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### Commission on Narcotic Drugs

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Agenda Item 9

**Preparations for the special session of the General**

**Assembly on the world drug problem to be held in 2016**

### Written statement submitted by IOGT International

The Secretary-General has received the following paper, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.



## **IOGT International Statement, 59th session of the Commission on Narcotic Drugs\***

IOGT International members — 125 NGOs from 54 countries — work with all aspects of drug-related harm: they conduct advocacy, prevention, treatment and rehabilitation, as well as social work programs on grass-roots, national, regional and global level. Please allow me to start by congratulating and thanking the UNGASS board and the Commission on Narcotic Drugs for the inclusive and constructive manner in which the outcome document has been drafted, and for how civil society has been engaged. Our members from communities around the world are appreciative of the opportunity to take part in the process.

Our contributions are focused on sharing evidence-based, high-impact solutions. In that spirit, please allow me to present 5 priorities for UNGASS:

### **(1) A child-centred approach**

What works is a commitment to drug control policies that are balanced, comprehensive and integrated, with a focus on individual and public health and carried out with respect for human rights. A Human Rights-based approach must comprise child rights.

The primacy and universality of the Best Interest principle stipulated by the Convention on the Rights of the Child means that general drug policy-making shall be child-centred — as opposed to adult-centred or user-centred.

We urge governments to make the Best Interest of the child a primary consideration in all policy making that affects children, even in areas, which at first might seem to have nothing to do with children.

UNGASS should generate government commitment to create enabling environments for protecting children from drug use. For this to happen the most conducive policy goal is to ensure a sustainable reduction of drug use — I will come back to that in the end.

### **(2) Putting development perspective at the core**

Last September the Sustainable Development Goals have been adopted. Just last week, even the indicators for measuring progress have been agreed. As UNODC's World Drug Report shows, the development perspective matters because harm caused by illicit drugs has significant impact on peace, security and development.

Therefore, UNGASS needs to build on the Agenda 2030, especially by taking into account the conditions and needs of populations in developing countries.

From experience within our worldwide network, we know that Alternative Development can work, particularly when initiatives are integrated into broader agendas and driven by a long-term vision, sustained with funding and political support. Best practices show that when Alternative Development is approached comprehensively, it has the potential to break the vicious cycle trapping poor farmers. Alternative Development should become a catalyst for viable livelihoods

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that do not depend on illicit cultivation. Furthermore, discussions about the world drug problem should no longer be dominated by Western experts, focused on Western solutions to Western problems.

We encourage governments to use the opportunity of UNGASS and the SDGs to facilitate dialogue that addresses drug use issues in the global south. This is uniquely important because experience shows that substance use, whether alcohol or other drugs, has stronger negative consequences for poor and marginalized people than for those in more affluent groups.

We urge governments to put a high priority on assuring that substance use in developing countries does not increase to the levels that exist in Western countries.

We know that many risk factors and circumstances that render people more vulnerable to illicit drugs can be prevented. Putting a development perspective at the core means to work with communities and identify solutions that integrate measures to prevent as well as to reduce harm.

### **(3) A public health approach**

According to data available, there has been little change in the overall global situation regarding the production, use and health consequences of illicit drugs.

Working in communities for the prevention and reduction of drug-related harm, we are mindful of the fact that health consequences of illicit drug use continue to be a matter of concern, as the vast majority of problem drug users continue to have no access to treatment. Access to treatment and support on the road to recovery are essential public health cornerstones, which need to be part of any strategy to tackle the world drug problem.

But clearly, drug use is not only a health issue that affects the individual user; it is also a public health issue. The overall positive health benefits of population-based approaches far exceed those that are available only from clinical interventions on the individual level. UNGASS should reinvigorate WHO's definition of health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Such an approach brings benefits for individual users, families, communities and the general public. With regard to the use of illicit drugs it is clearly evident that it restricts the freedom and limits the well-being of everyone, including the user.

Therefore an evidence-based approach to the world drug problem highlights public health-oriented policies that serve both to define and to understand structural causes of drug use within a society and help to determine interventions that can prevent and reduce drug-related harm at population level.

We urge governments to address risk factors on a population level and in this way improve both the wellbeing of individuals and populations.

### **(4) Prevention first**

Preventing problems from occurring or expanding represents by far the best approach to reducing drug-related harm. The "Prevention-first" approach holds four major benefits:

It is the most cost-effective, the most sustainable, the most people-empowering, and the most humane policy option, especially for extremely vulnerable groups such as children, women, or people from socio-economically deprived settings.

Prevention first, however, does not mean prevention only, and it does not mean demand reduction only. Prevention is more: It can ensure that children and youth, especially the most marginalized and poor, grow and stay healthy and safe into adulthood and old age.

For every dollar spent on prevention, at least ten can be saved in future health, social and crime costs. Thus we encourage governments to make prevention the cornerstone of the response to drug problems because prevention aims for the healthy and safe development of children and youth to realize their talents and potential becoming contributing members of their community and society.

Needless to say, we do not think that strategies to prevent harm and strategies to reduce harm are mutually exclusive. Such a polarization is not helpful in tackling the global drug problem. In fact, evidence from our work around the world shows that human rights-based, and evidence-based measures to reduce harm to drug users and their surroundings do in fact hold preventive potential, too.

That is why we urge governments to improve the categorization of prevention programs in the draft outcome document for UNGASS, referencing the specific role of universal, environmental, selective, and indicated prevention strategies.

#### **(5) New momentum**

Tackling the world's drug problem requires strong international collaboration. The World Drug Report shows that illicit drug use has in fact remained stable. It is estimated that a total of 246 million people, or 1 out of 20 people between the ages of 15 and 64 years, used an illicit drug in 2013. The magnitude of the world drug problem becomes more apparent when considering that more than 1 out of 10 drug users is a problem drug user, suffering from drug use disorders or drug dependence.

An unacceptable number of drug users worldwide continue to lose their lives prematurely, with an estimated 187,100 drug-related deaths in 2013. To understand the extent of the global drug problem, let's consider the global problem caused by legalized drugs: every year more than 9 million people die because of alcohol and tobacco every year.

Understanding the global burden posed by alcohol and tobacco clearly indicates that legalization of illicit drugs will not protect the individual, families, communities or society at large from drug-related harm. The real effect of legalization — some of which can already be seen playing out — can be fully measured only after commercial industries come onto the scene, aggressively pushing for ever wider availability of their harmful products. The alcohol and tobacco industry are already undermining and opposing public health regulations. Big Marijuana will only make it harder for United Nations agencies, governments and civil society organizations to protect lives and promote public health and sustainable development.

Not one death from harmful substances is acceptable, especially because we have the tools to largely prevent them.

**Therefore, IOGT International suggests a global commitment to reduce the use of illicit drugs by 30 per cent until 2030, when the SDGs will be re-evaluated.**

We believe that with renewed commitment and new momentum created at UNGASS, this is a bold but achievable goal. With the approaches and solutions we are suggesting, and building on existing work and evidence, we look forward to work with governments and civil society partners at UNGASS and beyond.

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