



European Union

**United Nations Office on Drugs and Crime
54th Session of the Commission on Narcotic Drugs, 21-25 March 2011
Statement by Hungary on behalf of the European Union
Agenda item 6/a
21-25 March 2011**

AS DELIVERED

Implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem: Demand reduction and related measures

Thank you, Mr Chairperson,

Excellencies, Ladies and Gentlemen,

1. I have the honour to speak on behalf of the European Union (EU). The Candidate Countries Croatia, the Former Yugoslav Republic of Macedonia¹, Iceland, Montenegro and Turkey, the Countries of the Stabilisation and Association Process and the potential candidates Albania, Bosnia and Herzegovina, Serbia, as well as Andorra, Armenia, Georgia, Liechtenstein, Republic of Moldova, Norway and Ukraine associate themselves with this statement.
2. The European Union would like to thank the Secretariat for its valuable work in producing the documentation for this agenda item and has taken note of the report on the world situation with regard to drug abuse (E/CN.7/2011/2).
3. The European Union remains firmly committed to reducing the prevalence of drug use among the population and to reduce the adverse social and health consequences caused by the use of illicit drugs. We need to improve the effectiveness of measures to reduce drug use and its consequences by improving the coverage, quality and effectiveness of demand reduction interventions, with particular attention to vulnerable groups, including young people, as well as high-risk groups and the prevention of polydrug use.
4. Concerning the report on the world drug situation with regard to drug abuse (E/CN.7/2011/2), the EU welcomes the findings of the secretariat that the use of amphetamine type stimulants (ATS) in Europe, North America and Oceania is stabilising or decreasing while prevalence rates of cannabis have generally declined in recent years, notwithstanding the fact that the highest level of cannabis use continue to be found in these regions. The EU is genuinely concerned that the prevalence rates of amphetamine type stimulants (ATS) show that globally there are now more ATS users than cocaine and heroin users combined and that the use of these substances

¹ Croatia and The Former Yugoslav Republic of Macedonia continue to be part of the Stabilisation and Association Process

is increasing in Asia, with methamphetamine use increasing in parts of East and South-East Asia. Amphetamine use is also increasing in the Near and Middle East.

5. Mr Chairperson, in response to the world drug problem, the European Union reaffirms its full commitment to the principle of shared responsibility and underlines that it is vital to pursue an integrated, multidisciplinary and balanced approach, in which demand reduction plays a crucial role that should be continuously supported through initiatives and programmes. The European Union is of the view that demand reduction measures should be humane, evidence-based and in line with fundamental freedoms and human rights Conventions. Drug demand reduction represents a key element in the EU Drugs Strategy 2005–2012 and the EU Drugs Action Plan 2009–2012 which signal the Union's ongoing commitment to measurably reduce the use of illicit drugs and the harm it causes to individuals, public health and society at large.

6. One of the objectives of the European Union Drug Strategy 2005-2012 is that evaluation continues to be an integral part of the European Union approach to drugs policy. Knowledge about the merits and shortcomings of current actions and activities are essential in order to have a reduction of drug problems. This objective is also reiterated in the European Union Drugs Action Plan 2009-2012.

7. The European Union welcomes the Report of the Executive Director on the Measures to protect children and young people from drug abuse (E/CN.7/2011/13.). While the report identifies some important developments, i.e. the increased availability of life-skills oriented prevention programmes in schools, some important concerns remain unresolved. These include the fact that in many countries prevention programmes still only target the general population while only a limited number of countries target vulnerable groups with programmes that address specific needs. Furthermore, an ongoing concern remains the inequality between the deliveries of drug-related services in prison in comparison with those in the community. The EU therefore fully agrees with the recommendation of the report, that *“Member States should continue to strive to increase the range and above all the coverage of evidence-based and ethical interventions for both the prevention of drug use and the treatment and care of drug dependence, targeting the general population, but also groups particularly at risk and in prison settings.”*

7. bis The Council of the European Union in its Recommendation of 18th June 2003 on the prevention and reduction of health-related harm associated with drug dependence called on members states to consider making available drug abusers in prison access to services similar to those provided to drug abusers not in prison, in a way that does not compromise the continuous and overall efforts of keeping drugs out of prison.

8. Mr Chairperson, the European Union would like emphasise its commitment to prevent and reduce the adverse effects of illicit drug use on society, especially as they impact on public health, social cohesion and public order. Acknowledging the negative role that poverty, social exclusion, stigmatization and marginalization and the lack of prospects may have with regard to increased drug use, especially among the younger generations, the European Union continues to support demand reduction initiatives in third countries, stressing all these initiatives should be fully consistent with the basic principles of dignity and human rights of drug dependant persons. Certain European Union Member States and the European Commission fund projects in different parts of the world covering a range of demand reduction measures. Furthermore, the EU stresses the importance of the role and commitment of NGOs and civil society in the field of drug demand reduction.

9. It is also for that reason that the European Union notes with great concern the continuation of the downward trend in the number of Member States submitting data on the drug use situation in their country by the Annual Reports Questionnaire. The availability of reliable and comparable data – in particular on epidemiological trends regarding mortality and drug-related blood-borne infections as well as responses to them - is of outmost importance in order to understand and being able to respond to the global drug phenomenon. The European Union has therefore prepared a draft resolution on *“Improving quality and building monitoring capacity for the collection, reporting and analysis of data on the world drugs problem and policy responses to it”*, focusing on data collection related capacity building, technical assistance and improvement of international scientific standards in this field.

10. We would also like to express our full support to the UNODC-WHO Joint Programme on drug dependence, treatment and care as it represents a milestone in the development of comprehensive, integrated health-based approaches and address drug use disorders in an evidence-based and humanitarian way, challenging stigma and discrimination with prevention, early intervention, treatment, care, rehabilitation, social reintegration and related support services.

11. We also welcome the INCB supplement report on the availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes and would like to strongly encourage the mutual efforts of WHO and INCB in this field to assist Member States in improving access to essential controlled medicines to relief pain and suffering by – inter alia - enhancing the exchange of expertise and best-practices and by ensuring proper regulation and administration. We would like to draw attention on the caution in interpreting data on the use of controlled medicines in specific countries, as these may be influenced by health care systems and cultural differences.

12. At this point, Mr Chairperson, the European Union would like to point to the alarming situation with regard to HIV/AIDS and Hepatitis C. We are deeply concerned by the global presence of the HIV/AIDS and Hepatitis C epidemics and their linkages, in particular with injecting drug use, as highlighted in the Executive Director’s report on responding to the prevalence of HIV/AIDS and other blood-borne diseases among drug users (E/CN.7/2010/11) and also in the 2008 UNAIDS Report on Global AIDS Epidemic. We also recall the General Assembly High-Level Meeting on AIDS held in June 2006 which unanimously adopted a Political Declaration in which Member States reaffirmed the targets set out in the 2001 Declaration of Commitment on HIV/AIDS, and committed themselves to pursuing all necessary efforts towards the goal of universal access to HIV/AIDS prevention, treatment, care and support by the year 2010. In this regard we take note of events, seminars and conferences organized since the last Session of the Commission on Narcotic Drugs. Although significant progress has been made, much more is needed if these goals are to be met, particularly in countries where the pandemic is concentrated amongst vulnerable groups. To this end we take note of the decision taken by the Programme Co-ordinating Board of UNAIDS in December 2010 that endorsed the new UNAIDS Strategy 2011-2015 entitled "Getting to Zero" which commits UNAIDS, and as such UNODC as co-convenor for Injecting Drug Users and Prisoners, to achieving Zero New Infections, Zero AIDS related deaths and Zero stigma and discrimination by the year 2015. We support the goals contained in this strategy and urge UNODC to step up it's activities to meet these objectives.

13. The EU welcomes the organization of the UNODC Scientific Workshop on the Nonmedical Use of Prescription Drugs in June 2010 Vienna.

14. Mr Chairperson, the EU considers the respect for human dignity and human rights as fundamental principles for the implementation of the international drug control Treaties and global drug policy as a whole, a principle which was reconfirmed in the Political Declaration. The prevention of social and economic exclusion and stigma, the availability and accessibility of demand reduction services – also in prison settings – as well as the safeguarding of the principle of proportionality of responses, the right to due process should never be considered in contradiction with or compromised by any counter narcotic efforts and initiatives.

Thank you, Ms Chairperson