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List of acronyms

ACHPR	African Commission on Human and Peoples' Rights
AG	Africa Group of the UN
AU	African Union
BINLEA	US Bureau of International Narcotics and Law Enforcement Affairs
CAP	Common African Position
CEN-SAD	Community of Sahel-Saharan States
CND	Commission on Narcotic Drugs
COMESA	Common Market for Eastern and Southern Africa
CPLP	Community of Portuguese Language Countries
CSO	civil society organisation
EAC	East African Community
ECCAS	Economic Community of Central African States

ECOWAS	Economic Community of West African States
FSI	Fragile State Index
G77	Group of 77 and China
GCDP	Global Commission on Drug Policy
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
ICPAD	International Conference of Parliamentarians Against Drugs
IDU	injecting drug use
IGAD	Intergovernmental Authority on Development
INCB	International Narcotics Control Board
LAS	League of Arab States
NAM	Non-Aligned Movement
NPS	new psychoactive substance
NSP	Needle Syringe Programme
NSVA	non-state violent actor
OHCHR	UN Office of the High Commissioner for Human Rights
OIC	Organisation of Islamic Cooperation
OIF	International Organisation of the Francophonie
OST	opioid substitution therapy
PG	Pompidou Group
PWID	people who inject drugs
PWUD	people who use drugs
RADD	Russian-African Anti-Drug Dialogue
SADC	Southern African Development Community
UMA	Arab Maghreb Union
UN	United Nations
UNDP	United Nations Development Programme
UNGASS	United Nations General Assembly Special Session on Drugs
UNODC	United Nations Office on Drugs and Crime
WACD	West Africa Commission on Drugs
WHO	World Health Organization

Introduction

Globally, support for drug policy reform has grown over the past 10 years. Even as the drug prohibition consensus-keepers in Vienna have voted for yet another 10-year extension to their still unsuccessful 20-year strategy for global drug control at the March 2019 Commission on Narcotic Drugs High Level Review meeting, a reform movement among global member states has been gaining credibility and strength.

The United Nations General Assembly Special Session on Drugs (UNGASS) meeting of member states in New York in 2016 was a soft watershed moment in the history of global drug policy. It was significant in its revelation that the global consensus on drug prohibition that had existed for 55 years now appears to be an openly fractured and vulnerable accord, one that was – and continues to be – in a state of flux.

UNGASS 2016 demonstrated that political space had opened for regional and national reflections on the nature of illicit drugs and countries' domestic responses. By extension, the fragmenting of global drug policy's 'Vienna Consensus' has also provided an opportunity for Africa. The continent could unify and play a leading role in shaping and implementing a new international drug policy approach. Such an approach could be grounded in the human rights, health and social development objectives of its continental Agenda 2030 goal of sustainable development, within the wider context of its Agenda 2063 goal of 'an integrated, prosperous and peaceful Africa'.¹

The purpose of this report is to reflect on the changing drug policy environment in Africa, particularly in the period leading up to and after the seminal UNGASS 2016 meeting of member states. It also examines the politics of continental drug policy prohibition and reform in the context of the growing global movement to embrace drug policy alternatives to the once universal approach of strict prohibition. Observations and recommendations are made regarding incorporating drug policy reform in the context of achieving developmental success with respect to the continental Agenda 2030 and Agenda 2063 goals.

The global order on drugs is collapsing

In March 2016 leaders gathered in New York for the UNGASS meeting on the world drug problem. On the surface, the purpose of this meeting was to discuss interim progress made in the global response to drugs. Specifically, they were to assess whether any progress was being made toward the objectives of the United Nations' (UN) 10-year counternarcotic strategy and plan of action.²

This strategy, grounded in the three international drug conventions and devised by members of the UN's Commission on Narcotic Drugs (CND), was approaching the end of its second decade. Originally launched in 1998, it had been extended an additional 10 years after failing to achieve any of its original objectives. Thus, states were keen to revisit the progress of what was a strongly prohibitionist response ahead of its conclusion, in order to determine what, if anything, needed to be changed in order to achieve the desired results. In this case, these were framed around the aspirational political goal of a 'drug-free world'.

Some African indigenous authorities often were strong advocates of the idea that drug consumption is an international threat

A number of African states are invested in the global 'war on drugs', and recognise – perhaps more than others – the importance of the UNGASS in this regard. After all, drug prohibition has had a long history on the continent. Egypt saw the first modern drug law, a hashish ban, issued in October 1800 by Jacques-François Menou in his capacity as general-in-chief of the French Army of the Orient.³

In addition to the prohibition approaches pursued by colonial regimes, Some African indigenous authorities often were strong and original advocates of the idea that drug consumption is an international threat.