















### **STATEMENT**

**Recalling that**, in 2005, the leaders of 121 National Red Cross and Red Crescent Societies across the world agreed to the Rome Consensus for a Humanitarian Drug Policy,1 which articulated principles for humane and effective drug policies that prioritize individual and public health. The Rome Consensus 2.0 declaration seeks to build upon the first Consensus – broadening it out for new signatories from around the world and providing a blueprint for policy and best practices for the coming decade.

**Acknowledging that** illicit drug consumption and related problems have increased since 1961 Single Convention on Narcotic Drugs was adopted:

- An estimated 271 million people, or 5.5 percent of the global population aged 15–64, are using drugs prohibited under the international treaties.
- Of these individuals, an estimated 35 million (almost 13%) suffer from so-called 'drug use disorders', affecting their mental and physical health, economic productivity, and family and community.
- An estimated 1.4 million people who inject drugs are living with HIV, and 5.6 million are living with viral hepatitis, undermining the global health responses to these diseases.
- Around 585,000 people are estimated to have died as a result of drug use in 2017, and the rates of overdose deaths continue to rise in North America, Europe, and elsewhere.
- There are more than 10 million people in prison globally, around 1 in 5 of whom are serving sentences principally tied to drug law offenses, while around one-third of people in prison are estimated to have used drugs at least once while incarcerated.
- Conversely, an estimated 5.5 billion people (75% of the world population) have limited or no access to effective medicines containing narcotic drugs, such as codeine or morphine, for pain relief and other medical treatment.

**Recognizing that** truly effective health-based drug policies should encompass adequate provision of evidence-based prevention, practical harm reduction measures, and accessible treatment and rehabilitation services. Mechanisms to make these services available should be prioritized, including as alternatives to conviction or punishment for drug-related offenses. At the same time, the health-based approach also entails ensuring access to essential medicines for pain relief and other needs.

**Recognizing that**, despite the wealth of evidence, guidance, and international commitments to pursue evidence-based policy and practice, the global coverage of these services remains far short of the needs, and many strategies and programs are delivered inconsistently or contrary to the evidence. We know what can be done to prevent and treat problems associated with drug use, but this is a crisis of political will, funding, and capacity.

**Welcoming that**, in 2018, all 31 United Nations agencies agreed, for the first time ever, a 'common position supporting the implementation of the international drug control policy through effective inter-agency collaboration', which called for a refocusing of policies and programs away from punishment and repression, and towards delivery of an effective health and social support.

**Recalling that** the preambles of all three drug control treaties state their concern for 'the health and welfare of mankind' and that the Outcome Document of the thirtieth Special Session of the UN General Assembly (UNGASS 2016) calls on governments to place individuals, families, communities, and society at the center of their drug policies, and to implement a range of measures to improve health and social outcomes for their citizens.

## R O M E C O N S E N S U S . C O M



**Welcoming** the 2030 Agenda for Sustainable Development and the Sustainable Development Goals as a shared blueprint for global peace and prosperity, and recognize this unique opportunity to establish a new commitment to humane and effective drug policies that contribute to these global aims and are free from ideology, force, stigmatization and discrimination.

**Asserting that** it is essential that we treat people who use drugs as valued and respected citizens, and with empathy and support. This is fundamental to a humane and effective policy that is free from stigma and discrimination. Policy development, implementation, and evaluation are enhanced and informed through involving the affected populations, including people who use (or used) drugs and people living with HIV and hepatitis.

## Through this Rome Consensus 2.0 we, the undersigned, call upon national governments and international and regional bodies to:

In their response to drug use in their societies:

- Reflect that the overriding purpose of drug policies and strategies should be to maximize the health and welfare of humankind.
- Specifically, frame drug policy objectives in terms of improving health, increasing security, achieving development, and protecting human rights.
- Eliminate all legal and social barriers that are hampering prevention and access to mental health services for people who use drugs.
- Eliminate all legal, regulatory, political, and social barriers that hamper access to essential controlled medicines for pain relief and other medical needs around the world.
- Accept that citizens should not be stigmatized, marginalized, or receive punishments, simply for possessing or consuming controlled drugs, and accept that not all people who use drugs are in need of intervention or treatment.
- Implement comprehensive mechanisms to deflect and divert people arrested for minor, non-violent drug-related offenses to appropriate prevention and mental health services, where needed.
- Provide young and at-risk people with comprehensive, evidence-based, and factual information on the properties and risks of consuming drugs, free from ideology and misinformation.
- Ensure that the national policy response to drug use does not violate human rights, including those relating to health, freedom from torture or degrading treatment, fair trials, and the rights of the child.
- Invest more on effective prevention, harm reduction, treatment, and recovery services, and to end the criminalization of people who use drugs, to achieve better social, economic, and fiscal results.

### In their response to people who seek help:

- Recognize that these people are struggling with emotional, social and economic problems, and have the potential to overcome these problems and make a positive community and social contribution.
- Provide comprehensive evidence-based mental health and harm reduction services that protect the health of people who use drugs.
- Promote recovery and rehabilitation through giving people who use drugs the motivation and strength to improve their lives, and practical help towards social reintegration, where needed.
- Ensure that police forces and prosecution authorities implement programs to 'deflect' people who use drugs away from punishment and into prevention and health services.
- Ensure that prison authorities provide at least the equivalent quality and coverage of prevention, harm reduction, treatment, rehabilitation, care, aftercare, social and mental health services in closed settings.

## R O M E C O N S E N S U S . C O M



The international community has made numerous commitments and declarations on how it will respond to drugs, but still lacks a robust and accountable system to ensure their implementation. Professional bodies, civil society, and affected communities all have a pivotal role to play in the response to drugs. Success will only be achieved if we advocate at all levels to ensure more investments and public awareness to implement more humane and effective drug policies.

Working together, we can reduce and overcome the avoidable and unacceptable health and social harms associated with the world drug situation. We, our governments, and our allies already have at our fingertips the tools, guidance, and evidence we need to conquer these challenges. These include, inter alia, the normative guidance from the United Nations system on prevention, treatment, harm reduction, overdose management, deflection from arrest, human rights, and ensuring access to medicines.

This can be the decade when we collectively rise to this challenge.

### IF YOU AGREE WITH THIS DECLARATION YOU CAN SIGN ON:

## R O M E C O N S E N S U S . C O M













# **FOUNDING PARTNERS**

### THE INTERNATIONAL FEDERATION OF RED CROSS/ RED CRESCENT PARTNERSHIP ON SUBSTANCE ABUSE

# RED CROSS AND RED CRESCENT PARTNERSHIP ON SUBSTANCE ABUSE

+CIFRC



Is a tripartite task force between the International Federation of Red Cross and Red Crescent Societies (IFRC), the Italian Red Cross and Villa Maraini rehab center, founded in 2012 in response to the increase of substance abuse and related problems globally. The mission is to leverage the knowledge and long experience of Villa Maraini Foundation in treating drug addicts and raise awareness on humanitarian drug policy strategy among the Red Cross and Red Crescent National Societies, NGOs and public authorities. The Villa Maraini treated more than 40 thousands people with addiction in almost 45 years, and has been the first drug center worldwide that started to administer naloxone on the street by non medical staff, saving more than 2.500 people from overdose (since 1992). In the last decade has increased its advocacy role and become a reference training center not just for the Red Cross/Red Crescent Movement but also for many organizations active in the field of substance abuse.

Website: www.villamaraini.it | Facebook:@fondazionevillamaraini | Twitter: @VillaMaraini

### **KNOWMAD INSTITUT**

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The European Institute for Multidisciplinary Human Rights and Science Studies – Knowmad Institut – is an independent think & do tank based in Germany. Recognized as a social interest company for the promotion of science and research, the vision is to contribute to the promotion and fulfillment of the United Nations Sustainable Development Goals (SDG's), and thus to contribute to the construction of a sustainable, just and multipolar world. Linking civil society, academia, states, and the private sector.

Analyzing reliable information in a comprehensive and multidisciplinary approach that facilitates knowledge management, to educate and disseminate bold and innovative proposals that promote common solutions to global problems. Building a solid evidence base allows us to better support decision makers, opinion leaders, and pressure and advocacy groups to explore and promote initiatives based on human dignity, facts and science.

Website: knowmadinstitut.org | FB, IG, TW: @knowmadinstitut

### **C4 RECOVERY FOUNDATION**

Is a Public Charity dedicated to the premise that society's path to achieving improved access, quality, and integrity of behavioral health and substance use disorder treatment is through education, shared knowledge, and rigorous research.



#### Website: https://www.c4recoveryfoundation.org/ Facebook: @C4RecoveryFoundation Twitter: @C4recovery



**THE LEVENSON FOUNDATION** 

Is a privately-funded non-profit chartered in 2012 to measurably impact some of the most traumatized and disadvantaged populations on Earth. Through the lens of mental health, we work at all levels from policy to direct care provision seeking to enhance access to relevant services by those who struggle with awide range of complex challenges, including addictive illnesses, mental health issues, PTSD, trauma and concomitant issues.

Website: http://www.levensonfoundation.org/ Facebook: @thelevensonfoundation Twitter: @LevensonFoundtn

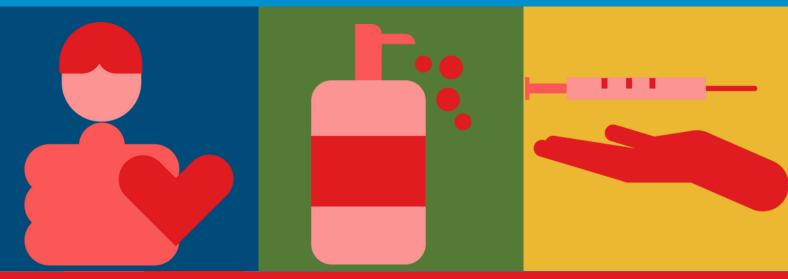
### **PTACC - THE POLICE, TREATMENT, AND COMMUNITY COLLABORATIVE**

Is an alliance of practitioners and organizations in law enforcement, drug treatment, mental health, housing, community, advocacy, recovery, research, social services (inclusive of families and children), and public policy whose mission is to strategically widen treatment, housing, and social service options available for vulnerable populations at the point of encounter with law enforcement. These practices, known as "deflection" and "pre-arrest diversion", move people towards community-based solutions while simultaneously moving people away from the criminal justice system in order to address the underlying behavioral health issues that led to contact with law enforcement in the first place. PTACC promotes equity with regard to race, gender, income, and geography in the application of deflection and pre-arrest diversion. PTACC is the recognized knowledge leader for deflection and pre-arrest diversion, and also provides a voice for the entire field of deflection and pre-arrest diversion.



Website: https://ptaccollaborative.org/ Twitter: @PTAC\_Collab





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