

Contribution from the Civil Society Forum on Drugs in the EU on the ongoing humanitarian crisis in Palestine

November 2013

Since 7 October 2023, the attention of the international community has been drawn to Israel and Palestine, where war has escalated dramatically. The war has also occupied a central stage at the proceedings of the Commission on Narcotic Drugs (CND) held from 23rd to 25th October, and it is likely to have an important role in the coming meetings of the CND..

Following the precedent of prior contributions on the situation in Ukraine, CSFD aims to gather information from civil society organisations from the region on the impact of the ongoing war on drug services and the situation of people who use drugs in Palestine. This submission collates some extracts from correspondence with NGOs in the region until 10 November 2023, background information, and recommendations by international bodies.

The CSFD urges the EU institutions and the HDG to monitor closely the situation in the region, and to ensure that the continuity of drug services and of access to medicines is part of both the EU's humanitarian response and of its interventions at the CND and other international fora.

1. Information from civil society organisations from the region

It has been very difficult, not to say impossible, to reach civil society organisations from Palestine and the region, given the acute crisis situation in which they are in. We would like to share with the HDG the information we could gather from our NGO colleagues from the region. The information is quoted as provided and without further verification.

From the correspondence with The Jordan Anti Drugs Society (Jordan, 9 November 2023):

“Regarding the cessation of services in the West Bank, some of the key organizations that have halted their services include the Qalqelia Family Support Society and the Life Friends Association. We are in the process of gathering their contact details, and we will provide them to you as soon as possible. The reasons for the discontinuation of services in the West Bank seem to be a result of the challenging situation in the region.

As for Jordan, while we can still provide our community services, the motivation has dwindled due to the situation in neighboring countries. As of now, there haven't been significant restrictions on the provision of controlled medicines. However, we are closely monitoring the situation and will keep you informed if any changes occur.”

From the correspondence with The Jordan Anti Drugs Society (Jordan, 7 November 2023):

“The president of Palestine Green Crescent* has been died along with his wife, sons, daughters and grandchildren in one of the Israeli bombs attacks on their building.

The prevalence of Tramadol and Captagon addiction, originating from Israel, and the disruption of primary health centers and mental health facilities in Gaza paint a dire picture of the current healthcare landscape. The absence of addiction support groups exacerbates the challenges faced by individuals in need of assistance.

In the West Bank, the discontinuation of services by three of the most active organizations, coupled with the restrictions on awareness programs, prevention, and harm reduction activities, adds to the complexity of the situation.

Even before this crisis, potential services were below the standards, since they need capacity building, logistics support, freedom of movement due to the Israeli check point everywhere in Palestine.”

*President of Palestinian Green Crescent for Addiction Prevention - Dr. Omar Fraouneh. Dean of Faculty of Medicine at the Islamic University. PhD in Orthopedics at UK and servant for 30 years. He died along her wife and 13 of his children and grandchildren on October 15th, 2023.

From the correspondence with Skoun Substance Use Treatment Centre (Lebanon, 7 November 2023):

“What we believe is that the total collapse of the health sector undoubtedly affects people who use drugs and has interrupted any services they may have benefited from in Gaza. The disastrous situation in Gaza should be unequivocally met with an immediate cease-fire to safeguard the lives of people living there, including people who use drugs.”

From the correspondence with Cénacle de la Lumière CLL (Lebanon, 26 October 2023)

“The risk for Lebanon to slide towards a scenario similar to what happened in 2006 is relatively considerable”

2. Background information on drug use and drug-related health risks in Palestine before the recent escalation

According to the [World Drug Report 2023](#), pp. 105-106:

“Among Palestinian young people (aged 15 to 19 and 20 to 24) living in the West Bank and East Jerusalem in 2014, the prevalence of substance use among those living in refugee camps was reported as comparable with that among other Palestinian young people living in urban areas, but higher than substance use among those living in rural

areas.⁵⁵ A total of 6.5 per cent of male and 3.5 per cent of female young Palestinians had used any drug, including cannabis, inhalants, the non-medical use of pharmaceutical drugs, heroin or cocaine, on at least one occasion.

A study carried out in 2017 of high-risk drug use among Palestinians living in Gaza and the West Bank revealed that about 1.8 per cent of the male population aged 15 and above were high-risk drug users; tramadol and pregabalin were reported as the most commonly misused substances among this group. The majority of high-risk drug users in the study, living in Gaza and the south and middle regions of the West Bank, had refugee status and were either living in the urban centre or a refugee camp in those areas.”

The source for the quote above is a [peer-reviewed article](#) that shares evidence from a survey of 400 male high-risk drug users in both the West Bank and Gaza. Some of its key findings include:

“The first drugs used were synthetic marijuana in the West Bank and Tramadol in the Gaza Strip. Most HRDUs reported using Tramadol (99%) and Lyrica (active ingredient is pregabalin), an anti-convulsant drug also used for diabetic neuropathy (54%), in the Gaza Strip, and synthetic marijuana in the West Bank in the previous month.”

“Political and economic tension in Palestine has facilitated the spread of illicit drug use among Palestinians. In the context of house demolitions, arrests, restriction of movement and encroachment on land, illicit drugs have been used in Palestine as a ‘coping mechanism’.”

“However, a major limitation in this study is that females were not included. Females who use illicit drugs are known to be at higher risk than males due to the fact that females have more limited rehabilitation treatment options. Cultural expectations and constraints pose significant barriers to females taking part in any rehabilitation program.”

“Based on the study findings, a number of policy recommendations regarding illicit drug use in Palestine are evident. These include, educating and providing early interventions to young people who are at higher risk for drug use, developing flexible treatment modalities that involve internationally accepted detoxification and diagnosis, and treatment of co-morbidities such as mental health and drug use related disorders [8], providing appropriate treatment to females, creating plans to ensure the continuity drug use services during emergencies, including during epidemics (i.e., COVID), attacks and sieges, and developing a monitoring system to regularly collect information on drug use and its health consequences to strengthen the evidence base and raise public awareness about the prevention and treatment of drug use.”

“Palestine must strengthen its national efforts to scale up harm reduction and treatment and care options for people suffering from drug use disorders, especially those involved in polydrug use. Additional measures are needed to prevent substance use among

children and youth, support the families of people who use drugs, and ensure the continuity of HRDU services during emergencies.”

3. Relevant international standards and recommendations

This section cites a number of guidelines and recommendations provided by international bodies on access to medicines and continuity of services in the context of humanitarian crises. These guidelines should be taken into consideration when designing the EU’s response to the situation in Palestine.

3.1. UNODC recommendations in the context of humanitarian crises

In the World Drug Report 2023, UNODC dedicated a [specific chapter](#) to the issue of drug dependence in humanitarian settings. There is a broad range of recommendations including:

P. 103. “Compared to the general population, displaced populations experience an elevated level of vulnerability to substance use and substance use disorders. This may result from greater exposure to the risk factors for substance use and substance use disorders, such as family disruption and elevated levels of stress, and the absence of protective factors, such as monitoring by caregivers or a safe neighbourhood. Moreover, given that a sizeable proportion of displaced people are children, the adverse experiences they suffer and the trauma of displacement can also make them vulnerable to substance use and mental health disorders”

The following recommendations are provided:

| Need for prevention and treatment interventions for people forcibly displaced | | |
|---|--|--|
| Addressing pre-existing conditions | Addressing needs in emergency situations (immediate and medium term) | Addressing needs in a protracted displaced situation (medium to long term) |
| Addressing existing substance use disorders, precipitation of withdrawal or continuation of treatment, e.g. access to opioid agonist treatment, identification and management of withdrawal, overdose prevention, identification and management of overdose | Linking people with existing prevention and treatment services that address initiation of substance use, progression to harmful use of substances and continued care for those with pre-existing substance use disorders | Long-term support; age-appropriate prevention interventions and treatment programmes; and management of social and mental health issues among the displaced and the host population. |

Source: UNODC elaboration.

UNODC has also published a paper on [Caring for Children through Conflict and Displacement](#). While the whole paper is relevant, the following excerpts are highlighted:

“Parents that have lived through crisis situations have reported how concerned they are about their children’s wellbeing. When facing the many physical consequences of crisis contexts, parents often struggle to know how best to respond to their children.”

“Caring adults help to protect children in difficult times, especially when they are warm, supportive, and comforting, and when they can help children make sense of uncertain times. Family harmony helps to reduce your child’s anxieties while keeping them safe. Encouraging good behaviour helps your child to cope as well as possible. It also makes it easier for parents to keep them safe. Remember that this is a temporary state, and you will get through it. How well you work together with your families will help to determine the well-being of your children now and in the future, as well as their memories of this time.”

3.2. Access to medicines

See the [statement](#) by the International Narcotics Control Board on the need to ensure access to controlled medicines in Israel and Gaza, from 23 October 2023.

“The International Narcotics Control Board (INCB) remains deeply concerned about the humanitarian emergency in Israel and Gaza. With acute and growing humanitarian needs resulting from this emergency, INCB reminds States of their obligation to ensure the availability of internationally controlled narcotic drugs and psychotropic substances for medical purposes, in accordance with the 1961 Single Convention on Narcotic Drugs, as amended, and the 1971 Convention on Psychotropic Substances.

Urgent action is required to ensure unimpeded access to medications, including medicines containing internationally controlled narcotic drugs and psychotropic substances. These are essential in ensuring health and wellbeing, and are used in anaesthesia and for pain management, the treatment of mental health and neurological conditions.

INCB reminds all Governments that in acute emergencies it is possible to utilize simplified control procedures for the export, transportation, and provision of medicinal products containing controlled substances. (...).”

The [WHO Operational Response Plan occupied Palestinian territory](#) for the October 2023 to January 2024 period provides the following recommendations:

P. 3. Health service availability: “Acute shortage of essential medical and trauma supplies, essential medicines, fuel and electricity is affecting critical functions at all hospitals, as well as the ability of ambulances to respond. Health services and medical equipment is increasingly non-functional, affecting diagnostic and treatment capacities”.

3.3. The drug dimension of the right to health in humanitarian situations

See the relevant sections in the 2023 report by the UN High Commissioner for Human Rights on Human rights challenges in addressing and countering all aspects of the world drug problem:

Para. 128. Recommendation: “Address the increased vulnerability of people who use drugs in crisis settings, including by providing health and protection services within the humanitarian response framework”

Para. 50. “Humanitarian crises and emergencies such as conflict, displacement, pandemics and natural disasters can create an environment that facilitates drug use and abuse, compounding the already challenging circumstances that people, including children and young people, face. Addressing human rights challenges regarding drug use in humanitarian settings is complicated by several factors. These include restrictive regulations and laws, limited resources, competing priorities, and cultural and linguistic barriers. In many cases, humanitarian organizations may not have the expertise or capacity to address drug use effectively. Moreover, due to the criminalization of drug use and to stigmatization, it becomes difficult to provide services and support to those who need it, adding challenges to the realization of the human rights of people affected by emergencies and who use drugs. During emergencies, sudden shortages, the threat of interruption, and reduced doses have reportedly resulted in physical withdrawals, increased rates of overdose, higher relapse rates, and the emergence of mental health conditions due to the heightened stress experienced by Opioid Agonist Treatment service users. This situation not only compromises the continuity of care but also undermines the overall effectiveness of harm reduction efforts.”

UN human rights experts also issued a statement at the start of the current phase of the war: [UN expert warns of new instance of mass ethnic cleansing of Palestinians, calls for immediate ceasefire | OHCHR](#)

4. Recommendations to the EU institutions

- The EU is a strong advocate of human rights principles worldwide and uses every chance it has to highlight the need to protect those same rights in all forums such as CND as well as to safeguard international commitments that fall under the drug policy arena. For instance, the EU has held a clear and strong commitment at CND regarding the need to stop Russian attacks on Ukraine and has an active commitment to raising the impacts of the war in Ukraine on drug services, ensuring access to essential medicines and for the health and wellbeing of people who use drugs. The EU’s defense of human rights at international forums should be objective, bold, and consistent throughout different geopolitical contexts.

- The CSFD urges the HDG to use its statements at the CND to call for an immediate cease-fire and for the international community to ensure that humanitarian aid for the people affected by the conflict allows for appropriate access to controlled medicines and for the continuity of drug services.
- The CSFD urges the HDG, the EEAS, and the European Commission within their powers to take active steps to monitor the situation of drug services, access to controlled medicines, and more broadly people who use drugs in Palestine. Active steps should also be taken to ensure that humanitarian aid for the people affected by the conflict includes appropriate access to controlled medicines and support for the continuity of drug services in the region.
- Particular attention should be paid to the situation of children. Given that Palestine has one of the youngest populations worldwide, with nearly half of their population being under 18 years old it will be critical to ensure the provision of appropriate mental health and drug demand services that can support them to face the childhood adverse experiences and trauma.