Preventing Drug Demand in Criminal Policy: A Comparison of Educational Strategies in Britain, Iran and the United States

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ABSTRACT

The purpose of this study is to compare the educational Strategies of Britain, Iran, and the United States to prevent drug demand among the young generation. In this comparative study, the researchers used a documentary method to collect data, and a "thematic content analysis" approach for data analysis. The first finding of the study points to the similarity of the three countries in the upward trend in drug use among the younger generation. The second finding is that the criminal policy of Britain and the United States in the fight against drug use is mainly demand-oriented, while the supply-oriented approach is still prevalent in Iran. Another finding reveals the similarity of the criminal policies of the three countries in the field of intolerance of the distribution of any drugs among students. The research findings also indicated that in Iran the variety of drugs (especially psychedelics) is higher but the percentage of students consuming is lower, while in Britain and the United States the percentage of young consumers is higher but the variety of drugs is less. In addition, the research showed that the variety and scope of educational programs and schemes, as well as the active presence of non-governmental organizations in schools to combat drug use in Britain and the United States is greater than in Iran. Considering the findings, it is suggested to the Iran's legal and educational legislators to make reforms such as emphasizing the demand-based approach, adoption of laws related to promoting the participation of non-governmental organizations, and increasing the coverage of educational strategies to combat drug use.

KEYWORDS

Criminal policy
Demand-driven Delinquency Drugs Prevention Supply-oriented

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1. Introduction

Increasing drug use has become a global challenge. The latest report from the United Nations Office on Drugs and Crime (UNODC) shows that in 2018, about 270 million people worldwide used drugs, a 30 percent increase over a decade (UNODC, 2020). The report also emphasizes that drug use increased much faster among developing countries than developed countries during the years 2000-2018, with adolescents and young people having the highest share of consumers. Black (2020) showed that the commercial value of the UK drug market is estimated at more than 9 billion and that around 3 million people in the UK and Wales have used drugs in one year. A report by the United States Substance Abuse and Mental Health Services Administration (SAMHSA, 2018) states that in 2018, approximately 1 in 5 people (19.1%) used an illicit drug (mainly Marijuana). According to international reports, Iran, Afghanistan, Russia, the United States and the United Kingdom have the highest rates of drug use in the world. The rate of addiction in Iran is high compared to other countries and many addicts use opium, heroin and various psychedelic pills (Mostaghim, & Bengali, 2016). Afghanistan, as the most important producer of opium and heroin in the world, has more than 1 million addicts (UN, 2020). Russia with about 2 million addicts - especially among young people - (Oakford, 2016), the United States with 22 million marijuana users (Center for Behavioral Health Statistics and Quality (2016) and the United Kingdom with young users mostly marijuana and pills Psychedelics use to seriously address this global challenge (Black 2020).

Another common feature of these 5 countries is the rapid prevalence of drug addiction among the age group of 12 to 30 years. Usually, people who start using drugs as teenagers are much more likely to become addicted. In fact, the persistence of addiction is higher in those who have turned to drugs from an early age (Sinha 2008). United Nations Office on Drugs and Crime (2013) found that in 2011 alone, more than 211,000 adolescents and young people worldwide died from drug use. A report by the Office for Standards in Education, Children's Services and Skills (OFSTED, 2005) also shows that almost one in five British high school students have used drugs. There is also no significant difference between boys and girls in terms of drug use and cannabis is the most likely substance used by them. Meanwhile, research findings emphasize the role of peer groups in drug use (Bahr, Hoffmann, & Yang, 2005, Henneberger, Mushonga, & Preston, 2020, Warren 2016).
In most cases, school is the first place to get acquainted and use drugs (Shahidi, 2006). With the entry of students into junior high school and the beginning of puberty, traits such as arrogance, curiosity, reduced emotional dependence on parents, independence, interest in gaining a place among peers and daydreaming provide the necessary ground for the tendency to use drugs in adolescents (Azizi, 2013). Of course, factors such as age, gender, family structure, poverty, drug prices and ease of access to drug can lead to the tendency to use a variety of drugs (Yahya Zadeh, 2009). This situation reveals the need for serious attention to prevention and combating drug use among adolescents and young people. In many countries, the criminal approach is usually to fight producers, distributors and consumers of drugs through a variety of legal penalties, while the experience of some countries shows the failure of this approach. Another policy is a demand-driven approach based on educating the younger generation to refrain from buying and consuming drugs. According to this approach, there is a significant relationship between drug use and factors such as irregular school attendance, peer encouragement, poor academic performance, lack of recreational programs and expulsion from school. Dickie (2014) found that prevention programs for young people is effective in reducing drug use if it includes issues such as social and personal development, resistance skills, and normative education techniques. In fact, primary prevention methods include eliminating the causes, reducing the risk factors, and increasing the individual's resistance (Global Fund, 2019).

According to Goodstadt (1989), this approach focuses on the role of the consumer rather than the drug dealer. Bava & Tapert (2010) believe that what may be more important than drug prevention training programs is the relevance of the content of these programs to the age and gender of pupils, social context, macro policies of each country to combat drug use and support structures for fighting against addiction. The European Parliament (2016) report indicated the change in criminal policy of member countries from a supply-oriented approach to a demand-driven approach, with regard to issues such as educating children, meeting human rights standards in sentencing, and increasing international cooperation. Undoubtedly, after the family, school has the greatest impact on the personality of teenagers and young people. Research has shown that anti-drug education programs in schools can affect the use of substances such as alcohol, tobacco, psychedelics and heroin (Foxcroft & Sertowatz, 2011, UNESCO 2017). According to Buisman (1990) educating children and adolescents about non-drug use is a long process that should continue from primary school to high school. Education policymakers should also have complete information about students' physical and mental health, types of drugs, signs of use, and ways to prevent them (United Nations, 2004). Accordingly, the Office for Standards in Education, Children's Services and
Skills in the UK emphasizes the provision of high quality education for teachers and their colleagues in other organizations (OFSTED, 2005). Attention to learners’ personalities, non-discrimination between students, and using educational technology to demonstrate the devastating effects of drug addiction can reduce the likelihood of crime among young people (Bosworth 2006). Also, educational strategies to deal with adolescent and adolescent addiction should start from the primary school. These strategies can include the following:

- In primary schools through discussion about hazardous substances
- In junior high schools, prevention programs aimed at delaying the onset of smoking and the tendency to use drugs
- In high secondary schools, prevention programs regarding dangerous habits (Ebrahimi Nasab, Nouri, & Rumi, 2002, p. 21).

Another educational strategy is the need for a school relationship with parents and educating them about a list of possible crimes of adolescents and young people and the legal punishment of these crimes, monitoring their child’s behavior and paying attention to suspicious and unusual behaviors such as asking for extra money, attending parties of anonymous people, friendship with people older than themselves and presence in inappropriate neighborhoods of the city (Bagheri, 2013; Khosravi, Asgari Vaskafi 2020; United Nations 2004, SAMHSA, 2020). The UNESCO Division for the Renovation of Educational Curricula and Structures, Prevention of Drug Abuse Unit refers to a set of teaching methods and techniques. For example:

- Classroom teaching, e.g. effects of drugs on the brain in biology-classes;
- Lectures, e.g. drug use by adolescents for an audience of parents;
- Small group discussion, e.g. "how to cope with a drug user in a family";
- Training, e.g. general practitioners how to detect drug problems early;
- Role playing, e.g. counselors teach communication with a pupil;
- Panel or forum discussions, e.g. community-leaders and citizens on prevention plans and policies;
- Demonstrations, e.g. how to work with a drug information kit;
- Exhibitions, e.g. of educational materials: posters, leaflets, videos;
Using the knowledge and experience of experts from various organizations such as doctors, social workers, judges and lawyers as well as the police can also be considered in the education of adolescents and young people. Research by Formby et al. (2011) in the United Kingdom highlighted that about one-third of primary schools and just over half of secondary schools invite an external speaker to educate students. Another good example is the Dutch experience. In the early 1990s, the Dutch government announced the “Teaching the Teachers Program” to combat drug use in schools (Buisman, 1991). Here is a brief look at the situation of Iranian students. The problem that Iranian society is facing is the spread of interest of the young generation in drug use and its entry into educational spaces such as schools and universities. Over the past two decades, social media - newspapers, news sites, virtual social networks such as Instagram and Telegram - have frequently reported the rise of drugs - such as psychedelics and cigarettes - among school pupils and university’s students (Babaei, 2011; Rahimi Moghar & Sahimi Izadian, 2004; Rahimi Moghar, Younesian, & Sahimi Izadian, 2009; Sirajzadeh & Feizi, 2007). The danger of this phenomenon is doubled when we find out that on the one hand, Iran is exposed to the transit of narcotics such as opium, cannabis, and heroin from one of the main producers of narcotics in the world, namely Afghanistan. On the other hand, about fifty percent of the country’s population is young people under 35 who can be potential customers of various drugs (Asadi, 2009).

Iran’s student population includes more than 20 million people (including university's students) who are at risk. In this situation, the Iran educational system faces many challenges. One of the challenges is how to combat this phenomenon from a legal-educational perspective. In fact, the majority of those who distribute drugs in educational settings are teenagers and young adults, usually in the age group of 13 to 18 years. What is clear is the illegal and immoral behavior of drug dealers, but the important thing is the reaction of schools and legal organizations to drug dealers. The usual way to combat the production, distribution and consumption of narcotics in Iran is to use police force, send addicts to medical camps, arrest and imprison drug dealers, and carry out other legal punishments. These deterrent policies - which can be called "supply-oriented policies" - occur mainly after the crime has taken place and have no preventive role. For this reason, despite the increasing government budget to combat addiction, the growth rate of drug use has not decreased over the past four decades and the number of addicts in an upward trend has reached about 4 million (Aslani, 2020). Also, the scope of action of drug dealers has been extended from parks and streets to schools. Although there are no exact formal statistics in this regard, unofficial statistics
show that currently about 2% of high secondary school students are drug users. This situation shows a 50% increase compared to ten years ago. It has also been found that the time required for a teenager to buy drugs has reached less than 50 minutes (Safatian, 2018). There are several reasons for the upward trend in the number of addicts in Iran. For example, the programs and management of law enforcement, military and security agencies and organizations responsible for controlling drug trafficking can be criticized, or Iran's specific geographical position can be considered the main reason for the failure in the fight against drug use.

In fact, the dominant view in Iran's criminal policy against drugs is a "reductionist" view. In this way, first, the whole "fight against addiction" is reduced to one of its elements, namely the police fight. Secondly, the goal of the struggle has become a "society free of addiction", which is a completely idealistic demand and ignoring the realities of Iran. Therefore, one of the main reasons for the growth of drug use can be considered the lack of a systematic and comprehensive perspective in the fight against these crimes (Bagheri, 2013). According to the systemic approach, the fight against drug-related crimes can be considered simultaneously in two dimensions: "combating drug supply" and "demand reduction". International organizations' reports also show that shifting the focus from criminalization and punishment of drug users to promoting human rights, public health, and socio-economic development will lead to better results in reducing drug use (IDPC, 2012). However, the realization of a systemic approach requires cooperation between the legal system and the educational system. On the one hand, the legal system must make appropriate arrangements for the enactment of laws to effectively combat the distribution of drugs in schools. These criminal laws should be tailored to the age of the delinquent students. On the other hand, schools should be able to inform adolescents and young people about the dangers of drug use by providing appropriate education and greatly reduce the demand for consumption (Ardabili, 2009). According to this introduction, the main purpose of study was to compare the educational strategies of Britain, Iran and the United States to prevent drug demand among the young generation according to the demand-oriented approach. This comparative study can help policy makers, educational planners and lawyers from a legal and educational perspective to predict and adopt educational strategies and criminal laws appropriate to the age of adolescents and young people, using international experiences. Accordingly, the sub goals of the present study are:

1) Describe the current state of legal-educational strategies to combat drug use crimes in selected countries, and
2) Explain the similarities and differences of selected countries to prevent drug use according to the demand-oriented approach.

2. Research Method

The present study is applied in nature and qualitatively comparative in terms of method - using the content analysis approach. The unit of observation and level of analysis is macro (country) and "different systems, similar outputs" strategy were used to select the countries. The method of data collection is based on investigation of primary sources (national upstream documents about anti-narcotics) and secondary sources (books, articles and information available at databases such as Google Scholar, ERIC, and government and public organizations). Demand approach and thematic content analysis were used for data analysis.

3. Findings

According to the objectives of the research, the results of the review and analysis of primary sources (national legal and educational documents) and secondary sources (books, articles, and information sites) are divided into four sections. In the first and second sections and from a theoretical point of view, the two current approaches to combating drug use i.e. supply-oriented and demand-oriented are explained. The third section is dedicated to describing the criminal-educational policy of the selected countries. In the fourth section, a comparison of criminal-educational policies with emphasis on the demand-driven approach in selected countries is made to identify similarities and differences.

A) Supply-oriented approach

Before describing the supply-oriented approach to counter-narcotics, it is necessary to give a brief explanation of the term "criminal policy". Criminal policy includes a set of methods by which society uses them to organize responses to criminal phenomena (Azimzadeh Ardabili & Hesabi, 2011). According to this definition, there are two approaches to combating drug use: First, the supply-oriented approach, in which the government has the primary responsibility for combating narcotics. Second, the demand-driven policy in which all people, civil society organizations and social organizations also participate in the implementation of drug prevention policies. Given this brief explanation, it should be said that in many countries of the world, the main approach to the fight against drugs is a supply-oriented approach. According to this approach, the control of any
crime and delinquency is mainly through repression, the use of police force, prisons, rehabilitation camps and the implementation of other legal punishments. Also in this approach, strategies to prevent the supply of drugs include a set of activities from the source of production to the consumer (Hashemi, 2014). Criminal policy in this strategy focuses on the role of variables such as drug prices, production and detection of drugs, budget for dealing with groups producing and distributing drugs, number of addicts, number of trained police forces, police budget and equipment, countering entry, transportation and transit of drugs, and countering the distribution of drugs (Molaei, 2018). The main counter-narcotics strategy in the supply-oriented approach is a one-sided emphasis on the police-criminal relationship (NDLERF, 2020).

**B) Demand-driven approach**

The main concept of this approach is social prevention. Prevention means creating an obstacle to the realization of criminal thought and action by changing the conditions that provide the ground for the occurrence of crime (Mohammad Nasl, 2014). In this approach, prevention means radical treatment before the crime occurs. This prevention can occur at both individual and societal levels. In individual prevention, the main emphasis is on providing appropriate education to each individual, while social prevention includes measures that seek to improve the geographical and social environment (Niazpour, 2014). Therefore, social prevention is the result of crime prevention experiences without the intervention of the police and legal organizations and focuses on combating the incompatibility of juvenile delinquents and young people and their development environment (World Health Organization, 2015). Establishing places for entertainment, sports and parks, establishing educational and cultural centers, and strengthening beliefs based on citizenship rights and religious beliefs can be considered as part of prevention strategies (Giesen, Zimmer, & Bloch, 2016; Linke, & Ussher, 2015; Thompson et al. 2020). In other words, social prevention through education, persuasion, observation and indoctrination seeks to instill in the young generation the criterion of recognizing good and bad behaviors and give them the power to evaluate their performance (Bosworth, 2006). The strategy of the demand-oriented approach is strongly dependent on cultural and social foundations, and therefore the involvement of people and civil society organizations in reducing the demand for drug use is extremely important. Demand-based programs seek to identify and address the negative and threatening lifestyles of different groups, especially youth.
C) Description of the criminal-educational policy of the selected countries

First: Iran

A brief look at the experience of the last four decades of the Islamic Republic of Iran shows the growth of the number of addicts, expansion of the age range of addicts to adolescents and youths and the failure of supply-oriented criminal policy (Rahimi Mowqar, Younesian, & Sahimi Izadian, 2006). Akbari (2014) by criticizing the criminal policy of drug crimes in Iran found that legislative authorities (such as the Islamic Parliament) has always focused on criminal policy based on repression and punishment by imposing disproportionate and heavy punishments - especially execution and life imprisonment. The Ministry of Justice has not welcomed this policy, and as a result, the deterrent effect of these punishments has been small, while the scope and variety of these punishments has increased. For this reason, a reform in the approach to governing Iran’s criminal policy has become an undeniable necessity (Hashemi, 2014; Zabhi, 2013). In recent years, the demand-driven approach has received relative attention from social policymakers due to the cultural context and social realities of Iran’s society.

In international documents - accepted by Iran - all governments are required to use scientific tools to prevent and reduce drug abuse (Islamic Parliament Research Center of the Islamic Republic of Iran, 2020). Similarly, in Iran’s documents and laws, the necessity of formulating and implementing addiction prevention programs has been repeatedly stated, which can be found in Article 33 of the Amendment Law of the Anti-Narcotics Law (1997), the By-Laws of the Anti-Narcotics Headquarters (2010), Referred to the resolution of the Supreme National Security Council (2001), the law of the Comprehensive Welfare and Social Security System (2004), and the Fourth Development Plan (2005) (Ali Verdi Nia, 2006). For the first time in 1995, the Anti-Narcotics Headquarters required the two Ministries of Education and Health to prepare and announce their prevention plans (Madani Ghafrkhi, 2005). In 2005 and in order to reduce the entry of new people into the cycle of addiction, the Council of Ministers required the "Anti-Narcotics Headquarters" to prepare a comprehensive cultural prevention plan. In 2010, this document was approved by the Iranian Parliament as the "Comprehensive Document for the Prevention of Addiction".

The report on drug use by students was first announced in the early 1991s, but the Ministry of Education refused to approve the report (Ministry of Education, 1999). In 2005, the Office for
the Prevention of Substance Abuse was established in this ministry. Finally, following the development of a national program for education and prevention of drug abuse, the Ministry of Education also developed a Five-year national program for education and prevention of addiction. The purpose of this program is preventive intervention to reduce the prevalence of drug abuse and dependence among the students (Anti-Narcotics Headquarters, 2010). Also, according to the Sixth National Plan (2016-2017), the Ministry of Education was obliged to carry out the following activities:

- Implement programs such as health-promoting schools, life skills training, and integrating education about materials according to the developmental stages in the life skills training program.
- Implement an addiction-free school program with an emphasis on continuing education tailored to growth stages.
- Identify cases of learning and behavioral disorders - especially hyperactivity disorder, attention deficit and behavioral disorders - and refer identified cases for treatment.
- Include appropriate information about drugs and ways to prevent them in school textbooks (especially in social studies textbook) and educate parents, staff and teachers about the social consequences of drug use.
- Selective prevention of high-risk schools: In-depth and frequent training on drug prevention and addiction along with constructive leisure programs, peer education, integration of special school programs in the Neighborhood Program and support for the launch of the drug prevention movement (Anti-Narcotics Headquarters, 2010).

Here are some of the joint plans of the Ministry of Education and other organizations in Iran:

- Student Social Empowerment Project: The purpose of this program was to identify early risk factors and high-risk behaviors, and to draw the psycho-social profile of junior high school students in some selected schools in the provincial level.
- Life-friendly schools project: This project in collaboration with the Ministry of Education and the Welfare Organization performed in the first secondary schools of Tehran with the approach of empowering school staff, students and their parents, increasing individual and social responsibility, promoting mental health and social health and gaining skills to change themselves and others.
• Planning problems and psycho-social pathology of female high school students: in order to
determine the incidence and prevalence of various psycho-social pathologies by
geographical area and gender, "Atlas of psycho-social injuries" with the participation of
"Deputy Minister of Women's Affairs of President" has been prepared for female
students since 2016.

• Addiction Prevention Program: The goals of this program include items such as combining
addiction prevention training, high-risk behaviors and social harms with curriculum
content, increasing the coverage rate of programs and activities to prevent addiction and
social harms, developing participation and cooperation of schools, families and
neighborhoods. This program has been held for four million and four hundred thousand
students and 511 thousand employees of different departments of education and parents
of students in 41 thousand schools.

• Life Assistants Center: The latest program of this center has been designed and
implemented since 2016 with the aim of building capacity to attract peer participation in
the primary prevention of addiction and high-risk behaviors. This plan is initially
applicable in 20% of secondary schools and fifth and sixth grade of primary schools. The
designers of this program aim to cover 30,000 schools across the country.

Second: Britain

Over the past three decades, the programs of various governments in the UK to combat drug
use have undergone many changes. According to Dorn (1990), during the 1980s, drug prevention
was increasingly seen as an enforcement problem. During the 1990s, criminal policy shifted from a
focus on drug supply to demand control and education of potential consumers (UNESCO 1995).
Thus, during the two decades 1980-1990, various programs were implemented by the two
Ministries of Education and Health to educate children and adolescents in British schools, which
can be mentioned as follows:

• Drug Wise, Drug Education for Students, 14-19 developed by Health Education Council
• High Profile Youth Work Curriculum about Drugs developed and distributed by ISDD

An assessment of British criminal policy in the early 1990s on primary drug prevention indicates a
focus on four groups: Police, teachers, peers and parents. Most programs combined information,
Also, programs related to teacher education fall into three categories: School curricula, theater in health education and resource packs. These programs include the following:

- Drug Education in Primary Schools: DIPSI
- Northumberland Drug Education Project
- Project Charlie (Chemical Abuse Lies in Education) targeting 5–11 year olds (Allott, Paxton, & Leonard, 1999)

Another British criminal policy with regard to the demand-driven approach is to pay attention to the role of the peer group. An example of peer education that has been evaluated is the Youth Awareness Project (YAP) in Newham, East London (Shiner & Newburn, 1996). In this program, young people aged 20-28 who had direct experience of drug use were used to educate students aged 12 to 16 years. YAP volunteers hold between one and three workshops. During the first decade of the new millennium, the British government developed a program namely "Medications: A Guide for Schools." The OFSTED report shows that compared to the 1990s - when only 3 out of 10 schools had drug prevention curricula - in 2005, 9 secondary schools had specific curricula and implemented them (OFSTED, 2005). The same report also highlighted that “drug education is also taught through National Curriculum subjects as well as being part of the PSHE programme. For example, the Year 8 PSHE programme teaches about illegal drugs, science addresses the effects on health of drugs while work in English relates to the role of the media and, in particular, to the topic of celebrities and drug misuse (p.14).

In addition to these measures, the UK Ministry of Home Affairs has set the primary goal of preventive education to prevent drug use among young people under 25 (Reuter, 2007). In 2012, the Ministry of Education, in collaboration with the Association of Senior Police Officers, issued guidelines for advising local authorities, teachers, school staff, and government agencies (DfE and ACPO, 2012). According to the guidelines, if drugs are found in a school, senior staff should report them to the local police, but disclosing the names of delinquent students to the police is at the discretion of school officials. Parents and the police should be notified immediately when a student needs treatment for drug use. Over the last two decades, several organizations have been set up in the UK to prevent adolescent drug use. Some of these organizations are:

- Addiction is one of the UK’s largest specialist drug and alcohol treatment charities
• ASH (Action on Smoking and Health) A campaigning public health charity aiming to reduce the health problems caused by tobacco
• Children’s Legal Centre operates a free and confidential legal advice and information service covering all aspects of law and policy affecting children and young people.
• Drug Scope is a centre of expertise on illegal drugs, aiming to inform policy development and reduce drug-related risk.
• Re-Solv (Society for the Prevention of Solvent and Volatile Substance Abuse) A national charity providing information for teachers, other professionals, parents and young people
• Stars National Initiative offers support for anyone working with children, young people and families affected by parental drug and alcohol misuse (Scottish Families Affected by Alcohol & Drugs, 2020)

Third: United States of America

The main goal of US criminal policy is to reduce drug use in schools by implementing a "minimum or zero tolerance" approach to distribution and consumption. Thus, the delinquent student faces severe punishments such as expulsion from school and introduction to legal authorities (Brown 2001). During the 1990s, US criminal policymakers struggled to choose between supply-oriented and demand-driven approaches to the fight against drug use (Duncan, & Nicholson, 1997). The Office of Safe and Drug-Free Schools, in the Ministry of Education, is responsible for prevention programs and the budget for combating drug use and school violence. At the same time, many states, educational districts and schools have implemented various programs to combat the distribution and use of drugs. Accordingly, the report of Ringwalt et al. (2008) shows the upward trend in the implementation of drug prevention programs in American schools. This section refers to a number of drug prevention programs that have been implemented in schools in the early years of the first decade of the new millennium:

• Life Skills Training Program: A universal example of a training program offered to high school students. The goal of this program was to teach drug resistance, self-management, and general social skills in high school curricula (Blueprints for Healthy Youth Development, 2019a).
• The Caring School Community Program: The goal of this program was to create a sense of community among students, parents, class, and school in primary stage.
• Project towards No Drug Abuse: The goal of this program is to prevent students with academic failure and other behavioral problems from using drugs to correct their misconceptions about themselves and to strengthen protective factors such as increasing decision-making power and positive commitment (National Institute on Drug Abuse 2003).

• Guiding Good Choices: A training program for parents of middle school students to reduce their risk of alcohol and drug use. This program includes five 2-hour sessions per week. Children with parents should attend a session to learn peer resistance skills (Blueprints for Healthy Youth Development, 2019b).

• Lions Quest Skills for Adolescence: A program of cognitive-behavioral skills training to build self-esteem and personal responsibility, communicate effectively, make better decisions, resist social influences, and increase knowledge about drug use. The consequences in the school environment are interactive teaching methods such as role play, group work and discussion, and self-reflection (Early Intervention Foundation, 2017). This program is for higher secondary school students.

D) Comparison of criminal-educational policies in a demand-oriented approach

Analysis of data related to demand-driven criminal policy in the three selected countries shows similarities and differences in different components (Table 1):

Table 1: Similarities and differences of selected countries in different components related to criminal policy

<table>
<thead>
<tr>
<th>Country/Component</th>
<th>US</th>
<th>Britain</th>
<th>Iran</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree of supply tolerance</td>
<td>Zero</td>
<td>Zero</td>
<td>Zero</td>
</tr>
<tr>
<td>Reaction against drug distribution</td>
<td>Expulsion from school and introduction to legal authorities</td>
<td>Expulsion from school and introduction to legal authorities</td>
<td>Expulsion from school and introduction to legal authorities</td>
</tr>
<tr>
<td>Reaction to drug use</td>
<td>Referrals to medical centers, parents&amp; police</td>
<td>Referrals to medical centers, parents&amp; police</td>
<td>Referrals to parents&amp; police</td>
</tr>
<tr>
<td>Type of material according to the degree</td>
<td>Marijuana, alcohol, cannabis,</td>
<td>Marijuana, alcohol and cannabis</td>
<td>Psychedelic pills, alcohol, glass</td>
</tr>
</tbody>
</table>
Preventing Drug Demand in Criminal Policy

<table>
<thead>
<tr>
<th></th>
<th>of prevalence</th>
<th>psychedelic pills</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prevalence</strong></td>
<td>Average 30% of students 12 years and older *</td>
<td>Average 20% of students aged 16 to 24 **</td>
<td>Average 2% of students 12 years and older ***</td>
</tr>
<tr>
<td><strong>Variety of materials available</strong></td>
<td>Medium</td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td><strong>Percentage of addicted to the total population</strong></td>
<td>Medium</td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td><strong>Macro approach to criminal policy</strong></td>
<td>Supply-driven</td>
<td>Demand-driven</td>
<td>Demand-driven</td>
</tr>
<tr>
<td><strong>Degree of success in preventing addiction</strong></td>
<td>Medium</td>
<td>High</td>
<td>Low</td>
</tr>
</tbody>
</table>

* Guide2research, 2020; ** Drug Wise, 2020; Momeni 2019

The first component shows the similarity of all three countries in terms of intolerance of legal legislators and educational policy makers to distribute any drugs among pupils. This criminal policy means that school principals’ reactions to students who bring drugs to school are the same and include actions such as short-term suspension, expulsion from school, and referral to the police. The reaction to drug use in Iran is less severe than in the Britain and the US, meaning that the school usually does not play a significant role in introducing the drug user to medical centers. Another component that makes the difference between the three countries is the type of material in terms of the degree of prevalence among students. While the use of alcohol, cigarettes and, to a lesser extent, marijuana is common in the Britain, American and Iranian students are similar in their use of psychedelic pills. Marijuana use is very low in Iran. Therefore, it can be concluded that the variety of substances in Iran (except marijuana) is more than the other two countries.

In addition, when we consider the ratio of the addicted population to the total population, we find that Iran has more addicts than the United States and Britain. At the same time, drug addiction in adolescence and youth due to cultural and social differences is much less in Iran than the United States and Britain. In fact, this finding can be interpreted as the tendency to addiction in Iranians after the completion of public education is on the rise, while in all three countries, the experience of drug use generally occurs for the first time in teenage period. The last two components in Table 1 indicate that although in Iran the tendency to change the supply-
oriented approach to the demand-oriented approach has been around for about two decades, in practice, the supply-oriented approach is still more powerful. Due to this, the trend of increasing the number of addicts has not decreased. The results related to the similarities and differences between the United States, Britain and Iran in terms of demand-based training strategies are shown in Table 2:

Table 2: Similarities and differences between the United States, Britain and Iran in terms of educational strategies

<table>
<thead>
<tr>
<th>Country/Component</th>
<th>US</th>
<th>Britain</th>
<th>Iran</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start time</td>
<td>1990</td>
<td>1980</td>
<td>2000</td>
</tr>
<tr>
<td>Program frequency</td>
<td>High</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Program diversity</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
</tr>
<tr>
<td>Variety of rules</td>
<td>High</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Intervenational organizations</td>
<td>High</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Scope of the plan</td>
<td>High</td>
<td>High</td>
<td>Low</td>
</tr>
</tbody>
</table>

The data in Table 2 show that, in terms of time, legislators and policymakers in the British legal and educational systems sought to use educational strategies to reduce drug use among their young generation earlier than the United States and Iran. In fact, with a decade of delay, Americans turned their attention to the demand-driven approach, while until the first years of the first decade of the new millennium; Iran’s education officials largely denied the existence of drug use in schools. There are also four similarities between the United States and Britain. Both countries have many programs such as using cultural packages, holding cultural / social events, implementing student projects, training courses for teachers and parents, exhibitions and seminars, using theaters and peer groups, and inviting lawyers and police. In Iran some of these guidelines have been used such as short-term training courses for teachers and parents, exhibitions, use of peer groups, and police invitations. There is also a difference between Iran and the other two countries in terms of the scope of coverage of anti-drug programs. Many educational programs are held nationally in the United States and Britain, while in Iran, a national plan that integrates all primary and secondary schools students has not yet been implemented. Another similarity between the United States and Britain that distinguishes them from Iran is the broad participation of various social groups - such as NGOs, social stakeholders and parents - in these programs. Most anti-drug training programs in Iran have three target groups - parents, students and teachers. It should also be noted that although in Iran, the Anti-Narcotics Headquarters has assigned tasks to various governmental organizations and institutions, but in relation to drug use by students, the centralized structure of the Iran
educational system does not provide much opportunity and space for other organizations to intervention at schools. Thus, it can be said that the diversity of legal duties of governmental and non-governmental organizations and institutions to participate in the process of reducing drug use of the young generation in Iran is much less than the United States and Britain.

4. Conclusion

The purpose of this study was to compare the approach of the two advanced countries of the Britain and United States with developing country of Iran in the process of combating spread of drug use by the younger generation in educational settings such as schools and universities. The first finding of the study emphasized the common denominator between the three countries, which is that the trend towards drug use among the younger generation is on the rise. Previous research findings such as Black 2020; Mostaghim & Bangali 2016; SAMHSA, 2018; UN, 2020; and UNODC, 2020 also showed that these three countries have the highest number of young addicts in terms of the percentage of the total population among the countries of the global. The second finding of the study is that the US and British criminal policy in the fight against drug use is mainly demand-driven, while the supply-oriented approach in Iran has not yet lost its dominance. This finding supports the findings of previous research showing that in the Britain and United States there is a strong determination among legislators in the legal and educational systems to shift supply-oriented criminal policy toward a demand-driven approach (Azizi 2013; Bava & Tapert 2010; European Parliament, 2016; OFSTED, 2005; Shahidi 2006; Warren 2016) while the structure of the Iran’s educational system does not support the presence of NGOs or parents for active participation.

Another finding of the study reveals the similarity of all three countries in terms of intolerance of legal system legislators and educational policy makers to distribute any drugs among students. However, the response of school officials and practitioners in Britain and United States to the distribution and use of drugs is more varied. Findings of Blueprints for Healthy Youth Development, (2019 a, b); Center for Behavioral Health Statistics & Quality, (2016); Early Intervention Foundation, (2017); IDPC (2012); Reuter, (2007); Ringwalt et al. (2008) and SAMHSA, (2018) also point to this diversity. Another finding of the study emphasizes the fact that in Iran the variety of drugs (especially psychedelics) is higher but the number of students consuming them is less; while in the United States and Britain the number of young drug users is higher but the variety of drugs is less. The other two findings of the study highlight that the variety and scope of educational programs and plans in British and US schools is greater than in Iran, so that in Iran many programs

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