



PARADIGMA COALITION COMMON POSITION ON DRUGS

1. INTRODUCTION

The Paradigma Coalition is a global network of youth-led and youth-focused organisations, as well as young people who use drugs, that centre harm reduction and human rights in working to amplify the voices of young people in support of efforts to end the War on Drugs. The members of our network strive for a new approach toward drugs that is evidence-based, compassionate, and driven by full-spectrum Harm Reduction. Current approaches that dominate drug policy fail to meet their stated aims and do not invest in evidence-based solutions that acknowledge the realities of people who use drugs.

In contrast, full-spectrum harm reduction incorporates all people who use drugs and their different methods of consumption; it accounts for the multiplicity of political, social, and environmental factors that shape the risks of drug use and the different needs of people who use drugs across the world, including youth.

In March 2019, the United Nations Commission on Narcotic Drugs (CND) adopted the [‘Ministerial Declaration’](#)¹ on Strengthening Our Action at the National, Regional and International Levels to Accelerate the Implementation of Our Joint Commitments to Address and Counter the World Drug Problem.’ At the time, Member States had agreed to conduct a mid-term review of progress made ‘in implementing all our international drug policy commitments’ in 2024, with a final review planned in 2029.

The mid-term review will be held at the margins of the 67th Session of the CND in March 2024. This high-level segment is set to take place against the backdrop of devastating human rights abuses and major drug-related public health crises affecting numerous countries. These human rights abuses can be directly and indirectly attributed to an international drug control system that is rooted in colonial history. Moreover, initiatives to regulate drugs at the national level and calls for global reform raise concerns about the justification of international control rooted in prohibition.

According to the [CND Resolution 66/1](#)² civil society organisations including youth organisations were invited to participate in consultations to share their contributions to the challenges identified in the 2019 Ministerial Declaration, informing the preparatory process in the lead-up to March 2024. For the first time, some Member States have highlighted the importance of putting youth at the centre of drug policy discussions.

¹ Commission on Narcotic Drugs (2019), Ministerial declaration on 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, https://www.unodc.org/documents/commissions/CND/2019/Ministerial_Declaration.pdf

² Commission on Narcotic Drugs (2023), Resolution 66/1. Preparations for the midterm review to be held during the sixty-seventh session of the Commission on Narcotic Drugs, in 2024, [https://www.unodc.org/documents/commissions/CND/ Drug_Resolutions/2020-2029/2023/Res_66_1_2305857E.pdf](https://www.unodc.org/documents/commissions/CND/Drug_Resolutions/2020-2029/2023/Res_66_1_2305857E.pdf)

Responding to such calls, the Paradigma Coalition has developed this Common Position on Drugs, which seeks to capture young people's concerns with the current drug policy regime and its unintended consequences, particularly on youth. The document lays out our commitments and actions for meaningful engagement of young people as we work towards forging a plan of action in the final review in 2029. Finally, it provides recommendations to Member States and relevant bodies of the United Nations, in addition to international and regional organisations to address the challenges in the 2019 Ministerial Declaration.

2. PREAMBLE

We, the Paradigma Coalition,

ACKNOWLEDGE the efforts being put in place by the United Nations Office on Drugs and Crime (UNODC) in partnership with its Member States in response to the world drug situation, commitments towards achieving the [Sustainable Development Goals](#)³ (SDGs), and the commitments made in the 2019 Ministerial Declaration.

EMPHASISE Member States obligations under SDG 3 'ensuring good health and wellbeing', SDG 10, 'reducing inequalities', as well as SDG 16, which aims to provide 'access to justice for *all*', over punitive repressive responses.

HIGHLIGHT Member States' obligations and duties under international law to respect, protect and fulfil human rights, including the right to privacy and confidentiality of young people, in line with Article 12 of the Universal Declaration of Human Rights⁴.

NOTE WITH CONCERN that the [three international drug control conventions](#)⁵ that are currently key pillars of the international drug control system were created without the appropriate or meaningful participation of affected groups and priority populations, including people who use drugs and Indigenous peoples, and with no specific consideration for children or young people.

FURTHER NOTE WITH CONCERN what the UNODC referred to as the ["unintended consequences"](#)⁶ of drug control: the exponential growth of uncontrolled drug markets, policy displacement away from public health and human rights, geographical displacement (including to new regions and countries that are ill-equipped to deal with these challenges), substance displacement (variety of substance availability), and the perception of people who use drugs

³ UN General Assembly, Transforming our world: the 2030 Agenda for Sustainable Development, A/RES/70/1, 21 October 2015, <https://www.refworld.org/legal/resolution/unga/2015/en/111816> [accessed 12 March 2024]

⁴ UN General Assembly, Universal Declaration of Human Rights, 217 A (III), 10 December 1948, <https://www.refworld.org/legal/resolution/unga/1948/en/11563> [accessed 12 March 2024]

⁵ Single Convention on Narcotic Drugs (as amended by the 1972 Protocol) 520 UNTS 7515 (1961); Convention on Psychotropic Substances, 1019 UNTS 14956 (1971); Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1582 UNTS 95 (1988).

⁶ UN Office on Drugs and Crime (UNODC), World Drug Report 2009, 2009, <https://www.un-ilibrary.org/content/books/9789211562903> [accessed 12 March 2024]

(including low-income communities, women, BIPOC communities and young people) as people with deviant and criminal behaviour.

TAKE INTO CONSIDERATION that the United Nations System [Common Position](#)⁷ recognises that the three international conventions “allow for sufficient flexibility for countries to design and implement national drug policies according to their priorities and needs,” which can include but is not limited to “the decriminalisation of drugs for personal use.”

SUPPORT previous calls by the [United Nations Human Rights Council in 2019](#)⁸ to address the unjust and disproportionate impact of punitive drug policy responses on different populations, such as, but not limited to, BIPOC communities, women, and young people.

RECOGNISE that [The Convention on the Rights of the Child](#) (UN CRC)⁹ creates an obligation to take all appropriate measures, including legislative, administrative, social, and educational measures, to protect children from drug-related harm. **EMPHASISE** that the UN Committee on the Rights of the Child has [interpreted](#)¹⁰ that appropriate measures must be rights-compliant and effective; include the development of accessible and age-appropriate drug education, harm reduction, and drug dependence services; and refrain from criminalising children because of their drug use or possession of drugs for personal use. **NOTE WITH CONCERN** that certain interpretations of Article 33 of the UN CRC have caused significant harm and that Article 33 must be interpreted within broader human rights law, including UNDRIP and other articles of the UN CRC.

WELCOME the Office of the High Commissioner for Human Rights’ 2023 Report¹¹ on Drug Policy and the [International Guidelines on Human Rights and Drug Policy](#)¹², developed by UN member states, WHO, UNDP, UNAIDS, and human rights and drug policy experts. Particularly paragraph 17: “Children have the right to protection from exploitation, including in the illicit drug trade. States shall take appropriate measures to protect children from exploitation in the illicit drug trade through preventative and remedial measures.”

⁷ Chief Executives Board for Coordination (18 January 2019), Summary of deliberations, Second regular session of 2018, Manhasset, New York, 7 and 8 November 2018, Annex 1, ‘UN system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration’, CEB/2018/2, pp. 12-14, <https://www.unsystem.org/CEBPublicFiles/CEB-2018-2-SoD.pdf>

⁸ Office of the United Nations High Commissioner for Human Rights. “OHCHR report 2019.” OHCHR, Accessed March 12, 2024. <https://www.ohchr.org/sites/default/files/Documents/Publications/OHCHRreport2019.pdf>.

⁹ UN General Assembly, Convention on the Rights of the Child, United Nations, Treaty Series, vol. 1577, p. 3, 20 November 1989, <https://www.refworld.org/legal/agreements/unga/1989/en/18815> [accessed 12 March 2024]

¹⁰ Angie L. Hamilton, Daphne G. Jarvis and Barbara E.L. Watts. “Secure care: a question of capacity, autonomy and the best interests of the child”. CMAJ February 03, 2020 192 (5) E121-E122; DOI:<https://doi.org/10.1503/cmaj.73252>

¹¹ Office of the United Nations High Commissioner for Human Rights. A/HRC/54/53: Human rights challenges in addressing and countering all aspects of the world drug problem. OHCHR. 15 August 2023. <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G23/156/03/PDF/G2315603.pdf?OpenElement>

¹² United Nations Development Programme. “International guidelines on human rights and drug policy.” UNDP, Accessed March 12, 2024. <https://www.undp.org/publications/international-guidelines-human-rights-and-drug-policy>.

FURTHER WELCOME the UN Youth Office and their [2030 Youth Strategy](#)¹³ for young people from 10 to 24 years old, which recognises young people's desire and leadership in contributing to the “resilience of their communities, proposing innovative solutions, driving social progress and inspiring political change” (p. 4). The document highlights the unique position of the United Nations to act as a source of protection and support for “young people in all their diversity around the world”, as well as a platform through which “their needs can be addressed, their voice can be amplified, and their engagement can be advanced” (p. 5).

ASSERT the crucial role of youth organisations and young people in addressing the world drug situation and the urgent need for meaningful youth engagement in the discussion, formulation, implementation, delivery and evaluation of evidence-based, balanced programmes and policies adapted to the needs of young people.

HIGHLIGHT the important role of the CND, the UNODC, the Vienna NGO Committee on Drugs (VNGOC), and the New York NGO Committee on Drugs (NYNGOC) in ensuring the active and inclusive engagement of diverse young people, as well as ensuring the recognition of intersecting factors that shape young people’s experiences, in international decision-making processes.

EMPHASISE the need for creating an inclusive and balanced platform within the CND and UNODC for diverse young people, including young people who use drugs, to express their views, share their evidence-based practices, and speak with shared principles as part of their contribution to international dialogue related to drugs. Moreover, such a platform should be built from resources developed by diverse youth organisations and fora and strive for further collaboration with their work.

ACKNOWLEDGE that prevention and harm reduction are complementary and not mutually exclusive responses to the world drug situation and that both should respect, protect and promote the human rights and well-being of all peoples, including young people who use drugs. Moreover, such responses should adopt evidence-based, inclusive, and sensible approaches to drug use and policy, avoiding strategies based on fear-mongering that contribute to stigmatising and exclusionary practices.

NOTE WITH CONCERN that there remains a significant gap in the provision of youth-friendly, youth-led evidence-based interventions, policies and laws to support those affected by drugs – including, inter alia, young people who use drugs, their families and communities, those at risk of drug use dependence, young people engaged in drug markets, and those unable to access controlled essential medicines for treatment of moderate to severe pain, mental health conditions and substance use disorders.

NOTE WITH CONCERN that many young people who use drugs are subjected to the criminal justice system rather than supported through health and social systems. Early exposure to the criminal justice system has life-altering consequences, such as reduced prospects for employment and housing as well as financial instability, thus making young people more prone

¹³ United Nations Youth Envoy. "UN Youth Strategy 2030: Working with and for Young People." United Nations, September 2018. Accessed March 12, 2024. https://www.un.org/youthenvoy/wp-content/uploads/2018/09/18-00080_UN-Youth-Strategy_Web.pdf.

to become victims of crime and/or commit crimes, including involvement in the illicit drugs economy.

WELCOME the “Beijing Rules” (UN Standard Minimum Rules on the Administration of Juvenile Justice¹⁴) and the “Havana Rules” (UN Rules for the Protection of Juveniles Deprived of their Liberty¹⁵), which stipulate the primary goal of juvenile justice should be to divert youth from the criminal justice system; and provide guidelines on how children should be treated while they are in the criminal justice system.

ACKNOWLEDGE the urgent need to adopt an intersectional approach in policy making which recognises that causes of disadvantage or discrimination do not exist independently but intersect and overlap, hence demanding policy responses that are sensible to the plurality of human experiences. This includes recognising that young people’s experiences are highly diverse and intersect with factors such as, but not limited to, race, gender, ethnicity, sexuality, age, religion, nationality, region, socio-economic status, as well as disabilities.

RECOGNISE that young people who use drugs represent a key population that is disproportionately impacted by HIV, with low knowledge and awareness of HIV and AIDS, as stated in the 2021 Political Declaration on HIV/AIDS¹⁶.

NOTE WITH CONCERN that for young people who inject drugs, access to HIV prevention, testing and treatment services proves to be even more challenging due to high levels of stigma, fear and age-related barriers, and parent/guardian consent requirements that impede access to life-saving services including but not limited to, sterile needle and syringe service access and supply programs or drug dependence treatment and care including opiate agonist therapy and safe supply models.

WELCOME the United Nations Convention on the Rights of Persons with Disabilities¹⁷ (UNCRPD), created for the purpose of promoting, protecting, and ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all disabled and neurodivergent people and promoting respect for their inherent dignity. **NOTE WITH CONCERN** the impact of punitive drug policies on access to essential medication for disabled and neurodivergent young people, resulting in the push for these young people to self-medicate through the illicit market without access to safe supply.

¹⁴ UN General Assembly, United Nations Standard Minimum Rules for the Administration of Juvenile Justice (“The Beijing Rules”) : resolution / adopted by the General Assembly, A/RES/40/33, 29 November 1985, <https://www.refworld.org/legal/resolution/unga/1985/en/10533> [accessed 12 March 2024]

¹⁵ UN General Assembly, United Nations Rules for the Protection of Juveniles Deprived of Their Liberty : resolution / adopted by the General Assembly, A/RES/45/113, 2 April 1991, <https://www.refworld.org/legal/resolution/unga/1991/en/61112> [accessed 12 March 2024]

¹⁶ Joint United Nations Programme on HIV/AIDS. “2021 Political Declaration on HIV and AIDS.” Accessed March 12, 2024. https://www.unaids.org/sites/default/files/media_asset/2021_political-declaration-on-hiv-and-aids_en.pdf.

¹⁷ UN General Assembly, Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly, A/RES/61/106, 24 January 2007, <https://www.refworld.org/legal/resolution/unga/2007/en/49751> [accessed 12 March 2024]

RECOGNISE that the control of coca under the Single Convention on Narcotic Drugs is currently in conflict with the [UN Declaration on the Rights of Indigenous Peoples](#)¹⁸ (UNDRIP), particularly harming Indigenous Peoples' right to their traditional medicines and to maintain their health practices, including the preservation of their vital medicinal plants (Article 24(1)) and their right to develop their own economic and social institutions (Article 20).

WELCOME UNODC's World Drug Report 2023 [chapter](#)¹⁹ on "The Nexus Between Drugs and Crimes that Affect the Environment and Convergent Crime in the Amazon Basin" which gathers evidence on the multiple impacts of a complex crime ecosystem on natural and social systems in the four countries that share most of the Amazon Basin. **NOTE WITH CONCERN** the remaining gap in the UN System documentation and the need to further highlight the link between punitive drug control strategies and negative environmental consequences contributing to climate change.

TAKE INTO CONSIDERATION rising trends such as youth bulges across Global South contexts, as well as climate change, urbanisation, inequalities, and the upward trend of drug use among young people, in addition to the negative social, health and human rights impact of punitive drug control regimes which disproportionately affect the health and well-being of young people across the world. Conjointly, we **ACKNOWLEDGE** associated risks of youth unemployment, high rates of poverty, and an increased risk of overdose that affect young people and young people who use drugs globally. These issues must be addressed by Member States of the CND.

3. OUR COMMITMENT

We, the Paradigma Coalition commit ourselves:

TO SPEAK with one voice and to act in solidarity to ensure that the voices of young people under the Paradigma Coalition are heard and fully integrated into international drug policy discussions and debates. With that, we **EMPHASISE** our request and willingness to have a seat at the table for all relevant national, regional, and international dialogues with relevant stakeholders and partners to help establish larger youth platforms that can ensure liaison channels to put in service our expertise and participate in national, regional, and international consultations related to drugs.

TO OFFER support and input to discussions with UNODC and Member States in the implementation of the drug control conventions to ensure conscientious implementation and flexibility in policy uniformity, and a wider reach and coverage of adolescents and young people, hence leaving no one behind.

¹⁸ UN General Assembly, United Nations Declaration on the Rights of Indigenous Peoples : resolution / adopted by the General Assembly, A/RES/61/295, 2 October 2007, <https://www.refworld.org/legal/resolution/unga/2007/en/49353> [accessed 12 March 2024]

¹⁹ United Nations Office on Drugs and Crime. "World Drug Report 2023: Chapter 4 - Opioids and the Amazon." UNODC, Accessed March 12, 2024. https://www.unodc.org/res/WDR-2023/WDR23_B3_CH4_Amazon.pdf.

TO ENGAGE with the UNODC, WHO, UNAIDS and NGO Committees in mainstreaming our work in line with the Ministerial Declaration of 2019 and any future drug policy instruments, and request the support of UNODC in building the capacity of diverse youth organisations in addressing the world drug situation.

TO ENGAGE with the CND and contribute to informing the review of international policies that embrace evidence-based interventions to ensure improved outcomes for those most affected by drugs, especially those who live under punitive policies and are at risk of further criminalisation.

TO SUPPORT the UNODC and Member States to develop youth-friendly evidence-based policies and programmes and review existing laws to give attention to human rights, including, inter alia, the rights of children, adolescents, and young people as well as the right to health, while also adhering to the relevant international normative guidance and standards.

TO ADVOCATE AND PROMOTE evidence-based drug-related interventions, notably prevention and harm reduction, drug education programmes, access to health and justice, and peer-led and inclusive harm reduction initiatives in various settings, including schools, tertiary institutions, carceral settings, and communities in our respective countries.

TO WORK with the UNODC, the OHCHR, UNICEF and the Member States of the CND to monitor the adequate implementation of all human rights conventions for the well-being of young people from a compassionate and self-determining approach. This includes working with the UNDRIP, the UNCRPD and the UN CRC.

TO ENCOURAGE our respective policymakers to tackle complex and urgent issues relating to young people who use or are otherwise affected by drug use and policy through international cooperation and learning to ensure accurate and sensible assessment of the responses that can improve the outcome of millions of young people.

4. OUR CALLS TO ACTION:

We, the Paradigma Coalition:

REQUEST for a full review of the three international drug control conventions with the meaningful participation of affected groups; applying an intersectional lens to decolonise the treaties and elevate the perspectives of those most harmed by the international drug control regime; including but not limited to children, young people, people who use drugs, people living with HIV, disabled and neurodivergent people, and Indigenous peoples; in the spirit of centring the health and wellbeing of all humankind on addressing the world drug situation.

CALL FOR comprehensive data collection on the impacts and unintended consequences of current drug policies, to be collected and communicated in a timely manner, including on disproportionate effects on marginalised communities.

URGE Member States to address the challenges identified in the Ministerial Declaration of 2019, and work closely with diverse youth organisations on the ethical collection of

comprehensive data on drug use and associated risks. Moreover, Member States must collaborate with diverse and key stakeholders to monitor and evaluate the performance of justice systems, child protection services, health services and education systems that provide services for adolescents and young people who use drugs, thus giving a true reflection of the progress and challenges that exist on the ground to direct appropriate policy responses.

EXHORT Member States, through the UNODC, prioritise the promotion of communities' health and human rights when addressing the world drug situation. This includes, but is not limited to, stipulating drug policy and programmes in line with UNDRIP, UNCRPD, the UN CRC, the Human Rights Council Resolution 52/24., the UN System Common Position, as well as adopting measures that positively contribute to the aims outlined in the UN's 2030 Youth Strategy and the 2030 Agenda for Sustainable Development.

HIGHLIGHT that alternatives to punitive law enforcement, such as the decriminalisation of drug use, possession, and sharing as well as legal regulation models, must be considered to reduce harms from unregulated drug markets, according to scientific evidence, UN guidance, and countries' human rights obligations, including the UNDRIP and the UNCRPD.

REQUEST the development of further detailed guidance from multiple relevant UN Agencies (OHCHR, UNICEF, and UNODC), after meaningful engagement with civil society, to outline drug policies that protect all rights of the child and/or cause the least harm to children overall.

UNDERSCORE that Member States should take action to divert young people from the criminal justice system and refrain from the arrest, detention or imprisonment of a child or young person, in line with the UN CRC, the Beijing Rules and the Havana Rules.

URGE the UNODC and Member States to develop adequate evidence-based policies and measures for drug prevention, harm reduction, and treatment that put young people who use drugs at the centre of programme development throughout the entire process. This includes providing technical and/or financial support to existing institutions, organisations, professionals, and communities who work together with and for the well-being of young people who use drugs; and creating opportunities to speak, advocate, and make decisions for young people who use drugs in all key meetings and events that affect them and without fearing negative consequences following participation.

IMPLORE Member States to allocate greater resources into a youth-friendly public health response to drugs and community-led research and ethical data collection that should inform, enhance and create effective, evidence-based, inclusive and cost-effective youth-friendly interventions, with the technical support of relevant UN agencies.

UNDERSCORE that Member States should guarantee low-threshold access to comprehensive, youth-friendly healthcare and harm reduction and treatment services for all young people regardless of age, gender identity, sexual orientation, disability or behaviour. This includes removing all legal, policy and practical barriers that currently restrict access, such as removing laws criminalising drug use and possession for personal use and sharing, eliminating age restrictions and parental consent requirements, as well as decriminalising behaviours and identities.

DEMAND that crucial services like opioid substitution therapy, naloxone access, supervised consumption facilities, drug checking, safer supply, STI testing/treatment, holistic mental health care services, and culturally appropriate healthcare are universally available and tailored to the specific needs of young people who use or are otherwise affected by drugs, and must respect the privacy of young people, without fear of legal repercussions.

URGE Member States to prioritise the funding, development and implementation of comprehensive, accessible and youth-friendly HIV prevention, testing and treatment services for young people who use drugs.

URGE Member States to prioritise evidence-based public health and human rights approaches for drug policies. In alignment with SDG 3 and SDG 4 youth-friendly and evidence-based drug education ought to be recognised and supported as crucial components of public health policy at schools and in communities. Scare tactics must be abandoned, and access to quality drug education that benefits youth as a whole must be implemented and accessible. Policies should shift their focus away from criminalisation toward peer-led drug education, prevention, harm reduction, treatment, and social integration services.

CALL FOR de-scheduling coca in line with UNDRIP, including Article 21 and Article 24, so that young people in Indigenous communities are able to access and benefit from their plant medicines and get a chance to revitalise their cultures.

URGE the UNODC and Member States of the CND to address the missing link between drug policy and climate justice, considering the impact on young people and future generations.

IMPLORE Member States and UN Agencies to ensure that all drug policies and related interventions respect the privacy and confidentiality of young people, in line with Article 12 of the Universal Declaration of Human Rights, the right to privacy. This includes safeguarding their personal information, medical records, and any data collected during the provision of healthcare, harm reduction, and support services. Additionally, policies should be in place to protect young people from unwarranted surveillance, discrimination, and stigmatisation based on their drug use or the seeking of related services.

REASSERT the urgent need for collaboration between the UNODC, Member States and youth organisations working on matters related to drugs – including in the fields of policies, drug education, prevention, harm reduction, treatment, recovery, social integration, criminal justice and sustainable development – in order to adopt an intersectional approach in policymaking that recognises that young people’s experiences are highly diverse and intersect with factors such as - but not limited to - race, gender, ethnicity, sexuality, age, religion, nationality, region, socio-economic status, as well as disabilities. Only then can Member States ensure safer communities for all, with policies aligned with human rights that contribute to achieving the Sustainable Development Goals by 2030.



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