UNODV Executive Director’s Remarks
CND Thematic Discussion
Wednesday, 21 September, 2022

Ambassador Ghilain D’Hoop,
Chair of the 65th session of the Commission on Narcotic Drugs,
Distinguished Ambassadors, Excellencies,
Ladies and Gentlemen,

I am very pleased to be with you today, to join this thematic discussion on a very important topic: the need to uphold the international drug control system, side-by-side with international human rights obligations.

Drug control obligations and human rights obligations share the same priority at their core: people and their wellbeing.

People need to be our focus now more than ever.

The latest Human Development Report issued by UNDP revealed that the global human development index declined for two years straight, for the first time in more than 30 years.
As we grapple with crises, development and human rights gains are eroding, and more people are left vulnerable to drug use and exploitation.

The Universal Declaration on Human Rights recognizes all people as being equal in dignity, and guarantees, among others, the right to security, health, and medical care.

In practice, that is not the case for everyone.

People who use drugs, and those who are impacted by them, are often among those who cannot access those rights, as a result of stigma, circumstances, limited resources, and sometimes as a result of the very responses to address the world drug problem.

All of the three drug control conventions express concern for the health and welfare of humankind in their very first sentences.

Upholding the conventions means upholding their purpose.

Drug control obligations and human rights obligations are compatible, complementary, and mutually reinforcing.
What Member States need to strive for, is to live up to those obligations in a coherent manner that never loses sight of the ultimate goal.

It all starts with the wellbeing of every person.

The 2022 World Drug Report issued by the UN Office on Drugs and Crime in June found that more than 38 million people suffered from drug use disorders globally, but only one in five received adequate treatment, with women finding it particularly hard.

Effective treatment and care must be available to everyone who needs and wants them, while prevention should remain the first line of defense.

Healthcare and other rights are often even further out of reach for people who use drugs when they come into contact with the criminal justice system.

Out of all people arrested for drug-related offenses, UNODC data found that sixty-one per cent are arrested for possession for personal use.

When imprisoned, they usually find themselves in environments where they have less access to treatment, where drug use is more prevalent, and where prison overcrowding continues to be a problem.
There is a need to review drug-related laws, policies, and practices to ensure that people who use drugs are treated with dignity and respect, and to direct those who need it to treatment as early as possible.

Prisons should be better equipped to provide appropriate care and treatment for inmates, including people with HIV, and released prisoners should have access to services such as drug treatment and employment support after their release.

In appropriate cases, alternatives to incarceration should also be considered for drug-related offenses, in line with the Tokyo and Bangkok Rules, to provide a better basis for treatment, while helping to lighten the load on strained prison systems.

Whether in prisons or in their communities, women who use drugs find themselves facing greater stigmatization and additional barriers to their rights.

More than most, women cannot get treatment when they need it. For example, the World Drug Report revealed that around half of all people using amphetamine-type stimulants are women, but only one in five who receives treatment for it is a woman.
Past data has also shown the percentage of women arrested for drug offenses to be higher than the percentage of men, while prisons are rarely equipped to meet the specific needs of women, including mothers.

Responses to the world drug problem need to be gender-responsive in all their dimensions, accounting for the particular needs and rights of women.

Just as important as what we do to help people who are harmed by drugs, is what we do to ensure that medicines containing controlled substances are available to people who need them, especially in low and middle-income countries.

We must urgently remove all undue obstacles to accessing such medicines, and I would like to thank the Chair of the Commission for the initiative that he has launched this year, and which I have proudly joined, to ensure that no patient is left behind.

UNODC is committed to working with all of you to promote a balanced, comprehensive, and people-centered approach to the world drug problem.
Our Office is providing technical assistance to Member States on evidence-based treatment for people with drug use disorders, alongside access to justice, penal reform, and the use of non-custodial alternatives to conviction or punishment.

An important example is our joint initiative with the World Health Organization on Treatment and Care for People with Drug Use Disorders in Contact with the Criminal Justice System.

Through this initiative, we have already mapped available alternatives to conviction or punishment in 77 countries, and we are providing training and legislative assistance to support continuity between health and justice.

UNODC is also in dialogue with Member States to advocate for health-oriented interventions such as voluntary, community-based treatment for drug use disorders, and we are proud to see more countries adopt and expand such interventions.

Addressing the world drug problem while safeguarding people’s rights is an issue of policy, but also an issue of capacities and awareness.
We have the necessary tools. What we need are more resources, especially at this time of heightened risks and vulnerabilities, and I urge Member States to dedicate more resources to live up their shared commitments.

Excellencies, colleagues,

It is time to have an open conversation about drug policy and human rights.

This session brings together the right stakeholders, from Member States to relevant international and regional organizations to academia and civil society partners.

There may be differences in perspective, but ultimately, we can and must act based on our common priority: people and their wellbeing.

People, whether men or women, whether in our communities or our prisons, whether in high or low-income countries, are entitled to their health, dignity, and security. That includes all people whose lives are affected by drugs and drug use.

Let us take this opportunity to put people at the heart of our efforts to meet drug policy commitments.

Thank you, and I wish you fruitful discussions.