European Union

Statement on the occasion of the
Intersessional Meeting 25-28 September 2018, Commission on Narcotic Drugs 61st session

Vienna, 27 September 2018

Cross-cutting issues: drugs and human rights, youth, children, women and communities

Madam Chair,

The European Union and its Member States wish to thank you for organising this intersessional meeting in which we can continue the preparations for the Ministerial segment of the 62nd CND with a special focus on the promotion of human rights-based and proportionate drug policy approaches and share our best practices in this regard.

May we take this opportunity to remind us all that in June 2017, the UN Secretary-General shared knowing "from personal experience how an approach based on prevention and treatment can yield positive results" and underlined "the flexibility afforded by the three international drug control conventions." He also stressed “Together, we must honour the unanimous commitments made to reduce drug abuse, illicit trafficking and the harm that drugs cause, and to ensure that our approach promotes equality, human rights, sustainable development, and greater peace and security.”

May we also remind us all that this year, we celebrate 70 years of the Universal Declaration of Human Rights of 1948, which remains the universal standard for the promotion of human rights, and the adoption of the Convention for the Protection of Human Rights and Fundamental Freedoms, which calls for the commitment to respect, protect and promote human rights, fundamental freedoms and the inherent dignity of all individuals. It is against this background that the EU and its Member States strongly reiterate our commitment to respecting, protecting and promoting human rights, fundamental freedoms and the inherent dignity of all individuals and the principles of rule of law in the development and implementation of drug policies. We strongly support increased cooperation and information sharing between the UNODC, the CND and other relevant UN bodies on drugs, health, human rights, women, youth, children, vulnerable members of society and communities, as well as to the implementation of relevant UN conventions addressing these specific issues, especially the implementation of the Outcome Document of the 2016 UNGASS. In the context of international cooperation on drug policies we should not forget the crucial role of civil society in the defence of human rights and the condemnation of the death penalty.
Bearing in mind the UNGASS outcome document and the lack of any reference to the abolition of the death penalty we would like to underline once more that the death penalty should be abolished globally, and we condemn the use of capital punishment in all circumstances and in all cases. We would also like to firmly stress the complete unacceptability of extrajudicial, summary or arbitrary executions under any circumstances. Extrajudicial executions constitute violations of human rights and the UN Conventions. Conduct of criminal investigations and judicial proceedings by the State with full respect for the process is a human right pursuant to the provisions of international law and in accordance with the principles of rule of law. In this respect, the EU and its Member States find the collection and collation of information related to the use of the death penalty for drug law and drug-related offences of utmost importance and consider that data collection and collation by the CND and other relevant UN bodies should be perceived as a crucial ingredient in the managing of the discussion in this subfield and the consequences of this violation of human rights.

The EU and its Member States extensively promote proportionate national sentencing policies, practices and guidelines for drug law and drug-related offences, whereby the severity of penalties is proportionate to the gravity of offences and in line with States’ obligations under international law, including as they relate to upholding human dignity and human rights.

We strongly believe that the world drug problem cannot be solved by only prosecuting individuals who need assistance due to their drug use and addiction. The principle of adequate, proportionate and effective response to drug-related offences has been highlighted in all UN drug control conventions which stipulate that States may provide, either as an alternative or in addition, measures of treatment, education, aftercare, rehabilitation, recovery and social reintegration to drug users who have committed offences enumerated in these conventions.

A study conducted by the European Commission showed that all EU Member States were implementing at least one alternative to coercive sanctions, and most had more than one, related, respectively, to:

- alternatives that involved only drug treatment, mainly through drug treatment orders;
- suspension of sentence with a treatment or rehabilitative requirement attached;
- suspension of investigation/prosecution with a treatment or rehabilitative element in place;
- alternatives with no drug treatment component, but which involved ‘non-action’ or diversion from the criminal justice system or from sentencing.

The EU Action Plan on Drugs for 2017 to 2020 requests EU Members States to provide and apply, where appropriate and in accordance with their legal frameworks, alternatives to coercive sanctions for drug using offenders. The Action Plan also requests concerned parties to increase monitoring, implementation and evaluation of these measures. Acknowledging that it’s an effective tool, we are currently identifying what barriers still exist and discussing how to scale up the application of alternatives to coercive sanctions.
In March 2018, the European Union adopted Council Conclusions on alternatives to coercive sanctions. The document stresses the need for alternative or additional measures to coercive sanctions for drug using offenders in order to prevent crime, reduce recidivism and enhance the efficiency and effectiveness of the criminal justice system, while also looking at a possible reduction of health related harms and minimisation of social risks.

The Council conclusions encourage the Member States where appropriate and within their national legislation to provide and further promote the availability, effective implementation, monitoring and evaluation of measures provided as an alternative or in addition to coercive sanctions for drug using offenders. Beyond these Council conclusions, EU Member States also engage themselves to promote sharing best practices in this field.

Moreover, the Council conclusions also invite the Member States to raise awareness, for example through training, on availability and effective use of these measures and to support cooperation and collaboration among national policy makers, law enforcement, criminal justice, public health, social and education professionals and, where appropriate, persons providing support to drug using offenders.

Finally, the EU Action Plan on Drugs for 2017 to 2020 clearly incorporates population factors such as age, gender, education, and cultural and social factors, so that specific needs are taken into account when formulating drug policy throughout the EU. The EU and its Member States would like to underline that a gender perspective must be integrated into appropriate aspects of drug policy. It must not be treated as an isolated issue or a separate track, so that women’s and men’s specific needs and conditions permeate all activities and actions, where appropriate.

Madam Chair,

The EU and its Member States believe that national drug policies of UN Member States should fully respect all human rights and fundamental freedoms and protect the health, safety and wellbeing of individuals, families, vulnerable groups of society, communities and society as a whole. We encourage all regions to enhance their efforts not only in implementing alternative measures to coercive sanctions and ensuring that the principle of the proportionate sentencing is followed, but also in ensuring that education, access to health care, including treatment, suspension of investigation or prosecution, rehabilitation and recovery, aftercare and social reintegration as well as risk and harm reduction measures are available for those in need.

Thank you.