

5<sup>th</sup> February 2024

**Subject: Stakeholders' Contributions – CND 2024 Midterm Review**

The World Federation Against Drugs (WFAD) welcomes the opportunity to contribute to the CND 2024 Midterm Review.

WFAD is a multilateral community of non-governmental organisations and individuals working toward strengthening prevention, increasing access to treatment, and promoting recovery. With over 425 member organisations in 69 countries, WFAD places particular emphasis on the rights and needs of women and children in our field.

The 2019 Ministerial Declaration offers a comprehensive approach to the World Drug Issue, that spans supply reduction, prevention, harm reduction, and treatment, as well as cross border collaboration between countries and regions. A balanced and comprehensive approach is necessary to tackle the drug issue on a global scale.

To meet the commitments declared in the 2019 Ministerial Declaration, we urge member states to **promote services and policies that are non-discriminatory, evidence-based, trauma-informed, gender- and culturally sensitive, and age-appropriate**. Simultaneously, we highlight the need to continue to promote evidence-based prevention, access to treatment, and recovery, while encouraging monitoring and evaluation with disaggregated data by gender. Our [Open letter to UNODC](#), signed by 130 organisations, highlights the urgent need for humane and balanced policies framed within a continuum of care, whilst adhering to the International Conventions on Narcotic Drugs and the UNGASS 2016 Outcome Document.

There are certain elements within the Ministerial Declaration and the 11 identified challenges associated with the 2024 Midterm Review that require enhancement and inclusion to ensure that the commitments are met. The primary focus areas of which encompass strengthening prevention, incorporating Recovery and Recovery Oriented systems of care, whilst ensuring the needs of women and children are met through gender-sensitive, child-centric, and age-appropriate approaches.

Availability of illicit substances remains high, and the needs among people are increasingly complex and diverse, with new and emerging trends across the globe. The number of people who have substance use disorders continue to increase, with an expected increase of 40% in substance use among youth on the African Continent alone in the coming years. Simultaneously, the historic gender gap in drug use seems to be narrowing, while the number of women in treatment, as well as available services for women, remain low. Young people remain the most vulnerable group when it comes to the use of illicit drugs. **The perspective of children whose parents or primary caregivers use drugs should be strengthened and is of importance to further develop**. This is an important perspective needed to break intergenerational cycles of addiction.

Drug use is particularly harmful to children and young people, and they are simultaneously most severely affected by substance use disorders. Increased availability coupled with normalisation trends is leading to increased use among youth. When the impact of drug use occurs on a young person's developing brain, the risk is greater that the problems that occurs can become permanent. The factors that influence substance use among children and youth are often factors outside of their control, which include early mental and behavioural

challenges, poverty, childhood adversity, limited opportunities, social isolation, insufficient parental engagement, and lack of social support. For women or girls who use drugs, childhood traumas and experiences of violence (in childhood or later in life) are commonly shared experiences. An increasing body of literature ([summary](#)) and research showcase the negative health effects of long-term cannabis use during adolescence, and the strong impact on the risk of acute psychosis, anxiety disorders and developing schizophrenia.

To ensure children and young people's needs are met, whilst adhering to the obligations made in the Convention on the Rights of the Child Article 33, the only human rights convention that specifically addresses illicit drugs and obligates signing states to ensure that children and protected from the use, trafficking, and cultivation of such substances, WFAD strongly encourages the CND and Member States to **further invest in evidence-based prevention and early detection**. Prevention should start early, as early as during pregnancy, and work long-term, services should be monitored and evaluated with data disaggregated by gender and age appropriate. Prevention has a mediating factor, in that we are not simply preventing drug use but ensuring strengthened mental health, better school achievement, and other positive social and health related factors. Prevention is cost-effective, apart from the healthy and safe development of children and youth, for every dollar spent on prevention, at least 10 can be saved in future health, social, and crime related costs.

On January 1<sup>st</sup>, 2024, [The Declaration of Oviedo \(oviedodeclaration.org\)](https://www.oviedodeclaration.org) was launched, providing ten proposals for incorporating Prevention in Drug policies. This groundbreaking declaration builds on, and acts in accordance the existing global declarations and political commitments that function as road maps for countries, namely the 2016 UNGASS Outcome Document and the 2019 Ministerial Declaration that highlight the value of evidence-based prevention and especially mentioning the UNODC/WHO International Standards on Drug Use Prevention.

According to the 2023 World Drug Report, an estimated 39.5 million people were suffering from drug use disorders in 2021, whereas only 1 in 5 people received treatment. The percentage of which for women, is even lower. In some countries, certain high-risk populations such as youth, minorities, and even women have no treatment options available and where treatment possibilities are available after care and follow up remains low. This highlights a crucial need to expand treatment services globally. Treatment is proven to be effective and cost-effective and results in a reduction of crime and violence. Treatment requires a continuum of care and must be viewed not as a one-time intervention but as an ongoing process that includes progressive goals and relapse prevention strategies. Access to evidence-based, gender sensitive and trauma informed treatment should be expanded. It is important to maintain diversity in treatment services to accommodate different user groups and different treatment goals.

Recovery and reintegration deserve additional attention in the Midterm Evaluation and identified Challenges. People can and do recover, the Life in Recovery Survey showcases that as many as over 60% of research participants achieve long-term stable recovery (Best 2015, 2019). To ensure recovery-oriented systems of care and increase the number of people who recover, member states should aim to promote recovery by strengthening recovery pathways, recovery-oriented systems of care and reducing obstacles and providing opportunities for meaningful activities and participation. Family, peer-support, and self-help groups play a

significant role in maintaining stable recovery. Research finds that people in recovery are an important resource in their communities.

To inform the work of the CND, WFAD underlines [The Global Position Paper on Recovery \(GPPR\)](#), a collaborative effort that brings together civil society, non-governmental organisations, institutions, researchers, and individuals engaged in grassroots, national, regional, and global initiatives committed to advancing the science, practice and policy of addiction recovery. The GPPR stipulates recommendations and next steps based on three pillars: Recovery as a strength-based concept; Overcoming barriers and obstacles to Recovery; and Generating Structural Change. [The GPPR](#) aimed to establish a consensus document on recovery, emphasizing both individual and societal dimensions and outlining three pillars and ten recommendations for future efforts in shaping policies and practices. These recommendations focus on the achievability of recovery, the necessity for diverse support and multiple pathways, and the importance of addressing stigma while enhancing recovery-oriented care systems, research, and training for professionals. This marks the initial step in forming a consensus and an RSPC, working collectively to operationalize and implement the core principles outlined above. To advance these principles, the next steps involve promoting and signing this consensus document, fostering a global environment that prioritizes and supports recovery, and ensuring integration, accessibility, gender sensitivity, trauma-informed, and cultural appropriateness. **WFAD recommends that Recovery and recovery-oriented systems of care as a goal is integrated into the 2024 Midterm Review and related challenges.**

WFAD reconfirms our commitment to the international drug control conventions, the UNGASS 2016 outcome document and the 2019 Ministerial Declaration and advocates for more humane policies that abide by these conventions and declarations.

Proportionality in sentencing and alternatives to incarceration should be prioritised by member states. Exploring alternatives to incarceration for individuals grappling with substance use disorders is imperative for fostering rehabilitation and addressing the root causes of their struggles. Incarceration often fails to address the underlying issues that contribute to substance abuse, perpetuating a cycle of relapse and reoffending. Offering alternative interventions, such as rehabilitation programs, counselling, and community support, can provide a more holistic approach to treating addiction. These alternatives prioritise rehabilitation emphasise the potential for individuals to overcome their substance use disorders, reintegrate into society, and lead fulfilling lives. By implementing evidence-based alternatives to incarceration we can better support individuals in their journey toward recovery and reduce the societal burden of substance-related offenses.

Additionally, in relation to Challenges 2 and 4, we emphasise the significance of endorsing alternative development support. Illicit drug cultivation greatly harm developing countries. A development approach aimed at improving people's quality of life is needed to mobilise local communities where illicit drugs are produced. Alternative development initiatives can provide alternatives to ensure sustainable livelihood to communities that cultivate illicit drugs. The most conflict-ridden countries need support from the international community. Governments in these countries should fund alternative development programmes in drug-producing areas. Good governance is also a critical part of alternative development; if corruption is not controlled, drug-related crime cannot be controlled.

Finally, WFAD underscores the importance of incorporating a clear gender approach in any drug-policies, including a strong emphasis on the situation for women who use drugs and women in recovery within the Midterm and related challenges. Women are mentioned in the 2019 Ministerial Declaration, but are lacking in the identified challenges: There are yet improvements to be made when it comes to gender sensitive measures within drug policy that includes evidence-based prevention, monitored and evaluated with data disaggregated by gender, evidence based, trauma informed and gender sensitive harm reduction and treatment services, and a greater inclusion of recovery and various recovery pathways and support venues with in general and that incorporates a gender lens in particular. To better ensure that all people's needs are met within drug policy, WFAD suggests the CND to incorporate and promote gender-inclusive language, place focus on training and capacity building for practitioners who directly implement relevant policies and gender specific services, ensure that data and indicators accompanying policy documents and services are disaggregated by gender; and work to ensure equal access to services.

To meet the goals and commitments made in the 2019 Ministerial Declaration, investment needs to be made into prevention, treatment- and related services as well as research on the effectiveness of these services. It is imperative that a comprehensive approach is adopted, adding to it further commitments regarding gender, women, children, and recovery, to meet previous and emerging challenges.