



UNODC
United Nations Office on Drugs and Crime

An international perspective to drug use

Giovanna Campello, Chief



3 GOOD HEALTH AND WELL-BEING




PTRS
PREVENTION TREATMENT REHABILITATION SECTION



5 GENDER EQUALITY

1

The right to health at the centre of the drug control system since the beginning



UNODC
United Nations Office on Drugs and Crime

The International Drug Control Conventions

- Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol
- Convention on Psychotropic Substances of 1971
- United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 with final acts and resolutions

Single Convention on Narcotic Drugs, 1961, as amended by the 1972 Protocol amending the Single Convention on Narcotic Drugs, 1961


Preamble

The Parties,

Concerned with the health and welfare of mankind,

Recognizing that the medical use of narcotic drugs continues to be indispensable for the relief of pain and suffering and that adequate provision must be made to ensure the availability of narcotic drugs for such purposes,

Recognizing that addiction to narcotic drugs constitutes a serious evil for the individual and is fraught with social and economic danger to mankind,



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The right to health of people who need access to controlled medicines



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NORTH AMERICA HAS 7,500 TIMES MORE DOSES OF PAIN MEDICATION
THAN CENTRAL AFRICA



*opioids controlled under the Single Convention of 1961



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A balance is possible



- Ensuring access while preventing diversion and non-medical use
- INCB, UNODC, WHO
- **Safe and effective prescription practices** supported by:
 - Legislation and policy
 - Supply chain management
 - Capacity of doctors, nurses, pharmacists
 - Acceptance of patients, families and the general public



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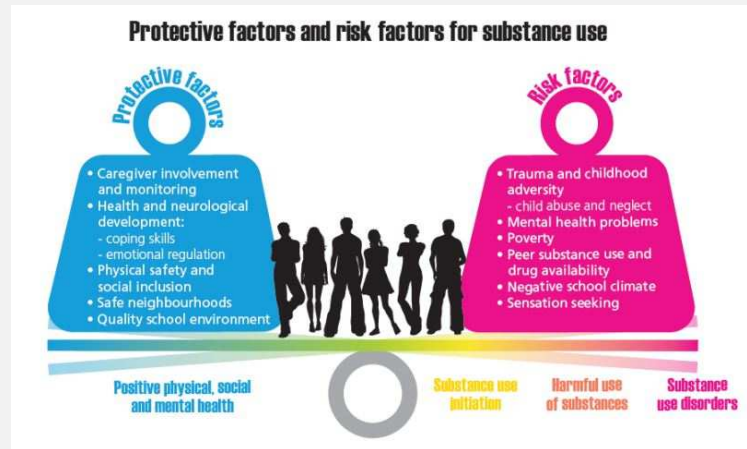


**The right to health of
people vulnerable to
starting to using drugs**



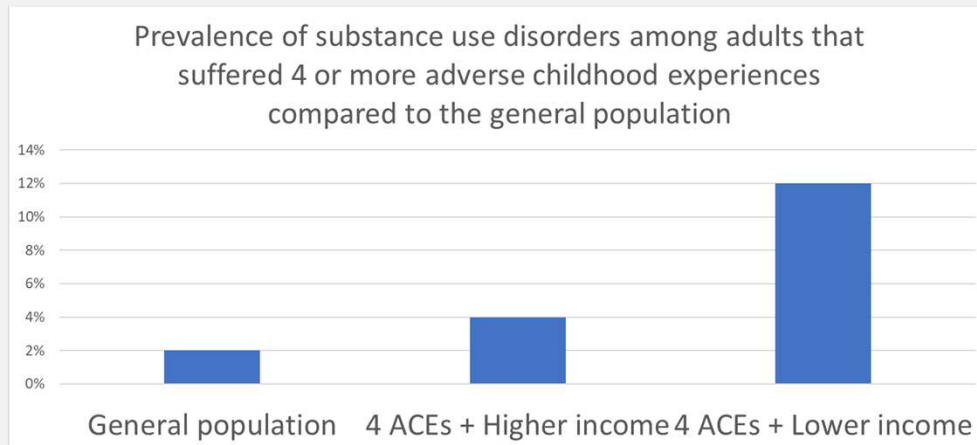
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A wide range of vulnerability factors outside of the control of the individual



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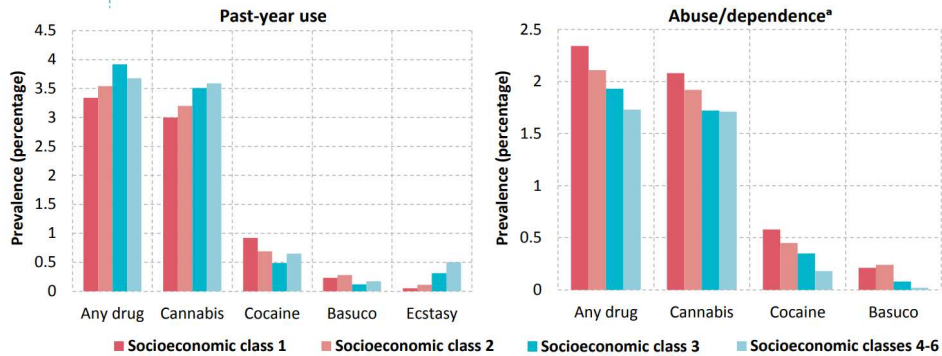
The key role of adverse childhood experiences and inequalities



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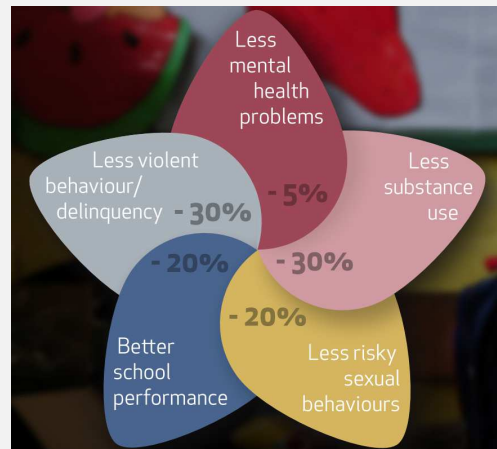
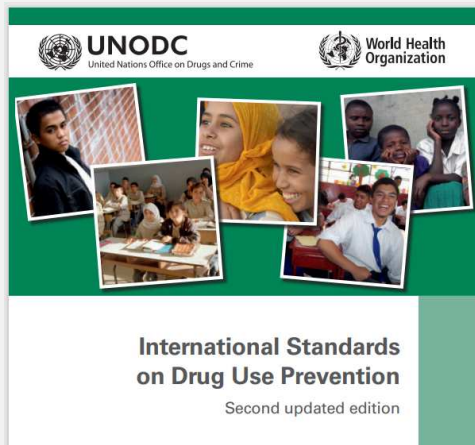
More people with drug use disorders among poorer parts of the population

FIG. 10 Prevalence of past-year drug use and of drug abuse or dependence^a in Colombia, by socioeconomic class,^b 2013



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Support the healthy and safe development of children and youth through evidence-based prevention



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Practice based on scientific evidence

Interventions that are
effective AND safe
according to scientific
evidence



Do no harm



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What about inequality?



Family UNited



Strong Families



Lions Quest



UNPLUGGED



Youth Initiative

- Evidence-based prevention, including UNODC tools have been found to be effective in:
 - Poor communities
 - Violent communities
 - Both boys and girls
 - Refugees, displaced and otherwise traumatized populations



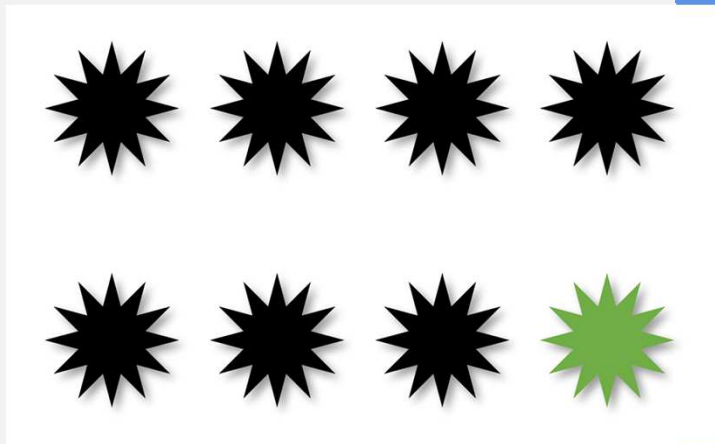
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The right to health of people who use drugs and people with drug use disorders



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Globally limited access to any drug dependence treatment and care service (1:8)



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Particularly serious situation for women and adolescents

EVEN THOUGH ALMOST ONE IN TWO AMPHETAMINES USERS IS A WOMAN, LESS THAN ONE IN FIVE PERSONS IN TREATMENT FOR AMPHETAMINES IS A WOMAN

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As well as for people in contact with the criminal justice system and in prison settings

drug use in prison

20%

drug use among the general population

5.3%

A higher proportion of women than men are in prison for drug-related offences

714,000 female prisoners

35% drug offences

9.6 million male prisoners

19% drug offences

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Source: Based on Roy Walmsley, "World prison population list", 11th ed. (Institute for Criminal Policy Research, 2016) and Roy Walmsley, "World female imprisonment list", 4th ed. (Institute for Criminal Policy Research, 2017). Share of prisoners for drug offences based on 50 Member States (UNODC, Special data collections on persons held in prisons (2010-2014), United Nations Surveys on Crime Trends and the Operations of Criminal Justice Systems (UN-CTS).

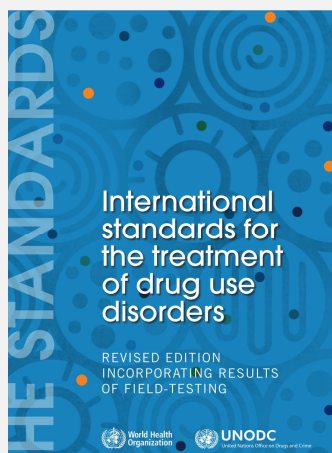
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Poor quality and human rights violations in the name of drug treatment & care



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Access to quality treatment and care services – We know what to do



- Voluntary
- Based on scientific-evidence (effective and safe)
- Tailored to the needs of populations in especially vulnerable circumstances
 - Youth – Women – People in contact with the criminal justice system – People in prison



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And many evidence-based tools are available

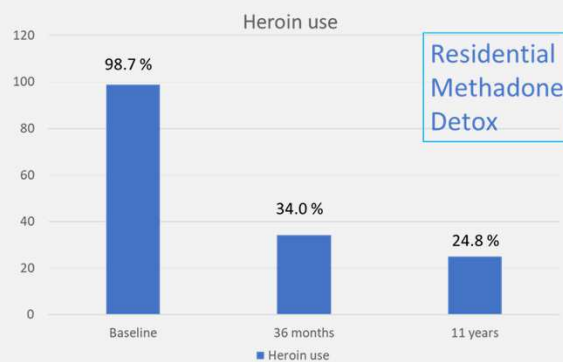
The image displays a grid of nine evidence-based tools for drug treatment, each with a small representative image and a text box:

- Quality assurance mechanism:** Includes a small table with columns for 'Standard', 'Criterion A', and 'Criterion B', and rows for 'SOS management', 'SOS', 'ML', and 'MS'.
- Psychosocial therapies:** Shows a person sitting at a table in a clinical setting.
- Adolescents:** Shows a group of people in a classroom or meeting.
- SOS Management of opioid overdose:** Shows a person in a uniform, possibly a paramedic or police officer.
- Social inclusion and support to recovery:** Shows a person in a blue uniform, possibly a healthcare worker.
- Alternatives to conviction and punishment:** Shows a green icon of a scale of justice with a heart rate line.
- OAT and other medication assisted therapy:** Shows a person in a white lab coat holding a syringe.
- Women, including pregnant women:** Shows a person in a white lab coat holding a syringe.
- Treatment of drug use and other mental health disorders in prison settings:** Shows a person in a white lab coat holding a syringe.



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Evidence-based treatment decreases DRUG USE, thus shrinking the illicit market

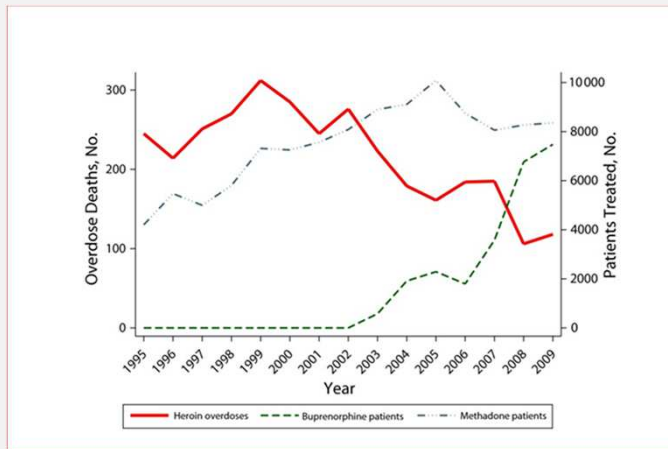


Australian Treatment Outcome Study (Teesson et al., Addiction, 2015)



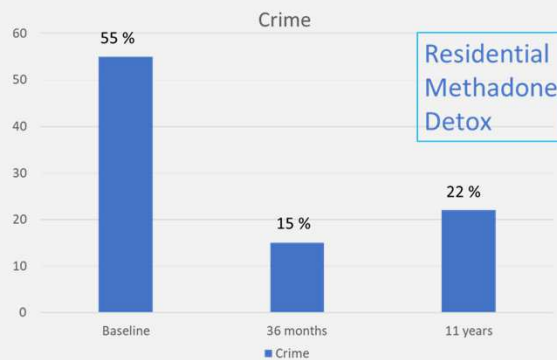
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Evidence-based treatment decreases OVERDOSES



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Evidence-based treatment decreases CRIME

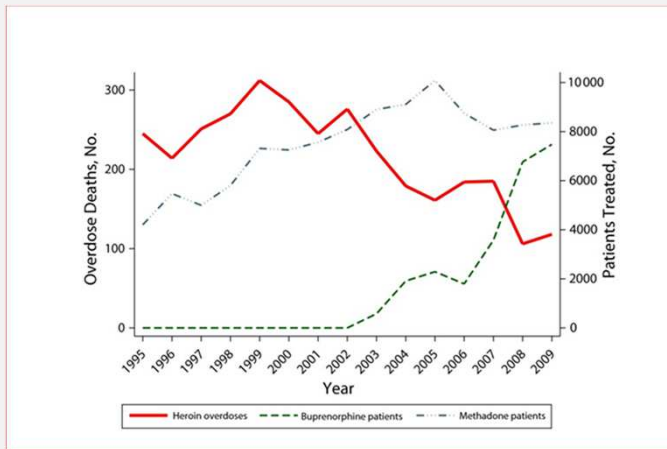


Australian Treatment Outcome Study (Teesson et al., Addiction, 2015)



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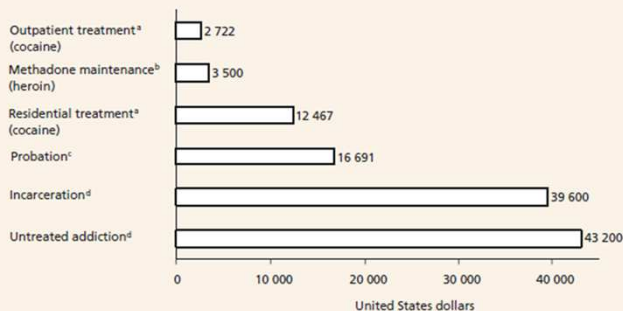
Evidence-based treatment decreases INCARCERATION, PRISON OVERCROWDING AND ASSOCIATED PROBLEMS



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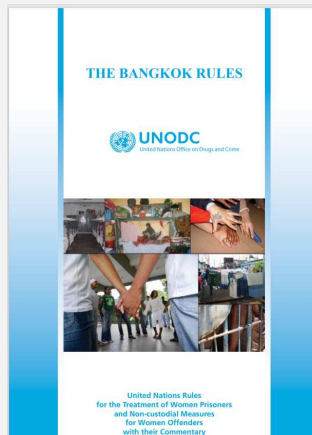
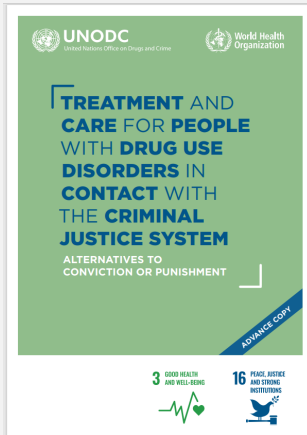
Evidence-based treatment COSTS LESS than probation, incarceration and doing nothing

Figure 1
Costs of drug abuse treatment in the USA per person, per year
(United States dollars)



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Expand alternatives to conviction or punishment for appropriate cases of a minor nature



45/110. United Nations Standard Minimum Rules for Non-custodial Measures (The Tokyo Rules)

The General Assembly,

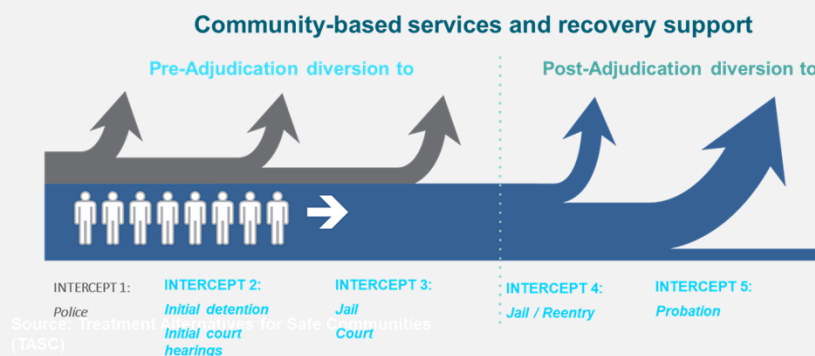
Bearing in mind the Universal Declaration of Human Rights⁵ and the International Covenant on Civil and Political Rights,³³ as well as other international human rights instruments pertaining to the rights of persons in conflict with the law,

Bearing in mind also the Standard Minimum Rules for the Treatment of Prisoners,⁷⁹ adopted by the First United Nations Congress on the Prevention of Crime and the Treatment of Offenders, and the important contribution of those Rules to national policies and practices,



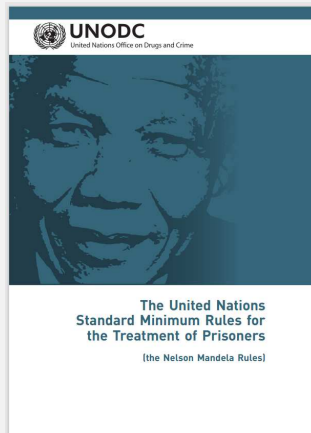
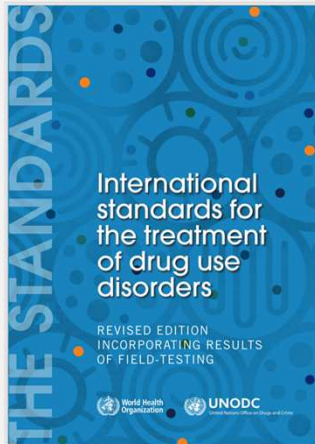
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At any stage of contact with the criminal justice system



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Expand services in prison and LINK them to those in the community



Continuity of
care
Prison
↔
Community



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Let us continue to advocate for putting the health and wellbeing of people at the centre of the system to address drugs



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THANK YOU!

Prevention, Treatment and Rehabilitation Section

CND **UNITED NATIONS COMMISSION ON NARCOTIC DRUGS**
POLICYMAKING BODY OF THE UNITED NATIONS SYSTEM WITH PRIME RESPONSIBILITY FOR DRUG-RELATED MATTERS

