Thank you Mr. Ambassador, delegates and others present for this opportunity.

I am David Borden, executive director of DRCNet Foundation, also known as StoptheDrugWar.org. We coordinate a coalition, US-based but global in scope, which submitted a statement with nearly 350 organizational signatories for UNGASS. We argued for the supremacy of human rights; for policies rooted in health, development, human rights and security; and for the UN to begin a process of updating the drug conventions.

We believe that international cooperation would most effectively be implemented if based on those priorities, and on the Sustainable Development Goals in particular. We commend the inclusion of agencies such as WHO, UNAIDS, UNDP and others in the UNGASS process; and we support the Outcome Document's strong emphasis on the SDGs.

To achieve the SDGs, and good policy generally, it is necessary to acknowledge both sides of the drug control equation. Prohibition creates substantial social costs apart from drugs' inherent harms. In academic terms, the acknowledged concept is that criminalization increases average harm per unit of drug consumption – possibly reducing the number of users, but at the cost of intensifying certain harms.

I refer in particular to SDG goals 1, 3, 8, 10, and 16. Prohibition drives the spread of HIV and Hepatitis, by placing drugs in the underground and encouraging syringe sharing; and the high financial price of street drugs drives some addicted persons to desperate behaviors such as prostitution and property crime, standing in the way of the goal of good health and well-being. Arrest or conviction records for low-level drug crimes impedes efforts to find good employment, particularly in disadvantaged communities, affecting the goals of decent work and economic growth; reduced inequalities; and sustainable cities and communities. The illicit drug trade prohibition creates drives street crime; and funds insurgencies, corruption and other instabilities, hindering peace, justice and strong institutions, among other goals.

The UNGASS did not address most of these questions. But the contributions made by UN agencies to UNGASS show they do recognize the harms of drug control. Should the UN still not take this up, 2019 may stand in the way of 2030 rather than helping advance it.

As a final point, I note the alarming prospect of global AIDS funding decreasing, among other issues impacting harm reduction services for injection drug users. It is our hope that member states will sustain a strong level of AIDS funding. We support the "10 by 20" shift colleagues have proposed, to move 10% of global law enforcement budgets to fully fund harm reduction by 2020.

Thank you again, Mr. Chairman, for the floor today, and for your leadership in global drug policy.