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## Reports on recent IPU specialized meetings

(c) **Annual Parliamentary Hearing**  
**United Nations Headquarters**  
**Trusteeship Council Chamber, Secretariat Building**  
**8–9 February 2016**

**The world drug problem:  
Taking stock and strengthening the global response**

### Opening

The Hearing served as input to the United Nations General Assembly Special Session (UNGASS) scheduled for 19–21 April 2016 to review the implementation of the 2009 *Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem* (the Political Declaration and Plan of Action), as well as other commitments under three overarching drug control conventions. The meeting examined the views of parliamentarians and other relevant stakeholders from many parts of the world, taking stock of various aspects of the current drug control regime.

The two-day session was opened by the President of the United Nations General Assembly, Mr. M. Lykketoft, and the President of the IPU, Mr. S. Chowdhury. Mr. Lykketoft stressed that parliamentarians can contribute to the debate in three main areas: firstly, parliamentarians express the views and concerns of their constituents and thus bring a multitude of voices to the table; secondly, in their role as lawmakers, they are able to draft and adopt relevant legal frameworks; and thirdly, as custodians of parliamentary accountability, they oversee the implementation of international commitments, can call for action and demand answers when necessary.

Mr. Chowdhury said that there are evidently deep political divides regarding the appropriate response to the drug problem. In recent years, we have seen an increasingly heated debate about the effectiveness of the so-called “war on drugs”. The debate reflects significant changes in the way that some people see the issues in the light of the facts on the ground. Noting that no one is immune from addiction, whether to caffeine, alcohol, nicotine, or drugs, he invited participants to approach the debate non-judgmentally, with compassion and an open mind. He emphasized that drug abuse and addiction was a public health issue. The hundreds of thousands of drug-related deaths that occurred each year should be viewed with an eye on the eight million annual deaths from tobacco and alcohol combined. He also stressed that drug control policy needed to better differentiate among the different types of drugs and better distinguish between the issues of production, transit and consumption.

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Mr. Y. Fedotov, Executive Director of the United Nations Office on Drugs and Crime described tackling the world drug problem as an essential part of promoting healthy and inclusive societies, and as part of the overall efforts to achieve the 2030 Agenda for Sustainable Development. He reiterated that preparation for the special session had entailed a comprehensive analytical process. The session had focused international attention on a number of existing and emerging challenges, including heroin trafficking; the nexus of organized crime and terrorism; concern about increasing drug consumption in Africa; and the negative impacts of drug-related violence on stability and development in Central America. He also said that the potential for alternative development that would empower poor farmers to break away from illicit cultivation and establish viable livelihoods had not been adequately addressed.

Mr. Fedotov added that all three drug conventions recognized the importance of controlled substances for medical purposes. Despite that recognition, problems of availability persisted in many parts of the world: people continued to be in severe pain and were unable to obtain relief or adequate care. Prevention efforts and services for people with drug-use disorders also continued to fall short: only one out of every six drug users across the world was receiving treatment. The discussions that had led to UNGASS had emphasized the importance of shared responsibility for those challenges and had highlighted the need for balanced and comprehensive policies, rooted in the international drug control conventions. Those policies should include an examination of alternatives to conviction for minor drug-related offences, which could reduce prison overcrowding and prevent the recruitment of vulnerable individuals by criminals and extremists. Drugs-related policies should also include robust responses designed to disrupt organized crime networks, promote alternative livelihoods and increase access to essential controlled medicines, while preventing their diversion and abuse. The United Nations Office on Drugs and Crime had a mandate that encompassed justice, the rule of law and health: it was using that mandate to assist Member States to put balanced drug-control policies into action on the ground through its network of field offices and programmes.

All of the opening remarks may be found on the IPU website, at <http://ipu.org/Splz-e/unga16.htm>.

### **Keynote address**

Ambassador Khaled Shamaa, Chair of the UNGASS Board, said that the roots of the current drug-control regime dated back to the 1912 Opium Convention. That convention was the first to recognize the importance of protecting individuals from drug abuse and dependence, while at the same time ensuring access to drugs for medical and scientific purposes. Furthermore, it recognized the transnational nature of the problem and instituted the principle of shared responsibility.

From the 1912 Convention, drug control evolved in several stages: the Single Convention on Narcotic Drugs, 1954 (as amended by the 1972 Protocol), the Convention on Psychotropic Substances, 1971 and the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988. The 2009 Political Declaration and Plan of Action stated that trafficking and abuse pose a major threat to the health, dignity, and hopes of millions of people. The international community would meet in April 2016 to review progress towards implementing the Political Declaration and Plan of Action. Member States had expressed their grave concern that the world drug problem continues to constitute a serious threat to public health, safety and the well-being of mankind, to national security and the sovereignty of States, and to political stability and sustainable development. Member States were now mandated to agree on operational recommendations to address those concerns.

According to Ambassador Shamaa, major challenges still remained, and new ones were emerging. It was clear that improved prevention strategies and interventions were needed. In his view it was also clear that treatment, rehabilitation and reintegration still presented a great challenge. Those challenges included shrinking health budgets, disease outbreaks across the world, and the need to build capacity in prevention, treatment and rehabilitation, including for HIV. The development of criminal activities related to drug trafficking also posed challenges that, in many instances, States could not tackle without international cooperation. Those challenges included money laundering, corruption, trafficking in weapons and persons, the growing links between drug trafficking and terrorism, and the problem of ensuring improved access to controlled substances to alleviate pain and suffering while preventing their diversion. Drugs were evolving: for example, the world now had to contend with new synthetic designer drugs, new psychotropic substances, the misuse of pharmaceuticals, and amphetamine-type stimulants. Despite various attempts to tackle illicit crop

cultivation through alternative development programmes, it still remained a challenge. Such alternative programmes should be more effectively developed and linked to other activities as part of broader efforts towards achieving the Sustainable Development Goals.

Ambassador Shamaa said that the international drug control system was dynamic and evolving. Continuous and determined efforts were needed to implement the system, based on its founding principles, on shared responsibility, and on taking a balanced and integrated approach.

## Discussion

The two-day session examined three broad topics:

- The world drug problem in perspective – the evolution of drug control
- The global response to drugs – can it work more effectively?
- Drug prevention and treatment from the standpoint of sustainable development and human rights – what is required?

In three moderated sessions, invited panellists (see [Annex](#)) offered their thoughts on each topic and then responded to a number of related issues raised by the moderator. The discussions concluded with a question and answer session between the panel and all other participants.

Many participants described the specific measures their governments had implemented to tackle the drug problem. Those measures included drug control commissions, national anti-drug action plans, cooperation and intelligence-sharing with neighbouring countries, campaigns to arrest corrupt police officers, military personnel and politicians, support for the prevention and medical treatment of drug addiction, the privatization of social reintegration activities, policies on alternative crops in drug cultivation areas, and encouraging the involvement of other relevant government bodies such as anti-money-laundering and customs agencies.

Taking account of country-specific nuances, feedback from participants revealed two distinct viewpoints. Some supported the current global drug control regime, as practiced in most parts of the world: that is, focusing on illicit drugs eradication and the punishment of those in the drugs trade, whether producers, traffickers or consumers (who are normally the most frequently punished). Other participants said that the drugs control regime had not only failed to significantly reduce levels of drug use but had also led to unintended consequences that had caused untold harm to society.

### **The death penalty**

The debate became most intense on the matter of death sentences for those convicted of drugs-related activities. Participants either felt that the death penalty was acceptable for certain offences, or that it was always wrong.

One participant asked: "Why, if we are prepared to accept so many deaths from the drug trade – our children and relatives overdosing, our loved ones caught up in drug-related violence... can we not accept that it is right to countenance the execution of those who bring about such misery?" However, another participant said that the death penalty was always wrong: it diminished those who administered it and it was not a proven deterrent.

The discussions raised a fundamental question: are the drug control conventions flexible enough to accommodate strikingly different views about the objectives and effects of existing policies? Supporters of both sides of the debate said that it was a false dilemma to suggest that the only choice was between complete prohibition and complete legalization. Some argued that there was a third way: a gradual route to regulation of psychoactive substance use, with an emphasis on public health and human rights.

Participants said that the topic was complex, because the starting-points and expectations of those in the discussion were so different. One speaker pointed out that such confusion was highly beneficial to those in the drugs trade.

Several speakers suggested that all countries should be free to interpret the drug control conventions as they wished, and to draft relevant domestic law accordingly. However, others said that the lack of international cohesion was contributing to the problem, and noted that some countries had decriminalized the possession of certain types of drug.

More detailed views expressed on both sides of the debate are summarised below.

**Viewpoint 1: drug control is working**

Many participants mentioned that the drug control conventions had the highest rates of ratification among all United Nations treaties and conventions. There was no need to review the conventions themselves at UNGASS 2016. Instead, the discussion should focus on strengthening consensus around the existing framework and building on existing achievements. New trends and facts should be taken into account, as should the particular circumstances of each Member State and the challenges they faced. Despite their age, the three conventions remained relevant, and were a solid basis for combating the menace of drugs in all its forms. However, more robust implementation was needed.

It was noted that, while parties to the conventions were required to criminalize the production of certain substances (stipulated by the International Narcotics Control Board), the conventions also allowed for considerable flexibility over penalties for drug-related offences. These could include treatment rather than custody for first time offenders, and allowing States to opt out of aspects of the conventions that were considered incompatible with a State's constitutional principles.

It was also noted that the conventions provided for States to conduct time- and quantity-limited pilot schemes on both criminalization and legalization. Latest figures showed that 3.5 per cent of the world population took drugs, with 2.5 per cent using cannabis. Some observed that levels of alcohol and tobacco consumption were much higher than for illicit drugs. Others noted that, even if the world had lost the battle on alcohol and tobacco, there was no reason to lose the battle for the control of drugs as well.

Other participants said that the impact of the drug problem had been unevenly felt around the world. Although East Asia had the same levels of drug production and trafficking as Latin America, there was less drug-related violence in East Asia. In some parts of Latin America the view that the current system has failed was widespread and there had been a strong push for "reform". However, in East Asia and the Middle East there was no such sense of failure, and the focus was still on combating drugs. States in Asia tended to have a strong emphasis on criminalization and to see no cause for "reform".

**Problems of decriminalization**

One participant reported that, until the 1980s, the drug problem was largely unknown in his country. As drug-related problems began to grow due to trafficking, his Government decided to impose the death penalty for some drugs offences. However following a public outcry, that law was repealed. The participant said that, as awareness of drugs began to grow in his country, people had begun to go into drug trafficking and cannabis cultivation. The result was an increase in crime, and more latterly, in terrorism. He said that the crimes of Boko Haram were only possible because people in that group used drugs. His view was that decriminalization would make drugs more available; people would try it, because it was not illegal, and so create more problems than it solved. He did not think that decriminalization would work in his country, even if it might in others. For him, strict penalties for possession and use were the most effective policies.

Some participants said that legalization of illicit drugs would be counterproductive: States must not resort to expedient policies, even when unlawful activities became difficult to control. The link was drawn between drugs and other organized crime activities. Others suggested that legalization could lead to family conflicts, in which adolescents defied their parents by taking drugs. Still others noted that "restrictive" government policies had resulted in lower levels of drug use, and had thus benefited societies.

It was noted that drug-affected developing countries that had decided to apply the conventions strictly had had to find the necessary political will, train personnel and establish effective national strategies to implement their decision. In addition, most such countries faced further disadvantages, such as a lack of equipment and budgetary constraints. However, such countries were eligible for enhanced cooperation from the United Nations Office on Drugs and Crime and from the developed countries of the world. International technical assistance, could also be extremely helpful in strengthening countries' national anti-drug legislation.

**Fears of abusing flexibility**

One participant from Africa said that, even though his country had strict laws and effective institutions, it was known as a transit route for hard drugs, the supply of which was in the hands of a dangerous cartel. Although large amounts of drugs were periodically destroyed, those who could afford it always managed to buy what they

needed. One drug that had recently emerged was based on alcohol and was produced in the rural areas of his constituency. His Government had recently adopted a vigorous policy of destroying any facilities that produced these alcohol-based narcotics.

In his view, there could be no let-up in the robust approach used to pursue the drug problem. Seeking to inject flexibility, or to apply exceptions for medical reasons, would not work in Africa, and particularly not in his country. Such flexibility would be abused.

One participant said that his country had increased its intelligence and policing activities by a considerable margin since 2013. That decision had been accompanied by a major rise in arrests for drug possession, and a 32 per cent drop in the number of drug-related crimes. In recent years, more drugs production sites had been eliminated and more drugs had been intercepted before reaching users. For his country, the “tough approach” to drugs had been a success. Other countries had adopted a comprehensive and balanced approach to the drug issue, including the promotion of alternative development and livelihoods, which had proved to be effective.

Some made the point that the existing drug control regime paid insufficient attention to those who profited from drugs. In response, one speaker described her country’s efforts to compel those purchasing expensive items to account for the source of their money. Any items that could not be accounted for would be seized and sold to help defray the high public health costs of the drug problem.

One participant suggested that some countries, including his own, were victims of the drug problem. He said that drug consumption had recently increased sharply in his country. It was polluting the whole of society, particularly educated young people. He suggested that the IPU and United Nations arrange a special meeting to discuss how to protect such victims.

#### **Negative results of policy relaxation**

One participant from Europe noted that, after some experimentation in the 1960s and 1970s with legal prescription narcotics, his country had decided to prohibit all individual possession. His country had taken the view that reducing the quantity of narcotics available in a society must reduce the amount of healthcare-related and societal harm caused by them. That should also be the approach throughout the world. As a result of his country’s drugs policy, the number of 16 to 24 year-olds who had tried cannabis was half the average figure for the rest of the European Union.

Several participants pointed out that society could not afford to lower its guard: the drugs trade had shifted from being a matter of personal health and safety to being a threat to society’s institutions.

#### **Viewpoint 2: a different approach is needed**

Those who favoured a new approach raised questions about policy outcomes of the existing drug control regime, about the impact of recent high levels of investment in law enforcement activities and whether law enforcement had been prioritized at the expense of spending on prevention and treatment. They noted that around 83 per cent of people in prison for drug-related offences were convicted of minor possession rather than trafficking. Mandatory sentencing for non-violent drug-related crime had sometimes resulted in minor drug offenders receiving longer sentences than murderers. It was also noted that a disproportionately high percentage of drug-related arrests involved women and that, as more drug users were given custodial sentences, prison overcrowding could lead to problems of security, health and violence.

Some participants suggested that it was unrealistic to argue that existing policies should be better implemented when there had been no improvement in the past. However, many people noted that the conventions were a major step forward, particularly in terms of accepting shared responsibilities. Other participants said that access to information could be improved and that a thorough analysis of the situation was needed to enable the right political agreements to be made, by consensus rather than from above.

Many participants said that drugs should be seen as a public health issue, rather than one of crime and security. The public health consequences of drugs could often be devastating, from the direct effects of ingesting or injecting narcotics, to increased user morbidity and mortality. There were some rare cases of a healthcare-based model: in one South American country for example, drug addiction was recognized as a disease, for which treatment was available.

It was noted that, under a policy of drug control based on crop eradication and incarceration for all drugs offences, regardless of severity, insufficient resources were allocated for treatment purposes, especially to imprisoned addicts. The lack of resources was often a consequence of budgetary shortages, sometimes brought about by past expenditure on the “war on drugs”. For those who supported viewpoint 1 (*drug control is working*), enforcement was more effective than treatment. Supporters of viewpoint 2 (*a different approach is needed*) understood the choice between enforcement and treatment as an ethical issue, where the implementation of that choice was often hampered by financial constraints.

Participants added that the drugs problem was a symptom of deep-seated malaise in society. It was not an isolated issue of security, but was linked to many other aspects of the structure of society that needed to be addressed, including institutional weakness and social vulnerability. Those aspects created opportunities for organized crime to traffic in drugs, weapons and persons, to launder money and to foster corruption. Tackling all of those problems required an integrated and systemic approach.

It was suggested that the next UNGASS should also debate the role of experimentation. Despite much discussion about evidence-based policy, the evidence base for drugs-related policymaking was limited, as the one approach that had been predominantly used for decades had worked to a limited extent in some parts of the world and hardly at all in others. Challenging myths was also important: one speaker said that his country had long thought of itself as a production country, and had only recently acknowledged that it was a consumer country as well.

It was felt that the knowledge of what had not worked was a good basis from which to start experimenting. The evidence indicated that incarcerating users did not reduce drug use and produced severe counterproductive effects in terms of public health, human rights, morbidity and mortality of users, social disruption and criminality. There was no evidence to suggest that the use of the death penalty reduced drug trafficking. The evidence also indicated that attempts to stamp out an illegal economy before legal alternatives could start generating income and jobs could fundamentally destabilize a country, as had been the case in some post-conflict countries. It would also be important to conduct experiments on how to tackle narcoterrorism and drugs-financed insurgency.

Participants underscored that the specific design of drugs policies would need to fit each country's different circumstances, including their arrangements for health-care provision, and for monitoring and understanding the drug problem.

According to some, experiments to improve the effectiveness of policing were necessary. High levels of violence were a sign that essential human rights and public security systems were failing. Law enforcement bodies had a responsibility to ensure that markets, including drugs markets, were not associated with high levels of violence and corruption. Individual policing strategies would be dependent on the local cultural and institutional context. However, there were difficulties with adopting policies in complete freedom, as this appeared to be inconsistent with the spirit of the conventions.

It was noted that, over time, criminalization and enforcement had become the predominant tools of drug control regimes. As a result, increasing number of addicts and casual users had been sentenced to long prison terms for possession offences. That had generated devastating social and economic consequences, and had had negative repercussions on public health. The sense of the profound failure of criminalization- and enforcement-focused policies was one of the key issues driving current reforms. Even among strong proponents of the present drug control regime, such as North American countries, there was a marked move away from the criminalization of non-violent drug offences, with a view to unburdening the prison system and achieving better public health outcomes.

Proponents of moving away from criminalization supported policies based on harm reduction and respect for human rights, including the treatment of addicts. New developments should also be taken into account, including the emergence of new synthetic drugs, the increased use and strength of cannabis, the growth of the illicit market in prescription drugs, the trade in precursors, and increased heroin use.

**The social and cultural context of drug use**

There are different reasons for the failure of classic drug control policies around the world. A participant from the Latin America and Caribbean region noted that even people who knew about Rastafarian music might be unaware that Rastafarianism was a structured religion, with rituals, beliefs and social norms, including rules on food preparation and how medicine was dispensed. Cannabis, or ganja, was of great spiritual importance to the

Rastafari. Certain United Nations conventions should provide protection for such social or cultural nuances in communities like the Rastafari. Yet in the overall fight against drugs, such communities had often been penalized, especially in rural settings, for doing something which they did not consider a crime.

Societies and countries with heritage similar to the Rastafari have been more negatively affected than most as governments have attempted to implement the provisions of the conventions more thoroughly, including by waging the so-called war on drugs. To address those negative effects, there should now be a willingness at the global level to understand in more detail the differences within societies across the world. It was suggested that a worthy goal for UNGASS 2016 would be to ensure that those involved in drugs control find the time, patience and sincerity to look beyond the rules and to develop flexible systems which will achieve equitable treatment for all communities around the world.

Bolivia is an example of a country with a flexible system. For the indigenous peoples, coca leaf represents culture, health and the tradition of their ancestors. While preserving the beneficial features of coca leaf, Bolivia has also eradicated massive quantities of cocaine without outside assistance. Seizures of the drug have increased by more than 170% and destruction of laboratories by over 220%. Now coca-flavoured non-narcotic foods and drinks are being produced; their consumption is being monitored.

Participants discussed the need for more effective policies for dealing with poor producers of cultivation-based drugs, a topic that intersects with the new Sustainable Development Goals. One participant said that the 'war on drugs' was a war on the poor. The failure to provide alternatives for those producers was acknowledged; consideration was given as to whether the failure was due to a lack of integration with development measures such as the sequencing of crop eradication with the delivery of rural development and job creation. It was noted that forced eradication was rarely effective and came at a high cost with regard, for instance, to human rights and the disruption of indigenous ways of life.

Participants added that a more integrated and humane approach was needed in which legal livelihoods allowed producers to find a way out of criminality. Integrated approaches should involve both targeted development and a focus on broader economic growth; they should also be sustained for years, at the cost of substantial resources. The failure to integrate elements such as infrastructure, job creation and human development might result in the failure of the entire alternative livelihood effort. The effectiveness of alternative livelihood approaches was diminished in regions where insecurity from insurgents or organized crime was prevalent.

Participants noted that narcoterrorism policies had often emphasized the eradication of illicit crops as a mechanism of depriving insurgent and terrorist groups of funding. There was overwhelming evidence to show that such policies were counterproductive: during eradication programmes, insurgency activities had tended to intensify and the bonds between the producers and the State had tended to weaken.

Some observed that Developed countries should provide more compensation to those developing countries working on supply control, as crop eradication was very costly in terms of lost incomes for farmers, damage to forests and resultant negative contributions to climate change.

The distinction was drawn between labour-intensive drug economies, such as poppy- or coca-growing, and non-labour-intensive ones such as drug trafficking or the production of methamphetamines. Disrupting the latter was less costly than eradicating illicit crops, but still complex.

Participants also discussed the blurring between supply and demand countries. That distinction had dominated earlier debates on the drug problem, with discussions centring on whether the supply or demand side bore the greater blame for the drug problem. However, many of the traditional supply or transit countries had become major demand markets, making blame assignment a moot point.

#### **Regulation by the government**

One participant noted that a country from the Latin America and Caribbean region had taken an approach often referred to as "legalization," but which was in fact regulation. In that country, the marijuana trade was controlled by the Government. All sellers and consumers had to register with the Government. The Government placed limits on personal cultivation or purchase and set the price lower than black market price so as to eliminate the role of organized crime. The Government also kept genetic information to allow it to determine whether illegal marijuana was being sold.

Participants reminded the Hearing that some listed drugs had positive uses. For example, treatment for glaucoma and another for asthma had been developed using medicines based on cannabis. A few participants called for amendments to the conventions to decriminalize plants and substances that, in their natural state, do not produce any narcotic effect. It was seen as a paradox that the conventions declared some natural plants as illegal but remained silent about hundreds of new chemical drugs. It was also noted that the drug control regime should identify what would be required to regulate the supply of cannabis, coca, opium, and other substances at a global level so that mankind could benefit from their qualities as pain relievers.

According to figures from the International Narcotics Control Board, there was a lack of access to controlled medicines for palliative care and pain relief in more than 80 per cent of the world. Approximately 5 billion people had no access to opioid dependence treatment to alleviate the pain of late-stage cancers, AIDS or traumatic injury. That included millions of refugees, as most host countries removed controlled medicines from emergency kits provided by the World Health Organization and others, despite the lack of evidence that controlled substances would be diverted for abuse in those circumstances. Participants identified the lack of access to certain controlled medicines as one of the most troubling unintended consequences of drug control policies and as an ethical, public health and human rights issue. A possible solution lay in establishing an evidence base and in investing in the continuous education of medical professionals across the world.

Participants suggested that, although pursuing a trafficker would be more effective in the long-run, it was often a deliberate policy to concentrate on arresting drug users to be able to quote impressive-sounding statistics for drugs-related arrests. A lack of government resources also tended to mean that those sent to prison were generally those at the bottom of the trafficking chain.

Participants highlighted that drugs were readily available in prisons. However, there was rarely any provision for treatment, which tended to increase the levels and likelihood of recidivism. Some contended that insufficient funds were being made available for education on the effects of drugs and psychotropic substances.

Several participants noted that people who are traumatized and living under pressure are more likely to become users, and in many cases addicts, for reasons beyond their control. One participant noted that drug trafficking or drug use was often widespread among migrants who were unable to find opportunities to work in their host country.

The participant outlined that migrant-related drug problems were now affecting his country's schools and universities. Criminalization of drug use among refugees was likely to be counterproductive. It was essential that migrant support from donor countries should include provision for drug treatment. Those providing support needed improve their knowledge of effective prevention and demand-reduction measures. Evidence showed that prevention policies tailored to specific sub-groups were the most effective. It was suggested that that was the reason why any policies that had traditionally been effective in western countries were not effective with regard to migrants (although they may have been more cost-effective than imprisonment).

**Measured approach to decriminalization**

One participant noted that in 2001, within the scope of all the drug control conventions that it had signed and ratified, one European country decided to decriminalize the acquisition and possession of small amounts of any type of drug. The country stopped looking at drug consumers as criminals and saw them as people needing help. It was described as a human rights approach, which took crime out of the equation. Drug possession and consumption in that country remained illegal, but instead of being arrested and imprisoned, any drug user discovered by the police, would be referred to a Drug Addiction Dissuasion Commission, typically comprising a lawyer, a doctor and a social worker. The Commission would decide each case and impose a fine, order community service, send the user for treatment, or in many cases, impose no penalty at all. Although originally seen as controversial, in the 16 years that it has been running, it has largely come to be seen as a success. Drug use has fallen progressively and drug-related deaths have dropped. Without the fear of arrest and imprisonment, addicts would be more likely to attend facilities offering treatment for addiction.

One speaker noted that even if more treatment-based approaches were adopted, the drug problem had seemed to become a less urgent priority among politicians in the past ten years. There were calls for that trend to be reversed and for the United Nations to provide the best information to policymakers in order to devise effective policies. Events such as the Hearing and UNGASS were an important element in the provision of such information.

One speaker from a country with relatively low rates of drug abuse and drug-related crime suggested that it was very costly and limiting to concentrate on controlling supply. Controlling demand would be preferable since, where demand existed, supply would follow. He suggested that the best way to control demand was through educational institutions, civil society, and religious bodies, all of which had a greater role to play in helping to change people's mind-set.

Lessons could also be learned from alcohol and tobacco. Experiences such as North American prohibition indicated that driving markets for addictive products underground simply empowers organized crime. Tobacco demonstrated the importance of education: experience of Canada revealed that education, even without a ban, was enough to reduce drastically consumption of cigarettes and other tobacco products.

Finally, several speakers praised the flexibility currently being shown by North America, which was learning from its past mistakes in drug policy as well as responding to its own domestic changes.

#### **Doha Debate**

The fourth session followed the pattern of the "Doha debates" popularized by the BBC.

Two invited panellists gave a short, detailed presentation in favour one of the two main positions to emerge during the Hearing (essentially, "*drug control is working*" or "*a different approach is needed*"). Two other panellists then spoke against it. The panellists also answered questions from the floor, and were given the opportunity to make closing remarks. Lastly, a non-binding vote by show of hands was taken.

The first motion: *Implementing the international legal framework will address the world drug problem*, was upheld by a slim majority.

The second motion: *States should seek alternatives to incarceration when addressing possession of drugs for personal use*, was pronounced a draw.

It should be noted that up to a quarter of participants were absent from the room at the time of the "vote" and several who were still present abstained from voting.

#### **Conclusions**

The conclusions of the Hearing were summarized by IPU Secretary General, Mr. Martin Chungong. He observed that, although there was no consensus on many of the issues discussed, the Hearing had addressed many misunderstandings and set the stage for further political debate in Parliaments and at the United Nations. He said that the Hearing had also revealed some areas of common ground:

- The conventions provided a common baseline and a framework to guide policy in all countries. In that sense, they protected us from the risk of policy fragmentation and established a basis for international cooperation;
- Many countries were missing opportunities by interpreting the conventions with a relatively narrow scope and by not considering the flexibility available. This was particularly in relation to the question of drug use, which should be regarded as a health issue before it was viewed as a crime. Several parliaments were developing legislation to decriminalize and regulate use and possession, offering various models for others to consider;
- the Hearing also highlighted some participants' concerns that the conventions might not provide sufficient space for countries to design innovative policy solutions; each country's policy must address its own circumstances and avoid standardized solutions;
- the need to tackle the root causes of drug use rather than its effects was common to all; many factors had been discussed such as poverty, discrimination, and even the culture of immediate consumer-led gratification; in many countries, the social fabric needed to be strengthened so that everyone felt included;
- the need for a balanced approach to drug control emerged clearly; various possible understandings of that balance had been clarified;
- the evidence showed that most resources continued to be channelled towards punishment and prosecution when compared with treatment; that trend should be reversed;

- action against trafficking by cartels and organized crime organizations should be prioritized over pursuing producers and users; cartels reaped most of the profits and did most damage in terms of criminal activity and violence; in order to get to the drug lords and those most responsible for the damage inflicted on society, governments should “follow the money”;
- When punishment was used as deterrent against drug use or production, it needed to be more commensurate with the actual crime; there should be no uniform way of dealing with all offenders.

Overall, the Hearing brought to light serious concerns from some as to the effectiveness of the current drug control regime while also highlighting its continued relevance and importance to others. In several cases the cure has been worse than the disease.

As highlighted during the discussion on the Sustainable Development Goals, greater emphasis was needed on development measures to tackle the drug problem. If governments helped people out of poverty, provided health care and education, made institutions more transparent and participant, and pro-actively implemented the SDGs, then they would undercut the drivers of the drug problem. In that regard, some alternative development programmes had demonstrated that success is possible, essentially through political support, mobilization of public resources and close cooperation with farmers and communities. Conversely, going after small drug producers like coca and poppy farmers, or persecuting drug users as criminals, was actually more likely to lead to negative development outcomes such as the loss of livelihoods, environmental destruction, and the disappearance of traditional ways of life.

One outcome that received considerable attention during the Hearing concerned the human, social and economic costs of imprisonment. Women were particularly affected because they were often at the bottom of the production and distribution ladder and so more likely to be prosecuted. Any jail term would likely cause stigma and make life impossible after returning to society, and to employment, especially if there were no resources to facilitate re-entry.

It was clear that, even within the narrow framework set by the conventions, many countries could do more to align their policy responses so as to get better results. Countries should be strongly encouraged to look at the evidence – clearly identify the affected populations, the drivers of drug use, the specific circumstances of drug production and more.

Too many countries had yet to develop a proper strategy on drugs as their drug agencies and government departments tended to work in silos. Their response had evolved over time and in a piecemeal way. Participants should put their legal framework in order: parliaments would of course be key to that.

The Hearing had sent a clear message that each country should perform a comprehensive review of its own drug problem and then design an integrated and balanced strategy.

The point of departure had to be the people: they needed the information and education to engage in the policy arena and question the social imagery that coloured too much of the debate. A comprehensive debate was needed in each country which would engage all citizens and stakeholders (such as users, producers, law enforcement, and social sector actors).

## List of speakers

### Opening session

H.E. Mr. Mogens Lykketoft, President of the General Assembly  
Hon. Saber Chowdhury, President of the Inter-Parliamentary Union  
H.E. Mr. Yury Fedotov, Executive Director, United Nations Office on  
Drugs and Crime

### Session I: The world drug problem in perspective – The evolution of drug control

H. E. Ambassador Khaled Shamaa, Chair UNGASS Board (Keynote speaker)  
Ms. Margarita Stolbizer, member, Chamber of Deputies of Argentina  
Mr. Bernard Leroy, Rapporteur, International Narcotics Control Board (INCB)  
Dr. Vanda Felbab-Brown, Senior Fellow, Center for 21st Century Security and Intelligence, Brookings  
Institute

### Session II: The global response to drugs – Can it work more effectively?

Ms. Reem Abu Dalbouth, member, House of Representatives of Jordan  
Mr. Raymond Pryce, member, House of Representatives of Jamaica  
H.E. Ambassador Kairat Abdrakhmanov, Permanent Representative of Kazakhstan to the United  
Nations  
Mr. Alberto Otarola, Executive President of the National Commission for Development and Life  
without Drugs (DEVIDA), Peru  
Ms. Andrea Huber, Policy Director, Penal Reform International

### Session III: Drug prevention and treatment from the standpoint of sustainable development and human rights - What is required?

Ms. Aasiya Nasir, member, National Assembly of Pakistan  
Mr. Javier Sagredo, Advisor, Democratic Governance and Citizen Security, Regional Bureau for Latin  
America and the Caribbean, UNDP  
Mr. Pedro José Arenas García, Observatory of Colombian Coca Growers, former Member of  
Congress of Colombia

### Session IV: Doha Debate

Motion 1: *Implementing the international legal framework will address the world drug problem*

For: Mr. Anti Avsan, member, Parliament of Sweden  
Mr. Kevin Sabet, President, Smart Approaches to Marijuana  
Against: H.E. Ambassador Luis Alfonso De Alba, Permanent Representative of Mexico to the  
International Organizations, Vienna  
Dr. Kasia Malinowska, Director, Global Drug Policy Programme, Open Society  
Foundations

Motion 2: *States should seek alternatives to incarceration when addressing possession of drugs for  
personal use*

For: Ms. Laura Rojas, Senator, Senate of Mexico  
Mr. Nathaniel Erskine-Smith, member, House of Commons of Canada  
Against: Mr. Joshua Lidani, Senator, Chairman Senate Committee on Drugs & Narcotics, Senate  
of Nigeria  
Mr. Ibrahim Ahmed Omer, Speaker of the National Assembly of Sudan

### Closing session

Mr. Martin Chungong, Secretary General of the Inter-Parliamentary Union  
H.E. Mr. Mogens Lykketoft, President of the General Assembly  
Hon. Saber Chowdhury, President of the Inter-Parliamentary Union

**Moderator (all sessions): Ms. Julia Taylor Kennedy**