

52nd SESSION OF THE COMMISSION ON NARCOTIC DRUGS

High Level Segment

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NEW ZEALAND STATEMENT

Hon Mr Peter Dunne

Minister of Revenue and Associate Minister of Health

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Madam Chair,

May I begin by congratulating you on your chairpersonship of this high-level segment and express our confidence in your ability to achieve a successful outcome for our work.

This debate is the opportunity to critically and honestly review the lessons learnt and the progress made against the objectives that were collectively agreed upon at the UNGASS in 1998.

While we need to reflect on our achievements and shortcomings we also need to look forward. We face an ever-diversifying and multi-faceted drug problem. But we do so equipped with numerous and critical lessons from the past. A rich body of knowledge and evidence is now available for us to draw on, presenting a timely opportunity to strengthen our collective actions and to use the wisdom of the past to build a new vision for the future.

Last month in New Zealand I was pleased to have the opportunity to open an international drug policy symposium attended by international experts from around the world for two days of discussions about dealing more effectively with the scourge of drugs in society today.

I mention this because, as we gather here at this high-level segment to chart a course for the next 10 years, it is important that the

decisions we make enable positive progress towards our collective goals. I was heartened that the symposium provided overall support for New Zealand's drug policy and its three pillars of supply control; demand reduction; and problem limitation. Our efforts to balance these three pillars have, I believe, helped us considerably in our fight against illegal drugs in New Zealand over the past 10 years.

The ultimate aim for our work at this Commission on Narcotic Drugs must be the elimination of illegal drugs, and reducing the health and social consequences of substance abuse.

In New Zealand we want to foster a culture of abstinence but we also live in a world where drug use is a reality, so governments also have a responsibility to minimise the personal, social, and economic costs associated with drug use. When we talk about limiting the problems of drug use we include not only the treatment of drug users with a view to ultimate abstinence but also activities such as needle exchange schemes which are responsible, we believe, for New Zealand having one of the lowest HIV/AIDS rates amongst intra-venous drug users in the world.

This practical approach to the consequences of illegal drug use stands alongside our strong commitment to controlling the supply and spread of illegal drugs in our country.

Madam Chair, I would like to briefly outline some of the innovative activities which New Zealand is developing.

Firstly we have instituted a long overdue review of our misuse of drugs legislation. We want a framework that is generic and principled and not one that makes decisions in an ad hoc way about new substances. We want a law that focuses on complementary strategies to control supply, reduce demand, and limit problems arising from use.

New evidence based approaches to public health initiatives are needed in order to achieve a better balance between punishment, rehabilitation and education. We must focus on policy outcomes which ultimately work, rather than just leave a feel-good sense of "doing good". The review will take account of our international obligations as signatories to the drug conventions.

Secondly we have already introduced a restricted substances schedule within our Misuse of Drugs Act which aims at controlling those substances which have a low risk of harm but which nevertheless should be subject to some form of control. A restricted substance is still legally available but we put restrictions on who it may be sold to (no one under 18), where it can be sold from, the way it can be sold and how it can be advertised. There are also requirements for warnings about possible harms and offences. This

innovation is potentially an important step in controlling substances which would otherwise be available freely and without restriction.

Thirdly we have made funding available to promote community action on youth and drugs (CAYAD) projects which aim to harness community resources to build community resilience to drug threats. We now have over 25 CAYAD projects operating throughout New Zealand and evaluations have shown these to be a successful approach.

In closing, Madam Chair, I would like to make reference to two other principles that New Zealand considers need to be highlighted and embedded in any political declaration that emerges from this high-level segment. Firstly there needs to be strong and clear language on the need for all drug control activities to comply with human rights obligations, with specific reference to the UN Charter. New Zealand takes its commitment to human rights seriously and we aim to ensure that actions taken to reduce harm from drugs are proportionate to our objectives and that punishment is proportionate to the offence.

New Zealand is fundamentally opposed to the death penalty, and we aim to protect privacy and access to health for all. Secondly, New Zealand congratulates the NGO movement for its efforts in presenting the Beyond 2008 declaration. While the United Nations is based on co-operation by member states, it is clear that no

solution to international drug problems can be achieved without the involvement of civil society in this work. This year New Zealand has included an NGO representative as part of our delegation and we look forward to a stronger relationship between civil society and the work of the CND.

New Zealand looks forward to continuing to play its part in international drug control efforts for a better and healthier society.

Thank you