

Vienna NGO Committee on Drugs

Member's contributions to UNGASS

The Vienna NGO Committee is a vital link between NGO's and the key intergovernmental and international agencies involved in drug policy, strategy and control: the Commission on Narcotic Drugs (CND), the International Narcotics Control Board and the United Nations Office on Drugs and Crime (UNODC).

Established in 1983, the Committee works with these organisations to provide information on NGO activities, draw attention to areas of concern, build partnerships between governmental and non-governmental organisations and to involve a wide sector of civil society in contributing to the development of global drug policies.

The VNGOC is composed of members representing international, national and local NGOs and represents a key mechanism for NGOs to substantively contribute to global drug policy.

In addition to the global civil society input provided through the Civil Society Task Force, the VNGOC has offered its member organisation the opportunity to provide submissions highlighting their individual views.

This document presents the Vienna NGO Committee's members contributions to the UNGASS 2016 website and preparatory process. The contributions below are an example of the VNGOC's broad and diverse membership. All contributions were issued as received.

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Proslavi Oporavak/ Celebrate Recovery

NGO for re-socialization of former addicts

We are NGO working on grass-roots, national, regional and global level in various activities, projects and advocacy initiatives connected to prevention, recovery and rehabilitation. In our work we promote prevention, treatment and full recovery from addiction, and we believe that addiction is a treatable disease that requires multi-disciplinary approach. We are providing various services: group meetings, possibilities of individual meetings with professionals, informing clients about their rights, recovery and social reintegration of individuals with substance use disorders, including, as appropriate, through assistance for effective reintegration into the labour market and other support services. We are providing psycho-social help and support to family members while their loved ones are in treatment, but also, after the completion of treatment, we try to continue with social reintegration process. Furthermore, our activities are focused on prevention and working with youth. We advocate for early development of healthy living habits and offering healthy values to young generation. This way, we want to highlight the importance of effective prevention programs, based on lifestyle changes, which has proven to be the best way to prevent addiction and development of bad habits. We are actively involved in drug policy work, and we have contributed to the creation of National drug policies and strategies which lead to more effective programs in the fight against drug abuse. President of the Celebrate Recovery is chair of RUN (Recover Users Network). RUN brings together NGOs and individuals working in the field of recovery and advocating for Recovery-oriented policies in International, European and national political forums, aiming to give a political voice to recovered drug users and their organizations. With regards to the consultations in category of **Affected Populations: Recovered Users** in the CSTF towards UNGASS2016, coordinated by Proslavi Oporavak, we would like to emphasize that recovered users call for policies with public health and youth and children's rights at its core.

Best practices in the thematic area

A best practice is the one in the **UK**. They have shifted their drug policy from reducing harm to full recovery from addiction. Their paradigm is that the ambition for more people to recover is legitimate, deliverable, and overdue. Previous drug strategies focused on reducing crime and drug related harm to public health, where the benefit to society accrued from people being retained in treatment programs as much as from completing them. The result of new approach is that more people have started their recovery and have found hope and help in becoming drug free. **San Patrignano Foundation from Italy** is the biggest rehabilitation center in the world. They think that people with drug problems are part of the solution, and not only part of the problem. San Patrignano has thousands of testimony of a changing that can be done, and recovery that can be sustained. Not only they say that they improve, they have become testimonials that Recovery works.

Main challenges in the thematic area

The main challenge is to provide services which will be focused on Recovery and facilitate establishment of abstinence, maintaining abstinence, finding a job; starting a new household; establishing new social networks, etc. Such services should be accessible, affordable or free -

especially traditional forms of treatment i.e. abstinence and 12-step based outpatient, inpatient, and residential programmes. Follow up programs after the completion of treatment are crucial for successful reintegration of recovered users. The challenge and opportunity ahead is to develop a coordinated, comprehensive health-focused approach that addresses the individual within the context of communities.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health

- We urge the need for investing more in prevention, treatment, recovery, rehabilitation and social re integration
- Countries need to provide services which will facilitate establishment of abstinence, maintaining abstinence, finding a job; starting a new household; establishing new social networks, etc and follow up programs after the completion of treatment
- It is recommended that the monitoring of effectiveness of drug treatment must include data on social reintegration.
- Recovery should be incorporated as an important facet and paradigm of drug policies
- There is a need to improve drug policies and acknowledge the importance of :
 1. focusing on abstinence and recovery rather than simply seeking to reduce harm
 2. having clear goals in services that are regularly monitored and assessed
 3. having a clear pathway into and out of services
 4. recognizing that treatment is not an end in itself, but a journey with a clear end.
 5. investing in support services for close friends and families of addicts, as well as holistic family therapy
 6. the message of recovery and examples of recovered users which can motivate others
- Recovered users urge the need for :
 1. acknowledging that abstinence is a goal for many drug users seeking help.
 2. strengthening the evidence base around recovery based treatment, including the role of family and close friends
 3. recognizing the potential of recovered users and assist them in their way back to the society; and acknowledge their potential to help their peers.
- Given the crucial role of recovery and social reintegration in limiting and overcoming drug-related problems in the long term, a better understanding of these interventions is needed.
- From the costs and benefits standpoint, the costs of drug-related problems outweigh social benefits of drug treatment and recovery programs. Investing in recovering/recovered addicts leads to a positive net gain in the long run, and countries and MS should consider these facts
- Multiple pathways to recovery are essential to support the rehabilitation and reintegration of people suffering from drug disorders and dependence. MS and UN agencies should develop effective drug policies, strategies that integrate prevention, treatment, recovery, enforcement and harm reduction to create policies and communities that are safe and healthy for all.

- Treatment should be evidence based and culturally appropriate. Such treatment should be accessible, affordable or free for those who seek it. Countries need to focus on reducing inequalities in regard to access to treatment particularly for women and youth.
- There is a need for anti-discrimination legislation and Governments and UN agencies should continue efforts to ensure that discrimination against people who use drugs and recovered users does not prevent the fulfillment of fundamental human rights. Reducing the stigmatization, stereotyping and discrimination of (recovered) drug users and increasing awareness of the needs of this population and can help them achieve recovery goals and facilitate successful reintegration into society.
- There is a need for strengthen the capacity of NGOs, greater civil society involvement and better cooperation among all stakeholders working in the field of drugs

WELLBEING FOUNDATION

Registered Trust No.1055/2009

Description of activities

Service providing for mental health survivors and older persons including human rights activities in defending and protecting the civil and property rights of women living with one or more or multiple mental health disabilities

What has worked well/best practices in the region/thematic area

Nothing has worked in our family case and similar other cases on crimes against mentally ill and suffering women and their properties including legal and non legal forums and till date no justice has been received and almost justice is denied to us.

Best practices in the region is not good as there is no integration between the departments or expertise is available to deal the cases properties of mentally suffering women linked with drug dealers and their hasty investments and followed by a continued violence in attempting for the other shares of one family property.

Main challenges in the region/thematic area

presenting the cases to various non legal forum and legal forum is a challenge as such cases are not dealt in the right sense rather the linkage of crimes and drugs is not viewed as a criminal intimidation rather the property related issues are treated as normal and simple civil issues and the courts also try to drag the cases for years and finally deny justice to the victims say the loser of the property due to the unlawful and corruptive acts and attitude of the perpetrators or the hasty investors on the properties of mentally suffering women and finally the justice is denied and they have to undergo sever harassments, atrocities and violence on them by the deliberate investors in collusion with the male partners of the family including the husband, brothers-in-laws, close relatives and others.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- There is a very high demand for de addiction and restoring the health of the drug users and abusers and availability of medical and care giving facilities are very much less and this is not in priority of governments and their policies.

- Educating the youth community and family members and campaigning against drug use and abuse
- Treatment facilities need to be easily available and accessible to the victims.
- Other types of health issues are complementary to the drug use and abuse including psychological and Psychiatry issues and proper public health education is necessary at this point.
- The licence dealers of drugs are misusing their licences and diverting the supply of drugs and psychiatry medicines without proper medical prescriptions and make the drugs easily available for the reach of the users
- The collusion of Doctors especially psychiatrists involving in property and sale arrangements of their clients especially on the properties of married women and acting in favour to the male counter parts of the victims and hasty investors including their friends and others and help them to sell the properties of these innocent women.
- The crimes against women and their properties are easily done at this point of long time medical supervision and at their aggravated illness and with hyper medicine and coercion they deal the property registration activities in a very closed and cunning way. Such acts and attitude of the doctors and all other persons involved in the property sale matter of the women victims never brought out to the lime light and when it is brought to the authorities and Police they deny to investigate the case and simply close the files even without informing the complainants. The registration department is to be made responsible before making any registration on the properties of women and clarify the legal issues if any over the registration of the properties. A legal cell has to be attached with the registration department and before making any registration of properties of women all legal formalities need to be cleared and if any objection is there then the registration has to be stopped.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Durg supply is not at all reduced rather increased and new channels are opened and reaching the new comers to the habit of drug users and the marketing people. Drug related crimes like attacks on women and sex related crimes, money laundering, hasty investments on the properties of mentally ill persons especially women, corruption, tax evasion, increased concentration in real estate investments with unlawful means and modes, property grabbing and
Easy movement of drugs through hubs and centres run in the name of religious centres, spiritual centres, holiday resorts and other names and the tourist centres are the most vulnerable places as the demand by the national and international tourists make the sellers to be active in supplying the drugs to their customers and make easily available which is done in a big way with a racket and scandals.

Un restricted licensing procedures for pharmacy dealers is a very big channel as they deal the narcotic drugs and by their unethical trade practices sell the products without any proper documents to their regular customers and the drug supply is assured down the line and reaches easily to the end users.

NRI investing in Indian properties especially in Holiday resorts and conducting unlawful business and involve in damaging the local and land culture, using the local youth and women for their easily movement of drugs and narcotic substances, creating a perennial money inflow to the local people with this unlawful acts and attitudes, human trafficking and other anti social and economic activities including hawalla and money laundering activities.

The local people are involved in collusion act with the main racketeers and most of the time the social protection is gained and they are escaping from the hands of law and justice.

Any other such silent and dormant crimes which are not brought to the lime light or considered as crimes by the authorities as they are also happy with the bribe money given to them by these anti social elements. Including rich and so called educated community also involved in such silent crimes and it is left un noticed or even if it is noticed the authorities deliberately neglect to take any legal action on them.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Sever human rights violations are seen due to the drugs and its active marketing and the youth, women and the children are the main targets and made as victims and the community at large is affected by this anti social and crime.
- The informants are at life danger and caused injury to them by the drug traffickers and dealers
- Women properties are grabbed by them and made to live in life danger and threats
- Properties are damaged by them for the reasons of any objections
- Poor integration between the registration authorities and the legal department and most of the women properties are either encumbered or sold with coercion, threats and dangers to the women by the male counter parts who are involved with the drug traffickers in one way or other

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- International law related to drug movement and trafficking should be made more stringent and all the member states need to follow the laws strictly and especially in India there is not follow-ups and if so then why this much crimes and violence in this country?

- More closer ties, contacts and true understanding is necessary between states and governments to strengthening the principle of common and shared responsibility and international cooperation and interstate and intra state governmental cooperation has to be tightened and mutually helped to control this anti social crimes.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- A balanced drug policy is necessary at the same time regional, inter regional and international cooperation on development issues and drug control policy is necessary where the above stated socio economic issues are to be addressed.
- Development policies towards the control of drug movement, medical treatment to the victims, rehabilitation and recovery possibilities, resettlement possibilities, strict and stringent legal action including attachment of properties earned by the drug traffickers by selling drugs and their investments in any form has to be discouraged and anti corruption
- The role of Police and other authorities in enforcement is important equally the social workers and Psychiatry professionals in rehabilitation of the abusers
- The socio economic impact on the victims are numerable and everyone is important to the society and hence spending on them is equally important than preventing the entry of drugs into the society.
- Cultural stability and retention of social values are important and this could be done by education and campaigns



Dalgarno Institute

***NO Brainer* and *Fence Builder* Student and Community AOD Education**

Programs

The Dalgarno Institute (C.O.A.D.E. Inc) AOD Education Suite not only covers all key demographics, including late Primary School, entire Secondary School, Family and community groups/agencies – it's unique pedagogy and two key educational domain inclusions (both Cognitive and Affective Domains) ensure motivators/predicates/drivers are addressed and empowered, along with sound and contemporaneous evidence based data/research.

Challenges

challenging cognitive dissonance in Drug Policy focus! In Australia, until very, very recently, when it comes to illicit drugs the focus of policy has been heavily on Harm Reduction Only themes with little to no focus on Demand Reduction. The Harm Minimisation Policy Framework which covers both licit and illicit drugs 'names' the three key pillars of Supply, Demand and Harm Reduction. However, the interpretation and implementation of this policy has been delivered through a strong and one dimensional Harm Reduction Only 'filter'. In fact the terms Harm Reduction (policy component only) and Harm Minimisation (policy framework) are now one and the same. Of course this 'interpretation' of the harm minimisation policy in the public arena, has meant the public believe (when it comes to illicit drugs at least) there is essentially no demand reduction strategy and supply reduction is 'pointless and resource depleting'. This in turn shapes public perception, about illicit drug use being 'inevitable' and 'unstoppable', and thus the cycle of self-fulfilling prophecy continues. Whilst the many learning institutions we have serviced, highly value our focus, process and learning outcomes, the 'gate keepers' to these agencies are often completely illinformed about 'best practice' for young around AOD use and have been 'educated' that Prevention and Demand Reduction 'are not part of the strategy' - which in fact is patently false. This has to change to ensure ***Demand Reduction*** has best chance for not only implementation, but success.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

The best evidence based research on substances and the developing brain (up to 28 years of age) clearly recommends ***no use***, or at least delayed uptake, for a host of development, behavioural, health and education/productivity reasons. Thus both policy type and interpretation must ensure that best chance is given to young people to delay uptake or avoid illicit drug use completely.



The *narrative* around drug policy that has emerged in Australia, (with the exception of tobacco!) is one of *'inevitability of use'* and thus - sentiment goes - all we can do, is to reinforce that subcultural mantra and then attempt to teach (directly or tacitly) young people *'how to use drugs – safer!!!'*

Of course, this would be reasonable if this manufactured mantra were consistently true. However as previously indicated, tobacco use in Australia has plummeted because the *Narrative* around this (legal and socially entrenched) substance use has **only** one outcome, and it is the same name as the campaign in play - **QUIT!** More than that, this narrative is uncompromising adhered to - without deviation - by legislators, educators, public health and even the market. One narrative - One emphasis and no caveats or subtexts! This messaging/education process along with sound and uncompromising supply reduction strategies has shifted culture away from tobacco use.

However, under this same Harm Minimisation Policy umbrella, the narrative on Alcohol is *'moderate – drink responsibly'* but when it comes to illicit drugs the narrative that is used to interpret the policy and thus nuance its implementation is... *'You can't possibly prevent uptake of illicit drugs, so please use safely, and by the way, here's how you do it!'*

These 'drivers' continue to sabotage good and effective **Demand Reduction** practice and a serious and relentless emphasis on such for the young must remain as the highest priority!

FORUM DROGHE

Forum Droghe is an Italian no profit association, working in the field of drug research and drug policies at national level. Since it was established in 1995, Forum Droghe has acquired a large amount of knowledge and expertise, particularly in the field of drug legislation and harm reduction policies. For years, Forum Droghe has been advocating a reform of Italian drug legislation from a pragmatic and evidence-based perspective and has promoted the Harm Reduction approach in drug policies and drug addiction services. To this purpose, during the years, it has sponsored or co-sponsored hundreds of conferences and seminars all over Italy, at national as well as at local levels.

In 2012, Forum Droghe has promoted a coalition of NGOs working in drug policies, justice and human rights advocating a shift towards a less punitive drug legislation, more respectful of drug users' human rights, so as to tackle prisons overcrowding, largely due to the high number of incarcerated drug offenders .

In addition to the advocacy mission, Forum droghe has also been promoting research in the following fields:

- the evaluation of the drug legislation on its impact on the prison and justice systems, by publishing the First (2009), Second (2011) ,Third (2012) Fourth (2013) Fifth (2014)and Sixth (2015) White Book on the 2006 drug law revision.
- the study of “controlled” patterns of drug use, cocaine and stimulants in particular, in natural settings
- the development of an innovative prevention approach in drug use within the Harm Reduction model (the so called « self regulation model of intervention »), carried out in 2013 through the European project “New Approaches in Drug Policy and Interventions” (with the financial support of the Drug Prevention and Information Programme of the European Union”)

From 1996 to 2009, Forum Droghe has published the magazine *Fuoriluogo*, distributed as a monthly supplement to the national daily paper *Il Manifesto*. Since 2009, FD has been publishing a weekly op-ed in the same daily paper *Il Manifesto*.

Fuoriluogo, which is now available on line (www.fuoriluogo.it), deals specifically with drug policies, justice and prison policies and other social issues at both national and international level.

Fuoriluogo.it provides reliable information and documentation on a wide variety of topics and issues (international trends in drug legislation, innovative drug policies and drug addiction interventions at European level, experiences of alternatives to incarceration, models and experiences of drug use decriminalization, cannabis in particular, medical cannabis etc.).

The association also publishes *Quaderni di Fuoriluogo*, a series of thematic papers.

What has worked well/best practices in the region/thematic area

Italy has been one of the first countries to experience decriminalization of possession for personal use, after the 1993 referendum abolished the criminal sanctions for personal possession provided by the 1990 drug law revision. In the nineties and first decade of 2000s, decriminalization of drug use contributed to the development of drug services, harm reduction facilities in particular, in addition to limiting the amount of people imprisoned for drug crimes. Evidence on the link between criminalization/decriminalization of personal drug use, harsher/lower penalties for drug crimes and increase/ reduction of prison overcrowding was again confirmed in 2014, when the Constitutional Court abolished the harsher penalties introduced by the 2006 drug law revision: after the milder drug legislation (as amended by the 1993 referendum) was reintroduced, the overcrowding in Italian prisons fell significantly.

Main challenges in the region/thematic area

Following the Constitutional Court ruling, a thorough revision of the drug legislation is needed, to provide a consistent framework for innovative drug policies, shifting emphasis (and resources) from criminal law enforcement to the health and social “pillars”. Among the most urgent norms to be approved and policies to be implemented: a further reduction of penalties for drug crimes, following the principle of proportionality; decriminalization of cannabis growing for personal use; abolition (or in depth reform) of administrative sanctions for personal drug use, to prevent stigmatization and social exclusion of drug users; a full implementation of all harm reduction interventions, safe consumption rooms included.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- We recommend to discuss the wording, first. “Drugs and Health” and “Demand Reduction” are not synonyms, as the latter indicates a definite goal within a specific approach to drug

policies. In other words, Demand Reduction focuses on the prevalence of drug use (reducing until eliminating the prevalence of drug use). Following an alternative approach, we may rather focus on patterns of drug use, than on drug use itself, recognizing there is a wide range of different risks in drug use. Therefore, there might be a shift towards the reduction of most intensive, “uncontrolled” patterns of drug use, as the main goal of drug policies.

- We recommend the Harm Reduction wording to be fully accepted in the international arena.
- We also recommend the achievements of harm reduction interventions to be fully assessed, in preventing HIV infection among drug users, as well as in protecting public health and reducing stigmatization.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- We recommend to discuss the wording, first. Drugs and crime and Supply Reduction are not synonyms, as the latter represents the goal of traditional drug policies (reducing until eliminating drug availability in order to achieve a “drug free society”). It is important to recognize that this approach has not registered any improvement in reducing drug availability while huge damage and plenty of unwanted consequences have been caused. In an alternative perspective, reducing the harm of illegal markets might be the main goal of criminal policies.
- We recommend to endorse the “Four Pillar Model” in drug policies (Law enforcement, Prevention, Treatment, Harm Reduction), as it represents the theoretical basis for a “balanced approach” to drug policies: shifting emphasis and resources from law enforcement to the welfare pillars.
- We recommend to develop alternatives to incarceration, to decriminalize drug use and possession (as well as growing) of small amount of drugs for personal use, to reduce penalties for drug crimes following the principle of proportionality (in many countries, penalties provided and applied for drug dealing are even higher than for homicide, in breach of the above principle).

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- We recommend UNODC and other relevant UN agencies to regularly assess the impact of drug control policies on human rights of drug users and of affected communities
- We recommend to promote the participation of drug users in the design and implementation of drug policies. Drug users and affected communities should also have a meaningful role in assessing the respect of their human rights

- We recommend a gender sensitive data collection and the development of psychosocial gender oriented research, giving attention to male as well as female drug users' points of view.
- We recommend the commitment to abolish the death penalty

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- We urge member states not to miss the opportunity of UNGASS 2016 to open a full and honest debate on the effectiveness of international policies led by UN conventions. Also alternatives to current policies should be fully explored and debated.
- We strongly recommend to take in serious consideration the advice from all UN agencies (UNAIDS, WHO and the Special Rapporteur on the Right to the highest attainable standard of physical and mental Health, in particular) as well as the Recommendations of the Civil Society Forum on Drugs (the dialogue entity between the European Commission and the European Civil Society)
- We urge European member states in particular to take advice from the CSF Recommendations (which result from a compromise among different positions of European NGOs).

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- We urge member states to immediately stop aerial fumigation and to end the international funding of programs which include aerial fumigation

GWI - Graduate Women International

Description of GWI's activities:

GWI's mission is to promote and advocate for the right to quality and lifelong education for girls and women at all levels, to advocate for the advancement of the status of girls and women, and to enable women and girls to apply their knowledge and skills in leadership and decision-making in all forms of public and private life, incl. The field of drug abuse, rehabilitation and fight against corruption.

What has worked well/best practices in the region/thematic area:

Focus on increasing gender equality in education through fellowship programmes. GWI's Teachers for Rural Futures projects in developing countries. GWI's partnership with CHARGE (Collaborative for Harnessing Ambition and Resources for Girls' Education).

Main challenges in the region/thematic area:

Gender equality in secondary and higher education, safety, quality learning and leadership. Say no to drugs! The Teachers for Rural Futures are mainly in the Sub-Saharan Region.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

Education and acquisition of knowledge/skills is the key precursor for sustainable lifestyles, human rights, gender equality and promotion of a culture that can ensure non-violence and a conscious dealing with drug related issues.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation:

GWI encourages in its worldwide county chapters reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws. Education is a key element.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities:

Enhance the use of enabling technology, in particular information and communication technology to promote the empowerment of women in all fields and educate them to provide leadership.

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation:

One of GWI's main targets on the international level is to adopt and strengthen policies and enforceable legislation for the promotion of gender equity and the empowerment of women at all levels.

5. Alternative development: regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues:

A main target in GWI's international program concerns ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life.



Centro de Información y Educación para la Prevención del Abuso de Drogas CEDRO - PERU

CEDRO es una ONG sin fines de lucro fundada en 1986. La institución desarrolla un intenso trabajo en favor del desarrollo comunitario y promoción de estilos de vida lícitos y saludables en el Perú, implementando actividades contra los eslabones de la cadena de las drogas (cultivo de coca, elaboración de drogas, narcotráfico, microcomercio y consumo).

Sus actividades principales pueden ser resumidas en los siguientes componentes:

- Educación y prevención del consumo de drogas así como servicios de consejería para familiares y usuarios de drogas.
- Promoción del desarrollo a través del empleo de TIC (tecnologías de información y comunicación) y programas de alfabetización digital.
- Aliento de emprendimientos sociales y económicos lícitos y educación financiera para la reducción de la pobreza y mejora de las condiciones de vida de las personas.
- Programas de capacitación, asistencia técnica y movilización comunal para la inclusión social y desarrollo de capacidades, a través de agentes multiplicadores, brindando información, capacitación y asesoramiento a diferentes grupos objetivo.
- Trabajo con la comunidad educativa mediante acciones de formación de docentes, generación de capacidades para alumnos y capacitación y asesoría para padres de familia.
- Servicios especiales de atención y acogida mediante casas hogar para niños en situación de calle y en alto riesgo.

CEDRO basa sus acciones en evidencias recogidas mediante investigaciones propias y estudios de entidades nacionales e internacionales. Realiza también investigaciones para la generación de conocimiento sobre el problema de las drogas (epidemiología del consumo, opinión sobre drogas y estudios sobre la cadena de las drogas) con poblaciones diversas (hogares, jóvenes, campesinos, líderes de opinión, productores y productoras, etc.) Recoge los últimos estudios de la OMS, NIDA y otros.

What has worked well/best practices in the region/thematic area

CEDRO considera que las mejores prácticas en materia de promoción del desarrollo y lucha contra las drogas incluyen:

1. Alentar que las poblaciones reconozcan los daños asociados al consumo de drogas y tengan información acerca de los factores de riesgo y protección, los efectos de las drogas, cómo detectar el consumo en sus entornos o qué se pueden hacer para evitarlo.
2. Generar interés por parte de las organizaciones comunales para participar en acciones de prevención en la medida que experimentan las desventajas derivadas del consumo (desintegración familiar, violencia, delincuencia, daños a la salud, entre otros.)

3. Incorporación para la acción conjunta de autoridades locales y los organismos del sector público y privado (incluyendo municipios, medios de comunicación, policía nacional, ministerio de salud, de educación y otros).
4. Propiciar la reducción de los factores de riesgo promueven el consumo en el ámbito familiar (abandono familiar, ausencia paterna, violencia familiar, falta de información sobre drogas, etc.) como en el ámbito comunitario (pobreza, carencia de lugares de recreación, existencia de lugares de venta de drogas, presencia de consumidores, etc.).
5. Desarrollar procesos de intervención con la participación de la comunidad, el estado y el sector privado, propiciando comportamientos y actitudes apropiadas sobre el problema de las drogas, contribuyendo así a la reducción del consumo de drogas y los daños asociados al mismo.
6. Favorecer programas que combinen el desarrollo personal con estrategias colectivas y de equipo, incluyendo acciones que refuercen el involucramiento poblacional en responsabilidades comunitarias.
7. Trabajar directamente con los poderes del estado (ejecutivo, legislativo y judicial) así como con los medios de comunicación, los partidos políticos, organismos no gubernamentales y otras instituciones de alcance regional y nacional.

Main challenges in the region/thematic area

1. La prevención debe ser un todo integrado, abordado desde una perspectiva que vea la totalidad del problema y aborde sus distintos eslabones. Las agendas políticas nacionales deben recoger esta visión de conjunto, propiciando acciones más decididas y amplias.
2. El enfoque preventivo debe enlazar lo educativo con las perspectivas de participación ciudadana, democracia y liderazgo político, buscando un enfoque integrado y sistemático.
3. Es necesario considerar las diversas esferas en que el problema de las drogas afecta a los países, incluyendo aspectos demográficos, sociales, económicos, políticos, culturales, sanitarios, medio-ambientales, etc.
4. Cada sociedad debe identificar sus necesidades preventivas y generar iniciativas para enfrentar los riesgos psicosociales que afectan su desarrollo, identificando fortalezas y recursos locales para vencer las barreras o deficiencias existentes.
5. Una estructura adecuada requiere la participación de todos los agentes y fuerzas sociales, pero muy especialmente la acción de municipios, organizaciones de base, entidades del estado, partidos políticos, organizaciones no gubernamentales y empresas privadas.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Implementar acciones integrales abordando aspectos educativos, sanitarios, de seguridad ciudadana, control policial y organización comunitaria, entre otros aspectos; con la participación de todas las fuerzas del sector público y privado, sociedad civil, etc.

- Visualizar el problema de las drogas como una cadena perversa que comienza con el cultivo, pasa por la elaboración de drogas, narcotráfico, microcomercialización y consumo de psicoactivos. Considerar el trabajo en cada uno de los eslabones y no solo en algunos.
- Desarrollar diagnósticos particulares en cada país abordando los factores de riesgo y protección particulares que promueven o desalientan el empleo de sustancias, favoreciendo intervenciones tempranas.
- Incluir la prevención en la agenda política de los países, comenzando por sensibilizar a las dirigencias políticas respecto a las dimensiones del problema de las drogas, para que así las sociedades sean capaces de enfrentar la presión social, política y económica del narcotráfico y la corrupción que se le asocia.
- Fomentar la acción de los medios de comunicación en los esfuerzos hacia una educación preventiva, cumpliendo el rol de alentar un cuestionamiento de la sociedad en la lucha contra las drogas e informando a la población y a los hacedores de políticas acerca de los problemas que merecen atención inmediata.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Generar mecanismos efectivos para frenar el traslado y comercialización de los precursores químicos empleados en la producción de drogas, ingresando en las zonas más álgidas con la adecuada protección policial.
- Reforzar las acciones de inteligencia que permitan identificar a los agentes abiertos o encubiertos involucrados en la cadena de las drogas y el crimen organizado, identificando nuevos mecanismos de lavado de dinero, traslado de drogas y otros crímenes relacionados.
- Establecer nuevos mecanismos de cooperación internacional para el intercambio de información acerca de los delitos relacionados con las drogas y otros. Estos deben aprovechar las ventajas de la informática, cruce de información y cooperación entre entes policiales y judiciales.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Desarrollar estrategias para afrontar situaciones que afectan directamente las condiciones de vida y de salud de poblaciones vulnerables, poniendo en riesgo su futuro. Este es el caso por ejemplo de los niños que trabajan en la cosecha de hojas de coca o en las pozas de maceración.
- Trabajar de manera conjunta con las fuerzas de la ley que trabajan en casos de trata de personas, subversión, tráfico de armas, lavado de dinero, etc., considerando que el intercambio de información permite acciones más efectivas e integrales.
- Generar programas para que las poblaciones mismas asuman el cuidado de su medio ambiente y lo defiendan de la presencia de la cadena de las drogas, que contamina el suelo y los ríos arrojando residuos químicos derivados de los procesos de elaboración de drogas o que depreda los bosques en busca de más tierra para cultivar.

- Propiciar el desarrollo de programas preventivos integrales con énfasis en las poblaciones de mayor vulnerabilidad, incorporando la dimensión de género, cultura y aspectos demográficos, educativos y culturales.

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Se requiere reforzar el cumplimiento de las normas establecidas en los convenios internacionales en materia de drogas, reconociendo que al ser ratificados pasan a convertirse en leyes nacionales, que deben ser consideradas a nivel interno para guiar las acciones contra la cadena de las drogas.
- Es necesario considerar que el éxito de los programas de lucha contra las drogas a nivel regional e internacional depende de la existencia de un compromiso a largo plazo, tanto financiero como político y técnico entre las instancias globales de lucha contra las drogas y los gobiernos respectivos.
- Debe reforzarse el rol de las ONGs, que deben articular esfuerzos con los programas y organismos internacionales, incrementando la confianza y calidad de las estrategias conjuntas, incorporando los avances recientes en investigación social, reforzando su rol como facilitadores del desarrollo.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Fomentar la presencia del estado y la integración de las comunidades afectadas por las fuerzas del narcotráfico, buscando su inserción en el escenario social, alentando que las poblaciones se inserten en nuevos cultivos que los distancien de actividades ilícitas.
- Establecer mecanismos para que los productores que están en el proceso de toma de decisiones o ya se han comprometido con el desarrollo alternativo encuentren mecanismos temporales para su subsistencia hasta que los productos alternativos les permitan suficiencia económica.
- Generar programas para que las comunidades que están abandonando la economía ilícita se incorporen en actividades rentables más allá de lo meramente agrícola, por ejemplo, dando valor agregado a sus producciones o complementándolas con otras actividades de crianza, turismo, etc.

Dianova International

The Dianova network is present in 11 countries across Europe and the Americas, developing innovative programs and projects in the fields of education, youth, addiction prevention and treatment, and in the area of social and community development.

The Dianova network operates 37 facilities dedicated to the residential treatment of addiction and develops more than 20 different programmes (social reintegration, prevention, special needs, etc.)

Some of our best practices include:

- Addiction treatment program for women who are pregnant or with dependent children (Dianova in Chile)
- Addiction treatment program for persons with dual-diagnosis (Dianova in Italy, Spain and Uruguay)
- Addiction prevention and treatment program for minors (Dianova in Italy and Spain)
- “React” awareness campaign which impacted over 46 million people

Some of the main challenges observed in the regions we operate in:

- There has been a change in the profile of users undergoing a treatment program. We observe an increase of **dual-diagnosis cases** (co-occurring mental illness and substance use problem) with specific treatment needs
- There are problems to **grant free access to addiction treatment**. Addiction should be considered as a public health problem.
- There is a need to **overcome ideologies** and subjective representations regarding the provision of addiction services.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health:

- We **support the implementation of additional, evidence-based approaches**. We should provide a wider array of programs to enable each patient to find the methodology best tailored to his/her needs, including residential treatment approaches.
- Dianova defends the **universal access to essential medicines and pain relief** for all patients. We demand the elimination of all obstacles (political or otherwise) that prevent some States with low and middle income to ensure adequate provisions of such substances. Access to essential medicine is a **fundamental human right**.
- We **support the access to medical cannabis for patients**. We believe that the current available scientific data demonstrates the validity of the therapeutic uses of cannabis. Patients concerned should have access to a product whose quality is monitored, distributed in pharmacies or specialized centres, and according to methods of administration approved by health authorities.
- Develop a **person-centred approach** for service design and delivery to ensure that the needs of all target groups (e.g. homeless people, users of new psychoactive substances, people with

mental health issues) are being adequately addressed. It would be especially relevant to develop more intervention services dedicated to addressing co-occurring disorders.

2. Drugs and Crime:

- The Dianova Network **supports the decriminalization of the use of all psychoactive substances**. We demand an end to current repressive policies which are not only inefficient but contribute to marginalize substance abusers and reduce their access to the services they need.
- We call for the **abolition of death penalty** in all circumstances. Death penalty undermines human dignity and imposing the death penalty for drug offenses is against norms of international law.
- We support the implementation of the principle of **proportionality of sentences** for drug offenses and we promote **alternatives to incarceration**. All countries should offer treatment and education services in the case of minor crimes that are drug-related or committed to meet basic economic needs.

3. Drugs and human rights, youth, women, children and communities

- **We must combat discrimination** against women with substance abuse-related problems and **promote opportunities for their treatment and social reintegration**.
- We advocate gender equality in the **access to treatment**, so as to facilitate access to recovery programmes for women and ensure the availability of treatment programmes that take into account gender differences, including women's specific needs.
- We must develop **education and training programmes** for women in vulnerable situations and help reduce the number of women involved in drug trafficking because they lack education or employment opportunities or are victims of abuse.
- **Research** programs on the issue of women should be further developed, including on the links between women and addiction or development in order to have an updated picture of the implications and to tackle the growing challenges.
- **Children should be protected from drug use; whether licit or illicit**: we encourage Member States to ensure that the specific needs of children are addressed in the implementation of substance abuse related services (prevention, risk and harm reduction, treatment and care).
- A new set of **human rights indicators** should be implemented to measure the outcomes of drug policies and other programmes.

4. New challenges, threats and realities

- The Dianova Network **recognizes the limits of an international regime grounded primarily on prohibition and repression** and supports a **reform** of the general framework of the conventions and institutions of the United Nations on the world drug problem towards a **public health approach**. We expect agencies of the United Nations to play a leading role in this change of mentality and we encourage UN member states to implement solutions that are adapted and complementary.

5. Alternative development; regional cooperation; socioeconomic issues

- Alternative development programmes should be framed within a broader **development approach** focusing on reduction of poverty and social integration, access to legal markets, environment protection, the development of basic infrastructure, and that of educational and employment opportunities.
 - A **meaningful participation of the communities** in the design and implementation of programmes and policies that affect them must be ensured, including indigenous groups.

ASSOCIATION PROYECTO HOMBRE

Description of activities:

Drug Prevention
Drug Treatment and Rehabilitation
Family programmes
Employment Reintegration Services
Awareness Campaigns

What has worked well/best practices in the region/thematic area

- Specific targeted drug treatments for adolescents, dual diagnose and homeless
- Re-entry, aftercare facilities
- Integrative bio-psycho-social approaches involving families within the treatment
- Employment Reintegration Services
- Evidence-based drug prevention programmes for adolescents at risk
- Integrating volunteering within staff teams
- Evening treatment for employed people

Main challenges in the region/thematic area

- To face the high unemployment rate in Spain
- To reduce the increasing percentage of social exclusion and poverty in Spain
- To promote initiatives against stigmatization of the drug dependent population
- To stress the national and local governments to support more efficient drug policies for drug prevention, treatment and rehabilitation focusing on women, adolescents, homeless and dual diagnose

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Availability, affordability of adjusted drug treatments for all the populations, including specific groups such as women, adolescents, dual diagnose, alcoholism, elderly or homeless.
- Involvement of the mass media in the demand reduction campaigns of a higher social impact
- Monitoring strategies for preventing the diversion of controlled substance for medical and scientific purposes
- Evidence-based consequences of cannabis misuse

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Coordination and cooperation between international, national and regional intelligence agencies

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Gender perspective interventions, including both, women and men
- Drug misuse pregnant women or mothers with children

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Long-term commitments by the governments funding and supporting evidence-based strategies of alternative development plans that need to integrate a wide range of parallel actions: from prevention to treatment, from universal population to specific targeted groups, awareness media campaigns.
- How to improve the coordination between the main stakeholders: NGO, civil society, public governments, private sectors, unions, mass media.

ASSOCIAZIONE COMUNITA' PAPA GIOVANNI XXIII (APG23)

The Associazione Comunità Papa Giovanni XXIII, founded in Rimini, Italy, by Father Oreste Benzi in 1968, is a Private International Association of the Faithful of Pontifical Right, with Juridical Personality, and in Special Consultative Status with ECOSOC since 2006. Its headquarters are in Italy.

The Association is present in 30 countries across five continents: Albania, Australia, Argentina, Bangladesh, Bolivia, Brazil, Cameroun, Chile, Colombia, Croatia, France, Georgia, Germany, India, Israel, Italy, Kenya, Haiti, the Netherlands, Portugal, Romania, Russia, San Marino, Spain, Sri Lanka, Switzerland, Tanzania, USA, Venezuela and Zambia.

The members, of the Association, of different ages and states of life, share their lives directly with the poor and the underprivileged. They are committed to removing the root causes of poverty and exclusion and to being the voice of the voiceless through nonviolent actions and means.

Since its inception, APG23 has focused its attention on prevention of drug use and rehabilitation of persons using drugs, basing its action on the promotion of all the fundamental dimensions of the human being, physical, psychological, social and spiritual.

The rehabilitation of drug users is carried out through counselling centres and therapeutic communities in which individuals follow a rehabilitation programme based on the specific methodology of the Association.

The Drug prevention program consists of campaigns and awareness raising activities on drug related problems that are organised and addressed to vulnerable groups.

The first therapeutic community was opened in Italy in 1980; there are now 32 therapeutic communities in different countries worldwide (Bolivia, Brazil, Chile, Croatia, Italy, Russia and in the Netherlands). More than two thousand drug users have completed so far the rehabilitation program. About 70% have never used drugs again, while 20% relapsed and re-entered a program, either with APG23 or elsewhere.

The rehabilitation programme is structured in the following three phases (operating 24 hours a day):

Phase 1 Admission Centre: drug users who are recommended to join our centre are welcomed in the admission centre.

Phase 2 Therapeutic Community: drug users enter the therapeutic community environment and carry out the rehabilitation programme.

Phase 3 Re-integration into society: Once rehabilitated, they move to the re-entry phase, where they learn skills to re-enter into the wider community.

The rehabilitation method of APG23 consists of various and different activities:

- **Rehabilitation and therapeutic activities,** based on personal and group sessions with the operator. Importance is given to a critical review of one's life, starting from the first memories of childhood, in order to acquire self-knowledge. All this is supported and discussed with an operator. Prayer occupies a place of fundamental importance.
- **Family rehabilitation.** In parallel with the rehabilitation of drug users, we carry out monthly meetings with their families, trying to help families to solve their own problems and be better able to welcome their son or daughter back into the family.
- **Occupational therapy activities.** These are important activities that help our young people to acquire a sense of responsibility, to mature and learn how to face difficulties.

- **Recreational, cultural and sport activities.** These many and various activities include: reading newspapers and books, watching selected TV programs, football and volleyball tournaments etc. Also, those who previously interrupted their studies are given the chance to continue studying. Great importance is given to developing and stimulating creativity and the abilities of each person.

The experience gained in these thirty years of sharing with and in the needs of young people in rehabilitation programmes has led APG23 from time to time to open different units. In addition to the more traditional Therapeutic Communities, we have opened day centres, emergency reception centres, centres for mothers and children, for alcoholics and for teenagers with problems of addiction.

The Drug Dependency Service of the community also engages in preventive action by addressing schools. We work with the SerT (the Italian national health service drug dependency service) when making plans for prevention, treatment and rehabilitation for the young people following a therapeutic programme and with the Surveillance Court for young people we have welcomed in and who are subject to legal proceedings. We take part in the working group for experts on drug dependency set up by the Italian Ministries of Social Solidarity and of Health.

What has worked well/best practices in the region/thematic area

The members of the Associazione Comunità Papa Giovanni XXIII share their life directly with young drug-users in therapeutic communities. This has led us to affirm that the abuse of psychoactive substances is, first of all, a symptom of the distress and disorientation that hits society, especially amongst adolescents. The society in which we are living is based on “profit”, not “gratuitousness”, and the human being is considered as an instrument to be used. Our society forces our teenagers to look for ever-new emotions and consume them in the same way as products; Individualism and self-advantage are imperative. Economic profit appears to be the only aim of life.

APG23 has experienced through the years that the problem of drug abuse can disappear if young people are given the opportunity to experience and realise positive and non-utopian ideals. Therefore, it has always favoured the formation of groups of young people where such ideals can be concretely carried out. We need to create new vital worlds, at a human level, where the concrete experience of interpersonal relationships based on gratuitousness is made possible. We also need to promote such experiences at a wider level.

The therapeutic community is (and it cannot be otherwise) an experience of life which we propose and that no technician could ever produce or transmit.

Experience tells us that the therapeutic community lives, works and obtains results only if the group of operators is united and lives in harmony.

The main concern is therefore the inner formation of the operators:

- Education in self-criticism and the ability to correct each other;
- The ability to listen truly to the other person;
- Education in sharing responsibility (with a clear distinction being made between each person's responsibility);
- Giving constant attention to the spiritual aspect, both personal and of the group, being aware of the fact that inner work always starts from the true welcoming of the person, especially those who are poor, refused and without means.

The operator shall transmit a ‘way of being’, rather than things to do or rules to be respected (**what is inside us shouts louder than what we say...**). The recovering person perceives clearly if the operators are only workers

or officers or if they truly love and care for him/her. What the operators say assumes a meaning only if it is supported and proved by their life.

Main challenges in the region/thematic area and action-orientated recommendations for the UNGASS roundtables:

In our opinion, the main challenges posed by the issue of drug use are, among others, the following:

1. Analysing and removing the root causes of the drug use phenomenon. This has to do with the current development model, the crisis of the family, unemployment of youth, lack of values in society etc.
2. Harm reduction and legalisation or not of drugs are still a very controversial issue! (APG23, together with many other therapeutic communities in Italy including the Community of San Patrignano, does not support the legalisation of drugs). All interventions, from prevention to rehabilitation, should clearly aim to free people from drugs and not to maintain their pathological dependence. The concept of harm reduction and the criteria for financing such programmes should be revised in this direction: considering that the use of drugs is harmful, to reduce the harm means to shorten the period of drug consumption and offer valid alternatives, for example, a rehabilitation program in a therapeutic community.
3. Global drug policies that are currently focused on harsh and punitive measures should be changed and adopt responses based on human rights, public health and development principles.
4. How to reduce demand and supply of drugs is a great challenge.
5. It is paramount to counter drug trafficking. Interconnectedness between narcotics traffic, organized crime and terrorism should be analysed and adequately tackled.
6. There is need to address drug use as a public health issue and not as a criminal justice issue. This could be done by balancing public health and security needs.
7. Alternatives to imprisonment for drug-related offences of a non-violent nature should be promoted and supported. Imprisonment in such cases is ineffective, lead to prison overcrowding and exacerbates the transmission of HIV and other diseases. Alternatives to imprisonment increase recovery and reduce recidivism. APG23 has gained a lot of experience on this matter through the implementation of CEC (Comunità Educative Carcerarie), experiences inspired by the methodology of APAC (Association for the Protection and Assistance of Prisoners) born in Brazil in the '70. APG23 runs six Prisoners' Educational Communities in Italy.
8. Participation of civil society is essential to ensure a better protection of human rights in drug policies and it is especially important for those who are directly affected by such policies to be involved.
9. Prevention should be addressed as a fundamental issue.
10. There is need to increase international cooperation and recognise shared responsibilities.



Sunny Trust International, Addiction Treatment & Rehabilitation Centre, Islamabad, Pakistan

Description of activities

In-patient drug addiction treatment and rehabilitation services at the Sunny Trust 50-bed residential facility; Out-patient drug abuse related treatment, counselling and support; Drug prevention activities in local communities, students, youth and public at large; Outreach services among high risk and vulnerable drug consuming groups; Training and capacity building of addiction professionals, nursing and support staff; Local, national, regional and international networking, cooperation and coordination against drugs.

What has worked well/best practices in the region/thematic area

Intensive, evidence-based psycho-social interventions, self-help and motivational system of residential treatment & rehabilitation over a minimum four months period.

Main challenges in the region/thematic area

Massive flow of hashish, opium and heroin originating from Afghanistan besides other substances; Shortage of drug abuse treatment & rehabilitation services; Insufficient attention to female drug use.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- More extensive and vigorous prevention efforts covering all segments of the society
- Expansion and improvement in the quality of treatment & rehabilitation services
- Effective regulation on availability and access to controlled drugs

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Effective checks of cultivation of poppy, cannabis and other substances through incentives as well as enforcement
- Strengthening of enforcement against drug trafficking
- Enhanced international cooperation against money-laundering
- Harmonization of different national laws and criminal justice systems against drugs



3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Drug abuse considered health condition needing treatment instead of crime
- Drug addiction treatment & rehabilitation be deemed basic human right
- Women, children and families suffer in particular due to male drug abuse

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Need to bridge the gap between relevant international law and drug control conventions and inadequacies at the national levels in living up to the law and conventions

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Development process of narco-dependant economies need to be redesigned and redirected through effective cooperation at all levels

FUNDACIÓN ATENEA GRUPO GID

Fundación Atenea, Organization in Special Consultative Status with the Economic and Social Council since 2011, is a non-profit, general-purpose organization, at a national level and with international aspirations. Its mission is to ensure the rights of people who are socially excluded or at serious risk of social exclusion, to improve their quality of life, and combat the factors that lead to exclusion, by way of social intervention, awareness, social research, and training.

Atenea is a leading reference in intervention but especially in social research. Within the field of social intervention, Fundación Atenea has carried out prevention, assistance, and social and employment integration programs with people affected by one or more exclusion factors. It stands out in the field of the harm reduction, more specifically in prisons where it has wide presence.

Well / Best practices in the region/thematic area.

- Variety of programs and resources (prevention - universal, selective and targeted - , risk and harm reduction, recovery, social and employment integration) developed with public and private funding.
- An involved Civil Society with the support of a wide network of NGO working on drugs and social exclusion trying to involve affected people in the design of the intervention programs.
- Increase of research, evaluation and systems of monitoring indicators.

Main challenges in the region/thematic area

- Tend to more social approaches (person – centred) in the design of the drug policies and in the implementation of a bio-psycho-social model of intervention.
- Consolidate and improve the programs and NGO funding system.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Stronger link between human rights and health in policies and programs.
- Improved access to health interventions for those who need them (prevention, risk and harm reduction, treatment, recovery and rehabilitation services)

- More public funding for intervention, social research, evaluation and monitoring programs and facilitate access to private funding.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Decriminalisation of drug use and possession for personal use.
- Proportionality of sentences for drug offences. Abolition of the death penalty where it still exists.
- Use of alternatives measures to incarceration for drug offences, and use of restorative justice approaches.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Drug laws and policies designed under the international human rights law.
- Gender mainstreaming in drug policies.
- Participation of affected populations and respect for international conventions on rights

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- A person –centred (and communities) approach, and involvement of affected populations, in the design and implementation of policies and intervention programs.
- Monitoring and evaluation system of the UN drug conventions in order to verify their effectiveness.
- Reallocate funding towards drug prevention, risk and harm reduction, treatment, recovery and rehabilitation programs, services and research and studies.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Design alternative development programs considering the *Sustainable Development Goals*, ensuring the participation of affected communities and promoting local/regional debate considering their local/regional needs.

International Drug Policy Consortium

The International Drug Policy Consortium (IDPC) is a global network of non-government organisations that focus on issues related to drug production, trafficking and use. The Consortium aims to promote objective and open debate on the effectiveness, direction and content of drug policies at national and international level, and supports evidence-based policies that are effective in reducing drug-related harm. It produces briefing papers, disseminates the reports of its member organisations, and offers expert advice to policy makers and officials around the world.

What has worked well/best practices

IDPC presents many examples of best practice drug policy measures for reducing drug-related harm, and achieving improved outcomes for public health, security, development, social inclusion and human rights, in the 3rd edition of the IDPC Drug Policy Guide, available at this [link](#). The IDPC Drug Policy Guide presents cases of best practice including decriminalising drug use and possession for personal use, ensuring access to controlled substances for medical and scientific purposes, ensuring proportionate sentencing for drug offences, implementing alternatives to incarceration, implementing harm reduction measures and drug dependence treatment, and promoting sustainable livelihoods.

Main challenges

The main challenge is to ensure that member states commit to drug policies aimed at achieving the following priority objectives¹ that are essential towards ensuring the health and welfare of humankind (the ultimate goal of the international drug conventions).

A. Public health, harm reduction and well-being: reduced drug-related deaths including overdose fatalities, increased coverage and quality of harm reduction and evidence-based drug treatment services, reduced incidence of HIV, hepatitis and tuberculosis.

B. Access to controlled medicines: the increased availability of controlled medicines for medical and scientific purposes – especially for pain and palliative care in low and middle income countries.

C. Human security: improved citizen security and a reduction in violence, corruption and crime that results both from the illicit drug market and from counter-productive policy responses.

D. Development: move towards ‘development sensitive’ policies with improved social and economic indicators in areas of drug production, increased provision of equitable and environmentally sustainable development programmes, and advances in achieving the Sustainable Development Goals that will be launched in 2015.

¹ The Consortium compiled a set of ‘asks’ directed at member states in terms of the UNGASS outcomes which can be accessed here : <http://idpc.net/publications/2014/10/the-road-to-ungass-2016-process-and-policy-asks-from-idpc>

E. Human rights: ending human rights violations and abuses against affected populations, the establishment of robust and effective human rights monitoring mechanisms to ensure compliance by governments and law enforcement agencies, and comprehensive access to health, social and legal protections with adequate access to justice and legal aid for victims of human rights abuses.

Action-orientated recommendations for the UNGASS roundtables:

IDPC recommendations are briefly outlined below and discussed in detail in a publication at this [link](#).

1. Drugs and Health

- A. Remove criminal sanctions and punitive measures for drug use and possession for personal use
- B. Implement measures to improve access to controlled medicines
- C. Ensure adequate availability of harm reduction and evidence-based drug dependence treatment

2. Drugs and Crime

- A. Move away from a focus on punishment, including by ensuring proportionality of sentencing for drug offences, in particular taking into account mitigating factors such as offender’s motivation and role within the criminal network, and alternatives to arrest, prosecution and incarceration.
- B. Reorient law enforcement and supply reduction efforts to ensure they target the most serious harms of drug markets, including by setting up a technical working group to review the headline objectives of the international drug control system.
- C. End the use of the death penalty for drug offences
- D. Coordinate actions against organised crime, money laundering and corruption, including by ensuring that such actions address broader underlying issues, eg. poverty and marginalisation

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- A. Promote human rights, including implementation of drug control policy consistent with the core UN mandates of peace, security, human rights and development
- B. Reduce the incarceration of women for non-violent drug offenses, and the stigma and discrimination faced by women involved in drug use and drug markets including by ensuring the provision of gender-sensitive treatment, harm reduction, health, legal and social services.

C. Call on UNODC to implement its own human rights guidance and report back annually to the CND on compliance.

4. Cross-cutting issues: new challenges, threats and realities

A. Review the scheduling system to ensure that scheduling decisions do not undermine public health objectives and the need to secure greater access to controlled medicines, in line with scientific evidence and the advice of the WHO's Expert Committee on Drug Dependence.

B. Address new challenges and explore tensions with the UN conventions by creating an expert advisory group to recommend responses in accordance with best practice scientific evidence

6. Development

A. Ensure that drug control policies are aligned with the 2030 Agenda for Sustainable Development, and that drug policies do not undermine, but instead contribute to the achievement of the Sustainable Development Goals (SDGs).

B. Promote drug policies that are 'development sensitive'. Move away from policies and programmes that negatively impact on development outcomes and prioritise initiatives that contribute to improved sustainable economic development, secure livelihoods, food security, strengthening of local institutions, improving infrastructure, access to markets, gender equality and the meaningful consultation and participation of local communities, as part of national development policies and action plans

C. Ensure that alternative development programmes are properly sequenced: development must come first, and the eradication of illicit crops is counter-productive unless alternative livelihoods are already firmly in place

D. Commit to decriminalising the small-scale, subsistence cultivation of plants that are destined for the illicit drug market and ensure that subsistence farmers are not subject to punishment

Canadian Centre on Substance Abuse

The Canadian Centre on Substance Abuse (CCSA) is Canada's only national agency charged with reducing the harms of problematic substance use. CCSA provides national leadership and expert advice, advances knowledge, and prepares information and resources based on the latest evidence in order to inform policy, practice and programs that bring forward solutions.

This summary highlights key messages identified through consultations with partners across Canada,² as well as through CCSA's internal expertise and experience.

Successes, best and promising practices for addressing the drug problem include:

- The use of evidence-informed harm reduction initiatives such as needle exchange programs, opiate substitution treatment and supervised injection sites to reduce public health impacts;
- Collaboration and knowledge mobilization across organizations, sectors and levels of government to break down silos and promote comprehensive approaches; and
- Increased recognition of the need for evidence-informed approaches and increased availability of knowledge resources to meet that need.

Challenges in addressing the drug problem include:

- Ensuring equity in access to a comprehensive continuum of evidence-informed substance use services and supports spanning, for example, prevention and health promotion, early intervention, harm reduction, treatment and recovery support, regardless of location (e.g., rural, remote and urban) or individual characteristics (e.g., gender, age, culture, etc.);
- Securing the resources required to develop this continuum;
- Addressing the complex needs of under-served groups such as those who are homeless, those with concurrent mental health disorders and those involved with the criminal justice system;
- Breaking down silos to achieve system-wide collaboration;
- Addressing the stigma and discrimination associated with drug use; and
- Reducing the misuse, illicit production and diversion of pharmaceuticals, including fentanyl and other synthetic opioids.

Action-oriented recommendations for the UNGASS roundtables:

Note that action on the following recommendations can be supported through collaborative, inclusive and evidence-informed knowledge mobilization, including the development of policy and practice standards and implementation tools, as well as the development, monitoring, and reporting of metrics and indicators that measure both intended and unintended impacts, and inform course corrections.

² Additional information on these consultations, including summary reports, are available on request.

1. Drugs and health:

- Promote a public health approach that includes consideration of health equity, mental health, social justice and the social determinants of health, including determinants unique to Indigenous peoples;
- Recognize the need to ensure equity of access to a comprehensive continuum of evidence-informed substance use services and supports that spans prevention and health promotion, early identification and intervention, harm reduction, treatment and recovery support;
- Commit adequate resources to ensure universal access to controlled substances for medical and scientific purposes, specifically for evidence-informed approaches to the relief of pain and suffering; and
- Reinforce the role of the World Health Organization with respect to the international scheduling of controlled substances.

2. Drugs and crime:

- Promote proportional and evidence-informed criminal justice responses that respect human rights, that emphasize the use of alternatives to prosecution and incarceration to promote rehabilitation and reintegration, and that do not include the death penalty;
- Promote collaboration between public health and public safety; and
- Focus enforcement resources on strategic approaches targeting violent and organized crime.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities:

- Ensure that approaches to the drug problem recognize and support human rights guaranteed by international conventions and treaties, including the Rights of Indigenous Peoples;
- Ensure that approaches to the drug problem recognize and support the Sustainable Development Goals (SDGs); and
- Ensure that approaches to prevention and treatment are targeted to the needs of youth, women, children and marginalized or stigmatized populations.

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug-control conventions; strengthening the principle of common and shared responsibility, and international cooperation:

- Support policy development at both national and international levels in areas where current treaties and policies act as barriers to innovative and evidence-informed approaches; and
- Promote alignment and collaboration across international agencies (e.g., Geneva-based organizations such as UNAIDS and UNICEF), as well as with other UN conventions (e.g., the UN Convention on the Rights of the Child) and initiatives (e.g., the SDGs).



Canadian Centre
on Substance Abuse
Centre canadien de lutte
contre les toxicomanies

Partnership. Knowledge. Change.
Collaboration. Connaissance. Changement.



Vienna NGO
Committee
On Drugs

5. Alternative development: regional, interregional and international cooperation on development-oriented, balanced drug-control policy; addressing socioeconomic issues:

- Develop and monitor indicators that measure the intended and unintended impacts of alternative development strategies; and
- Promote the development of comprehensive approaches through collaboration across agencies, sectors and levels of government, including the recognition of lived experience (e.g., farmers).

Students for Sensible Drug Policy

Students for Sensible Drug Policy is a global grassroots organization comprised of young people who are concerned about the negative effects the War on Drugs is having on their communities. SSDP neither condones nor condemns drug use; rather we encourage honest conversations about the realities of the drug war and drug use among young people. We encourage our members to get involved in the political process at campus, local, national, and international levels in order to advocate for drug policies that are based in human rights, scientific evidence, and public health. In addition to promoting civic engagement, we also help develop students into leaders through skills-building workshops, one

on one consultations with our outreach staff, and our career services program.

At the international level, SSDP is an ECOSOC accredited NGO and has been present at the last three sessions of the Commission on Narcotic Drugs. Our primary goal is to amplify the youth voice at this level and ensure that young people are involved in the conversation surrounding their own futures. While one of the main goals of drug policy has always been to protect the world's youth, the voices of young people have often been absent from the debate. Each year we have hosted a side event that reviews the various ways in which the international drug control regime harms youth specifically and offers policy recommendations that would make drug policies more effective at reducing the harms associated with drug use rather than focusing on punishment. We have also recently conducted our own [Global Youth Consultation](#) which draws from the extensive, on-the-ground experience of our hundreds of chapters and thousands of members as well as an online survey that received responses from all over the globe.

SSDP strongly believes that youth need to be at the center of the conversation surrounding drug policy and drug education. Despite extensive efforts to reduce the consumption and supply of illicit substances, drug use and drug control policies continue to be major causes for concern, impacting the health and wellbeing of young people globally. Governments typically justify these drug policies by invoking the need to protect young people, but it's clear to us that these policies are doing the exact opposite. If policies are being implemented and invoked in our name, our voices deserve to be recognized.

Action-orientated recommendations for the UNGASS roundtables :

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- **Acknowledge and invest in harm reduction services such as drug checking kits, supervised injection facilities, educational material about minimizing risks associated with using drugs, and nightlife harm reduction;** strongly encourage states to provide these services and to decriminalize the provision of these life-saving services. Many organizations wish to provide these basic services, but are discouraged or disallowed from doing so because of the fear of criminal prosecution. A change is urgently needed, as harm reduction is well-documented as

an evidence-based intervention that saves lives. For every \$1 USD invested in harm reduction, \$27 is saved on medical treatment, making this approach more reasonable from an economic standpoint.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering moneylaundering and promoting judicial cooperation

- **Call for the decriminalization of drug use and associated penalties for the possession of drugs.** Evidence shows that the harms of criminalizing people who use drugs far outweigh the effect of punitive legislation. This is particularly important for young people, students, homeless youth, and members of marginalized communities who suffer debilitating mental stress from incarceration and whose future employment and educational prospects are often severely jeopardized by criminal records. Furthermore, implementation of drug policy has disproportionately affected racial minorities. We see decriminalization as a first step to reversing these harmful effects of the War on Drugs.

3. Crosscutting issues: drugs and human rights, youth, women, children and communities

- **Conduct an evaluation of international drug policies with regard to children and young people, seeking compliance with the stipulations of the UN Convention on the Rights of the Child, The World Health Organization, and other United Nations agencies and relevant treaties.** The UN Convention on the Rights of the Child provides the most appropriate framework from which considerations of impacts on young people should be drawn. Development of drug control strategies, outcomes, and evaluations must not seek to merely reduce drug use, but rather consider the breadth of impacts of youth drug use, involvement in drug trade, and exposure to supply and demand reduction efforts.
- **Call for evidence-based, age-appropriate education that aims to provide objective information on drug use that prioritizes the reduction of harm rather than relying on fear and intimidation.** Preventative measures often based on 'just say no' rhetoric have done little to empower and educate youth to increase health and reduce drug harms, despite generously funded campaigns from Member States. Abstinence only education is not a sufficient response to youth drug use, as it is important to recognize some youth will nonetheless choose to use drugs. Rather than solely providing information which discourages drug use, it would be far more effective to provide access to factual information that empowers young people, creates a culture of safety and responsibility, and recognizes the unique cultural and social climates experienced by young people.

4. Crosscutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- **Allow and invest in research related to medical benefits of psychoactive substances such as cannabis, psilocybin, ayahuasca, ibogaine, and MDMA.** The international drug control regime has, as part of its mandate, the requirement of enabling access to controlled substances for medical and scientific uses. In practice, however, medical and scientific research of these substances has been severely limited due to regulatory and financial obstacles. These impediments have significantly slowed down research which would potentially uncover the beneficial uses of various controlled substances. Recent research has shown various substances scheduled as illicit could help with mental health issues such as depression or PTSD, and the rapid proliferation of medical cannabis underscores the need for a drug policy approach which prioritizes medical and scientific research and is grounded in evidence.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- **Further encourage the UN to work to ensure active and meaningful participation of youth and youth-related organizations in the development, implementation and evaluation of drug policies and programs, in line with the UNGASS theme "A Better Tomorrow for the World's Youth."** We welcome the UN's initiative in appointing an "Affected Populations: Youth" representative as a member of the Civil Society Task Force. However, we are disappointed in the overall lack of opportunities presented for youth to engage in these discussions at the international level. Young people are too commonly excluded from discussions regarding their own future, and we believe there is room to further open the debate and include the youth voice. We invite all member states to include a youth member on any delegation to future sessions, meetings, and events regarding drug policy and request that side events focusing on youth are prioritized.

San Patrignano Foundation

San Patrignano is the largest residential drug rehabilitation community in Europe, providing drug free treatment to young people completely free of charge, earning its income from the wide variety of high quality enterprises it has set up which provide those being rehabilitated with job training, and a sense of meaning and dignity

What has worked well/best practices in the region/thematic area

Since 1978, San Patrignano has provided over 25,000 people with a home, medical, and legal assistance, as well as the possibility of continuing their studies, attending job training, and being reintegrated into society. At San Patrignano, addiction is not considered a chronic and incurable disease to be treated pharmaceutically for an undetermined amount of time. Instead, each person who arrives asking for help is seen as a unique, special individual – full of potential that he needs to rediscover and learn to express.

Main challenges in the region/thematic area

Main challenge in the addiction treatment is to be able to offer long term residential drug free recovery oriented treatment. Our community could count on a degree of self-sustainability up to 50% of its annual budget. For many other therapeutic communities who are not self- sustainable as San Patrignano but have to rely on national funds to operate, it is indeed challenging if the Member States are not supporting a long term commitment in providing adequate funding to the communities and treatment centers to allow recovery and social reintegration programme to be successful.

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Supporting drug addicts who want to quit using drug and offering them option for long-term drug-free residential treatment in public or private institutions, free of charge or at affordable price
- Supporting recovery as main paradigm in dealing with addiction at the national and international level
- Fostering evidence based-prevention programs, especially primary prevention to avoid addiction and harmful behaviours in youth
- Increasing public awareness on addiction and do not promote drug consumption and recreational use of drugs as personal choice without consequences on the society as a whole.

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Support social reintegration programs of former addicts into the society reducing the recidivism in crime
- Support alternative measure to incarceration for drug addicts, and for minor drug related crime.
- Abolish the death penalty for drug related crime.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Secure drug prevention as human right especially in view of the Art 33 of the Convention of the rights of the child
- Promote gender sensitive approaches to drug prevention, treatment and social reintegration program.

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Supporting early detection and intervention on NPS, considering innovative approaches in fighting usage and diffusion on licit and illicit drugs.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Alternative development should support the communities tackling the real causes that lead to the drug production and trafficking and marketing, such as lack of opportunities, lower level of education and poverty.
- International cooperation is crucial to secure the long term impact of the AD projects as well as embedded self-sustainable mechanisms linking the production to the local and international markets, securing long-term success and economic return for the communities.



International Federation of Social Workers

The *International Federation of Social Workers (IFSW)* is a global organisation striving for social justice, human rights and social development through the promotion of social work, best practice models and the facilitation of international cooperation, providing a global voice for the profession. IFSW has been granted Special Consultative Status by the Economic and Social Council (ECOSOC) of the United Nations and the United Nations Children's Fund (UNICEF). In addition, IFSW is working with the World Health Organization (WHO), the Office of the United Nations High Commissioner for Refugees (UNHCR), the Office of the United Nations High Commissioner for Human Rights (OHCHR).

What has worked well/best practices in the region/thematic area

Harm reduction, substitution therapy with long acting morphines

Main challenges in the region/thematic area

Lack of affordable HCV medication for clients (Gileads new effective products with low side effects are too expensive for many countries).

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Availability of substitution therapy with long acting morphines (oral and injectable) as well as further support of cannabis farming for medicinal and leisure use on affordable basis under strict quality and price control.
- Affordable effective treatment of HCV

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Regulation for Cannabis production, selling & buying with strict access rules and quality control (Uruguayan model).



3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Prevention on scientific, evidence oriented basis, more social and educational support for economically weak families

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Relaunch of the Single convention on scientific, evidence oriented basis (f.e. according to the rational scale to assess the harm of drugs of potential misuse (Nutt, King et al 2007)

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Cannabis cultivation as a model for rural development

ÖVDF- Austrian Association of Professionals working in the Field of Drugs

ÖVDF represents the interests of individuals and institutions working in all fields of professional drugwork (prevention, early intervention, harm reduction, rehabilitation, treatment and reintegration) as well as their clients. It has delegates in all nine federal countries of Austria and appointees for special areas (medicine, work, law, families, psychotherapy) and is a member of ERIT (Federation of European Professionals Working in the Field of Drug Abuse) and other professional European networks like FESAT and CORRELATION.

Activities of ÖVDF include public awareness raising, advocacy outreach, trainings, the establishment of professional networks, expertise for and participation in commissions on governmental and municipal level. Further the development of quality assessment criteria and ethical standards as well as the support of research and expertise exchange on national and international level. One of its aims is to influence public opinion via trustworthy media towards a more reasonable and less fear stricken understanding of the drug problem as a health and social issue. ÖVDF claims social acceptance and participation instead of disintegrative tendencies and considers repressive measures as counterproductive. It advocates an easy access to treatment, counselling and other kinds of social survival services including a controlled delivery and/or regulation of psychoactive substances.

What has worked well/best practices in the region/thematic area

- Harm reduction, substitution therapy with long acting morphines

Main challenges in the region/thematic area

- Lack of affordable HCV medication for clients (Gileads new effective products with low side effects are too expensive for many countries).

Action-orientated recommendations for the UNGASS roundtables:

1. Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion

- Availability of substitution therapy with long acting morphines (oral and injectable) as well as further support of cannabis farming for medicinal and leisure use on affordable basis under strict quality and price control.
- Affordable effective treatment of HCV

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Regulation for Cannabis production, selling & buying with strict access rules and quality control (Uruguayan model).

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Prevention on scientific, evidence oriented basis, more social and educational support for economically weak families

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Relaunch of the Single convention on scientific, evidence oriented basis (f.e. according to the rational scale to assess the harm of drugs of potential misuse (Nutt, King et al 2007)

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Cannabis cultivation as a model for rural development



Active - Sobriety, Friendship and Peace

Active - Sobriety, Friendship and Peace is a European youth umbrella organization gathering 32 organizations from 24 different European countries. Founded in 1990, our organization engages more than 25 000 young people, all united in what they promote and practice – a lifestyle free from alcohol and other drugs.

Active's work focuses on stimulating the potential of young people through promoting a lifestyle free from alcohol and other drugs and creating free, safe and inclusive environment for young people and children .

Our vision is a democratic, diverse and peaceful world, where any individual can live up to their full potential, free from alcohol and other drugs.

Active's Policy on Drug Use

Active`s concern is for the wellbeing and development of young people and children. Based on that, we support preventative approaches which support young people to lead lives free from the damaging impact of drug use. While recognizing that drug use can be accessed from the social, economic, medical and legislative aspect, Active commits itself to participate in decision-making processes on all levels. In addition, Active focuses its efforts in providing :

- Opportunities for children and young people to feel supported in living a drug-free lifestyle ;
- Drug-free youth activities and environments where any individual can live up to their full potential ;
- Opportunities for children in families with alcohol and other drug-related problems to get in contact with people who can help and support them ;
- Active provides information, through campaigns, seminars and publications, about drug use and its related effects.

Action-oriented recommendations

1. Drugs and Health

- To acknowledge the harm to health and well-being associated with drug use, especially among young people
- To stimulate governments in creating, funding and implementing evidence-based prevention programmes
- To invest more resources in creating free, safe and inclusive environments that enable young people and children to develop and lead a drug-free lifestyle
- To increase civil society initiatives focused on prevention as well as youth empowerment, social and media literacy and skills building

- To make efforts in making treatment and rehabilitation services easily accessible for young people, while designing services whose end goals are becoming drug free, social integration and better health and well-being.

2. Drugs and Crime

- To improve the socio-economic conditions for young people and support vulnerable youth
- To adopt a social rehabilitation and community service approach with regards to the possession of drugs, especially among children and young people. Fines and imprisonment should be reserved for those involved in the illicit drug trade.
- To abolish the death penalty for drug-related crimes

3. Drugs and Human Rights , Youth, Children, Women and Communities

- To acknowledge that drug use compromises the rights of people in the user's surrounding and society as a whole
- To protect children from the illicit use of narcotic drugs and psychotropic substances, following the Convention on the Rights of the Child (Article 33)
- To underline that drug use can obstruct youth rights by affecting young people's employability, education and participation in society
- To enable youth organizations, as providers of non-formal education, to adopt a drug-free policy
- To encourage gender-sensitive drug policies, programmes and activities

4. New challenges

- To place every New Psychoactive Substance (NPS) under a temporary ban until a full risk assessment has taken place
- To introduce an efficient system for classifying NPS as illicit, once the risk assessment is confirmed
- To continue protecting public health and rights by keeping drugs illicit

5. Alternative Development

- To encourage actions by society in changing the social factors that cause young people to take up drug use (for example, socio-economic conditions, inequality, empowering low-income communities)
- To motivate bigger international cooperation in implementing effective alternative development programmes



Main challenges

- Lack of positive role models for young people
- Increase in promotion of recreational drug use in popular culture
- Poor socio-economic conditions that lead to and derive from drug use as one of the main reason among young people for drug problems
- Not enough investments in civil society initiatives aimed at prevention, awareness on addiction and drug use, skills building, problem solving and empowerment
- Need for increased community support, quality leisure time activities for young people and increased participation of young people in all democratic processes

IOGT International

IOGT International is a social movement gathering 129 member organizations from 56 countries from all over the world. We are the premier global interlocutor for evidence-based policy measures and community-based interventions to prevent and reduce harm caused by alcohol and other drugs.. Our vision is a life for all human beings free to live up to their fullest potential, and free from harm caused by alcohol and other drugs. It's a world of peace, democracy and justice where free and healthy citizens actively contribute in all levels of society.

We have 5 244 690 members and our member organizations reach over 38 000 000 people. The expertise of our organization covers primary prevention, treatment, recovery and advocacy work. We gather and target people of all ages.

IOGT International follows the 5 basic principles:

1. Narcotic drugs are illegal for good reason and they should remain illegal.
2. The objective is to prevent and reduce the use of illicit drugs by prevention and tackling demand and supply.
3. The level of negative social, economic and health consequences, including loss of productivity, disease and accidents, as well as political and security threats correspond to the level of illicit drug use in any given society.
4. Drug addiction is neither only a health problem nor is it exclusively a criminal justice problem.
5. Every human being addicted to illicit drugs is entitled to a dignified life. Every illicit drug addict should be treated with respect by society and the health care system. Treatment and rehabilitation measures should always be based on law and should always be in accordance with human dignity.

Action-orientated recommendations for the UNGASS roundtables:

1. **Drugs and Health: Demand reduction and related measures, including prevention and treatment, as well as health-related issues; and ensuring the availability of controlled substances for medical and scientific purposes, while preventing their diversion**

- The primary objective is to help people, particularly but not exclusively children and young people, to avoid the use of illicit drugs, or, if they have started already, to pave ways into rehabilitation, social re-integration and a life free from illicit drugs.
- To focus on prevention-focused policy, which promotes the creation of more alcohol and other drug free environments for young people.

- To foster evidence based-prevention programs, especially primary prevention to avoid addiction and harmful behaviors in youth
- To increase public awareness on addiction and do not promote drug consumption and recreational use of drugs as personal choice without consequences on the society as a whole.
- To support community-based rehabilitation and fellowships in order to provide important opportunities for mutual help
- Create low threshold services and interventions. Treatment and rehabilitation services should be easily available to illicit drug users and they should empower people to become drug-free, crime-free and active members of society

2. Drugs and Crime: Supply reduction and related measures; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation

- Support social reintegration programs of former addicts into the society reducing the recidivism in crime
- The use of imprisonment for minor illicit drug-related offenses should be reduced and proportionate to the offense.
- It is crucial to find effective and dignified alternatives to incarceration. Alternative sanctions that foster abstinence and a life free from illicit drugs should obtain political priority.
- Abolish the death penalty for drug related crime.
- Further international collaboration is needed to address the problems arising from the criminal illicit drug markets, e.g. combating money laundering, corruption and international organized crime.

3. Cross-cutting issues: drugs and human rights, youth, women, children and communities

- Highlight the importance of and use the Convention on the Rights of the Child – specifically Article 33 in the Convention on the Rights of the Child as guidance for further actions and decision. The Article states the obligation for states “to protect children from the illicit use of narcotic drugs and psychotropic substances”.
- Promote gender sensitive approaches to drug prevention, treatment and social reintegration program.

4. Cross-cutting issues: new challenges, threats and realities in preventing and addressing the world drug problem in compliance with relevant international law, including the three drug control conventions; strengthening the principle of common and shared responsibility and international cooperation

- Develop methods to detect NPS and then list NPS as illicit drugs in a speedy manner, in order to protect public health.
- All drugs that are listed this way in international conventions or in national law should be labeled as illicit drugs.

5. Alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues

- Eradication of poverty and to poverty related causes that lead to drug production should be the main focus of alternative development. The actions should support to communities in creation of equal opportunities for education, health and well-being
- International cooperation is crucial to secure the long term impact of the AD projects