

Ladies and Gentlemen,

Poland fully supports the statement made by on behalf of the EU, however, we would also like to add some words of reflection from our national perspective.

Recent years in drug policy have been witnessing a number of innovative and often radical and controversial initiatives aimed at reducing negative consequences generated by substance abuse in the field of security and public health of country populations and local communities. At the same time, the search for rational and modern solutions frequently revolve around the attempts to solve the problem at the national level leaving the discussion of drug law and systems at global level behind. Initiatives of many countries are based on the evidence of research into drug addiction, including the needs analysis of specific populations in terms of health and security improvement and the assessment of the economic results of drug policies in place. The rising pressure of civil societies represented by NGOs also seriously impacts the drug policy-making and implementing. It seems that the experiences of countries and organizations aiming for effective solutions to the drug problem should be perceived as encouragement for wider discussion of the full application of the existing UN conventions and the international law. This discussion should also incorporate the experiences of the countries which are modernizing the drug response system. Such a discussion could also aim at formulating possible changes to the general approach to substance addictions and a perfect opportunity to start it will be the UN General Assembly Special Session in 2016. We believe that such a dialogue should be based on public health priorities, which are particularly vested in the World Health Organization, the institution which enjoys great trust potential internationally. Concentrating the activities on the humanitarian and health-related aspects should also result in the particular emphasis on human rights, including the rights to treatment without subjecting

human or patient's rights to ideological or political needs. We do object to the capital punishment, including individuals who commit drug-related offences or depriving patients of effective therapy, which has recently taken place on the Crimean Peninsula, where over 800 patients were violently denied substitution treatment.

Poland also taken measures to change the drug law and the practices of enforcing it. The consequence of these actions should be mainly the improvement of the status of drug users and dependent individuals. Legislative changes adopted in Poland which fit in with the concept of decriminalizing small amounts of drugs for personal use and with evidenced lack of public interest in prosecuting the perpetrator caused that in the second full year of the law's existence approximately 35% of criminal cases against drugs users were either not instigated or those who were instigated were dropped.

The priority of concentrating on individuals and entities introducing psychoactive substances to trade and not the users can also be found in the Polish legislative solutions against the phenomenon of New Psychoactive Substances, where the response is dictated by the administrative not the criminal law.

In our opinion, founding the drug policy on the active dialogue with the representatives of the civil society and principles of public health should bear fruit in the form of deeper involvement of NGOs in the social issues and more common application and financing of drug prevention, therapy and harm reduction based on sound technical and economic evidence.