Chair. Distinguished delegates.

Good morning/good afternoon

My name is Rashmila Shakya and I have come the long way from Nepal to share the experiences from a pioneer child rights organization called CWIN Nepal. CWIN, which stands for Child Workers in Nepal Concerned Center, works for promotion and protection rights of children. I am honoured to have this opportunity to present to the distinguished panel.

In our work, we get a real close-up picture of how drugs negatively affect many children and in many ways. For example in the case of Man Bahadur (name changed). He is a 14-year-old boy studying in grade 7 in a school in the Eastern part of Nepal bordering to India. While he was in grade 6, his peers and he decide to go to India to earn a living. It is common for children from here to go to India in search of livelihood. In India, he agrees to carry a bag to be taken to Nepal in return of some money. At the border, he was caught by police with a bag with drugs but his other friends escaped. He has presented to the court and the court sent him to our Child Helpline for rehabilitation, socialisation and family reintegration as he was a minor. He sat in many counselling sessions at Child Helpline’s transit centre for three months before he was reintegrated to the family. He is now continuing his education at the same school.

We have learned three important lessons: Firstly, drug problems are preventable and prevention is the most advanced level of harm reduction. Secondly, that with timely and right interventions, children can be helped out of their drug problems. And thirdly, a broader strategy to empower the children is more effective than simply providing services or knowledge. Therefore, CWIN takes a multifaceted and comprehensive approach to addressing drug issue and approaches drugs as a development issue and raises it in relation to child rights.

In relation to this, we would like to remind all governments of the world about the paragraph in the Convention on the Rights of the Child, saying that governments shall take all appropriate measures to protect children from the use of narcotic drugs. From our point of view, this means that the best interests of the child should be given preference when designing drug policies and preference above other population groups. The concept of “harm
to others” is essential. Children are innocent victims of alcohol and drug use in the adult population.

The following are some examples of CWIN’s strategies and work that can contribute to achieving the intentions in the UNGASS outcome document.

Among many strategies, integrated life skills education delivered in participatory ways has been instrumental in empowering children against drugs. Of course, it has to be tailored to make it interesting enough for children and young people from different backgrounds and contexts. However, participatory and right based approach such as with children and for children is important to empower children. CWIN has introduced a comprehensive participatory life skills module which includes a separate chapter on alcohol and drugs. We deliver this package through empowerment centres by young people to their peers and children established in different parts of Nepal for children and young people who are out of school and from various backgrounds. Similarly, it delivers life skills modules for children in schools in coordination with school management committees.

Another way of empowering children against drugs is through engaging them in creating grassroots comics on drugs where we train children on how to create comics with their own stories. At the end of three days of the workshop, they come up with their own beautiful stories discussing drugs, alcohol, tobacco and other related problem. Some would tell about their encounter with drugs, some would come out with stories on how families have been ruined and some come up with great ideas to solve the problem. These stories not only empower them but work as a tool to raise awareness among the general public. Children will not just create stories, they organize exhibitions in their communities and go on streets with their stories and discuss with people, including their parents. We have also seen children relating to drugs or alcohol problem even when they are creating comics on other social issues than substance use. A recent example of this is when children were creating stories on the effect of the earthquake in their lives. Many children included examples of how alcohol use was exacerbated by fear.

Similarly, CWIN runs peer support programme where former street children work as positive role models and encourage young people on the street to come out of drugs. We use various methods such as recreational activities, life skills sessions, dance therapy, comic books in engaging with children. CWIN helps them to enroll with de-addiction centers, supports in
ARV intake and continue the treatment. CWIN also supports the young people to take up vocational training and to start a small business for sustained positive lives.

Another important component of CWIN’s work is the protection of children and young people at risk and in vulnerable situations. CWIN operates Child Helpline 1098 with rescue, psychosocial counseling, emergency medical support, legal aid, shelter, rehabilitation including social reintegration support. For example, peer educators on the street call Child Helpline about a boy willing to come out from the drug. Helpline reaches the child and brings him to Helpline, provide basic services including counseling and coordinates with an organization providing rehabilitation center and ensures he gets treatment.

With this example, I would like to end my presentation. However, I would like to present some selected recommendation for further action:

First and foremost, nation-states should establish child-friendly national drug policies and take measures to ensure children’s rights to grow up in the drug-free environment as stated in Article 33 of the UN Convention on the Rights of the Child.

Secondly, the best interest and participation of children must be ensured in primary prevention and protection measures for children and youth.

Thirdly, in developing countries like Nepal, drug problems are associated with other social issues. For example, there are greater chances for out of school children and children from dysfunctional families to encounter with drugs. Therefore, measures should be taken to fulfill basic human rights of all the children and young people.

Finally, child-friendly measures must be taken for empowerment and social reintegration of children specifically living and working in difficult circumstances such as children on the streets and children forced into commercial sexual exploitation.

I thank you for your attention.