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General Debate – Item 3 (Tuesday)
IFRC Plenary intervention

Chair, Excellencies, distinguished delegates,

I am honoured to speak on behalf of the International Federation of Red Cross and Red Crescent Societies (IFRC).

Ten years after the 2016 UNGASS, the global conversation on drug policy continues to evolve. This moment offers an important opportunity—not only to reflect on progress, but also to strengthen approaches that are evidence-based, humane, and responsive to the realities faced by communities.

Over the past decade, the Red Cross and Red Crescent community has contributed to this aim through the **Rome Consensus initiative**. What began as a platform to reflect on the principles of the UNGASS Outcome Document has grown into a broader alliance bringing together health professionals, law enforcement representatives, academics, civil society organizations, and humanitarian actors.

The **Rome Consensus 2.0** promotes a holistic and balanced framework that connects prevention, treatment, harm reduction, recovery, and social reintegration. Sectors that too often work in isolation.

It offers a practical framework to translate global commitments into concrete action at the community level.

Equally important, it also encourages constructive dialogue between the health and justice sectors, and between civil society and public authorities.

Unfortunately, progress remains limited by the absence of a universally agreed definition of harm reduction within the UN system. Harm reduction should not be treated as a partisan banner. Much of the polarization surrounding is caused by the absence of a shared language that clearly defines its meaning and its practical application.

Even more concerning are the recent reports that show that funding cuts are already forcing harm-reduction and treatment programmes in several regions to scale back or close services. Losing these programmes would not only cost lives—it would risk reversing decades of progress in preventing HIV, hepatitis C, overdose deaths and avoidable punishment against people with drug disorders.

Ensuring access to treatment for people living with drug disorders is in the interest of every community, and therefore of every Member State. At the same time, we must recognize a simple reality: recovery cannot be imposed.

Allow me to conclude with one simple reflection: **Drug policy will ultimately be judged not by the substances we control, but by the lives we protect.**

The Red Cross and Red Crescent stand ready to continue working alongside governments, communities, and partners to turn shared commitments into practical solutions that leave no one behind.

Thank you.

Massimo Barra

Chair of the RCRC Partnership on Substance Abuse