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United Nations in Cambodia

**UN Country Team
Position on Drug Dependence Treatment and
Support to the Royal Government of Cambodia
16 February 2010**

1. Drug dependence is a preventable and treatable disease, and effective prevention and treatment interventions are available. The best results are achieved when a comprehensive multidisciplinary approach, which includes diversified pharmacological and psychosocial interventions, is available to respond to different needs.
2. The UN in Cambodia Country Team's (UNCT) position and action on drug dependence treatment is guided by the UNODC-WHO Principles of Drug Dependence Treatment, published in March 2008. These Principles have been used in discussions with governments worldwide since their release.
3. Principles 3 and 4 are particularly relevant to the current situation in Cambodia. **Principle 3:** Evidence-informed drug dependence treatment. "Evidence-based good practice and accumulated scientific knowledge on the nature of drug dependence should guide interventions and investments in drug dependence treatment. The high quality of standards required for approval of pharmacological or psychosocial interventions in all the other medical disciplines should be applied to the field of drug dependence".
4. **Principle 4:** Drug dependence treatment, human rights and patient dignity. "Drug dependence treatment services should comply with human rights obligations and recognize the inherent dignity of all individuals. This includes responding to the right to enjoy the highest attainable standard of health and well-being, and ensuring non-discrimination". Among the components in that principle, we would like to highlight two:
 - a. As is the case with any other medical procedure, in general conditions drug dependence treatment, be it psychosocial or pharmacological, should not be forced on patients. Only in exceptional crisis situations of high risk to self or others should compulsory treatment be mandated for specific conditions and periods of time as specified by the law.
 - b. When the use and possession of drugs results in state imposed penal sanctions, the option of treatment is presented to the patient/offender as an alternative to imprisonment or other penal sanction. The choice lies with the patient/offender.
5. **Principle 5:** Targeting special subgroups and conditions. In line with the principles, a targeted and differentiated approach is recommended when addressing the specific needs of subpopulations such as children, youth and women.
6. In March 2009 UNODC, jointly with WHO, launched a Joint Programme on Drug Dependence Treatment and Care with a vision of effective and humane treatment for all people with drug-related problems – nothing less than would be expected for any other disease.
7. The UNODC/WHO Joint Programme promotes policies that strike the right balance between the reduction of drug supply and drug demand, and incorporates evidence-based drug prevention and dependence treatment. It promotes services that provide a recovery-oriented continuum of care, matching the needs of dependent drug users in all social, motivational and clinical stages.

8. Under the overall umbrella of the Joint Programme, in 2008 UNODC launched a global project, TREATNET. The regional component, which includes Cambodia, started in 2009. The mission of TREATNET in Southeast Asia is to demonstrate effective community-based drug dependence treatment services. This will build on prior UNODC community mobilisation efforts and serve as the basis for the larger UN coordinated support expected to be provided through a proposal currently under development.
9. The Royal Government of Cambodia (RGC) has requested that the UNCT support the provision of humanitarian/health assistance to compulsory treatment centres, to which the team has agreed. Provision of such assistance needs to be matched by a clear commitment on behalf of the RGC to abide by fundamental human rights provisions as enshrined in the Cambodian constitution and RGC obligations under international law:
 - a. Ensure that there is no illegal and arbitrary detention;
 - b. Ensure respect of minimum standards of humanitarian care and avoidance of inhuman and degrading treatments;
 - c. Ensure that the confinement of people in drug centres can only be voluntary or, if coerced, should be the result of a court decision; and
 - d. Ensure that the centres are subject to judicial oversight and open to other independent monitoring and reporting.
10. The UNCT has been informed of the RGC's intention to scale down the number of compulsory treatment centres to one by 2015. The UNCT welcomes a shift to an evidence- and community-based model in line with a rights-based approach. The UNCT hopes that the reduction in the number of centres will be mirrored by a significant reduction of the number of clients as they progressively become served by a developing community-based drug dependence treatment system with standards of care in line with international best practices and which are linked to the nine interventions of the harm reduction package recommended by the UN – a chance for Cambodia to lead the way for other countries.
11. The UNCT, at the request of the RGC, has agreed to develop a proposal for the provision of community-based drug dependence treatment services in 350 communes in Cambodia.
12. The UNCT is working to develop the proposal, integrating other ongoing and RGC-supported initiatives. These include:
 - a. the community-centred outreach and counselling activities piloted by UNODC's project H83;
 - b. the soon-to-be implemented WHO-supported methadone maintenance pilot;
 - c. the demonstration of community-based services planned through UNODC's TREATNET programme; and
 - d. the development of a strategic plan for mental health and substance use interventions.
13. Once the proposal is finalised and approved by the RGC, a concerted donor response will be required.