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Drug Dealers, Drug Lords and Drug Warriors-cum-Traffickers:

Drug Crime and the Narcotics Market

in Tajikistan

EURASIAN HARM REDUCTION NETWORK

TraCCC

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Eurasian Harm Reduction Network

The Eurasian Harm Reduction Network (EHRN) is a regional network with a mission to promote humane, evidence-based harm reduction approaches to drug use, with the aim of improving health and protecting human rights at the individual, community, and societal level.

EHRN was established in 1997 and currently unites over 350 institutional and individual members from 29 countries of Central and Eastern Europe and Central Asia. Activities of the Network are governed by its Steering Committee. The Network's Secretariat is based in Vilnius, Lithuania.

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Executive Summary

This report presents research on the role played by the police, petty drug dealers and users in the street level drug trade in Tajikistan. Synthesizing information received from interviews with individual Tajik drug users, annual reports from the Tajik Drug Control Agency as well as lesser-known studies by local researchers, the study brings to light a number of interesting details of the street level drug trade in Tajikistan and discusses their implications for drug policies in the region as a whole.

The main findings are:
1) the drug trade is evolving and becoming more mobile whereby cellular communications are used to arrange meetings or direct delivery of drugs to one's home by the dealer in lieu of the previous practice of using specially-designated apartments or homes for the sale/purchase of drugs;
2) there is an emerging tendency amongst dealers to have purchasers transfer money to their bank accounts to facilitate larger drug sales;
3) heroin in Tajikistan is now more widely available, easier to acquire and of higher quality – all of which is consistent with changes in the prices of high purity heroin in the country in recent years;
4) the current situation in those towns bordering Afghanistan indicates a strong correlation between HIV risk behaviors and expanding HIV epidemics among injecting drug users;
5) new types of drugs like pill-form methadone from Iran and cocaine and ecstasy from China and Russia are available on the drug markets in Tajikistan, with the latter becoming especially popular in night clubs frequented by Tajik youth;
6) the Tajik drug market is being connected to drug markets in other countries through new routes between Tajikistan and China, with drugs moving in both directions, and Tajikistan and Iran.

This research likewise illustrates the shocking state of corruption in Tajik law enforcement agencies and penitentiary facilities whereby police and prison officers directly facilitate the distribution of drugs. Law enforcement officials provide (confiscated) heroin to favored dealers, arrest or harass competing dealers and exploit drug users in various ways for the sake of information, money or sexual favors. Drug users are also routinely arrested, often by planting evidence on them, to meet arbitrary quotas, which all but ensures that the activities of larger criminal and drug trafficking organizations will go on unimpeded. Moreover, while the analysis of data from the Tajik Drug Control Agency suggests that the volume of opiates coming to or transiting Tajikistan from Afghanistan might, on the whole, have diminished over the past few years, the reported decrease in opiate seizures appears to be misleading as corruption in law enforcement has kept the country awash in heroin and other drugs. To address these challenges, this study suggests stepping up state prosecution of corrupt police and corrections officers, re-visiting contemporary drug policies through the lens of human rights, introducing policies that discourage targeting and arresting drug users for the purpose of police performance assessment, and providing more harm reduction, drug treatment and legal aid opportunities to people who use drugs both in community and prison settings.

Introduction

While there have been many studies and reports on law enforcement agencies' involvement in the drug trade in Central Asia as well as on general issues of corruption amongst the police, such analyses of the ties between government structures and the illegal narcotics trade are often very generalized and do little to reveal the functioning and mechanisms of the narcotics market in Tajikistan and neighboring countries. Furthermore, while interactions between members of the law enforcement community, the *barygy* (the local slang word for petty drug dealers) and individual drug users form the lynchpin of the drug market as it exists on the street level in Tajikistan and other Central Asian countries, the upperworld-underworld dynamics cannot be fully explained by the competitive nature of their relationships. As this study suggests, "although in some Central Asian countries law enforcement agents may now control a substantial proportion of retail illicit drug trade, they often seem to be willing to co-opt the underworld networks by allowing low-level dealers to engage in this 'unsavoury' business in exchange for handsome 'patronage' fees and information on drug users, whom they can target in order to extort more money or to fulfil arrest quotas.

Overall, the emerging evidence from post-Soviet Central Asian republics supports the conclusions from Nikos Passas' recent study and demonstrates that the borders between the legal and the criminal are "fuzzy" and that the upperworld and underworld actors can operate against, with and for each other, developing antithetical or symbiotic relationships along the legal-illegal continuum. What some of these scholars make clear, however, is the need for more analytical work, solid empirical data and research into the historical circumstances, which underpin the establishment and transformation of upperworld-underworld nexus. For without this, as Passas reminds us, we may not have "the basis on which to build better theories and sound policies" and the tools to collapse "inaccuracies, simplifications, exaggerations and misconceptualizations.""

What makes this study unique is its use of testimonies from individual drug users to confirm and/or supplement existing reports and studies on the drug trade in Tajikistan, particularly those published by the Tajik government and local researchers – neither of which have received much attention from Western researchers and NGOs as of yet. Given the drug users' key role in the drug trade, they can provide researchers with a unique insight regarding certain aspects of the internal workings of the drug market like availability, quality, prices and types of drugs consumed. This study is important not only because of what it tells us about the drug trade and how it might inform drug policy in Tajikistan, but because it has implications for the whole region. The Central Asian countries' territories constitute much of the so-called "Northern Route" over which opiates from Afghanistan are generally believed to transit to Russia and other former-Soviet countries and often further on to Europe. How things stand in the matters of drug control in the Central Asian country that happens to have the longest (and most porous) border with Afghanistan has obvious ramifications for drug markets in cities far from Tajikistan. Moreover, Tajikistan's law enforcement agencies receive from foreign donors substantial financial and technical resources to aid them in the fight against drug trafficking. Therefore, an effective return on that investment depends on independent information from a variety of sources regarding the kinds of problems that exist within these structures.

The Drug Market in Tajik Cities through the Eyes of the Drug User

The General Situation with Drugs

Given the fact that the vast majority of injecting drug users (IDU) in Central Asia are heroin users and taking into consideration the various estimates that exist for the IDU population for four out of the five countries of the region, it can be concluded that no less than a quarter of a million people in Central Asia are regularly using heroin. If we assume that every heroin user consumes about 0.5 grams per day, one can calculate, very roughly, that the volume of domestic demand for heroin in Central Asia may be about 125 kilos per day or about 45.6 tons per year (this figure, however, would be somewhat overestimated, as it assumes that every drug user would consume heroin all year long). In Tajikistan heroin is currently the dominant drug in the illegal drug market. It is also estimated that there are about 25,000 people who inject drugs in Tajikistan. In addition to heroin, some new types of drugs are now appearing in the drug market in Tajikistan. The three in particular that are mentioned in the testimonies of users are methadone, cocaine and ecstasy. According to some respondents, cocaine arrives in Tajikistan from three countries: Russia, China and the Islamic Republic of Iran. It is important to note that the methadone pills that are currently circulating in the Tajik drug market are also alleged to be smuggled in from Iran, and are not from the new substitution therapy programs established by the government. Ecstasy pills are becoming more and more popular at night clubs frequented by Tajik youth, where they fetch a price of about 10 USD per pill. The first mention of ecstasy in Tajikistan was in the Tajik Drug Control Agency's 2006 report, but, according to the UNODC, in November 2010, Tajik police confiscated 1880 pills that were allegedly smuggled in from the Baltic countries via Russia. Interestingly enough, this past May (2011) police arrested a local man from Kulyab who had 500 pills of ecstasy. He told the authorities that he got the pills from an Afghan dealer and brought them to Dushanbe to sell in local night clubs. This raises some important questions about how the Tajik (and Afghan) drug market itself is changing.

This information on the involvement of Afghan citizens in the distribution of ecstasy in Tajikistan has important implications, as do the reports of methadone pills from Iran and cocaine from Iran, China and Russia. While many experts have long expressed worries over the flow of Afghan opiates through Tajikistan to China (where the price of heroin in the neighboring province of Xinjiang is much higher), the aforementioned reports seem to indicate that drugs are traveling in both directions. These bilateral flows should be further investigated.

Obtaining Drugs

Our findings confirm those of other studies regarding Tajik drug consumers' preferences for heroin in its powder form and their desire to obtain it without the use of middle men. Furthermore, our interviews with drug users support the claims of previous studies that users themselves are becoming more involved in the small sale of heroin, often as middlemen, to support their own habit.

Over the last few years, the drug market in certain cities of Tajikistan has become more "mobile". In Dushanbe, for example, the apartment or houses of small dealers are now rarely used as points of purchase. Instead, the emerging tendency is for the dealer and buyer to arrange a meeting by phone, with the venue often being open-air produce, clothing or industrial markets (although hotels, dormitories and street corners are still common too). Dealers prefer more "wholesale" transactions and, in the cases where larger amounts are involved, some buyers, reportedly, may transfer money directly to the dealer's bank account to reduce the risks of arrest. With larger transactions, dealers will sometimes deliver the product straight to the buyers home. As one interviewee explained:

> *It's different how we get drugs now. Dealers' apartments are not used as "points" anymore. These days in Dushanbe, for example, "mobile points" are used – that is, mobile phones are used to agree on a time and place, and the baryga, or a mediator sent by him, drives to the place at the agreed time with the drugs. A lot of times the baryga uses his own car to make the delivery. The barygy try to get people to buy large amounts (of heroin) at one time, since it's less risky and cheaper for them because there are few trips to make. In Dushanbe communication with the dealers is done almost entirely by phone. Home delivery is possible for trusted clients who aren't buying one dose at a time. This is convenient for the baryga, since it means fewer problems with the cops on the street…*

In the areas bordering Afghanistan, the price of heroin and other drugs is much lower than in the capital. For instance, in Kulyab (in the southwest) and Khorog (in the southeast), the price of one dose of poor quality heroin is roughly 1 USD. Nevertheless, poverty is more widespread in these areas, so the tendencies noted above in Dushanbe are not present in the same degree in places like Kulyab, where, according to one user, "it's not common that you can order by phone or get drugs delivered right to your door, because [Kulyabis] are poor, and have a hard time getting money for a dose, which forces them to go to the *baryga*'s place and beg for a "loan" dose."

Our data clearly indicate that heroin is widely available and the most dominant drug in the Kulyab drug market, where its price is very low. This, along with very high prevalence of risky injecting behaviours, does much to explain the fact that HIV prevalence among people who inject drugs [PWID] has increased dramatically in Kulyab, having grown considerably in recent years from 18% in 2007 to 34.5% in 2009. According to a survey of seven cities in Tajikistan conducted in 2009, the level of HIV prevalence among IDUs in Kulyab was the highest in the country.

It is frequently reported that women usually need to proceed through intermediaries and have to pay more as a result. Women drug users are highly exploited and abused by the police, who solicit sexual favors or rape them. While earlier studies among IDUs reported a notable paucity of female respondents in Kulyab (and Khorog), our data also indicates, however, that there are some women involved in street level drug sale in Kulyab.

Price, Types, Availability and Quality

Table 1. Approximate wholesale prices for raw opium and heroin of both high and low purity in **Dushanbe**, by year, for 2005, 2008 and 2009 (in U.S. dollars per 1 kg)

Type of Opiate and Level of Purity	2005	2008	2009
Heroin, high purity	4500–4700	3800–4500	3700–4200
Heroin, low purity	1200–1500	1800–2200	1800–2500
Raw opium	420–450	700–800	450–550

Table 2. Approximate wholesale prices for raw opium and heroin of both high and low purity in the **Khatlon** region, by year, for 2005, 2008 and 2009 (in U.S. dollars per 1 kg)

Type of Opiate and Level of Purity	2005	2008	2009
Heroin, high purity	4000–5000	3000–3500	3000–3500
Heroin, low purity	1000–1300	1500–2000	1500–2000
Raw opium	400–450	300–350	300–350

Table 3. Approximate wholesale prices for raw opium and heroin of both high and low purity in **Gorno-Badakhshan Autonomous Region**, by year, for 2005, 2008 and 2009 (in U.S. dollars per 1 kg)

Type of Opiate and Level of Purity	2005	2008	2009
Heroin, high purity	4000–4500	4000–5000	3000–3500
Heroin, low purity	1000–1300	2000–2700	1300–1500
Raw opium	200–300	200–300	200–300

Table 4. Approximate wholesale prices for raw opium and heroin of both high and low purity in **Soghd**, by year, for 2005, 2008 and 2009 (in U.S. dollars per 1 kg)

Type of Opiate and Level of Purity	2005	2008	2009
Heroin, high purity	6500–15000	7000–8000	6000–8000
Heroin, low purity	2000–6000	4000–4500	3000–4000
Raw opium	700–3000	800–1000	600–800

According to the information that was collected through focus group discussions with drug users in Dushanbe and Kulyab/Khatlon region, we can add that the retail "street" price of high quality heroin in 2005 amounted to 10-15 USD per 1 gram in Dushanbe, 5-7 USD per 1 gram in Kulyab; i.e. about 1.3 - 3 times higher than the wholesale price. From the above table it is clear that over the years in Dushanbe there has been a steady decline in wholesale prices of high-purity heroin, the price of low-purity heroin has risen somewhat, and the price of raw opium increased dramatically in 2008, but then dropped to the price level slightly higher than that of 2005. At the same time, in the Khatlon region, as well as in Dushanbe, the wholesale price of high-purity heroin in 2008 and 2009 was lower than 2005 prices and the price of low-purity heroin has increased. Meanwhile, in 2008 in the Khatlon region, there was no jump in prices for raw opium. In 2008 and then in 2009 they fell below the 2005 prices. In Gorno-Badakhshan Autonomous Oblast the price of high purity heroin in 2009 was also lower than it was in 2005, and the price of low-purity heroin a little higher. The price of raw opium has not changed throughout the time period between 2005 and 2009. The most significant price fluctuations were registered in Soghd, but if we take the lower limit of the price range as the base line, then one can observe the same trend that we see in other regions of the republic: the price of high-purity heroin in 2009 was lower than it was in 2005, while the price of low-purity heroin has risen somewhat.

In this regard, the fact that heroin has become more affordable, cleaner and cheaper, as reported by our respondents, does agree with the trend decline in wholesale prices of high-purity heroin, which is observed by the law enforcement agencies in Tajikistan. Moreover, according to our respondents from Dushanbe, high-purity heroin can be purchased at the average wholesale price of 3000 USD to 4000 USD for a kilogram, which is below the 2005 price as well as that of 2009. This downward trend in prices of high-purity heroin in Tajikistan is consistent with changes that occurred in the Afghan drug market, where average prices for heroin in 2009 were below those of 2006.

The tendency of opiates to increase in availability and the price of high-purity heroin to decline should have great significance for any future studies of the correlation between the amount of opiates seized by law enforcement agencies of Tajikistan and the level of opium production in Afghanistan. This is because local law enforcement experts explain that the sharp decline in seizures of opiates in Tajikistan from 2008-2010 is largely due to three factors: 1) the intensification of law enforcement and security forces in Afghanistan; 2) the increased role of the "Northern Black Sea" ("северочерноморский") route in the transportation of drugs from Afghanistan; and 3) the reduction of opium production in Afghanistan. Taken altogether, these three factors ultimately mean one thing; namely that the volume of opiate seizures in Tajikistan has declined due to the lower total flow of Afghan drugs from Afghanistan to or through Tajikistan.

Such a conclusion, however, seems to directly contradict the price and availability dynamic of opiates that we have documented in our study. After all, according to many of our respondents, heroin in Tajikistan has increased in availability, in addition to being cheaper and easier to acquire. How can we possibly explain this fundamental contradiction? We suggest that the activities of law enforcement have much to do with it.

Law Enforcement Agents' Role in the Street Level Drug Trade

As was pointed out in a study on police corruption in Kyrgyzstan, "members of the law enforcement community not only provide protection to, but are actually replacing drug dealers. Drug users complain that the police force them to buy or sell confiscated drugs. Moreover, "red heroin" [the name given to that which is sold by the law enforcement agents] is not only sold within the domestic market but also exported abroad." As to the role of Tajik law enforcement agencies in the local drug trade, our respondents provided a number of vivid accounts, which largely correspond with the findings of sundry other reports and investigations by international organizations.

As one user explained, **"law enforcement agencies do in fact supervise a 'drug policy' in the country – one where they provide the dealers with heroin."** Oftentimes the police provide protection to their favored dealers while arresting his competitors. Another user disclosed that, "almost all the *barygy* operate in the plain view of police, it is very rare that a *baryga* is selling drugs, and the cops do not know it." With various reasons for 'contacts' between the two, the relationship is almost "contractual":

> *The cops need to meet quotas, which means that they need to arrest people, so the baryga provides a drug user; the cops need money, so the baryga provides a kickback; the cops need more money – so the baryga turns over someone else and he pays; they need drugs to plant on an addict – so the baryga provides some drugs; If the baryga has problems with some other cops, his cops will solve them. If they come looking for information about a drug addict – the baryga will provide it. In other words, the cops are "very" involved in this business.*

Impunity has reached such levels that one interviewee reported how corrupt police officers would come to their favored dealer's home to sit and have lunch. He reported that "When you come to buy, they obviously see everything, and yet you can buy and then leave undisturbed."

One drug user offered the following evaluation:

> *I'd say that 85% of law enforcement is involved in the supply and sale of heroin. There is no way they could buy the kind of fancy cars they ride around in on their salaries. They are taking drugs from the evidence lockers in their departments. They supply the heroin to the dealers, provide them protection, and then arrest the would-be buyers. Sometimes the heroin just circulates like that in one spot. And practically all the police departments in Dushanbe and other cities are involved in this. They say that their Internal Oversight Service catches them, but do they jail them for it? I find that hard to believe – probably they just let them go, or just remove them from their positions... All public officials and employees - from firefighters to staffers [employees of local municipalities] – are involved in the national 'drug policy.'*

Many of the drug users who were interviewed repeatedly cited episodes of police exploitation of people who use drugs. The following is perhaps the most emblematic:

> *I once worked in a hotel as a security guard. I have seen with my own eyes how the police dealt with drug addicts and prostitutes. Addicts are often given heroin to sell, and they used prostitutes to lure in would-be customers and then shook them down for money. If they ever caught female drug addicts, they would demand sexual favors in return for their freedom.*

In the border regions, the corruption can be particularly extreme. In the words of one respondent from Kulyab:

> *Each baryga has a cop-protector and relatives who live near the border and can provide heroin. The police officers that occupy high positions tend to 'catch' those with lower ranks that have their own barygy. There are some barygy who try to operate independently, but they are usually arrested and jailed. In Kulyab the places where you buy drugs are called "offices", where, in addition to the cops, there are also border guards ("officers"), who stand guard outside.*

Who do They Arrest (and not Arrest) and Prosecute for Drugs?

According to a recent overview of the drug situation in Tajikistan in 2010, those who have been arrested for drug-related crimes (or, more precisely, on suspicion of having committed drug-related crimes) tend to be over the age of 30 (67%), and are unemployed (83.8%). Women made up 5.3% of those who were arrested for drug-related crimes in 2010 and accounted for 5.8% of those prosecuted for drug-related crimes. In previous years, the proportion of women prosecuted for drug crimes accounted for 5.8% in 2009, 5.4% in 2008, 10.5% in 2007, 9.1% in 2006 and 8.4% in 2005.

In 2010, 43 foreign nationals were arrested on drug charges, the bulk of whom were the citizens of Afghanistan. Of those prosecuted for drug crimes in 2010, 64.7% were unemployed and not studying. Almost a quarter of the convicted (24.8%) in 2010 had prior convictions. Thirteen percent of those convicted for drug-related crimes in 2010 had a diagnosis of "drug addiction". Previously, the rate was 7.7% in 2009, 17.4% in 2008, 10.9% in 2007 and 8.2% in 2006.

Judging from the ratio of convictions for drug-related crimes to the number of registered drug-related crimes we can see that from 2001 to 2006, 0.93 to 1.49 persons were convicted on average for each identified drug-related crime.

Data regarding the disproportionate ratio of drug-related crime convictions to the number of registered drug-related crimes is a strong evidence of the fact that in most cases the resulting investigation of the crime does not lead to the arrest and prosecution of criminal rings who are behind it. Instead the investigation and prosecution is limited to drug couriers or individual dealers, who are replaced on the streets almost immediately.

There are, of course, occasional cases where large organized crime groups with international connections are dismantled and prosecuted, but such instances are rare exceptions. In any event, as noted in a recent report by the Global Commission on Drug Policy, "even the largest and most successful operations against organized criminals (that take years to plan and implement) have been shown to have, at best, a marginal and short-lived impact on drug prices and availability."

Instead of bringing the organizing elements to justice, law enforcement agencies have often been satisfied to simply arrest and prosecute individual drug users for mere possession. Moreover, many of these arrests occur due to the police planting drugs or other paraphernalia on their targets. As one of the interviewees reported:

> *If the police stop you, even if they can't find anything, they will usually detain and torment you for two or three hours. If you have no relatives [or money], then they will plant something on you and make a quota arrest. [I saw] how they gave another guy two to the head. Afterward he wouldn't take grams, but a kilogram. Also they tried to extort information [from me] about who sells drugs to me. This is not new. An acquaintance drug user of mine had an empty syringe planted on him, and then after a while I found out that he died in jail.*

These arrests are part and parcel of the kind of schemes that were outlined in the above section. **Since the police are so busy running their "own" business, however, they are being distracted from carrying out more intensive investigations of organized crime groups. The fact that many law enforcement agents have direct ties to these groups also presents a major obstacle to stopping their operations.**

Supply, Acquisition and Use of Drugs in Tajik Prisons

The prison population of Tajikistan is estimated to be roughly 10,000 inmates. According to the Office of Correctional Affairs of the Ministry of Justice, the number of prisoners ("special contingent") in Tajikistan dropped from 12,500 in 2005 to 8,000 in 2009. These prisoners are held in 19 prisons, including a facility for juveniles, an institution for women, a central hospital and an institution, where former members of the administrative and law enforcement agencies serve out their terms. In Tajikistan, judging on the basis of visual information presented in the annual reports of the Tajik Drug Control Agency, an average of about 12 thousand crimes (about 14 thousand in 2010) are annually registered, with the proportion of drug-related crimes varying between 5.4% and 6.8%. Over the past three years, from 2008 to 2010, the total number of convicted people per year was 7-8,000 people, of whom 12% -13% were involved in crimes related to drugs. In 2001, however, almost a quarter (24.4%) [of all people sentenced in Tajikistan during that year] had been convicted for drug-related crimes.

In the past five years, the prevalence of HIV infection among inmates in two cities (Dushanbe and Khudjand) in the Republic of Tajikistan was: 6.2% in 2005 and 8.4% in 2006, 6.8% in 2007, 7.8% in 2008, and 8.6% in 2009. This HIV epidemic in prisons is driven by the shared use of unsterile drug equipment. Drugs are widely available in prisons. In fact, selling drugs in penitentiaries may be even safer than on the streets, due to the fact that virtually all the drug trafficking takes place under the auspices of correctional officers and the prison administration.
One former inmate described the situation in the jails up in this way:

> *I was in jail for four years in Dushanbe. In prison it's no problem to get drugs. In prison, it's even easier than on the outside. There is no fear, even if you sell, what are they going to do? They don't add anything to your term. 70% of prisoners use drugs while in jail - that's for sure. There's hashish, marijuana, heroin, opium…They have access through the staff. Employees bring them in and sell them.*

According to another former inmate, however, it was not always like this:

> *I was in jail for long time back in 1992. At that time there were almost no [hard] drugs except opium, which was brought in by the same people who worked there. We smoked marijuana and hashish without any harassment. Now in prison it is all heroin. My friends in prison now use drugs. They say something like 80% of the inmates use heroin there.*

As one might expect, the price of drugs, particularly heroin, are much higher than on the streets.

> *In prison, the price increases by two or three times. When you are in jail, drugs are naturally prohibited, so therefore prices rise. In prison, the same barygy whom they jailed for selling in the first place were the ones selling in there as well. What they did on the outside, they do in prison too. And the staff are their suppliers. They all sell. The barygy get the heroin through the staff, who get their share in turn. Everyone knows everything, yet they don't say anything. And then they distribute it throughout the prison. Any drug can be purchased in jail – heroin, marijuana and pills. It kind of feels like everybody is involved in drug business, both in community and prison settings. I can't give facts, but I think so. Because everything is available, everybody knows about it, but silent. Even when overdoses occur, they shut up. Everyone knows…*

One curious phenomenon was that some former inmates noted the presence of certain religious figures in the prisons who maintained a strict moral command over the other prisoners. As they were concerned about all the overdosing, they effectively banned the intravenous use of heroin, which was observed by the prisoners.

Thus it seems that the contemporary Central Asian prisons often turn into "narco-zones" (with 'zone' being a Russian slang for prison), where the situation is completely inverted in terms of the roles of the players involved: the prison administration controls the delivery of drugs and is interested in stimulating the demand for drugs among prisoners, whereas the informal community leaders, who are traditionally regarded as "criminals", prohibit the consumption of "hard" drugs and more dangerous injecting practices of drug use in an effort to prevent overdose deaths and promote healthy lifestyles and religious-spiritual cleanliness.

Concluding Remarks and Recommendations

1 This study suggests that *barygy* play an important role on the Tajik drug markets, enabling drug users' access to drugs and serving as a link between drug users and wholesalers. At the same time, many *barygy* use drugs themselves. It is therefore recommended, as this has been implemented in Switzerland, to target them with opioid substitution therapy, which may have multiple effects both on the drug market in general and on the lives of petty drug users/dealers.

2 Given the enduring abuses of people who use drugs by the police and the latter's use of *barygy* to enrich themselves through the drug trade, it is recommended that law enforcement agencies consider engaging with the *barygy* and financially rewarding them to expose and condemn law enforcement agents who have turned from drug fighters to drug dealers.

3 While resolving the problem of corruption of law enforcement agencies may not be feasible in short-term perspective, some action is urgently needed to address the issue of unjustified imprisonment of drug users and all the abuses that stem from it in Tajikistan, in an attempt to somewhat mitigate the consequences of this injustice. It is recommended that drug treatment by court order be made an alternative to incarceration. In addition, it is recommended that the practices of considering arrests of drug users as "results" be prohibited and police operations be redirected to arresting larger players in the drug market. Furthermore, in light of police abuse of female drug users in Tajikistan it is recommended that the government works out special mechanisms that would allow women drug users who have been abused by law enforcement officials to report such cases without fear or risk of re-abuse, and that would ensure punishment of offenders.

4 As it has recently been suggested by Sarang and her colleagues, law enforcement practices, such as the ones documented by this study in Tajikistan, "generate an atmosphere of fear and terror… contribute to the reproduction and experience of stigma, and linked to this, a sense of fatalistic acceptance of risk, which may become crucial in shaping health behavior, including HIV prevention." Their excellent analysis of policing practices, coupled with the findings of our study, leads us to conclude that there is a growing body of evidence calling for a global drug policy reform. In the words of the authors of the above quote, this reform "may require fundamental structural change toward establishing legal protection of citizenship and human rights."

5 While the findings of our study clearly indicate that drug use may be widespread in Tajik penitentiary facilities, the national penitentiary authorities have so far been very slow and reluctant in recognizing this phenomenon. Against the backdrop of state officials' unwillingness to admit drug use in prisons, former inmates report that "it is far more difficult to find a syringe there [in prisons] than heroin…" At the same time, the prevalence rates of HIV and other blood-borne infections among inmates in Tajik correctional facilities are highly alarming. It is therefore recommended that needle and syringe programs, opioid substitution therapy and other

harm reduction and drug treatment interventions are introduced in Tajik penitentiary facilities as urgently and widely as possible. The introduction of opioid substitution therapy may also have other positive effects in Tajik prisons, including: reducing the number of fatal and non-fatal overdoses; reducing demand for illicit drugs; reducing the volume of drug proceeds flowing into the hands of corrupt officials and their associates both inside and outside of penitentiary facilities.

6 Considering the serious abuses of authority by law enforcement agents, the level of their involvement in drug trade, and the general state of impunity that has arisen in regard to their actions, it is recommended that policy makers ensure more frequent use of criminal penalties involving the confiscation of property in the case of law enforcement and prison officials convicted of crimes related to drugs. The funds that remain with the state after the sale of confiscated property should be directed to the development of programs for the treatment and prevention of drug dependence, including opioid substitution therapy. This will help reduce demand for illegal drugs, and, accordingly, would further reduce the amount of income received by corrupt law enforcement officials and penal institutions.

7 According to our respondents, "everybody knows" about the involvement of law enforcement and prison officials in drug trafficking, but it seems that very often policy makers and other authorities pretend not to notice. Instead, we are constantly being told that these are "terrorists" and "extremists" who stand behind the "drug evil" in Central Asia. Therefore, our final recommendation is, as soon as possible, to recognize that government officials are behind many unprosecuted drug crimes and, to focus counternarcotics efforts on exposing such links and preventing the further merger of state structures with the drug industry.

As David Lewis writes, **"compared to its neighbors, Tajikistan could be considered a bright spot – it has the highest level of drug interdiction in Central Asia and the DCA is one of the most professional law enforcement outfits in the region." If we follow the logic of these words and assume that the situations with the involvement of law enforcement officers and penitentiary authorities in the neighbouring Central Asian republics might be even worse, then the recommendations of this study may be equally applicable for the entire region.**

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