

WINNIE BYANYIMA

UNAIDS | 2024

UNAIDS EXECUTIVE DIRECTOR REMARKS

VIENNA, 14 MARCH 2024, STATEMENT AT THE 67TH SESSION OF
THE COMMISSION ON NARCOTIC DRUGS

H.E. Ambassador Philbert Johnson, Ambassador of Ghana and Chair of the Chair of the 67th session of the Commission on Narcotic Drugs,

Excellencies, UN colleagues and members of Civil Society,

It is an honour to be with you.

Gathered here are leaders whose decisions can save and transform lives, tackle social exclusion, and protect public health for everyone.

As leaders you can deliver on the shared pledge to end AIDS as a public health threat, by 2030—if all people can secure the HIV prevention, testing, treatment and care services they need. To end AIDS we need to ensure that no one is excluded.

But today, too often, laws and policies for people who use drugs exacerbate exclusion.

People who use drugs are criminalized in 145 countries—and can face the death penalty in 35 countries. The stigma, and outright fear, that this generates is driving people away from vital health services—driving away the people who most need those services.

Only 1% of people who inject drugs have access to the recommended harm reduction services.

What are the consequences?

People who use drugs are seven times more likely to acquire HIV than other adults.

And women who use drugs are almost twice as likely to acquire HIV than men who use drugs.

The status quo—punishing people who use drugs—is causing catastrophic harm. It is further marginalizing the most marginalized members of our society, and obstructing the world from achieving our shared goals to end AIDS and protect the health of everyone.

This is not fate, we can change it.

Indeed we know, from the evidence, how to change it.

UNAIDS supports governments and communities to advance approaches to HIV that have been proven to work.

In 2012, Estonia was number 1 for new HIV cases attributable to injecting drug use in Europe. In 2021, there were just five new infections related to drug use. How did they do it? They did it by decriminalizing possession of drugs for personal use, focusing on public health, investing in harm reduction, and putting communities at the centre.

Ghana recently removed criminal penalties for possession for personal use, and is already seeing the benefits for public health.

The evidence is clear—stigmatization kills and perpetuates the AIDS pandemic; harm reduction and respect for every person's human rights save lives and help countries advance along the path that will end AIDS.

What would an evidence-based, effective, harm reducing, policy framework be for drug policy include?

1. decriminalize possession of drugs for personal use;
2. invest in HIV prevention responses, including harm reduction, led by people who use drugs;
3. include people who use drugs in policy making that affects them; like our friends at INPUD, who are represented here today.

This is not radical. These approaches are all in line with the Political Declaration on HIV/AIDS; with the Global AIDS Strategy; with the Sustainable Development Goals; and with recommendations made by the High Commissioner for Human Rights.

The excellent work by communities and countries leading the way has proven them.

The question is: is the world—are we, all of us here—bold enough to choose evidence over prejudice, inclusion over exclusion, laws that help over laws that harm.

Shaping policies to ensure that no one is obstructed from access to vital services is not a favour to one group. Protecting the rights of everyone is how we protect the health of everyone.

The stakes are too high for us not to be courageous.

Thank you.

