

**NAE**

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Narcotics Awareness and Education Project

**The Role of  
Applied Research in  
Public Awareness and  
Policy Development**

**The Case of Drug Use in Panama**

Henry Kirsch, Ph.D.

PN-ABS-125

**NARCOTICS  
AWARENESS  
AND  
EDUCATION PROJECT**

**SPECIAL REPORT**

**THE ROLE OF  
APPLIED RESEARCH IN  
PUBLIC AWARENESS  
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THE CASE OF DRUG USE IN PANAMA**

Prepared by  
Henry Kirsch, Ph.D.

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The Narcotics Awareness and Education (NAE) Project is designed to strengthen the capabilities of LDC institutions to design, implement and evaluate effective drug awareness and prevention programs. The project focuses on drug demand reduction through public awareness and education. Key to the overall project strategy are activities that: generate an understanding of the nature and extent of drug abuse in a given country; develop public awareness of the problem among government policy makers, opinion leaders and the general public and of the importance of implementing comprehensive prevention programs before the drug problem gets out of hand; and assist in obtaining the support of key national leaders and institutions to develop and effectively implement national prevention strategies. Among the technical support services involved in the project strategy are research, information dissemination, and policy dialogue.

The Abstract of the study is drawn from: "*Survey on Drug Prevalence and Attitudes in Urban Panama*", prepared by Joel M. Jutkowitz and Harry R. Day with the professional collaboration of Mitchell Seligson, Marco Gandasegui, Henry Kirsch, Matt Leavy, Susan Middlestadt and Orlando Perez; Arlington, VA: Development Associates, Inc. 1992

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# NAE PROJECT PROMOTES RESEARCH, PUBLIC AWARENESS AND POLICY DIALOGUE IN PANAMA

The NAE Project seeks to strengthen the capability of local institutions to authoritatively disseminate the results of research to the general public and to decision makers in order to contribute to policy formulation and implementation. This report draws upon recent NAE activities in Panama to show how broad impact and significant results can be achieved through this approach.

## **Public Presentation of First Epidemiological Survey on Drug Prevalence and Attitudes in Urban Panama Produces Broad Impact and Immediate Results**

■ Mass media provides extraordinary coverage at national and international levels.

■ National attention is focused on problem of drug use in Panama and need for National Prevention Strategy.

■ Increased public policy dialogue.

■ Offers of support provide opportunities for coalition building, new programs and greater resource leveraging.

## **National and International Mass Media, Policy Makers and Members of National Assembly of Panama Attend Public Release of Study's Findings**

■ Over 260 representatives of national and international mass media, government agencies, national assembly, PVOs, religious organizations and business associations attend public presentation.

## **Main Findings of the Study**

■ Panama has the most serious cocaine use problem among Latin American/Caribbean countries studied to date.

■ High levels of drug use in general exist among the male population.

■ Drug use is found mostly in major urban areas.

■ Drugs are attracting younger users.

■ More than half of male users of drugs are employed.

■ Public awareness of the problem in Panama is high.

■ Half of respondents believe the family is key to finding a solution.

# PUBLIC PRESENTATION OF FIRST EPIDEMIOLOGICAL SURVEY ON DRUG PREVALENCE AND ATTITUDES IN URBAN PANAMA YIELDS BROAD IMPACT AND IMMEDIATE RESULTS

 Mass media provides extraordinary coverage at national and international levels.

 National attention is focused on problem of drug use in Panama and need for National Prevention Strategy.

From October to December of 1991 the NAE Project conducted a survey on drug prevalence and attitudes in urban Panama through a buy-in funded by USAID/Panama. This was the first such household survey ever conducted in Panama. The final report was presented to USAID/Panama in April 1992. On May 22, 1992 Cruz Blanca Panameña (Panamanian White Cross) - the leading national prevention agency - working in cooperation with the Narcotics Awareness and Education (NAE) Project, released the results of the study in a major public presentation to national authorities, private sector organizations and the press.



Mass media coverage following the presentation of the results of the study was extraordinary. The press provided headline news and editorial coverage in the days that followed. All television channels reported the event; heads of governmental agencies were interviewed repeatedly; numerous radio stations followed up with in-depth interviews of Cruz Blanca program directors. International coverage of the results of the study was carried by CNN, UNIVISION, and NOTIMEX. In the week that followed, the Journalist's Association of the port city of Colón requested that the local chapter of Cruz Blanca organize a press conference to focus on the specific findings for that urban center. Directors of the Colón chapter requested assistance and training from the NAE Project representative in preparation for their press conference. In response, the NAE Project representative prepared graphic materials and trained the directors of the Colón chapter in the presentation of the main findings, analysis and interpretation of the statistical tables and graphic exhibits which would be used at the press conference. Over 100 persons attended this second event held on May 28.

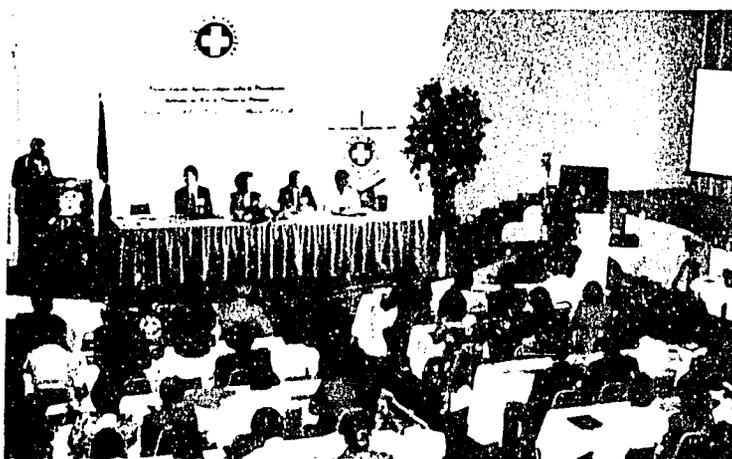


*Mrs. Margarita Villarino de Reategui, President of Cruz Blanca Panameña calls for national prevention plan.*

The intensive mass media coverage of the results of the survey served to increase the awareness of the nature and extent of the problem among opinion leaders, policy makers and the general public and the need for a national prevention strategy.

#### Increased public policy dialogue

At the policy-making level, one of the immediate outcomes of this dissemination effort was recognition on the part of national authorities of the need for a public-private partnership to formulate a national prevention strategy. Both the President of Cruz Blanca, Mrs. Margarita V. de Reategui, and Dr. Henry Kirsch, the NAE representative who made the keynote address at the presentation, stressed the need for an initiative of the public and private sectors to develop a national prevention plan.



*Dr. Henry Kirsch, NAE Representative, makes keynote address in Panama City at public presentation of study results.*

Mrs. Reategui's dramatic call for joint action on the part of policy makers, government agencies and private organizations

was wholeheartedly supported in a powerful editorial on the part of El Panamá América, one of the country's more influential newspapers.

In the days following the public presentation, the Minister of Education and the Executive Secretary of CONAPRED echoed Mrs. Reátegui's call for a working group to be formed from both public and private agencies to undertake the task of developing a unified, integrated and comprehensive prevention plan. Legislative authorities also turned their attention to this task in the meetings of the National Assembly's ad hoc Commission on Narcotics that immediately followed this presentation. The Commission offered to publish the complete drug prevalence study once it had been translated into Spanish. As a member of both CONAPRED and the National Assembly's Commission on Narcotics, Cruz Blanca is in an excellent position to press forward on this effort.

In addition to the Commission on Narcotics, the study had an impact on other legislators in the National Assembly. Formal recognition of the importance of the study for policy makers was made by the President of the National Assembly's Commission on Public Health and Social Security.

### Offers of support provide opportunities for coalition building, new programs and greater resource leveraging

The awareness generated by the public presentation was quickly transformed into a coalition-building process. Offers of volunteer support from community organizations and in-kind contributions were made to Cruz Blanca to expand and consolidate its prevention efforts among diverse target groups. A number of civic organizations contacted Cruz Blanca to obtain training in community-based prevention programs in order to turn their volunteers into effective community promoters of prevention.

At the ceremony the Dean of the School of Social Communications of the University of Panama asked the NAE Project representative to arrange for a meeting with Cruz Blanca in order to organize a joint effort to develop a prevention program for college and university students. This meeting took place the following week. The Dean has offered the services of his faculty and staff to develop a pilot program for the development of a pilot program for substance abuse

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VIERNES 22 DE MAYO DE 1992

**El Panamá América**

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PANAMA, R. DE PANAMA - VIERNES 22 DE MAYO DE 1992

## EDITORIAL

### Plan Nacional Contra Las Drogas

Con motivo de la presentación del Primer Estudio Epidemiológico sobre la Prevalencia y Actitudes del uso de drogas en Panamá, la Presidenta de la Cruz Blanca, señora Margarita de Reátegui, denunció que en nuestro país el consumo de drogas se ha propagado a una velocidad sin precedentes en los últimos dos decenios por su fácil acceso debido al bajo costo de las sustancias nocivas derivadas de la cocaína.

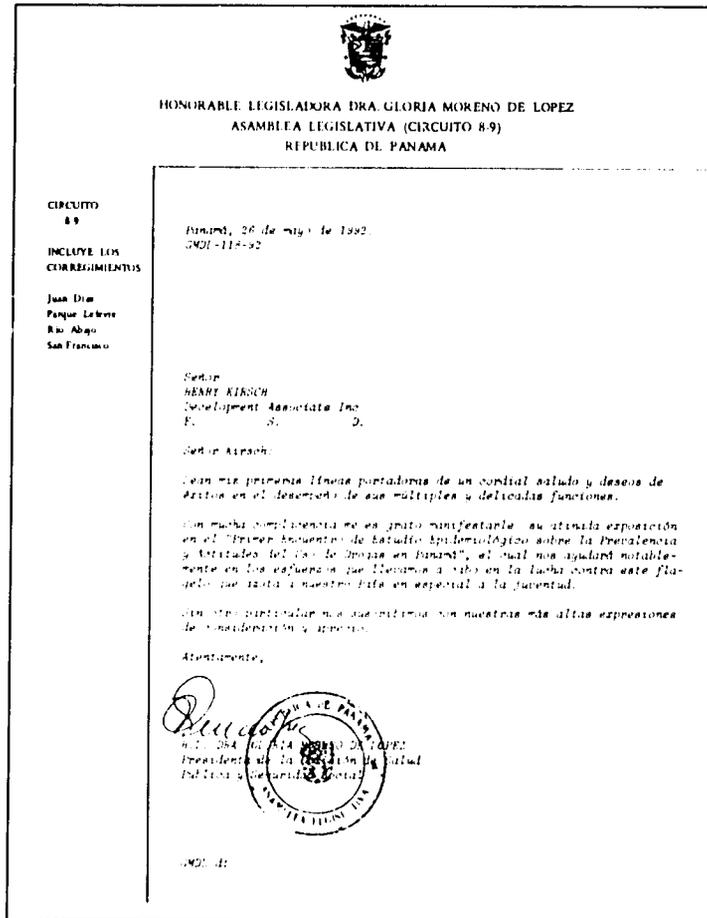
Ante las calamitosas consecuencias provocadas por el consumo de drogas, la máxima directiva de la Cruz Blanca plantea la realización de una urgente cruzada en la que intervengan el Estado, instituciones públicas y privadas, así como la ciudadanía en general, a través de un Plan Nacional de Prevención.

Consideramos que el dramático llamado de la Cruz Blanca no debe caer en el vacío. La institución ha estado trabajando prácticamente sola en esta humanitaria tarea de rescate de valores humanos panameños. Necesita la colaboración de todos los sectores de la comunidad nacional a los efectos de que el mayor número posible de panameños se conviertan en agentes multiplicadores de la prevención del uso de drogas abominables. El lema de la institución "no a las drogas, sí a la vida" debe ser asumido como un mensaje colectivo.

Los vendedores de cocaína y bazuko acechan a los estudiantes aún dentro de las aulas, convirtiendo en agentes del vicio a los compañeros de aula. Han penetrado en los centros de trabajo. Se infiltran en los núcleos hogareños, sin que los padres de familia adviertan a tiempo los peñigos fisiológicos y mentales del nefasto hábito.

Frente a este cuadro desgarrador, expuesto por la Cruz Blanca sobre la base de muchos años de experiencia en el campo de la prevención y el tratamiento médico de los adictos, es nuestro deber divulgar y concientizar sobre el problema del uso indebido de drogas a todo nivel social, así como promover la coordinación intersectorial por la educación preventiva integral.

La meta es orientar al niño para que conozca y rechaza los estragos del tóxico antes de ser adolescente; y rehabilitar al adicto para que se reinsere en la sociedad. Y combatir a los traficantes sin contemplaciones.



prevention. One component of this program will include a poster competition among the 2,500 students enrolled at the School of Social Communications. In exchange for receiving training for his own staff and assistance from Cruz Blanca in developing a student assistance program, the Dean offered the creative expertise of his school to develop and produce mass media materials, as well as broadcast time on the school's television channel and radio station both of which have broad reach in Panama.

Shortly after the presentation, the General Manager of a Panamanian public relations firm, offered assistance to Cruz Blanca in the development and production of new social marketing material.

An UNICEF official has offered to assist the White Cross in developing a drug prevention

program which could be incorporated into an ongoing UNICEF project targeted at street children, high risk and delinquent youth.

Clearly, in terms of the resulting increased awareness, increased public policy dialogue, coalition building, new opportunities for leveraging human resources for drug prevention activities, and in-kind and creative resource contributions, the dissemination effort launched at the public presentation of NAE's epidemiological survey was highly successful.

### NATIONAL AND INTERNATIONAL MASS MEDIA, POLICY MAKERS, AND MEMBERS OF NATIONAL ASSEMBLY OF PANAMA ATTEND PUBLIC RELEASE OF FIRST EPIDEMIOLOGICAL SURVEY ON DRUG PREVALENCE AND ATTITUDES IN URBAN PANAMA

Over 260 persons attended the presentation on May 22 which has focused national attention on the problem of drug use in Panama and on the development of a national prevention program. Present at the ceremony were reporters from 15 radio stations, 3 television channels, 4 newspapers, 1 national magazine and 5 international syndicated television and press services. In addition to the mass media, the presentation was attended by

the National Drug Prevention Council (CONAPRED), members of the National Assembly, senior officials of governmental agencies working in the drug field (Education, Health, Justice, etc.), representatives of international assistance agencies (Organization of American States, United Nations, UNICEF, etc.), religious organizations, universities, directors and senior program managers of many non-governmental organizations including national PVOs, and business and industry associations. Judging by the number of requests for invitations, participation would have been much greater had it not been for the limited size of the largest conference facility available.



*Mr. Kevin Kelly, Deputy Director, USAID/Panama, addresses the assembly.*

### **THE PANAMA SURVEY OF DRUG USE AND ATTITUDES**

In undertaking the study, the NAE Project worked under the auspices of Cruz Blanca in conjunction with the Centro de Estudios Latinoamericanos, a research institute located in Panama City.



*The Panama City audience*

#### **Characteristics of the study**

Drug abuse in Latin America is largely an urban phenomenon, often most visible in the largest cities of a given country. Thus, it makes sense to focus efforts at measuring drug use on the principal urban centers of Panama. Using this criterion, the survey's universe consisted of the population 12 to 45 years of age located in households within Panama City, San Miguelito and Colón, urban concentrations which have within their bounds approximately one-third of the total population of the country. To see whether drug use was as prevalent outside the country's major urban areas, a small urban center, Penonomé, was included in the study's universe. A sample of 1,026 completed interviews was gathered during the field work.

#### **Main Findings**

The main findings of the survey were:

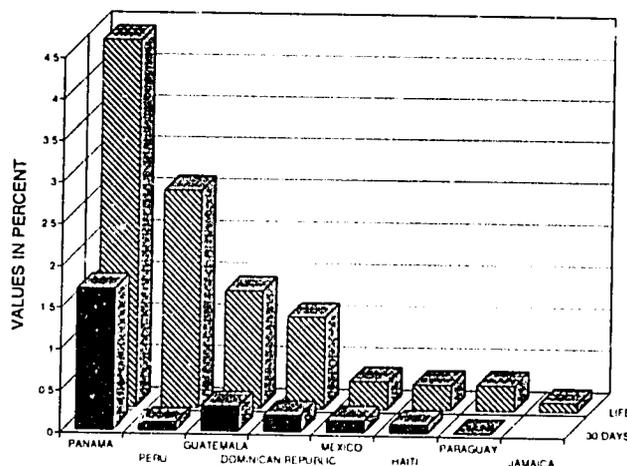
**Panama has the most serious cocaine use problem among Latin American/Caribbean countries studied to date**

**High levels of drug use exist among the male population**

Among the countries in the region for which reasonably comparable data exist, Panama registers the highest lifetime prevalence for cocaine use. Panama showed the highest level of lifetime prevalence of cocaine use (4.4%) as compared to Peru (2.6%), Guatemala (1.4%), Dominican Republic (1.1%) Haiti, Mexico, and Paraguay (all three at 0.3%) (Figure 1). Lifetime prevalence levels of cocaine use among men in C6lon reached 14.3% and marijuana use showed 11.1%. Males in Panama City registered 7% for cocaine and 11% for marijuana (Table 1). Given the underlying population of the universe studied, among males and females in the major urban areas of Panama in the age range surveyed there are somewhat over 43,000 individuals who have ever used a drug (including cocaine, bazuco, crack and marijuana). Of these, about two out of five have used cocaine.

**FIGURE 1  
PREVALENCE OF COCAINE USE IN LATIN AMERICA  
& THE CARIBBEAN**

COUNTRY	LIFETIME	30 DAYS	30 DAYS/ LIFETIME (%)
PANAMA	4.4	1.7	38.6
PERU	2.6	0.1	3.8
GUATEMALA	1.4	0.3	21.4
DOMINICAN REPUBLIC	1.1	0.2	18.2
MEXICO	0.3	0.1	42.4
HAITI	0.3	0.1	33.3
PARAGUAY	0.3		
JAMAICA	0.1		



Sources: Data for Panama, Guatemala, Dominican Republic, Haiti & Paraguay come from epidemiological studies conducted by Development Associates under the Narcotics Awareness and Education Project, and other A.I.D. funded projects. Peru: 1988 study by CEDRO, funded by A.I.D.. Mexico: 1990 study by the Mexican Secretariat of Health. Jamaica: 1987 study by The Pan American Health Organization, funded by A.I.D..

**Concentration of drug use is found in major urban areas**

In contrast to the major urban centers in Panama (Panama City, San Miguelito and Col6n), the interior city of Penonom6 showed no evidence of either lifetime or current use of marijuana, opiates, cocaine, crack or bazuco. Penonom6 also showed lower lifetime current use levels of stimulants and inhalants in comparison to the three major urban areas.

**Significant differences according to gender**

Males were more likely to have tried most of the substances studied. However, females were about equally or more likely to

**TABLE 1**  
**LIFETIME DRUG USE IN THREE PANAMA CITIES: MALES VERSUS FEMALES**  
 (Values in %)

	COLON		PANAMA CITY		SAN MIGUELITO	
	LIFETIME		LIFETIME		LIFETIME	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
TOBACCO	46.0	35.3	53.1	27.2	49.4	22.0
ALCOHOL	90.5	82.0	89.3	70.1	85.5	71.7
ANALGESICS	39.7	51.1	30.8	49.5	30.7	45.6
SEDATIVES	0.0	15.8	3.6	8.5	0.5	4.2
HYPNOTICS	0.0	1.5	2.8	1.8	3.4	0.3
STIMULANTS	4.8	9.0	3.7	1.7	2.9	1.1
MARIJUANA	11.1	3.8	10.9	4.0	7.8	0.4
INHALANTS	3.2	1.5	5.8	1.9	2.6	1.3
OPIATES	0.0	0.0	1.7	0.0	1.3	0.6
COCAINE	14.3	3.8	7.0	2.8	5.7	0.0
CRACK	0.0	0.0	0.5	0.4	1.0	0.7
BAZUCO	3.2	0.0	2.3	2.4	1.6	0.0

be current users of any substance studied once they had tried it. This vulnerability among females is clearly revealed by the high levels of current use as a percentage of lifetime use (Table 2). In terms of lifetime prevalence, males showed higher levels than females for most substance; but females had higher lifetime prevalence of analgesics and sedatives. In terms of current use, males were only higher on tobacco, marijuana, cocaine and alcohol; while females were more likely to be current users of analgesics and sedatives.

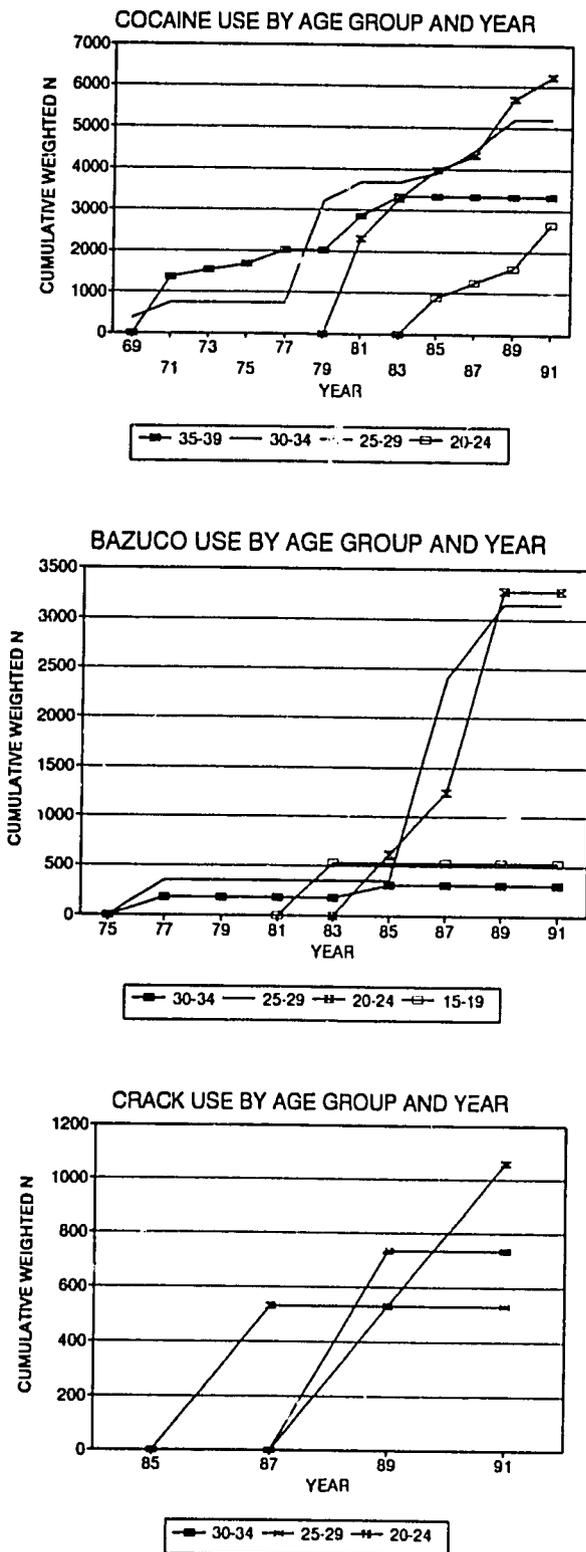
**TABLE 2**  
**WEIGHTED PREVALENCES IN PANAMA SAMPLE: MALES VERSUS FEMALES\***  
 (Values In %)

	LIFETIME		12 MONTHS		30 DAY		30 DAYS AS A % OF LIFETIME	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
TOBACCO	51.2	26.0	24.9	9.8	21.7	7.4	42.4	28.5
ALCOHOL	88.0	71.5	72.1	37.9	54.8	23.5	62.3	32.9
ANALGESICS	31.4	48.3	18.3	30.3	5.3	14.9	16.9	30.8
SEDATIVES	2.2	7.5	0.5	0.9	0.5	0.5	22.7	6.7
HYPNOTICS	2.8	1.2	0.9	0.6	0.5	0.1	17.9	8.3
STIMULANTS	3.5	2.0	1.5	0.9	0.6	0.4	17.1	20.0
MARIJUANA	9.8	2.8	2.6	1.2	2.0	1.1	20.4	39.3
INHALANTS	4.4	1.6	0.9	0.7	0.8	0.7	18.2	43.7
OPIATES	1.4	0.2	0.0	0.0	0.0	0.0	0.0	0.0
COCAINE	7.1	1.9	3.0	1.0	2.6	1.0	36.6	52.6
CRACK	0.6	0.5	0.3	0.2	0.3	0.2	50.0	40.0
BAZUCO	2.1	1.4	0.7	1.2	0.7	1.0	33.3	71.4

\* Panama City, San Miguelito, and Colon combined.

**Drugs are attracting younger users**

**FIGURE 2**



From various perspectives it is clear that in the case of Panama, a trend is developing for increasingly younger age cohorts initiate drug use, and particularly cocaine and its derivatives. Younger persons are entering into the use of cocaine and its derivatives at a faster rate than previously, foreshadowing a potential for increased use of these drugs (Figure 2). Half of cocaine users who were between 20 to 24 years of age in 1991 initiated cocaine use when they were between 16 and 20. Among the 15 to 19 year-old group, initiation of cocaine use took place when they were between 13 and 17 years of age, as young or younger than the previous group. It is clear from the data that cocaine initiation is likely to continue with this younger generation unless action is taken.

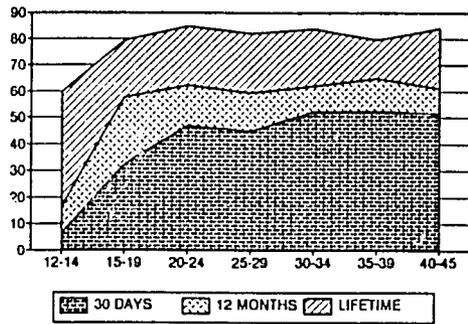
Increasing availability and a sharp drop in the street price of cocaine and its derivatives over the last few years also portend an expanding problem for youth. At \$1.00 to \$1.25 for a hit of cocaine and \$1.25 to \$1.75 for 5 to 7 "rocks" of crack, these drugs are within the financial reach of adolescents.

From another perspective, looking at the relationship between the current age of users and the pattern of prevalence (Figure 3), it is clear that there is a far younger peak age for current use of drugs including cocaine, bazuco, crack, marijuana, inhalants, and hallucinogens than is the case with either alcohol/tobacco or pharmaceuticals

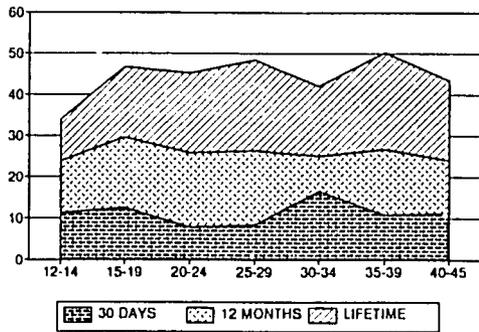
Overall, the importance of a focus on youth in primary prevention is borne out by yet another dimension of the aggregate data. Figure 4 describes the pattern of use in terms of the age of initiation of use. As that graph indicates there is a similar

**FIGURE 3**

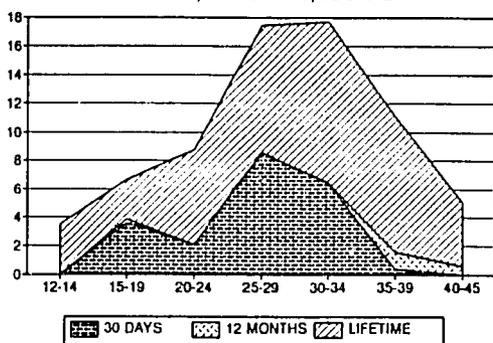
**ALCOHOL & TOBACCO USE X CURRENT AGE**  
LIFETIME, 12 MONTHS, 30 DAYS



**PHARMACEUTICAL USE X CURRENT AGE**  
LIFETIME, 12 MONTHS, 30 DAYS



**"DRUG" USE X CURRENT AGE**  
LIFETIME, 12 MONTHS, 30 DAYS



pattern of initiation for all three sets of substances. Starting at approximately the same point in age in each category, there is a sharp climb up to a plateau, to the point at which no more new users are added. Among children between 12-14 years of age, 60% have used alcohol and about 4% have used inhalants. The consequences in terms of the design of prevention programs is obvious. No matter the substance, it is critical to begin prevention programs early and to try, in effect, to beat the curve: to keep youth from initiating use of psychoactive substances.

**Illicit drugs are used frequently**

A major concern of drug prevention specialists and policy makers is the intensity of drug use. One measure of that intensity is the frequency (the number of times in a given time period) that individuals have used a substance. In Panama cocaine and its derivatives - crack and bazuco - display large percentages of very high frequency (40+ times) among lifetime users: 36% for cocaine, 46% for crack and 26% for bazuco (Figure 5). There are high frequency users of cocaine for the last thirty day period as well: 46% of current users having used the substance 20 to 39 times during that period. In the case of marijuana, 27% of those who have ever used the substance have used it more than forty times in

**FIGURE 4**

**PREVALENCE BY AGE OF INITIATION**  
(VALUES REPRESENT CUMULATIVE PERCENT)

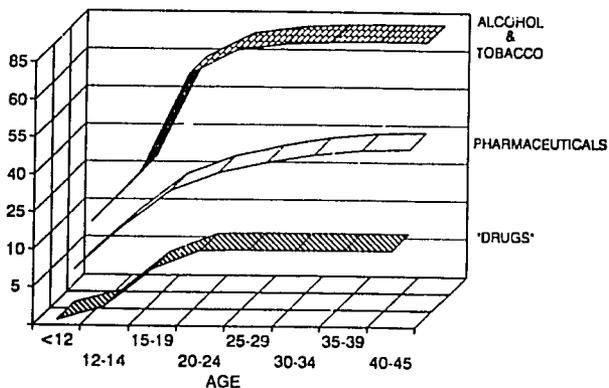
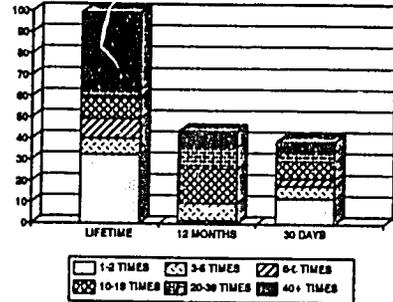


FIGURE 5

FREQUENCY OF USE OF CERTAIN SUBSTANCES AS A PERCENTAGE OF USERS OF THOSE SUBSTANCES

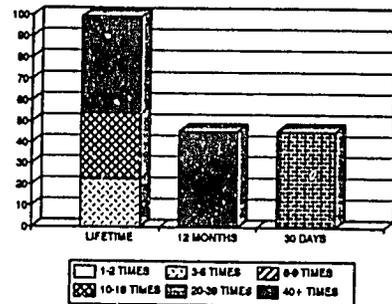
COCAINE

	LIFETIME	12 MONTH	30 DAYS
NO USE	*	55.5	60.3
1-2 TIMES	32.5	1.5	12.2
3-5 TIMES	7.8	8.8	6.0
6-9 TIMES	9.2	0.0	3.4
10-19 TIMES	10.5	16.3	8.4
20-39 TIMES	3.9	10.6	4.8
40+ TIMES	36.1	7.3	4.9



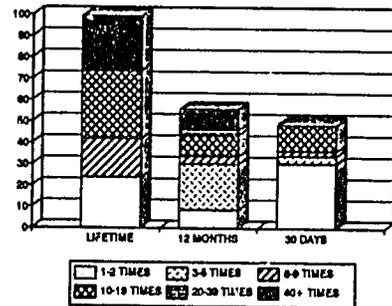
CRACK

	LIFETIME	12 MONTH	30 DAYS
NO USE	*	54.5	54.5
1-2 TIMES	0.0	0.0	0.0
3-5 TIMES	22.8	0.0	0.0
6-9 TIMES	0.0	0.0	0.0
10-19 TIMES	31.6	0.0	0.0
20-39 TIMES	0.0	0.0	45.5
40+ TIMES	45.5	45.5	0.0



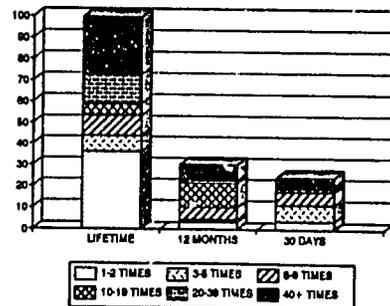
BAZUCO

	LIFETIME	12 MONTH	30 DAYS
NO USE	*	43.7	51.0
1-2 TIMES	24.1	8.5	30.4
3-5 TIMES	0.0	21.9	3.6
6-9 TIMES	18.2	3.6	2.4
10-19 TIMES	32.0	10.1	12.6
20-39 TIMES	0.0	2.4	0.0
40+ TIMES	25.7	9.7	0.0



MARIJUANA

	LIFETIME	12 MONTH	30 DAYS
NO USE	*	69.2	75.2
1-2 TIMES	36.0	3.3	3.7
3-5 TIMES	7.6	1.4	7.6
6-9 TIMES	9.8	5.7	6.2
10-19 TIMES	5.8	11.4	1.7
20-39 TIMES	13.9	1.4	1.4
40+ TIMES	27.0	7.6	4.1



\* PERCENTAGES ARE OF USERS ONLY

their lives. For all of these substances the overall high frequency of use underscores the need for concern.

**Concurrent drug use is high among illicit drug users**

Experts in the field of drug abuse have cited the combined use of two or more substances as yet another indicator for gauging the intensity of the drug problem. A close relationship has been observed between the use of coca derivatives (cocaine, bazuco and crack) and alcohol. Such a pattern is highly displayed in Panama (Figure 6).

Three out of five cocaine users and two out of three users of bazuco combine that use with alcohol. Close to three out of five bazuco users combine that use with marijuana.

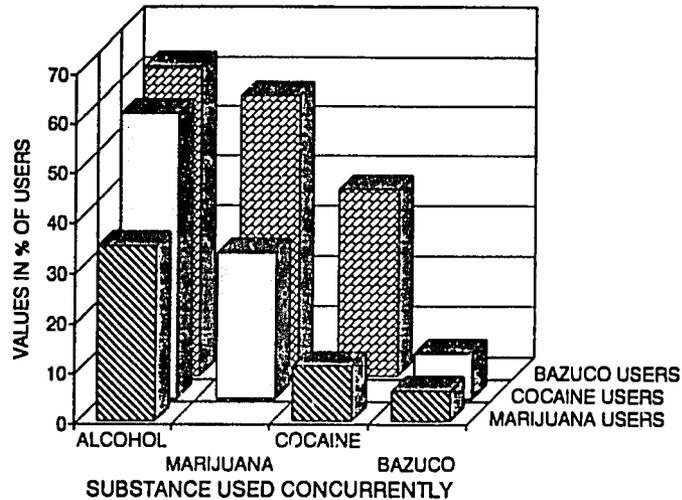
These patterns of concurrent or polydrug abuse indicate again the intensity of the use problem for that segment of the population that is involved in cocaine and bazuco use. They underscore the importance of prevention of use of these substances which display a high potential for destruction of the health and well-being of those who are using them.

**More than half of male users of drugs are employed.**

The data indicate that, contrary to the perception that male users are predominantly those who are out of work, more than half of all male current users of most substances are working (Table 3). Much higher levels exist for cocaine, crack and bazuco. Almost half of all male current marijuana users (46%) are found in work settings. The concentration of current illicit drug use in the workplace is confirmed by independent laboratory test results of employees. In July 1991, one laboratory reported on the results of drug tests of 1,500 employees, including those of the executive branch of the government, other public sector agencies, large private sector firms and members of a transport workers union. Test results were 21% positive for cocaine and 10% for marijuana. Another report dated July 1991 from another laboratory revealed 13% positive for one set of 320 employees and 7% positive for another set of 294 workers.

**FIGURE 6**

**CONCURRENT USE**  
(VALUES IN PERCENTAGES OF USERS)\*



\* PANAMA CITY, SAN MIGUELITO, AND COLON COMBINED

**TABLE 3**  
**CURRENT DRUG USE AS A PERCENT - ALL USERS OF THE SAME SEX**  
**FOR EACH DRUG BY EMPLOYMENT STATUS\***  
 (Values in %)

	WORKING		NOT WORKING/ NOT IN SCHOOL		NOT WORKING/ IN SCHOOL	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
TOBACCO	80.3	38.0	11.1	57.9	8.6	4.1
ALCOHOL	68.6	29.3	15.7	56.1	15.7	14.5
ANALGESICS	77.6	20.1	6.7	56.9	15.7	23.1
SEDATIVES	0.0	30.1	59.0	57.5	41.0	12.5
HYPNOTICS	61.0	100.0	39.0	0.0	0.0	0.0
STIMULANTS	85.0	0.0	15.0	100.0	0.0	0.0
MARIJUANA	45.5	24.0	54.5	76.0	0.0	0.0
INHALANTS	77.1	37.2	22.9	0.0	0.0	62.8
OPIATES	0.0	--	0.0	--	100.0	--
COCAINE	65.3	12.5	34.7	87.5	0.0	0.0
CRACK	100.0	0.0	0.0	100.0	0.0	0.0
BAZUCO	51.0	12.5	49.0	87.5	0.0	0.0

\* Panama City, San Miguelito, and Colon.

**Public awareness of the problem in Panama is high**

The vast majority of those interviewed believe that both consumption in Panama and trafficking through Panama constitute serious problems: 96% considered drug use a very serious or serious problem, while 97% considered trafficking a very serious or serious problem. In other words, there is a high awareness among those surveyed about the seriousness of the drug problem in a general sense.

**Half of respondents believe the family is key to finding a solution**

The survey also sought to explore the types of solutions to the drug consumption problem favored by the populace sampled. In response to the question "which of the following

**TABLE 4**  
**FACTORS THAT INHIBIT DRUG USE (IN PERCENTAGES)**  
**(FOR PANAMA CITY, SAN MIGUELITO AND COLON COMBINED)**

POLICE	17.6
FAMILY	50.1
PUBLICITY	8.8
FRIENDS	3.0
RELIGION	13.6
COST	4.5
OTHERS	2.5

elements most restricts drug use?" one out of two urban residents sampled identified the family, 18% responded the police, followed by 14% favoring religion and 9% publicity (Table 4). Clearly, Panamanians see their most intimate circle, the family, as the main bulwark against drug use.

## **Prevention Strategy Implications**

Surveys of this nature have implications for the design and development of long-term prevention strategies, in particular primary prevention efforts designed to prevent the onset of drug abuse. Cruz Blanca, Panamanian national authorities, committees of the National Assembly, religious, civic and other non-governmental organizations are presently examining the major findings, conclusions and recommendations to guide their efforts in developing a national prevention plan.