

## Chapter 2

# Drug Abuse in the Middle East: Promoting Mutual Interests Through Resistance and Resilience

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### 2.1 Introduction

Because Jewish and Arab people have been in a declared and/or de facto state of war since the establishment of Israel in 1948, the possibility of such people to deal with mutual mental health and addiction problems has been remote. Addiction, through mutual law enforcement efforts, information sharing, training, and research have not until recently been considered as an effective strategy to tackle.

A guiding principle of this case study of joint Middle East efforts is that encounters between addiction caregivers, researchers, policy makers, and others including physicians, psychologists, social workers, and academicians can have multiple aims. One is to address local and regional problems through evidence-based interventions. Another is to develop a framework for positive interaction by focusing on a common topic of scientific and public health interest in order to promote communication and cooperation, reducing conflict and hostility.

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## **2.2 Middle East Narcotics Trafficking, Control, and Need for Positive Interaction Addressing Common Problems**

Illicit drug use and trafficking have a long history in the Middle East. In 1959, the Middle East Narcotics Survey Mission of the United Nations was established to make suggestions on the ways to control illicit drugs originating in the Middle East and to guide the United Nations Commission on Narcotic Drugs on the best ways to handle the problem. The Mission considered the drug problem as a regional issue characterized by the production and consumption of substantial amounts of cannabis, opium, and opium derivatives as well as the transport of these substances via land, sea, and air routes to other parts of the world, in particular to Europe and North America (UNODC, 2014).

Cooperation was urged to address the drug problem at the grass roots level including desolate frontier lands and country borders. However, in order to improve cooperation at this level, it was essential to have broad and comprehensive agreements among the neighboring countries involved (Bulletin on Narcotics, 1960). The Mission also noted the value of bilateral agreements between governments. It encouraged direct contact among governments' law enforcement agencies as well as health, education, and welfare ministries and nongovernmental organizations (NGOs) addressing drug problems for prevention and treatment purposes. None of the recommendations were addressed on multinational or People-to-People (P2P) levels until the Middle East Regional Alcohol and Drug Abuse Research (RADAR) centers were established in 1995–1996 by the authors of this chapter through the United States Substance Abuse and Mental Health Services Administration (SAMHSA).

## **2.3 The Middle East Peace Process: An Overview**

To understand the current context of addressing drug and mental health problems among Israeli and Palestinian people, reference must be made of the Oslo Declaration of Principles (DOP) Accord of September 13, 1993. Various agreements including the Israeli–Palestinian Declaration of Principles of September 13, 1997, provided a framework to bring peace, security, and stability to the region. They laid the ideological foundation for cooperation, through joint initiatives in areas of economics, industry, communication, environment, water management, and health, considered to be an integral part of promoting reconciliation and peace.

The People-to-People (P2P) proviso of the Interim Agreement (Article 8 of Annex 6) signed on September 28, 1995, and subsequent resolutions recognized that political leaders alone cannot achieve peace and that networks of change agents and other people with mutual interests need to be established. While politicians may accomplish peace through written agreements, only people can actually make it

happen through efforts and interactions with each other. RADAR Centers, with support from the SAMHSA, the Israel Ministry of Foreign Affairs' Agency for International Development Cooperation, and Ben-Gurion University (BGU) were established to provide "useful information" to people addressing the drug problem and to promote bridge-building initiatives among those involved. This experience, in cooperation with peace organizations, professional agencies, and international experts, created a drugs–peace consortium known as "Palestinian and Israeli People Against Substance Abuse" (PIPASA) in the late 1990s. Over time, the PIPASA relationship became a hotbed of personal interests and conflicting perspectives resulting in disintegration. However, much activity was generated and still continues as the result of people working together in a spirit of cooperation.

## 2.4 Toward Mutual Interests and Peaceful Relations

During the last 20 years or so, two concepts of promoting peace in the region have come into play. The first is associated with efforts of diplomats and other people to bring about a cessation of hostilities by ensuring cease-fires and finalizing peace agreements. In contrast to peacemaking through diplomacy, peace building involves long-term efforts designed to transform the nature of relations through identifying and addressing mutual interests and concerns among those caught up in a conflict. Cease-fires, peace agreements, peace building, and joint efforts represent different phases of conflict resolution. The approach taken to address Middle East drug use and mental health issues built on select organization components that included (1) an integrated perspective focused on short-term accomplishments for long-term transformation (e.g., initiating activities to address needs, resolving simple concerns immediately, and promoting mutual recognition) and (2) building a constituency of individuals and organizations able to work together and support each other in a spirit of respect and trust during good and bad times (Isralowitz et al., 2001; Lederach, 1995).

As noted above, the participants in the PIPASA experience were not politicians but NGO personnel, academicians, and caregivers. As such, they were not in a position to contribute to efforts that would provide a short- or long-term framework for solving the Palestinian–Israeli conflict. Such a framework was created and attempted with the Oslo Accord peace process and put into practice with interim agreements promoted by peacemaking organizations that were in a position of doling out resources and opportunities for program activity. With such resources, people and projects were sometimes herded together by certain NGOs to further their own interests rather than those of people at ground level.

In the remainder of this chapter, the PIPASA experience is examined in terms of Lederach's principles of building a constituency and infrastructure promoting cooperation and cooperation in the region.

## 2.5 The Processes and Outcomes of the Regional Alcohol and Drug Abuse Research Initiatives

On the Israeli side, professional drug abuse leadership was provided by the RADAR Center of Ben-Gurion University (BGU). The key Palestinian substance abuse professionals were affiliated with the Bethlehem-based Child and Family Consultation Center (CFCC) and the Gaza-based RADAR Center of the Child Health and Community Research Association (CHCR), now the Substance Abuse Research Center (SARC). These RADAR Centers compiled libraries of educational and reference resources (books, pamphlets, posters, and videotapes). Materials included National Institute of Drug Abuse (NIDA) and SAMHSA documents representative of “best-practice protocols.”

*Creating outposts.* From their start, the Israeli and Palestinian RADAR Centers represented “outposts” for increasing drug abuse awareness in the region. However, over time, the Palestinian West Bank unit ceased to exist for organization reasons including dissonance among personnel. Also, the Israeli and Palestinian NGOs that created opportunities for health professionals and caregivers to meet and interact broke apart. This is not surprising because of the uncertainty of resources needed to promote motivation and initiatives generating a steady flow of short- and long-term results. Also, particularly on the Palestinian side, such cooperation in many cases led to confronting conditions that were affecting careers and, even more so, the well-being of individuals and their family members. In retrospect, the ability to bring Israelis and Palestinians together for professional interaction is as uncertain now as it was 20 years ago. An example is the challenge of arranging travel permits for Palestinian professionals to leave the West Bank and Gaza in order to enter Israel for professional training purposes. Today, few Israelis venture into Gaza, and residents of that area can enter Israel or cross over to the West Bank only after receiving permits from Israeli government security units. Knowing passage is permitted, even with assurances, is often uncertain up to the very last minute making joint workshop and training efforts a daunting challenge.

*Workshop.* During the initial planning stage of organization (i.e. in the late 1990s), the BGU and Palestinian RADAR Center directors conducted a workshop on the drug abuse problem. The workshop was designed to facilitate a meeting of professionals from both societies and to gauge the extent of cooperation possible. It was agreed that the workshop would be held in Beer Sheva (Israel), home of Ben-Gurion University, and that an international expert from the United States be invited to serve as facilitator between the two groups. With cooperation from personnel of the US Embassy in Tel Aviv and international foundations, a senior staff member of the University of California Los Angeles–Integrated Substance Abuse Programs was chosen to share his knowledge and experience. This was a carefully thought out selection process because the workshop participants needed someone able to promote networking and support of joint drug abuse-related activities.

*Lecture series.* The initial RADAR Center effort involving the US expert was widened to include a series of lectures in Gaza and the West Bank for Palestinian professionals, prior to the joint workshop in Beer Sheva. The reason for this was to ensure that his trip did not solely depend on the workshop that was in danger of being postponed due to a closure of the Israeli boarder crossings with Gaza and the West Bank. Having successfully completed the trips to Gaza and the West Bank, efforts focused on the 2-day workshop entitled, "Palestinian and Israeli People Against Substance Abuse: An Effort to Address the Problem Through Communication, Cooperation and Coordination." As expected, travel permits for Palestinians to enter into Israel were a problem for the workshop that was to be held (i.e. November 4–5, 1997). Only two thirds of the Gaza workshop participants were granted permits. On the West Bank, two of the key participants were refused entry that prompted the frustrated 18-person West Bank delegation to threaten boycott of the event. Eventually, after a daylong persistent NGO negotiation with Israeli security personnel, permits were obtained for all of the Palestinian West Bank participants. However, the permits did not include sleepover authorization for everyone, causing the West Bank participants to arrive only on the second day of the workshop (Isralowitz et al., 2001).

Despite the workshop getting off to a difficult start as a result of the permit problems, the second day produced electrifying debate, and it soon became apparent that the area of drug abuse encapsulated a world of its own for dialogue and cooperation. One of the major issues raised was the Palestinian claim that Israel deliberately encouraged the flow of drugs to Palestinian areas. This position was linked to two factors. The first was the association between some Palestinian criminal collaborators, often drug dealers and prostitutes, who had worked with the Israeli General Security Service as informants (Robinson, 1997). A second factor contributing to this perception was that drug dealers holding Israeli identification cards, arrested for selling drugs in Palestinian areas, were soon seen on the streets after being transferred to the Israeli authorities. This situation was clarified by a senior representative of the Israeli police who stated that Israeli authorities often had no choice but to release these people because they lacked the evidence to convict and that similar problems were being faced in Israel as a result of liberal arrest laws. The workshops provided a valuable framework to address these perceptions and enabled the participants to stress the importance of research including an assessment of Palestinian needs in the area of skills training. It is worth noting that the American expert played a central role in the Beer Sheva workshop and its discussions by providing a neutral third-party perspective, particularly at junctures when sensitive issues seemed to shift the focus of the workshop to a series of mutual recriminations. A stenographer recorded these and other workshop proceedings for publication and distribution (Isralowitz, 1998a, 1998b, 1999; Isralowitz et al., 2001).

The initial Israeli–Palestinian drug abuse workshop served an important function. It provided participants with an opportunity to establish personal and professional contacts regarding a mutual issue of concern, drug abuse, and addiction, as well as to promote cooperation for information sharing, research, and training workshops. The event served to ensure that the process was practically oriented and that no one side

imposed its will or agenda on the other. The forum also served as a means to dispel a number of misperceptions about the drug problem, reinforce the belief that the problem was of mutual concern, and humanize perceived adversaries.

Building on the accomplishments of the initial workshop, a second effort was organized with support from the US Information Agency (USIA) and the British Council in Tel Aviv. A consultant from the National Crime Prevention Council (NCPC) in the United States was recruited to lead "Prevention and Beyond: A Workshop on Community Based Initiatives," held in Bethlehem, Israel on May 25–26, 1998.

The workshop, with over 60 participants, was easier to organize since travel permits for participants from the West Bank were not required. A variety of new representatives from Israeli and Palestinian NGOs and government ministries attended including those involved with youth, education, drug prevention, and law enforcement (i.e. police) expanding the network of contacts. The participation of the government representatives was particularly significant at the time, considering that government-to-government contacts had tapered off due to the impasse in the peace process. In addition to the professional interactions, the Israelis who slept over in a Bethlehem hotel visited local coffee shops with the Palestinian participants. Again, as in the first workshop, Palestinians expressed the belief that Israel was "flooding" Palestinian streets with drugs, and again, these matters were discussed and diffused, this time by the police officers attending from both sides including the deputy director of the Palestinian Antidrug Authority. This interaction laid the foundation for future police-to-police workshops and cooperation (Isralowitz et al., 2001).

*Funding.* Support for West Bank and Gaza Palestinian professional drug abuse training was received from the Agency for International Development Cooperation (MASHAV), Israel Ministry of Foreign Affairs. The two 40-h training programs, organized by the BGU RADAR Center with its Palestinian counterparts, were held at Al-Quds University (East Jerusalem) in the West Bank and Beer Sheva. The Al-Quds workshop was led by Los Angeles-based Matrix Institute for the Treatment of Addictions personnel. In the presence of Fathi Arafat, younger brother of the late Palestinian president Yasser and director of the Palestinian Red Crescent Society and Israel Ministry of Foreign Affairs personnel, workshop participants received two certificates of training completion because a certificate showing Israeli involvement caused problems for some. Immediately after the Al-Quds University training, a workshop was held in Beer Sheva for Israelis and Palestinians. This effort involved a scientist of the Programme on Substance Abuse of the World Health Organization in Geneva, Switzerland, and experts from the UCLA Integrated Substance Abuse Programs to help promote Israeli and Palestinian involvement.<sup>1</sup>

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<sup>1</sup>The coordination of the Al-Quds University training was the responsibility of a senior faculty member who received his doctoral degree from a prestigious US university. That person was detained by Israeli security soon after the Al-Quds workshop and jailed. Unknown prior to his arrest was that he had a senior level position addressing education and social welfare issues with Hamas (a US State Department and Israeli government-labeled terrorist organization). His Israeli counterpart, coeditor of this book, received an unsealed letter from him, retained to this day, from

After these activities, a fourth workshop was planned to promote dialogue among Israeli and Palestinian law enforcement personnel including judges and police officers addressing the drug problem. This event was postponed twice because the Israeli participants were denied entry into Gaza. Finally, as a result of considerable persistence from Israeli-based NGO personnel, the workshop was held in Ramallah on March 24 and 25, 1999. It was attended by officially sanctioned delegations of the Israeli and Palestinian police and legal experts of the Israel Ministry of Justice. Also attending the workshop were the deputy director of the Israel Antidrug Authority and his Palestinian counterpart, resulting in improved relations between the two antidrug authorities. Unfortunately, Palestinian judges from Gaza including those affiliated with its supreme court did not attend as a consequence of being detained at the border. During the workshop, the alleged role Israel had in supplying drugs surfaced again as a major issue. Despite heated exchanges, the workshop proved to be a constructive forum for Israeli and Palestinian drug enforcement personnel, including police and legal authorities, to discuss common problems.

While previous endeavors created sufficient momentum for a variety of collaborative research and development projects, in retrospect, these efforts were also instrumental in building the confidence and goodwill necessary for this “police-to-police” meeting. To a certain extent, high-ranking Israeli officers were suspicious of an NGO-driven process arguing that the necessary structures for cooperation and coordination were already in place and that there was no need for its personnel to meet with their Palestinian counterparts. However, in reality, poor relations prevailed between the Palestinian National Authority (PNA) and the government of Israel reducing interactions to a bare “reactive” minimum.

In April 1999, again with support from the US Information Agency, an expert from the University of Connecticut, Department of Community Medicine and Health Care, visited the region to conduct training in Gaza and the West Bank. Also, he led a 2-day workshop in Beer Sheva (April 26 and 27, 1999) to promote a WHO substance abuse research initiative (Isralowitz et al., 2001).

In addition to the workshops and training described above, the Israeli and Palestinian RADAR Centers generated other programs and initiatives. These included the development of Hebrew and Arab versions of the Matrix Institute of manualized, step-by-step, drug treatment approach (Note: The Arab version reportedly found its way to other Arab countries in the Arabian Gulf). The manuals were funded by the Palestinian–Israeli–Netherlands (PIN) Research Program administered by the Foreign Ministries of the Netherlands and Israel. Also, the Palestinian RADAR Center in Gaza received computer, audiovisual, and other equipment from its Israeli counterpart at Ben-Gurion University.

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prison explaining his situation. Effort was made to contact him and intervene in his behalf. A major peace NGO was consulted and advised not to become involved because it could jeopardize the ability to promote other activities and efforts among cooperating Israelis and Palestinians. No contact was ever received again. Even senior level officials of Al-Quds University, where he was last employed, disassociated themselves from him and refused to discuss the event.



In retrospect, the “jewel in the crown” of these efforts was the attendance of Israeli and Palestinian delegations at an international meeting of the US SAMHSA RADAR Center directors in Irvine, California—May 3–8, 1999. This effort included recognition of both delegations by the conference attendees and an Israeli and a Palestinian flag presentation by a United States Marine honor guard. After this event, the joint delegation proceeded on to Los Angeles for training and research planning purposes led by UCLA Integrated Substance Abuse Programs personnel supported by the Matrix and Friends Research Institutes. An outcome of this meeting was a proposal submitted to the United States Agency for International Development (USAID)–Middle East Regional Cooperation (MERC) Program for improving drug prevalence monitoring among youth in Israel, Gaza, and the West Bank. Modeled after the US National Institute on Drug Abuse (NIDA)–Community Epidemiological Working Group approach, the initiative received funding support opening the door for sustained joint efforts. Another positive outcome of USAID support was the publication of an edited book that included contributions from Israeli, Palestinian, US, and World Health Organization drug abuse experts. The book, the only one in English, was published in 2002 (Isralowitz, Afifi, & Rawson, 2002).

The professionals involved with this experience have demonstrated a successful and productive track record of accomplishment—working together to address problems common internationally and, in particular, in Israel, Gaza, and the West Bank. This cooperation has prevailed through difficult times including war and ongoing tension in the region. Professional journal articles and conference presentations have been generated, and the Israeli partner is proud to have been called on by the United Nations to recommend his Palestinian colleague for an award in reducing the spread of AIDS in Gaza and the West Bank.

From 2008 to 2013, attention was given to cigarette smoking cessation among Palestinian and Israeli youth. Developed on an “evidence-based initiative” from the University of Southern California, the effort demonstrated resilience of the partnership to overcome significant cultural and situational obstacles affecting efforts to test the intervention (see Chap. 7). After 4 years, “useful information” was generated, and United States Agency for International Development–Middle East Regional Cooperation funded a follow-up study in Gaza, West Bank, and Israel to identify the impact of the intervention and shifting patterns of drug use among youth resulting from regional tension and war in 2014.

From a mental health perspective, since 2011, the Palestinian and Israel partnership has been working with experts from the Institute for Disaster Mental Health, State University of New York–New Paltz and Rutgers University–School of Social Work on capacity development among professionals, parents, and caregivers to address the needs of children and youth in emergency conditions. This effort is described in detail in Findley, Halpern, Rodriguez, and Vermeulen (2016).

After years of “connecting dots” related to meetings, workshop training, proposal submissions, research, and more with their staff members and steadfast international partners, the coauthors of this chapter were given recognition by the US National Institute of Drug Abuse for their “contributions to scientific diplomacy through outstanding efforts in international collaborative research on drug abuse



and addiction” in 2015. To address the importance of low-profile efforts and acknowledgments, the awards were issued without publicity and without joint photographs as to not bring attention to their partnership.

## 2.6 Conclusion

The over 20-year effort described above is the result of many people coming together to address mutual interests and concerns, usable knowledge (Lindblom & Cohen, 1979), negative stereotyping, and much more. By tapping into drug abuse a mental health issue of mutual concern, this effort has served as an island of sanity and interaction in rough seas. Overall, the multiple short and long accomplishments reflect what is possible and recommended by the United Nations Middle East Narcotics Survey Mission in 1959. However, regional hostilities show how easy it is to unravel what has been done by individuals and groups with self-serving interests including those of a political nature.

The role and involvement of international experts have contributed much to the success of this effort. They have provided professional legitimacy that encouraged the involvement of participants from both societies; they helped focus discussion and energies on issues of mutual concern; and they served as a source of support and encouragement during times of isolation and despair.

In retrospect, one shortcoming of this initiative is that it never became linked to the permanent support needed to create a joint office or secretariat to manage and coordinate activities among the participants involved. However, such support could have been a divisive factor as evidenced by some peace organizations. Also, it is a pity that attention was not given to measuring the 20-year effort in terms of a “meta” outcome.

## 2.7 Future Directions

In many respects, the Middle East is at the crossroads in terms of international relations, peace, and stability. For Israeli and Palestinian people, there has been no Arab Spring, no Arab–Israeli Spring, and no Spring at all. Can this experience be replicated in other settings and communities that are in conflict? Can drug abuse and mental health issues of mutual concern be used to build bridges? The answer is yes; however much depends on the people involved and their resolve to work together to achieve beneficial results that are difficult to secure and even more difficult to sustain.

In sum, much has been accomplished; much remains. In the words of Edward Everett Hale, what can be said is:

“[we] were only one, but [one]. We could not do everything, but we did do something. The something we needed to do, we tried to do. And by the grace of G-D, we did and will continue to do so...” [for our children — Israeli and Palestinian].

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