### Submission by the Civil Society Forum on Drugs to feed into the EU position at the upcoming CND intersessional events for post-UNGASS implementation

11th October 2016

On 8th September 2016, the Secretariat of the Commission on Narcotic Drugs proposed the holding of a series of CND intersessional events in order to discuss the implementation of the UNGASS outcome document, which was adopted by consensus on 19th April 2016. The objective of these intersessional meetings is to share evidence and examples of best practice on each of the key thematic areas covered by the outcome document.

The Civil Society Forum on Drugs is presenting below a number of case studies on selected thematic chapters of the UNGASS outcome document in order to feed into the discussions of the Horizontal Drugs Group as they draft the EU statements to be delivered at the CND intersessionals on 27<sup>th</sup> and 28<sup>th</sup> October 2016.

UNGASS Chapter 5 on 'Evolving reality, trends and existing circumstances, emerging and persistent challenges and threats; including new psychoactive substances, in conformity with the three international drug control conventions and other relevant international instruments'

#### A harm reduction approach towards NPS in recreational settings and in the dark web

In some Central-Eastern European countries, such as Hungary, the rapid spread of the injecting use of new psychoactive substances (NPS) has become a major public health problem. In Hungary, the majority of people who inject drugs shifted from heroin and amphetamines to new psychoactive stimulants (mostly Cathinones). These substances are injected much more frequently (heroin injected 3-4 times a day, Cathinones are injected 15-20 times a day) and in a riskier way (as they do not need cooking/preparation) than traditional illicit drugs. This has led to a huge increase in the sharing of injecting equipment among people who inject drugs in a period when access to harm reduction services went down because of budget constraints and the withdrawal of international donors from the region. Consequently, the prevalence of hepatitis C among people who inject drugs almost doubled between 2011 and 2014 while there was a drop in the number of distributed needles and syringes. In 2014, the two largest needle and syringe programmes (NSPs) were closed in Budapest. NSPs were gateways to other services, such as drug treatment and social rehabilitation programmes and without them, the most marginalised people have less access to the treatment system as well.

In several other EU countries, a number of initiatives have started operating in party settings several countries (including in Spain, but also in non-EU countries such as Switzerland, Colombia and Mexico) to test the drugs used by consumers and therefore reduce the potential harms associated with them. Energy Control<sup>1</sup> was established in Barcelona in 1997 in Spain, as a pioneer project to reduce the risks associated with recreational drug use. Since 1999, Energy Control has offered a Drug Checking Service in order to inform the users about the composition of the drugs and thus advise them on lower-risk consumption. The organisation also offers customised, non-moralistic and scientific drug information to people who use drugs. As online drug markets are also expanding quickly across Europe, Energy Control has also started offering information on the internet to reduce the risk and harms related to specific substances.

<sup>&</sup>lt;sup>1</sup> For more information, see: www.energycontrol.org

## UNGASS Chapter 6 on 'Strengthening international cooperation based on the principle of common and shared responsibility'

#### Examples of civil society participation in promoting international cooperation on drug control

Represented in thirteen countries across four continents, the Dianova network<sup>2</sup> regularly engages in a cooperation process and exchange of good practice in the field of drug control. The preparation for the 2016 UNGASS on the world drug problem was an opportunity to make use of this ongoing cooperation process to raise awareness of UNGASS issues and process and to determine a joint position on addiction and drug policies. This process resulted in an inclusive, open debate fuelled by the work of experts and civil society representatives, process that was presented at the European Parliament in the framework of the consultation forum on drug policy in September 2015. Since the closure of the UNGASS session, the Dianova network has continued to disseminate this joint position as well as the UNGASS outcome document to stakeholders intervening in the addiction field and the public. The Dianova network is now working to frame its actions under the operational recommendations of the UNGASS outcome document.

Similarly, in France, 13 national NGOs and networks have formed an informal civil society platform to interact with the French delegation in the lead up to the UNGASS. The civil society platform has been interacting with French diplomats and UN drug control bodies, offering expertise and experiences on drug policy to feed into the UNGASS process and outcomes through press releases and conferences on International drug policies and international events to inform the general public; participation in the Commission on Narcotic Drugs, organisation of side events, promotion of a documented and evidence-based harm reduction policy; regular papers and contributions to relevant UN entities (UNODC, INCB, WHO, etc.) and through international NGO channels; providing inputs into the UNGASS outcome document through meetings with the official delegation and diplomatic entities, paper contributions, etc. As a result, in 2013 and 2014, the MILDECA supported the involvement of one representative from the civil society platform in the preparatory segments of the UNGASS, and pushed for some of our ideas in the debates. These activities have strengthened the relationship between the platform and the French delegation throughout the UNGASS process – ensuring that the voice of NGOs was heard in multilateral settings.

# UNGASS Chapter 7 on 'Alternative development; regional, interregional and international cooperation on development-oriented balanced drug policy; addressing socio-economic issues'

#### Linking the objectives and indicators of drug control with the Sustainable Development Goals

In the lead up to the UNGASS, the International Drug Policy Consortium, along with other NGO partners working on drug policy and on development matters, have worked towards developing a series of new metrics and indicators to measure the effectiveness of drug control by linking drug policy to the Sustainable Development Goals and the Human Development Index. The aim is to move away from only using *process* indicators (such as numbers of drug arrests, incarceration rates, crops eradicated and amounts seized) as a measure of success as they provide little reflection on the impacts of drug policy with regards to improved food security and access to licit markets, access to land tenure, education, employment and healthcare, improvement in security and gender equality, as well as reductions in poverty, corruption and impunity – all of which being critical aspects of a development-oriented approach to drug policy. New indicators would include % of people living above the poverty line in communities affected by the drug trade; % of people having access to stable housing in communities affected by illicit crop production or vulnerable to recruitment by drug traffickers; number of people being displaced from their land due to crop eradication activities and other law

<sup>&</sup>lt;sup>2</sup> For more information, see: <a href="https://www.dianova.ngo/">https://www.dianova.ngo/</a>

enforcement or militarised efforts; numbers of people who benefited from alternatives to incarceration or punishment; % of people having access to education and jobs in the licit economy; number of people having access to healthcare, including prevention, risk and harm reduction and treatment; number of women who use drugs accessing harm reduction and treatment; number of overdose deaths; incidence of HIV, hepatitis C and tuberculosis among drug users; % of people suffering from moderate to severe pain; etc.<sup>3</sup>

<sup>&</sup>lt;sup>3</sup> For more information, see: Chapter 4.1 'A development-oriented approach to drug control' in: International Drug Policy Consortium (2016), *IDPC drug policy guide*, <a href="http://idpc.net/publications/2016/03/idpc-drug-policy-guide-3rd-edition">http://idpc.net/publications/2016/03/idpc-drug-policy-guide-3rd-edition</a>