

The Paradigma Global Youth Coalition Asks for the UNODC High Level Ministerial Segment 2019

This document conveys the Asks of the Paradigma Global Youth Coalition to the Commission on Narcotic Drugs and its Member States in preparation for the 2019 UNODC High Level Ministerial Segment. We encourage Member States to recognize that goals and targets narrowly focused on eliminating the use, trafficking, cultivation and manufacture of drugs at all costs has adverse consequences for young people and other affected groups. We invite you to work *with*, and not *for*, the populations your drug control commitments affect the most - young people, people who use drugs, women, indigenous people, people from diverse cultural backgrounds, and other marginalized communities.

Ask #1: Model a balanced approach to drugs and drug education

- Empower young people to properly respond to drugs.
- Allow and invest in research related to medical benefits of psychoactive substances such as cannabis, psilocybin, ayahuasca, ibogaine, and MDMA.

Ask #2: Shift drug policies towards public health and human rights based approaches

- Review and repeal the punitive laws associated with the criminalization of drug use and possession of drugs for personal and medical use.
- Align supply reduction priorities with those of public health and human rights to create healthy and safe communities.
- Acknowledge and include harm reduction initiatives in global drug policies and targets.
- Invest in harm reduction services such as drug checking interventions and early warning systems, needle and syringe provision and supervised injection facilities without age restrictions, educational material about minimizing risks associated with using drugs, and nightlife harm reduction.

Ask #3: Leave no one behind

- Commit to aligning the UNODC's approach to addressing the world drug problem with the Sustainable Development Goals.
- Ensure active and meaningful participation of civil society youth and youth-related organizations in the development, implementation, and evaluation of drug policies and drug education programs.
- Collaborate further with other relevant UN entities for a streamlined, multisectoral approach to drug policy.

'Paradigma' is a global coalition of youth-led organizations working towards establishing evidence-based drug policies that reduce the harms of drug use and are grounded in human rights principles. The organizations that make up the Paradigma coalition represent thousands of young people in every region of the world. We acknowledge the many impacts of drug use, drug markets, and drug control on our communities, but particularly note that punitive drug policies have failed our generation and our society, impeding the development of young people and our full enjoyment of basic human rights. Governments typically justify their drug policies by invoking the need to protect young people. But we can speak for ourselves, and if policies are being implemented in our name, our voices must be heard.

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Introduction

Despite extensive efforts to reduce the consumption and supply of illicit substances, drug misuse and drug control policies continue to be major causes for concern, impacting the health, well-being, and development of young people. While one of the main goals of global drug policy has always been to protect the world's youth, the voices of young people, particularly young people who use drugs, have often been absent from the debate. The members of Paradigma, with our extensive experience working on these issues on the ground, are best suited to represent issues that directly affect youth populations.

We believe that harm reduction measures should be embraced by the UNODC and its Member States, and enshrined in the international drug control conventions as a matter of urgency. The world's young people are often in close contact with drugs and the past fifty years of prohibitive policies have done little to change that fact, with the 2018 World Drug Report finding drug use and associated health consequences are highest among young people (1). Our work, in direct contact with our peers, has demonstrated access to evidence-based education and health services without fear of punishment can create a *culture of safety* around drug use. Such a culture would best serve both the goals of Paradigma and that of broader UN bodies such as the WHO, UNAIDS, and UNICEF, namely a global consensus on drug policy based on evidence, compassion, health, and human rights.

Noting the present approach to drug control has failed to achieve the objectives set forth in the 2009 Political Declaration and Plan of Action, we sincerely hope the upcoming High Level Ministerial Session re-evaluates the effectiveness of a zero tolerance approach to drugs. In order to forge an international drug policy approach which is effective in reducing drug-related harms and ensuring the health and well-being of young people worldwide, it is critical international bodies and Member States consult and act on the input of a broader range of youth voices than have previously been consulted. While the motto of the 2016 UNGASS was "A Better Tomorrow for the World's Youth", we wish for a drug policy approach which seeks a better tomorrow *with* the world's youth.

Ask #1: Model a balanced approach to drugs and drug education

Empower young people to properly respond to drugs. Most youth are exposed to drugs at a very early age through their home and social environments. Factors such as poverty, racism, and gender discrimination play a large role in the exposure of drugs to children (2). Assuming a drug free world is possible when these factors are present is irresponsible and ignorant of the situation on the ground in many countries. The best way to ensure youth are able to properly respond to the presence of drug use in their lives is to give them honest, evidence-based information about drugs in a language they can grasp, instead of leaving them to learn for themselves in a potentially dangerous environment. Since its inception in the 1980s many countries around the world have used the Drug Abuse Resistance and Education (D.A.R.E.) program in the United States as a model for how to educate young people about drugs. D.A.R.E. instructs young people to "just say no", using the threat of arrest and exaggerating the harms of drug use to scare young people away from drugs.

This tactic has backfired as drug use has steadily increased in the US (3) and other countries (4) that have implemented abstinence-based drug education programs. It has also left young people unprepared to deal with overdose and other life-threatening harms that can come from drug misuse. Schools that have begun to experiment with evidence-based, peer led drug education models are seeing positive results. One high school in the United States that implemented such a program saw not only a reduction in students caught with drugs, but a significant drop in disruptive behavior in general (5).

Allow and invest in research related to medical benefits of psychoactive substances such as cannabis, psilocybin, ayahuasca, ibogaine, and MDMA. The international drug control regime has, as part of its mandate, the requirement of enabling access to controlled substances for medical and scientific uses. In practice, however, medical and scientific research of these substances has been severely limited due to regulatory and financial obstacles. These impediments have significantly slowed down research which would potentially uncover the beneficial uses of various controlled substances (6). Recent research has shown various substances scheduled as illicit could help with mental health issues such as depression or post-traumatic stress disorder (PTSD) (7), and the rapid proliferation of medical cannabis underscores the need for a drug policy approach which prioritizes medical and scientific research and is grounded in evidence. We ask for increased funding

opportunities for researchers, organizations and youth especially in underdeveloped countries to enhance qualitative use and treatment

Ask #2: Shift drug policies towards public health and human rights based approaches

Review and repeal the punitive laws associated with the criminalization of drug use and possession of drugs for personal use. The harms of criminalizing people who use drugs far outweigh the effect of punitive legislation. This is particularly important for young people, students, homeless youth, and members of marginalized communities whose future employment and educational prospects are often severely jeopardized by criminal records. Furthermore, implementation of drug policy has disproportionately affected racial minorities. We see decriminalization as a first step to reversing these harmful effects of the War on Drugs. We call on the CND to implement these suggestions in line with the recommendations put forth in the *Joint United Nations Statement on Ending Discrimination in Health Care Settings (8)*.

Align supply reduction priorities with those of public health and human rights to create healthy and safe communities. This could be accomplished by adopting public health priorities as key performance indicators, adopting rights-based and trauma-informed approaches, and creating favorable environments for the access of health services and investing in community policing/community liaison, and could include:

- Legalization and immediate end to forceful/mandatory treatments
- Public health indicators could include the number of people referred to services and/or accessing services and reductions in overdoses and crisis events.
- Rights-based approaches could be implemented by utilizing powers of discretion and diversion for non-violent offences, publishing all policies and practices, providing fair systems for the reporting of misconduct and by reducing and eliminating racial and other disparities in searches and arrests.
- A trauma-informed approach could be implemented by providing all law enforcement professionals training in the effect of trauma on behaviours, implementing policies and practices which reduce the trauma of interactions with law enforcement and the immediate cessation of stop and search programs for the personal possession of drugs.
- Access to health services may be facilitated by dialogue with healthcare providers (e.g. festival welfare services, drug consumption rooms) and specific policing strategies that maximize uptake e.g. the creation of 'no go' areas and/or the reduction of high visibility police proximal to services. Law enforcement should exercise their powers of discretion and implement clear diversion/referral strategies to health services.
- Investments in community policing/community liaison would help build the relationships between communities and law enforcement and increase their capacity to understand and respond to specific needs (e.g. people living in poor neighborhoods, migrants, members of the LGBTIQ+ community)

Acknowledge and include harm reduction initiatives in global drug policies and targets. Policies targeting a drug free world leave people behind, but policies which include harm reduction leave no one behind. Completely abstaining from drugs is not a reality for everyone, and operating under a goal of a 'drug free world' leaves many unequipped to deal with the potential harms of drug use. Studies have proven that harm reduction initiatives such as syringe exchange programs, drug checking interventions, and safe injection sites save lives. Cities in Australia that have implemented syringe exchange programs have seen an 18.6% annual decrease in HIV prevalence as opposed to a 8.1% decrease in cities without these programs (9). A recent study in Canada gathered evidence suggesting supervised injection sites are responsible for a 67% decrease in hospital calls related to overdose, decreased overdose mortality, and a decrease in HIV infections (10). Overdose prevention and naloxone distribution programs reduce the rate of fatal opioid overdoses (11). The European Monitoring Centre for Drugs and Drug Addiction published a paper in 2017 suggesting the presence of drug checking interventions helped save several lives in Belgium and the Netherlands, while the absence of such interventions in the United Kingdom may be partially responsible for the deaths of four young people exposed to the same batch of pills in 2015 (12). Harm reduction initiatives such as these are difficult to implement without acknowledging the realities of drug use and when operating under the goal of a drug free world.

Thus, lives are lost as a result. We ask for the meaningful inclusion of drug users and young people, better access to harm reduction services and treatments age and gender based treatments.

Invest in harm reduction services such as drug checking interventions, needle and syringe provision and supervised injection facilities without age restrictions, educational material about minimizing risks associated with using drugs, and nightlife harm reduction. Many organizations wish to provide these basic services, but are discouraged or disallowed from doing so because of the fear of criminal prosecution and lack of possibilities for funding. A change is urgently needed, as harm reduction is well-documented as an evidence-based intervention that saves lives. For every \$1 AUD invested in harm reduction, \$27 is saved on medical treatment (13), making this approach more reasonable from an economic standpoint. Harm reduction and public health approaches seek to empower and include people who use drugs, hence leaving no one behind, in line with health promotion and community development principles.

Ask #3: Leave no one behind

Commit to aligning UNODC approaches to addressing the world drug problem with the Sustainable Development Goals. 'Reach the furthest behind first' by recognizing the stigma and discrimination experienced by people who use drugs, in particular young people who use drugs. Put people first in your commitment to counter the world drug problem. The goals of the Sustainable Development Agenda (in particular; SDG 3 Good Health and Wellbeing, SDG 4 Quality Education, SDG 10 Reduced Inequalities and SDG 16 Peace, Justice and Strong Institutions) will not be reached unless the UNODC and its Member States work together to implement the targets. The world in which drug users live is in reality very repressive and unresponsive to their rights and exists against the provisions of Goal 16 that seeks to promote and enforce non-discriminatory laws and policies for sustainable development. In this regard, we need to employ people power and system centered approach towards administering justice and fostering peace where the rights of the drug users will be prioritized and protected. This is vital in developing countries and regions that still lean on treaties that are prohibitive and punitive in nature. Seeing that the preambles of all three Conventions state that their fundamental objective is to protect the 'health and welfare of mankind', we use this as a basis to call on the CND to end extra-judicial killings, and to condemn the use of the death penalty for drug offences, ensure robust mechanisms for ratification and domestication of a people centered and human rights based approach to addressing drug use by member states. Ensure the linkages go beyond SDGs to previously agreed upon human rights frameworks such as Universal declaration of human rights, 2016 Political Declaration from the High Level meeting and others. Address human rights violation against young people who use drugs as a structural intervention given the systematic exclusion these violations perpetuate

Ensure active and meaningful participation of civil society youth and youth-related organizations in the development, implementation and evaluation of drug policies and programs. We welcome the Civil Society Task Force's initiative in appointing an "Affected Populations: Youth" representative as a member of the Civil Society Task Force. However, we are disappointed in the overall lack of opportunities presented for youth to engage in these discussions at the international level. Young people are too commonly excluded from discussions regarding their own future, and we believe there is room to further open the debate and include more diverse youth voices. We invite all member states to meaningfully include a youth member on any delegation to future sessions, meetings, and events regarding drug policy and request side events focusing on youth are prioritized.

Collaborate further with other UN entities for a streamlined multisectoral approach to drug policy.

UNICEF has condemned repressive drug policies that use violence and intimidation to dissuade young people from using drugs, such as the ongoing drug war in the Philippines (14). They also acknowledge the importance of developing drug education programs for youth that are based in evidence and backed by scientific data that does not over-exaggerate information (15). UNICEF recommends young people are to be involved in all stages of the development of prevention programmes, noting the success of programs that meaningfully allow youth to express their views on drugs to their peers.

The World Health Organization, recognizing injection drug use is one of the fastest growing routes of HIV infection among young people, has recognized the importance of harm reduction as a part of a pragmatic public health policy (16). They have

developed several resources outlining how people who inject drugs can reduce negative health consequences. Since 1999 the WHO has coordinated the Safe Injection Global Network (SIGN), which assembles all major stakeholders to promote a series of policy, management, and advocacy tools to help countries access safe, affordable equipment as well as promote the training of health staff and rational use of injections (17).

The UN Convention on the Rights of the Child provides the most appropriate framework from which considerations of impacts on young people should be drawn. Development of drug control strategies, outcomes, and evaluations must not seek to merely reduce drug use, but rather consider the breadth of impacts of youth drug use, involvement in drug trade, and exposure to supply- and demand-reduction efforts. Drug control policies should never override a young persons' access to human rights.

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