

NGO Paper

United Nations Commission on Narcotic Drugs

Sixty-third session

Vienna, 2–6 March 2020

Statement

EVIDENCE-BASED TREATMENT AS AN INTEGRAL PART OF THE HEALTH SYSTEM

The challenges that Substance Use Disorders (SUDs) pose on people constitute an enormous public health and social destabilization problem both in developed and developing countries. Nowadays, scientific evidence has established that SUDs are a multifactorial disorder associated with a variety of individual vulnerability conditions and social factors such as poverty, exposure to violence and social exclusion. Strengthening evidence-based interventions for people who use drugs is an essential demand reduction strategy of critical public health importance.

We welcome the commitments of the Member States to address drug-related challenges through promoting drug policies based on scientific evidence, as reflected in the 2016 UNGASS Outcome Document “Our joint commitment to effectively addressing and countering the world drug problem” and the 2019 Ministerial Declaration “Strengthening Our Actions at the National, Regional and International Levels to Accelerate the Implementation of Our Joint Commitments to Address and Counter the World Drug Problem”.

Through the current statement, the signatory non-governmental organizations submit the following recommendations to the sixty-third session of the Commission on Narcotic Drugs:

1. We invite Member States to ensure the implementation of the United Nations Office on Drugs and Crime’s (UNODC) and the World Health Organization’s International Standards for the Treatment of Drug Use Disorders. Such Standards encourage all Member States to consider expanding the coverage and improving the quality of drug treatment programs and policies on the basis of scientific evidence and recommend comprehensive and balanced interventions, from an integrated and bio-psycho-social approach. They also suggest the use of scientific and human rights-based treatment modalities such as outreach, brief interventions, outpatient and residential programs such as Therapeutic Communities, and social re-integration and aftercare services.
2. We encourage Member States and UNODC to accelerate the expansion of evidence-based practices on drug treatment through exchange mechanisms as a regular basis, constantly collaborating with the research community, academia and civil society. We recommend avoiding drug-related interventions based on beliefs or perceptions which are not supported by scientific evidence.
3. We strongly suggest Member States to invest in robust, comparable, multilateral data-collecting systems as an undeniable step to achieve scientific, evidence-based interventions to effectively counter the world drug problem.
4. We urge Member States, UNODC, other international organizations and civil society to strongly cooperate to collect pertinent, reliable data about people who use drugs and their current and emerging challenges.
5. We stress the need to promote research in order to gain knowledge on crucial aspects for effectiveness of drug-related treatments such as access to treatment, treatment adherence, relapse prevention, recovery and overdose prevention.
6. We invite to prioritize research and data collection on groups in situations of vulnerability such as women, children, people with HIV and other blood-borne diseases, co-occurring disorders, people in prison for drug offenses or ethnic minorities in order to design and implement effective, specific interventions.
7. Based on the fact that adequate treatment should be available, accessible and affordable for any individual with Substance Use Disorders, we recommend to promote greater monitoring of cost-

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effective practices worldwide with significant outcomes and social impact as well as to extend these practices to the most deprived regions.

8. We call on Member States to acknowledge the need to collaborate with civil society, while enabling them to play a more active role in the formulation and implementation of drug-demand reduction policies based on evidence. Many non-governmental organizations have the expertise, are accountable and socially-accepted institutions, highly aware of the drug trends and characteristics and needs of people who use drugs. Civil society has been gathering crucial data and has valuable knowledge which can be shared.

In conclusion, we encourage Member States, the United Office on Drugs and Crime, the International Narcotic Control Board, The World Health Organization and other relevant international organizations to unequivocally promote evidence-based treatment as an integral part of the health system and as a cornerstone of the international, national and local strategies to address drug-related problems.

Submitted by the Association Proyecto Hombre ¹

Signatory non-governmental organizations:

AGCO (AFGHANISTAN)

Amity Foundation (UNITED STATES OF AMERICA)

ARGO – Alternative Therapeutic Program for Addicted Individuals (GREECE)

Asociación Boliviana de Comunidades Terapéuticas (BOLIVIA)

Asociación de Comunidades Terapéuticas del Perú (PERU)

Asociación Dianova España (SPAIN)

Asociación Fuente de Agua Viva (PERU)

Asociación La Colmena (BOLIVIA)

Associação Dianova Portugal (PORTUGAL)

Associació d'Ajuda als Toxicòmans (SPAIN)

Associació Sport To Live (SPAIN)

Association of Rehabilitation of Drug Abusers of Macau (MACAU)

Associazione Dianova Italia (ITALY)

ATCA – Australasian Therapeutic Communities Association (AUSTRALIA AND NEW ZEALAND)

BeThesda Rehabilitation Center (SRI LANKA)

CDLL – Cénacle De La Lumière (LEBANON)

CEDRO – Centro de Información y Educación para la Prevención del Abuso de Drogas (PERU)

CEID Addictions (FRANCE)

CEIS di Genova (ITALY)

CEIS di Milano (ITALY)

Celebrate Recovery / Proslavi Oporavak (BOSNIA AND HERZEGOVINA)

Center Point (UNITED STATES OF AMERICA)

Centro Nicaragüense de Solidaridad (NICARAGUA)

Centro Terapéutico Cure (MEXICO)

CIJ – Centros de Integración Juvenil A.C. (MEXICO)

Consorcio Gruppo CEIS (ITALY)

Coolmine (IRELAND)

Croissant Vert Nigérien (NIGER)

De Kiem (BELGIUM)

De Stam (THE NETHERLANDS)

Desarrollo Humano Tonalli AC (MEXICO)

Dianova International (SWITZERLAND)

Dianova USA Inc (UNITED STATES OF AMERICA)

Društvo UP (SLOVENIA)

ECett – European Companionship Education Training by Travel

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EFTC – European Federation of Therapeutic Communities	Green Crescent Foundation (SRI LANKA)
Ermita Ciprés AC (MEXICO)	Green Crescent Health Development Initiative (NIGERIA)
EURAD – Europe Against Drugs (BELGIUM)	Green Crescent Kyrgyzstan (KYRGYZSTAN)
European Association for Palliative Care (UNITED KINGDOM)	Green Crescent of Congo (CONGO)
Euro-TC	Green Crescent Society – Palestine (PALESTINE)
EWODOR – European Working Group on Drug Oriented Research	Green Crescent Zuria (GHANA)
FAD – Fundación de Ayuda contra la Drogadicción (SPAIN)	Grüner Kreis Society (AUSTRIA)
FEBRAC – Federação Brasileira de Comunidades Terapêuticas (BRAZIL)	Haderech Amnon (ISRAEL)
FECCOT – Federación Colombiana de Comunidades Terapéuticas (COLOMBIA)	Human Charity Foundation Nepal (NEPAL)
Federação FEAE (BRAZIL)	Icelandic Center for Social Research and Analysis - Planet Youth (ICELAND)
Federación Andaluza Enlace (SPAIN)	IFNGO – International Federation of Non-Governmental Organizations of Substance Abuse
Federación Venezolana de Instituciones de Tratamiento y Prevención de las Adicciones (VENEZUELA)	Instituição Padre Haroldo Rahm (BRAZIL)
FEMEXCOT – Federación Mexicana de Comunidades Terapéuticas (MEXICO)	Institute for Research and Development UTRIP (SLOVENIA)
FICT – Federazione Italiana Delle Comunità Terapeutiche (ITALY)	Iraqi Green Crescent Society (IRAQ)
FLACT – Federación Latinoamericana de Comunidades Terapéuticas	Magdalena-TC (CZECH REPUBLIC)
Fondacioni YESILAY (ALBANIA)	Malawi Green Crescent (MALAWI)
FONGA – Federación de ONG de Argentina (ARGENTINA)	Mothers Against Drunk Driving (BRAZIL)
FTCA – Federation of Therapeutic Communities for Asia	Mtsvane Mtvare (GEORGIA)
Fundació Salut i Comunitat (SPAIN)	NVO Izlazak (SERBIA)
Fundación Atenea (SPAIN)	NVO Preporod (MONTENEGRO)
Fundación Centro de Solidaridad de Santo Domingo PH (DOMINICAN REPUBLIC)	Odyssey House Louisiana (UNITED STATES OF AMERICA)
Fundación Dianova Chile (CHILE)	PDS – Promoció i Desenvolupament Social (SPAIN)
Fundación Dianova Nicaragua (NICARAGUA)	Pertubuhan Bulan Sabit Hijau Malaysia (MALAYSIA)
Fundación Dianova Uruguay (URUGUAY)	Phoenix Futures (UNITED KINGDOM)
Fundación Hogares Claret (COLOMBIA)	Phoenix Haga (NORWAY)
Fundación Prever (COLOMBIA)	Polish Federation of Therapeutic Communities (POLAND)
Green Anti Drug Society of Bangladesh (BANGLADESH)	Proyecto Hombre Portugal (PORTUGAL)
	Ric-Rose Cooperation (NEPAL)
	Rights Reporter (HUNGARY)
	RIO (NORWAY)

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RIOD – Red Iberoamericana de ONG que Trabajan en Drogas y Adicciones

RUN – Recovered Users Network

SAM – Smart Approaches to Marijuana (UNITED STATES OF AMERICA)

San Patrignano (ITALY)

Self Enhancement for Life Foundation (THE PHILIPPINES)

Slum Child Foundation (KENYA)

Sociedad Española de Patología Dual (SPAIN)

Society for Promotion of Youth and Masses (INDIA)

Somalia Green Crescent Society Organization (SOMALIA)

Stijena Resoc (CROATIA)

TCA – Treatment Communities of America

The Jordan Anti Drugs Society (JORDAN)

Therapiesalon im Wald (AUSTRIA)

Trempline (BELGIUM)

Tunisian Green Crescent (TUNISIA)

Turkish Green Crescent Society (TURKEY)

Udruzenje Gradana Zeleni Polumjesec BiH (BOSNIA AND HERZEGOVINA)

Uganda Green Crescent Society (UGANDA)

UNAD – Unión Española de Asociaciones y Entidades de Atención al Drogodependiente (SPAIN)

UYDEL – Youth Development Link (UGANDA)

WestCare Foundation (UNITED STATES OF AMERICA)

WFAD – World Federation Against Drugs

WFTC – World Federation of Therapeutic Communities

YODA – Youth Organisations for Drug Action

Zeleni krst – Zeleni polumjesec (SERBIA)

¹ Association Proyecto Hombre (1990-2020, 30th anniversary)

The Association Proyecto Hombre is a non-governmental organization in Special Consultative Status with ECOSOC that puts together 27 Proyecto Hombre's institutions in Spain, based on the bio-psycho-social model, working on drug prevention, treatment, rehabilitation and social reintegration. More than 400.000 people with Substance Use Disorders as well as their families have been cared for.

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