

Drug Policy after the UNGASS 2016

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The purpose of this briefing paper is :

a. To inform policy makers, researchers, members of NGOs and institutions working in prevention, treatment and social rehabilitation of drug users and everyone interested in the results of the United Nations General Assembly Special Session on drugs (UNGASS), held from 19 to 21, April 2016, in New York (USA)

b. to present views expressed and which are in discussion about the importance of the UNGASS concerning the assessment of the existing policy on drugs and the strategic direction that governments will decide to follow for their drug policy in the future

c. to refer to the discussion at the regional conference organized from 1-3 June 2016 in Thessaloniki which focused on exchanging views on the post-UNGASS policy that can be followed in SEE countries.

Expectations and outcomes of UNGASS 2016

Interesting outcome document

The UNGASS aimed to hold an honest and sincere assessment of progress and setbacks, successes and failures, challenges and obstacles of the current drug policy. The expectation that the outcome would be a brief, substantive, concise and action-oriented document is, however, not achieved. The final document-24 pages long - clearly reflects the difficulties in finding the required consensus for a policy geared to future challenges. The fact that during the

UNGASS there was not a single and shared view among Member States even within the same geographical group of countries and even among the civil society organizations, indicates clearly that the international community is not yet able to articulate a common vision on several drug policy issues. This lack of consensus is particularly noticeable in the case of harm reduction. The way in which harm reduction is included in the document is indicative. There is no explicit reference to the term "harm reduction". Instead, there is a description of a range of harm reduction interventions, but there is no common opinion that these interventions should be called "harm reduction". This was -along with the fact that the abolition of the death penalty for drug related offenses was not included in the final document- one of the reasons for the discontent of civil society organizations with the outcome document.

Without doubt, the outcome document is not ground-breaking, but encompasses many positive and innovative developments, which are implemented in several countries and regions in the world. This makes the document interesting and is a sign of progress in the discussion about change of several problematic aspects of the current drug policy. Signs of progress in the discussion are, among other:

a. the re-interpretation of the International Conventions² It is now accepted that public health and welfare was the purpose of the international conventions on drugs.

b. In various parts of the world the strict prohibitionist policies are questioned and governments introduce alternative measures.

Especially in Latin America a major shift in drug policy takes place, from repression to public health and respect for human rights.

c. Besides the fact that human rights have influenced the overall framework of international conventions, the UNGASS 2016 was an important moment of reflection on how human rights should be respected, promoted and interact with drug control policies.

d. the outcome document devotes an entire chapter to the right of access to controlled drugs. Recalls that one of the main aims of the international drug conventions was to ensure the availability and access to these substances. This is not the case today. The final document takes clear position: Countries have the obligation to ensure the accessibility of controlled medicines to patients who need them. The current situation where nearly 70% of opioid controlled substances is available only in a minority of countries in the world must change.

e. recommendations concerning the proportionality of penalties are positive developments. Balanced approach in law enforcement and criminal justice play an important role, but public health and welfare of humankind should remain the focus of the conventions.

This shift of focus from suppression to public health must be implemented in daily practice. This is a challenge for the United Nations, transnational organizations and in particular the national governments.

Characteristic statements

Before presenting the content of the final document, we refer to three characteristic statements made by three persons who represented at the UNGASS important institutions of the United Nations: H.E. Mr. Mogens Lykketoft UNGASS President said at the opening session that the issue the UNGASS will discuss “requires a long term multidisciplinary approach(...) We must also listen to civil society, parliamentarians, youth, women and affected communities (...) We must look at new approaches and reflect on our past policies” Mr. Yury Fedotov Executive Director of the United Nations Office on Drugs

and Crime (UNODC) said :“Global drug policy must put people first. We must emphasize the health and wellbeing of humankind, and this is what the drug control regulations are there for” Finally the President of the International Narcotics Control Board” (INCB) Mr. Werner Sipp said “Let me stress that the conventions never called for a war on drugs (...) There is no treaty obligation to incarcerate for minor offences such as possession of small quantities for personal use (...) inhumane punishments and treatment of users is not in line with the conventions”

These are three statements that express the orientation of the outcome document where although the framework of international agreements is respected, make references to new directions and concerns, seek participation of citizens in making policy, introduce new methods of work, place people at the centre of their interest and distance themselves from repressive practices.

The positive points of the outcome document

Definition of Drug Dependence

A first positive point of the outcome document is the recognition that drug dependence is “a complex, multifactorial health disorder characterized by a chronic and relapsing nature with social causes and consequences that can be prevented and treated through, inter alia, effective scientific evidence based drug treatment, care and rehabilitation programmes”³. This recognition is a significant development, given that more than 60% of UN member states are facing drugs as a matter of criminal justice within the competence of the ministry of Justice or the Ministry of Public Order or National Security. This position of the UNGASS to approach the phenomenon of drugs as a health issue is a big change with promising positive effects for the future.

Acceptance of harm reduction

Second positive point is the growing acceptance of interventions of harm reduction. For the first time in a CND/UN document, are national authorities invited to consider including in their national policies, “effective measures aimed at minimizing the adverse

public health and social consequences of drug abuse, including appropriate medication-assisted therapy programmes, injecting equipment programmes, as well as antiretroviral therapy and other relevant interventions that prevent the transmission of HIV, viral hepatitis and other blood-borne diseases associated with drug use, as well as consider ensuring access to such interventions including in treatment and outreach services, prisons and other custodial settings, and promoting in that regard the use, as appropriate, of the WHO, UNODC and UNAIDS Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and care for Injecting Drug Users” The words “Harm reduction” have been avoided, but the content of this paragraph is clear.⁴

Availability and accessibility of controlled substances

Third positive point is to ensure the availability and accessibility of controlled substances exclusively to medical and scientific purposes while preventing their diversion. According to a report of the World Health Organization (WHO) 83% of the world's population has inadequate access to treatment for moderate and severe pain. • 50% of patients with cancer receiving treatment live without pain treatment in the last three days of their lives. • Opioids are the cornerstone of pain management for cancer patients. Access to and availability of controlled medicines is highlighted in the final text of the UNGASS promoting global coverage and ensuring equal and adequate access to controlled medicines for all patients. A series of measures are listed in the special chapter on controlled substances: The member states reiterate their “strong commitment to improve access to controlled substances for medical and scientific purposes by appropriately addressing existing barriers in this regard, including those related to legislation, regulatory systems, health-care systems, affordability, the training of health-care professionals, education, awareness-raising, estimates, assessment and reporting, benchmarks for consumption of substances under control, and international cooperation and coordination, while concurrently preventing their diversion, abuse and trafficking”⁵

Alternatives to imprisonment

Fourth positive point are the recommendations for the adoption of alternative measures to imprisonment and the proportionality of sentences. A clear sign of the efforts to promote human rights oriented drug policy.

Other positive points to mention briefly:

The choice of treatment and the voluntary participation in treatment. This points out clearly that drug dependent people participate voluntarily to drugs treatment, and drug treatment programs have to have their consent.

Promotion and design of targeted interventions

Treatment interventions have to take into account the specific needs of populations (e.g. sex-age). This emphasizes the integration and the participation of women at all stages of development, implementation, monitoring and evaluation of the policies, and treatment programs. The programs should be tailored to concrete needs of children, young people and other vulnerable members of society. Further is proposed to promote inclusion in national information policies about prevention and treatment of overdose of drugs, particularly overdoses of opioids, including the use of opioid receptor antagonists, such as naloxone in order to reduce mortality associated with drugs.

The role of civil society

The outcome document recognises the role of civil society in promoting cooperation at local, national and international level, and the exchange of experiences, know-how and best practices. It recommends meaningful participation, support and training for civil society organizations and institutions involved in health and welfare services. The need to reform drug policies

The negative points

Most of the negative points relate to no reference of points as:

a. **The abolition of the death penalty** for offenses related to drugs. This is contradictory to the call of UN Member States to respect and promote human rights oriented policies while at the same time there are countries that violate the most precious human right

namely the right to life and continue to apply the death penalty for drug related offenses.

b. The term "Harm reduction"

Despite the positive reference to interventions aimed at reducing harm associated with drug use, the term "harm reduction" was avoided and is not included in the outcome document. The implementation of harm reduction programs is common practice in most Member States. Unfortunately, the wording "Harm Reduction" is still taboo for the UN Commission on Narcotic Drugs (CND). The CND remains the only UN agency that does accept the term, unlike other UN agencies as UNAIDS, the UN agency for International Development Cooperation (UNDP) and the World Health Organization (WHO).

c. The supervised drug use sites

It would be consistent with the adoption of practices such as medically assisted treatment, the injection equipment programs and interventions for prevention and treatment of overdose, to make a reference to the supervised drug use sites.

d. The decriminalisation of possession of small quantities of drugs for personal use..

This is a subject that for decades is subject of discussion in individual countries and internationally without a common agreed result. If the possession of drugs for personal use continues to be considered a criminal act, the proposed shift in drug policy from repression to health and human rights will not be credible.

e. The discussion about the international drug conventions.

The outcome document refers several times to the International Drug Conventions as the "cornerstone" of the current drug control regime. Despite the reinterpretation of the conventions that recently has been proposed by the UN office on drugs and crime and the recognition that the drug conventions aim to protect the health and welfare of mankind, the international community refuses to accept that the past and current implementation of the international treaties on drugs is based on these conventions. Amending important points of the international drug conventions will ensure their correct understanding and will avoid misinterpretations

Building on the outcomes of the UNGASS 2016

The outcome document of the UN General Assembly Special Session on drugs should be fully exploited by the governments of the national states. The civil society organisations, the scientific community and mainly the national parliaments and political parties should require the implementation of the UNGASS recommendations.

The shift in priorities from repression and punishment to public health and respect for human rights

This shift requires specific programs in the field of public health and securing financial resources for their implementation.

It is obvious that the approach of the drug phenomenon changes. The outcome document of the UN General Assembly Special Session (UNGASS), although does not adopt a common position on several issues, it supports dialogue to find new approaches. The UN members are encouraged to develop initiatives for the implementation of the shift in drug policy by reforming legislation, national strategies and action plans. The civil society organisations and the scientific community should, based on the outcome document, keep reminding governments that they have to implement the changes they themselves agreed at the UNGASS. It is not easy to distance themselves from the current system of enforcement and punishment if they will not promote practical actions prioritizing public health and respect for human rights.

Recognition of harm reduction practices should be enshrined in national legislation.

The UNGASS recognizes that initiatives, which in the past have been criticized and were considered to be a violation of the international conventions on drugs, have become for many countries everyday practice. The paragraph on demand reduction contains -as mentioned above- almost all the harm reduction practices. The UNGASS calls the Member States "to examine the implementation of effective measures to minimize the adverse consequences of substance abuse, for public health and society, including medically assisted treatment programs, injection equipment programs and

other related interventions that prevent transmission of HIV, viral hepatitis and other blood borne diseases related to drug use". Member States should also ensure access in these interventions in services in and outside treatment structures, such as in prisons. This means that we need and at this point, to shift resources from the state budget in the health sector.

Many countries have allowed harm reduction practices, but have not taken their responsibility to introduce legislation and to financially support these interventions. Usually NGOs are working systematically in this area with funds from international organizations and private grants which do not ensure the sustainability of services. It is imperative to put pressure on governments to take their responsibility and integrate these services into the public health system. The encouragement of the UN General Assembly Special Session to Member States is clear, it is now a matter of political will to turn the words into action.

The access to controlled substances

The UNGASS document refers to the strong commitment of UN member states to improve access to controlled substances for medical and scientific purposes. Existing barriers related to legislation, regulatory systems and health care systems and affordable prices and training of professionals must be effectively addressed. What is at issue here is an important recognition that the current drug control system has been misinterpreted by many countries and resulted to the deprivation of almost 80% of the world population from access to opioid medications for pain relief. States must lift up restrictions on the medical use of such analgesics and at the same time prevent their diversion for illicit use.

New approaches are accepted

New approaches to drug policy are no longer seen with suspicion and objections. The UNGASS calls on the Commission on Narcotic Drugs "to consider the start of the development of new guidelines on the various aspects of the drug problem in the world and to evaluate the existing ones. Urges to strengthen international cooperation and the capacity of relevant national authorities". Calls "the UN Office on drugs and Crime

(UNODC), the International Narcotics Control (INCB) and the World Health Organization (WHO) to provide legal advice and assist States, upon request, in revision and updating of their drug policies. Governments should take into account different national realities and needs, though, inter alia, information promotion and exchanges of best practices and evidence-based policies already implemented by Member States. This means that states can develop initiatives tailored not only to international agreements but also their specific characteristics and needs. It is a perspective that must be implemented by Member States if they want to modernize the drug control system and make it fairer and more effective. Greece has greatly modernize its legislation, but lacks the consistent and effective implementation.

Legislation on cannabis

Although the issue of cannabis is not addressed in the outcome document of the UNGASS, it is subject of public debate. The inclusion of cannabis in the list of prohibited drugs is questioned and several stakeholders are of the opinion that its inclusion in the International conventions was a wrong decision. More and more countries adopt legislation for the production and distribution of cannabis for medical and scientific purposes and countries like Uruguay and some 7 states in the USA have legalized cultivation and distribution of cannabis for recreational use. The latest annual "World Report on Drugs 2016" issued by the UN Office on Drugs and Crime devoted, unlike the Special UN General Assembly, an entire chapter on recent developments relating to cannabis. This objective and particularly informative report addresses developments on legalization as a fact that should be carefully evaluated in terms of the positive and negative impacts. This is an approach that promotes dialogue and objective evaluation. It is now a matter of time whether cannabis will be on the agenda of the UN and more national governments.⁶

The high level meeting of 2019

In 2019 there will be the next important stage in the debate on an effective and adjusted to modern and evidence based scientific insights, drug policy. Already in the au-

turn of 2016, the UN Commission on Narcotic Drugs held several meetings on the implementation of the Special Assembly outcomes. The results of these meetings will be discussed in the 60th Session of the Commission on Narcotic Drugs (CND) in March 2017. The NGOs actively participate in the preparations as observers with the right to make interventions in the debates.

The after the UN General Assembly Special Session 2016 period and the situation in SE Europe.

A special section of the programme of the regional conference in Thessaloniki (1-2 June 2016) was devoted to discussion of recent national, regional and international developments in the field of drugs. Initiatives and proposals for action during the next two years and possible joint activities of NGOs. The participants discussed the final version of the outcome document that was approved by the UNGASS 2016 and focused the discussion on four points, which are closely linked to actions that can be developed the SEE region. These points are:

a. The future challenges in the field of drugs in South East Europe. Political instability.

The continuous political instability in almost all countries of the region prevent coherent and consistent drug policy making, like on many other social issues. It is needed to stop the current fragmentation and to work on continuity. NGOs can exercise pressure if they act collectively and have concrete proposals.

The equal access and integration of drug users in physical and mental health services without discrimination

This is one of the priorities of the actions of non-governmental organizations.

The recognition and support from governments,

Governments recognize that services offered by NGOs are necessary. Few countries support financially the work of NGOs. The current attitude of the governments is not fair and does not contribute to the integration of NGO services in the health sector. Part of the budget must be allocated to health services provided by non-governmental organizations.

Funding of NGOs

Funding is a problem and a challenge. Without financial resources, the sustainability of NGOs is at risk. Securing resources depends also on the creativity and the development of good projects and proposals from NGOs. At the regional level should be also mutual support and cooperation between NGOs.

The contribution of UN agencies. The proposals and recommendations of the outcome document of the UNGASS must be actively supported by the UN agencies in the region of Southeast Europe. Their dialogue with governments of the countries in the region will greatly contribute to the future direction of drug policy. The recognition of the role of NGOs should be accompanied by concrete actions.

b. Which actions should be taken for the decriminalisation of drug possession for personal use?

Utilization of scientific research findings.

Research that took place in various countries around the world proves that the punishment and imprisonment of users for violations of the law on drugs and specifically for possession of small amounts for personal use, does not contribute to effectively address use. Unlike, punishment and imprisonment has damaging effects on individuals and society. This finding should be brought up and supported by NGOs in the SEE region. The survey on sentencing of drug offenders (citaat*) conducted by Diogenis in the Balkan countries can be used by NGOs in the region. (Citaat).

Dissemination of personal stories in publications of organizations, the press, social media etc. is an effective tool to advocate for the adoption and implementation of alternative measures to punishment and incarceration. Legislation in favour of decriminalisation will contribute greatly to combating stigma and promote access to the labour market.

Participation of policy makers and politicians in conferences and public meetings organized on the subject by drug treatment and rehabilitation agencies and by NGOs in South East Europe will help to promote the regulation of decriminalisation of possession of small quantities of drugs for personal use.

Public discussion and debate will help to exchange experiences on issues such as stigmatization of users and the social consequences as well as on results in countries where decriminalisation practices have been implemented.

Training health professionals and law enforcement, mainly police, will help to tackle the issue. The daily contact between health professionals and police, with drug users and the involvement of users in the discussion will have a positive effect on mutual understanding and mutual fight of stereotypes.

c. Initiatives that can be developed at local and regional level,

Cooperation and building partnerships of NGOs with the local community are essential tools for the success of the target to exercise pressure and influence at local and regional level. A prerequisite for the success of this goal is the common view of the organizations concerning the content of the specific interventions. The formulation of clear messages and their consistent presentation is important. Joint initiatives, mutual understanding and cooperation as well as avoiding conflicting tactics are necessary to address problems effectively.

d. What can be the contribution of NGOs in the field of human rights?

What points should be placed in the agenda for human rights and the issue of drugs?

The involvement of civil society and directly affected populations by drug use, in shaping policy, should be adopted as a rule in all decision-making levels.

The contribution of NGOs to this issue is to link human rights with the implementation of drug policy in daily practice. Issues related to human rights, are among others. The availability to all possible treatment types People must be able to select or reject treatment choices. The approach must be person-centered with respect to privacy. Participation in the decision about treatment. Access to healthcare services and treatment by qualified/specialized personnel.

NOTES

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² <http://www.diogenis.info/cms/files/2016/04/UNODC-document-English.pdf>

³ <http://www.diogenis.info/cms/files/2016/04/outcome-document.pdf> pag.6

⁴ <http://www.diogenis.info/cms/files/2016/04/outcome-document.pdf> pag. 7

⁵ <http://www.diogenis.info/cms/files/2016/04/outcome-document.pdf> pag.8

⁶https://www.unodc.org/doc/wdr2016/WORLD_DRUG_REPORT_2016_web.pdf



Drug Policy Dialogue

The current system of global drug control is based on the three international UN Conventions : the Single Convention on Narcotic Drugs (1961) as amended by the 1972 Protocol , the 1971 Convention on Psychotropic substances and the 1988 Convention on Illicit Drugs and Psychotropic substances.

The legislative scheme developed after the 1960s followed the repressive approach and is characterized by a restrictive interpretation of the UN Conventions which is often an obstacle for the development of innovative practices that meet the needs of our time and are constantly evaluated as to their effectiveness. Decades of repressive drug policies have not reduced the size of illegal drug markets instead they have led to violations of the human rights, caused a crisis in the judicial and prison system , stabilized organized crime and marginalized vulnerable drug users , the small traders and producers of illicit crops .

The Drug Policy Dialogue in South Eastern Europe of the DIOGENIS Association aims to promote a more humane , balanced , and effective drug policy that takes distance from the repressive approach and approaches the subject from the perspective of public health , human rights and harm reduction .The specialized project Drug Law Reform which is promoted by the Association in cooperation with scientific institutions (universities and research centres) in the countries of South Eastern Europe aims to reform legislation by highlighting good practices and lessons learned from experiences in areas such as decriminalization and depenalization, proportionality of sentences , alternatives to incarceration and harm reduction .

- The series of publications of the Association aims to encourage a constructive dialogue between the competent state bodies that are responsible for drug policy, agencies, services and relevant authorities that implement this policy and civil society organisations.