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**COMMISSION ON NARCOTIC DRUGS ACTING AS  
PREPARATORY BODY FOR THE SPECIAL SESSION  
OF THE GENERAL ASSEMBLY DEVOTED TO THE  
FIGHT AGAINST THE ILLICIT PRODUCTION,  
SALE, DEMAND, TRAFFIC AND DISTRIBUTION  
OF NARCOTIC DRUGS AND PSYCHOTROPIC  
SUBSTANCES AND RELATED ACTIVITIES**

**Second session  
Vienna, 16-20 March 1998**

**DRAFT DECLARATION ON THE GUIDING PRINCIPLES OF  
DRUG DEMAND REDUCTION<sup>(a)</sup>**

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**I. THE CHALLENGE**

1. All countries are affected by the devastating consequences of drug abuse and illicit trafficking: adverse effects on health; an upsurge in crime, violence and corruption; the draining of human, natural and financial resources that might otherwise be used for social and economic development; the destruction of individuals, families and communities; and the undermining of political, cultural, social and economic structures.
2. Drug abuse affects all sectors of society and countries at all levels of development. Therefore drug demand reduction policies and programmes should address all sectors of society.
3. A rapidly changing social and economic climate, coupled with increased availability and promotion of drugs and the demand for them, have contributed to the increasing magnitude of the global drug abuse problem. The complexity of the problem has been compounded by changing patterns of drug abuse, supply and distribution. There has been an increase in social and economic factors which make people, especially the young, more vulnerable and likely to engage in drug use and drug-related risk-taking behaviour.
4. Extensive efforts have been and continue to be made by Governments at all levels to suppress the illicit production, trafficking and distribution of drugs. The most effective approach towards the drug problem consists of a comprehensive, balanced and coordinated approach, encompassing supply control and demand reduction reinforcing each other, together with the appropriate application of the principle of shared responsibility. There is now a need to

intensify our efforts in demand reduction and to provide adequate resources towards that end.

5. Programmes to reduce demand for drugs should be part of a comprehensive strategy to reduce demand for all substances of abuse. Such programmes should be integrated to promote cooperation between all concerned, should include a wide variety of appropriate interventions, should promote health and social well-being among individuals, families and communities and should reduce the adverse consequences of drug abuse for the individual and for society as a whole.

6. This Declaration is an important initiative of the United Nations Decade on Drug Abuse, covering the period 1991-2000. It responds to the need for an international instrument on the adoption of effective measures at the national, regional and international levels against the demand for illicit drugs. It builds and expands upon a number of related international conventions and recommendations which are itemized in the annex.

## **II. THE COMMITMENT**

7. We, the Member States of the United Nations,

(a) Undertake that this Declaration on the Guiding Principles of Drug Demand Reduction shall direct our actions;

(b) Pledge a sustained political, social, health and educational commitment to investing in demand reduction programmes that will contribute towards reducing public health problems, improving individual health and well-being, promoting social and economic integration, reinforcing family systems and making communities safer;

(c) Agree to promote, in a balanced way, interregional and international cooperation in order to control supply and reduce demand;

(d) Adopt measures provided for in article 14, paragraph 4, of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988, which states, *inter alia*, that parties should adopt "appropriate measures aimed at eliminating or reducing illicit demand for narcotic drugs and psychotropic substances" and may enter into bilateral or multilateral agreements or arrangements aimed at eliminating or reducing that demand.

## **III. GUIDING PRINCIPLES**

8. The following principles shall guide the formulation of the demand reduction component of national and international drug control strategies, in accordance with the principles of the Charter of the United Nations and international law and, in particular, respect for the sovereignty and territorial integrity of States; human rights and fundamental freedoms and the principles of the Universal Declaration of Human Rights; and the principle of shared responsibility:

(a) There shall be a balanced approach between demand reduction and supply reduction, each reinforcing the other, in an integrated approach to solving the drug problem;

(b) Demand reduction policies shall:

(i) Aim at preventing the use of drugs and at reducing the adverse consequences of drug abuse;

(ii) Provide for and encourage active and coordinated participation of individuals at the community level, both generally and in situations of particular risk, by virtue of, for example, their geographical location, economic conditions or relatively large addict populations;

(iii) Be sensitive to both culture and gender;

(iv) Contribute to developing and sustaining supportive environments.

## **IV. CALL FOR ACTION**

### **A. Assessing the problem**

9. Demand reduction programmes should be based on a regular assessment of the nature and magnitude of drug use and abuse and drug-related problems in the population. This is imperative for the identification of any emerging trends. Assessments should be undertaken by States in a comprehensive, systematic and periodic manner, drawing on results of relevant studies, allowing for geographical considerations and using similar definitions, indicators and procedures to assess the drug situation. Demand reduction strategies should be built on knowledge acquired from research as well as lessons derived from past programmes. These strategies should take into account the scientific advances in the field, in accordance with the existing treaty obligations, subject to national legislation and the Comprehensive Multidisciplinary Outline of Future Activities in Drug Abuse Control.

### **B. Tackling the problem**

10. Demand reduction programmes should cover all areas of prevention, from discouraging initial use to reducing the negative health and social consequences of drug abuse. They should embrace information, education, public awareness, early intervention, counselling, treatment, rehabilitation, relapse prevention, aftercare and social

reintegration. Early help and access to services should be offered to those in need.

### **C. Forging partnerships**

11. A community-wide participatory and partnership approach is crucial to the accurate assessment of the problem, the identification of viable solutions and the formulation and implementation of appropriate policies and programmes. Collaboration among Governments, non-governmental organizations, parents, teachers, health professionals, youth and community organizations, employers' organizations, workers' organizations and the private sector is, therefore, essential. Such collaboration improves public awareness and enhances the capacity of communities to deal with the negative consequences of drug abuse. Public responsibility and awareness and community mobilization are of paramount importance to ensuring the sustainability of demand reduction strategies.

12. Demand reduction efforts should be integrated into broader social welfare and health promotion policies and preventive education programmes. It is necessary to secure and sustain an environment in which healthy choices become attractive and accessible. Efforts to reduce the demand for drugs should be part of a broader social policy approach that encourages multisectoral collaboration. Such efforts should be comprehensive, multifaceted, coordinated and integrated with social and public policies that influence the overall health and social and economic well-being of people.

### **D. Focusing on special needs**

13. Demand reduction programmes should be designed to address the needs of the population in general, as well as those of specific population groups, paying special attention to youth. Programmes should be effective, relevant and accessible to those groups most at risk, taking into account differences in gender, culture and education.

14. In order to promote the social reintegration of drug-abusing offenders, where appropriate and consistent with the national laws and policies of Member States, Governments should consider providing, either as an alternative to conviction or punishment or in addition to punishment, that abusers of drugs should undergo measures of treatment, education, aftercare, rehabilitation and social reintegration. Member States should develop within the criminal justice system, where appropriate, capacities for assisting drug abusers with education, treatment and rehabilitation services. In this overall context, close cooperation between criminal justice, health and social systems is a necessity and should be encouraged.

### **E. Sending the right message**

15. Information utilized in educational and prevention programmes should be clear, scientifically accurate and reliable, culturally valid, timely and, where possible, tested with a target population. Every attempt should be made to ensure credibility, avoid sensationalism, promote trust and enhance effectiveness. States should, in cooperation with the media, seek to raise public consciousness about the hazards of drug use and to promote preventive messages, countering the promotion of drug use in popular culture.

### **F. Building on experience**

16. States should place appropriate emphasis on training policy makers, programme planners and practitioners in all aspects of the design, execution and evaluation of demand reduction strategies and programmes. Those strategies and programmes should be ongoing and should be aimed at meeting the needs of participants.

17. Demand reduction strategies and specific activities should be thoroughly evaluated to assess and improve their effectiveness. The evaluations should also be appropriate to the specific culture and programme involved. The results of these evaluations should be shared with all those interested.

## ***Annex***

### **SUPPLEMENTARY REFERENCE MATERIAL FOR GOVERNMENTS CONSIDERING NATIONAL DRUG CONTROL STRATEGIES**

1. Under article 38 of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol and under article 20 of the Convention on Psychotropic Substances of 1971, parties to those conventions are required to take all practicable measures for the prevention of abuse of narcotic drugs or psychotropic substances and "for the early identification, treatment, education, aftercare, rehabilitation and social reintegration of the persons involved". Article 14 of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 states that parties "shall adopt appropriate measures aimed at eliminating or reducing illicit demand for narcotic drugs and psychotropic substances, with a view to reducing human suffering and eliminating financial incentives for illicit traffic".

2. Taking into account that the rise in global concern about the extent, nature and effects of drug abuse has created an opportunity and the will to intensify action, States reaffirm the validity and importance of the international agreements and declarations in the area of demand reduction that have been elaborated. The importance of demand reduction was confirmed by the International Conference on Drug Abuse and Illicit Trafficking, held at Vienna from 17 to 26 June 1987, which adopted the Comprehensive Multidisciplinary Outline of Future Activities in Drug Abuse Control. The Comprehensive Multidisciplinary Outline sets out 14 targets in the field of demand reduction, as well as

the types of activities needed to achieve them at the national, regional and international levels. The General Assembly, the Economic and Social Council and the Commission on Narcotic Drugs have all adopted resolutions endorsing the Comprehensive Multidisciplinary Outline and emphasizing the need to pay increasing attention to demand reduction. Moreover, at its seventeenth special session, on international cooperation against illicit production, supply, demand, trafficking and distribution of narcotic drugs and psychotropic substances, the General Assembly, in its resolution S/17-2 of 23 February 1990, adopted the Political Declaration and Global Programme of Action. The Global Programme of Action, in paragraphs 9-37, addresses issues related to the "prevention and reduction of drug abuse with a view to elimination of the illicit demand for narcotic drugs and psychotropic substances" and to the treatment, rehabilitation and social reintegration of drug abusers. Further attention was directed to demand reduction by the World Ministerial Summit to Reduce Demand for Drugs and to Combat the Cocaine Threat, held in London from 9 to 11 April 1990.

3. In addition, the Convention on the Rights of the Child, in its article 33, emphasizes the need to protect children from the abuse of narcotic drugs and psychotropic substances. A similar point is made in the World Programme of Action for Youth to the Year 2000 and Beyond, which, in paragraphs 77-78, includes proposals for involving youth organizations and young people in demand reduction activities. Also of significance is the code of practice on the management of alcohol- and drug-related issues in the workplace, adopted by a tripartite meeting of experts and subsequently endorsed by the Governing Body of the International Labour Organization at its 262nd session, in 1995. The principles of equality of opportunity and treatment contained in the International Labour Organization Convention concerning Discrimination in Respect of Employment and Occupation (No. III), 1958, are also directly relevant to demand reduction.

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1. The term drug demand reduction is used to describe policies or programmes directed at reducing the consumer demand for narcotic drugs and psychotropic substances covered by the international drug control conventions (the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988). The distribution of these narcotic drugs and psychotropic substances is forbidden by law or limited to medical and pharmaceutical channels.