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**Follow-up to the implementation at the national,
regional and international levels of all
commitments, as reflected in the Ministerial
Declaration of 2019, to address and counter the
world drug problem**

Statement submitted by International Drug Policy Consortium (IDPC), a non-governmental organization in special consultative status with the Economic and Social Council**

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* [E/CN.7/2021/1](#).

** Issued without formal editing.



Taking stock of half a decade of drug policy: An evaluation of UNGASS implementation

19 April 2021 marks the five-year anniversary of the 2016 United Nations General Assembly Special Session (UNGASS) on drugs. This is an opportunity to take stock of progress made on the implementation of the numerous recommendations included in the UNGASS Outcome Document. This paper is a summary of a [report prepared by the International Drug Policy Consortium \(IDPC\)](#) that will be [launched](#) at the 64th session of the CND. Using desk-based research, and drawing on data and analysis from United Nations reports, academia, civil society and the community, the report focuses on six critical areas: public health, development, human rights, civil society engagement, United Nations agency collaboration and cooperation, and drug policy evaluation.

In the last five years, progress has undeniably been made on some aspects of global drug policy. For instance, the shift in rhetoric from a narrow alternative development and crop eradication focus to a sustainable development approach to drug policy is welcome, as is the stronger emphasis given to women's rights in drug policy. A limited number of countries and jurisdictions have decriminalised drug use and possession for personal use, improved access to opioids and cannabis for medical purposes, scaled up harm reduction services, adopted decarceration measures and implemented sustainable livelihoods programmes. In the area of United Nations systemwide coherence, the adoption of the United Nations System Common Position on drug-related matters and the creation of its implementation Task Team constitute important milestones in ensuring that drug policy is better aligned with the United Nations objectives of promoting human rights, advancing development and ensuring peace and security.

Yet, available data and testimonies from the ground show that the gap between rhetoric and meaningful change for communities affected by punitive drug control is widening. People who use drugs continue to be criminalised in most countries, with 550,000 people sentenced to prison for drug use offences. Access to life-saving harm reduction and treatment services remains unjustifiably restricted, especially for women, youth, ethnic minorities and the LGBTQ+ community. Although some countries have introduced harm reduction services, others have either closed them down or let them collapse due to lack of financial support (e.g. in countries like Brazil, Bulgaria or the Philippines). The COVID-19 pandemic has further limited access. Billions of people in need are denied access to essential medications for the treatment of pain and palliative care, while drug dependence treatment is only available to one in eight people who need it.

People continue to be incarcerated in overcrowded prisons for disproportionate amounts of time for non-violent drug offences. United Nations data reports that 2.5 million people worldwide are sentenced for drug offences, representing one in five people deprived of liberty. Women are disproportionately affected, with women incarcerated for drug offences globally representing 35% of the total female prison population – a percentage reaching 50 to 80% in various Latin American and Asian countries. Hundreds of thousands more are detained against their will, and often ill-treated, in compulsory drug detention centres and in private “rehabilitation” clinics.

People suspected of drug offences are also victims of police abuse, extrajudicial killings and may face the death penalty, with at least 3,000 people currently on death row for drug offences. Groups in situations of vulnerability, in particular women, youth, LGBTQ+, indigenous peoples and ethnic communities, remain disproportionately affected by punitive drug control.

Farmers cultivating plants destined for the illegal drug market face forced eradication, health harms caused by the use of chemicals, violence at the hands of law enforcement and military forces, and find themselves in situations of poverty and marginalisation without any state support. In urban areas, criminalisation and incarceration continue

to be the dominant approach against those involved in illegal drug supply for subsistence purposes, thus undermining the sustainable urban development approach needed to address existing racial, ethnic, class and gender inequalities.

In parallel, civil society space has become increasingly restricted at both national and international levels, while the meaningful involvement of people most affected remains hampered by criminalisation and stigmatisation.

In many respects, the COVID-19 pandemic has exacerbated the situations of vulnerability of people in contact with the illegal drug market. Data suggests that the availability of harm reduction services worsened during the pandemic, with services closing down, lack of funding due to shifting political and budget priorities, travel restrictions, etc. The pandemic has also showed the urgency of reducing prison overcrowding. At the outset of the pandemic, many countries had announced urgent measures to reduce the number of people deprived of their liberty, but a large part of these releases have not been implemented and, in many cases, have arbitrarily excluded people convicted of drug offences. Lastly, despite the resilience of civil society and communities to continue their critical advocacy and service delivery work in face of COVID-19 disruptions, civil society space in national and international level policy making has been drastically reduced.

On balance, the positive reforms observed in some countries and jurisdictions has not been able to counterbalance the lack of progress made in others – nor the concerning moves towards even more repressive approaches in countries such as Brazil, Colombia, Hungary, the Philippines, Russia and others since 2016.

This bleak picture of the global state of play highlights the need for urgent reforms, both globally and at national level. Below, we propose some key recommendations for policy makers for the coming five to ten years of drug policy. They will require courage to move away from the status quo, in order to truly address, and redress, the ongoing harms caused by punitive drug control on all affected communities worldwide.

Recommendations for the next decade of drug policy¹

- Ensure the meaningful participation of civil society, in particular affected communities, in local, national, regional and international drug policy making, implementation, monitoring and evaluation, and actively promote civil society space via institutionalised channels for participation, political and financial support.
- Ensure the wide dissemination and operationalisation of the UN System Common Position and a stronger, adequately funded, role for its implementation Task Team, including in data collection.
- Improve access to, and sustainable funding for, harm reduction, treatment and controlled medicines, with specific emphasis on women, LGBTQ+ communities, youth, ethnic minorities and people deprived of their liberty – including amidst the COVID-19 pandemic. Ensure that all health interventions are strictly voluntary, based on scientific evidence, and respectful of the rights and dignity of those wishing to access them.
- Adopt development-oriented drug policies that truly address the poverty, marginalisation, lack of access to land and basic services, in both rural and urban areas, including for women, ethnic and racial minorities and indigenous groups.
- Review drug laws and policies to remove all punishments for drug use and possession for personal use, ensure proportionate penalties and sentencing practices, use meaningful alternatives to incarceration and punishment and ensure access to legal aid – with the goal of using prison only as a means of last resort.

¹ Please note that the IDPC report includes a more developed set of recommendations.

- Abolish the death penalty in all circumstances, and ensure that penalties for those currently on death row are commuted to a sentence commensurate with the severity of the offence.
 - Ensure timely access to justice and reparations for survivors of human rights violations committed in the name of drug control, such as extrajudicial executions, police brutality, and abuses committed in public and private drug treatment centres.
 - Reduce the prominence of indicators focusing on the overall scale of and flows within the illegal drug market, and focus instead on more meaningful indicators to measure progress towards protecting health, improving human rights, welfare, gender equality, and reducing levels of violence.
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