54 Sessions of CND
The United Nations Office on Drugs and Crime at it again...

The agenda of this year began with eight draft resolutions on the lines of: access to substances for research and other scientific purposes; alternative development; cooperation and regulation of international regulatory framework regarding precursor chemicals; involvement of civil society in CND; strategies for rehabilitation and reintegration of drug-related disorders that are person-centered and, improving the quality and collection of statistical data on the subject.

Why should young people have a say at the CND?

Like many years, at least two-thirds of the official interventions during the CND related to the importance to ‘protecting our future generations from damages’. However, is still difficult to count over 10 young heads in the crowd.

As in many other fora, young people continue to be invisible and inexistent in this UN discussion and thus, have little to none impact in the decision making of policies that affect our lives.

While many of these policy changes need to be pushed from a national level, it is still important that we are present and express our opinions, don’t you think so?

We do! And this is what we said to begin with: English / Spanish / Arabic / German

RESOLUTIONS FOR THE 54 SESSIONS OF THE CND:

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By Elisabeth Szerencsics

According to UNAIDS data, the use of contaminated injecting equipment among injecting drug users is one of the major routes of HIV transmission in many countries contributing up to 10% of all transmissions worldwide and to more than 30% excluding Sub-Saharan Africa. Approximately three million people who inject drugs are living with HIV. Increased access to HIV prevention services was noted but still the median coverage in 2009 was only of 32%.

Global estimates remark that, on average, less than two clean needles are provided per month per person who injects drugs and there are about eight people on opioid substitution treatment for every 100 people who inject drugs.

The HIV epidemic in Eastern Europe and Central Asia mainly affects people who inject drugs. In the Russian Federation, approximately 37% of the 1.8 million people injecting drug users are living with HIV, and due HIV transmission to their sexual partners, the number of women living with HIV is also growing.

Facing these facts, it is obvious that the response to HIV among drug users is to offer needle/syringe-exchange programs and to stabilise the life of a drug user through opioid substitution therapy and effective anti-retroviral treatment. Punitive laws such as penalties for carrying clean needles, block effective responses to HIV.

During the 54th Session of the CND, the resolution “Achieving zero new infections of HIV among injecting drug users and other at-risk populations” was finally adopted, showing concern on the fact that “the scale and coverage of HIV-prevention services for injecting drug users is far away from adequate in many countries with a high prevalence of injecting drug use”. Furthermore, the resolution contains the reaffirmation of the central importance of promoting the involvement of persons living with or affected by HIV and drug use in shaping responses to the HIV/AIDS epidemic as well as with civil society.

In addition, the CND took note of the 2011-2015 UNAIDS strategy, which commits Member States to achieve zero new infections, zero-AIDS-related deaths and the elimination of stigma and discrimination. In this sense, the resolutions requests that the UNODC scales up evidence-based interventions, which have shown to reduce the transmission of HIV in injecting drug users.

How can youth movements support activists to change global drug policy?

Take a closer look at your country's drug policy and make yourself aware if it is a punitive-only approach for drug offences. Get to know about punishment for possession and/or drug use and find out if they are disproportionate. Ask if harm reduction services like needle-exchange programs and opioid substitution programs are available or if the right to confidentiality is ensured for users of these. Summarise this information and share it with your colleagues and networks. Remember that lack of information is a statement too.

Regardless of if you are focused on SRHR or HIV, drugs policies affect our lives and work as youth movements. Without ensuring harm reduction services for drug users we will not be able respond effectively to HIV! While during the 54th Session of the CND speakers mentioned the obligation of countries to protect young people, we as young people, know that a prevention-only strategy is irrational and it is thus our obligation to raise our voice, give a statement and make a change.
WHAT WENT DOWN IN THE COMMITTEE OF THE WHOLE THIS YEAR

By Robin Pollard

The “committee of the whole” is the forum in which the draft resolutions of the CND are negotiated and as such, these meetings often involve lengthy discussions on language and technical issues that are explored in greater depth than in the plenary session. However, it also provides a forum through which national delegations can bring new issues to the committee to be discussed and approved under a consensual format.

There are a number of key themes that are represented in draft resolutions in this year’s CND meeting. The first general theme was based on increasing and strengthening the principle of joint responsibility and cooperation in various fields of national and international drug policy. The second theme sought to address new and evolving issues such as the growth of Africa as a drug transit route and as a growing drug consumption region, growing global problems of precursor drug use, alternative development options to reduce dependence on drug production and so on.

The third general theme explored the operations and working of the UNODC, focussing on how it can be improved, creating more meaningful evaluation of the UNODC functions and greater levels of data collection.

Below you will find a summary of the main areas of discussion, consensus and antagonism in this year’s committee:

L2 - PROMOTING INTERNATIONAL COOPERATION TO STOP DRUGGED DRIVING

In addressing the concern of member states about the lack of legislation and quantifiable data surrounding drug use and driving, this resolution sought to foster greater data collection resources sharing about how member states address this issue. There was widespread support for expanding focus of this area, and as such it was agreed upon pretty unanimously with the principle of shared responsibility being the dominant issue being raised. One can expect this issue to again be raised in the next annual CND meeting.

L3 - ENSURING AVAILABILITY OF REFERENCE AND TEST SAMPLES OF CONTROLLED SUBSTANCES AT DRUG TESTING LABS FOR SCIENTIFIC PURPOSES

This resolution intended to improve the performance of drug testing labs which require small amounts of controlled substances to carry out the necessary tests and are require controlled substances for accurate forensic data and monitoring systems. With drug testing laboratories in many countries struggling to get the controlled substances they need for testing, there is a need for the improved distribution of test samples for quality control purposes by the UNODC and INCB. This resolution was also supported by all sides with little amendments. The only meaningful amendments sought to emphasise the needs for these substances to be supplied for scientific rather than medical purposes and all the quality and maintenance of such stocks will be assured by the UNODC and the INCB.

L4 - FOLLOW UP ON THE ORGANIZATION OF AN INTERNATIONAL WORKSHOP AND CONFERENCE ON ALTERNATIVE DEVELOPMENT

With the UNODC keen to explore how alternative development models can help avert increasing dependence on drug production in many developing countries by providing alternative means of economically viable, legal alternatives to growing coca bush, opium poppy or cannabis plant, this resolution re-
reflects the growing importance of this theme in the international arena. The resolution sought to increase the cooperation of South-South countries in developing these alternative models and the discussion agreed to hold further meetings on this issue so one can expect a conference later in the year on this issue.

L5 - STRENGTHENING INTERNATIONAL COOPERATION & REGULATORY INSTITUTIONAL FRAMEWORKS FOR CONTROL OF CHEMICAL PRECURSORS

Discussion on this resolution focused on the need for joint responsibility and the need for creating greater cooperation and much of the text amendments were based on finding language for this resolution. The role of the UNODC is to be strengthened with countries providing more information and data to the UNODC to oversee and monitor this growing issue. However a special mention was also made to ensuring that controlling pre-cursors does not affect the UNODC ensuring that pre-cursors are available for legitimate medical uses.

L6 - EFFICIENT MEASURES TO IMPROVE PARTICIPATION OF CIVIL SOCIETY IN CND

This resolution was certainly the most contentious and took the longest time out of all of the resolutions to gain a consensus (of sorts). While a bloc of certain countries were arguing that there had to be a need for civil society groups to be involved in national and international policy making, certain countries (Russia and China) sought to amend the resolution to the extent where its entire purpose was threatened. The general theme of the resolution proposed that: NGO’s and affected populations should play a participatory role in drug demand and supply policy, NGO’s should highlight issues and substantially contribute to address the world drug problem, governments must consult with NGO’s in developing policy and programmes, Governments must create an environment that promotes innovation and takes account of promising approaches and reports back to the UNODC with their experiences of working with civil society.

Although a consensus was finally reached, it seemed many of the delegations who originally proposed the resolution were unhappy with how much it had been watered down, leaving very little content in the approved resolution that ensures countries have to consult civil society groups and organisations.

L9 - PROMOTING ADEQUATE AVAILABILITY OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES FOR MEDICAL AND SCIENTIFIC PURPOSES

Most the discussion on this resolution was based on slight language amendments on the text with very little development being made on the resolution. Once the language and other amendments had been made, the resolution passed with focus on the UNODC and INCB playing a central role in regulating these substances.

L10 - MEASURES TO SUPPORT AFRICAN STATES IN EFFORTS TO COMBAT DRUGS

There was a broad consensus here about the need to support African states in addressing drug issues. Some disagreement occurred as to what extent financial and logistical support should be provided. The development of a financial fund had been earlier rejected but there was hope by some African states that it will be addressed in the future. The biggest disagreement came between the Algerian and Moroccan delegations. Algeria insisted on the cannabis problems being made explicit in the text and that it must be addressed. The Moroccan delegation, (Morocco is home to a large cannabis growing areas) felt no reason for this inclusion and hinted that there was an underlying issue between the two countries. A middle ground was finally reached here angering the Algerian delegation who felt their suggestions were not properly addressed.
L12 - REVITALISING THE PRINCIPLE OF SHARED RESPONSIBILITY

Again, linguistic arguments and issues dominated another resolution. The main thing to come out of this resolution was that the exchange of experience and good practices is something that must continue among member states and that greater communication should occur between member states outside of the CND meetings.

L13 - PROMOTING INTERNATIONAL COOPERATION HELPING STATES THAT ARE AFFECTED BY THE TRANSIT OF DRUGS

Discussion on this resolution again was mainly limited to discussing slight text amendments and grammatical issues though there was an important inclusion made and supported by a number of countries specifying that transit countries should have much greater involvement rather than being dictated to by other countries and that they should receive the necessary financial and logistical support for addressing drug

L15 - ACHIEVING ZERO NEW INFECTIONS OF HIV AMONGST INJECTING DRUG USERS AND OTHER AT RISK POPULATION

There were some arguments about how broadening this resolution to incorporate other infections other than HIV could be made but these were resisted particularly by the Russian delegation would repeatedly added to text to remove anything to specific which could impact on their national policy towards HIV and drug use. China followed with Russia’s argument. While the UK delegation sought to extend the reach of this resolution to improve the care provided to those closely affected by HIV like family members, the compromises eventually made toned down the original text of the resolution substantially until it is finally based on scientific studies and in learnings of the various data sources available on the subject.

It is due this reason that it is rather easy for the discussions between the ambassadors of member states to turn incomprehensible, contradictory and sometimes even cynical. The gap between the reality on the field particularly in regard to children and youth is abysmal.

Why are there no young people in official delegations to talk about their real needs? Youn people should participate in these discussions because they affect our lives!

Do not lose faith, I insist. Drug policies are drawn based on socio-political contexts, prejudice, values, traditions and norms that may only be changed through much information, collective learning and broad, deep, continuous and relentless debates about drugs and the people who use them. Are you ready to talk about drugs?

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