

CND Fifth Intersessional meeting 8 November 2018

Role of PG in introducing a gender dimension in drug policy.

Excellencies, panelists, ladies and gentlemen

First of all let me thank the Chair of the Commission on Narcotic Drugs (CND), HE Ms Alicia Buenrostro-Massieu for inviting, the Council of Europe, PG to participate in this CND intersessional meeting.

1 The Pompidou Group is the Council of Europe's drug policy cooperation platform. It is an inter-governmental body established in 1971 at the initiative of the then French President Georges Pompidou. It upholds the core values of the Council of Europe – human rights, democracy and the rule of law – and promotes a balanced approach in the response to drug use and illicit trafficking in drugs, supporting both demand and supply reduction. The Pompidou Group offers a forum for open debate, exchange of experiences and, it links policy, research and practice. The Group is made up of 39 Member States, and its technical cooperation also involves Morocco which joined in 2011, Israel, 2013 and Mexico in 2017. It also develops specific cooperation, around the Mediterranean with the MedNET which covers 15 countries (9 PG countries and 6 non PG countries). The Pompidou Group will hold its Ministerial Conference in Stavanger, Norway on 27 and 28 November and will adopt its work programme for 2019-2022 which is constructed around three different priorities and one of them is **International drug policy development – 2019 and beyond**

- Strategy and cooperation towards the 2030 Sustainable vulnerable goals
- Strengthening the gender specific dimension in drug policy

2 Before entering into the topic I would like to refer to the statement delivered at the UNGASS in 2016 by the Presidency of the PG, Mr Bent Hoie, Minister for Health and Care Services in Norway who reaffirmed the human rights approach of PG drug policy in particular that :

- the application of the death penalty is not in line with human rights obligations
- the application of inhumane punishment and torture for drug related offences is not in line with human rights obligations
- people who use drugs have an uncontested right to equitable access to health care services for their drug addiction and other drug or non-drug related health problems.

Today it is an honour to be here to share with you **the contribution of PG in terms of activities and recommendations to the fulfillment of UNGASS outcome document 2016 recommendations in the field of gender and drugs (in particular the operation recommendations on cross-cutting issues: drugs and human rights, youth, children, women and communities) in synergy with all relevant actors and entities and in particular with Mexico which recently joined PG and has been very much involved in introducing a gender dimension in drug policy.**

3 I will refer to the *2009 UN Political Declaration which established 2019 as a target date for States to eliminate or reduce significantly and measurably in its point 36 (b) The illicit demand for narcotic drugs and psychotropic substances; and drug related health and social risks;*

Through this declaration, the UN Member States in its *paragraph 9* committed themselves to ensuring that drug control policies, measures and interventions take into account the specific needs and circumstances that women face with regard to drug problems, and decide to undertake effective measures to ensure that women, as well as men, have access to, and benefit equal programme and policy development and implementation;

The 2009 declaration also refers to Targeting vulnerable groups and commit Member States to ensure that

(a) a broad range of drug demand reduction services, including those in the areas of prevention, treatment, rehabilitation and related support services, provide approaches that serve the needs of vulnerable groups, taking into account gender considerations and cultural background;

(b) Ensure that prevention programmes target and involve youth and children with a view to increasing their reach and effectiveness;

(c) Provide specialized training for those who work with vulnerable groups, such as patients with psychiatric co-morbidities, minors and women, including pregnant women.

4 In the outcome document of the 2016 UNGASS on the world drug problem, the Heads of State and Government, ministers and representatives of Member States have reviewed the progress and have committed on operational recommendations in different fields,

In the field of Drugs and human rights, youth, women, children, vulnerable members of society, and communities, they have committed to:

(a) Enhance the knowledge of policymakers and the capacity, as appropriate, of relevant national authorities on various aspects of the world drug problem in order to ensure that national drug policies, as part of a comprehensive, integrated and balanced approach, fully respect all human rights and fundamental freedoms and protective health, safety and well-being of individuals, families, vulnerable members of society, communities and society as a whole, and to that end encourage inter alia cooperation with **relevant regional and international organizations**, as well as with civil society and the private sector, as appropriate;

(b) Ensure non-discriminatory access to health, care and social services in prevention, primary care and treatment programmes, including those offered to persons in prison or pretrial detention, which are to be on a level equal to those available in the community, and ensure that women, including detained women, have access to adequate health services and counselling, including those particularly needed during pregnancy;

(d) Continue to identify and address protective and risk factors, as well as the conditions that continue to make women and girls vulnerable to exploitation and participation in drug trafficking, including as couriers, with a view to preventing their involvement in drug-related crime;

(g) Mainstream a gender perspective into and ensure the involvement of women in all stages of the development, implementation, monitoring and evaluation of drug policies and programmes, develop and disseminate gender-sensitive and age-appropriate measures that take into account the specific needs and circumstances faced by women and girls with regard to the world drug problem

5 Introducing a gender dimension in drug policies by Pompidou Group

The Pompidou Group has pioneered the integration of the gender dimension into drug policies in Europe for almost two decades. It recognises the need to seek a better understanding of the specificities of each gender when designing prevention and treatment programmes, and the need to promote gender equality in all aspects of drug policy. So far we have explored :

- the gender dimension of non-medical use of prescription drugs,
- the link between drug use and violence experienced by women,
- and policy responses to violence using rape drugs
- the mainstreaming of a gender perspective in drug policy during an international conference in February 2018 in Mexico with the participation of a wide audience from Europe and the Americas.

We are convinced that countries can largely benefit from the exchange of experiences and international expertise in order to improve gender equality in their services. In this spirit, the

6 Pompidou Group provides technical assistance in the framework of its MedNET¹ network through projects that aim to improve access to health, prevention and treatment programmes for women suffering from substance use disorder(s).

Some examples:

- First awareness raising seminar on women and drugs in Algeria (2017) followed by the creation of a permanent committee on women and children in 2018 with the National Office on Drugs and Drug Addiction,
- Creation of the first specific care and treatment services for women in Egypt (2016-2018) followed by the development of a care and treatment model for pregnant women with substance use disorder(s) (2016-2018)
- Inclusion of women's needs in the first national substance use strategy in Lebanon (2016), accompanied with a project on the identification of needs for women with substance use disorders (2018)

The work by the Group related to the topic of gender resulted in recommendations by the experts participating in the different activities for the fields of research, practice and policy. Some of these are:

7 Research:

- Ensure that data is methodologically collected and shared, disaggregated by age, sex and other relevant factors
- Promote the collection of data for drug related offences
- Involve women in qualitative research by organising focus groups with women who use drugs
- Concerning violence and drug use, take into account the evidence that there is more violence among persons who use psychoactive substances than in the general population and greater use of psychotropic substances among persons who have experienced violence and greater differences among women than among men.
- Conduct studies regarding the role of family support in rehabilitation: is family a barrier to or a motivating factor of success?

¹ Co-operation network in the Mediterranean Region.

8 Practice:

- Ensure unconditional access for women who use drugs to protection arrangements when they are victims of violence
- Train medical and social staff on gender issues, on the issue of violence, domestic violence, psycho trauma, and include questions concerning neglect, physical and sexual abuse, violence in childhood during the first interview
- Ensure collaboration across the different services: health system, law enforcement, social services and services in charge of the protection of women against violence
- Provide sufficient information regularly and in different ways (TV, street ads, street campaigns) with respect to the available treatment facilities

9 Policy:

- Develop policies that also address the use and misuse of prescription medications and make specific reference to gender
- Provide early prevention through education of young boys and girls – this could be a key mechanism for eliminating gender based violence
- Pay special attention to those women who are the head of their family or are living in special conditions of economic and/or social deprivation, or have physical and/or psychological vulnerabilities
- Promote health and education services for children of mothers deprived of their freedom and without strong social ties
- Provide health care facilities which are accessible and free of charge, with infrastructure designed from a gender perspective
- Provide child care services for persons who require them
- Concerning women, drugs and the criminal justice system : choose non-custodial measures:
- In cases of incarceration:
 - Provide access to treatment and / or continuation of treatment.
 - Provide a holistic psychosocial treatment taking into account the special needs of the person (e.g. comorbidity and experience of violence for women).
 - Offer all the services and facilities they could have in their communities to pregnant women.
 - Make sure that persons with imprisoned children should be in an appropriate environment that does not affect the children.
 - Ensure that good contact and good relations are maintained with women who must be separated from their children (children over 3 years old), always considering the best interest of the children.
 - Offer vocational education / training to ensure better social reintegration after release and avoid relapse.
 - Promote health and education services for children of mothers deprived of their freedom and without strong social ties.

10 What PG will do next ?

- **2019 Executive Training on Drug Policy on: ‘Incorporating gender dimensions in drug policy practice and service delivery’**

This training will support participants in identifying, developing, and adapting drug policies and strategies that address the unique needs of both men and women. Research shows that across cultures there are unique gender-based factors that contribute to the initiation of substance use and the progression to substance abuse and addiction. Moreover, men and women tend to experience different types of consequences and thus intersect with judicial and medical systems at different points and rates that impact the trajectory of not only their substance use but their lives.

Expected results

create synergies with global initiatives such as the UNICRI’s Promoting Gender-Based Drug Use Prevention and Recovery: DAWN Programme.

Using gender informed Public Health frameworks, participants will learn in this training practical skills including:

- Assessment of gender specific needs for prevention and recovery in social context
- Identification of gender-based risk and protective factors in the context of drug prevention and policy in social context
- Examination through a gender informed lens of the effectiveness and coherence of drug prevention and policies using Pompidou Group policy coherence markers
- Assessment of gender specific consequences of different drug policies
- Evaluation of policy impact on men and women in social context

Participation profile : The Programme targets 25 participants :

- managers from governmental or other institutions and organisations that are responsible for developing and/or implementing drug policies and/or coordinating related programme implementation, service delivery and cooperation with stakeholders;
- Representatives from civil society organisations working in various sectors of drug field.

11 Pompidou Group will adopt in Stavanger on 27 28 November a new work programme for the period 2019-2022 which is constructed around three different priorities and one of them is **International drug policy development – 2019 and beyond**

- Strengthening the gender specific dimension in drug policy