

## **Rome Consensus Presentation – European Cooperation Meeting**

---

**Croatia 22 – 27 April 2008**

**Good afternoon, I'm Jane Francis from the Rome Consensus for a Humanitarian Drug Policy.**

**I would like to start by thanking the ECC for giving us the opportunity to be here with you today and to be able to share our project with you. Our thanks of course also go to the Croatian Red Cross, for making the organisation of this meeting such a success.**

We have been invited here to give you an introduction to the Rome Consensus, which I think is new to many of you.

What we would like to do in this session is to present you with a very short outline of why the Rome Consensus was developed and what it aims to achieve. We are going to keep this as brief as possible so that we can open the floor to discussion as soon as possible. We want to hear your feedback, experiences, projects and ideas on the drug issue too.

The Rome Consensus so far mobilises 107 National Societies to promote, develop and implement a humanitarian drug policy.

But before we go into the details of the Rome Consensus, I think it's worth underlining why the drugs issue is important, and why the Red Cross – Red Crescent movement is involved in the fight against drug related suffering.

Drugs represent a long term and ever increasing humanitarian emergency. They create human suffering; they affect vulnerable people and they cause stigmatisation and discrimination.

This is why 107 National Societies are already involved in the Rome Consensus and other drug related projects.

The power of humanity of the Movement gives you a unique perspective with which to help drug users and communities affected by drugs. These people are suffering not only from drug use, but from stigmatization, discrimination and isolation.

But the Movement's involvement in the drug issue did not begin with the Rome Consensus – you have been engaged in this for over eighty years, through publications, declarations of engagement and work on the ground.

## ***So how did the Rome Consensus come about?***

In 2004 the Senlis Council and the Federation developed a strategic partnership to address drug related suffering.

The Senlis Council, a drug policy think tank recognized that the Red Cross –Red Crescent movement was one of the few organizations addressing the drug problem in a humanitarian way and that this approach can provide inspiration and guidance to civil society, governments and policy makers the world over.

In 2005 the Senlis Council and the Italian Red Cross organized a conference to discuss how to bridge the gap between the realities of drug related suffering, and policy.

The Rome Consensus declaration for a Humanitarian Drug Policy was first signed at this conference. Since then the Rome Consensus has hosted 5 more international meetings in the Americas, Asia, Africa and Europe. From these meetings, new declarations have been developed as well as a set of guidelines for the movement to use as inspiration for projects and action.

In April 2007, The Rome Consensus was also presented in Geneva to the Health, Youth and Development Commission and in May 2007 to the Governing Board of the International Federation of Red Cross and Red Crescent Societies.

**So now you know where we come from, you may be wondering what we mean by a humanitarian drug policy?**

I will read you an article which is in each of the declarations and which we think captures the essence of humanitarian drug policy.

*Encouraging* the formulation and implementation of a humanitarian drug policy that saves lives and alleviates human suffering: a policy based on reason and compassion that generates action, free from ideology, force, stigmatization and discrimination,

This may seem to you like a very logical way to approach the drug issue, but sadly it is often not the way in which many governments and policy makers approach it.

The policies developed to tackle the drug issue too often contribute to making the situation worse. Everywhere in the world, even in countries that uphold human rights, drug users are still often denied the most basic rights. They are humiliated, discriminated against and treated as criminals rather than as people who need help.

Criminalizing drug users has *no* rational basis, it simply creates suffering. And what's more, it doesn't work: Drug use, production and trafficking are all steadily rising.

But there are effective solutions: A range of public health measures are available to fight drug related suffering, but sadly these are often not applied. This is not a problem of scientific knowledge or even of funding - all over the world, ideological prejudice continues to dominate the debate around drugs.

In “Spreading the light of Science”, a document that I’m sure many of you have read, regarding injecting drug use, the International Federation calls on the international community to be “guided by the light of science, not by the darkness of ignorance and fear”.

What science has shown us is that drug addiction is an illness that can and must be treated. Methadone substitution, for example, is a very cheap and effective way of treating heroin addiction, but in many countries it is not used because drugs are seen as a criminal issue not a health issue.

As Dr Zovko underlined earlier, HIV represents one of the world’s biggest health challenges. The link between HIV and drug use is of course part of this challenge.

Drug use accounts for 30% of new HIV infections worldwide. The sad fact is that this could be avoided through education, methadone treatment and other relatively simple measures such as clean needle

distribution. The benefits of these programmes are reflected in the levels of HIV within the drug using communities in Europe. For example in the UK where methadone and clean needles have been available for over 20 years, the percentage of drug users who are HIV positive is less than 5%. In Russia, where these are not available, this percentage is over 80%.

It is because of statistics like this that the 107 National Societies which are party to the Rome Consensus have decided to act at the policy level. They have decided to mobilize their power of humanity to fight drug-related suffering on all fronts, and to advocate for treating drug users with humanity and compassion.

This may sound very grand and very distant from your work, but simple measures can also be part of the equation. You may not be able to become involved in drug treatment or addiction problems, but you can play an all important role in raising awareness on drugs with peer to peer education programmes and outreach in your own work and life. People listen to and respect the voice of the Red Cross. By bringing drugs into the open and discussing them freely you can help to save lives.

To give you an example of how the taboo surrounding drugs creates unnecessary suffering, yesterday one of your colleagues told me a sad story she read in a UK newspaper recently. A woman's daughter came

home from a party feeling ill because she had taken drugs. The mother did not know what to do, so she put the girl to bed. She was too scared to call an ambulance for fear of social judgement and even prosecution. Later that night the girl died.

This story is telling in so many ways

**Firstly** because it underlines the lack of information about drugs, their effects and how to deal with a drug emergency;

**Secondly** it points to the stigmatisation surrounding drug use;

**Thirdly**, the policy of criminalising drug users stopped the mother from seeking medical help, which would have been the right thing to do.

This is just one example of the negative impact of current approach to drugs. The lack of an open debate, stigmatisation and the refusal to recognise that drugs are a public health issue, are creating a humanitarian crisis.

Since the Rome Consensus aims to be a forum for discussion and to encourage the exchange of ideas and practices, we hope that we can be of use to you by providing information on drugs, policies and what other National Societies are doing. We hope to provide National Societies with a flexible framework to help develop their understanding of the drugs issue and make their voice heard, through big or small projects.

We are now going to open the floor to discussion to hear your thoughts on the information I have just given you and your thoughts and questions about the Rome Consensus.

**Thank you**