

**THE 'VIENNA SPIRIT' SHATTERS:  
REPORT OF THE 67<sup>TH</sup> SESSION OF THE UN COMMISSION  
ON NARCOTIC DRUGS AND ITS HIGH-LEVEL SEGMENT**

**AUGUST 2024**



# Executive summary

The 67<sup>th</sup> session of the CND was held from 18 to 22 March 2024, with a High-Level Segment dedicated to the Midterm Review of the 2019 Ministerial Declaration on drugs. This was the largest CND gathering in the history of the Commission, with a record-breaking 2,500 participants, including over 600 representatives from 141 NGOs.

After months of negotiations on the outcome document for the Midterm Review, the results were disappointing, with a political document mainly reiterating language from the 2019 Ministerial Declaration and no real acknowledgement of the failings of, and human rights impacts associated with, the punitive drug control paradigm.

This disappointment was short-lived, however. In a soaring address to the delegates, Colombian President Petro described the international drug control regime as ‘antiquated and lethargic’. This was echoed by Volker Türk – the first UN High Commissioner for Human Rights to attend a CND in person. Colombia also made a powerful statement on behalf of 62 countries concluding that the current system ‘needs rethinking’. This was the first time that a large grouping of Member States collectively questioned the punitive drug control paradigm. Unsurprisingly, this was countered by a coalition of 46 conservative countries led by Russia, who reaffirmed their commitment to the drug conventions and a ‘society free of drug abuse’.

As in previous years, cannabis regulation came up regularly in Plenary discussions, with various conservative countries condemning moves towards legal regulation – while those having legally regulated cannabis, or considering doing so, defending their policies in a more muted, and often apologetic, way.

The issue of human rights was highlighted more strongly than ever before at this 67<sup>th</sup> session. The presence of the High Commissioner for Human Rights and presentation of his landmark 2023 report on the human rights implications of drug policy played a big part in this. The report was welcomed by many officials and civil society representatives. At the same time, Indigenous Peoples’ rights also took centre stage,

especially as the critical review of the coca leaf is now well underway.

The delegates also addressed the issue of synthetic drugs – including the overdose epidemic. Positively, harm reduction came up strongly in these discussions, including by the USA which also tabled a resolution on overdose prevention (Resolution 67/4).

Harm reduction certainly took the centre-stage as Member States gathered at the Committee of the Whole (CoW). The US-led resolution on overdose prevention was undoubtedly the most controversial, as a well-coordinated group of Member States spoke in favour harm reduction and defended its inclusion in the resolution until the very end – leading Russia to call for a vote.

The negotiation of the yearly resolution on alternative development (Resolution 67/3) also caused much tension among the delegates, in relation to proposed language on unilateral coercive measures and technology transfer.

As Member States failed to find a compromise on either resolution, both were sent to the Plenary where a vote was held for the first time on a CND resolution in four decades – while the resolutions on recovery (Resolution 67/1) and on access to controlled medicines (Resolution 67/2) were adopted by consensus.

Geopolitics once again greatly influenced the CND proceedings. As in previous years, many countries condemned the ongoing Russian war in Ukraine. The CND also took place when the number of civilians killed by Israel in Gaza were estimated at over 30,000. While Western countries remained mostly silent on the issue, various countries from the Global South and NGOs like Skoun and IDPC, on behalf of many of our Members, explicitly condemned the occupation and expressed solidarity with the people of Palestine.

The civil society voices – especially on the progressive side – were as vocal and well-coordinated as ever, with powerful statements in favour of reform. Over 60% of the side events were (co)organised by civil society organisations – including a series of seven events aimed

at addressing the key challenges covered in the OHCHR report.

The informal NGO dialogues were once again an opportunity for civil society to meet with UN leadership and ask important questions in relation to human rights, harm reduction, legal regulation and more.

While huge gains have been made at the 67<sup>th</sup> session of the CND, many left Vienna with a feeling of uncertainty on the extent to which these gains will truly impact drug policy making going

forward. While many Member States deplored the practice of holding the ‘CND hostage’ as a handful of countries have taken the habit of using consensus-based decision-making to block any progressive language, most also reiterated their commitment to the ‘Vienna Spirit’. However, the tide has undeniably turned, and maintaining ‘business as usual’ at the CND has simply become untenable as the rest of the UN system – and an increasing number of countries – are moving towards a health and rights-based approach to drug policy.

## Introduction: Climax after the Anti-climax

The 67<sup>th</sup> session of the UN Commission on Narcotic Drugs (CND) took place over seven days, from Thursday 14 to Friday 22 March 2024. The first two days consisted of a High-Level Segment dedicated to the Midterm Review of the 2019 Ministerial Declaration on drugs, including a plenary debate and two roundtables; the other five days were absorbed by the usual CND proceedings.<sup>1</sup> This was the largest CND gathering in the history of the Commission, with a record-breaking 2,500 participants, including over 600 representatives from 141 NGOs.

When Ambassador Philbert Johnson of Ghana opened the 67<sup>th</sup> CND as its new Chair, few people thought that the session would go down in history books. After months of heated debates and intense negotiations, the international community had just closed the Midterm Review of the 2019 Ministerial Declaration on drugs with a disappointing political document that failed to acknowledge the undeniable failure of the drug control system.<sup>2</sup> It was an anticlimactic moment. Consensus-based policy making – the cornerstone of the so-called ‘Vienna spirit’ – had been preserved, even if that meant turning a blind eye on reality.<sup>3</sup> The message was clear: business in Vienna would be conducted ‘as usual’.

A few days later, however, business did become highly unusual at the CND, with Member States breaking the consensus by voting on two CND resolutions, for the first time in decades. Through a considered reading of the Plenary proceedings and the negotiations at the Committee of the Whole (CoW),<sup>4</sup> this report identifies the fault lines that

built pressure on the system for years, and finally brought it to the brink. This analysis will explain how a historical vote came about, breaking the revered consensus just seven days after the business-as-usual adoption of the outcome document at the 2024 High-Level Segment and resulted in the first-ever inclusion of the term ‘harm reduction’ in a CND resolution.

Though certainly an extraordinary moment, the end of the ‘Vienna consensus’ was the natural consequence of the accelerating drug policy and geopolitical tensions that IDPC has carefully documented in the 18 prior editions of the CND proceedings report.<sup>5</sup> A few editions ago, we described the CND process as a ‘belaboured and shuddering machine’,<sup>6</sup> every year requiring more work to produce a semblance of unity out of fracture and discord. In 2024, no amount of patience or diplomatic effort was enough to keep the ‘machine’ running.

## The 2024 High-Level Segment: A disappointing process lays the ground for the end of consensus

Ambassador Johnson of Ghana opened the High-Level Segment with an important announcement. A High-level Declaration on the Midterm Review of the 2019 Ministerial Declaration on drugs<sup>7</sup> had gone through silent procedure<sup>8</sup> and was now ready for adoption.<sup>9</sup> With this political document, Member States culminated the Midterm Review of the 2019 Ministerial Declaration, a key process aimed at evaluating the implementation of the 10-year UN drugs strategy at half term.

The Midterm Review was preceded by a lengthy preparatory process, including a series of CND intersessional meetings and an open call for contributions by Member States, UN entities, civil society and other stakeholders.<sup>10</sup> Perhaps fearful of a genuine evaluation of the system, the United Nations Office on Drugs and Crime (UNODC) had failed to produce any baseline report, leaving a vacuum that others stepped into. In December 2023, IDPC released a comprehensive report assessing the implementation of the 12 challenges identified in the 2019 Ministerial Declaration on drugs, reaching the sobering conclusion that system is failing to deliver on every single one of them.<sup>11</sup> This is a message that many Member States took on during the high-level review. In parallel, the UN Human Rights Council adopted a resolution in April 2023 requesting the Office of the High Commissioner for Human Rights (OHCHR) to produce an analysis of the human rights implications of drug policy as an official contribution to the Midterm Review.<sup>12</sup> The resulting report reached a similar view: that the overreliance on punitive measures, including militarised drug control efforts, has had devastating and far-reaching impacts on a wide range of human rights.<sup>13</sup>

The high-level declaration joyfully announced by the CND Chair fails to acknowledge this reality. Half of its 42 paragraphs were taken directly from the 2019 Ministerial Declaration, including the entirety of the first section on the 'shared commitments' assumed by the international community. Despite its name, the 'stock-taking' section of the outcome document does not properly evaluate the system's performance, but instead names seven additional challenges that have 'intensified and spread' in the last five years, including four challenges on supply reduction, one on access to medicines, and none on human rights. Almost all the new substantive themes introduced in the new paragraphs reinforce the repressive nature of the regime, with new language on countering organised crime, the harm of illegal drug activities on the environment, prevention and the 'misperception of drug risks'.

The one point of significant progress can be found at the opening of the 'way forward' section, which recognises the need to 'take further ambitious, effective, improved, and decisive actions, including where appropriate, innovative measures in accordance with international law, ... placing the health and wellbeing, human rights, public security and safety... at the centre of our efforts'. This paragraph, which was only agreed at the very last minute thanks to the resolve of the Colombian delegation, is notable because it implicitly recognises that the

current approach is not working and further action is needed, and because it does not circumscribe that action to the framework of the UN drug conventions. While a very limited win, these few lines open the door for the narrative that would later make this a historical session – the acknowledgment that the system is not working.

The 2024 outcome document laid the ground for the end of consensus in a different way. Months of exhausting negotiations left diplomats tired and frustrated, with high tension and low trust. It was clear to many that the need for consensus was turning the CND into a high-cost but low-productivity machine, unable to create anything but a copy of what had been agreed before – with even agreed language creating tensions in the negotiations. It was increasingly obvious that consensus would not lead to the urgently required rethinking of the system.

## Plenary debates at the High-Level Segment and the ordinary session: The call for system reform goes mainstream

The 'Vienna spirit', a set of practices of conformity and compromise that are meant to express unanimous support for the prohibitionist approach enshrined in the UN conventions, has been losing ground. In 2024 we saw a break in the practice that constitutes the very core of the 'Vienna spirit' – the adoption of resolutions by consensus.

A close reading of the statements delivered throughout the seven days of Plenary debates throws a powerful explanatory light on this event, revealing the key themes that drove fracture amongst Member States. Many of these topics had already emerged in previous years – cannabis regulation, human rights, harm reduction, geopolitics. But this year, a new dynamic came to the fore: for the first time, a significant group of delegations coordinated to acknowledge that the system is not working.

## 'The system is not working': A new vector of dissensus appears in Vienna

On top of the usual debates on substantive drug policy, this CND witnessed the emergence of a new and powerful vector of disagreement – a debate on whether the drug control system is fit for purpose or requires 'innovation' and 'rethinking'.

Colombia was, unsurprisingly, the country that took the lead. To the opening words of Ghana's Ambassador Johnson, 'A profound sense of duty embraces us today as we reflect the journey since 2019 on one of the most pressing challenges of our era: the world drug problem',<sup>14</sup> President Petro responded in a video message with a resounding 'there is not a world drug problem'.<sup>15</sup> In a soaring address to the plenary, the leader of Colombia openly questioned the system itself: 'The international drug control regime, centred in Vienna, has failed', it is an 'antiquated and lethargic system', 'deaf, blind, and silent'.

Many speakers agreed with President Petro, laying down a collective argument based on two pillars: firstly, the system is not fit for purpose; secondly, change, rethinking, or innovation are needed. Volker Türk – the first High Commissioner for Human Rights to attend a CND in person – laid the ground at the opening of the CND, as he observed that 'After decades of following a largely punitive approach, we can see this simply is not working'.<sup>16</sup> Later in the session, Colombia would make a strong case that 'UNODC's official documentation... demonstrates the international system's proven inability to achieve its goals and objectives',<sup>17</sup> while Czechia would explain that 'a number of international commitments remain unfulfilled or even failing.



UN High Commissioner for Human Rights Volker Türk speaking at the High-Level Segment. Credit: CND\_Tweets

We have unfortunately seen limited improvement over the years'.<sup>18</sup> On the need for change, Canada expressed that 'Addressing today's problems requires innovative solutions that reflect the realities of the current environment, rather than relying on outdated tools',<sup>19</sup> while Mexico noted that 'We have new challenges but old mechanisms and conventions'.<sup>20</sup> The US joined the chorus by saying that 'it is up to us to be creative and innovative in how we interpret [the conventions] to do right by our citizens'.<sup>21</sup>

But this call for change best materialised in the historical joint statement by 62 countries<sup>22</sup> delivered by the Minister of Foreign Affairs of Colombia at the opening of the High-Level Segment. This joint statement constitutes a real effort of stock-taking and reflection on the implementation the 2019 Ministerial Declaration, a truly alternative declaration. The conclusion is clear: 'the international drug control system as currently applied needs rethinking based on concrete evidence to make progress together', with signatory States concluding with their 'resolve to jointly review and reassess the international drug control system'.<sup>23</sup>

Does this mean that the 62 signatories of the joint statement share an equal commitment to system reform? Absolutely not. But the statement makes it clear that a large coalition of countries understand that the drug control regime is 'off track', that it is unable to achieve its attested objectives, and that some form of genuine revision needs to take place. Whilst not many countries are willing to use their individual statements to express an explicit dissent, they are now for the first time willing to lend their weight behind an initiative led by countries like Colombia or Czechia. This coordinated effort is unprecedented.<sup>24</sup>

In response, Russia made a counterstatement on behalf of 46 countries<sup>25</sup> in which they collectively reaffirmed their compliance with the UN drug control treaties and their commitment to a 'society free of drug abuse', concluding that: 'The international community should not surrender to the scourge of the spread of illicit drugs, but on the contrary, unify efforts in a more concerted international action with a view of harm prevention'.<sup>26</sup> These joint statements clearly show the irremediable dissensus on the way forward in global drug policy.

It is notable that the UNODC was one of the main voices defending the current system. This was clear in Ghada Waly's intervention at the opening of the High-Level Segment, as she appealed countries to 'focus on goals that unite you' and get the 'spirit of

Vienna to prevail.<sup>27</sup> She doubled down on this message even after the vote that broke consensus, as she claimed that 'even in times of division and fractures we can find common ground and collective

results'.<sup>28</sup> It is important to note that this plea was not grounded on evidence and results, but rather on political convenience – the need to find unity and avoid polarisation.

## Box 1. Understanding CHAMPS: Concerns over the UNODC's new early prevention initiative

The UNODC's new initiative, CHildren AMplified Prevention Services<sup>29</sup> (or CHAMPS for short) was launched at the 67<sup>th</sup> session of the CND and its High-Level Segment, via UNODC-led or sponsored side events, in its statements at the Plenary, and posters and banners throughout the Vienna International Centre. CHAMPS aims to bring all scientific and evidence-based prevention services in a country under one comprehensive framework,<sup>30</sup> in line with the UNODC and World Health Organization (WHO)'s International Standards on Drug Use Prevention.<sup>31</sup> CHAMPS is to be rolled out in 10 countries over five years, with 10 million children benefiting from it.

The Paradigma Coalition<sup>32</sup> has been tracking the discussions surrounding CHAMPS since first learning about it in October 2023, and thoroughly investigated the initiative at the 67<sup>th</sup> CND session to fully understand its structure, the initiatives it promotes, the methods of measuring effectiveness, the work done by the UNODC to ensure alignment with the Convention on the Rights of the Child, and the extent to which other UN bodies more suitably mandated to develop and implement children's development initiatives (for example UNICEF and the UN Development Programme) are involved in planning and implementation. And it is concerning to see that many key stakeholders, including within the UNODC itself, are struggling to understand the initiative.

The fundraising element to CHAMPS, for instance, is an area of great confusion. At a CHAMPS Briefing held in October last year,<sup>33</sup> Jean Luc Lemahieu, UNODC's Director of the Division for Policy Analysis and Public Affairs,

had estimated CHAMPS to be 'an over 500 million dollars project', stating that this was 'aspirational'. In both October and December 2023, requests were made for Member States to 'invest in CHAMPS'. But the tune changed in March 2024 with more calls to 'support CHAMPS', as Paradigma was informed that the UNODC was now requesting governments to invest nationally in prevention instead. The discrepancies in messaging regarding the 500 million fundraising is worrying, given that it is nearly double the annual budget of the UNODC, that CHAMPS itself remains vague and problematic, and that conversely the UNODC has remained mostly silent regarding the huge funding gap for harm reduction.<sup>34</sup>

In-depth discussions with UNODC staff revealed that CHAMPS is still in the early stages of development and planning. However, there are deep concerns about many elements of the initiative, particularly the 'screening and brief intervention' activities promoted in the CHAMPS framework. As noted in recent reports of human rights bodies (including by the OHCHR<sup>35</sup> and Special Rapporteur on the Right to Health<sup>36</sup>), drug surveillance tactics pose serious human rights concerns. In an attempt to lay down these concerns, the Paradigma Coalition has elaborated a list of 16 red lines on CHAMPS, including the fact that the initiative is inconsistent with the UN prevention standards and international human rights standards, and that it was developed without adequate youth consultations, among others. Paradigma are now urging Member States to raise these concerns with the UNODC, and to refuse to invest in the initiative unless these red lines are upheld.

## Synthetic drugs and the overdose epidemic: Driver of change or argument for the status quo?

When it comes to substantive drug policy issues, synthetic drugs were the clear centre of gravity of the session. Largely, this is because the Biden Administration has decided to make synthetic drugs a priority for its external action. In July 2023, the USA launched the Global Coalition to Address Synthetic Drug Threats for a period of 18 months<sup>37</sup> in an attempt to mobilise the international community in its response to synthetic drugs – both on the supply control and health dimensions. 151 countries have now joined the coalition.

Although the timeframe and goals of the initiative may bring US electoral politics to mind, the international focus on overdoses is definitely justified. The emergence of synthetic opioids in the unregulated drug supply in North America has given rise to a genuine health catastrophe, accounting for over 115,000 deaths per year in the USA and Canada alone.<sup>38</sup> Whilst the worst effects of the phenomenon are so far centralised in North America, there are signs of synthetic opioids emerging in other markets, and a genuine sense of alarm amongst policy makers and the general public.

The prominence of synthetic drugs was made obvious by dozens of references in country and UNODC statements, the first-ever presence of a US Secretary of State in Vienna, Anthony Blinken, and of course the resolution tabled by the USA

on overdose prevention.<sup>39</sup> When it comes to harm reduction, the overdose epidemic is arguably the real, tangible tragedy that has pushed the system towards change. The US representative made that clear by stating that ‘we are proud to sponsor a resolution focusing on overdose prevention, in which we have utilized the term “harm reduction”, albeit recognizing its contentious nature among many Member States. We urge you to move beyond semantics and join us in exploring compassionate approaches that do not rely solely on criminal justice responses to drug use.’<sup>40</sup>

While the overdose epidemic is arguably behind this year’s push for harm reduction, synthetic drug threats were often also used as arguments for prohibition and status quo. In fact, despite the broad calls for rethinking and innovation, almost no country acknowledged that scheduling, prohibition, and law enforcement have been ineffective – and even more problematically, counterproductive – mechanisms to prevent the appearance of toxic synthetic opioids into the drugs supply. Indeed, such efforts may well be at the very root of the problem. The USA itself presented multiple initiatives to strengthen law enforcement cooperation, boasting that it has funded the UNODC ‘with over USD 158 million in extra-budgetary contributions, a significant portion of which has been dedicated to mobilizing an international response to combat the synthetic drug threat.’<sup>41</sup> Only Czechia recognised that ‘the balloon effect continues to compromise the effects of current policies.’<sup>42</sup>

### Box 2. A global majority for harm reduction

A very welcome development at the CND in recent years is the end of the taboo on the words ‘harm reduction’, which are now included in the statements delivered by a broad range of Member States representing all regions. Reading through the CND Blog, the authors of this report recorded supportive references to harm reductions by countries as diverse as Canada, Costa Rica, Denmark, India, Indonesia, Iran, Kenya, Malaysia, Nigeria, Switzerland, and Tanzania, as well as the European Union (EU) – to name a few.

New Zealand delivered a particularly strong statement with a focus on drug checking, while Switzerland made it clear that ‘Harm reduction is therefore an indispensable tool if we truly want to respond effectively to the health risks

stemming from drug consumption, whether it be HIV/AIDS, hepatitis, or overdoses.’<sup>43</sup>

This development should not be surprising, as at least 109 Member States are recorded as expressing support for harm reduction in their national policies and strategies.<sup>44</sup> Furthermore, the term ‘harm reduction’ is already agreed language at the UN General Assembly<sup>45</sup> and at the UN Human Rights Council.<sup>46</sup> Importantly, only two countries actually voted against the inclusion of the term ‘harm reduction’ as the overdose resolution came to the Plenary for adoption ([read below](#) for more details).<sup>47</sup> Disappointingly, UNODC Executive Director Ghada Waly stood out by not endorsing harm reduction in any of her Plenary statements.

## Cannabis regulation: Tension grows as Germany joins the club

The legal regulation of cannabis is the most concrete and tangible aspect of the crisis facing the global drug control regime. Since 2012, seven countries and 25 US state-level jurisdictions have moved to adopt some form of regulated framework for the supply and use of cannabis, in direct contravention to the drug conventions.<sup>48</sup> The momentum for this policy was made evident to all when, on the last day of the CND session, the German Bundesrat finally approved the long-expected regulatory framework for cannabis. With Germany, the total number of people living in jurisdictions where cannabis is legal went over 380 million. At least 200 million more live in jurisdictions where there are credible plans to adopt a regulatory framework.

Although cannabis regulation is on the offensive globally, it is on the defensive in Vienna. At the CND, voices against regulation are broader and louder than those in favour of the reform. Statements condemning regulation were delivered at the High-Level Segment and throughout items 5 and 6 of the ordinary session, including in the joint statement delivered by Russia on behalf of 46 Member States, which expressed concern over the impacts of cannabis on 'children and youth'. Interestingly, opposition to regulation was framed as a human rights issue: 'Respect for human rights is

best served by using drugs for scientific and medical purposes only'.<sup>49</sup> Aside from the joint statement, various individual Member States also expressed concerns over legal regulation, including Brunei Darussalam, Burkina Faso, China, Cuba, Iran, Korea, Nigeria, Pakistan, Qatar, Russia, Singapore and Sri Lanka, among others.

In contrast, countries that have moved to regulate cannabis defended their policies in a muted, and often apologetic, way. Thus, Czechia framed its proposal for regulation as a prevention effort,<sup>50</sup> Germany referred to its new framework as a prevention and harm reduction policy,<sup>51</sup> while the Netherlands described its pilot projects as an 'experiment against public nuisance, crime, and pro-public health'.<sup>52</sup>

While cannabis remains prohibited at federal level, the USA was perhaps its most outspoken defender, continuing its increasing departure from arch prohibitionist State, asking its fellow Member States whether we should view the drug control treaties 'as a straight jacket that tells you "you must do this and you cannot do that"... I would suggest that we start looking at the treaties, and we look at them objectively and try to step away from the various myths that have consumed us for years'.<sup>53</sup> The US representative also corrected the narrative on the harms of regulation on young people, noting that 'Our evidence debunks that theory'.<sup>54</sup>

### Box 3. The INCB tones down its words on cannabis regulation

In recent years, the International Narcotics Control Board (INCB or Board) has become a leading voice criticising the legal regulation of cannabis, dedicating the thematic chapter of last year's Annual Report to this topic.<sup>55</sup> In fact, the Board's position became so outspoken that a growing number of countries had started to rely on the INCB as a springboard to criticise Member States moving towards regulation.

We noted that trend in last year's CND proceedings report,<sup>56</sup> with a warning that the politicisation of the INCB's position on this contentious issue could become a real problem for the Board, particularly as powerful Member States like the USA and Canada were already questioning its

role in interpreting the conventions or monitoring their implementation.

It may very well be that the Board has been listening to these warnings. Whereas at the opening of the 2023 CND then-INCB President Jagjit Pavadia put criticism of legal regulation at the forefront of her intervention, this year references to regulation were scarce, subdued, and very much relegated to the end. In his statement under agenda Item 5.c, the Board's President seemed to shrug off its responsibilities on the matter, noting that 'The apparent tension between these provisions and the trend toward legalization needs to be addressed by the signatories of the drug control conventions'.<sup>57</sup>



## Human rights and Indigenous Peoples' rights continue to gain ground in Vienna

In recent years, the UN human rights system has emerged as a major actor in global drug policy debates, with human rights bodies and experts calling loud and clear for transformative change. Geneva-based human rights bodies have arguably been the UN entities most engaged with the Midterm Review outside Vienna. In August 2023, the OHCHR released a landmark report on human rights challenges in drug policy,<sup>58</sup> framed explicitly as a contribution to the Midterm Review. In a clear precedent of the message delivered by Colombia at the opening of the session, the report called for a paradigm shift in the global approach to drugs, placing human rights, equality and non-discrimination at its centre.

With the 2023 report, the OHCHR became the first-ever UN agency to invite Member States to consider the responsible regulation of all drugs. For those in Vienna who had been increasingly wary of the contributions from Geneva, this recommendation was the straw that broke the camel's back, and they lashed back. A good example of this is the UNODC intervention at the Human Rights Council intersessional panel on human rights in drug policy in February 2024, where the UNODC representative, Jean-Luc Lemahieu, largely parsed over actual human rights violations, and instead spoke at length on prevention and reframed the OHCHR recommendation on legal regulation as a call to improve access to medicines.<sup>59</sup>

High Commissioner Volker Türk was unfazed by this backlash. As the first UN High Commissioner for Human Rights to attend the CND in person, he delivered a powerful intervention at the opening of the High-Level Segment, in which he called for 'transformative change' in drug policy.<sup>60</sup> On top

of his intervention, the OHCHR also intervened at the stock-taking roundtable of the High-Level Segment, and under Item 6 of the regular session, where it highlighted the then forthcoming report on harm reduction of the UN Special Rapporteur on the right to health.<sup>61</sup>

A significant number of countries took the floor to welcome the work of the OHCHR, including Austria, Canada, Colombia, Mexico, Portugal, and of course the Colombia-led joint statement by 62 Member States. Switzerland was probably the most outspoken, stating that 'It is high time that we implement the recommendations of civil society and other UN specialised parties, such as UN Women, UNAIDS, and human rights bodies. Human rights must be our compass.'<sup>62</sup> On the opposite side, Pakistan noted that an 'excessive focus on human rights should not limit us in countering the world drug problem',<sup>63</sup> while Russia confronted the High Commissioner head on for his 'recommendations that are at odds with the three drug control conventions and their counter-productive nature for international anti-narcotics cooperation'.<sup>64</sup>

Indigenous Peoples' rights are also gaining increasing ground at the CND – including in the negotiations of the yearly alternative development resolution. Bolivia has long been the most outspoken country on this issue, as it triggered in 2023 a critical review of the status of the coca leaf under the conventions.<sup>65</sup> Bolivia's move was justified as a key step to address the colonial legacy of the global drug control regime. While waiting for the WHO's Expert Committee on Drug Dependence recommendations on this matter, Bolivia and its allies have continued to put this issue at the centre of Vienna, with an intervention by Bolivian Vice President David Choquehuanca at the opening of the High-Level Segment, and a major high-level side event that featured a statement by High Commissioner Volker Türk.



Bolivian Vice President Choquehuanca addressing the 67<sup>th</sup> CND session, while holding coca leaves. Credit: CND\_Tweets



Diego Andrés Lugo-Vivas speaking of the rights of Indigenous Peoples at the 67<sup>th</sup> session of the CND. Credit: Beatrix Vaz

Throughout Plenary proceedings, Brazil, Colombia, Mexico and Peru, as well as the joint statement of the GRULAC, also spoke about the need to protect the rights of Indigenous Peoples in drug policy making, recognising that they are disproportionately harmed by current approaches. Canada was probably the most forceful delegation, recognising that the impact of drug control on Indigenous Peoples has been 'exacerbated by historical trauma, lack of access to housing, and ongoing colonization'.<sup>66</sup> The statement of the Group of 77 also made a reference to the UN Declaration on the Rights of Indigenous People, showing that the issue is being mainstreamed and accepted by a broad number of countries across regions. This level of Member State engagement is a remarkable step up from prior sessions, and a clear sign that the powerful advocacy by Indigenous delegates at the CND is working.

An example of this advocacy was the statement delivered at the High-Level Segment by Diego Andrés Lugo-Vivas, on behalf of both the International Indigenous Drug Policy Alliance and the Peasant Reserve Zones. In a strong statement starting with a tribute to Dairo Yovani Aquite, an Indigenous leader from Inzá, Colombia, murdered in March 2024, the representative made it clear that the 'war on drugs'

is 'the result of colonial views of whiteness, sexism, classism, misogynistic behaviours, racism, patriarchal abuse, continuous deracination, homophobia and transphobia'.<sup>67</sup>

### Geopolitical dynamics: Drug policy does not happen in a vacuum

The CND is first and foremost a diplomatic forum and, as such, a space where geopolitics take a central stage. The Russian aggression on Ukraine was the major issue at the March 2022 session of the CND, likely because it began just two weeks before the start of the Commission, and Vienna is a mere six-hour drive from Ukraine. The war blew a hole at the credibility and legitimacy of Russia's initiatives at the Commission – where it was historically the leading actor on the pro-status quo side. This brought an end to several traditions central to the 'Vienna spirit'.<sup>68</sup>

Two years later, the Russian war remains an important consideration at the CND – as it continues to be in other UN settings. A significant number of countries condemned the Russian aggression in their statements. During the High-Level Segment,



IDPC Executive Director Ann Fordham expresses solidarity with the people of Palestine as she addresses the Plenary at the 67<sup>th</sup> CND. Credit: Martin Jelsma

the Russian delegation spoke against the ‘neo-nazi regime in Kiev and Western terrorism against Russia’,<sup>69</sup> triggering a mass walk-out from delegates. However, statements against Russia came only from Western countries aligned with Ukraine, and it was clear that most delegations are not seeking to prioritise this conflict in their CND endeavours. The fact that 46 delegations were comfortable with letting Russia lead the anti-regulation statement seems to indicate that Russia is seen once again as a legitimate leader in Vienna.

The 67<sup>th</sup> session of the CND took place when the number of civilians killed by Israel in Gaza were estimated at over 30,000. In many corners of the world, Western support for the Israel after two years of condemning the Russian aggression on Ukraine was seen as an act of hypocrisy. At least eight Member States used their plenary interventions to express their concern over the war, albeit with different nuances. There was explicit condemnation by Algeria, Jordan, Kuwait, Pakistan, South Africa, Syria and Turkey. Meanwhile, Canada, the EU, Norway and Sweden made more vague calls for peace. IDPC was the only civil society organisation to use its plenary statement to express, on behalf of many members of the network, its solidarity with the people of Palestine, thus earning a rebuttal by the Israeli delegation. The demands expressed by IDPC for a ceasefire and a release of people arbitrarily detained on all sides echoed many calls from within the UN human rights system. A great deal of IDPC’s work to end the ‘war on drugs’ is premised on the notion that the international community must place human rights at the centre of its agenda, and many felt that turning a blind eye on the systemic

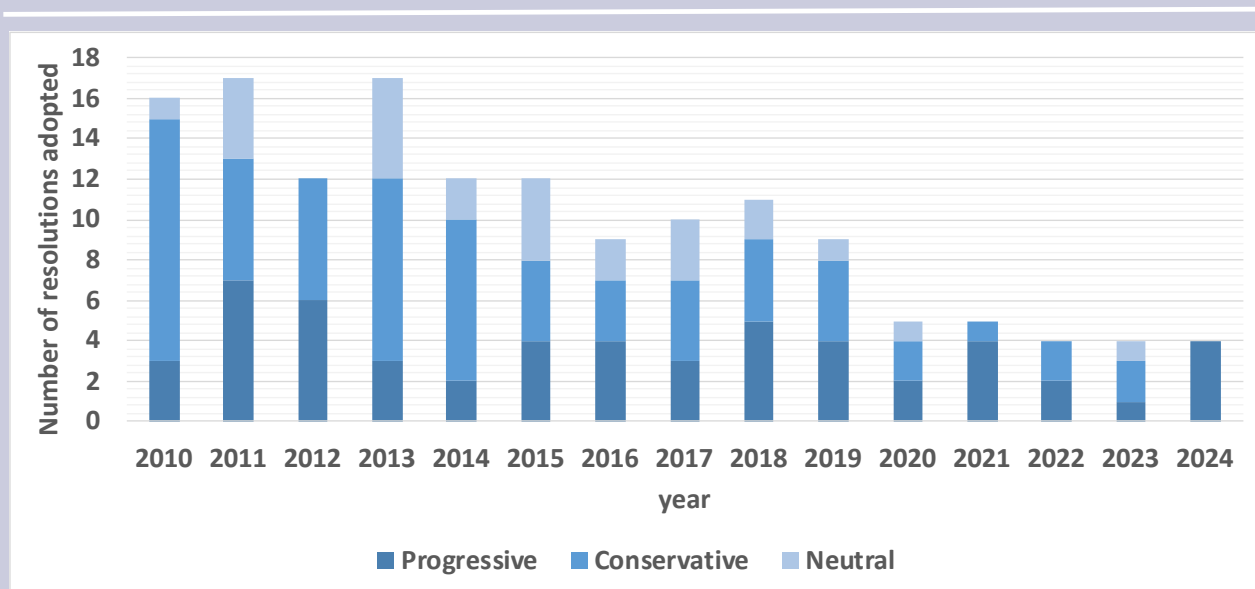
violations in Gaza would undermine the credibility and legitimacy of that effort.

## The Committee of the Whole: The Vienna consensus breaks

The negotiation of resolutions at this year’s CND was perhaps the most exciting delegates had seen in decades. As the CND started, only four resolutions had been tabled for negotiations:

- Resolution 67/1. Promoting recovery and related support services for people with drug use disorders (tabled as Draft resolution L3 by Chile)
- Resolution 67/2. Improving access to and availability of controlled substances for medical purposes, including for the treatment of children in pain, through the promotion of awareness-raising, training and data collection (tabled as Draft resolution L.4 by Belgium and Côte d’Ivoire)
- Resolution 67/3. Celebrating the tenth anniversary of the United Nations Guiding Principles on Alternative Development: Effective implementation and the way forward (tabled as Draft resolution L2 by Germany, Peru and Thailand)
- Resolution 67/4. Preventing and responding to drug overdose through prevention, treatment, care, and recovery measures as well as other public health interventions to address the harms associated with illicit drug use as part of a balanced, comprehensive, scientific evidence-based approach (tabled as Draft resolution L5 by the USA).

**Figure 1. Analysis of CND resolutions, 2010 to 2024<sup>70</sup>**



Credit: Marie Nougier, IDPC

In contrast with previous years, all resolutions tabled at the 67<sup>th</sup> session had a progressive stance (see Figure 1). And so, like-minded Member States were acutely aware that more conservative countries would come in full force to water down and weaken the proposed drafts. At the same time, the fact that the USA was leading on a resolution on overdose prevention that explicitly mentioned ‘harm reduction’ no less than nine times, was a clear message to the Commission: this year, all efforts would be made for this term to be finally accepted as CND-agreed language.

## Tensions arise over unilateral coercive measures

As has become tradition, Germany, Peru and Thailand presented their yearly **resolution on alternative development – Resolution 67/3**, which marked the 10-year anniversary of the United Nations Guiding Principles on Alternative Development. The resolution built upon the progress made in previous years, with language around environment protection, gender, the rights of Indigenous Peoples and the need to ensure ‘proper and coordinated sequencing’. Mostly, however, the negotiations on the alternative development resolution became a battleground over ‘technology transfer’ and ‘unilateral coercive measures’ (UCMs) – two highly political issues revealing a broadening divide between Global North and Global South countries.

Iran kicked off the debates by proposing wording on UCMs taken from last year’s alternative development

resolution (Resolution 66/4): ‘Recognizes the fundamental role of effective international cooperation in preventing and combating drug-related crime, in particular through alternative development programmes, and to this end underlines the importance of addressing, tackling and effectively responding to international challenges and barriers, *in particular measures, that hinder such cooperation, and which are not consistent with the Charter of the United Nations and obligations under international law, and in this regard urges States, consistent with their international obligations, to refrain from applying such measures*’ (emphasis added).<sup>71</sup> Iran justified this addition by explaining that unilaterally imposed sanctions were affecting the alternative development programmes targeting farmers in both Iran and Afghanistan.

Over the past year, UCMs have become a key point of contention in various parts of the UN system, with the issue also coming up strongly throughout the negotiation of the outcome document for the Midterm Review. At the UN General Assembly last October, various countries from Africa, the Middle East, Central Asia and Latin America all raised concerns over UCMs,<sup>72</sup> as measures that were causing ‘immense economic hardship and deprived vulnerable populations of critical medical care.’<sup>73</sup> A few months earlier, the Human Rights Council adopted Resolution 52/13 on ‘The negative impact of universal coercive measures on the enjoyment of human rights’, in which Member States expressed ‘grave concern at the negative impact of unilateral coercive measures on human rights, including the

right to development, international solidarity, international relations, trade, investment and cooperation, and underscored 'the disproportionate and indiscriminate human costs of unilateral coercive sanctions and their negative effects on the civilian population'. Again, the vote showed the global divide on the issue, with those in favour being all located in the Global South, and those against being located in Europe and North America.<sup>74</sup>

The war in Gaza – which was inevitably mentioned regularly throughout the CND debates (see above for more details) – has further underscored the dysfunctional nature of UCMs. While Global North countries have long justified the imposition of UCMs as a key tool to protect human rights and uphold international law, the refusal to impose sanctions on Israel for the atrocities committed in Palestinian territories – and the blockage of any resolution by the Security Council to that effect – has demonstrated how sanctions are, in reality, only applied as a political tool.

In contrast with other UN fora, however, language on UCMs did not get much support during the negotiations of Resolution 67/3 on alternative development, likely in recognition that Iran was pushing this issue in the CoW solely for political reasons. On the other side, the EU and countries like Australia, Canada, Germany, Japan, Norway, Peru, Poland, the UK and the USA resisted inclusion of the UCM language until the very end of the CND week. In retaliation, Iran blocked the adoption of a number of paragraphs, leading the CoW Chair to send the draft resolution to the Plenary without agreement in the CoW.

## Promoting technology transfer & affordability: The North-South divide deepens

Another key issue of contention during the negotiations of **Resolution 67/3** related to language around 'technology transfer', again proposed by Iran. As a transit country, Iran explained, technology transfer was considered as a key element for 'combating the drug scourge'. After push back from the German, Peruvian and US delegations, Australia proposed compromise language in the form of: 'enhancing technical and financial support', which Iran refused to accept.

The issue of technology transfer arose again with the concept of 'affordability' as **Resolution 67/2 on access to controlled medicines** came to the CoW. The Egyptian delegate was clear and to the point: the affordability of medications constitutes one

of the main impediments to access to controlled medicines.<sup>75</sup> And as long as medicines continue to be predominantly supplied by private corporations (most based in the Global North) which hold monopoly and intellectual property rights over these products, the medicines will generally be unaffordable, and therefore inaccessible, in most of the Global South.<sup>76</sup> Transfer of technology on controlled medicines would mitigate these risks.

While Canada warned against the inclusion of a 'shopping list' to the paragraph relating to 'impediments to accessing medicines', South Africa rightly retaliated: 'Poverty... underdevelopment and unaffordability is not a shopping list for low- and middle-income countries'. In the end, the term 'technology transfer' failed to make it into any of the CND resolutions adopted at this 67<sup>th</sup> session. Nonetheless, the need for 'affordable' care and services was recognised (in five instances) in **Resolution 67/2 on access to medicines** and in **Resolution 67/1 on recovery**, while **Resolution 67/4 on overdose prevention** includes the wording 'within their means' four times within its operational paragraphs.

## Recognising the critical role of civil society

As IDPC has repeatedly warned against shrinking civic space both nationally and in UN fora, it was unsurprising that the issue of civil society engagement also came up at this year's CoW. In 2023, the negotiations of the modalities resolution for the Midterm Review had been particularly frustrating in relation to civil society.<sup>77</sup> In contrast, NGO participation was definitely not the main point of contention at this 67<sup>th</sup> CND session. In fact, progress was made on the role of civil society in drug policy, especially in **Resolution 67/1 on recovery** which welcomes the role and contributions of both 'people in recovery' and 'representatives of affected communities'. Similarly, **Resolution 67/2 on access to medicines** recognises the role of civil society and 'community-led organisations'.

Disappointingly, mention of 'civil society and affected communities' was removed from a key paragraph of **CND Resolution 67/4 on overdoses**, which requests an open-ended intergovernmental expert group meeting on drugs and drug overdoses. After much back and forth on the text, the language was eventually replaced with 'nongovernmental stakeholders' – a real missed opportunity considering the critical role that people who use drugs have played in shaping the harm reduction response to the overdose crisis.

## The Vienna consensus crumbles over harm reduction

The most contentious topic of the week no doubt came up in relation to the US-sponsored **Resolution 67/4 on overdose prevention**. This was the first resolution dedicated to overdose since 2012 which was, at the time, tabled by Portugal.<sup>78</sup> This was also the first time that progressive Member States presented a serious and united front in support for the inclusion of the term 'harm reduction' in a CND resolution. It was also notable that this resolution was presented by the USA, a State that for so long objected to the term 'harm reduction' and ensured through its diplomatic might that it would not appear in any political text agreed in Vienna. The unmitigated overdose death crisis within its own borders finally changed its stance, and as such, when the negotiations started in the CoW, the USA stated: 'The time has come to address the elephant in the room'. Throughout the week, 16 countries<sup>79</sup> and the EU made strong statements in favour of harm reduction and the need for its inclusion within the text – refusing to accept the usual compromise language traditionally used at the CND, i.e. 'initiatives and measures aimed at minimizing the adverse public health and social consequences of drug abuse'.

In response, various delegations<sup>80</sup> spoke against harm reduction. China simply proposed substituting 'harm reduction' with 'demand reduction', while the Holy See declared being 'convinced that the focus should be on preventing drug use'. Russia – certainly the most vocal delegation on the topic – declared that 'some measures that some countries call "harm reduction" constituted 'a threat to the national security' of the country, and concluded that it could not agree to any preambular paragraph, operative paragraph, or any resolution that contained these words.

In defence of harm reduction, the Australian delegate presented a long list of initiatives being implemented across the country, stating that 'The evidence for harm reduction strategies is strong. It is important to provide health services for all people so they can lead long healthy lives and harm reduction complements supply and demand reduction'. The Swiss delegate failed to hide his frustration over the refusal by several Member States to include 'harm reduction' in the resolution: 'Why do we have more than 100 countries globally that use

the concept of harm reduction...and yet it remains difficult to recognise a practice that is so widely used? Each time we were compelled to paraphrase. We have an expression for it. And reflects what it is we do internationally'. Belgium, in the meantime, called on those present to 'do a reality check... People are suffering and dying. Harm reduction works'.

Various options were proposed as delegates tried to find a viable solution, ranging from an unprecedented number of caveats ('I have rarely seen a paragraph that is so caveated' deplored the Swiss delegate), the removal of all but one mention of the term (going from nine in the original text, to four after the first round of negotiations, to a single one at the very end), and the proposal of a footnote acknowledging that 'harm reduction is not permissible under some Member States' domestic legal frameworks except in the context of HIV prevention, treatment and care among people who inject drugs'. In addition, several harm reduction interventions that had originally been included in the draft resolution, including 'drug checking' and 'supervised consumption sites', were removed from the text 'in the spirit of compromise'. Interestingly, the usual proxy language used at the CND to refer to harm reduction was also replaced with less stigmatising wording: 'public health interventions to address the harms associated with illicit drug use'.

And yet, no effort was good enough. The negotiations stalled, and eventually reached a stalemate on the last day of the CND. On one side, Russia asked the CoW: 'In terms of ensuring good faith and international cooperation based on trust and mutual respect of each other's priorities, will the Commission allow a group of Member States to impose their view on others that oppose many UN values?... Let's focus on what unifies us'. To this, Norway retaliated: 'We believe that the Vienna consensus is not best served by a small number of countries blocking this consensus'.

Faced with this impasse, the USA asked the CoW Chair to clean up the resolution and send it to the Plenary, with an indication of which paragraphs were not agreed in the CoW. In the end, Russia objected to the one paragraph that retained 'harm reduction',<sup>81</sup> while Iran objected to another six.<sup>82</sup>

As the negotiations eventually closed in the CoW on Friday afternoon, all eyes turned to the Plenary where Member States were getting ready to vote on CND resolutions for the first time since 1985.<sup>83</sup>



A full room in the CoW as Member States attempted to find a final compromise on the overdose resolution. Credit: Nick Boyce

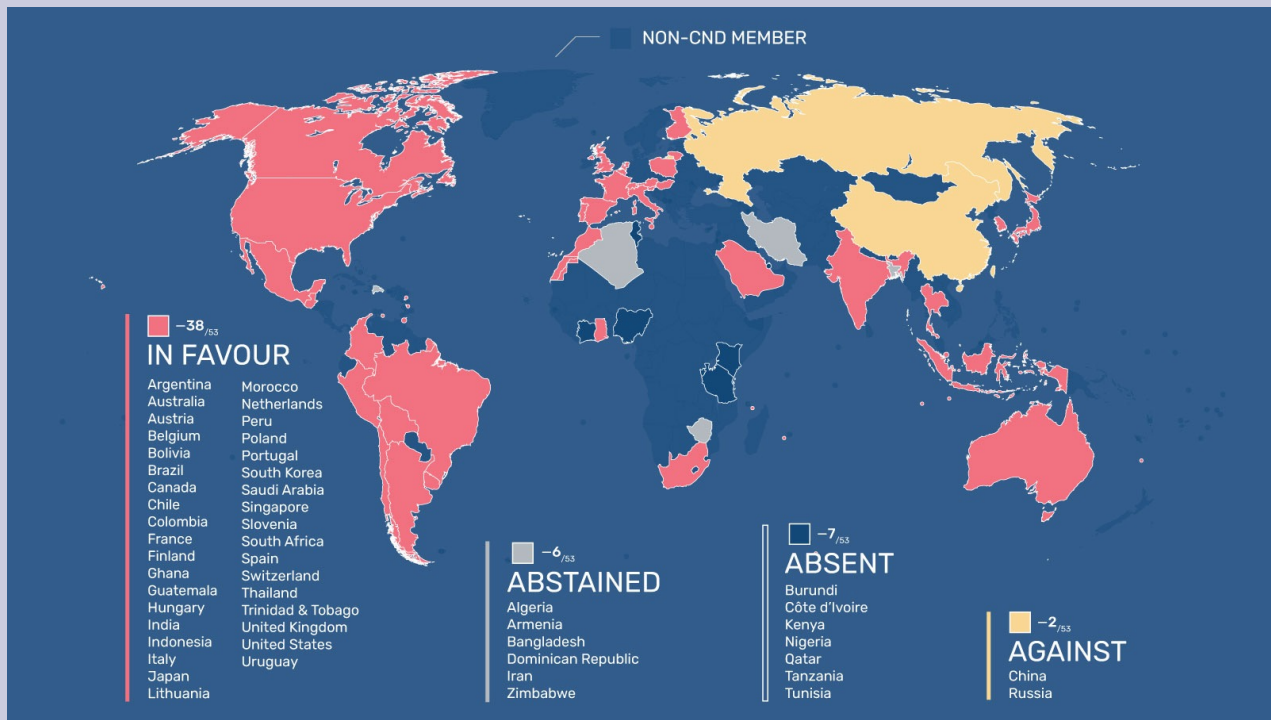
## The consensus is broken: What's next for the 'Vienna spirit'?

A sense of uncertainty was in the air as delegates made their way to the Plenary on Friday afternoon, with no clear idea of how the proceedings were going to go. The CND Chair decided to focus first on the presentation of the official report of the 67<sup>th</sup> session, and then moved on to adopt the two resolutions that had been approved in the CoW: **Resolution 67/1 on recovery**, and **Resolution 67/2 on access to medicines**.

With those out of the way, it was time for the Chair to consider **Resolution 67/3 on alternative development**. In his introductory remarks, the Thai delegate mentioned the sponsors' efforts to reach an agreement on a resolution that took 'over 24 hours of informal consultations in probably the most open and transparent manner that we could', in addition to six hours of negotiations in the CoW. After so many hours of discussions, however, the sponsors had taken the hard decision of deleting all contentious paragraphs that had not enjoyed 'broad consensus'. Later on, the Thai delegate would joke: 'Last Wednesday, when this draft resolution was introduced at the pre-session consultation, my colleague was saying that he was expecting a bumpy road ahead, but I did not know that it would be a rollercoaster ride!'

At that stage, Thailand invoked Rule 50 of the Rules of Procedure of the Functional Commissions of the Economic and Social Council,<sup>84</sup> according to which 'A representative may at any time move the closure of the debate on the item under discussion, whether or not any other representative has signified his wish to speak. Permission to speak on the motion shall be accorded only to two representatives opposing the closure, after which the motion shall be put to the vote immediately'. The voting process had started. At that point, Iran objected to the closure of the debate, leading the Chair to invoke Rule 58 of the Rules of Procedure according to which a simple majority of CND Members present and voting is required for approval. The motion passed easily, with Iran being the only delegation voting against, and abstentions from Algeria, Indonesia, Kenya, Russia and Tanzania. The first vote on a CND resolution in decades was then called for by the CND Chair. In a surprising turn of events, Iran – the very delegation which had called for a vote on the resolution – abstained (alongside Armenia and Tanzania), resulting in the resolution being adopted by 45 Member States,<sup>85</sup> with no vote against, and four abstentions. A baffled UK delegate enquired: 'given that there were no votes against the motion, is the resolution passed by consensus?', to which Iran replied: 'If there was consensus, we would not vote.' 'It is a matter of regret', the Iranian delegate continued, 'that, despite all efforts from my

**Figure 2. Overview of votes on CND Resolution 67/4 on overdose prevention**



Credit: Juan Fernández Ochoa

delegation, the sponsors of this resolution chose a path of confrontation rather than cooperation in the spirit which would be needed in the CND.

After a short break, the long-awaited discussion on the overdose resolution finally started in the Plenary. Without delay, the USA invoked Rule 50 of the Rules of Procedures (closure of the debate), which was approved by 45 votes in favour, with no votes against nor any abstentions. When asked by the Chair whether the resolution could be adopted by consensus, Russia invoked Rule 57 of the Rules of Procedure (request for a vote). In a historical move, the first-ever CND resolution featuring the term 'harm reduction' was finally adopted in Vienna, with 38 votes in favour,<sup>86</sup> two votes against,<sup>87</sup> and six abstentions.<sup>88</sup>

Following the vote was a long line of speakers commenting both on the contents of the resolution (some promoting prevention and a drug-free society, while others strongly defending harm reduction), and on the process (deploring the end of the 'Vienna spirit'). On the substance, Canada made it clear: 'This is a question of the health and safety of humankind. It is a question of life or death'. In contrast, China noted 'with concern that in some countries the so-called harm reduction intervention introduces practices suspected of condoning, or even legalising, drug abuse – such as legitimising

drug consumption rooms'. As for Russia, the delegate deplored the fact that 'several countries at the national level have substantially lowered the bar disastrously... The stated aim of these countries is merely harm reduction... We totally disagree with this'. Singapore was more subtle in its explanation of vote: 'We do acknowledge that harm reduction, despite lacking an inter-governmentally agreed definition, has its merit and is important to some countries in tackling their domestic drug problem. Nevertheless, we strongly believe that countries that adopt harm reduction measures should also consider having recovery and abstinence as the end goal'.

Most delegates discussed the implications of this historical moment for the 'Vienna spirit'. Canada made it clear that it 'stands ready to work constructively with all delegations in this room in getting the CND back to the path of consensus', while the EU expressed concerns over the decision to take CND resolutions to a vote.

Nonetheless, the vote was also an opportunity for various Member States to emphasize the limits of consensus-based decision-making in Vienna. Immediately after the vote, the US delegate took the floor again: 'We regret that this minority of States have pushed the spirit of Vienna to the brink, but we believe the vote count for this measure



demonstrates that a small number of States are utilising our consensus-based decision-making process to hold the CND hostage'. A lengthy statement by the Russian representative followed this declaration, with the delegate lamenting the 'major step backwards' undertaken by the Commission. 'This kind of method of work is absolutely unacceptable', he continued, 'it is done in bad faith and not in compliance with the renowned traditions of the CND'. This led the EU delegate to remark that 'consensus cannot mean a veto right for every Member State. The Vienna spirit is an expression of willingness and dedication of all concerned parties to pull together to find joint solutions, even on the most difficult topics. It requires good faith, willingness to listen to each other, and a certain flexibility'.

As the 67<sup>th</sup> session of the Commission came to a close, the final remarks from UNODC Executive Director Ghada Waly were somewhat anticlimactic: 'This High-Level Session spoke to a fundamental truth of this Commission – that even in times of division and fractures, we can find common ground and collective results... We need to stay committed to the Vienna Spirit'. On a similar path, the CND Chair closed the CND with words of caution: 'We can still deploy our utmost efforts to keep the Vienna spirit when considering issues within the remit of our common and shared responsibility. Voting on issues of this nature undoubtedly undermines our collective enterprise and, therefore, I urge deep reflection on this matter'. These, and other remarks by various delegations show that the broken consensus may not yet become the new normal at the CND. However, the move to a vote has shown that Member States are no longer beholden to seeking consensus at all costs, and this brings a world of opportunities (and challenges!) to the fore for the years to come.

## NGO dialogues: More challenges to the status quo

As part of its role in facilitating NGO participation at the CND, the Vienna NGO Committee on Drugs (VNGOC) hosted five 'Informal Civil Society Dialogues' with senior UN officials: the WHO delegation,<sup>89</sup> the INCB President and Secretary,<sup>90</sup> the UNODC Executive Director and her senior management,<sup>91</sup> the CND Chair and Secretariat,<sup>92</sup> and finally one with representatives OHCHR, UNAIDS and UNDP.<sup>93</sup> The Dialogues are an important opportunity for NGOs to pose taxing questions directly to those in positions of power. However, the fact that all questions are pre-submitted (and, in the case of the UNODC

Executive Director, vetted and merged), and the lack of opportunity to follow-up or challenge a response, reduces the dynamism of such interactions – resulting in cautiously scripted answers rather than more insightful personal reflections.

In fact, sometimes the Dialogues reveal more through the questions which are avoided or side-stepped, rather than those which are answered. This was perhaps the case at the well-attended **Dialogue with the UNODC Executive Director**, Ms. Ghada Waly. Questions on drug treatment allowed her to speak about the state-run centres she has helped open in Egypt, and questions on the importance of drug prevention allowed her to extol the values of UNODC's new flagship 'CHAMPS' initiative (see Box 1). Yet, more challenging questions on the need for clearer legal thresholds for drug possession, and on the lack of inclusivity in the UNODC's Youth Forum, received short shrift. When colleagues from the youth-led Paradigma Coalition were given the floor to raise concerns about the lack of substantive information about 'CHAMPS' and concerns about its effectiveness, Ms. Waly's response was dismissive and missed the point: 'How can you be concerned about something that you don't have information on yet?'

However, some of the responses from Ms. Waly did serve to underline the value of these Dialogues as moments for civil society to challenge and get new information. The Washington Office on Latin America (WOLA) asked Ms. Waly why the UNODC co-sponsored a CND side event on 'evidence-based policies and practices' alongside a Member State (here, Singapore) which continues to impose the death penalty for drug offences. Ms. Waly responded, 'Our position is clear. We oppose use of the death penalty in all circumstances... Does it mean that we stop working with countries that impose the death penalty? Of course not'. IDPC also used the opportunity to get some much-needed transparency on Ms. Waly's own position, as she confirmed on the record that she has now been re-appointment for a third, two-year term in the role.

At the **Dialogue with the WHO delegation**, similar questions on prevention, treatment and youth were answered by colleagues from the HIV, hepatitis and 'Substance Abuse' programmes – but questions relating to scheduling, the pending coca leaf review and herbal, traditional and psychedelic medicines were left unanswered as the relevant colleagues from the WHO Expert Committee on Drug Dependence were otherwise engaged in the CND Plenary – an unfortunate clash of times. Written answers

were promised but are yet to be received. There was, nonetheless, some interesting exchanges on human rights and on drug use in humanitarian crisis settings – with new WHO guidance coming soon on the latter. When asked by an NGO from Pakistan about ‘the rise of deaths and emergency room visits related to use of cannabis,’ the response was that the WHO has ‘no mandate on how the international legal framework should be applied to prevent cannabis-related health consequences.’ But when pressed on cannabis regulation again a few questions later, they did acknowledge that lessons can be learned from licit markets for nicotine and alcohol products, and the impacts of availability, accessibility, affordability, quality and age controls.

The issue of legal regulation came up again during the **Dialogue with the INCB President**. When asked about the INCB’s views on pilot projects for the regulation of cannabis and cocaine in light of the UN drug control treaties, the Board highlighted the tensions between the conventions on the one hand, and the policies put in place in some countries. This, the INCB concluded, ‘is up to the State parties’, explaining that ‘there are many different approaches to drugs’. As Instituto RIA questioned whether the current framework was still fit for purpose if countries are moving in such different positions, the INCB made its position clear: ‘Whether or not the drug control conventions are fit for purpose

is a question for State parties, not for the Board. The Board’s mandate is to monitor the implementation of the conventions as they are, and to work with State parties to ensure that their objectives are met’.

The most exciting dialogue this year was no doubt the one held with the **representatives of OHCHR, UNAIDS and UNDP**. All three entities elaborated on their work around the promotion of human rights, civil society engagement, decriminalisation and harm reduction, with the representative of the UN Special Rapporteur on the right to health taking this opportunity to highlight Ms. Mofokeng’s upcoming reports on harm reduction. In the meanwhile, the OHCHR representative also underscored the significant progress made in featuring human rights at the CND: ‘I think many of you were here in 2017 when I first came to the CND. At the time, it was not easy to talk about human rights. Now, it’s part of the discussion’.

Perhaps one of the biggest disappointments from this year’s series of Dialogues was that with **the CND Chair, Ambassador Philbert Johnson of Ghana** – who had overseen the fraught negotiations on the midterm review outcome document. Ambassador Johnson had to leave the room moments before being posed this enticing question from Instituto RIA (Mexico): ‘What would you have strengthened or changed in the outcome document if you had your way, rather than working towards consensus?’.



Informal dialogue with the OHCHR, UNAIDS and UNDP, 67th session of the CND. Credit: IDPC

## Box 4. The VNGOC Annual General Meeting and elections

For the NGOs present (and many following online), another mainstay of the CND calendar is the VNGOC’s annual general meeting and Board elections. This year saw another full house in Room CR-7, where the VNGOC Board and the Chair Matej Kosir updated members on their activities and results over the past 12 months.

Ahead of the elections for a new Deputy Chair, Treasurer and Secretary, a bipartisan Nominations Committee had shared their recommended ‘slate’ to try and ensure geographical, gender and thematic balance on the six-person Board.

In the end, an actual vote was only required for the Deputy Chair position, as only the incumbents – Beatrix Vas from Youth RISE and Asia Ashraf from the World Federation Against Drugs – were nominated for the other two positions. Disappointingly, for the second year in a row, the balanced ‘slate’ was not successful. It was apparent that many prevention- and abstinence-focused NGOs rallied to elect Esteban Wood, a WFAD board member from Argentina, rather than the recommended candidate Charity Monareng from TB/HIV Care and SSDP International in South Africa.

## Side events

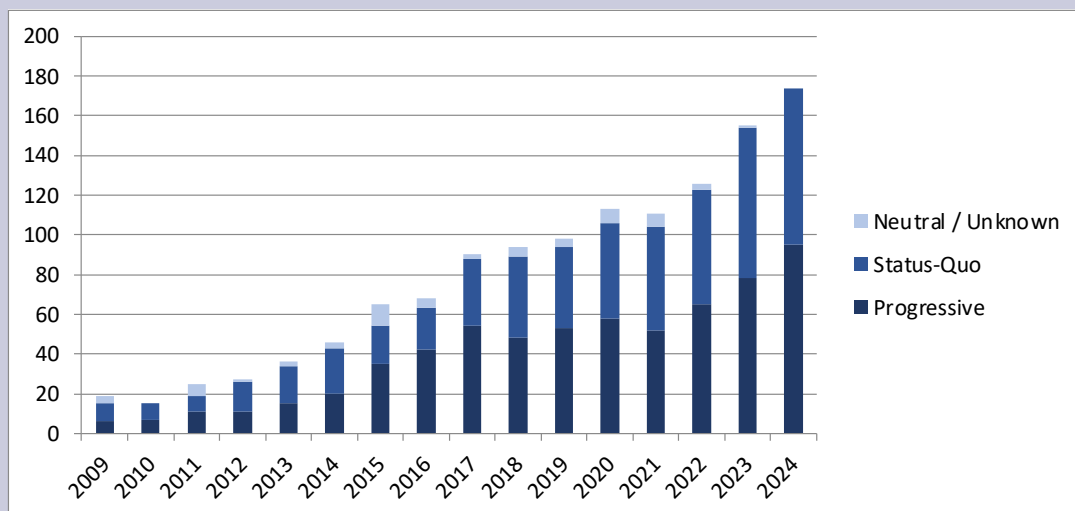
A record number of 174 side events were held throughout the CND week and its High-Level Segment. Of those, over 6 in 10 were (co-)organised by civil society – with an unprecedented 61 side events being co-organised by IDPC Members. 12 of these events were held during the High-Level Segment, focusing on the different challenges identified in the 2019 Ministerial Declaration.

Positively, a majority of the side events at this session had a progressive approach to drug policy, with discussions centring harm reduction, decriminalisation, legal regulation, the rights of Indigenous People, access to controlled medicines, gender and intersectionality, the impacts of drug policies on the environment, as well as events condemning militarisation, the death penalty and extrajudicial killings.

In an effort to give visibility to the OHCHR report on the human rights implications of drug policy, IDPC partnered with the Office of the High Commissioner and various civil society organisations to host a series of seven side events addressing each of the human rights challenges identified in the report.<sup>94</sup> These events featured a good number of UN human rights experts, including from the OHCHR, the Human Rights Committee, the Working Group on Discrimination against Women and Girls, as well as the UN Special Rapporteurs on the right to health and on toxics and human rights.

As always, these progressive events were counter-balanced with events focusing on prevention and the push for a drug-free society, discussions around countering drug trafficking, organised crime, firearms trafficking, etc.

Figure 3. Number of side events organised at the CND, 2009 to 2024<sup>95</sup>



Credit: Marie Nougier, IDPC

## Conclusion

This year's CND was historical in many ways – the first time a High Commissioner for Human Rights addressed the Commission in person, the first votes on resolutions after decades of consensus-based policy making, the first time 'harm reduction' made it into a CND resolution, the first time a large grouping of Member States questioned the punitive drug control paradigm.

One could not help but feel some elation at the huge gains made at this 67<sup>th</sup> session, especially following years of sustained civil society advocacy. And yet, the closing session of the CND left many with a feeling of uncertainty on the extent to which these gains will truly impact drug policy making at the Commission. The fact is that many delegations – both progressive and conservative – used their final remarks to express their support for the 'Vienna Spirit' and reiterate their commitment to consensus-based decision making. The 33<sup>rd</sup> session of the Commission on Crime Prevention and Criminal Justice (CCPCJ) – held in Vienna a mere few weeks after the CND – also presented worrying warning signs. There, much effort was made to conduct a 'business-as-usual' session, with no effort to break, or even question, consensus as resolutions were debated and eventually adopted.

Whether the Vienna spirit gets a makeover in the coming years and Member States build on the 67<sup>th</sup> CND session to start a new tradition of regular voting when adopting CND resolutions remains to be

seen. The aftermath of this year's CND does show that moving in that direction will require significant advocacy from civil society, to ensure strong leadership and coordination by supportive Member States.

In parallel, much remains to be done for Member States to push for real reforms of the punitive drug control approach at the UN, building on the collective acknowledgement that prohibition is simply not working. While over 60 States supported Colombia's joint statement at the high-Level Segment, a closer look at individual country statements shows no clear agreement on what a new UN drug policy paradigm could look like.

Only time will tell what the real implications of this year's 67<sup>th</sup> CND session are for the future of global drug policy making. However, the tide has undeniably turned, and maintaining 'business as usual' at the CND has simply become untenable as the rest of the UN system – and an increasing number of countries – are moving towards a health and rights-based approach to drug policy.

## Acknowledgements

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## Endnotes

1. Links to the CND Blog transcript and the UN Web TV recording of all meetings can be found here: <https://cndblog.org/2024/03/67th-session-of-the-un-commission-on-narcotic-drugs-cnd67-cnd-blog-index/>
2. Commission on Narcotic Drugs (14 March 2024), High-level declaration by the Commission on Narcotic Drugs on the 2024 midterm review, following up to the Ministerial Declaration of 2019, <https://undocs.org/Home/Mobile?FinalSymbol=E%2FCN.7%2F2024%2FL.6&Language=E&DeviceType=Desktop&LangRequested=False>
3. For an analysis of the failure of the global drug control system, see: International Drug Policy Consortium (December 2023), Off-track: Shadow report for the mid-term review of the 2019 Ministerial Declaration on drugs, <https://idpc.net/publications/2023/12/idpc-shadow-report-2024>
4. Based on the excellent CND Blog maintained since xxx by civil society: <https://cndblog.org/>
5. A copy of the reports since 2007 can be found here.
6. International Drug Policy Consortium (July 2020), The 2020 Commission on Narcotic Drugs – Report of proceedings, <https://idpc.net/publications/2020/07/the-2020-commission-on-narcotic-drugs-report-of-proceedings>, p. 2
7. 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](https://www.unodc.org/documents/commissions/CND/2019/Ministerial_Declaration.pdf)
8. Adoption by silent procedure means that the CND Chair shared the draft Outcome Document with all Member States, who were given a 24h window to object to its adoption by consensus. As no objection was made, the text was adopted as submitted by the Chair
9. The declaration can be found here: Commission on Narcotic Drugs (14 March 2024), High-level declaration by the Commission on Narcotic Drugs on the 2024 midterm review, following up to the Ministerial Declaration of 2019, <https://undocs.org/Home/Mobile?FinalSymbol=E%2FCN.7%2F2024%2FL.6&Language=E&DeviceType=Desktop&LangRequested=False>
10. An outline of the process and key inputs can be found here: [https://www.unodc.org/unodc/en/commissions/CND/session/67\\_Session\\_2024/review.html](https://www.unodc.org/unodc/en/commissions/CND/session/67_Session_2024/review.html)
11. International Drug Policy Consortium (December 2023), Off-track: Shadow report for the mid-term review of the 2019 Ministerial Declaration on drugs, <https://idpc.net/publications/2023/12/idpc-shadow-report-2024>
12. Human Rights Council (17 April 2023), Resolution 52/24. Contribution of the Human Rights Council with regard to the human rights implications of drug policy, A/HRC/RES/52/24, <https://undocs.org/Home/Mobile?FinalSymbol=A%2FHR-C%2FRES%2F52%2F24&Language=E&DeviceType=Desktop&LangRequested=False>
13. Office of the High Commissioner for Human Rights (2023), Human rights challenges in addressing and countering all aspects of the world drug problem, A/HRC/54/53, <https://www.ohchr.org/en/calls-for-input/2023/call-inputs-ohchrs-report-human-rights-challenges-addressing-and-countering>
14. <https://cndblog.org/2024/03/opening-of-the-67th-session-of-the-commission-on-narcotic-drugs-item-3-high-level-segment-thursday-morning/>
15. For this and the quote from President Petro below, *Ibid.*
16. *Ibid.*
17. <https://cndblog.org/2024/03/6-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-pro/>
18. *Ibid.*
19. <https://cndblog.org/2024/03/round-table-taking-stock-work-undertaken-since-2019/>
20. <https://cndblog.org/2024/03/round-table-2-the-way-forward/>
21. *Ibid.*
22. Albania, Andorra, Armenia, Australia, Austria, Belgium, Bolivia, Bosnia and Herzegovina, Brazil, Bulgaria, Canada, Croatia, Colombia, Costa Rica, Cyprus, Czechia, Denmark, Dominican Republic, Ecuador, Estonia, Finland, France, Georgia, Germany, Greece, Guatemala, Honduras, Hungary, Iceland, Ireland, Italy, Jamaica, Kiribati, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Mexico, Moldova, Montenegro, Netherlands, New Zealand, North Macedonia, Norway, Panama, Poland, Portugal, Republic of Korea, Romania, San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Timor Leste, Ukraine, United Kingdom, United States and Uruguay
23. [https://estatements.unmeetings.org/estate-ments/31.0365/20240314094500000/FyTLVsbdkc5L/I5dtwx-gu49yK\\_en.pdf](https://estatements.unmeetings.org/estate-ments/31.0365/20240314094500000/FyTLVsbdkc5L/I5dtwx-gu49yK_en.pdf)
24. For a more detailed analysis see: <https://idpc.net/blog/2024/03/starting-here-starting-now-pro-reform-coalition-led-by-colombia-calls-time-on-failed-drug-war-at>
25. Statement made on behalf of People’s Democratic Republic of Algeria, Republic of Angola, Republic of Azerbaijan, Kingdom of Bahrain, People’s Republic of Bangladesh, Republic of Belarus, Negara Brunei Darussalam, Burkina Faso, People’s Republic of China, Republic of Côte d’Ivoire, Republic of Cuba, Democratic People’s Republic of Korea, Arab Republic of Egypt, Republic of India, Republic of Indonesia, Islamic Republic of Iran, Republic of Iraq, Hashemite Kingdom of Jordan, Republic of Kazakhstan, Republic of Kenya, State of Kuwait, Kyrgyz Republic, State of Libya, Lao People’s Democratic Republic, Republic of Mozambique, Republic of the Union of Myanmar, Republic of Namibia, Republic of Nicaragua, Federal Republic of Nigeria, Islamic Republic of Pakistan, State of Palestine, Russian Federation, Kingdom of Saudi Arabia, Republic of Singapore, Democratic Socialist Republic of Sri Lanka, State of Qatar, Republic of the Sudan, Syrian Arab Republic, Republic of Tajikistan, Republic of Tunisia, Republic of Türkiye, United Arab Emirates, Republic of Uzbekistan, Bolivarian Republic of Venezuela, Socialist Republic of Viet Nam, Republic of Zimbabwe
26. [https://estatements.unmeetings.org/estate-ments/31.0365/20240315144500000/cMK2TjW5CUv3/jt1S47zU08YF\\_en.pdf](https://estatements.unmeetings.org/estate-ments/31.0365/20240315144500000/cMK2TjW5CUv3/jt1S47zU08YF_en.pdf)
27. <https://cndblog.org/2024/03/opening-of-the-67th-session-of-the-commission-on-narcotic-drugs-item-3-high-le>

vel-segment-thursday-morning/

28. <https://cndblog.org/2024/03/plenary-items-10-11-and-12/>

29. <https://www.unodc.org/unodc/en/prevention/champs.html>

30. [https://www.unodc.org/res/prevention/champs\\_html/CHAMPS\\_Framework\\_Booklet\\_v3.pdf](https://www.unodc.org/res/prevention/champs_html/CHAMPS_Framework_Booklet_v3.pdf)

31. United Nations Office on Drugs and Crime & World Health Organization (2018), international Standards on Drug Use Prevention – Second updated edition, [https://www.unodc.org/documents/prevention/UNODC-WHO\\_2018\\_prevention\\_standards\\_E.pdf](https://www.unodc.org/documents/prevention/UNODC-WHO_2018_prevention_standards_E.pdf)

32. <https://paradigmacoalition.com/>

33. A recording of the Briefing is available here: <https://youtu.be/8bz9jY2kouY?feature=shared>

34. For more information about the funding gap for harm reduction, see: Harm Reduction International (June 2024), The cost of complacency: A harm reduction funding crisis, [https://hri.global/wp-content/uploads/2024/06/HRI\\_Funding-Report-2024\\_AW\\_080724.pdf](https://hri.global/wp-content/uploads/2024/06/HRI_Funding-Report-2024_AW_080724.pdf)

35. Office of the High Commissioner for Human Rights (2023), Human rights challenges in addressing and countering all aspects of the world drug problem, A/HRC/54/53, <https://www.ohchr.org/en/calls-for-input/2023/call-inputs-ohchrs-report-human-rights-challenges-addressing-and-countering>

36. Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (30 April 2024), Drug use, harm reduction and the right to health, A/HRC/56/52, <https://undocs.org/Home/Mobile?FinalSymbol=A%2FHRC%2F56%2F52&Language=E&DeviceType=Desktop&LangRequested=False>

37. <https://www.globalcoalition.us/>

38. International Drug Policy Consortium (December 2023), Off-track: Shadow report for the mid-term review of the 2019 Ministerial Declaration on drugs, p. 31, <https://idpc.net/publications/2023/12/idpc-shadow-report-2024>

39. Commission on Narcotic Drugs (2024), Resolution L5. Preventing and responding to drug overdose through prevention, treatment, care and recovery measures, as well as other public health interventions, to address the harms associated with illicit drug use as part of a balanced, comprehensive, scientific evidence-based approach, [https://www.unodc.org/documents/commissions/CND/CND\\_Sessions/CND\\_67/Documents/ECN72024L5Rev2\\_unedited\\_revised.pdf](https://www.unodc.org/documents/commissions/CND/CND_Sessions/CND_67/Documents/ECN72024L5Rev2_unedited_revised.pdf)

40. <https://cndblog.org/2024/03/round-table-taking-stock-work-undertaken-since-2019/>

41. <https://cndblog.org/2024/03/item-4-strategic-management-budgetary-and-administrative-questions-2/>

42. <https://cndblog.org/2024/03/6-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-pro/>

43. <https://cndblog.org/2024/03/round-table-2-the-way-forward/>

44. <https://hri.global/flagship-research/the-global-state-of-harm-reduction/>

45. See: UN General Assembly (8 June 2021), Political declaration on HIV and AIDS: Ending inequalities and getting on track to end AIDS by 2030, [https://www.unaids.org/sites/default/files/media\\_asset/2021\\_political-declaration-on-hiv-and-aids\\_en.pdf](https://www.unaids.org/sites/default/files/media_asset/2021_political-declaration-on-hiv-and-aids_en.pdf)

46. See: Human Rights Council (17 April 2023), Resolution 52/24. Contribution of the Human Rights Council with regard to the human rights implications of drug policy, A/HRC/RES/52/24, <https://undocs.org/Home/Mobile?FinalSymbol=A%2FHRC%2FRES%2F52%2F24&Language=E&DeviceType=Desktop&LangRequested=False>

47. <https://idpc.net/blog/2024/03/harm-reduction-takes-centre-stage-as-un-drug-policy-breaks-free-from-the-shackles-of-consensus>

48. International Drug Policy Consortium (December 2023), Off-track: Shadow report for the mid-term review of the 2019 Ministerial Declaration on drugs, p. 56, <https://idpc.net/publications/2023/12/idpc-shadow-report-2024>

49. [https://estatements.unmeetings.org/estatements/31.0365/20240315144500000/cMK2TjW5CUv3/jt1S47zU08YF\\_en.pdf](https://estatements.unmeetings.org/estatements/31.0365/20240315144500000/cMK2TjW5CUv3/jt1S47zU08YF_en.pdf)

50. <https://cndblog.org/2024/03/round-table-taking-stock-work-undertaken-since-2019/>

51. <https://cndblog.org/2024/03/item-3-high-level-segment-friday-morning/>

52. <https://cndblog.org/2024/03/item-5-implementation-of-the-international-drug-control-treaties-monday-morning/>

53. <https://journal.un.org/en/vienna/meeting/official-s/5f149372-e16b-473f-0ed1-08dc3c43a3a7/2024-03-15>

54. Ibid.

55. For an analysis of the INCB Annual Report for 2022, see: International Drug Policy Consortium (July 2023), The INCB Report for 2022 – Regulated cannabis markets and international legal tensions: A missed opportunity, <https://idpc.net/publications/2023/07/the-incb-report-for-2022-regulated-cannabis-markets-and-international-legal-tensions-a-missed>

56. International Drug Policy Consortium (2023), Stuck in the inertia of the past: Report of the 66th session of the Commission of Narcotic Drugs, <https://idpc.net/publications/2023/08/stuck-in-the-inertia-of-the-past-report-of-the-66th-session-of-the-commission-on-narcotic-drugs>

57. <https://www.incb.org/incb/en/news/speeches/2024/statement-of-the-incb-president-on-item-5-c-at-the-67th-session-of-the-cnd.html>

58. <https://www.ohchr.org/en/press-releases/2023/09/end-overreliance-punitive-measures-address-drugs-problem-un-report>

59. A recording of the intersessional panel can be found here: <https://webtv.un.org/en/asset/k1b/k1bz8q5pmc>

60. <https://cndblog.org/2024/03/opening-of-the-67th-session-of-the-commission-on-narcotic-drugs-item-3-high-level-segment-thursday-morning/>

61. The report is now available here: Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (30 April 2024), Drug use, harm reduction and the right to health,

A/HRC/56/52, <https://undocs.org/Home/Mobile?FinalSymbol=A%2FHRC%2F56%2F52&Language=E&DeviceType=Desktop&LangRequested=False>

62. <https://cndblog.org/2024/03/round-table-2-the-way-forward/>

63. <https://cndblog.org/2024/03/item-3-high-level-segment-thursday-afternoon/>

64. <https://cndblog.org/2024/03/plenary-items-10-11-and-12/>

65. For more information, see: <https://hojadecoca.cancilleria.gob.bo/>

66. <https://cndblog.org/2024/03/round-table-2-the-way-forward/>

67. <https://cndblog.org/2024/03/item-3-high-level-segment-thursday-evening/>

68. For more information, see: International Drug Policy Consortium (July 2022), The 65th session of the Commission on Narcotic Drugs: Report of proceedings, <https://idpc.net/publications/2022/07/the-65th-session-of-the-commission-on-narcotic-drugs-report-of-proceedings>

69. <https://cndblog.org/2024/03/item-3-high-level-segment-friday-afternoon/>

70. Please note that ‘progressive’ resolutions generally relate to issues related to access to harm reduction, treatment and other health services, access to controlled medicines, alternative development, civil society participation, alternatives to conviction and punishment, and women. ‘Conservative’ resolutions generally relate to issues such as organised crime, supply reduction, prevention and scheduling. ‘Neutral’ resolutions tend to focus on data collection and information sharing, the budget for UNODC or the UNODC, cooperation with the scientific community, and modalities resolutions for high-level events. The raw database/analysis is available here: <https://www.dropbox.com/s/o6rjf3006ss79gt/Analysis%20of%20CND%20resolutions%202010-2023.xlsx?dl=0>

71. See operational paragraph 4 of: Commission on Narcotic Drugs (2023), Promoting alternative development as a development-oriented drug control strategy that is sustainable and inclusive, [https://www.unodc.org/documents/commissions/CND/Drug\\_Resolutions/2020-2029/2023/Res\\_66\\_4\\_2305857E.pdf](https://www.unodc.org/documents/commissions/CND/Drug_Resolutions/2020-2029/2023/Res_66_4_2305857E.pdf)

72. This included Algeria, Bolivia, Iran, Namibia, Nicaragua, Russia, South Africa, Syria and Zimbabwe

73. <https://press.un.org/en/2023/ga12542.doc.htm>

74. Preamble, Human Rights Council (April 2023), Resolution 52/13. The negative impact of unilateral coercive measures on the enjoyment of human rights, A/HRC/RES/52/13, <https://undocs.org/Home/Mobile?FinalSymbol=A%2FHRC%2FRES%2F52%2F13&Language=E&DeviceType=Desktop&LangRequested=False>. Notably, the resolution was adopted at 33 votes in favour (all from the Global South), 13 against (mostly from Europe and North America) and 1 abstention (Mexico)

75. This issue also came up strongly during UN General Assembly debates on health in October 2023. See: <https://press.un.org/en/2023/ga12542.doc.htm>

76. T Hoen, E. (December 2022), ‘Protecting public health through technology transfer: The unfulfilled promise of the TRIPS Agreement’, Health and Human Rights Journal, 24(2)

77. International Drug Policy Consortium (August 2023), Stuck in the inertia of the past: Report of the 66th session of the Commission on Narcotic Drugs, <https://idpc.net/publications/2023/08/stuck-in-the-inertia-of-the-past-report-of-the-66th-session-of-the-commission-on-narcotic-drugs>

78. Commission on Narcotic Drugs (2012), Resolution 55/7. Promoting measures to prevent drug overdose, in particular opioid overdose, [https://www.unodc.org/documents/commissions/CND/Drug\\_Resolutions/2010-2019/2012/CND\\_Res\\_55-7.pdf](https://www.unodc.org/documents/commissions/CND/Drug_Resolutions/2010-2019/2012/CND_Res_55-7.pdf)

79. Australia, Austria, Belgium, Canada, Colombia, Czechia, Finland, Germany, the Netherlands, New Zealand, Norway, Portugal, Spain, Switzerland, the UK and the USA

80. In addition to China and Russia, this included Egypt, the Holy See, Iran, Pakistan, Saudi Arabia, Singapore and Venezuela

81. Operational paragraph 3 because of the inclusion of ‘harm reduction’

82. Namely, preliminary paragraph 15, and operational paragraphs 1, 2, 6, 7 and 8

83. It should be noted here that voting on CND resolutions was a common occurrence in the first decades of the CND. CND resolutions only started being adopted by consensus in the mid-1980s

84. Available here: <https://www.ohchr.org/sites/default/files/Documents/HRBodies/CHR/RoP.pdf>

85. Algeria, Argentina, Australia, Austria, Bangladesh, Belgium, Bolivia, Brazil, Canada, Chile, China, Colombia, Dominican Republic, France, Finland, Ghana, Guatemala, Hungary, India, Indonesia, Italy, Japan, Lithuania, Malta, Mexico, Morocco, Netherlands, Peru, Poland, Portugal, Qatar, Republic of Korea, Russia, Saudi Arabia, Singapore, Slovenia, South Africa, Spain, Switzerland, Thailand, Trinidad and Tobago, UK, United States, Uruguay and Zimbabwe

86. Argentina, Australia, Austria, Belgium, Bolivia, Brazil, Canada, Chile, Colombia, France, Finland, Ghana, Guatemala, Hungary, India, Indonesia, Italy, Japan, Lithuania, Malta, Mexico, Morocco, Netherlands, Peru, Poland, Portugal, Republic of Korea, Saudi Arabia, Singapore, Slovenia, South Africa, Spain, Switzerland, Thailand, Trinidad and Tobago, UK, United States and Uruguay

87. China and Russia

88. Algeria, Armenia, Bangladesh, Dominican Republic, Iran, Zimbabwe

89. A summary of the dialogue is available here: <https://cndblog.org/2024/03/10237/>

90. A summary of the dialogue is available here: <https://cndblog.org/2024/03/informal-civil-society-dialogue-with-the-incb-president-2/>

91. A summary of the dialogue is available here: <https://cndblog.org/2024/03/informal-civil-society-dialogue-with-unodc-executive-director-2/>

92. A summary of the dialogue is available here: <https://cndblog.org/2024/03/informal-civil-society-dialogue-with-the-cnd-chair-2/>

93. A summary of the dialogue is available here: <https://cndblog.org/2024/03/informal-civil-society-dialogue-with-ohchr-unaid-undp/>

94. For more information, see: <https://idpc.net/events/2024/03/human-rights-side-events-series-CND>

95. Please note that 'progressive' side events generally relate to issues related to access to harm reduction, treatment and other health services, access to controlled medicines, alternative development, civil society participation, decriminalisation, legal regulation and women/intersectionality,

- and from governments or NGOs known to have a health and human rights approach to drugs. 'Status quo' side events generally relate to issues such as organised crime, supply reduction, prevention, and scheduling, as well as anti-legal regulation or decriminalisation, and from governments or NGOs known to be anti-reform and pro-prohibition. 'Neutral' side events tend to focus on data collection and information sharing, or from a stance that is difficult to assess



**The International Drug Policy Consortium (IDPC)**

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Through a considered reading of the Plenary proceedings and the negotiations at the Committee of the Whole at the 67<sup>th</sup> session of the UN Commission on Narcotic Drugs, this report identifies the fault lines that built pressure on the UN drug control system for years, and finally brought it to the brink.

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