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

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Intervention from the World Health Organization

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Mister Chair,
Excellences,
Ladies and Gentlemen:

Thank you for this opportunity to participate in the thematic discussion and share information on activities undertaken by WHO in the implementation of the UNGASS outcome document.

At the UNGASS, the Director General of the World Health Organization in her welcoming remarks emphasized the preparedness of WHO, in collaboration with UNODC and other partners, to implement the tasks assigned to WHO during the session.

The World Health Organization, as the directing and coordinating authority for health within the UN system, welcomes the high attention accorded to public health in the UNGASS outcome document.

In the report by the WHO Secretariat to the World Health Assembly in May 2016, the public health dimension of the world drug problem was described around five public health pillars or critical public health elements:

- 1) prevention of drug use and reduction of vulnerability and risks that contribute to drug use and drug use disorders;
- 2) treatment and care of people with drug use disorders;
- 3) prevention and management of the harms associated with drug use;
- 4) access to medicines controlled under international drug treaties;
- 5) monitoring and evaluation.

The 69th World Health Assembly, after intense debate, decided to include the item of "Public health dimensions of the world drug problem" on the agenda of the Executive Board at its next session in January 2017.

With regard to prevention of drug use, the World Health Organization continues its work on prevention of alcohol and drug use disorders through promotion of effective and cost-effective policy options, supporting prevention programs with proven efficacy and, in a broader sense, promoting healthy development of children and adolescents. The most recent example of this

broader approach is the WHO contribution to the Lancet series *Early Childhood Development: From Science to Scale* launched last week.

WHO continues to collaborate with UNODC on the promotion of the

International Standards on Drug Use Prevention and the "Listen First"

initiative, as well as WHO collaborating with UNODC and UNICEF on the
development of a good practice document on Education sector response to
the use of alcohol, tobacco and drugs.

In implementing the operational recommendation on sharing data on drug use and epidemiology of its consequences, WHO continues to disseminate information on the health and social consequences of non-medical use of cannabis published in April this year.

Following two meetings organized by WHO on drug use and road safety, this summer WHO published a policy brief on this issue in response to a growing concern around the world about the impact of drug use, including prescription drugs and new psychoactive substances, on driving ability and road safety. Research priorities in this area were also discussed.

WHO continues its work on promotion of early identification of alcohol and drug use, and early interventions, primarily in the health sector, by developing and testing a brief version of the WHO ASSIST screening instrument, and training health professionals in screening and brief interventions for alcohol and other substance use. The use of so called "New Psychoactive Substances" presents new challenges for health professionals, and WHO is working on adjusting the existing technical tools and normative guidance to NPS.

Another area of prevention activities for WHO is prevention and management of substance use and substance use disorders in pregnancy. Based on the WHO guidelines, and in collaboration with UNODC, WHO is developing technical tools for health practitioners and training programs that will integrate illicit drugs with alcohol and tobacco to increase acceptance and efficiency of this training program in health systems.

Currently the World Health Organization is working on the revision of the International Classification of Diseases that is used in about 120 countries. The draft 11th revision of ICD-11 will be released this month in Japan. There are several innovations in the draft ICD-11 regarding substance use and associated disorders. One of them is inclusion of synthetic cannabinoids and synthetic cathinones as additional classes of psychoactive substances, which will allow not only appropriate diagnoses, but also the coding and monitoring of health conditions caused by major classes of NPS in health systems.

The WHO Expert Committee on drug Dependence Treatment and Care will meet in November this year to review a number of psychoactive substances, including an update on cannabis and cannabis resin.

In drug dependence treatment and care WHO continues its close collaboration with UNODC on the program of drug dependence treatment and care that is supporting development of drug treatment systems, including information systems, in about 20 less-resourced countries, predominantly in Africa and Asia. In collaboration with UNODC, a new research project on the impact of naloxone distribution on opioid overdose deaths was initiated, and field work is in preparation in 4 countries.

In the implementation of operational recommendations of the UNGASS outcome document, the WHO is working together with UNODC on field testing of the International Standards for Treatment of Drug Use Disorders. This will involve health professionals and treatment programs in at least 10 countries of the world as well as some international professional organizations.

WHO works with UNODC on exploring good practices of public health oriented interaction between health and criminal justice systems, and a meeting on this matter was hosted by UNODC here in Vienna last week.

As we speak, the WHO Department of Mental Health and Substance Abuse is holding a large Forum today in Geneva and is launching the second edition of mhGAP Intervention Guide that contains the normative guidance on identification and management of substance use disorders as well as a number of key and most common mental health disorders. The first edition

was translated in many languages and is being used widely for training of health professionals across the world.

Strengthening health systems is a cornerstone of a health service response to the problem of drug use and drug use disorders. In line with recommendations of the UNGASS outcome document, WHO stands ready to strengthen its technical assistance, including training, capacity building and technological know-how, to health care providers. An example of such technical assistance is the regional training workshop for those responsible for prevention and treatment of drug use disorders in Ministries of Health in the Eastern Mediterranean region that will take place in Abu-Dhabi, UAE, at the end of this month. This capacity building workshop is organized in consultation with UNODC.

WHO works with UNODC and UNAIDS on the collection of strategic information regarding HIV and other comorbidities among people who use drugs. While global HIV incidence seems to be levelling off in regions where HIV is transmitted primarily through injecting drug use, the HIV incidence continues to increase. WHO continues to review the evidence, and advocate for effective interventions for the prevention of new infections and for the provision of treatment and care for people living with these infectious diseases.

WHO works closely with UNODC and UNAIDS on the Fast-Track approach launched last year, which requires reaching at least 90% of people who inject drugs with a combination of HIV prevention and harm reduction services by 2020. This target is based on strong evidence that high coverage of needle and syringe programmes (NSPs) and opioid substitution therapy (OST) services, when combined with other harm reduction activities and ART, has major public health benefits in places with substantial populations of people who inject drugs.

In May 2016, the World Health Assembly adopted the Global Health Sector Strategies on HIV and Viral Hepatitis. These strategies include recommended actions relating to people who use drugs, with the aim of

reaching these fast track goals by 2020 and 2030 in line with the Sustainable Development Goals.

Public health oriented rebalancing of drug policies should be accompanied by proper monitoring and evaluation mechanisms.

Health target 3.5 of the 2030 Sustainable Development Goals on Strengthening prevention and treatment of substance abuse, including narcotic drugs and alcohol, requires the best possible estimates of treatment coverage for substance use disorders, which can be achieved only through intensified collaboration with Member States and among the relevant UN agencies. That was one of the issues of discussion during the consultation of intergovernmental organizations and agencies in Geneva, organized jointly by WHO and UNODC less than 2 months ago. The main objective was to discuss opportunities and ways for better coordination and harmonization of international efforts to improve epidemiological data on extent of drug use, prevalence of drug use disorders in populations and their impact on public health and well-being.

WHO is in the process of finalizing its new estimates on the drugattributable disease burden for 2015. In this work on producing the estimates we use not only the best available information received from countries through the WHO ATLAS global survey, and data collected by UNODC, but also systematic literature reviews and complex estimates based on advanced methods of mathematical modelling. In this task we are assisted by the academic centers, largely with a status of WHO Collaborating Centres. Recently we established a consortium of such centers on drug epidemiology, that will assist WHO and UN system in producing estimates and improving global data within the UN system and beyond.

In conclusion, Mister Chair, WHO is committed to strengthening its work with Governments, UN organizations, and most of all UNODC and INCB, civil society and other partners, towards implementing operational recommendations of UNGASS 2016 in the framework of an integrated and balanced strategy to counter the world drug problem.

Thank you.