

## **Commission on Narcotic Drugs (Vienna)**

Ministerial Segment - Special Event

### **A health-centred approach to drug dependence, a multifactorial health disorder**

*Speech (15 March 2019)*

Thank you Chair for giving me the opportunity to intervene on behalf of the International Federation of RC/RC Societies.

In too many parts of the world there still remains the great illusion that drug abuse can be prevented or treated with repressive measures. Experience shows that repression can't prevent suffering people from using substances able to modify their relationship with the world. Humanity has used drugs since Noah's time, and doubtless always will use them. No force will ever be able to prevent suffering humanity from seeking relief for its pains by using a substance that can make

people happy and even, seemingly, immortal.

The act of taking drugs has its own roots in the irrational part of the subject's brain and is therefore insensitive to such messages: i.e. do not do this because it will hurt you!

This concept presupposes that humanity always does good and abstains from evil, which is a great illusion: indeed, humans do more harm than good in that they wage wars in addition to taking drugs.

Given that this is the situation, which realistic and feasible interventions should have priority to lighten the burden afflicting the individual and the community due to substance use?

A known drug addict is dangerous for himself and for others, but a person who takes drugs who is not known by the authorities is twice as dangerous. It is in the interest of Government to be aware of all the drugs in each community. This is a realistic, feasible, sustainable goal in the long run. It is in everyone's interests to invest in therapy, since violence

always brings more violence. Therapy, therapy and therapy for everyone! It must be our watchword, our priority, our slogan.

If a drug addict asks for help, he should always be received warmly and welcomed. He should not be expected, in the best of hypotheses, to wait his turn in a line or on a waiting list, nor certainly should he be arrested, jailed and/or tortured. By therapy we mean any action that improves the condition of life for the addict.

No therapy is decisive in itself, but the evidence tells us that the longer the person remains in therapy, the better the results are.

Therapeutic institutions, instead of fighting with and criticizing each other to affirm their skills and various positions, should work to establish alliances aimed at proposing a person-centered intervention, in an effort to make available more care and treatment options for the client in every phase of his illness. A government that proposes a single type of intervention is bound to fail, since we assume

that each subject is different from the others and different from himself in function of the moment in which he seeks help. It is the therapy that must be adapted to the subject and not vice versa.

I would also underline that it is not enough to have therapeutic institutions waiting for drug users who are asking for help to arrive at their doors; a drug user able to request assistance is surely sick, but one who is not able to make the request is sicker still, and in need of lower threshold interventions.

That is why it is necessary to adopt a different strategy; instead of waiting, governments should assist people in the street, where they live their daily tragedy, and attempt to alleviate their suffering with harm reduction interventions. If in the street we have policeman dealing with drug addicts, why can we not send the same number of outreach workers?

Massimo Barra