

IDPC intervention – 8<sup>th</sup> November CND Intersessional

Check against delivery

*Excellences, ladies and gentlemen, dear civil society colleagues,*

Thank you, Madame Chair for the opportunity to present here today as part of the panel on **‘taking stock of the implementation of the commitments made to jointly address and counter the world drug problem, in light of the 2019 target date’**.

Firstly, as a civil society representative, I would like to thank you, Madame Chair and the CND Secretariat, for your continued commitment to the meaningful engagement of civil society in this forum. The practice of civil society engagement at the CND is being increasingly held up as a good practice example, and the great strides that have been made on that front in the last 10 years is strongly welcomed and appreciated. The role of civil society is to bring the realities on the ground to bear on these important discussions. In formulating social and public policies, it is fundamental to consider the impact on the lives of people and communities, on public health and human rights, both at the core of the values of the United Nations.

Thank you in particular for your collective support for the Civil Society Task Force of which I am a member. We have continued our work after the UNGASS to engage global civil society from all regions of the world in the lead up to 2019. We have just closed the global online consultation to seek new inputs from civil society on their views on the last decade of drug policies and ideas for the future. The results of the online consultation will be presented here in Vienna on the 5<sup>th</sup> December and we invite you all to attend that important session.

My intervention today however, is on behalf of the International Drug Policy Consortium (IDPC). IDPC is a global network of 177 civil society organisations from over 60 countries. We come together to promote objective and open debate in drug policy making and call for evidence-based policies that are effective at reducing drug-related harm that are based in the broader priorities of the United Nations – human rights, development and peace and security.

In Resolution 60/1, member states agreed to take stock of the implementation of commitments made to jointly address and counter the world drug problem, in particular in the light of the 2019 target date. As a contribution towards this critical discussion of ‘taking stock’ and in the absence of a comprehensive formal review process, IDPC has produced a civil society shadow report that reviews progress towards the overarching goals from the 2009 Political Declaration and Plan of Action. In addition, the report also seeks to evaluate *whether* and *how* the implementation of the Political Declaration has contributed to the broader UN priorities of protecting human rights, advancing peace and security, promoting development. Finally, the report offers recommendations for new goals and metrics for the next decade on drug control, focusing on UNGASS implementation and the SDGs.

In terms of the methodology used, in addition to looking at the progress against the targets from operational paragraph 36, we selected 33 actionable and measurable actions out of the 234 actions in the Plan of Action. We looked at the data available between March 2009 and July 2018. The data is largely taken UNODC and supported by other UN data from WHO, OHCHR, UNAIDS, UNDP and others, as well as academic and civil society research.

There is a great deal of data in the report and I invite you to read it. We have hard copies executive summaries here with us today. For now, I will briefly share the headlines. Firstly, with specific reference to the first two targets from operational paragraph 36:

- On target 1 which seeks to reduce or eliminate the cultivation of certain plants. Data from the UNODC shows us that over the last decade, there has been an increase in opium and coca cultivation which are now at record levels.
- On target 2 which seeks to reduce both illicit demand as well as health and social risks, we note an average increase by 31% in the global demand for all drugs. With respect to reducing health and social risks, we have not seen a reduction in HIV, hep C and TB prevalence among people who use drugs, overall infection rates have remained stable – and in some regions are still increasing. There has been a worrying increase in drug-related deaths – with WHO reporting some 450,000 deaths in 2015. Around a third to one half of these are fatal but mostly preventable overdoses and the rest are from complications relating to HIV, hepatitis or TB infection which are also preventable and treatable.
- On target 3 which seeks to reduce availability of psychotropic substances, including synthetic drugs, there has been a huge increase in the number of new psychoactive substances on the market. In addition, the available data shows increasing production and expanding markets for methamphetamines, and the record levels of the illicit use of prescription drugs in some parts of the world.
- On target 4 which seeks to eliminate and reduce the diversion and trafficking of precursors, despite the best efforts of member states, the INCB reports an increase in the use and number of precursors.
- On target 5, to eliminate or reduce money laundering, again despite tighter controls, estimates are that less than 1% of all money being laundered is currently being seized.

In parallel, we looked at the impact of drug policies on the fulfilment of human rights, and in particular on the right to health. Globally only 1 in 100 people who use drugs live in countries with adequate coverage to both needle & syringe programmes and opioid agonist therapy. While for evidence-based drug treatment, there is reportedly little increase in the availability of drug dependence treatment between 2010 and 2016, and coverage remains low for many key treatment interventions such as detoxification, OST, peer support groups, cognitive behaviour therapy to name a few.

In terms of access to controlled medicines, around 75% of people remain without access to adequate pain relief – this is primarily in the global south. The WHO has estimated that 92% of the world's morphine is consumed by only 17% of the world's population.

In terms of other human rights impacts, we see a continued use of the death penalty for drug offences and a very troubling increase in the number of extrajudicial killings in the name of drug control.

With respect to human rights associated with incarceration and disproportionate punishments, according to UN data, one in five prisoners worldwide is incarcerated for drug offences, the overwhelming majority of whom are for drug possession for personal use. In certain regions, this proportion is even greater for women – who are the fastest growing prison population in many parts of the world.

Finally, in terms of advancing development, there has often been too great a focus on eradication measures at the expense of a broader development focus that takes into account the particular issues faced by communities in both rural and urban contexts.

Finally, in formulating the next phase of drug policy, we call on Member States to honestly consider the progress, or lack thereof, that has been made towards the overarching goal in the 2009 Political Declaration to significantly reduce or eliminate the illicit drug market, as well as progress made towards implementation of the UNGASS Outcome Document. As our shadow report states, it is difficult to credibly claim progress given the reality of a robust and growing illicit drug market coupled with a rise in both drug-related harms as well as devastating policy harms. Ten years ago, the previous UNODC Executive Director, Mr Costa referred to the 'unintended negative consequences' of drug control as part of the previous 10-year review – that paper is unfortunately as relevant today as it was ten years ago.

In addition to offering up our shadow report as a key contribution to this important phase of 'taking stock', the IDPC network has four key asks for the 2019 process:

1. The international community should consider adopting more meaningful goals and targets in line with the 2030 Agenda for Sustainable Development, the UNGASS Outcome Document and international human rights commitments, and move away from targets seeking to eliminate the illegal drug market.
2. Member states should meaningfully reflect upon the impacts of drug control on the UN goals of promoting health, human rights, development, peace and security – and adopt drug policies and strategies that actively contribute to advancing the 2030 Agenda for Sustainable Development, especially for those most marginalised and vulnerable.
3. Global drug policy debates going forward should reflect the realities of drug policies on the ground, both positive and negative, and discuss constructively the resulting tensions with the UN drug control treaties and any human rights concerns associated with drug control efforts.
4. Beyond 2019, UN member states should end punitive drug control approaches and put people and communities first. This includes promoting and facilitating the participation of civil society and affected communities in all aspects of the design, implementation, evaluation and monitoring of drug policies.

Thank you for your consideration and your continued commitment to civil society engagement.