

IDPC Briefing note:

The 10-year review of the United Nations Drug Control System: Difficult questions remain for member states and UN system wide coherence

The outcome of the recent review of the global drug control system represents a re-commitment by member states to existing policies and strategies, despite increasing concerns regarding their impact. A political declaration, adopted by consensus, masks deep divisions between member states and contains elements that bring UN drug control policy into conflict with the work of UNAIDS, the development agencies, and the human rights apparatus. To protect the concept of system wide coherence, better mechanisms need to be found to develop a system-wide UN drug control strategy that balances the needs of security with the wider imperatives to promote health, development and human rights.

The Report of the Commission on Narcotic Drugs

During the agenda of this ECOSOC meeting, member state representatives will be receiving and adopting the report of the 52nd Commission on Narcotic Drugs (CND) that was held in Vienna in March. The report contains the outcomes of member states' consideration of the 10-year global drug policy review, as enshrined in a political declaration adopted by consensus. It would be easy for ECOSOC, and the Secretary General, to be satisfied that the CND had concluded its review and agreed a consensus way forward. However, this would be a mistake, as the report in front of you masks serious and growing divisions between member states and – even more worrying – different parts of the UN system. These divisions will continue to undermine the concept of system wide coherence between the UN drug control apparatus, and other areas of UN activity, such as the work of UNAIDS, the development agencies, and the human rights bodies.

The review of global drug control and a weakening consensus

Over the past two years, member states and United Nations agencies have been engaged in a review of the global drug control system, specifically examining progress against objectives agreed to by the General Assembly in 1998.

The slogan for the 1998 gathering was 'A Drug Free World – We Can Do It' and the key objectives in the political declaration agreed at the meeting centred on "eliminating or significantly reducing the illicit manufacture, marketing and trafficking of psychotropic substances, including synthetic drugs, and the diversion of precursors." The approaches promoted in that declaration were a continuation of the strategies enshrined in the three UN drug control conventions, focusing on suppressing supply and demand through enforcement led measures.

The almost universal support amongst member states for these approaches that was evident in 1998 has somewhat diminished over the last decade, as many governments have come to the realisation that:

- *Efforts to reduce the scale of drug markets have had very little impact. Significant reduction in the scale of illegal drug markets has not been achieved.* The best that could be claimed for global supply reduction efforts in the last 10 years is that they have contributed to containing the problem.
- *These efforts incur a large public expenditure cost for limited returns.*
- *These efforts themselves can lead to negative consequences for the health and social wellbeing of communities – for example the stigmatization and marginalization of drug users and their families, that undermines health and social programmes such as the fight against HIV. The UN Office on Drugs and Crime has pointed out some of these dilemmas, which it refers to as 'unintended*

consequences', including the accumulation of massive profits and power by organised crime group, that generates widespread violence and corruption.

- *There are programmes and activities that governments can pursue that have been proven to be effective in reducing some of the harms associated with drug markets and use, while not necessarily reducing their scale* – for example, drug treatment programmes to reduce street crime, or public health measures to reduce HIV infection. As local and national administrations have moved resources from enforcement based programmes into these 'harm reduction' strategies, tensions have arisen with their commitments to the global system.

This weakening consensus has dominated the review process, as member states and UN agencies have become divided between those who favour a strong re-commitment to traditional strategies of harsh enforcement and punishment and those who favour a move towards a public health and social development approach to the issue*.

Divisions between member states

The draft political declaration was agreed by consensus after six months of intensive and fractious discussions that were dominated by a small number of member states. The most contentious areas of text were rushed through in the final days before the CND gathered to adopt it.

Many of the smaller member states (that are deeply affected by drug control policy but do not have permanent staff in Vienna) had very little opportunity to engage in the debates. Furthermore, any member states remained dissatisfied with the text of the declaration but allowed it through to enable completion of the work.

The most controversial aspect of these disagreements related to the references to harm reduction in the declaration. This concept – referring to programmes and activities (largely in the public health field) that address the health and social consequences of drug use, rather than seeking to eradicate it – has become the symbolic battle ground for the two camps.

The eventual text of the declaration had all references to the words 'harm reduction' removed after a bizarre straw poll conducted by the Chair in the final days of the negotiations with less than 40 member states present. All those member states not present at the meeting were then presented with a final text without further opportunity for comment on this hugely divisive issue.

At the adoption of the political declaration at the CND, a group of 26 countries demonstrated their dissatisfaction with this procedure by issuing an 'interpretive statement' recording their understanding that the vague language that finally entered the declaration represented what was generally referred to as harm reduction, and demanding that this statement be included in the final report of proceedings (which it is, in paragraph 155).

Irrespective of the rights and wrongs of the issue, the fact that such divisions between member states remain unresolved on an issue of such strategic and operational importance (harm reduction activities are central to global HIV prevention strategies promoted by UNAIDS, WHO, and the UN Office on Drugs and Crime) is deeply disturbing. The convoluted arguments about language in the political declaration arise from deep differences of opinion on how to balance drug control objectives with other areas of UN activity – particularly health promotion and the fight against HIV/AIDS. The negotiations in Vienna have shown that the CND has not been capable of resolving these differences.

Disagreement between different parts of the UN system

Perhaps of more concern than divisions between member states has been the exposure of disagreements and inconsistencies between the decisions of the CND and declarations, agreements and strategies

* The International Drug Policy Consortium has produced detailed briefing papers on what we consider to be the weaknesses of the 10-year review process and the resulting political declaration – you can download these papers from our website (www.idpc.net).

pursued in other parts of the United Nations system. Drug control policies and programmes have a big impact on other areas of policy across the three pillars of security, development and human rights. This is why, at the national level, most governments have created high-level co-ordination mechanisms to balance the various policy interests.

No such mechanism exists at the UN level, where all drug control issues are left to the Vienna based agencies and the CND. While some progress has been made in recent years to balance the natural law enforcement focus of these structures (for example, the UNODC now leads on HIV prevention amongst people who use drugs, on behalf of the UNAIDS family), they remain ill-equipped to reflect a system-wide coherent approach to these complex issues. The conduct of this latest review of the system has once again exposed these weaknesses.

Major multilateral institutions with a significant interest in drug control issues had very little influence on the debates in Vienna – representatives from the World Health Organisation (who are engaged in a global campaign to improve access to essential medicines, and therefore need support and co-operation from global and national drug control authorities) were given little opportunity to contribute to debates; and a call from senior UN human rights officials for the CND to make clear statements against the stigmatization and marginalization of drug users went largely unheeded.

The gravest example of isolationism at the CND, however, related to HIV prevention. In the months leading up to the adoption of the political declaration, the heads of both UNAIDS (Michel Sidibe) and the Global Fund to fight AIDS, TB, and Malaria (Michel Kazatchkine) wrote to member state delegates to the CND calling on them to register unequivocal support for proven harm reduction approaches to preventing HIV infection amongst injecting drug users. Both letters (see Annex) highlighted that these approaches were clearly supported by the global evidence, and had been agreed in other UN forums (for example, the UNAIDS Programme Co-ordinating Board) and in General Assembly declarations such as the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration on HIV/AIDS.

As explained above, these calls were ignored, and different language adopted, undermining the dissemination of a clear HIV prevention message from the UN. UN commissions continue to fail to 'speak as one' on this issue, which continues to undermine efforts to promote effective HIV prevention in countries where the epidemic is driven by drug use.

To observers of this process, greatest concern was caused by the casual attitude of many member states delegations to the issues and agreements in other parts of the system – many we spoke to felt no need to align drug control agreements and policies with other areas of policy and international action.

This is a system governance issue – a good example of the type of system wide incoherence that the Secretary General is keen to resolve. In this case, one UN commission is promoting policies that legitimize the stigmatization and marginalization of hundreds of millions of people who use drugs, while other UN bodies and agencies are working hard to support the social inclusion and health protection of the same group of people.

A call for action

We therefore call for the following two actions to emerge from this ECOSOC meeting:

1. In adopting the report of the 52nd CND, the ECOSOC committee notes that concerns remain regarding the alignment of UN policies on drug control and HIV prevention, and calls on the Secretary General to facilitate further discussion on how to resolve these concerns.
2. The ECOSOC committee should call upon the High Level Committee on Programmes (HLCP) of the UN System Chief Executives Board to review existing structures for co-ordination and joint strategy planning between the drug control apparatus and other relevant UN agencies and commissions, and consider the feasibility of creating a mechanism for closer co-operation.

Annex

1. Letter from Global Fund Executive Director to Chair of the CND – 6th February 2009

Executive Director of the Global Fund, Michel Kazatchkine, urged CND 'to send a strong message to the world with clear and specific language that calls for comprehensive harm reduction services.' He asserted that 'harm reduction is an essential, evidence-based AIDS response.... there is an overwhelming body of scientific literature that supports this, and harm reduction approaches have been endorsed by the UN General Assembly and in numerous UN documents, including in reports from UNAIDS, the Office of the High Commissioner for Human Rights, the World Health Organisation, UN Office on Drugs and Crime, and the Commission on Narcotic Drugs.'

Read the full letter at: <http://www.idpc.net/publications/global-fund-letter-to-cnd-chairperson>

2. Letter from UNAIDS Executive Director to Chair of the CND – 12th February 2009

Executive Director of UNAIDS, Michel Sidibe, highlighted the 'considerable body of strong and consistent evidence on the effectiveness of harm reduction approaches'. He cites numerous UN General Assembly and UNAIDS Programme Coordinating Board resolutions in support of harm reduction, and expresses the 'hope that the Commission will further advance UN system-wide coherence...in support of harm reduction measures'.

Read the full letter at: <http://www.idpc.net/publications/un aids-letter-to-cnd-chairperson>

3. UN High Commissioner for Human Rights calls for focus on human rights and harm reduction in international drug policy – 10th March 2009

In a statement on the eve of the adoption of the new political declaration, the High Commissioner, Navi Pillay, called for a greater focus on human rights and harm reduction in drug policy. She reaffirmed the right of everyone to the highest attainable standard of health and expressed concern that 'drug users suffer discrimination, are forced to accept treatment, marginalized and often harmed by approaches which over-emphasize criminalization and punishment while under-emphasizing harm reduction and respect for human rights. This despite the longstanding evidence that a harm reduction approach is the most effective way of protecting rights, limiting personal suffering, and reducing the incidence of HIV.' Read the full statement at:

<http://www.idpc.net/publications/un-high-commissioner-calls-for-focus-human-rights>

4. Letter from UN Special Rapporteurs to Chair of the CND – 10th December 2008

The United Nations Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment – Professor Manfred Nowak – and the United Nations Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health – Mr Anand Grover – wrote to the Chair of the CND to 'offer guidance' regarding human rights issues that have arisen during the UN's ten-year drug strategy review. The Letter from the Special Rapporteurs gives comment on the draft political declaration and annex that have been prepared for discussion at a High Level Meeting at the UN in Vienna in March. In the letter, the Special Rapporteurs are deeply critical of the failure of the draft political declaration and annex to give any mention of harm reduction.

Read the full letter at: <http://www.idpc.net/publications/UN-special-rapporteurs-letter-to-chair-CND-March-2009>

The International Drug Policy Consortium (IDPC) is a global network of NGOs and professional networks that specialise in issues related to the production and use of controlled drugs. 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 occasional briefing papers, disseminates the reports of its member organizations about particular drug-related matters, and offers expert consultancy services to policymakers and officials around the world. IDPC members have a wide range of experience and expertise in the analysis of drug problems and policies, and have contributed to policy debates at national and international level. For more information visit www.idpc.net.