

United Nations Commission on Narcotic Drugs

CND regular session, 18-21 March 2024

International Federation of Red Cross and Red Crescent Societies

Statement on Agenda Item 6 Follow-up to the implementation at the national, regional and international levels of all commitments, as reflected in the Ministerial Declaration of 2019, to address and counter the world drug problem

Thank you Chair, distinguished delegates,

I have the honour to speak on behalf of the International Federation of Red Cross and Red Crescent Societies (IFRC). We believe that universal access to treatment and a humanitarian approach to addressing drug problems are crucial steps towards this discussion on the mid-term-review.

As auxiliaries to public authorities we contribute to health system strengthening, through access to communities. IFRC started long time ago to address world drug problems since 1922, and committed with specific Resolutions on substance abuse at its highest bodies, to mobilize for the prevention, treatment and rehabilitation of people with drug disorders.

Our recent strategy is outlined in the Rome Consensus 2.0 Statement, that combine humanitarian principles and practices with effective policies in health, criminal justice, prevention, and community responses to addiction, together with various stakeholders from Civil Society.

While some drug policies focus solely on punishment, leaving marginalized individuals behind, the Rome Consensus 2.0 promotes a shift towards a health-centered approach that prioritizes human dignity and safety.

This session of the CND provides Member States and stakeholders with an opportunity to reaffirm their commitment to evidence-based and humanitarian drug policies, ensuring both public safety and public health.

The Rome Consensus 2.0 emphasizes cooperation and knowledge exchange, stressing the importance of including everyone in our response. By incorporating principles of prevention, treatment, rehabilitation, and universal access to health services, it aligns with the UN Sustainable Development Goals,

guiding us towards drug policies that respect human rights and promote sustainable development.

What does this mean in practice?

Facilitation of access to treatment and using the continuum of care as a practical approach that combines fair, ethical, and person-centered policies in health, in prevention, in criminal justice practices such as Deflection, Diversion as Alternatives to Incarceration, and community responses to addictions, from the street to the full recovery.

We invite all Member States and interested parties to consider the Rome Consensus 2.0 as a concrete peace-building tool that enhances the security and health of our communities. Ethical, evidence-based, and comprehensive therapy tailored to individuals is crucial for improving the lives of millions affected by drug use and to build safer community.

As IFRC, we stand ready to contribute and support dialogue and cooperation between civil society organizations, health professionals, first responders, and public authorities. Together, we can address stigma and discrimination that hinder drug users from accessing health services and work towards the integration of people with drug disorders in our communities, benefiting all parties involved.

Finally i want to underline the most important words we must have in mind:

Access to treatment, Continuum of care, Compassion.

Without compassion there is no treatment!

Thank you for your attention.

Massimo Barra
Chariman of the RCRC Partnership on Substance Abuse