

Statement of the Delegation of Portugal
on the thematic discussion on the implementation of the UNGASS outcome
document – *Operational recommendations on demand reduction and related*
measures, including prevention and treatment, as well as other health-related
issues

Vienna, 10 October 2016

Thank you, Mr. Chairman,

The UNGASS outcome document was a collective effort. The time as now come for us to take a step back to look at the completed work from some distance and direct our attention to each of its thematic chapters, as well as to the complementarities that exist between them. The Special Session was held a few months ago and we support the efforts aimed at guaranteeing that the recommendations included in its outcome document are early put into practice or strengthen at the national and international levels.

I would like to report on the implementation by Portugal of the recommendations included in the chapter under analysis this morning. The measures adopted in this field are part of an integrated and comprehensive policy which places human beings at its center, treats drug use and drug addiction as public health issues and favors treatment and care over punishment. I will briefly describe our experiences in three areas: prevention, treatment and harm reduction.

Universal drug prevention is part of the Portuguese school curriculum and is implemented mainly in sciences, biology and civic education studies. Prevention programmes are delivered through training sessions, awareness-raising

activities and dissemination of printed information. In the Safe School programme law enforcement agents patrol the areas surrounding schools to prevent and protect the school from criminal activities, such as drug trafficking. The agents are also involved in awareness and training activities in educational establishments (targeting students, parents and school staff). In the school year 2013/2014 2560 schools were covered by the programme, involving 1.111.525 students.

Drug prevention activities aimed at university students, in vocational education settings, in workplaces and in the military are also being implemented.

Counselling and information on psychoactive substances and available interventions are provided via a helpline, and recently via the Internet.

Several large media campaigns were implemented in recent years to complement awareness raising and information activities targeting young people and also in music festival settings.

As regards treatment, the move away from a punitive approach was accompanied by a reorganization and expansion of healthcare services for drug users, which are at present provided through the Referral Network for Addictive Behaviours and Dependencies. The Network encompasses public specialised services, non-governmental organisations (NGOs) and other public or private treatment services interested and competent in the provision of care. The public services are provided free of charge, on a voluntary basis and are accessible to all drug users who seek treatment.

Opioid Substitution Treatment is widely available in Portugal through public services such as specialised treatment centres, health care centres, hospitals,

pharmacies, NGOs and non-profit organisations. Methadone has been available since 1977, buprenorphine since 1999, and the buprenorphine/naloxone combination has been approved for use in 2007.

In 2014, 16,587 clients were registered in opioid substitution programmes, 66% of whom were in methadone and the remaining 34% in buprenorphine treatment. OST is also available in prison settings. In this context, not only it is possible to continue an OST Treatment with methadone in prison facilities, should the client be incarcerated, but also initiation of OST methadone programme is available.

A network of harm reduction programs (syringe exchange, low-threshold substitution programs, etc.) and structures, including drop-in centres, refuges, shelters, contact units and mobile centres, has been consolidated throughout the country, with the aim of preventing drug-related risks such as infectious diseases, social exclusion and delinquency.

Treatments for HIV and AIDS and viral Hepatitis are included in the range of services of the National Health Service of Portugal and are available free of charge. There are programmes in place covering all nine interventions included in the WHO, UNODC, UNAIDS Technical Guide for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users (2012 revision).

A decreasing trend in the total number of notifications of HIV and AIDS cases associated with drug use reflects the results of the policies implemented, particularly the change on drug user behaviour, as evidenced by the decrease in injecting drug use and the sharing of paraphernalia.

In the second half of the 1990s, around half of the HIV diagnosis involved injecting drug users. In 1997, for instance, the percentage reached almost 60% (1617 cases in a total of 2746). In 2014, they represented only 5% of the total number of diagnosis (48 cases in a total of 920).

There was a significant reduction in the number of problematic users, in particular injecting drug users. Some estimates point to a 40% decline in the number of injecting drug users since the beginning of the century. In 2014, only 14 % of all treatment clients reported using their primary drug by injection, and the proportion among new treatment clients was even smaller at 4 %.

There was also a drop in overdoses. The number of annual drug overdose deaths fell from 318 in 2000 to 33 in 2014. The drug-induced mortality rate among adults (aged 15–64) was in 2014, 4.5 deaths per million, one of the lowest in Europe, being the European average of 19.2 deaths per million.

At the same time, according to General Population and School Population Surveys, drug use remained relatively stable and below the European average.

No single measure explains the positive results I have just described. They are all part of an integrated and comprehensive policy, designed so as to guarantee that each component mutually reinforces the others.