
Report by the Inter-Parliamentary Union

Opening:

The Hearing served as input to the United Nations General Assembly Special Session (UNGASS) scheduled from 19-21 April 2016 to review the implementation of the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, as well as other commitments under three overarching drug control conventions. The meeting examined the views of parliamentarians and other relevant stakeholders from many parts of the world taking stock on various aspects of the current drug control regime.

The two-day session was opened by the President of the United Nations General Assembly, H.E. Mogens Lykketoft, and the President of the IPU, Hon. Saber Chowdhury. Mr. Lykketoft stressed the contribution that parliamentarians can make to the debate, in three main areas: firstly, in that they express the views and concerns of their constituents, thus bringing a multitude of voices to the table; secondly, in their responsibility as lawmakers to draft and adopt relevant legal frameworks; and thirdly, in their role as custodians of parliamentary accountability, overseeing the implementation of international commitments and calling for action and answers when needed.

Mr. Chowdhury said there can evidently be deep political divides in opinions on the appropriate response to the drug problem. In recent years, he explained that
we have seen an increasingly forceful debate about the effectiveness of the so-called war on drugs, reflecting significant changes in the way that some people see the issues in the light of the facts on the ground. Noting that no one is immune from addiction, whether to caffeine, alcohol, nicotine, or drugs, he invited delegates to approach the debate non-judgmentally, with compassion and an open mind. He emphasized that drug abuse and addiction should be placed in a public health context, and the several hundred thousand annual drug-related deaths need to be viewed with an eye also on the 8 million annual deaths from tobacco and alcohol combined. He stressed, too, that drug control policy needs to better differentiate among drugs and in production, transit and consumption.

Mr. Yury Fedotov, Executive Director of the United Nations Office on Drugs and Crime (UNODC) described tackling the world drug problem as essential to promoting healthy and inclusive societies, and as part of the overall efforts to achieve the 2030 Agenda for Sustainable Development. He reiterated that preparation for the special session has entailed a comprehensive analytical process, focusing international attention on the existing and emerging challenges, including heroin trafficking the nexus of organized crime and terrorism; concern about increasing drug consumption in Africa; and the negative impacts of violence on stability and development in Central America. He also said the potential for alternative development to empower poor farmers to break away from illicit cultivation and establish viable livelihoods has not been accurately addressed.

Mr. Fedotov added that all three drug conventions recognize the importance of controlled substances for medical purposes, but problems of availability remain in many parts of the world, with people in severe pain unable to obtain relief or adequate care. Prevention efforts and services for people with drug use disorders also continue to fall short, with only one out of every six drug users globally receiving treatment. The discussions leading to the UNGASS have emphasized the importance of shared responsibility for these challenges, as well as the need for balanced and comprehensive policies, rooted in the international drug control conventions, including examination of alternatives to conviction for minor drug-related offences, which could reduce prison overcrowding and prevent the recruitment of vulnerable individuals by criminals and extremists. He underlined that such approaches also include robust responses to disrupt organized crime networks, promotion of alternative livelihoods and increased access to essential controlled medicines, while preventing their diversion and abuse. UNODC is assisting Member States to put balanced drug control approaches into action on the ground, through its network of field offices and programmes, under its mandate which encompasses justice, the rule of law and health.

All of the opening remarks may be found on the IPU website, at http://ipu.org/Splz-e/unga16.htm.

Keynote address:
H.E. Ambassador Khaled Shamaa, Chair of the UNGASS Board, began by revisiting the roots of the present drug control regime with the 1912 Opium Convention. That convention was the first to recognize the importance of protecting individuals from drug abuse and dependence while at the same time ensuring access to drugs for medical and scientific purposes. Furthermore, it recognized the transnational nature of the problem and instituted the principle of shared responsibility.
From the 1912 Convention, drug control evolved in several stages: the 1961 Single Convention on Narcotic Drugs (as amended by the 1972 Protocol), the Convention on Psychotropic Substances of 1971, and the 1988 United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. The 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem stated that trafficking and abuse pose a major threat to the health, dignity, hopes and lives of millions of people. The international community will meet in April 2016 to review progress in implementing the Political Declaration and Plan of Action towards an integrated and balanced strategy, and Member States are mandated to agree on operational recommendations, having expressed their grave concern that the world drug problem continues to constitute a serious threat to public health, safety and the well-being of mankind, national security and the sovereignty of States, as well as political stability and sustainable development.

According to Ambassador Shamaa, major challenges still persist, and new ones are emerging. It is clear that improved prevention strategies and interventions are needed. In his view, it is also clear that treatment, rehabilitation and reintegration still present a great challenge, whether in the face of shrinking health budgets, or owing to a multitude of health challenges and disease outbreaks in some areas of the world, together with the need for capacity-building in treatment and rehabilitation, including HIV prevention and treatment. There are challenges from the evolution of criminal activities related to drug trafficking that in many instances go beyond the capacity of States to tackle without international cooperation, including money laundering, corruption, trafficking of weapons or human beings and the growing nexus of drug trafficking and terrorism, together with the whole issue of how to ensure improved access to controlled substances to alleviate pain and suffering, while preventing their diversion. Drugs are evolving, with new synthetic designer drugs, new psychotropic substances, misuse of pharmaceuticals, and amphetamine-type stimulants. Illicit cultivation of crops still presents a challenge, despite various attempts to address it through alternative development programmes. Greater efforts are needed and such programmes need to be better developed and linked with other endeavours within the broader Sustainable Development Goals.

In brief, Ambassador Shamaa said, what we have is a dynamic and evolving international drug control system that needs continuous and determined efforts to implement it, based on its founding principles, and shared responsibility, and taking a balanced and integrated approach.

Discussion:
The two-day session examined three broad topics:

• The world drug problem in perspective — The evolution of drug control
• The global response to drugs — Can it work more effectively?
• Drug prevention and treatment from the standpoint of sustainable development and human rights — what is required?

In three moderated sessions, invited panellists (see Annex) offered some thoughts on the topics listed above, after which they responded to a small number of related issues posed by the Moderator, Julia Taylor Kennedy. The discussion was then
opened to all participants, who asked questions or raised issues relevant to their countries, with the panellists responding after every two or three interventions.

Many delegates described the specific measures their governments had implemented in the bid to solve the drug problem, including drug control commissions; national anti-drug action plans; cooperation and intelligence-sharing with neighbouring countries; campaigns to arrest corrupt police, military and politicians involved in the drugs trade; prevention and support for the medical treatment of drug addiction; privatization of social reintegration activities; policies on alternative crops in drug cultivation areas and involvement of other relevant government agencies such as anti-money-laundering bodies, custom officials and more.

As the discussions progressed, it became clear that feedback from participants comprised two distinct viewpoints. The question participants could agree on was the content of the present global drug control regime as practiced in most parts of the world, namely a concentration on eradication of illicit drugs and punishment of those involved, whether as producers, traffickers or — in particular — consumers. On the other side, participants questioned the assessment of how successful that regime was proving. With differences of nuance specific to each country’s circumstances and characteristics, the two broad views put forward were (i) the present drug control regime is succeeding in its purpose, and should be pursued without significant change, or perhaps intensified; (ii) the drug control regime has failed, not significantly lowering levels of drug use but bringing unintended consequences causing untold societal harm.

The death penalty

The debate on the two perspectives described above reached its greatest level of intensity on the matter of death sentences pronounced on persons apprehended for activities in the drug trade. Participants looked at this in a binary way: either the death penalty was acceptable for certain offences, or it was always wrong.

One delegate asked: “Why, if we are prepared to accept so many deaths from the drug trade — our children and relatives overdosing, our loved ones caught up in drug-related violence, our parents who die in the prison where they have been sent for a minor possession offence — can we not accept that it is right to countenance the execution of those who bring such misery?” For another delegate, on the other hand, the death penalty is always wrong as it diminishes those who administer it and is not proven to work as a deterrent.

Thus a fundamental question posed is whether the drug control conventions are flexible enough to accommodate strikingly different views about what are the objectives and effects of the existing policies. However, supporters on both sides also suggested that it is a false dilemma, and that the choice is only between the status quo of prohibition and the opposite extreme of legalization. Some argued that there was a third way, namely through progressively constructing a route to regulation of the use of psychoactive substances, with an emphasis on public health and on human rights.

Participants stated that the drug problem is a difficult topic to deal with because they are approaching the debate from such different starting-points, and with such
different expectations. As one speaker pointed out, the resultant confusion in the debate is highly beneficial to the people active in the drugs trade.

Several speakers suggested that each country should be free to interpret the drug control conventions, and to draft relevant domestic law accordingly. However, the contrary view was that it was precisely the lack of cohesion that was contributing to the problem, as some countries (at either national or sub-national level) decriminalized certain types of drug possession.

Within the two very broad philosophies outlined as (i) and (ii) above, some of the views expressed, whether by panellists or by participants from the floor, included the following:

**The “drug control is working” viewpoint:**

Many participants mentioned that the drug control conventions have the highest rates of ratification among all United Nations treaties and conventions. There is no need to review the conventions themselves at the United Nations General Assembly Special Session in April 2016 (UNGASS 2016). Instead, the discussion should focus on strengthening consensus around the existing framework and consolidating and building on existing achievements, while taking account of new trends and facts on the ground and of the particular circumstances and challenges of each Member State. Experience indicates that despite the lapse of time, the three conventions remain very relevant and constitute a solid basis for combating the menace of drugs in all its forms: What is needed is more robust implementation.

As it was mentioned, countries that have signed and ratified the drug control conventions have taken on certain commitments. They are obliged to make it a crime to produce any of the substances listed in the tables drawn up by the International Narcotics Control Board (INCB). There is no flexibility in that area. However, the conventions do not compel countries to institute prison sentences for drug-related offences. The 1988 Convention does provide that States must establish penalties for drug possession with a view to consumption that does not necessarily entail a prison sentence, and it does stipulate that States can replace or amplify such criminal penalties by care measures.

Some countries consider that even within the strict rules of the drug control regime, there is room for flexibility and discretion, for example by encouraging judges to send first-time offenders for treatment, education and rehabilitation, and not incarceration. Flexibility is also given by the provisions on constitutional principles. If a country feels that a convention stipulation is not compatible with its constitutional principles, it may opt out of applying that particular component. Additionally, the conventions provide that specific experiments may be undertaken relating to legalization or criminalization of certain drugs, but impose a limit as to duration and quantity.

It is very important that the rule of law is upheld. While it is up to the countries to decide how they may wish to adapt it, to seek to leave the legal framework altogether is to invite major problems. As it was suggested, the dizzying rise in the drug problem began at the end of the Second World War, driven by advertising and consumerism, and fostered by the invented concept of adolescence, which had not existed before. Young people, confused about issues of identity, sought reassurance in groups, including those where peer pressure drove them to try drugs. At the
present time, 3.5 per cent of the world population takes drugs, with 2.5 per cent using cannabis. That figure needs to be compared with those for alcohol and tobacco, whose consumption levels are much higher. The world has lost the battle on alcohol and tobacco, but must surely not deliberately lose the battle for control of drugs.

The impacts of the drug problem have been unevenly distributed around the world. Although East Asia has the same levels of drug production and trafficking as in Latin America, there is far less associated violence in East Asia. While there has been a strong push in some parts of Latin America for “reform”, based on the view that the system has failed (a view shared by some countries in Western Europe), in East Asia and the Middle East there is no such sense of failure and the focus is still on combating use, based on the historical view of use being associated with colonialism, great addiction but minimal violence. Basically, Asia is comfortable with a heavy criminalization approach, seeing no cause for “reform”.

### Problems of decriminalization

As reported by one participant, until the 1980s, the drug problem was largely unknown in his country. As it began to grow in the country, due to trafficking, the Government decided to impose the death penalty. However following a public outcry, that law was repealed. Then awareness of drugs began to grow, and people began to go into drug trafficking and grow cannabis. The result was an increase in crime, and more latterly in terrorism. The horrible crimes of Boko Haram, such as suicide bombings and mass killings, are only possible because its adherents are out of their minds on drugs. There are voices calling for decriminalization of cannabis, but experience has shown that that is not the solution. In the view of the participant, decriminalization will merely make the drug more available to people who will try it simply because it is not illegal to do so, creating more problems than it will solve. Although decriminalization in this particular context it might work in other countries, he does not think that would work in his country and for him the answer is clear: strict penalties for possession and use.

Still according to this viewpoint, legalization of illicit drugs is counterproductive. States must not resort to expedient policies even when unlawful activities become difficult to control. The drug problem is also inextricably intertwined with other organized crime activities such as money laundering, smuggling of weapons, human trafficking and financing of terrorism. Legalization will also lead to intra-family conflicts, in which adolescents will be able to defy the wishes of their parents that they not take drugs, by claiming that they have a legal right to do so, a right granted by the governments that the parents have elected. It is thus destructive for parents to be lax and encourage policies that make it easier to have access to drugs. Citing Pope Francis, a delegate noted that “Drug addiction is an evil, and with evil there can be no yielding or compromise.” Some delegates also noted that “restrictive” policies by government have resulted in lower incidence of drug uses, and thus have benefited societies.

Drug-affected developing countries determined to apply the conventions strictly have had to summon the necessary political will, as well as training personnel and establishing effective national strategies. However, most of these countries face
serious handicaps such as a lack of adequate equipment and forensic laboratories, as well as budgetary constraints, necessitating enhanced cooperation from the UNODC and the developed countries of the world. International technical assistance, can be extremely helpful in strengthening countries’ national anti-drug legislation.

### Fears of abusing the flexibility

According to one delegate from Africa, even though his country has strict laws and institutions, it is known as a transit route for hard drugs, the supply of which is in the hands of a huge and dangerous cartel, able to spread corruption far and wide. From time to time large amounts of these drugs are destroyed, but those who can afford it always manage to buy what they need. For the poor, there is a recently-emerging drug, based on alcohol and produced deep in the rural areas. The Government has recently adopted a very vigorous approach of destruction of any facilities found to be producing these alcohol-based narcotics.

In his view, there can be no let-up in the harsh approach to the drug problem. Seeking to inject some flexibility, or applying exceptions for the medical benefits that might be found in cannabis or similar plants, cannot work in Africa and particularly not in his country. It will be abused.

One country that has increased its intelligence and policing activities by a considerable margin since 2013 has seen a major rise in arrests for drug possession, which in turn has led to a 32 per cent drop in the number of drugs-related crimes. In recent years, more production sites have been found and eliminated, more drugs intercepted before reaching the users and more insight gained into the illegal drugs networks. For that country, the tough “war on drugs” approach has been a success.

In addition, other countries have adopted a comprehensive and balanced approach to the drug issue, including focusing on promoting alternative development and livelihoods, which has been effective in their countries.

In response to the objection that the existing drug control regime pays insufficient attention to those who are actually profiting from drugs, one speaker described the efforts that her country’s treasury is making to monitor atypical purchases of expensive items such as real estate or jewellery, and to compel the purchasers to account for the source of the money. Any items seized under that policy go to help defray the high public health costs of the drug problem.

One representative suggested that some countries including his own were purely victims of the drug problem. They did not produce drugs, they had no “home-grown” drugs problem, but they suffered the effects of illegal trafficking. In his country, drug consumption had recently increased sharply, polluting the entire society, particularly educated youth. It could be beneficial if the IPU and the United Nations were to arrange a special meeting with a view to protecting such victims.

The 1988 Convention, in its Article 10, commits all signatories to assist and support transit States, especially developing countries and takes direct measures in situations of particular vulnerability. Such countries, if they are signatories to the Convention, can invoke it vis-à-vis the international community to obtain help. It is also possible to take measures at a regional level to create a shared responsibility with respect to specific situations.
Possible drawbacks of lax policy

One participant from Europe noted that after some experimentation in the 1960s and 1970s on legal prescription of narcotics, with disappointing results, his country decided on a total ban on individual possession. It took the view that reducing the quantity of narcotics available in a society must reduce the number of health and societal harms caused by them, and considers that that should also be the approach worldwide. As a result of its repressive drug policy, the number of 16 to 24 year-olds in his country who have tried cannabis is half the average figure for the rest of the European Union.

Several participants pointed out that the drugs trade has shifted from being a matter of security of persons to becoming a problem of threat to institutions, moving from the margin of society to its power centres. They underscored that society cannot afford to lower its guard and be more flexible about drugs.

The “different approach needed” viewpoint:

Some of the questions asked by this group were what has the existing drug control regime given us? Has the huge investment in law enforcement actually had any impact? Has this not come at the sacrifice of prevention and treatment? Around 83 per cent of the people in prison for drug-related offences are there because of minor possession, not trafficking. And those in prison for trafficking are, again, the lesser offenders. With mandatory sentences being prescribed for non-violent drug-related crimes, small time drug offenders are receiving longer terms than those guilty of murder or rape. A disproportionately high percentage of arrests for drug offences are women. Women play a very low-level role in the drug trade, often as “mules,” making them easy targets for law enforcement. With the huge numbers of drug users incarcerated, prison overcrowding leads to problems of security, health and disease, and violence.

As some participants suggested, the view that the drug control conventions are adequate and only need to be implemented more effectively is an example of ineffective cohesion, of pursuing policies that have not worked for years, but expecting the results to change this time round. Many suggested that, all considered, the conventions represented a major step forward, in particular in the acceptance by countries of shared responsibilities. There is no doubt that the growth in drug production, trade and consumption and the increase in drugs-related crime and violence compel countries to enter the present debate with a view to reviewing, reforming and updating the international system. Participants also said there are shortcomings in access to information, and a need to undertake a thorough analysis of the situation to enable the right political agreements to be made, with agreements reached by consensus rather than imposed from above.

Many participants underlined that the need to see the drugs problem not as an issue of crime and security, but as a matter of public health. In the majority of cases, the public health consequences of drugs can be devastating: not only the direct health effects of the actual ingestion and injection of the narcotics themselves, but also increased user morbidity and mortality, particularly from overdoses; or the spread of communicable diseases, notably HIV and hepatitis, among needle-sharing injectors.
In some rare cases, there have been steps in the direction of a health-based model: in one South American country for example, drug addiction is recognized as a disease, for which treatment is available.

The main issue here is that under a policy of drug control based on crop eradication and incarceration for all drug offences, regardless of severity, insufficient treatment is made available, especially and most dramatically in the case of treatment inside prisons for imprisoned addicts. But even in those countries that feel that a new approach is needed, there are often not the resources to provide adequate levels of treatment, often as a consequence of budgetary shortages brought about by past expenditures under the “war on drugs” approach. For delegates supporting the “drug control is working” view, the outcome of the enforcement versus treatment debate is that enforcement is pragmatically the more effective response. For those on the “different approach needed” side, the choice between enforcement and treatment is an ethical issue, one in which they consider that the traditional tough approach has not worked and that a public health-based approach would, but the implementation of that choice is often hampered by financial constraints.

Participants added that the drugs problem is a symptom of deep-seated malaise in society. It is not an isolated issue of security, but has many other structural aspects that needed to be tackled at the same time. There is institutional weakness, and social vulnerability, which create opportunities for organized crime to engage in trafficking of drugs, weapons and people, and to undertake money laundering and foster corruption. Tackling all of those problems requires an integrated and systemic approach.

The forthcoming UNGASS should debate the limits and boundaries of experimentation. Experimentation is useful, because it allows a diversity of outcomes to be examined in short order. There is much talk of evidence-based policies, but in fact the evidentiary basis for drug policies is very limited, because for decades there has been predominantly one approach that has worked to a limited extent in some parts of the world and basically not at all in others. It is also very important to try to see through the myths surrounding the topic. One speaker said that his country had long nurtured the myth of being only a production country, but looking carefully it can be seen that it is in fact a consumer country, with grave domestic problems.

At the least, there is a basis from which to start experimenting: the knowledge of what has not worked. Incarcerating users does not reduce drug use and produces severe counterproductive effects in terms of public health, human rights, morbidity and mortality of users and social disruption and criminality. There is no evidence that death penalties have reduced drug trafficking. It is also evident that premature eradication measures, trying to stamp out an illegal economy such as in some post conflict countries, before legal production can start generating income and jobs, will fundamentally destabilize the country. An important area for experimentation will be how, without continuing the present negative outcomes, to eradicate narcoterrorism and drugs-financed insurgency.

Participants underscored that countries have different health systems, and monitoring arrangements and understanding of the aspects of the drug problem. Thus the specific design of policies cannot be identical in every country. The
availability of treatment in some European countries and other pioneers in harm reduction approaches will perhaps not be mirrored in West Africa, for example.

According to some, there is a need to experiment with policing, to determine how to make it effective. The violence rates in Latin America are intolerable. It is a sign of fundamental failure of essential human rights and public security systems. The role of law enforcement is crucial in ensuring that markets including drug markets are not associated with high levels of violence and corruption and how actual policing strategies are devised will be very dependent on their local cultural and institutional context. However, there are difficulties in arguing for “whatever policy works”, as this appears to be inconsistent with the spirit of the conventions.

With the major shift in the late 1970s from a drug control regime aimed at regulating availability and use of controlled substances in medicine, and preventing drug abuse, to one based on criminalization and enforcement as the predominant tools, one of the key outcomes was the sentencing to long prison terms on the basis of mere possession both addicts and casual users who were not addicted. That generated devastating social and economic consequences, disruption of families, and very negative repercussions on public health. The sense of profound failure of that sterner policy is one of the key issues driving reform at the present time. And the call for change is not only coming from some reform-minded countries, such as several in Latin America: even in the original prime mover of the present drug control regime, North America, there is a major thrust to move away from the criminalization of non-violent drug offences with a view to unburdening the prison system and achieving better public health outcomes.

Proponents of this perspective simultaneously call for a policy based on harm reduction and respect for human rights, one that takes into account all of the realities, including emergence of new synthetic drugs, increase both in cannabis use and in its strength; rise in the illicit market for prescription drugs, in particular in North America, and in the trade in precursors; and increase in heroin use, also mainly in North America. Harm reduction has to include the treatment of addicts. In the late 1980s and the 1990s, for example, the provision in some European countries of methadone programmes and safe needle exchanges were highly controversial but they are now largely accepted as a positive way forward.

The social or cultural context of drug use

The classical drug control policies have not only failed to work in general, in some cases they have failed miserably, for specific reasons varying around the world. In the case of one country from LAC region, one presenter noted, even people who know its music may be unaware that Rastafarianism is in fact a native structured religion, with rituals, beliefs and social norms, including rules on food preparation and how medicine is dispensed. Cannabis, or ganja as it is called in this country, is of great spiritual importance to that community. Further, the people who have had a relationship with ganja for over two centuries are what would be referred to by other United Nations conventions as native people or people having particular social or cultural nuances which must be understood and protected. Yet in the overall global fight against drugs, people like the Rastafari especially in rural communities in such countries, are particularly penalized for doing what with the best intentions they do not understand to be a crime.
Over the years the Government has attempted to practice what is expected in terms of enforcing the conventions, but fighting the so-called war on drugs has come at an additional expense for societies and countries with similar heritage. There has to be willingness at the global level for greater understanding of the diversities within societies across the world. That is about honouring the most fundamental tenet of the United Nations, that every human has inalienable rights which must be respected. The drug control regime must find the time, the patience and the sincerity to look beyond what is in the rules, and to identify how flexible systems can be developed which will achieve equitable treatment for the various unique communities around the world. That will be a worthy goal for UNGASS 2016.

In the 14 months since possession of small amounts of ganja was decriminalized in this country, there have been 1000 fewer arrests per month. One thousand rural youth under 30, and women farmers over 50, who are thus not being taken away from school, families and communities, not being exposed to hardened criminals who have committed crimes with real victims, and not at risk of being recruited into the gangs that have linkages with the countries where harder drugs are produced or consumed.

A similar situation can be observed in another country from the same region. For the indigenous peoples, coca leaf represents culture, health and the tradition of their ancestors. Coca leaf is not cocaine. While preserving the beneficial features of coca leaf, Bolivia has eradicated, without outside assistance, massive quantities of cocaine. Seizures of the drug have increased by more than 170 per cent, destruction of producing laboratories by over 220 per cent. Now coca-flavoured non-narcotic foods and drinks are being produced, and consumption is being monitored.

The conventions had the objective of a drug-free world, but many people now feel that a drug-free world is not feasible, and note the irony that our materialistic world, determined to resolve people’s problems through consumer products, has left many people dissatisfied and seeking escape in the consumption of psychoactive substances.

Another new thrust, with which the new Sustainable Development Goals intersect, is the role of development, in particular the need to create more humane and more effective policies for dealing with poor producers of cultivation-based drugs. As one participant said, the ‘war on drugs’ is a war on the poor. There has been a systematic failure of alternative development, but the question is whether that approach was always bound to fail, or has failed owing to a lack of integration into other measures, including the sequencing of crop eradication with the delivery of rural development and job creation. Forced eradication has by and large not been effective and few countries have succeeded in eliminating drug cultivation through eradication only, but at tremendous cost to human rights, the disruption of indigenous ways of life, and through political repression that might not be feasible and is certainly not desirable elsewhere in the world.

Participants added that if a more humane approach were to be taken, one in which legal livelihoods allow poor producers to find a way out of criminality, all structural drivers of drug cultivation need to be addressed. A major concern is security where extreme insecurity from militancy or from organized crime is rampant. Such situations will severely compromise the effectiveness of alternative livelihood
approaches. In addition to ensuring security, the State, or civil society working with the State, has to address sustainable income, job creation, and human development of the drug-producing communities, which are usually the most marginalized ones, as well as infrastructure and value added chains. The failure of any of these elements may result in the failure of the entire alternative livelihood effort. Such policies need to become far more comprehensive than in the past, focusing both on targeted development and on broader economic growth, and they need be sustained for years, at the cost of substantial resources.

In the area of narcoterrorism, policies have often emphasized eradication of illicit crops as a mechanism of depriving insurgent and terrorist groups of financial resources. Overwhelmingly, regardless of the region, such policies have been counterproductive. They have intensified insurgency and weakened the bonds between the coca or opium poppy producers and the State. Indeed suspension of illicit crop eradication has often been what enabled the counter-insurgency policies to become more effective.

Additionally, it was cited that Developed countries should give consideration to providing more compensation to the poor countries working on supply control. Crop eradication is very costly, not only in terms of lost incomes for farmers but also in terms of damage to forests, whose canopy often has to be cut away in order to demonstrate that crops have been eradicated. The resultant negative contribution to climate change is considerable.

There is a difference between labour-intensive drug economies, such as poppy- or coca-growing, and labour-non-intensive ones such as drug trafficking or the production of methamphetamines or captagon in which ISIS is apparently increasingly involved. The costs of disrupting those less labour-intensive illicit economies are lower than the costs of eradicating illicit crops, but such disruption is also difficult. Very probably, the State will have to prevail against militancy before drugs can be eradicated.

An additional consideration raised during the Hearing is the blurring of the concept of supply countries versus demand countries. That distinction dominated earlier debates on the drug problem, with discussion of which category bore the greater blame for the drug problem, but now, the reality has fundamentally changed. Now many of the traditional supply or transit countries have become major demand markets, rendering moot the issue of blame assignment, and also calling on law enforcement agencies to revise their operational focus.

**Regulation by the government**

As one delegate noted, a country from the Latin American and Caribbean region has taken an approach often loosely referred to as “legalization,” but which is actually regulation. The entire marijuana trade is under the control of the Government, which places limits on personal cultivation or purchase and sets the price (lower than the traffickers’ black market price, in a deliberate strategy to eliminate the role of organized crime). It also records every quantity sold, and keeps genetic information which will allow it to determine whether illegal marijuana is being sold. All sellers and consumers have to register with the Government. The regulation approach also has aspects related to human rights, public health and security. As a result of the new policy, progress can be seen in combating addiction,
and the marijuana regulation policy parallels this country’s strict anti-tobacco and anti-alcohol laws.

It is also important to accept that there may be positive uses found within any of the listed drugs. For example, treatment for glaucoma and another for asthma have been developed based on cannabis. A few participants called for amendments to the conventions to decriminalize plants and substances that in their natural state do not produce any narcotic effect. It is a paradox that the conventions make these natural plants illegal but say nothing about the hundreds of new chemical drugs. The drug control regime should identify what is required across the globe in terms of regulated supply of cannabis, coca, opium, and other substances to provide benefits to humans, notably in the area of pain relief.

According to the INCB, in more than 80 per cent of the world, the lack of access to controlled medicines for palliative care and dependence treatment and pain, is one of the most troubling unintended consequences of drug control policies. Worldwide, some 5 billion people have no access to opioid dependence treatment to alleviate the pain of late-stage cancers, AIDS or traumatic injury. This is an ethical, public health and human rights scandal.

This egregious failure of the system also includes millions of refugees suffering from pain because most host countries remove controlled medicines, including morphine, from emergency kits that World Health Organization, Doctors Without Borders and others send out, because of the fear of diversion of the medicines for abuse, although there is no evidence that this occurs. Policies are based on fear, not on data from the field. The way forward for this unintended consequence lies in establishing an evidence base what and in the ongoing global education of medical professionals.

In many countries, delegates suggested it is a deliberate policy to concentrate on arresting drug users, since that gives impressively high statistics for numbers of drugs-related arrests. Going after a trafficker would have more beneficial effect by mitigating the flow of drugs to multiple users. In other cases, governments strongly defend their policies on both supply and demand, but fail to provide the resources needed to do so. Thus the millionaire traffickers remain immune, the average cannabis or coca producer makes a subsistence living, while those at the bottom of the trafficking chain, the “mules,” fill the prisons — or, if they have been forced to carry the drugs inside their bodies, may have died in transit if the drugs have escaped from ruptured packages.

Participants highlighted that drugs are readily available in prisons, and there is no provision for treatment. Consequently, when imprisoned addicts are released, they are still addicted, and so more likely to return to a life of crime and drug use (if they do not die from an overdose). If a person has turned to drug use owing to difficulties in dealing with life and accepting responsibilities, then keeping that person in prison with no treatment or assistance does nothing to prepare him or her to face up to reality upon release. Also, insufficient funds are being made available for education on the effects of drugs and psychotropic substances.

Several participants noted that people who are traumatized and living in situations of tension are very likely to become users, and in many cases addicts, for reasons
beyond their control. One speaker from a country with a native population of 7 million that has now absorbed 2 million refugees from countries in conflict pointed out that when such people arrive in another country (which may be suffering economic difficulties of its own) which cannot offer them opportunities to work, they may turn to drugs, whether as traffickers or as users. That is the situation in his country, which has changed from a transit country to a consumer country. The drug problem is now affecting its schools and universities, and the major powers to which it has appealed are not doing enough to help. The drug problem, in turn, is fostering extremism and violence.

Criminalization of drug use among refugees is likely to have counterproductive consequences. It is essential that the help supplied by donor countries also include provision for drug treatment. Organizations involved need to become far more knowledgeable than at present about what works in terms of prevention and demand reduction measures. Many of the policies that have been traditionally developed and delivered in many western countries have not been effective, although they may well have been more cost-effective than imprisonment, for example. Also, treatment and prevention policies are more effective when they are tailored to specific sub-groups. And so many of the new users that are emerging in the Middle East or in West Africa may be responsive to different types of message from those that have been seen so far in terms of making prevention and treatment more effective.

**Measured approach to decriminalization**

As one participant noted, in 2001, within the scope of all the drug control conventions that it had signed and ratified, one European country took the decision to decriminalize the acquisition and possession of small amounts of any type of drugs. The country stopped looking at the drug consumer as a criminal, instead just as someone needing help. It was a human rights approach, but in addition and importantly it took the element of crime out of the equation. Drug possession and consumption remain illegal, but in place of the mass incarceration pursued by this country from shortly after from mid-seventies to the end of the century, any user discovered is referred to a Drug Addiction Dissuasion Commission, typically comprising a lawyer, a doctor and a social worker. The commission decides on the disposition of each case, imposing either a fine or community service, or sending the user for treatment, or in many cases imposing no penalty at all. Portugal’s approach at the time was controversial among other countries, but in the 16 years of its existence it has to be seen largely as a success. Drug use has gone progressively down, drug-related deaths have dropped and, freed from the fear of arrest and imprisonment, addicts are now much more ready to attend facilities offering treatment for addiction.

One speaker noted that even if a more treatment-based approach is adopted, the drug problem has seemed to be losing priority among political leaders over perhaps the past ten years. Broken-down societies are causing people to destroy their own lives through the use of drugs, and politicians need to see that such impacts are happening everywhere. Countries must increase the political priority of the issue, but the United Nations needs to step forward and provide the best information for policy-makers to devise effective policies, reporting on what has worked where and
advising on the right avenues to pursue in the future underscoring the importance of the day’s exchanges and those of the UNGASS to come.

One speaker from a country with relatively low rates of drug abuse and drug-related crimes suggested that while there is a major concentration on controlling supply, it is very costly and has limitations. It would be much preferable to control demand, since as long as there is demand there will be supply. And the best way to control demand is to work on the mind, which means that educational institutions, civil society, and religious bodies have a greater role to play in helping to change the people’s mindset and teaching them not to think that they can obtain happiness from drugs.

Lessons could be learned from countries’ experience with two substances not classified as “drugs,” but still harmful to health and potentially addictive: alcohol and tobacco. From alcohol, notably the results of prohibition in North America in the 1920s, it could be learned that driving markets for addictive products underground simply empowers organized crime. Criminal organizations in North America notably the Mafia, received an enormous boost from the pronouncement of Prohibition. The issue of tobacco showed the importance of education: the experience of countries such as Canada reveals that education alone, without a blanket ban, was enough to reduce the consumption of cigarettes and other tobacco products drastically.

Finally, several speakers praised the flexibility currently being shown by North America. Learning from its past mistakes in drug policies and also responding to its own domestic changes taking place, it is moving from its role of chief architect and head enforcer of the system, to become a leader focusing much more on improving its own policies and allowing for greater flexibility and greater wisdom in the system.

**Doha Debate**

The fourth session followed the pattern of the “Doha debates” popularized by the BBC.

As an exercise intended to sharpen the focus of the issues which had been discussed by the participants in the first three sessions, two invited panellists (see Annex) gave a detailed, but short presentation in favour of a motion that encapsulated one side of the great divide that had been revealed in delegates’ positions, and two spoke against it. The debaters also responded to questions from the floor, and were finally given the opportunity to make closing remarks.

Two motions were selected to crystallize into one clear “Yes or No” proposition the myriad sub-topics and detailed aspects that had been argued so intensely during the first three sessions.

**Doha Debate (continued)**

The views expressed both by panellists and by speakers from the floor have been reflected in the body of this report as they further articulated the opinions given in the preceding three sessions, although in a more concise form and often using more dramatic examples.

Lastly, seeking to quantify the opinion of the room, a non-binding “vote” by show of hands was taken as an exercise to give all participants a final say on the proceedings.
The first motion: Implementing the international legal framework will address the world drug problem, was upheld by a slim majority.

The second motion: States should seek alternatives to incarceration when addressing possession of drugs for personal use, was pronounced a draw.

It should be noted that up to a quarter of participants were absent from the room at the time of the “vote” and several who were present abstained from voting.

Conclusions:
The conclusions of the Hearing were summarized by Mr. Martin Chungong, Secretary-General of the Inter-Parliamentary Union, who observed that although there was no consensus on many of the issues on the table, the Hearing did address many misunderstandings and set the stage for further political debate both in Parliaments and at the United Nations. It also revealed some areas of common ground:

- The conventions provide a common baseline and a framework to guide policy in all countries. In this sense, they protect us from the risk of policy “fragmentation” while establishing the base for international cooperation.

- There is a clear problem with the narrow way many countries interpret the conventions, without considering the flexibility that is afforded within them. This is the case particularly when it comes to pursuing drug use as a crime. Drug use should be regarded as a health issue first. Several parliaments are moving in this direction with legislation to decriminalize and regulate use and possession, offering various models for others to consider.

- On the other hand, during the debate, there were voices of concern that the conventions may not provide sufficient policy space to countries to come up with innovative policy solutions. It is also clear that there can be no one-size-fits-all approach to the drug problem across countries. Each country’s policy must address its own specific circumstances.

- What is common to all countries is the need to tackle the root causes of drug use, and not just the effects. It was pointed out that there are many factors that cause social alienation, such as poverty, discrimination, and even the culture of immediate gratification of consumer societies. In many countries, the social fabric needs to be strengthened so that all feel included.

- The Hearing clearly illustrated the need for a “balanced” approach to drug control policy and clarified various possible understandings of this, of which the main ones are:
  - Rebalancing law enforcement efforts with treatment, prevention and education efforts. The evidence shows that most resources continue to go toward punishment and prosecution and not enough toward treatment. This trend should be reversed.
  - Rebalancing action against producers and users to focus more on trafficking by the cartels and organized criminal organizations. The middlemen are really those who reap most of the profits and do most of the damage in
terms of criminal activity and violence. To get to the drug lords and those most responsible for the damage to society governments need to “follow the money,” in the time-honoured phrase.

- When punishment is used as deterrent against drug use or production, it needs to be more commensurate with the actual crime. There should not be a uniform blanket way of dealing with all offenders.

Overall, the hearing brought to light serious concerns from some as to the effectiveness of the current drug control regime while also highlighting its continued relevance and importance to others. In several cases, the cure has been worse than the disease. The “war on drugs” has done little actually to discourage harmful drug use or advance the “welfare of the people,” which is the stated purpose of the conventions.

As highlighted during the discussion about the new Sustainable Development Goals, greater emphasis needs to be placed on development measures to tackle the drug problem. If governments help people out of poverty, provide health care and education, make institutions more transparent and representative, and indeed proactively implement the SDGs, then they will undercut the drivers of the drug problem. In that regard, some alternative development programmes have demonstrated that success is possible, essentially through political support, mobilization of public resources and close cooperation with farmers and communities. Conversely, going after small drug producers like coca and poppy farmers, or persecuting drug users as criminals, is actually more likely to lead to negative development outcomes such as the loss of livelihoods, environmental destruction, and indeed the disappearance of traditional ways of life.

One of these outcomes that received considerable attention during the meeting has to do with the human, social and economic costs of imprisonment. Women are particularly affected by this because they are often at the bottom of the production and distribution ladder and so more likely to be prosecuted. Any jail term is likely to cause stigma and make life impossible after returning to society, and to employment, especially if there are no resources to facilitate re-entry.

It is clear that even within the framework set by the conventions many countries can do more to align their policy response so as to get better results. Key to this is that countries look at the evidence — i.e., clearly identify the affected populations, the drivers of drug use, the specific circumstances of drug production and more.

Too many countries have yet to develop a proper strategy on drugs, and their drug agencies and government departments tend to work in silos. Their response has evolved over time and in a piecemeal way. They need to put their legal framework in order and Parliaments of course will be key to this. The Hearing has sent a clear message about the need for each country to perform a comprehensive review of its own drug problem and from there to design an integrated and balanced strategy.

The point of departure in this effort can only be the people: they need to be given the information and education to engage in the policy arena and question the social imagery that colours too much of this debate. A comprehensive debate is needed in each country which would engage all citizens and constituencies (users, producers, law enforcement, social sector, and so on) on these questions.
Annex

List of speakers

Opening session

H.E. Mr. Mogens Lykketoft, President of the General Assembly
Hon. Saber Chowdhury, President of the Inter-Parliamentary Union
H.E. Mr. Yury Fedotov, Executive Director, United Nations Office on Drugs and Crime

Session I: The world drug problem in perspective — The evolution of drug control

H. E. Ambassador Khaled Shamaa, Chair UNGASS Board (Keynote speaker)
Ms. Margarita Stolbizer, MP, Chamber of Deputies of Argentina
Mr. Bernard Leroy, Rapporteur, International Narcotics Control Board (INCB)
Dr. Vanda Felbab-Brown, Senior Fellow, Center for 21st Century Security and Intelligence, Brookings Institute

Session II: The global response to drugs — Can it work more effectively?

Ms. Reem Abu Dalbouth, MP, House of Representatives of Jordan
Mr. Raymond Pryce, MP, House of Representatives of Jamaica
H.E. Ambassador Kairat Abdrakhmanov, Permanent Representative of Kazakhstan to the United Nations
Mr. Alberto Otarola, Executive President of the National Commission for Development and Life without Drugs (DEVIDA), Peru
Ms. Andrea Huber, Policy Director, Penal Reform International

Session III: Drug prevention and treatment from the standpoint of sustainable development and human rights - What is required?

Ms. Aasiya Nasir, MP, National Assembly of Pakistan
Mr. Javier Sagredo, Advisor, Democratic Governance and Citizen Security, Regional Bureau for Latin America and the Caribbean, UNDP
Mr. Pedro Jose Arenas Garcia, Observatory Colombian Coca Growers, former Member of Congress of Colombia
Session IV: Doha Debate

Motion 1: Implementing the international legal framework will address the world drug problem

For:  Mr. Anti Avsan, MP, Parliament of Sweden  
Mr. Kevin Sabet, President, Sensible Approaches to Marijuana

Against: H.E. Ambassador Luis Alfonso De Alba, Permanent Representative of Mexico to the International Organizations, Vienna  
Dr. Kasia Malinowska, Director, Global Drug Policy Programme, Open Society Foundation

Motion 2: States should seek alternatives to incarceration when addressing possession of drugs for personal use

For:  Ms. Laura Rojas, Senator, Senate of Mexico  
Mr. Nathaniel Erskine-Smith, MP, House of Commons of Canada

Against: Mr. Joshua Lidani, Senator, Chairman Senate Committee on Drugs & Narcotics, Senate of Nigeria  
Mr. Ibrahim Ahmed Omer, Speaker of the National Assembly of Sudan

Closing session

Mr. Martin Chungong, Secretary General of the Inter-Parliamentary Union  
H.E. Mr. Mogens Lykketoft, President of the General Assembly  
Hon. Saber Chowdhury, President of the Inter-Parliamentary Union

Moderator (all sessions): Ms. Julia Taylor Kennedy