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Statement submitted by Acción Técnica Social*

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.

* The present document is reproduced in the form in which it was received.



A dialogue has rapidly sprung in Latin America around reducing not only the harms of drug use, but also reducing the harms of current policies. The region is breaking new ground regarding how to reduce the harms of the current policies and protect our communities, protect human rights and promote the development. Innovative new programs are being implemented and evidence is being generated, giving an insight about the positive impacts on current consumption behaviour, particularly related to so-called new psychoactive substances.

Founded in 2008, Acción Técnica Social (ATS) is a Colombian organization that works with institutions and people who use drugs in the improvement, design and implementation of policies regarding psychoactive legal and illegal substances. Focusing primarily on risk reduction and harm mitigation, ATS executes programs using peer-education with non-problematic or recreational users in nightlife and leisure spaces, with people who consume alcohol in higher-risk settings and through comprehensive programs for people who inject drugs. In the last year, it has had direct contact with 51,000 people and over 440,000 people indirectly, allowing to build a comprehensive database and generate evidence regarding policies that work.

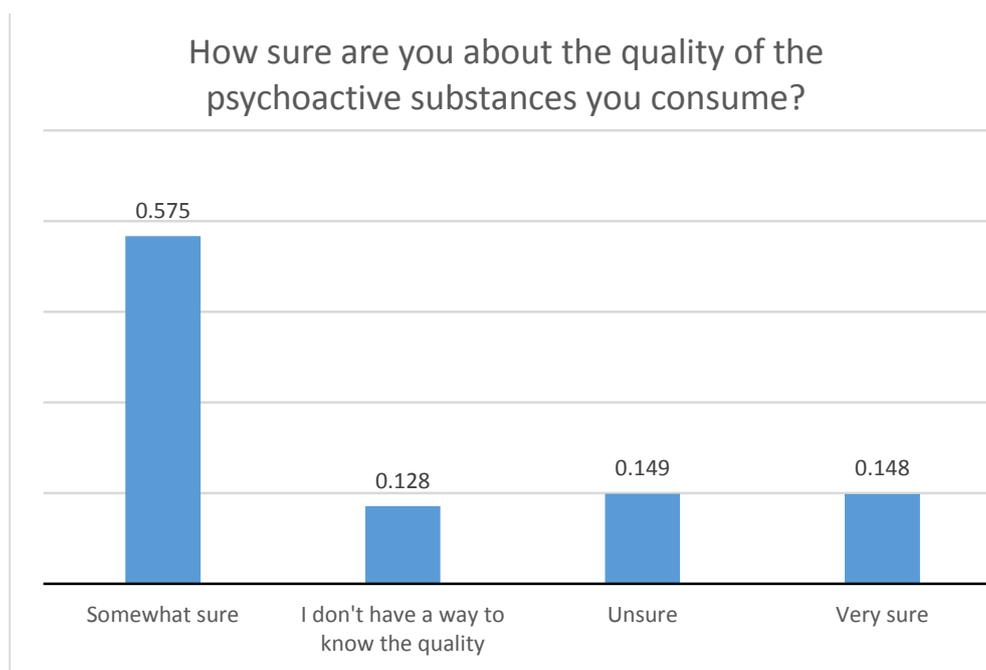
CAMBIE is the first comprehensive risk and harm reduction program for people who inject drugs. It operates under the guidelines on syringe exchange programs of the World Health Organization; According to the risks identified in studies of HIV prevalence and the National Plan for Response to HIV and Sexually Transmitted Infections. The services provided extend in a differentiated way through multiple spaces and different ways that adapt to the types of populations and their demands; fixed points or risk reduction points and damage; or mobile devices within transit areas where large numbers of users are concentrated.

Échele Cabeza cuando se de en la cabeza (or use your head before it goes to your head) is a project specifically focused on nightclubs, music festivals and raves to provide information and substance analysis services. This allows the organization to have a clear picture of the ever-evolving illegal drug market, while providing timely health alerts for people who are considering using drugs. This service is underscored by accessible informational campaigns that have quickly become collectors-items within specific populations. Higher levels of information and education are reaching those who need it most, via trusted channels of communication.

Since 2012, Échele Cabeza has analysed more than 2000 samples and witnessed a 25 per cent reduction in the adulteration of ecstasy/MDMA pills. 88 per cent of users who utilized the service decided not to consume the substance if they received a negative result. ATS have emitted 17 health alerts to bring attention to the adulteration of cocaine, fake LSD and 2CB. These alerts were shared more than 45,000 times on social media and taken up by both print and tv media. With these health alerts, ATS saves lives.

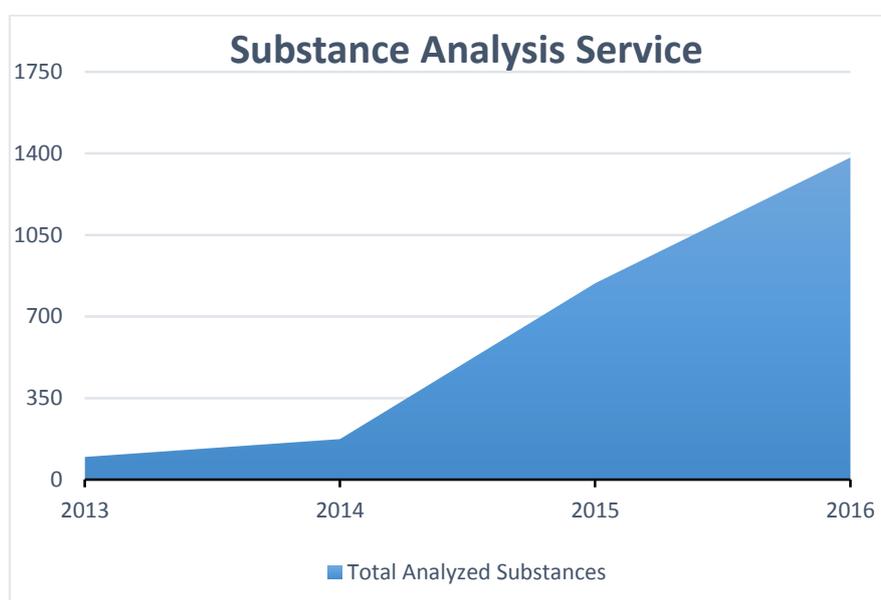
The impact is remarkable. According to the Colombian Ministry of Health, emergency room intakes because of intoxication has significantly dropped in the last 4 years in Bogota. After a campaign by ATS related to healthier consumption of alcohol, emergency room visits related to alcohol decreased from 738 in 2011 to 331 in 2015. Emergency room visits for stimulants such as amphetamines and ecstasy dropped from 82 in 2012 to 37 in 2015. These changes in perceptions, understanding and safer drug use have led to approximately 500 people not having to enter an emergency room setting, resulting in a cost-savings of at least 260,000 USD for the city of Bogota.

A satisfaction survey of Échele Cabeza, conducted by ATS in 2016 to 22,000 active users is useful to have an insight over the impact of the project. While 54.1 per cent of the interviewed drug users claimed to know the quality of the illegal psychoactive substances consumed, 60.9 per cent said they usually get it through a trusted dealer. However, most of them are 'somewhat sure' about the quality of the substance:

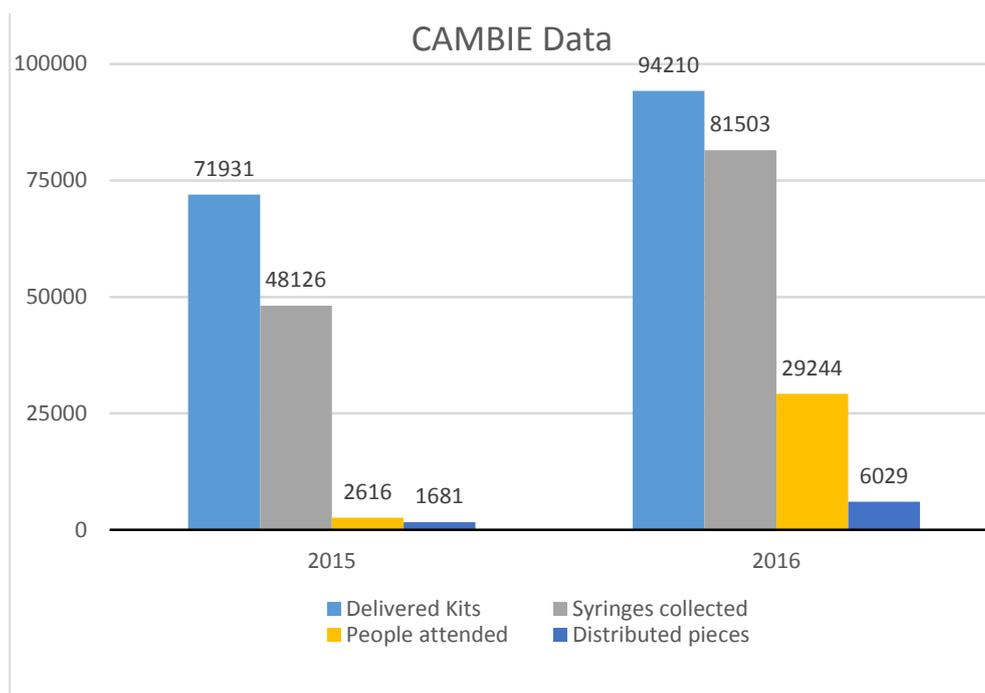


Moreover, 89 per cent of respondents claimed that the information provided by Échele Cabeza has been useful in changing their consumption habits. This is possibly due to the fact that 96 per cent of those surveyed felt they were receiving trustworthy information from representatives of Échele Cabeza. Additionally, once those surveyed were returned the results of the substances analysed, 83 per cent of them decided not to consume it, since it was not what they had planned on buying.

Specifically speaking about the Substance Analysis Service (SAS), the data about the reach of the program has increased during the last four years, as follows:



The same pattern can be observed in the CAMBIE program in the last two years, when the population served increased from 2,616 users in 2015 to 29,244 just one year later.



Taking into account the best practices on the local level demonstrated above, there are three recommendations that we believe are key for the Commission on Narcotic Drugs to consider within the post-UNGASS framework:

- A greater investment in harm reduction programs and an understanding of the effectiveness of these programs in reducing blood-borne illnesses such as HIV and Hepatitis C. Shifting budget priorities towards health and harm reduction approaches have been proven to be more cost-effective than punitive measures. Member States should make the necessary investments to face the challenges of these illnesses through supporting needle/syringe programs, as well as, new practices, such as safer pipes around the use of cocaine-derivatives.
- An increased knowledge of responsible consumption practices. As we know, not all drug use is problematic and the majority of people who consume substances require and request information regarding these substances, not treatment. Thus, we must scale-up informational programs on substances that are based in evidence and not ideology. Substance analysis programs (or drug checking) has shown to be a key mechanism for reaching important populations with information. It is also an important resource to better understand the emerging drug market, emit health alerts and reduce costs to the local governments. Governments can and should be supporting substance analysis services as a means of protecting and improving health.
- Lastly, ATS believes that local change can spur international change, particularly when it is based in scientific evidence and is accompanied by strong data. In order to provide a clear path towards 2019m, we support the calls for an evaluation period which can explore the impacts, both positive and negative, of the current drug control system. This should be followed by a period of reflection on the UNGASS chapters that allows Member States, the academic and scientific community and civil society to bring forth the best practices that have begun to emerge post-UNGASS. Following these two periods, it is important to determine the correct path forward. While the drafting of a new document will not be likely, it is key to recognize that the language adopted through the UNGASS document is the most recent and most relevant document for the international community.