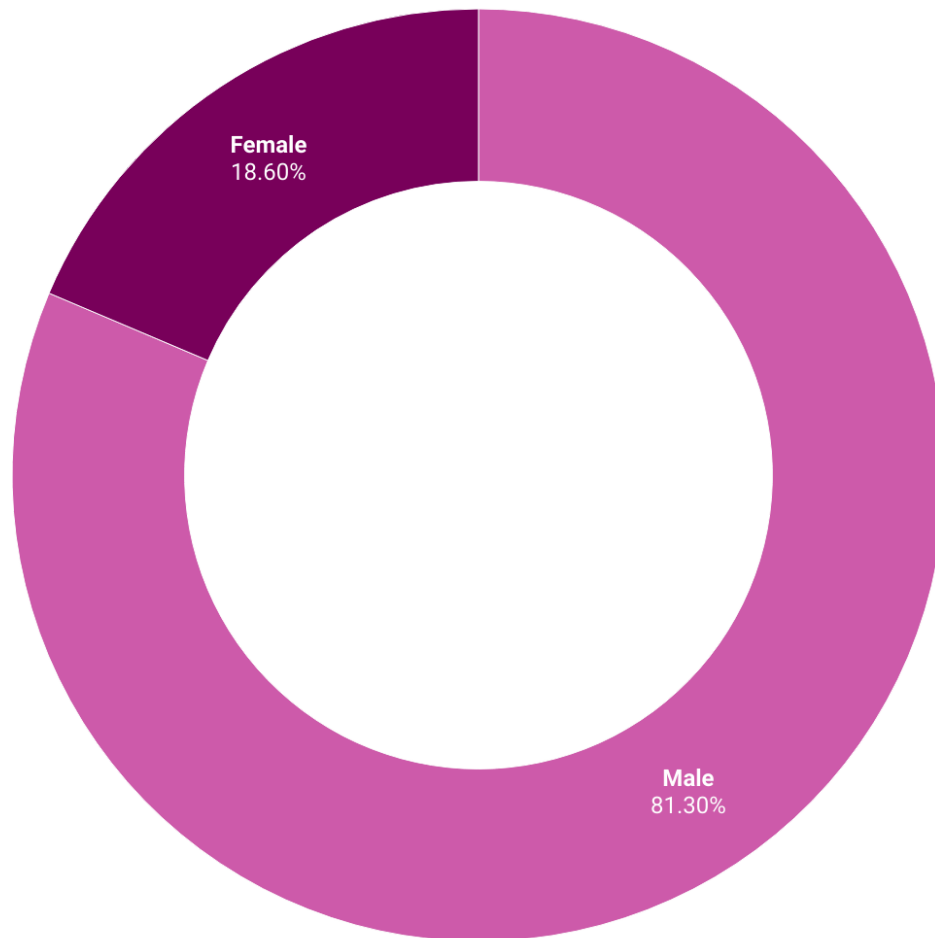
Figure 4: *Gender Distribution of Authors*

The gender distribution data unveils a critical aspect of the academic landscape in drug policy research. They provide insight into the gender dynamics within the academic community and raise questions about the inclusivity and diversity of the field. The significant male predominance in general authorship suggests that there may be systemic barriers or biases affecting the visibility and opportunities for female academics in drug policy research. Conversely, the higher proportion of female authors among the leading contributors could indicate that once these barriers are overcome, female academics can achieve high levels of productivity and impact and be recognized for it.

It is essential to consider these gender dynamics in the broader context of the bibliometric analysis of drug policy, which aligns with the humanitarian goals outlined in the Rome Consensus 2.0. The consensus advocates a drug policy approach prioritizing health, equality, and non-discrimination.

Therefore, the gender distribution of authors in this research field is not merely a metric of academic participation but also reflects the principles of inclusivity and equality that are fundamental to the efforts to reform global drug policy.

2.5 Types of Research Input

The graph below outlines the different types of research inputs that comprise our sample, providing an understanding of the diversity of data.

	Type of Research Input	Number of Inputs	Percentage
1	Publication	20,971	50.60%
2	Article	17,754	42.84%
3	External research report	2	0.00%
4	Part of book or chapter of book	506	1.22%
5	Preprint	188	0.45%
6	Master thesis	165	0.40%
7	Conference object	142	0.34%
8	Doctoral thesis	139	0.34%
9	Lecture	2	0.00%
10	Dataset	130	0.31%
11	Other	1,321	3.19%
12	Thesis	121	0.29%

Figure 5: *Types of Research Input*

A quantitative breakdown of research outputs in our sample indicates a heavy reliance on publications (50.60%) and articles (42.84%) within the dataset, which consists of 24,912 research inputs. This suggests that the majority of research inputs are peer-reviewed materials, which is crucial for ensuring the quality and reliability of the analysis.

The negligible presence of external research reports and lectures, as well as the low percentages of preprints, master's theses, conference objects, doctoral theses, datasets, and other types of theses (consider gray literature according to McKenzie, 2023). This also reflects a potential focus on more formal, closed publication policies, and traditional methods of disseminating academic findings in the field of drug policy research.

This distribution could imply a gap in the inclusion of gray literature or less formal research contributions, which may also hold valuable information on subjects of interest for studying drug policies and their complex and diverse facets at a global level.

These data can serve as a tool to evaluate the current state and historical progression of research related to drug policies. The heavy weighting towards formal publications and articles indicates a field that values the peer-review process and academic rigor. However, it also raises questions about the accessibility of such research to policymakers and the public, given the known barriers to accessing academic literature behind paywalls.

This also supports the call from the Rome Consensus 2.0 for a drug policy reform based on evidence, health, equality, and non-discrimination. The academic community's response to these issues is robust. However, the types of research inputs also point to the need for a diverse range of studies, including more accessible and practice-oriented research outputs such as reports, policy briefs, and open-access datasets, which are currently underrepresented.

2.6 Top 10 Words in Document Titles

The graph illustrates the 10 most frequently occurring words in the document titles, which helps quickly identify key themes and topics.
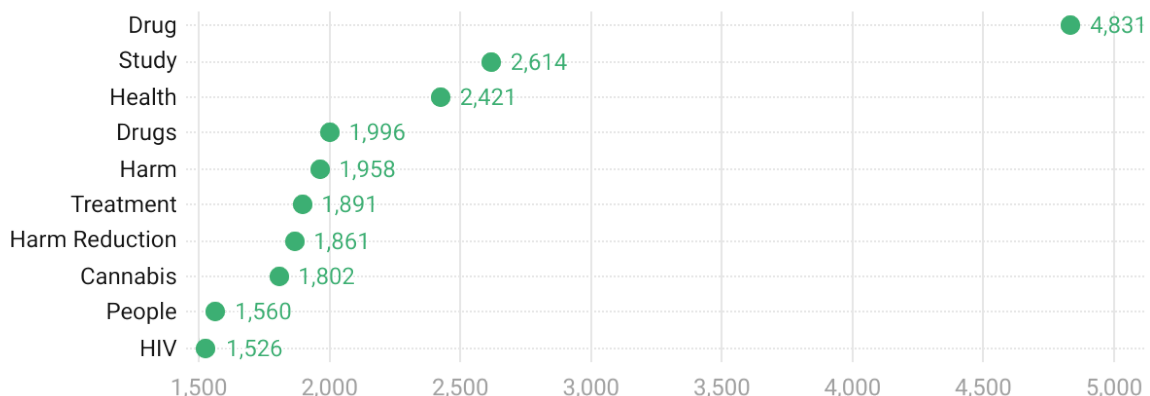

Figure 6: *Top 10 Words in Document Titles*

The "Top 10 Words in Document Titles" provides a concise analysis of trends in the literature on drug policies, reflecting a paradigm shift towards protecting public health and human rights. "Drug," the most prevalent term, underscores the centrality of the substance itself, indicative of an effort to understand and reform current policies. The frequency of "Health" and "Treatment" illustrates a focus on public health and clinical interventions in resonance with the guidelines of the OHCHR.

Attention to "Harm" and "Harm Reduction" highlights minimizing the adverse effects of drug use, a vital component of the Rome Consensus 2.0. The visibility of "Cannabis" suggests an area of intensified interest, possibly due to significant debates and legislative changes. "People" and "HIV" reflect the inclusion of social and health dimensions in drug policy research.

The numerical representation of these terms guides future research, pointing to potentially neglected areas or those requiring greater attention, such as treatment and prevention of HIV in drug use contexts. This analysis demonstrates the direction of evidence-based drug policy, emphasizing the need for a balanced approach that documents progressive and successful strategies in addition to negative aspects.

Figure 6 is a valuable tool for quickly identifying focus areas in current research, allowing policymakers and researchers to adjust or reinforce their initiatives according to these trends. The frequent terms offer an educational perspective that illuminates collective research directions and topics of particular interest, essential for understanding historical trends and projecting future research needs.

2.7 Word Cloud of Frequent Terms

The word cloud represents the most frequently occurring terms in the research inputs. Larger terms indicate higher frequency in titles, which can help identify key focus areas in drug policy analysis and Rome Consensus 2.0.

The word cloud analysis reveals a rich tapestry of focus areas within drug policy research, directly aligned with the humanitarian principles of the Rome Consensus 2.0. The prominence of terms such as **"treatment,"** **"health,"** and **"human"** underscores a significant emphasis on medical care, rehabilitation, and overall well-being. The high frequency of **"cannabis"** and **"alcohol"** points to concentrated discussions and debates around the regulation and legalization of these substances, reflecting current societal and policy challenges.

Phrases and words such as **"human rights"** and **"justice"** as recurrent themes indicate an overarching concern for equity, fairness, and dignity within drug policy. This is consistent with a shift towards a more compassionate and rights-based approach to drug-related issues. Similarly, the presence of other terms such as **"opioid,"** **"harm,"** and **"reduction"** suggests a focus on the opioid crisis and harm reduction strategies, which are critical components of contemporary drug policy reform efforts.

It is also noteworthy that the word cloud contains terms like **"risk,"** **"disorder,"** and **"prevention,"** which could be indicative of a preventative approach to addressing drug-related issues before they escalate into more significant problems. The attention to "policy" and "evidence-based" within the cloud reflects a drive towards informed policymaking that relies on empirical research to guide decisions.

In terms of the research inputs, the sheer number of occurrences for **"treatment" (1793)** and **"health" (2449)** compared to **"cannabis" (1616)** and **"alcohol" (910)** suggests a research landscape that is deeply concerned with addressing the individual and societal impacts of substance use. This implies a commitment to integrating treatment and healthcare perspectives into drug policy, going beyond mere control or punitive measures.

Another finding was the focus on specific substances, such as **"cocaine," "heroin,"** and **"methamphetamine,"** highlighting the ongoing concerns with these drugs and their profound impact on individuals and communities. The frequent mention of these substances suggests that while there is a push towards legalization and regulation of some substances like cannabis, there remains a vigilant focus on the challenges posed by illegal drugs.

2.8 Most Frequent Sources

The distribution of sources and academic journals reveals a diverse and multifaceted landscape in the field of drug policy. However, a critical observation is the lack of broad geographical representation, an important finding that must be addressed.
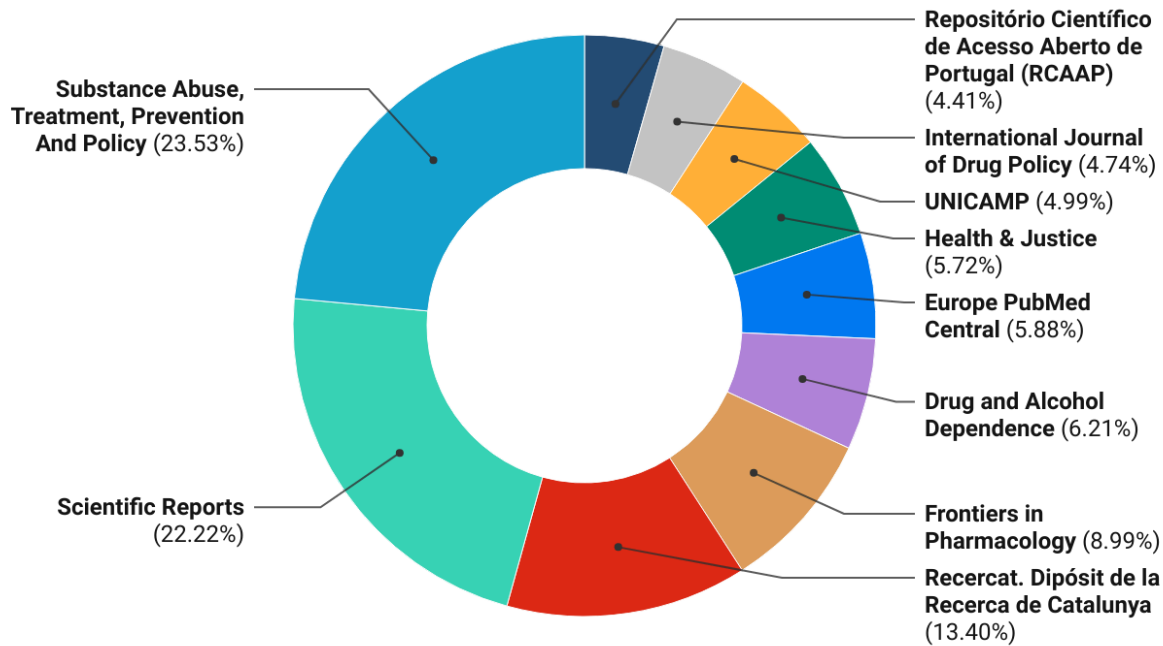

Figure 7: *Most Frequent Sources*

The preponderance of entries in journals such as "Substance Abuse Treatment, Prevention, And Policy" and "Scientific Reports" indicates a concentration of research in specific areas such as substance abuse treatment and prevention and an interdisciplinary approach to drug use. Meanwhile, sources like "Recercat. Dipòsit de la Recerca de Catalunya", and "UNICAMP" highlight the importance of regional contributions and those from Latin America, respectively, enriching the global discussion with unique experiences and contexts.

Nevertheless, the relatively low presence of open-access publications and the underrepresentation of regions outside Europe and North America reaffirm the barriers to disseminating and accessing research. This could be due to a need for more resources or the dominance of restrictive publication policies that do not favor open access. The significance of the Repositório Científico de Acesso Aberto de Portugal (RCAAP) and Europe PubMed Central in the graph underscores the importance of open-access platforms in overcoming these barriers, promoting greater transparency and availability of research.

Therefore, optimizing the publication and dissemination strategy should focus on the following:

1. Improving geographical representation in published research, encouraging and supporting contributions from underrepresented regions.
2. Encouraging the adoption of open-access policies that allow for a broader and more equitable distribution of scientific knowledge.
3. Promoting collaboration and interregional dialogue to integrate diverse perspectives in the formulation of drug policies.

This approach is crucial for equity and inclusion in the academic field. However, it is consistent with the Sustainable Development Goals (SDGs) principles and the Rome Consensus 2.0, which advocate for a humanitarian and evidence-based approach to drug policies.
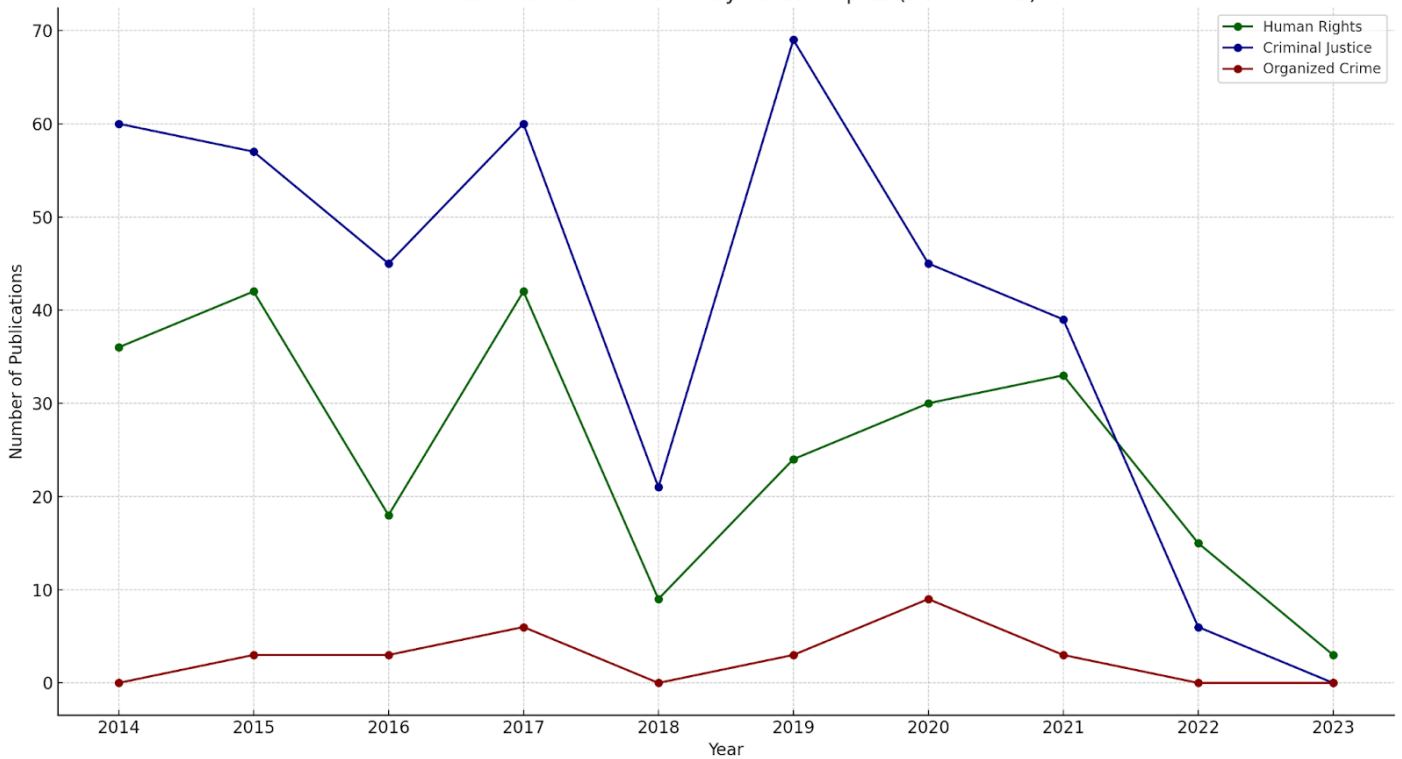
2.9 Miscellaneous

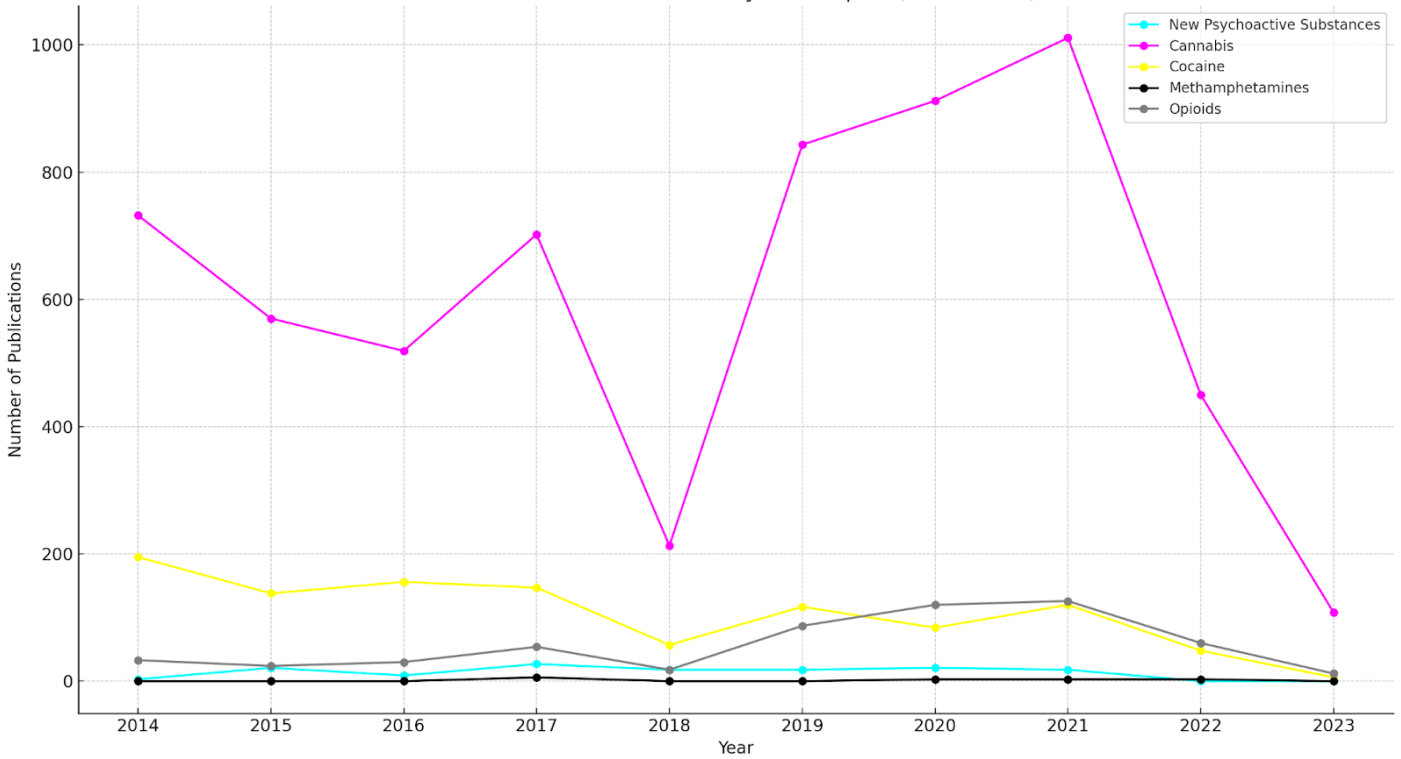Annual Publication Trends by Topic (2014-2023)
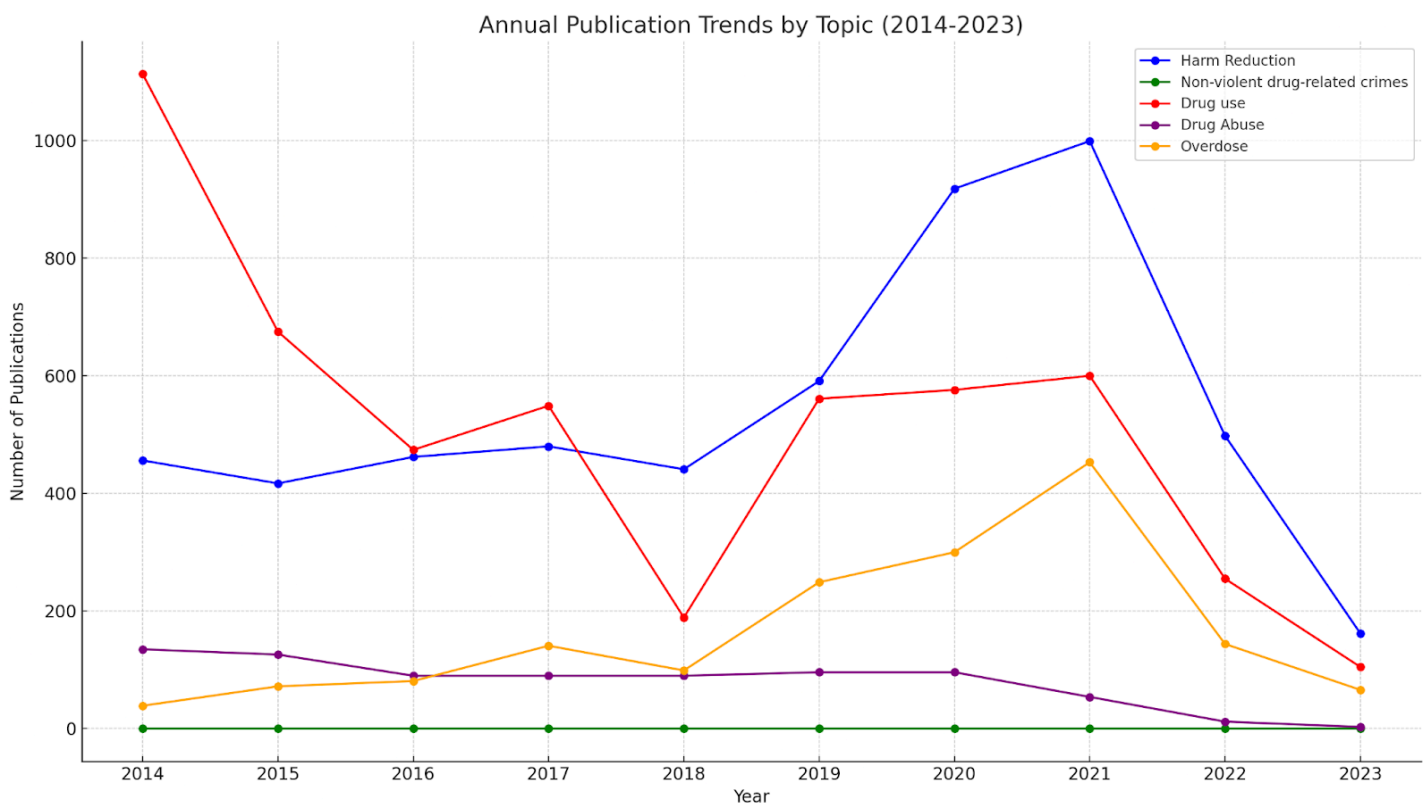
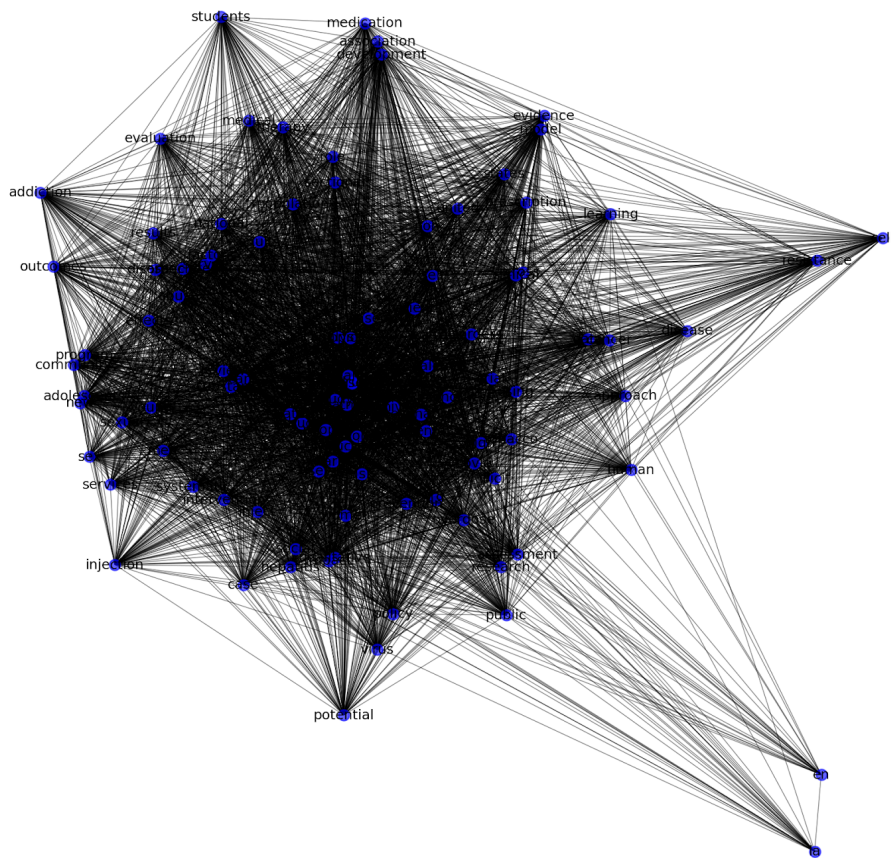Annual Publication Trends by Health-Related Topics (2014-2023)
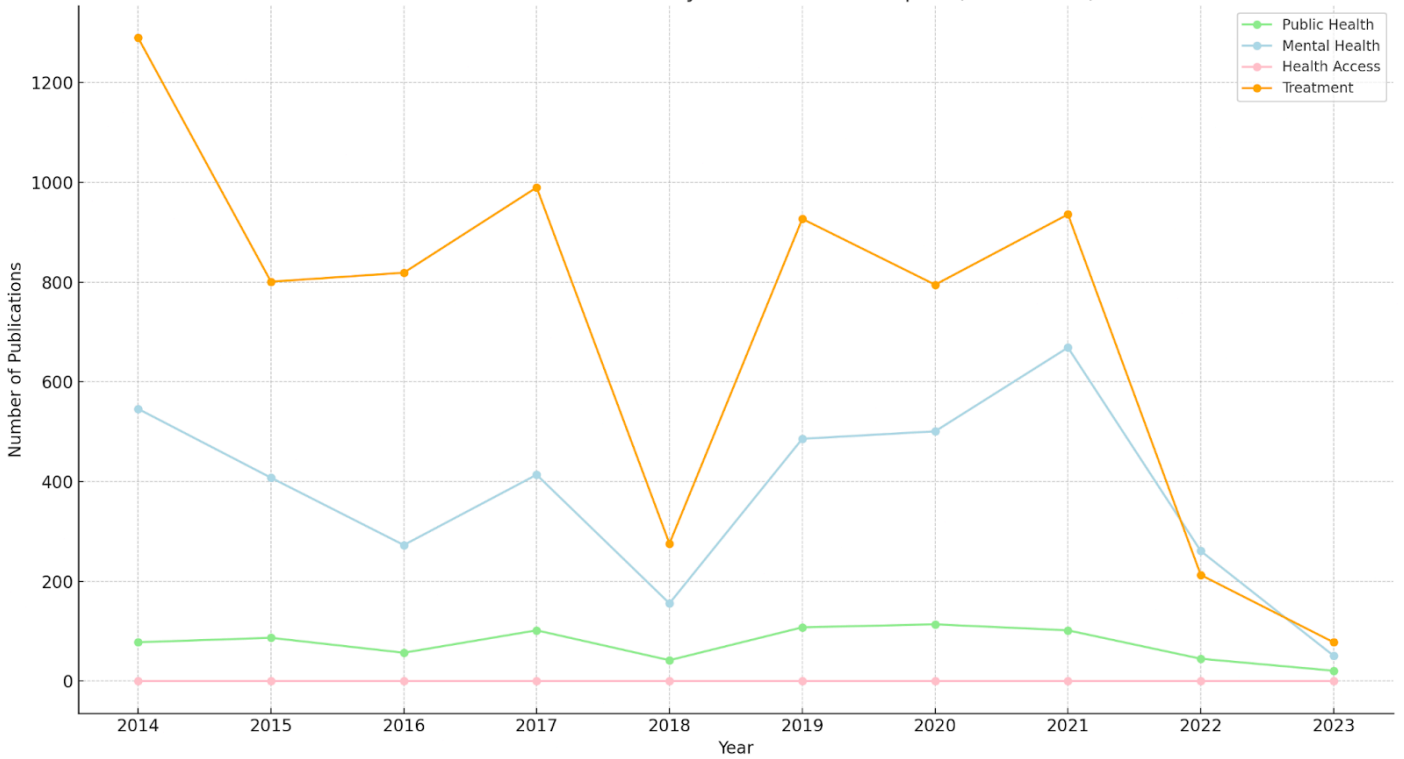
Annual Publication Trends by Latest Topics (2014-2023)

Annual Publication Trends by New Topics (2014-2023)

Co-occurrence Network of Terms in Publication Titles

COUNTRY PROFILES

In this section, we will analyze drug policies in various countries and their alignment with the Rome Consensus 2.0, an international framework that promotes evidence-based policies, human rights, and public health. We observe how different nations address the multidimensional challenge of drugs, adapting strategies such as harm reduction, controlled legalization, and prevention and addiction treatment programs.

Through this comparative analysis, we seek to understand the varied approaches to drugs adopted by countries, assessing their effectiveness, social impact and consistency with the fundamental principles of the Rome Consensus 2.0. In doing so, we aim to contribute to the global dialogue on how to more effectively and compassionately address the challenge of the war on drugs.

General Recommendations

- **Development of Harm Reduction Programs**
  It is imperative to implement harm reduction programs, such as needle exchange and medication-assisted treatment, to minimize the risks associated with drug use.
- **Decriminalization and Deflection**
  It is recommended to review current legislation towards decriminalizing drug possession for personal use and to develop incarceration alternative programs, especially those that include Deflection strategies as alternatives to incarceration.
- **Access to Treatments**
  Establishing accessible, evidence-based treatment and rehabilitation centers free from stigmatizing practices and coercive treatments is crucial.
- **Education and Prevention**
  Educational programs about the risks of drug use should be implemented, and substance abuse prevention in vulnerable communities should be promoted.
- **Strengthening Judicial Institutions**
  Strengthening judicial systems to ensure fair and proportional application of drug laws, aligned with the SDGs and the Rome Consensus 2.0, is fundamental.

National profiles highlight the diversity of approaches in drug policy globally and underscore the importance of aligning these policies with health-based and human rights-based approaches following the Rome Consensus 2.0 and the SDGs.

Methodologies and Future Perspectives

- **Expansion of the Bibliometric Analysis:** Delve deeper into emerging themes, such as the impact of technology on drug policy and decriminalization and harm reduction initiatives. Explore in greater detail emerging trends identified in the preliminary analysis, such as the impact of technology on drug policy and decriminalization and harm reduction initiatives.
- **Transnational Comparison:** Conducting comparative analyses between countries to identify best practices and lessons learned that can be applicable in diverse contexts. This endeavor encompasses both comparative aspects, where direct comparisons are made to find effective strategies and relational dimensions, understanding that interactions between states are characterized by complex interdependence, as outlined by Keohane and Nye (1988). This perspective allows us to appreciate the multifaceted nature of drug policy impacts and the interconnectedness of global efforts in addressing drug-related issues.
- **Integration of Multidisciplinary Perspectives:** Encourage collaborations with experts in various disciplines and the inclusion of voices from affected communities to enrich the analysis. Complete and deepen country profiles, incorporating more detailed analysis of the implementation and effectiveness of specific policies.
- **Transparency and Accessibility:** Continue commitment to open science principles, sharing data, methodologies, and findings openly to facilitate review, replication, and collective knowledge building.
- **Adoption of Emerging Technologies:** Explore using new technologies and data analysis tools to improve data collection, analysis, and visualization of complex information.
- **Ongoing Ethical Review:** Ensure that all future phases of the project are subject to ethical review, especially when sensitive data collection or the participation of vulnerable communities is involved.

For future research, it is crucial to continue and expand the analysis of drug policies, incorporating a greater diversity of contexts and perspectives. It is especially important to deepen the study of innovative policies and their impacts on the health and well-being of communities, as well as on social and economic justice.
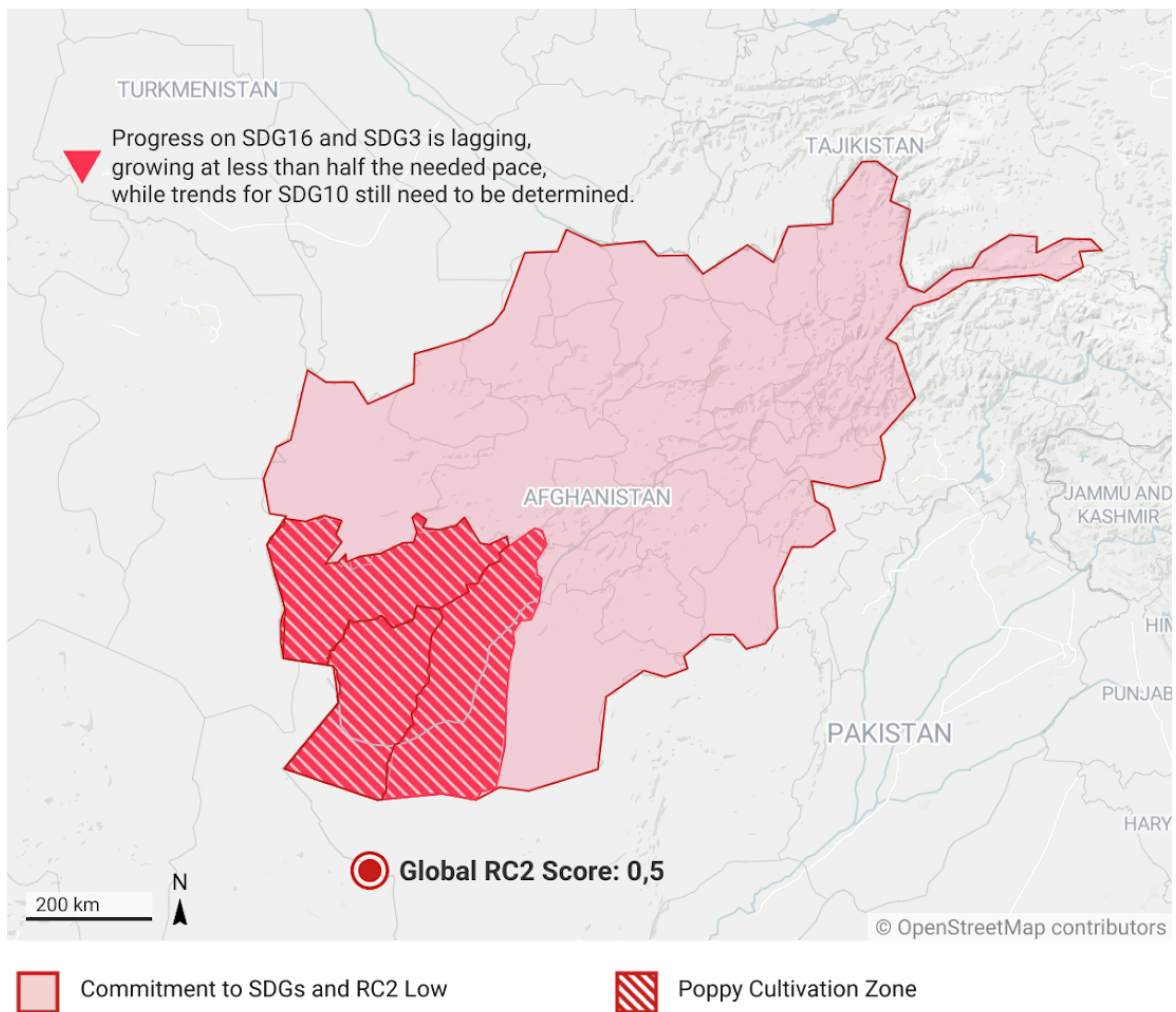
This work is a call to action for researchers, policymakers, health professionals and human rights advocates to collaborate in the development and implementation of drug policies that are just, effective, and respectful of human dignity.

Our examination of drug policies across various countries reveals a spectrum of approaches, from harm reduction strategies to controlled legalization and addiction treatment programs, all in alignment with the principles of the Rome Consensus 2.0. This signifies a paradigm shift in global drug policy towards evidence-based, human rights-respecting, and public health-promoting strategies, guided by the valuable framework provided by the Rome Consensus 2.0.

However, persistent challenges remain, including effective policy implementation, overcoming legal and cultural barriers, and ensuring adequate resources. Ultimately, the overarching goal of these policies is to enhance the well-being of individuals and communities. Maintaining this objective forefront will lead us towards more humanitarian and equitable solutions in our approach to drug policies in the future.

Afghanistan ▼

UN Region: Central and South Asia | This map elucidates the existing drug policy landscape in the Islamic Republic of Afghanistan, highlighting the geographic realms of opium poppy cultivation and framing them within the expansive schema of the United Nations Sustainable Development Goals (SDGs) and the Rome Consensus 2.0 principles. Afghanistan's current drug policies exhibit a tilt towards criminalization, demonstrating an absence of a pronounced emphasis on harm reduction and de-stigmatization of individuals who use drugs. This reflects a misalignment with the health and human rights-centered approaches championed by the Rome Consensus 2.0.

Progress on SDG16 and SDG3 is lagging, growing at less than half the needed pace, while trends for SDG10 still need to be determined.

Global RC2 Score: 0,5

Commitment to SDGs and RC2 Low   Poppy Cultivation Zone
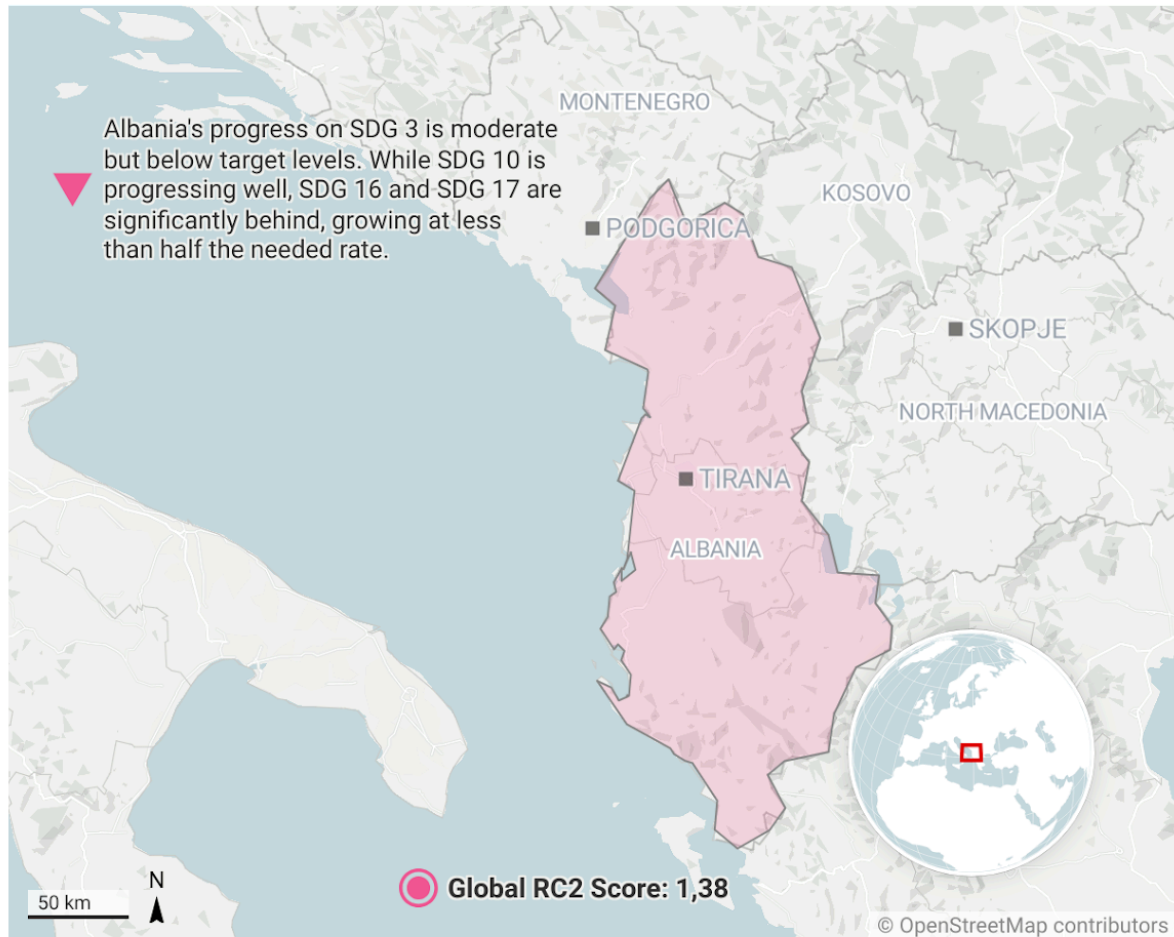
© OpenStreetMap contributors

- The shaded area signifies the poppy cultivation zones as identified by the UNODC in 2022. - Afghanistan ranks 158 out of 166 on the SDG Index, facing substantial challenges across various SDGs, such as health and wellbeing (SDG 3), reducing inequalities (SDG 10), and peace, justice, and strong institutions (SDG 16). - The country's drug policies do not align well with the Rome Consensus 2.0, which promotes a health and human rights-based approach over criminalization. - Recommendations for policy reform encompass the implementation of harm reduction programs, a shift towards decriminalization, the establishment of accessible treatment centers, and the bolstering of judicial institutions to ensure fair and proportional enforcement of drug laws.

Map: Diaz Velasquez, M. I. (2023). RC2 Policy Review 2024 (No. 1) [Map]. Knowmad Institut. • Source: (UNODC / SHERLOC, n.d.), (The Sustainable Development Report , 2023), (UNODC, 2022) • Created with Datawrapper

Variable	Value	Justification
Focus on Harm Reduction	0.5	Afghan laws include some provisions for the treatment of addicts, although the predominant approach is punitive.
Decriminalization	0.5	There is no clear decriminalization; possession and consumption are criminalized with certain provisions for medical treatment.
Proportionality of Penalty	0.5	Penalties are severe and often involve long-term imprisonment, even for non-violent offenses.
Alternatives to Incarceration	0.5	Provisions exist for treatment instead of incarceration for certified addicts.
Access to Adequate Treatments	1	The laws advocate for the establishment and expansion of treatment centers.
Prevention of Substance Abuse	1	The Ministry of Education is assigned the task of including drug-related topics in educational curricula.
Community Involvement	0	Legislation does not specify community involvement in the formulation and implementation of drug policies.
Alignment with Rome Consensus 2.0	0.5	The legal framework does not fully align with the principles of Rome Consensus 2.0 that emphasizes health-based approaches.
Alignment with SDGs 3, 10, 16, 17	0.5	Although efforts exist to establish treatment centers and educational programs, severe penalties may contradict SDGs 10 and 16, perpetuating inequalities and undermining justice.

Albania ▼

UN Region: Eastern Europe and Central Asia | Albania grapples with complex drug-related challenges impacting public health and safety. Its stringent laws, including the Criminal Code, Law No. 108/2013, and Law No. 8750, reflect a strong stance against drug misuse and trafficking. Despite efforts, issues like illegal cannabis cultivation and cocaine networks persist, amplified by Albania's strategic location.

Albania's progress on SDG 3 is moderate but below target levels. While SDG 10 is progressing well, SDG 16 and SDG 17 are significantly behind, growing at less than half the needed rate.

Global RC2 Score: 1,38

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Presence of Drug Trafficking Organizations (DTOs)

Cannabis Cultivation Zone

Commitment to SDGs and RC2 Low

- Albania's drug policy exhibits limited alignment with the health-focused Rome Consensus 2.0, lacking in harm reduction and decriminalization strategies. - SDG evaluation indicates slow progress, especially in health, justice, and partnership goals, necessitating a shift towards more balanced policies. - Recommendations highlight the need for expanded harm reduction initiatives, decriminalization, enhanced treatment access, robust education and prevention programs, judicial reform, economic interventions, and anti-corruption measures.
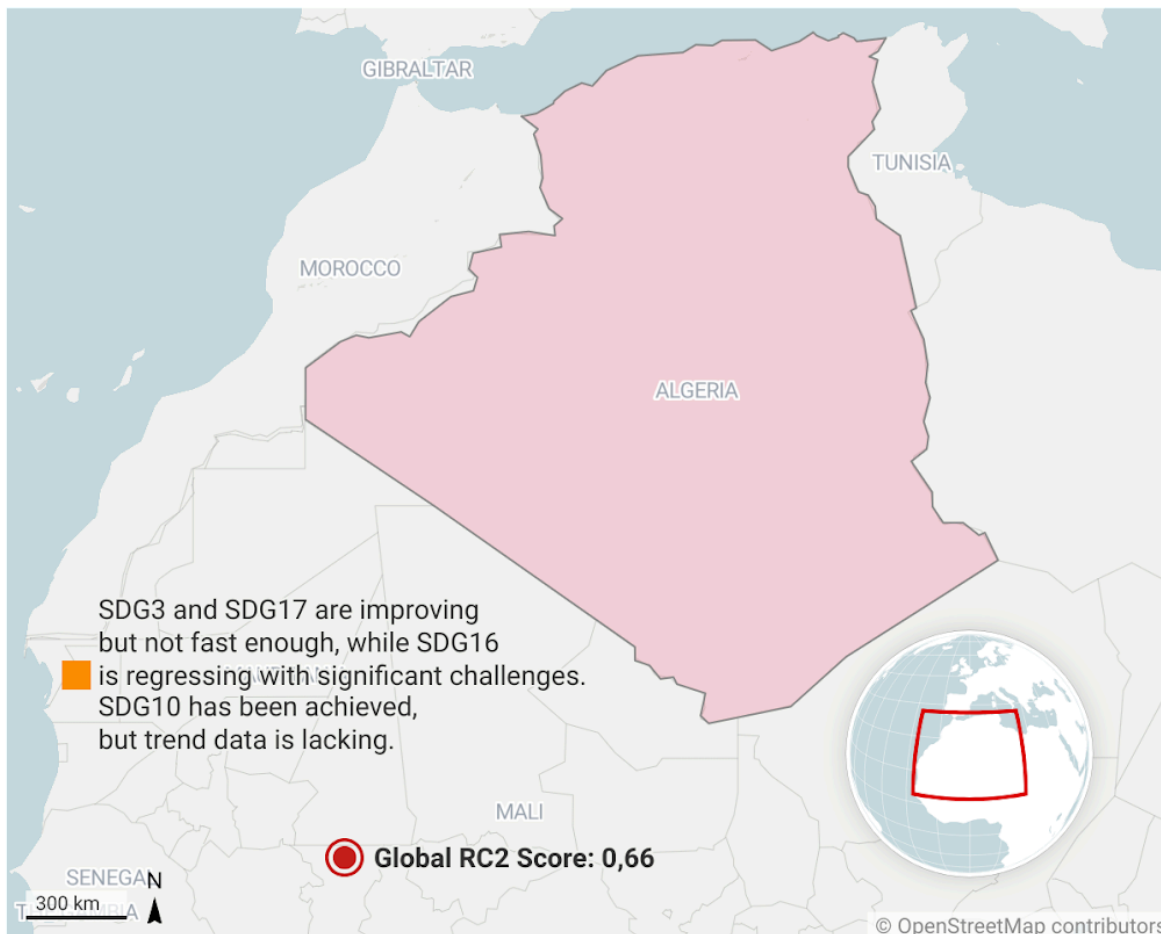
Map: Diaz Velasquez, M. I. (2023). RC2 Policy Review 2023 (No. 2) [Map]. Knowmad Institut. • Source: (UNODC / SHERLOC, n.d.), (The Sustainable Development Report , 2023), ("Organized Crime in the Western Balkans," 2020), (Brnadv & EMCDDA , 2022) • Created with Datawrapper

Variable	Value	Justification
Focus on Harm Reduction	1	Although some treatment policies exist, Albanian laws show a punitive approach without a clear public health or harm reduction strategy such as syringe exchange programs or safe consumption rooms.
Decriminalization	1	There is no clear policy for decriminalization of people who use drugs (PWUD) or for possession for personal use in the legislation, which remains predominantly punitive.
Proportionality of Penalty	1	Penalties for drug-related offenses are severe, including long prison sentences for non-violent offenses, indicating a lack of proportionality.
Alternatives to Incarceration	2	There are some alternative measures such as the protection of collaborators in drug trafficking cases and the possibility of treatment for people suffering from addiction, but these are not widespread as a general policy.
Access to Adequate Treatments	2	Although legislation recognizes the need for treatment, the level of access and quality of treatment programs available for people with problematic drug use is unclear.
Prevention of Substance Abuse	1	There is insufficient evidence of comprehensive and effective prevention programs in the available data.
Community Involvement	1	Community participation in the formulation and implementation of drug policies is neither clear nor established as an essential component in current legislation.
Alignment with Rome Consensus 2.0	1	While there are efforts to address drug trafficking from a security standpoint, there is limited alignment with the health and human rights-based approaches of the Rome Consensus 2.0.

Alignment with SDGs 3, 10, 16, 17	1.5	Current policies could negatively affect the sustainable development goals related to health, inequalities, justice and strong institutions, and partnerships due to their punitive nature.

Algeria ▼

UN Region: North Africa | Algeria's map presents a landscape where stringent drug policies intersect with issues of public health and security. It underscores the nation's legal stance against drug trafficking and abuse, primarily through Law No. 04-18 and various executive decrees that advocate for rigorous enforcement. Algeria's geographical position as a nexus in the Maghreb for illegal substances heading to Europe accentuates the challenges faced in curbing drug transit and addressing substance abuse within its own borders.

SDG3 and SDG17 are improving but not fast enough, while SDG16 is regressing with significant challenges. SDG10 has been achieved, but trend data is lacking.

Global RC2 Score: 0,66

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🌷 Cannabis Trafficking   🛢 Illicit Trafficking of Oil

🔫 Arms Trafficking   🏃 Human Smuggling

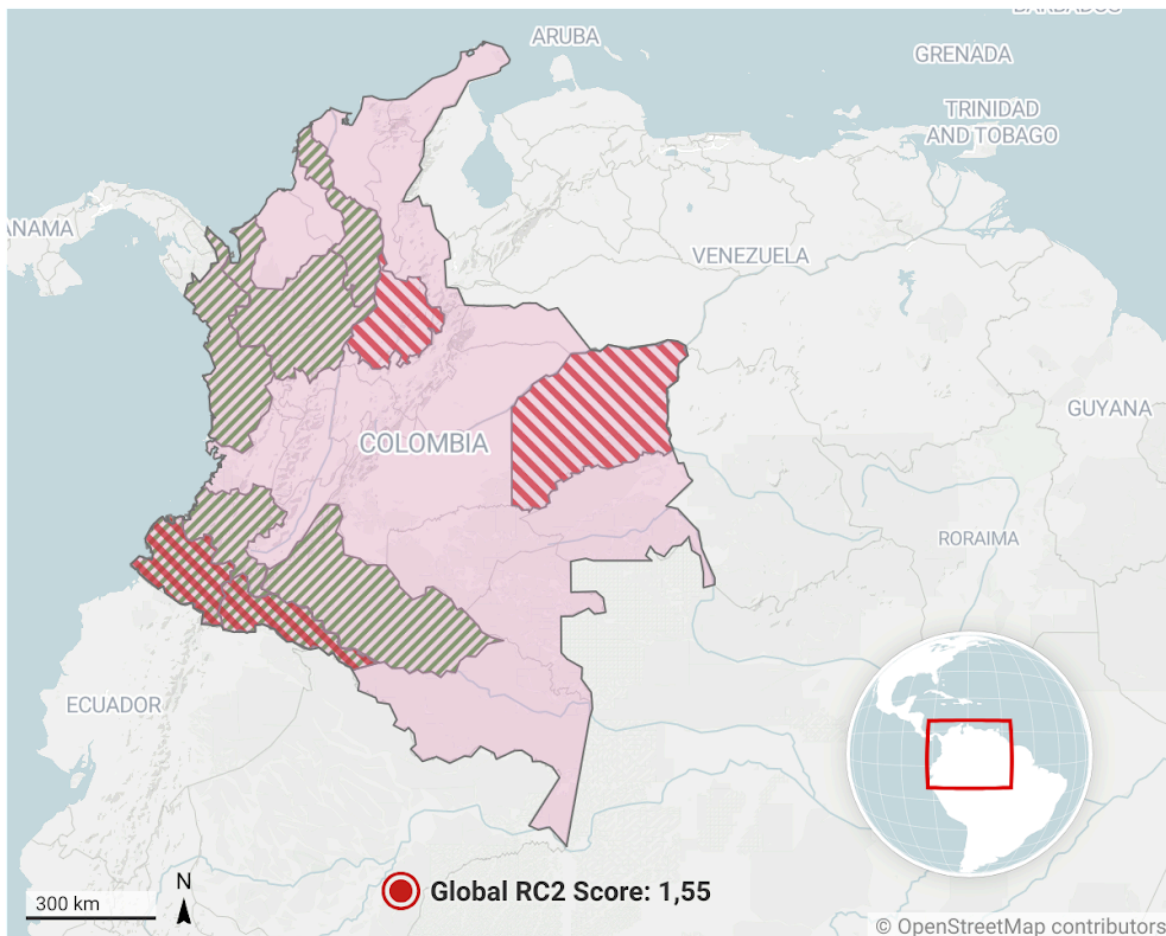🟡 Illicit Gold Trade   ▨ Commitment to SDGs and RC2 Low

- Algeria's approach to drug policy, while comprehensive in its legal instruments, shows a significant lean towards punitive measures, with an evident shortfall in harm reduction and public health strategies. - Ranking 71st out of 166 on the SDG Index with a score of 70.8, the country's policies may impact its progress on several SDGs, notably those related to health (SDG 3), inequality (SDG 10), justice (SDG 16), and international partnerships (SDG 17). - The current framework reveals a dissonance with the Rome Consensus 2.0's emphasis on health-centric and human rights-based approaches, emphasizing the need for a paradigm shift in Algeria's drug policy. - To align more closely with the Rome Consensus 2.0 and SDGs, recommendations include integrating public health perspectives into drug policy, reforming laws to decriminalize personal drug use, enhancing the availability of treatment and rehabilitation services, and fostering international collaboration to adopt best practices in drug policy reform.

Variable	Value	Justification
Focus on Harm Reduction	0.5	Algeria's laws include some provisions for the treatment of addicts, but largely emphasize criminalization over harm reduction strategies.
Decriminalization	0.5	There is no clear policy for the decriminalization of drug possession or consumption for personal use, indicating a predominantly punitive approach.
Proportionality of Penalty	0.5	Penalties for drug-related offenses are severe, with long prison sentences even for non-violent offenses, suggesting a lack of proportionality.
Alternatives to Incarceration	0.5	There are limited alternatives to incarceration, such as compulsory detoxification treatment, but these are not widely implemented as a general policy.
Access to Adequate Treatments	1	Legislation mandates detoxification treatment for certain offenders, yet the overall accessibility and quality of treatment programs are unclear.
Prevention of Substance Abuse	0.5	There is a lack of comprehensive and effective substance abuse prevention programs, with a greater focus on punitive measures.
Community Involvement	0.5	The involvement of the community in the formulation and implementation of drug policies is neither explicit nor appears to be a central component of current legislation.
Alignment with Rome Consensus 2.0	0.5	While there are efforts toward addressing drug issues, there is limited alignment with the health and human rights-based approaches of the Rome Consensus 2.0.
Alignment with SDGs 3, 10, 16, 17	0.5	Algeria's drug policies, with their focus on criminalization, may negatively affect the achievement of SDGs related to health, inequalities, justice, strong institutions, and partnerships.

Colombia ▼

UN Region: South America | The Republic of Colombia's nuanced drug policies are a testament to its complex history as a significant player in the global narcotics trade. While the country has been a battleground against drug-funded illegal organizations, particularly those involving cocaine and marijuana, it also exemplifies a dynamic shift towards balanced, health-oriented drug strategies. Colombia's legal stance is encapsulated in the "Narcotic Drugs Statute" of 1986, showcasing stringent measures against drug-related activities yet acknowledging personal use through legal minimum dosage allowances. This juxtaposition highlights a progressive pivot within a traditionally punitive system, striving for alignment with the Rome Consensus 2.0.

Global RC2 Score: 1,55

- Presence of Drug Trafficking Organizations
- Deforestation caused by illegal crops, 20% Coca Cultivation in Amazon
- Illicit Gold Mining & Trade
- Commitment to SDGs and RC2 Low
- Areas with the highest presence of illegalized crops
- Area with Presence of Paramilitary Groups

- Colombia's drug policy landscape is marked by its commitment to countering trafficking and eradicating illicit crop cultivation, with a notable shift towards decriminalization and harm reduction. - The country's proactive engagement in global drug policy reform, as evidenced by UNGASS 2016, signifies its dedication to evolving towards a more humane approach. - While still punitive, Colombian legislation is gradually integrating principles of health and human rights, reflecting the ongoing policy evolution towards the ideals of the Rome Consensus 2.0. - The SDG Assessment underscores the impact of drug policies on health and well-being, social inequalities, and the justice system, highlighting the need for strategic policy adjustments to better align with global sustainable development standards.

Variable	Value	Justification
Focus on Harm Reduction	1	While the legislation includes prevention and care programs for consumers, it is more focused on the penalization and control of these individuals. It is worth noting the existence of many harm reduction programs promoted by a variety of non-governmental organizations.
Decriminalization	2	The existence of a minimum dose (depending on the drug) that can be carried and consumed, shows the attempts of the Colombian government to decriminalize drug consumption.
Proportionality of Penalty	1	Penalties for drug-related offenses are high, including long prison sentences and elevated penalty fees for non-violent offenses.
Alternatives to Incarceration	2	There are some alternative measures in specific cases. These measures involve house arrest and conditional liberty depending on the quantum of penalty and type of crime.
Access to Adequate Treatments	2	The National Plan for the Promotion of Health, Prevention and Attention to Substance Consumption enhances the quality, opportunity, and access of rehabilitative services for psychoactive drug consumers.
Prevention of Substance Abuse	2	There is insufficient evidence of comprehensive and effective prevention programs in the available data.
Community Involvement	1	Community participation in the formulation and implementation of drug policies is neither clear nor established as an essential component in current legislation.
Alignment with Rome Consensus 2.0	2	Despite the fact that Colombian policies are not yet aligned with Rome Consensus 2.0 objectives, there is evidence of the interest and amp tempts from Colombia to modify its policies according to the Rome Consensus 2.0
Alignment with SDGs 3, 10, 16, 17	1	SDG indicators are increasing at an insufficient rate, staggering, or even decreasing. Despite the attempts of the Colombian government to reach sustainable development

	goals, the indicators do not show significant improvement in the areas listed.

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