



CITYWIDE DRUGS CRISIS CAMPAIGN

Initial response to Recommendations from the Citizens' Assembly on Drugs

The Citizens' Assembly on Drugs concluded in October 2023 and its final report was due to be presented to government by the end of 2023. The final statement issued by the CA in October sets out the recommendations that will be included in its report and which will be considered by an Oireachtas Committee, which will then make final recommendations for approval by government for implementation.

In the introduction to our submission to the Citizens' Assembly, Citywide noted our history in Ireland of using moral judgement as a basis for shaping policy on key social issues, leading to blame, shame, stigma, and ultimately criminalisation and how we know that the negative impact of these punitive policies falls most on people experiencing poverty and/or on minority groups. In recent years, the work of Citizens' Assemblies has played a key role in helping us as a society to move away from this type of moral judgement and the CA on Drugs provides us with an opportunity to do the same in relation to our policy on drugs.

So how has it done in relation to the 4 key actions set out in the Citywide submission?

KEY AREAS FOR ACTION:

1. Re-establish a Combat Poverty Agency independent of government and empowered to hold government to account.

'The relationship between poverty and drug-related harms is well-established. But it's not enough just to recognise this, we need to take action on it, with a national anti-poverty campaign that engages communities & underpins our approach to drugs.' *Citywide Submission*

In setting the context for a debate on Irish drugs policy, it is essential to consider how the relationship between poverty and drug-related harms has impacted on our response to drugs over the last 30 years and what we have learnt from the experience of those years. The format of the Assembly did not allow time for any in-depth discussion on these crucial underlying issues and the recommendations that are made in relation to the broader context for drug policy reflect this, in that they are very general.

Recommendation 8 calls for drugs to be prioritised as a policy priority as part of an overall socio-economic strategy and **Recommendation 13** calls for drug policy to prioritise the needs of vulnerable and marginalised groups and disadvantaged communities. There are a number of recommendations (**1, 2, 6, 7 and 9**) that call for an integrated and systemic

approach to drugs policy and these are also relevant to addressing the underlying causes of drug-related harms. There is an opportunity now for the Oireachtas Committee to consider these recommendations and to develop more specific actions to implement them, e.g. the setting up of a statutory Combat Poverty Agency. The recent statement to the UN General Assembly by the UN High Commissioner for Human Rights on the world drugs problem¹, which came out too late to be considered by the CA, can also be of assistance to the Oireachtas Committee in looking at how we can take on board the importance of an explicit human rights context in implementing these recommendations. The statement calls on UN member states to “Address the underlying socioeconomic factors that increase the risks of using drugs or that lead to engaging in the drugs trade, by tackling social inequalities, promoting social justice and advancing human rights.”

2. End criminalisation of people who use drugs.

‘As long as we criminalise people who use drugs, we are causing them additional harm and reducing the effectiveness of any initiatives or services we put in place. We cannot respond effectively to other issues while we continue to do this.’ *Citywide Submission*

The final press release from the CA highlights that the recommendations agreed by the Assembly include decriminalisation of possession of drugs for personal use and **Recommendation 5** calls for a comprehensive health-led response to possession for personal use. While the specific wording of the recommendation has been a cause of confusion, as the actual word decriminalisation is not used, the CA secretariat confirmed at the final meeting that this health-led approach includes decriminalisation and the press release talks about the recommendations including “significant changes to laws governing penalties for possession of drugs for personal use, effectively amounting to decriminalisation.”

Whatever the reason for not using the word decriminalisation in the recommendation, it is clear the CA has recommended that we decriminalise possession of drugs for personal use and that the debate needs to move on now to how we are going to implement this recommendation. The decision about the form decriminalisation will take and how it will work in practice will now need to be considered by the Oireachtas Committee, which will then make a specific recommendation to government.

Our CW submission calls for an end to criminalisation of people who use drugs, full stop i.e. decriminalisation should not be discretionary, time-limited, or conditional. Criminalisation and/or the threat of criminalisation will only be brought to an end by removing the offence

¹ Human Rights Challenges in addressing and countering all aspects of the world drug problem: Report of the Office of the UN High Commissioner for Human Rights, August 2023

of possession of drugs for personal use from the statute books and we would be looking to the Oireachtas Committee to recommend this approach.

While ending the criminalisation of people who use drugs is essential, it is also essential that the policy change is implemented hand in hand with other key actions, including adequate and sustainable funding for Community Drug Projects and related state services. There is a strong focus by the CA on the need for more funding, a focus that is badly needed, as communities have been making this case for years and have not been listened to.

Recommendations 16 and 17 highlight the need for significant additional funding to be allocated on a multi-annual basis to services across statutory, community and voluntary sectors and **Recommendation 18** calls for an examination of the potential of “novel funding sources” to support increased drug services in the statutory, community and voluntary sectors. **Recommendations 3 and 4** call for more enhanced services within criminal justice and criminal settings and **Recommendation 25** calls for enhanced investment in community-based youth work and community development projects as part of a diversion approach for young people involved in the drugs trade.

This set of recommendations on the urgent need for more investment in services will provide the Oireachtas Committee with an opportunity to escalate this call to the highest levels of government.

3. Invest in an independent Community Development programme to support and underpin a central role for community voices in decision-making structures.

In our Submission, we welcomed the initial focus of the CA on the crucial importance of having community voices at the heart of our response to drugs - people who use drugs, their families, and the wider community. Unfortunately this initial focus was not maintained in later meetings and the CA did not get the opportunity to hear about the crucial importance of the community development approach that has been at the heart of our NDS since 1996. There was no opportunity to reflect on how and why this unique approach developed in Ireland and to discuss what we can learn from the powerful history of community engagement at every level of the NDS.

Recommendations 12 and 15 call for effective stakeholder involvement in a whole of society approach to drug-related issues and **Recommendation 14** states that drugs policy design should be informed by people who use drugs as well as family members, with provision of supports to enable this involvement. The specific reference to people who use drugs and family members as essential stakeholders is very positive, but it is notable that there is absolutely no reference to engagement with the wider community, which has been a

core principle of the NDS since 1996. We have highlighted previously how the text included in the Mid-Term Review of the NDS in 2021 aimed to fundamentally change the nature of our approach to drug policy in Ireland by removing the community as a stakeholder, something that has never been discussed or agreed in any national drugs policy forum. There is now an opportunity for the Oireachtas Committee to ensure that the importance of community as a core stakeholder is reflected in the implementation of the CA recommendations.

Recommendation 26 talks about having a focus on building resilient and sustainable communities through local partnerships in both urban and rural settings and the CA recognises the need for providing support to communities to engage in this process. To provide this support we need a strong and vibrant community development programme across all parts of the country and with a particular focus on the most marginalised communities. There is an opportunity now for the Oireachtas Committee to consider how independent community development supports can be put in place as a core element of implementing future drug policy and also, crucially, how these supports must be inclusive of all minority communities .

Even though there were powerful inputs at the CA by members of the Traveller community, there is no specific reference to Travellers in the recommendations. There was no opportunity for members to hear from other ethnic minority and migrant communities, or from our LGBTI+ and Trans communities, and none of these communities are referenced in the recommendations either. It is essential that our minority communities are fully included and engaged in our drugs policy and this will need to be addressed by the Oireachtas Committee to ensure that its recommendations are more inclusive. The Oireachtas Committee should also consider a specific action to support and facilitate an independent voice for young people so they can have open and honest discussions about the reality of drugs in their day-to-day lives and in their communities. Without this, our greatest potential resource for tackling the drug-related harms that affect communities across the country is being left on the sidelines.

It is striking that **Recommendation 26** makes no reference whatsoever to the Drug and Alcohol Task Forces, considering that the role outlined in the recommendation is exactly what the DATFs were put in place to do. While it is clear in recent years that the Dept of Health and HSE have been limiting the DATFs in carrying out this role, consideration of how Recommendation 26 can be implemented will give the Oireachtas Committee an opportunity to call for the restoration of the community based partnership approach that underlies the DATF model and to ensure support for DATFs in delivering this model. It is of particular importance at this time that the Task Force model is highlighted by the Oireachtas for support, as the recent proposals set out by the Dept and the HSE for the DATF in Dublin's North Inner City effectively reduce the role of the DATF to being a subcommittee of the HSE.

4. Open up a discussion about the impacts on our communities of the current legal framework under which drugs are controlled and whether it is fit for purpose.

As with drug use, harms related to the drug trade impact most severely in poor and minority communities and we have seen how the levels of fear generated as a result of intimidation & violence are preventing the normal criminal justice process from working.

This is a fundamental policy issue which has major implications in relation to drug-related harms for people who use drugs, their families, and the wider community but despite its significance it was addressed in a very limited way during the CA meetings and there was no in-depth consideration of the wider community impact of current policies.

Recommendation 24 refers to continuing to prioritise the objective of reducing illicit drugs supply and associated structures at international, national & local level and

Recommendation 27 refers to prioritising the objective of tackling the source and impact of drug-related violence and intimidation.

There was significant confusion at the final CA meeting around the vote on the regulation and legalisation aspects of policy, and even though the vote at the CA showed that there is a significant level of support for at least a discussion of the issues, no recommendation was made for consideration by the Oireachtas Committee in this area of policy. Given the lack of in-depth discussion on these issues at the CA, it would be useful for the Oireachtas Committee, when it is considering the implementation of Recommendations 24 and 27, to look at the extensive work relating to this that has already carried out by the Justice Committee, as set out in its report of December 2022.

The need for strong and effective political leadership to prioritise the drugs issue emerges strongly from **Recommendations 6 to 11**. **Recommendation 10** calls for a new iteration of the NDS to be published as a matter of urgency and **Recommendation 11** calls for government to assign responsibility at the highest level to provide accountability for implementation of the revised Strategy. Our experience over the years has shown us how important this high-level leadership is - A Cabinet Sub-Committee and an Office of the Minister for Drugs, with a sole focus on the National Drugs Strategy and not multiple responsibilities. It will be a crucial priority for the Oireachtas Committee to gain government and cross-party support for reinstating meaningful oversight structures that will have real power to hold stakeholders to account, so that there can be effective implementation of the actions that are adopted by government at the conclusion of this process.